



DELEGATIONS

Burundi
Central African Republic
Chad
Congo, Democratic Republic of the
Eritrea
Ethiopia
African Union
Guinea
Liberia
Nigeria
Rwanda
Somalia
Sudan
Uganda

REGIONAL DELEGATIONS

Abidjan
Dakar
Harare
Nairobi
Niamey
Pretoria
Yaoundé

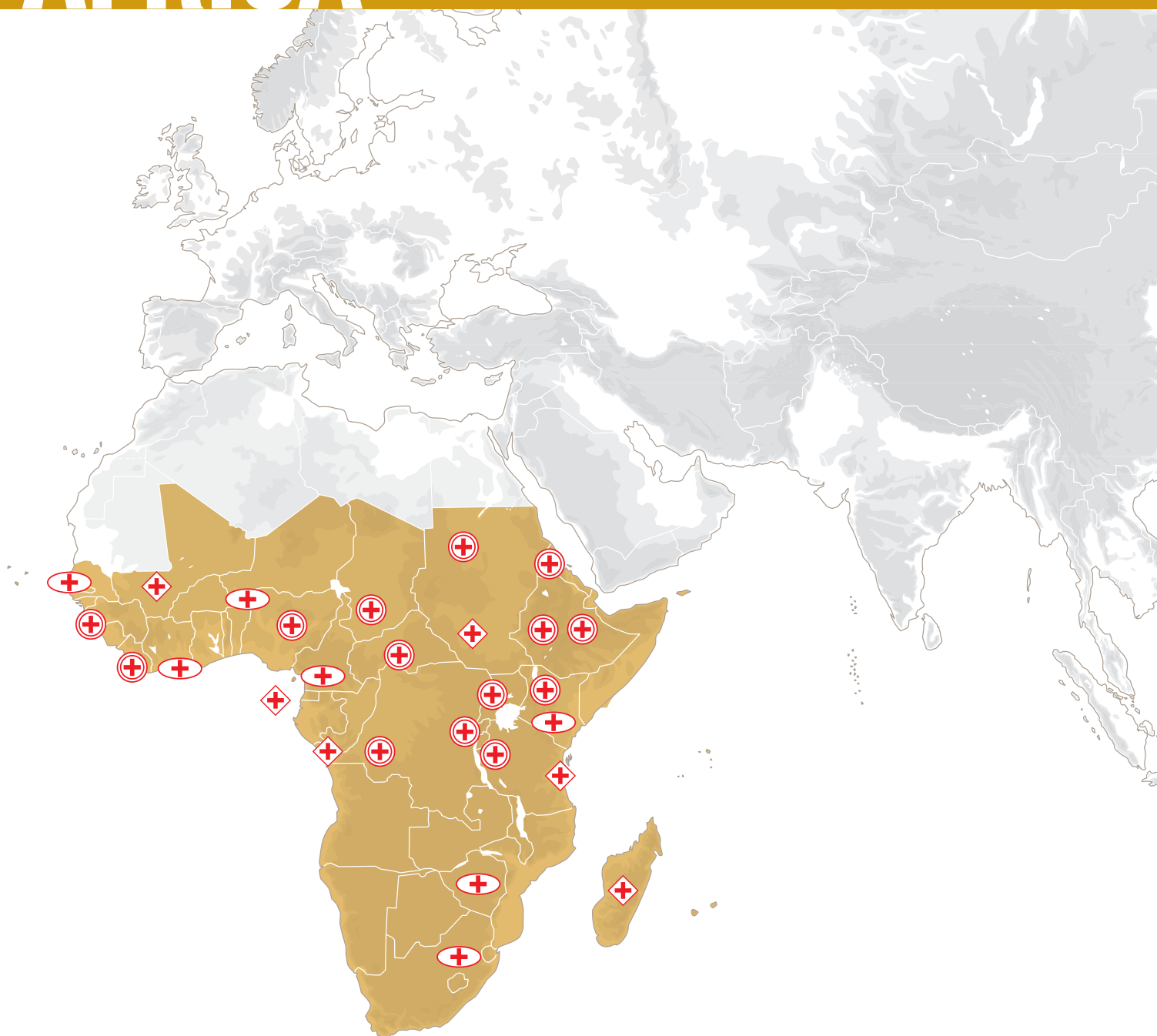
EXPENDITURE (IN KCHF)

Protection
50,824
Assistance
238,706
Prevention
40,421
Cooperation with National Societies
32,783
General
-

362,734 of which: Overheads **21,934**

Implementation rate
89%

AFRICA



 ICRC delegation  ICRC regional delegation  ICRC mission

AFRICA

In 2010, the ICRC maintained a strong operational presence in sub-Saharan Africa (hereafter referred to as Africa), carrying out a wide range of activities to protect and assist victims of past and present armed conflicts or other situations of violence. To assist people rapidly and effectively, the ICRC remained flexible, adapting operations to the scale and urgency of needs. The Democratic Republic of the Congo (DRC), Somalia and Sudan were among the 10 biggest ICRC operations worldwide. In Somalia, one of the world's most pressing humanitarian emergencies, armed conflict intensified in central and southern regions, compounded by natural disaster. For its operations there, as well as in northern Mali and Niger, where drought and flooding devastated stockbreeding and crop production in an environment already affected by recent armed conflict and other situations of violence, the ICRC appealed for funds in addition to its original budget to better respond to people's emergency needs. Elsewhere, for example in Burundi, Chad and Uganda, it scaled down its presence where the situation had stabilized to focus resources on areas facing more urgent needs.

Across Africa, National Societies worked alongside the ICRC on the ground. Their local network allowed humanitarian aid to reach more people, for example in the DRC, Nigeria, Somalia and Sudan. They received ICRC funds, materials, training and logistical back-up to strengthen their organizational development and capacities to help needy communities in accordance with the Movement's Fundamental Principles, and to promote these and IHL locally. In countries preparing for referenda or elections, such support focused on contingency planning, as in the south of Sudan. To maximize the impact of humanitarian efforts, the ICRC coordinated its activities both with Movement partners and with UN agencies and other humanitarian actors working in fields of common interest.

In certain countries, notably in parts of the Central African Republic, the DRC, northern Mali, Nigeria and Senegal's Casamance region, armed groups, the associated military operations, and intercommunal violence contributed to insecurity; in some, banditry and kidnappings constituted an additional hazard for local populations and aid workers. In some cases, these security constraints limited the ICRC's direct access to affected people, at times hindering planned initiatives. In order to pursue its assistance activities in such situations while minimizing risks to staff, the ICRC adapted its working approach in line with procedures developed in recent years in Somalia, putting in place working and monitoring methods enabling it to manage its operations remotely. On this basis, it was able to assist victims of violence and natural disaster in northern Mali and in Niger and, following the release in February and March of two ICRC delegates taken hostage in 2009 on either side of the Chad/Sudan border, to resume operations in that region, mainly in Darfur (Sudan). Nevertheless, security constraints slowed ICRC output in these and other areas. In Ethiopia, government restrictions continued to impede ICRC access to conflict-affected people in the Somali Regional State; new restrictions further reduced ICRC operations in Eritrea.

Against this background, building understanding of ICRC/National Society neutrality, impartiality and independence among all those

with the potential to influence an armed conflict or other situation of violence remained crucial. Much time was spent developing dialogue with authorities, including incoming administrations, political parties, weapon bearers and civil society. Such dialogue proved essential in facilitating National Society/ICRC access to people wounded, detained, displaced or otherwise affected by, for example, election-related violence in Côte d'Ivoire or fighting in Nigeria's Niger Delta. There and elsewhere, such contacts were an opportunity to impress upon all parties their responsibility to respect civilians and wounded and captured fighters under IHL or other applicable law. Delegates documented abuses against civilians and, through representations, urged the alleged perpetrators to end such practices. They addressed, for example, the recruitment of children by weapon bearers and sexual violence committed against civilians in the DRC.

In many situations, vulnerable people received emergency aid to cover their immediate needs. In Somalia, for instance, some 679,000 people displaced by armed conflict, natural disaster or both were given tarpaulins, blankets and other essentials to ease precarious living conditions, with some 430,000 receiving food to sustain them for 2–4 months, as required. When prolonged drought caused critical water shortages, the ICRC trucked in water supplies for over 800,000 people in affected communities for as long as necessary. Other large-scale relief operations sought to combat the emerging food-security crisis in northern Mali and Niger and the impact of insecurity in parts of Sudan and the Central African Republic, which drove thousands of people from their homes. Aid was directed towards communities hosting IDPs as well as the IDPs themselves, thus alleviating strain on local resources.

As appropriate, the ICRC followed up emergency relief with livelihood support comprising agricultural, veterinary and/or micro-economic initiatives designed to suit local skills and resources. These aimed to help people regain self-sufficiency while boosting the local economy in a sustainable manner. For example, in parts of the DRC where the situation had stabilized, longer-term IDPs, returnees and residents were given seed and tools to help kick-start farming activities, sometimes with food to tide them over until the next harvest. There and in impoverished parts of northern and western Kenya, people received cash assistance to rehabilitate local infrastructure, generating employment and improving market access. Crisis-hit pastoralists in Mali and Niger sold their weakest animals to the ICRC, leaving them with a healthy herd and a cash injection with which to buy essentials. Like farmers and herders in, for instance, Chad, the DRC and Sudan, they also had access to veterinary services to help preserve their animals' health. Households headed by women were among the most vulnerable. In Casamance and Eritrea, women received support to boost market gardening activities, while in Somalia they launched small businesses with ICRC guidance and start-up equipment.

Improvements to water and sanitation facilities, including in areas undergoing post-conflict reconstruction, helped ensure vulnerable communities had sufficient clean water to meet domestic and agricultural needs. Such initiatives were commonly accompanied by training to encourage sustainable benefits and reduce hygiene-associated health risks. In rural Liberia, for instance, ICRC-trained National Society volunteers showed 200 community representatives

how to maintain water points and promote good hygiene locally. In Somalia, communities worked with ICRC specialists, local contractors and National Society staff to construct or rehabilitate water points and rainwater reservoirs in 10 drought-prone regions, benefiting some 170,500 farmers, nomads and their livestock.

To enhance access to primary health care in volatile or remote areas, the ICRC provided health centres with supplies, equipment, staff training and logistical and structural support as needed. For example, to combat rising malnutrition in Somalia, it boosted its support for National Society health centres, which launched 11 further therapeutic feeding programmes for malnourished children. In the DRC, victims of sexual violence continued to receive psychological support at ICRC-backed counselling centres, including five temporary centres established to respond to a surge in needs. As planned, the ICRC handed over responsibility to the authorities for health centres and a referral hospital in Uganda, and gradually withdrew its support for rural structures in Zimbabwe, providing training to smooth the transition.

By furnishing support to hospitals and physical rehabilitation centres, the ICRC helped ensure weapon-wounded patients received adequate care. Hospitals benefited from ICRC funds, supplies, staff training and improvements to infrastructure. To build surgical capacities, personnel from Mali, Niger, Senegal and Somalia participated in ICRC war-surgery seminars. In countries at risk of election-related violence, ICRC delegates helped hospitals review their contingency plans in coordination with National Society personnel. National Societies in Burundi, Côte d'Ivoire, Guinea and Sudan, among others, upgraded their first-aid skills with ICRC training. When violence flared in Guinea, the National Society swiftly deployed to treat the injured, transferring seriously wounded people to hospitals as planned. To provide victims of mines/explosive remnants of war and other disabled people with readier access to quality limb-fitting and physical rehabilitation services, the ICRC began equipping a newly constructed prosthetic/orthotic centre in Guinea-Bissau and launched two new partnerships with such service providers in Burundi and Niger. It continued to support similar centres in Chad, the DRC, Ethiopia, Sudan and Uganda.

Delegates visited detainees in 25 countries in accordance with standard ICRC procedures, monitoring their treatment and living conditions and sharing their findings confidentially with the authorities. Following discussions with the authorities, the ICRC obtained authorization to visit detainees in Gabon for the first time, regained systematic access to detainees in Mali, and was able to visit additional detention facilities in Equatorial Guinea. Despite efforts, by year-end it had not obtained systematic access to detainees falling within its mandate in some other countries, including Ethiopia, Gambia and Sudan. Acting as a neutral intermediary and with the agreement of all the parties, the ICRC facilitated the release and handover to the relevant authorities of people held by armed groups in the DRC and Sudan. Furthermore, delegates worked with the authorities to help ensure detainees' conditions met internationally recognized standards, providing advice, training prison personnel and, in urgent cases, stepping in, for example to renovate dilapidated water and sanitation infrastructure, facilitate medical treatment or provide basic hygiene items. In Chad, the Central

African Republic, Côte d'Ivoire, the DRC, Guinea, Madagascar and Zimbabwe, where limited resources hampered adequate meal provision, malnourished inmates received supplementary rations and/or nutritional supplements, helping stabilize morbidity and mortality rates. In parallel, the ICRC worked with the authorities to achieve long-term improvements to prison food standards and health care. For example, the Guinean and Ivorian authorities received advice on recommended nutritional intake and support in briefing caterers, and the Zimbabwe Prison Services benefited from support and agricultural inputs to increase food production in on-site farms and to enable inmates to grow their own food. In Rwanda, the authorities monitored prison health data using a system established in 2009 with ICRC input, enabling them to identify and address epidemics.

Across Africa, detainees as well as people dispersed by migration, armed conflicts or other crises regained or maintained contact with relatives worldwide through the family-links service run by the National Societies and the ICRC. As a priority, unaccompanied children and those separated from their families were put back in touch and, where appropriate, reunited with their parents. To ensure the relevance of such services, National Society teams, with ICRC training, carried out assessments of family-links needs in Ethiopia, Guinea, Liberia and Senegal. With similar support, the Burundi Red Cross extended its family-links services to nine provinces, up from three in 2009.

IHL promotion remained a key aspect of ICRC activities in Africa. The ICRC engaged in dialogue on IHL and humanitarian issues with the national and regional authorities concerned, lent governments its expertise for the ratification of IHL treaties and the adoption of the relevant national laws, and sponsored the participation of officials in IHL events abroad. It signed cooperation agreements with the Economic Community of Central African States and the Parliament of the Economic Community of West African States (ECOWAS) to advance national IHL implementation among member States. Such efforts contributed, in particular, to wider support for the African Union (AU) Convention on IDPs and the Convention on Cluster Munitions, ratified by two and seven African countries respectively during the year. Armed, security and police forces worked with the ICRC to incorporate IHL, international human rights law and humanitarian principles into their training, doctrine and operations. In particular, the ICRC trained Guinean security forces at the authorities' request in preparation for elections, and briefed a newly established Chadian-Sudanese frontier force on IHL. At regional level, peacekeepers deployed on the continent and other forces received similar briefings, including trainees at the Southern African Development Community Regional Peacekeeping Training Centre. Brigades attached to the AU and ECOWAS practised applying IHL during training exercises.

Backing up such activities, delegations across Africa worked with National Societies on tailored initiatives to increase awareness of and support for the Movement, IHL and humanitarian issues among influential civil society players and the wider public. They worked with media representatives to encourage quality humanitarian reporting, engaged in dialogue with religious and traditional leaders to build mutual understanding, and stimulated IHL study in academic circles.

BURUNDI



ICRC / AR_2010

ICRC delegation
 ICRC sub-delegation
 ICRC office
 ICRC-supported prosthetic/orthotic centre

EXPENDITURE (IN KCHF)

Protection	2,149
Assistance	3,571
Prevention	902
Cooperation with National Societies	744
General	-

► **7,366**

of which: Overheads 449

IMPLEMENTATION RATE

Expenditure/yearly budget	93%
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PERSONNEL

Expatriates	19
National staff (daily workers not included)	109

KEY POINTS

In 2010, the ICRC:

- entered the final stages of rehabilitation work aimed at improving access to clean water
- helped improve detainees' living conditions, including by partially funding the supply of drugs and medical equipment to prison health services, rehabilitating vital infrastructure and distributing hygiene items
- launched a partnership with a physical rehabilitation centre to improve services for disabled patients and fit them with affordable prosthetic and orthotic devices produced on-site
- supported the Burundi Red Cross in preparing a contingency plan to respond to needs in the event of election-related violence and in extending from 3 to 9 the number of provinces where it provided RCM services autonomously

The ICRC has been present in Burundi since 1999, focusing on helping people overcome the worst consequences of armed conflict. Owing to the progress in the peace process, ICRC assistance activities have been scaled down and now focus on working with the prison authorities to ensure that detainees are treated according to internationally recognized standards. The ICRC also reinforces physical rehabilitation services, supports the Burundi Red Cross, notably in restoring links between separated family members, and provides assistance to the armed forces in their efforts to train members in IHL.

CONTEXT

While Burundi was on the road to peace, tensions persisted and key issues remained to be resolved, including the social reintegration of weapon bearers who had not been incorporated into the armed and security forces. The large number of weapons in circulation compounded the country's fragile security situation.

The incumbent party in Burundi won elections comprising five polls between May and September. All opposition candidates withdrew prior to the presidential race, alleging fraud.

With UN support, the government completed a national consultation process to help establish a transitional justice mechanism. A final report was published in December.

Burundi remained reliant on international support and continued to suffer from poverty and underdevelopment. Rapid population growth, driven not only by high birth rates but also by the return of former refugees from neighbouring countries, fuelled tensions over access to land.

MAIN FIGURES AND INDICATORS				
PROTECTION				
CIVILIANS (residents, IDPs, returnees, etc.)				
Red Cross messages		Total	UAMs/SCs*	
RCMs collected		2,164	10	
RCMs distributed		2,179	9	
Reunifications, transfers and repatriations		Total		
People reunited with their families		9		
	<i>including people registered by another delegation</i>	6		
People transferred/repatriated		5		
Tracing requests, including cases of missing persons		Total	Women	Minors
People for whom a tracing request was newly registered		93	21	53
People located (tracing cases closed positively)		112		
	<i>including people for whom tracing requests were registered by another delegation</i>	13		
Tracing cases still being handled at 31 December 2010 (people)		71	18	38
UAMs/SCs,* including unaccompanied demobilized child soldiers		Total	Girls	Demobilized children
UAMs/SCs newly registered by the ICRC/National Society		8	4	
UAMs/SCs reunited with their families by the ICRC/National Society		9	1	1
	<i>including UAMs/SCs registered by another delegation</i>	6		
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2010		21	11	
Documents				
People to whom travel documents were issued		2		
Official documents relayed between family members across borders/front lines		1		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
ICRC visits		Total	Women	Minors
Detainees visited		11,245		
Detainees visited and monitored individually		616	29	25
Detainees newly registered		526	28	22
Number of visits carried out		230		
Number of places of detention visited		47		
Restoring family links		Total		
RCMs collected		109		
RCMs distributed		137		
People to whom a detention attestation was issued		7		

* Unaccompanied minors/separated children

ASSISTANCE				
CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security, water and habitat		Total	Women	Children
Water and habitat activities	Beneficiaries	248,000	28%	45%
	<i>of whom IDPs</i>	Beneficiaries	4,960	
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat				
Essential household items	Beneficiaries	3,413		
Water and habitat activities	Beneficiaries	5,100		

MAIN FIGURES AND INDICATORS

ASSISTANCE

WOUNDED AND SICK				
Physical rehabilitation		Total	Women	Children
Centres supported	Structures	1		
Patients receiving services	Patients	2,232	75	2,056
New patients fitted with prostheses	Patients	1		
Prostheses delivered	Units	3	2	
New patients fitted with orthoses	Patients	129	2	122
Orthoses delivered	Units	213	3	203
<i>of which for victims of mines or explosive remnants of war</i>		Units	1	
Crutches delivered	Units	16		

ICRC ACTION AND RESULTS

In 2010, the ICRC continued to focus on improving the living conditions of detainees and assisting people affected by past conflict. With the Burundi Red Cross, it stood ready to respond quickly and effectively to emergency needs if violence broke out. Given advancements in the peace process and the country's relative stability, it closed its final two structures outside Bujumbura – the Gitega sub-delegation and the Ngozi office.

Delegates visited detainees in places of permanent and temporary detention and monitored their treatment and living conditions, sharing their findings and, if necessary, recommendations confidentially with the authorities. After receiving one written report, the judiciary took steps to improve case file management, with a view to speeding up the trial process. The ICRC also provided financial, material and technical assistance to help improve inmates' living conditions, including by partially funding the supply of drugs to prison dispensaries, upgrading water, sanitation and kitchen facilities and distributing hygiene items.

In rural and urban communities, the ICRC continued to work with water boards to improve water supply systems. Maintenance courses for local personnel helped ensure the sustainability of water facilities rehabilitated in rural areas. Projects to upgrade water distribution networks in urban areas were nearing completion.

To enhance the quality of care for disabled people, the delegation launched a partnership with the Saint Kizito physical rehabilitation centre in Bujumbura, detailing a plan of action to renovate prosthetic/orthotic workshops and begin producing affordable devices. Work to this effect was well under way by year-end.

Family members dispersed within or across national borders restored contact through tracing and RCM services provided by the ICRC and the Burundi Red Cross. With ICRC training and equipment, the National Society extended its self-run RCM network from three to nine provinces, with the intention of eventually expanding these activities countrywide. Where appropriate, the delegation reunited unaccompanied children, including demobilized child soldiers, with their families.

In efforts to further integrate IHL into national law and military doctrine, the ICRC fostered contacts with the relevant authorities and offered them legal expertise and support, for example by providing the government with a draft model law to implement the Convention on Cluster Munitions and by devising a strategy with the Defence Ministry to incorporate IHL into military doctrine.

As part of wider efforts to improve understanding of and respect for basic humanitarian principles, the ICRC strengthened its dialogue with political and military authorities countrywide. Delegates briefed army officers in Burundi's five military regions on the Movement's neutral, impartial and independent approach in order to facilitate safe access of its personnel to people in need.

In parallel, Burundi Red Cross communication teams received support to promote widespread understanding of the Movement's mandate. Emergency response brigades put in place a comprehensive contingency plan enabling the National Society to provide first aid as needed, using the Safer Access approach.

Movement partners met regularly to coordinate their activities and their support to the Burundi Red Cross.

CIVILIANS

Communities enjoy safer and more abundant water supplies

Some 248,000 people living in areas where water facilities had deteriorated or been destroyed by past conflict faced fewer health risks after the ICRC, in close partnership with local water boards or the users themselves, repaired, extended and maintained permanent water supplies. In rural communities, people had improved access to safe water thanks to restored water points and newly protected springs. In the city of Rumonge, residents saw improvements in water quality and quantity following the upgrading of the water production, storage and distribution networks. Similar works in Cibitoke were scheduled for completion in 2011. Local committees and water board personnel continued to build on their maintenance skills during ICRC training sessions, including a two-week course in hydraulics for 12 technical staff of the urban water and electricity board, to secure the long-term sustainability of water facilities rehabilitated since 2004. Where necessary, trained maintenance personnel and the ICRC carried out repairs on the spot.

National Society personnel underwent training to develop their emergency water and sanitation response capacities, but the relative stability meant that emergency supplies of water and essential household items were not needed.

Separated relatives restore contact

Family members dispersed while fleeing past fighting, including Burundian refugees returning from the United Republic of Tanzania and Congolese and Rwandan refugees living in camps in Burundi, restored contact through the tracing and RCM services run by the ICRC and the Burundi Red Cross. With ICRC training and equipment, the National Society was able to collect and distribute RCMs autonomously in nine provinces, compared with three in 2009 (see *Red Cross and Red Crescent Movement*).

Nine unaccompanied children, including one demobilized child soldier, were reunited with their families in Burundi and abroad, for which purpose coordination with other humanitarian and referral organizations was paramount. Reunited families received visits from delegates, and children were provided with basic essentials, where needed, to facilitate their reintegration.

PEOPLE DEPRIVED OF THEIR FREEDOM

Some 11,200 detainees in places of permanent and temporary detention received regular visits, conducted in accordance with the ICRC's standard procedures, enabling delegates to monitor their treatment and living conditions. Security detainees, including those arrested during the electoral period, were followed up individually. Particular attention was also paid to the situation of vulnerable inmates, such as women and children.

After the visits, the authorities received confidential feedback and written reports from the delegation including, if necessary, recommendations for improvements. Following one such report, central and local judicial authorities took practical steps to improve the file management of pre-trial cases, with the aim of speeding up the trial process and thus alleviating overcrowding. Prison authorities and the ICRC explored other ways to improve respect for judicial guarantees, often on the basis of lists of cases of concern drawn up by the delegation. Plans to publish a brochure for inmates on the subject were shelved when the delegation's partner NGO suspended its activities.

Through the RCM service, detainees restored and maintained contact with their relatives in Burundi and abroad.

Detainees' living conditions improve

The prison authorities and government ministries continued to work with the ICRC to bring detention conditions in line with internationally recognized standards. The authorities were reminded of the need to increase the prison service budget and create a budget line for places of temporary detention to meet detainees' basic needs. They planned to start a campaign with the delegation to galvanize international support to this effect.

Detainees, meanwhile, received the medical attention they needed after prison dispensaries were reimbursed for 80% of the costs of basic medicines by the ICRC, which also fully financed the treatment of serious medical cases and supported four public health centres treating people held in places of temporary detention. In parallel, the prison health authorities and relevant NGOs received technical, material and financial support to work towards ensuring that inmates had access to preventive and curative treatment services for malaria, tuberculosis and HIV/AIDS.

Some 5,100 inmates in places of permanent and temporary detention faced fewer health risks thanks to upgraded water, sanitation, kitchen and storage facilities. Prison sanitation teams received technical support to carry out pest-control campaigns, further reducing the risk of an outbreak of disease. Detainees also got soap and other hygiene items for personal use.

WOUNDED AND SICK

In June, the Saint Kizito physical rehabilitation centre in Bujumbura and the ICRC signed an agreement detailing a three-year plan of action to improve the quality of services for physically disabled people. By year-end, work was well under way to renovate the physiotherapy department and prosthetic/orthotic workshops and to build a dormitory to accommodate patients living far away from the centre. Personnel making prostheses and orthoses received the necessary machinery and components to produce more reliable and affordable devices on-site, using the ICRC's polypropylene technology.

People injured during sporadic incidents of violence received first aid from the Burundi Red Cross, with ICRC support (see *Red Cross and Red Crescent Movement*), but pre-positioned medical supplies were not required.

AUTHORITIES

To cultivate respect for basic humanitarian principles and garner support for the ICRC and the Burundi Red Cross, national and local authorities countrywide were reminded during meetings and presentations of customary and treaty-based IHL principles. Representatives of regional and international organizations and the ICRC met regularly to exchange information on their respective activities.

The relevant national authorities were encouraged and offered legal expertise to establish a national IHL committee and ratify IHL treaties, such as Additional Protocol III. To this end, Burundian representatives, with ICRC sponsorship, participated in the first regional meeting on customary IHL (see *Yaoundé*) and the third Universal Meeting of National IHL Committees in Geneva, Switzerland (see *International Law and Cooperation*). To assist it in implementing the Convention on Cluster Munitions, which Burundi ratified in 2009, the government received a draft model law.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

To promote respect for IHL and support for the Movement, particularly in the run-up to the elections, information sessions were held for army and police officers on basic humanitarian principles and the mandates and activities of the ICRC and the National Society. Participants included some 270 officers responsible for maintaining law and order in 5 military regions during the elections and nearly 100 officers preparing to depart on African Union peacekeeping missions.

As part of ongoing efforts to integrate IHL into military training, officials at Burundi's military academy held a workshop on IHL with the ICRC, during which they explored ways of introducing IHL in military exercises. Academy instructors were better equipped to teach IHL after receiving specialized publications. In parallel, the Ministry of Defence and the ICRC signed a formal agreement outlining a strategy and joint plan of action to work towards incorporating IHL into military doctrine and training in 2011. One commander began by participating in a workshop abroad.

CIVIL SOCIETY

Influential members of civil society, including journalists and religious and traditional leaders, learnt more about humanitarian issues during a series of presentations and bilateral discussions, better placing them to raise public awareness of and support for the Movement's work. A media workshop was not held as planned, but journalists continued to cover the Movement's activities, drawing on press releases and promotional materials provided by the ICRC.

Students from public and private universities conducted research on IHL at the delegation's library, and two universities requested and received complete sets of IHL reference books. A new network of IHL lecturers was created following an ICRC meeting with five universities on improving IHL instruction, and two lecturers boosted their teaching skills at an IHL conference in Senegal, with ICRC sponsorship (see *Dakar*). Owing to a lack of availability of key stakeholders, a planned inter-university IHL competition did not take place.

RED CROSS AND RED CRESCENT MOVEMENT

With the support of the International Federation, National Societies working internationally and the ICRC, and in coordination with the Burundi Civil Defence, the Burundi Red Cross put in place a comprehensive contingency plan to respond to the needs of people affected by potential election-related violence. Volunteers countrywide, including 160 personnel in 8 emergency units from higher-risk provinces, were trained or refreshed their skills in first aid and the Safer Access approach. Meanwhile, 30 emergency response brigades received medical supplies and first-aid materials during each of the 5 polls. On several occasions, trained volunteers assisted the national authorities in administering first aid to injured people, and they remained ready to provide emergency water supplies in case of need (see *Civilians*).

In parallel, key National Society personnel throughout Burundi participated in courses to strengthen their skills in promoting the Fundamental Principles. They received materials in the local languages to foster widespread understanding of the Movement's mandate and recognition of its emblems, thus facilitating safe access of its personnel to vulnerable people. Communication teams raised public awareness of the National Society's activities and achievements through a monthly electronic newsletter and a biannual magazine.

By year-end, within the framework of the Restoring Family Links Strategy for the Movement, the Burundi Red Cross was collecting and distributing RCMs autonomously in nine provinces, compared with three in 2009. To do so, 24 volunteers participated in ICRC-organized training and refresher courses, and 32 new volunteers were trained with a view to eventually expanding these services countrywide. Six branch offices also received technical and financial support and equipment to carry out their work.

Movement partners met regularly to coordinate their activities and help strengthen the National Society's decentralized structures.

CENTRAL AFRICAN REPUBLIC



EXPENDITURE (IN KCHF)

Protection	1,405
Assistance	10,959
Prevention	1,506
Cooperation with National Societies	1,289
General	-

► **15,158**

of which: Overheads 925

IMPLEMENTATION RATE

Expenditure/yearly budget	98%
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PERSONNEL

Expatriates	28
National staff (daily workers not included)	126

KEY POINTS

In 2010, the ICRC:

- expanded its activities in the south-east to help meet the emergency needs of over 40,000 newly displaced people, vulnerable residents and refugees affected by the ongoing presence of an armed group in the region
- reinforced the capacities of the Central African Red Cross Society to respond to emergencies, as part of wider efforts to improve the Movement's humanitarian access in remote areas
- helped nearly 180,000 people in the north to start rebuilding their lives, through agricultural, water, sanitation and reconstruction activities and a range of micro-economic initiatives
- strengthened contacts with parties to the conflict whenever possible, notably by briefing over 2,300 weapon bearers in the field
- reunited 18 children, including 10 who had reportedly escaped from or been freed by armed groups, with their families
- contributed to a sharp decline in malnutrition among inmates in one prison, while regularly monitoring the general health of detainees during visits to detention facilities

The ICRC opened a delegation in the Central African Republic in 2007 in the context of the non-international armed conflict in the north, but has carried out activities in the country since 1983. It protects and assists people affected by armed conflict or other situations of violence, providing emergency aid, helping people restore their livelihoods, and rehabilitating water and sanitation facilities. It also visits detainees, restores links between family members separated by conflict, promotes IHL among the authorities, armed forces, armed groups and civil society, and supports the development of the Central African Red Cross Society.

CONTEXT

The situation in the Central African Republic (CAR) remained volatile, with improved security in some regions offset by fresh violence in others. In the north, the disarmament, demobilization and reintegration of armed groups progressed slowly, while fighters in the north-east refused to disarm, citing insecurity as the main reason for keeping their weapons. IDPs returned home to parts of the north-west where security had improved, but ongoing violence, military clashes, banditry and looting remained common elsewhere. This continued to drive people from their homes and limited the movement of humanitarian organizations. In the south-east, the ongoing presence of the Lord's Resistance Army (LRA) contributed to a deterioration of the security situation throughout the year, confining humanitarian action to the main

towns, where most of the rural population had fled following attacks. Meanwhile, the Uganda People's Defence Force continued to carry out military operations against the LRA (see *Uganda*).

A number of foreign troops and peacekeeping forces remained in the country. The mandate of the UN Mission in the CAR ended on 31 December 2010, by which time all troops had withdrawn.

Presidential and parliamentary elections were postponed, and the National Assembly passed a constitutional amendment allowing the president to remain in power until the polls took place.

The Central African Economic and Monetary Community (CEMAC) held its 10th Summit of Heads of State in Bangui, aimed at strengthening regional cooperation.

MAIN FIGURES AND INDICATORS				
PROTECTION				
CIVILIANS (residents, IDPs, returnees, etc.)				
Red Cross messages	Total	UAMs/SCs*		
RCMs collected	139	14		
RCMs distributed	346	4		
Reunifications, transfers and repatriations	Total			
People reunited with their families	23			
including people registered by another delegation	6			
People transferred/repatriated	2			
Tracing requests, including cases of missing persons	Total	Women	Minors	
People for whom a tracing request was newly registered	2		1	
People located (tracing cases closed positively)	25			
including people for whom tracing requests were registered by another delegation	21			
Tracing cases still being handled at 31 December 2010 (people)	2		1	
UAMs/SCs,* including unaccompanied demobilized child soldiers	Total	Girls	Demobilized children	
UAMs/SCs newly registered by the ICRC/National Society	21	10	14	
UAMs/SCs reunited with their families by the ICRC/National Society	18	7	10	
including UAMs/SCs registered by another delegation	5			
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2010	8	4	4	
Documents				
People to whom travel documents were issued	6			
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
ICRC visits	Total	Women	Minors	
Detainees visited	1,557			
Detainees visited and monitored individually	79	6	4	
Detainees newly registered	61	6	4	
Number of visits carried out	156			
Number of places of detention visited	49			
Restoring family links	Total			
RCMs collected	12			
RCMs distributed	3			

* Unaccompanied minors/separated children

ASSISTANCE				
CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security, water and habitat		Total	Women	Children
Food	Beneficiaries	76,203	30%	50%
	<i>of whom IDPs</i>	76,203		
Essential household items	Beneficiaries	16,171	26%	54%
	<i>of whom IDPs</i>	4,525		
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries	44,551	30%	50%
Water and habitat activities	Beneficiaries	134,647	30%	40%
	<i>of whom IDPs</i>	13,465		

MAIN FIGURES AND INDICATORS

ASSISTANCE

PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)

Economic security, water and habitat		Total	Women	Children
Food	Beneficiaries	63		
Essential household items	Beneficiaries	1,176		
Water and habitat activities	Beneficiaries	240		

ICRC ACTION AND RESULTS

The ICRC, together with the Central African Red Cross Society, focused on assisting people affected by armed conflict or other situations of violence in the CAR. Security constraints prevented the delegation from working in parts of the Vakaga region, so only limited assistance to the inhabitants of Birao town was possible.

People uprooted by fighting and their host communities received essential household items and food rations to help them cope. The ICRC and the Central African Red Cross scaled up such assistance in the south-east, in response to a worsening security situation there. To help ensure protection of civilians and gain safe access of aid workers to people in need, the ICRC briefed members of the armed forces and armed groups in the field, whenever possible, as well as a number of local authorities and influential community leaders, on basic humanitarian principles and the Movement. In more stable areas, the delegation supplied vulnerable residents and returning IDPs with a combination of seed, tools, draft animals and training in agricultural techniques to enable them to grow their own food. Others increased their income through a range of micro-economic initiatives. Returnees were given materials and training to build or repair their homes. To reduce health risks, the ICRC constructed or rehabilitated water points and latrines in villages, while ICRC-trained National Society volunteers conducted sessions for villagers on good hygiene practices.

People displaced by violence restored contact with family in the CAR and abroad through the tracing and RCM services run by the National Society and the ICRC. Where possible and appropriate, the ICRC reunited children, including demobilized child soldiers, with their families.

Delegates visited security detainees held in places of detention throughout the country, monitoring their treatment and general living conditions and sharing the findings and recommendations confidentially with the authorities. As the penitentiary administration often lacked the necessary resources, the ICRC provided financial, technical and material support to improve inmates' nutrition, health and hygiene. With the authorities' consent, the delegation also approached other organizations and donors for support in helping the CAR rebuild its penal and judicial systems.

The ICRC strengthened its dialogue with the national and military authorities while offering legal expertise to the relevant ministries in implementing humanitarian treaties and in creating a permanent national IHL committee. The delegation also assisted

the armed forces in integrating IHL into its doctrine, training and operations and sponsored several personnel to enhance their skills at courses abroad.

With ICRC financial, technical and material support, the Central African Red Cross continued to develop its emergency response capacities and its ability to promote IHL and the Movement among a broad audience. Notably, the National Society was in a better position to assist conflict-affected people during ICRC relief operations in the south-east after building a new office in the region.

By coordinating closely with Movement partners and other humanitarian actors working in the CAR, the ICRC helped ensure that the needs of vulnerable populations were met without duplication.

CIVILIANS

Violence and looting continued to affect populations in several regions, with civilians reportedly killed, wounded or abducted, particularly in the south-east. A number of people in conflict-affected areas approached the ICRC to make allegations of IHL violations. These were documented and formed the basis of confidential oral and written representations to the parties concerned. Whenever feasible, the delegation strengthened contacts with weapon bearers, reminding them of their responsibilities under IHL to protect civilians. Such dialogue had the aim of gaining safe access to people in need and preventing further abuses.

Conflict-affected families receive emergency relief

In parts of the north and south-east, thousands of people fled their homes as a result of armed clashes, banditry and ethnic tensions. Most sought refuge in town centres or outlying bush and often had few or no belongings. To help IDPs cope during their first few months of displacement and to alleviate some of the strain placed on host communities, over 66,700 people (19,250 households) received one-off food rations and almost 16,200 people (3,300 households) got by with essential household items. Those assisted included over 40,000 IDPs and Congolese refugees in the south-east, where food distributions were scaled up following a deterioration of the security situation during the year that sharply reduced agricultural production. Resident farmers there also got a one-off food ration to tide them and their families (nearly 9,500 people) over until the harvest. Whenever possible, trained Central African Red Cross volunteers worked alongside ICRC delegates during food distributions, reinforcing their operational capacities.

Returnees and vulnerable residents assisted in restoring their livelihoods

In northern areas where the security situation had improved, IDPs returning home found that little remained of their previous lives, and residents were struggling to make ends meet. During the year, over 44,500 conflict-affected people (nearly 9,000 households) started to get back on their feet thanks to a variety of ICRC livelihood-support initiatives. Some 300 villagers (20 families) regained access to markets and health centres by means of ICRC-donated bicycles or pushcarts or began earning a living again using brick-making kilns and peanut-processing kits. As part of efforts to revive agricultural activities in the country, more than 40,000 other residents and returnees (8,800 households) used seed, tools and draft animals to plant and harvest their own crops again and to generate income. Over a thousand farmers who had received disease-resistant seed from the ICRC in 2009 participated in courses on good farming practices and marketing, further boosting the economic security of some 230 families. Additionally, some 300 members of farmers' unions received seed, tools and draft animals, drawn from resources redirected from a planned seed multiplication initiative for village associations after an ICRC assessment concluded that the unions had more immediate needs. Owing to the volatile security situation in Birao, resources to rehabilitate a veterinary pharmacy were used instead to build and stock a new one in the more stable Paoua region, boosting animal health and thus the livelihoods of some 3,000 pastoralists.

Civilians have improved access to water, sanitation and shelter

In parts of the north-west, residents and people returning to their villages after months or years of displacement had limited access to adequate water, sanitation and shelter. Meanwhile, newly displaced people in the south-east were living in precarious conditions. By year-end, nearly 135,000 people in the CAR had benefited from a range of ICRC initiatives.

Thus, in support of local water committees, over 17,000 people were able to access a clean water supply after the ICRC dug new wells and protected natural springs, as did some 42,200 people living near newly repaired boreholes. Over 57,000 people learnt about good hygiene practices from Central African Red Cross volunteers trained by the ICRC. To reinforce this initiative, communities worked with the ICRC to construct additional latrines near schools and health facilities, serving over 9,000 people, and nearly 9,000 families had latrines installed in their homes. In the north-west, over 7,100 people started to repair or rebuild their destroyed homes with ICRC material and technical support.

As an emergency measure in the south-east, some 10,000 IDPs received clean water through an emergency distribution network and attended hygiene-promotion sessions conducted by National Society volunteers. Thanks in part to these initiatives, no major outbreak of water-borne diseases was reported.

In parallel, health facilities in conflict-affected areas received ICRC donations of medicines and medical materials to treat vulnerable

IDPs, residents and returnees. Hospitals also received ad hoc supplies of drugs and medical supplies to help ensure people wounded during violence received appropriate treatment.

Family members separated by conflict reconnect with their relatives

Refugees, IDPs and others separated from their families in or across borders, mostly owing to insecurity in the south-east, restored and maintained contact with relatives using the tracing and RCM services run by the National Society and the ICRC.

Eighteen children, ten of whom had reportedly escaped from or been freed by armed groups, rejoined their families thanks to the coordinated efforts of national authorities, relevant UN agencies and neighbouring ICRC delegations.

PEOPLE DEPRIVED OF THEIR FREEDOM

Across the country, some 1,557 detainees received visits, conducted according to the ICRC's standard procedures, enabling delegates to monitor their treatment and living conditions. Those detained in connection with armed conflict or for other reasons of State security were followed up individually. Particular attention was also paid to the situation of vulnerable detainees, such as women and children. Inmates had the opportunity to communicate with their families through RCMs. After the visits, the relevant authorities received confidential oral and written feedback on the ICRC's findings and, where relevant, recommendations. Meanwhile, with the full agreement of the national authorities, the support of other organizations and donors was sought in helping rebuild the CAR's penal and judicial systems. Dialogue continued with the government and armed groups to obtain access to all detainees in their custody.

Because the authorities often lacked the necessary resources, many detainees suffered from poor health brought on by inadequate food, health care and sanitary facilities. Delegates regularly monitored their general health and nutritional status during visits to detention facilities and encouraged the authorities to meet their responsibilities regarding detainees' welfare. Some 63 inmates in one prison received high-energy dietary supplements and food rations, contributing to a sharp decline in malnutrition there. Detainees countrywide also had improved access to health care in prison dispensaries or nearby public health structures regularly supplied with drugs and medical material by the ICRC. To bolster the prison administration's efforts to improve living conditions in detention facilities, health personnel received expert advice in their work, with emphasis, among other things, on the importance of giving inmates access to national HIV/AIDS and tuberculosis programmes.

In parallel, detainees were given personal hygiene items, along with buckets and jerrycans for cleaning purposes, and participated in sessions on good hygiene practices conducted by ICRC-trained National Society volunteers. In two detention facilities, including the *gendarmerie*'s main detention centre in Bangui,

240 inmates enjoyed improved sanitation conditions after the ICRC rehabilitated latrines, showers, waste-collection systems and water-storage units. With ICRC technical support, the authorities began reorganizing prison water distribution procedures to ensure that inmates had a more regular supply.

Despite a good harvest in 2009, the authorities in Bossangoa prison had trouble managing the market garden launched with ICRC support in 2007 to boost inmates' nutritional intake. The project was therefore suspended.

AUTHORITIES

National and local authorities and the ICRC strengthened their dialogue through regular meetings. Discussions enhanced the authorities' understanding of humanitarian principles and the Movement and reminded them of their responsibilities under IHL.

Meanwhile, the government received legal advice in ratifying IHL treaties, such as Additional Protocol III, and in incorporating the relevant provisions into domestic law, for example through a draft prison act. The authorities were also supported in their ongoing efforts to create a permanent national IHL committee to better implement humanitarian instruments and to promote the enforcement of existing laws, such as the law governing use of the emblem, adopted in 2009. To this end, two members of the ad hoc committee were sponsored to attend the third Universal Meeting of National IHL Committees, held in Geneva, Switzerland (see *International Law and Cooperation*). With ICRC technical support, the ad hoc committee was also actively involved in organizing a national workshop on IHL implementation for key decision-makers.

At the regional level, diplomats, members of the international community and representatives of the Bangui-based CEMAC met regularly with the ICRC, enabling the delegation to rally support for the Movement, keep abreast of developments in IHL implementation and provide legal recommendations on draft laws.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

Some 760 members of the armed forces and 1,600 other weapon bearers, including those in still active armed groups, learnt about IHL and the Movement during ICRC presentations. These contacts also served to encourage respect for civilians and to facilitate ICRC/National Society access to people in need.

In parallel, the armed forces received technical support to integrate IHL into their doctrine, training and operations. Thus, one officer was sponsored to attend the fourth Senior Workshop on International Rules governing Military Operations in Lucerne, Switzerland (see *International Law and Cooperation*). The armed forces' IHL committee was also in a better position to implement and promote IHL after one of its members participated in a regional workshop abroad. With ICRC input, the military academy

in Bangui was reviewing the status of the integration of IHL into its curriculum, and cadets in their final year of study examined basic humanitarian principles during an ICRC seminar.

Incoming peacekeepers and officers of the Multinational Force in the CAR participated in pre-deployment sessions on the basic principles of IHL. They attended refresher sessions in the field, as needed.

CIVIL SOCIETY

Many influential members of civil society, as well as the general public, were introduced to the ICRC and Central African Red Cross through a series of national radio broadcasts, press releases and interviews on the Movement's activities throughout the CAR, such as its work to reunite members of dispersed families in the south-east.

To further generate support for IHL and the Movement, religious and traditional leaders participated in briefings held in areas where the ICRC and the National Society worked. During the discussions, the communities shared their knowledge of how seasonal communal conflicts were triggered, which helped the ICRC to respond to needs more effectively.

Notwithstanding academic strikes in 2009, the CAR's two main educational institutions, including the country's only public university, continued teaching IHL with ICRC support. While a moot court competition was not held as planned, students boosted their IHL knowledge during various information sessions, notably a seminar for 100 public law students. One lecturer sharpened his teaching skills at an IHL workshop abroad (see *Yaoundé*) and took an active role in the national workshop on IHL implementation (see *Authorities*).

RED CROSS AND RED CRESCENT MOVEMENT

With ICRC material, financial and technical support, the Central African Red Cross continued to develop its capacities to respond to emergencies, restore family links and promote IHL and the Movement.

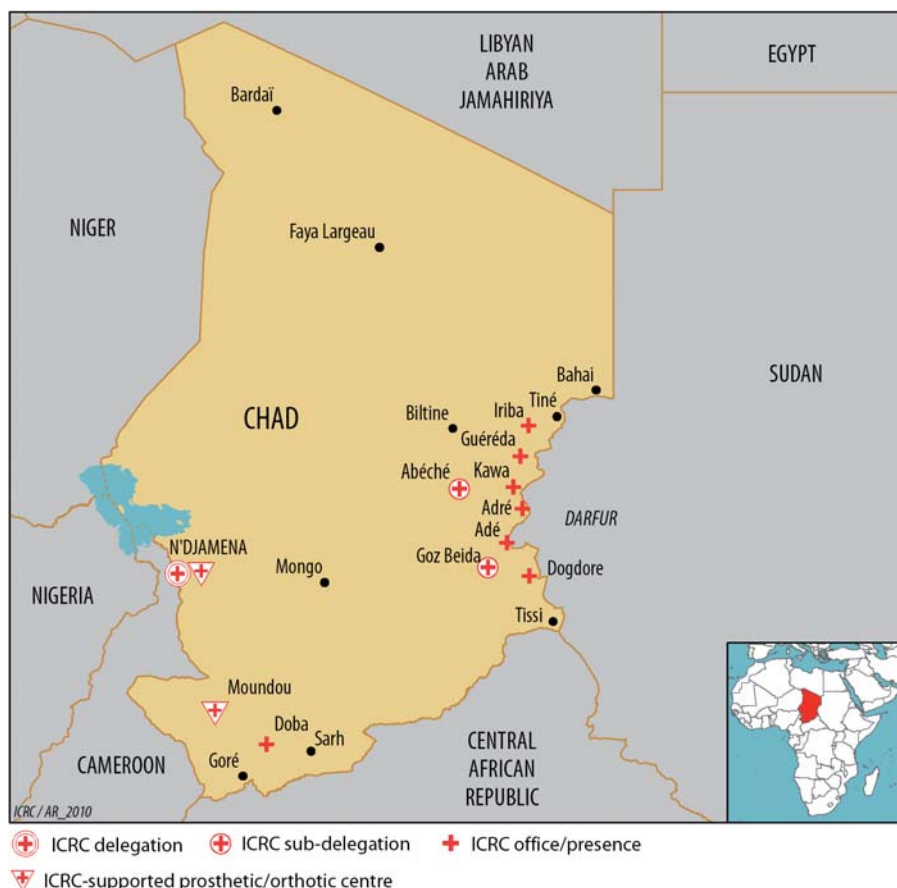
To strengthen its first-aid capacity, the National Society trained new instructors, organized refresher courses for volunteers, produced instruction manuals, and improved the delivery of materials to local committees in violence-prone areas. In preparation for the elections, it also drafted a contingency plan, with the ICRC's help, which included monitoring and early warning systems.

In the south-east, volunteers were fully involved in ICRC-led food distributions and water and sanitation projects, strengthening the National Society's operational capacities (see *Civilians*). To this end, local volunteers underwent specialized training to assess the needs of people affected by fighting. To extend its field presence in the region, the National Society constructed a new provincial office in Obo, with ICRC funding.

To promote widespread understanding of humanitarian principles and the Movement, National Society communication personnel gave talks on these topics to thousands of local volunteers, community members and local authorities throughout the country. Volunteers received bicycles and megaphones to help get the message out, and launched a campaign promoting respect for the red cross emblem.

The ICRC worked in close cooperation with Movement partners, holding regular meetings to coordinate activities and support to the National Society.

CHAD



The ICRC has been operating in Chad since 1978. As of 2005, priorities have been to meet needs arising from the armed conflicts in Chad and neighbouring Darfur, Sudan. With armed conflict in Chad subsiding, the ICRC has scaled back its emergency activities to focus mainly on providing surgical care to the wounded in the east and treatment to amputees countrywide. The ICRC continues to visit detainees and restores links between separated family members, mainly Sudanese refugees. The ICRC also pursues longstanding programmes to promote IHL among the authorities, armed forces and civil society, and supports the Red Cross of Chad.

EXPENDITURE (IN KCHF)

Protection	4,579
Assistance	9,713
Prevention	2,038
Cooperation with National Societies	1,101
General	-

► **17,431**

of which: Overheads **1,064**

IMPLEMENTATION RATE

Expenditure/yearly budget	79%
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PERSONNEL

Expatriates	35
National staff (daily workers not included)	188

KEY POINTS

In 2010, the ICRC:

- readjusted activities amid increased security restrictions and diminishing armed conflict, closing its sub-delegation and office on the eastern border, plus all bases, but retaining the N'Djamena delegation and Abéché sub-delegation
- maintained support to Abéché Regional Hospital, adding 2 new members to its surgical team and initiating a nurse-training project, plus 2 physical rehabilitation centres and, until end-August, 4 health centres
- helped struggling communities to restart agricultural production and boost livestock productivity through the provision of training, seed and tools
- gave emergency shelter and household items to people driven from their villages by violence in the south
- monitored the treatment and living conditions of 3,037 detainees in Chad's prisons, providing daily food and vitamin supplements to security detainees in Defence Ministry-run facilities
- briefed more than 3,000 military, police and security personnel on IHL

CONTEXT

Following military clashes in the south, armed conflict in Chad subsided during 2010, as government forces reasserted control over areas contested by armed groups.

Normalization of relations with Sudan in January led to the deployment of a joint Chadian-Sudanese military force along Chad's eastern border and reconciliation with several armed groups. With Chad's government wishing to take full control of national security, its security force, the Détachement Intégré de Sécurité (DIS), replaced the UN's peacekeeping force in Chad and the Central African Republic, MINURCAT, which withdrew by year-end.

The security situation remained volatile, especially in the east. Banditry dissuaded many displaced people from returning home, while several aid workers were kidnapped. More than 250,000 Sudanese refugees continued to live in camps in eastern Chad, while refugees also arrived from violence-prone regions of the Central African Republic.

Drought and food shortages in central and northern Chad caused concern among aid agencies, but a good harvest subsequently improved the situation. Floods and cholera affected some communities.

MAIN FIGURES AND INDICATORS				
PROTECTION				
CIVILIANS (residents, IDPs, returnees, etc.)				
Red Cross messages	Total	UAMs/SCs*		
RCMs collected	2,666	140		
RCMs distributed	2,416	47		
Phone calls facilitated between family members	9			
Reunifications, transfers and repatriations	Total			
People reunited with their families	22			
Tracing requests, including cases of missing persons	Total	Women	Minors	
People for whom a tracing request was newly registered	150	55	28	
People located (tracing cases closed positively)	42			
<i>including people for whom tracing requests were registered by another delegation</i>	1			
Tracing cases still being handled at 31 December 2010 (people)	161	57	36	
UAMs/SCs,* including unaccompanied demobilized child soldiers	Total	Girls	Demobilized children	
UAMs/SCs newly registered by the ICRC/National Society	87	1	78	
UAMs/SCs reunited with their families by the ICRC/National Society	22		20	
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2010	163	32	72	
Documents				
Official documents relayed between family members across borders/front lines	3			
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
ICRC visits	Total	Women	Minors	
Detainees visited	3,037			
Detainees visited and monitored individually	485	1	37	
Detainees newly registered	175	1	36	
Number of visits carried out	63			
Number of places of detention visited	20			
Restoring family links	Total			
RCMs collected	46			
RCMs distributed	34			
Phone calls made to families to inform them of the whereabouts of a detained relative	36			
People to whom a detention attestation was issued	13			

* Unaccompanied minors/separated children

ASSISTANCE				
CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security, water and habitat		Total	Women	Children
Food	Beneficiaries	3,100	24%	60%
	<i>of whom IDPs</i>	2,480		
Essential household items	Beneficiaries	10,000	24%	60%
	<i>of whom IDPs</i>	8,000		
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries	26,200	24%	60%
	<i>of whom IDPs</i>	11,266		
Water and habitat activities	Beneficiaries	5,300	35%	35%
	<i>of whom IDPs</i>	1,325		

MAIN FIGURES AND INDICATORS				
ASSISTANCE				
Health		Total	Women	Children
Health centres supported	Structures	4		
Average catchment population		56,411		
Consultations	Patients	13,236		
	<i>of which curative</i>		4,236	6,348
	<i>of which ante/post-natal</i>		254	
Immunizations	Doses	3,248		
	<i>of which for children aged five or under</i>	3,019		
	<i>of which for women of childbearing age</i>	229		
Referrals to a second level of care	Patients	54		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat				
Food	Beneficiaries	396		
Essential household items	Beneficiaries	396		
WOUNDED AND SICK				
Hospitals				
Hospitals supported	Structures	1		
	<i>of which provided data</i>	1		
Admissions	Patients	1,286	428	264
	<i>of whom weapon-wounded</i>	54	2	
	<i>(including by mines or explosive remnants of war)</i>	9		
	<i>of whom other surgical cases</i>	1,006		
	<i>of whom medical cases</i>	98		
	<i>of whom gynaecological/obstetric cases</i>	128		
Operations	Operations performed	797		
Physical rehabilitation				
Centres supported	Structures	2		
Patients receiving services	Patients	4,234	729	1,816
New patients fitted with prostheses	Patients	126	24	9
Prostheses delivered	Units	363	46	25
	<i>of which for victims of mines or explosive remnants of war</i>	281		
New patients fitted with orthoses	Patients	235	26	145
Orthoses delivered	Units	577	74	337
	<i>of which for victims of mines or explosive remnants of war</i>	23		
Crutches delivered	Units	1,011		
Wheelchairs delivered	Units	57		

ICRC ACTION AND RESULTS

The kidnapping in late 2009 of two ICRC delegates – one in eastern Chad, the other in neighbouring Darfur, Sudan – resulted in the suspension of field movements until their release some months later and restrictions on staff movements and activities outside towns in eastern Chad throughout 2010.

To maximize assistance to conflict-affected communities, while minimizing risks to staff, the ICRC readjusted its working methods. It provided assistance to rural communities in partnership with other organizations working on the ground (with associated working procedures and control mechanisms) and increased support to struggling communities in urban areas, which ICRC staff could access. By year-end, with fewer conflict-related humanitarian needs emerging in Chad, the ICRC had scaled down its presence, closing the Goz Beida sub-delegation, Adré office and all bases along the eastern border, plus its one base in the south, to leave the Abéché sub-delegation covering the east, and the N'Djamena delegation the rest of the country.

Meanwhile, the ICRC continued to support Chad's two physical rehabilitation centres and Abéché Regional Hospital, deploying a nurse and physiotherapist to the latter (thus increasing its mobile surgical team to seven full-time staff) and improving its infrastructure. The organization also helped address the lack of qualified local medical personnel with the launch, in December, of a three-year nurse-training project run jointly by the Abéché Health College, the Ministry of Public Health and the ICRC, with the participation of an ICRC teaching nurse. The ICRC continued to support four health centres in eastern Chad until end-August, when access restrictions obliged it to end its support earlier than planned.

With government organizations, the ICRC supplied conflict-affected farmers in the east with seed and tools to grow their own food, and trained pastoralists to vaccinate livestock or to train others in the community to do so. Having cancelled plans to construct or repair water points in rural areas, the ICRC rehabilitated neighbourhood wells in urban Abéché. It supplied cash-crop seeds, household items and food to vulnerable communities in the city, and provided emergency shelter materials and, where necessary,

food to people displaced by fighting in the south of the country and flooding in the south and east.

The ICRC's family-links service, regularly used by Sudanese refugees living in camps, continued to run thanks to a network of refugee volunteers, although the range of services had to be scaled back. Efforts focused on putting unaccompanied children back in touch with their parents and, if appropriate, reuniting the families.

The ICRC monitored, as far as possible, the situation of civilians displaced or otherwise affected by armed violence. It documented reports of abuses and made representations to the relevant authorities or weapon bearers where necessary. Meanwhile, dialogue continued with the authorities, weapon bearers and key civil society groups to gain wider acceptance of IHL, the ICRC and its neutral, impartial and independent stance. The ICRC also encouraged the government to adopt two draft bills – one incorporating sanctions against IHL abuses, the other protecting the red cross emblem – and to progress towards ratification of the Convention on Cluster Munitions. More than 3,000 military, police and security personnel were briefed on IHL, including members of the DIS, the mixed Chadian-Sudanese frontier force and MINURCAT.

ICRC delegates visited inmates in 20 detention facilities to monitor their treatment and living conditions. To help tackle malnutrition, the ICRC gave security detainees in some prisons run by the Ministry of Defence regular food rations, in addition to therapeutic food supplements to the severely malnourished. It also took measures to protect detainees against cholera.

With ICRC support, the Red Cross of Chad strengthened its first-aid services and built up its infrastructure and communication skills. Movement partners met regularly to coordinate their activities in Chad. The ICRC also coordinated its operations with the UN and other organizations via the Inter-Agency Standing Committee and UN cluster meetings.

CIVILIANS

The ICRC maintained dialogue with authorities and weapon bearers, reminding them of their obligations under IHL to protect civilians and wounded or captured fighters and to ensure aid workers had safe access to people in need.

In eastern Chad, restrictions on movements outside towns meant that ICRC delegates were generally unable to monitor first-hand the effects of violence on civilians. In the south, where delegates had greater access, civilians approached them to report alleged IHL violations during outbreaks of fighting. Where necessary, delegates made confidential representations to the relevant parties to halt such abuses.

The recruitment of minors into fighting forces remained a concern, although access restrictions again limited the ICRC's ability to visit towns and camps where such recruitment allegedly occurred. Military intelligence officials and the ICRC discussed this issue during meetings.

Vulnerable civilians given shelter, food and the means to rebuild livelihoods

In the south, 5,500 people fleeing conflict around Korbol escaped the worst effects of the rainy season after receiving basic shelter materials and household items supplied by the ICRC. Subsequently, many of these people received food and more household items from the Chadian government, following ICRC representations. Later in the year, some of them were able to grow vegetables to feed themselves and re-establish an income after 100 displaced families (500 people) received irrigation pumps, seed and barrows from the ICRC. Meanwhile, communities in the east and south driven from their homes by flooding, farmers whose crops had been burned, and vulnerable urban communities (including orphans and people with leprosy), received essential household items, and in some cases food, from leftover stocks.

In eastern Chad, some 5,250 returnees (1,050 households) to Adé and Adré began growing food again using ploughs, harnesses and hoes supplied by the ICRC to the local rural development office, which arranged distribution. Poverty-stricken communities living on the outskirts of Abéché (1,430 people/286 households) regained some self-sufficiency after planting and harvesting ICRC-supplied cash-crop seed. Rural, mostly nomadic communities had a better prospect of raising productive livestock after 82 community animal health workers trained or refreshed their skills in basic veterinary practices during courses run by the Ministry of Livestock and Animal Resources and the ICRC. Additionally, 25 members of nomadic communities underwent training to train others in basic veterinary care. Security problems meant that eastern pastoralists in Adré and Am Dam received fewer vaccine doses than anticipated, while vaccine distributions around Iriba had to be cancelled. However, in total, 3,804 households (19,020 people) benefited from this veterinary initiative.

Struggling communities obtain clean water and improved health care

Residents in Abéché regained access to 12 neighbourhood wells rehabilitated by the city authorities, the UN and the ICRC (staff security restrictions had forced the ICRC to cancel plans to build/repair water supply points and storage tanks in eastern rural areas). The subsidence of armed conflict meant that ICRC emergency water stocks, sufficient for up to 10,000 violence-affected people, were not required.

A catchment population of 56,400 people in eastern Chad had access to four health centres (Kawa in Assoungha, Birak in Dar Tama, and Lobotiké and Tiero in Dar Sila), supported by the ICRC for eight months. The centres, which received monthly deliveries of medical supplies from the ICRC, provided curative care and vaccinations, plus ante- and post-natal consultations. The ICRC ceased support to the centres at the end of August, brought forward from the original end-date of 2011 because security constraints prevented it from carrying out the necessary monitoring to ensure adequate quality of care.

Refugee volunteers work with the ICRC to restore family contacts

Family members dispersed by conflict, mainly refugees from Sudan sheltering in UNHCR camps in eastern Chad, re-established contact through the ICRC family-links service. The service continued to be run by refugee volunteers in 12 camps, supported by ICRC personnel in Abéché and Goz Beida, who organized training and held regular support meetings. Volunteers operated from traditional huts (*tukuls*) constructed or repaired by the ICRC.

With the scaling down of the ICRC's presence in the east, the range of available family-links services was adjusted accordingly. People could restore contact with family, but those who had already re-established contact were limited to sending exceptional news only. The family-links needs of vulnerable people, especially child refugees and children formerly associated with fighting forces, were prioritized. In every camp, work continued to restore contact between unaccompanied children previously registered by the ICRC and their parents (two reunifications). However, the registration of children who had recently arrived at the camp without their parents had to be suspended. In southern Chad, where thousands of refugees crossing the border from the Central African Republic settled in five camps, the ICRC sought to help the most vulnerable among them, notably children, make contact with their families.

Demobilized child soldiers in transit and orientation centres in N'Djamena and Abéché used the family-links service to contact their parents. Of these, 20 were reunited with their families in Chad and Sudan, thanks to cooperation between the Ministry of Social Affairs, UNICEF and the ICRC.

PEOPLE DEPRIVED OF THEIR FREEDOM

A total of 3,037 detainees were visited by the ICRC, according to its standard procedures, in 20 government-run detention centres. Delegates monitored inmates' treatment and general living conditions and, where these fell short of internationally recognized standards, made confidential recommendations to the authorities. A total of 485 security detainees, most of whom were allegedly connected to armed groups, were visited individually and their cases followed up. Following the ICRC's intercession, 76 minors were transferred to a UNICEF-run transit and orientation centre and a security detainee was released on humanitarian grounds. At year-end, discussions were ongoing with the authorities regarding access to other detention facilities. Owing to security constraints, the ICRC could not follow up any reports of people allegedly being held by armed groups.

Detainees receive supplementary food and household items

Mirroring daily living conditions in parts of Chad, a number of inmates in Chadian prisons lacked adequate food and essential items. All security detainees in Ministry of Defence-run facilities were accordingly given a daily food supply and vitamin supplements, while those suffering from malnutrition also got high-calorie biscuits and peanut-based nutritional paste. In total these distributions reached 396 detainees; 356 of them received food and essential items monthly from June.

Detainees in two prisons benefited from infrastructural improvements to toilets and showers, although there was subsequently some deterioration of these facilities. During meetings, authorities and detainees discussed maintenance issues with ICRC representatives. Following the national cholera outbreak, detainees in two facilities identified as being at risk benefited from ICRC-funded rehabilitation of infrastructure and distributions of hygiene materials and medicines. Some detainees in Chadian prisons were also vaccinated against tuberculosis. Five weapon-wounded detainees received ICRC medical assistance.

The Chadian Ministry of Justice, MINURCAT and the European Union continued to draw on ICRC expertise to design and implement their internationally funded penitentiary reform programme. For example, at a workshop organized by these bodies in April, some 120 people, including 43 Chadian prison directors, learnt more about water and sanitation issues in prisons during an ICRC presentation. Guards at Chad's largest prison were familiarized with IHL and the ICRC's work, particularly in relation to detainees, during an ICRC presentation in December.

WOUNDED AND SICK

Patients suffering weapon wounds and other traumatic injuries receive treatment

At Abéché Regional Hospital, 1,286 weapon-wounded patients and other surgical emergencies transferred from across eastern Chad received treatment from the ICRC mobile surgical team, its members increased from five to seven with the deployment of an additional nurse (helping improve the hospital's capacity to deal with influxes of emergency cases) and a physiotherapist (boosting the provision of rehabilitative care).

The hospital, the sole referral facility for a population of over two million people, was better able to care for patients thanks to the ICRC's regular deliveries of medical supplies and equipment and help with infrastructure maintenance. People with weapon wounds and destitute people needing emergency surgery had their treatment costs covered by the ICRC. With a reduction in the number of weapon-wounded brought about by the relative political stabilization of eastern Chad, the ICRC team began treating more surgical emergencies unrelated to armed conflict.

To address the shortage of qualified medical personnel in Chad, and thus ensure patients received an adequate quality of care, student nurses at the Abéché Health College began to receive training in theoretical and practical skills from an ICRC teaching nurse. This followed the signing of an agreement, in December, between the college, the Health Ministry and the ICRC to run a joint three-year nurse-training project.

Support maintained for physical rehabilitation services

Mines and explosive remnants of war littering the Chadian countryside continued to claim victims. People suffering limb damage were fitted with prostheses or orthoses at Chad's two physical rehabilitation centres: the Centre d'appareillage et de rééducation

de Kabalaye (CARK) in N'Djamena and the Maison Notre-Dame de Paix in Moundou. Both centres produced all their mobility devices using ICRC components, materials and equipment.

At the CARK, patients with a disability, in priority those whose handicap resulted from armed conflict, were treated free of charge, and those who had to travel long distances had their travel and accommodation costs covered until August, when the closure of the only hostel near to the rehabilitation centre meant that accommodation could no longer be provided. Dialogue took place between government representatives and the ICRC in an attempt to rectify this situation and to involve the government more widely in running and improving physical rehabilitation services.

AUTHORITIES

Given the high degree of political activity in Chad, including the normalization of relations with Sudan in January and preparations for national elections (later postponed from 2010 to 2011), the government's focus on IHL implementation was limited. Nevertheless, the authorities and the ICRC discussed the need to move ahead with the adoption of two draft bills – one protecting the red cross emblem and the other repressing gross violations of IHL – and to progress towards the ratification of the Convention on Cluster Munitions. Discussions took place on a range of humanitarian issues with senior figures from various ministries, including Defence, Foreign Affairs, Health, and Legal Affairs and Justice. National and local authorities received regular information regarding the ICRC's humanitarian and security concerns and updates on its activities.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

More than 3,000 military, police and security personnel were briefed on IHL. Following the signing in 2009 of an agreement between Chad's Office of the Joint Chiefs of Staff and the ICRC to develop a programme of IHL promotion among military schools, regional commands and combat units, personnel received IHL materials and attended presentations. These were often given jointly by ICRC staff and Chad's military IHL instructors, who had previously participated in ICRC-run refresher courses. Military engineers discussed the dangers of weapon contamination. Members of the mixed Chadian-Sudanese border force, DIS and, for the first time, MINURCAT also attended ICRC briefings on IHL, which was further promoted via armed forces radio, an effective medium for reaching large numbers of troops country-wide. Security constraints limited briefings to armed groups.

CIVIL SOCIETY

With a precarious security situation prevailing in the east, and some armed conflict occurring in the south, it remained important that local communities and influential figures in society supported the work of the ICRC and its neutral, impartial and independ-

ent stance. People from a diverse range of backgrounds, including traditional elders, religious leaders and institutions, human rights organizations and schoolchildren discovered more about IHL and the Movement from presentations, informal discussions, and newsletters outlining Movement activities distributed by the National Society. Such interaction had the added benefit of helping the ICRC better understand the views and needs of some vulnerable communities and tailor its activities accordingly.

Following the suspension of many ICRC field activities in the east, radio became an even more important medium through which the organization could explain its principles and work to a wide range of audiences. ICRC-supported broadcasts included popular live programmes in which listeners could ask questions of ICRC medical, agricultural and veterinary experts.

RED CROSS AND RED CRESCENT MOVEMENT

The Red Cross of Chad continued to receive ICRC funds, materials, training and technical back-up to strengthen its capacities. In line with its strategic plan, the National Society opened two new branches in central Chad, building or renovating several others. Furthermore, several regional committees were formed or reorganized in various locations, enhancing operational management.

Meanwhile, 100 personnel were trained as first-aid instructors using the new manual developed jointly in 2009 by the National Society, the French Red Cross and the ICRC. The National Society also distributed two bulletins about its activities to encourage political, donor and public support.

Children in 10 schools discovered more about IHL and the Movement during presentations by the Chadian Red Cross, while directors from an organization for young Red Cross volunteers in N'Djamena participated in a workshop, organized by the National Society and the ICRC, to develop new activities across Chad.

The National Society participated in flood and cholera relief efforts in eastern and southern towns, and volunteers took part in a project to destroy scorpions that were menacing communities in the northern city of Faya Largeau.

To maximize the impact of aid efforts, Movement partners active in Chad took part in regular coordination meetings, and the ICRC assisted them with security management and other conflict-related issues, logistics and public communication.

CONGO, DEMOCRATIC REPUBLIC OF THE



The ICRC opened a permanent delegation in Zaire, now the Democratic Republic of the Congo, in 1978. It meets the emergency needs of conflict-affected IDPs and residents, provides them with the means to become self-sufficient and helps ensure that the wounded and sick receive adequate care, including psychological support for victims of sexual violence. It visits detainees, helps restore contact between separated relatives (reuniting children with their families where appropriate and possible) and supports the National Society's development. It also promotes respect for IHL and international human rights law by the authorities in their treatment of civilians and detainees.

EXPENDITURE (IN KCHF)

Protection	14,738
Assistance	35,847
Prevention	4,751
Cooperation with National Societies	1,622
General	-

► **56,958**

of which: Overheads 3,326

IMPLEMENTATION RATE

Expenditure/yearly budget	86%
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PERSONNEL

Expatriates	82
National staff (daily workers not included)	669

KEY POINTS

In 2010, the ICRC:

- adapted its operations to the evolving situation by extending its coverage in the Kivus and developing its operations in Equateur and Province Orientale to better respond to civilians' needs
- with the Red Cross Society of the Democratic Republic of the Congo, distributed essential household items and emergency food rations to 151,000 and 91,500 IDPs respectively
- facilitated recovery from armed conflict and violence by helping some 420,700 longer-term IDPs, returnees and host communities in more stable areas to rebuild their livelihoods and over 229,700 to improve their access to clean water
- supplied and supported 37 permanent and 5 temporary counselling centres providing psychological support to victims of sexual violence in the Kivus
- supported the reunification of over 1,000 children with their relatives while broadening a network of appropriate host families for children still looking for a permanent home
- contributed to a sharp decline in malnutrition and mortality rates in several prisons by running urgent nutritional programmes

CONTEXT

While some areas of the Democratic Republic of the Congo (DRC) stabilized in 2010, the humanitarian and security situation in several provinces remained a cause for concern.

In North and South Kivu, the conflict moved south and westwards, affecting populations in isolated, difficult-to-reach areas. Military operations against armed groups in the region continued, conducted by the DRC army and sometimes backed by the UN peacekeeping mission in the DRC (MONUC). MONUC became the MONUSCO stabilization force on 1 July 2010. One local armed group retained eight ICRC staff members for a week in South Kivu in April before releasing them unharmed.

In Province Orientale, insecurity related to the presence of groups of the Lord's Resistance Army remained a destabilizing factor, seriously affecting communities there (see *Uganda*).

In Equateur, thousands were displaced as a result of armed violence that broke out in 2009, and over 100,000 people continued to seek refuge in neighbouring Congo (see *Yaoundé*).

An ongoing process of integrating members of armed groups into the armed forces, part of a wider reform of the security sector, remained fragile. Meanwhile, the country's political discourse primarily focused on the organization of local and presidential elections, scheduled for the end of 2011.

MAIN FIGURES AND INDICATORS			
PROTECTION			
CIVILIANS (residents, IDPs, returnees, etc.)			
Red Cross messages	Total	UAMs/SCs*	
RCMs collected	45,133	1,260	
RCMs distributed	36,226	931	
Names published in the media	276		
Reunifications, transfers and repatriations	Total		
People reunited with their families	1,122		
	including people registered by another delegation	168	
Tracing requests, including cases of missing persons	Total	Women	Minors
People for whom a tracing request was newly registered	559	262	339
People located (tracing cases closed positively)	387		
	including people for whom tracing requests were registered by another delegation	60	
Tracing cases still being handled at 31 December 2010 (people)	465	210	261
UAMs/SCs,* including unaccompanied demobilized child soldiers	Total	Girls	Demobilized children
UAMs/SCs newly registered by the ICRC/National Society	1,369	423	484
UAMs/SCs reunited with their families by the ICRC/National Society	1,043	258	394
	including UAMs/SCs registered by another delegation	158	
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2010	759	285	100
Documents			
Official documents relayed between family members across borders/front lines	9		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)			
ICRC visits	Total	Women	Minors
Detainees visited	14,840		
Detainees visited and monitored individually	1,750	37	72
Detainees newly registered	1,166	32	68
Number of visits carried out	298		
Number of places of detention visited	87		
Restoring family links	Total		
RCMs collected	2,760		
RCMs distributed	1,825		
Detainees released and transferred/repatriated by/via the ICRC	9		
People to whom a detention attestation was issued	55		

* Unaccompanied minors/separated children

ASSISTANCE				
CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security, water and habitat		Total	Women	Children
Food	Beneficiaries	141,955	40%	30%
	<i>of whom IDPs</i>	141,955		
Essential household items	Beneficiaries	151,220	40%	30%
	<i>of whom IDPs</i>	151,220		
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries	420,721	40%	30%
	<i>of whom IDPs</i>	281,369		
Water and habitat activities	Beneficiaries	229,785	30%	40%
	<i>of whom IDPs</i>	37,716		

MAIN FIGURES AND INDICATORS				
ASSISTANCE				
Health		Total	Women	Children
Health centres supported	Structures	12		
Average catchment population		223,287		
Consultations	Patients	57,872		
	<i>of which curative</i>		43,614	19,394
	<i>of which ante/post-natal</i>		13,792	
Immunizations	Doses	118,561		
	<i>of which for children aged five or under</i>	113,033		
	<i>of which for women of childbearing age</i>	5,528		
Referrals to a second level of care	Patients	4,926		
Health education	Sessions	2,420		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat				
Food	Beneficiaries	3,686		
Essential household items	Beneficiaries	11,000		
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries	202		
Water and habitat activities	Beneficiaries	11,342		
WOUNDED AND SICK				
Hospitals				
Hospitals supported	Structures	31		
	<i>of which provided data</i>	3		
Admissions	Patients	17,551	8,103	6,730
	<i>of whom weapon-wounded</i>	144	17	8
	<i>(including by mines or explosive remnants of war)</i>	5		
	<i>of whom other surgical cases</i>	2,086		
	<i>of whom medical cases</i>	11,173		
	<i>of whom gynaecological/obstetric cases</i>	4,148		
Operations	Operations performed	2,718		
Outpatient consultations	Patients	18,686		
	<i>of which surgical</i>	939		
	<i>of which medical</i>	15,825		
	<i>of which gynaecological/obstetric</i>	1,922		
Water and habitat				
Water and habitat activities	Number of beds	282		
Physical rehabilitation				
Centres supported	Structures	5		
Patients receiving services	Patients	680	115	35
New patients fitted with prostheses	Patients	247	48	14
Prostheses delivered	Units	670	108	35
	<i>of which for victims of mines or explosive remnants of war</i>	87		
New patients fitted with orthoses	Patients	23	6	1
Orthoses delivered	Units	44	11	2
	<i>of which for victims of mines or explosive remnants of war</i>	5		
Crutches delivered	Units	719		
Wheelchairs delivered	Units	21		

ICRC ACTION AND RESULTS

Amid a volatile security situation fraught with logistic constraints, the ICRC adapted its activities to meet the significant humanitarian needs of people affected by armed conflict or other situations of violence in the DRC. In 2010, the delegation extended its coverage in the Kivus and developed its operations in Equateur and northern Province Orientale. The Red Cross Society of the DRC was a key partner for the ICRC in carrying out activities throughout the country, receiving materials and training to reinforce its relief and other assistance capacities, build up its family-links network and bolster its IHL-promotion skills.

In efforts to improve access to and the protection of civilians, the ICRC strengthened dialogue with national and local authorities, the armed forces, armed groups and influential

members of civil society. Delegates also collected allegations of IHL violations and, where necessary and possible, made representations to the relevant groups with a view to preventing their reoccurrence.

To respond to the needs of IDPs and others directly affected by conflict, the ICRC, together with the DRC Red Cross, continued distributing relief goods and food. In more stable areas, they helped longer-term IDPs, returnees and residents start to rebuild their livelihoods, providing farmers with seed and tools and undertaking food- or cash-for-work projects benefiting host communities. In the Kivus, the ICRC helped local associations set up fish nurseries, grow disease-resistant cassava and establish market gardens in areas short of dietary staples. The ICRC and provincial authorities also completed a cattle vaccination campaign in South Kivu to preserve livestock health.

The ICRC worked with rural and urban officials to repair or upgrade water supply systems to improve access to clean water in conflict-affected areas. To complement these efforts, the National Society, supported by a Swedish Red Cross/ICRC project, promoted good hygiene practices in rural communities. Health centres received ICRC training, material and financial support, as did counselling centres offering psychological assistance to victims of sexual violence. The delegation helped set up additional counselling centres in North Kivu following a peak in needs.

Thousands of family members restored and maintained contact through the tracing and RCM services provided by the ICRC and the National Society. Based on the recommendations of an internal review, the delegation stepped up efforts to protect unaccompanied/demobilized children and improve their reintegration into society, including by broadening a network of appropriate host families. It continued to provide children living in transit centres with food, clothes and personal items. Where appropriate, such children were reunited with their families, who often received assistance to ease reintegration.

ICRC delegates visited detainees in places of permanent and temporary detention, providing confidential feedback to the authorities on treatment and living conditions and, when necessary, making recommendations. The ICRC also stepped up its nutritional programme for inmates in six prisons across four provinces, contributing to a rapid decline in malnutrition and mortality rates there. To further reduce health risks, the delegation rehabilitated water, sanitation and kitchen facilities, provided prison health centres and referral hospitals with drugs, medical supplies and training, and gave inmates hygiene items. The ICRC served as a neutral intermediary during the release and handover of nine soldiers and civilians held by armed groups.

Countrywide, the ICRC developed contacts with the authorities to rally their support for IHL. An informal working group of ministerial cabinet members organized by the ICRC contributed to the National Assembly's vote to pass a law implementing the Mine Ban Convention.

The ICRC continued to coordinate its activities with those of Movement partners, UN agencies and other humanitarian actors in fields of common interest, thereby maximizing impact, identifying unmet needs and avoiding duplication.

CIVILIANS

Parties to the conflict called upon to respect and protect civilians

In northern and eastern DRC, civilians continued to suffer the consequences of armed clashes and related insecurity. To help ensure the protection of and respect for civilians, the ICRC expanded its field presence, made contact with new armed groups and strengthened dialogue with weapon bearers. Whenever possible, parties to conflict were reminded, during bilateral discussions, briefings, and presentations, of their responsibilities under IHL

(see *Armed forces and other bearers of weapons*). Where necessary, the relevant authorities and weapon bearers received confidential oral and written representations addressing allegations of IHL violations, including physical and sexual violence, recruitment of child soldiers, looting and attacks on medical services, offering recommendations on how to prevent such abuses.

Vulnerable people provided with relief, livelihood support and improved water supply and sanitation

In Equateur, the Kivus and Province Orientale, recently displaced people, returnees and/or vulnerable host communities benefited from relief and livelihood assistance and longer-term improvements to water supply and sanitation, provided by the ICRC and National Society teams trained and equipped by the ICRC.

Families uprooted by violence continued to receive emergency relief distributions. Thus, over 151,000 IDPs (30,200 households) received essential household items and 91,500 got one-off food rations, while more than 16,300 benefited from improved access to water and sanitation, including through water trucked-in. Over 55,416 farmers and their families, in total 277,080 people, got seed and tools to kick-start farming activities, 50,150 of whom lived on ICRC food rations while waiting for their harvests. Vulnerable workers and their families received cash (4,289 people) for repairing rural roads linking villages to markets, rebuilding houses or rehabilitating an airstrip in Equateur to improve access of humanitarian aid.

In more stable areas of the Kivus, 48,697 people (9,721 households) began rebuilding their livelihoods with ICRC technical and financial support. State agricultural agencies provided trained members of local associations with disease-resistant cassava cuttings. Fishing associations and market gardeners boosted production of dietary staples and generated income for their families. Victims of sexual violence (see below) and disabled patients (see *Wounded and sick*) took part in micro-economic initiatives to help them and their families earn a living. In South Kivu, nearly 57,000 cattle were vaccinated against disease to preserve the economic security of 90,655 people (18,131 households). The vaccinations, carried out in partnership with the provincial authorities, completed the second round of a livestock vaccination campaign begun in 2009.

In the Kivus and Province Orientale, rural communities worked alongside the ICRC to upgrade and maintain their water systems, reducing health risks for over 182,800 people. This included some 30,850 conflict-affected villagers in South Kivu who built their own latrines and learnt good hygiene practices through a campaign carried out by the DRC Red Cross and supported by a Swedish Red Cross/ICRC project. In two cities, the water boards continued to renovate their water networks, with ICRC technical input, benefiting some 30,000 residents.

Civilians in the Kivus, including victims of sexual violence, receive health care

Over 57,800 vulnerable patients and mothers and children in conflict-affected areas sought medical attention and vaccination in 12 health centres receiving regular ICRC support. The centres were stocked with ICRC medical supplies and staffed with health

personnel paid and trained by the ICRC in coordination with the Ministry of Health. Rehabilitation work at five of them improved inpatients' accommodation (see *Wounded and sick*). Following influxes of casualties or looting, 27 other centres received ad hoc deliveries of basic medical supplies and equipment.

Victims of sexual violence received psychological support at 37 counselling centres supplied and supported by the ICRC. Women heard about the services offered in such centres during six awareness-raising campaigns, which also aimed to prevent social stigma linked to sexual assault. In response to a peak in needs in North Kivu in August, five temporary counselling centres were set up and supported. Another three improved their services following ICRC rehabilitation work, helping them accommodate some 240 people.

Families reconnect and unaccompanied/demobilized children are cared for

People separated from their families, including unaccompanied/demobilized children, restored and maintained contact with their relatives through services run by the ICRC and an extensive network of National Society personnel trained and supported by the ICRC. To reinforce the family-links network, six new National Society tracing posts opened in northern Equateur and three in Province Orientale.

To reduce the risk of people going unaccounted for, representatives of the Ministries of Defence, Health and Interior and members of National Society emergency response units attended a three-day ICRC seminar on the management of human remains.

Given the high number of unaccompanied/demobilized children, selected communities and the ICRC made preparations, based on an internal review conducted at end-2009 and a survey in 2010, to step up efforts to protect such children and improve their reintegration into society. To better safeguard children still seeking a permanent home, additional host families were identified, and a process was initiated with the National Society to improve the monitoring of such families. With regular ICRC support, two transit centres provided an average of 280 children with food, clothes, hygiene items and medical care, while six other centres received such assistance as needed.

Meanwhile, 1,043 unaccompanied children, including 394 demobilized child soldiers, rejoined their families in the DRC or in neighbouring countries. The families were visited within three months of reunification to monitor the child's welfare and, when needed, were given household items and/or food.

PEOPLE DEPRIVED OF THEIR FREEDOM

People held in permanent or temporary detention, some in places to which the ICRC gained access during the year, received visits, according to the organization's standard procedures, enabling delegates, to monitor their treatment and living conditions, including respect for their judicial guarantees. Among those visited were people in the MONUSCO-run Demobilization, Disarmament, Repatriation, Reintegration and Resettlement process and awaiting their transfer to the authorities concerned. Those detained in connection with armed conflict or for other reasons of State security were followed up individually. Particular attention was also paid to the situation of vulnerable detainees, such as children, women and foreigners. After the visits, the detaining authorities received confidential feedback on the ICRC's findings and, where relevant, recommendations. Through the RCM service, detainees restored and maintained contact with their relatives in the DRC and abroad.

Acceptance of the ICRC as a neutral intermediary facilitated the release and handover to the relevant authorities of nine soldiers and civilians held by armed groups.

Malnourished detainees see improvements in their diets

To counter high malnutrition rates observed in six prisons across the country, in total 3,686 detainees (monthly average: 2,760 detainees) received balanced daily food rations, while kitchens were given firewood to boost their cooking capacities. Additionally, 550 severely malnourished detainees in eight prisons had their rations supplemented with high-energy biscuits. These emergency food measures contributed to a sharp decline in malnutrition and mortality rates in prisons.

In parallel, prison authorities, national and international stakeholders and the ICRC worked together towards sustainable improvements in detainees' food supply, with some encouraging

PEOPLE DEPRIVED OF THEIR FREEDOM	DRC	MONUSCO
ICRC visits		
Detainees visited	14,813	27
Detainees visited and monitored individually	1,723	27
	<i>of whom women</i>	34
	<i>of whom minors</i>	66
Detainees newly registered	1,140	26
	<i>of whom women</i>	29
	<i>of whom minors</i>	62
Number of visits carried out	288	10
Number of places of detention visited	84	3
Restoring family links		
RCMs collected	2,760	
RCMs distributed	1,825	
People to whom a detention attestation was issued	55	

results. For example, a comprehensive ICRC report prompted the Justice Ministry to set up working mechanisms to implement recommendations therein on nutrition, health and judicial guarantees. Following the ICRC's intercession, the authorities in the main prison in Kinshasa significantly increased detainees' food rations. Some 200 inmates in two prisons in Katanga supplemented their diets with food grown through ICRC-supported market gardens, and directors and staff there developed their management skills during two workshops. The provincial authorities in Bas-Congo adopted a plan of action to improve inmates' diets after a two-day workshop on the subject.

Inmates enjoy better access to health care and hygiene

Sick detainees in 11 prison health centres and 2 referral hospitals received treatment thanks to ICRC financial support and a regular supply of medical materials. The relevant national and prison authorities were encouraged to include detainees in national HIV/AIDS, tuberculosis and malaria prevention programmes.

More than 11,300 detainees faced fewer health risks after the ICRC rehabilitated various water, sanitation and cooking facilities. Some 11,000 inmates in 14 prisons also received soap and hygiene items, while prison staff participated in training in waste disposal and cleaning techniques and received the necessary equipment.

WOUNDED AND SICK

Weapon bearers were trained by National Society personnel to provide first aid to people injured during armed clashes (see *Armed forces and other bearers of weapons*).

Some 144 weapon-wounded and other casualty patients, both civilian and military, received medical treatment at three hospitals with the help of drugs, medical supplies, equipment and staff training provided by the ICRC. During influxes of casualties, 28 other hospitals received ad hoc donations of medicines.

Conflict amputees and other physically disabled people had their travel costs and treatment covered by the ICRC at five physical rehabilitation centres located in Bukavu, Goma, Kinshasa (two) and Mbuji Mayi. The centres received basic materials, prosthetic/orthotic components and technical support, including training courses in Bukavu for ten prosthetic/orthotic technicians. As of June, patients at the centres in Bukavu and Goma benefited from the presence of an ICRC physiotherapist, who provided staff with on-the-job training.

Rehabilitation work in hospitals, physical rehabilitation centres and health centres (see *Civilians*) improved the water supply and sanitary facilities for some 280 inpatients.

AUTHORITIES

Parliamentarians, civil servants, national and local government representatives, and diplomats were updated on humanitarian issues and Movement activities during meetings with the ICRC. Similar meetings with provincial authorities contributed to generating grassroots support for the Movement, including safe access for its personnel to people affected by violence.

An informal working group comprising ministerial cabinet members and the ICRC met regularly to discuss ways to advance the ratification of IHL treaties, including the Convention on Certain Conventional Weapons, and their national implementation. These efforts contributed to the National Assembly's vote in October to pass a national law implementing the Mine Ban Convention. The group also lobbied for the adoption of a national law protecting the Movement's emblems.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

Across the country, weapon bearers from all ranks within the armed forces and armed groups, including MONUSCO personnel, participated in briefings and presentations on IHL and the Movement's activities, with the aim of improving respect for civilians and securing Movement workers' access to people in need. Where feasible, they also learnt basic first aid from National Society personnel alongside such events.

In the Kivus, key operational army officers and the ICRC initiated a forum to address general and specific IHL-related concerns. Soldiers participated in discussions on IHL topics, facilitated by DRC military instructors and ICRC delegates using innovative methods, including role-play and focus groups. The DRC army and the ICRC also produced a film for soldiers illustrating appropriate behaviour in conflict situations.

Following training and refresher courses, army instructors carried out their own IHL familiarization and training activities, with ICRC technical support. Instructors at a new school for non-commissioned officers in Bas-Congo, the first of its kind in the DRC, received training organized by the ICRC as part of broader efforts to support the armed forces' reform process.

Police and security agents attended briefings on international human rights law and ICRC detention-related activities, during which they were reminded of their responsibilities in the maintenance of law and order. A working group for security sector reform continued to develop a national curriculum for police training, with ICRC technical expertise.

CIVIL SOCIETY

Public understanding of and support for IHL and the Movement relied on the cooperation of influential members of civil society.

National and international media reported regularly on humanitarian issues and the Movement's activities, drawing on ICRC press releases and publications. Journalists made field trips to observe Movement activities aimed at improving access to water and reconnecting families. Workshops organized for journalists in four provinces expanded and enhanced national media coverage of humanitarian issues. People learnt about IHL and the protection it affords civilians through radio programmes, including a weekly spot broadcast locally in Goma and Kinshasa by the ICRC and trained National Society communication teams.

Community and religious leaders and a human rights NGO in Kinshasa raised their awareness of IHL and the Movement during presentations and briefings, as did MONUSCO civilian staff based in the Kivus and Province Orientale.

To stimulate interest in IHL in academic circles, 21 teams of law students from 7 provinces tested their skills during a pre-selection process for a national IHL moot court competition planned for 2011, the first of its kind in the DRC. In addition, some 1,200 students in Beni, Bukavu, Goma, Kinshasa and Lubumbashi participated in ICRC-organized presentations on IHL.

RED CROSS AND RED CRESCENT MOVEMENT

The DRC Red Cross worked with the ICRC in providing relief and family-links services and promoting IHL (see above). With ICRC technical and financial support, it responded effectively to a number of accidents and emergencies. For example, volunteers evacuated the wounded and assisted communities affected by natural disasters such as a volcanic eruption, a mudslide and floods. Red Cross personnel took care of the dead after a fuel tanker exploded in South Kivu, killing over 220 bystanders, and following armed clashes in Equateur and Province Orientale (see *Civilians*).

To strengthen management capacity, national and provincial Red Cross leaders attended an administration and finance workshop. New offices were built in Walikale (North Kivu), Bunia and Dungu (Province Orientale). Communication personnel produced and distributed material to raise awareness of IHL and drafted internal regulations and policies. With ICRC sponsorship, a new legal adviser participated in an international IHL meeting abroad.

Movement partners met regularly in Kinshasa and in the field to coordinate their activities.

ERITREA



EXPENDITURE (IN KCHF)

Protection	1,194
Assistance	3,093
Prevention	383
Cooperation with National Societies	251
General	-

► **4,922**

of which: Overheads 300

IMPLEMENTATION RATE

Expenditure/yearly budget	104%
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PERSONNEL

Expatriates	7
National staff (daily workers not included)	43

KEY POINTS

In 2010, the ICRC:

- helped some 94,000 struggling people living in communities along the border with Ethiopia bolster their livelihoods by hiring tractors to plough their fields, providing them with the means to grow vegetables, and treating livestock
- in cooperation with the Eritrean water authorities, built and repaired solar-powered water supply systems, improving access to clean water for 23,471 villagers
- assisted people of Ethiopian origin in renewing their Eritrean residence permits, or in paying administration fees prior to repatriation
- through dialogue, sought to persuade the authorities to lift government restrictions on ICRC visits to detainees of Ethiopian origin, including POWs and former POWs
- with the Red Cross Society of Eritrea, enabled relatives separated by the sealed Eritrea-Ethiopia border to exchange news through the family-links network

The ICRC opened a delegation in Eritrea in 1998 in the context of the international armed conflict between Eritrea and Ethiopia and is responding to the needs remaining from the two-year war. Its priority is to protect and assist the population displaced, detained or otherwise affected by the conflict, ensuring compliance with IHL with regard to any persons still protected by the Third and Fourth Geneva Conventions. The ICRC also supports the development of the Red Cross Society of Eritrea.

CONTEXT

During June, Eritrea withdrew its troops from the disputed border region with Djibouti after the two countries signed an accord seeking to normalize relations and establish a mechanism for resolving the dispute. Troops from Qatar, which had mediated talks leading to the accord, were subsequently stationed in the disputed region.

The Eritrean government subscribed to the Istanbul Declaration, reaffirming the commitment of the international community to work closely with Somalia's transitional federal government.

Tensions remained between Eritrea and Ethiopia over their common border, which had still to be physically demarcated some 10 years after the end of the two-year international armed conflict. Both countries maintained a strong military presence at the border. In regions adjoining Ethiopia, where thousands of civilians had returned or been resettled by Eritrea's authorities since the end of the conflict, the effects of the past hostilities on infrastructure and livelihoods continued to be felt.

MAIN FIGURES AND INDICATORS

PROTECTION

CIVILIANS (residents, IDPs, returnees, etc.)			
Red Cross messages	Total	UAMs/SCs*	
RCMs collected	4,701		
RCMs distributed	5,209		
Tracing requests, including cases of missing persons	Total	Women	Minors
People for whom a tracing request was newly registered	33	10	11
People located (tracing cases closed positively)	28		
<i>including people for whom tracing requests were registered by another delegation</i>	12		
Tracing cases still being handled at 31 December 2010 (people)	119	15	18
UAMs/SCs,* including unaccompanied demobilized child soldiers	Total	Girls	Demobilized children
UAMs/SCs newly registered by the ICRC/National Society	5	4	
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2010	3	2	
Documents			
People to whom travel documents were issued	3		
Official documents relayed between family members across borders/front lines	13		

* Unaccompanied minors/separated children

ASSISTANCE

CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security, water and habitat		Total	Women	Children
Food	Beneficiaries	98	20%	60%
	<i>of whom IDPs</i>	98		
Essential household items	Beneficiaries	11,735	20%	60%
	<i>of whom IDPs</i>	60		
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries	94,305	20%	60%
	<i>of whom IDPs</i>	20,747		
Water and habitat activities	Beneficiaries	23,471	55%	51%

ICRC ACTION AND RESULTS

Amid restrictions on movement, access and fuel imposed by the Eritrean government in recent years, the ICRC pursued dialogue with the authorities on maintaining its access to vulnerable communities and individuals. Resources were focused, as far as possible, on assisting communities in southern border regions most affected by past armed conflict, although from March the ICRC suspended activities in one of these regions, Debub, following the imposition of further restrictions by the local authorities.

In Gash Barka and Southern Red Sea State, meanwhile, the ICRC continued throughout the year to help struggling rural communities rebuild their livelihoods and access dependable supplies of clean water. From April, ICRC expatriate staff, who had been

restricted in their movements beyond Asmara for more than a year, received a total of eight travel permits from the authorities to visit these two regions. The permits enabled the ICRC to monitor ongoing projects – implemented by national field officers – and to assess the need for and develop new ones.

The majority of beneficiaries of ICRC assistance were households headed by women, as large numbers of men had been killed or disabled during the war with Ethiopia or called up for military service. The ICRC helped families hire tractors to plough fields, treated thousands of livestock against parasite infestation, and gave the worst-off households the resources to plant and maintain their own market gardens. Communities, local authorities and the ICRC also worked together to install or renovate 15 solar-powered water supply systems. Local authorities were trained to maintain them.

The Eritrean authorities had withdrawn authorization for the ICRC to assist in the voluntary repatriation of civilians in March 2009. Within the constraints, the ICRC did its best to continue monitoring the situation of the Ethiopian community living in Eritrea to ensure that their rights under the 1949 Geneva Conventions were respected, including voluntary repatriation in humane conditions. The ICRC also reminded the Eritrean government of these obligations. People of Ethiopian origin received ICRC assistance to pay fees prior to repatriation, or to renew residence permits. Meanwhile, relatives separated by the closed Eritrea-Ethiopia border were still able to communicate through the family-links service, operated by the Red Cross Society of Eritrea with ICRC support. ICRC national staff on the ground followed up tracing requests.

Despite repeated requests to the authorities, the ICRC was not allowed to resume visits to detainees of Ethiopian origin, including POWs and former POWs. The authorities had withdrawn authorization for such visits in 2009. The ICRC was also awaiting a reply from the Eritrean government to requests for any information it had about 19 Djiboutian soldiers reported by their government as missing after the Djibouti-Eritrea hostilities in June 2008.

Given the restrictions on its activities introduced by the Eritrean government, the ICRC made every effort to strengthen dialogue with the authorities. It sought to persuade them that it was in Eritrea's interest to recognize that the 1949 Geneva Conventions applied to the Eritrean context. The ICRC worked to garner interest in IHL and the Movement among the general public, including young people associated with the National Union of Eritrean Youth and Students, journalists and academics.

The Eritrean Red Cross, with ICRC funding, training and expertise, continued to develop its family-links network, first-aid programme, and the promotion of IHL and the Fundamental Principles. Implementation of activities was delayed, however, as the Eritrean Red Cross had still not recovered its human resources capacities following the 2007–08 suspension of its activities.

CIVILIANS

Villagers draw water from solar-powered systems

Women and children in rural villages no longer had to walk long distances to fetch clean water, after the local authorities, communities and the ICRC together installed five new solar-powered water supply systems, completed the installation of four others begun in previous years, and repaired/maintained six more. The systems, which provided 23,471 people with 20 litres of water per person per day, ensured a reliable water supply in a country where fuel shortages remained widespread. The installation of new systems – three in Southern Red Sea State and two in Gash Barka – had not been foreseen in the original 2010 budget. However, the opportunity to construct these facilities arose after the Eritrean authorities granted an ICRC engineer access to both regions (see *ICRC action and results*).

To ensure the sustainability of the systems, some 80 water authority employees learnt how to tackle potential technical problems during five training courses in hydrology, hydraulics and solar technology. In September, after completion of the final session, the water system that had been used for demonstration purposes was donated to the health centre in Asmara where training had taken place. Materials and spare parts from training sessions were donated to five water authorities.

Rural families secure livelihoods and shelter

In regions adjoining Ethiopia, rural families whose livelihoods had been disrupted by past armed conflict and ongoing border tensions gained a more secure economic future with ICRC support.

In Gash Barka, 14,840 people (2,968 households) who had been resettled or returned to their villages used tractors and drivers hired by the ICRC to plough fields prior to the planting season. The project was designed to compensate for the lack of potential labourers in the region, arising mainly from the absence of adult males in many households (see *ICRC action and results*). The assistance, combined with abundant rains, contributed to a good harvest, with average production of sorghum per hectare more than doubling in comparison with the previous two years.

In Gash Barka and, for the first time, the Southern Red Sea State, 78,240 vulnerable pastoralists (15,648 households) raised stronger herds of livestock following an ICRC parasite-control campaign. Following the suspension of ICRC operations in Debub, resources that had been allocated for the campaign in this region were transferred to Gash Barka and Southern Red Sea State, resulting in the treatment of some 500,000 livestock. Before and after the rainy season, livestock received treatment to protect them against internal and external parasites. Infestation rates subsequently dropped from more than 76% to just over 1%, according to laboratory tests. By increasing resistance to disease, treatment improved livestock fertility and productivity. With fewer sick grazing animals, contamination of pasture from parasite eggs also decreased.

A total of 800 struggling people (160 families) in Gash Barka enjoyed a more varied diet and a surplus of food to sell at market after creating their own vegetable gardens. They did so with the aid of seed, jerrycans, hoes, and pedal-operated water pumps enabling them to irrigate plots in a region where fuel shortages precluded the use of machine-operated pumps. Limited access to certain areas, combined with staff shortages and difficulties in mobilizing interest within some target communities, meant that distributions did not take place on the scale originally planned. However, a number of other rural communities expressed interest in participating in future projects of this kind.

In an ongoing project started in 2006, 425 people (85 households) received donkeys or goats to improve their economic security. Households with donkeys used the time and energy saved fetching water for other productive activities and earned income transporting goods. The goats provided milk and meat and could be sold for cash.

Families in Gash Barka, who had been resettled in areas with insufficient housing, completed their own permanent homes, with the ICRC providing construction materials, technical expertise and funds to hire workers. Construction was originally scheduled for completion by the end of 2009, but delayed mainly because of access restrictions. At the request of the authorities in Gash Barka and Southern Red Sea State, 11,675 people (2,335 households), resettled or relocated in remote areas, received essential items such as tarpaulins and blankets to sustain them in the absence of more permanent forms of shelter.

Struggling Ethiopians receive financial assistance

The ICRC monitored the situation of the Ethiopian community living in Eritrea to ensure that their rights were respected in accordance with IHL.

People of Ethiopian origin continued to be repatriated through Sudan by the Eritrean authorities. The government had withdrawn authorization for the ICRC to assist in the voluntary repatriation of civilians across the border in March 2009. The authorities were reminded by the ICRC of their obligation under IHL to ensure that repatriations were voluntary and carried out in humane conditions.

Especially vulnerable community members – including elderly people, women with children, former detainees, or people with illnesses – received financial assistance from the ICRC in paying administrative and/or transport costs (if they wished to repatriate) or in obtaining residence permits, paying medical bills and meeting accommodation costs (if they wished to remain in Eritrea). Those facing immediate hardship (98 people) received food, and 60 got essential household items.

The issue of Eritrean children who had crossed the border and were living in refugee camps in Ethiopia was discussed by the Eritrean authorities and the ICRC in order to address the possibility of repatriation. Meanwhile, family members separated by the sealed Eritrea-Ethiopia border continued to exchange news through the family-links service, run by the Eritrean Red Cross with ICRC support (see *Red Cross and Red Crescent Movement*). People also had their official documents, usually education certificates, sent across the border by the ICRC so that they could apply for further studies or jobs.

Families still had no news about relatives missing in relation to the 1998–2000 international armed conflict with Ethiopia. The ICRC continued to seek clarification of their fate.

PEOPLE DEPRIVED OF THEIR FREEDOM

Despite repeated written and oral requests, the authorities did not give the ICRC the green light to resume visits to detainees of Ethiopian origin, including POWs and former POWs (see *ICRC action and results*).

Following the border accord between Djibouti and Eritrea (see *Context*), the ICRC renewed requests to the Eritrean authorities

for any information they had about 19 Djiboutian soldiers reported as missing in action by their government after the Eritrea-Djibouti hostilities in June 2008. By year-end, the authorities had still to respond to an ICRC proposal regarding the possible repatriation of a sick Eritrean POW held in Djibouti.

AUTHORITIES

Given the restrictions placed on ICRC activities by the Eritrean government, talks with the authorities were held with the aim of reinforcing trust. Government officials were informed of the neutral, impartial and independent nature of the Movement, its work and mandate. The organization sought to convince the authorities that it was in Eritrea's interest to recognize that the 1949 Geneva Conventions, to which the country acceded in 2000, applied to the Eritrean context, and that the ICRC was therefore mandated, whenever required, to act on behalf of people still affected by the 1998–2000 international armed conflict with Ethiopia and by the border issue with Djibouti.

National authorities, and local officials based in areas where the ICRC was working, including representatives of 40 local authorities in the Southern Red Sea State, learnt more about the Movement's activities through Eritrean Red Cross/ICRC presentations and bulletins.

On World Water Day (22 March), senior government officials, including the Minister of Energy, Water and the Environment, visited an ICRC photo exhibition staged in Asmara, which explained more about the work of the ICRC in providing solar-powered water systems to rural communities in conflict-affected areas.

The delegation maintained regular contacts with international organizations, including UN agencies and the diplomatic community, informing them of ICRC activities via briefings and publications.

CIVIL SOCIETY

Youth organizations, media representatives and academics attended ICRC briefings and read ICRC literature as the organization worked to raise awareness of its mandate and activities and to garner support for the basic principles of IHL.

Some 2,000 people discussed Movement activities and humanitarian issues during a series of presentations organized by the National Union of Eritrean Youth and Students and the ICRC. The Union's magazine, read countrywide, published articles on IHL written by ICRC staff. Around 7,000 newly graduated national service members and their families visited the ICRC stand during a four-day youth festival, staged in Sawa Defence Training Centre in July.

With ICRC sponsorship, a radio journalist from the Eritrean Youth Association travelled to Nairobi, Kenya, for a four-day seminar to learn more about researching and covering humanitarian issues and IHL.

The dean of the College of Arts and Social Sciences and an instructor from the Faculty of Law in Asmara attended briefings on ICRC activities as the delegation sought to restart IHL teaching for higher-education students after a six-year gap.

Wider efforts to raise awareness among the Eritrean public of the Movement's humanitarian work took place on World Red Cross and Red Crescent Day (8 May), when photos illustrating Red Cross activities were displayed on the streets of Asmara. An estimated 10,000 people visited the ICRC stand during the 10-day National Book Fair, staged in the capital.

RED CROSS AND RED CRESCENT MOVEMENT

The Eritrean Red Cross, backed by ICRC funds, materials, training and expertise, continued to build its capacities in restoring family links, first aid, and the promotion of IHL and the Fundamental Principles. However, it had still not recovered its full capacities, especially in terms of human resources, following the suspension of its activities in 2007–08.

Some 150 staff enhanced their expertise in restoring family links, a service for which the Eritrean Red Cross resumed responsibility in 2009, during eight ICRC-run training sessions. To boost their emergency response skills, 177 Red Cross volunteers participated in a relief-management course. Eritrean Red Cross personnel conducted first-aid courses for 983 people, mainly police officers, industrial workers, transport drivers and students, and held briefings on the Movement, its Fundamental Principles and activities for nearly 600 people, including police officers, students and teachers.

With ICRC support, volunteers briefed more than 500 people in local communities, including schoolchildren, on the dangers posed by unexploded mines. During a workshop in December, Eritrean Red Cross and ICRC staff were briefed by representatives of the Eritrean Demining Agency on its activities. Meanwhile, talks continued between the ICRC and the Eritrean Demining Agency with a view to further developing community-based mine-risk education projects in cooperation with the Red Cross Society.

ETHIOPIA



The ICRC has been continuously present in Ethiopia since 1977. Its priority is to protect and assist people detained, displaced or otherwise affected by the 1998–2000 international armed conflict with Eritrea or by other armed conflicts. It helps to preserve the livelihoods of vulnerable communities affected by past conflict, often compounded by natural disasters, and supports physical rehabilitation services. It visits detainees, restores family links, particularly for relatives separated by the closed Eritrea-Ethiopia border, ensuring compliance with IHL with regard to any persons still protected by the Third and Fourth Geneva Conventions. It also supports the Ethiopian Red Cross Society.

EXPENDITURE (IN KCHF)

Protection	1,891
Assistance	4,900
Prevention	2,210
Cooperation with National Societies	883
General	-

► **9,884**

of which: Overheads 603

IMPLEMENTATION RATE

Expenditure/yearly budget	93%
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PERSONNEL

Expatriates	26
National staff (daily workers not included)	138

KEY POINTS

In 2010, the ICRC:

- pursued dialogue with the authorities, aiming to re-establish trust and regain authorization to work in the conflict-affected Somali Regional State and to visit detainees in federally run places of detention
- helped provide access to clean water and sanitation facilities for 140,000 villagers in Tigray and northern Afar and for 7,000 detainees in 3 civil prisons in Tigray
- with the Swedish Red Cross, supported the Ethiopian Red Cross Society in a project to assess and improve the family-links service
- continued to support 7 physical rehabilitation centres, while launching with the Ethiopian authorities a three-year diploma course for prosthetic/orthotic technicians
- generated greater awareness of IHL among regional authorities, police, community leaders, journalists, legal professionals and law students

CONTEXT

Ethiopia's ruling party, the Ethiopian People's Revolutionary Democratic Front, won the general election in May with an overwhelming majority. Unlike 2005, there was no violence afterwards, although some opposition parties and advocacy groups expressed concern about the conduct of the poll.

The non-international armed conflict in the Somali Regional State (SRS) continued throughout the year, despite the signing of peace agreements between the Ethiopian government and two armed groups – the United Western Somali Liberation Front and a break-away faction of the Ogaden National Liberation Front (ONLF). The main group of the ONLF was not party to any agreement, and continued to clash with the Ethiopian National Defence Force (ENDF). There were press reports of casualties on both sides.

Elsewhere in Ethiopia, violence fuelled by a mix of intercommunal and political grievances recurred sporadically, causing casualties and forcing some people to flee their homes. Areas affected included Afar, Gambella, Oromia, and the Southern Nations, Nationalities and Peoples Regional State.

In several regions, including Oromia, flooding, drought and wild-fires displaced civilians and damaged property and land. Food shortages were also reported, although a better harvest of staple crops was forecast at year-end.

The physical demarcation of the Ethiopia-Eritrea border remained stalled, with both countries maintaining a large military presence at their common border. Armed skirmishes, resulting in casualties, were reported on both sides.

MAIN FIGURES AND INDICATORS				
PROTECTION				
CIVILIANS (residents, IDPs, returnees, etc.)				
Red Cross messages		Total	UAMs/SCs*	
RCMs collected		7,429	594	
RCMs distributed		5,481	414	
Tracing requests, including cases of missing persons		Total	Women	Minors
People for whom a tracing request was newly registered		99	22	35
People located (tracing cases closed positively)		73		
<i>including people for whom tracing requests were registered by another delegation</i>		38		
Tracing cases still being handled at 31 December 2010 (people)		356	38	76
Documents				
People to whom travel documents were issued		144		
Official documents relayed between family members across borders/front lines		29		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
ICRC visits		Total	Women	Minors
Detainees visited		7,812		
Detainees visited and monitored individually		92		1
Detainees newly registered		42		1
Number of visits carried out		11		
Number of places of detention visited		7		
Restoring family links		Total		
RCMs collected		24		
RCMs distributed		28		
People to whom a detention attestation was issued		54		

* Unaccompanied minors/separated children

ASSISTANCE				
CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security, water and habitat		Total	Women	Children
Water and habitat activities	Beneficiaries	140,000	25%	50%
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat				
Essential household items	Beneficiaries	8,455		
Water and habitat activities	Beneficiaries	7,000		
WOUNDED AND SICK				
Physical rehabilitation				
Centres supported	Structures	7		
Patients receiving services	Patients	7,985	1,717	1,650
New patients fitted with prostheses	Patients	913	123	70
Prostheses delivered	Units	1,830	239	125
<i>of which for victims of mines or explosive remnants of war</i>	Units	445		
New patients fitted with orthoses	Patients	1,645	452	578
Orthoses delivered	Units	2,874	699	1,191
<i>of which for victims of mines or explosive remnants of war</i>	Units	26		
Crutches delivered	Units	5,043		
Wheelchairs delivered	Units	355		

ICRC ACTION AND RESULTS

ICRC operations in Ethiopia continued on a restricted basis, as the organization sought, during dialogue with the authorities, to re-establish trust and resume former levels of activity. Talks centred on two issues: renewed ICRC access to the conflict-affected SRS and the resumption of visits to security detainees held under federal jurisdiction, neither of which had been authorized since mid-2007.

Meanwhile, ICRC protection and assistance activities focused mainly on the northern border regions of Tigray and Afar, the areas worst hit by the 1998–2000 international armed conflict between Ethiopia and Eritrea and by ongoing border tensions. The ICRC worked with local water authorities and rural communities to repair water pumps while constructing or upgrading bore-holes, wells, springs and reservoirs, thus reducing health risks for 59,000 civilians and saving women and children the daily trek to collect water. Together with the Ethiopian Red Cross Society, the ICRC installed hundreds of latrines and conducted workshops on good hygiene practices, benefiting 81,000 people. These projects were designed to improve health levels in regions prone to water-borne diseases.

Some 7,000 detainees in three civil prisons in Tigray had improved water and sanitation facilities after the ICRC worked with the authorities to carry out infrastructural improvements, also providing maintenance training to prison managers and technical staff in Tigray and northern Afar. In both these regions, the ICRC visited detainees of Eritrean origin held in regional facilities, monitoring general detention conditions and, where necessary, making confidential representations to the authorities. Detainees, both Eritrean and Ethiopian, received essential household and hygiene items as needed.

Family members dispersed by conflict, mainly Ethiopian and Eritrean civilians separated by the sealed border, exchanged news through the family-links service. The ICRC, together with the Swedish Red Cross, supported the National Society as it assessed the service at branch level across Ethiopia. The aim was to identify the needs of the population in different regions, then reorient and strengthen the network accordingly.

Seven physical rehabilitation centres for people with disabilities, including the war-disabled, continued to receive ICRC support in the form of funding, materials, on-the-job supervision and training. Following the signing of an agreement with the federal authorities in late 2009, the ICRC began teaching a three-year diploma course for prosthetic/orthotic technicians in Addis Ababa, with international certification. The course, attended by 25 personnel, was intended to improve the scope and quality of services in a country where limited facilities and relatively small numbers of trained staff struggled to cope with the demand for rehabilitative care.

Another priority was to raise awareness of and support for IHL, the Movement and its neutral, impartial and independent stance among the regional authorities, the police and influential sectors

of civil society. With ICRC input, the police progressed towards integrating international human rights law and humanitarian principles into training, and IHL was incorporated into a new, standard public international law degree in universities. Over 500 legal professionals, including judges, learnt more about IHL during two ICRC-run courses.

Backed up by ICRC funds, materials and technical support, the Ethiopian Red Cross continued to build its capacities, focusing on the provision of emergency assistance and the promotion of IHL, in addition to running the family-links network.

CIVILIANS

Dialogue maintained over renewed access to the SRS

The ICRC remained concerned by reports of IHL violations committed in the SRS. However, the organization was unable to resume its activities there, despite repeated representations to the authorities, and so had no first-hand knowledge of the situation on the ground. The ICRC was carrying out its humanitarian activities in the SRS until 2007, when it was expelled from the region by the Ethiopian authorities and accused by them of supporting armed groups, an allegation it strongly denied. During 2010, the ICRC pursued a dialogue with the authorities with a view to clarifying these accusations, re-establishing trust and regaining access to protect and assist conflict-affected populations.

Repatriated Ethiopians receive assistance

People of Ethiopian origin repatriated from Eritrea via Sudan received upon arrival food, blankets and hygiene items provided by National Society personnel with ICRC support. Following consultations with the ICRC, the Ethiopian authorities allocated funds to assist recently repatriated people, subsequently taking over the provision of food. The ICRC continued to monitor the situation, to the extent feasible, to ensure that people were repatriated voluntarily and in accordance with IHL.

Separated families exchange news

Ethiopian and Eritrean civilians separated by the sealed border, refugees, many from Eritrea and Somalia, and a number of Eritrean children who had crossed the border and were living in Ethiopian refugee camps continued to restore contact and/or exchange news with relatives through the family-links service. Eritrean nationals who had studied in Ethiopia before the armed conflict and subsequently returned home, received official documents, mostly education certificates, with ICRC assistance. These allowed them to apply for further studies or jobs. With a view to improving the scope and quality of the service, the Ethiopian Red Cross, supported by the Swedish Red Cross and the ICRC, assessed the family-links needs of different communities across the country, identifying areas where services might require strengthening.

Families awaiting information about relatives reportedly missing in relation to the 1998–2000 war with Eritrea were contacted by the ICRC to respond to their economic, legal and psychological needs. To help families with a missing relative, plans were

established for a number of small-scale economic initiatives, including grants of goats and poultry, to be implemented in 2011 by the National Society with ICRC support.

Victims of drought, flood and violence receive emergency relief

People in violence-prone regions further destabilized by natural disaster received shelter materials, essential household items and high-calorie biscuits from the National Society and the ICRC, to help them through the immediate period of crisis. In Oromia, for example, where rivers overflowed banks and inundated villages, displaced people received items including blankets, sleeping mats and soap. The ICRC also provided Movement partners with logistical support and trucks to distribute food, medicine and livelihood support to thousands more people affected by drought, flooding and wildfires.

Patients wounded during episodes of violence in Afar were treated at Dubti hospital with medical supplies provided by the ICRC.

Rural communities access clean water and sanitation facilities

Some 57,000 people in the border regions of Tigray and northern Afar faced fewer health risks after local authorities, communities and the ICRC repaired around 100 hand pumps and upgraded springs and reservoirs. With ICRC support, 2,000 people in these areas benefited from the construction of 5 new water points in the form of boreholes and hand-dug wells, followed by technical training for communities to ensure adequate maintenance. These measures ensured women and children no longer had to walk for hours each day to fetch water from open wells, which could be polluted, or from rivers that often dried up during the dry season.

In areas where unsafe water sources and inadequate sanitation facilities had made acute diarrhoea a perennial problem, villagers worked with the health authorities and the ICRC to install hundreds of latrines. Alongside this, communities learnt more about reducing the risks of illness through good hygiene practices during a series of workshops conducted by the ICRC. Some 81,000 people benefited from these projects.

PEOPLE DEPRIVED OF THEIR FREEDOM

People continued to be detained in Ethiopia for reasons of State security. Those detainees did not receive visits from ICRC delegates, however, because the government continued to deny the organization access to the SRS and to federally run places of detention where most security detainees were held (authorization to visit such facilities had been withdrawn in stages between 2004 and 2007). Dialogue was pursued with the authorities with the aim of obtaining access to all detainees within the ICRC's purview, including any POWs of Eritrean origin.

Given the access restrictions, the ICRC focused on visiting detainees of Eritrean origin and monitoring general conditions in regionally run detention centres in Tigray and northern Afar, according

to its standard procedures. The authorities received confidential feedback on the ICRC's findings and, where necessary, recommendations for improvements. A total of 7,812 detainees were visited, 92 monitored individually and 42 newly registered, during visits by the ICRC. Detainees also used the RCM service to contact or stay in touch with relatives.

Some 2,000 detainees in three civil prisons in Tigray gained access to cleaner and more reliable water and sanitation facilities after the ICRC helped the authorities upgrade infrastructure – including septic tanks, latrines, water reservoirs and showers – and conducted an assessment to identify potential future projects. Female detainees in one of the prisons benefited from renovations to their cell block. To reinforce the authorities' efforts to improve detention conditions for 7,000 detainees, 20 managers and technical staff working in prisons in Tigray and northern Afar improved their knowledge of infrastructure maintenance during a three-day workshop run by the regional prison administrations and the ICRC. The workshop included a tour and assessment of living conditions in a prison.

More than 8,450 detainees in Tigray and northern Afar received blankets, hygiene items, education materials and leisure items during visits by ICRC delegates. Some of the detainees were people of Eritrean origin, without family members living nearby who could provide them with the necessities. Meanwhile, the ICRC provided blankets, mats, jerrycans and kitchen utensils to detainees left without shelter following the structural collapse of a detention centre in Oromia.

WOUNDED AND SICK

More than 7,980 disabled patients, many of whom had been injured during armed conflict or episodes of violence, underwent treatment at seven physical rehabilitation centres, which continued to receive ICRC support in the form of funding, materials, equipment, on-the-job supervision and training. Four of the centres had ICRC specialists on staff full-time, while the other three received supervisory visits.

In a country where thousands of people had conflict-related disabilities, and where existing physical rehabilitation services required upgrading, staff at every centre, together with national and local authorities, participated in ICRC initiatives designed to ensure the services were sustainable in the long term. In 2010, Ethiopia ratified the UN Convention on the Rights of Persons with Disabilities. With ICRC input, the government further developed a national plan of action to upgrade physical rehabilitation services.

Key staff at all the centres were joined by a range of national and regional government officials at the annual planning seminar, organized by the ICRC. A central issue discussed was how to retain existing staff. To help boost the pool of skilled personnel, 25 technicians began an internationally recognized three-year diploma course in prosthetics/orthotics in Addis Ababa, taught by the ICRC. The course started in March, following the signing

of an agreement between the federal authorities and the ICRC in late 2009. In another new initiative, all the ICRC-supported centres began assembling wheelchairs for patients, in addition to the production and fitting of prostheses and orthoses.

AUTHORITIES

By year-end, the ICRC had not received authorization to resume activities in the SRS or visits to security detainees under federal government jurisdiction (see *Civilians* and *People deprived of their freedom*). Following the general election, these issues were raised again during meetings between government officials and the ICRC. Talks were set to continue in 2011.

In a project designed to build awareness and grassroots support for IHL and the mandate and activities of the Movement, more than 425 regional government officials in regions prone to violence and ethnic tensions participated in presentations given jointly by the National Society and the ICRC. Almost 50 officials from various federal government ministries participated in a day-long IHL seminar. The ICRC did not pursue questions of IHL implementation with the authorities as their attention was focused on other priorities.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

During briefing sessions, more than 400 officers from the ENDF learnt more about IHL and the Movement, many of them prior to their deployment on peacekeeping missions to Darfur, Sudan, and Liberia. Otherwise, the ENDF, which had halted cooperation with the ICRC following the expulsion of the organization from the SRS in 2007, decided to leave on hold plans to cooperate with the ICRC in reinforcing the integration of IHL into training.

The police continued to incorporate international human rights law and humanitarian principles into doctrine, training and operations, although progress was slowed somewhat by preparations for the national election. More than 500 police personnel – including riot control and “anti-terrorism” officers – participated in 12 events on international human rights law and humanitarian principles, organized jointly by training establishments and the ICRC. Female officers also attended specialist courses. Seven police training centres were better equipped to teach humanitarian principles after receiving training materials from the ICRC.

CIVIL SOCIETY

More than 450 community elders and religious leaders in regions prone to violence and ethnic tensions enhanced their awareness of IHL and the work and mandate of the Movement during presentations run jointly by the National Society and the ICRC.

The Ethiopian media regularly reported on ICRC activities in Ethiopia, drawing on ICRC press releases and newsletters.

More than 120 journalists working in Afar and the eastern areas of Dire Dawa, Hararghe and Oromia improved their skills in humanitarian reporting and their grasp of IHL during a two-day ICRC workshop in Harar city.

More than 500 judges and other legal professionals attended 2 ICRC-run seminars on IHL. With ICRC input, IHL was included as an elective course in Ethiopia’s new, standardized public international law degree. IHL research in academia received a potential boost when 720 law students at four universities – Jimma, Bahir Dar, Gondar and Mekele – participated in half-day IHL seminars organized by the ICRC. A student from Mekele won third prize in the ICRC’s IHL essay competition for the region, while three students from Gondar University participated in a regional IHL moot court competition. At the request of Gondar University’s law faculty, the ICRC donated the texts of IHL treaties and books to its library. To further enhance IHL teaching, two lecturers from Bahir Dar and Jimma Universities attended a ten-day IHL training course abroad.

RED CROSS AND RED CRESCENT MOVEMENT

The Ethiopian Red Cross worked with the ICRC in assisting struggling communities in violence-affected regions, running the family-links service (see *Civilians*) and promoting IHL and humanitarian principles (see *Authorities* and *Civil society*).

In addition, the National Society received ICRC funds, training, expertise and logistics back-up to develop its management, infrastructure and skills in these areas. For example, key headquarters and branch personnel running the family-links service and IHL promotional activities had their salaries covered by the ICRC. Staff at four branches also received technical support during monitoring visits by joint National Society/ICRC teams.

With ICRC support, some 70 National Society personnel from 8 branches improved their tracing skills at a workshop run by the Ethiopian Red Cross. In case of violence during April’s election, the Ethiopian Red Cross and the ICRC prepared a contingency plan, during which 52 National Society volunteers were trained to train others as ambulance attendants and in first aid. Subsequently, more than 600 volunteers received training as ambulance attendants, and 525 underwent training in first aid. Some 300 detainees in 10 detention centres also learnt first-aid skills.

On World Red Cross and Red Crescent Day (8 May), 13 National Society branches held events, including round-table discussions, to generate political and public support and funding for the Movement and to recruit volunteers. Movement components met regularly to coordinate activities.

AFRICAN UNION



The ICRC's delegation to the African Union (AU) aims to achieve better understanding and wider acceptance of the ICRC within the AU Commission and other AU bodies. In its capacity as official observer to the AU, it works with AU member States to draw attention to problems requiring humanitarian action, to promote greater recognition and much wider implementation of IHL throughout Africa and to raise awareness of the ICRC's role and activities. It also endeavours to build strong relations with AU-accredited inter-governmental organizations, NGOs and UN agencies.

EXPENDITURE (IN KCHF)

See Ethiopia

IMPLEMENTATION RATE

See Ethiopia

PERSONNEL

See Ethiopia

KEY POINTS

In 2010, the ICRC:

- ▶ expressed readiness to support the African Union (AU) in implementing the AU Convention on IDPs
- ▶ with the AU Peace and Security Council and the AU Panel of the Wise, considered ways to enhance the protection of conflict-affected women and children in Africa
- ▶ contributed to an international symposium on AU draft guidelines on the protection of civilians during peacekeeping operations
- ▶ during monthly meetings, raised and discussed humanitarian concerns with the president of the Peace and Security Council
- ▶ through a legal expert seconded to the Peace and Security Department, helped the AU Commission integrate IHL into AU policies and activities
- ▶ in Addis Ababa, opened a documentation centre on humanitarian studies

CONTEXT

The resolution of armed conflicts and other situations of violence in Africa, many falling within the ICRC's sphere of operations, remained a pressing concern for the African Union (AU) in 2010.

The AU continued to conduct two peacekeeping operations on the continent: one in Somalia, where it agreed to increase from 8,000 to 12,000 the number of troops deployed; the other in Darfur, Sudan, as part of a joint AU/UN force. To support its peacekeeping operations, the AU continued to work towards the formalization of an operational framework for its African Standby Force.

Elsewhere, the AU addressed developments in Guinea and Madagascar following changes of government it deemed unconstitutional. In Guinea, AU mediation efforts helped pave the way for the transitional government to organize democratic elections, leading to the lifting of AU sanctions. In Madagascar, the AU adopted sanctions against the country's *de facto* authorities pending certain constitutional changes. Niger's AU membership was suspended following a military takeover in February. In December, the AU participated in mediation efforts in Côte d'Ivoire, where contested election results led to civil disturbances.

ICRC ACTION AND RESULTS

To complement regional efforts to protect and assist victims of armed conflict and other situations of violence in Africa, the ICRC delegation maintained its focus in 2010 on enhancing awareness of IHL among AU staff and member States.

The AU's Political Affairs Department and the ICRC discussed ways to advance implementation of the AU Convention on IDPs, adopted at a special summit in Kampala, Uganda, in 2009. To this end, they agreed to work together to promote the signing, ratification and national implementation of the convention by member States.

The particular problems faced by conflict-affected women and children, and the need to enhance their protection through increased respect for IHL, formed the basis of discussions between members of the AU Peace and Security Council and ICRC representatives. The ICRC also contributed to a study on this topic undertaken by the AU Panel of the Wise.

The protection of civilians in general during peacekeeping operations remained an important issue and was the theme of an AU-organized symposium attended by international organizations, including the ICRC. Meanwhile, an ICRC legal expert, seconded to the AU Peace and Security Department, provided the AU Commission with training in IHL and support and advice in incorporating IHL into the doctrine and operating procedures of the African Standby Force, which undertook a command post exercise in November. The ICRC also helped develop draft guidelines on the protection of civilians during AU peacekeeping operations.

In regular meetings with AU officials, representatives of member States and other stakeholders, the ICRC shared its legal and operational expertise, thereby enhancing understanding of its mandate and facilitating the integration of IHL into AU activities and policies. The opening in Addis Ababa of an ICRC documentation centre on humanitarian studies increased the availability of relevant information.

The ICRC also forged closer links and enhanced humanitarian coordination with NGOs and international organizations, including UN agencies represented in Addis Ababa, while continuing to support focal points for humanitarian diplomacy in the various ICRC delegations in Africa.

AUTHORITIES

During monthly meetings, the president of the AU Peace and Security Council and the ICRC discussed humanitarian concerns. Senior staff at the AU Commission also met regularly with the ICRC, which attended statutory meetings of the AU Assembly (including its 14th and 15th sessions), meetings of the AU Executive Council, special sessions of the AU Peace and Security Council, and the deliberations of African governmental representatives dealing with IDP issues. These meetings provided the ICRC with opportunities to promote IHL, deepen its understanding of developments within the AU and hold bilateral discussions with national and regional decision-makers and stakeholders to bolster support for its operations in Africa.

Progress made in efforts to address plight of IDPs

With input from the ICRC and other partners, the AU Division of Humanitarian Affairs, Refugees and Displaced Persons (part of the Political Affairs Department) worked with AU member States, experts and governmental representatives dealing with IDP issues on finalizing the draft action plan to implement the outcomes of the 2009 AU Special Summit on Refugees, Returnees and IDPs. The action plan, endorsed by heads of State at the AU ordinary summit held in July 2009 in Kampala, provided a framework for implementing the AU Convention on IDPs. During discussions on the action plan, participants agreed on the importance of promoting the signing, ratification and national implementation of the convention.

Upon request, the ICRC provided the AU's Division of Humanitarian Affairs, Refugees and Displaced Persons with statistical data on its work with IDPs in Africa to accompany a report by the Permanent Representatives' Committee's Sub-committee on Refugees, Returnees and IDPs. In reviewing the 2010 cooperation programme with its partners, the division was able to take account of ICRC proposals and recommendations. The ICRC also provided comments on a draft document produced in support of the African Humanitarian Policy Framework of the AU.

Protection of conflict-affected women and children discussed

In March, during an ICRC presentation at an AU Peace and Security Council special session on women and children in armed conflict, participating members of the Council, UN agencies and

the NGO Femmes Africa Solidarité learnt about the protection afforded civilians under general and specific IHL provisions and the ICRC's efforts to ensure that these were respected by weapon bearers. While conducting a study on this theme, the AU Panel of the Wise sought and received input from the ICRC, which later provided feedback on the draft report.

At a special session devoted to the issue of violence against children, the African Committee of Experts on the Rights and Welfare of the Child was briefed on the ICRC's mandate to protect children in armed conflict and other situations of violence and received the latest ICRC publication on children in war.

AU develops new guidelines focusing on the protection of civilians during peacekeeping missions

The protection of civilians in conflict zones was the central theme of a symposium organized by the AU Commission with the support of the Australian government and attended by 146 representatives of international organizations, including the European Union, UN agencies and the ICRC. In examining AU draft guidelines for the protection of civilians during peacekeeping missions, participants heard comments and proposals contributed by the ICRC.

At the request of the AU Peace and Security Department, an ICRC-seconded legal expert helped incorporate IHL into the activities of its different divisions, with a particular focus on the development of an operational framework for the African Standby Force. While preparing for operational readiness, culminating in a command post exercise in Addis Ababa in November, the Standby Force received ICRC training in IHL, together with feedback on a document outlining proposed standard operating procedures. The ICRC also provided IHL-related advice on a range of AU initiatives dealing with security issues such as "terrorism", the proliferation of small arms and light weapons, and security sector reform. Following their 2009 meeting in Geneva, Switzerland, on early crisis warnings, senior staff from the AU "situation room" and the ICRC discussed ways of establishing an information-sharing system between operational staff of the two organizations.

Understanding and coordination of humanitarian activities enhanced

In April, the AU Peace and Security Council heard an address by the ICRC president, Jakob Kellenberger. He welcomed the adoption of the AU Convention on IDPs, stressing the importance of its implementation at national level, and of initiatives to better protect women and children in armed conflict. Issues highlighted by the president included the security risks faced by humanitarian organizations in accessing conflict victims and the importance of safeguarding neutral, impartial and independent humanitarian action. The chairperson of the AU Commission and other senior officials discussed ICRC operations and humanitarian challenges in Africa with the ICRC president. AU staff and member States regularly received documents promoting IHL and ICRC activities in Africa, a process enhanced by the opening of an ICRC documentation centre on humanitarian studies in Addis Ababa in April. Contact was established with the president of the new AU Commission on International Law.

Working with other AU bodies such as the African Peer Review Mechanism and the Pan-African Parliament, the ICRC monitored humanitarian and legal developments across Africa, strengthening contacts through its participation in events such as the 33rd Conference of the African Parliamentary Union in Malabo, Equatorial Guinea, and the 48th Session of the African Commission on Human and Peoples' Rights in Banjul, Gambia. Authorities in the United Republic of Tanzania, meanwhile, received ICRC input at a ministerial meeting held to discuss African-Japanese development cooperation.

Through workshops and newsletters, focal points dealing with humanitarian diplomacy in the ICRC's various delegations across Africa – notably those working with regional economic communities – continued to benefit from the support of the ICRC delegation to the AU. The latter also maintained regular contact with NGOs and international organizations, including UN agencies represented in Addis Ababa, in order to enhance levels of coordination.

CIVIL SOCIETY

NGOs, think-tanks and the ICRC developed their working relationships and coordination in relation to humanitarian issues in Africa. Civil society representatives expressed their interest in humanitarian studies by attending the launch of the ICRC's documentation centre (see *Authorities*), and in turn invited the ICRC to their events to discuss humanitarian aspects of topics such as the privatization of the security sector, developing relationships between Africa and China, and the US Africa Command, the organization responsible for US military relations with African countries.

To mark Africa Day (25 May) and the UN-organized International Day of Peace (21 September), the AU mounted photo exhibitions in Addis Ababa portraying its peacekeeping efforts. The ICRC contributed a selection of photos from its "Humanity in War" exhibition.

GUINEA



ICRC delegation
 ICRC sub-delegation
 ICRC office

* Sierra Leone is covered by the ICRC delegation in Guinea

In Guinea since 1970, the ICRC opened its delegation in Conakry in 2001. It seeks to protect people affected by armed conflict and other situations of violence, restore family links, enhance the capacity of the health system and improve water supply. It also visits detainees and advises the detaining authorities on detention-related matters. In parallel, it promotes IHL among the armed and security forces, political authorities and civil society. Since 2009, the delegation has provided support for the ICRC office in Sierra Leone. It works with each National Society to strengthen its capacity to respond to emergencies and to promote the Movement.

EXPENDITURE (IN KCHF)

Protection	1,072
Assistance	3,468
Prevention	1,299
Cooperation with National Societies	1,721
General	-

► **7,562**

of which: Overheads 462

IMPLEMENTATION RATE

Expenditure/yearly budget	92%
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PERSONNEL

Expatriates	18
National staff (daily workers not included)	96

KEY POINTS

In 2010, the ICRC:

- engaged in constructive dialogue with the transitional Guinean administration, which took into account ICRC recommendations related to the events of 28 September 2009
- provided training, expertise, funds and materials to boost the Red Cross Society of Guinea's emergency response capacities, enabling it to assist over 700 people affected by post-election violence
- with the National Society, raised awareness of IHL/international human rights law and the Movement among Guinean authorities, civil society and weapon bearers, including 370 instructors from the special election security force
- visited hundreds of people detained in connection with election-related violence and helped notify their families of their detention
- expanded its nutritional programme in prisons, providing 1,013 malnourished detainees with supplements to their official meals and reducing associated morbidity and mortality
- raised standards of care in 6 hospitals, providing specialist staff training and equipment to enhance the treatment of weapon-wounded patients and carrying out urgent renovations to infrastructure

CONTEXT

Having entered the year in political turmoil, Guinea recovered a fragile stability in 2010 under a transitional government tasked with steering the country to its first democratic elections. Mindful of the role played by armed and security forces in quelling past unrest, the interim administration embarked on reform of these sectors with international support. It created a 16,000-strong special security force, known as FOSSEPEL, to maintain public order during the elections. A revised constitution, published by decree in May, required that provisions for the protection of human rights be integrated into national military and academic curricula.

A prolonged interval between calm but inconclusive presidential elections in June and the run-off in November slowed economic and political activity while fuelling tensions between rival supporters. With voting commonly drawn along ethnic lines, political differences aggravated underlying ethnic tensions among

communities. The November poll was marked by demonstrations, tensions and violence across the country. Several thousand people were temporarily displaced, fearing attack from opposition supporters. The announcement of the results triggered further violence, causing hundreds of casualties. The authorities declared a state of emergency, restoring calm. Guinea's new president took office on 21 December to pursue the country's democratic transformation.

Meanwhile, widespread unemployment and poverty, combined with limited access to basic services, contributed to difficult living conditions for much of the population. In December, refugees fleeing post-election insecurity in neighbouring Côte d'Ivoire began arriving in south-east Guinea, adding strain on local resources.

In Sierra Leone, the government pursued efforts to consolidate peace and tackle corruption, poverty and unemployment ahead of elections in 2012.

MAIN FIGURES AND INDICATORS				
PROTECTION				
CIVILIANS (residents, IDPs, returnees, etc.)				
Red Cross messages		Total	UAMs/SCs*	
RCMs collected		84		
RCMs distributed		113		
Phone calls facilitated between family members		75		
Tracing requests, including cases of missing persons		Total	Women	Minors
People for whom a tracing request was newly registered		21	3	6
Tracing cases still being handled at 31 December 2010 (people)		47	5	10
Documents				
Official documents relayed between family members across borders/front lines		1		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
ICRC visits		Total	Women	Minors
Detainees visited		3,007		
Detainees visited and monitored individually		71	3	
Detainees newly registered		61	3	
Number of visits carried out		282		
Number of places of detention visited		35		
Restoring family links		Total		
RCMs collected		81		
RCMs distributed		2		
Phone calls made to families to inform them of the whereabouts of a detained relative		7		

* Unaccompanied minors/separated children

ASSISTANCE				
CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security, water and habitat		Total	Women	Children
Essential household items	Beneficiaries	740		100%
Water and habitat activities	Beneficiaries	98,651	50%	30%
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat				
Food	Beneficiaries	1,013		
Essential household items	Beneficiaries	7,022		
Water and habitat activities	Beneficiaries	3,811		
WOUNDED AND SICK				
Hospitals				
Hospitals supported	Structures	6		

ICRC ACTION AND RESULTS

In 2010, the ICRC focused on contingency planning ahead of Guinea's elections. Initially, it developed dialogue with the interim authorities to obtain their support for its protection, assistance and communication activities. Given the potential for election-related violence, it focused resources on helping strengthen the emergency response capacities of the Red Cross Society of Guinea and national health structures and, with the National Society, on raising awareness of humanitarian principles among those likely to have influence in maintaining calm.

The ICRC pursued its response to the humanitarian consequences of a political demonstration suppressed on 28 September 2009, providing the interim administration with a copy of its findings and recommendations concerning the incident. This contributed to constructive dialogue aimed at preventing abuses of civilian rights.

With the authorities' backing, the ICRC and the National Society familiarized military and security personnel with IHL, international human rights law and the Movement. In preparation for the elections, they trained FOSSEPEL instructors in the maintenance of public order. Meanwhile, National Society/ICRC teams raised awareness of IHL and the Movement among community leaders and other civil society actors, using radio to promote humanitarian principles widely. This facilitated safe Movement access to violence-affected people.

In parallel, the ICRC helped strengthen Guinean Red Cross emergency response capacities. With Movement partners, it contributed to the National Society's emergency action plan and reinforced its first-aid network. The ICRC also boosted its support to Guinean hospitals, providing specialist training, equipment and supplies to enhance the treatment of weapon-wounded patients, backed up by structural renovations. The first ICRC war-surgery module was introduced at Conakry University. Such preparations enabled the Movement to play a valuable role in assisting victims of violence surrounding the elections.

The ICRC visited detainees held by Guinea's Justice Ministry, and some held by the *gendarmerie* and the police, to monitor their treatment and living conditions. This included visits to hundreds of people detained in connection with election-related violence. Delegates continued to support the authorities in improving detainees' access to food, health care, water and sanitation. Where inmates required urgent assistance, the ICRC stepped in. It launched an emergency feeding programme for malnourished detainees, which was expanded mid-year. It also facilitated life-saving operations, distributed medical and hygiene supplies, and renovated dilapidated infrastructure.

National Society personnel received ICRC guidance and financial and logistical support to facilitate tracing/RCM services, ensuring these were available to separated relatives throughout Guinea and Sierra Leone. With the arrival of refugees from Côte d'Ivoire, trained teams swiftly deployed to help them contact family members left behind. To ensure the relevance of

family-links services, ICRC/National Society teams conducted an assessment to identify unmet needs in Guinea, and prepared for a similar exercise in Sierra Leone.

With the Guinean water authorities, the ICRC improved access to clean water for thousands of urban and rural dwellers and supported training in facility maintenance.

The ICRC continued to support the Sierra Leone Red Cross Society in raising its profile and assuming its peacetime responsibilities. With back-up from delegates, the National Society built support for IHL/international human rights law and the Movement among parliamentarians, armed and police forces and academic circles.

Coordination with Movement partners and other humanitarian actors ensured needs were met while avoiding duplication.

CIVILIANS

Upon taking office, Guinea's transitional administration received a copy of the ICRC's confidential report concerning alleged human rights abuses documented during a political demonstration suppressed on 28 September 2009. Meetings with authorities and military and security officials (see *Authorities and Armed forces and other bearers of weapons*) served to remind them of their responsibilities to respect civilians at all times, including during elections.

Violence-affected Guineans and refugees from Côte d'Ivoire receive prompt attention

Guineans wounded or displaced during violent demonstrations and intercommunal clashes, mainly linked to electoral tensions, received prompt attention from ICRC-trained National Society teams, who registered IDPs, administered first aid and evacuated the wounded to hospital (see *Wounded and sick* and *Red Cross and Red Crescent Movement*).

Over 200 people seeking refuge in Guinea from post-election violence in Côte d'Ivoire met National Society/ICRC teams, who assessed their needs, administered first aid and registered separated/unaccompanied children. Refugees sent word by telephone or RCM to relatives left behind to reassure them of their well-being, through family-links services provided in cooperation with the Red Cross Society of Côte d'Ivoire.

Meanwhile, three National Society branches acquired new ICRC-constructed premises, boosting their capacities to respond to local humanitarian needs.

Guinean communities gain access to clean water

With technical and financial back-up from the ICRC, the Guinean water board pursued efforts to improve the water supply in urban and rural areas vulnerable in emergencies, benefiting 98,651 people in 2010. It demonstrated growing confidence in managing facilities previously rehabilitated by the ICRC. To encourage ownership, 50 water board engineers received expert maintenance training from the International Office for Water, financed by the ICRC.

In Kindia, Kouroussa and Mamou, some 63,600 residents gained better access to clean water following ICRC-supported network extensions or repairs, including 10,000 whose nearest water point was previously 3 km away. The upgrading of Kankan's water treatment plant, begun by the ICRC in 2009, saw production increase by 200%. As it proved technically unfeasible to construct a similar plant in Mali town, residents began to benefit from new wells instead.

Over 34,500 rural residents benefited similarly from new fountains constructed with the water authorities. The authorities established village water committees to maintain the facilities, thereby ensuring sustainability.

To cover communities' basic needs in an emergency, National Society/ICRC teams were trained to distribute contingency water and household supplies, but these were not required.

Guinean and Sierra Leonean families seek news of relatives

In Guinea and Sierra Leone, family members separated by crises exchanged news using Movement tracing/RCM services.

Some 20 Guinean families requested help locating relatives unaccounted for from 28 September 2009. An association established after the incident developed dialogue with delegates, who shared their experience in this field to help alleviate the families' distress. With ICRC sponsorship, the country's leading forensic official enhanced his skills at an expert course on managing human remains, prompting him to propose a similar workshop for Conakry hospital personnel.

Some 740 formerly unaccompanied children in Guinea who, with ICRC support, had been reunited with relatives or had found other long-term solutions, received essential household items to help them resettle.

To ensure the relevance of Movement family-links services in Guinea, National Society/ICRC teams conducted an assessment to identify unmet needs. They then initiated dialogue with actors in contact with vulnerable groups, such as children sent abroad for their education, to gauge such groups' interest in family-links services. Communities in Sierra Leone stood to benefit from a similar assessment in 2011, preparations for which were in progress.

PEOPLE DEPRIVED OF THEIR FREEDOM

Detainees in Guinea held by the Justice Ministry, and those in certain facilities run by the police or *gendarmerie*, received visits from the ICRC, according to its standard procedures, to monitor their treatment and living conditions. Among those visited were hundreds detained in connection with election-related violence. Following its visits, the ICRC shared feedback, in confidence, with the authorities.

Especially vulnerable inmates, including foreigners, women, minors and people sentenced to death, were closely monitored and the authorities alerted to their particular needs. All inmates, including

the newly arrested, were able, through delegates, to contact their relatives or consular representatives by telephone or RCM.

Detainees benefit from vital nutritional and medical care and improved hygiene

Detainees continued to suffer the repercussions of longstanding neglect of Guinea's prison system, with overcrowding straining infrastructure and the authorities' capacities to provide adequate food, medical attention, water and sanitation.

As insufficient food put detainees in grave danger, the most vulnerable became the focus of an ICRC emergency-feeding programme launched with the authorities, involving regular health monitoring. Initially targeting 16 prisons, the programme was expanded in June to include all vulnerable inmates under Justice Ministry jurisdiction. Between March and December, 1,013 malnourished detainees (on average 143 detainees/month) had their official meals supplemented with high-energy biscuits, resulting in a dramatic drop in severe malnutrition and associated mortality rates, which stabilized towards year-end.

The health monitoring helped ensure that detainees diagnosed with serious illnesses, such as tuberculosis, were referred for appropriate treatment. Eight inmates underwent life-saving operations financed by the ICRC. Detainees requiring less serious attention received on-site treatment more readily after the ICRC donated essential medicines and/or equipment to 12 prison infirmaries.

Efforts continued to reduce hygiene-associated health risks. During pest-control campaigns run by the authorities with ICRC support, inmates underwent treatment for scabies or skin infections. They were among 7,022 inmates in 28 prisons to receive ICRC-donated hygiene items. Following ICRC renovations to infrastructure in 10 facilities, 3,811 detainees gained improved access to clean water, safe waste disposal facilities, ventilation and natural lighting.

Health and Justice Ministries work to improve detainees' conditions

The ICRC continued to urge the authorities to allocate adequate resources to cover detainees' basic needs. With ICRC encouragement, the ministries met more regularly to address priority issues.

To support the ministries in making a credible appeal to the Finance Ministry, delegates helped them calculate precise food requirements based on current detainee numbers. An ICRC assessment of official meal standards in different facilities enabled the authorities to review the services provided by caterers and take action where necessary to improve nutritional standards. Penitentiary and health officials familiarized themselves with internationally recognized standards thanks to an ICRC poster on recommended nutritional intake.

In efforts to improve prison health care, the chief doctor supervising prison health services began accompanying delegates on their visits. Together with the Health and Justice Ministries, they produced a standard job description for prison health workers, to which local

health, penitentiary and judicial officials were introduced at ICRC presentations. Health workers also had access to ICRC-developed guidance on monitoring procedures aimed at swiftly identifying and addressing symptoms. Meanwhile, the epidemic-management committee, health workers and the ICRC discussed detainees' access to national disease-prevention programmes.

To counter overcrowding, the Justice Ministry and the ICRC explored ways of accelerating the trial process for people in pre-trial detention. The authorities resolved a significant number of cases, contributing to a 10% reduction in the prison population. At the ICRC's instigation, the ministry strengthened cooperation with the firm contracted to overhaul Guinea's penitentiary infrastructure. They sought ICRC advice to ensure such infrastructure met internationally recognized standards, resulting in four blueprints adapted to Guinean needs.

The authorities appointed 600 penitentiary guards to better support detainees, and accepted the ICRC's proposal to help them train personnel to that effect.

Sierra Leone

Detainees formerly held by the Special Court for Sierra Leone (SCSL), having been transferred to third countries in late 2009, received visits from delegates in those countries. The residual SCSL body in Freetown maintained contact with the relevant delegations.

WOUNDED AND SICK

Guinean health services continued to receive ICRC support to raise levels of care, focusing on the treatment of victims of violence. Paramedics and surgeons at Conakry, N'Zérékoré and Mamou hospitals and one military hospital acquired specialist techniques in caring for weapon-wounded patients at ICRC courses. They benefited from ongoing ICRC supervision in the workplace, receiving further training where necessary to reinforce their skills.

As part of contingency plans developed with ICRC input, staff at N'Zérékoré hospital, medical students and National Society volunteers undertook a simulation exercise, better preparing them to handle influxes of wounded. Conakry, Mamou and N'Zérékoré hospitals received ICRC dressing materials and surgical instruments to replace used or worn stocks. Contingency medical supplies ensured they were adequately equipped to treat casualties in an emergency.

Hospitals also benefited from ICRC renovations and upgraded equipment. In particular, the provision of clean running water improved hygiene conditions at Mamou, while an overhaul of electrics at Kindia enhanced operating conditions.

When violence flared in November, the Health Ministry invited delegates to help coordinate its response. In accordance with contingency plans, hospitals maintained close contact with the ICRC,

which provided advice and mobilized ICRC-supported National Society ambulances and stretcher-bearers as needed. Conakry's Donka hospital, which admitted the most victims, demonstrated its capacity to perform quality surgery, thanks partly to ICRC preparatory support.

With the introduction of an ICRC war-surgery module at Conakry University, 36 medical students became Guinea's first to acquire skills to treat weapon-wounded patients as an integral part of their syllabus.

AUTHORITIES

Guinea's transitional administration engaged in constructive dialogue with the ICRC on issues related to the protection of civilians and the improvement of detainees' living conditions. Dialogue with national and local authorities intensified in the run-up to the elections. In particular, 210 officials learnt more about the Movement's neutral, impartial and independent humanitarian action through Guinean Red Cross/ICRC presentations, building acceptance of its work.

In Sierra Leone, national and international authorities regularly met National Society and ICRC representatives, reinforcing their understanding of these organizations' respective roles. The government welcomed ICRC support in accelerating IHL implementation. At a National Society/ICRC briefing, 60 parliamentarians reviewed the 1962 act governing the National Society's mandate and examined the steps involved in ratifying/implementing the 1949 Geneva Conventions and their Additional Protocols. Officials subsequently produced cabinet papers aimed at adopting the Geneva Conventions Act and creating a national IHL committee. In October, the country ratified the African Union Convention on IDPs.

Two representatives from each country advanced their IHL skills at an Economic Community of West African States/ICRC seminar (see *Nigeria*) with ICRC sponsorship, helping build national IHL capacities.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

In line with provisions of the new constitution, Guinea's military command and the ICRC embarked on concerted efforts to build respect for humanitarian principles among military and security personnel to better prepare their response in case of unrest or violence.

High-ranking military and security officers devised a coordinated response plan with delegates, incorporating ICRC recommendations related to 28 September 2009 (see *Civilians*). This led to a draft cooperation agreement with the ICRC aimed at integrating IHL into forces' training. At the authorities' request, 370 FOSSEPEL instructors enhanced their understanding of international policing standards at National Society/ICRC courses and received tailored teaching tools, preparing them to train their peers.

During National Society/ICRC briefings countrywide, some 1,800 military officers and 1,100 *gendarmes*/police officers learnt more about their responsibilities during law and order operations, focusing on IHL and international human rights law respectively. They also raised their awareness of the Movement's neutral, impartial and independent humanitarian action and the protection afforded by its emblems.

Such activities facilitated safe access by Movement personnel to victims of election-related violence.

CIVIL SOCIETY

Efforts focused on building support for the Movement and humanitarian principles among influential members of Guinean society to facilitate National Society/ICRC operations in case of violence.

Traditional leaders raised their awareness of these topics at National Society/ICRC presentations, contributing to their own efforts to calm intercommunal tensions. Similar briefings enabled trade unions, NGOs and youth groups to consider their role in promoting social cohesion. Meanwhile, religious leaders examined parallels between IHL and Islamic law at a conference organized by Conakry's Islamic Centre and the National Society/ICRC, attracting the support of Guinea's senior Muslim authority.

Contacts fostered with Guinean media helped increase public understanding of these topics. Pre-election radio broadcasts in local languages familiarized even remote communities with the Movement's emblems and humanitarian action. During election-related violence, additional broadcasts reinforced these messages and alerted communities to ICRC activities on behalf of those affected.

Around 1,000 students learnt about IHL and the Movement at events organized with an ICRC-trained lecturer, helping garner support among Guinea's future opinion-leaders. Many explored these subjects further at the delegation's research library. Students from six universities tested their understanding of IHL at a national moot court competition organized with ICRC support.

RED CROSS AND RED CRESCENT MOVEMENT

With ICRC support, the Guinean Red Cross strengthened its management, emergency response and family-links capacities, while the Sierra Leone Red Cross developed activities according to peace-time needs. Coordination with the International Federation and National Societies working internationally helped both organizations meet statutory obligations and address fundraising objectives.

In case of election-related violence, the Guinean Red Cross developed a contingency action plan with Movement partners. It reinforced its first-aid network with ICRC advice and material support, streamlining its first-aid curricula and upgrading volunteer skills and equipment. It joined forces with the ICRC to build widespread respect for Movement activities (see *Authorities, Armed forces and other bearers of weapons* and *Civil society*). These preparations enabled it to respond effectively to crises, directly assisting over 700 people with ICRC supervision and logistical support (see *Civilians* and *Wounded and sick*). Such action earned it an increase in Health Ministry funding.

Backed by the Education Ministry, the Guinean Red Cross reoriented its school programme to engage a broader cross-section of youth in Movement activities.

In Sierra Leone, the National Society pursued efforts to boost its profile and raise support for IHL and the Movement, updating promotional materials with ICRC funding. It conducted a student IHL competition and briefed 2,335 military/security personnel and 60 parliamentarians (see *Authorities*). With ICRC guidance, it drafted terms of reference for its 2011 assessment of national family-links needs, drawing on lessons learnt in Guinea (see *Civilians*).

LIBERIA



ICRC delegation
 ICRC sub-delegation

The ICRC has worked in Liberia since 1970, opening its delegation in 1990. Following intense fighting early in 2003 and the subsequent signing of a peace agreement, the ICRC stepped up its operations. Since 2005, it has focused on protecting and assisting returnees (former IDPs and refugees) and residents, the wounded and sick, detainees, and children separated from their families, winding down these activities as the situation has become more stable. The ICRC supports the Liberian Red Cross Society and runs programmes to promote IHL among armed forces present in the country.

EXPENDITURE (IN KCHF)

Protection	294
Assistance	1,038
Prevention	1,512
Cooperation with National Societies	3,016
General	-

► **5,860**

of which: Overheads 358

IMPLEMENTATION RATE

Expenditure/yearly budget	100%
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PERSONNEL

Expatriates	8
National staff (daily workers not included)	99

KEY POINTS

In 2010, the ICRC:

- with Movement partners, strengthened the Liberia National Red Cross Society's autonomy and emergency response, family-links and communication capacities, particularly through training and its involvement in joint initiatives
- with the National Society, rapidly responded to the influx of refugees generated by post-electoral violence in Côte d'Ivoire, launching emergency family-links, water and sanitation activities for those affected
- at the authorities' request, began urgent improvements to water and sanitation infrastructure in 4 prisons housing 955 inmates and carried out a health care assessment in 14 prisons to reduce detainees' health risks
- with the National Society, provided 211,187 people with more reliable access to clean water and sanitation facilities, while promoting good hygiene practices to ensure sustainable benefits
- provided agricultural inputs and specialist training to 40,812 people in Lofa county, contributing to their long-term food and economic security
- marked 20 years of ICRC action in Liberia, organizing events across the country to raise awareness of the Movement and humanitarian principles among a broad cross-section of society

CONTEXT

Seven years after the end of the conflict in Liberia, the potential for localized unrest remained, owing mainly to persistent ethnic tensions, land-tenure disputes and limited resources. In February, an outbreak of ethnic violence in Voinjama caused several deaths, some 20 wounded and damage to property. The government called in peacekeepers from the United Nations Mission in Liberia (UNMIL) to restore order and appointed an interethnic committee to examine the root causes of the violence.

Meanwhile, the government pursued efforts to strengthen its institutions, restore public services and rebuild the country's infrastructure. Although the economy showed signs of recovery, poverty remained widespread. While some improvements began filtering down to the general population, many continued to

struggle for access to basic utilities such as water and sanitation and to health care. Unemployment, reportedly at 80%, particularly affected young Liberians, including former combatants.

In January, US contractors handed over responsibility for training the Liberian armed forces to the Defence Ministry, maintaining a mentoring role. UNMIL confirmed its intention to remain in the country until after elections scheduled for late 2011.

In December, when presidential elections in neighbouring Côte d'Ivoire resulted in political deadlock, associated tensions and violence drove some 18,000 people to seek refuge in north-eastern Liberia. In this remote, impoverished area with minimal State infrastructure, the influx threatened to increase health risks and overwhelm host communities' already limited resources.

MAIN FIGURES AND INDICATORS

ASSISTANCE

CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security, water and habitat		Total	Women	Children
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries	40,812	30%	50%
Water and habitat activities	Beneficiaries	211,187	30%	44%
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat				
Essential household items	Beneficiaries	1,412		
Water and habitat activities	Beneficiaries	955		

ICRC ACTION AND RESULTS

In coordination with other Movement partners, the ICRC focused on strengthening the Liberia National Red Cross Society as a major provider of humanitarian assistance in post-conflict Liberia. While pursuing its remaining assistance activities, the ICRC worked to develop structures and systems aimed at enabling the authorities, vulnerable communities and the National Society to cope in an emergency after the eventual withdrawal of ICRC support. To this end, the ICRC increased its involvement in National Society activities, at once building the latter's operational experience and helping raise its profile. The National Society also benefited from ICRC funding, training and expertise to reinforce its organizational development and emergency response, family-links and communication activities.

To ensure the National Society retained effective emergency response capacities, the ICRC helped it review its contingency plans and provide refresher training to personnel. Together they responded swiftly to humanitarian needs following violence in Voinjama and, with the arrival of refugees from Côte d'Ivoire, set about establishing a joint base in Sanniquellie with International Federation support. In coordination with relevant actors, National Society/ICRC teams helped refugees to contact relatives left behind in Côte d'Ivoire and, to benefit both refugees and residents, began working to increase local access to clean water.

Throughout the year, the ICRC and the National Society worked with the Liberian water board to improve public health in urban and rural areas. Together they constructed and repaired water infrastructure in vulnerable communities, providing readier access to clean water and reducing exposure to water-borne diseases. To help ensure sustainability, ICRC-trained National Society volunteers established community water committees to maintain the facilities and promote good hygiene practices locally.

The ICRC continued to assist vulnerable farming communities, providing agricultural inputs and specialist training to boost their food and economic security. It concentrated on equipping previously assisted plantation farmers with the tools and skills to maintain their livelihoods in the long term, resulting in 80% of beneficiary communities being able to cover their food needs. Delegates also supported the National Society in implementing its own agricultural initiatives, providing materials and expert back-up on the ground.

At the authorities' request, the ICRC visited several prisons to assess detainees' living conditions. It promptly began urgent repairs to water and sanitation infrastructure in four prisons to reduce health risks posed by poor hygiene. To complement this support, an ICRC prison-health specialist visited 14 prisons to assess inmates' access to health care. Delegates assisted the authorities in ensuring that detainees requiring urgent treatment

received appropriate care, and began exploring with them ways to improve conditions, particularly by stepping up infrastructure maintenance and enhancing preventive health care.

Through tailored presentations, public events and publicity, the National Society/ICRC worked to increase support for humanitarian principles and Movement activities among authorities, weapon bearers and other groups likely to have an influence during Liberia's fragile reconstruction phase. The 20th anniversary of the ICRC's presence in Liberia brought together a broad cross-section of society, from dignitaries to youth groups, at high-profile National Society/ICRC events organized to mark the occasion. Regular briefings increased understanding of IHL/international human rights law among UN peacekeepers and military/security personnel countrywide.

To ensure Liberian Red Cross family-links services remained relevant in peacetime, an ICRC expert tracing delegate worked with the National Society to draft a new policy. Together they undertook a nationwide assessment of current needs and developed a plan of action accordingly.

CIVILIANS

Following violence in Voinjama, local residents received visits from delegates to ensure they had sufficient food and basic household supplies and access to medical attention where required. National Society personnel provided first aid as needed.

In December, refugees from Côte d'Ivoire began arriving in Liberia, driven by fear in the face of mounting insecurity triggered by the post-election crisis. Their movements, needs and impact on host communities were monitored by the National Society, which, with International Federation and ICRC support, set about mobilizing the Movement's response from a base in Sanniquellie. Coordination with the authorities, UN agencies and other relevant actors helped ensure needs were covered, while avoiding duplication.

During visits to affected communities, specially trained National Society/ICRC teams (see *Red Cross and Red Crescent Movement*) gave refugees the opportunity to contact family and registered any children travelling without their parents.

To reduce health risks magnified by added strain on local resources, Movement engineers began work aimed at improving access to water for refugees and residents in 18 communities. Movement personnel also stood ready to distribute essential household items if the need arose.

Communities benefit from better access to clean water and hygiene-awareness training

During the year, 211,187 Liberians, divided roughly equally between urban and rural areas, benefited from ICRC water and hygiene-awareness initiatives.

Residents of Monrovia continued to experience difficulties obtaining safe water. Many in districts unconnected to the main supply travelled long distances to fetch costly supplies. During the year, the water board assumed responsibility for eight water storage/distribution points, known as kiosks, previously constructed and managed by the ICRC. With National Society/ICRC teams, it worked to extend the water supply more widely, constructing further kiosks and rehabilitating water points throughout flood-prone districts; such efforts enabled it to reduce water prices by two-thirds. Vulnerable residents therefore gained readier access to clean water, reducing their exposure to water-borne diseases. They established water committees and received ICRC training in facility maintenance, encouraging community ownership.

To support the Liberian Red Cross in maintaining water infrastructure in rural Liberia, 79 volunteers attended ICRC training, enabling them to undertake routine maintenance to water points and establish community committees to oversee the facilities and promote good hygiene locally. Consequently, they trained 200 committee members and repaired/rehabilitated 200 wells, contributing to healthier environmental conditions for the local population. Committee members benefited from ongoing National Society support, including advice and cleaning materials, to ensure the sustainability of the facilities. Following a cholera outbreak, 50 volunteers refreshed their skills on an ICRC course, then worked swiftly to chlorinate affected water points and advise local residents on ways to contain the disease.

Villages in Grand Kru and Lofa counties, where a spare-parts procurement network was established with ICRC support in 2009, received visits from National Society/ICRC teams to check that the system was functioning properly. Using the network, remote communities had the means to undertake routine repairs to local water infrastructure without external support, helping provide sustainable access to clean water.

Rural communities benefit from livelihood support

In Lofa county, where communities relied chiefly on cash-crop production to support themselves, 40,812 people benefited from ICRC support in rebuilding their livelihoods following years of conflict.

In March, an assessment exercise was launched to monitor the progress made by farmers in Kolahun and Voinjama districts who, through an ICRC cash-for-work initiative, rehabilitated coffee and palm-oil plantations with ICRC support in 2009. Having completed the rehabilitation phase, farmers received the last instalment of cash assistance mid-year, as ICRC activities refocused to encourage community ownership.

During 2010, 35,772 members of 53 communities (5,962 households), including members of local cooperatives and farmers' associations and 583 households headed by women, benefited from further ICRC training and equipment to help them maintain the plantations until the trees began fruiting in 2012. Besides acquiring brushing techniques to counter pests and weeds, they received fertilizer and insecticides and training on how to spray the crops to maximize yield. To complement their practical

experience, 2,134 farmers who demonstrated a commitment to managing their plantations independently were selected for specialist training facilitated by the Liberia National Federation of Cooperative Societies and ICRC agronomists. Courses focused on the importance of good governance and community participation in achieving lasting social and economic impact.

Owing partly to this initiative, which helped farmers recover self-sufficiency by boosting their productivity, marketing capacities and revenue, around 80% of ICRC-supported farming households were able to cover their food needs.

Twelve National Society volunteers were trained by the ICRC to supervise and support the communities in maintaining their activities after the withdrawal of ICRC support.

Through an ICRC-supported Liberian Red Cross/Ministry of Agriculture initiative, 1,000 lowland farmers in 36 communities across 5 counties and 1,000 farmers from upland areas in 3 counties received seed and tools to cultivate swamp and upland rice respectively. Regular monitoring by National Society/ICRC teams ensured they could seek expert advice where necessary. At harvest time, the farmers returned a proportion of their rice seed to ICRC-trained National Society personnel, who redistributed it to other vulnerable farmers in the same communities. This boosted farmers' productive capacities, thereby contributing to the wider community's food and economic security.

Liberians consulted regarding post-conflict family-links needs

A small number of Liberian family members separated by violence or other crises sought to exchange news through Movement family-links services. In efforts to ensure such services remained relevant in peacetime, separated relatives nationwide were invited to explain their needs through an ICRC-supported Liberian Red Cross assessment (see *Red Cross and Red Crescent Movement*).

Health authorities to benefit from renewed ICRC support

An ICRC assessment of health facilities handed over to the authorities in 2009 showed that while clinics continued efforts to adhere to ICRC-recommended guidelines, they were experiencing certain difficulties, for example in maintaining staffing levels and acquiring essential drugs. In this context, the health authorities welcomed an ICRC proposal to resume its support to four clinics in 2011 aimed at restoring community access to quality preventive and curative care.

PEOPLE DEPRIVED OF THEIR FREEDOM

In February, people held in connection with violence in Voinjama met delegates, who monitored their well-being. Detainees received ICRC sleeping mats and blankets and, as the prison had sustained material damage, benefited from urgent repairs to their quarters.

During the year, it emerged that detainees in Liberia often suffered health problems owing to poor hygiene conditions. Despite previous ICRC renovations to sanitation infrastructure, many such facilities

had ceased functioning effectively. In light of conditions, the Liberian Bureau of Correction and Rehabilitation (BCR) requested ICRC support in improving detainees' environmental health.

After assessing conditions, the ICRC began urgent repairs to water and sanitation infrastructure in 4 prisons housing 955 detainees. In Monrovia, detainees gained improved access to water thanks to new storage facilities and renovated water points, which were connected to the national water network. Together with inmates in Robertsport, Voinjama and Zwedru, they also benefited from an overhaul of sanitation infrastructure, enabling safer waste disposal.

In parallel, personnel from three prisons examined recommended maintenance procedures at an ICRC-led workshop, as a first step towards establishing a national committee responsible for maintaining penitentiary infrastructure.

Detainees' access to health care improved

Inmates in 14 prisons were the focus of a comprehensive health assessment conducted by an ICRC prison-health specialist. Based on the findings, the authorities and the ICRC examined the pressing need to establish preventive health care mechanisms and an efficient referral system. Together they arranged for seriously ill detainees to be transferred to hospital, and for those with persistent skin complaints to be treated using ICRC anti-fungal remedies. Over 1,400 vulnerable inmates received ICRC blankets, antiseptic soap and other items to improve their comfort and avoid infection.

AUTHORITIES

Efforts continued to familiarize actors involved in Liberia's reconstruction with IHL and the Movement, to foster respect for civilians' rights and support for National Society/ICRC activities.

Local, national and regional authorities attended regular briefings on Movement activities organized with the Liberian Red Cross. At inaugural ceremonies marking 20 years of ICRC work in Liberia, over 500 high-ranking diplomats and representatives from government, UNMIL and UN agencies turned out to demonstrate their support. Their backing facilitated humanitarian coordination when Ivorian refugees began arriving in December.

Seeking to advance national IHL implementation, the Justice Ministry held talks with an ICRC legal expert, focusing on priority instruments such as the 1949 Geneva Conventions and their Additional Protocols. To contribute to government IHL capacity building, two officials received sponsorship to attend an Economic Community of West African States/ICRC seminar in Abuja (see *Nigeria*).

Meanwhile, the Defence Ministry and UNMIL strengthened their cooperation with the National Society/ICRC aimed at reminding weapon bearers countrywide of their responsibilities under IHL/international human rights law. Some 300 UNMIL troops, 75 Liberian armed forces members and 570 joint security personnel

examined the practical application of these laws during field briefings. Incoming personnel benefited from introductory briefings, reaching 375 UNMIL personnel and 225 police recruits. Senior police officers refreshed their first-aid skills at advanced National Society/ICRC courses and received teaching materials in order to train fellow officers.

Based on an ICRC assessment of IHL knowledge among the Liberian armed forces, the Defence Ministry accepted an ICRC proposal to support it in integrating IHL into the forces' training, doctrine and operations from 2011.

CIVIL SOCIETY

During the year, some 4,000 influential community members, including youth groups, traditional and religious leaders and NGOs, raised their awareness of IHL and the Movement's humanitarian work through National Society/ICRC presentations countrywide. These helped build understanding of the respective roles of the Liberian Red Cross and the ICRC in post-conflict Liberia.

Local and international media received National Society/ICRC publications and participated in press conferences, helping them to report accurately on Movement activities. With ICRC funding, two journalists enhanced their humanitarian reporting techniques at a workshop abroad. They then put their skills into practice on ICRC-run field trips, interviewing people who had previously benefited from Movement initiatives. Resulting articles, television and radio spots helped generate public support for Movement activities, particularly surrounding the 20th anniversary of ICRC presence in Liberia. Over 1,100 people learnt about the Movement through a touring photo exhibition and presentations organized by the National Society/ICRC to mark the occasion. Sports tournaments similarly organized in three cities attracted over 2,000 participants, encouraging active support for Movement activities among young people.

The dean of the University of Liberia's law faculty expressed interest in working with the ICRC to introduce IHL in curricula, welcoming its proposal to provide IHL presentations and publications to students. As an initial step in building IHL teaching capacities, one professor received ICRC funding to join IHL experts at a regional seminar.

RED CROSS AND RED CRESCENT MOVEMENT

The Liberian Red Cross worked towards assuming its peacetime responsibilities while retaining emergency response capacities, benefiting from sustained ICRC support to strengthen its core structure, organizational development and assistance, family-links and communication activities. To facilitate coordination, it hosted regular meetings for Movement partners operating locally.

In discussion with an ICRC tracing expert, the National Society's tracing coordinator drafted a new family-links policy drawing on its assessment of family-links needs (see *Civilians*). Disaster-management coordinators reviewed contingency plans with delegates and organized workshops to enhance staff capacities to mobilize emergency operations. Partnering the ICRC, National Society personnel gained practical experience in planning and implementing assistance operations (see *Civilians*). To better prepare Liberians for potential crises, the National Society taught first aid to 1,375 members of Red Cross school clubs and community associations in nine counties.

To boost its visibility and better support its field operations, the National Society, with ICRC funds, constructed four branch offices, and a guesthouse to support its disaster-response fund. With ICRC back-up, it conducted branch-level meetings to guide field personnel on good governance and management practices and, at headquarters, adopted several institutional policies regarding human resources procedures.

Such efforts helped ensure that, with International Federation and ICRC back-up, the Liberian Red Cross was able to launch an effective response to the Ivorian refugee influx (see *Civilians*), rapidly mobilizing and training volunteers.

Incoming personnel learnt to promote the Movement and its emblems at courses organized with ICRC input, enabling them to relay such messages effectively to the public and the authorities via radio spots and promotional materials produced with ICRC funds. By teaming up with delegates, using ICRC transport to access remote areas, the National Society was able to conduct presentations reaching 17,945 people.

NIGERIA



EXPENDITURE (IN KCHF)

Protection	486
Assistance	14
Prevention	2,598
Cooperation with National Societies	2,310
General	-

► **5,408**

of which: Overheads 330

IMPLEMENTATION RATE

Expenditure/yearly budget	90%
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PERSONNEL

Expatriates	9
National staff (daily workers not included)	40

KEY POINTS

In 2010, the ICRC:

- with or in support of the Nigerian Red Cross Society, provided medical attention, food, household necessities and family-links services to victims of violence in northern and central states and the Niger Delta
- established a presence in Kano and broadened its contacts among civil society, particularly religious circles, in northern Nigeria
- opened a sub-delegation in the Niger Delta, developing dialogue with all stakeholders present, including Joint Task Force troops and other weapon bearers, thereby facilitating its access to violence-affected communities
- with the National Society, launched a pilot, community-based first-aid initiative in 5 violence-prone regions, expanding this to 3 further regions by year-end
- consolidated its relationship with the Economic Community of West African States (ECOWAS), signing a cooperation agreement with its parliament and advising on the implementation of the ECOWAS Convention on Small Arms and Light Weapons
- with the International Federation, provided expertise and training, financial and material support to the Nigerian Red Cross in strengthening its legal base and developing its role as a major provider of emergency assistance in Nigeria

Active in Nigeria during the Biafran war (1966–70), the ICRC established a delegation in Lagos in 1988, relocating to Abuja in 2003. It seeks to protect people affected by violence and works to enhance the Nigerian Red Cross Society's capacity to respond to emergencies countrywide, particularly in the Niger Delta and in the north. It supports the National Society's tracing and IHL dissemination activities. Working with the authorities, the armed forces, the police, civil society, and the Economic Community of West African States, the ICRC promotes awareness of IHL and its national implementation.

CONTEXT

Nigeria's stability continued to be threatened by intercommunal and/or political tensions, sporadic violence and security operations, particularly in the northern half of the country and in the Niger Delta.

Following a leadership crisis which paralysed Nigerian politics in early 2010, the new administration embarked on reforms aimed at tackling corruption and the causes of the Niger Delta insurgency. Candidates began positioning themselves ahead of presidential elections scheduled for 2011. There were fears that the process could upset the delicate balance between the country's Christian and Muslim populations.

In and around Jos, intercommunal tensions generated attacks and reprisals, notably between January and March and in December following a bombing. The violence led to arrests, hundreds of dead and wounded, and large-scale displacement. There and elsewhere in the north, particularly Maiduguri, deadly incidents targeted members of Nigeria's State institutions, involving armed groups and triggering security operations. Bombings in Abuja in October and December left some 20 dead and many more injured.

In the oil-rich Niger Delta, the lull in violence occasioned by a 2009 government amnesty for former fighters failed to hold. Despite a rehabilitation programme for 2,000 such fighters, grievances persisted over the slow implementation of this programme, the distribution of oil wealth, general poverty and limited access to basic services. There were sporadic attacks and kidnappings for ransom, mainly targeting oil companies, and reports that former insurgents were re-arming. In December, government Joint Task Force (JTF) operations targeting alleged insurgents near Warri displaced hundreds of local residents.

In Nigeria's far north, severe flooding uprooted thousands of people in August.

In spite of its domestic concerns, Nigeria maintained its influence in the Economic Community of West African States (ECOWAS), thanks to its size and military and economic power in the region. Elected as ECOWAS Commission chair in 2010, the Nigerian president played an important role in addressing regional political and security issues, for example in Côte d'Ivoire.

MAIN FIGURES AND INDICATORS				
ASSISTANCE				
CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security, water and habitat		Total	Women	Children
Food	Beneficiaries	12,746	30%	50%
	<i>of whom IDPs</i>	Beneficiaries		
		12,746		
Essential household items	Beneficiaries	122	46%	54%
	<i>of whom IDPs</i>	Beneficiaries		
		122		
Water and habitat activities	Beneficiaries	2,000	21%	0%
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat				
Food	Beneficiaries	6,639		
Essential household items	Beneficiaries	309		

ICRC ACTION AND RESULTS

The ICRC stepped up its operations in violence-prone regions, establishing a presence in the northern state of Kano and opening a sub-delegation in Port Harcourt in the Niger Delta. It focused on developing contacts among authorities, weapon bearers, religious circles and vulnerable communities to build mutual understanding, respect for civilians' basic rights, and acceptance of the Movement's neutral, impartial and independent humanitarian action. In parallel, it helped strengthen the Nigerian Red Cross Society as an effective provider of emergency assistance in Nigeria.

Given persistent tensions and the risk of these increasing in the run-up to elections, the ICRC focused on training and equipping National Society branches in violence-prone areas to respond effectively to humanitarian needs, reviewing contingency plans and boosting their first-aid and communication capacities.

Personnel also gained operational experience partnering the ICRC on the ground. Owing to such efforts, the National Society launched a successful pilot first-aid initiative for vulnerable communities, and assisted victims of violence and flooding in coordination with State and international humanitarian actors and Movement partners. Meanwhile, the National Society's leadership worked with the ICRC/International Federation to revise its statutes, strengthening its legal foundations.

To support the authorities in handling the influx of detainees held in connection with violence in Jos, the ICRC visited the police stations concerned and, with the National Society, provided inmates with food, medical attention and hygiene materials.

ICRC and Nigerian Red Cross personnel continued to help family members separated by violence or migration restore or maintain contact. They made such services available to people hospitalized, detained or displaced following violence in Abuja, Jos and Warri.

As part of efforts to foster support for the Movement among authorities and weapon bearers, the ICRC and the JTF command responsible for operations in the Niger Delta strengthened their dialogue. The ICRC raised awareness of the Movement and IHL/international human rights law among JTF troops and representatives of the former armed opposition present in the Delta. This facilitated safe passage by National Society/ICRC teams through the creeks, where few humanitarian organizations were able to go, enabling them to provide relief to villagers displaced by military operations.

Delegates also developed dialogue with Nigerian civil society, focusing on religious, academic and media circles in violence-prone areas to encourage wide acceptance of humanitarian principles and Movement operations.

The ICRC continued to play a major role in promoting national IHL implementation in Nigeria and among ECOWAS member States, especially relating to weapon control. It provided support to Nigeria's newly created IHL committee and worked ever more closely with ECOWAS, co-hosting several events and entering into a cooperation agreement with the ECOWAS parliament. At the same time, it pursued efforts to promote and support the integration of IHL into the training, doctrine and operations of the Nigerian armed and police forces and the ECOWAS Standby Force.

Coordination with Movement partners and other relevant actors helped ensure humanitarian needs were covered, while avoiding duplication.

CIVILIANS

Meetings with authorities, weapon bearers and other influential community members alerted them to their responsibilities to respect civilians' rights at all times, in accordance with applicable law (see *Armed forces and other bearers of weapons*). The ICRC documented reports of abuses and, where possible, raised these with the alleged perpetrators with a view to preventing their recurrence.

Violence-affected communities receive vital assistance and family-links support

Throughout the year, civilians variously affected by violence or natural disaster received vital assistance from the Nigerian Red Cross, with ICRC support (see *Red Cross and Red Crescent Movement*).

Between January and March, thousands of people fleeing clashes in Jos sought refuge in camps in safer parts of the state and in neighbouring Bauchi. To help them cope in makeshift conditions, more than 12,000 IDPs received food from the Nigerian Red Cross, with ICRC financial and logistical support. Some families also received household necessities, where these needs were not covered by other humanitarian agencies. In Bauchi, National Society volunteers were involved in running the camps in coordination with the National Emergency Management Agency.

This included registering new arrivals and raising awareness of good hygiene practices to reduce health risks caused by limited sanitation facilities in the crowded camps. They also supported medical clinics by helping vaccinate young children and women of childbearing age against common diseases.

When security operations near Warri drove local residents to abandon their village, the ICRC promptly secured safe access to the area, in discussion with the JTF, enabling it to provide first humanitarian relief to those affected. While most villagers sought refuge in surrounding areas, some were unable to make the journey owing to age or injury. Thus, some 20 people stranded in the village school received first aid from military doctors working alongside National Society/ICRC teams. The teams went on to assist the displaced, many of whom were living precariously in neighbouring villages or in the open creeks. To tide them over until the authorities could arrange substantial distributions, IDPs received ad hoc food and household supplies from the ICRC. Using Movement satellite telephones or message services, they contacted relatives to reassure them of their safety. Several elderly people and children were reunited with family. In total, over 550 people received medical treatment at temporary clinics established by National Society/ICRC teams. Where necessary, the wounded were evacuated to permanent health structures, which received essential drugs from the ICRC to help ensure patients' care.

Victims of bomb blasts in Abuja and Jos received prompt treatment from National Society first-aiders, who evacuated the seriously injured to hospital and supported the authorities in collecting the dead using ICRC body bags. Volunteers toured local health structures to check they had sufficient medical supplies to treat the wounded, providing ICRC dressing materials to three hospitals. During such visits, patients were able to contact relatives using Movement family-links services.

Family-links services remained available year-round, enabling relatives separated by various crises, including refugees and detainees (see *People deprived of their freedom*), to restore or maintain contact. Coordination with actors working in the field of migration ensured that migrants with whom they were in contact also had access to such services.

Communities better prepared for violence

Given persistent violence in parts of Nigeria, and the risk of election-related tensions, the ICRC began putting in place measures aimed at protecting vulnerable communities in case of emergency, focusing on remote or violence-prone states in the Niger Delta and in the north.

Through an ICRC-supported Nigerian Red Cross pilot initiative (see *Red Cross and Red Crescent Movement*), 814 community members in Bauchi, Plateau, Bayelsa, Delta and Rivers states learnt from National Society instructors how to administer first aid independently. Newly trained first-aiders formed emergency response teams and undertook simulation exercises to help them practise their techniques. Besides preparing communities to cope in situations of violence, these sessions contributed to wider acceptance

of the Movement and its emblems, helping ensure the safety of its medical missions. Based on positive feedback, the initiative was extended to Borno, Kano and Yobe states by year-end.

To improve access to health care in the Niger Delta, where health infrastructure remained extremely limited, the ICRC discussed existing needs with local health authorities and medical professionals with a view to expanding its health initiatives there in 2011.

To help meet community water needs during any influx of IDPs, the ICRC installed contingency water-supply kits in violence-prone northern states and trained local National Society branches to use them. These were not required during the year.

PEOPLE DEPRIVED OF THEIR FREEDOM

More than 600 people were reportedly detained in police custody in connection with the clashes in Jos between January and March. With the agreement of the police command, ICRC delegates checked on their well-being.

To support the authorities in handling the influx, detainees in affected police stations were provided with food, water and daily health checks by the National Society, funded by the ICRC. Where limited sanitation posed health risks, they also received hygiene materials to help keep their surroundings clean. Six detainees requiring urgent medical attention obtained adequate treatment after National Society staff arranged their transfer to hospital.

The detainees also had the opportunity to notify relatives of their whereabouts using Movement family-links services. Consequently, detainees, including minors, re-established family contact and had food and clothing brought to them by relatives.

The Nigerian police command and the ICRC initiated dialogue aimed at exploring possibilities for greater cooperation, notably systematic access by the ICRC, according to its standard procedures, to all detainees held in connection with situations of violence.

AUTHORITIES

Nigerian authorities and representatives of ECOWAS and donor countries met delegates regularly to discuss humanitarian and security issues. Such dialogue, together with ICRC documentation, helped enlist their support for IHL and Movement operations and facilitated humanitarian coordination during national and regional crises.

Nigeria's government established a national IHL committee to spearhead IHL implementation with ICRC back-up. Together they organized a workshop at which 32 legal drafters acquired techniques to incorporate IHL into national law. Meanwhile, legislators learnt about their role in advancing implementation at parliamentary justice committee/ICRC briefings.

At regional level, ECOWAS and the ICRC consolidated their cooperation, co-organizing several initiatives to mobilize support for IHL, particularly regarding weapon control. The ECOWAS Small Arms Unit welcomed ICRC legal expertise to facilitate implementation of the Small Arms and Light Weapons Convention. At their forum, ECOWAS ambassadors examined this instrument and agreed a common position concerning a mooted universal treaty governing the arms trade. The 9th annual ECOWAS/ICRC seminar on national IHL implementation brought together representatives of 14 member States, who reviewed progress made towards objectives in their 2009 plan of action. The ECOWAS parliament signed a cooperation agreement with the ICRC aimed at further supporting such efforts.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

Given the violence in parts of Nigeria, raising awareness of humanitarian principles, applicable law and the Movement's distinctive role and emblems among all weapon bearers was an ICRC priority.

Nigerian military personnel, including peacekeepers preparing for deployment, learnt about such topics during ICRC presentations. In the Niger Delta, tailored briefings for JTF troops, alongside contacts with representatives of the former armed opposition, helped secure the safe passage of Movement personnel (see *Civilians*).

Dialogue with the police hierarchy in violence-affected states similarly familiarized them with the Movement's work, facilitating access to those arrested during violence in Jos (see *People deprived of their freedom*).

Meanwhile, Nigeria's military and police command received ICRC encouragement and support aimed at integrating IHL and international human rights law respectively into their forces' training, doctrine and operations. One army officer boosted his IHL knowledge at a course abroad with ICRC sponsorship. Over 180 military and 41 police instructors honed their skills and received teaching materials at train-the-trainer courses run by ICRC-trained officers and ICRC staff. The police training unit prepared to assume full responsibility for such courses.

The ECOWAS Standby Force similarly benefited from ICRC input, with troops tackling IHL-related scenarios during training exercises.

CIVIL SOCIETY

An expanding network of influential contacts developed dialogue with the ICRC, contributing to mutual understanding and greater awareness of the Movement and humanitarian principles among Nigerian society.

Religious leaders and organizations in northern states explored with delegates ways of cooperating to better protect and assist victims of violence, with some receiving National Society first-aid training.

To relay humanitarian messages more widely, drama groups teamed up with the Movement to promote its activities through well-attended marketplace sketches. Journalists from violence-prone areas enhanced their humanitarian reporting skills at ICRC workshops. Drawing on such training and information materials, they reported regularly and accurately on Movement emergency operations.

In academic circles, efforts focused on promoting IHL and the Movement among universities in volatile areas, which received ICRC reference materials to boost their libraries. Lecturers and researchers from 17 Nigerian institutions studied IHL and international criminal justice at an ICRC workshop and identified ways of enhancing IHL teaching. At presentations, students of civil and sharia law learnt about the Movement's humanitarian role and the protective properties of its emblems. Lecturers and students also benefited from ICRC sponsorship, facilitating their participation in regional IHL courses and competitions respectively.

RED CROSS AND RED CRESCENT MOVEMENT

Besides partnering delegates on the ground, the Nigerian Red Cross received ICRC training, financial, logistical and material support to strengthen its emergency preparedness/response and family-links capacities. ICRC renovations to branch offices enhanced working conditions for some 2,000 personnel. Meanwhile, the National Society's leadership participated in International Federation/ICRC workshops to enhance governance and management, drafting and subsequently adopting new statutes.

Disaster-management personnel from 15 branches reviewed emergency response procedures, including the Safer Access approach, at ICRC workshops. With ICRC guidance and materials, the National Society trained new and existing first-aid instructors, supplying them with manuals and equipment. Thus prepared, they launched a community-based first-aid initiative (see *Civilians*).

Over 100 communication personnel upgraded their skills at ICRC media-relations workshops, improving their capacities to raise public awareness of Movement activities, IHL and the Fundamental Principles (see *Civil society*).

As crisis-affected communities commonly experienced hygiene needs, the National Society expanded its sanitation activities. Following floods, for example, it assessed needs with the ICRC and then, with International Federation support, promoted good hygiene practices among those affected.

The above activities enabled relevant branches to respond effectively to violence, notably in Abuja, Jos and the Niger Delta (see *Civilians* and *People deprived of their freedom*).

RWANDA



The ICRC opened a delegation in Rwanda in 1990. It focuses on visiting the tens of thousands of detainees held in central prisons. It also makes regular visits to people held in places of temporary detention such as police stations and military facilities. It helps reunite children with the families from whom they became separated during the exodus of 1994 or during the mass repatriations in 1996–97. The ICRC works with the authorities to incorporate IHL into domestic legislation and into school and university curricula. It also supports the development of the Rwandan Red Cross.

EXPENDITURE (IN KCHF)

Protection	3,051
Assistance	1,722
Prevention	306
Cooperation with National Societies	655
General	-

► **5,734**

of which: Overheads 350

IMPLEMENTATION RATE

Expenditure/yearly budget	93%
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PERSONNEL

Expatriates	13
National staff (daily workers not included)	82

KEY POINTS

In 2010, the ICRC:

- visited over 68,000 detainees held in civilian and military places of detention, including 8 people convicted by the Special Court for Sierra Leone and serving their sentences in Rwanda
- signed an agreement with the National Prisons Service (NPS) to better coordinate joint projects constructing and rehabilitating water and sanitation infrastructure in prisons
- supported the NPS in collecting, managing and analysing data on inmates' health and nutrition
- welcomed the Ministry of Gender and Family Promotion's integration of ICRC recommendations on unaccompanied minors into a new national policy on vulnerable children
- helped families dispersed during past conflict to restore and maintain contact with relatives in Rwanda and across international borders

CONTEXT

Following elections held in August 2010, the incumbent president, who was voted in for his second seven-year term of office, continued to reorganize both the government and the Rwanda Defence Force (RDF).

The completion of Rwanda's *gacaca* trials, mandated to try approximately 1.5 million cases of people accused of crimes related to the 1994 genocide, was postponed. The process to replace the National Prisons Service (NPS) with the Rwanda Correctional Services progressed slowly. At year-end, the International Criminal Tribunal for Rwanda in Arusha, United Republic of Tanzania, had not transferred anyone sentenced for or charged with genocide to Rwanda as per its 2008 decision.

Amid ongoing military operations in the Kivu provinces of the neighbouring Democratic Republic of the Congo (DRC), former weapon bearers, including children, continued to be repatriated from the DRC to Rwanda through the Disarmament, Demobilization, Repatriation, Reintegration and Resettlement (DDRRR) process facilitated by the UN Stabilization Mission in the DRC (MONUSCO).

Rwanda formally entered the Commonwealth in March and started the transition from a civil to a common law system. It continued to develop its economy and infrastructure in accordance with its "Vision 2020" agenda, although the implementation of a five-year land reform programme was a source of discontent among the rural population.

MAIN FIGURES AND INDICATORS				
PROTECTION				
CIVILIANS (residents, IDPs, returnees, etc.)				
Red Cross messages	Total	UAMs/SCs*		
RCMs collected	3,696	81		
RCMs distributed	3,204	28		
Names published in the media	137			
Reunifications, transfers and repatriations	Total			
People reunited with their families	61			
	<i>including people registered by another delegation</i>	45		
Tracing requests, including cases of missing persons	Total	Women	Minors	
People for whom a tracing request was newly registered	88	19	28	
People located (tracing cases closed positively)	31			
	<i>including people for whom tracing requests were registered by another delegation</i>	9		
Tracing cases still being handled at 31 December 2010 (people)	95	21	36	
UAMs/SCs,* including unaccompanied demobilized child soldiers	Total	Girls	Demobilized children	
UAMs/SCs newly registered by the ICRC/National Society	65	7	39	
UAMs/SCs reunited with their families by the ICRC/National Society	62	20	2	
	<i>including UAMs/SCs registered by another delegation</i>	46		
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2010	227	62	36	
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
ICRC visits	Total	Women	Minors	
Detainees visited	68,430			
Detainees visited and monitored individually	105	2	2	
Detainees newly registered	44		2	
Number of visits carried out	217			
Number of places of detention visited	90			
Restoring family links	Total			
RCMs collected	372			
RCMs distributed	143			
People to whom a detention attestation was issued	11			

* Unaccompanied minors/separated children

ASSISTANCE				
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat		Total	Women	Children
Water and habitat activities	Beneficiaries	65,037		

ICRC ACTION AND RESULTS

In 2010, the ICRC continued to visit detainees in Rwanda, including those held in civilian prisons, military camps and police jails, monitoring their living conditions and treatment and providing the authorities with confidential feedback. Delegates also visited former weapon bearers in camps under the authority of the Rwanda Demobilization and Reintegration Commission, as well as a group of people convicted by the Special Court for Sierra Leone and serving their sentences in Rwanda.

In parallel, the delegation assisted the authorities in improving living conditions for detainees. NPS health personnel worked alongside the ICRC to monitor the nutritional status of detainees and detect potential epidemics by collecting, managing and analysing data on inmates' health. The NPS and the ICRC also rehabilitated and constructed water and sanitation facilities and other infrastructure in prisons on the basis of a 50/50 cost-sharing agreement. To further reduce health risks, delegates supplied inmates and the prison authorities with hygiene and cleaning materials.

With ICRC financial support, materials and training, the Rwandan Red Cross ran the tracing and RCM services, helping refugees, returnees and former weapon bearers restore and maintain contact with their families. The ICRC continued to assist children separated from their families in tracing their relatives, reuniting the family when appropriate, and supporting their reintegration into family and communal life. In coordination with various ministries and local partner organizations, the ICRC also boosted managerial capacities at a centre hosting unaccompanied children.

Meanwhile, the National Society continued to strengthen its capacities to maintain family links, respond to emergencies and promote the Movement and its Fundamental Principles, with ICRC support. To maximize the impact of aid, Movement partners working in Rwanda met regularly to coordinate their activities and their support to the National Society.

Throughout the year, the ICRC continued to promote IHL and acceptance of the Movement within Rwandan political, military and academic circles. However, the ICRC and the RDF were not able, as planned, to assess the level of IHL integration into their doctrine, training and operations.

CIVILIANS

People separated from their families during past conflict, including Rwandan returnees, refugees from neighbouring countries, and other civilians, restored and maintained contact with relatives within and across borders through the tracing and RCM services provided by the Rwandan Red Cross, with ICRC technical and financial support (see *Red Cross and Red Crescent Movement*). Former weapon bearers, including children, who had been demobilized in the DRC and repatriated to Rwanda through the MONUSCO-run DDRRR process, contacted relatives via family-links services offered in the Doha and Mutobo camps, which

were under the authority of the Rwanda Demobilization and Reintegration Commission. Contacts were maintained with ICRC delegations in neighbouring countries and other actors providing services to refugees or repatriating them to Rwanda, with a view to coordinating activities and raising awareness of the Movement's family-links services.

During the year, 62 unaccompanied children were reunited with their relatives. Following reunification, the family received visits from ICRC representatives, who monitored how the child was settling back into home and community life. Some 30 children identified as experiencing social or economic difficulties received support through mediation and counselling services. The names of children who were still seeking their parents were broadcast on local radio stations and published in newspapers.

In the meantime, unaccompanied children still seeking their parents or awaiting reunification who were living in the Rusayo Centre for Unaccompanied Minors saw improvements in their care after various ministries, local partner organizations and the ICRC worked together to boost managerial capacities there. Over 300 boarders also received clothing, school supplies and hygiene items.

In July, the Ministry of Gender and Family Promotion produced a draft "Integrated Child Policy" as part of efforts to address the needs of vulnerable children in Rwanda. The final draft incorporated many of the recommendations of a 2008 ICRC report submitted to the authorities and highlighting the needs of unaccompanied minors on the basis of nearly 1,000 cases.

PEOPLE DEPRIVED OF THEIR FREEDOM

Over 68,000 people held in places of detention run by the Ministry of Internal Security, the Rwandan National Police and the RDF received regular visits, conducted in accordance with the ICRC's standard procedures, enabling delegates to monitor their treatment and living conditions. Those detained in connection with the armed conflict in the DRC and those held for other reasons of State security were followed individually. Eight people convicted by the Special Court for Sierra Leone and transferred to Rwanda at the end of 2009 were also visited. Particular attention was paid to vulnerable detainees, such as the elderly, minors, women, foreigners and those awaiting trial. Where needed, minors, newly imprisoned detainees and individuals claiming foreign citizenship were given the opportunity to contact their relatives and/or embassies. Following visits, the relevant detaining authorities received confidential feedback on the ICRC's findings. Dialogue continued with the detaining authorities, notably high-level military officials, to obtain access to all detainees in their custody.

In parallel, the detaining authorities, including the NPS, pursued dialogue with the ICRC aimed at ensuring detainees' living conditions met internationally recognized standards. This included follow-up to recommendations made in two ICRC reports submitted following visits in 2009 concerning the treatment of detainees in police custody and of minors in detention. With the

full agreement of the authorities, cases of minors with no legal representation or of detainees held for a long period without trial were referred to appropriate organizations for legal follow-up. Over 430 detained minors continued their education with the help of ICRC-provided school materials.

Former weapon bearers, including children, in camps under the authority of the Rwanda Demobilization and Reintegration Commission received visits from ICRC delegates. The relevant authorities and the ICRC pursued a dialogue on the subsequent findings.

Authorities assisted in improving detainees' health and nutrition

The relevant authorities continued to receive ICRC support in improving inmates' health and nutrition. With technical back-up from the delegation, the NPS health unit continued to monitor and address epidemics in central prisons and to record and analyse prison health data, using a system established in 2009 with ICRC input. The unit was also advised on how to carry out regular nutrition surveys to detect vitamin deficiencies and other signs of malnutrition among inmates. Prison health staff underwent training by ICRC medical personnel to tackle specific health issues, including practical measures to prevent outbreaks of disease. To complement this, prison dispensaries received medical supplies, when needed, to ensure the proper treatment of inmates. Meanwhile, the NPS health unit, the Health, Internal Security and Local Government Ministries, the Global Fund to Fight AIDS, Tuberculosis and Malaria and the ICRC coordinated efforts to incorporate prison health care into national health policies.

Inmates see improvements in infrastructure and hygiene

Some 65,000 detainees benefited from a range of joint projects carried out by the authorities and the ICRC on the basis of a 50/50 cost-sharing agreement. For example, as part of efforts to address overcrowding, around 7,500 vulnerable detainees in three prisons had their dormitories rehabilitated and enlarged. Similar works were ongoing for inmates in three other prisons. Hygiene conditions improved for nearly 15,500 detainees after water supply systems were upgraded in six prisons, and some 12,400 living in three other prisons benefited from kitchen repairs and new cooking materials. The prison authorities and the delegation also started rehabilitating latrines in three prisons and installed new biogas systems (waste management combined with energy production) in two. With ICRC advice, the authorities maintained the biogas systems previously installed, improving sanitation and reducing wood consumption and costs. In November, the NPS and the ICRC reinforced the coordination of these joint projects by signing a working agreement outlining their respective financial and technical responsibilities.

All 65,000 detainees were supplied with soap and other hygiene items for personal use, and the prison authorities received the necessary cleaning materials. To further reduce the spread of disease, inmates participated in ICRC-supported and -supervised pest-control programmes, and selected staff from all 14 central prisons were trained in fumigation techniques.

AUTHORITIES

Politicians, civil servants and local authorities learnt more about humanitarian issues and the Movement's activities in Rwanda and the sub-region during meetings, presentations and briefings conducted by the ICRC and, where possible, the National Society (see *Red Cross and Red Crescent Movement*). This helped foster understanding of IHL and acceptance of the Movement.

At the national level, the relevant authorities were offered technical assistance in ratifying IHL treaties to which Rwanda was not yet party, such as the Convention on Cluster Munitions and Additional Protocol III, and in drafting national laws implementing their provisions. The government was also offered technical expertise in integrating IHL during its changeover to a common law system (see *Context*) and in considering revisions to the country's penal code.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

Owing to internal restructuring (see *Context*), the RDF High Command was not in a position to assess the level of IHL integration into RDF doctrine, training and operations with the ICRC, as planned. Nonetheless, in bilateral meetings, high-level defence officials and the delegation discussed ways of potentially resuming cooperation. Meanwhile, RDF officers attending an ICRC presentation at a military academy reinforced their understanding of how IHL applied to peacekeeping operations.

CIVIL SOCIETY

To identify ways to better support the integration of IHL at university level, ICRC delegates developed contacts with a lecturer from the National University of Rwanda in Butare. He received regular updates on relevant legal developments and participated in a round-table abroad, with ICRC sponsorship. In the meantime, students and lecturers kept abreast of developments in IHL at law libraries and documentation centres, which the delegation stocked with up-to-date reference materials.

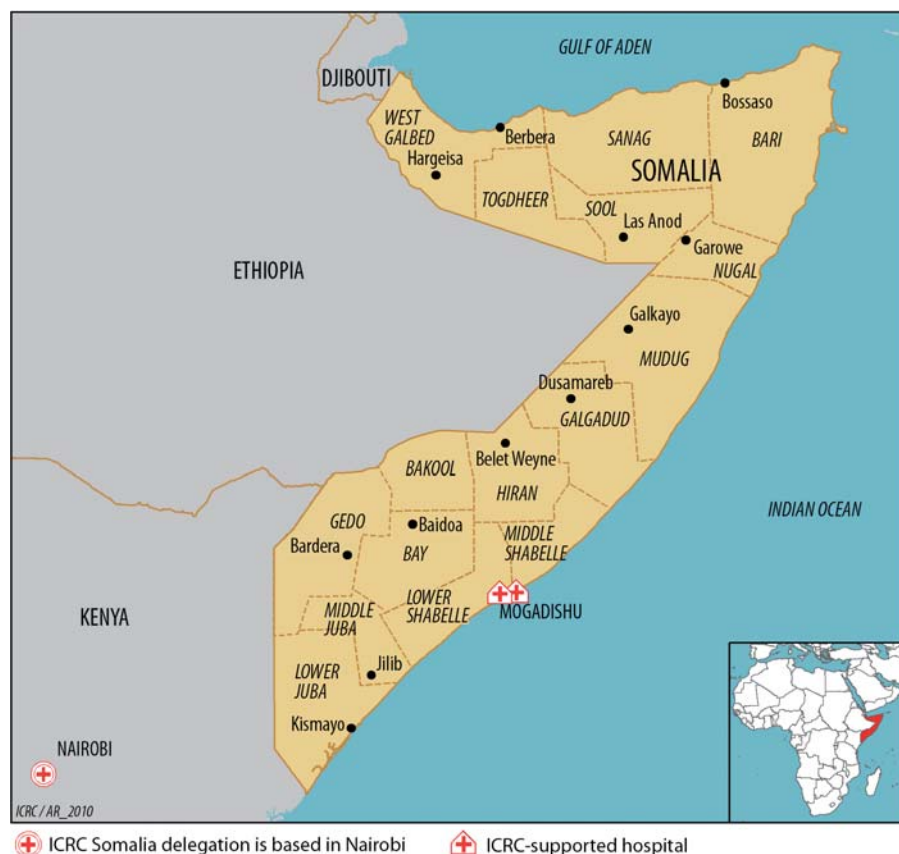
RED CROSS AND RED CRESCENT MOVEMENT

The Rwandan Red Cross remained one of the principal humanitarian actors in the country, thanks to its countrywide network of trained volunteers and its partnership and coordination with other Movement components. As a key partner for the ICRC in restoring and maintaining contact between dispersed family members (see *Civilians*), it received 30 bicycles and a motorcycle to run its decentralized family-links network. With ICRC material, financial and technical support, it also continued to develop its capacities to respond to emergencies and raise awareness of IHL and the Movement.

To boost the National Society's emergency response capacities, 14 members of disaster response teams were trained by the ICRC as Safer Access focal points. This placed more than 700 members and volunteers in a better position to operate safely in situations of violence.

Meanwhile, the National Society worked to increase understanding of IHL and garner support for the Movement through its network of 60 trained and equipped communication volunteers, including by producing and distributing newsletters on Rwandan Red Cross activities. It also held information sessions for over 15,000 personnel, local authorities and members of the general public, which had the dual aim of raising awareness of humanitarian issues and expanding the National Society's network of public contacts. These activities prompted nearly 1,000 people to volunteer for the Rwandan Red Cross. Owing to a lack of availability of key stakeholders, however, no progress was made on drafting a law to protect the emblem.

SOMALIA



EXPENDITURE (IN KCHF)

Protection	602
Assistance	64,319
Prevention	797
Cooperation with National Societies	1,043
General	-

► **66,760**

of which: Overheads **4,075**

IMPLEMENTATION RATE

Expenditure/yearly budget	85%
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PERSONNEL

Expatriates	15
National staff (daily workers not included)	42

KEY POINTS

In 2010, the ICRC:

- remained operational in Somalia despite challenging security conditions
- with the Somali Red Crescent Society, mounted large-scale relief operations, providing hundreds of thousands of people with food, daily water rations and essential household items
- helped farmers, fishing communities and urban households work towards regaining their economic independence through livelihood-support projects
- supported 16 hospitals, including 2 of Mogadishu's key surgical referral facilities, which treated more than 7,000 weapon-wounded patients
- with the National Society, helped tackle rising malnutrition among children, increasing from 3 to 14 the number of therapeutic feeding programmes
- repeatedly reminded parties to the conflict to respect IHL, through face-to-face meetings and programmes broadcast on Somali radio stations

The ICRC has maintained a presence in Somalia since 1982, basing its delegation in Nairobi, Kenya, since 1994. It focuses on providing emergency aid to people directly affected by armed conflict, often in combination with natural disasters, and runs an extensive first-aid, medical and basic health care programme. It endeavours to promote respect for IHL, particularly the protection of civilians and medical staff and infrastructure. It also carries out small-scale water, agricultural and cash-for-work projects, designed to restore or improve livelihoods in communities weakened by crises. It works closely with and supports the development of the Somali Red Crescent Society.

CONTEXT

The humanitarian crisis engulfing much of Somalia showed no signs of abating during 2010. Armed conflict intensified in the centre and south, killing, wounding and displacing many thousands of people. Natural disasters compounded the crisis in a country that had been without an effective government for almost 20 years.

Mogadishu was again the scene of some of the fiercest fighting between forces supporting the transitional federal government (TFG), including the African Union Mission in Somalia (AMISOM), and armed groups. In December, the UN Security Council authorized AMISOM to increase its presence from 8,000 to

12,000 troops. Amid mounting political tensions, the prime minister of the TFG resigned in September and was replaced by a new prime minister.

Communal violence in central regions and flooding in the south drove more people from their homes. In the north, the self-declared republic of Somaliland held an election, resulting in the peaceful handover of power to a newly elected president. In the semi-autonomous region of Puntland, fighting occurred between security forces and an Islamist armed group.

Prior to the arrival of the *Gu* and *Deyr* rainy seasons, droughts decimated crops and herds. At year-end, rising malnutrition levels were noted in regions deprived of *Deyr* rains.

MAIN FIGURES AND INDICATORS

PROTECTION

CIVILIANS (residents, IDPs, returnees, etc.)			
Red Cross messages	Total	UAMs/SCs*	
RCMs collected	9,692		
RCMs distributed	17,268		
Names published in the media	6,181		
Names published on the ICRC family-links website	10,873		
Tracing requests, including cases of missing persons	Total	Women	Minors
People for whom a tracing request was newly registered	1,036	221	572
People located (tracing cases closed positively)	424		
<i>including people for whom tracing requests were registered by another delegation</i>	9		
Tracing cases still being handled at 31 December 2010 (people)	1,612	365	844
UAMs/SCs,* including unaccompanied demobilized child soldiers	Total	Girls	Demobilized children
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2010	7	5	
Documents			
People to whom travel documents were issued	97		

* Unaccompanied minors/separated children

ASSISTANCE

CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security, water and habitat		Total	Women	Children
Food	Beneficiaries	683,938	16%	67%
	<i>of whom IDPs</i>	Beneficiaries	494,161	
Essential household items	Beneficiaries	679,000	17%	66%
	<i>of whom IDPs</i>	Beneficiaries	679,000	
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries	898,140	17%	66%
	<i>of whom IDPs</i>	Beneficiaries	170,647	
Water and habitat activities	Beneficiaries	1,029,638	20%	60%
	<i>of whom IDPs</i>	Beneficiaries	403,928	
Health				
Health centres supported	Structures	37		
Average catchment population		537,167		
Consultations	Patients	555,530		
	<i>of which curative</i>	Patients	168,653	302,164
	<i>of which ante/post-natal</i>	Patients		
Immunizations	Doses	69,392		
	<i>of which for children aged five or under</i>	Doses	61,307	
	<i>of which for women of childbearing age</i>	Doses	8,085	
Referrals to a second level of care	Patients	7,741		
Health education	Sessions	1,507		

MAIN FIGURES AND INDICATORS				
ASSISTANCE				
WOUNDED AND SICK				
Hospitals		Total	Women	Children
Hospitals supported	Structures	16		
	<i>of which provided data</i>	16		
Admissions	Patients	8,403	2,195	1,029
	<i>of whom weapon-wounded</i>	7,029	1,545	724
	<i>(including by mines or explosive remnants of war)</i>	126		
	<i>of whom other surgical cases</i>	1,122		
	<i>of whom medical cases</i>	602		
	<i>of whom gynaecological/obstetric cases</i>	164		
Operations	Operations performed	14,410		
Outpatient consultations	Patients	13,101		
	<i>of which surgical</i>	6,609		
	<i>of which medical</i>	6,492		
First aid				
First-aid posts supported	Structures	4		
	<i>of which provided data</i>	4		
Wounded patients treated	Patients	5,387		
Water and habitat				
Water and habitat activities	Number of beds	170		

ICRC ACTION AND RESULTS

Despite a volatile security environment, and intermittent difficulties accessing people in need, the ICRC remained operational throughout much of Somalia in 2010. Operating from Nairobi via “remote management”, the ICRC had constantly to adapt working procedures and control mechanisms to an evolving situation, in order to ensure proper monitoring of its activities. Its work was facilitated by its neutral, impartial and independent stance, its regular contact with parties to conflict, the experience and adaptability of its field officers and the well-accepted presence countrywide of the Somali Red Crescent. Faced with a complex and shifting range of humanitarian needs, the ICRC maintained its operational flexibility, responding to emerging crises while assisting communities in rebuilding livelihoods.

By April, the ICRC and National Society had already delivered emergency food relief to the total number of beneficiaries budgeted for in this category for the whole year. Given rising levels of malnutrition reported in central and southern regions, the ICRC appealed to its donors in May for additional funds to provide more food aid and livelihood support. By year-end, 430,902 conflict-, drought- and flood-affected civilians had received emergency food to sustain them for two to four months.

More than 679,000 IDPs exposed to the elements after fleeing their homes were provided with blankets and tarpaulins. With drought affecting several communities before the *Gu* and *Deyr* rainy seasons, the ICRC trucked in clean water for up to eight weeks to more than 332,400 people (including 119,700 IDPs) and 513,500 people.

Meanwhile, farming, fishing and urban households worked towards regaining economic independence with the help of ICRC-funded livelihood-support projects. Ahead of the *Gu* season, 240,000 people in farming communities received staple

crop seed, which produced healthy yields. Plans to repeat the distribution ahead of the *Deyr* season had to be cancelled when access to some areas could not be obtained on time. During the dry season, 246,600 people grew vegetables or staple crops from ICRC-supplied seed, enabling them to meet basic food needs and generate income. With ICRC support, key water points and irrigation systems were built or repaired, sometimes as cash-for-work projects; communities received sandbags as protection against seasonal floods; and households headed by women set up small businesses to generate additional income. Vulnerable coastal communities enhanced their fishing and boatbuilding skills with ICRC equipment and advice.

Support continued to 37 outpatient clinics (two of them upgraded from health posts) run by the Somali Red Crescent. Clinics received drugs, dressing materials, funds and staff training to offer free curative and mother and child care and measles vaccinations. In August, a new health post opened in Gedo. Amid growing concerns over malnutrition – a problem exacerbated by armed conflict, drought, rising food prices and difficulties of access of aid agencies – the ICRC boosted its support to Somali Red Crescent health centres offering treatment to malnourished children under five, increasing the number of therapeutic feeding programmes from 3 to 14.

To treat the weapon-wounded, Keysaney and Medina hospitals in Mogadishu received substantial ICRC support, including infrastructure repairs to the former after a shelling incident. Other hospitals and clinics received ad hoc supplies to deal with weapon wounds. More than 7,000 weapon-wounded patients were treated at ICRC-supported hospitals. Some 20 surgeons enhanced their war-surgery skills at an ICRC-organized seminar.

Thousands of uprooted Somalis exchanged news with relatives at home and abroad through the family-links service run by the ICRC and the Somali Red Crescent.

Given the high number of civilian casualties and attacks on aid workers and medical staff and facilities, the ICRC maintained its confidential dialogue with weapon bearers, repeatedly stressing their obligations under IHL to protect and respect people not or no longer taking part in hostilities. Broadcasts on radio stations reinforced this message.

The National Society gained more experience by partnering the ICRC in relief and communication activities and, with ICRC support, reinforced its family-links network and management. To maximize aid efforts, the ICRC ensured the coordination of Movement activities, stayed in contact with other aid organizations in the field and attended meetings of Nairobi-based Somalia coordination bodies, comprising donors, UN agencies and NGOs.

CIVILIANS

Communities survive conflict, drought and floods with help of emergency aid

During the year, hundreds of thousands of people lacking immediate access to shelter, food and water sustained themselves with emergency supplies provided by the ICRC and National Society staff, who reinforced their skills in efficient aid delivery during an ICRC-organized training course.

Some 679,000 civilians displaced from their homes in central and southern Somalia by armed conflict, natural disaster or a combination of these received ICRC kits containing items essential to daily life. IDPs were able to shelter from the elements using tarpaulins, keep warm with blankets and clothing, and prepare meals using their own kitchenware, thus removing the need to share scarce utensils with host communities.

In the first quarter alone, 60,000 IDPs in Galgadud (the total number of beneficiaries of food relief initially budgeted for in 2010) received emergency rations from the National Society and the ICRC. Over the year, 430,902 IDPs in Somalia survived periods of crisis with the help of ICRC-supplied food rations, including beans, cereals and vegetable oil, to cover periods of two to four months.

As water shortages became critical before the *Gu* season, notably in Galgadud and Mudug, more than 332,400 people (IDPs and host communities) survived on emergency water supplies trucked in for up to eight weeks. More than 513,500 people in 11 regions adversely affected by drought as a result of delayed *Deyr* rains began receiving water rations from late October. Trucking operations were ongoing at year-end.

Villagers build economic security and gain improved access to water

Prior to the *Gu* season, 240,000 people in conflict-affected farming communities, which had experienced two failed harvests in succession, planted staple crop seed supplied by the ICRC. These communities also received a one-off, two-month ICRC food

rations to allow them to focus on improving yields and boosting income, without the distraction of seeking out alternative food sources in the period before harvest. Twice as many beneficiaries as originally budgeted for received this assistance. Access issues prevented the delivery of staple seed in advance of the *Deyr* season.

With the help of ICRC-supplied vegetable seed, pesticide sprayers and instruction leaflets, 134,400 people with access to permanent water sources grew enough vegetables to cover their basic food needs while generating sufficient surplus to boost household income by up to 30%. Some 18,318 people (3,053 households) also benefited from new initiatives to improve their food production. For example, 10 sluice gates were repaired and 52 pumps distributed, benefiting 15,192 people (2,532 households) and 521 households (3,126 people) hired tractors to plough land, with the ICRC covering the cost, and received tools and fertilizers.

In Galgadud, Mogadishu and Mudug, 652 families (3,912 people) headed by women, who had lost their breadwinners as a result of armed conflict began earning an income again. They set up small businesses with basic items provided by the ICRC, such as milling machines or materials to open a tea shop. Coastal communities (24,000 people/4,000 households) fished with ICRC-supplied kits they could not otherwise afford or could not access locally. Fifty trainees revived traditional boatbuilding skills with ICRC support. Plans to buy livestock from nomads and distribute the meat to poor families did not take place as the need for such assistance among communities did not arise.

Some of the poorest residents in 22 villages in South Galgadud, Puntland and Middle and Lower Shabelle, in total 13,170 people (2,195 households), earned much-needed income, while helping to upgrade vital infrastructure in their communities through ICRC cash-for-work projects. Workers mainly rehabilitated irrigation canals and rainwater catchments. More than 112,200 people in flood-affected farming communities also received supplies of staple seed, allowing them to rebuild their livelihoods following inundations of agricultural lands.

In the south of the country, where rains during the *Gu* season were heavy, 249,000 people (41,500 households) in flood-prone areas sought to protect farmland and homes using sandbags supplied by the ICRC. Four riverbank breaches were rehabilitated, offering flood protection for 103,140 people (17,190 households).

Drawing on their local knowledge and skills, communities worked with ICRC specialists, local contractors and National Society staff to improve access to clean water sources for farmers, nomads and their livestock in 10 drought-prone regions (benefiting some 170,500 people). Projects included the rehabilitation or drilling of 30 boreholes and hand-dug wells, plus 12 traditional rainwater catchments. In September, 50 operators were trained in borehole maintenance. To improve coordination in water provision and provide a planning tool for future projects, the ICRC established a database of water points using a geographic information system.

Conflict-affected communities benefit from extended health services

Some 555,530 IDPs and residents in conflict-affected areas were able to access free primary health care services at 37 ICRC-supported outpatient clinics, including 8 temporary facilities, run by the Somali Red Crescent. Two of the temporary clinics, opened late in 2009, had been upgraded from health posts. All clinics received drugs, dressing materials, funds and staff training from the ICRC to provide curative and mother and child care, plus vaccinations. Three of the clinics underwent renovation work. Six of them operated mobile outreach teams to treat people too sick to travel or unable to afford transport. In December, a new ICRC-supported health post providing basic health care opened in rural Gedo. To avert a possible measles outbreak, several thousand children under five were vaccinated at six of the clinics in February. As no major cholera outbreaks occurred in 2010, activities to tackle this disease were limited to health messages broadcast on radio.

More than 13,000 severely malnourished children (on average 2,610/month) received emergency treatment (food and drugs) at 14 ICRC-supported outpatient therapeutic feeding programmes (increased from 3 in 2009). The services were set up in Somali Red Crescent clinics and supported by ICRC food, drugs and staff training.

A planned evaluation of the health and hygiene project in the Juba regions could not proceed owing to security issues.

Separated family members regain and maintain contact

Several thousand Somalis separated from their families by conflict, natural or economic disaster or their combined effects were able to locate relatives at home and abroad and exchange news using the family-links service run by the National Society and the ICRC. At their families' request, the names of missing Somalis were read out on the ICRC-supported "Missing Persons" radio show broadcast on the BBC's short-wave Somali service. A review of this project confirmed its humanitarian value. Families also tracked relatives through an ICRC website listing 10,873 people sought through the radio programme or registered by the Red Cross and Red Crescent network. In 2010, 424 people were located using the family-links service, while 97 refugees accepted for resettlement by third countries and without official identification papers were issued with ICRC travel documents.

To improve the quality of tracing and RCM services, National Society personnel from across the country honed their skills and shared their expertise during a workshop and field trip organized with ICRC support. A tracing coordinator in Mogadishu met representatives of the British Red Cross to reinforce coordination of activities.

WOUNDED AND SICK

Amid escalating civilian casualties and indiscriminate attacks on medical staff, hospitals and clinics during the course of fighting, parties to conflict were repeatedly reminded by the ICRC of their duty under IHL to protect the wounded and sick and medical personnel and infrastructure.

More than 7,000 weapon-wounded patients received treatment at ICRC-supported hospitals in Somalia. Most patients (over 6,000) were treated at Mogadishu's two ICRC-supported referral hospitals: Keysaney (run by the Somali Red Crescent) and Medina (community-run). Resources were often stretched to cope with influxes of patients, and the triage building at Keysaney had to undergo repairs after being struck during a shelling incident that killed one patient and wounded another. Nevertheless, both hospitals remained operational, backed by the ICRC's continuing provision of medical supplies, equipment, funds, staff training and supervision, along with infrastructure maintenance. Plans for a new operating theatre at Keysaney were progressing at year-end.

Six newly graduated Somali doctors who had begun working in the two hospitals received specialist training from senior surgeons. Meanwhile, 24 surgeons from hospitals in the centre and south of the country and Puntland learnt more about treating weapon-related wounds at an ICRC seminar. The organization also sponsored prosthetic/orthotic staff to train abroad.

Outside Mogadishu, hospitals and clinics received ad hoc deliveries of ICRC emergency supplies to help treat influxes of weapon-wounded patients. A mobile surgical team based at Keysaney remained ready to be deployed beyond Mogadishu when required. A total of 5,387 people were treated at four ICRC-supported first-aid posts, located in the Bay, Mudug, Galgadud and Lower Shabelle regions. ICRC support also continued to the independently run Africa Lifeline ambulance service operating in Mogadishu.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

Parties to conflict in Somalia, the majority of whom were in regular contact with the ICRC, received repeated reminders of their obligations under IHL. These included taking every feasible precaution to avoid causing injury or loss of life among civilians, to prevent damage to civilian property and medical infrastructure, and to respect the rights of medical staff, wounded or captured fighters, and aid workers.

To ensure safe access of Movement staff to people in need, weapon bearers were told during face-to-face meetings about the Movement's mandate and strict principles of neutrality, impartiality and independence. This message was reinforced through various media, including broadcasts on Somali radio stations, produced with input from the Somali Red Crescent and the ICRC. Test runs were conducted for a project to promote IHL and its link with Somali customary law via mobile phone text messages, but it was discontinued once it was established that the project would not have the intended impact.

CIVIL SOCIETY

The media, religious leaders, business people, community elders and Somalis abroad all had the potential to influence public and political opinion, including support for IHL.

Through ICRC bulletins, press releases, seminars and audiovisual materials, journalists and broadcasters from the national and international media received regular updates on the Movement's principles and work in Somalia, drawing attention to the need for all sides to respect IHL. Traditional leaders and other opinion-makers learnt more about IHL via talk shows, dramas and spots broadcast on six Somali radio stations, with input from the National Society and the ICRC. To familiarize listeners with humanitarian principles and the work of the Movement, broadcasts drew parallels between IHL and Somali customary law governing armed conflict. Younger people in particular, including weapon bearers, who had grown up in a climate of uncontrolled violence, stood to benefit from these reminders of traditional Somali customs relating to the treatment of non-combatants.

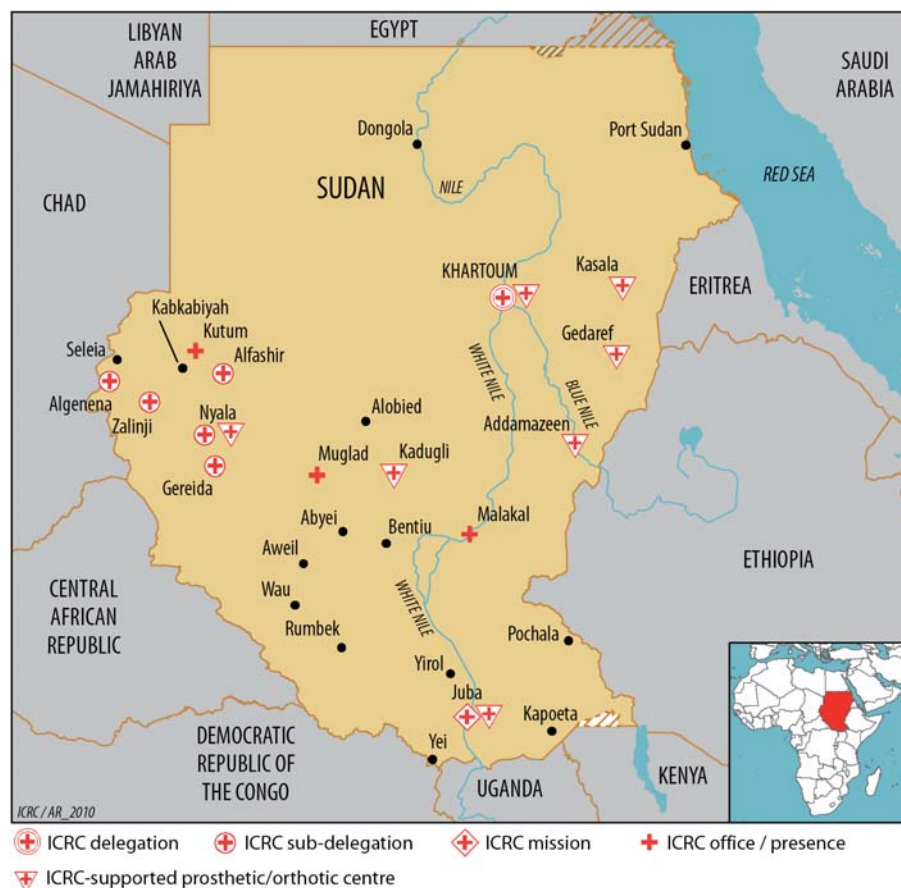
RED CROSS AND RED CRESCENT MOVEMENT

The Somali Red Crescent continued to play a crucial role in delivering emergency aid and medical and health care and promoting IHL. To help it further build its capacities, the ICRC provided the Somali Red Crescent with technical, material and financial support. The National Society received ICRC funds to cover salaries and other running costs for more than 200 management, technical, family-links, communication and medical staff in all 3 coordination offices and 19 regional branches. Close cooperation was maintained with Movement partners through regular coordination meetings.

During February, at a general meeting in Garowe, Puntland, some 50 Somali Red Crescent staff and volunteers from all regions endorsed a new five-year plan of action. Representatives of the International Federation, National Societies working internationally and the ICRC also attended.

Movement partners continued to receive security and logistical support from the ICRC, as the Movement's lead agency in Somalia. Regular meetings also enabled the partners to coordinate support to the National Society and assistance to the population.

SUDAN



The ICRC opened an office in Khartoum in 1978. In 1984, it initiated operations in the context of the armed conflict between government forces and the Sudan People's Liberation Movement/Army, later adapting its programmes to the transition to peace. Since 2004, it has responded to needs arising from the hostilities in Darfur. It works to ensure that people directly affected by armed conflict are protected in accordance with IHL, receive emergency aid, medical care and livelihood support, and can re-establish family links. It works with the Sudanese Red Crescent Society and provides leadership for other Movement partners active in Sudan.

EXPENDITURE (IN KCHF)

Protection	10,216
Assistance	49,353
Prevention	6,403
Cooperation with National Societies	4,408
General	-

► **70,379**

of which: Overheads 4,246

IMPLEMENTATION RATE

Expenditure/yearly budget	92%
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PERSONNEL

Expatriates	94
National staff (daily workers not included)	1,238

KEY POINTS

In 2010, the ICRC:

- faced with security and access constraints in Darfur, delivered assistance to conflict-affected communities by working partly through partners on the ground, while maintaining its presence in Central and South Sudan
- enabled more than 354,000 struggling farmers to grow and harvest their own crops, and 81,000 pastoralists to protect livestock through vaccination and veterinary training
- provided 8 health centres, 14 hospitals and 6 physical rehabilitation centres with materials, training, staff incentives and infrastructure improvements
- acted as a neutral intermediary in the release and handover to the authorities of 123 Sudanese Armed Forces personnel held by an armed group in Darfur
- to secure greater protection of civilians and improve access of ICRC staff to people in need, briefed thousands of military, security and police personnel, plus members of armed groups, on IHL and the Movement's work
- supported the Sudanese Red Crescent Society in boosting its emergency preparedness in case of election- or referendum-related violence

CONTEXT

Sudan's first multi-party national elections in 24 years, held in April, passed amid relative calm, with Omar al-Bashir retaining the presidency.

In July, the International Criminal Court issued a second warrant for President al-Bashir's arrest, this one on grounds of genocide in Darfur. The first warrant, issued in 2009, cited war crimes and crimes against humanity.

Darfur remained volatile, despite efforts to resolve its non-international armed conflict during talks in Doha, Qatar, and an easing of political tensions with neighbouring Chad. Thousands more people fled their villages amid fighting between Sudanese government forces and armed groups. Intercommunal violence recurred,

while banditry and kidnapping endangered civilians and aid workers. With thousands of people still displaced in camps, the Sudanese government sought to encourage them to return to their villages.

South, Central and Eastern Sudan witnessed intercommunal and/or political violence, while the alleged activities of a Ugandan armed group in the south destabilized communities.

At year-end, the approaching referendum on South Sudan's secession in January 2011 dominated national politics with thousands of people travelling south to vote in their home regions. Plans for a referendum in Abyei were put on hold.

Two peacekeeping forces, the UN Mission in Sudan (UNMIS) and the UN-African Union Mission in Darfur (UNAMID), retained their presence.

MAIN FIGURES AND INDICATORS

PROTECTION

CIVILIANS (residents, IDPs, returnees, etc.)

Red Cross messages	Total	UAMs/SCs*	
RCMs collected	7,745	22	
RCMs distributed	6,267	45	
Phone calls facilitated between family members	80		
Reunifications, transfers and repatriations	Total		
People reunited with their families	18		
Tracing requests, including cases of missing persons	Total	Women	Minors
People for whom a tracing request was newly registered	279	41	56
People located (tracing cases closed positively)	180		
<i>including people for whom tracing requests were registered by another delegation</i>	32		
Tracing cases still being handled at 31 December 2010 (people)	580	79	131
UAMs/SCs,* including unaccompanied demobilized child soldiers	Total	Girls	Demobilized children
UAMs/SCs newly registered by the ICRC/National Society	64	19	
UAMs/SCs reunited with their families by the ICRC/National Society	29	9	
<i>including UAMs/SCs registered by another delegation</i>	11		
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2010	88	19	

PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)

ICRC visits	Total	Women	Minors
Detainees visited	153		
Detainees visited and monitored individually	141		
Detainees newly registered	141		
Number of visits carried out	2		
Number of places of detention visited	2		
Restoring family links	Total		
RCMs collected	1		
Phone calls made to families to inform them of the whereabouts of a detained relative	1		
Detainees released and transferred/repatriated by/via the ICRC	123		
People to whom a detention attestation was issued	41		

* Unaccompanied minors/separated children

ASSISTANCE

CIVILIANS (residents, IDPs, returnees, etc.)

Economic security, water and habitat		Total	Women	Children
Food	Beneficiaries	256,155	17%	65%
	<i>of whom IDPs</i>	163,984		
Essential household items	Beneficiaries	61,935	21%	60%
	<i>of whom IDPs</i>	59,120		
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries	435,316	25%	45%
	<i>of whom IDPs</i>	330,117		
Water and habitat activities	Beneficiaries	296,038	51%	19%
	<i>of whom IDPs</i>	179,811		

MAIN FIGURES AND INDICATORS				
ASSISTANCE				
Health		Total	Women	Children
Health centres supported	Structures	8		
Average catchment population		115,167		
Consultations	Patients	80,504		
	<i>of which curative</i>		20,865	39,143
	<i>of which ante/post-natal</i>		3,311	
Immunizations	Doses	115,806		
	<i>of which for children aged five or under</i>	113,240		
	<i>of which for women of childbearing age</i>	2,566		
Referrals to a second level of care	Patients	289		
Health education	Sessions	267		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat				
Essential household items	Beneficiaries	148		
WOUNDED AND SICK				
Hospitals				
Hospitals supported	Structures	14		
Admissions	Patients	19		
	<i>of whom weapon-wounded</i>	19		
First aid				
First-aid posts supported	Structures	11		
	<i>of which provided data</i>	6		
Wounded patients treated	Patients	344		
Physical rehabilitation				
Centres supported	Structures	6		
Patients receiving services	Patients	2,982	674	457
New patients fitted with prostheses	Patients	424	78	26
Prostheses delivered	Units	1,282	281	57
	<i>of which for victims of mines or explosive remnants of war</i>	129		
New patients fitted with orthoses	Patients	277	61	156
Orthoses delivered	Units	765	176	428
	<i>of which for victims of mines or explosive remnants of war</i>	1		
Crutches delivered	Units	1,299		

ICRC ACTION AND RESULTS

Operating within security constraints in Darfur, the ICRC continued to assist conflict-affected communities there while simultaneously addressing humanitarian needs in violence-prone regions of Central and South Sudan.

ICRC staff movements in Darfur were restricted following the kidnapping, in late 2009, of two delegates on either side of the Sudan-Chad border. They were released in February and March. After reviewing its working methods in order to maximize the impact of humanitarian assistance while minimizing risks to staff, the ICRC resumed movements in rural Darfur from end-May. With the necessary monitoring procedures in place, it delivered assistance to conflict-affected populations, partly through suitable partners on the ground, including the Sudanese Red Crescent Society, national and local authorities and local communities.

In Darfur and Central and South Sudan, the ICRC supplied emergency food and shelter materials to civilians displaced by armed conflict and other situations of violence. Struggling pastoralist communities benefited from ICRC-supported livestock vaccination campaigns, backed by veterinary training to ensure continuity of care for herds. Meanwhile, farming communities received seed and

tools to restart agricultural production, sometimes accompanied by emergency aid to tide them over while crops were growing.

Recipients of seed and tools included, for the first time, people living in Darfur's Gereida IDP camp or leaving it to return to their home villages. Also in Gereida, the ICRC continued, with the Australian and British Red Cross Societies, to run a supplementary feeding programme for malnourished children and helped organize vaccinations against meningitis. As planned, the ICRC reduced its other operations in the camp, handing over management of the health centre to the NGO Merlin in January, and water and sanitation facilities to Care International Switzerland in August. The ICRC scaled down its Gereida sub-delegation to an office, thereafter depending on the Nyala sub-delegation. In August, amid security restrictions, it closed its Kutum office.

Also in Darfur, the ICRC ensured that 8 primary health care centres received medical supplies and staff incentives. It helped reduce health risks by training and equipping community workers in Darfur and Central and South Sudan to repair and maintain water points, and supported the rehabilitation of water yards (storage systems).

To ensure adequate care for weapon-wounded patients, the ICRC provided medical supplies to 14 Sudanese hospitals, training some

staff in war-surgery techniques and rehabilitating infrastructure where needed. In November, the ICRC deployed a two-person mobile surgical team to South Sudan to intervene in case of emergencies. Meanwhile, the organization maintained support to 6 physical rehabilitation centres, including the ICRC-constructed Juba referral facility.

First-hand ICRC monitoring of civilian welfare, particularly in Darfur, was limited by security and access constraints. Meanwhile, the ICRC maintained dialogue with authorities and weapon bearers, reminding them of their responsibilities under IHL and other laws to protect civilians. Complementing these meetings were longstanding initiatives to promote IHL among authorities, weapon bearers and influential civil society sectors, sometimes combined with first-aid training.

People separated from their families while fleeing violence restored and maintained contact using the ICRC-supported family-links service, delivered by the National Society. The welfare of unaccompanied or separated children remained a priority.

By year-end, the government had not yet authorized the ICRC to visit detainees. However, in its role as a neutral intermediary, the ICRC facilitated the release and handover to the authorities of 123 Sudanese soldiers held by an armed group.

In preparation for potential election- and referendum-related violence, the Sudanese Red Crescent, with ICRC support, strengthened its emergency response, first-aid and communication skills. The ICRC also facilitated coordination within the Movement, staying in contact with UN and other agencies to coordinate and maximize the impact of humanitarian activities.

CIVILIANS

Alleged IHL violations monitored

Security and access constraints restricted the ICRC's first-hand monitoring of the situation of the civilian population in Darfur. Monitoring, however, took place throughout the year in violence-prone regions of South and some areas of Central Sudan. Civilians approached the ICRC to report alleged IHL violations, details of which were collected and documented by the organization. Where possible, the ICRC made confidential representations to relevant parties. During briefings, the ICRC reminded authorities, weapon bearers and community leaders of their responsibilities under IHL to protect civilians and improve security for aid workers to allow them to safely reach people in need.

Struggling communities survive with emergency aid

In Darfur, Eastern and South Sudan, 138,662 violence-affected residents, IDPs and returnees (27,425 households) survived with one-month emergency food rations, delivered by the Sudanese Red Crescent or local community associations and supplied by the ICRC. Some 61,935 people whose lives were disrupted by violence or flooding also received basic shelter and household items essential to maintaining health and hygiene. ICRC stocks of emergency

water were not required. With ICRC support, the National Society trained 120 volunteers from nine branches to assess needs and distribute emergency aid.

Violence-affected people helped to grow crops and vaccinate livestock

A total of 354,007 people (68,475 households) in Darfur and South Sudan regained some self-sufficiency after growing crops using ICRC-supplied seed and tools. Among them were IDPs in Darfur's Gereida camp, who harvested groundnut, sorghum and okra on rented or borrowed land in the immediate vicinity of the camp or, if they chose to return, on land near to their home villages. Elsewhere in Darfur, seed and tool distributions reached as planned communities most affected by violence, with the exception of Jebel Marra, which remained inaccessible to ICRC staff owing to restricted access and for security reasons. Other communities receiving this assistance included displaced people in Western Equatoria, South Sudan, who eased pressure on host communities' food stocks by producing their own. Deliveries of three-month food rations for 96,828 people accompanied seed and tool distributions to cover any shortfalls until the harvest.

In Darfur and Central and South Sudan, more than 81,000 pastoralists tending herds depleted by intercommunal violence and scarce rains faced a less precarious future following the vaccination of more than 617,000 livestock – mainly cattle – in a project run jointly by Sudan's Ministry of Animal Resources and Fisheries and the ICRC. To ensure continuity of care in remote areas, around 220 animal health workers/animal health auxiliaries from pastoral communities obtained or refreshed their basic veterinary skills with support from these organizations, along with Vétérinaires Sans Frontières-Germany.

Vulnerable communities access clean water

Around 70% of Gereida IDP camp's population drew drinking water from ICRC-maintained facilities until August, when Care International Switzerland took over these services. Elsewhere in Darfur, local community representatives underwent training in the maintenance and repair of water points, conducted by local water authorities and the ICRC, which supplied tools and spare parts where needed. With ICRC funding, contractors repaired some water yards.

Other projects included the rehabilitation of two water yards along migration corridors in South Kordofan, Central Sudan, and repairs to hand pumps in Pibor County, South Sudan. In the southern district of Akobo, up to 50,000 people, mostly IDPs fleeing intercommunal violence, were set to benefit from the building of three water yards, begun in 2010 with the drilling of six boreholes.

Darfuris benefit from health care services

With ICRC support, 104,000 residents in conflict-affected rural Darfur had access throughout 2010 to seven ICRC-supported primary health care centres, where an average of 6,150 consultations/month took place. Centres received monthly medical supplies, plus economic incentives and training for local staff from the ICRC. In more remote areas, women and children rendered vulnerable to disease through a lack of access to health facilities received vaccinations

and curative consultations during visits from Ministry of Health mobile teams, supported by the ICRC. Women also benefited from the services of 57 birth attendants, trained by the ICRC.

An eighth ICRC-supported primary health care centre – in Gereida camp – was handed over as planned to the NGO Merlin at the end of January. Merlin received a three-month supply of medicines, plus equipment and continued maintenance support from the ICRC. Throughout 2010, meanwhile, 20,665 malnourished children in the camp received treatment at a supplementary feeding centre that continued to be run jointly by the Australian and British Red Cross Societies and the ICRC. Children were regularly screened for signs of malnutrition, mothers were offered advice on its detection, and families and traditional healers took part in regular ICRC-run educational sessions on health, nutrition and hygiene. To further reduce health risks within the camp and adjacent town, nearly 50,000 people received vaccinations against meningitis in a campaign supported by the ICRC, which supported a similar campaign in the al-Juneina area. The ICRC also mobilized the camp population to refurbish or build latrines and collect and dispose of solid waste and rubbish.

Contact restored and maintained between dispersed families

Families separated by conflict or other situations of violence in Sudan continued to restore and maintain contact with relatives via the family-links network run by the National Society/ICRC. While security constraints in Darfur limited ICRC activities in that region, it received permission in December to resume family-links activities in eastern Sudan for the first time in three years. As a priority, children were put in touch with their parents through the tracing and RCM services and, where possible and appropriate, were reunited with them. Some 29 such reunifications took place, sometimes across national borders. Families in Sudan whose relatives were interned in the US internment facility at Guantanamo Bay Naval Station in Cuba or in facilities in Afghanistan and Iraq exchanged family news via telephone calls.

To improve the efficiency of tracing and RCM services in Sudan, the ICRC continued to cover the salaries of 25 Sudanese Red Crescent tracing personnel, based in branches across the country. It also paid staff incentives and running costs. National Society personnel and volunteers enhanced their tracing skills during 11 ICRC-organized workshops.

In a new initiative, members of the National Society's emergency action teams participated in ICRC-led courses, during which they learnt how to handle, transport, record and store human remains so that families could be promptly informed of the deaths. National Society branches received equipment for dealing with such emergencies.

PEOPLE DEPRIVED OF THEIR FREEDOM

The ICRC pursued dialogue with the Sudanese authorities with a view to gaining access to all detainees held in their custody (see *Authorities*).

Meanwhile, security and access constraints prevented the ICRC from following up cases of detainees held by armed groups in Darfur.

At the request of the parties concerned, after their registration by the ICRC, 123 government soldiers held by the Darfur-based armed group JEM were released and handed over to the authorities, with the ICRC acting as a neutral intermediary. The Sudanese government also notified the ICRC of the release from custody of 56 alleged JEM members, who were then visited by delegates. All the former detainees received essential items such as clothing, shoes and medicines, if required, and were able to contact their families through the RCM service and using ICRC-supplied phone cards.

Some people held by members of South Sudan armed forces received ICRC visits.

In a new ICRC initiative, Sudanese people who had been released from the Guantanamo Bay internment facility and returned to Sudan were offered psychological support to help them cope with the effects of their incarceration. The ICRC also assisted in the repatriation of one Sudanese ex-detainee released from Iraq.

WOUNDED AND SICK

Weapon-wounded patients receive emergency care

A total of 363 fighters and civilians wounded during clashes in Darfur and Central and South Sudan were treated with ICRC medical supplies delivered to 14 hospitals and 11 first-aid posts on an ad hoc basis.

Partly in preparation for the referendum period, the ICRC boosted available medical care in South Sudan and transitional north/south areas. More than 30 staff in hospitals in Juba and Upper Nile State honed their war-surgery skills during two ICRC-run seminars. To improve wounded people's chances of survival, almost 680 people – civilians and combatants – received first-aid training, during which they also learnt more about IHL. Materials and dressing kits were also distributed. In November, a two-person mobile surgical team travelled to South Sudan to intervene in case of emergencies.

Patients with weapon and mine-related injuries assisted with rehabilitation

Over 2,980 patients underwent treatment at 6 ICRC-supported physical rehabilitation centres. In the south, patients with mine or weapon-related disabilities were treated at the Physical Rehabilitation Referral Centre in Juba, opened in early 2009 and co-managed by the Ministry of Gender, Child and Social Welfare and the ICRC. Patients at five other rehabilitation centres run by the National Authority for Prosthetics and Orthotics – in Khartoum, Nyala, Addamazeen, Gedaref and Kasala – also benefited from ICRC support, ranging from technical expertise to funding, materials, components and equipment. Another centre, at Kadugli, received ICRC materials and equipment and underwent maintenance work but remained closed owing to a lack of technical staff to run the centre.

To ensure sustainability of rehabilitative care, 14 students enhanced their skills with ICRC support. They were either enrolled in the ICRC's three-year prosthetic/orthotic diploma course in Khartoum or received ICRC sponsorship to study abroad.

AUTHORITIES

Amid preparations for the election and referendum, the government's focus on IHL implementation was limited. Nevertheless, the authorities and the ICRC discussed humanitarian issues at regular meetings, during which the ICRC sought to enhance understanding of and support for its mandate. The ICRC emphasized the need for access to victims of armed conflict in Darfur, and for improved security in the region for civilians and aid workers. Government representatives, including the Foreign Affairs Ministry and Sudanese Humanitarian Aid Commission, received monthly newsletters on ICRC activities, and more than 100 members of Darfur's local authorities attended IHL information sessions.

The national IHL committee and the ICRC discussed ways to advance the incorporation of IHL into Sudanese law. Committee members dealing with the ICRC's offer to visit detainees received briefings on the organization's standard procedures during such visits.

In June, the Sudanese parliament passed a law giving legal recognition to the Sudanese Red Crescent, paving the way for the National Society to request government support for its activities.

The ICRC also maintained contact with the UN and other international/regional decision-makers to boost support for IHL, the Movement and its neutral, impartial and independent humanitarian action.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

To help the Sudanese Armed Forces (SAF) integrate IHL into training programmes, more than 100 officers representing military training institutions learnt how to teach IHL to other personnel during six ICRC-run courses. For the first time, Military Intelligence and Republican Guard personnel took part. The same course was held for training officers from the Sudan People's Liberation Army (SPLA) in the south and for members of the Central Reserve Police (CRP).

Nearly 1,000 officers from SAF military intelligence and military police, the Border Guards and the CRP, almost 5,000 personnel from the SPLA and a further 1,000 from the north/south Joint Integrated Units deepened their knowledge of IHL during ICRC-run courses and briefing sessions. With ICRC sponsorship, three senior officers from the SAF and SPLA attended IHL courses in Europe.

Almost 800 personnel from the UNMIS and UNAMID peace-keeping forces received IHL presentations, while various weapon bearers, including representatives of 190 civil defence forces in Darfur and South Kordofan, attended ICRC briefings.

CIVIL SOCIETY

Opinion-formers such as journalists, traditional leaders and academics remained potentially important relays for promoting respect for IHL in Sudan.

Journalists received regular updates on ICRC activities through newsletters and press releases and gained more insight into ICRC operations in Sudan through an article published in *Al-Insani*, the ICRC's Arabic-language quarterly. Four journalists increased their understanding of IHL at ICRC-run courses abroad. Thirty Sudanese journalists were briefed on IHL, the Fundamental Principles and Movement activities during a one-day workshop in Khartoum co-organized by the national IHL committee and the ICRC.

At grassroots level, local communities and a range of influential civil society groups, including traditional leaders, enhanced their awareness of IHL and the Movement during sessions conducted by Sudanese Red Crescent personnel, often together with ICRC staff. Personnel from the National Society, with Movement support, built up their communication skills. In a project developed jointly by the Sudanese Red Crescent, the Swedish Red Cross and the ICRC, 24 National Society staff and volunteers learnt how to use a new handbook, training materials and speaking notes to convey IHL principles effectively in conflict-affected areas. In other initiatives, 18 National Society personnel in Darfur participated in a three-day basic IHL course.

Three law lecturers from universities in Khartoum, Juba and Darfur attended IHL courses abroad with sponsorship from the ICRC, which also supplied educational materials and technical support to 17 higher-education institutions.

RED CROSS AND RED CRESCENT MOVEMENT

With ICRC funds, training, materials and technical support, the Sudanese Red Crescent developed its capacities. Personnel received training in the proper management of human remains and restoring family links (see *Civilians*) and in IHL dissemination (see *Civil society*).

With Movement support, the National Society mobilized over 17,000 volunteers and 67 ambulances to address potential situations of violence during the election. They assisted 50,000 people, mostly for minor injuries, heat stroke and dehydration. Later in the year, with ICRC support, the National Society prepared a contingency plan for the 2011 referendum, focusing on strengthening capacities in 12 branches. The ICRC provided partial funding for operational costs, first-aid kits, stretchers and training for volunteers. The National Society also established six new emergency action teams in the centre and south, and held training/refresher courses for 650 volunteers.

The salaries of 59 National Society posts at headquarters and branch levels were supported financially by the ICRC, while the National Society continued its reform process, reducing headquarters staff from 75 to 55.

Movement partners met regularly through an established coordination mechanism in order to share information and coordinate humanitarian activities.

UGANDA



EXPENDITURE (IN KCHF)

Protection	985
Assistance	4,748
Prevention	1,062
Cooperation with National Societies	1,445
General	-

► **8,240**

of which: Overheads 502

IMPLEMENTATION RATE

Expenditure/yearly budget	99%
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PERSONNEL

Expatriates	13
National staff (daily workers not included)	96

KEY POINTS

In 2010, the ICRC:

- scaled down its activities in Acholiland and environs, while helping the Uganda Red Cross Society build its capacities to support communities undergoing the transition to peace
- increased its presence in the violence-affected Karamoja region, reminding weapon bearers of their responsibility to protect civilians
- helped drought- and conflict-affected communities increase food production and, with the Ugandan and Swedish Red Cross Societies, gain access to consistently clean water sources
- enabled unaccompanied children to restore contact with relatives, and 159 to be reunited with their families, mostly in other countries
- with the Uganda Prisons Service, extended by at least one year a project to provide preventive and curative treatment for HIV/AIDS, tuberculosis and malaria in 3 prisons
- renewed an agreement to help the Ugandan armed forces integrate IHL into their doctrine, training and procedures for 2 additional years

The ICRC has been present in Uganda since 1979. Given the progress towards peace in the north of the country, ICRC assistance activities, many of which are implemented in partnership with the Uganda Red Cross Society, have been scaled down in response to decreasing humanitarian needs. In parallel, the ICRC continues to monitor the treatment of detainees and strives to raise awareness of IHL and humanitarian principles among the armed and police forces.

CONTEXT

The security situation remained calm in Acholiland and surroundings, where the majority of civilians displaced by the non-international armed conflict between the Ugandan government and the Lord's Resistance Army (LRA) had returned to their home villages or to nearby transit camps. Meanwhile, the Uganda People's Defence Force (UPDF) continued to back military operations against the LRA in the neighbouring Central African Republic, the Democratic Republic of the Congo (DRC) and South Sudan.

Elsewhere in northern Uganda, violence recurred in Karamoja – a region prone to intercommunal tensions and cattle theft – as the

UPDF and police forces sought to disarm traditional warriors. Several people, including children, were killed, wounded or forced to flee their homes during violence.

From July, internal security was tightened following two bomb blasts in Kampala, allegedly linked to sympathizers of a Somalia-based armed group. Ahead of general elections in February 2011, the political climate hardened.

Uganda continued to host refugees, mainly from the DRC, but also a number from Rwanda and South Sudan.

MAIN FIGURES AND INDICATORS				
PROTECTION				
CIVILIANS (residents, IDPs, returnees, etc.)				
Red Cross messages		Total	UAMs/SCs*	
RCMs collected		2,387	181	
RCMs distributed		1,225	200	
Reunifications, transfers and repatriations		Total		
People reunited with their families		168		
		<i>including people registered by another delegation</i>	19	
Tracing requests, including cases of missing persons		Total	Women	Minors
People for whom a tracing request was newly registered		24	3	11
People located (tracing cases closed positively)		64		
		<i>including people for whom tracing requests were registered by another delegation</i>	36	
Tracing cases still being handled at 31 December 2010 (people)		19	3	4
UAMs/SCs,* including unaccompanied demobilized child soldiers		Total	Girls	Demobilized children
UAMs/SCs newly registered by the ICRC/National Society		206	87	
UAMs/SCs reunited with their families by the ICRC/National Society		159	60	
		<i>including UAMs/SCs registered by another delegation</i>	16	
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2010		82	34	
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
ICRC visits		Total	Women	Minors
Detainees visited		7,771		
Detainees visited and monitored individually		174	1	2
Detainees newly registered		90		1
Number of visits carried out		112		
Number of places of detention visited		34		
Restoring family links		Total		
RCMs collected		146		
RCMs distributed		87		
People to whom a detention attestation was issued		11		

* Unaccompanied minors/separated children

ASSISTANCE				
CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security, water and habitat		Total	Women	Children
Essential household items	Beneficiaries	145	0%	100%
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries	62,277	21%	62%
	<i>of whom IDPs</i>	Beneficiaries	37,366	
Water and habitat activities	Beneficiaries	111,857	25%	50%
Health				
Health centres supported	Structures	4		
Average catchment population		50,820		
Consultations	Patients	12,949		
	<i>of which curative</i>	Patients	8,646	8,514
	<i>of which ante/post-natal</i>	Patients	928	
Immunizations	Doses	9,331		
	<i>of which for children aged five or under</i>	Doses	8,601	
	<i>of which for women of childbearing age</i>	Doses	730	
Referrals to a second level of care	Patients	216		
Health education	Sessions	106		

MAIN FIGURES AND INDICATORS				
ASSISTANCE				
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat		Total	Women	Children
Essential household items	Beneficiaries	4,923		
Water and habitat activities	Beneficiaries	800		
WOUNDED AND SICK				
Water and habitat				
Water and habitat activities	Number of beds	202		
Physical rehabilitation				
Centres supported	Structures	2		
Patients receiving services	Patients	648	167	263
New patients fitted with prostheses	Patients	67	29	6
Prostheses delivered	Units	92	36	8
<i>of which for victims of mines or explosive remnants of war</i>	Units	17		
New patients fitted with orthoses	Patients	329	91	155
Orthoses delivered	Units	371	95	188
<i>of which for victims of mines or explosive remnants of war</i>	Units	1		
Crutches delivered	Units	92		
Wheelchairs delivered	Units	1		

ICRC ACTION AND RESULTS

During 2010, the ICRC adapted to changing needs in Uganda, steadily disengaging from northern areas formerly affected by armed conflict but now undergoing the transition to peace, while maintaining its focus on assisting and protecting civilians in violence-prone Karamoja. To ensure continuity of support in areas with a reduced ICRC presence, the delegation helped the Uganda Red Cross Society develop its capacities to provide localized assistance to returnee communities and remaining IDPs. It also coordinated with other humanitarian organizations in the country.

In Acholiland, the ICRC closed its sub-delegations in Gulu and Kitgum, the latter after undertaking a final distribution of seed to 62,277 people, including many former IDPs, in the Kitgum and Pader districts. The ICRC sought to ensure that around 77,000 drought-affected people could access clean water sources by upgrading water facilities and training community members, local authorities and National Society personnel to maintain them. During the year, the National Society, supported until July by the Swedish Red Cross and the ICRC, took an increasingly prominent role in promoting good hygiene practices among rural communities.

The ICRC reduced support to rural health centres in the region, ceasing activities altogether by mid-year as planned. It also ended temporary financial support to Kalongo Hospital, the referral facility for emergency cases during former episodes of armed conflict, and concluded support to Kitgum Government Hospital with some infrastructural improvements. Meanwhile, it continued to provide material, financial and technical support to prosthetic/orthotic workshops attached to two regional referral hospitals – Mbale in the east and Fort Portal in the west – and sought to persuade the Ugandan authorities to allocate more resources to rehabilitative services.

In Karamoja, the ICRC monitored civilians' security more closely as violence increased. Where necessary, delegates made

representations to weapon bearers concerning alleged abuses of civilians, in accordance with relevant national and international laws. Following outbreaks of cholera, the ICRC rehabilitated 11 water facilities, benefiting some 33,000 people, and gave local authorities materials for testing the quality of other sources.

Delegates visited detainees in places of temporary and permanent detention run by the Justice Ministry or armed forces, and monitored their treatment and living conditions, in accordance with the ICRC's standard procedures. Detainees visited included people held in connection with violence in Karamoja, and those allegedly associated with Congolese or Ugandan armed groups. The authorities received confidential feedback on the ICRC's findings, including, where necessary, recommendations for improvements. Following dialogue with the authorities, some access was obtained to detainees alleged to have been formerly associated with the LRA, people held by the Joint Anti-Terrorism Task Force (JATT), and detainees held in police stations in connection with the Kampala bombings. At year-end, efforts were ongoing to gain access to detainees in more JATT facilities and to detainees held by the police force's Rapid Response Unit (RRU).

The ICRC's pilot health project designed to help prevent and treat HIV/AIDS, tuberculosis (TB) and malaria in three Ugandan prisons continued beyond its three-year remit with the signing, in August, of a one-year extendable agreement between the ICRC and the Uganda Prisons Service (UPS). The aim was to improve the consistency of services, in line with the recommendations of an ICRC review panel.

Family members separated by conflict, including unaccompanied child refugees, restored and maintained contact through the family-links network run by the Ugandan Red Cross with ICRC support.

The ICRC continued to heighten awareness of IHL among the authorities, armed forces and influential civil society members.

Following discussions with the ICRC, the government revived its national IHL committee, while the UPDF and the ICRC signed an agreement to extend until end-2012 a project to integrate IHL into military doctrine, training and procedures. With the National Society, the ICRC participated in sessions to enhance awareness of international human rights law and humanitarian issues among police personnel in advance of the 2011 election.

CIVILIANS

Security of vulnerable communities monitored

Protection of civilians in the Karamoja region was a particular focus of attention for the ICRC. To this end, it stepped up its monitoring of the situation during the year, and in December posted a field officer to the region on a permanent basis. Where necessary, delegates made confidential representations to weapon bearers and authorities, reminding them of their obligations to respect and protect civilians in accordance with relevant national and international law.

Also in northern Uganda, the national authorities, the IOM and the ICRC discussed, during the earlier part of the year, a permanent settlement solution for Congolese women and children living without legal status. However, as most of these families subsequently migrated to South Sudan, no further action was taken. Twelve of the women reconnected with relatives through the family-links network (see below). The ICRC also monitored the situation of refugees from Rwanda, mostly living in camps in the west.

In preparation for any potential unrest surrounding the 2011 election, the ICRC reinforced contacts with other organizations involved in humanitarian work, leading to the establishment in November of a formal coordination mechanism.

Violence-affected civilians helped to rebuild livelihoods and infrastructure

In Acholiland, following scant rains and poor crop yields in 2009, 62,277 returnees and IDPs in Kitgum and Pader benefited from a final ICRC seed distribution. Families each received enough seed – including groundnut, cereal and various vegetables – to cultivate around one hectare of land. This concluded the ICRC's livelihood-support activities in the region.

Some 111,000 people in Acholiland and Karamoja benefited from projects to improve water and sanitation facilities and enhance hygiene awareness.

More than 77,000 returnees and residents in around 125 villages in Acholiland and its environs enjoyed better access to clean water after local authorities, the National Society and the ICRC constructed 30 new water points (including some equipped with hand and motorized pumps and boreholes) and rehabilitated 145 existing boreholes. To learn how to further reduce health risks (including advice on malaria prevention), almost 15,000 of these people participated in hygiene-promotion sessions and related activities run by the Ugandan Red Cross and,

until July, the Swedish Red Cross and the ICRC. As part of this initiative, communities rehabilitated three latrine blocks used by more than 1,900 pupils in 22 primary schools.

To minimize gaps in assistance following the phasing out of ICRC projects, villagers, local authorities and National Society personnel received additional ICRC training in maintaining water facilities. For example, almost 250 people were trained to operate and maintain water points and pumps. They received toolboxes and bicycles to facilitate this work.

To combat cholera in Karamoja during the latter part of the year, some 33,000 people in 11 communities in Moroto district benefited from the rehabilitation of boreholes by the ICRC, which also provided the local water authority with materials for testing the quality of water in other sources used by communities.

Civilians access health care services

An average monthly catchment population of 50,820 people had access to four health centres in Pader, supported by the ICRC until mid-year (see *ICRC action and results*). Nearly 13,000 people, primarily women and children, attended consultations at the centres, which provided vaccinations, curative and antenatal care, family planning consultations, and mosquito nets to ward off malaria. Staff and traditional birth attendants developed their skills with ICRC training, and staff refurbished facilities with ICRC help. After it ceased support, the ICRC retained the capacity to provide appropriate medical or curative care in the event of displacement, epidemics or other emergencies.

Separated family members reconnect

Families dispersed by past or ongoing violence in neighbouring countries restored and maintained contact with relatives in Uganda and beyond, thanks to the tracing and RCM services provided by the National Society with ICRC support (see *Red Cross and Red Crescent Movement*). A priority was the restoration of contact between children and their parents through RCMs and, where possible and appropriate, their reunification with their families. A total of 159 children were thus reunited with relatives, mainly abroad.

PEOPLE DEPRIVED OF THEIR FREEDOM

The ICRC visited 7,771 people held in detention, while seeking during dialogue with the relevant authorities to gain access to all those falling within its mandate. Visits took place according to standard ICRC procedures, and 174 people were monitored individually. The authorities received confidential reports on delegates' findings and, where necessary, recommendations for improvements.

Throughout the year, the ICRC visited detainees in places of permanent and temporary detention run by the Justice Ministry or armed forces. Particular attention was paid to detainees held in connection with violence in Karamoja and those allegedly associated with Congolese or Ugandan armed groups.

Vulnerable detainees, including minors and foreign nationals, stayed in touch with relatives via the RCM service. Inmates in various places of detention received basic hygiene and leisure items to help them avoid illness and cope with the monotony of prison life. Upon release, 12 detainees with no other means of support had their transport home paid.

In June, for the first time, detainees alleged to have been former LRA members, held in a facility run by the Chieftaincy of the Military Intelligence, were allowed by the authorities to receive ICRC visits. Following a second ICRC visit in September, the detainees were permitted to exchange news with their families via RCMs. Security detainees at a detention centre run by JATT were also visited by the ICRC for the first time in June, although by year-end the organization had yet to obtain regular access to JATT facilities. Following the Kampala bombings (see *Context*), ICRC delegates received authorization to visit some detainees held in police stations in connection with the incidents. However, access to detainees in facilities run by the police's RRU was increasingly limited during the latter part of the year.

Detainees benefit from improved sanitation and health facilities

Inmates in three Ugandan detention facilities – Gulu and Fort Portal prisons, plus the prison referral hospital at Murchison Bay, Luzira – continued to benefit from improvements in health and hygiene conditions thanks to an ICRC project to provide preventive and curative treatment for HIV/AIDS, TB and malaria. In August, the ICRC and UPS signed an extendable one-year agreement to continue the project beyond its original three-year remit, after a review by an ICRC panel found that the quality of health services provided by the scheme showed room for improvement.

A total of 4,923 detainees in all three prisons participated in a second mass TB screening (the first took place in 2009) and received various medical, hygiene and other items – from disinfectants to food-serving trays – to reduce infection rates. Following the expansion of cell space, inmates with TB could live separately from other patients, thus reducing the risk of transmission. Staff and detainees also received additional TB-awareness booklets, plus copies of a manual containing guidelines for the control of TB in prisons. In addition, 800 detainees in Gulu and Murchison Bay prisons faced fewer health risks after water and sanitation facilities were rehabilitated.

In October, a committee was formed to coordinate activities among various organizations supporting improvements in Uganda's prisons, including the UPS and the Ministry of Health. At the same time, an ICRC medical field officer was employed full-time in each of the three prisons to assist the Ugandan prison authorities in taking a lead role in project implementation. To ensure proper follow-up of patients, two ICRC experts began developing a new database towards year-end. The donation of an ICRC 4x4 vehicle for use as an ambulance by the Uganda Prisons Health Services, together with donations of ad hoc medical supplies, further enhanced the quality of patient care.

WOUNDED AND SICK

A total of 648 people with disabilities, including weapon-wounded patients, received treatment at two ICRC-supported physical rehabilitation centres in Fort Portal and Mbale. Physiotherapy services at both centres improved following on-the-job supervision and training by an ICRC specialist. Thanks to the building of a concrete walkway in Mbale, most patients there gained easier access to newly rehabilitated showers and toilets. In Fort Portal, patients benefited from renovation of the building's entrance. Meanwhile, the ICRC pursued dialogue with representatives of the Health Ministry to persuade them to increase investment in the country's rehabilitative services.

To ensure that patients at the 200-bed Kitgum Government Hospital continued to benefit from improvements carried out during the ICRC's three-year support project (completed in 2009), staff received additional training in clinical waste management, and six latrine blocks, one incinerator and a waste management system were rehabilitated.

ICRC support to Kalongo Hospital, where it had covered the salaries of two doctors to ensure appropriate treatment for emergency referrals from ICRC-supported health centres in Pader district, ceased mid-year.

AUTHORITIES

Having revived the national IHL committee at the ICRC's encouragement, the Prime Minister's Office organized two follow-up seminars, during which key members of the government and the military assessed progress in implementing IHL and identified priorities. To further encourage national implementation, the ICRC funded participation by senior government officials in a regional IHL seminar in Pretoria and the third Universal Meeting of National IHL Committees in Geneva, Switzerland (see *International Law and Cooperation*).

The government ratified and deposited the AU Convention on IDPs, while parliament passed a bill implementing the provisions of the Rome Statute, which was ratified in 2002. National bills incorporating IHL provisions on mines and toxic chemicals had yet to pass before parliament. The ICRC provided legal advice on the implementation of national legislation relating to the Additional Protocols, and the involvement of children in armed conflict, protection of the emblem, and the National Society.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

With ICRC support, the UPDF worked towards the systematic integration of IHL into military training, doctrine and procedures. To consolidate progress already made, it was agreed in April to extend cooperation on IHL integration until end-2012.

Eighty armed forces officers learnt how to teach IHL during three train-the-trainer courses. Elsewhere, 35 senior officers took part in a discussion on IHL integration with representatives of other armed forces in the region; 70 others, including military legal experts, intelligence officers and commanders, attended various IHL courses in Uganda; and one senior officer attended the fourth Senior Workshop on International Rules governing Military Operations in Switzerland (see *International Law and Cooperation*). More than 3,000 armed forces personnel, including 230 officers, were briefed on IHL, its application in peace-support operations and the ICRC's mandate and activities in advance of their deployment on peacekeeping missions.

With ICRC input, Uganda's police authorities reviewed training manuals and operational procedures for the Mobile Police Patrolling Unit (MPPU). When the Ugandan police authorities signed an agreement with the British High Commission and the Embassy of Ireland in Uganda to work towards reinforcing the capacity of the MPPU prior to the 2011 election, the ICRC participated in the process. During eight training sessions attended by the National Society and the ICRC, 150 senior commanders and 40 instructors from Kampala's police force and MPPU learnt more about the Movement's mandate and activities. More than 60 officers from the Anti-Stock Theft Unit deployed in Karamoja, as well as members of the RRU responsible for tackling crimes involving violence, also enhanced their knowledge of international human rights law and humanitarian issues during training courses. With ICRC support, a senior police officer attended a conference on humanitarian issues in policing held in Geneva, Switzerland.

CIVIL SOCIETY

Through media reports based on ICRC press briefings and newsletters, the Ugandan public learnt more about humanitarian issues affecting the country. Meanwhile, Ugandan Red Cross personnel, backed up by ICRC training and materials, briefed violence-affected communities in Karamoja on the work of the Movement and the Fundamental Principles, themes also addressed during radio spots broadcast by various National Society branches, including in Karamoja.

To encourage IHL research, the National Library and two universities in Kampala received 1,400 publications from the ICRC. One legal and one social research institute also benefited from a donation of 1,000 publications and an IHL teaching DVD. IHL teaching at the Faculty of Social Sciences in Makerere University gained a boost with the signing of a two-year cooperation agreement with the ICRC. Four university lecturers attended IHL training events abroad, with ICRC support.

Having won a national moot court competition, a team of students from Uganda Christian University, Mukono, represented the country at an international event, while students from Ugandan universities also participated in the ICRC's regional IHL essay competition.

RED CROSS AND RED CRESCENT MOVEMENT

By July, the Ugandan Red Cross, with technical and financial support from the Swedish Red Cross and the ICRC, had taken the lead in hygiene-promotion activities in northern Ugandan villages (see *Civilians*). This capacity-building operation facilitated the phasing out of direct ICRC assistance.

Ugandan Red Cross personnel played a lead role in assisting people affected by a mudslide in Bududa, eastern Uganda, in May, with the ICRC providing relief goods, body bags and training in the proper management of human remains.

In advance of the 2011 general election, the National Society developed a contingency plan, with ICRC input. The implementation of the plan – including ICRC-supported training sessions, simulation exercises, and the provision of first-aid materials and stocks of non-food items – enhanced the National Society's capacity to respond in the event of violence.

To meet demand for the tracing and RCM network (see *Civilians*), National Society personnel underwent on-the-job training and refresher courses provided by the ICRC, and received its input to conduct a review of tracing activities, guidelines and procedures.

The Ugandan Red Cross further strengthened its capacities by extending its Kumi branch, aided by equipment and funding from the ICRC, which also continued to help pay the salaries of key national, regional and branch staff. Through regular meetings, the National Society stepped up coordination with Movement partners.

National Society personnel also promoted humanitarian principles among local communities (see *Civil society*).

ABIDJAN (regional)

COVERING: Benin, Burkina Faso, Côte d'Ivoire, Ghana, Togo



ICRC regional delegation
 ICRC sub-delegation
 ICRC office/presence
 ICRC regional logistics centre

In the countries covered by the delegation, established in 1992, the ICRC supports the authorities in implementing IHL, encourages armed and security forces to respect IHL, and visits detainees. It works with and supports the development of the region's National Societies. In Côte d'Ivoire, the delegation focuses on responding to the protection and assistance needs of people affected by the lasting consequences of the crisis that began in 2002.

EXPENDITURE (IN KCHF)

Protection	1,744
Assistance	5,612
Prevention	2,569
Cooperation with National Societies	2,261
General	-

► **12,185**

of which: Overheads 744

IMPLEMENTATION RATE

Expenditure/yearly budget	94%
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PERSONNEL

Expatriates	27
National staff (daily workers not included)	221

KEY POINTS

In 2010, the ICRC:

- strengthened the emergency response capacities of the National Societies in Burkina Faso, Côte d'Ivoire and Togo ahead of elections, facilitating in particular the treatment of 590 wounded people during the Ivorian post-election crisis
- provided dressing kits to 9 Ivorian health structures, enabling them to treat up to 700 people wounded during post-election violence
- regionwide, visited 17,099 detainees to monitor their treatment and living conditions, including 299 arrested in connection with post-election violence in Côte d'Ivoire
- with the relevant National Societies, gave relief goods to victims of violence or natural disaster in Burkina Faso, Côte d'Ivoire, Ghana and Togo, providing food to 9,617 IDPs and essential household items to 17,720
- improved access to clean water and sanitation for some 71,000 people in western and central Côte d'Ivoire, while raising their awareness of good hygiene practices
- ahead of elections, briefed over 4,000 weapon bearers in Côte d'Ivoire and 775 in Burkina Faso on IHL and international human rights law

CONTEXT

In Côte d'Ivoire, 2010 was dominated by long-awaited presidential elections aimed at cementing the 2007 Ouagadougou peace accord. In February, controversy over alleged voter registration irregularities triggered violent demonstrations, causing scores of casualties. Meanwhile, civilian authorities were partially reinstated in northern and western regions formerly under Forces Nouvelles (FN) control. People displaced by earlier violence returned home. Sporadic intercommunal violence persisted, however, linked mainly to longstanding land-tenure issues. Many communities continued to struggle for access to basic services.

In November, the presidential run-off ended in political deadlock, with both the incumbent and the opposition candidates claiming victory and nominating governments. Ensuing tensions resulted in various patterns of violence. Clashes among rival groups and with security forces led to multiple arrests, scores of dead and hundreds of wounded, especially in Abidjan. With political affiliation commonly informed by ethnicity, tensions and suspicion flared among communities, particularly in central-western and western regions. Efforts previously made towards creating a unified army, incorporating

former FN fighters, were interrupted. Deadly confrontations between forces loyal to the respective candidates reflected historical divisions. With their impartiality challenged by the incumbent candidate, UN peacekeepers reported increasing restrictions on their movements. Mounting insecurity drove thousands of Ivoirians to seek refuge elsewhere in the country or abroad. Few international organizations remained operational in Côte d'Ivoire.

The African Union (AU) and the Economic Community of West African States (ECOWAS) embarked on mediation efforts to resolve the impasse, without success by year-end.

Throughout the region, severe flooding contributed to difficult living conditions, devastating homes and livelihoods. Intercommunal violence temporarily displaced several thousand people in northern Ghana.

Following the re-election of Togo's president in March, the government and the opposition entered a power-sharing agreement, improving prospects for political stability. Burkina Faso's president, re-elected in November, continued to play an important role in regional politics, notably in Côte d'Ivoire and Guinea.

MAIN FIGURES AND INDICATORS

PROTECTION

CIVILIANS (residents, IDPs, returnees, etc.)

Red Cross messages	Total	UAMs/SCs*	
RCMs collected	55		
RCMs distributed	31		
Tracing requests, including cases of missing persons	Total	Women	Minors
People for whom a tracing request was newly registered	3		1
People located (tracing cases closed positively)	1		
Tracing cases still being handled at 31 December 2010 (people)	20		

PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)¹

ICRC visits	Total	Women	Minors
Detainees visited	17,099		
Detainees visited and monitored individually	465	1	4
Detainees newly registered	373	1	4
Number of visits carried out	209		
Number of places of detention visited	86		
Restoring family links	Total		
RCMs collected	172		
RCMs distributed	93		
Phone calls made to families to inform them of the whereabouts of a detained relative	608		
People to whom a detention attestation was issued	2		

* Unaccompanied minors/separated children

1. Benin, Burkina Faso, Côte d'Ivoire and Togo

ASSISTANCE

CIVILIANS (residents, IDPs, returnees, etc.)

Economic security, water and habitat		Total	Women	Children
Food ²	Beneficiaries	9,817	60%	26%
	<i>of whom IDPs</i>	9,617		
Essential household items ³	Beneficiaries	17,720	60%	26%
	<i>of whom IDPs</i>	17,720		
Agricultural, veterinary and other micro-economic initiatives ⁴	Beneficiaries	27,130	60%	
Water and habitat activities ⁴	Beneficiaries	71,000	20%	40%

2. Côte d'Ivoire and Ghana

3. Burkina Faso, Côte d'Ivoire and Togo

4. Côte d'Ivoire only

MAIN FIGURES AND INDICATORS				
ASSISTANCE				
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat		Total	Women	Children
Food ⁴	Beneficiaries	2,106		
Essential household items ⁵	Beneficiaries	10,758		
Water and habitat activities ⁴	Beneficiaries	12,000		
WOUNDED AND SICK				
First aid ⁴				
First-aid posts supported	Structures	4		
	<i>of which provided data</i>	4		
Wounded patients treated	Patients	590		

4. Côte d'Ivoire only

5. Burkina Faso and Côte d'Ivoire

ICRC ACTION AND RESULTS

While concentrating its operations in violence-prone parts of Côte d'Ivoire, notably in the west, the ICRC maintained a countrywide presence, enabling it to monitor tensions and population movements more widely. In case of election-related violence, it focused on contingency planning, primarily in Côte d'Ivoire but also in Burkina Faso and Togo, in partnership with the National Societies. Together they intensified efforts to strengthen support for the Movement and humanitarian principles among all those with potential influence during unrest, building on the broad acceptance of the ICRC fostered during its longstanding presence in the region. This foothold contributed to the smooth running of Movement operations, particularly during the post-election crisis in Côte d'Ivoire, when insecurity prevented many other international organizations from operating.

The ICRC helped reinforce the emergency response capacities of the National Societies in Burkina Faso, Côte d'Ivoire and Togo, reviewing their contingency plans with them and providing first-aid and communications training and equipment. It provided all National Societies with needs-assessment training and put emergency supplies at their disposal to meet communities' basic needs. As a result, National Societies were able to deploy effectively during elections. The Red Cross Society of Côte d'Ivoire stepped up activities during the post-election crisis, working with the ICRC to tend to the wounded, deliver medical supplies and alleviate hardship faced by IDPs and host communities. Regionwide, National Societies distributed relief goods to people left homeless by violence or natural disaster.

Through bilateral contacts, publicity and events, the ICRC and the National Societies intensified efforts to build respect for humanitarian values and the Movement. They worked together to promote IHL and international human rights law among weapon bearers, while emphasizing the Movement's distinctive nature and the protective properties of its emblems. In parallel, they strengthened dialogue with authorities and civil society. Despite the insecurity that prevailed during the post-election crisis, Movement personnel in Côte d'Ivoire were generally able to work unhindered. Representatives from both sides of the political divide readily maintained contact with ICRC delegates during this time.

Over the year, the ICRC visited detainees in Burkina Faso, Côte d'Ivoire and Togo, including those arrested in connection with election-related violence. It reinforced its support to the Ivorian authorities aimed at improving detainees' access to food, health care and hygiene. In urgent cases, the ICRC stepped in. It stabilized mortality rates in nine Ivorian prisons by providing malnourished detainees with supplementary food rations, facilitated medical treatment and renovated infrastructure. Following discussions with delegates, the authorities took steps to improve prison health care and nutritional standards.

In western Côte d'Ivoire, the National Society and the ICRC worked with rural and urban communities to improve their access to water and sanitation, expanding hygiene-awareness initiatives to ensure sustainable benefits. The ICRC continued to provide agricultural inputs to vulnerable farming communities to boost their economic security.

Coordination with Movement partners and other humanitarian actors ensured needs were met without duplicating efforts.

CIVILIANS

Meetings with authorities, community leaders and weapon bearers, particularly in violence-prone areas, served to remind them of their responsibilities to respect civilians at all times.

During the Ivorian post-election crisis, civilians made use of an ICRC telephone hotline to relay allegations of abuses to the delegation. These were documented with a view to raising them with the alleged perpetrators and thus prevent further abuses.

Violence- and disaster-affected people receive vital relief

Intercommunal and election-related violence, as well as natural disaster, affected civilians across the region.

Threatened by intercommunal violence, 9,455 vulnerable Ghanaians and 162 Ivorians (1,918 households) who had abandoned their homes to seek temporary shelter elsewhere received a one-month food ration from the ICRC to help sustain them until

their return. In Côte d'Ivoire, 924 IDPs struggling without their belongings received basic household items.

During violent pre-election demonstrations in Côte d'Ivoire, the wounded received prompt attention from ICRC-trained National Society first-aiders. Affected health structures received ICRC drugs and dressings to bolster their supplies.

With the onset of the post-election crisis, the National Society and the ICRC immediately stepped up activities, in line with contingency plans (see *Red Cross and Red Crescent Movement*), to provide relief to people wounded, displaced or otherwise affected. Of the 590 victims who received first aid, some 250 were evacuated to appropriate health structures by the National Society with ICRC ambulance support. To ensure patients received the requisite care, such structures maintained daily contact with the ICRC regarding their needs, with 9 obtaining dressing materials to treat up to 700 wounded. Facing logistical and security constraints, the National Blood Transfusion Centre requested and received ICRC help in delivering blood to hospitals low on supplies.

Communities in Danané and Duékoué, which saw an influx of people fleeing violence or insecurity, had their needs assessed by National Society/ICRC teams. To reduce strain on local resources, 2,736 IDPs and members of host families received hygiene items and household necessities. IDPs sheltering in a religious compound benefited from ICRC-constructed/renovated latrines, showers and water points, while National Society hygiene-awareness sessions helped reduce health risks aggravated by crowded conditions.

Families whose relatives had fled abroad received news of them thanks to family-links services provided by the Ivorian Red Cross and relevant National Societies (see *Guinea and Liberia*).

Across the region, over 10,000 Burkinans, Ivorians and Togolese displaced by flooding or wildfires and living in makeshift conditions received essential household items from the National Societies, with ICRC support.

Ivorians affected by earlier violence boost their economic security

Improved security in parts of western Côte d'Ivoire prompted people displaced by earlier violence to return home. To ease their resettlement, 1,706 returnees (341 households) were provided with household essentials such as kitchen sets. As a contribution to their long-term economic security, 27,130 returnees and people hosting them (4,508 households), including 8,982 members of households headed by women, received seed, hoes and expert

advice from the ICRC. This not only helped them to revive their farming activities, but to maximize yield, thereby increasing household revenue.

Ivorian communities participate in water and sanitation initiatives

In western and central Côte d'Ivoire, 71,000 people reduced health risks thanks to National Society/ICRC water and sanitation initiatives, focusing on community involvement to encourage sustainable benefits.

In parts of Côte d'Ivoire where flooding or power outages disrupted the water supply, some 44,700 residents regained access to safe water after National Society/ICRC teams chlorinated local wells. Accompanying National Society hygiene-awareness sessions helped reduce the risk of water-borne diseases. In towns unconnected to the water network, 7,800 residents gained better access to clean water after the ICRC repaired 13 drinking fountains. Community water-management committees learnt to undertake routine maintenance from ICRC-supported National Society volunteers, who also visited local households to promote good hygiene practices.

Around 14,500 Ivorians began benefiting from three hygiene-promotion initiatives, although these progressed slower than planned owing to the post-election crisis. Representatives of 17 communities, trained by Movement personnel, began raising awareness of good hygiene practices locally. Meanwhile, communities worked with National Society personnel to improve sanitation conditions according to their needs, for instance by digging latrines.

Ivorian Red Cross personnel in these areas were better equipped to carry out such activities after the ICRC renovated three local committee buildings. Plans to renovate two further buildings were delayed owing to technical constraints.

Vulnerable Ivorians receive therapeutic care

At Korhogo's therapeutic feeding centre, run by the Ivorian Red Cross with ICRC support, 200 malnourished children received milk and nutritional supplements, helping them regain a healthy weight.

Staff at Bangolo hospital discussed their caseload with delegates to define future ICRC activities aimed at facilitating the treatment of victims of sexual violence. They agreed to delay the launch of such activities to ensure adequate preparation.

CIVILIANS		BURKINA FASO	CÔTE D'IVOIRE	GHANA	TOGO
Economic security, water and habitat					
Food	Beneficiaries		362	9,455	
	<i>of whom IDPs</i>			9,455	
Essential household items	Beneficiaries	2,400	9,320		6,000
	<i>of whom IDPs</i>	2,400	9,320		6,000
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries		27,130		
Water and habitat activities	Beneficiaries		71,000		

PEOPLE DEPRIVED OF THEIR FREEDOM

Detainees in Burkina Faso, Côte d'Ivoire and Togo received visits from the ICRC, according to its standard procedures, to monitor their treatment and living conditions. Among those visited were 299 arrested in connection with the Ivorian post-election crisis. Detainees in Benin serving sentences under the International Criminal Tribunal for Rwanda received visits from the ICRC's Nairobi delegation (see *Nairobi*). Following such visits, the ICRC shared feedback, in confidence, with the authorities.

During visits, detainees were able, through ICRC family-links services, to contact their families or consular representatives. In particular, delegates made 608 phone calls on behalf of detainees, helping ensure family members learnt promptly of a relative's detention and did not report that person as missing.

To facilitate such activities, prison personnel in all three countries increased their understanding of the ICRC's work during briefings. Meetings with relevant authorities and international community representatives provided opportunities to impress upon them the need to allocate adequate resources to the respective penitentiary administrations to ensure detainees' living conditions met internationally recognized standards.

In Burkina Faso, detainees received soap to improve their hygiene conditions.

Ivorian authorities supported in addressing detainees' urgent and long-term needs

Constrained by limited resources and prison overcrowding, the Ivorian authorities accepted ICRC input and guidance, which helped them meet detainees' urgent nutritional, health care and hygiene needs while working to address the root causes of these issues.

Given life-threatening malnutrition levels in some facilities, vulnerable detainees underwent regular health monitoring through

an ICRC supplementary feeding initiative conducted with the National Society and a local NGO. For as long as necessary, 2,106 detainees (an average of 1,141/month) received rations to supplement their regular meals. This helped improve their health and stabilized mortality rates in the nine targeted prisons in both central authority- and FN-controlled areas. To stem a localized spike in mortality rates, 300 of these detainees were also given high-calorie biscuits for one month to boost their nutritional intake. Moreover, 600 detainees underwent ICRC treatment for beriberi, commonly associated with malnutrition.

In efforts to improve detainees' nutritional health, the authorities confirmed an increase in the food budget. An ICRC assessment of official meal standards in different facilities enabled them to review the services provided by caterers and, where necessary, take action to resolve any disruption to services caused by delayed payment. Examples of nutritionally balanced meals, prepared by the ICRC according to locally available produce, aimed to support them in commissioning caterers to provide adequate meals.

Inmates wounded during post-election violence received attention from ICRC medical personnel, who arranged for X-ray examinations where necessary. On ICRC advice, the authorities arranged the referral of detainees with tuberculosis.

Detainees faced fewer general health risks after the ICRC repaired water and waste-disposal infrastructure in seven facilities, improved ventilation and provided 10,576 inmates with hygiene materials. Meanwhile, prison guards were trained in how to chlorinate wells, so they could respond independently in case of contamination. The Ivorian Institute of Public Hygiene disinfected 22 detention facilities with the help of ICRC equipment, benefiting some 12,000 detainees. Recreational items donated by the ICRC contributed to inmates' well-being.

The Health and Justice Ministries and the penitentiary administration explored with the ICRC ways to achieve sustainable

PEOPLE DEPRIVED OF THEIR FREEDOM	BENIN	BURKINA FASO	CÔTE D'IVOIRE – GOVERNMENT	CÔTE D'IVOIRE – FORCES NOUVELLES	TOGO
ICRC visits					
Detainees visited	7	182	14,338	379	2,193
Detainees visited and monitored individually	7	1	371	45	41
of whom women			1		
of whom minors			4		
Detainees newly registered			338	28	7
of whom women			1		
of whom minors			4		
Number of visits carried out	1	3	101	92	12
Number of places of detention visited	1	3	35	42	5
Restoring family links					
RCMs collected			132	19	21
RCMs distributed			78	11	4

PEOPLE DEPRIVED OF THEIR FREEDOM		BURKINA FASO	CÔTE D'IVOIRE
Economic security, water and habitat			
Food	Beneficiaries		2,106
Essential household items	Beneficiaries	182	10,576
Water and habitat activities	Beneficiaries		12,000

improvements in health care. Subsequently, the authorities commissioned an assessment of prison health care standards and adopted a national policy on health in detention. They undertook to recruit additional nursing staff to improve detainees' access to professional medical care.

To encourage respect for judicial guarantees, the authorities were alerted to individual cases whose trials were overdue, resulting in the release of several detainees.

A planned seminar aimed at enhancing prison management was postponed to focus resources on needs generated by the post-election crisis.

AUTHORITIES

Regular dialogue with local and national authorities and regional and international bodies, including the UN, deepened their understanding of IHL and the Movement's neutral, impartial and independent humanitarian action and facilitated humanitarian coordination during crises. Contacts intensified in Côte d'Ivoire surrounding the elections, building on dialogue developed during the ICRC's longstanding presence there. These provided opportunities to remind the authorities of their responsibilities to safeguard civilians' rights and, during the post-election crisis, helped strengthen support for National Society/ICRC activities on both sides of the political divide. The parties demonstrated their backing, facilitating Movement access to those affected and granting the ICRC immediate access to people arrested in connection with the situation.

To accelerate national IHL implementation, the region's governments benefited from ICRC legal expertise and sponsorship. Accordingly, officials from all five countries shared experiences with peers at an ECOWAS/ICRC seminar in Abuja (see *Nigeria*) and at the third Universal Meeting of National IHL Committees, Geneva, Switzerland (see *International Law and Cooperation*). Representatives of French-speaking African countries explored customary IHL at a seminar in Cameroon (see *Yaoundé*). An AU/ICRC conference in Abidjan enabled 50 government officials and international community representatives to examine the AU Convention on IDPs. With ICRC support, Burkina Faso became the 30th State to ratify the Convention on Cluster Munitions, bringing the instrument into force. Although preoccupation with the elections hampered progress on IHL implementation in Côte d'Ivoire, relevant officials maintained contact with delegates with a view to the future ratification of priority treaties and revision of the penal code.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

As a priority, weapon bearers were familiarized with IHL, international human rights law, the distinctive nature of the Movement and the protection afforded by its emblems. More than 3,400 Ivorian military and security personnel, including former fighters, attended ICRC briefings on these topics, with a focus on the proper maintenance of public order. These, along with

bilateral dialogue at command level and information sessions for 640 members of armed groups conducted with the National Society, helped secure safe Movement access to victims of the post-election crisis. Similar briefings targeted 775 military and security personnel from Burkina Faso and 20 from Togo, including peacekeepers preparing for deployment to Côte d'Ivoire.

To support the integration of IHL into forces' doctrine, training and operations, senior officers from Côte d'Ivoire, Burkina Faso and Togo enhanced their IHL expertise at international workshops with ICRC financial support. To help strengthen IHL teaching capacities, 20 Ivorian and 30 Beninois military instructors honed their skills at ICRC refresher courses. Subsequently, the Ivorian chief of staff created an IHL unit to coordinate the integration process. With ICRC input, this unit independently organized its first train-the-trainer event, at which existing instructors passed on their skills to 19 trainee instructors. Meanwhile, training units in Benin and Togo drew on ICRC expertise to update IHL handbooks, and one training facility in Burkina Faso strengthened teaching resources with ICRC-donated IHL reference materials.

CIVIL SOCIETY

Across the region, groups with potential influence during inter-communal or election-related violence had the opportunity to discuss humanitarian principles and deepen their understanding of the Movement's neutral, impartial and independent humanitarian work.

Traditional and religious leaders in Ghana and community leaders, students, political/youth groups, NGOs and women's associations in Burkina Faso, Côte d'Ivoire and Togo learnt about these topics at tailored National Society/ICRC events. In Côte d'Ivoire, these reached over 3,400 people, including demobilized soldiers, and often incorporated first-aid training. Besides promoting social cohesion, such events reinforced awareness of the Movement's distinctive role and, consequently, facilitated its access to victims of Ivorian post-election violence despite the prevailing insecurity.

Journalists attended Movement briefings and workshops enabling them to relay humanitarian messages accurately to the public. Radio spots and competitions prior to and during the Ivorian post-election crisis heightened awareness of humanitarian values, the Movement and its emblems, including in volatile western regions. Media contacts in Benin and Togo raised their respective National Society's profile by reporting on their assistance to flood victims.

To support the study of IHL among future opinion-leaders, university students in Benin, Côte d'Ivoire and Togo benefited from ICRC-donated IHL reference materials as well as presentations. Lecturers from all five countries enhanced their teaching skills at pan-African IHL courses, with ICRC sponsorship. Similarly, at a workshop abroad, an Ivorian official studied the process of integrating IHL into curricula with a view to organizing appropriate training for secondary school teachers.

RED CROSS AND RED CRESCENT MOVEMENT

The region's National Societies focused on preparing to meet needs in case of violence or natural disaster, receiving ICRC financial, material, logistical and training support to reinforce emergency response, communication, family-links and health-promotion capacities.

To strengthen their organizational development, the National Societies enhanced their governance skills at regional Movement seminars and at a meeting of National Society legal advisers in Switzerland. The Ivorian Red Cross reduced its dependence on external support by offering commercial first-aid training.

As part of contingency plans developed with ICRC support, first-aiders throughout Côte d'Ivoire and in Burkinan and Togolese flashpoints upgraded their skills and equipment with ICRC training and materials. To improve information-sharing, Ivorian and Togolese radio operators benefited from new equipment and training. All five National Societies undertook ICRC needs assessment/project management training, better preparing them to mobilize relief operations. Pre-positioned ICRC household supplies ensured they could meet communities' basic needs in an emergency.

To garner support for such operations, Ivorian and Togolese communication personnel learnt how to promote humanitarian principles, the Movement and its emblems effectively at ICRC workshops, using supporting materials produced with ICRC input (see *Civil society* and *Armed forces and other bearers of weapons*).

Ivorian Red Cross personnel received ICRC vehicle support to facilitate national disease-prevention campaigns, enabling them to immunize thousands of children against polio and raise awareness of malaria, distributing mosquito nets to vulnerable women.

These activities, conducted in coordination with Movement partners operating locally, helped the National Societies increase their visibility and swiftly deploy to provide effective relief in the event of violence or natural disaster (see *Civilians*).

DAKAR (regional)

COVERING: Cape Verde, Gambia, Guinea-Bissau, Senegal



EXPENDITURE (IN KCHF)

Protection	817
Assistance	4,282
Prevention	1,955
Cooperation with National Societies	1,676
General	-

► **8,731**

of which: Overheads 533

IMPLEMENTATION RATE

Expenditure/yearly budget	106%
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PERSONNEL

Expatriates	22
National staff (daily workers not included)	112

KEY POINTS

In 2010, the ICRC:

- provided 752 people displaced by violence or natural disaster in Gambia and Senegal with food rations, and 808 with essential household items in joint operations with the National Societies
- in Casamance (Senegal), supported 11 primary health care facilities, including 4 newly constructed maternity centres, through staff training, logistical and structural support and the supply of essential medicines and equipment
- with the National Societies, boosted the economic security of 18,621 vulnerable people in Casamance and Guinea-Bissau through a variety of tailored agricultural, veterinary and micro-economic initiatives
- with the National Societies, improved access to clean water and sanitation for 46,341 vulnerable community members in Casamance and north-western Guinea-Bissau, while raising their awareness of good hygiene practices
- organized high-profile conferences on "Humanitarian Action in Africa" and "Women and War" at the ICRC's documentation centre in Dakar, stimulating humanitarian debate among a broad cross-section of society
- welcomed the ratification of the Convention on Cluster Munitions by Cape Verde and Guinea-Bissau

The ICRC opened a regional delegation in Dakar in 1989, although it had already worked in the region for some years. It focuses on promoting IHL among the armed forces and other bearers of weapons and on encouraging implementation of that law by the authorities throughout the region. It also supports the activities of the National Societies, assists people affected by armed conflict and other situations of violence in Casamance and Guinea-Bissau, and visits detainees of ICRC concern, providing them with material aid where necessary.

CONTEXT

In Senegal's southern Casamance region (hereafter Casamance), tensions escalated between government forces and the Mouvement des Forces Démocratiques de la Casamance (MFDC), with no end in sight to their longstanding confrontation. Following a lull in violence mid-year, the MFDC stepped up its operations against the military. Meanwhile, there were reports of friction within the MFDC and fighting between emerging factions. Members of one such faction were allegedly arrested in Gambia by the authorities there. Armed attacks against civilians were also reported. The insecurity, coupled with the presence of mines, caused people to abandon their homes and livelihoods, prevented those previously displaced from returning home, and hindered humanitarian access and the provision of health care and water.

Senegal's capital, Dakar, with a large international community, remained an important centre for humanitarian dialogue.

Political and military instability resurfaced in Guinea-Bissau. In a change of military command on 1 April, the chief of defence staff,

the head of military intelligence and, briefly, the prime minister were arrested. The ensuing suspension of the European Union's support to security sector reform prompted other actors to step into the breach. In November, the government entered a cooperation agreement with Angola in that regard. In December, amid international and domestic pressure, the military officials detained in April were released, together with four people detained for their alleged involvement in high-profile assassinations committed during 2009. Northern Guinea-Bissau continued to host refugees from Casamance, adding strain on communities already struggling with poverty and limited State infrastructure.

In Gambia, cabinet reshuffles and dismissals resulted in frequent changes to the administration. Several senior officials were arrested, reportedly for State security reasons.

Illegal trafficking, cross-border activity by weapon bearers, and natural disaster added to instability in the region, which remained a common migratory route.

MAIN FIGURES AND INDICATORS			
PROTECTION			
CIVILIANS (residents, IDPs, returnees, etc.)			
Red Cross messages	Total	UAMs/SCs*	
RCMs collected	18		
RCMs distributed	22		
Reunifications, transfers and repatriations	Total		
People reunited with their families	2		
Tracing requests, including cases of missing persons	Total	Women	Minors
People for whom a tracing request was newly registered	18	3	2
People located (tracing cases closed positively)	13		
Tracing cases still being handled at 31 December 2010 (people)	35	3	2
Documents			
People to whom travel documents were issued	1		
Official documents relayed between family members across borders/front lines	2		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses) ¹			
ICRC visits	Total	Women	Minors
Detainees visited	665		
Detainees visited and monitored individually	72	3	
Detainees newly registered	60	2	
Number of visits carried out	46		
Number of places of detention visited	10		
Restoring family links	Total		
RCMs collected	8		
Phone calls made to families to inform them of the whereabouts of a detained relative	47		

* Unaccompanied minors/separated children

1. Guinea-Bissau and Senegal

MAIN FIGURES AND INDICATORS

ASSISTANCE

CIVILIANS (residents, IDPs, returnees, etc.)

Economic security, water and habitat		Total	Women	Children
Food ²	Beneficiaries	752	26%	49%
	<i>of whom IDPs</i>	677		
Essential household items ²	Beneficiaries	808	25%	26%
	<i>of whom IDPs</i>	725		
Agricultural, veterinary and other micro-economic initiatives ³	Beneficiaries	18,781	99%	1%
	<i>of whom IDPs</i>	166		
Water and habitat activities ¹	Beneficiaries	46,341	25%	50%
	<i>of whom IDPs</i>	1,245		
Health⁴				
Health centres supported	Structures	11		
Average catchment population		14,813		
Consultations	Patients	11,553		
	<i>of which curative</i>		3,445	4,660
	<i>of which ante/post-natal</i>		453	
Immunizations	Doses	19,192		
	<i>of which for children aged five or under</i>	19,037		
	<i>of which for women of childbearing age</i>	155		
Referrals to a second level of care	Patients	88		
Health education	Sessions	1,180		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)¹				
Economic security, water and habitat				
Essential household items	Beneficiaries	350		
WOUNDED AND SICK⁵				
Physical rehabilitation				
Centres supported	Structures	1		

1. Guinea-Bissau and Senegal

2. Gambia and Senegal

3. Gambia, Guinea-Bissau and Senegal

4. Senegal only

5. Guinea-Bissau only

ICRC ACTION AND RESULTS

With the establishment of a separate delegation covering Mali and Niger (see *Niaméy*), the restructured Dakar delegation consolidated its efforts to protect and assist civilians affected by violence or political instability in Gambia, Guinea-Bissau and Senegal, in cooperation with the National Societies.

Following violence in Casamance, the ICRC facilitated the treatment of wounded people and provided the displaced with food and household necessities. It documented allegations of abuses against civilians, making representations where necessary to the alleged perpetrators. Through presentations and bilateral contacts, it raised awareness of Movement operations, humanitarian principles and applicable law among authorities and weapon bearers. Their support helped Movement personnel safely access affected communities, although general insecurity delayed some planned initiatives.

In Casamance and north-western Guinea-Bissau, the ICRC pursued its multidisciplinary approach aimed at helping violence-affected communities access adequate water, sanitation and health care and to achieve food and economic security. Working regularly with the National Societies, it assisted vulnerable rural communities, IDPs, refugees and returnees through diverse agricultural and income-generating activities. These included new initiatives benefiting

stockbreeders and urban IDPs. The ICRC strengthened its support to health services. It provided specialist training to hospital personnel, helped prepare Bissau's physical rehabilitation centre to begin providing services and, in Casamance, provided comprehensive support to primary health care facilities, including by constructing four maternity centres. In parallel, ICRC-trained National Society personnel and community members improved local access to water and sanitation and conducted health-education sessions.

Delegates visited detainees in Senegal and in Guinea-Bissau, including those arrested on 1 April, to monitor their treatment and living conditions. Where necessary, they assisted inmates in receiving medical attention. To reduce health risks, the ICRC distributed hygiene items and, in Senegal, co-organized with the authorities a seminar for prison personnel aimed at enhancing detainees' living conditions.

The ICRC expanded its network of high-level contacts in Gambia during missions to Banjul, pursuing dialogue aimed at developing its activities there, including by resuming visits to detainees.

To accelerate national IHL implementation, the region's governments benefited from ICRC advice and encouragement. Cape Verde and Guinea-Bissau subsequently ratified the Convention on

Cluster Munitions. To encourage the integration of IHL into their doctrine, training and operations, the ICRC strengthened cooperation with armed and security forces in Gambia, Guinea-Bissau and Senegal. Besides conducting troop briefings, it supported the training of IHL instructors in Gambia and Senegal and helped revise Guinea-Bissau's military IHL manual.

Dakar being a hub for humanitarian diplomacy, the delegation developed numerous initiatives to promote IHL and the Movement among the media, academic circles, the international community and the wider public. The ICRC's documentation centre, in particular, began establishing itself as a reference for IHL, attracting researchers and hosting events on humanitarian themes.

The ICRC provided training, financial, logistical and material support to the region's National Societies, better preparing them to respond to emergencies, pursue communication activities and deliver family-links services, including for migrants. They regularly partnered the ICRC in the field, developing their operational experience.

Coordination with Movement partners and other relevant actors ensured humanitarian needs were met while avoiding duplication.

CIVILIANS

Given the insecurity in Casamance and northern Guinea-Bissau, the ICRC maintained regular contact with authorities and weapon bearers, reminding them of their responsibilities to protect civilians at all times (see *Armed forces and other bearers of weapons*). Delegates documented alleged violations of civilians' rights and, where necessary, raised these with the alleged perpetrators to prevent further abuses.

IDPs receive vital relief

People displaced by violence in Casamance struggled to support themselves. They and other families displaced by flooding or wildfires in Gambia and Senegal received relief goods from the National Societies/ICRC to help them cope: 752 IDPs (108 households) were given food, and 808 (103 households) received essential household items. Twenty-four Gambian farming households (160 people) received seed to help them revive agricultural activities.

Violence-affected communities improve their economic security

Where the security situation permitted, violence-affected communities in Casamance and north-western Guinea-Bissau, including refugees and returnees, received help to rebuild their livelihoods. In total, 18,621 people benefited from tailored ICRC agricultural, veterinary and micro-economic initiatives.

Members of 50 women's associations, including 42 which had previously relaunched market gardens with ICRC support, honed their farming techniques with guidance from ICRC experts and benefited from improvements to irrigation (see below), boosting their yields and income. After learning to plant and irrigate

their crops more effectively, 11 such associations began producing vegetables year-round. A further eight associations received seed, tools and fencing to establish new market gardens.

In parallel, farming communities, including women's associations, received cereal mills to facilitate production and, in remote areas, bicycles and carts for transporting produce to market. This reduced their workload and gave them more time to pursue income-generating activities.

Many IDPs seeking to rebuild their lives in Ziguinchor town had difficulty finding work. Based on their skills, with ICRC supervision and funds, 21 people launched small businesses to better support themselves. Among them, several people farmed chickens, one established a tailoring service, while one mine victim upgraded his bicycle-repair shop. Fewer businesses were launched than planned owing to the time required to identify those households most likely to benefit from such support.

Through a new ICRC-financed initiative to support stockbreeders, five animal-health workers in Casamance received veterinary materials and motorcycles, alongside driving lessons, to facilitate vaccination campaigns. Better able to access remote areas, they treated three times as many animals in 2010 as in 2009. In Guinea-Bissau, district agricultural authorities and the National Society/ICRC launched a livestock de-worming programme, through which pig farmers enhanced their animals' health and market value, while obtaining veterinary advice via radio spots and village briefings.

Rural communities benefit from improved water and sanitation

Water authorities and rural communities in Casamance and north-western Guinea-Bissau worked with the National Societies/ICRC to improve local water and sanitation infrastructure, much of which had fallen into disrepair owing to longstanding insecurity and rain damage. Together they constructed/repaired 37 water points and 21 rainwater reservoirs, providing nearly 5,900 people with readier access to drinking water. To help ensure long-term benefits, 15 mechanics in Casamance received maintenance training. With ICRC technical back-up, the water authorities improved the management of water networks in the towns of Djibidjione, Casamance, and São Domingos, Guinea-Bissau. In the latter, new ICRC-constructed premises enabled water-board staff to work more efficiently.

Complementing agricultural inputs (see above), eight market-gardening associations benefited from new/repared wells, while, through an ICRC pilot initiative, six associations installed new irrigation systems, reducing the time required to water their crops.

As part of efforts to improve public health (see below), Movement personnel renovated water and sanitation infrastructure, including latrines, in health facilities and schools, benefiting some 19,600 people. To maximize impact, National Society-trained teachers in 70 schools promoted good hygiene practices among their pupils. A further 20,200 people in cholera-prone parts of Guinea-Bissau similarly reduced their exposure to the disease after ICRC-trained National

Society volunteers trained and equipped village health committees to disinfect wells and raise hygiene awareness locally.

Civilians in violence-affected areas gain better access to primary health care

In Casamance, health structures experienced difficulties delivering quality services owing to limited resources and security constraints.

In 2010, 11 health facilities benefited from ICRC support, including structural renovations, staff training and materials, enabling them to provide services to government-recommended standards. Among these were four maternity centres newly constructed by the ICRC, providing new and expectant mothers with easier access to treatment in hygienic conditions. To help ensure patients received adequate care, staff underwent regular supervision and were given essential drugs and equipment as needed. After adopting ICRC-recommended stock-management procedures, fewer health structures ran out of medical supplies. With ICRC back-up, senior health professionals organized refresher training for female health workers in rural areas, enhancing their capacities to provide quality ante- and post-natal care.

To facilitate government disease-prevention and family-planning campaigns, health workers had access to ICRC logistical support. Where insecurity prevented them from reaching targeted communities, they called on the ICRC, as a neutral, impartial and independent humanitarian organization, to conduct such campaigns on their behalf. These joint efforts allowed 19,037 children to receive polio/measles immunizations. In parallel, 78 ICRC-trained community health promoters conducted education sessions, giving out condoms and advising over 28,000 community members on ways of reducing their vulnerability to HIV, sexually transmitted infections and water-borne diseases. Schoolteachers subsequently reported a clear drop in unplanned pregnancies among pupils.

With the aim of improving the care of people uprooted by the fighting in Casamance, the ICRC submitted a proposal to the Guinea-Bissau authorities to rehabilitate the regional health centre in São Domingos (see *Wounded and sick*). Plans to support a further health centre in Casamance to the same end were put on standby due to security constraints.

Family members regain contact

Regionwide, family members dispersed by violence, migration or natural disaster regained contact thanks to Movement family-

links services. Two migrants rejoined their families after obtaining documents required for their repatriation.

With ICRC/International Federation support (see *Red Cross and Red Crescent Movement*), the region's National Societies worked to enhance such services. After meeting in 2009 to examine the challenges faced by migrants in northern and western Africa, relevant National Societies built on their understanding at a second Movement workshop in Dakar. In Senegal, the National Society subsequently assessed the needs of foreign nationals and street children.

PEOPLE DEPRIVED OF THEIR FREEDOM

Detainees in Guinea-Bissau and Senegal received visits from the ICRC, according to its standard procedures, to monitor their treatment and living conditions. Special attention was paid to security detainees, including those arrested on 1 April in Bissau. Following visits, the ICRC shared feedback confidentially with the authorities.

During visits, detainees were able to contact relatives or their consular representatives using Movement family-links services. They had their health monitored by ICRC delegates and, where necessary, received hygiene items or underwent treatment financed by the ICRC. Prison infirmaries in Guinea-Bissau received ICRC drugs to bolster their medical supplies.

In Senegal, the authorities and the ICRC worked to tackle overcrowding and improve inmates' health and general well-being. Together they examined the cases of individuals held in lengthy pre-trial detention, leading to the release of 11 such detainees. At a seminar co-organized by the penitentiary administration/ICRC, 40 prison personnel, including health workers, from 20 facilities explored their responsibilities in protecting detainees' rights and ways of addressing common health and hygiene problems.

In Gambia, the ICRC pursued dialogue with the authorities aimed at resuming its visits to detainees, suspended since 2006.

CIVILIANS			GAMBIA	GUINEA-BISSAU	SENEGAL
Economic security, water and habitat					
Food		Beneficiaries	320		432
	of whom IDPs	Beneficiaries	288		389
Essential household items		Beneficiaries	160		648
	of whom IDPs	Beneficiaries	144		581
Agricultural, veterinary and other micro-economic initiatives		Beneficiaries	160	11,766	6,855
	of whom IDPs	Beneficiaries	144		22
Water and habitat activities		Beneficiaries		33,892	12,449
	of whom IDPs	Beneficiaries			1,245

WOUNDED AND SICK

Given insecurity in Casamance and Guinea-Bissau, efforts focused on preparing hospitals there to handle the wounded. Hospitals in Ziguinchor and Bissau each received sufficient medical supplies to treat 100 weapon-wounded patients. Owing partly to these preparations, people injured by mines or other violence in Casamance obtained adequate care after the ICRC evacuated them to Ziguinchor and paid for their treatment.

To enhance regional surgical capacities, 24 French-speaking military surgeons and doctors from Mali, Niger and Senegal built on their expertise in treating weapon wounds at an ICRC seminar in Dakar.

In Guinea-Bissau, planned refresher war-surgery courses for previously trained personnel were postponed to 2011. However, 24 National Society volunteers and 6 nurses working in Bissau hospital's emergency unit improved their first-aid techniques at an advanced ICRC course. The Health Ministry welcomed an ICRC proposal to boost health care capacities in the country's north-west, where refugees from Casamance regularly sought treatment, by rehabilitating the São Domingos regional health centre.

In preparation for the inauguration of the ICRC-supported physical rehabilitation centre in Bissau, the authorities met regularly with delegates, who advised on renovations and staff recruitment. After overcoming resource constraints, the authorities completed construction works, enabling ICRC technicians to begin installing equipment. The centre, intended to provide victims of mines/explosive remnants of war with quality limb-fitting and physiotherapy services, expected to admit its first patients in 2011.

AUTHORITIES

National and local authorities, diplomats and international and humanitarian actors regularly discussed humanitarian concerns with the National Societies/ICRC, deepening their understanding of IHL and the Movement through bilateral contacts, presentations and seminars (see *Civil society*). More particularly, Senegalese ministers and local authorities exchanged views on

the humanitarian consequences of the situation in Casamance, helping obtain their backing for Movement operations there (see *Civilians*). Dialogue with Guinea-Bissau's prime minister advanced the development of the ICRC-supported physical rehabilitation centre in Bissau (see *Wounded and sick*).

During ICRC missions to Banjul, Gambian ministers learnt more about the organization's role in promoting IHL and protecting civilians and detainees, with a view to strengthening cooperation in these areas (see *People deprived of their freedom*).

To accelerate national IHL implementation, representatives of Gambia, Guinea-Bissau and Senegal shared experiences with peers at an Economic Community of West African States/ICRC meeting in Abuja (see *Nigeria*), with ICRC sponsorship. Rather than organizing an additional IHL regional workshop as foreseen, the ICRC developed bilateral contacts aimed at encouraging individual States to make progress on priority instruments and, where necessary, to adopt legislation protecting the Movement's emblems. Guinea-Bissau's new human rights committee welcomed ICRC support to that end. By year-end, Cape Verde and Guinea-Bissau had ratified the Convention on Cluster Munitions, while the Senegalese National Assembly had recommended its ratification.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

Heightened insecurity in Casamance and Guinea-Bissau reinforced the need to familiarize all weapon bearers with IHL, international human rights law and the ICRC's neutral, impartial and independent humanitarian role. Military and security units operating in volatile areas, as well as MFDC members, increased their understanding of these topics at ICRC briefings, helping ensure safe Movement access to violence-affected people. These were also an opportunity to remind participants of their responsibilities to protect civilians' rights (see *Civilians*). Briefings for Gambian and Senegalese peacekeepers preparing for deployment abroad, and for trainee *gendarmes* from seven African countries, helped promote such messages elsewhere in the continent.

PEOPLE DEPRIVED OF THEIR FREEDOM		GUINEA-BISSAU	SENEGAL
ICRC visits			
Detainees visited		72	593
Detainees visited and monitored individually		10	62
	<i>of whom women</i>	1	2
Detainees newly registered		3	57
	<i>of whom women</i>		2
Number of visits carried out		34	12
Number of places of detention visited		5	5
Restoring family links			
RCMs collected		1	7
Phone calls made to families to inform them of the whereabouts of a detained relative			47

PEOPLE DEPRIVED OF THEIR FREEDOM		GUINEA-BISSAU	SENEGAL
Economic security, water and habitat			
Essential household items	Beneficiaries	120	230

The general staffs of Gambia, Guinea-Bissau and Senegal welcomed ICRC expertise and encouragement in integrating IHL into their forces' doctrine, training and operations, with Gambia establishing a military IHL committee to support the process. IHL instructors from the Senegalese *gendarmerie* and, for the first time, the Gambian army enhanced their teaching skills at train-the-trainer courses organized with ICRC support. Senegalese officers also benefited from ICRC sponsorship to boost their IHL knowledge at courses abroad.

Gambian police officers received training in international human rights law and first aid at Gambia Red Cross Society courses organized with ICRC input.

Despite changes within Guinea-Bissau's military hierarchy, the IHL liaison officer there continued to work closely with the ICRC, facilitating troop briefings and publishing a revised IHL manual. This, alongside contacts with UN and other foreign military representatives in Bissau, enabled the ICRC to track progress on security sector reform, with a view to offering training support in due course.

CIVIL SOCIETY

In Dakar, a hub for humanitarian diplomacy, the ICRC concentrated on establishing its documentation centre as a reference for IHL, widely promoting the facility and developing its website and reference library. Consequently, law lecturers and students, UN agencies and NGOs approached the ICRC to use the centre for research purposes or to co-organize events. In particular, diplomats, humanitarian actors and civil and military authorities exchanged views at high-profile conferences on "Humanitarian Action in Africa" and "Women and War".

To stimulate interest in IHL among academic circles, Dakar University strengthened its cooperation with the ICRC, co-organizing a student moot court competition, as well as the fourth advanced French-language pan-African course on IHL in Saly, Senegal. The latter brought together 17 lecturers and legal professionals from 12 countries, who studied mechanisms for enforcing IHL and shared best practices regarding IHL teaching methodology.

Teachers in 33 Senegalese secondary schools completed ICRC teacher-training courses and received teaching aids, preparing them to pursue implementation of the Exploring Humanitarian Law programme independently. The Education Ministry benefited from ICRC guidance to ensure the sustainability of the programme.

These activities generated considerable media coverage, contributing to public awareness of humanitarian issues. To encourage accurate reporting, journalists attended National Society/ICRC workshops and learnt first-hand about Movement assistance operations during field trips to Casamance. The resulting publicity, combined with dialogue with community and religious leaders in violence-affected areas, helped build support for Movement activities.

RED CROSS AND RED CRESCENT MOVEMENT

In accordance with cooperation agreements, the region's National Societies received ICRC financial, logistical, material and training support to strengthen their legal foundations and capacities to respond to humanitarian needs. They also gained field experience through involvement in ICRC activities. Regular meetings with Movement partners facilitated coordination.

To boost their emergency response capacities, 180 volunteers in violence-prone areas upgraded their first-aid skills and equipment at ICRC courses, while 28 undertook needs-assessment training. Volunteers effectively assessed the needs of thousands of wildfire/flood victims with ICRC guidance and logistical support, subsequently assisting the most vulnerable (see *Civilians*).

With training from an expert tracing delegate, family-links personnel improved their information-gathering techniques, enabling them to advance outstanding cases and, in Senegal, to assess family-links needs. All four National Societies participated in an ICRC/International Federation-organized workshop on migration (see *Civilians*).

The National Societies received ICRC training and advice to improve their communication skills, better preparing them to conduct public health initiatives (see *Civilians*) or to promote Movement activities and IHL, for example during media workshops (see *Civil society*). With delegates' help, the Red Cross Society of Guinea-Bissau recruited a communication coordinator and developed new information materials. National Society legal advisers received ICRC sponsorship, enabling them to build on their IHL knowledge at an international conference.

Working with the International Federation/ICRC, the National Societies in Gambia and Senegal revised their statutes, enhancing governance and management procedures.

HARARE (regional)

COVERING: Botswana, Malawi, Namibia, Zambia, Zimbabwe



EXPENDITURE (IN KCHF)

Protection	1,325
Assistance	8,169
Prevention	1,427
Cooperation with National Societies	989
General	-

► **11,911**
of which: Overheads 723

IMPLEMENTATION RATE

Expenditure/yearly budget	79%
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PERSONNEL

Expatriates	21
National staff (daily workers not included)	99

KEY POINTS

In 2010, the ICRC:

- worked in close collaboration with the Zimbabwe Prison Services (ZPS) to stabilize detainees' nutritional status and provide them with a regular food supply, notably by boosting production in 18 prison farms
- agreed on a plan of action with the ZPS to improve inmates' access to health care
- downscaled its support to Zimbabwe's rural health clinics, while continuing to support polyclinics in Harare's suburbs
- trained Zimbabwean farmers in advanced agricultural techniques, significantly boosting their crop yields
- sponsored national IHL committee members from all the countries covered to attend 3 major events abroad
- organized a five-day workshop in Malawi on restoring family links for National Society personnel from the southern African region

The Harare regional delegation has existed in its current form since 1981, although the ICRC has been present in some of the countries covered for much longer. It visits detainees in Namibia and Zimbabwe, working closely with the latter authorities to improve prison conditions in the country. It also supports hospitals in Zimbabwe. Throughout the region, it helps family members separated by armed conflict to restore contact, raises awareness of IHL, international human rights law and the ICRC's mandate among the authorities, armed and security forces and the general public, and helps the National Societies develop their operational capacities.

CONTEXT

Under the national unity government, formed in February 2009, Zimbabwe remained mostly stable, despite rising friction between the two main parties, notably during the second half of the year. A series of community outreach meetings to elicit popular views on a new constitution were marred by politically motivated violence. The economy was gradually reviving and civil servants saw their salaries raised. Despite a relatively good harvest in 2009, parts of the south-east suffered a dry spell that caused a reduction in crop yields.

In Zambia, the government prepared for presidential and legislative elections, scheduled to take place in 2011. In April, a parliamentary

by-election was disrupted by street skirmishes, which reportedly left several people seriously injured.

The rest of the region remained stable, but the effects of the 2009 global financial crisis were still being felt. Tens of thousands of refugees were hosted within the region, and economic migration, for example from Zimbabwe to South Africa, often created tension.

The Southern African Development Community (SADC) continued to play an important role in the region, dealing with many of the above and other issues.

MAIN FIGURES AND INDICATORS

PROTECTION

CIVILIANS (residents, IDPs, returnees, etc.)			
Red Cross messages	Total	UAMs/SCs*	
RCMs collected	833		
RCMs distributed	546		
Tracing requests, including cases of missing persons	Total	Women	Minors
People for whom a tracing request was newly registered	19	3	15
People located (tracing cases closed positively)	19		
<i>including people for whom tracing requests were registered by another delegation</i>	11		
Tracing cases still being handled at 31 December 2010 (people)	133	7	11
UAMs/SCs,* including unaccompanied demobilized child soldiers	Total	Girls	Demobilized children
UAMs/SCs newly registered by the ICRC/National Society	1		
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2010	2	1	
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses) ¹			
ICRC visits	Total	Women	Minors
Detainees visited	14,422		
Detainees visited and monitored individually	116		
Number of visits carried out	137		
Number of places of detention visited	42		
Restoring family links	Total		
Detainees visited by their relatives with ICRC/National Society support	124		

* Unaccompanied minors/separated children

1. Namibia and Zimbabwe

ASSISTANCE

CIVILIANS (residents, IDPs, returnees, etc.) ²				
Economic security, water and habitat		Total	Women	Children
Food	Beneficiaries	7,995	25%	50%
Essential household items	Beneficiaries	105	25%	50%
Water and habitat activities	Beneficiaries	18,530	51%	32%
Health				
Health centres supported	Structures	18		
Average catchment population		1,210,096		
Consultations	Patients	641,113		
<i>of which curative</i>	Patients		503,203	262,602
<i>of which ante/post-natal</i>	Patients		62,777	
Immunizations	Doses	783,799		
<i>of which for children aged five or under</i>	Doses	761,335		
<i>of which for women of childbearing age</i>	Doses	22,464		
Referrals to a second level of care	Patients	43,668		
Health education	Sessions	10,888		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses) ²				
Economic security, water and habitat				
Food	Beneficiaries	8,330		
Essential household items	Beneficiaries	9,921		
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries	9,827		
Water and habitat activities	Beneficiaries	8,000		

2. Zimbabwe only

ICRC ACTION AND RESULTS

Building on access gained in April 2009 to prisons run by Zimbabwe's Ministry of Justice, the ICRC kept up regular visits to detainees, monitoring their treatment and living conditions. With a view to obtaining access to all detainees in the country, the delegation made an offer of services to visit people held in police stations.

The ICRC supported the relevant authorities, working closely in particular with the Zimbabwe Prison Services (ZPS) to improve detainees' living conditions. The joint efforts of the ZPS and the ICRC contributed to stabilizing inmates' nutritional status and ensuring a regular food supply to prisons. The ICRC continued to supplement detainees' diets, upgraded prison cooking facilities and launched an initiative to boost food production in prisons through the cultivation of sugar beans, groundnuts and vegetables. The authorities and the delegation also took steps to improve health care and hygiene in detention centres, notably by including detainees in the national drug-distribution plan. Inmates faced fewer health risks after the ICRC rehabilitated prison water and sanitation facilities and provided them with jerrycans, kitchenware and blankets. No major outbreaks of disease were reported in Zimbabwe's main prisons during the year.

In Namibia, people arrested in connection with the 1999 uprising in the Caprivi Strip were also visited by delegates. With ICRC support, the Namibia Red Cross organized family visits to the detainees by their relatives living in the Caprivi Strip.

While the ICRC began downscaling its assistance to health clinics in Zimbabwe, as planned, it continued to distribute drugs, medical supplies and equipment to polyclinics in Harare's suburbs. With the delegation's input, the city health authorities produced a draft 2010–15 plan to further improve peoples' access to health services. In two rural districts, the authorities took over the supply of drugs and medical material for health centres and referral hospitals, which had been supported by the ICRC since 2006. To help ensure a smooth transition, the delegation built or renovated vital infrastructure.

The delegation also wrapped up an agricultural initiative launched in 2009. Training in advanced farming techniques contributed to significantly higher yields for the country's farmers.

As part of ongoing efforts to raise awareness of IHL and the Movement, the delegation fostered contacts with the authorities, armed and security forces, academics and other members of civil society in the region. For example, it trained Zimbabwean armed forces instructors to teach IHL and organized a workshop for senior officers from SADC countries on the integration of IHL into military doctrine, training and operations. The ICRC also sponsored members of Zimbabwe's national IHL committee to attend three events abroad to bolster their capacities to implement IHL.

The ICRC and the region's National Societies continued to provide tracing and RCM services to refugees and unaccompanied children. To reinforce the family-links network, the southern African region's

National Societies and the International Federation participated in a five-day workshop supported by the ICRC. National Societies also received support to promote the Movement and to better respond to humanitarian needs arising from cross-border issues.

The ICRC coordinated its activities with Movement partners, UN agencies and other humanitarian actors to ensure humanitarian needs were met, while avoiding duplication.

CIVILIANS

Civilians' protection concerns shared with the authorities

In Zimbabwe, sporadic skirmishes during the outreach meetings to discuss the new constitution (see *Context*) led to occasional incidents of politically motivated violence and destruction of property. On the basis of such allegations, the ICRC fostered dialogue with the relevant authorities and influential community representatives to deepen understanding of humanitarian concerns and of legal provisions to protect and assist people in the event of violence during the upcoming constitutional referendum or the elections. Following an ICRC assessment of the needs of people affected by the violence during the meetings, those worst-off were provided with food rations and essential household items.

People in Zimbabwe have improved access to health care

In Harare's densely populated suburbs, people had better access to curative and ante/post-natal care and family planning services in 12 polyclinics, thanks in part to the ICRC's regular deliveries of drugs, cleaning materials and office supplies, as well as one-off donations of vital medical equipment. The ICRC began downsizing its support to the polyclinics in 2010, with donations covering 75% of the requirements for drugs, compared with nearly 100% in 2009; the remaining 25% was met by the National Pharmaceutical Company of Zimbabwe and UNICEF. With a catchment population of some 1.2 million people, the clinics provided consultations to over 640,000 patients, including over 260,000 children, and ante/post-natal consultations to nearly 63,000 women. Work was ongoing to improve the clinics' plumbing, electrical systems and waste management.

To maintain and further improve health care in Harare, the city health authorities developed and agreed on a 2010–15 plan of action during a three-day workshop supported by the ICRC. In addition, head nurses and administrators from all 12 ICRC-supported polyclinics assessed their work and planned accordingly for 2010 during a day-long workshop. With ICRC technical input, health administrators made notable progress in the distribution and management of drugs in the polyclinics.

In January, the health authorities in two districts in Masvingo and Matabeleland North took over the supply of drugs and medical materials to 6 of the 11 rural health centres and 1 of the 2 referral hospitals supported by the ICRC since 2006. Following a final ICRC donation, they also started supplying the remaining six health facilities by the end of the month. To help the authorities assume full responsibility for running the facilities in June,

the ICRC constructed waste-management systems in six centres, rehabilitated shelters and kitchens for expectant mothers in five, and improved access to water in two, contributing to a cleaner and safer environment. Staff also underwent training in equipment sterilization and waste management.

To stem a nationwide measles epidemic among children, the government launched a ten-day vaccination campaign in May, backed up by four ICRC vehicles with drivers.

Villagers in Zimbabwe have safer water and farmers produce higher yields

Some 18,000 people in rural communities in Mbire district had access to safe water after local authorities repaired or maintained hand pumps, with spare parts and training provided by the ICRC.

Meanwhile, an agricultural initiative – launched in Mashonaland Central and East in early 2009 to help farmers recover from years of drought and economic hardship – produced encouraging results in improving people's food self-sufficiency there. Dozens of employees from the Ministry of Agriculture underwent training to teach advanced farming techniques. Farmers, also trained by the ICRC, began adopting similar methods. The initiative came to a close in June, following an evaluation showing that farmers had more than doubled, and sometimes tripled, their crop yields. In areas where crops were still affected by dry spells, nearly 8,000 people (1,578 households) were given a one-off food ration.

Dispersed families reconnect

Refugees in the region restored and maintained contact with their relatives through tracing and RCM services provided directly by the ICRC in Zimbabwe and by the respective National Societies in Botswana, Malawi and Namibia, with ICRC support.

In parallel, the region's National Societies reinforced their skills in restoring links between separated family members at an ICRC workshop (see *Red Cross and Red Crescent Movement*).

PEOPLE DEPRIVED OF THEIR FREEDOM

Detainees in 41 of Zimbabwe's Ministry of Justice-run prisons received visits conducted according to the ICRC's standard procedures, enabling delegates to monitor their treatment and living conditions. Detainees received letter-writing materials to stay in touch with their families. After the visits, the detaining authorities were provided with confidential feedback on the delegates' findings and,

where relevant, recommendations for improvements. In Namibia, inmates arrested in connection with the 1999 uprising in the Caprivi Strip were also visited by delegates. Additionally, they received visits from relatives living in the Caprivi Strip, organized by the Namibia Red Cross with ICRC support.

In Zimbabwe, oral and written representations formed the basis of a dialogue with the authorities on ways to improve inmates' nutritional status, access to health care and adequate hygiene conditions (see below), as well as respect for their judicial guarantees. For example, a series of meetings with the authorities that also involved magistrates and key stakeholders resulted, in several cases, in faster handling of detainees' case files, particularly those of minors, the mentally ill and other vulnerable inmates.

As part of efforts to gain access to detainees in all places of detention in Zimbabwe, the permanent secretary of the Ministry of Home Affairs received an offer of services from the ICRC to visit police stations and to contribute to the police training programme. The offer was still under consideration at year-end.

To avoid overlap, the ICRC and other organizations working in fields related to detention held regular coordination meetings.

Zimbabwe's authorities take steps to improve detainees' living conditions

Inmates' nutritional status stabilizes

During the year, the joint efforts of the ZPS and the ICRC contributed to stabilizing inmates' nutritional status and ensuring a regular food supply to prisons.

In the spring, the Ministry of Justice and the ZPS began implementing the recommendations of an ICRC report submitted in late 2009. The document suggested ways to sustain the improvement in detainees' nutritional status following the ICRC's six-month therapeutic feeding programme in 2009. On the basis of the report, a third of Zimbabwe's prisons began systematically screening incoming inmates' nutritional status, and detainees in half of the country's prisons had their weight regularly checked, by ZPS order.

The ZPS and the delegation continued monitoring the food supply chain to prisons. More than 8,300 detainees in 17 of the country's largest prisons supplemented their diets with beans, groundnuts and oil provided to the authorities, on a monthly basis, according to need. Over the course of the year, an average of 6,000 inmates per month benefited from such distributions. Therapeutic feeding was not required. With a larger budget at its disposal, the ZPS

PEOPLE DEPRIVED OF THEIR FREEDOM	NAMIBIA	ZIMBABWE
ICRC visits		
Detainees visited	116	14,306
Detainees visited and monitored individually	116	
Number of visits carried out	1	136
Number of places of detention visited	1	41
Restoring family links		
Detainees visited by their relatives with ICRC/National Society support	124	

drafted a working agreement with the delegation to gradually assume full responsibility for food supplies in 2012. Thus, following the submission of an ICRC report recommending ways to boost food production, the Justice Ministry, the ZPS and the delegation began to implement a joint plan of action to grow sugar beans, groundnuts and vegetables in 18 prisons. With government funding, the ZPS rehabilitated the irrigation systems of two prison farms, while the ICRC provided support for similar works in five others. Farm managers received the necessary equipment and learnt how to boost their crop yields during two workshops co-organized by the ZPS and the delegation.

Detainees have improved health care and hygiene conditions

On the basis of an ICRC report assessing health care in prisons in late 2009, the Justice Ministry, the ZPS and the ICRC agreed on a 2010 plan of action to improve services. Prisons began receiving medicines on a regular basis after the authorities included detainees in the national plan for the provision of basic drugs. Dispensaries still lacking drugs and medical items got a regular supply from the ICRC. To ensure proper distribution of such medicines, more than 200 ZPS health professionals and administrators exchanged best practices on drug management during a three-day seminar. Meanwhile, ZPS regional health coordinators and the ICRC strengthened coordination with provincial and district health authorities to ensure proper training for health staff, medical visits for detainees, and access of inmates to HIV/AIDS and tuberculosis treatment.

Inmates in prisons also benefited from several preventive health measures supported by the ICRC, including the provision of hygiene kits. Nearly 10,000 detainees also received soap, plates, jerrycans and blankets, and those in two prisons began knitting warm clothing for inmates using eight new machines. Newly drilled boreholes and constructed water supply systems enhanced the provision of safe water for inmates in four prisons. Eight others had their kitchens renovated or stocked with new stoves and pots.

Thanks in part to these initiatives, no major outbreaks of disease were reported in Zimbabwe's main prisons during the year.

AUTHORITIES

Politicians and decision-makers in the region, including Zimbabwean government officials, deepened their knowledge of humanitarian issues, IHL and the Movement's activities during bilateral meetings with and briefings by the ICRC.

National IHL committee members from all the countries covered received technical support in ensuring IHL implementation, including through sponsorship to attend the third Universal Meeting of National IHL Committees, held in Geneva, Switzerland, (see *International Law and Cooperation*) and two regional IHL seminars in South Africa (see *Pretoria*). Additionally, members of Zimbabwe's IHL committee attended two ICRC information sessions focusing on the ratification of certain treaties, such as the Convention on Cluster Munitions.

At the regional level, contacts were fostered with SADC to raise its members' awareness of the Movement's mandate and operations.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

Regionwide, members of the armed and security forces participated in briefings and presentations to familiarize them with IHL and humanitarian principles and garner support for the Movement's neutral, impartial and independent humanitarian action. Among those briefed were participants in a military exercise in Zambia, government officials and senior police officers attending seminars at the SADC Regional Peacekeeping Training Centre (RPTC) in Harare, and nearly 600 officers and soldiers from the armed forces in Malawi, Namibia and Zimbabwe, who learnt about basic IHL and the ICRC before their deployment on peace-support operations. The Zimbabwe Defence Forces were also given 5,000 ICRC booklets on IHL rules governing combat to distribute to soldiers heading off on peace-support missions.

With ICRC technical support, the region's armed forces also continued to integrate IHL into their doctrine, training and operations. In Zimbabwe, two dozen air force and army instructors were trained to teach IHL, and two personnel from these branches of the military were sponsored by the ICRC to participate in an advanced IHL training course abroad. Military schools in Botswana, Malawi, Namibia and Zimbabwe also received publications to facilitate IHL teaching. Meanwhile, 15 senior military and police officers from 13 SADC countries devised new strategies for integrating IHL into their respective doctrine and training during a five-day ICRC workshop at the RPTC.

CIVIL SOCIETY

Universities in Botswana, Namibia and Zambia received IHL reference publications to enhance IHL teaching and research. In Zimbabwe, four universities assessed IHL instruction with the delegation and started exploring ways to better integrate the subject into curricula, and one lecturer was sponsored by the ICRC to attend a course abroad. Students there also tested their IHL knowledge at a national moot court competition, during which the delegation was able to foster contacts with several high-profile civil society actors in attendance, including High Court judges and NGOs. With ICRC sponsorship, the competition's winning team went on to take first runner-up in the regional moot court competition (see *Nairobi*).

Backed up by ICRC training, National Society communication staff raised public awareness of the Movement (see *Red Cross and Red Crescent Movement*).

RED CROSS AND RED CRESCENT MOVEMENT

With ICRC training, technical, material and financial support, the region's National Societies worked to develop their family-links services and emergency response capacities and to raise awareness of the Movement and its Fundamental Principles.

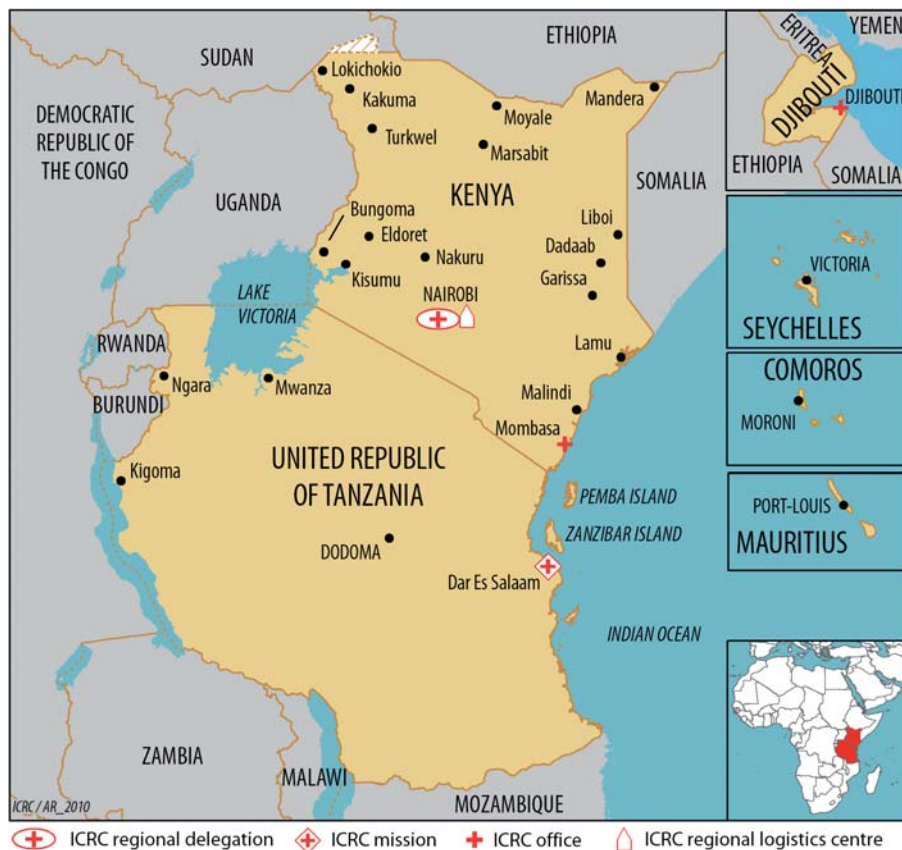
To strengthen the tracing and RCM network, the National Societies of nine southern African countries, including Botswana, Malawi, Namibia and Zimbabwe, reinforced their technical capacities and reviewed their plans of action to implement the Restoring Family Links Strategy for the Movement during a five-day regional workshop in Malawi, organized by the ICRC with the participation of the International Federation. In Zimbabwe, 10 volunteers also underwent training to become family-links focal points.

The National Societies held three meetings, with International Federation and ICRC support, where they addressed regional and Movement issues, exchanged expertise and coordinated activities to strengthen operations. Such regional coordination facilitated a quick response to humanitarian needs across borders and enabled the National Societies to prepare an emergency response in the event of violence, using the Safer Access approach. In Malawi and Zimbabwe, the National Societies' HF radio network covering the region was updated by the ICRC.

In Botswana, Malawi and Namibia, the National Societies continued improving their communication skills, and in Zimbabwe, the National Society held an international youth camp. These activities stimulated interest in the Movement among the authorities, the media and the general public.

NAIROBI (regional)

COVERING: Comoros, Djibouti, Kenya, Mauritius, Seychelles, United Republic of Tanzania



EXPENDITURE (IN KCHF)

Protection	1,360
Assistance	2,378
Prevention	2,623
Cooperation with National Societies	2,402
General	-

► **8,762**

of which: Overheads 535

IMPLEMENTATION RATE

Expenditure/yearly budget	94%
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PERSONNEL

Expatriates	30
National staff (daily workers not included)	302

KEY POINTS

In 2010, the ICRC:

- with the Kenya Red Cross Society, helped struggling rural communities reinforce their livelihoods through access to veterinary treatment for livestock and cash-for-work projects
- improved access to clean water and sanitation facilities for 28,681 people in Kenya and 7,971 in the United Republic of Tanzania
- helped refugees restore and maintain contact with their families
- continued to visit detainees held in detention facilities run by the police and Justice Ministry in Djibouti, and people held in connection with the International Criminal Tribunal for Rwanda in the Tanzanian town of Arusha
- briefed senior military, police, political, diplomatic and academic figures on IHL, international human rights law and the work of the Movement
- provided National Societies with funds, materials, training and logistical and technical back-up to help them, as appropriate, assist vulnerable communities, run family-links services and promote IHL

The ICRC's regional delegation in Nairobi was set up in 1974 and has a dual purpose: first, to promote IHL and carry out operations in the countries covered, namely restoring contact between refugees and their families, protecting and assisting people injured, displaced or otherwise affected by armed conflict or other situations of violence, visiting detainees falling within its mandate, and supporting the development of the National Societies; and second, to provide relief supplies and other support services for ICRC operations in neighbouring countries of the Horn of Africa and Great Lakes regions, as well as further afield.

CONTEXT

In Kenya, the referendum on a new constitution, and its subsequent adoption, took place in an atmosphere of relative calm. Meanwhile, the country's coalition government, formed in 2008 in the wake of post-election violence, remained in place, despite press reports of tensions within its ranks and a number of corruption scandals. In December, the International Criminal Court named six high-profile suspects in relation to the post-election violence.

Some areas of the country, notably in the north, experienced sporadic unrest resulting from political and ethnic grievances and competition for access to water and pasture. Drought early and late in the year exacerbated tensions, while the arrival of heavier rains mid-year brought flooding to some areas, especially the North and South Rift regions. Meanwhile, Somali refugees fleeing conflict at home continued to arrive in Kenya.

In the United Republic of Tanzania, an election in October saw the governing party retain its majority. On the Zanzibar archipelago,

political tensions subsided after the signing of a power-sharing agreement between the main parties. Following efforts in recent years to repatriate, resettle or naturalize refugees in the United Republic of Tanzania, around 98,000 refugees, mainly from Burundi and the Democratic Republic of the Congo (DRC), remained in camps in the west of the country.

Djibouti's government signed an accord with Eritrea seeking to normalize relations and establish a mechanism for resolving their disputed border (see *Eritrea*).

In the Comoros, clashes occurred between protesters and the military over the extension of the presidential mandate beyond May 2010. The situation subsequently calmed, however, following a constitutional court ruling intended to promote national reconciliation. An election at year-end passed off peacefully.

Mauritius, which held an election in May, and Seychelles remained politically stable.

MAIN FIGURES AND INDICATORS			
PROTECTION			
CIVILIANS (residents, IDPs, returnees, etc.)			
Red Cross messages	Total	UAMs/SCs*	
RCMs collected	20,751	7	
RCMs distributed	13,608	3	
Phone calls facilitated between family members	88		
Tracing requests, including cases of missing persons	Total	Women	Minors
People for whom a tracing request was newly registered	121	29	57
People located (tracing cases closed positively)	74		
<i>including people for whom tracing requests were registered by another delegation</i>	16		
Tracing cases still being handled at 31 December 2010 (people)	360	71	131
UAMs/SCs,* including unaccompanied demobilized child soldiers	Total	Girls	Demobilized children
UAMs/SCs newly registered by the ICRC/National Society	4	2	
UAMs/SCs reunited with their families by the ICRC/National Society	4	1	
<i>including UAMs/SCs registered by another delegation</i>	3		
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2010	69	23	
Documents			
People to whom travel documents were issued	99		
Official documents relayed between family members across borders/front lines	1		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses) ¹			
ICRC visits	Total	Women	Minors
Detainees visited	923		
Detainees visited and monitored individually	42	1	
Detainees newly registered	5		
Number of visits carried out	10		
Number of places of detention visited	4		
Restoring family links	Total		
RCMs collected	1,190		
RCMs distributed	851		
People to whom a detention attestation was issued	1		

* Unaccompanied minors/separated children

1. Djibouti and ICTR detainees held in United Republic of Tanzania

MAIN FIGURES AND INDICATORS

ASSISTANCE

CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security, water and habitat		Total	Women	Children
Agricultural, veterinary and other micro-economic initiatives ²	Beneficiaries	34,731	42%	15%
	<i>of whom IDPs</i>	12,960		
Water and habitat activities ³	Beneficiaries	36,652	35%	39%
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat				
Essential household items ⁴	Beneficiaries	1,021		

2. Kenya only

3. Kenya and United Republic of Tanzania

4. Djibouti only

ICRC ACTION AND RESULTS

The ICRC's Nairobi delegation pursued a range of activities designed to protect and assist communities affected by situations of violence, as well as by the direct consequences of armed conflict, while encouraging wider support for IHL and humanitarian principles.

To ease tensions over access to clean water in drought- and violence-prone districts of Kenya and to reduce health risks on the poverty-afflicted Tanzanian island of Pemba, the respective National Societies and the ICRC improved water and (on Pemba) sanitation facilities, benefiting more than 36,600 people.

With ICRC support, the Kenya Red Cross Society helped 34,731 people in rural communities reinforce livelihoods by providing access to veterinary treatment for livestock, training community members in veterinary care and implementing cash-for-work projects. Farmland clearance facilitated the return of derelict land to productive use, while road repairs improved communications and provided women and children in violence-prone areas with safer daily travel routes to markets and schools.

Throughout the region, thousands of refugees and detainees contacted relatives using the tracing and RCM network. The Tanzania Red Cross Society, which took over the service in late 2009 for refugees remaining in the west of the country, received ICRC support to reinforce the network.

ICRC delegates visited POWs of Eritrean origin and other detainees held in Djibouti, and the authorities were reminded of their IHL obligations to release the POWs and, if they so wished, repatriate them. Detainees were also visited at the UN facility in the Tanzanian town of Arusha, where they were being held in connection with the International Criminal Tribunal for Rwanda (ICTR). To ensure continued monitoring of ICTR-sentenced detainees transferred to other countries, the ICRC liaised with relevant delegations in Africa. During all visits, conducted according to standard ICRC procedures, detainees' treatment and living conditions were monitored, and the findings reported confidentially to the relevant authorities.

Generating support for IHL and the Movement within police, military, political, diplomatic and academic circles remained

a key ICRC objective. Following talks with Kenya's new police commissioner, the ICRC was invited to give briefings on humanitarian principles and IHL at the Kenya Police College. Similar sessions were held for officers of Kenya's General Service Unit. Government officials from across the region were sponsored by the ICRC to attend IHL seminars abroad. With ICRC support, lecturers and students at universities were encouraged to engage in research and discussion on IHL issues.

National Societies received ICRC funds, goods, expertise and logistics back-up to help develop, as appropriate, their relief, assistance, family-links and communication programmes.

Meanwhile, ICRC delegations in and beyond the region continued to receive relief and other supplies procured and delivered by the ICRC's Nairobi logistics centre using the most efficient and cost-effective means. Delegations also benefited from courses, advice and field support provided by the Nairobi-based regional training and assistance units.

CIVILIANS

Violence-prone communities discuss humanitarian values

During regular field trips by National Society and ICRC personnel to Kenyan regions prone to outbreaks of violence, local communities, authorities and weapon bearers participated in discussions on humanitarian principles. Dialogue aimed to increase respect for IHL and further understanding of the work and mandate of the Movement. Two districts in the northern part of Eastern Province – Marsabit and Moyale – were the focus of attention, as was, for the first time, Samburu in the Rift Valley, an area subject to increased levels of intercommunal violence. To monitor the situation and further raise awareness of humanitarian issues in Samburu, the National Society opened a branch there.

Drought- and poverty-affected Kenyans and Zanzibaris access clean water

In projects designed to ease communal tensions over scarce water resources, more than 28,600 people in drought-affected areas of northern and central Kenya gained access to regular supplies of fresh water after the Kenyan Red Cross and the ICRC upgraded facilities. In addition to ongoing work in Marsabit and Moyale,

support was extended in 2010 to encompass the central districts of Isiolo and Samburu. Projects included the installation or rehabilitation of rainwater-harvesting systems (including some in primary schools), boreholes (two as part of an emergency drought response), wells, rock catchments, earth dams and sand water filters. With ICRC training, materials and technical support, National Society personnel developed their skills in carrying out such rehabilitation projects.

In an initiative to improve family health, the National Society and the ICRC installed 50 household water filters in homes in northern Kenya and monitored the results with a view to expanding the project in future. In south-eastern Kenya, desalination units on Pate Island, installed in 2007 to provide clean drinking water for the island's 3,600 inhabitants, had to be dismantled in August owing to insurmountable technical difficulties.

On Pemba Island, Zanzibar, 7,971 people received fresh water supplies during ongoing projects conducted by the Tanzanian Red Cross and the ICRC to rehabilitate and construct 13 wells. To ensure sustainability of these wells, plus previously rehabilitated water systems, some 40 people responsible for maintaining and managing the water facilities in 13 villages (including heads of water committees and National Society volunteers) were trained in good management and hygiene practices. In addition, staff from the Zanzibar water board received ICRC technical support to manage water supply networks and water points using Geographic Information Systems technology.

Precarious livelihoods strengthened with ICRC support

More than 13,000 struggling herders and farmers in northern Kenya enjoyed a better prospect of raising healthy livestock after the ICRC and National Society provided them with vouchers to obtain veterinary services and ran refresher courses for community animal-health workers.

To further reinforce livelihoods in northern Kenya and the western region of Mount Elgon, 21,600 people participated in cash-for-work projects. Unemployed people, mostly young people, were paid to rehabilitate disused farmland for productive use, stabilize eroded land and repair roads, improving communications and providing safer routes to markets and schools for women

and children in violence-prone areas. To reduce personal security risks, workers were sometimes paid in vouchers rather than cash. These could be used locally to purchase essential goods and services (and subsequently exchanged for cash by traders), thus stimulating weakened economies. With some cash-for-work projects delayed from 2009 (when funds were diverted to emergency destocking projects in drought-affected areas), more people than budgeted for took part in cash-for-work schemes during 2010.

Given the relative calm in Kenya during 2010, emergency food rations and basic shelter and household items were not required.

Through the Movement's tracing and RCM services, thousands of refugees in the region exchanged news with their families. The quality of the family-links network, run jointly with the National Societies of Djibouti, Kenya and the United Republic of Tanzania, improved through the ICRC's provision of training, materials and funds. Refugees were informed of the availability of the service through presentations, discussions and promotional materials.

Child refugees separated from their parents were a focus of attention. Four children (three of whom had been registered by another delegation) were reunited with their families in 2010. Meanwhile, UNHCR and the ICRC sought lasting solutions for children whose families could not be located. Also, 99 refugees received travel documents to journey home or to a country offering them asylum in operations coordinated by the relevant embassies, UNHCR and the ICRC.

The families of Kenyans held in Uganda in connection with the Kampala bomb attacks (see *Uganda*) maintained contact with their detained relatives using the family-links service.

An association assisting Djiboutian families who had lost relatives as a result of the conflict with Eritrea in 2008 received sewing machines from the ICRC to distribute to families. These allowed families to generate an income again. Other relevant organizations were also encouraged by the ICRC to assist such families. During the year, discussions took place with the relevant authorities regarding the issue of missing persons in Djibouti, and of persons missing in relation to former military operations in Kenya's Mount Elgon district.

CIVILIANS		KENYA	UNITED REPUBLIC OF TANZANIA
Economic security, water and habitat			
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries	34,731	
	<i>of whom IDPs</i>	12,960	
Water and habitat activities	Beneficiaries	28,681	7,971

CIVILIANS		DJIBOUTI	KENYA*	UNITED REPUBLIC OF TANZANIA
Red Cross messages				
RCMs collected		850	16,052	3,849
	<i>including from UAMs/SCs*</i>			7
RCMs distributed		712	9,410	3,486
	<i>including from UAMs/SCs*</i>			3

* Kenya and other countries covered by the regional delegation

PEOPLE DEPRIVED OF THEIR FREEDOM

The ICRC's Nairobi delegation visited 923 detainees across the region, while pursuing efforts with the authorities to gain access to all detainees falling within the organization's mandate. In particular, dialogue was maintained with authorities with a view to receiving notification of any arrests made in relation to the fight against "terrorism".

Detainees receiving ICRC visits included POWs of Eritrean origin and other detainees held in Djibouti and ICTR detainees held in the UN detention centre in Arusha. To ensure the continued monitoring of the living conditions of ICTR-sentenced detainees transferred to other countries, the ICRC liaised with relevant delegations in Africa. During all visits, conducted according to standard ICRC procedures, delegates monitored detainees' treatment and living conditions and made confidential reports on the findings and, where necessary, recommendations to the authorities concerned.

The Djiboutian authorities and the ICRC discussed IHL provisions applicable to POWs of Eritrean origin held in Djibouti as a consequence of the 2008 armed conflict. Release and voluntary repatriation were among the issues considered. Meanwhile, Eritrea had yet to respond to repeated requests for any information the authorities had about Djiboutian soldiers reported by their government as missing in action after the 2008 hostilities (see *Eritrea*).

Detainees held in Djibouti and those held in the United Republic of Tanzania in connection with the ICTR used the family-links service to exchange news with relatives. To support Djibouti's new prison administration in its plan to improve staff training in prison health care and sanitation, the library of Gabode prison, the country's civilian detention facility, received books and reference materials from the ICRC. Female detainees undergoing vocational training received 20 sewing machines and scissors to improve their skills. More than 1,000 detainees held in detention facilities visited by the ICRC in Djibouti received, according to needs, monthly packs of hygiene materials and other essential items to contribute to their health and well-being.

In the Comoros, the ICRC visited a detention centre to which security detainees had been transferred in August 2009, and was notified of their recent release.

WOUNDED AND SICK

The quality of first aid and emergency treatment available to people in Kenya's violence-prone regions was strengthened after 21 health professionals, including National Society staff, enhanced their skills during a trauma-management course organized by the ICRC. Surgical supplies for medical facilities to treat weapon-wounded patients were not required.

AUTHORITIES

In order to enlist support for IHL and the work of the Movement among governments and other influential bodies, the ICRC maintained regular dialogue with local and national authorities, the diplomatic community, international organizations – including the UN – and the Intergovernmental Authority on Development, East Africa's regional development organization. In September, 23 senior representatives of international organizations and NGOs took part in the 15th IHL Course for Humanitarian Professionals and Policy-Makers, held in Naivasha, Kenya.

In 2010, the Comoros and Seychelles ratified the Convention on Cluster Munitions, which was also signed by Djibouti. The Comoros also passed a decree formally establishing a national IHL committee. Seychelles, meanwhile, signed and ratified the Rome Statute and ratified the Optional Protocol to the Convention on the Rights of the Child.

National authorities drew on ICRC technical expertise to assist them in implementing IHL instruments. During meetings with the ICRC and the National Societies in Djibouti and the United Republic of Tanzania, the authorities discussed ongoing preparation of national legislation on protection of the Movement's emblems. Members of the Kenyan IHL committee attended a session to discuss repression of international crimes and national legislation relating to the Rome Statute.

With ICRC support, senior officials from the region's governments attended various IHL events abroad, including the 10th regional IHL seminar, organized by the ICRC in South Africa (see *Pretoria*).

PEOPLE DEPRIVED OF THEIR FREEDOM	COMOROS	DJIBOUTI	ICTR
ICRC visits			
Detainees visited		905	18
Detainees visited and monitored individually		24	18
			<i>of whom women</i>
			1
Detainees newly registered		3	2
Number of visits carried out	1	8	1
Number of places of detention visited	1	2	1
Restoring family links			
RCMs collected		209	981
RCMs distributed		64	787
People to whom a detention attestation was issued			

ARMED FORCES AND OTHER BEARERS OF WEAPONS

During 2010, Kenya's new police commissioner invited the ICRC to brief trainee officers at the Kenya Police College on humanitarian principles and IHL. Meanwhile, more than 1,100 officers of Kenya's elite General Service Unit and 80 regular police officers participated in presentations covering the Safer Access approach, the ICRC's mandate and international human rights law. The Kenyan military had not yet responded to ICRC offers to support IHL training.

In a breakthrough, the Tanzanian inspector general of police authorized the ICRC to conduct IHL sessions for senior officers in preparation for the October general election. More than 280 officers from eight regions participated in ICRC-organized presentations on IHL, and a guide on police conduct during armed conflict and other situations of violence was translated into Kiswahili. Some 960 personnel from the Tanzania People's Defence Force learnt more about observing IHL in the context of peacekeeping operations.

In Djibouti, 37 key members of the *gendarmerie* and national police force deepened their understanding of human rights and humanitarian principles applicable to policing at two ICRC workshops, the second featuring contributions from the National Society.

At the request of the Kenya-based International Peace Support Training Centre (IPSTC), the ICRC provided technical advice and source materials for the development of IHL modules for its Rights in Peace Operations course. More than 154 personnel at the centre attended IHL sessions. Members of the planning unit of the Kenya-based East Africa Standby Brigade also received IHL advice from the ICRC, which briefed brigade personnel on IHL through the IPSTC.

CIVIL SOCIETY

Media coverage, and therefore public awareness, of humanitarian issues in Kenya and the United Republic of Tanzania were enhanced after senior editors and journalists from newspapers, radio and television attended briefings and seminars and received newsletters and factsheets on the activities of the National Societies and the ICRC.

With ICRC support, designed to encourage research into and discussion of IHL within academic circles, university students from 11 countries took part in the final of the 10th international moot court competition, held in Arusha in November. With the same aim, more than 40 university students from the region entered an annual essay competition, while a Kenyan team took part in the international Jean-Pictet IHL Competition. With ICRC input, lecturers at 8 Kenyan and Tanzanian universities conducted a review of IHL teaching, 18 lecturers participated in a round-table discussion on IHL in Nairobi in June, and 4 others attended IHL courses abroad.

Five third-level establishments in Kenya and the United Republic of Tanzania received books on IHL for their libraries, while school-children in Djibouti were set to gain a basic knowledge of IHL following the inclusion of pages on the subject in a new history and geography textbook distributed by the Education Ministry. Earlier in the year, ministry officials, together with their counterparts from Mauritius and Seychelles, were among those who took part in a regional seminar on the Exploring Humanitarian Law school programme.

Meanwhile, the ICRC's IHL documentation centre in Nairobi remained open to public use.

RED CROSS AND RED CRESCENT MOVEMENT

National Societies received ICRC funds, materials, training and logistical and technical back-up to help them, as appropriate, provide assistance to vulnerable communities, offer family-links services and promote IHL.

Kenyan Red Cross personnel received training to implement livelihood-support projects (see *Civilians*) and consolidate the tracing and RCM network. It also boosted emergency preparedness in advance of two events: Kenya's constitutional referendum in August, and at year-end (in liaison with the Uganda Red Cross Society), the January 2011 referendum in neighbouring Sudan. Kenya Red Cross personnel also participated in training sessions in the Safer Access approach.

Having taken charge, in October 2009, of the family-links service for refugees in camps in the west of the United Republic of Tanzania, the Tanzanian Red Cross continued to reinforce its network. Plans to implement new tracing guidelines, drawn up jointly by the National Society and the ICRC, were set in motion. The National Society also produced a video on its water supply project on Pemba Island (see *Civilians*), with the aim of raising funds.

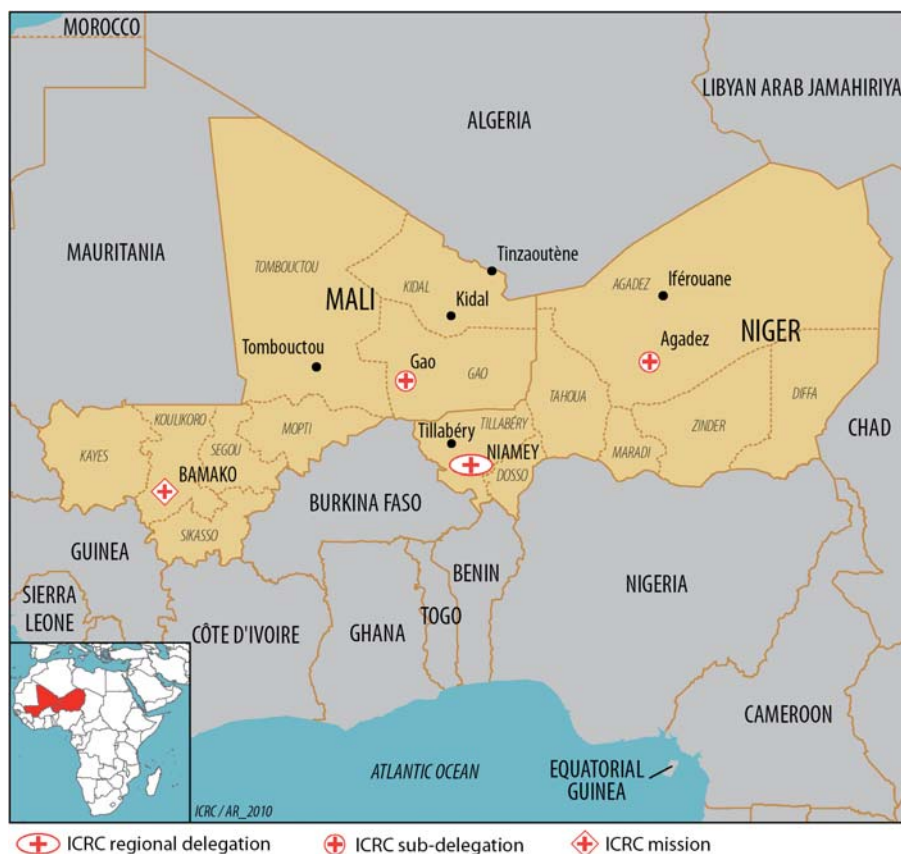
To enhance their emergency response skills, 40 personnel from the Red Crescent Society of Djibouti joined in disaster-simulation and first-aid exercises. A magazine and film explaining the National Society's activities were produced.

Political instability in the Comoros, together with internal problems at the Comoros Red Crescent, delayed the implementation of a joint action plan to develop the National Society's tracing activities.

To better coordinate activities in the region among Movement partners, National Societies participated in regional and international Movement meetings, with a focus on governance and management practice.

NIAMEY (regional)

COVERING: Mali, Niger



EXPENDITURE (IN KCHF)

Protection	1,500
Assistance	25,475
Prevention	2,434
Cooperation with National Societies	1,663
General	-

► **31,073**

of which: Overheads 1,896

IMPLEMENTATION RATE

Expenditure/yearly budget	86%
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PERSONNEL

Expatriates	24
National staff (daily workers not included)	107

KEY POINTS

In 2010, the ICRC:

- with the National Societies, provided food to 305,126 people affected by violence/adverse environmental conditions in northern Mali and in Niger, combined with livelihood support for 99,425 pastoralists and 76,095 crop farmers
- enabled 4 primary health care centres in Niger's Agadez region to resume services by providing them with medical supplies and equipment, while facilitating vaccination campaigns there for children and women of childbearing age
- enhanced care of the region's weapon-wounded, particularly by providing 18 mine-victims with artificial limbs in partnership with a local NGO in Niger
- with the Mali Red Cross, provided food, medical attention, transport and family-links support to over 5,100 vulnerable migrants stranded on the Mali-Algeria border, transporting the most vulnerable among them to the nearest town
- in Niger, carried out urgent renovations to water and sanitation infrastructure in prisons, backed up by maintenance training for prison directors
- with the National Societies, increased support for humanitarian principles and the Movement among the Malian authorities, Niger's transitional military administration, military and security personnel and civil society

The ICRC has been continually present in the region since 1982, opening its Niamey regional delegation in 2010 in response to the consequences of fighting between government forces and various armed groups in northern Mali and Niger. It seeks to protect and assist people affected by violence and adverse climatic conditions, and visits detainees of ICRC concern, providing them with material aid where necessary. It also focuses on promoting IHL among the armed forces and other bearers of weapons and on encouraging its implementation by the authorities throughout the region. It works closely with the region's National Societies and helps them develop their operational capacities.

CONTEXT

During 2010, the economic, social and political environment of the Sahel region was dominated by a food-security crisis. Exceptionally erratic rainfall in 2009 had had a devastating impact on stockbreeding and crop production in northern Mali and in Niger, exacerbating conditions for communities already struggling with insecurity and poverty. Livestock grew weak and lost market value, food stocks dwindled and market prices soared, leaving millions of people unable to support themselves. Population movements were also reported. With international support, the authorities mounted a coordinated response to the crisis. These efforts, combined with higher-than-average rainfall in 2010, helped stabilize the situation towards year-end, although localized flooding subsequently contributed to difficult living conditions for some.

Meanwhile, fighting ceased between government forces and armed Touareg groups in northern Niger, enabling some displaced people to return home. Sporadic intercommunal violence persisted, however, fuelled partly by competition for scarce

resources. Banditry and looting were commonly reported and mines remained present in some areas. A number of kidnappings took place in eastern Mali and northern Niger. A network of armed Islamist groups claiming to belong to Al-Qaeda in the Islamic Maghreb, reportedly based in northern Mali and active regionwide, claimed responsibility. Associated security operations and widespread insecurity prompted fresh displacements and hindered humanitarian access and basic services. Remote frontier regions served as a thoroughfare for migrants.

Following the arrest of Niger's president and several ministers on 18 February on the grounds of unconstitutional conduct, the military junta responsible established a transitional government, pledging to restore democratic rule and to address the food-security crisis. Preparations progressed for elections aimed at returning the country to civilian leadership in 2011. The former president remained under arrest at year-end.

In Mali, political circles began to position themselves ahead of elections in 2012.

MAIN FIGURES AND INDICATORS

PROTECTION

CIVILIANS (residents, IDPs, returnees, etc.)

Red Cross messages	Total	UAMs/SCs*	
RCMs collected	20		
RCMs distributed	17		
Phone calls facilitated between family members	732		

PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)¹

ICRC visits	Total	Women	Minors
Detainees visited	3,560		
Detainees visited and monitored individually	36	1	
Detainees newly registered	17	1	
Number of visits carried out	18		
Number of places of detention visited	13		
Restoring family links	Total		
RCMs collected	24		
RCMs distributed	9		
Phone calls made to families to inform them of the whereabouts of a detained relative	64		

* Unaccompanied minors/separated children

ASSISTANCE

CIVILIANS (residents, IDPs, returnees, etc.)¹

Economic security, water and habitat		Total	Women	Children
Food	Beneficiaries	305,126	30%	40%
	<i>of whom IDPs</i>	73,939		
Essential household items	Beneficiaries	22,115	30%	40%
	<i>of whom IDPs</i>	14,413		
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries	176,453	33%	16%
	<i>of whom IDPs</i>	12,569		
Water and habitat activities	Beneficiaries	618	36%	41%
Health				
Health centres supported	Structures	10		
Average catchment population		34,906		
Consultations	Patients	17,646		
	<i>of which curative</i>		6,300	10,774
	<i>of which ante/post-natal</i>		497	
Immunizations	Doses	19,124		
	<i>of which for children aged five or under</i>	18,699		
	<i>of which for women of childbearing age</i>	425		
Referrals to a second level of care	Patients	147		
Health education	Sessions	243		

1. Mali and Niger

MAIN FIGURES AND INDICATORS				
ASSISTANCE				
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses) ¹				
Economic security, water and habitat		Total	Women	Children
Essential household items	Beneficiaries	1,098		
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries	946		
Water and habitat activities	Beneficiaries	906		
WOUNDED AND SICK ²				
Hospitals				
Hospitals supported	Structures	2		
Physical rehabilitation				
Centres supported	Structures	1		
Patients receiving services	Patients	18	3	
New patients fitted with prostheses	Patients	18	3	
Prostheses delivered	Units	18	3	
<i>of which for victims of mines or explosive remnants of war</i>		Units	13	

1. Mali and Niger

2. Niger only

ICRC ACTION AND RESULTS

With the opening of its delegation in Niamey covering Mali and Niger, the ICRC increased its operations in these countries, focusing on assisting violence-affected people in northern regions and on developing its contacts to better understand the challenges faced by local populations. It put in place working and monitoring procedures to carry out such activities via remote management, with many field activities conducted by ICRC national staff and National Society personnel. Such cooperation helped overcome logistical and staffing challenges caused by regional security risks. Security constraints nevertheless delayed the implementation of some initiatives.

As planned, the ICRC supported victims of violence in northern parts of Mali and Niger. It provided food, shelter materials and household necessities to people displaced by intercommunal violence and, through agricultural inputs, helped farmers affected by past fighting to rebuild their livelihoods. In April, as the scale of the food-security threat emerged, the ICRC increased its budget and appealed for additional funding. It reinforced the delegation's staffing and, in cooperation with the National Societies, significantly expanded its assistance activities. It continued to concentrate its efforts on violence-prone regions where few other humanitarian actors were present. The ICRC's response, combining food relief and support to stockbreeders and crop farmers, aimed to cover immediate needs while supporting long-term recovery. The ICRC adapted its operations as the situation evolved to target those most in need. It developed partnerships with local structures to facilitate large-scale distributions and the establishment of sustainable livelihood-support mechanisms.

The ICRC strengthened support to health structures in northern Niger, donating medical supplies, renovating infrastructure and facilitating vaccination campaigns and health-worker training. It began developing similar initiatives in Mali. To improve care of the weapon-wounded, it provided hospitals with surgical materials, sponsored war-surgery training and, with an NGO in Niger, launched an initiative to support the physical rehabilitation of people disabled by mines/explosive remnants of war (ERW).

The ICRC developed dialogue with the Malian government and Niger's transitional leadership, deepening their understanding of its neutral, impartial and independent humanitarian work. It continued to support their efforts to implement IHL, while working with them to respond to the food-security crisis in coordination with other humanitarian actors.

Given regional insecurity, the ICRC conducted briefings on IHL/ international human rights law for military and security personnel, including peacekeepers, in both countries, while providing training, advice and encouragement to advance the integration of IHL into forces' training, doctrine and operations. In parallel, delegates and National Society personnel expanded contacts among civil society, including religious and community leaders, building support for the Movement to facilitate assistance operations.

In both countries, the ICRC visited detainees, regaining systematic access to detainees in Mali following discussion with the authorities. In Niger, it supported the authorities in reducing inmates' health risks through improvements to water supply and sanitation.

By partnering the National Societies in the field and providing them with financial, material and training support, the ICRC strengthened their operational capacities. In particular, it reinforced their first-aid and communication capacities and supported their activities in favour of vulnerable migrants and children.

CIVILIANS

Given regional insecurity, the ICRC reminded relevant authorities and weapon bearers of their responsibilities to respect civilians at all times.

Such insecurity, combined with environmental challenges, meant that many people in parts of northern Mali and Niger struggled to support themselves even before the food-security crisis set in. They received assistance from the National Societies/ICRC to alleviate precarious conditions.

Following intercommunal violence in Niger's Tillabéry region, 10,780 IDPs and residents of host communities (2,156 households) received three months' food to tide them over until the next harvest; 1,780 IDPs were given shelter materials. In northern Mali, 2,000 people (400 households) uprooted during the Touareg confrontation and market sellers whose goods had been destroyed by fire received food and/or household essentials. In Gao and Tinzaoutène, market gardeners benefited from ICRC agricultural inputs and repairs to wells to improve irrigation, boosting productivity.

Crisis-hit communities receive vital relief and livelihood support

With the National Societies, the ICRC stepped up activities to meet the needs of people affected by the food-security crisis. It maintained its focus on violence-prone regions: Agadez and Tillabéry in Niger, and Gao, Kidal and Tombouctou in Mali. Together they initiated a flexible response combining food relief with support to stockbreeders and crop farmers, aimed at covering victims' immediate needs while providing them with the means to recover their self-sufficiency and economic security. As the crisis unfolded, the ICRC modified its assistance according to emerging needs.

Immediate relief provided

Between June and August, 148,110 people (30,792 households) received three months' food to cover the lean period between harvests. The 2010 harvest proving broadly satisfactory, the ICRC then discontinued blanket food distributions to avoid any negative impact on market prices. It directed further relief to communities beset by new food-security threats.

In Niger, 11,760 farmers (2,352 households) in Tillabéry whose harvests failed owing to crop infestation received an additional one-month food ration to supplement their yield, while in Agadez 89,320 flood victims (17,864 households) received half-month food rations.

In northern Mali, 17,570 people (3,514 households) displaced by fresh intercommunal violence, and 32,230 IDPs (6,446 households)

living in Tombouctou having fled security operations in the north-west, received three months' food to ease strain on local resources, alongside household items as needed.

Pastoralists recover their livelihoods

With their herds decimated by the crisis, pastoralists reliant on stockbreeding activities were invited to sell their weakest animals at pre-crisis prices to the ICRC, which arranged for them to be slaughtered and for any edible meat to be cured. Accordingly, 59,940 herders (11,988 households) took advantage of this initiative. This stabilized market prices and left pastoralists with a healthy herd and a cash injection with which to buy essentials. Schools and health facilities received the cured meat, helping feed people under their care.

Regional livestock management authorities in Niger and the ICRC embarked on joint efforts to help pastoralists keep their animals healthy by restocking local fodder banks and launching an animal vaccination and treatment campaign. With ICRC guidance, logistical and financial support and veterinary equipment, the campaign began in December. By year-end, 39,485 stockbreeders (7,897 households) had benefited. Preparations began to launch a similar campaign in Mali.

Farming communities' economic security increased

To support crisis-affected farmers, including IDPs, refugees and returnees, regional agricultural authorities in Gao, Agadez and Tillabéry worked with the ICRC to mobilize large-scale seed distributions through local cereal banks. In total, 76,065 farmers (15,214 households) acquired tools and staple seed and/or cash-crop seed, helping them restart their activities while diversifying and increasing their sources of income. Owing to poor availability on the market, seeds were distributed later than foreseen, so planned training initiatives could not be organized by year-end.

Violence-affected communities regain access to health care

In parts of Niger's Agadez region where security had improved, four health centres resumed services thanks to ICRC medical supplies, equipment and renovations to water and sanitation

CIVILIANS			MALI	NIGER
Economic security, water and habitat				
Food	Beneficiaries		78,341	226,785
	<i>of whom IDPs</i>	Beneficiaries	51,261	22,678
Essential household items	Beneficiaries		20,335	1,780
	<i>of whom IDPs</i>	Beneficiaries	14,235	178
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries		84,613	91,840
	<i>of whom IDPs</i>	Beneficiaries	3,385	9,184
Water and habitat activities	Beneficiaries		48	570
Health				
Health centres supported	Structures		6	4
Average catchment population			14,018	20,888
Consultations	Patients		3,387	14,259
	<i>of which curative</i>	Patients	3,302	312
	<i>of which ante/post-natal</i>	Patients	185	13,947
Immunizations	Doses		14,911	4,213
	<i>of which for children aged five or under</i>	Doses	14,767	3,932
	<i>of which for women of childbearing age</i>	Doses	144	281
Referrals to a second level of care	Patients		22	125
Health education	Sessions		77	166

infrastructure. To reduce health risks during pregnancy and child-birth, 40 traditional birth attendants upgraded their skills through training from district health professionals, financed by the ICRC. With ICRC logistical and supervisory support, the health authorities relaunched vital vaccination campaigns that had stalled in recent years, enabling the immunization against measles of thousands of vulnerable women and children (4,213 doses) and thus reducing the threat of epidemics.

In northern Mali, where insecurity continued to impede service delivery, district health authorities and the ICRC developed similar initiatives in support of six health centres.

Authorities supported in maintaining access to clean water

Owing to security constraints, the ICRC delayed most planned water activities, focusing instead on responding to the food-security crisis. Small-scale initiatives took place, however, benefiting market gardeners in Mali (see above) and crisis-affected communities in Niger. In Agadez, where widely scattered animal corpses threatened to contaminate water sources, the water authorities received chlorine from the ICRC to purify the water supply, as well as laboratory equipment with which to monitor its quality.

Vulnerable migrants and children receive vital relief and family-links services

As few family members sought Movement help in contacting relatives from whom they had become separated, vulnerable migrants and street children became the focus of ICRC-supported National Society family-links initiatives to help ensure their well-being.

After being turned away from Algeria, 5,111 illegal migrants stranded on the Mali-Algeria border received food, accommodation and medical attention from the Mali Red Cross, which transported the most vulnerable to a safe location to recuperate and arrange their next move. In Niger, similarly vulnerable migrants obtained travel documents, transport and/or financial support from the ICRC to facilitate their onward journey. Migrants in both countries contacted relatives using telephone/RCM services provided by the National Societies with ICRC financial support.

In a Mali Red Cross pilot initiative to support street children in Mopti town, 23 were reunited with relatives, while 61 re-established family contact by telephone/RCM.

Such activities contributed to a greater understanding of migrants’ needs among National Society/ICRC personnel, who shared their experiences at a regional meeting (see *Dakar*).

PEOPLE DEPRIVED OF THEIR FREEDOM

Detainees in Mali and Niger, including members of the overthrown government and other security detainees arrested in Niamey on 18 February, received visits from the ICRC, according to its standard procedures, to monitor their treatment and living conditions. Those serving sentences in Mali under the International Criminal Tribunal for Rwanda were visited in liaison with the ICRC’s Nairobi delegation (see *Nairobi*). Following such visits, the delegates shared feedback with the authorities confidentially.

In October, after discussing with delegates the benefits of ICRC activities in favour of detainees, the Malian authorities granted the ICRC systematic access to detainees under their jurisdiction, including those held for reasons of State security.

During ICRC visits, detainees were able to exchange news with their families using RCMs. Those families that lacked the resources to visit detained relatives had their travel paid for by the ICRC.

Planned visits to detainees held by armed groups did not take place owing to their release in late 2009.

Detainees’ environmental health improved

In light of health risks caused by dilapidated prison infrastructure and overcrowding, the ICRC stepped in to support the authorities in improving detainees’ living conditions, primarily in Niger.

In total, 832 detainees in 7 of Niger’s prisons benefited from ICRC improvements to water, sanitation and kitchen facilities. Although ICRC staffing constraints delayed some planned activities, including the donation of medical equipment to prison infirmaries, inmates in 38 prisons received hygiene items, further contributing to their health and well-being, as well as seed with which to grow vegetables.

Meanwhile, Niger’s prison administration strengthened cooperation with delegates aimed at ensuring that ICRC support yielded

PEOPLE DEPRIVED OF THEIR FREEDOM	MALI	NIGER
ICRC visits		
Detainees visited	2,144	1,416
Detainees visited and monitored individually	14	22
of whom women		1
Detainees newly registered		17
of whom women		1
Number of visits carried out	6	12
Number of places of detention visited	6	7
Restoring family links		
RCMs collected	19	5
RCMs distributed	5	4
Phone calls made to families to inform them of the whereabouts of a detained relative	64	

long-term benefits. At a seminar organized by the Justice Ministry, the security forces and the ICRC, 37 prison directors examined the importance of properly maintaining water and sanitation infrastructure. To support them in implementing ensuing recommendations, prison managers obtained tools, wheelbarrows and dustbins from the ICRC to facilitate routine repairs and solid-waste disposal.

In Mali, inmates in Gao enjoyed better comfort outdoors after the ICRC constructed a sun-shelter in the prison courtyard, and received hygiene items to reduce health risks. Planned ICRC renovations in Bamako's main prison were put aside after the authorities announced their intention to construct a new facility in its place.

WOUNDED AND SICK

The region's hospitals benefited from ICRC support to help ensure the care of weapon-wounded patients.

Victims of violence, including military personnel wounded on 18 February in Niamey, obtained adequate treatment after affected hospitals had surgical materials delivered to them from ICRC emergency stocks.

Five surgeons from Mali and Niger learnt techniques to treat the weapon-wounded at an ICRC war-surgery workshop in Senegal (see *Dakar*), thereby enhancing regional surgical capacities.

To support victims of mines/ERW in rebuilding their lives, the ICRC entered into partnership with a Niger-based NGO experienced in supporting physical rehabilitation. Subsequently, 18 amputees were fitted with prostheses and trained to use and maintain them, with the ICRC arranging and paying for their transport, accommodation and treatment.

AUTHORITIES

Following initial contacts, Niger's transitional leadership engaged in constructive discussion with delegates, deepening their understanding of IHL and ICRC operations. High-level meetings with the Malian authorities, including the president, strengthened their cooperation with the ICRC. Both administrations demonstrated support for the ICRC's neutral, impartial and independent humanitarian action, facilitating its work in detention (see *People deprived of their freedom*).

With the onset of the food crisis, the two governments invited the ICRC to participate in efforts to mobilize an effective response,

in coordination with regional bodies, the diplomatic community and other humanitarian actors. Together they established where to focus their respective assistance efforts to avoid duplication. Local authorities in violence-prone northern regions, where the ICRC undertook to concentrate its assistance (see *Civilians*), learnt about IHL and the Movement at National Society/ICRC briefings. Such cooperation enhanced mutual understanding and facilitated the smooth running of Movement operations.

Both countries made progress in accelerating national IHL implementation, welcoming ICRC expertise and sponsorship to help them do so. As such, government representatives explored ways forward at an Economic Community of West African States/ICRC seminar (see *Nigeria*). After reviewing pending treaties with delegates, Mali ratified the Convention on Cluster Munitions. Niger established a unit dedicated to promoting IHL and expressed interest in working with the ICRC to incorporate provisions on the repression of war crimes into the penal code and military justice system.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

Several hundred armed and security personnel, including police officers, raised their awareness of IHL, international human rights law, the Movement and its emblems at ICRC briefings and seminars in volatile parts of Mali and Niger. Such events, alongside briefings for members of Touareg groups associated with past fighting, contributed to mutual understanding and safe access by Movement personnel to crisis-affected people.

Besides learning about IHL at ICRC presentations, trainees at Bamako's regional peacekeeping school practised applying its principles during simulation exercises devised with ICRC input.

Both countries' military and security commands maintained dialogue with the ICRC, drawing on its IHL expertise to encourage systematic respect for humanitarian principles among their forces. Mali's chief of defence staff issued a directive to incorporate IHL into military training and operations. Niger's IHL liaison officer requested ICRC guidance in establishing an IHL committee and revising its IHL manual.

Military and police instructors in Niger acquired the skills to teach IHL and international human rights law respectively at train-the-trainer courses organized by Niger's forces with ICRC input. Some officers were subsequently deployed to pass on their knowledge to peers in the field. With ICRC sponsorship, officers from both countries enhanced their IHL expertise at courses in Switzerland and Italy.

PEOPLE DEPRIVED OF THEIR FREEDOM		MALI	NIGER
Economic security, water and habitat			
Essential household items	Beneficiaries	152	946
Agricultural, veterinary and other micro-economic initiatives	Beneficiaries		946
Water and habitat activities	Beneficiaries	74	832

CIVIL SOCIETY

In preparation for National Society/ICRC assistance activities (see *Civilians*), affected communities attended presentations to familiarize them with the Movement, its emblems and its procedures for relief distributions and other support. Journalists, including local radio representatives, participated in these briefings and received ICRC press releases, enabling them to report widely and accurately on Movement initiatives, even among remote communities. Such efforts contributed to the smooth running of National Society/ICRC operations for victims of the crisis, despite many having had little prior contact with international organizations.

Through discussion sessions and bilateral contacts, NGOs and traditional and religious leaders, including Mali's High Islamic Council, exchanged views on humanitarian and security concerns and explored parallels between IHL and Islamic law. These helped build mutual understanding and expanded the ICRC's network of contacts, including in border regions of northern Mali and southern Niger where armed groups were reportedly active.

Academic circles, including religious institutions, cooperated with the National Societies and the ICRC to stimulate youth interest in IHL and promote its relevance. Rather than participating in competitions, students and lecturers attended Movement presentations and training respectively, prompting two institutions to establish on-site Red Cross committees. After learning about customary IHL and the repression of IHL violations at an ICRC briefing in Niger, 25 trainee magistrates requested more substantial ICRC training to enhance their skills.

RED CROSS AND RED CRESCENT MOVEMENT

In accordance with cooperation agreements, the region's National Societies benefited from ICRC training, logistical, material and financial support to improve their emergency response, communication, family-links and management capacities, including through internal restructuring. Close coordination with the International Federation and other Movement partners enhanced cross-border cooperation.

Both National Societies were better equipped to respond to crises after the ICRC rehabilitated their offices in Diffa (Niger) and in Bamako and Gao (Mali). They also expanded their first-aid networks with ICRC training and equipment. Sixty instructors in each country enhanced their teaching technique at ICRC courses, enabling them to train hundreds of first-aiders in violence-prone areas.

Family-links coordinators in Mali and Niger benefited from ICRC refresher training, communications equipment and financial support, boosting their capacities to assist vulnerable migrants and children (see *Civilians*).

Aided by delegates, both National Societies worked to promote humanitarian principles, the Movement and its emblems among opinion leaders (see *Authorities* and *Civil society*) and the wider public. With ICRC backing, the Mali Red Cross established a website, produced a documentary highlighting its activities and conducted an internal communication workshop. Similarly, the Red Cross Society of Niger revised its publications, applying techniques acquired during professional communication training. Through well-publicized activities, such as school competitions, first-aid demonstrations and clean-up campaigns in flood-stricken districts, both organizations boosted their visibility and attracted new volunteers.

National Society personnel contributed significantly to ICRC assistance operations following the food-security crisis. On the strength of such field experience and ICRC needs-assessment training, both National Societies mobilized effective relief for flood victims, with ICRC support (see *Civilians*).

PRETORIA (regional)

COVERING: Angola, Lesotho, Madagascar, Mozambique, South Africa, Swaziland



EXPENDITURE (IN KCHF)

Protection	943
Assistance	46
Prevention	1,810
Cooperation with National Societies	1,808
General	-

► **4,607**

of which: Overheads 281

IMPLEMENTATION RATE

Expenditure/yearly budget	107%
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PERSONNEL

Expatriates	10
National staff (daily workers not included)	37

KEY POINTS

In 2010, the ICRC:

- organized 2 major events for government representatives from across Africa to exchange expertise on IHL implementation
- reinforced the National Societies' capacities to respond to needs created by political protests and social demonstrations
- continued visiting inmates in Angola, Lesotho and Madagascar, while working with the detaining authorities in Madagascar to improve detainees' living conditions
- handed over historic records of ICRC visits to detainees in South Africa to the country's Robben Island Museum

The ICRC opened a regional delegation in Pretoria in 1978. It keeps a close eye on the domestic situation in the countries covered and helps refugees and asylum seekers restore family links severed by armed conflict and other situations of violence. It promotes ratification of IHL treaties and their national implementation and encourages the incorporation of IHL into military and police training and into secondary school and university curricula. The ICRC supports the region's National Societies, in cooperation with the International Federation. It also visits detainees in Angola, Lesotho and Madagascar.

CONTEXT

South Africa maintained its political and economic influence within the region, engaging in diplomacy, providing troops for peacekeeping operations abroad and hosting the 2010 football World Cup. On the domestic front, protests and strikes over job losses, income inequality and poor delivery of public services sometimes turned violent, with foreigners working in the country occasionally coming under attack during the unrest.

Madagascar's political stalemate had not been resolved, hampering the economy and worsening the country's already chronic poverty. In November, a group of military officers attempted a coup while citizens went to the polls to approve a new constitution. The officers turned themselves in a few days later. Presidential elections were scheduled to take place in 2011.

Riots broke out in Mozambique's capital in September after a jump in the price of food, water and electricity. Following an emergency

cabinet meeting, the government announced plans to reverse and stabilize the rising prices.

In Angola, an attack on the Togolese soccer team during the Africa Cup of Nations in January, claimed by a branch of the Front for the Liberation of the Enclave of Cabinda, illustrated that the situation in the oil-rich enclave remained volatile.

Swaziland's fragile political situation was tested during rallies organized by opposition movements calling for multi-party democracy. Demonstrators reportedly continued to be arrested but quickly released.

In Lesotho, in view of the disputed 2007 elections, all parties agreed to postpone local elections scheduled for 2010 until electoral reforms were adopted.

Following the 2009 global financial crisis, the economy continued to be the main preoccupation in the region.

MAIN FIGURES AND INDICATORS			
PROTECTION			
CIVILIANS (residents, IDPs, returnees, etc.)			
Red Cross messages	Total	UAMs/SCs*	
RCMs collected	427		
RCMs distributed	436		
Phone calls facilitated between family members	3		
Tracing requests, including cases of missing persons	Total	Women	Minors
People for whom a tracing request was newly registered	5	1	
Tracing cases still being handled at 31 December 2010 (people)	88	14	36
Documents			
People to whom travel documents were issued	179		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses) ¹			
ICRC visits	Total	Women	Minors
Detainees visited	595		
Detainees visited and monitored individually	102	3	
Detainees newly registered	79	3	
Number of visits carried out	36		
Number of places of detention visited	13		
Restoring family links	Total		
People to whom a detention attestation was issued	1		

* Unaccompanied minors/separated children

1. Angola, Lesotho and Madagascar

ASSISTANCE				
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses) ²				
Economic security, water and habitat		Total	Women	Children
Food	Beneficiaries	494		
Water and habitat activities	Beneficiaries	1,399		

2. Madagascar only

ICRC ACTION AND RESULTS

The Pretoria regional delegation focused on promoting humanitarian principles and reinforcing the ICRC's standing as a reference on IHL for political and military authorities and other influential actors.

Thus, the ICRC strengthened contacts with national and international political authorities, regularly updating them on the Movement's activities and humanitarian concerns during workshops and bilateral meetings. During two major events in Pretoria, government representatives discussed ratifying IHL treaties, notably the Convention on Cluster Munitions and the African Union (AU) Convention on IDPs. Meanwhile, the region's IHL committees drew on ICRC technical advice to implement IHL treaties domestically, for example during a meeting in Geneva, Switzerland on the need for legislation to repress war crimes.

To increase understanding of and support for IHL and the Movement among the region's armed and security forces, delegates conducted presentations and briefings for personnel from throughout the ranks. Among those attending such presentations were South African National Defence Force (SANDF) troops and students attending a Southern African Development Community (SADC) pilot military training exercise. Officers were in a better position to integrate IHL norms into military doctrine, training and operations following a one-week workshop.

Similarly, the ICRC reached out to a wide range of civil society actors in the region, including journalists, members of think-tanks and academics. The delegation continued to support IHL teaching in the region's universities, including by sponsoring students to participate in competitions abroad and by organizing a course for students and lecturers.

Delegates visited people detained for security reasons in Angola's Cabinda province, in Lesotho and in Madagascar, monitored their treatment and living conditions and provided the authorities with confidential feedback and, where relevant, recommendations. In Madagascar, the delegation continued to support the authorities in their efforts to bring detention conditions in line with internationally recognized standards, for example by conducting a seminar for prison administration officials and NGOs on ways to improve prison hygiene. Meanwhile, detainees in three Malagasy detention centres benefited from rehabilitated water and sanitation facilities. In Swaziland, the delegation intensified its dialogue with the authorities with a view to gaining access to detainees in the country.

The ICRC continued to provide material, financial and technical support to help the region's National Societies respond effectively to emergencies and reconnect refugees and asylum seekers with their families. Training in first aid and the Safer Access approach proved essential for volunteers regionwide to assist people injured during protests and demonstrations. The delegation also helped the National Societies continue developing their family-links services, notably during a five-day workshop in Malawi.

The ICRC and other Movement partners worked to strengthen their coordination mechanisms, notably with the International Federation's new Africa headquarters in Johannesburg.

PEOPLE DEPRIVED OF THEIR FREEDOM

Detainees held in places of detention in Angola, Lesotho and Madagascar received visits, conducted in accordance with the ICRC's standard procedures, enabling delegates to monitor their treatment and living conditions. Those monitored individually were mainly security detainees, including people detained in Angola's Cabinda province in connection with the attack on the Togolese football team and officers arrested in Madagascar following the attempted coup (see *Context*). After the visits, the authorities were given confidential oral and written feedback on the delegates' findings, along with recommendations, where relevant. In Swaziland, based on an offer of services made to the detaining authorities in 2009, the ICRC pursued efforts to conclude an agreement granting the delegation access to detainees in the country.

In Madagascar, the authorities and the ICRC continued to work to improve detainees' living conditions, enhance respect for their judicial guarantees and address overcrowding in prisons. Some 490 detainees in two prisons with high malnutrition rates supplemented their diets with high-energy biscuits. Inmates in three detention facilities faced fewer health risks thanks to ongoing projects to rehabilitate water and sanitation infrastructure. Meanwhile, prison administration officials and NGO staff explored practical measures to improve general prison hygiene at an ICRC seminar. In agreement with the authorities, international donors were kept informed about the situation in Malagasy prisons. Other actors providing prison services in the country and the delegation also coordinated their activities to avoid duplication.

In South Africa, the Robben Island Museum received the first set of detention reports based on ICRC visits carried out in 1963–64. Twenty former detainees, who had since joined political parties, attended the handover ceremony, generating discussions on past and contemporary issues surrounding detention.

Families in South Africa stayed in contact with people held in the US internment facility at Guantanamo Bay Naval Station in Cuba through regular videoconference calls (see *Washington*). Others exchanged news with relatives detained abroad by means of RCMs after being informed of their detention by an ICRC phone call.

AUTHORITIES

In Pretoria, members of the diplomatic community, government officials and representatives of regional/international organizations, such as the AU, SADC and the UN, kept abreast of the Movement's humanitarian concerns and activities during briefings and workshops. For example, members of the Pan-African Parliament's Gender Committee learnt about the ICRC's work addressing the specific dangers faced by women in armed conflict.

The South African government hosted the 10th regional IHL seminar, during which officials from 15 African countries, including Lesotho, Madagascar, Mozambique and Swaziland, discussed the ratification and implementation of IHL treaties, such as the AU Convention on IDPs. Additionally, representatives of 30 African States, including all those covered by the Pretoria delegation, exchanged expertise at the Africa Regional Conference on the Universalization and Implementation of the Convention on Cluster Munitions.

Such events contributed to encouraging results. With technical support, Lesotho ratified the Convention on Cluster Munitions and made the optional declaration under Article 90 of 1977 Additional Protocol I recognizing the competence of the International Fact-Finding Commission. Mozambique signed the AU Convention on IDPs, and 50 Mozambican officials discussed its ratification at a workshop co-hosted with the Foreign Affairs Ministry.

In parallel, the region's IHL committees received ICRC technical advice and materials to implement IHL treaties domestically. South Africa's IHL committee completed a draft bill implementing provisions of the 1949 Geneva Conventions, which was submitted to parliament. Representatives of the IHL committees in Lesotho and South Africa examined the need for effective national legislation repressing war crimes during the third Universal Meeting of National IHL Committees held in Geneva, Switzerland (see *International Law and Cooperation*). Madagascar's IHL committee, which was unable to meet in 2009 owing to the political crisis, regrouped and set priorities for the months ahead.

The African Peer Review Mechanism received ICRC input on including references to IHL in a questionnaire designed to help governments self-assess their compliance with African and international treaties.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

Regionwide, members of the armed and security forces participated in briefings and presentations aiming to enhance their understanding of humanitarian principles and garner their support for the Movement's neutral, impartial and independent humanitarian action. Among those attending such presentations were students and instructors attending a SADC pilot military training exercise, SANDF troops destined for peacekeeping operations abroad, and Malagasy military cadets. In Angola, the delegation was invited as an observer during the "Kwanza"

military training exercise for armed and police forces of the Economic Community of Central African States. Plans to foster dialogue on IHL with private military and security companies based in South Africa were postponed.

The region's armed forces received technical support to integrate IHL norms into military doctrine, training and operations, for example during a one-week workshop at the SADC Regional Peacekeeping Training Centre in Zimbabwe (see *Harare*). In Madagascar, the new president of the Defence Ministry's IHL committee and the ICRC discussed the next steps towards integrating IHL into military training. At year-end, SANDF authorities were staffing and training two new bodies charged with IHL integration.

Police officers from throughout the ranks in Lesotho, Madagascar and Swaziland were briefed on basic humanitarian principles during two training sessions.

CIVIL SOCIETY

Press, radio and television networks enhanced their coverage of humanitarian issues and Movement activities in Africa with the help of ICRC interviews and press releases. Journalists and staff of influential think-tanks and NGOs exchanged expertise with the ICRC during various events, including a media networking forum and a conference on the Convention on Cluster Munitions 48 hours before its entry into force.

Law faculties in 14 universities in Lesotho, South Africa and Swaziland continued teaching IHL, aided by the ICRC. With financial support, the 2010 edition of the *African Yearbook on International Humanitarian Law* was published, and students tested their skills during two IHL competitions abroad. University lecturers and postgraduate students from 17 countries sharpened their skills during the 9th All-Africa Course on IHL, and health professionals familiarized themselves with the protection afforded to civilians and medical staff under IHL during the H.E.L.P. (Health Emergencies in Large Populations) course. Both events were organized with the University of Pretoria. Given the abundance of IHL reference materials in South Africa's academic institutions, the delegation's documentation centre was no longer needed, and closed.

At a regional seminar in Pretoria, education representatives explored ways to teach the Exploring Humanitarian Law programme in secondary schools.

PEOPLE DEPRIVED OF THEIR FREEDOM	ANGOLA	LESOTHO	MADAGASCAR
ICRC visits			
Detainees visited	32	3	560
Detainees visited and monitored individually	27	3	72
of whom women			3
Detainees newly registered	9		70
of whom women			3
Number of visits carried out	3	1	32
Number of places of detention visited	1	1	11
Restoring family links			
People to whom a detention attestation was issued		1	

RED CROSS AND RED CRESCENT MOVEMENT

With ICRC training and material, financial and technical support, the region's National Societies continued to develop their capacities to respond to emergencies, restore family links and promote IHL and the Movement.

Training in first aid and the Safer Access approach proved vital for personnel regionwide to assist people injured during political protests and social demonstrations (see *Context*). In South Africa, volunteers deployed to key medical facilities during public service strikes ensured that people received treatment. The National Society also developed a new emergency preparedness strategy and, in coordination with the Movement, assisted those affected by urban violence in settlements. Several of the region's National Societies developed a new project, dubbed "Ubuntu", to address discrimination against foreigners and assist those affected by it.

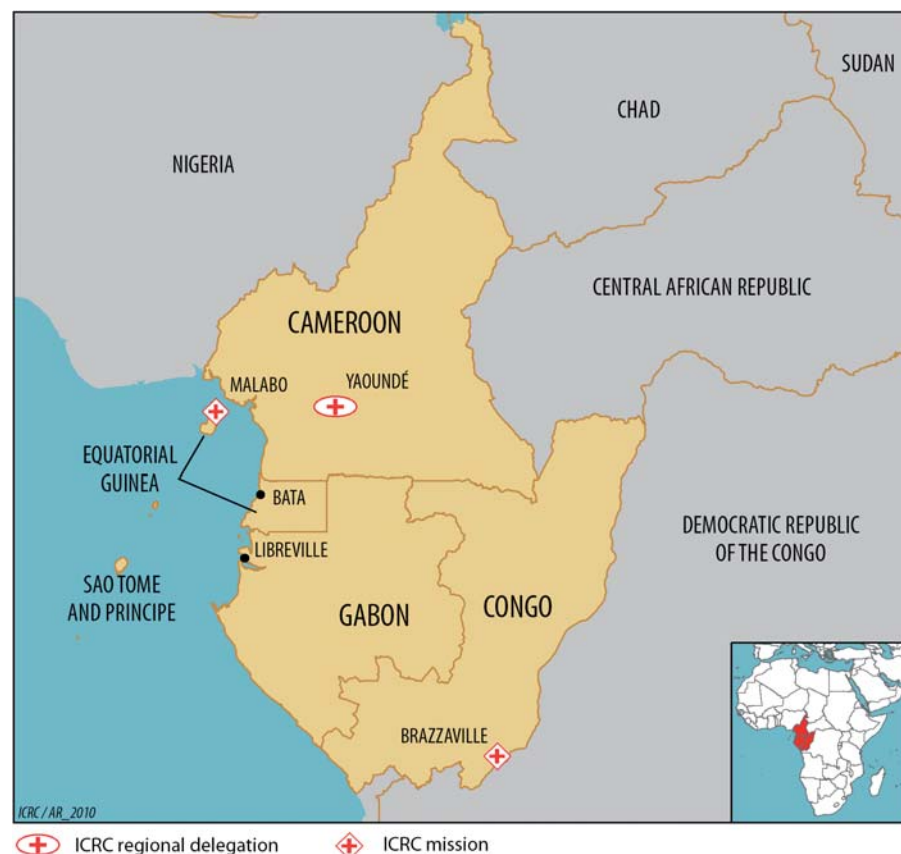
In Lesotho, South Africa and Swaziland, the National Societies developed their services helping refugees and asylum seekers in the region to reconnect with their families. Personnel from across the region examined ways to strengthen the family-links network during a five-day regional workshop in Malawi (see *Harare*). At the request of various embassies and UNHCR, over 179 refugees and asylum seekers resettled abroad upon receipt of travel documents issued by the ICRC.

Volunteers bolstered their capacities to increase public understanding of IHL and the Movement during training sessions in their respective countries and abroad. Swaziland's National Society also held a series of meetings with the authorities and opposition groups to improve understanding of and garner support for the Movement. In South Africa, the National Society continued developing a football-based project to curb youth violence.

Movement components met regularly to coordinate their activities.

YAOUNDÉ (regional)

COVERING: Cameroon, Congo, Equatorial Guinea, Gabon, Sao Tome and Principe



EXPENDITURE (IN KCHF)

Protection	473
Assistance	-
Prevention	1,834
Cooperation with National Societies	1,497
General	-

► **3,804**

of which: Overheads 232

IMPLEMENTATION RATE

Expenditure/yearly budget	93%
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PERSONNEL

Expatriates	7
National staff (daily workers not included)	35

KEY POINTS

In 2010, the ICRC:

- signed a cooperation agreement with the Economic Community of Central African States outlining joint initiatives to promote IHL among the organization's member States and peacekeeping brigade
- gained access for the first time to people detained in Gabon and expanded visits to detainees in Equatorial Guinea
- organized a conference on customary IHL – the first of its kind in the region – for government officials and academics from 13 African countries
- welcomed Gabon's ratification of the Optional Protocol to the Convention on the Rights of the Child and Protocols II, IV and V to the Convention on Certain Conventional Weapons
- in cooperation with the Congolese Red Cross, drew up a plan of action for 2011 to maintain and boost the output of farmers and fishermen living in communities in north-eastern Congo overwhelmed with refugees

The ICRC set up its Yaoundé regional delegation in 1992 but has been working in the region since 1972. It monitors the domestic situation in the countries covered, visits security detainees and restores contact between refugees and their families. It pursues long-standing programmes to spread knowledge of IHL among the authorities, armed forces and civil society, and supports the development of the National Societies.

CONTEXT

While the region remained generally stable, much of its population continued to struggle with poverty, limited public services and sporadic banditry and violence.

Cameroon's Rapid Intervention Battalion (RIB) deployed units to maintain security in the Bakassi Peninsula and in the north of the country. Some 85,000 people from the Central African Republic and Chad continued to seek refuge in the country's northern and eastern regions. In the capital, tensions between the government and opposition groups over slow progress on electoral reforms prompted demonstrations and strikes.

Congo remained mostly calm and continued to consolidate peace in the country. Around 110,000 refugees were still sheltering in

the north-eastern region of Likouala, having fled intercommunal violence that broke out in late 2009 in Equateur province in the Democratic Republic of the Congo (DRC).

In Equatorial Guinea, the trial of those allegedly involved in an armed attack on the presidential palace in 2009 resulted in four people being sentenced to death and executed. The appointment of the president's son as the ruling party's vice president reportedly triggered tension among party members.

Gabon remained stable despite rising social discontent that sparked regular strikes. A new constitution reinforcing the president's powers was adopted as the country prepared for legislative elections in 2011.

MAIN FIGURES AND INDICATORS				
PROTECTION				
CIVILIANS (residents, IDPs, returnees, etc.)				
Red Cross messages	Total	UAMs/SCs*		
RCMs collected	308	10		
RCMs distributed	855	63		
Reunifications, transfers and repatriations	Total			
People reunited with their families	7			
Tracing requests, including cases of missing persons	Total	Women	Minors	
People for whom a tracing request was newly registered	33	7		9
People located (tracing cases closed positively)	9			
Tracing cases still being handled at 31 December 2010 (people)	24	5		7
UAMs/SCs,* including unaccompanied demobilized child soldiers	Total	Girls	Demobilized children	
UAMs/SCs newly registered by the ICRC/National Society	25	12		
UAMs/SCs reunited with their families by the ICRC/National Society	7	3		
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2010	34	17		
Documents				
Official documents relayed between family members across borders/front lines	1			
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)¹				
ICRC visits	Total	Women	Minors	
Detainees visited	100			
Detainees visited and monitored individually	98	3		9
Detainees newly registered	73	3		9
Number of visits carried out	10			
Number of places of detention visited	8			
Restoring family links	Total			
RCMs collected	15			
RCMs distributed	21			
People to whom a detention attestation was issued	2			

* Unaccompanied minors/separated children

1. Cameroon, Congo, Equatorial Guinea and Gabon

ASSISTANCE				
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat²		Total	Women	Children
Essential household items	Beneficiaries	392		

2. Equatorial Guinea only

ICRC ACTION AND RESULTS

Throughout the year, the Yaoundé regional delegation focused resources on promoting widespread understanding of humanitarian principles and the Movement's mandate and work.

To this end, the ICRC continued to strengthen its dialogue with regional and national authorities, including by signing an agreement on IHL promotion with the Gabon-based Economic Community of Central African States (ECCAS) and by holding a first-ever regional conference on customary IHL. The delegation offered legal expertise to the region's governments in ratifying and implementing IHL treaties. Drawing on such advice, Gabon became party to a number of humanitarian instruments.

The delegation briefed hundreds of members of the armed, security and police forces on IHL and the Movement. It also helped the relevant authorities integrate IHL norms into the forces' doctrine, training and operations. As part of this process, the ICRC sponsored high-ranking officers from Cameroon and Congo to attend an IHL course abroad and trained and equipped instructors in those countries to teach IHL.

During presentations and workshops, the ICRC also fostered dialogue with influential members of civil society, such as community leaders, journalists, and university instructors and students, on IHL and the Movement's Fundamental Principles and activities. Meanwhile, in Cameroon, the delegation stepped up efforts to introduce young people to humanitarian principles through National Society youth clubs.

With ICRC training, technical, material and financial support, the National Societies reinforced their capacities to provide relief, first aid assistance, and tracing and RCM services to people affected by violence, natural disasters and other emergencies, including those spilling over from neighbouring countries. Such was the case in Congo's Likouala region, where the ICRC and the Congolese Red Cross assessed the needs of communities overwhelmed with refugees from the DRC and devised a plan of action to assist them in 2011.

The ICRC visited detainees in four of the five countries covered by the delegation, to monitor their treatment and living conditions.

For the first time, the ICRC was able to visit detainees in Gabon. The delegation also gained additional access to people detained in Equatorial Guinea.

CIVILIANS

People fleeing violence in neighbouring countries continued to seek refuge in areas covered by the Yaoundé delegation (see *Context*). The population of Congo's Likouala region more than doubled when over 110,000 refugees arrived from the DRC's Equateur province in late 2009, placing additional strain on the already impoverished communities there. In Likouala, emergency assistance provided by the National Society, together with the International Federation, alleviated some of the pressure on resources from hosting the refugees. Meanwhile, the ICRC and the Congolese Red Cross assessed resident communities' needs and drew up a plan of action for 2011 aiming to maintain and boost the economic capacities of local families through the provision of farming tools and fishing equipment.

Refugees and asylum seekers in Cameroon, Congo and Gabon restored contact with family members back home through the tracing and RCM services provided by the region's National Societies, with ICRC support. As a priority, unaccompanied children were put back in touch with their families and, where appropriate, reunited with them. Seven children thus rejoined their families during the year.

PEOPLE DEPRIVED OF THEIR FREEDOM

People held for security reasons in Cameroon, Congo and Equatorial Guinea received visits from delegates, carried out in accordance with standard ICRC procedures, to assess their treatment and living conditions. Detainees were also visited for the first time in Gabon. Following visits, the authorities received confidential oral and written feedback on delegates' findings and, where relevant, recommendations. In Equatorial Guinea, building on the resumption of visits in 2009, the delegation had access to detainees in five places of detention, four more than in 2009, including those held in lock-ups run by the national *gendarmérie*.

PEOPLE DEPRIVED OF THEIR FREEDOM	CAMEROON	CONGO	EQUATORIAL GUINEA	GABON
ICRC visits				
Detainees visited	7	49	41	3
Detainees visited and monitored individually	7	49	39	3
<i>of whom women</i>		3		
<i>of whom minors</i>		9		
Detainees newly registered	1	49	20	3
<i>of whom women</i>		3		
<i>of whom minors</i>		9		
Number of visits carried out	3	2	4	1
Number of places of detention visited	3	1	3	1
Restoring family links				
RCMs collected		12	3	
RCMs distributed		20	1	
People to whom a detention attestation was issued	1		1	

During such visits, particular attention was paid to vulnerable detainees. Nearly 400 inmates in Equatorial Guinea received essential items for their personal use. Inmates, notably foreign detainees, also had the opportunity to write RCMs to their families.

In Cameroon, national and prison authorities received regular advice from ICRC legal experts on incorporating international standards of criminal law in the country's legislation.

AUTHORITIES

National authorities throughout the region discussed humanitarian issues and the Movement's activities during bilateral meetings and ICRC seminars, conducted with the relevant National Society whenever possible. Cameroon hosted the region's first conference on customary IHL, where government officials and academics from 13 African countries heightened their understanding of IHL provisions relating to the conduct of hostilities and the protection of IDPs.

The region's governments were offered legal expertise in acceding to IHL treaties. Thus, Gabon ratified the Optional Protocol to the Convention on the Rights of the Child and Protocols II, IV and V to the Convention on Certain Conventional Weapons. In parallel, national authorities received technical support in integrating IHL provisions into their domestic legislation, for example during two ICRC workshops for legal experts from various Cameroonian and Gabonese ministries. In Equatorial Guinea, the ICRC resumed support to IHL implementation activities put on hold in 2009, and 30 representatives of several ministerial cabinets discussed with the delegation the next steps in integrating IHL norms into the country's law.

At the regional level, ECCAS and the ICRC signed a formal agreement outlining joint initiatives to promote IHL among ECCAS member States. The agreement included a plan of action to: reinforce the capacities of the ECCAS peacekeeping brigade to respect and promote humanitarian norms; strengthen dialogue relating to support for humanitarian work in areas affected by violence; and advance IHL implementation among ECCAS member States.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

Regionwide, hundreds of members of the armed, security and police forces, including those about to be deployed on peace-support missions and personnel from Cameroon's RIB, participated in ICRC briefings and seminars aimed at improving respect for basic humanitarian principles and increasing knowledge of the Movement's neutral, impartial and independent humanitarian action. Where possible, the relevant National Society personnel participated in such events. Meanwhile, ECCAS held its 2010 "Kwanza" regional military training exercise in Angola, at which the ICRC was the only international organization present.

The region's armed forces continued to discuss with the ICRC ways to integrate IHL into their doctrine, training and operations. As part of efforts to revive IHL integration activities in Gabon, the armed forces drafted a plan of action with the delegation, and 15 senior officers participated in information sessions on IHL and the Movement. During bilateral talks with the ICRC, army officials in Congo evaluated their IHL instruction, and senior officials from five ministries in Equatorial Guinea discussed IHL integration techniques. Two high-ranking officers from Cameroon and Congo attended the Senior Workshop on International Rules governing Military Operations held in Lucerne, Switzerland, and over 30 IHL instructors received training and materials to teach IHL. Military schools in Cameroon, Congo and Gabon also received new reference materials to guide coursework. Meanwhile, army officers from 17 African countries attending the War School in Yaoundé discussed IHL integration during an ICRC presentation.

CIVIL SOCIETY

Influential sectors of civil society learnt about humanitarian issues and the Movement from information materials and during presentations, for example a one-day workshop for 24 imams and NGO representatives in northern Cameroon. Where possible, such events were organized with the National Society.

To encourage the region's media to expand and enhance their coverage of humanitarian issues, journalists from Cameroon and Gabon participated in national and regional workshops and a two-week seminar on IHL. Others gained a first-hand perspective during field trips, thus improving their ability to report accurately on Movement activities.

As part of efforts to stimulate interest in IHL among future leaders, some 500 students and 8 lecturers in Cameroon and Equatorial Guinea participated in workshops on the Movement's mandate and activities. Libraries across Cameroon received up-to-date reference materials, and a university in Gabon requested a complete set of IHL reference books. An IHL competition was postponed to allow students to complete their coursework beforehand. To support quality IHL teaching, instructors sharpened their skills abroad during an advanced Pan-African IHL course in Senegal (see *Dakar*) and a regional conference on customary IHL (see *Authorities*).

Young people in Cameroon were introduced to humanitarian principles through National Society youth clubs across the country rather than through the implementation of the Exploring Humanitarian Law school programme.

RED CROSS AND RED CRESCENT MOVEMENT

The region's National Societies continued to boost their capacities to meet the needs of vulnerable people and to promote IHL and the Movement, with ICRC training and technical, material and financial support.

Throughout the region, specific training in the design, implementation and evaluation of economic security projects put the National Societies in a better position to ensure the success of their activities to assist vulnerable communities in the long term. For example, the Congolese Red Cross received technical support in propagating disease-resistant varieties of manioc and hired an agronomist to oversee this project.

In Cameroon, Congo, Equatorial Guinea and Gabon, National Society personnel were trained in first aid and the Safer Access approach and equipped with first-aid kits to help them treat people injured during emergencies. The Cameroon Red Cross Society also received an ambulance and another vehicle.

Meanwhile, volunteers attended workshops and training/refresher courses to enhance their capacities to restore family links (see *Civilians*). In Cameroon, the National Society published a tracing guide and organized a seminar on migration for its volunteers.

National Society personnel were better equipped to promote IHL and the Movement following training in various communication techniques.

Movement partners met regularly to coordinate their activities.