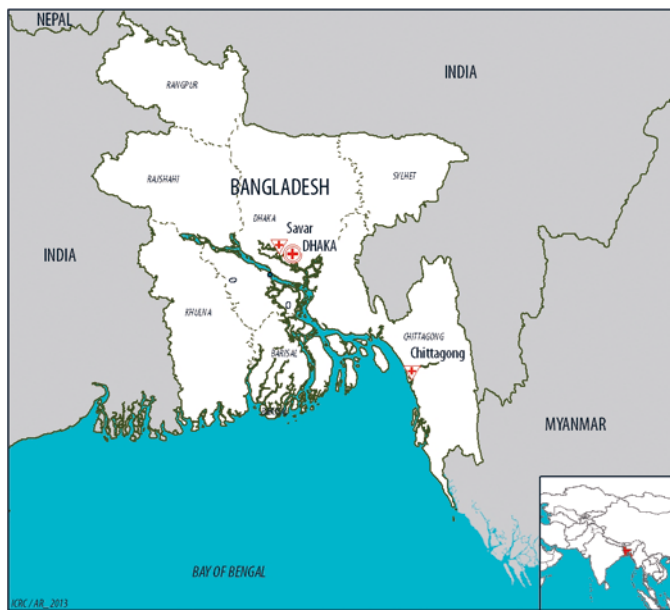


# BANGLADESH



ICRC / AR, 2013  
 + ICRC delegation    + ICRC-supported prosthetic/orthotic centre

Present in Bangladesh since 2006, the ICRC opened a delegation there in 2011. It works to protect and assist people affected by tensions and violence; promotes IHL and its implementation among the authorities, armed and security forces and academic circles; and supports the Bangladesh Red Crescent Society in building its capacities. It seeks to visit people deprived of their freedom in the country.

## KEY RESULTS/CONSTRAINTS

### In 2013:

- ▶ people injured during political strikes in Chittagong and Dhaka divisions received life-saving care from ICRC-supported Bangladesh Red Crescent Society first-aid teams
- ▶ victims of communal clashes in Chittagong and Rajshahi divisions covered their immediate needs through National Society/ICRC distributions of emergency relief
- ▶ the Bangladeshi government showed support for IHL by establishing a national IHL committee and acceding to Protocol V and Amended Article I of the Convention on Certain Conventional Weapons
- ▶ ICRC-trained/supported emergency responders, including the National Society and members of the Fire Service and Civil Defence, properly handled human remains during a rescue operation at a collapsed building in Savar
- ▶ more members of security forces' training academies, Islamic institutions and student wings of main political parties increased their knowledge of humanitarian principles, IHL and the Movement's activities in Bangladesh

EXPENDITURE (in KCHF)	
Protection	407
Assistance	1,095
Prevention	1,167
Cooperation with National Societies	365
General	-
<b>Total</b>	<b>3,035</b>

of which: Overheads 185

IMPLEMENTATION RATE	
Expenditure/yearly budget	104%

PERSONNEL	
Mobile staff	8
Resident staff (daily workers not included)	31

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

**MEDIUM**

PROTECTION		Total
CIVILIANS (residents, IDPs, returnees, etc.)		
Red Cross messages (RCMs)		
RCMs collected		112
RCMs distributed		214
Phone calls facilitated between family members		17
People located (tracing cases closed positively)		7

ASSISTANCE		Targets	Achieved
CIVILIANS (residents, IDPs, returnees, etc.)			
Economic security, water and habitat (in some cases provided within a protection or cooperation programme)			
Food commodities	Beneficiaries		892
Essential household items	Beneficiaries	7,500	4,022
Cash	Beneficiaries		613
WOUNDED AND SICK			
Hospitals			
Hospitals supported	Structures		2
Physical rehabilitation			
Centres supported	Structures	2	2
Patients receiving services	Patients	900	630

## CONTEXT

Tensions, unrest and strikes (*hartals*) that surfaced during early 2013 increased in frequency by year-end, leading to confrontations between demonstrators and security forces and disrupting daily life in Bangladesh.

Verdicts pronounced by Bangladesh's International Crimes Tribunal on alleged 1971 war criminals triggered several days of unrest. Garment factory workers staged frequent demonstrations over issues such as wages and working conditions.

Sporadic communal clashes in parts of the country, notably in Chittagong division, resulted in casualties and the destruction of houses.

Natural and man-made disasters occurred regularly. In April, over 1,100 people died when a garment factory collapsed in Savar, near Dhaka, the capital.

## ICRC ACTION AND RESULTS

Working closely with the Bangladesh Red Crescent Society, the ICRC continued to promote humanitarian principles and IHL, as well as strengthen and support the Movement's neutral, impartial and independent action in the country. It provided technical, material and financial support to the National Society to help boost the organization's institutional, operational and emergency response capacities, particularly in first aid, restoring family links and communication.

Independently or with the National Society, the ICRC held bilateral meetings and organized information campaigns and events to raise awareness of humanitarian principles, the Movement and the need to respect the red crescent emblem and to permit the safe passage of medical personnel during violence/*hartals*. Contacts with security forces' training academies, Islamic institutions and student wings of main political parties expanded, and relations with other actors of influence were developed. The ICRC pursued its dialogue with the authorities regarding its offer of services to visit people deprived of their freedom, according to its standard procedures. This was still being discussed with the authorities at year-end.

These efforts, as well as technical input and tailored activities, encouraged the incorporation of IHL and/or international human rights law into domestic law, the training and operations of the armed forces and the police, and the curricula of institutions of higher education. Activities included training courses, the 23rd South Asian Teaching Session (SATS) on IHL in Dhaka, and sponsorship of representatives of Bangladeshi institutions at IHL events abroad. As a result, the government acceded to Protocol V and Amended Article I of the Convention on Certain Conventional Weapons (CCW), signed the Arms Trade Treaty (ATT) and established a national IHL committee, while two academic institutions included IHL in their curricula. The police and the National Society/ICRC took steps to incorporate first aid into the training manual for constables.

The National Society/ICRC organized training sessions on family-links services and management of human remains for National Society volunteers, security forces and emergency responders from other institutions concerned. This helped ensure that vulnerable migrants and people affected by violence/*hartals* or disasters were

provided with the means to keep in touch with their families and that human remains were accounted for. In coordination with the Bangladeshi Foreign and Home Affairs Ministries, the National Society/ICRC, in Bangladesh and elsewhere, helped families of Bangladeshi migrants detained abroad re-establish and maintain contact with their relatives and provided ad hoc assistance to the most vulnerable migrants following their repatriation. With ICRC support, the National Society conducted search and rescue operations and tracing activities at a collapsed building and offered family-links services to foreign detainees.

National Society/ICRC assistance helped people cope with the consequences of violence, notably in Chittagong and Rajshahi divisions. Food, essential household items and cash grants helped cover the immediate needs of families affected by communal clashes. National Society first-aid teams administered life-saving treatment to those injured during *hartals*; people who needed secondary care were referred to hospitals, some of which used ICRC-donated materials to treat patients. The National Society/ICRC submitted a proposal to the authorities for a project to provide health care services for communities in Cox's Bazar district.

Outreach activities, referrals and financial assistance enabled more disabled people to benefit from the services of the trained staff at the Chittagong and Savar branches of the ICRC-supported Centre for the Rehabilitation of the Paralyzed (CRP). The ICRC also provided technical and financial support for prosthetic/orthotic training institutes to develop their services at the national level.

## CIVILIANS

### Emergency responders apply their improved capacities to handle human remains

The authorities concerned and the ICRC maintained regular dialogue, notably on the authorities' responsibilities to protect and assist victims of political unrest, intercommunal tensions, migration and natural and man-made disasters.

During an orientation workshop, representatives from various ministries, the penitentiary system and the media learnt more about the consequences stemming from the separation of relatives and the family-links services offered by the National Society/ICRC.

With ICRC technical and financial input and training, the National Society further enhanced its capacities in providing the abovementioned services. For example, volunteers from all National Society branches underwent training in conducting tracing activities. Medical personnel, members of the Disaster Management and Relief Ministry, Fire Service and Civil Defence, the security forces and four branches of a local NGO collecting and burying unclaimed dead bodies and the National Society were better equipped to respond to disasters after attending ICRC workshops. They, including some 50 National Society volunteers, applied what they learnt and used ICRC-provided helmets, gloves and over 1,100 body bags during the rescue operation at a collapsed building in Savar (see *Context*). In coordination with hospitals, the police and civil authorities, the National Society followed up 457 tracing requests and facilitated 95 phone calls. Following this rescue operation, a Disaster Management and Relief Ministry/ICRC lessons learnt round-table enabled stakeholders to discuss and clarify their roles during disasters.

## **Family members of migrants detained abroad restore contact with their relatives**

Relatives of Bangladeshi migrants used family-links services offered by the National Society/ICRC in Bangladesh and other countries, and in cooperation with the Bangladeshi Foreign and Home Affairs Ministries. Families of Bangladeshi detainees, including those held in Iraq, Jordan and Lebanon, and of Muslims from Rakhine state, Myanmar, detained in Malaysia and Thailand, received 214 and/or sent 112 RCMS; others exchanged 115 oral messages through ICRC delegates. Out of the 74 Bangladeshis previously detained in Georgia, Malaysia and Sri Lanka who returned home, 17 informed their families of their arrival through ICRC-enabled phone calls, while 60 benefited from transportation home, provided by the National Society, with ICRC support.

## **Victims of violence repair their damaged houses**

Following intercommunal clashes in parts of the country, those affected recovered from their losses with the help of material assistance from the National Society/ICRC. In Chittagong division, 106 families (552 people) in two districts repaired their damaged houses using cash grants. In two other districts, one in Chittagong and the other in Rajshahi division, 892 people (194 households) covered their immediate needs with donated food, of which 702 (156 households) also benefited from essential items.

In response to the government's request for the National Society to provide assistance to vulnerable communities in Cox's Bazar district, in-depth assessments on existing health care services in two sub-districts were conducted by the National Society/ICRC. Based on the findings, a project proposal was submitted to the Health and Family Welfare Ministry for review and approval.

## **PEOPLE DEPRIVED OF THEIR FREEDOM**

### **Foreign detainees restore contact with their families**

According to the authorities, over 70,000 people were detained in some 68 prisons in Bangladesh, including people held in connection with violence/*hartals* and unrest or for reasons of State security.

The Foreign and Home Affairs Ministries and the ICRC maintained dialogue on the organization's 2011 offer of services for people deprived of their freedom, particularly visits to detainees in accordance with the ICRC's standard procedures. The offer was still under discussion at year-end.

Security personnel learnt more about international norms, notably those linked to arrest and detention, via ICRC information sessions (see *Authorities, armed forces and other bearers of weapons, and civil society*).

Some 300 vulnerable foreign detainees in 15 prisons eased their living conditions thanks to National Society/ICRC-provided hygiene kits. Those who so wished restored contact with their relatives at home or their embassies through the ICRC-supported National Society family-links services. A detainee who already completed his sentence had his release papers processed by the authorities concerned, with the facilitation of the ICRC.

## **WOUNDED AND SICK**

### **Injured people receive life-saving treatment**

With violence/*hartals* leading to casualties, the authorities, security forces and members of civil society, including student wings of main political parties, learnt more about the need to ensure the safe

passage of medical services and enhanced their ability to provide or conduct training in first aid during National Society and/or ICRC activities. Military personnel assessed health care delivery during violence/*hartals* at a Directorate General Medical Services/ICRC round-table. Over 20 newly trained instructors from the police and the Ansar and Village Defence Party independently held first-aid sessions for their colleagues.

Starting October, National Society first-aid teams in Chittagong and Dhaka divisions provided emergency assistance for people injured during *hartals*; nearly 70 received timely first aid and the most severely wounded were referred to hospitals. Donations of medical supplies to two facilities enabled prompt treatment for patients.

## **More financially vulnerable patients access quality rehabilitative care**

Representatives of a referral hospital in Chittagong, NGOs and other organizations in the physical rehabilitation sector, and 2,000 National Society volunteers attended dissemination sessions to help disabled people increase their knowledge of and therefore access to the ICRC-supported CRP branches in Chittagong and Savar. CRP Chittagong's community-based workers and National Society youth volunteers trained in patient identification conducted an outreach programme in Cox's Bazar district and identified 44 new patients.

With the ICRC covering the cost of their treatment and transportation, 630 patients, including 19 victims of the Savar building collapse, accessed and received rehabilitative care from the two CRP branches. Both centres offered improved prosthetic/orthotic services, as 73 physiotherapists underwent training and some updated their knowledge of the service during an international conference; a prosthetist started training on the management of upper limb amputation. Infrastructure improvement projects to further enhance patient care were done in 2012. Patients participated in various sporting events that promoted their social inclusion.

Stakeholders at the national level worked with the ICRC and received financial and technical support to improve their services. Construction of a training facility at the Bangladesh Health Professions Institute began after the Institute received government approval to offer the first diploma course on prosthetics and orthotics in the country. At its inaugural conference, the Bangladesh Society for Prosthetics and Orthotics discussed ways to develop and standardize its professional training programme with prosthetists/orthotists.

## **AUTHORITIES, ARMED FORCES AND OTHER BEARERS OF WEAPONS, AND CIVIL SOCIETY**

### **Civil society actors understand the Movement and IHL better**

With violence/*hartals* occurring throughout the country, familiarizing key actors and the public with humanitarian issues and principles and with the Movement was essential.

Bangladeshis learnt about National Society/ICRC activities through various events and through traditional and social media. Two journalists participated at an international conference (see *New Delhi*), thereby encouraging the continued and accurate coverage of humanitarian issues in Bangladesh. Bilateral meetings, ICRC-supported door-to-door National Society campaigns,

and publications in the local language helped the authorities, civil society, and communities in four districts increase their knowledge of the Movement and/or the importance of protecting the red crescent emblem.

Relations with Islamic organizations developed and led to National Society/ICRC participation in an international event in Dhaka. The Islamic University of Kushtia co-produced a booklet on Islam and IHL in Bangla and promoted it among Islamic academic institutions.

Dissemination sessions with security forces expanded to include the Air Force, the Naval Academy and the National Defence College. Paramilitary and police officers boosted their knowledge of the Movement, IHL and international human rights law, including law enforcement provisions on arrest and detention. During predeployment briefings, troops learnt more about such matters in relation to peacekeeping missions.

### Government establishes a national IHL committee

Representatives of the parliament, government ministries, security forces, Islamic organizations and academia, as well as SATS alumni, took part in various ICRC-supported initiatives aimed at encouraging IHL integration into national law, the curricula of higher education institutions and the training and operations of security forces. For instance, they discussed IHL implementation and the relationship between IHL and human rights law with their regional counterparts from eight countries at the 23rd SATS in Dhaka, co-organized with the Foreign Affairs Ministry. Government officials and academics attended similar events abroad (see *Lebanon* and *Nepal*); others took an online postgraduate IHL course offered by an Indian law university.

Bangladesh acceded to Protocol V and Amended Article I of the CCW and signed the ATT. Dialogue continued with the authorities regarding their pledge at a “Strengthening IHL” process seminar (see *International law and cooperation*), notably on the review of the 1949 Geneva Conventions translated into Bangla. Officials concerned participated in a workshop aimed at updating the 1936 Geneva Convention Implementing Act and incorporating the changes into the Bangladesh Code. A national IHL committee, established with material and technical support from the ICRC, began its work.

Future leaders stood to benefit from improved and standardized IHL courses following the integration of IHL into the respective curricula of the Foreign Service Academy and the Al-Fiqh Department of the Islamic University of Kushtia. Moreover, 40 law teachers from six universities underwent basic IHL training, and

some universities added ICRC-donated resource materials to their libraries. Students enriched their knowledge of IHL by participating in national or regional moot court and essay writing competitions (see *New Delhi*).

### Security forces develop their teaching capacities

In accordance with written agreements previously made, the armed forces, the police and paramilitary forces continued to work with the ICRC to incorporate IHL and, where applicable, international human rights law into their training and operations. Instructors from all three underwent train-the-trainer programmes to enhance their teaching techniques, while two senior police officers took part in a regional seminar on public order management (see *Jakarta*). The police and the National Society/ICRC continued to work on incorporating first aid into the training manual for constables.

## RED CROSS AND RED CRESCENT MOVEMENT

### National Society boosts emergency response capacities

Having renewed its partnership framework agreement with the ICRC, the National Society continued to work with the organization to provide first-aid and family-links services to people affected by violence/*hartals* or disasters and to conduct needs assessments and communication/dissemination sessions. The partnership enabled the National Society to continue strengthening its capacities in these areas (see above).

The final version of the new Red Crescent law, drafted by the National Society with the support of the International Federation and the ICRC, was pending at the Cabinet Division for endorsement to the parliament.

The National Society continued to coordinate its activities with Movement partners.

MAIN FIGURES AND INDICATORS: PROTECTION		Total		
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>Red Cross messages (RCMs)</b>			UAMs/SCs*	
RCMs collected		112		
RCMs distributed		214		
Phone calls facilitated between family members		17		
<b>Reunifications, transfers and repatriations</b>				
People transferred/repatriated		4		
<b>Tracing requests, including cases of missing persons</b>			Women	Minors
People for whom a tracing request was newly registered		8	5	
People located (tracing cases closed positively)		7		
Tracing cases still being handled at the end of the reporting period (people)		13	5	

\* Unaccompanied minors/separated children

MAIN FIGURES AND INDICATORS: ASSISTANCE		Total	Women	Children
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>Economic security, water and habitat (in some cases provided within a protection or cooperation programme)</b>				
Food commodities	Beneficiaries	892	31%	39%
Essential household items	Beneficiaries	4,022	48%	7%
Cash	Beneficiaries	613	29%	39%
<b>WOUNDED AND SICK</b>				
<b>Hospitals</b>				
Hospitals supported	Structures	2		
<b>Physical rehabilitation</b>				
Centres supported	Structures	2		
Patients receiving services	Patients	630	29	438
New patients fitted with prostheses	Patients	150	12	8
Prostheses delivered	Units	161	12	9
New patients fitted with orthoses	Patients	480	17	430
Orthoses delivered	Units	887	21	818