

# HAITI



ICRC / AR, 2010

 ICRC delegation

The ICRC opened a fully-fledged delegation in Haiti in 2004. It responds to acute humanitarian situations in prisons and supports national authorities in improving respect for judicial guarantees. It seeks to mitigate the effects of social unrest throughout the country and in violence-prone shanty towns in Port-au-Prince. It also supports security forces in integrating human rights norms applicable to the use of force into their doctrine, training and operations. With other Movement partners, the ICRC helps strengthen the emergency response capacity of the National Society.

## EXPENDITURE (IN KCHF)

Protection	2,066
Assistance	9,440
Prevention	1,263
Cooperation with National Societies	1,673
General	-

► **14,443**

of which: Overheads 874

## IMPLEMENTATION RATE

Expenditure/yearly budget	98%
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## PERSONNEL

Expatriates	22
National staff (daily workers not included)	73

## KEY POINTS

In 2010, the ICRC:

- supported all Movement partners responding to January's earthquake by facilitating family contact, first aid, hospital care, access to clean water and dead body management
- reminded all weapon bearers, but particularly those in violence-affected neighbourhoods, of their obligations to protect civilians, to allow them access to medical care and to respect the emblem
- with the penitentiary authorities, set up a cholera response mechanism, which included hiring additional health staff, supplying medicines, hygiene items and cleaning materials, and disinfecting premises
- in the violence-affected neighbourhood of Cité Soleil, worked with the water boards to repair water and sanitation systems damaged in the earthquake or dilapidated after years of neglect
- helped relieve the problem of overcrowding in prisons and police stations by carrying out rehabilitation projects with the authorities and supporting their efforts to respect judicial guarantees

## CONTEXT

The devastating earthquake that struck Haiti on 12 January, killing more than 230,000 people, injuring nearly 250,000 and leaving over a million people homeless, triggered a large-scale relief effort by States, international and national organizations, and NGOs. The quake inflicted heavy damage on the country's infrastructure, in some areas wrecking up to 80% of water systems, roads, hospitals, schools and other buildings. Many places of detention were also badly hit, allowing an estimated 60% of the country's 8,500 prison inmates to escape, although many were soon rearrested. The overall security situation nonetheless stayed relatively stable as the UN Stabilization Mission in Haiti (MINUSTAH) rapidly redeployed with increased troop numbers.

As reconstruction efforts got under way, so did preparations for legislative and presidential elections in November. The announcement of inconclusive provisional results in December triggered some violent protests. Throughout the year, people in poorer neighbourhoods of Port-au-Prince continued to be affected by a lack of basic services and ongoing criminal violence.

In October, an outbreak of cholera spread throughout the country, including in prisons, infecting 140,000 people and killing about 3,000 by December.

MAIN FIGURES AND INDICATORS				
PROTECTION				
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>Red Cross messages</b>		<b>Total</b>	<b>UAMs/SCs*</b>	
Phone calls facilitated between family members		5,861		
Names published in the media		112		
Names published on the ICRC family-links website		29,288		
<b>Reunifications, transfers and repatriations</b>		<b>Total</b>		
People reunited with their families		22		
<b>Tracing requests, including cases of missing persons</b>		<b>Total</b>	<b>Women</b>	<b>Minors</b>
People for whom a tracing request was newly registered		130	8	110
People located (tracing cases closed positively)		81		
Tracing cases still being handled at 31 December 2010 (people)		19	1	14
<b>UAMs/SCs,* including unaccompanied demobilized child soldiers</b>		<b>Total</b>	<b>Girls</b>	<b>Demobilized children</b>
UAMs/SCs newly registered by the ICRC/National Society		145	61	
UAMs/SCs reunited with their families by the ICRC/National Society		27	10	
	<i>including UAMs/SCs registered by another delegation</i>	1		
UAM/SC cases still being handled by the ICRC/National Society at 31 December 2010		39	13	
<b>Documents</b>				
People to whom travel documents were issued		1		
Official documents relayed between family members across borders/front lines		8		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>				
<b>ICRC visits</b>		<b>Total</b>	<b>Women</b>	<b>Minors</b>
Detainees visited		6,181		
Detainees visited and monitored individually		81	4	18
Detainees newly registered		11	1	4
Number of visits carried out		123		
Number of places of detention visited		33		
<b>Restoring family links</b>		<b>Total</b>		
Phone calls made to families to inform them of the whereabouts of a detained relative		585		

\* Unaccompanied minors/separated children

ASSISTANCE				
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>Economic security, water and habitat</b>		<b>Total</b>	<b>Women</b>	<b>Children</b>
Food	Beneficiaries	4,430	56%	5%
Essential household items	Beneficiaries	8,559	75%	5%
Water and habitat activities	Beneficiaries	250,000	35%	32%
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>				
<b>Economic security, water and habitat</b>				
Food	Beneficiaries	4,500		
Essential household items	Beneficiaries	4,687		
Water and habitat activities	Beneficiaries	5,500		
<b>WOUNDED AND SICK</b>				
<b>Hospitals</b>				
Hospitals supported	Structures	13		
<b>First aid</b>				
First-aid posts supported	Structures	12		

## ICRC ACTION AND RESULTS

Within hours of the earthquake, the ICRC had flown additional staff and materials to Haiti and the neighbouring Dominican Republic, using chartered planes, to mount a swift response in collaboration with the Haitian National Red Cross Society. With the National Society, the ICRC initiated emergency water and health activities, as well as a substantial programme to restore family links, making available a special website, a telephone service and other resources. Unaccompanied/separated children were registered and put in the care of UNICEF until parents or relatives could be found. To manage the large number of human remains, ICRC forensic specialists provided the authorities with advice and body bags. As the Movement operation unfolded, 35 National Societies became involved, led by the International Federation. Alongside them, the ICRC stepped up its action to contribute to the response, appealing to donors for additional funds.

Given their extensive presence on the ground, Movement partners set up coordination mechanisms. The emergency phase requiring massive mobilization lasted until late March, after which the ICRC gradually scaled back its operations and refocused on its previously planned activities in Haiti. Some work directly related to the emergency continued, however, such as tracing activities for vulnerable children.

Key to relief work in violence-prone neighbourhoods was the ICRC's ongoing dialogue with the residents, various community organizations and weapon bearers active there, including MINUSTAH and members of armed gangs, to whom it explained the need to respect civilians and the Movement's neutral, impartial and independent humanitarian action. Dialogue was stepped up ahead of the elections. The Haitian Red Cross first-aid posts in these neighbourhoods continued to provide emergency care and ambulance services and held public health-awareness sessions with ICRC support. The ICRC and the water board continued work, begun in 2009, to improve water supply in the violence-affected neighbourhood of Cité Soleil.

In the immediate aftermath of the earthquake, the ICRC, which under normal circumstances conducted regular visits to detainees in the country, assessed the situation in Port-au-Prince's still-functioning detention centres. It supplied inmates with food, hygiene products and medicines and carried out emergency repairs with the authorities. Once the situation had normalized, it resumed its regular visits, in accordance with its standard procedures, to prisons and police stations in and around Port-au-Prince and continued discussing urgent needs for improvements with the authorities, notably regarding the problem of overcrowding. To improve conditions, the ICRC rehabilitated prison units and upgraded cells, kitchens, and water and sanitation facilities.

Following the cholera outbreak in October, the ICRC immediately took measures to stem its spread. In prisons, it assisted the detaining authorities in a variety of ways, including by disinfecting cells and other areas, distributing hygiene kits to all detainees, supplying dispensaries with medicines, dispensing antibiotics

to inmates and hiring additional personnel. In violence-affected neighbourhoods, it supported the evacuation of patients and, with the Haitian Red Cross, distributed water-purification tablets, chlorinated private water tanks and a pumping station, and raised hygiene awareness.

### CIVILIANS

Notwithstanding January's earthquake and the cholera epidemic at the end of the year (see below), the situation for residents of Haiti's violence-affected neighbourhoods continued to be very harsh. In oral and written representations and awareness-raising sessions, all weapon bearers, including the police, MINUSTAH and gang members, were familiarized with basic humanitarian principles and urged to respect civilians and the humanitarian workers and medical teams assisting them. In view of the potential for greater violence in the run-up to the election, such dialogue was stepped up.

The ICRC also intensified contacts within the communities themselves, as well as with national and international NGOs active in the neighbourhoods, highlighting the needs of particularly vulnerable groups, such as women and children, who were often targets of crime and sexual violence. Specially trained volunteers operated the ICRC-supported Haitian Red Cross first-aid and ambulance services in Cité Soleil and Martissant, which treated the wounded, transferred sick people and pregnant women to hospital, and referred victims of sexual violence to specialized medical and psychological care.

#### Earthquake victims receive life-saving medical care

During the post-quake emergency phase, which lasted until May, injured and sick people were treated at 13 hospitals and 12 first-aid posts supplied with medicines and medical materials by the ICRC. The first-aid posts comprised four permanent ones run by the Haitian Red Cross in Cité Soleil and Martissant to meet violence-related needs (see above) and those set up by the Haitian Red Cross and other National Societies in the makeshift camps where people made homeless by the earthquake had gathered. As well as treating minor injuries, the first-aiders stabilized more seriously wounded people before taking them to hospital.

Even before the earthquake, Haitian physical rehabilitation services had struggled to meet the needs of the huge number of disabled people in the country. The disaster led to thousands more people requiring such services, while the facilities providing them were damaged or destroyed. Towards the end of the year, the ICRC Special Fund for the Disabled, with financial support from the American Red Cross and the Norwegian Red Cross, began to rebuild and re-equip the limb-fitting centre managed by Healing Hands for Haiti International in Port-au-Prince. The work continued into 2011.

#### Homeless people and residents face fewer health risks

Despite the disruption caused by the earthquake, over 250,000 people, mainly in Port-au-Prince, had sufficient drinking water and faced fewer health risks thanks to the action of joint Haitian

Red Cross/ICRC water and sanitation teams and the ICRC's ongoing cooperation with the water authorities. This number included over 43,000 people in Cité Soleil and seven makeshift sites housing the homeless across the capital who received water from distribution ramps and storage tanks, as well as from trucks that delivered more than 13,000 cubic metres of water in the five months following the disaster. They also benefited from better hygiene conditions with the removal, organized by the ICRC, of 1,486 cubic metres of refuse and the building of latrines in camps and institutions. Given the precarious sanitary situation, camp dwellers learnt ways of lowering their exposure to health risks through hygiene-awareness sessions conducted by the Haitian Red Cross with ICRC support; more than 12,000 children and adults in Cité Soleil and Martissant were immunized against common diseases in a campaign carried out jointly by Red Cross volunteers, the Ministry of Health and the International Federation, with ICRC support. Additionally, 8,559 people were given essential household items, including soap, jerrycans and mosquito nets to help reduce the risk of infection. Some 4,430 others received food.

In addition to emergency measures, the authorities worked to repair water points and supply networks damaged during the earthquake, using ICRC-provided hydraulic materials, fuel and logistical support. Cité Soleil's water committee managed to keep the neighbourhood water supply going with reinforced ICRC assistance, including salary support for the committee's 84 members over five months, and technical advice and materials thereafter. With ICRC support, Haiti's water board also resumed work, begun in 2009 but disrupted by the earthquake, to build or refurbish pumping stations and a network of tapstands in Cité Soleil. Building on relations consolidated during the earthquake response, the water authorities, other bodies and organizations addressing needs in violence-affected neighbourhoods, and the ICRC set up a working group that met fortnightly to plan and execute further improvements.

Following the cholera outbreak in mid-October, some 2,000 people were evacuated from Cité Soleil and Martissant and taken to appropriate facilities by National Society volunteers in ICRC-provided vehicles. To prevent the disease from spreading further, people received some 90,000 water-purification tablets, private water retailers were given chlorine for their tanks, and a chlorination system was installed at a pumping station. During special Haitian Red Cross/ICRC sessions, some 30,000 residents were reminded of the need to be extra strict about hygiene.

#### **Families able to reconnect after the earthquake**

Because of the earthquake, many people lost contact with relatives. Family members in Haiti and abroad were able to restore contact using a website set up by the ICRC ([www.familylinks.icrc.org](http://www.familylinks.icrc.org)) less than 24 hours following the disaster. More than 29,000 people registered, either looking for relatives or announcing that they were alive.

While telecommunication links were down, survivors could contact relatives via a back-up service set up by the Haitian Red Cross and the ICRC in coordination with Télécoms Sans Frontières;

5,861 satellite and cell phone calls were made, mostly abroad. The population was alerted to these services via radio broadcasts and other promotional means.

The Haitian Red Cross opened a tracing office at its headquarters with fixed and mobile units run by National Society/ICRC teams in Port-au-Prince and outlying areas. They collected tracing requests and sought survivors, including during visits to hospitals and other institutions.

Unaccompanied/separated children were in a highly vulnerable position, including the risk of being taken abroad illegally for unauthorized adoption and other purposes. They were thus given priority. Such children referred to the ICRC/Haitian Red Cross were registered and then placed in the care of UNICEF-approved institutions. Meanwhile, the ICRC worked to trace the children's relatives and reunited the families whenever possible and appropriate.

As normal services resumed, the demand for family-links services declined. As of late March, only activities for the most vulnerable individuals, mainly unaccompanied/separated children, were maintained. Poster campaigns later in the year helped resolve some of the remaining cases, although they also generated new tracing requests.

#### **Support provided for human remains management**

Faced with the enormous number of people killed in the earthquake, the Directorate of Civil Protection consulted ICRC forensic specialists on ways to better manage human remains. Some 20 mortuary staff were trained, and mortuaries received over 2,000 body bags.

### **PEOPLE DEPRIVED OF THEIR FREEDOM**

Many places of detention were damaged in the earthquake. Within days, the ICRC had assessed the immediate needs in police stations and still-functioning prisons throughout the country. Detainees had the opportunity to contact their relatives and more than 4,500 received food, hygiene products, essential household items and medicines. Where needed, they were housed in ICRC-supplied tents. To restore adequate conditions as fast as possible, three prisons (in Jacmel, Les Cayes and Port-au-Prince) were cleaned, disinfected and had their water supply and waste-disposal systems repaired. The prison authorities used ICRC technical assessments to prioritize reconstruction work.

Regular visits to detainees in prisons and police stations, conducted according to standard ICRC procedures, resumed in May, with 6,181 detainees being visited during the year. The detaining authorities were informed confidentially of the findings and recommendations regarding detainees' treatment and living conditions. The visits also revitalized discussions, begun before the earthquake, notably on issues such as respect for judicial guarantees and means of combating the overcrowding contributing to poor health conditions in places of detention (see overleaf). Plans to provide the prison legal and social services with the necessary materials and expertise were revived, and a bimonthly meeting between the authorities and the ICRC ensured coordination and momentum in addressing the most pressing issues.

For the rest of the year, work continued on supporting the repair and rebuilding of prisons and police stations damaged in the earthquake, with a focus on those already identified as priorities by the ICRC in 2009 (prisons in Port-au-Prince, Hinche, Cap Haïtien, Les Cayes and Jacmel, and police stations in Petit Goave, Aquin, Miragoâne and Gonaïves). For example, two units of the central prison of Port-au-Prince were rehabilitated, while repair of the main block continued into 2011. Infrastructure under strain because of the severe overcrowding also received attention, with inmates benefiting from improved water supply and kitchen facilities and more comfortable sleeping arrangements thanks to the installation of bunk beds.

MINUSTAH and other stakeholders in Haiti's prison reform process acted in close coordination with the ICRC, drawing on its expertise for their own purposes as well as for seminars organized for prison administrators.

### **Detainees and prison authorities combat the spread of cholera**

Efforts to improve health in prisons resumed after the earthquake, when additional health staff recruited in 2009 finally took up their posts in April 2010 and prisons outside Port-au-Prince established and stocked dispensaries. As the pilot project to address tuberculosis (TB) and HIV/AIDS also resumed, detainees attended consultations, had sputum tests sent for analysis at the laboratory and received treatment at the prison dispensary. Prison health personnel, guided by the ICRC, established a medical file for each detainee.

The TB and HIV/AIDS control programme had to take a back seat, however, as resources were diverted in October to combating the cholera epidemic. Almost 5,000 detainees received antibiotics, and prison dispensaries were continuously restocked. Detainees who fell ill were treated in especially designated areas inside the prison facilities by additional health personnel hired by the ICRC or by regular staff whose overtime was paid by the ICRC. Inmates and staff learnt how to prevent the spread of the disease. They received hygiene kits and cleaning products on a regular basis and benefited from the disinfection of cells and latrines and chlorination of the water supply.

## **AUTHORITIES**

The country's infrastructure having suffered severe damage in the earthquake, the national authorities turned their attention first to the reconstruction effort and later to the parliamentary and presidential elections, thus adjourning all work on IHL or related topics. Contact with the authorities nevertheless remained crucial as it contributed to the smooth running of relief efforts and helped maintain the dialogue built up over the years on various humanitarian issues, such as the situation of detainees (see *People deprived of their freedom*).

Given the large-scale response to the earthquake involving many additional international actors, regular coordination meetings were essential, as was the constant briefing of those same actors on the Movement's operations and the ICRC's mandate as a neutral, impartial and independent humanitarian organization.

## **ARMED FORCES AND OTHER BEARERS OF WEAPONS**

MINUSTAH resumed its activities rapidly after the quake, boosting its numbers with additional troops and police, and backed up an international Joint Task Force during the emergency phase. These weapon bearers, along with gang members in violence-affected neighbourhoods, were briefed on Movement activities and on their obligations to respect civilians and the emblem and to allow humanitarian workers to reach and assist all vulnerable people unhindered.

With the potential for violence increasing as the elections neared, police officers deployed on the ground as well as those in police stations attended a number of ICRC sessions on humanitarian issues, such as international norms regulating the use of force and the treatment of people during arrest, interrogation and detention, as well as general respect for civilians, medical personnel and infrastructure.

## **CIVIL SOCIETY**

Networking with influential community members in Cité Soleil and Martissant contributed to informing residents and gang members in these neighbourhoods of the Movement's activities and neutral and impartial stance, with a view to gaining their support.

Radio was widely used to inform the general public about family-links services and the search for relatives of unaccompanied/separated children following the earthquake, as well as to promote awareness of the emblem and the medical mission, particularly in the run-up to the elections. Worldwide, reporting on the earthquake and the ensuing humanitarian response drew attention to the plight of Haitians and the vulnerability of unaccompanied/separated children, the situation of detainees in Haitian jails and the precarious living conditions of people made homeless. In addition to journalists receiving press releases and other information materials to aid their reporting, 15 teams from major international media organizations gained first-hand insight into the plight of earthquake victims in the course of ICRC-facilitated trips.

In spite of damage to the State University, law and economics students attended presentations on IHL and were able to consult a newly donated set of IHL reference books.

## **RED CROSS AND RED CRESCENT MOVEMENT**

Throughout the year, the Haitian Red Cross and the ICRC worked together to deliver emergency assistance to and restore family links among people affected by the earthquake and, as in previous years, those in violence-affected neighbourhoods (see *Civilians*).

Despite being seriously affected itself by the earthquake, the Haitian Red Cross mobilized swiftly, backed up by partner National Societies already present in the country and first-aid materials and fuel supplied by the ICRC. It then joined in the

Movement relief effort involving 35 National Societies, coordinated by the International Federation through strategic, operational and technical coordination meetings, and supported by the ICRC. In their daily operations, National Society staff and vehicles enjoyed greater security and communications range thanks to very-high-frequency radios and other materials donated by the ICRC.

The Haitian Red Cross drew on ICRC financial, technical and material support to boost its capacities and to help it get back on its feet after the earthquake. With major constraints to its work removed as damaged infrastructure began to be repaired, the National Society was better able to focus on its core activities. To improve services for violence-affected neighbourhoods, 13 regional and 108 local National Society committees received first-aid kits and training and support for ambulance fleet maintenance. Volunteers were also trained in using street theatre to raise awareness of a variety of issues, from the consequences of and support available to victims of sexual violence to the importance of breastfeeding. Following the cholera outbreak, volunteers underwent emergency training in promoting good hygiene practices to help stem the spread of the disease.

To prepare for the tropical storm season and other emergencies, such as election-related violence, the National Society developed a contingency plan with help from Movement partners. This included the pre-positioning of relief goods.

Throughout the year, volunteers continued to raise awareness of humanitarian principles among a wide variety of audiences.