

The ICRC has been working in Colombia since 1969, striving to secure greater compliance with IHL by all armed groups – particularly regarding the protection of persons not taking part in the conflict – and promoting its integration into the doctrine, training and operational procedures of the Colombian armed forces. The ICRC also visits security detainees, provides emergency relief to IDPs and other victims of the conflict and implements public health programmes and small-scale infrastructure rehabilitation projects in conflict-affected areas. It works with the Colombian Red Cross Society and other members of the Movement to coordinate humanitarian activities in Colombia's conflict-affected regions.

EXPENDITURE (IN KCHF)

Protection	4,962
Assistance	14,676
Prevention	4,099
Cooperation with National Societies	1,227
General	_

24,964

of which: Overheads 1,524

IMPLEMENTATION RATE

Expenditure/yearly budget 101%

PERSONNEL

59 expatriates

222 national staff (daily workers not included)

KEY POINTS

In 2006, the ICRC:

- ▶ together with the Colombian Red Cross, provided food, food vouchers and essential household items, and supported agricultural projects, benefiting more than 63,000 residents affected by the conflict and newly displaced people; completed and initiated water and sanitation projects benefiting some 8,000 people;
- together with the Ministry of Health, conducted 5 workshops on the clinical management of patients with weapon wounds and one war-surgery seminar for civilian and military surgeons;
- documented 1,217 alleged IHL violations, including cases of sexual violence, made 243 written and oral representations to weapon bearers regarding such violations and assisted 1,728 victims of threats;
- launched a comprehensive mine-action programme in the framework of an integrated partnership with the Norwegian Red Cross;
- ▶ followed the individual cases of 4,504 people detained in connection with the conflict and completed, together with the national penitentiary authorities, a survey of health services in 60 places of permanent detention;
- assisted the armed forces in conducting 2 "after action reviews" to evaluate specific military operations from the perspective of compliance with IHL; with the Colombian Red Cross, assisted police contingents involved in military operations in integrating IHL into their training curricula.

CONTEXT

President Alvaro Uribe's re-election in May 2006 and the earlier consolidation of his party's majority in Congress following legislative elections in March further strengthened his position.

Talks conducted throughout the year between representatives of the Colombian government and the National Liberation Army (ELN) made significant progress. However, hopes of the implementation of a "humanitarian accord" involving the release of people held by the Revolutionary Armed Forces of Colombia (FARC) in exchange for the release of detained FARC members were dashed when a car bomb exploded on the premises of a military school in Bogotá on 19 October, wounding 23 people. The government accused the FARC of being behind the bombing, while the FARC denied any involvement.

In July, the High Commissioner for Peace declared that the demobilization of paramilitary groups had been largely completed. However, the legal framework surrounding the process, namely the Justice and Peace Law, was called into question, with the Constitutional Court ruling that some of the law's provisions were unconstitutional. According to official figures, some 30,000 former members of paramilitary forces had handed in their weapons by July 2006. About 20 of their leaders, who surrendered in August, were placed in a holding centre in Antioquia. Their subsequent transfer to a high-security prison near Medellín provoked a major crisis in the peace process. Meanwhile, newly formed armed groups, calling themselves selfdefence groups, emerged, their activities prompting further displacement. In December, the arrest of local politicians, senators, members of congress and former government officials, all accused of harbouring links with the paramilitaries, rocked the political establishment.

Fighting persisted throughout the year in various regions, especially in the south, as well as in Arauca, Antioquia, Chocó, Tolima and Meta-Guaviare, leading to increased displacements.

The number of casualties from mines and other explosive remnants of war (ERW) continued to rise.

MAIN FIGURES AND INDICATORS

PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)		
Detainees visited	7,295	
Detainees visited and monitored individually	4,504	
Number of visits carried out	671	
Number of places of detention visited	365	
RESTORING FAMILY LINKS		
Red Cross messages (RCMs) and reunifications		
RCMs collected	135	
RCMs distributed	126	
Tracing requests, including cases of missing persons		
People for whom a tracing request was newly registered	485	
Tracing requests closed positively (persons located)	106	
Tracing requests still being handled at 31 December 2006	391	

CIVILIANS		
Economic security, water and habitat		
Food	Beneficiaries	58,176
Essential household items	Beneficiaries	63,876
Agricultural inputs and micro-economic initiatives	Beneficiaries	11,064
Water supply schemes and sanitation systems (completed projects)	Beneficiaries	3,026
Habitat structures	Beneficiaries	2,792
Health		
Health centres supported	Structures	23
Consultations	Patients	8,643
Immunizations	Activities	5,505

ICRC ACTION

The ICRC shared its analysis of the country's humanitarian situation with the relevant authorities. It maintained an ongoing dialogue with all the parties to the conflict to seek respect for the civilian population in accordance with IHL and to secure unhindered access to conflict-affected areas.

The ICRC concentrated its field activities in some 20 priority zones where needs were greatest, providing food and essential household items to IDPs and residents. It also worked to improve access to health services in these areas through a flexible range of options, including dispensing curative medical care, directing beneficiaries to government health facilities, accompanying Ministry of Health personnel on their rounds and running mobile health units in conjunction with partner National Societies.

In 2006, the delegation fine-tuned the implementation of its strategic approach, seeking external advice in assessing the impact of its activities in priority zones and in developing operational guidelines to further improve the quality of its field work.

In line with its overall strategy of encouraging public services to take greater responsibility for the provision of health care to IDPs and residents in isolated rural areas, the ICRC explained to IDPs and residents their rights under Colombian legislation and, when necessary, directed them to existing health structures.

While keeping up direct distributions of food and essential household items to IDPs, the ICRC developed a food voucher programme in Bogotá and Medellín so as to better address the needs of newly arrived IDPs. Its success prompted the government's Social Solidarity Network

(Acción Social) to make plans to replicate the scheme in its own assistance programmes countrywide.

WFP and the ICRC launched a survey of the socio-economic situation of IDPs in eight cities around the country, starting with Medellín. The findings were to be shared with the authorities concerned so that they could develop programmes more suited to IDPs' long-term needs.

The delegation continued visits to places of detention throughout the country, monitoring the treatment and living conditions of more than 7,000 detainees. It worked closely with the national penitentiary authorities (INPEC), completing a survey of health services in prisons, on the basis of which recommendations were to be made to the Colombian authorities.

Following renewed interest from the authorities in addressing the issue of enforced disappearances, a new public policy was put in place in 2006 for which the ICRC's input was requested. As a result, three conferences on the issue of missing persons were held. The ICRC provided its expertise, particularly in the field of forensic medicine, and submitted a report on the issue to the Office of the Vice-President.

During a series of internal workshops in each of the ICRC's five sub-delegations, communication strategies designed to reinforce acceptance of the ICRC's humanitarian work by all parties to the conflict and groups concerned were streamlined and adapted to local contexts and audiences.

The ICRC assisted the Colombian Red Cross in finalizing its national development plan. Together, the two organizations launched an overall review of the mine and ERW situation with a view to developing a flexible approach aimed at preventing accidents and reducing the socio-economic impact of mine/ERW contamination.

The ICRC attended a meeting of the newly established Inter-Agency Standing Committee in Colombia, set up to contribute to better coordination of humanitarian action in the country.

CIVILIANS

Protection

The number of alleged IHL violations (1,217) documented by the delegation in 2006 was comparable to the numbers reported in the previous year, with disappearances (347) and targeted executions (274) representing the bulk of cases and with hostage-taking (122) continuing to decline. Twenty-eight allegations of sexual violence perpetrated by weapon bearers were also documented.

Community leaders and even entire communities (particularly of indigenous or Afro-Colombian origin) were subjected to an increasing number of threats, especially during the second half of the year, leading to their displacement or flight to neighbouring countries. Armed groups continued to control access to certain areas to monitor population movements and the circulation of goods, including medical supplies. Medical staff were often directly targeted (25 alleged cases), restricting the population's access to health care in some conflict-affected areas. The number of civilians affected by mines and ERW remained a concern, as did the murder of IDPs and demobilized combatants who had sought refuge in cities. Some 400 families who faced economic hardship as a result of such targeted assassinations received financial assistance to pay for funeral and transportation costs.

In all, 243 representations were made to weapon bearers regarding violations of IHL. Armed groups released six people they had been holding, with the ICRC providing logistical assistance to facilitate their transport home. Over 1,700 victims of threats were given material assistance and help in reaching safer areas. Victims of sexual violence were also assisted or directed to appropriate health structures.

Some cases of forced recruitment were documented in 2006. Four children associated with fighting forces and handed over to the ICRC were brought to the Colombian Institute of Family Welfare (ICBF) for psychological counselling. Another eight placed with the ICBF were able to locate their families with ICRC support.

Persons unaccounted for in connection with the conflict

Significant progress was made in 2006 on the issue of persons missing in connection with the conflict. Within the framework of the Justice and Peace Law, the National Reparation and Reconciliation Commission placed the issue at the top of its agenda, strengthening the role of the National Commission on Missing Persons (Comisión Nacional de Búsqueda), which submitted a plan to improve coordination among all concerned stakeholders, including those working in the field of forensic medicine. The Justice and Peace Law, which provided for lighter sentences for demobilized members of opposition and paramilitary groups who confessed spontaneously, elicited some confessions, leading to the location of many mass graves.

Government entities working on the issue of missing persons received advice and recommendations from the ICRC; associations of families of missing persons were counselled and supported.

Information was obtained from armed groups regarding 34 cases of enforced disappearance, leading in some instances to the recovery of human remains, thus allowing some families to complete the grieving process.

- ▶ 112 RCMs collected from and 83 distributed to civilians
- ▶ new tracing requests registered for 485 people (79 females, 78 minors at the time of disappearance); 106 people located; 391 people (52 females, 42 minors at the time of disappearance) still being sought

Economic security

IDP

Compared with 2005, displacement increased significantly in 2006. Emergency assistance to IDPs, consisting of food rations for up to three months (up to six months for single-headed households) and essential household items, was provided by Acción Social, international NGOs and the ICRC. Displaced individuals in the cities of Bucaramanga, Pereira, Sincelejo, and Villavicencio received assistance from the Colombian Red Cross and the ICRC. A voucher programme launched in November 2005 in Bogotá was extended to the city of Medellín.

The mid- and long-term needs of IDPs remained largely unmet. However, the government and humanitarian organizations continued to shift the focus of assistance to helping IDPs recover their self-sufficiency, encouraged by the ICRC, which regularly monitored the IDPs' socio-economic situation and helped to tailor emergency kits to their needs.

After completing a pilot test in one neighbourhood of Bogotá as part of a joint initiative aimed at collecting relevant data to improve the situation of IDPs, WFP and the ICRC launched a similar survey in Medellín, prior to extending it to seven other cities.

Various State entities increased their support to IDPs in 17 reception centres thanks to a plan of action agreed by Acción Social and the ICRC. Cooperation among the members of an interagency committee, comprising Acción Social, the IOM, UNHCR and the ICRC, was instrumental in achieving this goal.

- ▶ 54,486 IDPs (12,940 households) received food
- ▶ 7,702 IDPs (1,890 households) benefited from a food voucher programme
- ▶ 716 IDPs (168 households) benefited from agricultural projects
- ▶ 62,428 IDPs (14,900 households) received essential household items

Conflict-affected residents

Resident populations living in remote areas remained exposed to threats and intimidation by armed groups. Security constraints prevented State institutions from providing services in these areas. Moreover, residents sometimes faced restrictions on their movements and the circulation of goods such as food, fuel and building materials.

- ▶ 3,690 residents (843 households) in ICRC priority zones provided with food and 1,448 (305 households) with essential household items on an ad hoc basis
- ▶ 2,646 residents (560 households) benefited from agricultural projects

Health care for IDPs and conflict-affected residents

Health authorities were encouraged to provide health care to IDPs and residents in conflict-affected areas, with emphasis on immunization and reproductive health services. Patients were referred to health centres and hospitals as a result of the ICRC's increased understanding of the national health system. According to national legislation, IDPs and residents in conflict areas were entitled to public health services, whether or not they were registered in the national health insurance system. In 231 instances where certain medicines and the cost of accommodation and transport of IDPs were not covered by the national health system, the ICRC stepped in on an ad hoc basis. The same was done for residents, whenever necessary. Furthermore, an agreement was signed with Profamilia, a private Colombian organization dealing with family planning and sexual and reproductive health, to provide medical and psychological support to victims of conflict-related sexual violence. In 2006, 17 people (including 3 adolescent males) benefited from the programme.

Weapon-wounded and sick civilians living in rural areas affected by the conflict continued to receive medical assistance from mobile health units supported through partnerships with the Red Cross Societies of Canada, Norway and Sweden. Local medical teams and health brigades were able to access isolated areas accompanied by ICRC delegates who, prior to such missions, obtained security guarantees from armed groups operating in the area. In rural districts where security constraints prevented the deployment of public health staff, local medical personnel attended 43 information sessions on their rights and obligations under IHL when carrying out their work.

The Colombian and French Red Cross Societies, the International Federation and the ICRC worked together to increase community awareness of reproductive health, immunization and the risks of HIV/AIDS, including by producing a leaflet on HIV/AIDS prevention.

In the 23 ICRC-supported health centres (catchment population: 595,684):

- ▶ 8,643 consultations (290 ante-/ postnatal, 8,353 curative, of which 4,584 to women) were given;
- ▶ 5,505 vaccine doses were administered (2,605 to children aged five or under and 2,900 to women of childbearing age);
- ▶ 822 health sessions held.

Community infrastructure projects

A total of 32 projects involving improvements to water and sanitation systems and the construction/rehabilitation of schools, health centres and productive facilities were completed by December and another 21 were in progress.

- ▶ 1,493 people provided with access to improved quality and quantity of water
- ▶ 2,407 people benefited from completed (1,533 people) and ongoing (874 people) projects improving basic sanitation facilities
- ▶ 4,542 children benefited from completed (2,792 children) and ongoing (1,750 children) projects improving basic shelter and sanitation facilities in schools
- ▶ 200 people were participating in a project to improve coffee drying facilities

PEOPLE DEPRIVED OF THEIR FREEDOM

A reform of the judicial system initiated in 2005, which reduced the amount of time spent by detainees under investigation in places of detention, led to a significant decrease in the official overcrowding rates in prisons in 2006. Moreover, with the construction under way of 12 to 15 new facilities for 28,000 inmates, the trend seemed likely to continue.

INPEC continued to run community health programmes independently. With the ICRC, it completed a survey in 60 detention centres to improve the planning and delivery of health services for detainees. Medical personnel attended two seminars organized by the ICRC and UNAIDS on the diagnosis and treatment of tuberculosis and HIV/AIDS in detention. To mark HIV/AIDS day, INPEC organized prevention activities in prisons with ICRC support.

Following a successful pilot project pioneered in three detention centres by the medical faculty of Pereira's Technical

University (UTP), involving the provision of free health services to detainees by medical students eager for training opportunities, the ICRC facilitated the extension of the project to three more prisons with two other universities.

Efforts to obtain access to people held by armed opposition groups continued without success. However, the ICRC facilitated the handover to their families or the authorities of four captured policemen and a soldier released by armed opposition groups.

- ▶ 7,295 detainees visited, 4,504 monitored individually (including 2,233 newly registered, of whom 181 women) during 671 visits to 365 places of detention
- ▶ 1,835 detainees visited by their relatives with the support of the ICRC
- ▶ 23 RCMs collected from and 43 distributed to detainees
- ▶ 4 medical facilities refurbished and 200 detainees fitted with orthoprosthetic appliances based on a cost-sharing agreement between INPEC and the ICRC

WOUNDED AND SICK

In 2006, the Observatorio de Minas, the national mine-action body, registered more than 1,000 victims of mines and ERW, one-third of whom were civilians. Victims of mines, ERW and other weapons were able to access hospitals and physical rehabilitation centres, and their transport, accommodation, medical fees and treatment were covered by the ICRC.

A total of 150 national health staff in Medellín, Cali, Bucaramanga, Barranquilla and Bogotá attended one-week workshops, organized by the Ministry of Health and the ICRC, on the clinical management of patients with weapon wounds, with special emphasis on mine victims.

In addition, 80 civilian and military surgeons participated in the first war-surgery seminar held in Bogotá, organized by the Ministry of Health, the Ministry of Defence and the ICRC, to share expertise on surgical techniques in the treatment of victims of mines/ERW and other weapons.

With ICRC support, two Colombian technicians travelled to the ICRC prosthetic/orthotic training centre in Managua, Nicaragua, to upgrade their skills and improve the quality of services in Colombian physical rehabilitation centres.

- ▶ 201 mine victims, 64 ERW victims and 97 patients with other kinds of weapon wounds supported
- ▶ 3 physical rehabilitation centres supplied with prosthetic/orthotic appliances and with polypropylene for the production of 200 prostheses

AUTHORITIES

Although Colombia had ratified most IHL treaties, close contacts with the Colombian authorities confirmed the continued applicability of Article 3 common to the four Geneva Conventions of 1949 and of Additional Protocol II to the situation in Colombia, which the ICRC qualified as a non-international armed conflict. Meetings with government officials also focused on the need to ratify Protocol V to the Convention on Certain Conventional Weapons on explosive remnants of war, the Convention's amended Article 1, and the Second Protocol to the Hague Convention on Cultural Property.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

The armed forces continued to receive technical support from the ICRC in making IHL an integral and permanent part of their doctrine, training and operating procedures. Meetings with Ministry of Defence officials resulted in the revision of teaching materials to facilitate the practical application of IHL principles in the conduct of hostilities. Two "after action review" sessions conducted with the ICRC enabled the armed forces to evaluate specific military operations from the perspective of compliance with IHL.

Police commanders and instructors worked closely with the ICRC to draft an instructor's reference guide integrating IHL principles, to be used widely by police special forces participating in military operations. The first version of another teaching guide relative to the practical application of IHL in operational training procedures was completed.

- ▶ some 5,900 members of the armed forces and 1,500 members of the national police and its special forces attended dissemination sessions on the ICRC's mandate and activities
- ▶ some 70 members of armed opposition groups attended dissemination sessions on basic humanitarian principles and the ICRC's mandate and activities

CIVIL SOCIETY

Some 100 journalists in Colombia attended three seminars on IHL principles, while contacts with the Spanish-speaking media in the United States helped to publicize the plight of conflict-affected Colombians among North American audiences. A photo exhibition on the topic toured 30 Colombian cities and towns, as well as cities in Argentina, Canada, Mexico, Norway and Sweden.

University lecturers attended a workshop on the psychological and social consequences of the armed conflict, and some 30 lecturers and 115 university students providing IDPs with free legal assistance learned about the role of IHL in the conflict.

Staff members of 20 national and international humanitarian organizations were briefed on the ICRC's guide to addressing the needs of women affected by armed conflicts.

Representatives of the oil industry were encouraged to incorporate humanitarian issues related to the Colombian conflict into employee training programmes conducted in the framework of the Voluntary Principles on Security and Human Rights, a programme developed by Western governments, multinationals and NGOs to guide companies in balancing safety requirements with respect for human rights and fundamental freedoms.

RED CROSS AND RED CRESCENT MOVEMENT

In order to design a plan of action to improve the security of staff and volunteers, the Meta and Tolima branches of the Colombian Red Cross, with ICRC technical and financial support, initiated an assessment of the security situation based on the Safer Access approach.

The Colombian Red Cross, with ICRC support, also strengthened its dissemination/ communication departments countrywide and developed distance-learning modules for its staff and volunteers on institutional doctrine, IHL and mental health.

The Colombian Red Cross finalized its national development plan with support from the International Federation and the ICRC, but postponed the revision of its statutes until 2007. Movement components in Colombia agreed to establish a Movement coordination system.

In 2006, the ICRC and the Colombian Red Cross launched an overall review of the mine and ERW situation in Colombia in order to develop a broad and flexible approach aimed at preventing accidents and reducing the socio-economic impact of mine/ERW contamination. Mine-risk education activities were extended to three new departments: Arauca, Bolívar and Cesar. In spite of security constraints (mainly in Meta and Norte Santander), mine-action monitors from the Colombian Red Cross carried out 87 visits to mine/ ERW-affected communities and developed mine-risk education activities in 29 of these. The Colombian Red Cross developed new materials and methodologies for mine-risk education programming.

- ▶ 15 Colombian Red Cross branch staff attended a national communication workshop
- ▶ 400 volunteers trained in IHL dissemination methodologies for children; over 30,000 children made aware of basic IHL principles
- 5 staff members trained in conducting mine-risk education sessions for various audiences, including teachers and community leaders