

CONTEXT

In Bujumbura, demonstrations ahead of the election process led to violent confrontations. The situation in some districts remained volatile following the presidential elections in July. Security forces conducted operations throughout the year to quell the unrest. There were reports of casualties and large numbers of arrests. Other parts of the country remained relatively calm, but hundreds of thousands of people fled to neighbouring countries (see, for example, *Nairobi* and *Rwanda*) in anticipation of further violence.

Tens of thousands of refugees from the Democratic Republic of the Congo (hereafter DRC) and Rwanda remained at four UNHCR camps.

Heavy rains caused floods and landslides in the south of the country and in Bujumbura.

Burundi remained a major contributor of troops to international missions, notably the African Union Mission in Somalia and the UN Multidimensional Integrated Stabilization Mission in the Central African Republic.

ICRC ACTION AND RESULTS

The ICRC contributed to the Burundi Red Cross's response to the tensions in Bujumbura by providing first-aid kits, vehicles and other support. This helped volunteers to: treat people wounded during unrest on the spot – where possible – or at first-aid posts; evacuate the injured to hospital; and transport human remains to morgues. National Society volunteers avoided security risks by applying the Safer Access Framework. In addition, weapon-wound surgery kits were donated to two hospitals to help them cope with influxes of patients.

Following the outbreak of violence, the ICRC engaged security forces in dialogue to help strengthen their adherence to international norms and standards applicable to law enforcement and to facilitate access for wounded people to medical care.

National Society/ICRC family-links services helped members of families dispersed by the unrest or other circumstances to restore/maintain contact: some people, including those who sought refuge in neighbouring countries, were put in touch with their families after being located by the ICRC; people in prison stayed in touch with relatives within the country or abroad through RCMs and phone calls. The ICRC kept Movement components up to date on family-links needs in Burundi and in the region. The ICRC also sought to support efforts to exhume and identify the remains of people who had died in relation to past conflict; to this end, it briefed representatives of the security forces, the solidarity ministry and the National Society on the basic procedures for managing human remains and the ethical considerations to be kept in mind.

The ICRC continued to help the authorities meet the needs of people deprived of their freedom. To this end, delegates visited detainees, in accordance with the organization's standard procedures, and individually monitored security detainees and other particularly vulnerable inmates. Findings from these visits and material/technical support helped the authorities improve detainees' treatment and living conditions. A legal services department was set up in one prison to improve management of detainees' cases; it was the second office of this kind to be set up, with ICRC support, in the past two years. Detainees' health and hygiene conditions improved, owing to the efforts of services

supported by the ICRC: maintenance personnel identified pressing infrastructural issues and made the necessary upgrades to facilities; health staff monitored detainees' health – including those suffering from TB and showing symptoms of HIV/AIDS – and/or referred them to hospital. At workshops organized by the working group on penitentiary reform and/or the ICRC, the officials concerned reviewed the draft national penitentiary policy, and prison directors strengthened their ability to apply internationally recognized standards for prison management.

The ICRC continued to support the Saint Kizito Institute in Bujumbura in providing good-quality physical rehabilitation services for disabled people, especially minors. It also supported the studies abroad of four students of physiotherapy/orthopaedic technology, with a view to improving the quality and sustainability of physical rehabilitation services in the country.

Troops bound for missions abroad learnt more about IHL rules applicable to peacekeeping at ICRC briefings; brochures and training videos translated into the local language made the contents of these materials easier to understand. Military/police commanders discussed the differences between IHL and international human rights law at an advanced workshop, where they learnt to determine which legal framework applied to a given situation. The Burundian parliament continued to take steps to implement IHL; it studied draft laws, prepared with some ICRC support, for ratifying the Arms Trade Treaty and a regional convention on small arms. Influential actors capable of facilitating humanitarian action, or of persuading others to do so, were urged to support IHL and Movement action through dialogue and other means. Radio broadcasters, in particular, helped facilitate National Society/ICRC efforts to inform potential beneficiaries of family-links and other services available to them.

CIVILIANS

Following the outbreak of violence in Bujumbura, security forces were reminded of international norms and standards applicable to law enforcement, and of the importance of facilitating access for wounded people to medical care (see *Actors of influence*).

Congolese and Rwandan refugees and Burundians fleeing violence restore contact with their families

Members of families dispersed by armed conflict, detention and other circumstances restored/maintained contact by means of National Society/ICRC family-links services. Through RCMs and phone calls, Burundians kept in touch with relatives who had fled the country; Congolese and Rwandan refugees used the same services to contact relatives in their places of origin. People also filed tracing requests for relatives feared missing; over 90 people were put in touch with their families after being located by the ICRC in Burundi and in neighbouring countries.

When appropriate, family members were reunited. The ICRC checked on the well-being of a minor in Rwanda who rejoined her family in Burundi and another in Burundi who rejoined her family in the DRC. Inter-agency meetings enabled humanitarian actors involved in child protection to coordinate their activities, such as the issuance of ICRC travel documents for resettlement programmes.

To help the National Society strengthen its family-links services, volunteers and staff, including those working in four UNHCR refugee camps in Burundi, had part of their salary covered by the ICRC. They expanded their skills through on-the-job training;

for example, volunteers managed tracing requests and registered vulnerable children during National Society/ICRC field trips to monitor the family-links needs of Burundians whose relatives were displaced abroad. The National Society and the ICRC also established working procedures to improve coordination in the restoration of family links during emergencies. Other Movement components were kept up to date by the ICRC on family-links needs in Burundi and in the region, and were prepared to offer assistance when needed.

Security forces learn basic procedures for managing human remains

In support of efforts to exhume and identify the remains of people who had died in relation to past conflict, representatives of the solidarity ministry, security forces and National Society were briefed on the basic procedures for managing human remains and the ethical considerations to be kept in mind, at an ICRC-organized information session.

The National Society/ICRC also stood ready to support the authorities in collecting and identifying human remains during emergencies (see *Wounded and sick*).

PEOPLE DEPRIVED OF THEIR FREEDOM

People detained in connection with unrest receive visits from the ICRC

Security detainees were among more than 1,000 inmates registered and monitored individually by the ICRC. In places of detention where people arrested in relation to the violence or the political situation were being held, hygiene items and first-aid kits were provided to help the authorities ensure detainees' well-being. Nearly 10,000 detainees in all received visits from the ICRC, conducted in accordance with the organization's standard procedures. Inmates restored/maintained contact with relatives within the country or abroad through RCMs and phone calls. After their release, 50 people registered by the ICRC were followed up; some returned home with ICRC assistance.

The authorities used the ICRC's confidential feedback from the above-mentioned visits, and technical input, to improve detainees' treatment and living conditions. They also continued to draw on ICRC support to improve prison management. More systematic registration, archiving and follow-up of detainees' individual files helped to facilitate respect for judicial guarantees. At the Ngozi central prison, a legal services department was set up – the second office of this kind established with ICRC assistance in the past two years. At workshops organized by the working group on penitentiary reform and/or the ICRC, the officials concerned drew on ICRC expertise to review a draft of the national penitentiary policy, and prison directors strengthened their ability to apply internationally recognized standards for prison management. A senior penitentiary official added to his knowledge of the latter subject at a regional workshop (see *Nairobi*).

Prison health and maintenance services improve detainees' health and living conditions

Over 5,000 detainees, and children accompanying them, in five prisons, received good-quality care from prison health services supported by the health ministry and the ICRC. Monitoring of detainees' health helped ensure that ailing or malnourished detainees were promptly assisted: 248 detainees were treated for symptoms of HIV/AIDS and 28 for TB, after more than 35,400 consultations; 805 detainees were referred to hospital. At all 11 central prisons, detainees and prison personnel learnt more

about good hygiene and minimizing the risk to their health at information sessions; some of these personnel, and prison nurses, strengthened their ability to deal with contagious diseases, at an ICRC-organized workshop. At a round-table organized with ICRC support, the health and justice ministries took steps to bolster cooperation in managing health issues in detention.

Visits conducted by the authorities jointly with a civil engineer – hired in 2014, at the ICRC's urging, to take charge of maintaining and repairing prison facilities – helped the authorities identify and prioritize pressing issues, and thus carry out ICRC-supported repairs/upgrades to infrastructure that benefited some 5,400 detainees in eight places of detention. Prison directors used ICRC financial and technical assistance to purchase hygiene/cleaning materials and improve inventory management.

Female detainees and minors at two prisons were able to spend more time outside their cells by participating in a sports programme organized by an NGO with ICRC support.

WOUNDED AND SICK

Wounded people are treated on the spot or evacuated to hospital by National Society first-aiders

In Bujumbura, around 170 people injured during unrest were treated on the spot, where possible, or at National Society first-aid posts; 470 were evacuated to hospital. The remains of at least 28 people were transported to morgues by National Society volunteers equipped with ICRC-provided body bags; this helped ensure that the deceased could be identified later and their remains eventually handed over to their families. Volunteers reached people injured in or displaced from violence-affected areas more quickly with 11 vehicles, provided with drivers and fuel, and radio handsets made available by the ICRC. The volunteers were also provided with first-aid kits, water tanks and household essentials, to help them respond to the most pressing needs of people affected by violence.

Two hospitals were better placed to perform emergency surgery on up to 100 injured people, with ICRC-donated weapon-wound surgery kits.

Over 2,600 disabled children improve their mobility at an ICRC-supported centre

Nearly 3,000 disabled people, including more than 2,600 children, improved their mobility through customized assistive devices and other physical rehabilitation services, provided free of charge at the Saint Kizito Institute. The institute improved the quality of care it provided by optimizing its patient management, departmental organization and treatment protocols with ICRC financial and technical support. Four students continued their studies abroad in physiotherapy/orthopaedic technology to help improve the quality and sustainability of physical rehabilitation services in Burundi.

At ICRC-financed courses: teachers at the Saint Kizito Institute's school for children learnt how to adapt sports activities so that both disabled children and children without disabilities could participate; and the national coordination team for physiotherapy services, composed of senior staff from physiotherapy institutions, strengthened their leadership and managerial capacities.

ACTORS OF INFLUENCE

In relation to unrest in Bujumbura, police/other security forces and the ICRC engaged in dialogue on the use of force during law enforcement operations and on the relevant legal frameworks (see *Civilians*).

Troops bound for missions abroad deepen their understanding of IHL

Nearly 4,500 troops, including 90 high-ranking officers, to be deployed to Somalia, and 750 UN peacekeepers bound for the Central African Republic were briefed on IHL rules applicable to peacekeeping; brochures and training videos were translated into the local language, making the material easier to understand and remember. A total of 32 military/police commanders – primary decision-makers in the field – discussed the difference between IHL and international human rights law at an advanced workshop, where they learnt to determine which legal framework applied to a given situation. The Burundian military and the ICRC continued to work on strengthening IHL instruction in military training; cadets at five officers' schools learnt more about IHL from 12 instructors who had been trained with ICRC support. Some military officers supplemented their knowledge of incorporating IHL in field operations at courses in San Remo and elsewhere (see, for example, *International law and policy*).

The authorities prepare to ratify two arms regulation treaties

The parliament continued to pursue implementation of IHL amid political developments; it was in the process of studying draft laws for ratifying the Arms Trade Treaty and a regional convention on small arms. The foreign affairs ministry drafted the laws, following recommendations from government legal experts who – with ICRC support – reviewed the compatibility of these treaties with domestic legislation. Parliamentarians reinforced their knowledge of these subjects at a workshop organized by the national commission against the proliferation of small arms, an NGO and the ICRC. Two officials from the security ministry attended a course on implementing the Arms Trade Treaty in Addis Ababa, Ethiopia.

The entries on Burundi's local practices in the ICRC's study on customary IHL were updated. A foreign affairs ministry official participated in an experts' workshop in Switzerland, linked to the Strengthening IHL process, on improving legal protection for detainees.

Representatives from the foreign affairs ministry, other ministries and the National Society participated in an ICRC preparatory workshop for the 32nd International Conference.

Radio broadcasters help to inform people of family-links and other services available to them

Influential actors capable of facilitating humanitarian action, or of persuading others to do so, were urged to support IHL and Movement action through, for example, dialogue and briefings. Journalists, radio broadcasters in particular, supported National Society/ICRC efforts to inform potential beneficiaries of family-links and other services available to them. Two journalists learnt more about reporting on humanitarian issues at a workshop abroad (see *Dakar*); they were also briefed on the protection due to them during armed conflict. Representatives of the National Society, health ministry, national order of physicians and other health institutions discussed issues covered by the Health Care in Danger project at an ICRC-organized briefing. One university enriched its library with ICRC-provided IHL publications. Student teams from five universities tested their grasp of IHL at regional competitions (see, for example, *Niger*).

RED CROSS AND RED CRESCENT MOVEMENT

The Burundi Red Cross responded to emergencies – notably unrest in Bujumbura (see *Wounded and sick*) and landslides south of the country – with ICRC support. At ICRC training, scores of staff and volunteers, including coordinators, strengthened their ability to administer first aid, upgrade water infrastructure and provide family-links services during such situations.

To help ensure that they could conduct these activities in violence-prone areas, volunteers were urged to apply the Safer Access Framework and branch leaders advised on security measures; the National Society reported no casualties among its staff. To promote its activities and foster understanding of its neutral, independent and impartial humanitarian action, the National Society produced – with the ICRC or with ICRC support – public communication materials, including radio and TV spots. With the ICRC's help, it also strengthened its ability to manage its finances and its resources.

Regular coordination meetings with Movement partners helped maximize efficiency, avoid duplication of effort and identify unmet needs.

| MAIN FIGURES AND INDICATORS: PROTECTION | | Total | | | |
|--|---|-------|----------|--------|----------------------|
| CIVILIANS (residents, IDPs, returnees, etc.) | | | | | |
| Red Cross messages (RCMs) | | | UAMs/SC* | | |
| RCMs collected | | 1,922 | 5 | | |
| RCMs distributed | | 1,862 | 3 | | |
| Phone calls facilitated between family members | | 162 | | | |
| Reunifications, transfers and repatriations | | | | | |
| People reunited with their families | | 2 | | | |
| | <i>including people registered by another delegation</i> | 1 | | | |
| People transferred/repatriated | | 1 | | | |
| Tracing requests, including cases of missing persons | | | Women | Girls | Boys |
| People for whom a tracing request was newly registered | | 192 | 37 | 54 | 24 |
| | <i>including people for whom tracing requests were registered by another delegation</i> | 13 | | | |
| People located (tracing cases closed positively) | | 97 | | | |
| | <i>including people for whom tracing requests were registered by another delegation</i> | 15 | | | |
| Tracing cases still being handled at the end of the reporting period (people) | | 162 | 37 | 43 | 21 |
| | <i>including people for whom tracing requests were registered by another delegation</i> | 20 | | | |
| UAMs/SC*, including demobilized child soldiers | | | Girls | | Demobilized children |
| UAMs/SC newly registered by the ICRC/National Society | | 8 | 3 | | |
| UAMs/SC reunited with their families by the ICRC/National Society | | 2 | 2 | | |
| | <i>including UAMs/SC registered by another delegation</i> | 1 | | | |
| UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period | | 8 | 3 | | |
| Documents | | | | | |
| People to whom travel documents were issued | | 29 | | | |
| Official documents relayed between family members across borders/front lines | | 2 | | | |
| PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses) | | | | | |
| ICRC visits | | | Women | Minors | |
| Detainees visited | | 9,901 | 421 | 425 | |
| | | | Women | Girls | Boys |
| Detainees visited and monitored individually | | 1,145 | 16 | 3 | 80 |
| Detainees newly registered | | 1,040 | 14 | 3 | 80 |
| Number of visits carried out | | 116 | | | |
| Number of places of detention visited | | 25 | | | |
| Restoring family links | | | | | |
| RCMs collected | | 128 | | | |
| RCMs distributed | | 77 | | | |
| Phone calls made to families to inform them of the whereabouts of a detained relative | | 14 | | | |
| People to whom a detention attestation was issued | | 29 | | | |

*Unaccompanied minors/separated children

| MAIN FIGURES AND INDICATORS: ASSISTANCE | | Total | Women | Children |
|--|---|-------|-------|----------|
| PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses) | | | | |
| Water and habitat (in some cases provided within a protection or cooperation programme) | | | | |
| Water and habitat activities | Beneficiaries | 5,294 | | |
| Health | | | | |
| Number of visits carried out by health staff | | 53 | | |
| Number of places of detention visited by health staff | | 5 | | |
| Number of health facilities supported in places of detention visited by health staff | | 5 | | |
| WOUNDED AND SICK | | | | |
| Physical rehabilitation | | | | |
| Projects supported | Structures | 1 | | |
| Patients receiving services | Patients | 2,920 | 109 | 2,647 |
| New patients fitted with prostheses | Patients | 10 | 4 | 3 |
| Prostheses delivered | Units | 19 | 7 | 5 |
| | <i>of which for victims of mines or explosive remnants of war</i> | 1 | | |
| New patients fitted with orthoses | Patients | 261 | 10 | 240 |
| Orthoses delivered | Units | 474 | 11 | 445 |
| | <i>of which for victims of mines or explosive remnants of war</i> | 2 | | |
| Patients receiving physiotherapy | Patients | 1,022 | 38 | 926 |
| Crutches delivered | Units | 63 | | |
| Wheelchairs delivered | Units | 1 | | |