

iraq



The ICRC has been present in Iraq since the outbreak of the Iran-Iraq war in 1980. Protection activities focus in particular on people detained by the Iraqi government, the United States/multinational forces in Iraq and the Kurdistan regional authorities and on efforts to restore contact between separated family members with the support of the Iraqi Red Crescent Society. Assistance activities involve helping IDPs and residents restore their livelihoods, supporting hospitals and physical rehabilitation centres, and repairing and upgrading water, sanitation, health and detention infrastructure. The ICRC continues to promote IHL among weapon bearers.

EXPENDITURE (IN KCHF)

Protection	21,939
Assistance	57,304
Prevention	5,682
Cooperation with National Societies	813
General	-

► **85,739**

of which: Overheads 5,232

IMPLEMENTATION RATE

Expenditure/yearly budget	89%
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PERSONNEL

94	expatriates
506	national staff (daily workers not included)

KEY POINTS

In 2009, the ICRC:

- increased its presence and direct control of operations in Iraq, enabling it to assess and respond to humanitarian needs in a more comprehensive manner
- extended its access to people held in places of detention under the responsibility of the Iraqi authorities
- in conjunction with the Iraqi Red Crescent Society, enabled thousands of families to visit and exchange news with detained/interned relatives
- provided emergency relief to some 280,000 people, mainly IDPs, and livelihood support to some 111,700 people
- promptly provided 450 tonnes of life-saving supplies to 51 hospitals treating the wounded and supported 10 physical rehabilitation centres countrywide serving some 31,200 disabled people
- improved water supply for some 3.8 million Iraqis through 64 water projects countrywide

CONTEXT

An electoral law passed in December set the stage for national elections in March 2010.

Although levels of violence in Iraq decreased, owing in large part to a reduction in sectarian killings and to more targeted military operations, suicide bombings and other forms of violence continued to kill hundreds of civilians each month, highlighting the country's continuing volatility and the fragility of the political process of national reconciliation. Parts of Baghdad and the disputed territories in northern Iraq remained particularly volatile.

Despite a ceasefire announced by the Kurdistan Workers' Party in April, Iranian and Turkish shelling of Kurdish militant bases in areas of northern Iraq reportedly continued, causing temporary civilian displacement.

US troops withdrew from Iraqi cities on 30 June, in compliance with the Status of Forces Agreement reached between the Iraqi and US authorities, which foresaw the complete withdrawal of US forces from Iraq by the end of 2011. People in US custody were progressively being released or transferred to Iraqi jurisdiction. The biggest internment facility in Iraq, Camp Bucca, closed on 17 September.

Some population groups, such as women-headed households and people living in the disputed areas, remained particularly vulnerable, in particular while awaiting integration into the public food distribution system. Unemployment was a major issue for both residents and IDPs. While the delivery of basic services in urban areas improved, their availability in rural and disputed areas was far more limited. Drought and destroyed, inadequate or neglected infrastructure contributed to a reduction of water resources. Increased salinity forced some farmers from the south to move northwards.

Despite widespread weapon contamination in the country, hardly any organizations were involved in clearance, risk reduction and education, and national capacities in this field were limited.

Many families remained without news of relatives who went missing during conflicts involving Iraq since 1980.

MAIN FIGURES AND INDICATORS

	Total	Total	Women	Children		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)¹		CIVILIANS (residents, IDPs, returnees, etc.)				
Detainees visited ¹	46,283	<i>Economic security, water and habitat</i>				
Detainees visited and monitored individually	3,158	Food	Beneficiaries	267,279	25%	53%
			of whom IDPs	119,021		
	of whom women	Essential household items	Beneficiaries	280,656	25%	54%
	55		of whom IDPs	191,242		
	of whom minors	Agricultural and veterinary inputs and micro-economic initiatives	Beneficiaries	111,716	25%	50%
Number of visits carried out	203	Water and habitat activities	Beneficiaries	3,826,430	30%	39%
Number of places of detention visited	66		of whom IDPs	426,093		
RESTORING FAMILY LINKS		<i>Health</i>				
<i>Red Cross messages (RCMs) and reunifications</i>		Health centres supported	Structures	27		
RCMs collected	94,847	Consultations	Patients	176,202		
RCMs distributed	107,717		of which curative		56,649	67,844
<i>Tracing requests, including cases of missing persons²</i>			of which ante/post-natal		4,923	
People for whom a tracing request was newly registered	140	Immunizations	Doses	15,960		
		PEOPLE DEPRIVED OF THEIR FREEDOM				
	of whom women	<i>Economic security, water and habitat</i>				
	6	Essential household items	Beneficiaries	8,838		
	of whom minors at the time of disappearance	Water and habitat activities	Beneficiaries	3,917		
	7	WOUNDED AND SICK				
Tracing cases closed positively (persons located)	153	Hospitals supported	Structures	51		
Tracing cases still being handled at 31 December 2009 (people)	2,874	Admissions	Patients	50,840		
		Operations	Operations performed	33,461		
	of whom women	Water and habitat activities	Number of beds	7,664		
	24	<i>Physical rehabilitation</i>				
	of whom minors at the time of disappearance	Patients receiving services	Patients	31,196	4,673	9,251
	127	Prostheses delivered	Units	3,447	421	132
DOCUMENTS ISSUED		Orthoses delivered	Units	12,615	1,885	8,387
People to whom travel documents were issued	502					
People to whom a detention attestation was issued	2,386					

1. All detainees notified by the authorities and followed up by the ICRC

2. Including people missing as a consequence of the 1990–91 Gulf War/not including people missing as a consequence of the 1980–88 Iran-Iraq war

ICRC ACTION AND RESULTS

The ICRC continued to expand its geographical presence and operational reach in Iraq, enabling a better response to the needs of people affected by the non-international armed conflict through activities carried out in previously inaccessible regions. With additional expatriate staff now based permanently in Iraq, the shift initiated in mid-2008 from remote-controlled management from Amman, Jordan, to direct supervision of operations was completed.

To gain access to victims of the conflict in remote areas and to ensure the safety of its staff, the ICRC strengthened its contacts with all stakeholders. Meetings between senior government officials and religious leaders and the ICRC president provided opportunities to discuss humanitarian issues of mutual concern. Extended networking with community and tribal leaders and religious circles in remote areas contributed to better mutual understanding and respect. Media coverage based on information provided by the ICRC raised public awareness of both the humanitarian consequences of the conflict and the ICRC's action and working methods.

Regular visits continued to thousands of people in the custody of the US forces in Iraq and the Kurdish regional authorities and, increasingly, to people in detention centres run by the central authorities. Joint Iraqi Red Crescent Society/ICRC operations enabled thousands of detainees to receive visits from and exchange news with their families. With the closure of the US internment facility at Camp Bucca in September, the ICRC ended its family-

visit programme, which since 2005 had made it possible for thousands of destitute families to visit relatives held there.

Work continued with the Iraqi authorities to clarify the fate of people still unaccounted for from the 1980–88 Iran-Iraq war and the 1990–91 Gulf War, including the provision of ICRC expertise and material assistance to boost the capacities of medico-legal institutes (MLIs) to store and identify human remains.

Monthly relief distributions to IDPs in general were wound down progressively and ceased in the spring, in line with the results achieved and needs assessed. However, particularly vulnerable groups, such as IDPs living in settlements and women-headed IDP households, continued to receive emergency assistance. The latter were assisted by the ICRC in registering for State welfare entitlements. Given the positive results of projects initiated in 2008, livelihood-support programmes were expanded in 2009. People mainly living in poorly served areas and hosting IDPs received help to enhance their water supply and access to health care services, and more than 3.8 million people benefited from ICRC water and sanitation construction or rehabilitation projects.

Scores of hospitals were provided with emergency medical and surgical supplies to help them cope with mass-casualty emergencies. A project undertaken with the health authorities served to strengthen essential hospital emergency services and trauma management in Iraq. Training, material and technical support to physical rehabilitation centres across the country increased their capacities to provide services to the growing number of people with conflict-related disabilities.

ICRC activities were coordinated with those of UN agencies and other humanitarian organizations operating in the country in order to identify unmet needs and avoid duplication.

CIVILIANS

Parties to the conflict are urged to respect IHL

A wider expatriate presence in Iraq increased the ICRC's ability to collect first-hand information on IHL violations. However, most civilian lives were lost in bombings and suicide attacks. All parties directly concerned were nonetheless called upon publicly to respect IHL, notably its provisions prohibiting attacks targeting civilians and indiscriminate attacks.

Conflict victims receive emergency aid and help to restore livelihoods

Monthly relief distributions to IDPs in general were discontinued in spring 2009, in line with the results achieved and updated needs assessments. Regular food and hygiene assistance had contributed to alleviating the economic hardship of beneficiaries, as they were able to redirect their money to purchasing other essential commodities or services. Food distributions had covered 50% of beneficiaries' food needs as planned.

However, particularly vulnerable groups, such as IDPs living in settlements and women-headed IDP households, continued to receive emergency assistance throughout the year, for example pending registration for State welfare entitlements. Livelihood support was expanded based on the positive results of projects initiated since 2008. Drought-affected farmers cultivated their fields and covered their basic food needs with ICRC aid instead of being forced to move to towns. Food production had also increased in areas where the ICRC had upgraded irrigation canals. Disabled people benefiting from ICRC income-generating projects increased their earnings by 45%.

- ▶ 267,279 people (44,607 households), including 119,021 IDPs and 2,650 women-headed households, received food
- ▶ 280,656 people (46,569 households), including 191,242 IDPs and 2,570 women-headed households, received essential household items
- ▶ 100 women registered for State welfare allowances
- ▶ 111,716 people (18,589 households) benefited from micro-economic initiatives, including:
 - 109,628 people from livelihood support, mainly agricultural inputs
 - 300 disabled people (total number of family members: 1,950) from various income-generating initiatives
 - 23 women heading households from training in starting a business

Water supply and health care are improved for people in remote areas

People, mainly those living in poorly served areas and hosting IDPs, received help to enhance their water supply and access to health care services.

- ▶ 3,826,430 people, including 426,093 IDPs in host communities, benefited from 64 water/sanitation projects, including:
 - 288,273 people from a response to an emergency, often including water-trucking

- 1,243,625 people from the repair and rehabilitation of infrastructure, including 13 primary health care centres
- 1,036,850 people from major projects, such as the rehabilitation of water supply systems and the construction of 1 primary health care centre

In the 27 ICRC-supported health centres (average monthly catchment population: 638,000):

- ▶ 176,202 people given consultations, including 4,923 attending ante/post-natal consultations and 171,279 attending curative consultations
- ▶ 15,960 vaccine doses administered
- ▶ 20 patients referred to a second level of care
- ▶ 36 health education sessions held

Communities are made aware of weapon contamination

Communities continued to be informed of the threat posed by weapon contamination through National Society awareness-raising activities, including the provision of educational materials, with ICRC support.

To tackle weapon contamination in Iraq, an ICRC project to clear explosive remnants of war (ERW) was developed in the south of the country in parallel with activities to build the capacity of the national Mine Action Authority.

Families are helped to exchange news with relatives

Acting as a neutral intermediary, the ICRC continued to encourage the parties concerned to clarify the fate of people still unaccounted for from the 1980–88 Iran-Iraq war and the 1990–91 Gulf War in bilateral meetings and through the related mechanisms (see *Iran, Islamic Republic of* and *Kuwait*).

MLIs received further support in the identification and storage of human remains. Some 36 forensic experts attended specialized DNA training sessions conducted by the ICRC, as did the head of the Baghdad MLI's DNA unit, who was sponsored to participate in a forensics course conducted at the University of Lancashire in the United Kingdom of Great Britain and Northern Ireland. In addition, MLI and hospital mortuaries were refurbished or supplied with mortuary fridges, as needed.

People restored family links, mainly with detained/interned relatives, via the Iraqi Red Crescent/ICRC RCM service.

- ▶ 47,203 RCMs collected from and 55,196 RCMs distributed to civilians; 8 phone calls made to families to inform them of the whereabouts of a relative detained/interned abroad
- ▶ new tracing requests registered for 140 people (6 women; 7 minors at the time of disappearance); 165 people located, including 12 for whom tracing requests had been registered by another delegation; 2,874 people (24 women; 127 minors at the time of disappearance) still being sought
- ▶ 9,453 names of people and their present whereabouts or requests for information on the whereabouts of relatives published on the ICRC website www.familylinks.icrc.org
- ▶ 86 official documents relayed between family members
- ▶ 502 people issued with an ICRC travel document

PEOPLE DEPRIVED OF THEIR FREEDOM

People in the custody of the Iraqi central government, the Kurdistan regional government and the multinational forces continued to receive ICRC visits carried out according to the organization's standard working procedures.

Improved security enabled the ICRC to visit detainees in additional places of detention and to reinforce the confidential dialogue on findings and recommendations with the central detaining authorities. This led to improvements in the detainees' living conditions and treatment. Concerns regarding respect for judicial guarantees were raised with the detaining and judicial authorities. Prison health care deficiencies were identified and discussed with the authorities concerned, including during a two-day seminar, and resulted in a decision by the Health and Justice Ministries to task a committee to design a coordinated policy for health in detention.

Concerted dialogue with representatives of the Kurdistan regional government provided opportunities to discuss issues of particular concern, such as respect for judicial guarantees and the detention conditions of people sentenced to death. A summary report on respect for judicial guarantees was submitted to the new prime minister in November.

Dialogue with the Iraqi and US authorities centred on the process of the release/transfer to the Iraqi authorities of people in US custody, focusing primarily on their safety and judicial rights.

- ▶ Iraqi central government: 22,765 detainees visited, of whom 1,010 monitored individually (35 women; 20 minors) and 587 newly registered (32 women; 20 minors), during 81 visits to 29 places of detention
- ▶ Kurdistan regional government: 3,943 detainees visited, of whom 676 monitored individually (20 women; 13 minors) and 392 newly registered (12 women; 12 minors), during 109 visits to 32 places of detention
- ▶ US-controlled internment facilities: 19,575 detainees/internees visited, of whom 1,472 monitored individually (19 minors; 114 foreigners) and 1,000 newly registered (16 minors) during 13 visits to 5 places of detention

Detainees in the custody of the Iraqi central government and Kurdistan regional government benefited from direct support provided by the ICRC to enhance their living conditions.

- ▶ 8,838 detainees received essential household items, including winter clothes, mattresses, blankets and books
- ▶ 3,917 detainees benefited from water/sanitation/habitat projects, including the provision of air conditioners/heaters for detainees living in tents

Family news

- ▶ 47,644 RCMs collected from and 52,521 RCMs distributed to detainees/internees; 552 phone calls made to families to inform them of the whereabouts of a detained/interned relative
- ▶ 2,386 certificates of detention issued to former detainees/internees or their families
- ▶ 10,302 detainees/internees visited by their relatives with ICRC support (26,093 family visits)
- ▶ 29 detainees/internees transferred or repatriated after their release, with ICRC support

WOUNDED AND SICK

Following military operations, suicide bombings and other forms of violence, the emergency and surgical services of 51 hospitals in 16 provinces provided care to the wounded and sick, in part thanks to the delivery of some 450 tonnes of ICRC medical and surgical supplies. Baghdad hospitals received water trucked in daily.

In May, the Iraqi central government, the Kurdistan regional health authorities and the ICRC signed an agreement to strengthen emergency services in hospitals, including the provision of emergency-care training for more than 580 doctors and nurses. By year-end, 114 doctors and 136 nurses from 16 provinces had completed the training course. In addition, 76 doctors, surgeons and first-aiders were trained in advanced first aid, trauma management and war surgery. In parallel, two hospitals in Najaf and Sulaymaniya, acting as reference facilities, worked with ICRC support to implement standard organizational and technical protocols linked to the management of emergency services and nursing practices.

Patients at the Al Rashad Psychiatric Hospital in Baghdad benefited from an ICRC occupational therapy programme.

The mortuaries of several MLIs and hospitals were rehabilitated to prepare them to cope with influxes of bodies.

In the 23 ICRC-supported hospitals that provided data:

- ▶ 50,840 patients admitted: of whom 4,600 weapon-wounded (including 48 people injured by mines or ERW), 30,383 other surgical cases and 15,857 medical patients
- ▶ 33,461 surgical operations performed
- ▶ hospitals (7,664 beds) benefited from the rehabilitation of their water/sanitation systems and the improvement/upgrade of buildings

Physically disabled people continue to receive assistance

The paediatric clinic in Erbil and three crutch-production units in Baghdad, Basra and Erbil received ICRC material, maintenance and technical support, as did Ministry of Health physical rehabilitation centres in Baghdad, Basra, Falluja, Hilla, Najaf and Tikrit and the ICRC's own centre in Erbil.

An agreement was signed with the Ministry of Health to construct a physical rehabilitation centre in Nasiriya, with a capacity to fit 500 patients with mobility appliances annually.

- ▶ 31,196 patients (including 4,673 women and 9,251 children) received services at 10 ICRC-supported physical rehabilitation centres
- ▶ 1,808 new patients (including 280 women and 92 children) fitted with prostheses and 8,551 (including 1,669 women and 4,916 children) fitted with orthoses
- ▶ 3,447 prostheses (including 421 for women and 132 for children; 341 for mine victims), 12,615 orthoses (including 1,885 for women and 8,387 for children; 120 for mine victims), 2,161 crutches and 96 wheelchairs delivered

AUTHORITIES

Relations with local authorities were further developed with the aim of spreading knowledge and acceptance of IHL and the ICRC's mandate and activities. The dialogue between senior representatives of the Iraqi government and the ICRC president in March in Baghdad, as well as the president's meetings with Iraqi religious leaders, contributed to this objective. It also offered an opportunity to discuss mutual concerns. These included the need to respond to the suffering and expectations of families of people still missing as a result of successive conflicts and the obligation to respect the judicial guarantees afforded to detainees under international law. During his stay in Iraq, the ICRC president visited Rusafa Prison in Baghdad.

Representatives of the Foreign, Defence and Interior Ministries and the National Security Council attended various regional seminars on IHL and its national implementation. Discussions were held with the Ministry of Foreign Affairs legal department on the creation of a national IHL committee, with the ICRC providing input for the relevant legislation.

The Ministry of Foreign Affairs received documentation to facilitate Iraq's accession to Additional Protocol I. Iraq signed the Convention on Cluster Munitions and the Chemical Weapons Convention.

Parliament was offered ICRC input on draft legislation to regulate the activities of private military and security companies.

In meetings with high-level officials in the Kurdistan regional government, the ICRC encouraged them to take into account the relevant provisions of IHL when elaborating and adopting regional legislation and the future constitution. However, as the constitution had already been drafted and was pending approval, no changes or amendments to it were possible.

Regular bilateral and multilateral meetings between the ICRC and UN agencies and other humanitarian organizations active in Iraq ensured coordination in fields of common interest.

Iraqi officials and representatives of the international diplomatic community in Iraq received monthly electronic operational updates and were made aware of the ICRC's activities and mandate thanks to the organization's increased visibility, press articles and media interviews.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

Extended networking with various parties to the conflict led to an overall better understanding and acceptance of the ICRC's mandate. Substantive dialogue was maintained with the Defence Ministry's training hierarchy on integrating IHL into military doctrine and training manuals. The ministry ordered all military training units to cooperate with the ICRC to accelerate this process.

Senior Iraqi military and security personnel, as well as officers of the Peshmerga and Assayesh forces in the Kurdistan Region, attended dissemination sessions. Four Iraqi military instructors and commanders and one member of the Kurdistan Security Agency participated in IHL training sessions abroad and subsequently started delivering their own courses.

Access to and information exchanges with US combat units and the NATO training mission were stepped up, as was dialogue with private security companies, generally reflecting increasing acceptance of the ICRC as a reference on IHL and related humanitarian principles.

CIVIL SOCIETY

Media outlets reported on ICRC activities and the continuing humanitarian consequences of the conflict in Iraq, based on regular briefings of journalists and ICRC information materials. Journalists attended a training workshop in Baghdad on IHL and the ICRC.

Networking with Iraqi religious leaders increased as a result of the ICRC's expanded presence in Iraq. Meetings between Shiite and Sunni religious leaders and the ICRC president provided opportunities to discuss common concerns. Representatives of the Kurdistan regional Ministry of Endowment and Religious Affairs, university lecturers and law students attended three round-tables on Islamic law and IHL in Erbil. Shiite and Sunni religious leaders and academics attended a conference on IHL and Islam in Najaf. Contacts were also developed with tribal leaders and local NGOs on the ground.

Academic institutions were assisted in promoting the teaching of IHL in universities. A meeting with 17 Iraqi law lecturers from various universities assessed the current state of IHL teaching. An IHL research competition was held in the law faculties of 11 State universities and prizes awarded to the best three papers. The deputy deans of Al Nahrain University in Baghdad and Dohuk University participated in the annual IHL course for Arab governmental and academic circles in Beirut, Lebanon (see *Egypt*).

RED CROSS AND RED CRESCENT MOVEMENT

Throughout 2009, operational cooperation with the National Society continued in the field of restoring family links (see *Civilians*). Branches received support for events related to volunteers, youth, mine action and dissemination. Together with the ICRC, the Iraqi Red Crescent headquarters reviewed its visual identity (i.e. developing a new letterhead, flags and stickers) to ensure the correct use of the National Society's name and logo. Information sessions on needs assessment training helped shape the National Society's capacity-building strategy, to be implemented in 2010.

In coordination with the International Federation, the ICRC lent its support to the Iraqi Red Crescent in re-establishing a sound statutory base in line with the Fundamental Principles of the Movement, to reform and restructure its finances and to organize a general assembly for all of its members. Joint International Federation/ICRC action was taken to urge the three northern branches to uphold the unity of the National Society following their decision to cut all ties with its Baghdad headquarters.