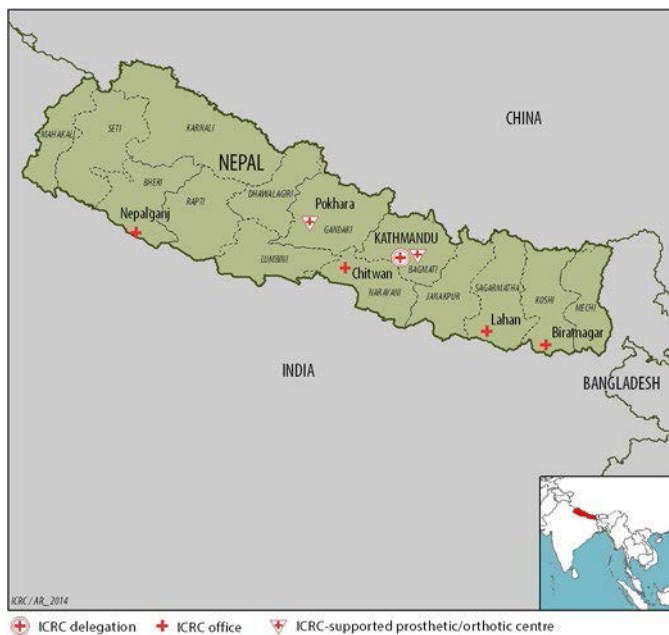


# NEPAL



The ICRC initially worked in Nepal out of its regional delegation in New Delhi, opening a delegation in Kathmandu in 2001. Since the May 2006 agreement between the government and the Communist Party of Nepal-Maoist, the ICRC has focused on: helping clarify the fate of missing persons and supporting their families; promoting full compliance with IHL; and helping improve local capacities to provide medical care for the wounded and physical rehabilitation services for those in need. It works closely with and helps the Nepal Red Cross Society strengthen its operational capacities.

## KEY RESULTS/CONSTRAINTS

### In 2014:

- ▶ some 720 families of missing persons received comprehensive support through an ICRC project (carried out with the Nepal Red Cross Society and partner NGOs) that entered its final implementation phase
- ▶ the police forces, a university hospital and the National Society developed their capacities to train personnel/volunteers in disaster response, human remains management, first aid and trauma management
- ▶ some refugees and detainees re-established contact with their relatives through Movement efforts, including family-links services offered by the National Society in prisons
- ▶ the authorities approved the ICRC's offer to conduct IHL training courses with the police forces, thus formalizing the ICRC's cooperation with the Armed Police Force and the Nepal Police in this regard
- ▶ the national IHL committee endorsed a draft Geneva Conventions Bill to the Ministry of Defence

EXPENDITURE (in KCHF)	
Protection	610
Assistance	1,596
Prevention	694
Cooperation with National Societies	274
General	-
<b>Total</b>	<b>3,174</b>

of which: Overheads 194

IMPLEMENTATION RATE	
Expenditure/yearly budget	93%

PERSONNEL	
Mobile staff	4
Resident staff (daily workers not included)	60

## YEARLY RESULTS

Level of achievement of ICRC yearly objectives/plans of action

**MEDIUM**

PROTECTION	Total
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>	
Red Cross messages (RCMs)	
RCMs collected	17
RCMs distributed	15
People located (tracing cases closed positively)	16
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>	
Restoring family links	
RCMs collected	17
RCMs distributed	1

ASSISTANCE	2014 Targets (up to)	Achieved
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>		
Economic security, water and habitat (in some cases provided within a protection or cooperation programme)		
Cash	Beneficiaries	4,115
<b>WOUNDED AND SICK</b>		
Hospitals		
Hospitals supported	Structures	27
Physical rehabilitation		
Centres supported	Structures	2
Patients receiving services	Patients	2,023

## CONTEXT

A new government took office in February 2014 and was tasked to draft a new constitution by 2015. However, the political process continued to be mired in crisis, hobbled by disagreements between the various parties on such issues as the form of governance or the electoral system.

A bill enacted in early 2014 mandated the formation of two separate commissions to address disappearances and 'truth and reconciliation' in relation to the past conflict, which ended in 2006. Victims' groups, including the families of missing persons, filed complaints against some of the bill's provisions at the Supreme Court, which had yet to decide on them. The duties and implementing rules of the commissions remained undefined. A recommendation committee was established to nominate candidates for commissioners.

The situation in the country was generally calm, with protests, strikes and incidents of unrest remaining sporadic and much limited in scale. Improvised explosive devices (IED) linked to criminality, however, continued to endanger lives, as did natural and man-made disasters to which the country remained prone.

## ICRC ACTION AND RESULTS

Together with its main partner, the Nepal Red Cross Society, the ICRC kept up its comprehensive efforts to help ascertain the fate of some 1,360 persons missing in connection with the past conflict. Working closely with trained National Society volunteers, the ICRC updated case information on missing persons and, where appropriate, submitted them to former parties to the conflict with a view to clarifying these persons' whereabouts. In light of developments in the establishment of government mechanisms to address the needs of families of missing persons, it was decided to extend the verification/processing of cases into 2015. The ICRC maintained dialogue with the authorities on the issue, urging them to take measures to ease the families' suffering, and sharing its ideas for ensuring that the proposed commission on disappearances catered to families of all categories of missing persons and addressed their needs.

Families of missing persons continued to obtain comprehensive support for their psychosocial, legal and economic needs under a project implemented by the National Society, local NGOs and the ICRC; the project, which entered its final implementation phase, commenced support to a last group of 330 families. National Society staff/volunteers served as primary contacts to the families, keeping them informed of developments and helping them access financial assistance and/or livelihood support. National Society/ICRC-trained community volunteers facilitated peer support group meetings and, where needed, referrals to professional counselling. The ICRC closed its Biratnagar office by year's end, after wrapping up its activities for families of missing persons in eastern Nepal.

Refugees and vulnerable detainees kept in touch with their families through National Society/ICRC family-links services. The National Society expanded its family-links services to more prisons.

The ICRC continued to promote safe access to medical care for wounded people, reminding the actors concerned of this obligation during meetings and round-tables. It helped the authorities, the armed forces/police and the National Society boost their emergency response services, notably supporting Armed Police Force (APF), Nepal Police and National Society instructors in acquiring the skills

necessary to conduct training courses in disaster response, human remains management and first aid. Often working in tandem, the instructors passed on their skills to their colleagues. With ICRC support, the National Society and the Kathmandu University Hospital prepared to assume full responsibility for the conduct of first-aid training and emergency room trauma-management courses, respectively.

Disabled persons received appropriate treatment and devices at ICRC-supported physical rehabilitation centres and outreach camps. National Society risk-education sessions helped prevent further casualties in areas contaminated with explosive remnants of war (ERW) from the past conflict.

The national IHL committee endorsed a draft Geneva Conventions Bill to the Ministry of Defence for its approval. With ICRC support, Nepalese authorities and other actors concerned learnt more about and discussed IHL and its implementation, and pressing humanitarian issues, at conferences/events, including international workshops on sexual violence in armed conflict and the goals of the Health Care in Danger project. The ICRC maintained dialogue with the Nepalese Army, the Nepal Police and the APF on incorporating IHL and other applicable law in their doctrine, training and operations. It obtained the formal agreement of the Ministry of Home Affairs on the conduct of training courses with the APF and the police.

Lecturers in law obtained, with ICRC support, training in teaching IHL. Discussions with influential members of civil society, including the media, raised public awareness of humanitarian issues and the Movement's work.

The ICRC provided comprehensive support for the National Society to boost its capacities to carry out the activities mentioned above and pursue organizational development. Movement components met regularly to coordinate their activities.

## CIVILIANS

### Some families ascertain the fate of missing relatives

Families were still seeking some 1,360 relatives missing in connection with the past conflict, which ended in 2006. Nepalese Red Cross/ICRC teams continued to collect/verify information on missing persons from/with their families and to cross-check this against publicly available records. Individual cases were also submitted to former parties to the conflict, and an updated list made available on the ICRC family-links website ([familylinks.icrc.org](http://familylinks.icrc.org)). Through this process, five persons were found alive and two families found some closure after receiving information on and/or visiting the locations of the graves of their relatives.

The National Society's pool of about 230 trained staff/volunteers visited the families regularly, informed them of developments in clarifying their relatives' fate and helped facilitate their access to government benefits (see below).

### Families of missing persons receive support for meeting various needs

Some 720 families (4,100 people) of missing persons in 23 districts received assistance in meeting their psychosocial, legal and economic needs through a comprehensive support project run by the ICRC with the National Society and partner NGOs, which received ICRC financial/technical assistance to implement the project. Families drew on peer support offered during regular meetings of 76 groups of parents and spouses of the missing;

the meetings were facilitated by trained staff/volunteers, some of whom were also relatives of missing persons (see below). At training sessions, 134 adolescent relatives of missing persons enhanced their life skills and their ability to cope with the loss of family members. Over 180 people had individual consultations with trained counsellors; 5 mentally ill persons were referred for professional treatment supported by the ICRC. The families of some 400 people reduced their economic vulnerability through livelihood activities undertaken after vocational training or with cash grants from the ICRC's project partners. The inauguration of memorials and holding of commemorative events helped over 170 families ease their suffering, and increased understanding and support for their situation in their communities.

At sessions/courses, new volunteers gained skills enabling them to provide support to the families, and experienced volunteers/counsellors sharpened their capacity to conduct training events independently in the future, thereby enhancing the sustainability of the project. ICRC-supported research found that, with training, relatives of the missing could be effective service providers, and that working in the project contributed to their welfare.

The project entered its final phase, commencing support to a last group of 330 families. In an ongoing evaluation process, interviews – with beneficiaries and partners from various phases of implementation since the project's launch in 2010 – confirmed the improvement in the families' well-being, and the increase in their communities' acceptance/support, as a result of various activities undertaken, and assistance provided, by project partners.

### **Government bodies given support for assisting missing persons' relatives**

With National Society/ICRC help, 1,236 of 1,359 families registered by the ICRC had, at the time of writing, received financial support under the government's interim relief programme. National Society/ICRC teams continued to follow up, with the appropriate government channels, the applications of families who had yet to receive such support; this included new applications from 53 families.

The ICRC maintained dialogue with the authorities on ensuring that the needs of families of all categories of persons missing from the past conflict are covered by the proposed commission on disappearances; these needs included recovering their relatives' remains if they so wish, after the legal frameworks for conducting exhumations are established. At ICRC-organized meetings/round-tables, forensic specialists, including participants in past ICRC courses/training sessions, explored possibilities for strengthening local capacities to conduct exhumations. The department of forensic medicine at Nepal's Institute of Medicine received an exhumation kit.

Staff of the ICRC-supported Nepal Society of Families of the Disappeared and Missing (formerly the National Network of Families of Disappeared and Missing) enhanced their capacity to raise awareness of the plight of families of missing persons, and to garner support for these families, following ICRC-sponsored training.

A report summarizing the National Society/ICRC's efforts to resolve issues related to missing persons was yet to be finalized.

### **Some refugees and detainees re-establish contact with relatives thanks to National Society services**

The National Society expanded its family-links services to more prisons, after receiving the Department of Prison Management's

authorization to do so. Detainees who had had no contact with their families, including foreigners, availed themselves of these services at 11 prisons.

Families separated from relatives abroad, particularly Bhutanese refugees in Nepal and their relatives detained in Bhutan (see *New Delhi*), benefited from these services; 52 of the refugees visited 13 relatives held in Bhutan. Families in Nepal contacted three relatives detained in Kuwait via ICRC videoconferencing services.

Using ICRC-issued travel documents, 92 people, including 45 women, resettled abroad.

Training sessions enabled National Society volunteers to add to their skills in restoring family links, particularly in disasters and in relation to missing persons. At an ICRC workshop, they, along with their counterparts from three other South Asian National Societies, discussed how family-links services for detained migrants could be improved.

### **Armed/security forces and National Society teams enhance emergency response capabilities**

With ICRC support, army/police/APF personnel and National Society volunteers boosted their emergency response capacities at district-level disaster-management courses. The National Society incorporated 375 more trained volunteers in district disaster-response teams.

Police/APF personnel and National Society volunteers sharpened their first-aid skills (see *Wounded and sick*) and, to help prevent people from going unaccounted for after disasters, strengthened their ability to manage human remains. Training in human remains management was included in the disaster-management curriculum for APF personnel, and facilitated by APF instructors trained and supported by the National Society/ICRC. The National Society included human remains management in its disaster-management strategy.

Communities in weapon-contaminated areas learnt to reduce their exposure to risks via awareness-raising sessions conducted by National Society teams, which included 43 newly trained staff and 595 students and community members. Many others benefited from initiatives that grew out of joint efforts by the authorities, armed/security forces and the National Society; these initiatives included broadcasting safety messages on government radio stations, commemorating International Day for Mine Awareness and Assistance in Mine Action and reactivating a joint working group to address the issue.

## **WOUNDED AND SICK**

### **Injured people receive emergency care**

Some 4,700 people injured in accidents/disasters/sporadic incidents of violence received first aid from ICRC-supported National Society teams. Ad hoc donations of medical supplies helped 27 hospitals provide medical/surgical care to wounded persons and other patients.

Sporadic reports of ambulances being obstructed or damaged, including vehicles belonging to the National Society, persisted, underlining the need to reinforce the messages of the Health Care in Danger project. Bilateral contacts and two round-tables reminded the actors concerned of their obligation to permit access to care for the wounded, and followed up on recommendations and commitments made in previous years.

## **National Society works with emergency responders to ensure sustainability of first-aid services**

Ambulance drivers learnt to administer first aid through training coordinated by district ambulance management committees and National Society branches.

National Society volunteers and some 290 APF/police officers also received ICRC-supported first-aid training organized by the APF or the National Society, including refresher sessions for over 120 experienced National Society first-aiders. Fourteen APF instructors and 12 National Society trainers honed their teaching skills, and helped to strengthen local capacities and boost the provision of emergency/health services countrywide.

With ICRC guidance, the National Society worked in tandem with APF instructors in conducting training sessions and finalized an instructors' manual, as part of its preparations for assuming full responsibility for the delivery of first-aid training. The National Society enlarged its capacities for mobilizing resources by equipping 10 volunteers from five districts to promote its commercial first-aid training services.

Some 60 doctors and 70 interns from hospitals across the country extended their knowledge of emergency room trauma-management at ICRC-supported courses facilitated by Kathmandu University Hospital instructors. The hospital also began to organize the courses independently, and explored possibilities for including them in its curriculum. With ICRC financial support, one orthopaedic surgeon went abroad for a course in mass-casualty management.

## **Disabled people improve their mobility**

Over 2,000 disabled people, including ERW/IED victims, improved their condition after receiving physical rehabilitation services at the ICRC-supported Yerahiti National Rehabilitation Centre and the Green Pastures Hospital, as well as in three outreach camps. Around 200 new patients received prostheses/orthoses; 29 had their transport costs covered.

Sustained dialogue with the centres' management on expanding/improving their services, and National Society/ICRC awareness-raising activities aimed at informing patients of the assistance available, contributed to an increase in the number of patients treated during the year. The Yerahiti centre boosted its capacity/service quality after one of its technicians returned from ICRC-supported studies abroad; its staff exchanged know-how with counterparts at Green Pastures.

The authorities, the National Association of Service Providers in Rehabilitation and the ICRC maintained contact on issues related to the development of the physical rehabilitation sector, for instance, during a government-organized national consultative workshop on addressing the needs of disabled persons.

## **ACTORS OF INFLUENCE**

### **National IHL committee endorses draft Geneva Conventions Bill**

The authorities and the ICRC made some progress in their dialogue and cooperation on addressing humanitarian issues, notably with regard to the needs of families of missing persons (see *Civilians*), and on advancing domestic IHL implementation.

The national IHL committee endorsed, to the Ministry of Defence, a draft bill aimed at implementing the 1949 Geneva Conventions.

The committee also initiated the printing of an IHL handbook for parliamentarians and civilian authorities. With the ICRC contributing expert opinion, the authorities and the Nepalese Red Cross continued to discuss a draft law strengthening the latter's legal status, including at a consultative workshop with 50 parliamentarians. Government representatives received guidance on drafting IHL legislation at a regional workshop (see *Sri Lanka*).

Authorities, other stakeholders and the National Society kept abreast of developments in IHL through ICRC-facilitated participation in various events. These included: activities commemorating "150 years of humanitarian action"; the 50th anniversary celebrations of Nepal's accession to the Geneva Conventions, jointly organized by the national IHL committee and the National Society/ICRC; the 5th South Asian Conference on IHL hosted by Nepal, where over 35 senior officials, notably from member countries of the South Asian Association for Regional Cooperation, shared perspectives on addressing sexual violence in armed conflict; workshops linked to the Health Care in Danger project, held locally and in Belgium (see *Brussels*), where Nepal presented its experience of pertinent legal frameworks; a meeting of National Society legal advisers in Switzerland; regional teaching sessions in Nepal and Sri Lanka (see *Sri Lanka*), which army/APF officials also attended to learn how to further incorporate IHL in their training curricula (see below); and a meeting of past participants in IHL-related events, where the subject of discussion was the challenges confronting IHL incorporation.

### **The APF and the Nepal Police formalize cooperation with the ICRC in IHL training**

In addition to first-aid and human remains management training (see *Civilians* and *Wounded and sick*), army/police/APF units enhanced their personnel's knowledge of IHL and internationally recognized standards on the use of force through National Society/ICRC briefings; they also received support for disseminating this information among the rest of their personnel.

Some 300 army personnel/peacekeepers attended ICRC presentations at the Army Command and Staff College, at peacekeeping training centres and predeployment briefings. About 30 Nepal Police officers attended an information session organized by the National Human Rights Commission.

The Nepalese Army organized advanced courses in incorporating IHL in operations for their instructors and legal officers; one army legal officer attended an IHL workshop for senior military officers in China (see *International law and policy*).

The Ministry of Home Affairs approved the ICRC's offer to help train police officers in IHL/international human rights law. The APF and the Nepal Police thus formally pursued their cooperation with the ICRC in further incorporating these norms in their doctrine, training and operations, and organized briefings and courses previously held only on an ad hoc basis, including one for 40 aspiring APF company commanders.

### **Members of law faculties update their IHL teaching skills**

Aiming to update their ability to teach IHL and promote understanding of humanitarian issues/concerns, some 20 faculty members of leading law schools attended ICRC courses/workshops, including an advanced course held every three years (see *New Delhi*) and another jointly organized by the Kathmandu School of Law and the Nepal Law Campus. The libraries of two law schools received books on IHL.

Students and representatives of civil society benefited from ICRC presentations on IHL; around 100 lawyers discussed IHL at a workshop jointly organized by the Nepal Bar Association and the ICRC. Student teams participated in national and, for the first time, regional moot court competitions (see *Beijing*).

Media coverage of Nepalese Red Cross/ICRC activities – based on ICRC press releases, round-tables/public events, and audiovisual materials, including some held/produced as part of the National Society's IHL-promotion activities – enabled the wider public to learn more about humanitarian principles and the Movement's work. The National Society continued to broadcast a weekly radio programme.

## RED CROSS AND RED CRESCENT MOVEMENT

The Nepalese Red Cross, with ICRC financial/material/training/technical support, reinforced its capacities in first aid, emergency response, ERW-risk education, restoring family links, and IHL promotion. It consolidated its network of volunteers trained in the Safer Access Framework in order to be able to respond more effectively to emergencies.

The National Society continued to review its constitution, in line with organizational development initiatives begun in 2012. It also continued to organize workshops at which staff/volunteers from headquarters and district chapters sought ways to improve gender diversity and social inclusion within the organization: to this end, a provision was adopted that facilitated greater participation by women.

Movement components in Nepal met regularly to coordinate activities and exchange information.

MAIN FIGURES AND INDICATORS: PROTECTION		Total			
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>					
<b>Red Cross messages (RCMs)</b>			<b>UAMs/SCs*</b>		
RCMs collected		17			
RCMs distributed		15			
Names published in the media		1,347			
Names published on the ICRC family-links website		1,360			
<b>Tracing requests, including cases of missing persons</b>			<b>Women</b>	<b>Girls</b>	<b>Boys</b>
People for whom a tracing request was newly registered		24			2
People located (tracing cases closed positively)		16			
Tracing cases still being handled at the end of the reporting period (people)		1,361	93	48	98
<b>Documents</b>					
People to whom travel documents were issued		92			
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>					
RCMs collected		17			
RCMs distributed		1			
People to whom a detention attestation was issued		1			

\* Unaccompanied minors/separated children

MAIN FIGURES AND INDICATORS: ASSISTANCE		Total	Women	Children
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>Economic security, water and habitat (in some cases provided within a protection or cooperation programme)</b>				
Cash	Beneficiaries	4,115	36%	34%
<b>WOUNDED AND SICK</b>				
<b>Hospitals</b>				
Hospitals supported	Structures	27		
<b>First aid</b>				
First-aid posts supported	Structures	6		
	<i>of which provided data</i>	6		
Wounded patients treated	Patients	4,704		
<b>Physical rehabilitation</b>				
Centres supported	Structures	2		
Patients receiving services	Patients	2,023	628	156
New patients fitted with prostheses	Patients	102	20	9
Prostheses delivered	Units	151	29	15
	<i>of which for victims of mines or explosive remnants of war</i>	11		
New patients fitted with orthoses	Patients	101	22	35
Orthoses delivered	Units	169	41	59
Patients receiving physiotherapy	Patients	666	256	34
Crutches delivered	Units	317		
Wheelchairs delivered	Units	189		