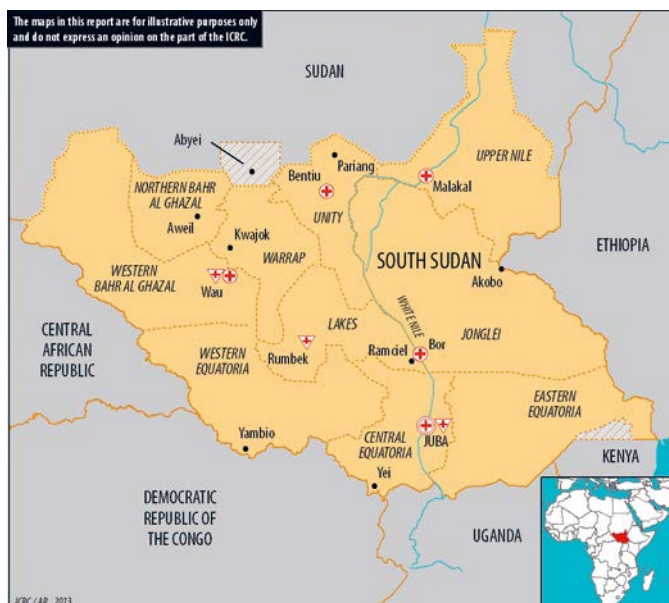


# SOUTH SUDAN

The maps in this report are for illustrative purposes only and do not express an opinion on the part of the ICRC.



ICRC / AR\_2013

## KEY RESULTS/CONSTRAINTS

### In 2013:

- tens of thousands of IDPs, vulnerable residents and detainees met their immediate needs during upsurges of fighting, including the outbreak of clashes in Juba in December, with National Society/ ICRC assistance
- thousands of casualties benefited from emergency care from up to 4 ICRC surgical teams at various medical facilities, often after receiving first aid from ICRC-trained South Sudan Red Cross volunteers
- security and logistical constraints slowed down the delivery of humanitarian assistance in violence-affected places or in isolated bush areas where people sought refuge
- 5 South Sudanese POWs were repatriated from Sudan, and, after being released by armed groups, 3 Sudanese women and 6 children returned to Sudan, and 13 South Sudanese men went home from Sudan, with ICRC support
- 5 POWs and over 3,000 people held in military facilities and in prisons under the authority of the National Prisons Service benefited from ICRC visits conducted according to the organization's standard procedures
- community leaders, armed groups and government forces familiarized themselves with IHL and humanitarian principles during dissemination sessions and meetings with ICRC delegates

EXPENDITURE (in KCHF)	
Protection	5,757
Assistance	39,789
Prevention	4,014
Cooperation with National Societies	4,167
General	-

**53,726**

of which: Overheads **3,230**

IMPLEMENTATION RATE	
Expenditure/yearly budget	<b>95%</b>

PERSONNEL	
Mobile staff	88
Resident staff (daily workers not included)	389

Present in Juba since 1980, the ICRC opened a delegation in newly independent South Sudan in mid-2011. It works to ensure that people affected by armed conflicts, including between South Sudan and Sudan, are protected in accordance with IHL, have access to medical/surgical care, physical rehabilitation and safe water, receive emergency relief and livelihood support, and can restore contact with relatives. It visits POWs and other detainees and seeks to increase knowledge of IHL among the authorities, armed forces and other weapon bearers. It works with and supports the South Sudan Red Cross Society.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

**MEDIUM**

PROTECTION	Total
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>	
<b>Red Cross messages (RCMs)</b>	
RCMs collected	954
RCMs distributed	632
Phone calls facilitated between family members	1,642
People located (tracing cases closed positively)	83
People reunited with their families	34
of whom unaccompanied minors/separated children	23
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>	
<b>ICRC visits</b>	
Detainees visited	3,254
Detainees visited and monitored individually	99
Number of visits carried out	55
Number of places of detention visited	16
<b>Restoring family links</b>	
RCMs collected	209
RCMs distributed	81
Phone calls made to families to inform them of the whereabouts of a detained relative	127

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	60,000	69,804
Essential household items	Beneficiaries	60,000	49,025
Productive inputs	Beneficiaries	132,000	221,745
Water and habitat activities	Beneficiaries	210,000	147,412
WOUNDED AND SICK			
Hospitals			
Hospitals supported	Structures	1	15
Water and habitat			
Water and habitat activities	Number of beds		792
Physical rehabilitation			
Centres supported	Structures	3	3
Patients receiving services	Patients	2,000	1,960

## CONTEXT

The production/export of oil in South Sudan and Sudan resumed after an agreement between the two countries in March. However, tensions remained, the dispute over the Abyei region being one example. Each side alleged military operations by the other in areas along the contested border, where confrontations between South Sudanese and Sudanese tribes were also reported. The influx of Sudanese refugees into South Sudan continued.

In Jonglei state, fighting between ethnic militias escalated following hostilities between the Sudan People's Liberation Army (SPLA) and the South Sudan Democratic Army. Intercommunal violence also affected other states, such as Lakes, Unity and Warrap.

On 15 December, clashes between two SPLA factions erupted in Juba, rapidly spreading to Jonglei, Unity and Upper Nile states. Tens of thousands of people were displaced, some in areas that lack access to basic services. Thousands fled to neighbouring countries. Thousands were reportedly wounded or killed.

Communities in Western Bahr al-Ghazal and Western Equatoria continued to cope with the consequences of past violence. African Union Regional Task Force (AU RTF) troops were deployed to these areas to counter the activities of the Lord's Resistance Army.

## ICRC ACTION AND RESULTS

The ICRC expanded its operations in South Sudan in response to the growing emergency and longer-term humanitarian needs of people affected by armed conflict and other situations of violence. It increased its proximity to vulnerable communities, opening two sub-delegations in Bentiu (Unity) and Bor (Jonglei). For the first time since 2011, it conducted assessments in several volatile areas, some near the border with Sudan, with a view to helping communities recover from the effects of conflict/violence. When heavy and widespread clashes erupted in December, it reallocated its human and material resources to further scale up emergency assistance to IDPs, wounded people and detainees in the areas worst affected.

As its access to vulnerable populations was sometimes limited by insecurity, the ICRC reminded the authorities and weapon bearers concerned of their responsibilities under IHL and other applicable law to respect those not/no longer involved in the fighting and facilitate the safe delivery of medical/humanitarian aid. Dissemination sessions, in addition to public communication activities, raised awareness of IHL and the ICRC's neutral, impartial and independent approach among SPLA officers and armed groups; efforts to integrate IHL into domestic legislation continued.

The ICRC worked with the South Sudan Red Cross to increase acceptance for the Movement's work, including in areas where few or no other humanitarian agencies could operate. In places that National Society/ICRC teams could reach, a multidisciplinary approach was used to meet emergency needs, restore family links and strengthen self-sufficiency.

After clashes, National Society volunteers administered first aid, evacuated casualties and facilitated the management of human remains. Up to four ICRC surgical teams, including one based in the Malakal Teaching Hospital (MTH), and a team deployed by the Canadian Red Cross Society assisted local doctors in different

conflict-affected areas. People needing care – including victims of sexual violence or other abuse – were referred/transported to ICRC-supported hospitals, including the MTH, which served a catchment population of about 3 million. People with disabilities were referred to the Juba Physical Rehabilitation Reference Centre (PRRC). The provision of supplies helped medical facilities overcome shortages.

Conflict/violence-affected communities benefited from a combination of emergency and resilience-building activities. They received food rations, built temporary shelters with National Society/ICRC-distributed materials, and had access to water following repairs to/installation of water points. Separated family members, including minors formerly associated with armed groups, re-established contact with relatives through family-links services. Whenever possible, livelihood-support initiatives helped people cope with the loss/destruction of their assets. Vulnerable families augmented their food supplies and/or income using ICRC-supplied seed or fishing equipment. Livestock vaccination campaigns, organized with the Ministry of Animal Resources and Fisheries (MARF), helped pastoralists maintain their herds' health.

The ICRC sought access to all detainees within its purview to help ensure that their treatment and living conditions conformed to internationally recognized standards. Having gained permission from the Ministry of Interior in 2012, it visited people held in civilian prisons, and in some military facilities, in accordance with its standard procedures. Under ICRC auspices, five POWs were repatriated from Sudan to South Sudan. After being released by armed groups, three Sudanese women and their children returned to Sudan, and 13 South Sudanese men came home from Sudan, with ICRC support. At the South Sudanese government's request, the ICRC also facilitated the repatriation and handover to the relevant authorities of 36 armed group members detained in the Central African Republic.

With funds, training and other support from the ICRC, the South Sudan Red Cross bolstered its capacities and achieved formal recognition as a National Society within the Movement. The ICRC coordinated its activities with those of Movement partners, UN agencies and other humanitarian actors in order to maximize impact, identify unmet needs and avoid duplication.

## CIVILIANS

### Authorities and weapon bearers reminded to protect civilians

The authorities and weapon bearers concerned were reminded – through meetings, written representations, phone calls and public communication – of their obligations under IHL to respect people not/no longer participating in hostilities and to facilitate their access to humanitarian aid. All parties involved were sent representations based on what ICRC delegates had themselves observed and on documented allegations of abuse.

Victims of sexual violence and/or other abuses benefited from medical/psychological care after referral to the appropriate facilities; they also received ad hoc assistance. Whenever possible, livelihood support was provided and water infrastructure repaired/constructed (see below) to help communities lessen their exposure to risks.

## **Amid difficult conditions, vulnerable people receive emergency aid**

Uncertain security conditions, impassable roads and bad weather slowed down the ICRC from reaching conflict/violence-affected areas. The ICRC requested all parties involved to guarantee safe access to these areas; it was also prepared to give emergency support as soon as the situation allowed. After receiving ICRC training and supplies, National Society branches in volatile areas conducted relief distributions independently and with ICRC staff.

During outbreaks of/upsurges in violence, particularly in December, National Society/ICRC operations focused almost exclusively on helping IDPs, wounded people (see *Wounded and sick*) and detainees (see *People deprived of their freedom*) meet their immediate needs and/or protect their livelihoods. As a result, some long-term projects – to upgrade water supply infrastructure, for instance – were delayed.

In places accessible to National Society/ICRC teams, conflict/violence-affected people benefited from emergency assistance. These areas included: Firka (Western Bahr al-Ghazal); Agok (which hosted people who had fled Abyei) and Jaac (Northern Bahr al-Ghazal); Shilluk Kingdom (Upper Nile); Bor and Waat (Jonglei); and Aweril (Lakes).

Nearly 70,000 people received food supplies that lasted for up to a month, partly easing the burden on communities hosting IDPs. Over 49,000 people improved their living conditions with materials – distributed by the ICRC – that were generally unavailable or expensive. They protected themselves from malaria using mosquito nets.

Over 147,000 residents and IDPs accessed clean water from facilities built or repaired by local technicians, National Society volunteers and the ICRC. In Jonglei and Unity, 37 technicians trained and equipped by the ICRC maintained water systems serving some 52,000 people. Improved access to water meant that people did not have to walk several kilometres through unsafe areas for it.

## **Communities improve their food security and increase their income**

Conflict/violence-affected households coped with the destruction/loss of their livelihood assets with ICRC support.

Over 5,000 households (30,900 people) diversified their diet with fish caught with ICRC-supplied equipment that they could easily carry away with them whenever they had to move to be safe. Some bartered their fish for household essentials.

Over 12,000 IDP and resident households (69,000 people) started/resumed farming and increased their food supply, following distributions of seed and tools. They included 2,000 households in Gumuruk (Jonglei) that had also received fishing kits. Most of them also benefited from the provision of foodstuff that helped prevent the consumption of grains meant for planting. During post-harvest surveys, beneficiaries in Gumuruk and Malakal reported that ICRC-supplied seed yielded 50–100% of their food production. Some sold their crops and/or saved enough seed for the next planting season.

Farming groups organized by the Ministry of Agriculture and Forestry with ICRC support increased the availability of seed in Western Equatoria. In 2012, 72 farmers received and planted

720 kilograms of maize. In 2013, they gave back the same amount of seed (out of their estimated yield of 3,600 kilograms), which was then distributed to other farmers.

Pastoralists, including in counties near the border with Sudan, maintained their herds' health aided by improved services provided by MARF/ICRC-trained animal health workers. After completing basic/refresher courses, 78 veterinary workers vaccinated/treated some 339,000 head of livestock belonging to over 24,000 households (133,000 people). Authorities from six states learnt – at a seminar – how to deal with outbreaks of animal disease.

Over 36,900 households (221,700 people) added to their food supply/income by fishing, farming or raising livestock, which also reduced their need to forage or hunt in insecure areas.

## **Dispersed family members restore contact**

The National Society, with training/technical/material ICRC support, strengthened its capacity to deliver family-links services. Family members separated by conflict/violence in South Sudan or abroad re-established contact through RCMs and phone services provided by the National Society/ICRC. Thirty-four people – including 23 separated/unaccompanied minors, of whom 10 were formerly associated with weapon bearers – rejoined their families, mainly in the Democratic Republic of the Congo (hereafter DRC), Sudan and Uganda.

During the crisis in December, unaccompanied minors were registered and phone services offered where security conditions allowed. Health personnel and National Society volunteers, using ICRC-supplied body bags, facilitated the management of human remains in a manner that would allow their identification in the future.

The ICRC pursued dialogue with the relevant authorities to enable families to contact relatives allegedly detained in South Sudan or abroad.

## **PEOPLE DEPRIVED OF THEIR FREEDOM**

### **POWs and civilians released in Sudan return home safely**

Five South Sudanese POWs voluntarily returned from Sudan, with the ICRC acting as a neutral intermediary in their repatriation (see *Sudan*). After being released by armed groups, three Sudanese women and their six children returned to Sudan, and 13 South Sudanese men came home from Sudan, with ICRC support. In addition, after their release, two former detainees went home, and two others returned voluntarily to the DRC, with the ICRC ensuring their safe transfer/repatriation.

At the South Sudanese government's request, the ICRC facilitated the repatriation, and handover to the South Sudanese authorities, of 36 armed group members detained in the Central African Republic. Seven sets of human remains were also repatriated. (See *Central African Republic*)

### **People held in prisons and military facilities receive ICRC visits**

The ICRC engaged in dialogue with the authorities, with a view to gaining access to everyone held in relation to the conflicts and increasing acceptance for its working methods. During seminars and meetings, officials from the Defence Ministry and military/police/penitentiary officers learnt more about international norms

governing detention and about the ICRC's standard procedures. The SPLA police drew on ICRC expertise for drafting detention standards.

Following written approval from the Ministry of Interior in December 2012, the ICRC visited detainees in prisons run by the National Prisons Service; the visits, conducted in accordance with its standard procedures, were undertaken to monitor treatment and living conditions. Five POWs and some people held in military facilities received similar visits. When clashes erupted in December, the ICRC checked on the welfare of detainees at a prison in Juba and at a military facility in Rubkona while seeking permission to visit those held in relation to the crisis.

After these visits, the ICRC sent the authorities its findings and recommendations in confidence. The authorities were also reminded of their responsibilities under IHL and other applicable law, including the principle of *non-refoulement*. Detainees exchanged news with their relatives through RCMs; 56 foreign inmates informed their respective embassies of their situation through the ICRC.

### **Detainees benefit from emergency assistance**

In areas affected by the clashes in December, two prisons (Bentiu and Malakal) overcame food shortages with ICRC-donated supplies; this sustained some 300 detainees for about two weeks. About 1,400 detainees in Juba regained access to water after two water tanks were replaced.

Following an assessment, the ICRC informed the authorities of the nutritional status of detainees in three prisons, with a view to encouraging them to tackle malnutrition. Detainees and prison staff learnt first aid and checked outbreaks of disease through hygiene promotion.

Over 2,600 inmates in prisons and military facilities received hygiene and household items to improve their living conditions. In one prison, a maintenance team composed of penitentiary staff ensured the facilities' upkeep with technical advice from the ICRC. Detainees at four prisons stood to benefit from long-term infrastructure projects initiated after the National Prisons Service's approval of an ICRC plan for improving detention facilities. However, the crisis in December caused these projects to be postponed.

## **WOUNDED AND SICK**

### **Despite difficulties, some wounded and sick people receive treatment**

Attacks on health facilities and threats against medical personnel narrowed the population's already limited access to health care. The ICRC urged all parties concerned – through public communication and confidential dialogue – to facilitate the safe delivery of medical services to all wounded/sick people. It addressed medical/surgical needs in close coordination with local health authorities and humanitarian organizations.

Where security conditions allowed, casualties received first aid from ICRC-trained National Society volunteers, who also transported them to hospitals. Weapon bearers, equipped with ICRC training/materials, also administered emergency care.

Seven hospitals coped with influxes of casualties with the help of ad hoc supply rations. Over 1,200 people received treatment at eight health facilities where doctors were assisted by ICRC surgical

teams working simultaneously, whenever possible, in both government- and opposition-controlled areas. For example, in July, while one team worked at a hospital in Bor, another – normally based at the MTH – provided surgical/obstetric care alongside Médecins Sans Frontières at a campsite in Dorain, where there was no other health facility. Hospitals in Bor and Nasir benefited from the services of a Canadian Red Cross surgical team, who came with medical supplies, beds and equipment that enabled the Bor hospital to treat more patients. In December, four ICRC surgical teams performed operations in Bentiu, Juba and Malakal.

In December, emergency water rations and the rehabilitation of its water supply system enabled a hospital in Juba (500 beds) to maintain its access to water.

### **Children receive care from ICRC paediatric team**

The MTH (292 beds) continued to serve a catchment population of 3 million with comprehensive ICRC support. Increased donations of supplies and fuel filled gaps caused by scarcity of funds and insecurity. Local personnel continued to hone their skills through training. Patients enjoyed better treatment conditions following infrastructural improvements – including the construction/rehabilitation of operating theatres and the renovation of a paediatric building – and the establishment of a maintenance team. Children received care from an ICRC paediatric team. Over 30,000 diagnostic tests were carried out at a newly constructed and equipped paediatric laboratory. Children and adults received physiotherapy from local staff coached by an ICRC physiotherapist, and were referred as needed to the Juba PRRC.

### **Persons with disabilities enhance their mobility and independence**

Nearly 2,000 disabled people underwent physical rehabilitation at ICRC-supported centres in Juba, Rumbek and Wau. Some 300 of them had their transportation, food and accommodation costs covered during their treatment.

Coordination with local authorities and humanitarian agencies facilitated the referral of patients to the PRRC. The donation of 12 sport wheelchairs to the South Sudan Wheelchair Basketball Association – which was broadcast over TV and radio – and the celebration of a national day for disabled people raised public awareness of the physical rehabilitation services available.

The Ministry of Gender, Child and Social Welfare, together with the ICRC, endeavoured to address challenges in managing the PRRC and enhancing the quality of its services. Representatives from various ministries considered measures – such as a possible increase in staff salaries – to address these challenges. Four students pursued ICRC-sponsored orthopaedic training abroad, which would eventually expand the pool of trained professionals.



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

### **Communities learn more about humanitarian principles**

Dialogue with local authorities and community leaders broadened acceptance of the Movement's work. Religious/traditional leaders, health workers and youth groups furthered their understanding of humanitarian principles and Movement activities through meetings with ICRC delegates and National Society/ICRC-facilitated dissemination sessions. A seminar for customs service staff, on the ICRC's mandate and legal status, sought to facilitate more efficient importation of supplies for assistance initiatives.

The public learnt more about ICRC activities through an online newsletter, radio spots and media coverage of the ICRC's work. An ICRC-organized workshop encouraged journalists to give IHL-related issues more coverage. Lecturers on law took part in a regional seminar (see *Nairobi*), which contributed to bolstering IHL expertise at the universities.

### **Members of the armed forces and other weapon bearers familiarize themselves with IHL**

Training sessions/reference materials for weapon bearers promoted compliance with IHL and support for ICRC activities, including in behalf of detainees (see *People deprived of their freedom*).

Some 100 armed group members learnt about IHL during dissemination sessions. These sessions often included first-aid training, but various constraints, impeding access and communication, prevented the ICRC from conducting most of its planned first-aid courses for armed groups.

About 3,700 SPLA troops and some 70 AU RTF personnel attended basic/refresher IHL training. Some 1,300 SPLA personnel attended train-the-trainer courses, which equipped them to provide better instruction in IHL. Various agencies that were instructing the SPLA in IHL and international human rights law identified gaps in training and strengthened their coordination through a meeting in December.

SPLA officials, including a military judge and a legal adviser, learnt more about incorporating IHL in military doctrine by participating in seminars abroad (see *International law and cooperation*). Discussions began with the SPLA police on drafting detention guidelines in line with applicable laws (see *People deprived of their freedom*).

### **National authorities develop expertise in IHL implementation**

Following South Sudan's accession in 2012 to the 1949 Geneva Conventions and their Additional Protocols, 24 officials from various ministries discussed the incorporation of IHL in domestic legislation at an ICRC-organized workshop. Two members of the Ugandan IHL committee shared their experiences in implementing IHL with the South Sudanese authorities. A legal adviser from the Defence Ministry learnt more about the subject during a regional seminar (see *Nairobi*).

With ICRC encouragement, the National Legislative Assembly approved South Sudan's accession to the Convention on the Rights of the Child and its Optional Protocols.

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

### **South Sudan Red Cross receives formal recognition within the Movement**

After implementing the recommendations of the ICRC/International Federation Joint Statutes Commission, the South Sudan Red Cross received formal recognition within the Movement. Training, funds and logistical support enabled it to work with the ICRC in providing emergency response, restoring family links and promoting IHL (see above). Nine new emergency-response teams were trained in key areas, including the Safer Access Framework.

The National Society, with ICRC input, developed a plan covering 2013–17 for strengthening its management and its assistance capacities.

All Movement partners met regularly to coordinate their activities.

MAIN FIGURES AND INDICATORS: PROTECTION	Total		
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>			
<b>Red Cross messages (RCMs)</b>		<b>UAMs/SCs*</b>	
RCMs collected	954	29	
RCMs distributed	632	14	
Phone calls facilitated between family members	1,642		
<b>Reunifications, transfers and repatriations</b>			
People reunited with their families	34		
<i>including people registered by another delegation</i>	5		
People transferred/repatriated	37		
Human remains transferred/repatriated	7		
<b>Tracing requests, including cases of missing persons</b>		<b>Women</b>	<b>Minors</b>
People for whom a tracing request was newly registered	253	26	35
People located (tracing cases closed positively)	83		
<i>including people for whom tracing requests were registered by another delegation</i>	9		
Tracing cases still being handled at the end of the reporting period (people)	333	31	48
<b>UAMs/SCs*, including unaccompanied demobilized child soldiers</b>		<b>Girls</b>	<b>Demobilized children</b>
UAMs/SCs newly registered by the ICRC/National Society	38	17	3
UAMs/SCs reunited with their families by the ICRC/National Society	23	16	10
<i>including UAMs/SCs registered by another delegation</i>	4		
UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period	16	2	
<b>Documents</b>			
Official documents relayed between family members across border/front lines	1		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>			
<b>ICRC visits</b>		<b>Women</b>	<b>Minors</b>
Detainees visited	3,254	151	198
Detainees visited and monitored individually	99	6	5
Detainees newly registered	95	6	5
Number of visits carried out	55		
Number of places of detention visited	16		
<b>Restoring family links</b>			
RCMs collected	209		
RCMs distributed	81		
Phone calls made to families to inform them of the whereabouts of a detained relative	127		
Detainees released and transferred/repatriated by/via the ICRC	7		
People to whom a detention attestation was issued	1		

\* 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	69,804	27%	52%
	<i>of whom IDPs</i>	63,827		
Essential household items	Beneficiaries	49,025	26%	52%
	<i>of whom IDPs</i>	32,774		
Productive inputs	Beneficiaries	221,745	22%	29%
	<i>of whom IDPs</i>	134,412		
Water and habitat activities	Beneficiaries	147,412	30%	40%
	<i>of whom IDPs</i>	53,068		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>				
<b>Economic security, water and habitat (in some cases provided within a protection programme)<sup>1</sup></b>				
Essential household items	Beneficiaries	2,623		
Water and habitat activities	Beneficiaries	1,400		
<b>WOUNDED AND SICK</b>				
<b>Hospitals</b>				
Hospitals supported	Structures	15		
	<i>of which provided data</i>	8		
Admissions	Patients	1,213	189	288
	<i>of whom weapon-wounded</i>	479	45	60
	<i>(including by mines or explosive remnants of war)</i>	22		
	<i>of whom other surgical cases</i>	728		
	<i>of whom gynaecological/obstetric cases</i>	6		
Operations performed		1,397		
Outpatient consultations	Patients	354		
	<i>of which surgical</i>	340		
	<i>of which gynaecological/obstetric</i>	14		
<b>Water and habitat</b>				
Water and habitat activities	Number of beds	792		
<b>Physical rehabilitation</b>				
Centres supported	Structures	3		
Patients receiving services	Patients	1,960	393	187
New patients fitted with prostheses	Patients	144	27	9
Prostheses delivered	Units	325	61	17
	<i>of which for victims of mines or explosive remnants of war</i>	56		
New patients fitted with orthoses	Patients	44	12	12
Orthoses delivered	Units	111	32	29
Patients receiving physiotherapy	Patients	877	210	88
Crutches delivered	Units	1,070		
Wheelchairs delivered	Units	141		

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