

BURUNDI



ICRC delegation ICRC-supported prosthetic/orthotic centre

The ICRC has been present in Burundi since 1962, opening its delegation there in 1992 to help people overcome the worst consequences of armed conflict. ICRC assistance activities focus mainly on working with the prison authorities to ensure that detainees are treated according to internationally recognized standards. The ICRC reinforces physical rehabilitation services, helps bolster the Burundi Red Cross's work, notably its efforts to restore links between separated family members, including refugees, and supports the armed forces' efforts to train their members in IHL.

KEY RESULTS/CONSTRAINTS

In 2013:

- ▶ encouraged by the ICRC, the authorities in some places of temporary detention introduced measures to improve detainees' treatment, such as a prohibition against detaining minors under the age of 15
- ▶ over 2,700 patients were treated at the Saint Kizito physical rehabilitation centre, which assumed full responsibility for procuring the equipment and supplies needed for its prosthetic/orthotic and physiotherapy services
- ▶ delays in the country's transitional justice process and the cancellation of plans to provide forensic support for exhumations at the Kivyuka gravesite impeded efforts to assess and respond to the needs of the families of the missing
- ▶ Burundi fostered long-term compliance with IHL by signing the Arms Trade Treaty and by acceding to the Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment
- ▶ the Burundi Red Cross strengthened its capacities in the areas of emergency preparedness and restoring family links, which enabled it to respond effectively to a cholera outbreak and to the needs of deported refugees

EXPENDITURE (in KCHF)

Protection	1,894
Assistance	2,177
Prevention	403
Cooperation with National Societies	443
General	-
Total	4,916

of which: Overheads 300

IMPLEMENTATION RATE

Expenditure/yearly budget	94%
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PERSONNEL

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

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	1,571
RCMs distributed	1,217
Phone calls facilitated between family members	222
People located (tracing cases closed positively)	80
People reunited with their families	9
of whom unaccompanied minors/separated children	4
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)	
ICRC visits	
Detainees visited	8,220
Detainees visited and monitored individually	373
Number of visits carried out	108
Number of places of detention visited	24
Restoring family links	
RCMs collected	38
RCMs distributed	39

ASSISTANCE	Targets	Achieved
CIVILIANS (residents, IDPs, returnees, etc.)		
Economic security, water and habitat (in some cases provided within a protection or cooperation programme)		
Essential household items	Beneficiaries	3
WOUNDED AND SICK		
Physical rehabilitation		
Centres supported	Structures	1 1
Patients receiving services	Patients	2,000 2,787

CONTEXT

The security environment was relatively stable, with only a few isolated incidents of armed violence. Political dialogue resumed in preparation for elections in 2015. The establishment of a Truth and Reconciliation Commission, part of the transitional justice process, remained pending.

Burundi continued to depend on international aid and to endure the consequences of underdevelopment. Population growth – driven by high birth rates and the return of refugees from neighbouring countries, including over 35,000 Burundians deported from the United Republic of Tanzania – continued to fuel ethnic tensions and disputes over access to land. Owing to past and ongoing conflicts in the region, Burundi also hosted a number of refugees, mainly from the Democratic Republic of the Congo (hereafter DRC).

The Burundian armed forces contributed troops to the African Union Mission in Somalia (AMISOM) and deployed one battalion to the International Support Mission to the Central African Republic (MISCA).

ICRC ACTION AND RESULTS

In 2013, the ICRC concentrated on fostering respect for the population, particularly detainees, and on providing assistance to those affected by past conflicts.

ICRC delegates visited detainees in places of permanent and temporary detention throughout the year to monitor their treatment and living conditions. Their findings and recommendations were communicated confidentially to the authorities concerned, through written reports and face-to-face discussions. As a result, steps were taken to improve the treatment of detainees: for instance, the authorities in some places of detention introduced measures prohibiting the detention of minors under the age of 15. The ICRC also supported the detention system more broadly, providing financial, material and technical assistance to improve inmates' living conditions. For example, it helped rehabilitate prison infrastructure and upgrade water and sanitation facilities; the ICRC also aided prison sanitation teams during pest-control campaigns. The ICRC covered 80% of the costs of basic medicines in prison dispensaries and facilitated access to medical treatment, which led to a general improvement in detainees' health.

Technical, financial and training support from the ICRC enabled the Saint Kizito physical rehabilitation centre to improve the quality of its physical rehabilitation services and become the country's referral centre for fitting disabled people, including demobilized weapon bearers, with prostheses and orthoses. The centre assumed full responsibility for procuring the materials required for its prosthetic/orthotic and physiotherapy services; it also initiated coordination efforts with other physical rehabilitation centres in the country, with a view to integrating physical rehabilitation services into the national health system.

The ICRC conducted site assessments on the mass grave in Kivyuka with a view to providing forensic expertise to the authorities in managing the human remains buried there. However, it had to cancel its plans to lend such support as the authorities decided to conduct the exhumations themselves. Nevertheless, the ICRC maintained its dialogue with the national authorities and others

involved in transitional justice and the issue of missing persons to exchange pertinent information and monitor developments.

The ICRC maintained its dialogue with political and military authorities as part of its effort to reinforce understanding of and respect for basic humanitarian principles and the Movement's work. Encouraged by the ICRC, Burundi signed the Arms Trade Treaty and acceded to the Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment. The ICRC provided technical advice and training support to the armed forces in their efforts to integrate IHL into military doctrine, training and operations. ICRC-trained instructors briefed five Burundian contingents on IHL before their deployment with AMISOM.

With ICRC support, the Burundi Red Cross further strengthened its capacities in the areas of emergency preparedness, first aid and restoring family links. The National Society continued to collect and distribute RCMs in all 17 of the country's provinces; it also improved its family-links services through the use of technology, such as by scanning RCMs and offering phone calls. Burundians deported from the United Republic of Tanzania were met at the border by National Society volunteers who provided emergency assistance. The National Society's enhanced capacities in water storage and treatment techniques allowed it to respond effectively to a cholera outbreak.

Movement partners met regularly to exchange views and coordinate activities.

CIVILIANS

Returnees ease their conditions following their deportation

Burundians deported from the United Republic of Tanzania, particularly vulnerable groups such as pregnant women, children, the sick and the elderly, arrived at the border in varying states of distress. Most of them had no possessions or were separated from their families. They coped with their situation thanks to emergency response operations carried out by the National Society in coordination with other humanitarian agencies and with ICRC support. Some families received emergency relief. Newly arrived deportees received first aid and psychological support as necessary. Some of them returned to their communities of origin, in National Society vehicles with fuel supplied by the ICRC.

Scanned RCMs and phone services help separated relatives restore contact

Family members dispersed while fleeing past fighting in Burundi or neighbouring countries – including Congolese and Rwandan refugees – restored contact through family-links services run by the National Society/ICRC. Through these services, 80 people were located, four children repatriated to the DRC, one child from the DRC reunited with his family in Burundi, and four vulnerable persons reunited with their relatives in Burundi after their repatriation from the United Republic of Tanzania. The volume of RCMs collected and distributed by the National Society in Burundi decreased by around 20%, partly because more than 33,000 Burundian refugees returned to the country after a Tanzanian refugee camp closed down in 2012. These returnees, including unaccompanied minors, had the progress of their reintegration assessed by National Society volunteers to determine whether further support was needed.

With the ICRC's help, the National Society strengthened its family-links capacities. Staff members from 17 provinces received salary support and underwent refresher training along with volunteers. The recommendations of a joint National Society/ICRC assessment of family-links needs and capacities were implemented, enabling the National Society to reduce RCM distribution times through technological upgrades, such as by scanning RCMs and offering phone services.

Plans to assist the authorities in exhumation at the Kivyuka gravesite cancelled

The ICRC made preliminary assessments at the site of a mass grave found in the path of road construction in Kivyuka, Bubanza province; this was part of a proposed exhumation process and in line with the ICRC's offer of forensic and other technical support to the authorities for managing the site. Associations of the families of the deceased received regular updates and met with ICRC delegates to clarify the responsibilities of all parties involved and to set their expectations. However, the authorities decided to conduct the exhumations themselves and proceed with road construction.

As the Truth and Reconciliation Commission, slated to be part of the transitional justice process in Burundi, had not yet been established, plans to work with the authorities in certain areas – clarifying the legal framework pertaining to missing persons and boosting national data management capacities – remained on hold. Nevertheless, the ICRC continued to exchange pertinent information and monitor developments with national authorities, international actors and members of civil society involved in transitional justice and the issue of missing persons. In line with this, the authorities, the families of missing persons and other individuals and organizations concerned contributed to an ICRC study that further clarified the needs of the families of missing persons.

PEOPLE DEPRIVED OF THEIR FREEDOM

Prison authorities introduce measures to improve detainees' treatment

Over 8,220 detainees in 24 places of permanent or temporary detention received ICRC visits, conducted in accordance with the organization's standard procedures, to monitor their treatment and living conditions in relation to internationally recognized standards. Of these detainees, 373 had their presence registered and individually monitored; particular attention was paid to vulnerable inmates, such as minors, women and foreigners. Some 97 former detainees registered by the ICRC were followed up after their release; one case was referred to a Burundian human rights organization for possible post-release monitoring. Inmates also restored/maintained contact with relatives in Burundi or abroad using RCMs and phone calls. Following visits, the detaining authorities received reports containing the ICRC's findings as well as its recommendations for improving the treatment and living conditions of the detainees visited.

Detainees in places of temporary and permanent detention saw improvements in their treatment after the authorities took steps to update prison management and policies. For example, the authorities in some places of temporary detention introduced measures prohibiting the detention of minors under the age of 15. With the ICRC's encouragement, they also paid greater attention to respecting detainees' judicial guarantees: by following up the work of legal services, for instance. A planned workshop for penitentiary/judicial authorities to discuss best practices on improving judicial guarantees was postponed, pending the completion of inspections

in all of the country's prisons. Discussions with police authorities brought attention to issues including in relation to the conduct of arrests, while meetings with penitentiary officials tackled challenges in the management of the detainees' case files.

At central level, sustained interaction between the penitentiary directorate and the ICRC helped address further questions relating to detainees' treatment, particularly through meetings of the working group tasked with overseeing these, which consisted of the authorities concerned, other financial and technical partners and the ICRC. The penitentiary directorate had a better understanding of the priorities and challenges in managing the country's 11 prisons after conducting inspections, internal audits, stock assessments and staff coaching with technical, financial and logistical support from the Belgian Technical Cooperation agency and the ICRC.

Study gives prison officials a basis to request additional funding to meet detainees' needs

While being reminded of the need to increase the budget for prison services and for the administration of places of temporary detention, prison authorities received the results of an ICRC study on the current surface area available for inmates in the country's 11 prisons, which provided them with a management tool and a concrete basis for requesting additional funds to rehabilitate, reconstruct or otherwise enlarge their prison areas.

Inmates improved their health and living conditions through ICRC support. Over 7,800 detainees in 11 prisons enjoyed a healthier environment as a result of pest-control campaigns carried out with prison authorities. All detainees continued to access quality health care through prison dispensaries, for which the ICRC covered 80% of the costs of basic medicines. People held in four places of temporary detention received medical attention in nearby public-health centres thanks to donated medicines or the reimbursement of medical bills. Around 230 detainees availed themselves of TB and HIV/AIDS treatment services provided by the prison authorities and local NGOs with ICRC technical, material and financial support. Detainees' nutritional status was also monitored during visits. To help them respond more effectively to detainees' health needs, the authorities drew on ICRC inputs as they established a database of prison health information and exchanged best practices with other stakeholders during various meetings and workshops.

In the prisons visited, all inmates improved their hygiene conditions with ICRC-distributed soap and cleaning materials. Some 3,320 detainees in eight places of detention benefited from improved facilities following the rehabilitation or construction of water and sanitation systems, kitchens, living quarters, including separate cells for women and minors, and dispensaries. Inmates in 11 prisons enhanced their well-being with educational and recreational materials. Detainees in two prisons prepared for their release and reintegration through a literacy programme.

WOUNDED AND SICK

People confined to wheelchairs for over a decade walk again with prosthetic devices and mobility aids

Some 2,780 patients (including 100 women, 2,358 children and 114 demobilized weapon bearers) at the Saint Kizito physical rehabilitation centre in Bujumbura enjoyed quality physical rehabilitation services following measures taken by the centre, such as provision of outpatient services and implementation of treatment

protocols and technical guidelines, with ICRC support within the framework of a multi-year plan of action agreed upon in 2010. The centre improved the quality of its services significantly and became the country's referral centre for fitting demobilized weapon bearers and other persons with disabilities with prostheses/orthoses. Amputees and those with spinal-cord injuries, some of whom had been wheelchair-bound for over a decade, were able to walk again because of orthopaedic devices and mobility aids provided by the centre. Disabled people from a wider geographical area were able to access these services because they were provided free lodging and meals at the centre. The number of outpatient consultations, mostly children needing corrective devices, increased significantly, to 157 per month.

Saint Kizito assumes full responsibility for procuring equipment and supplies

Prosthetic/orthotic and physiotherapy personnel honed their skills with on-the-job training to help the centre boost its capacity to treat disabled patients and improve the quality of care. With ICRC sponsorship, four students attended physiotherapy or orthopaedic technology courses abroad.

The centre's administration took steps to secure its long-term sustainability. The centre had assumed full responsibility by the end of May for procuring the equipment and supplies needed for its prosthetic/orthotic and physiotherapy services. It continued to receive assistance for optimizing patient flow, establishing treatment protocols in line with recognized standards and reviewing the management of human resources. The centre's director and those of three other physical rehabilitation centres agreed to jointly set standards for good practice, with a view to having their specialized services eventually integrated into the national health system. The centre's administration discussed the development and sustainability of services at a workshop and inaugurated a new physiotherapy and rehabilitation unit.

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

Burundi signs the Arms Trade Treaty and accedes to a treaty prohibiting torture and ill-treatment

With ICRC encouragement, Burundi signed the Arms Trade Treaty and acceded to the Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment. Dialogue with the authorities concerned continued, with a view to encouraging Burundi's ratification of/accession to other IHL-related instruments, such as Additional Protocol III and the African Union Convention on IDPs. Meanwhile, a draft law recognizing the Burundi Red Cross' status and protecting the emblem remained under review; and a workshop to mobilize support among parliamentarians did not take place owing to other priorities.

Meetings with the authorities sought to foster greater acceptance of the ICRC's work, including its activities in behalf of the families of missing persons (see *Civilians*).

The armed forces and the ICRC cooperate to boost IHL instruction in military schools

As part of an agreement concluded in 2010, the Defence Ministry continued to receive ICRC support in integrating IHL provisions into Burundi's military doctrine, training and operations. An assessment of IHL instruction in Burundi, carried out jointly by the National Defence Force (NDF) and the ICRC, led to a new

cooperation agreement on ICRC support for IHL-related teaching initiatives in military schools. A two-week IHL course produced 12 new military IHL instructors; three officers, including the deputy chief of staff of the NDF, attended IHL courses abroad (see *International law and cooperation*). However, the Defence Ministry had yet to appoint a technical team to revise the military doctrine.

ICRC-trained Burundian instructors, working alongside ICRC delegates, briefed five contingents (around 2,600 soldiers) on basic IHL principles and humanitarian concerns prior to their deployment with AMISOM. The deputy commander of the peacekeeping force deployed to the Central African Republic also participated in these briefings. With ICRC support, the NDF produced IHL manuals, a code of conduct for peacekeeping troops and an IHL training video in Kirundi, the local language.

RED CROSS AND RED CRESCENT MOVEMENT

The Burundi Red Cross expands its network of volunteers

The Burundi Red Cross, with financial, material and technical support from the ICRC, continued to strengthen its capacities in emergency response, restoring family links (see *Civilians*), communication and governance. It extended its network of volunteers throughout the country, taking another step in realizing its ambition to become the main humanitarian actor in the country. It also sought to promote humanitarian principles and maintain acceptance for Movement activities by using certain communication tools (including its website) and hosting certain events (such as its 50th anniversary celebrations).

Red Cross volunteers respond to cholera outbreak

To bolster the National Society's response to emergencies, 80 volunteers from its emergency response brigades underwent training in the Safer Access Framework, as well as in water and sanitation techniques, including the storage/treatment of water and bladder assembly. These measures, together with insect-control campaigns conducted for vulnerable households, helped them respond to an outbreak of cholera. In addition, all 129 municipal education/dissemination staff were trained in the integrated lifesaving module and the Fundamental Principles, and thus equipped with the skills necessary to train volunteers.

Movement partners met regularly to exchange views and coordinate activities.

MAIN FIGURES AND INDICATORS: PROTECTION		Total		
CIVILIANS (residents, IDPs, returnees, etc.)				
Red Cross messages (RCMs)			UAMs/SCs*	
RCMs collected		1,571	5	
RCMs distributed		1,217	9	
Phone calls facilitated between family members		222		
Reunifications, transfers and repatriations				
People reunited with their families		9		
	<i>including people registered by another delegation</i>	1		
Tracing requests, including cases of missing persons			Women	Minors
People for whom a tracing request was newly registered		78	21	31
People located (tracing cases closed positively)		80		
	<i>including people for whom tracing requests were registered by another delegation</i>	4		
Tracing cases still being handled at the end of the reporting period (people)		34	10	14
UAMs/SCs*, including unaccompanied demobilized child soldiers			Girls	Demobilized children
UAMs/SCs newly registered by the ICRC/National Society		6	4	
UAMs/SCs reunited with their families by the ICRC/National Society		4	2	1
	<i>including UAMs/SCs registered by another delegation</i>	1		
UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period		12	4	
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
ICRC visits			Women	Minors
Detainees visited		8,220	476	304
Detainees visited and monitored individually		373	7	4
Detainees newly registered		97	1	2
Number of visits carried out		108		
Number of places of detention visited		24		
Restoring family links				
RCMs collected		38		
RCMs distributed		39		
People to whom a detention attestation was issued		13		

* 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)				
Essential household items	Beneficiaries	3	4%	3%
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat (in some cases provided within a protection programme)				
Essential household items ¹	Beneficiaries	35,564		
Water and habitat activities	Beneficiaries	3,323		
Health				
Number of visits carried out by health staff		51		
Number of places of detention visited by health staff		17		
WOUNDED AND SICK				
Physical rehabilitation				
Centres supported	Structures	1		
Patients receiving services	Patients	2,787	100	2,358
New patients fitted with prostheses	Patients	13	2	1
Prostheses delivered	Units	19	2	4
	<i>of which for victims of mines or explosive remnants of war</i>	2		
New patients fitted with orthoses	Patients	393	7	311
Orthoses delivered	Units	600	5	497
	<i>of which for victims of mines or explosive remnants of war</i>	2		
Patients receiving physiotherapy	Patients	988	34	859
Crutches delivered	Units	62		
Wheelchairs delivered	Units	8		

1. Owing to operational and management constraints, figures presented in this table may not reflect all activities carried out during the reporting period.