

colombia



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	5,819
Assistance	18,572
Prevention	5,087
Cooperation with National Societies	1,140
General	-

► **30,618**

of which: Overheads 1,869

IMPLEMENTATION RATE

Expenditure/yearly budget	108%
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PERSONNEL

61 expatriates
235 national staff (daily workers not included)

KEY POINTS

In 2007, the ICRC:

- ▶ together with the Colombian Red Cross Society, provided emergency aid to over 66,000 newly displaced people and residents affected by the conflict and improved access to health care for civilians in conflict-affected areas
- ▶ published with WFP a study on the socio-economic needs of IDPs in 8 cities
- ▶ visited more than 5,500 people detained in connection with the conflict, monitoring up to 3,485 individually in 418 places of detention
- ▶ helped more than 2,300 victims of threats reach safer areas
- ▶ conducted three knowledge, attitude and practice surveys to gain a better understanding of the behaviour of people living in areas contaminated by mines and explosive remnants of war and thereby improve mine-action programming
- ▶ acted as a neutral and independent intermediary on numerous occasions, notably in connection with the release of people held by armed groups and in the recovery of the remains of 11 parliamentarians who had been held by the Revolutionary Armed Forces of Colombia

CONTEXT

The Colombian government faced a major political crisis in 2007, sparked by the confessions of paramilitary leaders demobilized within the framework of the Justice and Peace Law, which revealed alleged links between the paramilitaries and senior civil servants and military personnel. An investigation by a special Supreme Court commission led to many arrests, among them the brother of the foreign affairs minister, forcing her resignation. Multinationals and members of the business community were also implicated in the scandal.

In October, elections were held for mayors and governors. Thirty candidates were killed and many more received threats. However, the elections attracted more voters than those held in 2003.

Talks between the Colombian government and the National Liberation Army (ELN) in Havana, Cuba, made little progress.

In spite of the completion of a formal demobilization process involving former paramilitary groups, new armed groups had emerged in several of the country's departments. Clashes between armed groups and the armed forces continued in Antioquia, Caldas, Caquetá, Meta, and southern Tolima and flared up in central and southern Chocó, close to the border with Panama. Fighting between the Revolutionary Armed Forces of Colombia (FARC) and the ELN resumed in the south (Nariño) and close to the Venezuelan border (Arauca). Population displacements continued.

Community leaders, sometimes entire communities, were subjected to numerous threats, often leading to displacement. Medical staff were frequently targeted, restricting the population's access to health care in some areas. The number of casualties from mines and explosive remnants of war (ERW) was among the highest in the world.

The issues of people unaccounted for and of people held by armed groups remained high on the political agenda. An initiative by Venezuelan President Hugo Chávez to mediate the release of three "high-profile" hostages held by the FARC had not produced results by 31 December.

MAIN FIGURES AND INDICATORS

	Total		Total	Women	Children	
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)			CIVILIANS AND PEOPLE DEPRIVED OF THEIR FREEDOM			
Detainees visited	5,552	<i>Economic security, water and habitat</i>				
Detainees visited and monitored individually	3,485	Food	Beneficiaries	49,066	24%	56%
		Essential household items	Beneficiaries	66,720	24%	56%
	242	Agricultural inputs and micro-economic initiatives	Beneficiaries	17,666	24%	56%
	8	Water, sanitation and habitat projects	Beneficiaries	3,168	50%	30%
Number of visits carried out	780	<i>Health</i>				
Number of places of detention visited	418	Health centres supported	Structures	21		
RESTORING FAMILY LINKS		Consultations	Patients	2,806		
<i>Red Cross messages (RCMs) and reunifications</i>					958	1,091
RCMs collected	91				103	7
RCMs distributed	59					
<i>Tracing requests, including cases of missing persons</i>		Immunizations	Doses	2,274		
People for whom a tracing request was newly registered	500	WOUNDED AND SICK				
	75	<i>Physical rehabilitation</i>				
	94	Patients receiving services	Patients	41	4	6
	123	Prostheses delivered	Units	39	4	7
	304	Orthoses delivered	Units	4		
	49					
	43					

ICRC ACTION

The ICRC shared its analysis of the country's humanitarian situation with the relevant authorities and other humanitarian organizations. It maintained a 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. It discussed documented allegations of IHL violations with weapon bearers with a view to ending such practices. On several occasions, the ICRC acted as a neutral intermediary between the parties to the conflict, facilitating medical evacuations, the release of people held by armed groups and the recovery of human remains.

ICRC field activities were concentrated in some 20 priority zones. The organization provided food and essential household items to IDPs and residents and implemented agricultural and other projects to boost their self-sufficiency. It upgraded communal water and sanitation facilities and improved access to health services, directing beneficiaries to public health facilities and accompanying public health personnel on their rounds. Assisting resident communities in ever more remote areas proved to be a major security and logistical challenge.

A study conducted with WFP and an internal ICRC assessment of the socio-economic needs of displaced populations contributed to better-documented arguments when advocating on behalf of IDPs and to the fine-tuning of assistance to them.

The results of a knowledge, attitude and practice (KAP) survey in mine/ERW-affected communities, conducted by the ICRC in three departments, helped mobilize the authorities and improve mine-action programming. The sharing of information with the national mine-action body, thanks to a memorandum of understanding concluded with the ICRC, contributed to improving knowledge of the scale of the problem and the location of mines/ERW.

The ICRC provided expertise and support to the various organizations involved in the issue of persons unaccounted for, particularly to those working in the field of forensics. It organized workshops to help family members and forensic workers cope with the psychological trauma associated with exhumations.

The ICRC continued to visit people detained in connection with the conflict throughout the country and to monitor their treatment and living conditions. It assisted the national penitentiary authorities in improving planning and the overall efficiency of the prison health care system.

Recognized as the institution of reference on IHL matters, the ICRC continued to provide technical advice to the Ministry of Defence and assisted the police in completing and publishing a teaching manual integrating IHL principles into core instruction and operational training procedures.

The Colombian Red Cross Society and the ICRC worked together on several programmes, among them assistance to IDPs, HIV/AIDS capacity-building for local health authorities, and mine/ERW-risk education. The National Society improved its response to the psychological and social needs of IDPs on the basis of a study conducted with the Canadian Red Cross Society and the ICRC.

The ICRC coordinated its activities with those of Movement partners, UN agencies and other humanitarian actors in areas of common interest, with a view to maximizing impact, filling gaps and avoiding duplication.

CIVILIANS

Protection

The ICRC documented allegations of IHL violations and made representations to weapon bearers with a view to ending such practices. Disappearances, threats, summary executions and forced displacements represented the bulk of the cases. Allegations of sexual violence perpetrated by weapon bearers, cases of people

injured by mines/ERW and of minors subjected to forced recruitment were also documented. Victims of alleged abuses often received ICRC assistance:

- over 2,300 victims of threats received material assistance and help to reach safer areas
- the families of over 300 victims of summary executions or of persons who had died in connection with the armed conflict received financial support for funeral-related expenses
- 130 victims of sexual violence directed to appropriate health structures (86 supported financially)
- 5 children formerly associated with fighting forces taken to the Colombian Institute of Family Welfare

The ICRC acted as a neutral intermediary between the parties to the conflict on several occasions, facilitating:

- the recovery of the remains of 11 parliamentarians, killed after being held by the FARC for several years
- the release of 23 people and 2 police officers held by armed groups
- the medical evacuation of 7 wounded people
- access to conflict-affected areas by local health teams

Persons unaccounted for in connection with the conflict

The government approved a plan to improve coordination among organizations trying to locate missing persons or their remains. Over 1,100 sets of human remains were reportedly discovered in several mass graves, 118 of which were handed over to their relatives.

Government entities, including the State Prosecutor's Office, received ICRC technical advice, and associations of families of missing persons were strengthened. Colombian forensic specialists attended an international conference on forensic medicine in Buenos Aires, Argentina (see *Buenos Aires regional*). Members of Colombian NGOs and family associations, some of whom attended ICRC-organized conferences abroad, met regularly to share experiences and best practices. Government officials carrying out exhumations and the families concerned learned coping mechanisms during four workshops organized by the ICRC and Dos Mundos, a local foundation specializing in psychological assistance to conflict victims. Findings resulting from these workshops were compiled and circulated among relevant stakeholders.

- 64 RCMs collected from and 46 RCMs distributed to civilians
- new tracing requests registered for 500 people (including 75 females and 94 minors at the time of disappearance); 123 people located; 304 people (including 49 females and 43 minors at the time of disappearance) still being sought

Assistance

The ICRC worked in some 20 priority zones, its assistance programmes targeting mainly IDPs. Programmes were implemented together with the National Society and in coordination with the government and other stakeholders concerned. One-third of displaced people in six cities received ICRC assistance through the Colombian Red Cross.

The authorities and other relevant stakeholders welcomed the publication of an ICRC/WFP study on the socio-economic situation of IDPs in eight cities and planned to use it to improve assistance to IDPs. This study, and a complementary internal assessment, enabled the ICRC to fine-tune the content of its assistance package and better advocate on behalf of IDPs. It took the

opportunity to do so during a national campaign marking 10 years of ICRC assistance to IDPs in Colombia, during which period it assisted over a million IDPs.

Economic security

IDPs, 23% of whom were female-headed households, received emergency assistance consisting of food rations for up to three months (six months for particularly vulnerable households) and essential household items. The success of an ICRC voucher programme in three cities to promote IDPs' self-sufficiency prompted the government's *Acción Social* to implement a similar programme countrywide.

Assisting resident communities in conflict-affected areas became more difficult as the front line shifted to more remote areas.

People with particular vulnerabilities (e.g. facing threats, intimidation, mine/ERW risks or sexual violence) received ad hoc emergency relief.

In total:

- 49,066 people (11,735 households), of whom 48,753 IDPs, received food
- 66,720 people (15,948 households), of whom 66,382 IDPs, received essential household items
- 17,766 people (4,203 households), of whom 17,629 IDPs, benefited from a food voucher programme

Agricultural projects launched in 2006 for some 700 resident and IDP families were monitored in 2007.

Community infrastructure projects

Schools and health centres benefited from repairs to their water and sanitation systems.

- 3,168 people benefited from water and sanitation projects

State entities increased their support to IDPs in 35 reception centres and strengthened their presence in some of them through an *Acción Social*/ICRC plan of action, which included:

- the training of 69 staff members in management techniques
- the equipment of 10 centres with computers
- the improvement of water/sanitation facilities in 2 centres

Health care for IDPs and conflict-affected residents

In line with national legislation, the authorities were encouraged to provide health care to IDPs and residents in conflict-affected areas and assistance to victims of sexual violence. Two health posts were reopened in priority zones.

Over 5,000 weapon-wounded and sick civilians living in conflict-affected rural areas received medical assistance in health centres from public health staff supported by the Canadian Red Cross. Mobile health units reached hard-to-access areas accompanied by the ICRC. In areas where the security of national health staff could not be guaranteed, the ICRC sent its own medical staff.

In the 21 ICRC-supported health centres (catchment population 19,000):

- 2,806 people given consultations, including 110 attending ante/post-natal consultations and 2,696 attending curative consultations

- ▶ 2,274 vaccine doses administered (including 1,140 to children aged five or under and 715 to women of childbearing age)
- ▶ 51 patients referred to secondary care
- ▶ 198 health education sessions held

The ICRC referred some 82,300 IDPs in need of health care to appropriate health services and, on occasion, paid for medical costs not covered by the national health system.

Dealing with weapon contamination

Vulnerable communities in 10 departments benefited from mine/ERW-risk education activities implemented by the National Society with ICRC support (see *Red Cross and Red Crescent Movement*). Six government mine-action committees received support to improve their services to affected communities.

The results of the ICRC's KAP survey conducted in three departments increased the authorities' awareness of the scope of the weapon contamination problem and facilitated mine-action programming by all stakeholders. The exercise – the first of its kind in Colombia – prompted NGOs working in mine action and UNICEF to plan on using the same methodology elsewhere in Colombia.

Through a memorandum of understanding concluded with the ICRC, the national mine-action body gained access to the ICRC's mine/ERW incident database, thus improving the accuracy of national incident statistics. Other relevant organizations received training in the use of the ICRC database, a key step towards improving coordination and standardization of data gathering.

PEOPLE DEPRIVED OF THEIR FREEDOM

People detained in connection with the conflict were regularly visited by ICRC delegates, who made confidential reports to the penitentiary authorities (INPEC) on conditions of detention.

- ▶ 5,552 detainees visited, of whom 3,485 monitored individually (including 242 females and 8 minors) and 1,492 newly registered (including 157 females and 7 minors) during 780 visits to 418 places of detention
- ▶ 1,845 detainees visited by their relatives with ICRC support
- ▶ 27 RCMs collected from and 13 RCMs distributed to detainees
- ▶ 21 detainees fitted with prosthetic/orthotic appliances based on a cost-sharing agreement with INPEC

INPEC continued to run community health programmes, including HIV/AIDS prevention. It received ICRC technical support in the areas of planning and training to improve its health care system. Through such support:

- ▶ 2 INPEC staff and 1 from the Ministry for Social Protection participated in the second Latin American seminar on health in prisons, held in Chile (see *Buenos Aires regional*)
- ▶ 51 prison health staff participated in a national seminar on public health
- ▶ university medical faculties, providing free health services to detainees through ICRC-supported pilot projects, ensured the long-term sustainability of their programmes
- ▶ INPEC established a list of standard minimum technical requirements for providers of prosthetic/orthotic appliances

Efforts to obtain access to people held by armed groups remained as yet unsuccessful.

WOUNDED AND SICK

Patients needing specialized health care, including victims of mines/ERW, were referred to hospitals and physical rehabilitation centres. They received ICRC support for costs not covered by the national health system.

- ▶ 401 weapon-wounded patients, including 257 injured by mines or ERW, referred to appropriate health facilities, of whom 263 given financial support

The Ministry for Social Protection and the ICRC carried out quality checks in 10 hospitals treating weapon-wounded patients and undertook the necessary follow-up. National health staff working in conflict-affected areas improved their skills in first aid and the care of weapon-wounded patients during training courses organized with the Colombian Red Cross, the Ministry for Social Protection and regional medical faculties.

- ▶ 232 health promoters and auxiliary nurses received first-aid training
- ▶ 126 nurses and doctors from 57 hospitals/health facilities trained in the clinical management of weapon-wounded patients

Government services established quality standards in physical rehabilitation and set up internationally recognized training programmes for prosthetic/orthotic technicians. The quality of products used for patients improved after cooperation agreements, extended for another two years with three rehabilitation centres, allowed workshop facilities to be upgraded, the management of service providers improved and technicians to be trained.

The Centro Don Bosco, Bogotá, established the country's first programme to train prosthetic/orthotic technicians.

Five physical rehabilitation centres received ICRC support for the services provided to 41 patients (including 4 women and 6 children) referred to them:

- ▶ 36 new patients (including 4 women and 6 children) fitted with prostheses and 2 fitted with orthoses
- ▶ 39 prostheses (including 4 for women, 7 for children and 25 for mine victims), and 4 orthoses delivered

AUTHORITIES

The ratification and implementation of IHL treaties progressed. With ICRC support:

- ▶ a new decree was passed, strengthening the rights of mine/ERW victims
- ▶ the Ministry for Social Protection reviewed national guidelines on the respect owed to medical staff and facilities
- ▶ the Constitutional Court decided to recommend the ratification of the Second Protocol to the Hague Convention on Cultural Property and to consider additional measures in favour of missing persons and their families
- ▶ government officials agreed to study a working paper on the challenges and benefits of ratifying Protocol V to the Convention on Certain Conventional Weapons

The ICRC contributed to the coordination of humanitarian action in Colombia. Its involvement in the recovery of human remains and in international efforts to release two “high-profile” hostages highlighted its role as a neutral and independent humanitarian organization.

At round-tables organized by the international community, the ICRC provided expertise on IHL, mine action, missing persons, IDPs, the release of hostages and the exchange of detainees.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

The armed forces completed the integration of IHL into their doctrine, training and operating procedures. They continued to receive technical advice and support on the practical integration of IHL at field level. Field units attended dissemination sessions, which raised their awareness of the need to respect medical facilities and personnel and the importance of granting the ICRC regular and safe access to areas most affected by the armed conflict. The vice-minister of defence, the chiefs of staff and police commanders evaluated specific operations from the perspective of compliance with IHL through two “after-action review” sessions conducted with the ICRC.

Police special forces participating in military operations incorporated humanitarian norms and principles into their core instruction and operational training procedures through an IHL teaching guide completed with the cooperation of the Colombian Red Cross.

Dialogue with all the parties to the conflict facilitated access to conflict-affected areas and bolstered the ICRC’s role of neutral intermediary. Dialogue with representatives of armed groups included sessions on IHL and first aid and reviews of the humanitarian consequences of their actions.

- over 14,600 members of the armed forces and 2,800 members of the national police and its special forces attended dissemination sessions on IHL and the ICRC’s mandate and activities
- members of armed groups learned basic IHL principles

CIVIL SOCIETY

The media published hundreds of articles and broadcast radio interviews and television reports on the humanitarian situation in Colombia thanks to regular briefings, press releases and documentation provided by the ICRC. Some 160 journalists attended workshops on IHL principles. Media coverage of the plight of IDPs increased with the national campaign marking the 10th anniversary of ICRC assistance to IDPs in Colombia.

Following meetings with the ICRC, the national education authorities decided to include IHL and the respect due to medical staff and facilities in the curricula of medical and nursing schools.

Large companies operating in conflict-affected regions were briefed on basic IHL principles, ICRC activities and the humanitarian consequences of the conflict.

Victims and physical rehabilitation service providers stood to benefit from two information leaflets: one on the rights of mine victims to obtain appropriate surgical treatment and physical rehabilitation, produced in cooperation with the National Society, and another on self-care for victims with amputations.

RED CROSS AND RED CRESCENT MOVEMENT

The Colombian Red Cross remained a key operational partner for the ICRC, providing assistance to IDPs in six cities – representing 31% of the ICRC’s overall assistance to IDPs in those cities. It also supported the ICRC in running HIV/AIDS capacity-building programmes for local health authorities, conducting mine/ERW-risk education activities and assisting mine/ERW victims.

With support from the ICRC and the Norwegian Red Cross, the Colombian Red Cross developed new methodologies and teaching materials to sensitize target audiences, such as community leaders, local authorities and local health teams, to mine/ERW risks. Health personnel and affected communities became aware, through information leaflets, of the rights of mine victims to receive appropriate surgical treatment and physical rehabilitation.

The Colombian Red Cross defined its response strategy to the psychological and social needs of IDPs on the basis of the results of a study conducted with the Canadian Red Cross and the ICRC.

With ICRC support, the Colombian Red Cross reviewed its security rules in line with the Safer Access approach. Its multi-year cooperation with the ICRC in the field of tracing was fine-tuned on the basis of an assessment of operational opportunities and constraints.

Movement partners working in Colombia significantly improved their coordination.

- 187 mine/ERW-risk education sessions held for children, teachers, local authorities and health personnel
- volunteers in 12 branches enhanced their ability to provide psychological and social support to IDPs