

# myanmar



The ICRC began working in Myanmar in 1986, providing physical rehabilitation for mine victims and other disabled people. Between 1999 and 2005, delegates visited detainees, assisted and protected civilians in conflict areas, and provided supplies to hospitals treating the wounded. By the end of 2005, restrictions imposed by the authorities on the ICRC's ability to work according to its standard procedures had led to a progressive downsizing of activities. The ICRC actively seeks dialogue with government authorities with a view to resuming its priority activities. It also works with the International Federation to enhance the effectiveness of the National Society with which it continues to run a prosthetic/orthotic facility.

## EXPENDITURE (IN KCHF)

Protection	1,711
Assistance	2,667
Prevention	781
Cooperation with National Societies	439
General	-

► **5,598**

of which: Overheads 342

## IMPLEMENTATION RATE

Expenditure/yearly budget	74%
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## PERSONNEL

12 expatriates
185 national staff (daily workers not included)

## KEY POINTS

### In 2007, the ICRC:

- pursued efforts to re-establish a substantive dialogue with the Myanmar authorities on the resumption of crucial humanitarian activities but was unable to do so
- in view of this situation and in accordance with the specific conditions under which it may break with its strict policy of confidentiality, publicly denounced major and repeated violations of IHL alleged to have been committed by the Myanmar authorities against civilians in conflict-affected border areas and detainees
- enabled 642 detainees to receive visits from family members
- continued to support 6 government-run physical rehabilitation centres and, in cooperation with the Myanmar Red Cross Society, supported the Hpa-an physical rehabilitation centre
- continued, at a reduced pace, to build the capacity of the Myanmar Red Cross to act in line with the Movement's Fundamental Principles

## CONTEXT

Low-intensity armed conflict between government forces and various armed groups continued to affect the population in various areas of Shan and Kayin states and eastern Bago division. As a result of the military campaign which peaked during the dry season, people continued to flee across the border to Thailand or to IDP camps within Myanmar.

In January, days after the death of the Karen National Union's former president, General Bo Mya, elements of the group's armed wing, the Karen National Liberation Army, split and formed a new group, the KNU Peace Council. The latter agreed a truce with the government of Myanmar.

In August and September, an increase in the price of fuel sparked major street demonstrations in Yangon and other cities. The protests ended with the intervention of the security forces, resulting in an official death toll of 13 and, as acknowledged by the authorities, the arrests of several thousand people, many of whom were eventually released. Members of the international community expressed concern, either directly or through regional or international inter-governmental organizations, over the government's handling of the protests.

In early September, the National Convention charged with laying the foundations for a future constitution completed its work. A committee appointed to begin drafting the constitution convened in December.

Following a visit to Myanmar by the UN secretary-general's special envoy, the leader of the opposition National League for Democracy, Aung San Suu Kyi, was allowed to meet a government representative. However, she remained under house arrest and did not participate in the transitional process initiated by the government.

The government continued to impose restrictions on humanitarian organizations, limiting their capacities to respond to humanitarian needs.

## MAIN FIGURES AND INDICATORS

	Total		Total	Women	Children	
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>		<b>WOUNDED AND SICK</b>				
Detainees visited	0	<i>Physical rehabilitation</i>				
Number of visits carried out	0	Patients receiving services	Patients	5,945	706	408
<i>Tracing requests, including cases of missing persons</i>		Prostheses delivered	Units	2,255	160	78
People for whom a tracing request was newly registered	194	Orthoses delivered	Units	1,228	282	519
<i>of whom females</i>	29					
<i>of whom minors at the time of disappearance</i>	7					
Tracing cases closed positively (persons located)	79					
Tracing cases still being handled at 31 December 2007 (people)	163					
<i>of which for females</i>	20					
<i>of which for minors at the time of disappearance</i>	1					
<b>DOCUMENTS ISSUED</b>						
People to whom a detention attestation was issued	48					

## ICRC ACTION

In 2007, the government maintained the restrictions imposed on the ICRC, preventing the organization from discharging its internationally recognized mandate according to its customary working procedures, which the Myanmar authorities had accepted in previous years. Meanwhile, repeated attempts by the ICRC to re-establish a substantive dialogue with the authorities failed. The authorities also did not respond to the humanitarian concerns raised by the ICRC, in particular in two summary reports submitted in 2006.

At the operational level, the deadlock meant that the ICRC was unable to resume monitoring of detention conditions or the provision of assistance to the civilian population in border areas affected by armed conflict.

In March, having exhausted all bilateral means at its disposal and in line with the specific conditions under which it may break with its strict policy of confidentiality, the ICRC decided to speak out publicly on the difficulties it had encountered in restoring a meaningful dialogue with the government of Myanmar and in addressing serious humanitarian issues in accordance with IHL. This was followed by another public statement in June, denouncing major and repeated violations of IHL identified by the ICRC.

In light of this situation, the ICRC continued scaling down its field presence. It closed its Keng Tong, Taunggyi and Moulmein field offices during the year and significantly reduced the numbers of expatriates and national staff. The Mandalay and Hpa-an field offices remained open, enabling some physical rehabilitation activities and the family visits programme for detainees to continue.

Given the lack of access to medical facilities for people living in border areas, the ICRC stopped covering the treatment costs of weapon-wounded patients and providing medical assistance within Myanmar's borders.

IHL promotion among the authorities and civil society remained extremely limited. However, the ICRC supported and participated in dissemination sessions on the Movement's Fundamental Principles, together with the Myanmar Red Cross Society, at some of the National Society's internal training sessions or information sessions for township officials.

## CIVILIANS

In some areas along the Thai-Myanmar border, civilians continued to suffer the effects of the ongoing low-intensity armed conflict.

Owing to restrictions on its movements, the ICRC was unable to carry out its mandate in the sensitive border areas. As a consequence, activities for civilians in these areas, notably improving access to basic health care and to safe water, on hold since October 2006, did not resume. The ICRC could not engage the Myanmar authorities in a dialogue on the protection of civilians in conflict-affected areas. In June, in line with its relevant policy, the ICRC publicly denounced IHL violations against civilians in areas affected by armed conflict along the Thai-Myanmar border.

- new tracing requests registered for 194 people (including 29 females and 7 minors at the time of disappearance); 79 people located; 163 people (including 20 females and 1 minor at the time of disappearance) still being sought

## PEOPLE DEPRIVED OF THEIR FREEDOM

At the beginning of 2007, the Myanmar authorities released some 2,800 detainees after their sentences had been remitted, bringing the official total of detainees released since November 2004 to around 23,000.

According to the Myanmar authorities, more than 2,000 people were arrested during demonstrations in September. In some cases, families were unaware of the whereabouts of their detained relatives. At the families' request, the ICRC approached the authorities in order to obtain information. According to the authorities, most of those detained in relation to the demonstrations had been released by the end of the year, while around 100 remained in detention.

Since December 2005, owing to the lack of respect for some of its standard working procedures, the ICRC had not been able to visit people in detention facilities in order to properly monitor their treatment and living conditions. Meanwhile, the authorities had yet to respond to a summary report – handed over in 2006 – on the ICRC's findings on the conditions of detention observed during visits to people held in prisons and labour camps from 1999 to 2005. In June, in line with its relevant policy, the ICRC publicly

denounced IHL violations against detainees used as porters in some of the conflict-affected border areas.

Previously registered detainees continued to receive monthly family visits with the ICRC's support. However, no RCMs could be exchanged between detainees and their relatives owing to the suspension of ICRC visits to places of detention.

Contacts with Prison Department health staff were interrupted. The ICRC was not informed of any activity by the Joint Working Group, which aimed to mobilize public health actors and advocate changes in the prison health care system.

- ▶ 642 detainees visited by their relatives with ICRC support
- ▶ 48 detention certificates issued to former detainees or their families
- ▶ 17 released detainees returned home with ICRC support

## WOUNDED AND SICK

Owing to the lack of independent access to areas outside state or division capitals, the ICRC could not assess medical facilities located in sensitive border areas or conduct any rehabilitation work. Payment of the medical costs of weapon-wounded patients in Myanmar also ceased because the ICRC could not monitor the activity. Through its delegation in Bangkok, the ICRC continued to cover the costs of patients from Myanmar receiving medical care on Thai territory.

The ICRC cancelled the planned training course for surgeons.

In cooperation with the National Society, the ICRC continued to support the Hpa-an physical rehabilitation centre. In June, the ICRC ended its assistance to three physical rehabilitation centres managed by the Ministry of Health and three centres managed by the Ministry of Defence. However, the six centres received enough material from the ICRC to continue running for about a year.

The ICRC/National Society outreach prosthetic programme continued, but owing to the ICRC's reduced support, the programme was limited to the south-east, the area with the most landmines.

- ▶ 5,945 patients (including 706 women and 408 children) received services at the ICRC-supported physical rehabilitation centre
- ▶ 994 new patients (including 85 women and 27 children) fitted with prostheses and 542 (including 160 women and 159 children) fitted with orthoses
- ▶ 2,255 prostheses (including 160 for women, 78 for children and 1,436 for mine victims), 1,228 orthoses (including 282 for women, 519 for children and 2 for mine victims), 3,185 crutches and 20 wheelchairs delivered
- ▶ 729 patients benefited from improved access to prosthetic services through the outreach prosthetic programme

## AUTHORITIES

Although the Myanmar government's decision to close down ICRC field offices was rescinded, the ICRC did not resume visits to detainees or its other activities in sensitive border areas in accordance with its standard working procedures. The ICRC tried to overcome differences with the Myanmar government and to clarify possible misunderstandings.

In spite of its attempts to engage with the authorities, the restrictions on the ICRC remained in place, preventing the organization from discharging its internationally recognized mandate. These restrictions were incompatible with the ICRC's independent and neutral approach to assessing the need for humanitarian action and to assisting people falling within its mandate. Subsequent official representations and meetings with government officials did not change the situation. The restrictions also limited ICRC activities carried out in cooperation with or in support of government officials.

Seven government officials followed the distance-learning post-graduate diploma in IHL from the NALSAR University of Law in Hyderabad, India. Two of the seven sat the exam.

## ARMED FORCES AND OTHER BEARERS OF WEAPONS

At the invitation of the Directorate of Medical Services under the Ministry of Defence, the ICRC participated in the 15th Military Medical Conference, setting up an exhibition booth on ICRC activities, with emphasis on the physical rehabilitation programme.

Junior army officers, junior police officers and some civilian officials attended an IHL presentation given by the ICRC at the Training Workshop on the Prevention of Recruitment of Children into the Military organized by the Department of Social Welfare.

## CIVIL SOCIETY

The ICRC issued a press release in March related to the closure of two field offices and the difficulties in carrying out its mandate. The press release raised interest among local, regional and international media. The ICRC's public denunciation of the Myanmar government's major and repeated violations of IHL also received extensive international media coverage.

The media in Myanmar continued to pick up press releases about ICRC activities locally and elsewhere in the world. Contacts with representatives of local media and foreign correspondents were initiated and maintained.

A total of 14 individuals, including teachers and students from Yangon and Dagon universities majoring in law and international relations, as well as government officials from the Attorney General's Office and the Supreme Court, consulted ICRC and IHL literature available at the delegation's resource centre.

## RED CROSS AND RED CRESCENT MOVEMENT

The delegation held a series of discussions with the Myanmar Red Cross leadership about the ICRC's role, mandate and joint activities. The executive committee attended a specially tailored presentation on the ICRC's mandate. The ICRC gave financial and technical support to the National Society in carrying out activities to raise awareness of the Fundamental Principles on World Red Cross and Red Crescent Day (8 May). To mark the occasion, the National Society organized a series of events, including information sessions, first-aid competitions for volunteers, and media programmes.

In June, the National Society distributed a public report on the ICRC's activities in Myanmar without prior consultation with the ICRC. The ICRC did not agree with the contents of the report, which it felt were factually inaccurate. After the report's distribution, the National Society and the ICRC held discussions on the roles of each component of the Movement.

The Myanmar Red Cross remained an important operational partner for the ICRC in the implementation of the outreach prosthetic programme (see *Wounded and sick*). After the completion of the first centralized training session for National Society project officers in September 2006, volunteers in the Shan state participated in the first decentralized training workshop on physical rehabilitation. A total of 18 representatives from 16 townships participated.

The ICRC continued to support capacity-building in the fields of communication and dissemination in order to promote proper understanding of and respect for the Fundamental Principles among the National Society's leadership, staff and volunteers. Township volunteers and police officers regularly attended basic dissemination workshops on the Fundamental Principles.

The National Society, the International Federation and the ICRC held regular tripartite meetings to strengthen Movement coordination, share information and discuss issues of common concern.

The ICRC, in cooperation with the International Federation, participated in the process of strengthening the National Society's legal base.

- 181 National Society volunteers and police officers participated in 4 IHL workshops at township level in 3 different states and divisions
- 200 National Society volunteers attended a presentation on the ICRC's mandate and activities