

LIBERIA



+ ICRC delegation
 + ICRC sub-delegation
 + ICRC office

EXPENDITURE (IN KCHF)

Protection	1,522
Assistance	4,844
Prevention	1,463
Cooperation with National Societies	2,121
General	-

▶ **9,950**
 of which: Overheads **607**

IMPLEMENTATION RATE

Expenditure/yearly budget	83%
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PERSONNEL

Expatriates	15
National staff (daily workers not included)	133

KEY POINTS

In 2011, the ICRC:

- ▶ with the National Society, provided refugees fleeing armed conflict in Côte d'Ivoire, and/or families hosting them, with first-aid and family-links services, agricultural inputs, food, water/sanitation infrastructure and better road access
- ▶ with the National Society, provided 254,550 people in Monrovia and rural Liberia (including refugees and communities hosting them) with access to adequate water/sanitation, while promoting good hygiene practices
- ▶ visited, according to standard ICRC procedures, 137 people detained/interned in connection with the armed conflict in Côte d'Ivoire, while advising the Liberian authorities on international norms relevant to internment
- ▶ provided input to a draft national policy on health care in detention, as part of wider efforts to support the authorities in ensuring detainees' access to adequate food, water/sanitation, hygiene and medical attention
- ▶ strengthened cooperation with the newly reconstructed Liberian armed forces, helping conduct briefings/seminars for over 1,000 officers to increase their knowledge of IHL and the Movement as part of their basic training
- ▶ in case of election-related violence, alongside ICRC-trained National Society personnel, trained some 2,000 police officers/polling station officials and 1,800 civil society members in basic first-aid/humanitarian principles

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 Liberia National Red Cross Society and runs programmes to promote IHL among armed forces present in the country.

CONTEXT

Eight years after the end of the conflict in Liberia, the government pursued efforts to strengthen the country's economy and institutions, rebuild infrastructure, restore public services and foster social cohesion. Although the economy showed signs of recovery, poverty remained widespread. Many Liberians struggled for access to basic utilities and to health care. High unemployment particularly affected young Liberians, including former combatants.

During the first half of 2011, tens of thousands of refugees streamed into eastern Liberia driven out by the armed conflict in neighbouring Côte d'Ivoire (see *Abidjan*). Despite the establishment of refugee camps by the Liberian authorities/UNHCR, many refugees preferred to stay with host families along the border. In these remote, impoverished areas, the influx strained resident communities' already limited resources, particularly in terms of food, water and sanitation. Potential cross-border activity by weapon bearers, facilitated by porous borders, was a security concern for the Liberian authorities.

By mid-year, as the situation in Côte d'Ivoire progressively normalized, refugees began to return home, alleviating pressure on Liberian communities. However, some refugees, particularly in Grand Gedeh county, remained reluctant to do so, fearing discrimination or having had their property and/or livelihoods destroyed.

In October/November, broadly peaceful elections saw the incumbent president re-elected, although low voter turnout and an opposition boycott during the presidential run-off compromised, for some, the credibility of the results. International security actors supporting the country's reconstruction, including the United Nations Mission in Liberia (UNMIL), deployed countrywide to help secure the electoral process.

ICRC ACTION AND RESULTS

While developing an effective Movement response to humanitarian needs generated by the refugee influx, the ICRC's Liberia delegation also pursued planned activities to address enduring needs elsewhere in the country. It continued to help prepare the authorities, communities and the National Society to consolidate basic services and livelihoods, provide assistance to vulnerable people and cope in an emergency after the eventual withdrawal of ICRC support.

With strengthened support from the ICRC/International Federation, the Liberia National Red Cross Society led the Movement's response to the refugee influx in coordination with the authorities/other humanitarian actors. In March, to better support the National

Main figures and indicators		PROTECTION	Total		
CIVILIANS (residents, IDPs, returnees, etc.)					
Red Cross messages (RCMs)					
				UAMs/SCs*	
RCMs collected			2,100	592	
RCMs distributed			163	57	
Phone calls facilitated between family members			7,201		
Reunifications, transfers and repatriations					
People reunited with their families			36		
		<i>including people registered by another delegation</i>	1		
Tracing requests, including cases of missing persons					
				Women	Minors
People for whom a tracing request was newly registered			72	26	20
People located (tracing cases closed positively)			25		
		<i>including people for whom tracing requests were registered by another delegation</i>	3		
Tracing cases still being handled at 31 December 2011 (people)			50	16	16
UAMs/SCs*, including unaccompanied demobilized child soldiers					
				Girls	Demobilized children
UAMs/SCs newly registered by the ICRC/National Society			580	272	
UAMs/SCs reunited with their families by the ICRC/National Society			28	16	
		<i>including UAMs/SCs registered by another delegation</i>	1		
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2011			349	152	
Documents					
People to whom travel documents were issued			28		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)					
ICRC visits					
				Women	Minors
Detainees visited			1,975		
Detainees visited and monitored individually			152		16
Detainees newly registered			152		16
Number of visits carried out			92		
Number of places of detention visited			22		
Restoring family links					
RCMs collected			197		
RCMs distributed			148		
Phone calls made to families to inform them of the whereabouts of a detained relative			190		

* Unaccompanied minors/separated children

Main figures and indicators		ASSISTANCE	Total	Women	Children
CIVILIANS (residents, IDPs, returnees, etc.)					
Economic security, water and habitat					
Food		Beneficiaries	24,132	40%	20%
		<i>of whom IDPs</i>	12,066		
Agricultural, veterinary and other micro-economic initiatives		Beneficiaries	33,450	36%	41%
Water and habitat activities		Beneficiaries	314,550	35%	45%
		<i>of whom IDPs</i>	78,625		
Health					
Health centres supported		Structures	4		
Average catchment population			11,064		
Consultations		Patients	11,904		
		<i>of which curative</i>		4,466	5,182
		<i>of which ante/post-natal</i>		345	
Immunizations		Doses	87,068		
		<i>of which for children aged five or under</i>	86,411		
		<i>of which for women of childbearing age</i>	657		
Referrals to a second level of care		Patients	18		
Health education		Sessions	375		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)					
Economic security, water and habitat					
Food		Beneficiaries	973		
Essential household items		Beneficiaries	1,499		
Water and habitat activities		Beneficiaries	1,358		

Society in meeting growing needs, the ICRC increased its budget, appealed for additional funds and, alongside National Society personnel, stepped up activities for refugees and communities hosting them. Together they focused on: providing first aid; restoring contact between dispersed relatives, particularly children; improving access to adequate water/sanitation; and providing agricultural inputs/food to bolster struggling families' food/economic security. Specially trained tracing personnel/first-aiders deployed to affected areas.

With the authorities' agreement, the ICRC visited people detained/interned in connection with the armed conflict in Côte d'Ivoire. It advised the Liberian authorities on international norms relevant to internment by a neutral State and, where necessary, provided practical assistance to support them in ensuring internees' conditions complied with internationally recognized standards/IHL. As the situation in Côte d'Ivoire stabilized, it advised on procedures for such individuals' eventual release.

Meanwhile, as planned, the ICRC resumed support to four health clinics in Lofa county, providing health workers with refresher training, supervision and logistical support to consolidate standards of curative and ante/post-natal care, including vaccination.

To improve public health in urban and rural areas lacking adequate water/sanitation infrastructure, ICRC/National Society teams, together with the water authorities and/or community members, constructed/repared water points and latrines, improving access to clean water and reducing exposure to water-borne diseases. ICRC-trained National Society volunteers established village water committees to undertake routine maintenance/promote good hygiene practices.

Previously assisted farmers continued to benefit from agricultural inputs, supervision and marketing training, preparing them to maintain their livelihoods independently. The ICRC also supported the National Society in developing its own agricultural initiatives, contributing vehicle-support, funds and expertise.

Having resumed activity in prisons in 2010 to help the authorities ensure detainees' material conditions met the required standard, the ICRC monitored nutritional standards, hygiene-associated health risks and access to medical care in detention facilities countrywide. In cooperation with the authorities, it undertook urgent repairs to water/sanitation infrastructure, developed initiatives to enhance inmates' hygiene conditions/nutritional intake, and facilitated medical screenings/hospital referrals. It also provided input to a draft national policy governing health care in detention.

Through presentations/publicity, the ICRC/National Society endeavoured to increase support for Movement activities, IHL/international human rights law and humanitarian principles among authorities, peacekeepers, military/security personnel and civil society. In particular, they strengthened cooperation with the new Liberian armed forces and, ahead of the elections, trained police officers/polling station officials to support the smooth conduct of the electoral process. The Liberian government took tangible steps towards the ratification of several humanitarian instruments.

Besides partnering the ICRC in the field, the National Society received training, funds and materials to strengthen its emergency-response capacities, particularly in case of election-related violence. Similar support served to boost its governance and management and its communication/assistance initiatives.

CIVILIANS

In eastern Liberia (Grand Gedeh, Maryland, Nimba and River Gee counties), the influx of refugees from Côte d'Ivoire that began in December 2010 continued into 2011, further straining local resources. The Liberian Red Cross, with increased International Federation/ICRC support (see *Red Cross and Red Crescent Movement*), stepped up its activities in these areas. Joint National Society/ICRC teams monitored refugees' movements, well-being and impact on host communities, working together to address first aid (see *Wounded and sick*), family-links, water/sanitation and food needs in coordination with the authorities/other humanitarian actors.

Refugees received help to locate/send news to relatives with whom they had lost contact. Using free telephone/message services, they made some 7,200 calls and sent 2,100 RCMs. Humanitarian

coordination meetings having resolved to refer all child-related tracing cases to the ICRC, National Society volunteers underwent specific training in identifying/registering unaccompanied/separated children and, where appropriate, proceeding with family reunification. By year-end, thanks to cooperation between Movement partners/other organizations in Liberia, Côte d'Ivoire and Guinea, 337 such children had reconnected with relatives and 27 had rejoined their families.

To reduce health risks magnified by strain on water/sanitation resources, community members joined National Society/ICRC teams in constructing/repairing wells, latrines and bathhouses, complemented by hygiene-awareness sessions. In three villages reliant on unsafe water sources, temporary water-purification/distribution units were installed and supplies regularly trucked in/treated. With demand peaking at 20,000 litres per day, production was gradually downscaled as new wells were completed and refugees returned home/moved to camps. These initiatives benefited some 81,000 residents/refugees.

With refugees' food needs generally covered by other actors, ICRC food support was directed to families hosting, and sharing their supplies with, refugees to mitigate any adverse impact on food/economic security. As compensation for depleted reserves, 2,983 struggling families (17,898 people) were given seed/tools to boost rice cultivation. Around 3,500 households (21,132 people) received a two-week food ration (up to five times) to tide them over until the next harvest. Similarly, 500 refugee families (3,000 people) arriving empty-handed received food to help sustain them in the first instance. Planned distributions of essential household items did not go ahead as such assistance was concentrated in official refugee camps, where it was handled by other organizations.

Meanwhile, repairs to 12 bridges improved market access for over 60,000 refugees/local residents, while facilitating aid delivery.

Towards September, as the situation in Côte d'Ivoire stabilized and refugees began returning home, ICRC/National Society teams progressively scaled back their activities.

Communities in Lofa County regain quality health care

An ICRC assessment of health facilities handed over to the authorities in 2009 showed that certain clinics had difficulty delivering the government's Basic Package of Health Services (BPHS). The ICRC therefore resumed its support to four clinics in Lofa county to restore local access to quality curative and ante/post-natal care while preparing health teams to reassume full responsibility. Newly constructed staff accommodation sought to encourage qualified health practitioners to continue working there.

With ICRC supervision/on-the-job training, clinic staff carried out over 11,000 consultations, refreshing their knowledge of recommended ante/post-natal procedures at workshops. They received essential drugs/infection-control materials where supplies were running low, backed by guidance/materials to facilitate record-keeping and stock management. When conducting polio/measles-prevention campaigns, they used ICRC-supplied vehicles and ice packs to pre-position vaccines in optimum conditions.

Discussions with national/international health actors progressed, aimed at incorporating these clinics into Liberia's national health care development plan.

Urban and rural residents enjoy healthier environmental conditions

Besides carrying out emergency water/sanitation initiatives in communities hosting refugees (see above), the National Society/ICRC continued to help other Liberian residents reduce their exposure to water-borne diseases. In parts of Monrovia and Grand Gedeh and Lofa counties where water/sanitation infrastructure was limited or dilapidated, 93,500 urban and rural residents obtained readier access to reliable water points and latrines constructed or repaired by the water authorities/community members and National Society/ICRC teams. In parallel, National Society volunteers learnt to repair village hand pumps, chlorinate wells and promote good hygiene during ICRC workshops, enabling them to conduct routine maintenance and combat cholera outbreaks. Alongside community water/sanitation committees whom they trained to oversee the facilities, they repaired 140 wells, contributing to healthier environmental conditions for some 80,000 people. Planned tours of previously supported communities, to check that the spare-parts procurement network developed there continued to function as intended, did not take place owing to operational priorities elsewhere in the country.

Liberian farmers benefit from livelihood support

In Lofa County, 2,592 farmers (including members of associations/cooperatives and 500 households headed by women) who had previously rehabilitated coffee/palm-oil plantations with ICRC support continued to receive agricultural inputs/training to prepare them to maintain the plantations independently and so support their families (15,552 people). Under supervision from ICRC-trained National Society volunteers, they consolidated their pruning techniques and applied ICRC-supplied fertilizer/insecticide to encourage new growth. Some 730 among them learnt effective marketing strategies during ICRC-funded courses run by the National Federation of Cooperative Societies.

Through an ICRC-supported Liberian Red Cross/Agriculture Ministry initiative, upland rice farmers were trained to cultivate swamp-rice instead, to combat environmental degradation in upland areas and associated losses in productivity. Farmers who began cultivating swamp-rice in 2010 returned a proportion of their rice seed to National Society personnel, who distributed it to a further 1,500 struggling upland farmers. This increased the number of swamp-rice farmers and their yields, boosting food/economic security in rural areas. National Society personnel received ICRC funds, vehicle support and project management training to maximize impact.

PEOPLE DEPRIVED OF THEIR FREEDOM

As armed confrontations in western Côte d'Ivoire intensified, alleged combatants entered Liberia alongside refugees, resulting in arrests. The Liberian authorities promptly sought ICRC advice on handling the situation (see below), while granting the organization access to all individuals detained/interned in connection with the conflict. Accordingly, 137 internees, including 88 at Wainsue Internment Camp, received visits from delegates, according to standard ICRC procedures, to monitor their treatment and living conditions.

Meanwhile, having requested ICRC support in improving material conditions in prisons in 2010, the Liberian authorities continued to welcome the organization's help in ensuring detainees' well-being. During regular visits to detention facilities, delegates monitored inmates' nutritional health, access to medical care and exposure to health risks (see below).

During ICRC visits, detainees/internees sent news to relatives using Movement family-links services. Following visits, the ICRC relayed observations and, where necessary, recommendations to the authorities to help ensure compliance with internationally recognized standards of detention and, where applicable, IHL.

Authorities advised on international norms relating to internment

With the arrival of alleged combatants in Liberia, the authorities examined with delegates the international norms relevant to internment by a neutral State during a conflict. Relevant government and security sector representatives and UN agencies clarified their respective responsibilities (including procedures for informing internees of their rights/obligations) at a workshop organized by the Liberian Refugee, Resettlement and Reintegration Commission with ICRC support. Drawing on ICRC guidance, the justice minister established a taskforce to coordinate its response to the issue. Taskforce members, including the ICRC, met regularly throughout the year to monitor internees' situation and address related matters.

As conditions in Côte d'Ivoire normalized, the Liberian authorities began examining procedures for internees' eventual release/return home. In particular, they worked with UNHCR/the ICRC to determine the legal status and best interests of interned minors, six of whom had been released and reunited with family by year-end.

Detainees/internees benefit from improvements to health care, hygiene and food provision

Aiming to raise detention health-care standards to national policy level, the Health and Social Welfare/Justice Ministries drew on ICRC expertise to formulate national guidelines on the topic for inclusion in the government's BPHS (see *Civilians*). Health workers/officials from Liberia's 15 county prisons learnt more about their role in implementing the BPHS at an ICRC workshop as part of joint Health Ministry/ICRC efforts to enhance health services for detainees.

On the ground, efforts focused on introducing mechanisms to better monitor/control disease and improve referral systems. Inmates benefited from more regular check-ups, with ICRC delegates on hand to advise health workers and, where necessary, contribute medical supplies. In coordination with key hospitals, detainees in Monrovia's largest prison (MCP) underwent screening for malaria/TB, contributing to a 50% reduction in malaria cases identified there.

Detainees in three prisons gained easier access to medical attention with the construction/renovation of on-site clinics stocked with essential equipment/drugs. Over 1,350 detainees/internees faced fewer general health risks following upgrades to water/sanitation infrastructure in 12 facilities (including Wainsue camp) by the Bureau of Corrections and Rehabilitation and/or the ICRC. Around 1,500 received blankets, mattresses and cleaning materials, improving their comfort and hygiene conditions. In four prisons, inmates began producing soap using ICRC-donated raw materials, resulting in a sharp drop in reported skin complaints.

To boost detainees' nutritional intake, the National Society cultivated a kitchen garden with ICRC-supplied tools, seed and training, enabling it to supply fresh vegetables to the MCP kitchens. Internees in Wainsue camp also benefited from ICRC food supplies.

WOUNDED AND SICK

Refugees wounded or taken sick prior to/during their journey from Côte d'Ivoire obtained first-level care from National Society first-aiders who, with ICRC training/equipment, had deployed to border areas. Continuous communication with other health actors present ensured these services complemented their initiatives.

AUTHORITIES

National/local authorities and representatives of the international community, including diplomats, UNMIL and UN agencies, met the ICRC regularly to share humanitarian/security concerns, helping ensure they understood and supported IHL and Movement activities in Liberia, particularly those linked to the presence of refugees from Côte d'Ivoire. Besides welcoming Movement input at humanitarian coordination meetings, the Liberian government sought the ICRC's advice regarding the treatment of armed elements arriving on Liberian soil (see *People deprived of their freedom*).

Prior to the elections, Liberian Red Cross/ICRC personnel joined security actors involved in supervising the process at preparatory meetings led by the National Election Commission (NEC). At the NEC's request, 787 police officers and 1,216 polling station officials learnt about the Movement's role during the elections and appropriate use of force when maintaining public order, and acquired basic first-aid skills, during National Society/ICRC briefings, better preparing them to handle potential election-related disturbances.

Besides tackling humanitarian needs generated by the refugee influx and organizing elections, the government took tangible steps to bring national legislation in line with IHL. Additional Protocol III, the African Union Convention on IDPs and the Hague Convention on Cultural Property all progressed to the National Assembly for ratification. The Defence and Justice Ministries explored with delegates the value of creating a national IHL committee.

To enhance national military IHL capacities, the newly reconstructed Armed Forces of Liberia (AFL) and their international mentors strengthened cooperation with the ICRC. During their basic training, over 1,000 AFL members improved their knowledge of IHL principles and the Movement during seminars/presentations run by ICRC-trained IHL instructors with ICRC input. In parallel, high-ranking/legal officers studied their respective roles in ensuring personnel applied IHL/international human rights law effectively while attending ICRC workshops, and one ICRC-sponsored officer within the AFL's legal department enhanced his expertise at an IHL event in Italy. Over 900 military/joint security personnel and incoming police officers/peacekeepers better understood the Movement's work and the relevance of both bodies of law in situations of violence after ICRC briefings. Military institutions received IHL publications to support such training.

CIVIL SOCIETY

Efforts focused on raising awareness of humanitarian concerns and the Movement among a cross-section of society, particularly ahead of the elections.

Some 2,500 influential journalists, representatives of NGOs, trade unions and political parties, and community/religious leaders deepened their insight into humanitarian principles and the Movement's role in post-conflict Liberia at National Society/ICRC

presentations. Some 1,800 also learnt to administer first aid during such events, boosting first-level care capacities among communities in tension-prone areas, including where ex-combatants were present. Based on such briefings and ICRC-produced print, online and audiovisual sources, national/international media boosted the Movement's public profile, notably by reporting widely on its response to the refugee influx (see *Civilians*).

Through a competition designed to stimulate youth interest in humanitarian issues, two would-be journalists gained experience reporting on National Society activities witnessed first-hand on ICRC-funded field trips. The resulting radio spot/photo montage highlighted the effects of armed conflict on young people.

Discussions with the University of Liberia and Cuttington University progressed, aimed at helping them introduce IHL in their curricula. In preparation, one ICRC-sponsored lecturer acquired IHL teaching tools at a course abroad, while both institutions received IHL publications to support related research.

RED CROSS AND RED CRESCENT MOVEMENT

In accordance with a tripartite agreement, the Liberian Red Cross benefited from expert back-up and increased training, logistical, material and financial support from the International Federation/ICRC to enable it to mount an effective Movement response to the refugee influx (see *Civilians* and *Wounded and sick*). In particular, 200 volunteers enhanced their family-links skills and 63 their first-aid techniques. While these operations took priority over some planned assistance activities, such as a health initiative for women, the National Society continued to receive ICRC support to develop its own agricultural and water/sanitation initiatives elsewhere in Liberia. Thirty volunteers underwent needs assessment training, boosting their capacities to plan/implement assistance operations.

In case of election-related violence, the National Society developed a contingency plan backed by ICRC training, equipment and vehicle support, reinforcing its first-aid network/rapid deployment capacities. Having sharpened their first-aid/presentation techniques, some 1,900 National Society personnel, including 46 instructors, worked alongside ICRC delegates to brief/train groups with potential influence during unrest (see *Authorities and Civil society*). Communication personnel also conducted 786 presentations independently for 19,945 people, including school-club members, using ICRC-supplied audiovisual equipment. These, together with newsletters/radio spots produced with ICRC input, helped promote the Movement/humanitarian principles widely.

To refine governance and management practices, the National Society's leadership conducted workshops for 223 senior staff/board members with ICRC guidance/financial support, strengthening their capacities in areas such as resource mobilization, IHL and adherence to Movement codes of conduct.

Regular meetings of relevant Movement partners facilitated effective coordination of their activities.