

BEIJING (regional)

COVERING: China, Democratic People's Republic of Korea, Mongolia, Republic of Korea



Present in the region since 1987, the ICRC moved its regional delegation for East Asia to Beijing in 2005. The delegation fosters support for humanitarian principles, IHL and ICRC activities in the region and worldwide, among governments, experts and National Societies. It promotes the incorporation of IHL into national legislation, military training and academic curricula. It supports the region's National Societies in developing their IHL promotion and tracing activities. In the Democratic People's Republic of Korea, in partnership with the National Society, it supports hospital care and contributes to meeting the need for affordable, good-quality prostheses.

KEY RESULTS/CONSTRAINTS

In 2013:

- ▶ authorities in the region, including those at the highest level, expressed interest in developing their partnership with the ICRC, confirming existing projects and considering new areas of cooperation, including in the Korean Peninsula
- ▶ Chinese authorities refined their understanding of prison management at seminars on health in places of detention and on study tours to detention facilities abroad
- ▶ Chinese military officials learnt more about applying IHL in military operations and planning at a training course organized with the ICRC
- ▶ in the Democratic People's Republic of Korea, patients in selected provincial hospitals benefited from orthopaedic treatment standards and facilities improved under extended Health Ministry/National Society/ICRC cooperation
- ▶ by developing its training packages and participating in high-level fora, the Red Cross Society of China boosted its capacity to address the needs of vulnerable people and to promote IHL/humanitarian principles and its own role

YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

HIGH

| ASSISTANCE | Targets | Achieved |
|--------------------------------|----------------|----------|
| WOUNDED AND SICK | | |
| Hospitals | | |
| Hospitals supported | Structures | 4 |
| Water and habitat | | |
| Water and habitat activities | Number of beds | 3,223 |
| Physical rehabilitation | | |
| Centres supported | Structures | 4 |
| Patients receiving services | Patients | 957 |

EXPENDITURE (in KCHF)

| | |
|-------------------------------------|-------|
| Protection | 913 |
| Assistance | 3,576 |
| Prevention | 3,164 |
| Cooperation with National Societies | 1,500 |
| General | - |

9,154

of which: Overheads 559

IMPLEMENTATION RATE

| | |
|---------------------------|------------|
| Expenditure/yearly budget | 90% |
|---------------------------|------------|

PERSONNEL

| | |
|---|----|
| Mobile staff | 21 |
| Resident staff (daily workers not included) | 39 |

CONTEXT

In early 2013, the Democratic People's Republic of Korea (hereafter DPRK) conducted a nuclear test. Members of the international community voiced their objections, the UN Security Council imposed new sanctions, and the DPRK's relations with the Republic of Korea (hereafter ROK) were further strained. These developments exacerbated the already deteriorating humanitarian situation in the country, although calm was eventually restored.

The resumption of the six-party talks on the DPRK's nuclear programme remained uncertain.

The ROK's new president took office pledging to ensure the country's security and also to mend bridges with the DPRK.

Conflicting territorial claims in the South and East China Seas continued to test relations between States in the region. Incidents of unrest continued to be reported in several parts of China. The new Chinese leadership emphasized reform, including that of the judiciary and detention system.

ICRC ACTION AND RESULTS

The Beijing regional delegation continued to focus on promoting IHL and humanitarian principles and securing support for ICRC operations in the region and beyond. Dialogue with decision-makers and influential parties was further strengthened through high-level meetings and events, at which current IHL issues, the need for neutral, impartial and independent humanitarian action, and the Movement's work were discussed. Notably during the ICRC president's visits, authorities in China, the DPRK and the ROK expressed interest in gradually expanding their partnership with the organization.

Cooperation between the Ministries of Justice and Public Security and the ICRC continued: they organized seminars on health issues in prison and study tours to exchange experiences and deepen mutual understanding of detention systems in China and abroad. The People's Liberation Army organized a training course with the ICRC to help officers from the various military regions add to their knowledge of IHL and teach it to their troops. Organizing the course also helped them prepare to host an international seminar on military planning and operations in 2014.

Dialogue with the ROK authorities and armed forces developed. The Ministry of Unification reaffirmed the need for regular discussions with the ICRC on their respective roles and responsibilities. ROK authorities and the ICRC finalized a cooperation agreement; the ICRC prepared to open an office in Seoul in 2014. Contact was maintained with the Mongolian authorities.

In the DPRK, together with the Ministry of Public Health and the Red Cross Society of the Democratic People's Republic of Korea, the ICRC strove, as before, to help improve the quality of surgical/medical services at the three partner provincial hospitals of Hamhung, Pyongsong and Sariwon: joint surgical operations were conducted and a team of ICRC specialists provided on-site staff training. Water and sanitation systems were rehabilitated and equipment, materials and consumables provided. The partnership between the three organizations developed positively: a new agreement was signed, extending cooperation for two more years and expanding it to one more hospital, in Kaesong.

The National Societies and the ICRC maintained their key roles in providing physical rehabilitation services in China and the DPRK.

The ICRC assisted the Chinese, Mongolian and ROK governments, through their national IHL committees and National Societies, in the domestic implementation of IHL. It facilitated the participation of government representatives in various events, including a regional consultation on the "Strengthening IHL" process and a meeting hosted by the Chinese national IHL committee for their counterparts from 12 Asian countries.

The ICRC, together with think-tanks, universities and the National Societies, organized academic initiatives to promote IHL and humanitarian issues, including advanced courses for lecturers and a regional moot court competition. It provided technical assistance to help teachers stimulate interest in humanitarian principles and action among their students, including through university undergraduate IHL courses and the Exploring Humanitarian Law programme in secondary schools or under the Red Cross youth curricula in China, Mongolia and the ROK.

The ICRC continued to support the National Societies' efforts to build their capacities, especially in the promotion of IHL/humanitarian principles and in the field of emergency preparedness/response. It conducted joint assessment visits to Chinese Red Cross branches in selected areas of the country and provided advice on training tools and on the design of a livelihood-assistance project for physically disabled people and their communities. It helped the Chinese Red Cross organize cooperation fora with African, Central Asian and Asia-Pacific National Societies and discussed contingency plans with the Republic of Korea National Red Cross.

CIVILIANS

Earthquake-affected families access Chinese Red Cross website to restore contact

Families separated by an earthquake that struck China's Szechuan province in April learnt of their relatives' fates through a Chinese Red Cross website that helped them trace their relatives. The National Society launched such a website for the first time, with ICRC support.

Following Chinese Red Cross/ICRC assessment visits, disabled people and the communities in three villages around the physical rehabilitation centre in Kunming (see *Wounded and sick*) stood to gain more secure livelihoods through their potential participation in an assistance project planned for 2014. The project was developed within the National Society's Integrated Community Resilience Programme, in which the ICRC played an advisory role. Chinese Red Cross/ICRC missions, helped by regular contact with the Beijing, Hong Kong, Shanghai, Xinjiang, Yanbian and Yunnan National Society branches, continued to assess needs and areas for further cooperation.

Vulnerable people to benefit from National Society branches' improved capacities

Some 30 participants from the National Society branches mentioned above, and from Macau and Taiwan, learnt more about large-scale emergency responses at the Health Emergencies in Large Populations (H.E.L.P.) course organized by Peking University, the Chinese Red Cross and the ICRC. DPRK Red Cross representatives attended a H.E.L.P. course in Geneva, Switzerland.

Chinese Red Cross personnel were better equipped to promote IHL/humanitarian principles and deliver family-links services and assistance programmes after the implementation of a training/information package developed by a National Society working group, with ICRC assistance. The Hong Kong branch of the Chinese Red Cross shared its family-links expertise at an implementation group meeting in Geneva and at a training session in mainland China.

Chinese Red Cross leaders visited ICRC operations in Afghanistan and returned with new ideas for boosting their own work, particularly with regard to medical care and physical rehabilitation (see *Wounded and sick*), and a willingness to support the ICRC's operations.

Authorities and the ICRC discuss humanitarian needs in the Korean Peninsula

The DPRK Red Cross and the ICRC continued to explore the possibility of conducting assessments to determine the needs of vulnerable people. At high-level meetings during the ICRC president's visit, DPRK officials discussed the expansion of ICRC activities in the medical field and examined the potential for cooperation in improving peri-urban communities' access to water and sanitation systems.

In the ROK, dialogue with the authorities, including the president, the armed forces and the National Society, focused on humanitarian needs that might arise in the event of an escalation of tensions in the Korean peninsula. At separate meetings, the Ministry of Unification, the National Society and the ICRC reviewed their roles in the event of a deterioration in the situation.

Humanitarian concerns related to families separated since the 1950–53 Korean War remained on the agenda of the ICRC's meetings with DPRK and ROK officials and both National Societies; planned and potential activities to help families restore contact, including possible ICRC technical support, were discussed. However, tensions in the peninsula blocked progress in this matter. A batch of temporary family reunions planned for September was cancelled by DPRK authorities five days before schedule.

PEOPLE DEPRIVED OF THEIR FREEDOM

Detainees in China to benefit from cooperation between Chinese detention authorities and the ICRC

The Ministries of Justice and Public Security and the ICRC consolidated their dialogue, including during meetings parallel to that between the Chinese president and the ICRC president (see *Authorities, armed forces and other bearers of weapons, and civil society*). Both ministries confirmed their interest in working with the ICRC and gradually expanding their cooperation.

Prison authorities broaden knowledge of prison management, including of health-related issues

Notably, the two aforementioned ministries each organized, jointly with the ICRC, a seminar on health in detention, where some 80 prison managers, doctors, medical staff from 15 provinces, and ministry officials discussed such matters as disease prevention and control with international and ICRC experts.

Officials from the Justice Ministry gained insights for possible adoption into their own prison management practice, studying such during ICRC-organized visits to detention facilities,

including those housing high-security detainees, in Switzerland and the United Kingdom of Great Britain and Northern Ireland. Officials from the Public Security Ministry were however unable to participate in a similar study tour abroad and in a regional seminar on arrest and detention.

The ICRC acquired a better understanding of the Chinese detention system and the reforms in progress – and, consequently, improved its dialogue with the ministries – during tours conducted by the ministries of facilities under their jurisdiction. For instance, ICRC observations from tours of four prisons/drug rehabilitation centres under the Public Security Ministry fed into discussions during the aforementioned health seminars.

Cooperation with Mongolian authorities on health issues in detention was put off, owing to internal constraints.

WOUNDED AND SICK

Patients in three DPRK hospitals benefit from improved surgery standards

The Ministry of Public Health, the DPRK Red Cross and the ICRC broadened the effort to improve surgery standards by renewing their project for two more years and beginning support to the city hospital in Kaesong, in addition to the referral hospitals in Hamhung, Pyongsong and Sariwon. This was formalized in a new agreement.

Hence, an assessment of the Kaesong hospital's water and electrical systems began, while patients and medical personnel in the three other hospitals benefited from the repair/upgrading of the water and power supply systems, operating theatres and orthopaedic wings. This included the first phase of the rehabilitation part of the project, which was met with delays and practical constraints along the way. In the second phase, patients requiring special attention were better monitored following renovations to the orthopaedic ward. Improvements to toilet facilities in the orthopaedic wards and to sterilization units were completed while work on the operating theatres neared completion.

The surgical/medical teams of the three provincial hospitals continued to improve treatment methods and raise standards, drawing on ICRC input provided during joint surgical operations and at training and information sessions. The local medical teams gradually implemented certain ICRC recommendations – for instance, the use of internationally recognized documentation tools, such as the Glasgow Coma Scale and temperature sheets – and improved medical logistics processes, particularly in pharmacy and supplies management. Physiotherapy continued to gain acceptance. Besides support in the form of long-term, capacity-building measures, the three hospitals also received medical/surgical equipment and supplies.

Disabled people make use of improved facilities at DPRK physical rehabilitation centre

Physically disabled people from the DPRK continued to receive suitable treatment at the Rakrang Physical Rehabilitation Centre, which, with DPRK Red Cross and ICRC assistance, improved the quality of its services and the production of prostheses and orthoses. The centre's surgical annex carried out amputations and pre-fitting procedures for both military personnel and civilians, using ICRC-donated materials and under the guidance of an ICRC surgical team; 128 cases were admitted.

The centre treated more patients by increasing its capacity, hiring more trained staff and adjusting its set-up to maintain production in anticipation of the departure of staff members for long-term ICRC-supported training abroad. Other staff members continued to sharpen their skills – in physiotherapy, stock management, and workshop safety and maintenance – at regular in-house training sessions. With material support from the ICRC, the centre added accommodation facilities for patients, in addition to those constructed in 2012. It also rehabilitated dilapidated infrastructure and made improvements to its power grid, sauna, workshop and other facilities.

Disabled people in China receive treatment

Over 400 patients received physical rehabilitation services at the Kunming centre and its Malipo workshop, run by the Yunnan branch of the Chinese Red Cross. With ICRC support and supervision, the centre's clinical personnel improved their capacity to provide adequate care to lower-limb amputees. At the Malipo workshop located in a rural area, patients benefited from regular prosthetic repair/maintenance without having to travel long distances. The Chinese Red Cross closed the Kaiyuan workshop owing to its low activity level.

The National Society explored the possibility of expanding the range of services, devices and support offered to disabled people in the communities surrounding the centre, conducting assessments jointly with the ICRC (see *Civilians*) and drawing on its advice.

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

Authorities expand support for IHL implementation and the ICRC

Discussions with decision-makers in the region, including the Shanghai Cooperation Organization, continued to concentrate on IHL-related and humanitarian issues, with a view to gaining support for the ICRC's neutral, impartial and independent humanitarian action. Notably during visits by the ICRC's president, high-level authorities in China, the DPRK and the ROK expressed willingness to gradually expand their partnership with the organization (see *Civilians* and *People deprived of their freedom*). The Chinese authorities' interest in supporting ICRC operations in Afghanistan

underscored their appreciation of the ICRC's mandate and the National Society's role (see *Civilians*).

Further to reviewing issues of mutual interest with the ICRC, such as the adoption of the Arms Trade Treaty and the Health Care in Danger project, government and armed forces representatives, including national IHL committee members, and academics exchanged ideas on advancing domestic IHL implementation at various fora. These included a regional consultation on the "Strengthening IHL" process (see *Kuala Lumpur*), a teaching session (see *Philippines*) and a meeting hosted by the Chinese national IHL committee for their counterparts from 12 Asian countries. Mongolian authorities informed the ICRC of their progress in acceding to the Mine Ban Convention.

Weapon bearers take steps to include IHL in operations and training

On the ROK military's request, the ICRC worked on training modules to enhance their legal advisers' capacities to provide operational advice to commanders.

Chinese armed/security forces and the ICRC explored new ways to promote IHL and other internationally recognized standards. Over 275 officers and instructors from various military regions of the People's Liberation Army learnt about incorporating IHL in military operations and planning at a seminar and a training course. Participants in the latter also learnt alternative methods for teaching IHL. Organizing the latter course also helped Chinese officials prepare for an international seminar on planning military operations, which they had agreed to host in 2014.

The People's Armed Police Force, the China University of Political Science and Law and the ICRC jointly organized two in-depth training sessions on internationally recognized policing standards, including those related to detention, for some 75 instructors and graduating national defence students.

Military and police personnel, including officers handling civil-military relations and peacekeepers from Mongolia, the ROK and 14 countries participating in a peacekeeping exercise in Mongolia, added to their knowledge of IHL, the ICRC and various

| WOUNDED AND SICK | | China | DPRK |
|-------------------------------------|---|-------|------|
| Physical rehabilitation | | | |
| Centres supported | Structures | 2 | 1 |
| Patients receiving services | Patients | 415 | 542 |
| | <i>of whom women</i> | 77 | 69 |
| | <i>of whom children</i> | 22 | 17 |
| New patients fitted with prostheses | Patients | 58 | 320 |
| | <i>of whom women</i> | 4 | 43 |
| | <i>of whom children</i> | 4 | 5 |
| Prostheses delivered | Units | 238 | 565 |
| | <i>of which for women</i> | 37 | 69 |
| | <i>of which for children</i> | 15 | 12 |
| | <i>of which for victims of mines or explosive remnants of war</i> | 29 | 1 |
| New patients fitted with orthoses | Patients | | 6 |
| | <i>of whom children</i> | | 1 |
| Orthoses delivered | Units | 1 | 9 |
| | <i>of which for women</i> | 1 | |
| | <i>of which for children</i> | | 4 |
| Patients receiving physiotherapy | Patients | 229 | 498 |
| Crutches delivered | Units | | 516 |
| Wheelchairs delivered | Units | | 41 |

humanitarian issues at ICRC briefings. Some 40 government and security industry representatives, as well as academics, discussed their overseas operational framework in relation to the Montreux document on private military and security companies.

Think-tanks and academic institutions raise awareness of IHL and the Movement

Experts from the region contributed to the humanitarian debate at various events, including a round-table on cyber warfare and IHL (see *Kuala Lumpur*) and an ROK Red Cross seminar with around 80 academics and government staff. Some 30 professors from the DPRK's three largest universities discussed IHL and humanitarian subjects such as POWs and humanitarian issues related to the 1950–53 Korean War at a DPRK Red Cross-organized seminar, the first in five years.

China's Shandong University's law faculty created a standardized undergraduate IHL course that other universities could use as well. Over 40 lecturers, including some from Chinese police-affiliated academies, learnt more about teaching IHL at two advanced courses organized with Jilin University in China and Korea University and the National Society in the ROK. University students throughout the region tested their IHL knowledge at a debate and at moot-court competitions, including one organized by the Chinese Red Cross branch in Hong Kong for 20 teams from 15 Asia-Pacific cities.

The Mongolia State University of Education formally completed the development, review and incorporation of an IHL course in its syllabus, enabling aspiring teachers to introduce IHL and humanitarian principles to secondary school students through the Exploring Humanitarian Law programme. In China and the ROK where the programme was also offered, education authorities and school administrators received implementation support from their National Societies. The Shanghai branch offered programme-related school visits, teacher training and competitions at their new teaching and training centre. Trained facilitators from the Jiangsu branch delivered an adapted programme at 24 Red Cross clubs. The Beijing and Macau branches worked on their implementation plan and contextualized version, respectively. The ROK Red Cross completed the Korean translation of a condensed version of the

programme and worked on incorporating it in their Red Cross youth curriculum.

General and specialist audiences across the region accessed materials on IHL and the ICRC in their own languages through the ICRC's Chinese and Korean webpages, other online/social media platforms and print and broadcast media.

RED CROSS AND RED CRESCENT MOVEMENT

National Societies prepare for 2013 Council of Delegates

The region's National Societies, the ICRC and other Movement partners met regularly, deepening cooperation and mutual understanding of plans and working methods.

Before the 2013 Council of Delegates, at meetings in Hong Kong and Geneva, legal advisers from the region's National Societies reviewed progress in implementing resolutions and pledges from the 31st International Conference.

Chinese Red Cross shares experiences with emergency services at experts' workshop

At three cooperation fora, the Chinese Red Cross explored partnerships with its Movement counterparts in Africa, Central Asia and the Asia-Pacific. The National Society spoke about the Beijing branch's ambulance and pre-hospital services at an international experts' workshop on emergency services during armed conflict (see *Mexico City*).

The Mongolian and ROK National Societies translated family-links documents into their local languages, strengthening their services.

With Movement support, the Mongolian Red Cross worked to reinforce its legal base, developing amendments to its statutes and the Red Cross law.

| MAIN FIGURES AND INDICATORS: ASSISTANCE | | Total | Women | Children |
|--|---|-------|-------|----------|
| WOUNDED AND SICK | | | | |
| Hospitals¹ | | | | |
| Hospitals supported | Structures | 5 | | |
| | <i>of which provided data</i> | 1 | | |
| Admissions | Patients | 128 | 28 | |
| | <i>of whom other surgical cases</i> | 128 | | |
| Operations performed | | 128 | | |
| Water and habitat¹ | | | | |
| Water and habitat activities | Number of beds | 3,223 | | |
| Physical rehabilitation² | | | | |
| Centres supported | Structures | 3 | | |
| Patients receiving services | Patients | 957 | 146 | 39 |
| New patients fitted with prostheses | Patients | 378 | 47 | 9 |
| Prostheses delivered | Units | 803 | 106 | 27 |
| | <i>of which for victims of mines or explosive remnants of war</i> | 30 | | |
| New patients fitted with orthoses | Patients | 6 | | 1 |
| Orthoses delivered | Units | 10 | 1 | 4 |
| Patients receiving physiotherapy | Patients | 727 | 95 | 29 |
| Crutches delivered | Units | 516 | | |
| Wheelchairs delivered | Units | 41 | | |

1. DPRK

2. China, DPRK