TUNIS (regional)

COVERING: Morocco/Western Sahara, Tunisia



The regional delegation based in Tunis, which has been operating since 1987, visits people deprived of their freedom in Tunisia, monitoring their treatment and conditions of detention. It addresses issues of humanitarian concern arising from the aftermath of the Western Sahara conflict. It promotes awareness of IHL among the authorities, armed forces and other armed groups, as well as implementation of the law by these actors. The ICRC supports the Tunisian Red Crescent in building its capacities.

YEARLY RESULTS

Level of achievement of ICRC yearly objectives/plans of action

MEDIUM

KEY RESULTS/CONSTRAINTS In 2014:

Expenditure/yearly budget

Resident staff (daily workers not included)

PERSONNEI Mobile staff

in Tunisia, the Health, Interior and Justice Ministries, drawing on ICRC expertise, updated their policies on the treatment of inmates, including people under interrogation or held for security reasons

- hundreds of disabled Sahrawi refugees regained some mobility through care at the ICRC-supported physiotherapy centre near Tindouf, Algeria, and through assistive devices produced there
- families separated by conflict kept in touch, some receiving news of relatives missing since the 1975–91 Western Sahara conflict and those fleeing Libya also receiving aid from the Tunisian Red Crescent
- the Moroccan Red Crescent made use of the ICRC's technical expertise to conduct risk awareness sessions for people living in mine-affected areas and to establish its family-links network
- Moroccan authorities agreed for the ICRC to upgrade its presence in the country to a separate delegation in 2015, partly with a view to helping them advance the implementation and ratification of IHL treaties

PROTECTION	Total
CIVILIANS (residents, IDPs, returnees, etc.)	
Red Cross messages (RCMs)	
RCMs collected	29
RCMs distributed	85
Phone calls facilitated between family members	310
People located (tracing cases closed positively)	22
People reunited with their families	1
of whom unaccompanied minors/separated children	1
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)	
ICRC visits	
Detainees visited	17,822
Detainees visited and monitored individually	340
Number of visits carried out	53
Number of places of detention visited	20
Restoring family links	
RCMs collected	34
RCMs distributed	19
Phone calls made to families to inform them of the whereabouts of a detained relative	174

EXPENDITURE (in KCHF) Protection	1,850
Assistance	1,848
Prevention	1,163
Cooperation with National Societies	586
General	-
	5,447
	of which: Overheads 332
IMPLEMENTATION RATE	

94%

15

36

ASSISTANCE		2014 Targets (up to)	Achieved
CIVILIANS (residents, IDPs,	returnees, etc.)		
Physical rehabilitation			
Centres supported	Structures	1	1
Patients receiving services	Patients	363	436

CONTEXT

In Tunisia, parliamentary and presidential elections took place amid general calm. Military/security operations against armed groups reportedly resulted in arrests and casualties along Tunisia's borders with Algeria and Libya. State services, the Tunisian Red Crescent, local communities and other actors were able to meet the needs of people fleeing instability in Libya (see *Libya*).

In Morocco, people struggled with high unemployment rates and few State subsidies. People in areas administered by Morocco or the Polisario Front were at risk from mines and explosive remnants of war (ERW). As the status of Western Sahara remained unsettled, the mandate of the UN Mission for the Referendum in Western Sahara (MINURSO) was extended to 2015. Moroccan and Sahrawi families awaited news of relatives missing since the 1975–91 conflict.

Moroccans and Tunisians reportedly involved in unrest abroad, for example in Iraq or the Syrian Arab Republic, lost contact with their families or were detained upon return to their countries. Migrants passed through Morocco and Tunisia to reach Europe.

ICRC ACTION AND RESULTS

The ICRC regional delegation in Tunis focused on meeting the needs of people deprived of their freedom in Tunisia, and those of vulnerable people separated from their families, in cooperation with State actors and Movement partners in the region.

In Tunisia, the ICRC visited detainees, including those in preventive detention, in accordance with its standard procedures. Afterwards, the authorities received the ICRC's confidential feedback, helping them improve detainee treatment and living conditions. For example, the authorities used such feedback to plan European Union-backed reforms, such as the opening of more probation offices. The authorities also drew on ICRC expertise to update penitentiary policies: the Interior Ministry developed practical guidelines for the treatment of people under interrogation and promoted these among security forces and penitentiary personnel; the Health and Justice Ministries developed a protocol for medical follow-up of people on hunger strike; the Justice Ministry continued promoting community service/conditional releases and made efforts to open more probation offices. The Health Ministry also agreed to eventually take over management of prison health services. In the meantime, detainees protected themselves more effectively against hygienerelated illnesses through upgraded sanitation infrastructure, and could recover from illnesses/injuries through care in ICRCsupported prison clinics.

Members of families dispersed by armed conflict, detention or migration restored/maintained contact through Movement family-links services. Moroccan and Tunisian families called their relatives detained abroad or received RCMs from them. Hundreds of people fleeing Libya for Tunisia found relief at the border: they consumed food and water distributed by the Tunisian Red Crescent and contacted their relatives using ICRC equipment. The Moroccan Red Crescent worked to establish its family-links network in Morocco by conducting a comprehensive assessment of the family-links needs of people in the north including, with the Justice Ministry's consent, detainees, and by training its volunteers to do the same in central and southern Morocco. In Morocco/Western Sahara, the Moroccan national human rights committee, the "Sahrawi Red Crescent" and a local association continued to work on cases of missing persons. Some families received news of their missing relatives because of the exchange of information between these organizations and the ICRC. Near Tindouf, Algeria, Sahrawi amputees and other disabled people regained a measure of mobility through treatment at the ICRCsupported physical rehabilitation centre, which later moved to the Rabouni hospital. People in mine-affected areas of Western Sahara learnt safe practices at information sessions organized by the Moroccan Red Crescent. Such activities were not carried out in the Polisario Front-administered areas owing to administrative constraints.

The regions' authorities, weapon bearers and other actors capable of facilitating humanitarian activities for vulnerable people and detainees learnt more about IHL and the ICRC's mandate through dialogue, information sessions and courses abroad. In Morocco and Tunisia, some military/security officers furthered their understanding of IHL, international human rights law and the ICRC's mandate. Moroccan, Tunisian and Polisario Front officials learnt more about IHL: the Moroccan government expressed interest in pursuing IHL implementation with ICRC support, and agreed for the ICRC to upgrade its presence in the country to a delegation in 2015.

CIVILIANS

Families stay in touch with relatives who had migrated or were detained abroad

In Tunisia and in the wider region, families dispersed by conflict, migration or other circumstances, including shipwrecked migrants rescued by the Tunisian coast guard, maintained or restored contact with their relatives through Movement familylinks services. At Tunisia's border with Libya, hundreds of people fleeing into Tunisia eased their journey: they consumed food and water distributed by the Tunisian Red Crescent and contacted their relatives using ICRC equipment. Some families called and sent RCMs to relatives detained/interned abroad, at the US internment facility at Guantanamo Bay Naval Station in Cuba, the Parwan detention facility in Afghanistan or elsewhere. Owing to the resolution of 22 tracing cases, some families received news of their missing relatives; one minor rejoined his family abroad.

The Moroccan and Tunisian National Societies strengthened the services mentioned above with ICRC technical support, such as training in managing human remains. The Moroccan Red Crescent worked to establish its family-links network: in northern Morocco, it assessed the family-links needs of people, including destitute migrants living in the forest and, with the Moroccan Justice Ministry's consent, detainees. Some 30 volunteers were trained to do the same in the central and southern regions.

National Societies in Africa and elsewhere (see *Europe*) coordinated their efforts to clarify the fate of missing migrants by sharing information and best practices, for example, at an international conference in Tunisia organized by another organization.

Local bodies progress in clarifying the fate of people missing since the past Western Sahara conflict

Families stood to benefit from the efforts of the Moroccan human rights committee, the "Sahrawi Red Crescent," the newly established Sahrawi human rights committee and a local organization to clarify the fate of the missing. As a result of the exchange of information between the Moroccan committee and the ICRC, progress was made in resolving hundreds of cases; some families received news of their missing relatives.

Families of people who went missing in relation to conflict abroad (see *Context*) requested ICRC help to clarify their fate. In Morocco, some families of people who became unaccounted for during past conflict in Lebanon drew on ICRC advice to initiate legal proceedings for formal recognition of the disappearance of their relatives, which could entitle them to support from the State and other relevant bodies.

PEOPLE DEPRIVED OF THEIR FREEDOM

People are sentenced to community service or released conditionally

In Tunisia, about 17,800 detainees held by the Interior/Justice Ministries received visits from the ICRC, conducted according to its standard procedures. Around 340 people, including those held in relation to regional insecurity, were followed up individually. Detainees used Movement family-links services to contact their relatives: over 170 had their families informed of their situation. After visits, the authorities received the ICRC's confidential feedback and technical advice/guidance, including in relation to judicial guarantees, which helped them improve detainees' treatment and living conditions. For example, the authorities drew up plans for European Union-backed reforms, notably in relation to staff training and for the opening of more probation offices (see below). The authorities also closed one centre for minors – inmates were transferred to more suitable centres – following an ICRC assessment of six such structures.

The Tunisian authorities continued to promote alternative sentencing as a means of reducing overcrowding. The Justice Ministry sentenced over 300 people to community service/conditional release through its probation office in Sousse; four probation officers and two magistrates overseeing the office learnt more about alternative sentencing from their counterparts in Switzerland during an ICRC-organized study tour. The ministry, guided by the ICRC, worked to establish a legal status for probation offices, with a view to facilitating the opening of more offices of this kind.

The Health, Interior and Justice Ministries update their guidelines on the treatment of detainees

The Tunisian authorities made use of ICRC expertise to further knowledge, among penitentiary personnel and weapon bearers, of internationally recognized standards for detention. The Interior Ministry, the *gendarmerie* leadership and station commanders updated and implemented a code of good practice to serve as practical guidelines for the treatment of people under interrogation. At one place of detention, a prison doctor used reference materials – which she had requested from the ICRC – to conduct information sessions for Interior Ministry officials.

Officials from the ministries concerned, medical professionals and the ICRC discussed issues related to health care in detention, such as documenting cases of possible ill-treatment. A plan for training prison staff to improve the handling of these issues was developed with the help of doctors who had attended an experts' seminar abroad (see *Jordan*); four officials also attended advanced courses abroad. After an ICRC-organized round-table, the Health and Justice Ministries began to draft a protocol for medical follow-up of people on hunger strike or who were injured abroad before their arrest/detention. The national school for training prison staff updated its curriculum and recruitment policies, drawing in part on an ICRC assessment conducted in 2013. Around 20 lecturers from the school strengthened their teaching capacities through train-the-trainer workshops, and subsequently conducted information sessions for approximately 200 future prison staff.

Health Ministry agrees to eventually take charge of prison health services

The Health and Justice Ministries reached an agreement whereby the former would take over the monitoring and maintenance of prison health services; the Health Ministry began training some prison medical staff. In the meantime, around 13,000 detainees at five prisons recovered more quickly from illnesses or injuries through care in clinics supported by the ICRC with equipment, medical supplies and technical advice. At the middle of the year, support was limited to the two prisons at which the authorities could follow the health-care situation more closely. Detainees also stood to benefit from improved health care after the authorities took steps to improve the management of their medical records and standardized procedures for their admission to medical facilities.

Some 2,700 detainees at two prisons improved their living conditions following ICRC-supported infrastructural upgrades, notably the construction of showers. Detainees at one prison protected themselves more effectively against hygiene-related illnesses, after an anti-scabies campaign conducted by the authorities and supported by the ICRC with hygiene items. At one prison, penitentiary authorities facilitated the training of personnel in fire-safety procedures.

At a detention centre for girls, some 30 detainees operated a laundry and ironing service set up by the ICRC, thereby gaining skills that could help them earn an income after their release.

WOUNDED AND SICK

Hundreds of disabled Sahrawis regain a measure of mobility

Near Tindouf, over 430 disabled Sahrawis, including those injured by mines/ERW, were treated at the physiotherapy centre supported by the Sahrawi health authorities and the ICRC; patients had readier access to the centre after it reopened at the Rabouni hospital, closer to the refugees' dwellings. Some patients made use of prostheses and orthoses – made specifically to fit them – and other assistive devices produced at the centre. In addition, 25 people suffering from cerebral palsy had a more accommodating living environment after their families were briefed on their specific needs.

Despite having only a few trained staff, the centre maintained adequate services with ICRC help. The eight "Sahrawi Red Crescent" volunteers already working at the centre continued to add to their skills with ICRC training and supervision; management used ICRC recommendations/suggestions to stipulate the requirements for hiring additional personnel. An ICRC physiotherapist joined the staff in December.

Communities in the Moroccan-administered part of Western Sahara were urged to adopt safe practices around mines/ERW through an annual risk-awareness campaign conducted by the Moroccan Red Crescent; in 2014, teaching techniques/materials developed with the ICRC were used. The households of five mine victims supplemented their income through small businesses set up with ICRC cash grants distributed through the National Society. Such activities did not take place in the Polisario Front-administered part of Western Sahara, owing to administrative constraints.

In western Tunisia, medical personnel received supplies for treating up to 50 people, which helped ensure that they had resources at hand for treating the injured in the event of violence.

ACTORS OF INFLUENCE

Tunisian security officers reinforce their understanding of international detention norms

In Morocco and Tunisia, some 300 military/security officers, including foreign officers studying in Morocco, added to their knowledge of IHL, international human rights law and the ICRC's mandate through information sessions. A senior Tunisian officer learnt best practices in incorporating IHL in field operations at a course abroad (see *International law and policy*).

In Tunisia, troops with arrest/detention duties learnt more about internationally recognized standards applicable to their work; some security officers did so at a week-long workshop organized with a national training institution. Practical guidelines for the treatment of detainees and protocols for their medical follow-up were developed by the authorities and medical staff concerned (see *People deprived of their freedom*).

Morocco agrees for the ICRC to upgrade its presence in the country in 2015

Through dialogue and information sessions, the region's authorities learnt more about and were encouraged to support IHL. State officials, including Moroccan diplomats, added to their knowledge of IHL implementation at courses abroad (see *Kuwait* and *Lebanon*); the Tunisian Justice Minister participated in a regional meeting of IHL committees (see *Algeria*). Around 40 representatives of the Polisario Front, including officials from various ministries, were briefed on IHL principles and ICRC activities for people disabled by mines/ERW.

In late 2014, the Moroccan government signed a headquarters agreement with the ICRC. Preparations were underway to upgrade the ICRC's presence in Morocco to a separate delegation in 2015, with a view to helping the authorities advance/promote the implementation of IHL, and the Moroccan Red Crescent provide family-links services to vulnerable people.

The political transition in Tunisia slowed the updating of laws pertaining to IHL treaties, the National Society and the use of Movement emblems.

Medical services, the media and academics/students learn about various aspects of IHL

Influential civil society actors were encouraged, through briefings and other events, to support IHL and Movement action or to persuade others to do so. The Tunisian Defence and Interior Ministries and medical associations/students discussed the obstacles faced by health/medical workers; at a round-table organized by the Tunisian Red Crescent/ICRC, about 40 members of Islamic NGOs exchanged views on present-day challenges to humanitarian action. For the 150th anniversary of the first Geneva Convention, around 50 law students and lecturers attended a colloquium on contemporary IHL. Another 20 students tested their knowledge of IHL at the national moot court competition; a law professor honed his teaching skills at an IHL course abroad (see *Lebanon*). In Morocco, diplomats and influential civil society members learnt more about IHL through information sessions conducted by the national human rights/IHL committees and the ICRC.

About 50 media representatives working in Morocco/Western Sahara and Tunisia were encouraged to report accurately on humanitarian issues through information sessions on IHL and the Movement. After these sessions, some 30 Tunisian journalists were better equipped to report on humanitarian matters and ICRC action for detainees, and knew more about the protection due to journalists during armed conflict.

RED CROSS AND RED CRESCENT MOVEMENT

People fleeing instability in Libya meet their needs with Tunisian Red Crescent aid

The Tunisian Red Crescent helped coordinate humanitarian aid for people fleeing instability in Libya and, with ICRC material and technical support, provided them with food and water (see *Civilians*). Some 130 of its volunteers also strengthened their ability to carry out economic-security activities through briefings conducted by fellow volunteers trained by the ICRC. With a view to standardizing its public image, the Tunisian Red Crescent conducted a study on the misuse of the red crescent emblem by its branches and drew on the expertise of a consultant seconded to them by the ICRC to develop its communication strategy. The lack of qualified personnel remained an obstacle to the further development of family-links and communication capacities.

The Moroccan Red Crescent conducted mine-risk awareness sessions (see *Wounded and sick*); the volunteers involved brought themselves up to date on the state of weapon contamination in the area, partly through an ICRC assessment. With ICRC help, the National Society enhanced its volunteers' first-aid skills and worked to establish its family-links network.

Movement partners met regularly to coordinate their activities, thereby avoiding duplication and maximizing impact.

MAIN FIGURES AND INDICATORS: PROTECTION ¹	Total			
CIVILIANS (residents, IDPs, returnees, etc.)				
Red Cross messages (RCMs)		UAMs/SCs*		
RCMs collected	39			
RCMs distributed	85			
Phone calls facilitated between family members	310			
Reunifications, transfers and repatriations				
People reunited with their families	1			
including people registered by another delegation	1			
Tracing requests, including cases of missing persons			Girls	Boys
People for whom a tracing request was newly registered	47			
including people for whom tracing requests were registered by another delegation	17			
People located (tracing cases closed positively)	22			
including people for whom tracing requests were registered by another delegation	7			
Tracing cases still being handled at the end of the reporting period (people)	232			
including people for whom tracing requests were registered by another delegation	84			
UAMs/SCs*, including unaccompanied demobilized child soldiers				Demobilized children
UAMs/SCs reunited with their families by the ICRC/National Society	1			
including UAMs/SCs registered by another delegation	1			
UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period	1			
Documents				
Official documents relayed between family members across borders/front lines	1			
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
ICRC visits			Minors	
Detainees visited	17,822	618	343	
		Women	Girls	Boys
Detainees visited and monitored individually	340	14		6
Detainees newly registered	279	14		5
Number of visits carried out	53			
Number of places of detention visited	20			
Restoring family links				
RCMs collected	34			
RCMs distributed	19			
Phone calls made to families to inform them of the whereabouts of a detained relative	174			
People to whom a detention attestation was issued	1			
* Unaccompanied minors/separated children				

* Unaccompanied minors/separated children

1. Tunisia

MAIN FIGURES AND INDICATORS: ASSISTANCE ¹		Total	Women	Children
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security, water and habitat (in some cases provided within a protection programme)				
Work, services and training ²	Beneficiaries			
Water and habitat activities	Beneficiaries	2,700		
Health				
Number of visits carried out by health staff		32		
Number of places of detention visited by health staff		7		
WOUNDED AND SICK				
Physical rehabilitation ³				
Centres supported	Structures	1		
Patients receiving services	Patients	436	82	125
New patients fitted with prostheses	Patients	8	1	
Prostheses delivered	Units	22	2	
of which for victims of mines or explosive remnants of war	Units	16		
New patients fitted with orthoses	Patients	18	2	4
Orthoses delivered	Units	40	7	10
of which for victims of mines or explosive remnants of war	Units	6		
Patients receiving physiotherapy	Patients	424	76	119
Crutches delivered	Units	27		
Wheelchairs delivered	Units	2		

Tunisia
 Owing to operational and management constraints, figures presented in this table may not reflect all activities carried out during the reporting period.
 Physiotherapy centre near Tindouf (south-western Algeria) for disabled Sahrawis