

RWANDA



Having worked in the country since 1960, the ICRC opened a delegation in Rwanda in 1990. It visits detainees held in central prisons and places of temporary detention such as police stations and military facilities, while supporting the authorities in improving detainees' living conditions. It helps reunite children and their families who were separated in relation to the genocide and its aftermath or the conflicts in the Democratic Republic of the Congo. The ICRC works with the authorities to incorporate IHL into domestic legislation. It supports the development of the Rwandan Red Cross.

KEY RESULTS/CONSTRAINTS

In 2013:

- ▶ civilians and 176 wounded M23 members who fled to Rwanda following clashes in the Democratic Republic of the Congo received emergency medical care from the Rwandan Red Cross and an ICRC surgical team
- ▶ 117 unaccompanied minors reunited with their families thanks to family-links services provided by the Rwandan Red Cross/ICRC, which continued to monitor the cases of 264 such children at the end of the reporting period
- ▶ notably relying on ICRC support, the Rwanda Correctional Service began drafting standard detention procedures and management policies while progressing in the implementation of a plan to improve health services in prisons
- ▶ Rwanda mobilized regional support for the Arms Trade Treaty by hosting the Council of Ministers of the Regional Centre on Small Arms

EXPENDITURE (in KCHF)

Protection	2,453
Assistance	1,850
Prevention	500
Cooperation with National Societies	622
General	-
	5,425

of which: Overheads 331

IMPLEMENTATION RATE

Expenditure/yearly budget	105%
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PERSONNEL

Mobile staff	10
Resident staff (daily workers not included)	74

YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

HIGH

PROTECTION	Total
CIVILIANS (residents, IDPs, returnees, etc.)	
Red Cross messages (RCMs)	
RCMs collected	4,003
RCMs distributed	2,473
Phone calls facilitated between family members	617
People located (tracing cases closed positively)	83
People reunited with their families	125
of whom unaccompanied minors/separated children	117
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)	
ICRC visits	
Detainees visited	58,732
Detainees visited and monitored individually	391
Number of visits carried out	113
Number of places of detention visited	35
Restoring family links	
RCMs collected	484
RCMs distributed	162

ASSISTANCE	Targets	Achieved
CIVILIANS (residents, IDPs, returnees, etc.)		
Economic security, water and habitat (in some cases provided within a protection or cooperation programme)		
Food commodities	Beneficiaries	52
Essential household items	Beneficiaries	840
Cash	Beneficiaries	5
Work, services and training	Beneficiaries	131
WOUNDED AND SICK		
Hospitals		
Hospitals supported	Structures	4

CONTEXT

When the conflict in the North Kivu province of the Democratic Republic of the Congo (hereafter DRC) between the M23 armed group and DRC armed forces intensified, more than 25,000 people fled the country for Rwanda. M23 members were disarmed by the Rwandan army and transferred to internment camps; the wounded among them were taken to the nearest hospital. The fighting slowed the repatriation of former weapon bearers, including minors formerly associated with armed groups, from the DRC to Rwanda as part of the Disarmament, Demobilization, Repatriation, Resettlement and Reintegration programme facilitated by the UN Organization Stabilization Mission in the Democratic Republic of the Congo.

Over 14,000 Rwandans returned to Rwanda after their deportation from the United Republic of Tanzania. Most of them were subsequently reunited with their relatives in various parts of the country.

The government endeavoured to develop the country's economy and infrastructure and to further integrate Rwanda into the East African Community. Having overhauled the penitentiary system, the authorities, led by the Rwanda Correctional Service (RCS), pursued efforts to address overcrowding in prisons.

The UN Mechanism for International Criminal Tribunals (MICT), responsible for carrying out the residual functions of the International Criminal Tribunal for Rwanda (ICTR), continued to work on having detainees transferred to Rwanda to stand trial.

Rwanda contributed troops to peacekeeping missions in Mali and Sudan.

ICRC ACTION AND RESULTS

The ICRC in Rwanda continued to focus on: visiting detainees to monitor their treatment and living conditions while working with the detaining authorities to carry out improvements; and responding to needs arising from the intensification of fighting in the DRC by providing medical assistance and family-links services in conjunction with the Rwandan Red Cross.

When wounded civilians and M23 members arrived in Rwanda, the National Society and the ICRC provided emergency medical/surgical care. Local emergency response teams composed of National Society volunteers administered first aid and transported casualties to hospital, while local staff at Gisenyi District Hospital and an ICRC surgical team treated those needing more advanced medical care. The hospital staff received material assistance and compensation to ensure adequate services, and later, training in medical/surgical procedures to enable them to respond to future emergencies. First-aid instructors and volunteers received training and equipment, which also helped the National Society boost its emergency response capacity.

Family members dispersed by conflict – people fleeing the hostilities in the DRC, former weapon bearers and returnees, including Rwandans deported from the United Republic of Tanzania – contacted their relatives through National Society/ICRC family-links services. In coordination with the authorities, other organizations involved, and other ICRC delegations concerned, the delegation in Rwanda continued to help unaccompanied minors locate their relatives, reuniting them when appropriate, and supporting their reintegration into their families. The ICRC also continued to help

refugees access health facilities operated by the authorities. The National Society received financial, technical and training support to undertake these activities.

The ICRC monitored the treatment and living conditions of over 58,700 detainees held in 35 places of detention throughout the country. People regularly visited by the ICRC included: those detained on security-related charges, including M23 members from the DRC held in various camps; detainees transferred to Rwanda by the Special Court for Sierra Leone (SCSL) or the ICTR; and former weapon bearers, including minors formerly associated with armed groups, in camps run by the Rwanda Demobilization and Reintegration Commission. Following these visits, the ICRC shared its findings and recommendations confidentially with the authorities. It continued to provide, within the framework of a cost-sharing agreement, technical/material support that would enable the RCS to take over the task of rehabilitating prison infrastructure. Other initiatives were undertaken with the prison authorities to improve inmates' diet and health/hygiene conditions: improving the management of prison health data, HIV/AIDS and TB-prevention/control programmes, installation of biogas plants and chlorine production facilities, and provision of essential items for women and children.

The ICRC continued to promote IHL and the Movement's work through various activities involving members of Rwandan political, military and academic circles. During a meeting of the Council of Ministers of the Regional Centre on Small Arms, hosted by Rwanda, the ICRC promoted the adoption of the Arms Trade Treaty. It also worked with the Rwanda Defence Force (RDF) and the Rwanda National Police (RNP) to train military and police personnel, including peacekeepers, in IHL and other humanitarian norms. University lecturers and students discussed key IHL developments at a national IHL round-table organized by the ICRC.

The National Society, with ICRC support, continued to strengthen its capacity to raise awareness of IHL and the Movement through promotional activities. Movement partners in Rwanda and other organizations active in similar fields met regularly to coordinate activities, maximize impact and avoid duplication of effort.

CIVILIANS

Families separated by conflict restore contact

Family members dispersed by conflict or the genocide relied on family-links and tracing services provided by the National Society/ICRC to re-establish or maintain contact with their relatives in Rwanda or abroad. Among them were refugees from neighbouring countries, particularly those fleeing the insecurity in the DRC, Rwandan returnees, and repatriated former weapon bearers, including minors formerly associated with armed groups (see *People deprived of their freedom*). For instance, Rwandans deported from the United Republic of Tanzania contacted their families through RCMs and telephone calls and informed them of their safety.

While carrying out these activities, the National Society, with ICRC training and material support, continued to improve its ability to restore family links.

Unaccompanied minors receive help in finding their families and improving their well-being

With ICRC support, a total of 117 unaccompanied minors reunited with their families, including 45 whom the National Society/ICRC

registered in Rwanda, while 264 such children continued to have their cases monitored. Some 50 of those reunited who were particularly vulnerable eased their reintegration with the help of food rations, and all of them with kits of essential items, including clothes and school material that also benefited children awaiting family reunification. Rwandan national radio broadcast the names of 75 minors still seeking their families, resulting in five of them being found by their parents. Some minors in the DRC and Uganda who were formerly associated with M23 got in touch with their families in Rwanda through RCMs.

The Ministry of Disaster Management and Refugee Affairs (MIDIMAR) sought to integrate into domestic legislation provisions supporting repatriation and/or family reunification for unaccompanied minors/separated children; it drafted a bill to this end, with ICRC support.

Through a partnership involving the Rusayo Centre for Unaccompanied Children, Joint Aid Management and the ICRC, some 240 children housed by the centre improved their health through hygiene items and enhanced their well-being with school kits and sports equipment.

Particularly vulnerable refugees meet medical and psychological needs

Refugees with health and/or psychological concerns received medical treatment and/or psychological support after being referred by the ICRC to health facilities operated by the authorities. Regular contacts with organizations providing services for refugees – IOM, UNHCR and UNICEF – enhanced coordination of activities and awareness of the Movement's family-links services.

PEOPLE DEPRIVED OF THEIR FREEDOM

Detaining authorities begin drafting standard procedures for prison management

Over 58,700 people held in 35 places of detention under the authority of the RCS, the RDF and the RNP received visits, conducted according to the ICRC's standard procedures, to monitor their treatment and living conditions and respect for judicial guarantees. Particular attention was paid to the following: security detainees held in connection with the armed conflict in the DRC, among them, members of the M23 detained in camps; former weapon bearers – including minors formerly associated with armed groups – in camps run by the Rwanda Demobilization and Reintegration Commission; detainees transferred to Rwanda by the SCSL, the ICTR and the MICT; and other vulnerable detainees, such as the elderly, the mentally ill, foreigners and women with infants. Wounded M23 members who had been treated at ICRC-supported facilities (see *Wounded and sick*) received follow-up visits to determine whether they needed further treatment.

The detaining authorities concerned received confidential oral and written reports containing delegates' feedback and, where appropriate, recommendations for improvement. These reports, as well as ICRC technical and material support, helped the authorities in their efforts to improve the treatment and living conditions of detainees and bring them in line with internationally recognized standards. Notably, the RCS began drafting standard detention procedures and management policies. Constructive dialogue with the RDF, the RNP and MIDIMAR, conducted with a view to seeking access to all detainees under the ICRC's purview, resulted in regular and increased access to detainees in some military places of detention.

Detainees, among them 104 minors detained at Nyagatare Prison, reconnected with their relatives through family-links services. These minors also saw their families more often, through a family-visit programme carried out with Dignité en Détention, an international NGO.

Detainees become peer educators in HIV/AIDS prevention and control

The prison health services continued to work with the ICRC and other organizations to improve detainees' health. During a seminar organized with the Ministry of Internal Security and the RCS, stakeholders from the detention and health sectors discussed ways to apply basic concepts of public health to the prison setting and to strengthen the partnership between the prison system and the Ministry of Health.

In line with a strategic plan covering 2013–17 developed with ICRC support in 2012, the authorities concerned strove to improve monitoring of and response to health concerns in prisons. For instance, the Ministry of Health, the RCS and the Ministry of Internal Security took measures to harmonize data collection. Officials attended training sessions and technical meetings that left them better equipped to implement a nutrition monitoring system. Prison health staff learnt how to detect and curb malnutrition among inmates. The prison authorities, guided by the ICRC, examined the possibility of establishing prison farms to produce vegetables, with a view to improving detainees' diet.

Some 900 detainees from the 14 central prisons trained to become peer educators in HIV/AIDS prevention and control, with technical and financial backing from the Joint UN Programme on HIV and AIDS and the ICRC. Through training, around 100 prison nurses enhanced their capacity to provide medical care for detainees, while two permanent health staff completed their postgraduate studies with financial support from the ICRC.

Prison authorities work to improve detainees' living conditions

Working within the framework of an RCS/ICRC cost-sharing agreement, prison authorities gradually assumed responsibility for projects to improve inmates' living conditions. For instance, the installation/maintenance of biogas plants steadily reduced fuel costs and enhanced sanitation conditions. Detainees had a cleaner and healthier environment as chlorine production facilities were installed and kitchens repaired. Following the construction of a workshop in Huye prison, trained inmates and prison staff made cooking pots for several prisons. A total of 57,500 inmates benefited from these improvements. They included 4,100 women and children in 12 prisons who maintained their personal hygiene with regular supplies of soap and other hygiene items.

The RCS also strengthened its managerial capacity when two senior managers, who had completed an ICRC-supported course in prison management, took over major responsibilities. Through their participation in seminars, 32 staff members from the 14 central prisons learnt to become more effective at promoting hygiene in prisons, while 22 RCS engineers became more adept at maintaining prison infrastructure.

WOUNDED AND SICK

At the request of the Rwandan authorities, the National Society and the ICRC addressed the emergency and secondary medical needs of the wounded civilians and M23 members who had fled to Rwanda (see *Context*).

The civilians and M23 members injured during clashes were given first aid and evacuated by the National Society, with ICRC support. Two hospitals, Gisenyi hospital and Kigali military hospital, benefited from ICRC donations of medicines and medical equipment. An ICRC surgical team temporarily deployed in March and November helped local medical staff at Gisenyi hospital cope with influxes of casualties. In total, 176 seriously wounded people received medical/surgical care from local staff and the ICRC surgical team there. They also received food and hygiene items during their hospitalization. Twenty of them were transferred to the military hospital in Kigali for treatment that was not available in Gisenyi. Three patients underwent physical rehabilitation and were fitted with prostheses, while seven were treated for ailments of the eye.

To ensure adequate treatment for the wounded, Gisenyi hospital staff received food, firewood and monetary compensation for overtime work and for fuel used to transport the wounded. To help them care for the remaining patients and enable them to respond to future medical emergencies, the hospital staff at Gisenyi were trained by the ICRC surgical team in weapon-wound treatment.

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

Conferences hosted by Rwanda foster regional support for the Arms Trade Treaty

The Rwandan authorities continued to receive ICRC technical support for promoting regional harmonization of legislation to control the trafficking of small arms and light weapons, and for mobilizing regional support for the Arms Trade Treaty. During a meeting of the Council of Ministers of the Regional Centre on Small Arms hosted by Rwanda, representatives from 10 countries, including six ministers in charge of security matters in their respective countries (Burundi, the DRC, Eritrea, Ethiopia, Rwanda and the United Republic of Tanzania), discussed the Arms Trade Treaty and received support in ratifying and implementing IHL instruments domestically.

During a three-day seminar co-organized with the Rwanda Law Reform Commission, representatives from the government, the police and correctional services and the academe discussed the state of IHL and identified priorities for the country, including ratification and domestic implementation of IHL treaties and establishment of a national IHL committee. These subjects were also highlighted during bilateral meetings with the authorities. Two officials participated in separate IHL events abroad, with ICRC sponsorship.

Peacekeeping troops learn about basic IHL principles before deploying

The RDF and the ICRC discussed areas of cooperation, especially IHL training for troops taking part in peacekeeping missions. More than 190 RDF officers familiarized themselves with the ICRC's work and with the basic principles of IHL before their deployment to Sudan. Similarly, 337 officers participating in the platoon/company commanders' course and 24 civilian members

of the East Africa Standby Force learnt more about these matters. RDF officials were given guidance in promoting the integration of IHL into military training.

Following bilateral meetings, senior RNP officers accepted an ICRC-designed training programme for raising awareness among RNP personnel of international human rights law and international policing standards governing arrest and detention. In line with this, 140 RNP officers bound for a peacekeeping mission in Mali enhanced their knowledge of such topics.

Lecturers share their views at the first national round-table on IHL

During the first national round-table organized by the ICRC to further knowledge of IHL at university level, eight IHL lecturers discussed various legal developments, particularly with regard to customary IHL and the classification of conflicts. During a series of conferences, more than 300 law students learnt about key developments in IHL, mainly with regard to the classification of conflicts. Lecturers and law students from five universities availed themselves of the latest reference materials on IHL for research purposes.

With financial support from the ICRC, a university lecturer participated in a round-table and three university students in an IHL competition (see *Nairobi*). At a regional IHL competition held in Kigali, Rwandan students tested their knowledge of IHL against that of their peers from neighbouring countries.

RED CROSS AND RED CRESCENT MOVEMENT

The Rwandan Red Cross and the ICRC continued to develop their institutional and operational partnership through a three-year partnership framework agreement, particularly in restoring family links (see *Civilians*), responding to emergencies – with an emphasis on the provision of first aid (see *Wounded and sick*) – and promoting the Movement's principles and activities. The National Society boosted its capacities in these areas with ICRC material and technical support.

Some 60 first-aid trainers and 706 volunteers participated in training sessions and received basic equipment, enabling them to form 36 additional local emergency response teams; this took place within the framework of a multi-year programme aimed at enhancing the National Society's ability to provide free first-aid services to the public.

The National Society carried out various promotional activities to raise awareness of and gain support for humanitarian principles and the Movement: for instance, it produced multimedia materials and organized events to familiarize the public with its work.

Movement partners got together regularly, at meetings organized by the National Society, to exchange views and coordinate activities, including lobbying for domestic laws recognizing the National Society as an auxiliary to the government and for laws regulating the use of the emblem in Rwanda.

MAIN FIGURES AND INDICATORS: PROTECTION		Total		
CIVILIANS (residents, IDPs, returnees, etc.)				
Red Cross messages (RCMs)			UAMs/SCs*	
RCMs collected		4,003	157	
RCMs distributed		2,473	46	
Phone calls facilitated between family members		617		
Names published in the media		208		
Reunifications, transfers and repatriations				
People reunited with their families		125		
	<i>including people registered by another delegation</i>	78		
Tracing requests, including cases of missing persons			Women	Minors
People for whom a tracing request was newly registered		95	6	67
People located (tracing cases closed positively)		83		
	<i>including people for whom tracing requests were registered by another delegation</i>	34		
Tracing cases still being handled at the end of the reporting period (people)		153	19	90
UAMs/SCs*, including unaccompanied demobilized child soldiers			Girls	Demobilized children
UAMs/SCs newly registered by the ICRC/National Society		332	164	21
UAMs/SCs reunited with their families by the ICRC/National Society		117	50	
	<i>including UAMs/SCs registered by another delegation</i>	72		
UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period		264	119	46
Documents				
People to whom travel documents were issued		5		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
ICRC visits			Women	Minors
Detainees visited		58,732	3,700	264
Detainees visited and monitored individually		391	10	2
Detainees newly registered		248	5	2
Number of visits carried out		113		
Number of places of detention visited		35		
Restoring family links				
RCMs collected		484		
RCMs distributed		162		
People to whom a detention attestation was issued		472		

* Unaccompanied minors/separated children

MAIN FIGURES AND INDICATORS: ASSISTANCE		Total	Women	Children
CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security, water and habitat (in some cases provided within a protection or cooperation programme)				
Food commodities	Beneficiaries	52		100%
	<i>of whom IDPs</i>	7		
Essential household items	Beneficiaries	840		100%
	<i>of whom IDPs</i>	331		
Cash	Beneficiaries	5		100%
Work, services and training	Beneficiaries	131		100%
	<i>of whom IDPs</i>	25		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat (in some cases provided within a protection programme)				
Water and habitat activities	Beneficiaries	57,500		
Health				
Number of visits carried out by health staff		45		
Number of places of detention visited by health staff		17		
WOUNDED AND SICK				
Hospitals				
Hospitals supported	Structures	4		
Patients whose hospital treatment has been paid for by the ICRC	Patients	176		