

# EUROPE AND CENTRAL ASIA

PROTECTION	Total
<b>CIVILIANS</b>	
<b>Restoring family links</b>	
RCMs collected	1,108
RCMs distributed	996
Phone calls facilitated between family members	4,581
Tracing cases closed positively (subject located or fate established)	686
People reunited with their families	24
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>	
<b>ICRC visits</b>	
Places of detention visited	121
Detainees in places of detention visited	60,449
<i>of whom visited and monitored individually</i>	706
Visits carried out	252
<b>Restoring family links</b>	
RCMs collected	908
RCMs distributed	740
Phone calls made to families to inform them of the whereabouts of a detained relative	247

EXPENDITURE IN KCHF	
Protection	42,382
Assistance	82,044
Prevention	19,119
Cooperation with National Societies	10,082
General	1,121
<b>Total</b>	<b>154,748</b>
<i>Of which: Overheads</i>	<i>9,028</i>

IMPLEMENTATION RATE	
Expenditure/yearly budget	91%

PERSONNEL	
Mobile staff	237
Resident staff (daily workers not included)	1,312

ASSISTANCE		2021 Targets (up to)	Achieved
<b>CIVILIANS</b>			
<b>Economic security</b>			
Food consumption	People	38,000	65,335
Food production	People	71,675	47,873
Income support	People	104,407	127,224
Living conditions	People	76,956	104,326
Capacity-building	People	6	8,086
<b>Water and habitat</b>			
Water and habitat activities	People	1,142,646	1,046,805
<b>Health</b>			
Health centres supported	Structures	61	75
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>			
<b>Economic security</b>			
Food consumption	People	2,640	
Living conditions	People	14,210	33,976
<b>Water and habitat</b>			
Water and habitat activities	People	7,855	13,519
<b>WOUNDED AND SICK</b>			
<b>Medical care</b>			
Hospitals supported	Structures	46	79
<b>Physical rehabilitation</b>			
Projects supported	Projects	10	11
<b>Water and habitat</b>			
Water and habitat activities	Beds (capacity)	3,225	1,556

**DELEGATIONS**

- Armenia
- Azerbaijan
- Balkans (regional)
- Brussels
- Georgia
- Greece
- London (regional)
- Moscow (regional)
- Paris (regional)
- Tashkent (regional)
- Ukraine

-  ICRC delegation
-  ICRC regional delegation
-  ICRC mission



The boundaries, names and designations used in this document do not imply official endorsement or express a political opinion on the part of the ICRC, and are without prejudice to claims of sovereignty over the territories mentioned.

# ARMENIA

The ICRC has been working in Armenia since 1992 in relation to the Nagorno-Karabakh armed conflict. It works to protect and assist communities affected by the conflict and seeks to address the issue of missing persons. It visits detainees held for conflict-related or security reasons. It promotes the national implementation of IHL and its integration into the armed and security forces' doctrine, training and sanctions and into academic curricula. The ICRC works in partnership with the Armenian Red Cross Society and aims to help strengthen its capacities.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

**HIGH**

## KEY RESULTS/CONSTRAINTS IN 2021

- The ICRC maintained dialogue with the sides to the conflict (see also *Azerbaijan*) on IHL and on the situation of civilians who were displaced or living near the international border.
- The Armenian Red Cross Society and the ICRC provided displaced people and their hosts, and people living near the international border, with household items such as hygiene kits, or with cash to help them cover their basic needs.
- The ICRC, together with the Armenian Red Cross Society, provided students with school supplies and psychosocial support, and schools with personal protective equipment (PPE); it also renovated sanitation facilities at schools.
- Hospitals and primary-health-care centres near the international border maintained or improved their services with medical supplies and other assistance from the ICRC.
- The ICRC supported forensic officials in identifying the remains of fallen combatants brought back from the battlefield.
- The ICRC gave particularly vulnerable detainees prepaid phone cards, and access to tracing services, to help them stay in touch with relatives. It also helped families to maintain contact with relatives detained in Azerbaijan.

## EXPENDITURE IN KCHF

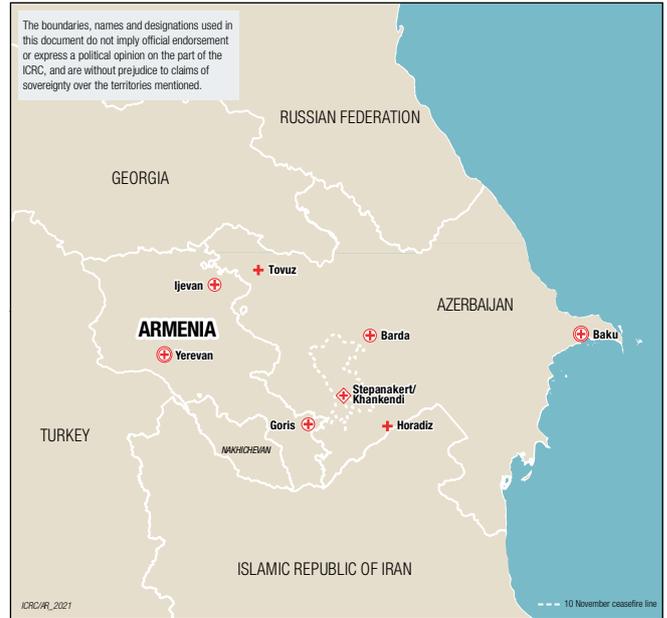
Protection	2,838
Assistance	5,704
Prevention	1,246
Cooperation with National Societies	1,126
General	44
<b>Total</b>	<b>10,959</b>
<i>Of which: Overheads</i>	<i>669</i>

## IMPLEMENTATION RATE

Expenditure/yearly budget	97%
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## PERSONNEL

Mobile staff	25
Resident staff (daily workers not included)	99



PROTECTION	Total
<b>CIVILIANS</b>	
<b>Restoring family links</b>	
RCMs collected	957
RCMs distributed	828
Phone calls facilitated between family members	592
Tracing cases closed positively (subject located or fate established)	195
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>	
<b>ICRC visits</b>	
Places of detention visited	10
Detainees in places of detention visited	1,630
<i>of whom visited and monitored individually</i>	37
Visits carried out	20
<b>Restoring family links</b>	
RCMs collected	2
Phone calls made to families to inform them of the whereabouts of a detained relative	160

ASSISTANCE	2021 Targets (up to)	Achieved
<b>CIVILIANS</b>		
<b>Economic security</b>		
Income support	People 6,000	40,834
Living conditions	People	4,337
Capacity-building	People	2,595
<b>Water and habitat</b>		
Water and habitat activities	People 300	609
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>		
<b>Economic security</b>		
Living conditions	People	557
<b>WOUNDED AND SICK</b>		
<b>Medical care</b>		
Hospitals supported	Structures 6	12
<b>Water and habitat</b>		
Water and habitat activities	Beds (capacity)	10

## CONTEXT

The Nagorno-Karabakh conflict intensified sharply in late 2020. Thousands of military and hundreds of civilian casualties were reported. A ceasefire agreement was brokered by the Russian Federation, and led to changes in territorial control and the deployment of Russian peacekeeping forces. Tens of thousands of civilians fled to Armenia when the fighting intensified, and though many returned home, thousands were still in communities – which did not have much capacity for supporting them – throughout Armenia.

The situation along the international border between Armenia and Azerbaijan remained tense; skirmishes took place regularly. Civilians living near the international border – some only newly exposed to military positions – were endangered by mines, explosive remnants of war (ERW) and military activity. This limited access to basic services, hindered the pursuit of livelihoods, and caused psychological distress. The COVID-19 pandemic and the restrictions necessitated by it made matters worse. The constant threat to life and property, and to public facilities such as schools, was also a source of psychological distress.

Meetings between high-level representatives of Azerbaijan and Armenia took place. The Minsk Group of the Organization for Security and Cooperation in Europe (OSCE), co-chaired by France, the Russian Federation and the United States of America, continued to lead the OSCE's efforts to find a peaceful solution to the Nagorno-Karabakh conflict.

Hundreds of people went missing during the intensification of the conflict and remained unaccounted for; this was in addition to the roughly 4,500 people who had been missing since the 1990s.

## ICRC ACTION AND RESULTS

The ICRC monitored the situation of civilians living near the international border and that of people who had fled to Armenia. It discussed with the sides to the conflict (see also *Azerbaijan*) the presence of armed forces in border areas and its effect on the free movement of civilians; the ICRC also submitted reports to them on the conduct of hostilities, with regard to IHL, during the intensification of the conflict in 2020.

Displaced people were given winter clothes, electric heaters, and hygiene kits and other household items to help them through the winter; families living near the international border or hosting displaced people were given cash to help them cover their expenses. Assessments conducted by the ICRC enabled it to identify and respond to a greater need for assistance than it had anticipated when it made its plans for the year, as the Nagorno-Karabakh conflict was a developing situation at the time.

Hundreds of people attended ICRC information sessions on safe practices around mines and ERW.

Together with the Armenian Red Cross Society, the ICRC worked to ensure safe access to educational opportunities for children affected by the conflict. It provided students with school supplies and psychosocial support, and schools with PPE; it also renovated sanitation facilities at schools.

The ICRC served as a neutral intermediary to the sides to the conflict in searching for and recovering the remains of fallen combatants. It reminded the authorities of their obligation to ascertain the fate of people missing in connection with conflict, including those who had gone missing in the 1990s; and it gave them support to this end. Members of families separated by armed conflict, detention or other circumstances located or contacted their relatives through family-links services provided by the National Society and the ICRC.

Hospitals and primary-health-care centres near the international border maintained or improved their services with medical supplies and other assistance from the ICRC. Medical professionals attended training in basic emergency care and/or mass-casualty management that was organized by the ICRC or by the WHO with ICRC support; the course in basic emergency care was designed jointly by the ICRC and the WHO, and intended to help hospitals with limited resources improve the quality and accessibility of their services.

The ICRC visited detainees in accordance with its standard procedures; it followed up people held in connection with the conflict and other vulnerable detainees. It gave particularly vulnerable detainees prepaid phone cards, and made tracing services available to them, to help them keep in touch with their relatives. It also helped families in Armenia to maintain contact with relatives detained in Azerbaijan – via RCMs, video messages and other means. The ICRC also provided one place of detention and the Center of Penitentiary Medicine with material support for protecting detainees against COVID-19.

The ICRC maintained close contact with various government officials and members of civil society, to preserve acceptance for its mandate and for its role of neutral intermediary. It resumed IHL promotion and training in IHL for military personnel, which it had put on hold in 2020.

Movement components in the country met regularly to coordinate their activities and consolidate lessons learnt.

## CIVILIANS

The ICRC monitored the situation of civilians living near the international border, and that of people who had fled to Armenia when the conflict intensified, and it communicated its findings to the sides to the conflict (see also *Azerbaijan*). It maintained its dialogue with them on IHL, and submitted reports to them on the applicability of IHL provisions to the conduct of hostilities during the intensification of the conflict in 2020. It also discussed with them the presence of armed forces in border areas and its effect on the free movement of civilians, to cultivate their land, for instance. The ICRC aimed to enable communities to farm safely, hold cultural events and repair communal facilities by notifying the sides of such activities.

### Members of separated families locate and contact relatives

Members of families separated by armed conflict, detention or other circumstances located and/or contacted their relatives through tracing, phone calls, and other family-links services provided by the Armenian Red Cross Society and the ICRC. The ICRC trained National Society volunteers and staff to provide

family-links services during emergencies. It also organized a round table for officials from the justice ministry and other government bodies on the National Society's family-links activities, with a view to facilitating those activities.

### **Authorities strive to prevent disappearances**

The sides to the conflict were reminded of their obligation to ascertain the fate of people missing in connection with conflict, including those who have been missing since the 1990s. The ICRC took steps to continue compiling information on missing-persons cases, with a view to sharing it with the authorities.

Forensic authorities involved in managing and identifying the remains of fallen combatants, brought back from the battle fields, discussed with the ICRC ways to coordinate their work more closely; the ICRC recommended that they standardize their data collection and centralize the storage of data. The ICRC gave them other guidance as well, and material support. It renovated cold-storage facilities and other infrastructure at morgues; provided DNA kits for the health ministry's Scientific-Practical Center of Forensic Medicine – Armenia's main medico-legal institution; trained forensic staff in data management; and instructed emergency-services personnel in the proper handling of human remains.

Aided by the ICRC, NGOs and associations of missing people's families strove to broaden public awareness of the plight of missing people's families, and draw the authorities' attention to their concerns; an assembly organized by the ICRC brought these groups together, to network and coordinate their efforts. The ICRC also provided one family association with ICT equipment.

### **Vulnerable communities cope with the consequences of conflict**

The ICRC, in cooperation with the Armenian Red Cross Society, continued to help communities to cope with the conflict's immediate and long-term effects on their lives, particularly on their safety, mental health, and socio-economic situation, and on children's access to education. Its efforts focused on two groups in particular: civilian victims of mines and ERW, and people living near the border with Azerbaijan. The ICRC sought to involve the authorities, local and international NGOs, and other organizations in its initiatives. It also kept up its efforts to persuade the authorities to take measures to make long-term improvements to the circumstances of these vulnerable groups.

Displaced people were given winter clothes, electric heaters, hygiene kits and other household items to help them through the winter, and families hosting displaced people were given cash to help them cover their additional expenses; some 10,800 households (33,000 people) benefited. Roughly 2,000 other households (7,800 people) – residents of communities along the international border – were also given cash to offset the economic consequences of their exposure to military activity, which constrained their movement and pursuit of their livelihoods. National Society personnel developed their ability to design and implement cash- and voucher-assistance programmes through ICRC training. The ICRC maintained stocks of food and household items throughout the year, for

immediate distribution during emergencies. Assessments conducted by the ICRC enabled it to identify and respond to a greater need for assistance than it had anticipated when it made its plans for the year, as the Nagorno-Karabakh conflict was a developing situation at the time.

About 2,000 people attended National Society and ICRC information sessions, where they learnt about conflict-related mental-health issues and the National Society/ICRC services available to address these. About 170 people experiencing psychological distress caused or exacerbated by the conflict were given psychosocial care by the National Society, the ICRC and ICRC-trained community volunteers. ICRC training and supervision helped prepare National Society volunteers to provide such care.

In child-friendly spaces built by the National Society and the ICRC at schools and shelters for displaced people, about 750 children received psychosocial support and/or took part in extracurricular learning activities organized by National Society volunteers. The ICRC also continued to work with the Republican Pedagogical-Psychological Centre to provide students with mental-health support at other schools. It trained teachers to do the same, and to cope with their own stress.

ICRC improvements to sanitation facilities at three schools enabled approximately 600 teachers and students to teach and learn in sanitary surroundings. At another school, the ICRC constructed a wall that gave students a degree of safety from military activity; numerous schools were also given construction materials for use in other renovations. Four schools were given electric heaters, and 23 schools stocked their safe rooms with sanitary kits, blankets and other necessities provided by the ICRC; a total of nearly 2,600 people benefited.

The ICRC provided PPE for 27 schools to help protect them against COVID-19, and provided displaced children with school bags and other school supplies; in all, over 4,000 people benefited. Remote learning was made possible for about 150 displaced children by tablet devices provided by the National Society and the ICRC.

Hundreds of people attended ICRC information sessions on safe practices around mines and ERW. These sessions were directed at two groups in particular: people living near the international border, especially teachers and students, and people who were displaced when the conflict intensified. The ICRC provided training and expert guidance for National Society personnel to organize such sessions. Personnel from the Armenian Centre for Humanitarian Demining and Expertise attended an ICRC training session on promoting risk awareness and safe practices, but administrative obstacles impeded plans to give the centre more support.

### **PEOPLE DEPRIVED OF THEIR FREEDOM**

The ICRC visited detainees in accordance with its standard procedures, and in line with COVID-19 safety protocols. It followed up particularly vulnerable detainees: people held in connection with the conflict or transferred to Armenia when it intensified in 2020; people serving life sentences; and foreigners. Findings from these visits, and recommendations

whenever necessary, were communicated confidentially to the detaining authorities, to help ensure that detainees' treatment and living conditions complied with IHL and/or met internationally recognized standards.

From 2022 onwards, the ICRC plans to make fewer visits to detainees whose detention is not connected to the conflict, in recognition of the progress made as a result of recent penitentiary reforms and of the work being done by other organizations in the country; it communicated this to the detainees concerned.

While the ICRC was not asked to help in the cross-border returns of people who were detained in connection with the conflict, it met with dozens of such people to more fully understand their past treatment and living conditions, and to see if they faced any pressing mental-health, legal or economic difficulties upon their release. Findings from these discussions were relayed to the pertinent authorities.

### **Detainees maintain contact with their relatives and benefit from improved living conditions**

The ICRC gave particularly vulnerable detainees prepaid phone cards, and made tracing services available to them, to help them keep in touch with their relatives. It also helped families in Armenia to maintain contact with relatives detained in Azerbaijan – via RCMS, video messages and other means. The ICRC spoke with the authorities about the importance of enabling detainees to stay in touch with their families.

The ICRC gave 17 particularly vulnerable detainees hygiene kits, clothes and/or other material aid; many of these detainees also received the phone cards mentioned earlier. The ICRC provided one place of detention and the Center of Penitentiary Medicine with PPE and disinfectants to protect nearly 550 people against COVID-19.

Justice ministry personnel drew on expert advice from the ICRC in their ongoing efforts to design and construct a new prison in line with international standards – to replace two older prisons that had been closed recently.

### **WOUNDED AND SICK**

Together with the Armenian Red Cross Society, the ICRC organized basic and advanced first-aid training for hundreds of rescue personnel, health workers, National Society volunteers, teachers, and other community members; schools, health posts and other community institutions were given first-aid supplies and equipment. The ICRC helped the National Society to host a joint emergency simulation exercise with rescue personnel from the Ministry of Emergency Situations in Tavush, which gave the National Society and the ministry an opportunity to practice coordinating their activities. The ICRC also helped the National Society to organize refresher training for its own first-aid instructors, but was unable to construct new first-aid training rooms for the National Society, as planned, owing to infrastructural constraints.

The ICRC provided medical supplies and equipment and other assistance for 12 hospitals and two primary-health-care centres in areas near the international border, to enable them to maintain or improve their services. Some of these hospitals

and health centres were also given PPE, cleaning agents, and other supplies for protection against COVID-19. The ICRC set up an oxygen network at one of the hospitals (10 beds), for treating people with COVID-19 and other respiratory conditions.

Medical professionals attended training in basic emergency care and/or mass-casualty management that was organized by the ICRC or by the WHO with ICRC support; the course in basic emergency care was designed jointly by the ICRC and the WHO, and intended to help hospitals with limited resources improve the quality and accessibility of their services. The ICRC also participated in a conference organized by Armenian medical professionals that sought to assess the medical response to the intensification of conflict in 2020; the ICRC made presentations on lessons learnt in reconstructive surgery, conflict-related mental-health issues, and other areas.

Aided by the ICRC, the state medical university made arrangements to send some staff members abroad for advanced training in emergency medical care, but it ultimately decided against doing so.

### **ACTORS OF INFLUENCE**

The ICRC worked to preserve acceptance for its mandate, and for its role of neutral intermediary, among the sides to the conflict (see also *Azerbaijan*). It strove to gain support for its activities to benefit displaced people, border communities, mine victims, detainees, and missing people and their families. To that end, it met with officials from the defence, foreign, and other national ministries; senior parliamentary officials; officials from the OSCE Minsk Group; defence attachés present in the country and other diplomats; and representatives from international NGOs.

Members of the local and international media drew from the ICRC's news releases and social-media posts to inform the public of the humanitarian needs created by the conflict and of the ICRC's activities. The ICRC distributed leaflets about its cash-assistance programme, which included instructions for providing comments and suggestions. It used social media and posters in public spaces to disseminate useful and important information about COVID-19 and mines and ERW; it helped the Armenian Red Cross Society to do so as well. The ICRC gave the National Society financial and other support to strengthen its public communication and broaden public awareness of its work.

### **Troops attend newly resumed IHL briefings and authorities work to improve IHL implementation**

The ICRC resumed IHL promotion and training in IHL for military personnel, which it had put on hold in 2020, because of the pandemic and the intensification of the conflict. Troops under the defence ministry, and personnel from the Ministry of Emergency Situations, both based in the Tavush region, learnt about IHL at ICRC information sessions and workshops. Sponsored by the ICRC, legal officers from the defence ministry attended a regional meeting in Kaliningrad, Russian Federation for military legal officers.

The ICRC submitted to the pertinent authorities draft amendments to the civil-defence law, which governs the operations

of civil-defence personnel along the international border. The ICRC's aim was to align the law more closely with IHL. It also provided the authorities with expert advice for implementing their Safe School Declaration, which seeks to make students and teachers near the international border safer and more resilient. Government officials learnt about the ICRC's updated commentaries to the Third Geneva Convention at a launch event organized by the ICRC and the Multidisciplinary Center on Public International Law.

### **Students advance their understanding of IHL**

Students from Armenia, and from the broader Eurasian region and beyond, furthered their understanding of IHL at ICRC events in the country: an IHL moot court competition drew students from seven Armenian universities, including two military universities; and roughly 80 people from 28 countries attended an IHL summer course organized jointly by the ICRC and the American University of Armenia. Students also took part in an IHL essay competition organized by the ICRC.

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

The Armenian Red Cross Society, the International Federation, the ICRC and other Movement components present in Armenia worked together to assist conflict-affected communities; they met regularly to coordinate their activities and consolidate lessons learnt.

The ICRC and the National Society worked together on many of their operational priorities, including their economic-security and first-aid programmes, and their efforts to ensure safe access to education for children (see *Civilians and Wounded and sick*). The ICRC also provided financial and other support for the National Society, with a focus on its work near the international border; notably, ICRC funding helped to renovate one of the National Society branches in a border area and disaster-response volunteers from that area developed their skills in search-and-rescue, first aid and other subjects at a training exercise that the ICRC helped to develop. Hundreds of National Society volunteers who distributed informational materials on COVID-19 were given PPE by the ICRC. Expert advice from the ICRC helped the National Society to take steps to bring its working procedures in line with the Safer Access Framework.

## MAIN FIGURES AND INDICATORS: PROTECTION

CIVILIANS		Total			
<b>RCMs and other means of family contact</b>			UAMs/SC		
RCMs collected		957			
RCMs distributed		828			
Phone calls facilitated between family members		592			
<b>Tracing requests, including cases of missing persons</b>			Women	Girls	Boys
People for whom a tracing request was newly registered		401	2		2
	<i>including people for whom tracing requests were registered by another delegation</i>	1			
Tracing cases closed positively (subject located or fate established)		195			
Tracing cases still being handled at the end of the reporting period (people)		722	27		7
	<i>including people for whom tracing requests were registered by another delegation</i>	3			
<b>Documents</b>					
People to whom official documents were delivered across borders/front lines		1			
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>					
<b>ICRC visits</b>			Women	Minors	
Places of detention visited		10			
Detainees in places of detention visited		1,630	63	6	
Visits carried out		20			
			Women	Girls	Boys
Detainees visited and monitored individually		37	3		
	<i>of whom newly registered</i>	31			
<b>RCMs and other means of family contact</b>					
RCMs collected		2			
Phone calls made to families to inform them of the whereabouts of a detained relative		160			
People to whom a detention attestation was issued		48			

## MAIN FIGURES AND INDICATORS: ASSISTANCE

CIVILIANS		Total	Women	Children
<b>Economic security</b>				
Income support	People	40,834	15,199	19,632
	<i>of whom IDPs</i>	33,090	12,878	16,539
Living conditions	People	4,337	452	3,646
	<i>of whom IDPs</i>	90	27	36
Capacity-building	People	2,595	980	725
<b>Water and habitat</b>				
Water and habitat activities	People	609	244	122
<b>Mental health and psychosocial support</b>				
People who received mental-health support		168		
People who attended information sessions on mental health		2,049		
People trained in mental-health care and psychosocial support		36		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>				
<b>Economic security</b>				
Living conditions	People	557	6	
<b>WOUNDED AND SICK</b>				
<b>Hospitals</b>				
Hospitals supported	Structures	12		
<b>Services at hospitals not monitored directly by ICRC staff</b>				
Weapon-wound admissions (surgical and non-surgical admissions)		*	*	*
Weapon-wound surgeries performed		*		
<b>First aid</b>				
First-aid training				
	Sessions	61		
	Participants (aggregated monthly data)	893		
<b>Water and habitat</b>				
Water and habitat activities	Beds (capacity)	10		

\* This figure has been redacted for data protection purposes. See the *User guide* for more information.

# AZERBAIJAN

The ICRC has been working in Azerbaijan since 1992 in relation to the Nagorno-Karabakh armed conflict. It works to protect and assist communities affected by the conflict and seeks to address the issue of missing persons. It visits detainees held for conflict-related or security reasons. It promotes implementation of IHL and its integration into armed and security forces' training and into academic curricula. The ICRC works in partnership with the Red Crescent Society of Azerbaijan and aims to help strengthen its capacities.

### YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

**HIGH**

### KEY RESULTS/CONSTRAINTS IN 2021

- The ICRC maintained dialogue with the sides to the conflict (see also *Armenia*) on IHL and on the situations of civilians who were displaced or living near military positions.
- Tens of thousands of conflict-affected people were given cash or food, hygiene kits, winter clothes and other material assistance to help them meet their essential needs and/or produce food and pursue livelihoods.
- The ICRC helped to sustain water and electricity infrastructure for tens of thousands of more people than planned. Public infrastructure damaged in the fighting was repaired with the ICRC's assistance.
- Wounded and sick people obtained emergency medical care from hospitals and primary-health-care centres supported by the ICRC.
- The ICRC served as a neutral intermediary in searching for and recovering the remains of fallen combatants. It gave the sides to the conflict support for identifying human remains and resolving missing-persons cases.
- The ICRC visited detainees, in accordance with its standard procedures, and gave them winter clothes, hygiene and recreational items, books and other materials to ease their living conditions.

### EXPENDITURE IN KCHF

Protection	7,180
Assistance	21,327
Prevention	1,335
Cooperation with National Societies	1,342
General	85
<b>Total</b>	<b>31,270</b>
<i>Of which: Overheads</i>	<i>1,889</i>

### IMPLEMENTATION RATE

Expenditure/yearly budget	88%
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### PERSONNEL

Mobile staff	46
Resident staff (daily workers not included)	211



PROTECTION	Total
<b>CIVILIANS</b>	
<b>Restoring family links</b>	
RCMs collected	47
RCMs distributed	44
Phone calls facilitated between family members	395
Tracing cases closed positively (subject located or fate established)	289
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>	
<b>ICRC visits</b>	
Places of detention visited	29
Detainees in places of detention visited	20,781
<i>of whom visited and monitored individually</i>	407
Visits carried out	96
<b>Restoring family links</b>	
RCMs collected	863
RCMs distributed	699
Phone calls made to families to inform them of the whereabouts of a detained relative	69

ASSISTANCE	2021 Targets (up to)	Achieved	
<b>CIVILIANS</b>			
<b>Economic security</b>			
Food consumption	People	12,500	26,461
Food production	People	51,750	27,235
Income support	People	76,150	70,719
Living conditions	People	12,500	28,922
Capacity-building	People		5,471
<b>Water and habitat</b>			
Water and habitat activities	People	27,700	88,726
<b>Health</b>			
Health centres supported	Structures		15
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>			
<b>Economic security</b>			
Living conditions	People		7,724
<b>WOUNDED AND SICK</b>			
<b>Medical care</b>			
Hospitals supported	Structures	4	7
<b>Water and habitat</b>			
Water and habitat activities	Beds (capacity)	100	23

## CONTEXT

The Nagorno-Karabakh conflict intensified sharply in late 2020. Thousands of military and hundreds of civilian casualties were reported. A ceasefire agreement was brokered by the Russian Federation, and led to changes in territorial control and the deployment of Russian peacekeeping forces. The situation at the international border between Azerbaijan and Armenia, and in other areas near military positions, remained tense; skirmishes took place.

Living conditions remained difficult for the tens of thousands of people who were displaced by the fighting and/or who were living in communities directly affected by it. Having lost property and livelihoods, and because of the damage done to civilian infrastructure, they struggled to meet their basic needs; many were psychologically traumatized. The dangers posed by mines and explosive remnants of war (ERW), and exposure to military activity, hindered agriculture and pursuit of other livelihoods.

Meetings between high-level representatives of Azerbaijan and Armenia took place. The Minsk Group of the Organization for Security and Cooperation in Europe (OSCE), co-chaired by France, the Russian Federation and the United States of America, continued to lead the OSCE's efforts to find a peaceful solution to the Nagorno-Karabakh conflict.

Hundreds of people went missing during the intensification of the conflict and remained unaccounted for; this was in addition to the roughly 4,500 people who had been missing since the 1990s.

Some families were still waiting for news of relatives in areas of Iraq and the Syrian Arab Republic formerly controlled by the Islamic State group; repatriated Azerbaijanis – including women and children – were reunited with their relatives and began the process of reintegration.

## ICRC ACTION AND RESULTS

The ICRC monitored the situation of civilians living near the international border and other military positions. It discussed with the sides to the conflict (see also *Armenia*) the presence of armed forces in civilian communities and its effect on the free movement of civilians; the ICRC also submitted reports to them on the applicability of IHL provisions to the conduct of hostilities during the intensification of the conflict in 2020. The aims of the ICRC's intersessions included enabling communities to farm safely and hold cultural events.

The ICRC served as a neutral intermediary to the sides in searching for and recovering the remains of fallen combatants. Training and expert guidance from the ICRC helped to ensure that remains were recovered in a way that was dignified and conducive to future identification. Members of separated families stayed in touch through the Movement's family-links services.

Tens of thousands of people – those displaced by the intensified fighting in 2020 or living in areas heavily affected by it; missing people's families; elderly people living alone; and other vulnerable groups – were given cash or food, and hygiene kits, winter clothes and other material assistance to meet their essential needs and/or produce food and pursue livelihoods.

Water and electrical utilities maintained or improved their services with assistance from the ICRC, which carried out repairs, and gave them spare parts, transport vehicles, and other equipment; in selected towns, the ICRC also installed water tanks and/or dug boreholes. The ICRC's sustained support for certain water boards, as their needs developed, resulted in many more people – tens of thousands – benefiting than planned. The ICRC provided support for making repairs to homes and public infrastructure such as schools and hospitals damaged in the fighting.

Students, teachers and others living near military positions, and missing people's relatives, were given psychological and/or psychosocial support by the ICRC and by ICRC-trained psychologists, psychiatrists and community members.

Hundreds of potential first responders developed their first-aid skills through ICRC training sessions. Wounded and sick people received emergency medical care at hospitals and primary-health-care centres supported by the ICRC.

ICRC information sessions enabled thousands of people – vulnerable residents, Azerbaijan Red Crescent Society volunteers, paramedics and others – to learn safe practices around mines and ERW.

The ICRC visited detainees in accordance with its standard procedures; it paid particular attention to people who were held in connection with the conflict and others who were particularly vulnerable. Detainees at several places of detention were treated for mental illnesses, under an ICRC-supported programme that screened detainees for mental-health issues. The ICRC donated winter clothes, hygiene and recreational items, and books and other materials to help ease detainees' living conditions.

The ICRC worked to preserve acceptance for its mandate, and its role of neutral intermediary, among the sides to the conflict. Its lectures – on basic IHL, and on its humanitarian mandate and activities – reached hundreds of military personnel. It kept the public abreast of its activities through regular briefings for the media and via social media.

The ICRC made follow-up visits to repatriated Azerbaijani children and the families with which they had been reunited. It relayed its findings to the pertinent government agencies, to help them address the complex needs of the children.

## CIVILIANS

The ICRC monitored the situation of civilians living near the international border and other military positions and in areas endangered by mines and ERW, and it communicated its findings to the sides to the conflict (see also *Armenia*). It maintained its dialogue with them on IHL, and submitted reports to them on the applicability of IHL provisions to the conduct of hostilities during the intensification of the conflict in 2020. It also discussed with them the presence of armed forces in border areas and its effect on the free movement of civilians, to cultivate their land, for instance. The ICRC aimed to enable communities to farm safely, hold cultural events and repair communal facilities by notifying the sides of such activities.

### The sides to the conflict seek to prevent disappearances

The ICRC reminded the authorities of their obligation to ascertain the fate of people missing in connection with conflict, including those who had been missing since the 1990s. It urged them to take steps to prevent further disappearances – for instance, by giving troops small metallic identification tags. It aided their efforts, for example, by tracing people's missing relatives, and by collecting hundreds of biological reference samples from missing people's relatives for use in identification processes.

The ICRC served as a neutral intermediary to the sides in searching for and recovering the remains of fallen combatants. Training and expert guidance from the ICRC helped to ensure that remains were recovered in a way that was dignified and conducive to future identification. Forensic authorities involved in managing and identifying these remains – and the remains of others, including COVID-19 victims – were also given expert advice and material support by the ICRC. The agencies concerned were given personal protective equipment (PPE), body bags, autopsy tables, cold-storage equipment and other forensic tools; the health ministry adopted new methods of forensic examination, based on ICRC recommendations. The ICRC renovated one morgue, increasing its storage capacity, and helped to organize coordination meetings for the different agencies involved in forensic work.

ICRC-trained psychologists and peer counsellors helped missing people's families to cope with the psychological consequences of not knowing the fate of their relatives; sometimes these counselling sessions took place – in-person or over the phone – on emotionally difficult occasions, such as the collection of biological reference samples.

Aided by the ICRC, missing people's families strove to broaden public awareness of their plight. The ICRC helped them to organize events and meetings, and some of their representatives participated in an international conference for missing people's families, organized by the ICRC (see *Operations*).

### Vulnerable communities cope with the consequences of conflict

The ICRC continued to help communities to cope with the conflict's immediate and long-term effects on their lives, particularly on their safety, mental health, socio-economic situation and access to essential services, including children's access to education. The ICRC sought to involve the authorities, local and international NGOs and other organizations in its initiatives in this regard. It also kept up its efforts to persuade the authorities to take measures to make long-term improvements to the circumstances of conflict-affected people. Assessments conducted by the ICRC enabled it to identify and respond to needs for assistance different from what it had anticipated when it made its plans for the year, as the Nagorno-Karabakh conflict was a developing situation at the time. As a result, certain activities benefited more people, and others fewer, than planned.

Tens of thousands of vulnerable people were able to meet their basic needs with the ICRC's assistance. Most of them had been displaced by the intensified fighting in 2020 and/or lived in areas heavily affected by it. Some 6,500 such households

(26,500 people) were given monthly food parcels, and about 6,600 of them (28,300 people) – many of whom had received the food parcels – got hygiene kits and other household items at distributions that continued until September.

About 15,800 households (64,000 people) were given cash grants to buy food and cover other essential expenses, or start or sustain livelihood activities. Most of them were displaced people or residents of communities heavily affected by the intensified fighting; there were also missing people's families, repatriated children and their caretakers, and elderly people living alone and other vulnerable groups among them. Some 1,400 households (5,500 people) who had lost access to their livelihoods started farming, using seed and agricultural tools from the ICRC. Roughly 1,200 children going to schools near the international border, and other military positions, were given school supplies.

About 6,000 food-producing households (27,200 people) were given cash grants, material support and other aid to help them recover the material losses inflicted upon them by the fighting or to continue their work more safely; for example, some whose grazing lands had become unsafe because of exposure to military positions fed their livestock with hydroponic fodder from the ICRC.

The ICRC trained Azerbaijan Red Crescent Society volunteers to implement economic-security projects and/or gave them on-the-job guidance.

Thousands of vulnerable people obtained services at 15 primary-health-care centres that received furniture and/or medical supplies and equipment from the ICRC (see *Wounded and sick*).

Water and electrical utilities maintained or improved their services with assistance from the ICRC, which carried out repairs, and gave them spare parts, transport vehicles, and other equipment; in selected towns the ICRC also installed water tanks and/or dug boreholes. The ICRC's sustained support for certain water boards, as their needs developed, resulted in many more people – tens of thousands – benefiting than planned. The ICRC provided material aid, and infrastructural assistance, for making repairs at damaged primary-health-care centres (see *Wounded and sick*) and the homes of some 600 people. It also helped to repair or upgrade infrastructure – including in connection with passive security measures – at schools serving some 6,300 students. About 2,000 students learnt about water conservation from ICRC posters and leaflets, or through an ICRC drawing competition; the ICRC also trained National Society volunteers to instruct children in these matters.

Students, teachers and others living near military positions were given psychological and/or psychosocial support by the ICRC and by ICRC-trained psychologists and psychiatrists; teachers, National Society volunteers and other community members learnt psychological self-care and also how to provide basic psychological and/or psychosocial support.

Over 120 schools were provided with disinfectants by the ICRC, and dozens of schools were provided with furnishings and

other supplies, or benefited from minor repairs and renovations carried out by the ICRC; approximately 5,500 students benefited. The ICRC provided some 600 particularly vulnerable students – repatriated Azerbaijani children, among others – with school uniforms, winter clothes and internet connectivity, or cash for buying these. Numerous schools were provided with school supplies for students, electric generators, and ICT equipment for conducting classes online.

Thousands of people – vulnerable residents, National Society volunteers, paramedics and others – learnt safe practices around mines and ERW at ICRC information sessions; these included group sessions at local commercial establishments, and door-to-door sessions by the ICRC and the National Society. Personnel from the Azerbaijan National Agency for Mine Action (ANAMA) attended ICRC first-aid training (see *Wounded and sick*). Humanitarian deminers benefited from ICRC training in the disposal of explosive ordinance and other areas; the ICRC also gave them PPE.

### Repatriated children maintain contact with relatives and receive support for social integration

The ICRC made follow-up visits to repatriated Azerbaijani children and the families with which they had been reunited. It relayed its findings to the pertinent government agencies, to help them address the complex needs of the children. RCMs and other ICRC family-links services helped them to stay in touch with their relatives. ICRC-trained psychologists provided mental-health and psychosocial support for the children and their relatives; school officials learnt about mental-health and psychosocial support through the ICRC. Some families were given cash grants or material support to help them cover basic needs and educational expenses (see above).

### PEOPLE DEPRIVED OF THEIR FREEDOM

The ICRC visited detainees in accordance with its standard procedures; it paid particular attention to people who were held in connection with the conflict, and particularly vulnerable detainees, such as those serving life sentences, foreigners and

people in prolonged pretrial detention. It shared its findings – and where necessary, its recommendations – with the authorities concerned, to help ensure that detainees' treatment complied with IHL and met internationally recognized standards.

Detention officials attended ICRC training in various areas, such as judicial guarantees, and international standards for arrests and probation.

Detainees maintained contact with their relatives through RCMs, phone calls, video messages and other means arranged by the ICRC; notably, the ICRC provided phone cards to foreign detainees and others having difficulty staying in touch with their families. Some families sent pictures and miscellaneous items to their detained relatives through the ICRC.

### Health care and living conditions improve for detainees

The ICRC continued to assist the authorities' efforts to bring health care for detainees, including mental-health care, up to internationally recognized standards. Thousands of detainees at numerous places of detention were medically screened on arrival and, when necessary, given treatment for mental-health issues, under an ICRC-supported programme of screening detainees for mental health; the programme also enabled the ICRC to provide prison psychologists with on-the-job training. Doctors at places of detention, many of them in charge of prison clinics, expanded their understanding of medical ethics through ICRC training. The ICRC helped the authorities to vaccinate roughly 32,000 detainees against COVID-19, by giving them PPE and cold-storage equipment.

The ICRC donated winter clothes, hygiene and recreational items, books and other materials to some 7,700 detainees. Among those assisted were hundreds of detained minors, who were also given educational resources. The ICRC provided about a dozen ex-detainees, originally held in connection with the conflict, with financial support for meeting their basic needs after their release.

PEOPLE DEPRIVED OF THEIR FREEDOM	Related to the Nagorno-Karabakh conflict	Not related to the Nagorno-Karabakh conflict
<b>ICRC visits</b>		
Places of detention visited	5	24
Detainees in places of detention visited	103	20,678
<i>of whom women</i>		612
<i>of whom minors</i>		37
Visits carried out	32	64
Detainees visited and monitored individually	103	304
<i>of whom women</i>		14
<i>of whom boys</i>		4
Detainees newly registered	102	162
<i>of whom women</i>		7
<i>of whom boys</i>		4
<b>RCMs and other means of family contact</b>		
RCMs collected	842	21
RCMs distributed	680	19
Phone calls made to families to inform them of the whereabouts of a detained relative	58	11
Detainees visited by their relatives with ICRC/National Society support		1
Detainees released and transferred/repatriated by/via the ICRC	7	

## WOUNDED AND SICK

Hundreds of potential first responders attended ICRC training in first aid, which included train-the-trainer sessions. Among the participants were students and teachers from schools near military positions; Azerbaijan Red Crescent Society volunteers; and paramedics, including ANAMA personnel. Schools and National Society branches were given first aid kits; other emergency responders received wound-dressing materials, neck braces, and spinal boards. International Federation and ICRC representatives met regularly with National Society personnel to give them expert advice for strengthening their first-aid programme.

Wounded and sick people obtained emergency medical care at seven hospitals and 15 primary-health-care centres (see *Civilians*) supported by the ICRC, and from 2 other primary-health-care centres supported by one of the hospitals, in part thanks to the ICRC's assistance. Material aid from the ICRC included surgical sets, spinal boards and blankets; one hospital was given an electric generator for emergency use. Financial and material support from the ICRC enabled two of the hospitals to renovate their emergency rooms, and equip them to a higher standard.

The ICRC provided PPE and disinfectants to one of the hospitals mentioned previously, and to a local agency specializing in epidemiological services, to help protect them against COVID-19. The hospital was also given spare parts for its oxygen generator; the agency received material and financial support for expanding its cold-storage capacity. The ICRC trained staff from ten primary-health care centres in managing COVID-19 patients and preventing the spread of the disease; it provided these centres with material support for vaccinations.

A physical rehabilitation centre (23 beds), two hospitals (total 30 consultations per day) and two primary-health-care centres (total 47 consultations per day) benefited from renovations and/or repairs carried out by the ICRC; this speeded up their recovery from the effects of the conflict's intensification in 2020, and helped to improve their services.

The ICRC referred repatriated children to health-care providers, and paid for their treatment.

Plans for courses in war surgery and basic emergency care could not be realized, owing to administrative constraints, which included issues concerning availability of the intended participants.

## ACTORS OF INFLUENCE

The ICRC worked to preserve acceptance for its mandate, and for its role of neutral intermediary, among the sides to the conflict. It strove to raise awareness of the humanitarian

consequences of the conflict, and to cultivate support for its activities (see *Civilians*, *Wounded and sick* and *People deprived of their freedom*; see also *Armenia*), among the authorities, the international community and civil society.

The ICRC's lectures – on basic IHL, and on its humanitarian mandate and activities – reached hundreds of military personnel. It also instructed senior military officers in integrating both IHL and international human rights law into their decision-making.

### Students and legal professionals strengthen their grasp of IHL

University students advanced their understanding of IHL at lectures and moot court competitions organized by the ICRC or with its assistance, and through an ICRC summer-school programme. Legal professionals attended specialized ICRC training in IHL, for use professionally.

### The media and members of the public stay abreast of the ICRC's activities

The ICRC kept the public informed of its work through regular briefings for the media and via social media; a brief documentary on mine victims produced by the ICRC, which also warned viewers of the dangerousness of mines and ERW, was aired on national television. The Azerbaijan Red Crescent Society and the ICRC met regularly to coordinate public communication about their activities. The ICRC helped train National Society volunteers to disseminate information about Movement services in conflict-affected areas. People enquired about the ICRC's programmes, and provided feedback on them, through hotlines set up by the ICRC for that purpose.

## RED CROSS AND RED CRESCENT MOVEMENT

The Azerbaijan Red Crescent Society, the International Federation, the ICRC and other Movement components present in Azerbaijan worked together to assist conflict-affected communities; they met regularly to coordinate their activities.

The ICRC gave the National Society expert advice, and material and financial support, for strengthening its organizational capacities, and its operational capacities in such areas as first aid, psychosocial care, public communication and water-and-habitat (see *Actors of influence*, *Civilians* and *Wounded and sick*). Much of the ICRC's support focused on the National Society's branches, and its emergency volunteer teams, in areas most heavily affected by the intensification of the conflict in 2020. The ICRC helped to ensure that the National Society's activities were carried out in line with the Safer Access Framework; for example, it organized basic and refresher sessions on the framework for National Society volunteers and staff, and provided them with suitable identification cards.

**MAIN FIGURES AND INDICATORS: PROTECTION**

<b>CIVILIANS</b>	<b>Total</b>			
<b>RCMs and other means of family contact</b>		<b>UAMs/SC</b>		
RCMs collected	47	1		
RCMs distributed	44			
Phone calls facilitated between family members	395			
<b>Tracing requests, including cases of missing persons</b>		<b>Women</b>	<b>Girls</b>	<b>Boys</b>
People for whom a tracing request was newly registered	141	10	6	7
Tracing cases closed positively (subject located or fate established)	289			
Tracing cases still being handled at the end of the reporting period (people)	4,592	380	81	124
<i>including people for whom tracing requests were registered by another delegation</i>	5			
<b>Unaccompanied minors (UAMs)/separated children (SC), including demobilized child soldiers</b>		<b>Girls</b>		<b>Demobilized children</b>
UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period	3	2		
<b>Documents</b>				
People to whom official documents were delivered across borders/front lines	1			
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>				
<b>ICRC visits</b>		<b>Women</b>	<b>Minors</b>	
Places of detention visited	29			
Detainees in places of detention visited	20,781	612	37	
Visits carried out	96			
		<b>Women</b>	<b>Girls</b>	<b>Boys</b>
Detainees visited and monitored individually	407	14		4
<i>of whom newly registered</i>	264	7		4
<b>RCMs and other means of family contact</b>				
RCMs collected	863			
RCMs distributed	699			
Phone calls made to families to inform them of the whereabouts of a detained relative	69			
Detainees visited by their relatives with ICRC/National Society support	1			
People to whom a detention attestation was issued	7			

## MAIN FIGURES AND INDICATORS: ASSISTANCE

CIVILIANS			Total	Women	Children
<b>Economic security</b>					
Food consumption	People		26,461	7,941	10,581
	<i>of whom IDPs</i>		22,660	6,797	9,066
Food production	People		27,235	11,015	5,329
	<i>of whom IDPs</i>		188	77	36
Income support	People		70,719	25,145	20,843
	<i>of whom IDPs</i>		60,466	21,558	17,356
Living conditions	People		28,922	8,013	12,936
	<i>of whom IDPs</i>		23,625	6,956	9,713
Capacity-building	People		5,471	457	4,749
	<i>of whom IDPs</i>		875	92	727
<b>Water and habitat</b>					
Water and habitat activities	People		88,726	1,008	3,879
<b>Primary health care</b>					
Health centres supported	Structures		15		
Average catchment population			1,255		
<b>Mental health and psychosocial support</b>					
People who received mental-health support			996		
People who attended information sessions on mental health			1,126		
People trained in mental-health care and psychosocial support			200		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>					
<b>Economic security</b>					
Living conditions	People		7,724	1,715	33
<b>Health care in detention</b>					
Places of detention visited by health staff	Structures		6		
Health facilities supported in places of detention visited by health staff	Structures		1		
<b>Mental health and psychosocial support</b>					
People who received mental-health support			1,556		
<b>WOUNDED AND SICK</b>					
<b>Hospitals</b>					
Hospitals supported	Structures		7		
<b>First aid</b>					
First-aid training					
	Sessions		42		
	Participants (aggregated monthly data)		594		
<b>Water and habitat</b>					
Water and habitat activities	Beds (capacity)		23		

# BALKANS (regional)

**COVERING:** Albania, Bosnia and Herzegovina, Bulgaria, Croatia, Montenegro, Republic of North Macedonia, Romania, Serbia, Slovenia, Kosovo\*

\*UN Security Council Resolution 1244

The ICRC has been working in the Balkans since the early 1990s. The organization strives to respond to the needs remaining from past armed conflicts in the region. In particular, it seeks to help clarify the fate of missing persons and to address the needs of their families. The ICRC visits detainees and works with the authorities and civil society to promote IHL and other humanitarian norms. It supports the development of the National Societies, particularly in strengthening their capacities to respond to emergencies, address the specific humanitarian needs of migrants, and help dispersed families restore contact.

### YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

**HIGH**

### KEY RESULTS/CONSTRAINTS IN 2021

- In line with its roadmap for the period 2018–2023, the ICRC continued its efforts to ascertain the fate of people missing in connection with past conflicts in the Balkans and address the needs of their families.
- The ICRC urged national authorities to ensure that forensic resources and capacities were adequate to the task of resolving missing-persons cases. It continued to help develop forensic capacities and standards in the region.
- Missing people’s families and other people in need in Bosnia and Herzegovina, Kosovo, and Serbia obtained mental-health and psychosocial support directly from the ICRC or from ICRC-supported local services.
- The ICRC visited detainees in Bosnia-Herzegovina, Kosovo, North Macedonia and Serbia. In May, it informed the North Macedonian and Serbian authorities of its decision to phase out its detention-related activities in their countries.
- Aided by the ICRC and other Movement components, the National Societies and Red Cross structures in the region responded to the needs of migrants and to those created by the COVID-19 pandemic.

### EXPENDITURE IN KCHF

Protection	4,287
Assistance	711
Prevention	701
Cooperation with National Societies	903
General	14
<b>Total</b>	<b>6,716</b>
<i>Of which: Overheads</i>	<i>410</i>

### IMPLEMENTATION RATE

Expenditure/yearly budget	92%
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### PERSONNEL

Mobile staff	23
Resident staff (daily workers not included)	69



ICRC regional delegation ICRC delegation ICRC mission \*UN Security Council Resolution 1244

PROTECTION	Total
<b>CIVILIANS</b>	
<b>Restoring family links</b>	
RCMs collected	21
RCMs distributed	20
Phone calls facilitated between family members	284
Tracing cases closed positively (subject located or fate established) <sup>1</sup>	75
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>	
<b>ICRC visits</b>	
Places of detention visited	8
Detainees in places of detention visited	1,839
<i>of whom visited and monitored individually</i>	43
Visits carried out	13
<b>Restoring family links</b>	
RCMs collected	3
RCMs distributed	3
Phone calls made to families to inform them of the whereabouts of a detained relative	8

ASSISTANCE	2021 Targets (up to)	Achieved
<b>CIVILIANS</b>		
<b>Economic security</b>		
Living conditions	People	42
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>		
<b>Economic security</b>		
Living conditions	People	261

1. Not including cases of persons missing in relation to the Croatia conflict 1991–1995 dealt with by the Croatian Red Cross and the Red Cross of Serbia

## CONTEXT

Balkan countries continued to grapple with issues related to past armed conflicts, particularly that of missing people. At a conference in London in 2018, the leaders of the countries in the region renewed their commitment to addressing this issue. On two separate occasions in 2020 – in Brussels and in Washington D.C. – Kosovo and Serbia agreed to make progress in the search for missing persons. In its strategy for the Balkans, the European Union (EU) made a specific commitment to enhancing engagement in solving the remaining missing-persons cases.

People alleged to have been involved in conflicts in countries outside the region – particularly in Iraq and the Syrian Arab Republic – and/or their families, returned to their countries of origin in the Balkans.

A new government was formed in Kosovo. Various socio-political issues have given rise to tensions and/or civil protests in some countries in the region. Tensions between Kosovo and Serbia escalated. Bosnia-Herzegovina has been gripped by a political crisis since August 2021.

Migrants, including refugees and asylum seekers, continued to pass through the region. The total number of new migrant arrivals in Europe reportedly decreased because of the COVID-19 pandemic; however, it was estimated that there were still some 25,000 migrants in the Balkans.

Mines and explosive remnants of war (ERW) continued to endanger people in parts of Bosnia-Herzegovina.

## ICRC ACTION AND RESULTS

In line with its roadmap for the period 2018–2023<sup>2</sup>, the ICRC continued its efforts to ascertain the fate of people missing in connection with past conflicts in the Balkans and address the needs of their families. The pandemic notwithstanding, field investigations, site assessments, and exhumations by the pertinent authorities and others continued, in line with COVID-19 safety protocols. The ICRC urged national authorities to ensure that forensic resources and capacities were adequate to the task of resolving missing-persons cases. It continued to help develop forensic capacities and standards in the region.

The ICRC strove to secure access, for humanitarian purposes, to more archives and other sources of information on gravesites. It continued, in its capacity as a neutral intermediary, to chair the working group on people missing in connection with past conflict in Kosovo. A total of 88 missing-persons cases<sup>3</sup> linked to past conflicts were resolved (44 in Bosnia-Herzegovina, 23 in Croatia, and 21 in Kosovo).

Efforts to help missing persons' families get the support they need continued. The ICRC assisted local services in Bosnia-Herzegovina, Kosovo and Serbia to provide mental-health and psychosocial support for missing people's families and other people in need, or did so itself, directly.

The ICRC monitored the situation of migrants in the countries covered: for instance, it visited the Lipa and Ušivak camps in Bosnia-Herzegovina and Afghan evacuees at two camps in Kosovo. It brought up migrants' protection-related concerns with the pertinent authorities and reiterated to them that the fundamental rights of all migrants, regardless of their status, must be respected. The Movement's family-links services helped people separated from their families, by migration and other circumstances, to restore or maintain contact with their relatives. The ICRC monitored the humanitarian needs of people alleged to have been involved in fighting in foreign countries; it discussed the matter with the pertinent authorities. It aided repatriated people, and sought to advance their social reintegration.

In accordance with its standard procedures, the ICRC visited detainees in Bosnia-Herzegovina, Kosovo, the Republic of North Macedonia (hereafter North Macedonia) and Serbia. It communicated its findings and where necessary, its recommendations, confidentially to the pertinent authorities, to help them improve detainees' treatment and living conditions. In May, the ICRC informed North Macedonian and Serbian authorities of its decision to phase out its detention-related activities in their countries; however, it will stand ready to conduct visits to people detained in connection with conflicts outside the region. Masks, disinfectants and other supplies to protect against COVID-19 were given to detainees in Bosnia-Herzegovina. The ICRC provided the Bulgarian and Croatian National Societies with financial (in terms of positions) and technical (in terms of coaching and training) support to visit and assist detained migrants.

The ICRC continued to engage with authorities and other actors of influence, with a view to broadening understanding of and building support for its work and that of its Movement partners, and ensuring that the issue of missing people remained a matter of priority.

Aided by the ICRC, National Societies and Red Cross structures developed their organizational and operational capacities, including their ability to address the needs created by the pandemic, in line with the Safer Access Framework.

## CIVILIANS

The ICRC continued to implement activities, in line with its roadmap for 2018–2023, to speed up the resolution of 9,925 missing-persons cases linked to past armed conflicts in the Balkans, and to address the needs of the families concerned. Field investigations, site assessments, and exhumations by the pertinent authorities and others continued, in accordance with COVID-19 safety protocols. The ICRC urged national authorities to ensure that forensic resources and capacities were adequate to the task of resolving missing-persons cases. It helped develop forensic capacities and standards in the region.

2. The roadmap has been extended from 2022 to 2023.

3. Apart from those reported by the Croatian Red Cross, all figures on missing people mentioned in this report are from the ICRC's records, which are based on tracing requests submitted by the families of missing people. In Bosnia-Herzegovina, the authorities work from lists that are more comprehensive and contain higher figures.

## **Efforts to resolve missing-persons cases continue despite the pandemic**

Since launching its roadmap, the ICRC had, at the time of reporting, contacted 42 states, eight international/inter-governmental organizations – e.g. the EU, NATO, the UN – and others, and requested information from their archives that might be of use in searching for gravesites for humanitarian purposes; tens of thousands of documents have been collected. In 2021, the ICRC urged pertinent parties to make more sources of information accessible to it.

### ***Bosnia-Herzegovina conflict 1992–1995***

In 2021, 44 missing-persons cases linked to past conflict in Bosnia-Herzegovina were resolved. At year's end, 6,340 cases were still open.

The ICRC searched archives – including those of the International Residual Mechanism for Criminal Tribunals (IRMCT), the Office of the High Representative in Bosnia and Herzegovina, and the Norwegian defence ministry – for information on potential gravesites. Direct access to national military archives in Bosnia-Herzegovina was granted to the ICRC. The ICRC reviewed and analyzed documents from the archives to which it had access; it shared what it found with the Missing Persons Institute (MPI) of Bosnia-Herzegovina. The MPI undertook field trips and exhumed human remains. The ICRC provided the MPI with material assistance; this included a field vehicle, nine desktop computers, and filing cabinets. The ICRC, the IRMCT and the MPI explored possibilities for using innovative technologies to search for gravesites and missing people; a pilot project for testing geological technologies got under way in late June.

The ICRC organized a workshop, to develop guidelines for exhumations and excavations, for the MPI's board of directors and representatives of the Prosecutor's Office; the head of the IRMCT's office in Bosnia-Herzegovina also participated in the workshop, as a member of the working group on missing people in Bosnia-Herzegovina. The ICRC kept up its efforts to mobilize forensic professionals and others in Bosnia-Herzegovina to establish an institute of forensic medicine and adopt medico-legal frameworks and/or standard procedures to ensure that human remains, including the remains of dead migrants, were accorded due respect and dignity. It also helped reinforce forensic capacities: for instance, it renovated the autopsy room in the Institute of Forensic Medicine at the University of Sarajevo, the Odžak Ossuary and the mortuary of the Vosko city cemetery. The ICRC gave several forensic institutions material support; this included donations of body bags, IT equipment and instruments for autopsies. Four forensic pathologists were sponsored or otherwise supported to attend meetings or courses of pertinence to their work.

### ***Kosovo conflict 1998–1999***

In 2021, 21 missing-persons cases linked to past conflict in Kosovo were resolved. At year's end, 1,621 cases were still open.

In its capacity as a neutral intermediary, the ICRC chairs the working group on people missing in relation to past conflict in Kosovo. The group met once in Belgrade, Serbia, in April; its analysis team and the sub-working group on forensic issues met four times each. The ICRC's regional director for

Europe and Central Asia met with diplomats, government officials, including the prime minister and the president, and other influential figures during his visit to Kosovo in June. He emphasized to these government officials and others the necessity of reinforcing the institutions tackling the issue of missing people in Kosovo – the Government Commission on Missing Persons, the Pristina delegation to the ICRC-chaired working group, and the Institute of Forensic Medicine – with the resources, expertise and authority necessary to fulfil their mandates. The ICRC also met regularly with the Serbian commission on missing people. Following an invitation from the EU, the ICRC provided an update on the activities of the working group during a meeting between the governments of Serbia and Kosovo in Brussels, in September.

The ICRC prepared reports based on its analyses of documents from national and international archives and submitted them to the pertinent authorities; it also gave them satellite images and other pertinent materials. This led to the finding of a few gravesites.

The ICRC maintained its dialogue with national and international stakeholders on the implementation of a by-law governing the organization and structure of the Institute of Forensic Medicine in Kosovo, and other matters related to forensic work. It provided the Institute of Forensic Medicine with body bags, storage shelves and other material assistance. Within the framework of the working group on people missing in connection with the past conflict in Kosovo, the ICRC assisted in the repatriation and handover of human remains between Kosovo and Serbia.

### ***Croatia conflict 1991–1995***

The Croatian Red Cross reported that 23 missing-persons cases linked to past conflict in Croatia were resolved in 2021. At year's end, 1,964 cases were still open.

The Croatia-Serbia working group on people missing in connection with the Croatian conflict did not meet in 2021.

The ICRC met with officials from the Directorate of Detained and Missing and the Institute of Forensic Medicine and Criminalistics in Zagreb, Croatia to discuss various forensic issues in connection with missing people.

## **Missing people's families and others receive psychosocial support**

Several activities in support of missing persons' families and their communities in Bosnia-Herzegovina, Kosovo and Serbia have been carried out since the launching of the roadmap. These include activities undertaken to understand these families' needs more fully, and work done with those who can address these needs. In 2021, the ICRC sustained these efforts and helped the families get the support that they need. Relatives of missing people obtained psychosocial, legal and other support; this was provided by associations of missing people's families and other organizations, and National Societies and Red Cross structures, all of which received material, financial and technical assistance, and/or training, from the ICRC. Notably, in Kosovo, 267 families of missing persons participated in nine social and recreational projects implemented by family

associations and Red Cross structures, with ICRC support. In Bosnia-Herzegovina, 2,050 relatives of missing people benefited from 15 psychosocial support projects run by associations of missing people's families with financial assistance from the ICRC. Postgraduate students in Bosnia-Herzegovina continued to receive scholarships for doing interdisciplinary research on issues confronting missing people's families.

The ICRC assisted local services in Bosnia-Herzegovina, Kosovo and Serbia to provide mental-health and psychosocial support for missing people's families and others in need, or provided such support directly; a total of 176 people benefited. The Red Cross of Serbia and the ICRC launched a pilot project in the city of Kragujevac to provide mental-health and psychosocial support to families of missing persons and draw attention to their plight and specific needs. In Bosnia-Herzegovina, the ICRC conducted mental-health and psychosocial support sessions for National Society staff and volunteers dealing with migrants. These activities took into account the issues created by the pandemic. The ICRC shifted its plans in Bosnia-Herzegovina to organize training for local professionals in mental-health and psychosocial support for the children of people alleged to have been involved in fighting in countries outside the region, towards organizing workshops on psychological self-care for those involved in repatriating families of people alleged to have been involved in fighting in foreign countries. In Kosovo, the ICRC held a two-day session on tackling the psychological and psychosocial consequences of a relative's disappearance with two regional centres for mental health.

### The Movement responds to the protection-related concerns of migrants

In coordination with National Societies and Red Cross structures, and the IOM and the UNHCR, the ICRC continued to monitor the situation of migrants in the Balkans: for instance, it visited the Lipa and Ušivak camps in Bosnia-Herzegovina, and Afghan evacuees at two camps in Kosovo. It brought up migrants' protection-related concerns with the pertinent

authorities and reiterated to them that the fundamental rights of all migrants must be respected. ICRC training helped police officers in Bosnia-Herzegovina to familiarize themselves with effective methods of community-oriented policing that took into account the concerns of the local population and the needs and rights of migrants. The police in Sarajevo and in the Una-Sana Canton were given face masks to protect themselves against COVID-19. In Bosnia-Herzegovina, the ICRC gave the National Society financial support to train 1,200 police officers in first aid. In Croatia, the Croatian Red Cross and the ICRC trained border police working at three immigration detention centres in basic human rights and in the use of force within the context of migration.

The ICRC monitored the humanitarian needs of people alleged to have been involved in fighting in countries outside the region and/or the needs of their families; it discussed the matter with the pertinent authorities. It strove to advance the socio-economic reintegration of repatriated people by offering or providing, whenever possible, family-links services and material and other support. In Kosovo, 11 families with repatriated citizens (42 people) were given household essentials by the ICRC.

The Movement's family-links services helped people separated from their families, by migration and other circumstances, to restore or maintain contact with their relatives. The ICRC helped National Societies and Red Cross structures in the region to develop their family-links capacities and publicize family-links services, including among migrants. With the help of National Societies or Red Cross structures in the region, the ICRC provided people with travel documents and/or attestations to the disappearance or detention of relatives.

The ICRC continued to check on the situation of people resettled in the Balkans after their release from the US detention facility at the Guantanamo Bay Naval Station in Cuba. Whenever necessary, it helped them to maintain contact with their relatives.

CIVILIANS	Bosnia and Herzegovina	Croatia	Kosovo	Republic of North Macedonia	Serbia
<b>RCMs and other means of family contact</b>					
RCMs collected	10		8	1	2
<i>including from unaccompanied minors (UAMs)/separated children (SC)</i>					
RCMs distributed	11		7	1	1
<i>including from UAMs/SC</i>					
Phone calls facilitated between family members	281				3
Names published on the ICRC family-links website	6,516		1,642		
<b>Tracing requests, including cases of missing persons<sup>4</sup></b>					
People for whom a tracing request was newly registered	2				
Tracing cases closed positively (subject located or fate established)	47		28		
Tracing cases still being handled at the end of the reporting period (people)	6,372	20	1,654		
<i>of whom women</i>	952	6	249		
<i>of whom minors at the time of disappearance – girls</i>	85		24		
<i>of whom minors at the time of disappearance – boys</i>	258		92		
<b>Documents</b>					
People to whom travel documents were issued					11

4. Not including cases of persons missing in relation to the Croatia conflict 1991–1995, dealt with by the Croatian Red Cross and the Red Cross of Serbia

## PEOPLE DEPRIVED OF THEIR FREEDOM

The ICRC visited, in accordance with its standard procedures, detainees in Bosnia-Herzegovina, Kosovo, North Macedonia and Serbia; 43 detainees, including those held in connection with fighting elsewhere, were monitored individually. The ICRC communicated its findings and where necessary, its recommendations, confidentially to the pertinent authorities, to help them improve detainees' treatment and living conditions. In May, the ICRC informed the pertinent North Macedonian and Serbian authorities of its decision to phase out its detention-related activities in their countries; however, it will stand ready to conduct visits to people detained in connection with conflicts outside the region.

In 2020, the ICRC made recommendations to the authorities for revising a draft law regulating the Kosovo Correctional Service; it followed this up in 2021. In Bosnia-Herzegovina, a workshop for staff at one prison – on detainees' access to educational, vocational and other activities contributory to their well-being – had to be cancelled because of a COVID-19 outbreak at the facility. In Kosovo, the ICRC gave the Kosovo Correctional Service books and recreational items for detainees.

In Bosnia-Herzegovina, the ICRC helped to arrange a family visit for one detainee. It donated phone cards to an immigration

detention centre, to help detained migrants stay in touch with relatives. Masks, hand sanitizer and other supplies to protect against COVID-19 were distributed to 200 detainees at two facilities and 61 migrants at one immigration detention centre.

The ICRC provided the Bulgarian and Croatian National Societies with financial and technical support to visit and assist detained migrants. An ICRC detention doctor met with Bulgarian Red Cross staff to discuss health-related issues in places of detention. The Bulgarian Red Cross, with support from the ICRC, organized a workshop on immigration detention for European National Societies. Staff at two immigration detention facilities in Bulgaria learnt about human rights and policing within the context of migration, through an online workshop organized by the National Society and the ICRC. In North Macedonia, the programme for visiting immigration detention facilities was discontinued in June, as the National Society did not sign the necessary memorandum of understanding with the interior ministry. The ICRC wrapped up its detention-related activities in Hungary at the beginning of 2021 and prepared a report summarizing its recent work in immigration detention in the country. The findings and recommendations of the report were discussed with the authorities.

PEOPLE DEPRIVED OF THEIR FREEDOM	Bosnia and Herzegovina	Croatia	Kosovo	Republic of North Macedonia	Serbia
<b>ICRC visits</b>					
Places of detention visited	3		3	1	1
Detainees in places of detention visited	485		971	370	13
<i>of whom women</i>	4				
Visits carried out	6		5	1	1
Detainees visited and monitored individually	9		29	2	3
Detainees newly registered	6		11	1	
<b>RCMs and other means of family contact</b>					
RCMs collected	2		1		
RCMs distributed	3				
Phone calls made to families to inform them of the whereabouts of a detained relative	8				
Detainees visited by their relatives with ICRC/National Society support	1				
People to whom a detention attestation was issued	29	47	34		

## ACTORS OF INFLUENCE

The ICRC pursued various forms of engagement with national authorities and other influential actors, with a view to encouraging domestic implementation of IHL-related treaties; raising awareness of issues of humanitarian concern; and building support for its work and that of its Movement partners. Where possible, these activities took place in person, in line with COVID-19 safety protocols. However, the pandemic hindered the full implementation of some planned activities.

When he visited Kosovo in June, the ICRC's regional director for Europe and Central Asia met with the president, the prime minister, the speaker of the Assembly of Kosovo, and other key actors. He brought them up to date on the progress made in searching for missing people and explained that an increase in political commitment is needed for further progress.

During a visit to the Lipa camp in Bosnia-Herzegovina (see *Civilians*), the ICRC and its Movement partners discussed humanitarian issues related to migration with the EU's Commissioner for Home Affairs. Similar discussions also took place between the ICRC, its Movement partners and the Italian members of the European Parliament.

### The ICRC promotes IHL and other applicable norms among the authorities in the region

The ICRC discussed the domestic implementation of IHL and the ratification of IHL-related treaties with the pertinent authorities in the countries covered, and the existing national IHL committees; it continued to offer them its legal and technical expertise. It involved students and academics throughout the region in IHL-related activities. For instance, together with the University of Sarajevo, it organized an online

course in IHL that was attended by 51 students from Bosnia-Herzegovina, Croatia and Serbia.

In Serbia, the ICRC actively contributed to a working group set up by the Ministry of Labour, Employment, Veterans and Social Affairs to draft a law concerning missing people.

Law enforcement officers in Bosnia-Herzegovina and Croatia strengthened their grasp of international standards for the use of force, and other related subjects, through ICRC training (see *Civilians*). During a military training exercise in Serbia, the ICRC made presentations about its activities and IHL.

The ICRC and its Movement partners broadened awareness of issues of humanitarian concern in the region. National Societies and Red Cross structures were helped to strengthen their capacities in public communication, including IHL promotion. The ICRC supported the organization of various events in the region to commemorate missing people. In Bosnia-Herzegovina, officials from the MPI and the IRMCT met with associations of missing people's families at an event organized by the ICRC; the aim of the event was to improve communication between the family associations and actors involved in resolving missing-persons cases.

## RED CROSS AND RED CRESCENT MOVEMENT

The ICRC provided National Societies and Red Cross structures in the region with support for developing their organizational and operational capacities, in line with the Safer Access Framework. It helped Movement components in the region broaden the scope of their partnerships, including in protection-related activities for migrants, and fostered coordination and cooperation among them. The National Societies and Red Cross structures in the region carried out a broad range of activities in response to the pandemic – such as supporting vaccination programmes, distributing food and hygiene items to vulnerable people, and conducting communication campaigns about COVID-19 – with financial and other support from the ICRC.

Aided by the Bosnia and Herzegovina Mine Action Centre and the ICRC, the Red Cross Society of Bosnia and Herzegovina developed online tools for mine-risk education and organized activities to broaden awareness of the threat of mines. The National Society, with the ICRC's assistance, trained new instructors in mine-risk education.

## MAIN FIGURES AND INDICATORS: PROTECTION

CIVILIANS		Total			
<b>RCMs and other means of family contact</b>			UAMs/SC		
RCMs collected		21			
RCMs distributed		20			
Phone calls facilitated between family members		284			
Names published in the media					
Names published on the ICRC family-links website		8,158			
<b>Tracing requests, including cases of missing persons<sup>5</sup></b>			Women	Girls	Boys
People for whom a tracing request was newly registered		2			
Tracing cases closed positively (subject located or fate established)		75			
Tracing cases still being handled at the end of the reporting period (people)		8,046	1,207	109	350
<b>Documents</b>					
People to whom travel documents were issued		11			
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>					
<b>ICRC visits</b>			Women	Minors	
Places of detention visited		8			
Detainees in places of detention visited		1,839	4		
Visits carried out		13			
			Women	Girls	Boys
Detainees visited and monitored individually		43			
	<i>of whom newly registered</i>	18			
<b>RCMs and other means of family contact</b>					
RCMs collected		3			
RCMs distributed		3			
Phone calls made to families to inform them of the whereabouts of a detained relative		8			
Detainees visited by their relatives with ICRC/National Society support		1			
People to whom a detention attestation was issued		110			

## MAIN FIGURES AND INDICATORS: ASSISTANCE

CIVILIANS		Total	Women	Children
<b>Economic security</b>				
Living conditions	People	42	11	31
<b>Mental health and psychosocial support</b>				
People who received mental-health support		176		
People trained in mental-health care and psychosocial support		29		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>				
<b>Economic security</b>				
Living conditions	People	261	20	
<b>Health care in detention</b>				
Places of detention visited by health staff	Structures	1		

5. Not including cases of persons missing in relation to the Croatia conflict 1991–1995 dealt with by the Croatian Red Cross and the Red Cross of Serbia

# BRUSSELS

**COVERING:** Institutions of the European Union, NATO, Belgium

The ICRC has been working in Brussels since 1999, building strong institutional and operational relations with European Union institutions, NATO and Belgium. It aims to make the ICRC’s mandate better known, to mobilize political, diplomatic and financial support for its activities and to ensure that relevant military decision makers in Western Europe view the ICRC as the main reference point for neutral, impartial and independent humanitarian action, as well as for IHL.

YEARLY RESULT	
Level of achievement of ICRC yearly objectives/plans of action	HIGH

EXPENDITURE IN KCHF	
Protection	721
Assistance	176
Prevention	2,553
Cooperation with National Societies	280
General	30
<b>Total</b>	<b>3,760</b>
<i>Of which: Overheads</i>	229

IMPLEMENTATION RATE	
Expenditure/yearly budget	89%

PERSONNEL	
Mobile staff	3
Resident staff (daily workers not included)	39

## CONTEXT

The European Union (EU) remained involved in crisis management and conflict resolution throughout the world. At year’s end, 18 civilian or military missions – undertaken within the framework of the EU’s Common Security and Defence Policy, and overseen by the European External Action Service (EEAS) – were in progress in various parts of Africa, Europe and the Middle East. Some EU missions aimed to provide training and other capacity-building support to government security and defence forces: for instance, an EU military training mission in Mozambique was launched in October, and EU civilian and military missions continued to advise and train security and defence forces in the Sahel region of Africa.

The EU handled humanitarian affairs primarily through the European Commission’s (EC) Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO). Various working parties under the Council of the EU tackled humanitarian issues and IHL-related matters.

NATO’s defence- and security-related endeavours continued. In February, NATO announced that it was expanding its mission to build capacities among government forces in Iraq. Its mission to train, advise and assist security forces in Afghanistan ended in September.

Belgium remained committed to supporting principled humanitarian action and the development, implementation and promotion of IHL. Its capital, Brussels, was a hub for diplomats, academics, NGOs and media organizations.

The COVID-19 pandemic continued to have serious consequences throughout the world. Many European governments imposed lockdowns and other measures necessary to contain the spread of the disease.

## ICRC ACTION AND RESULTS

The ICRC continued to engage, both virtually and, where possible, in person with EU institutions – particularly the EC, EEAS, Council of the EU and its presidency and working parties, and the European Parliament – and with EU member states, NATO officials, military staff from the EU and NATO, Belgian authorities, and other influential parties in Brussels. It did so in order to ensure that humanitarian concerns and IHL were given proper consideration in their work and to strengthen support among them for its mandate and activities.

### Authorities in Brussels consult the ICRC on humanitarian issues

During dialogue with the EU, NATO and the Belgian government, the ICRC shared experiences from its operations to draw attention to humanitarian needs in places affected by armed conflict or other situations of violence – such as Afghanistan, Ethiopia, Mozambique, the Syrian Arab Republic and the Sahel region. It discussed various matters from a humanitarian perspective, including: the COVID-19 pandemic, especially the necessity of ensuring that COVID-19 vaccines reach people in conflict-affected areas; the combined effects of conflict and the climate crisis on communities; the plight of migrants, especially those who have gone missing, lost touch with their families or died while in transit; the situation of people from Europe alleged to have been involved in fighting in the Middle East, and that of their families; sexual violence; and the humanitarian-development-peace nexus. It also engaged with them on IHL-related topics, including new technologies in warfare and protection of the natural environment during armed conflict.

The ICRC continued to advocate protection for impartial humanitarian work from the adverse consequences of sanctions and counter-terrorism measures. During meetings with officials from EU member states and the EC, it discussed

ways to mitigate these consequences – such as including clauses to this end in EU policy documents.

Field-level dialogue between the ICRC and the EU was reinforced through various engagements in Brussels, such as an ICRC-organized virtual round table on conflict in the Sahel at which ICRC and EU officials discussed concrete steps to strengthen the humanitarian response in the region and ensure respect for IHL; the discussions also aimed to ensure that these matters were given due consideration in the EU's revised strategy for the region.

The ICRC worked to reinforce its engagement with ECHO, and maintained its dialogue with the Belgian government, in order to strengthen support among them for its activities. It also initiated discussions with the EC's Directorate-General for International Partnerships and other EU institutions, with a view to diversifying its sources of funding.

### **ICRC expertise in IHL helps shape various policies and military doctrine and training**

NATO continued to draw on ICRC support to implement IHL and its protection-of-civilians policy. ICRC contributions helped deepen discussions on these subjects during NATO military exercises and training courses. The ICRC provided informational materials and other support for the development of a NATO-UN online course on the protection of civilians. It also gave NATO expert assistance in drafting or revising doctrine and policies, such as those concerning detention, and military operations in urban environments.

The ICRC continued to engage with EU and NATO bodies involved in planning and implementing civilian and/or military missions about strengthening compliance with IHL among parties to armed conflict supported by them. This subject was also addressed during NATO training exercises, in the ICRC's contributions to NATO policymaking, and during discussions with the Council of the EU on strengthening implementation of EU guidelines for promoting compliance with IHL. The ICRC discussed with EEAS officials the risks and opportunities inherent in ensuring respect for IHL in support relationships, in order to ensure that these were taken into account as they developed the strategic and operational plans for the EU's mission in Mozambique.

ICRC lectures, briefings, webinars and other events – some organized jointly with the College of Europe, the Network on Humanitarian Assistance or the Belgian Red Cross – helped academics, legal experts, members of civil society, and

officials from the EU, NATO and the Belgian government to expand their knowledge of IHL and related issues such as urban warfare and autonomous weapons systems. The 22nd Bruges Colloquium on IHL drew around 400 people from more than 50 countries, who participated either online or in person in interactive sessions where they discussed the continuing relevance of IHL and the updated ICRC Commentaries on the 1949 Geneva Conventions and their 1977 Additional Protocols.

### **Detaining authorities strive to ensure detainees' well-being**

In line with a memorandum of understanding signed with the justice minister in 2018, the ICRC visited detainees in Belgium, in accordance with its standard procedures, paying close attention to people held in connection with "terrorism". It conducted a total of 28 visits to 13 places of detention and discussed its findings and recommendations confidentially with authorities at prison and central levels, to help them ensure that detainees' treatment and living conditions were in line with internationally recognized standards. The ICRC made its expertise available to detaining authorities, to help them strengthen the delivery of health services and prevent and manage the spread of COVID-19 in places of detention; for example, it advised them in formulating a strategy for vaccinating prison staff and detainees against COVID-19.

### **NGOs and Movement components work together to strengthen support for humanitarian action**

The ICRC maintained its dialogue with the Red Cross EU Office, the Belgian Red Cross, the International Federation and Movement platforms such as the European Legal Support Group, in order to present a strong Movement position to the EU and Belgian authorities on such issues as migration and the climate crisis. Together with other Movement components, the ICRC also exchanged information on the humanitarian-development-peace nexus and other matters of common concern with Médecins Sans Frontières, Voluntary Organisations in Cooperation in Emergencies, and other humanitarian actors in Brussels.

The delegation used its social-media account and engaged with media organizations to relay humanitarian messages and broaden awareness of the ICRC's work among influential parties in Brussels, and the general public. The ICRC also continued to conduct joint communication initiatives with ECHO in EU member states: a short film produced by the ICRC and ECHO on the protection due to medical services was shown in cinemas in Portugal and reached around 900,000 people, and a photo exhibition on urban warfare was launched in Brussels in December.

# GEORGIA

The ICRC has been present in Abkhazia, Georgia proper and South Ossetia since 1992. It helps the authorities resolve cases of missing persons and respond to the concerns of their families. It acts as a neutral intermediary to help mitigate the impact of the demarcation of administrative boundaries. It visits detainees and provides assistance to families of people alleged to have been involved in conflicts abroad. It promotes the national implementation of IHL and its integration into armed and security forces' operations and into academic curricula. The ICRC helps the Georgia Red Cross Society strengthen its capacities.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

HIGH

## KEY RESULTS/CONSTRAINTS IN 2021

- Efforts to resolve missing-persons cases from past armed conflicts continued. The remains of 28 people were handed over to the families concerned in Abkhazia, Georgia proper and South Ossetia.
- Aided by the ICRC, vulnerable people with no other sources of support in Abkhazia and South Ossetia met their immediate needs, and some economically vulnerable families in Georgia proper launched small businesses.
- People rejoined relatives or received medical treatment on the other side of an administrative boundary after the ICRC, acting as a neutral intermediary, made the necessary arrangements with the pertinent authorities.
- The ICRC provided cold-chain equipment, generators, personal protective equipment (PPE), tents, IT equipment, financial contribution for repairing an oxygen station, and other support for local vaccination campaigns against COVID-19 in Abkhazia and South Ossetia.
- The ICRC visited detainees to check on their treatment and living conditions. Detainees maintained contact with relatives on the other side of an administrative boundary through the ICRC's family-links services.

## EXPENDITURE IN KCHF

Protection	4,230
Assistance	507
Prevention	660
Cooperation with National Societies	296
General	105
<b>Total</b>	<b>5,799</b>
<i>Of which: Overheads</i>	<i>354</i>

## IMPLEMENTATION RATE

Expenditure/yearly budget	84%
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## PERSONNEL

Mobile staff	18
Resident staff (daily workers not included)	106



⊕ ICRC delegation ⊕ ICRC mission ⊕ ICRC presence

PROTECTION	Total
<b>CIVILIANS</b>	
<b>Restoring family links</b>	
RCMs collected	26
RCMs distributed	15
Phone calls facilitated between family members	15
Tracing cases closed positively (subject located or fate established)	36
People reunited with their families	19
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>	
<b>ICRC visits</b>	
Places of detention visited	7
Detainees in places of detention visited	4,260
<i>of whom visited and monitored individually</i>	14
Visits carried out	10
<b>Restoring family links</b>	
RCMs collected	7
RCMs distributed	5

ASSISTANCE	2021 Targets (up to)	Achieved
<b>CIVILIANS</b>		
<b>Economic security</b>		
Food consumption	People	240 / 477
Living conditions	People	253 / 1,292
Capacity-building	People	6 / 20
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>		
<b>Economic security</b>		
Living conditions <sup>1</sup>	People	87

1. Owing to operational and data collection constraints, this figure may not reflect the extent of the activities carried out during the reporting period.

## CONTEXT

Demarcation of the administrative boundaries between Abkhazia and Georgia proper, and between Georgia proper and South Ossetia, continued. Movement across the administrative boundary between Georgia proper and Abkhazia was restored to pre-pandemic parameters in July 2021, which meant people were allowed to cross for medical reasons or to visit relatives in Georgia proper; however, the number of reported crossings was less than before the pandemic. Restrictions on movement across the other boundary remained in place; the *de facto* authorities eased these restrictions slightly, to allow specific categories of the population to cross into Georgia proper – mainly for medical reasons – and then return to South Ossetia.

Over 2,300 people were still unaccounted for in connection with the 1992–1993 armed conflict in Abkhazia and the armed conflicts of the 1990s and 2008 in South Ossetia. Some 380 sets of human remains, recovered during the search for missing people in past years, were still unidentified.

People were detained in Abkhazia, Georgia proper and South Ossetia on charges of unauthorized movement across the administrative boundaries, or for security reasons. Many of them needed assistance to contact their families.

A number of Georgian nationals were alleged to have been involved in conflict in other countries. Some members of their families, including children, were back in Georgia proper; others were still unable to return.

## ICRC ACTION AND RESULTS

The ICRC continued to respond to the needs of people in Abkhazia, Georgia proper and South Ossetia who were enduring the effects of past conflicts and the pandemic. The ICRC was the only Movement component present in Abkhazia and South Ossetia, and the only international organization doing humanitarian work in South Ossetia.

Two ICRC-chaired coordination mechanisms continued their work on resolving missing-persons cases linked to past conflicts: the remains of more than two dozen people were identified and handed over to the families concerned in Abkhazia, Georgia proper and South Ossetia. The ICRC continued to collect and consolidate ante-mortem data, biological reference samples from missing people's families, and information on potential burial places. It helped build local capacities in solving missing-persons cases, by organizing training sessions and webinars for forensic specialists in Abkhazia, Georgia proper and South Ossetia.

The ICRC provided missing people's families in Abkhazia, Georgia proper and South Ossetia with financial and other support for organizing events and launching initiatives to commemorate their missing relatives. Families in Georgia proper received psychosocial support from the ICRC's local partners ahead of excavations and following identification and handover of human remains.

The ICRC strove to draw authorities' attention to the needs of people affected by the demarcation of administrative

boundaries. It served as a neutral intermediary to help people in South Ossetia cross an administrative boundary to reach health facilities, and to reunite families separated by an administrative boundary. It donated food, hygiene items, household essentials and informational materials on COVID-19 to vulnerable people in Abkhazia and South Ossetia, including people with no other sources of support. Medical structures in Abkhazia and South Ossetia were given PPE and cold-chain equipment and other supplies, to help them extend their vaccination campaigns against COVID-19 to remote communities.

The Georgia Red Cross Society and the ICRC implemented livelihood-support projects for families of Georgian nationals alleged to have been involved in conflict in other countries. The ICRC and the Georgian authorities continued to discuss the families' needs and means of supporting the social reintegration of repatriated families.

The ICRC visited detainees in Georgia proper in accordance with its standard procedures. It made ad hoc visits to some detention facilities in Abkhazia and South Ossetia. Detainees maintained contact with relatives through the ICRC's family-links services.

In all its interaction with the Georgian authorities, the *de facto* authorities in Abkhazia and South Ossetia, members of the international community, and other key parties, the ICRC sought to gather support for IHL and its own humanitarian activities, and to draw attention to issues of humanitarian concern. It used traditional and social media to publicize the plight of missing people's families and its own activities in behalf of people affected by the demarcation of administrative boundaries.

The ICRC continued to help the Georgian military integrate IHL into its operations. IHL training for weapon bearers in Abkhazia was postponed to 2022.

The National Society received various forms of support from the ICRC and other Movement components for its pandemic response and for strengthening its organizational and operational capacities.

## CIVILIANS

### Efforts to solve missing-persons cases continue

The two ICRC-chaired coordination mechanisms – one with Abkhaz and Georgian participants, for persons missing in connection with the 1992–1993 armed conflict, and the other with Georgian, Russian and South Ossetian participants, for persons missing in connection with the armed conflicts in the 1990s and 2008 – continued their work to solve missing-persons cases. During periodic high-level meetings, the ICRC engaged all sides, as well as members of the international community, in dialogue on the necessity of agreeing on a new set-up and way of working in which the sides do most of the work necessary to ascertain the fate of missing people – so as to make efforts to address the issue more sustainable and effective.

Within the framework of the mechanisms mentioned above, the ICRC, together with local forensic specialists, kept up efforts to

recover and identify the remains of missing people. A total of 24 burial sites were excavated, and the remains of 21 people recovered. The ICRC continued to collect and consolidate ante-mortem data and biological reference samples from missing people's relatives and information on potential burial places from different sources. An ICRC genetic team continued to review all genetic data as part of quality control, in an effort to increase DNA matching, and thus identification of missing persons; the team also continued to provide support to 13 different contexts outside Georgia. Reconciliation of data on missing people and human remains – collected in 2021 and earlier – led to the handover of 28 identified missing persons to the families concerned in Abkhazia, Georgia proper and South Ossetia, with the ICRC acting as a neutral intermediary whenever required.

The ICRC strove to build local capacities in several aspects of the search for missing persons, to enable local structures, eventually, to solve missing-persons cases. A group of local university students and graduates in Abkhazia – trained by the ICRC in forensic matters – formed an NGO that will work with the ICRC in solving missing-persons cases. Several ICRC-trained local forensic experts and specialists in Georgia proper continued to promote, through their NGO, the development of forensic anthropology, odontology and archaeology. Some 20 people from Abkhazia, Georgia proper and South Ossetia – including members of the two NGOs mentioned above – attended ICRC-organized training or refresher sessions and webinars on various aspects of forensic work. Local specialists in Abkhazia and Georgia proper received on-the-job coaching in forensic casework and other matters.

The ICRC monitored the situation at mortuaries and health facilities in Abkhazia, Georgia proper and South Ossetia, and when needed, donated forensic equipment, body bags and PPE.

A study of the current legal framework governing the issue of missing people in Georgia proper, including recommendations for legislative reform, was finalized and will be submitted to the Georgian authorities in 2022.

### **Missing people's families receive psychosocial support**

The ICRC sought to have a fuller understanding of the current needs of missing people's families in Abkhazia, Georgia proper and South Ossetia; to this end, it interviewed more than 170 people, including 157 families of missing people. It will discuss the families' needs, and its recommendations for addressing these needs more comprehensively, with the pertinent authorities in 2022.

The ICRC raised awareness of the plight of missing people's families – through dialogue with the pertinent authorities and through TV spots, a social-media campaign, and commemorative events. In Abkhazia, Georgia proper and South Ossetia, the families and other local stakeholders organized and launched, with financial and other support from the ICRC, various events and initiatives to commemorate their relatives, such as flower-laying and candle-lighting ceremonies. A memorial for missing people, commissioned by the ICRC, was inaugurated in Tbilisi in September. In Abkhazia, the

ICRC and its local partners began collecting – for a memory book project – stories about missing people shared by their families. Families of missing people took part in an international conference, organized online by the Central Tracing Agency (see *Operations*).

The ICRC and its local partners in Georgia proper provided psychosocial support for missing people's families through individual and group sessions, notably during difficult moments, such as before excavations or after the identification and handover of their relatives' remains. The ICRC's local partners – which included NGOs and the Georgia Red Cross Society – attended ICRC training and refresher sessions on mental-health and psychosocial support; representatives of missing people's families attended sessions on psychological self-care.

The ICRC continued to provide a working group of academics with technical support for teaching and conducting research into the "ambiguous loss" experienced by missing people's families in Georgia proper. Some 200 university students learnt more about this subject through lectures organized by the working group.

### **People affected by movement restrictions, and other vulnerable people, receive assistance**

In its discussions with the pertinent authorities, the ICRC emphasized the humanitarian needs of people affected by the demarcation of administrative boundaries. Acting as a neutral intermediary, it facilitated reunification of families separated by an administrative boundary; it also delivered administrative documents (e.g. birth and employment certificates) across administrative boundaries. In coordination with the pertinent authorities, the ICRC enabled people in South Ossetia to cross an administrative boundary to reach health facilities, and return afterwards. When patients died, the ICRC helped return their bodies to South Ossetia.

ICRC distributions of food and household essentials helped prevent destitution among vulnerable people in Abkhazia and South Ossetia, such as those who were bedridden or elderly and living alone, or living in remote areas with no other sources of support. ICRC food assistance reached 477 people; distributions of hygiene items, household essentials, cash grants for starting small businesses (see below), reusable face masks and/or informational materials on COVID-19 reached 1,292. Some elderly people in South Ossetia were also helped through administrative procedures (e.g. claiming pensions or renewing identity documents) or given walking aids or wheelchairs. The ICRC, sometimes with local social workers, visited 12 elderly and impaired people in South Ossetia to deliver water and other essentials, and to help with household chores. The ICRC was unable to realize its intention to hand over these tasks to local social workers; it will discuss the matter with the *de facto* authorities in 2022.

The ICRC continued to discuss, with the Georgian authorities, the needs of the families of Georgian nationals alleged to have been involved in conflict in other countries, and the necessity of facilitating the social reintegration of repatriated

families. Nine economically vulnerable families launched small businesses after the ICRC, working with the Georgia Red Cross Society, gave them cash grants and training in business skills. Three other families were given financial and material support. The ICRC was able to locate some people – still in other countries – whose families had asked to trace them; the families were duly notified.

The National Society continued to strengthen its family-links services, with training and other support from the ICRC. It adopted Family-links Answers, a case-management system developed by the ICRC for National Societies.

People who had resettled in Georgia proper after being released from the US detention facility at the Guantanamo Bay Naval Station in Cuba expressed no need for the ICRC to follow them up.

### **The ICRC supports vaccination campaigns against COVID-19**

The ICRC advocated the inclusion of remote communities and minority ethnic groups in local vaccination campaigns against COVID-19. It donated cold-chain equipment (notably, refrigerators and a freezing chamber) and generators to the health structures in Abkhazia and South Ossetia, for transporting vaccines to remote areas.

The ICRC provided health structures in Abkhazia with PPE, tents, computers and other IT equipment, heaters, disinfectants and other supplies for setting up vaccination sites; a total of 16 health structures received PPE and disinfectants. It also gave financial support for repairing an oxygen compression station to ensure the supply of oxygen for health structures treating COVID-19 patients.

The ICRC assisted the National Society's efforts in support of vaccination campaigns against COVID-19 throughout Georgia proper (see *Red Cross and Red Crescent Movement*).

## **PEOPLE DEPRIVED OF THEIR FREEDOM**

### **Detainees are visited by the ICRC and maintain contact with their families**

The ICRC visited, in accordance with its standard procedures, detainees at four facilities in Georgia proper, to check on their treatment and living conditions; findings and recommendations were communicated confidentially to the detaining authorities.

The ICRC visited, on an ad hoc basis, a detainee held by the *de facto* interior ministry in Abkhazia, and detainees held at two facilities by the *de facto* interior and justice ministries in South Ossetia. It pursued dialogue with the *de facto* authorities on its standard procedures for prison visits, and on securing more regular access to all detainees within its purview.

Detainees used RCMs to maintain contact with relatives on the other side of an administrative boundary; the ICRC also relayed parcels from their families to some detainees. With ICRC financial support, all detained female foreigners (51 people) in Georgia proper made phone calls to their relatives abroad. The ICRC provided hygiene kits to 313 female inmates. Prison libraries in Georgia proper received 271 books from the ICRC.

One person held by the *de facto* interior ministry in South Ossetia was visited by his relatives from Georgia proper after the ICRC made the necessary arrangements with the pertinent authorities.

The ICRC provided 87 people held in two detention facilities in South Ossetia with hygiene kits. To help prevent the spread of COVID-19 in places of detention, it provided the *de facto* authorities in Abkhazia with PPE, disinfectants, and supplies to enable physical distancing in medical examination rooms.

The ICRC and the Georgian authorities continued to discuss ongoing and future penitentiary reforms in Georgia proper. The ICRC provided expert advice on such matters as prison management and assessment of risks associated with restrictive detention procedures.

## **ACTORS OF INFLUENCE**

In its dialogue with the Georgian authorities and the *de facto* authorities in Abkhazia and South Ossetia, and in all its interaction with members of the international community and other key parties, the ICRC sought to promote IHL, cultivate support for its activities, and draw attention to issues of humanitarian concern. ICRC social-media posts, news releases and media interviews raised the public's awareness of the plight of missing people's families and the ICRC's humanitarian work in behalf of people affected by the demarcation of administrative boundaries. Media organizations cited the ICRC's role of neutral intermediary and reported on some of its activities, such as medical transfers and family reunifications across administrative boundaries.

The ICRC discussed the Convention on Enforced Disappearance with the Georgian authorities, and the necessity of acceding to it, to facilitate the creation of robust domestic legal and procedural frameworks for addressing the issue of missing people. Officials from the foreign and justice ministries took part in IHL seminars organized online by the ICRC.

### **The Georgian armed forces continue to integrate IHL into their operations**

Georgian military instructors trained some 200 Georgian military personnel in IHL; the ICRC attended these sessions as an expert observer. Some 80 other Georgian military personnel, including 25 military lawyers, took part in ICRC workshops on IHL. The ICRC continued to give the Georgian military expert advice for reviewing its field manuals on compliance with IHL, and for translating the ICRC's study on customary IHL into Georgian. It also made expert contributions on IHL-related matters to meetings organized by the Georgian military ahead of the 2022 NATO–Georgia Exercise.

IHL training for the *de facto* armed forces of Abkhazia was postponed to 2022.

### **University students add to their knowledge of IHL**

The ICRC gave the national IHL committee expert guidance and other support for promoting IHL in academic circles in Georgia proper. Roughly 100 law students learnt more about the ICRC's mandate, and domestic implementation of IHL, at ICRC guest lectures. University students competed in a national

moot court competition organized online by the Ministry of Justice and the ICRC. An ICRC article, about legal classification of armed conflict and the international norms applicable, was translated into Georgian and distributed to local universities.

In Abkhazia, the ICRC organized IHL training and competition for university students of law and history.

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

The Georgia Red Cross Society drew on comprehensive support from the ICRC and other Movement components to carry out its activities and expand its organizational and operational capacities. The National Society and the ICRC worked together to provide family-links services and assist missing people's families and others in need (see *Civilians*).

Aided by the ICRC and the International Federation, the National Society assisted vaccination campaigns against

COVID-19 throughout Georgia proper: it conducted information sessions and distributed leaflets about the vaccine, including to remote communities and members of minority ethnic groups. The National Society used technical advice and other support from the ICRC to expand its capacities in such areas as conducting public communication about the Movement's activities; organizing training in first aid; mobilizing and managing financial and other resources; and carrying out activities in line with the Fundamental Principles and the Safer Access Framework. At the ICRC's recommendation, the National Society established two new branches: one in a remote community, and another in a community consisting mainly of members of a minority ethnic group; it mobilized and trained volunteer groups at these new branches.

The position to bolster the fundraising capacities of National Societies in the region remained vacant.

**MAIN FIGURES AND INDICATORS: PROTECTION**

<b>CIVILIANS</b>		<b>Total</b>			
<b>RCMs and other means of family contact</b>			<b>UAMs/SC</b>		
RCMs collected		26			
RCMs distributed		15			
Phone calls facilitated between family members		15			
<b>Reunifications, transfers and repatriations</b>					
People reunited with their families		19			
People transferred or repatriated		496			
Human remains transferred or repatriated		66			
<b>Tracing requests, including cases of missing persons</b>			<b>Women</b>	<b>Girls</b>	<b>Boys</b>
People for whom a tracing request was newly registered		40	6	1	2
Tracing cases closed positively (subject located or fate established)		36			
<i>including people for whom tracing requests were registered by another delegation</i>		1			
Tracing cases still being handled at the end of the reporting period (people)		2,371	385	34	27
<i>including people for whom tracing requests were registered by another delegation</i>		2			
<b>Documents</b>					
People to whom official documents were delivered across borders/front lines		28			
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>					
<b>ICRC visits</b>			<b>Women</b>	<b>Minors</b>	
Places of detention visited		7			
Detainees in places of detention visited		4,260	304	26	
Visits carried out		10			
			<b>Women</b>	<b>Girls</b>	<b>Boys</b>
Detainees visited and monitored individually		14			
<i>of whom newly registered</i>		1			
<b>RCMs and other means of family contact</b>					
RCMs collected		7			
RCMs distributed		5			
Detainees visited by their relatives with ICRC/National Society support		1			
People to whom a detention attestation was issued		1			

**MAIN FIGURES AND INDICATORS: ASSISTANCE**

<b>CIVILIANS</b>			<b>Total</b>	<b>Women</b>	<b>Children</b>
<b>Economic security</b>					
Food consumption	People		477	225	48
	<i>of whom IDPs</i>		1		
Living conditions	People		1,292	821	96
	<i>of whom IDPs</i>		1		
Capacity-building	People		20	20	
<b>Mental health and psychosocial support</b>					
People who received mental-health support			45		
People who attended information sessions on mental health			207		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>					
<b>Economic security</b>					
Living conditions <sup>2</sup>	People		87		

2. Owing to operational and data collection constraints, this figure may not reflect the extent of the activities carried out during the reporting period.

# GREECE

The ICRC worked in Greece for the first time in 1912 and established a mission in Athens in 2016. It helps migrants, including those detained, restore contact with their families and engages the authorities in dialogue on their access to health care and other services. It urges the pertinent authorities to reinforce their mechanisms to clarify the fate of missing persons and helps strengthen local capacities in managing and identifying human remains. The ICRC promotes support for IHL and its integration into military operations. It supports the Hellenic Red Cross in its organizational development and its provision of family-links services.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

**MEDIUM**

## KEY RESULTS/CONSTRAINTS IN 2021

- Migrants’ protection-related concerns were heard and documented by the ICRC. The ICRC sought to raise these issues with the national authorities in Greece, despite operational and other constraints.
- The Hellenic Red Cross maintained its family-links services for migrants, with the ICRC’s support. The fate and/or whereabouts of some migrants were ascertained through the concerted efforts of the National Society and the ICRC.
- Forensic professionals, first responders and others were supported to manage and identify human remains. The police were introduced by the ICRC to web-based applications that store and analyse data vital to identification efforts.
- Detained migrants were visited by the ICRC and given phone cards and essential items. The ICRC supported the authorities’ efforts to improve health services, and check the spread of COVID-19, in immigration detention centres.
- The Hellenic Armed Forces developed its first IHL manual, with the ICRC’s support. Greek military personnel, academics and students strengthened their grasp of IHL at ICRC training sessions or presentations.



⊕ ICRC delegation

PROTECTION	Total
<b>CIVILIANS</b>	
<b>Restoring family links</b>	
Phone calls facilitated between family members	5
Tracing cases closed positively (subject located or fate established)	25
People reunited with their families	5
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>	
<b>ICRC visits</b>	
Places of detention visited	10
Detainees in places of detention visited	2,837
<i>of whom visited and monitored individually</i>	5
Visits carried out	22

ASSISTANCE	2021 Targets (up to)	Achieved
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>		
<b>Economic security</b>		
Living conditions	People	2,084

## EXPENDITURE IN KCHF

Protection	2,148
Assistance	633
Prevention	270
Cooperation with National Societies	87
General	29
<b>Total</b>	<b>3,168</b>
<i>Of which: Overheads</i>	193

## IMPLEMENTATION RATE

Expenditure/yearly budget	85%
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## PERSONNEL

Mobile staff	4
Resident staff (daily workers not included)	20

## CONTEXT

Migrants, including asylum seekers and refugees, reached Greece mainly by crossing the Aegean Sea or the Evros River. Many of them were forced to take hazardous routes: there were several accidents and deaths recorded at sea and at the land border. Although many people continued to leave their countries for Europe, the number of arrivals, and of migrants living on Greek islands had decreased, owing to tighter movement restrictions and stricter border policies implemented by the authorities to regulate migration and check the spread of COVID-19. Many families were still searching for missing relatives. Identifying human remains remained a challenge, partly because of insufficient data and coordination mechanisms.

The 2016 agreement between the European Union (EU) and Turkey still governed the management of migrants arriving in Greece from Turkey. In 2021, Greek authorities implemented new measures to regulate its borders and manage migrants in camps and immigration detention facilities: for instance, a legislative decision to remove minors from places of detention and transfer them to more suitable accommodations; and construction of 'closed controlled-access centres' on the islands.

While waiting for their cases to be processed, many migrants – including unaccompanied minors – lived in camps or were held in administrative detention. Many lost contact with their families and had limited access to health and other services; their physical and mental health was endangered. Migrants endured stringent movement restrictions, and faced procedural and legal hurdles, under new or existing policies combined with measures related to the COVID-19 pandemic, that prolonged their stay in the places mentioned above.

## ICRC ACTION AND RESULTS

The ICRC continued to monitor the situation of migrants in detention facilities. It strove to improve their living conditions, including their access to health care, while following guidelines for checking the spread of COVID-19. It sought to raise migrants' protection-related concerns with the pertinent national authorities and urge them to ensure that all migrants, regardless of status, were treated in conformity with applicable law. However, because of operational and other constraints, the ICRC had limited opportunities to discuss some of the issues with the Greek authorities. It discussed broadly the plight of migrants with EU officials in Athens, Greece and Brussels, Belgium (see *Brussels*). Plans to help the Hellenic Red Cross carry out protection-related activities – to make migrants safer, for instance – could not be realized because of staffing and other constraints.

The Hellenic Red Cross continued – with training, and technical and material support, from the ICRC – to provide family-links services for migrants. The ICRC helped it to improve its tracing services by providing assistance for restructuring its tracing department, recruiting staff and updating information in the Movement's family-links website. The efforts of the National Society and the ICRC resulted in the fate and/or whereabouts of several missing migrants being ascertained and their families, informed. A family separated during migration was reunited

in Greece, with the ICRC's help. The ICRC helped the National Society produce leaflets for unaccompanied minors – who were about to be relocated, voluntarily, to other countries in the EU by the Greek government, the IOM and others – telling them about the family-links services at their destinations. The ICRC continued to provide forensic professionals, coast guard personnel and other first responders, and others with training, technical guidance and/or material support, for handling human remains properly, in a manner conducive to their identification and in accordance with pertinent data-protection standards. It also introduced the Hellenic Police to web-based applications for storing and analysing information crucial to identifying human remains, with a view to instructing the latter's forensic experts in their use.

The ICRC visited migrants at several places of detention to monitor their treatment and living conditions. It reminded authorities that they must, among others, enable migrants to maintain contact with their families; seek alternatives to detention for minors; and make health services more readily available to migrants. It provided authorities technical and material support to these ends. At ICRC workshops, penitentiary staff learnt how to maintain facilities in places of detention. The ICRC distributed phone cards, hygiene kits, cleaning materials and recreational items to detained migrants. Detaining authorities and the official agency providing health services for migrants (AEMY) were trained by the ICRC to ensure provision of health services, and prevent the spread of COVID-19, at immigration detention centres. The ICRC also donated equipment to make dental services and virtual consultations available at certain places of detention. Vulnerable migrants seeking legal assistance were referred by the ICRC to the Greek Council for Refugees (GCR).

The ICRC strove to advance understanding of and gather support for its work in Greece. It drew attention to humanitarian issues, for instance, in connection with missing people and their families, and health care for detained migrants. It gave the Hellenic Armed Forces support for developing its first IHL manual, which aims to guide the integration of IHL in military training and operations. Training and presentations by the ICRC helped Greek military personnel, academics and students to strengthen their grasp of IHL.

## CIVILIANS

### The ICRC monitors the situation of migrants

The ICRC continued to monitor the situation of migrants and document their protection-related concerns, including in connection with the principle of *non-refoulement*. It also tracked the humanitarian consequences of migration policies, and movement restrictions. It sought to raise these issues with the authorities, police forces and others concerned, and to remind them that they must do everything necessary to ensure that all migrants, regardless of status, are treated in conformity with applicable law. However, the ICRC's dialogue with Greek authorities over these matters was limited because of operational and other constraints. It used some of the information it gathered in broader discussions on migrants' concerns with EU officials in Athens and Brussels (see *Brussels*).

The ICRC was unable to realize its plans to train the Hellenic Red Cross in carrying out protection-related activities for migrants, and to help the National Society incorporate protection-related work in its regular activities, owing to staffing and other constraints.

### **The National Society restores family links**

The National Society – with material and technical support from the ICRC – continued to work towards resuming its position of leadership in restoring family links for migrants. With the ICRC's assistance, it took steps to improve its tracing services, for instance, by restructuring its tracing department, recruiting staff and updating information in the Movement's family-links website. The National Society and the ICRC organized a workshop at which they devised measures to improve the National Society's family-links services (see *Red Cross and Red Crescent Movement*). The ICRC, together with the International Federation, trained National Society volunteers in restoring family links during emergency situations – for which the National Society drafted a contingency plan.

The ICRC continued, together with the National Society, to help reunite families separated by migration – for instance, by covering the cost of their COVID-19 tests and helping them secure travel documents. The ICRC distributed, at places where migrants were being held, posters publicizing the Trace the Face campaign – an online photo tracing service with a centralized database that focused on migrants who went missing on their way to Europe. The ICRC and the National Society kept up their efforts to locate missing persons; the fate and whereabouts of 25 people were ascertained and relayed to the families concerned.

In 2020, the Greek government, with the support of other European countries and organizations like the IOM and UNHCR, initiated a voluntary relocation programme for asylum seekers, unaccompanied minors and other migrants qualifying for international protection. The ICRC assisted the National Society to produce leaflets telling unaccompanied minors, on their way to other EU countries, about the family-links services available to them at their destinations.

### **Forensic services expand their capacities**

The ICRC continued to support the efforts of forensic professionals, coast guard personnel and other first responders, and relevant authorities to ensure that human remains – including those recovered at sea and along other migration routes to Greece – were handled properly, in a manner conducive to their identification and in accordance with pertinent data-protection standards. Some of these actors were given equipment to expand their forensic capacities. At ICRC workshops, these actors learnt about best practices in managing and identifying human remains. First responders also learnt about the proper recovery of human remains at an information session organized by the ICRC and the University of Athens. The ICRC had manuals, videos and other informational materials on handling the dead – including the bodies of COVID-19 victims – translated into Greek, and distributed them among first responders. It presented to the Hellenic Police web-based applications that store and analyse data

necessary for identifying human remains, with a view to training the latter's forensic practitioners in their use.

The ICRC impressed upon the authorities the importance of addressing the issue of missing people and urged them to develop policies to this end. It presented an ICRC report to authorities and policymakers that described the gaps in the Greek medico-legal system and in domestic legal frameworks covering the issue of missing people. The ICRC explored possibilities for helping the Hellenic Police's missing-persons unit to resolve pending cases of missing migrants, such as establishing mechanisms for coordination and data sharing between them.

## **PEOPLE DEPRIVED OF THEIR FREEDOM**

### **Detained migrants receive visits and other kinds of support**

The ICRC was able to visit migrants at more places of detention than in 2020, when pandemic-related restrictions limited such visits. During their visits, ICRC delegates paid particular attention to migrants with specific needs, such as unaccompanied minors. The ICRC communicated confidentially its findings and recommendations to the detaining authorities and reminded them to ensure migrants' well-being and access to essential services. The ICRC organized workshops to instruct penitentiary authorities on the maintenance of facilities in places of detention. At a round table that it organized with the National School of Judges, the ICRC urged members of the judiciary, the police and others to find alternatives to detention for minors. It referred particularly vulnerable migrants in need of legal assistance to the GCR.

Penitentiary authorities were reminded at ICRC workshops that they must ensure the availability to migrants of viable means of communication. The ICRC assisted their efforts to this end. It donated phone cards for detained migrants and persuaded penitentiary authorities to allow detained migrants to possess mobile phones.

### **Hygiene and health services in detention facilities improve**

The ICRC engaged health authorities, the police and others in dialogue on improving detained migrants' access to adequate health services, and on implementing public-health measures at immigration detention centres; it also helped strengthen their coordination to this end. The ICRC and a Greek university organized a round table at which health and other authorities familiarized themselves with various issues related to health care in detention.

The ICRC provided detaining authorities and the AEMY with technical and material support to provide health services for migrants and protect them against COVID-19. It gave them personal protective equipment (PPE), hygiene items, medicines and other consumables; it supplemented this material aid with informational videos on measures against COVID-19. The ICRC also trained health professionals and penitentiary staff in a broad range of pandemic-related areas: proper use of PPE; hygiene promotion; management of COVID-19 cases; and observance of domestic and international COVID-19 safety protocols. At ICRC training sessions, health staff learnt how to handle situations such as having to deal with psychologically

distressed migrants. The ICRC reiterated to pertinent authorities the importance of vaccinating detained migrants against COVID-19 and supported their efforts to this end. It donated the equipment necessary to make dental services and virtual medical consultations available to migrants at certain immigration detention centres.

The ICRC donated hygiene items, clothes and recreational and household items for 2,084 detainees, to help improve their living conditions.

### **ACTORS OF INFLUENCE**

The ICRC strove to further understanding of and support for its work in Greece, and draw attention to humanitarian issues – for instance, in relation to immigration detention, and missing people and their families. To these ends, it engaged a broad range of actors regularly in dialogue; it organized high-level meetings with members of the Greek judiciary, senior government officials, diplomats and representatives of humanitarian organizations working in Greece.

The ICRC produced articles and social-media posts, and gave interviews to members of the media, with a view to broadening awareness of the humanitarian issues mentioned above among the general public.

### **Military officers broaden their knowledge of IHL**

The ICRC maintained its efforts to promote IHL among members of the Greek military. Drawing on its expertise in IHL, it contributed to the development of the Hellenic Armed Forces' very first IHL manual, which aims to guide the integration of IHL into military training and operations. Greek military personnel strengthened their grasp of IHL at workshops organized by the ICRC and at ICRC-supported events, such as the launch of the Hellenic Armed Forces' IHL

manual. Senior military officers attended an online ICRC course in advanced topics on IHL (see *International law and policy*).

### **Academics and students develop their understanding of IHL**

The ICRC maintained its activities for academics and students, with a view to stimulating discussions on IHL and IHL-related issues. It made presentations on IHL – both online and in person – for law students and post-graduate students at several universities, and for students at a secondary school. It sponsored one academic to pursue an advanced IHL seminar held online (see *International law and policy*).

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

The Hellenic Red Cross continued to strive to strengthen its governance and compliance structure, and address integrity-related issues, with support from the International Federation and the ICRC. It sought to develop mechanisms and procedures reflective of greater accountability and transparency, and of respect for humanitarian principles and its statutory obligations – for instance, a code of conduct for its members.

The ICRC continued to help strengthen the National Society's organizational capacities – particularly in restoring family links – by providing salary incentives for staff and guidance in matters related to administration, logistics and human resources. At a workshop that it organized with the ICRC, the National Society learnt how it could improve its family-links services (see *Civilians*). The ICRC and the National Society explored the possibility of creating a working group for addressing migrants' needs.

The ICRC coordinated its activities with those of its Movement partners – in such areas as public communication and raising funds – to ensure a coherent response to the humanitarian needs of migrants and to the pandemic.

## MAIN FIGURES AND INDICATORS: PROTECTION

<b>CIVILIANS (RESIDENTS, IDPS, RETURNEES, ETC.)</b>	<b>Total</b>			
<b>Red Cross messages (RCMs)</b>				
Phone calls facilitated between family members	5			
<b>Reunifications, transfers and repatriations</b>				
People reunited with their families	5			
<b>Tracing requests, including cases of missing persons</b>				
People for whom a tracing request was newly registered	59	9	1	18
<i>including people for whom tracing requests were registered by another delegation</i>	13			
Tracing cases closed positively (subject located or fate established)	25			
<i>including people for whom tracing requests were registered by another delegation</i>	2			
Tracing cases still being handled at the end of the reporting period (people)	478	88	81	119
<i>including people for whom tracing requests were registered by another delegation</i>	67			
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (ALL CATEGORIES/ALL STATUSES)</b>				
<b>ICRC visits</b>				
Places of detention visited	10			
Detainees in places of detention visited	2,837	84	139	
Visits carried out	22			
<b>Detainees visited and monitored individually</b>				
	5			2
<i>of whom newly registered</i>	5			2

## MAIN FIGURES AND INDICATORS: ASSISTANCE

<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>		<b>Total</b>	<b>Women</b>	<b>Children</b>
<b>Economic security</b>				
Living conditions	People	2,084	21	148
<b>Health care in detention</b>				
Places of detention visited by health staff	Structures	10		
Health facilities supported in places of detention visited by health staff	Structures	1		

# LONDON (regional)

**COVERING:** Ireland, United Kingdom of Great Britain and Northern Ireland

Set up in 2003, the London regional delegation focuses on pursuing humanitarian diplomacy and facilitating ICRC operations in the field. Through contact with the British and Irish governments, armed forces and members of civil society and other relevant parties, the ICRC seeks to influence policy and decision-making so as to bolster support for IHL and principled humanitarian action. It visits detainees in selected prisons and supports community-based efforts to mitigate consequences of violence. The ICRC works with the British Red Cross and the Irish Red Cross in various areas, notably to promote IHL and the Movement.

YEARLY RESULT	
Level of achievement of ICRC yearly objectives/plans of action	HIGH

EXPENDITURE IN KCHF	
Protection	1,599
Assistance	89
Prevention	2,379
Cooperation with National Societies	536
General	76
<b>Total</b>	<b>4,679</b>
<i>Of which: Overheads</i>	<i>286</i>

IMPLEMENTATION RATE	
Expenditure/yearly budget	94%

PERSONNEL	
Mobile staff	2
Resident staff (daily workers not included)	35

## CONTEXT

The authorities in Ireland and in the United Kingdom of Great Britain and Northern Ireland (hereafter UK) participated in bilateral dialogue, multilateral organizations and forums to tackle a range of issues, including those of humanitarian concern. They helped finance humanitarian activities in conflict-affected countries. As a permanent member of the UN Security Council and of NATO, the UK remained influential in international affairs. Ireland maintained its non-permanent membership of the UN Security Council; its term will end in 2022. London remained a major hub for think tanks, media organizations and NGOs, all of which helped to shape discussions on humanitarian issues and policies.

The British military participated in coalition operations in Iraq and the Syrian Arab Republic (hereafter Syria), supported its partners in other conflicts, and held training programmes with the armed forces of other countries. It ended its presence in Afghanistan in August.

The British government regarded the threat of international “terrorism” in the UK as “substantial”. Paramilitary violence persisted in some communities in Northern Ireland; victims of the past conflict or of ongoing violence struggled to obtain essential support services.

The effects of the COVID-19 pandemic, and of the measures imposed by the governments of Ireland and the UK to contain it, persisted.

PROTECTION	Total
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>	
<b>ICRC visits</b>	
Places of detention visited	8
Detainees in places of detention visited	4,962
<i>of whom visited and monitored individually</i>	47
Visits carried out	11
<b>Restoring family links</b>	
RCMs distributed	4

The impact of the UK’s withdrawal from the European Union in January 2020 continued to be felt.

## ICRC ACTION AND RESULTS

### Influential parties are urged to ensure respect for IHL and support humanitarian action

The ICRC kept up its dialogue with government departments, legislators and other decision makers in Ireland and the UK, to help ensure that operational, legal, and policy decisions took humanitarian considerations into account, and reflected respect for IHL and support for the ICRC’s mandate and activities. During briefings, high-level meetings and other events, the ICRC gave the authorities an overview of the perspective of the conflict-affected people that it assisted, notably in Afghanistan and in key contexts in Africa and the Middle East. It also brought up such matters as the application of IHL – for example, among parties with whom the British or Irish government was influential, and in connection with new means and methods of armed conflict (e.g. artificial intelligence; autonomous weapon systems; cyber operations; misinformation, disinformation and hate speech; and the use of weapons in outer space). Other issues raised by the ICRC included: the effects of climate change on conflict-affected people, such as at the 26th UN Climate Change Conference in Glasgow, UK (see also *New York*); support relationships in armed conflict; the international humanitarian aid agenda; and the impact of counter-terrorism legislation on people not or no longer participating in hostilities.

The ICRC discussed with the British armed forces – at strategic, operational and policy levels – issues of humanitarian concern arising from their operations overseas and their partnership with the armed forces of other countries, and the integration of IHL into their training programmes. It pursued dialogue with the Defence Academy of the UK, on the challenges posed for IHL by contemporary armed conflicts. Pandemic-related constraints led to the postponement of some planned initiatives.

At events that it organized or attended, the ICRC discussed – with policymakers, academics and representatives of NGOs, think tanks and community organizations – such subjects as the protection due to civilians under IHL and the combined consequences of conflict and climate change. The archbishop of Canterbury and the ICRC's president made a joint declaration, co-signed by religious and humanitarian leaders, that equitable distribution of COVID-19 vaccines is a humanitarian imperative. Various audiences learnt more about issues of humanitarian concern and the ICRC's work through online articles, videos and other informational materials – produced by the ICRC or by media organizations with whom it was in touch.

#### **Detainees in Ireland and the UK receive ICRC visits**

In accordance with its standard procedures, the ICRC visited detainees held under restrictive regimes, including people detained under counter-terrorism legislation, at one prison in Ireland and seven prisons in the UK; these visits were resumed gradually, in view of pandemic-related and other constraints. Findings and recommendations were communicated confidentially to the detaining authorities, in support of their efforts to ensure that detainees' treatment and living conditions complied with domestic law and met internationally recognized standards. The ICRC encouraged the authorities to facilitate regular contact between detainees and their families.

The ICRC relayed advice to the authorities, on medical ethics in the provision of health care to detainees. It also discussed with them means to address detainees' mental-health needs, including in relation to the pandemic.

The ICRC expanded its contact with families of people detained under counter-terrorism legislation, or alleged to have been involved in fighting abroad, and the organizations representing them, with a view to understanding the families' needs more fully. Whenever necessary, it referred them to other organizations for appropriate assistance. It discussed the concerns of these families with the pertinent authorities.

#### **Community-based organizations are given support to help violence-affected people in Northern Ireland**

Four community-based organizations in Northern Ireland, with financial and technical input from the ICRC, maintained their capacities in preventing violence or mitigating its consequences – for example, by mediating to defuse threats made by paramilitary groups against individuals. Personnel from these organizations underwent ICRC training, including refresher training, on acting as neutral intermediaries, managing risks and providing psychosocial support. Ahead of its gradual reduction of assistance to the organizations, starting in 2022, the ICRC helped them finish drafting their sustainability plans, including for fundraising, and strove to mobilize relevant actors to provide them with support.

The ICRC endeavoured to discuss with the authorities, police and paramilitary groups in Northern Ireland the situation of violence-affected communities, and the humanitarian activities of the Movement and community-based organizations. Because of pandemic-related and other constraints, however, it had to postpone several meetings with these actors, and the workshops for paramilitary groups, on the ICRC's *Roots of Restraint in War* study.

#### **National Societies and the ICRC work together to restore family links**

The ICRC gave the National Societies in Ireland and the UK technical support for providing family-links services. The British Red Cross and the ICRC coordinated their activities to restore family links, particularly for families in the UK with relatives in camps and places of detention in Syria (see *Syrian Arab Republic*). They also sought to assess the needs of people whose relatives were alleged to have been involved in fighting in other countries. In view of developments in Afghanistan (see *Afghanistan*), the British Red Cross, the Irish Red Cross and the ICRC engaged the pertinent authorities in dialogue on, among others, the need to prevent family separation and loss of family contact, and handled enquiries from Afghans in Ireland and the UK.

The two National Societies and the ICRC worked together to: influence policy and decision-making pertinent to IHL and principled humanitarian action; promote the Movement; and raise funds. They established a tripartite working group to respond to humanitarian needs in Northern Ireland. In line with this, personnel from both National Societies were trained by the ICRC in providing psychological first aid and furthering the incorporation of the Safer Access Framework into their activities.

**MAIN FIGURES AND INDICATORS: PROTECTION**

<b>CIVILIANS</b>	<b>Total</b>			
<b>Tracing requests, including cases of missing persons</b>		<b>Women</b>	<b>Girls</b>	<b>Boys</b>
Tracing cases still being handled at the end of the reporting period (people)	1	1		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>				
<b>ICRC visits</b>		<b>Women</b>	<b>Minors</b>	
Places of detention visited	8			
Detainees in places of detention visited	4,962			
Visits carried out	11			
		<b>Women</b>	<b>Girls</b>	<b>Boys</b>
Detainees visited and monitored individually	47			
<i>of whom newly registered</i>	11			
<b>RCMs and other means of family contact</b>				
RCMs distributed	4			

# MOSCOW (regional)

**COVERING:** Belarus, Republic of Moldova, Russian Federation

The Moscow regional delegation was opened in 1992. In the countries covered, it promotes the implementation of IHL and other relevant norms and their integration into domestic frameworks; fosters understanding of the ICRC’s mandate and work; and helps the National Societies build their capacities, particularly in the fields of emergency preparedness and restoring family links.

YEARLY RESULT	
Level of achievement of ICRC yearly objectives/plans of action	MEDIUM

EXPENDITURE IN KCHF	
Protection	1,403
Assistance	318
Prevention	2,964
Cooperation with National Societies	951
General	90
<b>Total</b>	<b>5,726</b>
<i>Of which: Overheads</i>	<i>349</i>

IMPLEMENTATION RATE	
Expenditure/yearly budget	83%

PERSONNEL	
Mobile staff	13
Resident staff (daily workers not included)	57

PROTECTION	Total
<b>CIVILIANS</b>	
<b>Restoring family links</b>	
RCMs collected	19
RCMs distributed	32
Phone calls facilitated between family members	310
Tracing cases closed positively (subject located or fate established)	37
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>	
<b>Restoring family links</b>	
RCMs collected	4
RCMs distributed	4

## CONTEXT

The Russian Federation continued to play a prominent role in international affairs – in particular, as a permanent member of the UN Security Council, and through its role in the Commonwealth of Independent States (CIS) and the Collective Security Treaty Organization (CSTO). Following the intensification of the Nagorno-Karabakh conflict in late 2020 (see *Armenia* and *Azerbaijan*), the Russian Federation brokered a ceasefire between the sides, which led to the deployment of Russian peacekeeping forces. The Russian Federation co-chaired the Minsk Group of the Organization for Security and Cooperation in Europe (OSCE). The Minsk Group led the OSCE’s efforts to find a peaceful solution to the Nagorno-Karabakh conflict. Together with the Islamic Republic of Iran and Turkey, the Russian Federation facilitated the Astana talks to end the armed conflict in the Syrian Arab Republic (hereafter Syria; see *Syrian Arab Republic*); it continued to provide military and other support to the Syrian government. It participated in the Trilateral Contact Group on Ukraine (see *Ukraine*), which discussed diplomatic solutions to the armed conflict in Donbas.

A number of people in the Russian Federation remained without news of relatives missing in connection with past conflicts in the country or armed conflict in the wider region.

In Belarus, political tensions arising from the presidential elections of August 2020, and arrests related to these tensions, continued. Migrants – from the Middle East and elsewhere – stranded at Belarus’s borders with Poland and Lithuania found themselves in a very difficult situation.

In the Republic of Moldova (hereafter Moldova), people living or working near ammunition storage facilities continued to be at risk from unplanned explosions.

## ICRC ACTION AND RESULTS

### The ICRC advocates protection for conflict-affected people

In all its engagement with them, the ICRC reminded the Russian authorities of the various kinds of protection afforded by IHL, but particularly of the protection granted to people who were not or who were no longer participating in hostilities – in the Nagorno-Karabakh conflict, and in the conflicts in Syria, Ukraine and other contexts of interest to the Russian Federation. It discussed various matters with senior officials from the Russian defence ministry, such as contemporary challenges for IHL and how best to influence behaviour towards compliance with IHL. It participated in a working group for releasing detainees, handing over bodies, and identifying missing persons, all within the framework of the Astana talks.

In Belarus, the ICRC continued to offer the authorities its expertise – particularly in connection with internationally recognized standards for policing and the use of force. In July, personnel from the internal affairs ministry learnt more about such standards during an ICRC workshop.

The ICRC discussed with Moldovan authorities the threat of unplanned explosions at ammunition storage sites and broadened awareness of this threat among other national and

international actors. It trained military personnel in the safe storage and management of stocks of chemicals.

### **Influential parties are urged to respect IHL and support humanitarian action**

The ICRC used both traditional and digital media – and pursued various forms of engagement with the authorities, decision makers and other actors of influence in the countries covered – to gather support for its humanitarian work throughout the world, IHL and other applicable norms, and humanitarian principles. It organized, or participated in, numerous events that tackled issues of humanitarian concern such as climate change and conflict, cyber security, and autonomous weapon systems.

The ICRC pursued efforts to promote compliance with IHL and its integration into the training and operations of the armed forces in the region and of regional bodies such as the CSTO and the CIS. It briefed senior CSTO officers on IHL and the conduct of hostilities. The ICRC attended the Zapad strategic military exercises, in Belarus and the Russian Federation, as an observer; its attendance enabled it to meet with defence ministry officials and foreign military attachés. Officials from the legal department of the Moldovan defence ministry attended a regional meeting on IHL that was organized by the ICRC with CIS legal officers. A Moldovan peacekeeping contingent learnt more about IHL in peacekeeping operations through ICRC training.

In the countries covered, the ICRC continued to make its legal expertise available to the authorities. It advocated incorporation of IHL provisions and/or IHL-related treaties in domestic law. It provided expert advice for the drafting of a Russian law on the red cross emblem. It involved think tanks, universities, academics and students in various activities, with a view to developing interest and expertise among them in IHL and drawing their attention to issues of humanitarian concern. Teams of students from Belarus, Kazakhstan, the Russian Federation, Tajikistan and Uzbekistan participated in an online quiz on IHL organized by the ICRC. The ICRC and a Russian university held a round table, at the Humanitarium in Moscow, on the provision of health care during armed conflict; there was some in-person participation, but some 80 people took part online.

### **Efforts to address the issue of missing people continue**

The ICRC continued to pursue efforts to resolve missing-persons cases linked to past or ongoing armed conflicts. Support was given to a Russian NGO for following up missing-persons cases and/or collecting DNA samples from relatives of missing people. The ICRC sought, through training and other support, to develop capacities among forensic specialists in the Russian Federation. As part of an organization-wide project to establish professional standards for addressing the issue of missing people and responding to their families'

needs (see *Operations*), the ICRC arranged several experts' meetings, workshops and other events. In May, to mark the 150th anniversary of the Central Tracing Agency, it organized an online conference on the global response to the issue of missing people. In September, a hybrid (in-person and online) conference organized by the ICRC brought together some 500 relatives of missing people from throughout the world. Some 300 people took part in ICRC webinars to help missing people's families cope with their situation.

In the Russian Federation, the ICRC trained 13 representatives of local NGOs in mental-health and psychosocial support for the children and/or other relatives of people alleged to have been involved in fighting in other countries. The ICRC discussed with Russian Red Cross Society staff the ICRC's activities in this regard and the distinct needs of repatriated children.

### **The Movement delivers humanitarian services for migrants and others in need**

The ICRC sought to work with the National Societies in the Russian Federation and Belarus, the International Federation, and to the extent possible, with the Red Cross Society of the Republic of Moldova. It gave them support to increase their collective impact in such areas as first aid, emergency response and communication campaigns on COVID-19. In coordination with the International Federation and other Movement partners, the ICRC provided financial and other support for the Belarusian Red Cross Society's response to the humanitarian needs of migrants stranded at its borders (see *Context*). This support included buying face masks and hygiene items, as protection against COVID-19, for distribution among migrants and for use by National Society staff and volunteers. The ICRC-supported family-links services of the National Societies in Belarus and the Russian Federation helped members of families separated by conflict, migration or other circumstances to restore or maintain contact with relatives. The ICRC continued to provide financial assistance for covering the running costs of the Russian Red Cross's tracing services.

Support for the St Petersburg branch of the Russian Red Cross, to provide free legal consultations and other humanitarian aid to migrants, had ended by September. The National Society drew on ICRC expertise to draft a strategy to guide its work for migrants. Russian authorities, representatives of NGOs, and others working on migration-related matters discussed issues of common concern at a round table organized by the ICRC and the St Petersburg branch of the Russian Red Cross.

While carrying out the activities mentioned above, the ICRC continued to take all the measures necessary to check the spread of COVID-19, in accordance with domestic and international guidelines. Several plans – to engage with influential actors, for instance – had to be postponed because of pandemic-related restrictions and other constraints.

## MAIN FIGURES AND INDICATORS: PROTECTION

CIVILIANS	Total			
<b>RCMs and other means of family contact</b>		<b>UAMs/SC</b>		
RCMs collected	19			
RCMs distributed	32			
Phone calls facilitated between family members	310			
<b>Tracing requests, including cases of missing persons</b>		<b>Women</b>	<b>Girls</b>	<b>Boys</b>
People for whom a tracing request was newly registered	33	7	9	10
Tracing cases closed positively (subject located or fate established)	37			
Tracing cases still being handled at the end of the reporting period (people)	3,211	250	200	276
<i>including people for whom tracing requests were registered by another delegation</i>	29			
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>				
<b>RCMs and other means of family contact</b>				
RCMs collected	4			
RCMs distributed	4			

## MAIN FIGURES AND INDICATORS: ASSISTANCE

CIVILIANS	Total		
<b>Mental health and psychosocial support</b>			
People who attended information sessions on mental health	2		
People trained in mental-health care and psychosocial support	13		

# PARIS (regional)

**COVERING:** Andorra, Cyprus, France, the Holy See, Italy, Malta, Monaco, Portugal, San Marino and Spain (with specialized services for other countries)

With a formalized presence since 2000, the Paris regional delegation engages in dialogue on IHL and humanitarian concerns with the authorities, military and academic circles and third-country representatives, raising awareness of the ICRC's mandate and mobilizing political and financial support for its activities. It visits people held by international tribunals and follows up on former internees of the US detention facility at Guantanamo Bay Naval Station, Cuba. With National Societies, it helps migrants and people separated by conflicts abroad restore family links, and offers guidance on human remains management. It partners with National Societies in their international activities and IHL promotion.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

HIGH

## EXPENDITURE IN KCHF

Protection	3,254
Assistance	-
Prevention	2,345
Cooperation with National Societies	256
General	37
<b>Total</b>	<b>5,892</b>
<i>Of which: Overheads</i>	<i>360</i>

## IMPLEMENTATION RATE

Expenditure/yearly budget	85%
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## PERSONNEL

Mobile staff	6
Resident staff (daily workers not included)	29

## PROTECTION

Total

### CIVILIANS

#### Restoring family links

RCMs collected	7
RCMs distributed	31

### PEOPLE DEPRIVED OF THEIR FREEDOM

#### ICRC visits

Places of detention visited	9
Detainees in places of detention visited	21
<i>of whom visited and monitored individually</i>	18
Visits carried out	12

#### Restoring family links

RCMs collected	8
RCMs distributed	10

## CONTEXT

European countries, individually or through multilateral bodies, continued to drive diplomatic initiatives and influence policy debates and decision-making concerning humanitarian action. France and other European countries participated in military operations in Africa, the Middle East and elsewhere.

Some people alleged to have been involved in fighting elsewhere, or their relatives, returned to their countries of origin.

Migrants, including refugees and asylum seekers, continued to attempt dangerous journeys to Europe from North Africa and the Middle East. They were vulnerable to abuse in both transit and destination countries, and often lost contact with their families. Some of them were held at administrative detention facilities for indefinite periods of time and their movements restricted. Identifying human remains from maritime accidents was a challenge, owing, *inter alia*, to insufficient information and coordination among national and regional authorities. Although many families were still waiting for news of missing relatives, various stakeholders advanced the development of systems to respond to this need.

Movement restrictions, and other measures to contain the spread of COVID-19, were in effect in many countries.

## ICRC ACTION AND RESULTS

The ICRC took precautions against COVID-19 in all its activities, some of which were cancelled or postponed to 2022.

### The ICRC broadens support for IHL and humanitarian action

The ICRC engaged in humanitarian diplomacy to promote IHL and gather political and financial support for its work – throughout the world – among national authorities, armed forces, multilateral organizations and other influential parties. It urged states to ensure that their policies and decision-making took humanitarian considerations into account, and discussed various issues with them, such as protection for principled humanitarian action against the effects of sanctions and counter-terrorism measures; the humanitarian consequences of military operations against the Islamic State group in Iraq and in the Syrian Arab Republic; cyber warfare; and new weapon technologies.

At the Paris Peace Forum, the ICRC's president drew attention to the ICRC's activities for conflict-affected people, who remain particularly vulnerable to shocks such as the COVID-19 pandemic and climate change; he stressed the need for all actors to work together to invest in sustainable humanitarian action and close the inequality gap. For the first time, the ICRC's president was invited to discuss humanitarian protection-related concerns with the Parliamentary Assembly of the Organization for Security and Co-Operation in Europe.

The ICRC used various means to broaden awareness of IHL, and gather support for its activities, among civil society: a photo exhibit on urban warfare, and an IHL competition and summer course organized with the Turkish Red Crescent Society and the Istanbul Centre of International Law; news releases; and social media, blogs and other public communication, also produced in French, for the benefit of the French-speaking public.

The ICRC discussed IHL with European militaries and – during high-level meetings with senior members of the armed forces and at international conferences – provided expert advice on integrating IHL provisions into military operations. It briefed the French armed forces on its activities in the Sahel region and the Middle East and impressed upon them the necessity of ensuring respect for IHL in joint military operations. Training, predeployment briefings, and guest lectures at staff colleges and doctrine centres, by the ICRC, enabled French and Italian troops to add to their knowledge of IHL.

Together, European National Societies and the ICRC promoted IHL and urged states to implement the provisions of treaties on nuclear weapons and the arms trade.

### **Efforts to address the plight of migrants and families of the missing continue**

The humanitarian consequences of migration and asylum policies, and the necessity of preserving family links, remained subjects of the ICRC's dialogue with the pertinent authorities who were reminded of their responsibilities under international law towards refugees, asylum seekers and other migrants. Movement components met periodically to coordinate activities related to migrants.

The ICRC shared its views on immigration detention at a webinar, which it organized with the Swedish and Bulgarian National Societies and which was attended by European authorities and other National Societies. National Societies assisting detained migrants, particularly in Malta and Lithuania, were given guidance by the ICRC to incorporate the basic principles of protection work in their activities and to develop dialogue with authorities on such matters as alternatives to detention, especially for children.

Together, various National Societies and the ICRC helped members of families separated by migration or other circumstances to reconnect. Training sessions for National Societies covered subjects such as family-links services during the pandemic and other crises; and analysis of complex, transregional patterns of migration. The ICRC also helped interested National Societies to implement Trace the Face – an online service that used photos to trace missing migrants – and supported their other efforts to reunite dispersed families.

The ICRC sought to ascertain the fate of missing people in order to provide answers to their families. The Paris delegation, with other ICRC delegations working along the Mediterranean

migration route, fostered coordination among authorities, National Societies and other stakeholders, with a view to properly handling and identifying human remains – such as the remains of migrants who died in a maritime accident off the coast of Catania in 2015. A pilot project, jointly managed by the Spanish Red Cross and the ICRC, was implemented to help identify people lost at sea on the migration route to the Canary Islands; this will serve as a model for replication at other points in Spain. With a French technological institute, the ICRC developed two mobile applications to help National Societies manage data for forensic imaging.

Aided by the ICRC, the French Red Cross developed an online course on mental-health and psychosocial support for their volunteers, with a view eventually to helping people with missing relatives to cope with their situation.

### **Vulnerable detainees, returnees and ex-detainees are followed up**

The ICRC continued to visit people detained by international tribunals based in The Hague, Netherlands; it stayed in touch with detainees via video and telephone calls, together with the detaining authorities, after it was decided to suspend in-person visits owing to the resurgence of COVID-19. The ICRC and the authorities discussed such matters as geriatric and palliative care; access to rehabilitation for prisoners serving long-term sentences; and prevention/containment of COVID-19. At the ICRC's recommendation, the authorities continued to arrange video calls between detainees and their relatives.

The ICRC checked on the treatment and living conditions of a number of people detained in connection with “terrorism” or conflict elsewhere. It discussed with the French and Italian authorities the possibility of securing access to all detainees in these categories, and explained to them the importance of vaccinating detainees against COVID-19. With National Societies, the ICRC helped detainees maintain contact with their families through RCMs.

The authorities were urged by the ICRC to respond – in accordance with existing legal frameworks – to the protection-related concerns of citizens of European countries who had returned after allegedly being involved in fighting abroad and those of their families. At their invitation, the French Red Cross and the ICRC explained the movement's humanitarian work, particularly its family-links services, to government child-protection personnel in charge of returned and repatriated children. These services enabled a few repatriated children to communicate with their relatives in the Middle East.

The ICRC followed up the situation of people who were resettled in Europe after their release from US detention facility at the Guantanamo Bay Naval Station in Cuba. Owing to pandemic-related travel restrictions, no family visits were arranged for them.

**MAIN FIGURES AND INDICATORS: PROTECTION**

<b>CIVILIANS</b>	<b>Total</b>			
<b>RCMs and other means of family contact</b>		<b>UAMs/SC</b>		
RCMs collected	7	7		
RCMs distributed	31	31		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>				
<b>ICRC visits</b>		<b>Women</b>	<b>Minors</b>	
Places of detention visited	9			
Detainees in places of detention visited	21	9		
Visits carried out	12			
		<b>Women</b>	<b>Girls</b>	<b>Boys</b>
Detainees visited and monitored individually	18	6		
<i>of whom newly registered</i>	12	4		
<b>RCMs and other means of family contact</b>				
RCMs collected	8			
RCMs distributed	10			

# TASHKENT (regional)

**COVERING:** Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan, Uzbekistan

The ICRC has been present in Central Asia since 1992. It supports the implementation of IHL and other relevant norms, and fosters understanding of the ICRC’s work. In Kyrgyzstan, it visits detainees and helps the authorities improve their treatment and living conditions. In Tajikistan, it works with the National Society to assist families of persons missing in connection with past conflict and other violence in the country or with fighting abroad, and to conduct risk education sessions in mine-affected communities. It also seeks to assist people with physical disabilities in Tajikistan. It assists National Societies in building their capacities.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

**HIGH**

## KEY RESULTS/CONSTRAINTS IN 2021

- In Kazakhstan, Kyrgyzstan and Tajikistan, the ICRC pursued efforts to make mental-health and psychosocial support available to the children of people alleged to have been involved in conflicts elsewhere.
- Following advocacy by the ICRC, authorities in Tajikistan permitted family visits for children repatriated from Iraq in 2019. The ICRC helped cover the transport costs and other expenses of the visiting relatives.
- In Tajikistan, wounded and sick people, and persons with disabilities, obtained adequate care at ICRC-supported health facilities, some of which also received material aid for tackling COVID-19.
- Military and security forces personnel in the five countries covered – including those bound for peacekeeping missions – learnt more about IHL and other applicable norms, and international policing standards, at ICRC events.
- Most of the ICRC’s assistance activities at places of detention in Kyrgyzstan came to an end in 2021. However, the ICRC pursued some efforts to ensure that detainees had access to adequate health care.
- Following the armed confrontations between Kyrgyzstan and Tajikistan, the ICRC reinforced its assistance for the National Societies in both countries and worked with them to address the humanitarian needs of the people affected.

## EXPENDITURE IN KCHF

Protection	2,977
Assistance	1,975
Prevention	1,746
Cooperation with National Societies	988
General	114
<b>Total</b>	<b>7,800</b>
<i>Of which: Overheads</i>	476

## IMPLEMENTATION RATE

Expenditure/yearly budget	89%
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## PERSONNEL

Mobile staff	13
Resident staff (daily workers not included)	125



ICRC regional delegation ICRC mission ICRC office/presence  
\*Map shows structures supporting ICRC operations in Afghanistan

PROTECTION	Total
<b>CIVILIANS</b>	
<b>Restoring family links</b>	
RCMs collected	27
RCMs distributed	24
Phone calls facilitated between family members	2,374
Tracing cases closed positively (subject located or fate established)	9
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>	
<b>ICRC visits</b>	
Places of detention visited	1
Detainees in places of detention visited	242
<i>of whom visited and monitored individually</i>	6
Visits carried out	1
<b>Restoring family links</b>	
RCMs collected	15
RCMs distributed	14

ASSISTANCE	2021 Targets (up to)	Achieved
<b>CIVILIANS</b>		
<b>Economic security</b>		
Income support <sup>1</sup>	People	208
<b>WOUNDED AND SICK</b>		
<b>Medical care</b>		
Hospitals supported	Structures	5   8
<b>Physical rehabilitation</b>		
Projects supported	Projects	4   4

1. Owing to operational and data collection constraints, this figure may not reflect the extent of the activities carried out during the reporting period.

## CONTEXT

The governments of Kazakhstan, Kyrgyzstan, Tajikistan and Uzbekistan repatriated family members (mostly women and children) of citizens alleged to have been involved in conflicts elsewhere, particularly in Iraq and the Syrian Arab Republic (hereafter Syria). In a few cases, men were also repatriated.

Demarcation of borders and competition over natural resources remained sources of tension and violence in the region. In late April 2021, armed clashes involving military and security forces, took place between Kyrgyzstan and Tajikistan; a ceasefire was agreed upon in early May 2021. Issues of regional concern and interest included the broader effects of the humanitarian situation in Afghanistan (see *Afghanistan*), the COVID-19 pandemic, and migration and other economic and socio-political matters.

In Kyrgyzstan, the legitimacy of the parliamentary elections of October 2020 was disputed and led to mass protests and, eventually, the resignation of the president. New parliamentary and presidential elections, and a constitutional referendum, took place in 2021.

The five countries covered remained involved, to varying degrees, with multilateral bodies such as the Collective Security Treaty Organization (CSTO), the Commonwealth of Independent States (CIS), the Eurasian Economic Union, the European Union and the Shanghai Cooperation Organization (SCO). Turkmenistan participates in the CIS as an associate member state.

The consequences of past armed conflict and other situations of violence were still felt in Kyrgyzstan and Tajikistan.

Certain communities in Tajikistan, particularly along the borders with Afghanistan and Uzbekistan, remained at risk from mines and explosive remnants of war (ERW).

## ICRC ACTION AND RESULTS

The ICRC addressed the needs of various groups of people in the region: relatives of people alleged to have been involved in conflicts abroad; missing people's families; and the wounded, the sick and persons with disabilities in Tajikistan. It pursued engagement with authorities, military and security forces personnel and other influential actors in the region; the aim was to broaden acceptance for its work and secure support for IHL and other applicable norms and international policing standards. The structure supporting the ICRC's operations in Afghanistan was moved from Dushanbe, Tajikistan, to Tashkent, Uzbekistan, by the end of the year (see *Afghanistan*).

The ICRC monitored, and/or discussed with Central Asian governments, the situation of people alleged to have been involved in conflicts elsewhere and that of their families; it offered these governments its humanitarian assistance. Children of women from Kyrgyzstan detained on conflict-related charges in Iraq were repatriated by the government of Kyrgyzstan; by the end of July, the government had reunited all these repatriated children with their families in Kyrgyzstan. The ICRC provided support for this process. Following advocacy by the ICRC, authorities in Tajikistan permitted family visits for

children repatriated from Iraq in 2019. The ICRC helped cover the transport costs and other expenses of the visiting relatives.

An "accompaniment" programme in Tajikistan, undertaken by the ICRC with local partners, made psychosocial support, and referrals to service providers, available to families of people missing from past conflict, migration or after alleged participation in a conflict abroad.

In Kazakhstan, Kyrgyzstan and Tajikistan, the ICRC endeavoured to make mental-health and psychosocial support available to the children of people alleged to have been involved in conflicts elsewhere. Following the armed clashes between Kyrgyzstan and Tajikistan, the ICRC was able to provide mental-health and psychosocial assistance for National Society staff and volunteers in Kyrgyzstan who were assisting those affected by the violence. In Tajikistan, the ICRC conducted sessions on first aid and safer behaviour for border communities and on mental-health and psychosocial support for National Society volunteers, teachers and schoolchildren in areas affected by the violence. In addition, the ICRC and the Red Crescent Society of Tajikistan provided ad hoc assistance to respond to the humanitarian needs of those with particular vulnerabilities among the population affected by the violence.

In Tajikistan, the ICRC assisted hospitals in areas bordering Afghanistan and Kyrgyzstan with emergency medical supplies, equipment and items for preventing and controlling infections to facilitate adequate and timely care for the sick and the wounded and/or to deal with the pandemic. The ICRC also provided remote hospitals and other health facilities in border areas with medical refrigerators and cold-storage containers in support of their vaccination campaigns against COVID-19. Medical personnel in Kyrgyzstan and Tajikistan attended ICRC training in trauma care. Disabled people in Tajikistan obtained rehabilitative care at ICRC-supported orthopaedic centres.

In Kyrgyzstan, most of the ICRC's assistance activities at places of detention came to an end in 2021. However, the ICRC pursued some efforts to ensure that detainees had access to adequate health care.

Aided by the ICRC, forensic professionals and forensic institutions in Kyrgyzstan and Tajikistan developed their ability to manage human remains.

National Societies in the region implemented their activities with support from the ICRC and other Movement partners. Members of families separated by migration, detention or other circumstances restored or maintained contact through the Movement's family-links services. In Tajikistan, people in mine-affected communities – including school-children – learnt safe practices through information sessions organized by the Tajikistan Red Crescent with the ICRC's support.

## CIVILIANS

### Repatriated children are reunited with their families

The ICRC monitored, and/or discussed with Central Asian governments, the situation of people alleged to have been involved in fighting elsewhere and that of their families; it

offered these governments its humanitarian assistance. In March, 79 children of women from Kyrgyzstan – detained on conflict-related charges in Iraq – were repatriated by the government of Kyrgyzstan. By the end of July, the government had reunited all these repatriated children with their families in Kyrgyzstan. The ICRC provided support for this process: for instance, it gave one-off cash assistance to the family of each repatriated child, to help them cover their expenses. Following advocacy by the ICRC, the authorities in Tajikistan permitted family visits for children repatriated in 2019 from Iraq. The ICRC helped cover the transport, accommodation, and other expenses of the visiting relatives. It also provided the repatriated children from economically vulnerable families with essential items, including clothes, shoes and hygiene and educational items. Two centres accommodating repatriated children received PPE and disinfectants, as protection against COVID-19, from the ICRC. In Tajikistan, the ICRC provided 18 families (57 people) of returnees from conflict areas abroad with cash grants, with a view to helping facilitate their social reintegration. Some families were referred to external service providers who could give them the help they need.

Members of families separated by migration, detention or conflicts elsewhere restored or maintained contact through RCMs, tracing and other Movement family-links services. Training and other support from the ICRC helped staff and/or volunteers of the National Societies to strengthen their capacities in providing family-links services. The Kazakh Red Crescent Society, with the ICRC's assistance, enabled migrants in immigration detention centres in Kazakhstan to phone their families.

### **Missing people's families and other vulnerable people are given psychosocial and other support**

The ICRC reminded the authorities in Tajikistan of the families' right to know the fate of missing relatives. Aided by the ICRC, the Red Crescent Society of Tajikistan held information sessions – for the authorities – on the humanitarian consequences of the loss of family contact. The ICRC continued to offer the authorities in Kyrgyzstan technical support for implementing laws concerning the rights of missing people and their families.

In Tajikistan, an “accompaniment” programme undertaken by the National Society, the ICRC and local NGOs enabled some 750 people whose relatives were missing in connection with the past conflict/other violence or migration – or were alleged to have been involved in conflicts abroad – to obtain psychosocial care through support groups, home visits or other means. Within the framework of the programme, 320 beneficiaries were referred to local service providers for administrative, legal, medical or other support. The ICRC provided “accompaniers” under this programme with training and mentoring. It helped missing people's families to organize activities to memorialize their missing relatives. It provided food parcels for 49 families of missing people (245 people), who lost a family member since the beginning of the COVID-19 pandemic.

The ICRC provided training in mental health and psychosocial support for teachers and other staff at state facilities accommodating repatriated children in Tajikistan. The ICRC trained

medical workers and first responders in Tajikistan to become more capable of managing their own stress and/or providing psychological first aid to others during emergencies.

In Kazakhstan, the ICRC began to provide training in mental health and psychosocial support for mental health professionals and key community actors involved in the social reintegration of families of people alleged to have been involved in fighting elsewhere. In Kyrgyzstan, the children repatriated from Iraq were given mental health and psychosocial support directly by ICRC staff members or by ICRC-supported professionals. Plans to train National Society staff in psychological self-care, and in providing psychological first aid for others during emergencies, could not be fully realized, because of the ICRC's decision to focus on assisting the repatriated children. However, following the armed clashes between Kyrgyzstan and Tajikistan, the ICRC was able to provide mental health and psychosocial assistance for National Society staff and volunteers in Kyrgyzstan who were assisting those affected by the violence. In Tajikistan, the ICRC conducted sessions on first aid and safer behaviour for border communities and on mental-health and psychosocial support for National Society volunteers, teachers and schoolchildren in areas affected by the violence. In addition, the ICRC and the Red Crescent Society of Tajikistan provided ad hoc assistance to respond to the humanitarian needs of those with particular vulnerabilities among the population affected by the violence.

### **People in mine-affected communities learn safe practices**

Some 29,900 people in mine-affected communities in Tajikistan learnt safe practices around mines/ERW through information sessions organized by the Tajikistan Red Crescent with ICRC support. Information on COVID-19 was often incorporated in these sessions. To further raise awareness of the risk of mines, the National Society and/or the ICRC held drawing and essay competitions on mine-risk awareness among 1,600 children at 17 schools in mine-affected areas. The ICRC helped conduct training in self-protection against stray bullets – which included sessions on the risks associated with mines and ERW – for community leaders in areas along Tajikistan's border with Afghanistan, and its border with Kyrgyzstan. The ICRC held a round table on mines and ERW for local authorities in Khorog.

ICRC training enabled National Society staff and volunteers to become more alert to the dangers of weapon contamination, and knowledgeable about safe practices around mines, and helped them to become more capable of broadening public awareness in these matters. The National Society and the ICRC participated in coordination meetings and other events related to mine action organized by the authorities and/or others.

### **Forensic actors bolster their capacities**

The ICRC continued to pursue efforts to promote best practices in the management of human remains in Kyrgyzstan and Tajikistan. Forensic professionals and forensic institutions in these two countries developed their ability to manage human remains with various kinds of ICRC support, such as training and donations of PPE, and tools for autopsies and other equipment. In Kyrgyzstan, the ICRC provided training in managing human remains for officials from the interior ministry, the ministry of

emergency situations, the Red Crescent Society of Kyrgyzstan, and the local forensic bureau. In Tajikistan, the ICRC engaged authorities in dialogue on incorporating training in human-remains management in the curriculum of the Republican Learning Centre under the committee of emergency situations. In October, an interministerial round table – convened upon

the ICRC's initiative and conducted with support from the ICRC regional forensic advisor – was organized to discuss the newly elaborated standard operating procedures for the management of human remains. The process of finalizing the procedures progressed with ICRC assistance.

<b>CIVILIANS</b>		Kazakhstan	Kyrgyzstan	Tajikistan
<b>RCMs and other means of family contact</b>				
RCMs collected			7	20
	<i>including from unaccompanied minors (UAMs)/separated children (SC)</i>			2
RCMs distributed			6	18
	<i>including from UAMs/SC</i>			2
Phone calls facilitated between family members		2,341	30	3
<b>Tracing requests, including cases of missing persons</b>				
People for whom a tracing request was newly registered			1	642
	<i>of whom women</i>			28
	<i>of whom minors at the time of disappearance – girls</i>			11
	<i>of whom minors at the time of disappearance – boys</i>			50
Tracing cases closed positively (subject located or fate established)			1	8
Tracing cases still being handled at the end of the reporting period (people)		42	308	3,153
	<i>of whom women</i>	14	68	112
	<i>of whom minors at the time of disappearance – girls</i>	10	83	73
	<i>of whom minors at the time of disappearance – boys</i>	10	83	214
	<i>including people for whom tracing requests were registered by another delegation</i>		1	6

## PEOPLE DEPRIVED OF THEIR FREEDOM

In Kyrgyzstan, the ICRC visited – in accordance with its standard procedures – a place of detention under the authority of the internal affairs ministry and the justice ministry. It concluded its systemic support for the State Service for the Execution of Punishments (SSEP) in May.

Detainees in Kyrgyzstan, Tajikistan and Uzbekistan were visited by relatives with ICRC support; the ICRC covered the families' expenses, including the costs of COVID-19 testing. In Tajikistan, the ICRC provided the families with soap and masks, as protection against COVID-19.

### The ICRC assists efforts to prevent the spread of COVID-19 in detention facilities

Most of the ICRC's assistance activities at places of detention in Kyrgyzstan came to an end in 2021. However, the ICRC still pursued some efforts to ensure that detainees had access to adequate health care. It met with the health ministry, the SSEP and the internal affairs ministry, and impressed upon them the necessity of including detainees in the national vaccination plan. It trained health staff from the SSEP and the internal affairs ministry in vaccinating people against COVID-19. Cold-storage containers for transporting vaccines and/or other perishable materials were donated to places of detention under the SSEP and the internal affairs ministry. A total of 2,000 COVID-19 rapid antigen tests were provided to places of detention under SSEP, and 11 refrigerators were provided to places of temporary detention. A detention facility in Osh was given basic medical equipment.

The ICRC monitored the management of TB services at places of detention (which it handed over to the authorities in 2020),

with a view to ensuring the continuity and sustainability of these services and tracking the epidemiological situation. It gave the authorities ad hoc support: for instance, it delivered ancillary medicines for TB patients at one detention facility.

The ICRC donated bedding, hygiene items, books and/or recreational items for detainees at several places of detention. It assisted the authorities to transfer detainees serving life sentences from one facility to a dormitory. It monitored the development of legislation to improve conditions for detainees serving life sentences.

## WOUNDED AND SICK

In Kyrgyzstan, ICRC training enabled 20 medical personnel in the Batken region to reinforce their capacities in trauma care. The ICRC also conducted such training for 57 medical staff, students and others in Tajikistan. In line with the goals of the Health Care in Danger initiative, participants in these training courses were told about the protection due to people seeking or providing health care. With the pertinent National Society whenever possible, the ICRC organized first-aid training for armed forces and security forces personnel, and for community members, in the region (see *Actors of influence*).

In Tajikistan, emergency medical supplies, equipment, and items for preventing and controlling infections from the ICRC enabled eight hospitals in areas bordering Afghanistan and Kyrgyzstan to provide adequate and timely care for the sick and the wounded and/or to deal with the pandemic. The ICRC provided 46 health facilities in border areas with medical refrigerators and cold-storage containers in support of their vaccination campaigns against COVID-19; 29,618 doses of COVID-19 vaccines were provided.

Some 1,360 persons with disabilities<sup>2</sup> obtained rehabilitative care, including physiotherapy and fitting of assistive devices, at three ICRC-supported state-run orthopaedic centres in Dushanbe, Khujand and Kulob. Less people were reached than planned, owing to pandemic-related constraints. An ICRC assessment of service provision was cancelled, owing to pandemic-related travel restrictions. The ICRC conducted four training sessions on the production and fitting of prosthetics and orthotics for staff at the state-run centres.

The ICRC assisted the efforts of the National Union of Persons with Disabilities of Tajikistan (NUPWDT) to advance the social inclusion of disabled people. For instance, ICRC-trained members of the NUPWDT conducted information sessions for members of civil society on disability and on the ICRC's career development programme for persons with disabilities. The ICRC provided support to the NUPWDT to organize sport-related activities for persons with disabilities in Khatlon and Sughd, as well as at Dushanbe's district level.

## ACTORS OF INFLUENCE

The ICRC pursued various forms of engagement with authorities, military and security forces personnel and other influential actors in the region; the aim was to broaden acceptance for its work and secure support for IHL, international human rights law and other applicable norms, and international policing standards. Where possible, these activities took place in person, and in line with COVID-19 safety protocols.

### Military and security forces strengthen their grasp of IHL and other applicable norms

The authorities and military and security forces personnel in the countries covered – including peacekeepers bound for missions in other countries – and other key actors learnt more about the ICRC, IHL and other applicable norms, and international policing standards through seminars, customized courses and meetings organized by the ICRC. In Kyrgyzstan and Tajikistan, the ICRC sought to expand its engagement with the defence ministries and border troops, in light of the armed clashes between the two countries (see *Context*). Military and police officers, border troops and other actors in Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan bolstered their first-aid capacities through training organized by the ICRC and/or the pertinent National Society; these sessions sometimes included information about the Movement, the Fundamental Principles and IHL. First-aid kits were given to border troops in Kyrgyzstan and to the defence ministry in Tajikistan. The ICRC served as an observer at CSTO military exercises that took place at a training ground in Tajikistan near the border with Afghanistan; approximately 4,000 military personnel from CSTO member states took part in the exercises.

In Kazakhstan, a high-level bilateral dialogue online enabled the defence ministry and the ICRC to discuss various humanitarian issues and explore possibilities for cooperation in areas of common interest. The foreign ministry and the ICRC held a meeting online to discuss the challenges in integrating returnees from the Middle East; some 50 government officials

from Azerbaijan, Bosnia and Herzegovina, Kazakhstan, Kyrgyzstan, the Russian Federation, Tajikistan, and Uzbekistan took part in this event. The head of the ICRC mission in Kazakhstan attended the working group of the Astana talks on Syria, and a round table on Kazakhstan's experience of repatriating people alleged to have been involved in fighting elsewhere, and/or their families. In Uzbekistan, the ICRC met with the National Guard and identified areas for future cooperation with them.

### Academics and representatives of think tanks discuss IHL and related topics

The ICRC discussed the promotion and implementation of IHL with the pertinent authorities in the countries covered, and the national IHL committees; it offered them its legal and technical expertise. For instance, in Turkmenistan, the ICRC attended a meeting organized by Turkmenistan's inter-agency commission on implementing the country's obligations under human rights law and IHL. At this meeting, the head of the ICRC's regional delegation in Central Asia made a presentation urging Turkmenistan to reinvigorate its efforts to implement IHL and ratify relevant instruments. The ICRC involved academics and students throughout the region in promoting IHL and in other IHL-related activities. The ICRC, the Law Society of Kyrgyzstan and the Kyrgyz State Law University organized an online discussion on IHL, autonomous weapon systems and related topics for academics, researchers and representatives of think tanks in Central Asia.

In Tajikistan, the ICRC and the State Committee on Religious Affairs organized a conference on the management of the dead. A forensic specialist from the ICRC briefed participants on the humanitarian aspects of managing human remains; representatives of religious communities exchanged information and experiences at the conference.

The ICRC provided the Red Crescent Society of Tajikistan with support to improve its public communication; it conducted training for National Society staff in the use of social media, and helped the National Society improve its webpage.

## RED CROSS AND RED CRESCENT MOVEMENT

The National Societies in the region implemented their activities with financial, material or technical support, and training, from the ICRC and other Movement partners. The National Societies in Kazakhstan, Kyrgyzstan, Tajikistan and Uzbekistan continued to carry out a broad range of activities in response to the pandemic. Following the armed confrontations between Kyrgyzstan and Tajikistan, the ICRC reinforced its assistance – particularly in the area of mental health and psychosocial support – for the National Societies in both countries. Aided by the ICRC, National Societies in the region conducted first-aid training for community members, National Society staff and volunteers, weapon bearers and others.

Guided by the ICRC, the National Societies in the region worked towards consolidating their legal bases. They drew on the ICRC's support to promote the Movement's work and/or IHL via dissemination sessions, public communication and other means.

2. Based on aggregated monthly data, which include repeat users of physical rehabilitation services.

## MAIN FIGURES AND INDICATORS: PROTECTION

CIVILIANS		Total			
<b>RCMs and other means of family contact</b>			<b>UAMs/SC</b>		
RCMs collected		27	2		
RCMs distributed		24	2		
Phone calls facilitated between family members		2,374			
<b>Tracing requests, including cases of missing persons</b>			<b>Women</b>	<b>Girls</b>	<b>Boys</b>
People for whom a tracing request was newly registered		643	28	11	50
Tracing cases closed positively (subject located or fate established)		9			
Tracing cases still being handled at the end of the reporting period (people)		3,503	194	166	307
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>					
<b>ICRC visits</b>			<b>Women</b>	<b>Minors</b>	
Places of detention visited		1			
Detainees in places of detention visited		242	242	6	
Visits carried out		1			
Detainees visited and monitored individually		6	6		
<b>RCMs and other means of family contact</b>					
RCMs collected		15			
RCMs distributed		14			
Detainees visited by their relatives with ICRC/National Society support		309			
People to whom a detention attestation was issued		2			

## MAIN FIGURES AND INDICATORS: ASSISTANCE

CIVILIANS		Total	Women	Children
<b>Economic security</b>				
Income support <sup>3</sup>	People	208	92	1
<b>Mental health and psychosocial support</b>				
People who received mental-health support		958		
People who attended information sessions on mental health		517		
People trained in mental-health care and psychosocial support		141		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>				
<b>Health care in detention</b>				
Places of detention visited by health staff	Structures	1		
<b>WOUNDED AND SICK</b>				
<b>Hospitals</b>				
Hospitals supported	Structures	8		
<b>Physical rehabilitation</b>				
Projects supported		4		
	<i>of which physical rehabilitation projects supported regularly</i>	3		
<b>Services at physical rehabilitation projects supported regularly</b>				
People who received physical rehabilitation services	Aggregated monthly data	1,363	223	662
	<i>of whom victims of mines or explosive remnants of war</i>	*		
Prostheses delivered	Units	393		
Orthoses delivered	Units	3,973		
Physiotherapy sessions		1,924		
Walking aids delivered	Units	4,246		
Wheelchairs or postural support devices delivered	Units	1,562		

\* This figure has been redacted for data protection purposes. See the *User guide* for more information.

3. Owing to operational and data collection constraints, this figure may not reflect the extent of the activities carried out during the reporting period.

# UKRAINE

In 2014, the ICRC expanded its presence in Ukraine to help protect and assist conflict-affected people in Donbas. Its multidisciplinary response addresses emergency and longer-term needs, providing relief, supporting livelihoods and improving living conditions. It improves access to water, medical care and other essential services. It visits detainees and restores family links. It supports efforts to clarify the fates of missing persons and provides assistance to their families. It encourages compliance with IHL. The ICRC cooperates with the Ukrainian Red Cross Society and helps build its capacities.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

**HIGH**

## KEY RESULTS/CONSTRAINTS IN 2021

- Conflict-affected people met their urgent and long-term needs with relief aid and other support from the ICRC and the National Society. Hundreds of thousands had improved access to water thanks to ICRC infrastructural projects.
- The wounded, the sick and persons with disabilities obtained adequate care at hospitals and other facilities that sustained their services with ICRC support, which included cold-chain equipment to aid COVID-19 vaccination efforts.
- The ICRC reminded all the sides in the conflict of their obligation under IHL to protect civilians and safeguard their access to humanitarian aid and basic services, and to refrain from attacking key infrastructure during hostilities.
- Ukrainian military personnel learnt about IHL and the ICRC's work during training sessions. Similar sessions on IHL and international policing standards were also held for law-enforcement personnel.
- Forensic specialists developed their ability to properly manage human remains with technical and other support – including the provision of personal protective equipment, body bags and respirators – from the ICRC.
- The ICRC continued to work closely with the Ukrainian Red Cross Society and helped them develop their capacity to provide humanitarian assistance for conflict-affected people.

## EXPENDITURE IN KCHF

Protection	11,745
Assistance	50,604
Prevention	2,918
Cooperation with National Societies	3,319
General	394
<b>Total</b>	<b>68,980</b>
<i>Of which: Overheads</i>	<i>3,812</i>

## IMPLEMENTATION RATE

Expenditure/yearly budget	95%
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## PERSONNEL

Mobile staff	84
Resident staff (daily workers not included)	522



PROTECTION	Total
<b>CIVILIANS</b>	
<b>Restoring family links</b>	
RCMs collected	4
RCMs distributed	2
Phone calls facilitated between family members	606
Tracing cases closed positively (subject located or fate established)	26

PEOPLE DEPRIVED OF THEIR FREEDOM		Total
<b>ICRC visits</b>		
Places of detention visited		26
Detainees in places of detention visited		17,880
	<i>of whom visited and monitored individually</i>	79
Visits carried out		39
<b>Restoring family links</b>		
RCMs collected		4
RCMs distributed		1
Phone calls made to families to inform them of the whereabouts of a detained relative		10

ASSISTANCE		2021 Targets (up to)	Achieved
<b>CIVILIANS</b>			
<b>Economic security</b>			
Food consumption	People	25,260	38,397
Food production	People	19,925	20,638
Income support	People	22,257	15,463
Living conditions	People	64,203	69,733
<b>Water and habitat</b>			
Water and habitat activities	People	1,114,646	957,470
<b>Health</b>			
Health centres supported	Structures	61	60

PEOPLE DEPRIVED OF THEIR FREEDOM			
<b>Economic security</b>			
Food consumption	People	2,640	
Living conditions	People	14,210	23,263
<b>Water and habitat</b>			
Water and habitat activities	People	7,855	13,519

WOUNDED AND SICK			
<b>Medical care</b>			
Hospitals supported	Structures	31	52
<b>Physical rehabilitation</b>			
Projects supported	Projects	6	7
<b>Water and habitat</b>			
Water and habitat activities <sup>1</sup>	Beds (capacity)	3,125	1,523

1. Owing to operational and data collection constraints, this figure may not reflect the extent of the activities carried out during the reporting period.

## CONTEXT

In 2021, Donbas continued to be affected by armed conflict; hostilities were particularly intense in the first half of the year. Discussions on diplomatic solutions to the crisis, within the framework of the Trilateral Contact Group on Ukraine chaired by the Organization for Security and Cooperation in Europe, also continued.

People living in Donbas were at risk of injury or death because of the hostilities and because of mines and explosive remnants of war (ERW). They faced difficulties in accessing basic services, as the fighting had damaged essential infrastructure and hampered economic activity even further. Quarantine and other measures against COVID-19 made it even more challenging for people to obtain essential goods and services, and damaged their livelihoods.

Passage across the then line of contact continued to be severely hampered owing to the limited functioning of crossing points and movement restrictions. This made it very difficult for people to cross over to collect pensions, visit relatives, obtain official documents or for other purposes.

People have been detained in connection with the hostilities. Reportedly, hundreds of people were still missing in relation to the conflict.

## ICRC ACTION AND RESULTS

The ICRC continued to address the needs of people affected by conflict and the pandemic in Donbas in 2021. It adapted its response to movement restrictions, limitations on access, the measures taken to contain COVID-19 and other constraints; all of this hindered full implementation of certain activities. It provided support for the Ukrainian Red Cross Society and when possible, carried out activities with it. It closed its office in Odesa in March, owing to reduced humanitarian needs.

The ICRC reminded all the sides in the conflict of their obligation under IHL to protect civilians and safeguard their access to humanitarian aid and basic services, and to refrain from attacking key infrastructure during hostilities. The ICRC used various means – such as meetings, training sessions and themed events – to broaden acceptance for its mandate and work, and secure support for IHL and other relevant norms, among the authorities, military and security personnel and other influential actors.

Together with the National Society, the ICRC distributed food and household essentials to people affected by conflict and the pandemic in Donbas. ICRC aid enabled households – including those with missing people – to maintain or increase their food production or income. Nursing homes for older people, orphanages and other public institutions were given essential household items, equipment of various kinds and other material assistance to improve their services. The ICRC provided material and/or infrastructural support for improving water supply and other basic services. In conflict-affected areas, the ICRC also renovated or made repairs to school buildings, donated school supplies, and provided sanitation/cleaning items to educational institutions.

Conflict-affected people in Donbas obtained appropriate care at ICRC-supported hospitals and other health facilities. Some of these facilities were also given personal protective equipment (PPE), cleaning materials and/or other supplies, for dealing with the pandemic. The ICRC provided support for campaigns to vaccinate people against COVID-19. It assisted projects or facilities serving persons with disabilities. ICRC-trained “accompaniers” and service providers extended mental-health and psychosocial support to missing people’s families, ex-detainees and other conflict-affected people. Medical staff and others were also given psychosocial support for coping with work-related stress and preserving their well-being.

People learnt about the threat of mines and ERW, and safe practices around them, through National Society/ICRC risk-education sessions and online tools. The ICRC provided training or material support for local actors involved in surveying, marking or clearing weapon-contaminated areas.

Members of separated families reconnected through the Movement’s family-links services. The ICRC continued to aid efforts to ascertain the fate of missing people. Forensic specialists developed their ability to manage human remains – an issue of particular concern because of the pandemic – with technical and other support (provision of PPE, body bags, etc.) from the ICRC.

The ICRC visited – in accordance with its standard procedures – detainees in state-run facilities and discussed its findings confidentially with the officials concerned. It continued to seek access to people held in other places of detention. Penitentiary officials and staff drew on the ICRC for support to improve detainees’ treatment and living conditions. The ICRC provided detention facilities with material support for tackling the pandemic.

## CIVILIANS

The ICRC continued to address the needs of people affected by conflict and the pandemic in Donbas. It continued to adapt to movement restrictions, limitations on access, the measures taken to contain COVID-19 and other constraints – all of which hindered full implementation of certain activities. The ICRC provided the Ukrainian Red Cross Society with comprehensive support and when possible, carried out activities with it. It closed its office in Odesa in March, owing to reduced humanitarian needs.

The ICRC closely monitored the situation of conflict-affected people. Through dialogue and written representations, the ICRC reminded the sides in the conflict of their obligation under IHL to protect civilians, safeguard their access to humanitarian aid and basic services, and refrain from attacking key infrastructure during hostilities. It engaged the sides concerned in dialogue on access to education for communities affected by conflict, and protection for educational facilities. The ICRC also facilitated discussions between communities and military authorities on local issues – for instance, in connection with the freedom of movement and marking mine-contaminated areas. It strove to help communities in Donbas develop effective means of self-protection.

### People in Donbas meet their pressing needs

Together with the National Society, the ICRC continued to address both the immediate and the long-term needs of people affected by conflict and the pandemic. It gave the National Society training and material and other support, to assist conflict-affected people. A total of 38,397 people, including hundreds of diabetes patients, received food parcels or cash for buying food; 37,099 of them received food parcels on a quarterly basis. Distributions of hygiene kits and/or essential household items – and/or cash for purchasing these items – helped ease the circumstances of 69,733 people. More people received food and household essentials than planned owing to increased needs. The ICRC gave 8,659 households (20,638 people) cash grants or in-kind assistance, such as seed and greenhouses, to produce more food. Cash, agricultural supplies and equipment, and/or other material assistance enabled 11,748 households (15,463 people, including persons with disabilities and relatives of missing people and of detainees) to resume or begin income-earning activities, or to cover their household expenses by some other means. A total of 176 nursing homes for older people, orphanages and other public institutions were given essential household items, equipment of various kinds and other material assistance to improve their services.

Infrastructural or material support from the ICRC improved the provision of basic services for 957,470 people; they included 872,442 people whose water supply came from networks renovated and/or supported in other ways by the ICRC. The ICRC's efforts acquired even more importance in light of the pandemic, water being vital for checking the spread of COVID-19 (through handwashing, for instance). Financial support from the ICRC enabled completion of an audit of the finances and operations of the main water and wastewater company in the Donetsk region; the findings were shared with the Trilateral Contact Group. In addition, the ICRC rehabilitated, or provided materials for rehabilitating, numerous homes: 5,588 households (15,694 people) benefited. A total of 3,753 people benefited from ICRC infrastructural projects at educational facilities (see below). The ICRC renovated sanitation and other basic facilities at crossing points, and provided construction materials, or other kinds of support, for making repairs at community centres and other public buildings; in all, 65,581 people benefited. Fewer people than planned benefited from these activities, partly because fewer people passed through crossing points.

The ICRC renovated or made repairs at schools, kindergartens, centres for children with disabilities and other educational facilities, and/or donated educational/recreational items and sanitation supplies. It provided some children – including mine victims or relatives of missing people – with laptops and/or internet subscriptions for online learning. Staff at several educational facilities were trained to preserve their well-being and to provide basic psychosocial support for children. The ICRC also conducted first-aid training, and provided first-aid kits, for students and staff at seven educational facilities. The National Society and the ICRC implemented projects and other activities for instructing older people and the youth in such topics as sports, handcraft activities and computer literacy classes; the Danish Red Cross was involved in the project for schoolchildren.

Some 11,200 people in Donbas, including schoolchildren, learnt about the threat of mines and ERW, and safe practices around them, through National Society/ICRC risk-education sessions and online tools. The ICRC helped construct or equip playgrounds, so that children could play safely in spaces free of mines and ERW. It provided training or material support for personnel from the armed forces and the State Emergency Service of Ukraine, and for others involved in surveying, marking or clearing weapon-contaminated areas and/or dealing with chemical, biological, radiological and nuclear hazards. The ICRC also provided the emergency services with PPE, disinfectants and/or other materials to prevent the spread of COVID-19.

### The ICRC supports efforts to vaccinate people against COVID-19 and other health services

Conflict-affected people with chronic illnesses and other medical conditions continued to obtain appropriate care at ICRC-supported service providers, some of which also received technical or material assistance for checking and preventing the spread of COVID-19. The ICRC provided 60 health centres in Donbas with drugs, medical equipment and consumables, hygiene items and/or other supplies. It also upgraded facilities at some of these centres. Financial support from the ICRC enabled 9,000 blood glucose tests for diabetics to be carried out; 646,450 glucose test strips were distributed among patients. Patients in need of advanced care were referred to pertinent facilities. Staff at some ICRC-supported health centres were given training to deal with non-communicable diseases. Information sessions conducted by the ICRC enabled health staff to learn about the protection due to those seeking or providing health services. Some 8,890 people attended ICRC-organized health-promotion sessions on COVID-19.

The ICRC assisted efforts to vaccinate people against COVID-19. Together with the health ministry and UNICEF, it provided health facilities in the eastern part of the country with furniture, cold-chain and IT equipment, and other materials for their vaccination campaigns. In Donetsk region, the ICRC donated refrigerators and medical renewables to the health actors involved.

Acting as a neutral intermediary, and in coordination with its partners and the pertinent stakeholders, the ICRC helped to transport medicines and other supplies across the crossing points, for distribution to health centres diagnosing and treating HIV/AIDS, TB and hepatitis C.

ICRC-trained “accompaniers” and service providers extended mental-health and psychosocial support to missing people's families, ex-detainees and other conflict-affected people, in person and over the phone. Medical staff and others were also given psychosocial support for coping with work-related stress and preserving their well-being.

### Efforts to clarify the fate of missing people continue

Members of families separated by conflict, migration and/or other circumstances reconnected through the Movement's family-links services – phone calls, in particular. The ICRC, acting as a neutral intermediary, helped 233 people cross at crossing points, from both directions, to be reunited with their

families; it also facilitated, for nine people, the transfer of official documents across the then line of contact. In coordination with the IOM, it issued travel documents for 13 people. The ICRC met with officials from the State Migration Service to discuss the situation of people from Afghanistan in facilities temporarily housing Afghan migrants under their responsibility, as well as the issue of migrants stranded at the Belarus–Poland border.

The ICRC participated in meetings held by the Ukrainian government’s commission on missing people, and submitted its comments and recommendations on amendments to the 2018 law on missing people. During discussions with the sides concerned, the ICRC emphasized the necessity of establishing coordination mechanisms to address the issue of missing people.

By engaging the sides in dialogue and coordinating with them, the ICRC helped to ascertain the fate of 26 people; the families concerned were duly informed. Representatives of associations of missing people’s families, and the National Society, learnt more about the legal aspects of the issue of missing people and related topics, at ICRC webinars. A conference in Kyiv – which experts on the issue of missing people, and missing people’s families, were expected to attend – was cancelled because of pandemic-related constraints. The ICRC provided associations of missing people’s families with financial and other assistance to help them become more capable of supporting one another and drawing public attention to their plight. The ICRC’s accompaniment programme continued to help missing people’s families meet their psychosocial, financial and other needs. The ICRC engaged missing people’s families in dialogue on their needs and concerns, and sought their views on the services available to them; the ICRC used its findings to draw the attention of relevant authorities and structures to the plight of these families.

The ICRC continued to help build forensic capacities in managing and identifying human remains. It engaged forensic professionals in dialogue on best practices and discussed medico-legal matters with them. Forensic specialists developed their ability to manage human remains – an issue of particular concern because of the pandemic – with technical and other support (webinars, provision of PPE, body bags, respirators, etc.) from the ICRC. About 200 representatives of forensic institutions attended a webinar – organized by the Association of Forensic Medical Doctors of Ukraine and the ICRC – on developing a medico-legal death investigation system. The ICRC provided support for renovating 17 forensic facilities, including morgues and a DNA laboratory.

### PEOPLE DEPRIVED OF THEIR FREEDOM

The ICRC visited detainees in 26 state-run facilities – in accordance with its standard procedures – and then discussed its findings confidentially with the authorities concerned. It sought access to people held in other places of detention.

The ICRC delivered parcels and letters to detainees from their families. It conveyed one RCM to a detainee and collected four RCMs from detainees. It donated three computers to one

detention facility, for use by security detainees to maintain contact with their families. The ICRC also provided cash or other income support for families of detainees, including newly released detainees (see *Civilians*).

### Detention facilities receive support for dealing with the pandemic

Penitentiary officials continued to draw on the ICRC’s expertise and other assistance to improve detainees’ treatment and living conditions, and prevent the spread of COVID-19. A number of detention facilities were given PPE, masks, respirators, stethoscopes and other items by the ICRC. The ICRC conducted webinars, workshops and training for prison staff in various areas, such as: proper treatment of detainees; medical ethics; and checking the spread of COVID-19. Detainees were given informational materials promoting vaccination against COVID-19. The ICRC upgraded penitentiary facilities, or provided support for doing so, benefiting 13,519 detainees (some of whom had disabilities).

Places of detention received material assistance from the ICRC for checking the spread of COVID-19: in all, 22,363 detainees benefited from donations of hygiene items (e.g. 20,000 bars of soap, 1,500 packs of detergents) and other essentials. In Donetsk region, the ICRC – to prevent the spread of COVID-19 – provided 12 places of detention with equipment and printed technical guidance in disinfecting their premises.

### WOUNDED AND SICK

#### Hospitals in Donbas receive material and other assistance

Hundreds of people living in Donbas expanded their first-aid capacities through training sessions organized by the Ukrainian Red Cross Society with ICRC support.

Conflict-affected people obtained the necessary care at 52 ICRC-supported hospitals in Donbas. These hospitals sustained their services with the ICRC’s support: medical supplies, PPE and other material aid, including what was needed for responding to emergencies and for preventing and containing the spread of COVID-19. The hospitals were also given 596 oxygen concentrators, which are needed to treat respiratory illnesses like pneumonia and COVID-19. More hospitals were supported than planned as the ICRC increased its ad hoc donations to help medical facilities cope with the pandemic. The ICRC conducted seminars and training for staff from selected hospitals – including the Bakhmut Hospital – in various areas, such as: prevention and control of infections; basic, intermediate and advanced life support; and emergency care. The ICRC provided support for organizing periodic meetings of the infection-control committees at two hospitals. It helped cover maintenance costs for ambulance services; however, because of administrative constraints, this had to be put on hold at the end of the year. The ICRC helped to cover medical and other expenses for 57 wounded people. Three blood banks were given supplies and technical support to screen donors for HIV/AIDS, hepatitis B and C, and syphilis; as a result, hospitals had access to safe blood for treating surgical patients, children with blood diseases and others. The ICRC made improvements to operating theatres, waste-management and other facilities at hospitals, physical

rehabilitation centres and other health facilities (1,523 beds in all). Progress was made in the construction of an emergency department at the Bakhmut Hospital.

The ICRC donated wheelchairs, mobility aids, and equipment for physiotherapy, and/or provided other kinds of assistance, to seven projects or structures serving people with disabilities, including two physical rehabilitation centres, an organization for disabled people and other service providers. Diabetics seeking treatment at ICRC-supported health facilities (see *Civilians*) were given wheelchairs and mobility aids, when necessary. A prosthetics centre in Donetsk was given PPE and disinfectants, to help check the spread of COVID-19. Around 440 persons with disabilities<sup>2</sup> benefited from services provided by a physical rehabilitation mobile unit in Donetsk; the ICRC also covered their transportation costs for seeking rehabilitative care and/or social-inclusion services. Pandemic-related restrictions hindered the organization of events to promote the social inclusion of people with physical disabilities. However, the ICRC was able to donate sports equipment and uniforms to a wheelchair-basketball team in Donetsk. It also helped disabled people to undertake vocational training and microeconomic initiatives. The ICRC had online discussions with people involved in physical rehabilitation about possibilities for a collaborative response to the needs of people with disabilities.

## ACTORS OF INFLUENCE

### The ICRC holds meetings with the office of the president of Ukraine and other influential actors

With a view to broadening acceptance for its mandate and activities, and securing support for IHL and other relevant norms, the ICRC organized training and/or other events for the authorities, military and security-forces personnel, academics, members of the media and other influential figures. It met periodically with its contacts – such as officials from the office of the president of Ukraine, parliamentarians, the military, the security forces, key members of civil society and other influential actors – to discuss humanitarian issues. It pursued various efforts, including through social media, to broaden awareness of IHL and support for it – and for the ICRC's own neutral, impartial and independent humanitarian work in Ukraine – among various influential figures and the general public. It also continued to draw attention to the cumulative impact of conflict and the pandemic on communities in Donbas.

The ICRC used hotlines and social media to keep conflict-affected people informed of the humanitarian services available to them. These people also used the same means to make their needs, or views and suggestions, known to the ICRC, and/or to ask for more information. The process of fully incorporating the hotlines in a community contact centre was completed.

The ICRC and the Ukrainian Red Cross Society coordinated their public-communication efforts, such as those related to

IHL promotion. Training and guidance from the ICRC helped the National Society to improve its public communication.

### Prosecutors and other government officials learn more about IHL

The ICRC continued to develop its relationship with the Ukrainian military, through such means as training in IHL and dialogue on protection-related matters (see *Civilians*). Ukrainian military personnel learnt about IHL and the ICRC during ICRC training sessions. Similar sessions on IHL and international policing standards were held for law-enforcement personnel. Owing to pandemic-related constraints, some of these courses took place online.

ICRC training helped prosecutors, students and/or staff at the Diplomatic Academy and the Legislative Institute of the Parliament of Ukraine, and others to learn more about IHL and/or humanitarian work. The Centre for IHL and Transitional Justice and the ICRC held an essay competition for students – including doctoral candidates – on the IHL rules concerning humanitarian assistance and organized a moot court competition. The translation into Ukrainian of reference materials on IHL progressed.

The ICRC continued to offer government officials expert advice for acceding to or ratifying IHL instruments and/or developing and implementing relevant laws – on mine action and missing people, for instance. It communicated, to various stakeholders, its views and recommendations on the drafts of laws implementing IHL that were under consideration by the Ukrainian parliament. An official from the foreign ministry attended the Fifth Universal Meeting of National Committees and Similar Entities on International Humanitarian Law, which was organized by the ICRC and held online.

## RED CROSS AND RED CRESCENT MOVEMENT

The Ukrainian Red Cross Society and the ICRC worked closely together to provide humanitarian assistance for conflict-affected people in Donbas. The ICRC continued to give the National Society comprehensive support for strengthening its capacities. It also assisted the National Society's efforts to tackle the pandemic; for instance, the National Society operated a COVID-19 hotline and set up vaccination points at two of its branches.

The National Society adopted new statutes and an institutional strategy in July. It also signed a partnership agreement with the International Federation, the Danish Red Cross and the ICRC for developing its branches, including in such areas as risk and security management, and incorporating the Safer Access Framework in their operations. The ICRC and its Movement partners in Ukraine strove to complement one another, in order to ensure the efficiency, relevance and effectiveness of their work.

2. Based on aggregated monthly data, which include repeat users of physical rehabilitation services.

**MAIN FIGURES AND INDICATORS: PROTECTION**

<b>CIVILIANS</b>	<b>Total</b>			
<b>RCMs and other means of family contact</b>		<b>UAMs/SC</b>		
RCMs collected	4			
RCMs distributed	2			
Phone calls facilitated between family members	606			
<b>Reunifications, transfers and repatriations</b>				
People transferred or repatriated	233			
Human remains transferred or repatriated	1			
<b>Tracing requests, including cases of missing persons</b>		<b>Women</b>	<b>Girls</b>	<b>Boys</b>
People for whom a tracing request was newly registered	43	12		2
Tracing cases closed positively (subject located or fate established)	26			
<i>including people for whom tracing requests were registered by another delegation</i>	3			
Tracing cases still being handled at the end of the reporting period (people)	813	53	1	9
<i>including people for whom tracing requests were registered by another delegation</i>	47			
<b>Unaccompanied minors (UAMs)/separated children (SC), including demobilized child soldiers</b>		<b>Girls</b>		<b>Demobilized children</b>
UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period	3	1		
<b>Documents</b>				
People to whom travel documents were issued	13			
People to whom official documents were delivered across borders/front lines	9			
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>				
<b>ICRC visits</b>		<b>Women</b>	<b>Minors</b>	
Places of detention visited	26			
Detainees in places of detention visited	17,880	1,012	79	
Visits carried out	39			
		<b>Women</b>	<b>Girls</b>	<b>Boys</b>
Detainees visited and monitored individually	79	2		
<i>of whom newly registered</i>	31	1		
<b>RCMs and other means of family contact</b>				
RCMs collected	4			
RCMs distributed	1			
Phone calls made to families to inform them of the whereabouts of a detained relative	10			

## MAIN FIGURES AND INDICATORS: ASSISTANCE

CIVILIANS			Total	Women	Children
<b>Economic security</b>					
Food consumption	People		38,397	15,461	7,619
	<i>of whom IDPs</i>		1,379	555	274
Food production	People		20,638	8,371	4,051
	<i>of whom IDPs</i>		10	4	2
Income support	People		15,463	3,105	10,178
	<i>of whom IDPs</i>		202	88	61
Living conditions	People		69,733	31,463	11,133
	<i>of whom IDPs</i>		2,228	1,039	317
<b>Water and habitat</b>					
Water and habitat activities	People		957,470	383,384	192,631
<b>Primary health care</b>					
Health centres supported	Structures		60		
	<i>of which health centres supported regularly</i>		20		
Average catchment population			282,290		
<b>Services at health centres supported regularly</b>					
Consultations			397,345		
	<i>of which curative</i>		397,345	169,629	65,106
Referrals to a second level of care	Patients		18,717		
	<i>of whom gynaecological/obstetric cases</i>		679		
<b>Mental health and psychosocial support</b>					
People who received mental-health support			384		
People who attended information sessions on mental health			1,586		
People trained in mental-health care and psychosocial support			34		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM</b>					
<b>Economic security</b>					
Living conditions	People		23,263	5,668	
<b>Water and habitat</b>					
Water and habitat activities	People		13,519	406	
<b>Health care in detention</b>					
Places of detention visited by health staff	Structures		9		
Health facilities supported in places of detention visited by health staff	Structures		3		
<b>WOUNDED AND SICK</b>					
<b>Hospitals</b>					
Hospitals supported	Structures		52		
	<i>including hospitals reinforced with or monitored by ICRC staff</i>		3		
<b>Services at hospitals reinforced with or monitored by ICRC staff</b>					
Surgical admissions					
	Weapon-wound admissions		*	*	*
	(including those related to mines or explosive remnants of war)		*	*	*
	Non-weapon-wound admissions		375		
	Operations performed		537		
Consultations			24,318		
<b>Services at hospitals not monitored directly by ICRC staff</b>					
Surgical admissions (weapon-wound and non-weapon-wound admissions)			15,780		
<b>First aid</b>					
First-aid training					
	Sessions		82		
	Participants (aggregated monthly data)		845		
<b>Water and habitat</b>					
Water and habitat activities <sup>3</sup>	Beds (capacity)		1,523		
<b>Physical rehabilitation</b>					
Projects supported			7		
<b>Services at physical rehabilitation projects supported regularly</b>					
People who received physical rehabilitation services	Aggregated monthly data		445	*	*

\* This figure has been redacted for data protection purposes. See the *User guide* for more information.

3. Owing to operational and data collection constraints, this figure may not reflect the extent of the activities carried out during the reporting period.