



# **HUMANITY IN ACTION**

**ANNUAL REVIEW FOR  
THE PRIVATE SECTOR  
2014**



**ICRC**



**ICRC**

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Front cover: I. Malla/ICRC

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I. Malla/ICRC

# MESSAGE FROM THE PRESIDENT

It is a reality that armed conflicts continue to define today's world, with the accompanying toll of death, destruction and suffering.

For more than a century and a half, the ICRC has been working to protect the lives and dignity of victims of conflicts and to provide them with assistance. As a neutral, impartial and independent organization, we respond to the needs of the most vulnerable, whoever they may be, and whatever side they may be on. Yet we take care to tailor our response to each group's specific needs and, just as importantly, to their level of resilience. In this way, we ensure that we have the greatest possible impact on the lives of our beneficiaries, be they men, women, children, wounded or displaced, migrants, detainees or people with disabilities.

The sheer scale of humanitarian needs in a great number of concurrent crises around the world made the year 2014 an intensely challenging one for the ICRC. Our largest operation in terms of expenditure was in response to the conflict in Syria. Despite significant access and security constraints and with the support of our partners in the International Red Cross and Red Crescent Movement, we provided millions of people, on all sides of the front lines and in neighbouring countries, with emergency relief, clean water and medical care.

At the same time, we focused, with equal energy, on responding to the needs of people affected by other conflicts, such as in Afghanistan, the Central African Republic, Iraq, Israel and the occupied territories, including the Gaza Strip, Nigeria, South Sudan and Ukraine. Our multidisciplinary teams provided people with food and safe drinking water, adequate shelter, access to medical care, a means of staying in touch with their loved ones and help in preserving or resuming their livelihoods. They also sought to prevent further abuse and suffering by engaging the support of all those capable of influencing the situation of the most vulnerable, including governments and their armed forces, armed groups, and influential members of civil society, such as traditional leaders or the media.

We could not have done all this without the support of our donors, to whom I send my sincere thanks. The ICRC is grateful to be able to count on donors as varied as the people we help. Each and every gift is important to us, whether it enables us to improve the life of one person or those of many more. Our donors help us make a real difference.

  
**Peter Maurer**  
ICRC President



# WHO WE ARE

## ONE MAN'S VISION

The ICRC owes its origins to the vision and determination of one man: Henry Dunant.

The date: 24 June 1859. The place: Solferino, a town in northern Italy. The Austrian and French armies were locked in bitter battle and, after 16 hours of fighting, the ground was strewn with 40,000 dead and wounded. That same evening, Dunant, a Swiss citizen, passed through the area on business. He was horrified by the sight of thousands of soldiers from both armies left to suffer for want of medical care. He appealed to the local people to help him tend the wounded, insisting that soldiers on both sides should be treated equally.

His conviction led to the establishment in 1863 of the International Committee for Relief to the Wounded, which subsequently became the International Committee of the Red Cross (ICRC). Later that same year, 16 States and four philanthropic institutions sent representatives to an international conference in Geneva. It was at that conference that the distinctive emblem – a red cross on a white background, the reverse of the Swiss national flag – was adopted and the Red Cross came into being.

The following year, States adopted a treaty to improve the care given to people wounded in conflict, whichever side they were on.

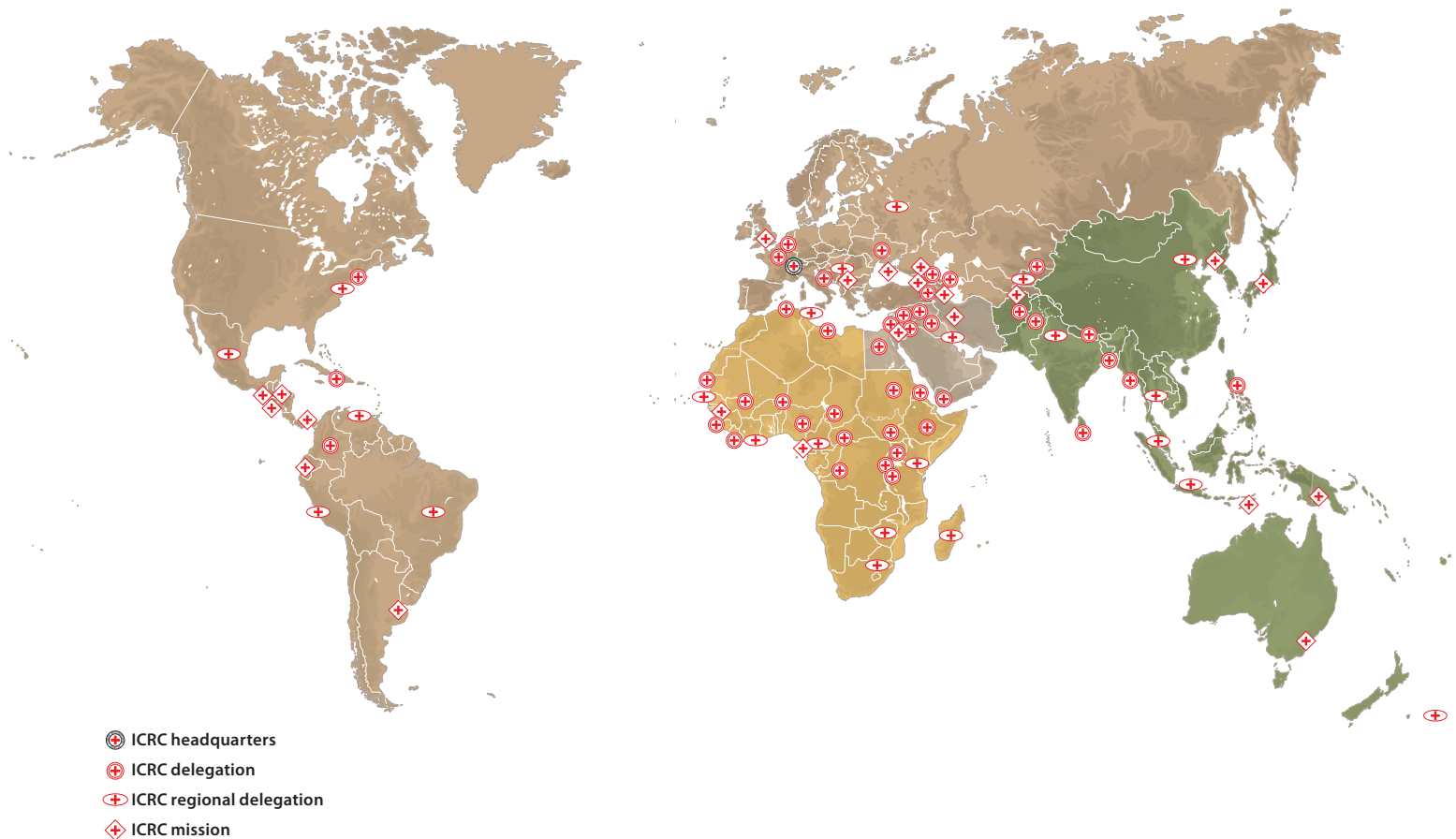
**International humanitarian law was born.**



# WHERE WE WORK

For the past 150 years, the ICRC has worked in armed conflict and other situations of violence throughout the world, regardless of whether the location is a focus of media interest. Because of its presence in the affected contexts, the ICRC has first-hand knowledge of the situation and the actual needs of the people.

The ICRC also helps people affected by natural disasters in conflict areas and, in the case of other major catastrophes, it will lend support if it has specific know-how that can provide added value.



## A HISTORIC MANDATE

The ICRC is a neutral, impartial and independent humanitarian organization whose mandate to protect and assist the victims of armed conflict has been conferred on it by States through the 1949 Geneva Conventions and their 1977 Additional Protocols.

**The ICRC is the only humanitarian entity specifically entrusted by governments, both in international humanitarian treaty law and in domestic legislation, with this specific role.**

## BEHIND THE NUMBERS

# 12,372

## FIELD STAFF

(delegates and local staff)  
around the world



# ECONOMIC SECURITY



Armed conflict and other situations of violence wreak havoc on the ability of families, communities and whole countries to sustain themselves. In such situations, people are often brutally uprooted and forced to abandon their homes and belongings. Even if they are able to take some of their assets with them, it is highly likely that they will have to sell them along the way or exchange them in order to survive. Those who can stay in their homes are rarely spared hardship: their livelihoods (e.g. farming and livestock raising, running their own businesses or wage labour) are frequently disrupted or become impossible. Family and community support networks collapse.

Conflict and violence have an impact on the economy as a whole, restricting the movement of people and goods, disrupting markets and access to basic services, and exposing families to greater risk of impoverishment, regardless of whether they are displaced or not.

To help those in need, the ICRC pursues three approaches that can be implemented sequentially or in combination.

## RELIEF

Relief aid is primarily intended to save lives and protect livelihoods when they are at immediate risk. This is done by giving people access to basic commodities essential for survival when they are no longer able to obtain these by their own means.

### Examples

- Food rations, food vouchers
- Cash grants
- Combined food-and-cash assistance
- Short-term food-for-work or cash-for-work projects that benefit the entire community (e.g. debris removal)
- Household essentials (e.g. blankets, cooking utensils, soap, candles)
- Food supplements
- Destocking<sup>1</sup>

## LIVELIHOOD SUPPORT

Livelihood support is intended to boost food production, generate revenue and ultimately restore sustainable income generation. This means restoring, preserving or improving productive household or community assets.

### Examples

- Agricultural supplies, in kind or as vouchers (e.g. staple-crop or cash-crop seed, tools, fertilizer, pesticides)<sup>2</sup>
- Provision of livestock/fishing supplies, in kind or as vouchers (e.g. vaccines, drugs, fodder, fishing nets)
- Restocking
- Provision of small-scale equipment to produce goods and services (e.g. grain mills, specialized tools, push carts) or vouchers or cash to obtain them
- Provision of agricultural machinery or mechanization services or vouchers to obtain them
- Food-for-work or cash-for-work schemes to improve agricultural infrastructure (e.g. irrigation, anti-erosion measures, nurseries)
- Support for micro-economic initiatives (productive grants, business skills training)
- Training (e.g. for farmers or livestock owners)

<sup>1</sup> The purchase of weak animals at competitive prices, leaving farmers with healthier herds and a cash injection. The animals are then slaughtered and the meat is distributed to needy families to help them vary their diet.

<sup>2</sup> Most often combined with food, cash or vouchers to tide families over until the next harvest.





## STRUCTURAL SUPPORT

Structural support is intended to restore or build the capacities of service providers so that they are able to provide sustainable support and services for people's livelihood activities.

### Examples

- Technical advice for agricultural, livestock and fisheries service providers
- Formal training and on-the-job coaching
- Strengthening and further development of training programmes
- Provision of materials and equipment

➤ More than two million people were displaced in **Iraq** in 2014. They took refuge with relatives, with host families or in makeshift shelters or camps.

To help them cope, the ICRC distributed food rations for one month and other relief items such as blankets, clothing, kerosene stoves, tarpaulins, jerrycans and kitchenware among some 600,000 displaced people in 17 of the country's 18 provinces. In addition, around 20,000 displaced people in Najaf received cash assistance to help them attend to their immediate needs.

## ➤ AROUND THE WORLD IN 2014

# 9,128,800

PEOPLE received **food**

# 4,263,288

PEOPLE received **household essentials**

# 660,310

PEOPLE received **cash grants**

# 3,294,742

PEOPLE received **goods to help boost their livelihoods**

# WATER AND HABITAT

The ICRC's water and habitat teams work to reduce illness, death and suffering caused by damaged infrastructure and disruption to water supplies.

Even in peacetime, millions of people throughout the world have difficulty gaining access to clean drinking water, proper housing and decent sanitation. The problem is further compounded in wartime or natural disaster, when destruction of infrastructure and mass displacement can expose millions more to death and disease.

In order to provide access to water, improve hygiene levels and protect the environment, the ICRC carries out a range of activities.

## Water

The ICRC helps repair or construct all types of water-supply system, regardless of the size or the technology used. This work covers water intake from sources and its treatment, storage and distribution. In rural areas, activities include improving hand-dug wells and installing motorized pumps at boreholes.

The ICRC also seeks to ensure that the community is able to manage any new or renovated infrastructure. To this end, it provides tailor-made training, often for specially created water committees, and provides any spare parts that are likely to be needed.

## Sanitation and hygiene

Overcrowding, such as in camps for the displaced, quickly leads to the spread of disease. Providing proper sanitation is therefore essential and a high priority for the ICRC. This may involve building latrines or repairing sewage plants.

The organization also runs hygiene-promotion programmes to encourage behaviour that will help prevent water-related and sanitation-related diseases.



J. Spaul/ICRC

## Shelter

An immediate ICRC response to shelter needs may be to provide plastic sheeting or tents, but people often take temporary shelter in schools, mosques, churches, private homes and other facilities ill-adapted to the number of users. The ICRC might therefore upgrade existing sanitation and other facilities.

The ICRC may also undertake the post-crisis repair or reconstruction of health facilities and schools, help set up





J-Y. Clemenzo/ICRC



J-Y. Clemenzo/ICRC

camps for the displaced or provide material assistance (shelter, heating and cooling systems, water and electricity, etc.) for families returning home after displacement.

### Power supply

The ICRC restores or maintains power supplies to essential installations such as hospitals, water treatment plants and water distribution networks by repairing power distribution networks, generators and hydro-electric plants.

Following the intensification of the violence in the **Central African Republic** at the end of 2013, hundreds of thousands of people sought refuge in Bangui airport, places of worship or community structures.

By early 2014, more than 100,000 people had taken refuge in the grounds of Bangui flying club. The displaced were living in makeshift shelters made of dried palm leaves and tarpaulins. The overcrowding made for poor hygiene conditions.

Each day, the ICRC supplied the camp with around 300,000 litres of water.

Four times a day, Jean, one of six water transporters, would cross the city to refill his 15,000-litre truck at the water-treatment plant in the city centre near the Oubangi River, before bringing it back to supply to camp.

Water distribution was organized by the women of the community. Families lined up with their yellow containers in the blazing sun. Each family was allowed to bring two or three containers. "Our needs are such that we don't waste a drop," one woman explains.

Trucking water is an onerous task, so in order to boost the water supply, the ICRC also connected the emergency flexible water tanks to the existing water pipelines in the vicinity of the airport.

## AROUND THE WORLD IN 2014

# 26,218,811

**PEOPLE** gained access to clean drinking water, proper sanitation and/or better living conditions



# FIRST AID AND HOSPITAL CARE

ICRC first aid and emergency transport activities provide treatment for casualties from the point of injury until their transfer to appropriate medical facilities. The ICRC then supports subsequent care by providing existing health-care facilities with medicines, equipment, training and capacity-building in most aspects of hospital management. These range from the provision of quality patient care to human resources, infrastructure maintenance, finance, logistics and administration. When the situation demands, the ICRC deploys its own specialist teams to work alongside local hospital staff.

Operating in the midst of armed conflict is often dangerous and imposes many limitations. The kinds of injuries inflicted by missiles and other types of heavy weaponry are unfamiliar to most non-military surgeons; the treatment of civilian gunshot wounds in a normal hospital does not readily compare. The ICRC therefore runs seminars on war surgery and shares with medical staff basic protocols and procedures that it has established for war-surgery techniques and for patient management in dangerous and limiting environments.

ICRC support for hospitals can include:

- surgery and medical services;
- gynaecology and obstetrics;
- paediatrics;
- nursing;
- mental health;
- hospital management and administration;
- provision of consumables, equipment and expertise.



## ▶ AROUND THE WORLD IN 2014

# 399,612

**INPATIENTS** treated at ICRC-supported hospitals

# 1,581,836

**OUTPATIENTS** treated at ICRC-supported hospitals

Throughout 2014, the situation in **South Sudan** remained tense and unpredictable, and the humanitarian needs immense. To treat the increasing numbers of people injured by the conflict in the country, the ICRC deployed four mobile surgical teams of surgeons, anaesthetists and nurses to hospitals and remote medical facilities.

According to ICRC surgeon Marc Lutomia, the main challenge relates to the conditions in which they work. Because well-equipped medical facilities are either unavailable or damaged, ICRC surgical teams work around the clock in basic care facilities or in vacant buildings with simple rooms converted into operating

theatres. The supply of water and electricity is often limited, which complicates hygiene and sterilization procedures. Another problem is equipment. "In war surgery, most of the injuries are bone injuries," says Mr Lutomia, "but apart from the ICRC equipment we carry with us, we have very limited tools to take care of orthopaedic injuries."

The medical teams are rapidly flown in, even to remote locations, when the ICRC has confirmed reports of large numbers of casualties. The surgical programme in South Sudan is one of the largest run by the ICRC in the world, and it is probably the most difficult one in terms of work and living conditions.





# PRIMARY HEALTH CARE

The normal functioning of local health systems is often disrupted by armed conflict. In the worst cases, parts or all of the system may break down completely. The ICRC intervenes to help keep essential healthcare services going, as far as possible by supporting local structures. It supplies medical equipment and drugs and provides support for capacity-building, training and supervision. Where needed, the ICRC will provide support in the form of qualified health-care staff.

In addition to curative care, the ICRC concentrates on the prevention of illness and on health promotion. This involves raising awareness of hygiene measures such as washing hands, the use of impregnated mosquito nets and other practices that demonstrate clear results. The ICRC supports maternal health through the close follow-up of pregnant women, including safe delivery and the promotion of breastfeeding and family planning. In an effort to combat infant mortality the ICRC supports extended immunization programmes against measles, tuberculosis, tetanus, diphtheria, poliomyelitis and whooping cough.

The wounds of war are not only physical: proximity to combat, forced evacuation, separation from relatives, rape and other violence leave deep psychological scars and vulnerability which the ICRC seeks to address through psychological support and mental-health activities.







Just after Typhoon Haiyan

"We used to have small rooms and examining tables. Now it is spacious and convenient for our patients."

Dr Rosarita

➤ Dr Rosarita Enciso, municipal health officer (above left), is one of the many courageous staff at the Balangiga rural health-care unit in Eastern Samar, **the Philippines**. When Typhoon Haiyan hit, this main health-care centre was badly damaged. It was difficult to provide care in such conditions but it was also essential that no one be turned away. For the first since she began practising – in that very unit, 23 years earlier – Dr Rosarita had to divide her time between her clinic and, just a few metres away, the basic-health-care unit set up by the ICRC and the Finnish Red Cross. Medical staff there treated an average of 40 patients each day, while a mobile clinic took services to a wide population in the catchment area.

As well as providing vital care from its temporary health-care unit, the ICRC set about repairing the Balangiga rural health-care unit. The unit is now fully functional again, with new equipment, drugs and medical supplies.



2014

## ➤ AROUND THE WORLD IN 2014

# 2,692,636

**PEOPLE** attended curative consultations

# 1,375,869

**VACCINATIONS** given to children under five

# PHYSICAL REHABILITATION

Physical rehabilitation is a way of helping restore dignity for people with disabilities. It seeks to eliminate – or at least minimize – restrictions on their movement and activities so that they may become more independent and enjoy the highest possible quality of life.

People with disabilities might need mobility devices such as prostheses (artificial limbs), orthoses (supports for existing limbs that do not work properly), walking aids and wheelchairs; they also need therapy to learn to make the fullest use of their devices. Restoring mobility is the first step in ensuring access to food, shelter, education, a job, an income and, more generally, the same opportunities as other members of society.

**The ICRC's physical rehabilitation programme aims to bolster the services offered in the country concerned by developing national capacity. The primary aims are to make the services more accessible, better quality and sustainable and to promote the inclusion and participation in society of people with disabilities.**



In the conflict-racked countries where the ICRC works, physical rehabilitation is needed not only by people whose disabilities are the direct result of the fighting (landmines, bombs, etc.) but also by people who become physically disabled because normal health care breaks down and they fail to receive treatment or vaccinations.

- The ICRC furnishes support for individual physical rehabilitation centres to help them manage activities by themselves. This support may include building or renovating **facilities** or donating **equipment**, raw **materials** and components. The ICRC shares with centres a low-cost, high-quality **technology** that it developed itself using polypropylene in order to reduce the financial burden of providing rehabilitation.
- As the quality of the services depends largely on a ready supply of skilled professionals, the ICRC conducts a variety of **training** initiatives from on-the-job coaching to long-term programmes leading to professional qualifications.
- To make services more accessible, the ICRC may subsidize the **cost of travel, accommodation and food**, as well as the cost of **treatment** at the centres. In addition, it may support **outreach** programmes that take assessment or basic **repair** and readjustment services from the centres to the areas where the patients live.
- The ICRC works with its local **partners** (the centres' administrations, the government, non-governmental organizations, etc.) and takes measures from the start to strengthen their managerial and technical **capacities** (stock management, patient-data management, treatment protocols, etc.).
- The ICRC also supports **social inclusion** opportunities, such as education, vocational training and sports events, developing referral networks together with local and international organizations.





➤ Farzana Sadat has lived with violence most of her life. At the age of 14 she lost a leg in a landmine accident near her home in Kabul, **Afghanistan**.

"I could see that one of my legs was missing, the other was injured and my hand too. I thought that I would be taken to hospital, my leg would be bandaged and then I'd return home, but when I went to hospital, my leg was amputated. I became distraught – I never thought that I would be able to live as a healthy person, or walk and work again."

Four months later she was fitted with an artificial limb at the ICRC physical rehabilitation centre in Kabul. First she found work in the centre's laundry, then after a four-year ICRC-sponsored training course she became a prosthetic/orthotic technician. Today, at nearly 30, she is the head of the prosthetics department. The majority of the staff there are also former patients.

"I share patients' pain. When making a prosthetic limb for a patient, I imagine wearing it myself and make any changes to ensure that it won't be uncomfortable to wear. As I have the same disability, I want my patients to wear something they are comfortable and happy with."

## ➤ AROUND THE WORLD IN 2014

# 318,363

**PEOPLE** were provided with **physical rehabilitation** services, including physiotherapy

# 20,145

**PEOPLE** were provided with a **prosthesis**

# 74,104

**PEOPLE** were provided with an **orthosis**

# 4,495

**PEOPLE** were provided with a **wheelchair**

# WEAPON CONTAMINATION

Weapons not only kill and maim people and block access to basic necessities, such as a water supply or farmland, during conflicts. Unexploded and abandoned weapons can continue to do so for years, or even decades, after the last shot has been fired, hindering reconstruction and reconciliation.

Moreover, weapons are not only to be found in full-fledged armed conflict; the proliferation of small arms in many societies today increases the level of violence experienced by millions of people in their daily lives.

The ICRC employs a range of approaches – which may be used alone or in combination – to minimize the impact of a variety of types of weapon contamination on affected populations, including contamination from chemical, biological, radiological and nuclear agents.

The ICRC may engage in:

- **risk reduction** – providing communities with alternatives so they do not need to enter contaminated areas. This might involve installing water points or helping communities develop agricultural livestock activities in safe areas (see previous chapters);
- **risk awareness and risk education** – raising people's awareness of the problem and of how to keep themselves safe;
- **information gathering and analysis, and surveys** – collecting, collating and sharing information on the location of hazards and the occurrence of accidents to minimize the likelihood of future incidents and to help prioritize clearance activities;
- **clearance of conventional weapon hazards, as well as chemical, biological, radiological and nuclear hazards** – providing technical analysis and removing or destroying items in contaminated areas;
- **capacity building** – helping National Red Cross and Red Crescent Societies and national authorities build their capacity to deal with conventional weapon contamination and chemical, biological, radiological and nuclear agents.



U. Meissner/ICRC





E. Tolleisen/ICRC

## ► AROUND THE WORLD IN 2014

# 23

People in 23 contexts benefited from ICRC activities to reduce the impact of **weapon contamination**

► In **Colombia**, the ICRC seeks to reduce the humanitarian impact of armed violence on people living in urban centres where the level of violence is particularly high.

One of its aims is to teach pupils in schools in violence-affected areas how to behave safely when armed violence occurs. Medellín is one such city where residents are frequently confronted with armed violence.

Throughout 2014, ICRC weapon contamination specialists worked to train teachers in 14 schools how to pass on safe behaviour techniques to pupils. Some of the pupils themselves also took part in the training, as volunteers for the Colombian Red Cross. Various techniques were used, including simulation, role-play exercises and other group activities.

According to Rafael, a teacher at the Eduardo Santos Public School, “these sessions are about teaching our pupils how to stay safe. For these children, the danger is real. We are surrounded by a fierce conflict. They need to know what to do when there is a shoot-out in their neighbourhood.”

Among other things, pupils are taught always to identify a safe place to take cover if they hear shooting. This is especially important when they are out in the open. With the right guidance, this can become second nature, so that, at the first shot, their immediate reaction is to move out of harm’s way and lie flat until the shooting stops.

# RESTORING FAMILY LINKS



Every year, armed conflicts, natural disasters and migration split up countless families. When fleeing a conflict or natural disaster, children can lose their way in the chaos. Elderly or sick people may not have the will or ability to leave. Injured people are taken to hospital without being able to let their loved ones know what has happened to them. People are sometimes detained without their families being informed of their whereabouts.

Families suffer terribly when they lose contact with their loved ones and do not know where they are and whether they are safe.

The ICRC and the National Red Cross and Red Crescent Societies work together as part of a worldwide network to help people separated from their loved ones.

Restoring family links involves a range of activities such as putting family members back in touch by means of telephone calls, the internet and handwritten Red Cross messages, and tracing people who are unaccounted for. Particular attention is paid to vulnerable individuals, such as unaccompanied children or people held in detention.

When tracing is successful, families are informed where their loved ones are and, when possible, they are put back in touch or reunited.

## MISSING PERSONS

When a parent, sibling or child is missing, the families find themselves in a tragic situation. They are left in emotional limbo, with no idea if their loved one is dead or alive, and they face a number of pressing needs. The ICRC therefore supports efforts to clarify the fate or whereabouts of missing persons and advocates the right of their families to know this.

It provides support for authorities, lawmakers, mechanisms and forensic institutions involved in preventing and clarifying disappearances. It also works directly or through local partners to address the multifaceted needs of the families.

Very often families of missing persons are left with major psychological, economic, legal and administrative problems to exacerbate their profound suffering. The ICRC may, therefore, engage in programmes to provide livelihood assistance, psycho-social support and health care. It may give administrative and legal advice to families regarding inheritance matters, pensions, legal status, custody of children and property rights.



590,410

INSTANCES of family contact  
facilitated by the ICRC

1,058

PEOPLE reunited with their  
families

12,973

ADDITIONAL  
FAMILIES seeking loved ones  
with ICRC support

▶ War and harsh living conditions in the Syrian Arab Republic have driven hundreds of thousands of families into **Jordan**. Many of the Syrian refugees in Azraq camp, 100 km east of Jordan's capital, Amman, lack the means to stay in touch with their relatives in Syria or elsewhere. Through its tracing office in the camp, the ICRC gives refugees the opportunity to contact their relatives by telephone or hand-written Red Cross messages.

Ill health does not stop Um Khader (top) from coming regularly to the ICRC tracing office in Azraq camp to telephone her daughter in Homs. She left Syria in mid-July 2014 with her husband and two sons. She has other sons in Syria and Lebanon and wonders if she will ever see the rest of her family again.

"Every time I hear my daughter's voice I feel my heart is about to jump out of my chest," says Um Khader, with tears in her eyes.

Abu-Abdo (right) rejoices as he hears the voice of his father in rural Damascus. He fled Syria with his wife and children at the beginning of July 2014. Now, with the help of the ICRC, he is able to stay in touch with his father, taking breaks from his construction work at the camp to visit the ICRC tracing office where he makes three-minute telephone calls.



H. Shamlaw/ICRC



B. Saleh/ICRC

Learn more about restoring family links worldwide at:  
[www.familylinks.icrc.org](http://www.familylinks.icrc.org)



# DETAINEES

Each day, men, women and children are held in detention and exposed to dangers such as summary execution, forced disappearance and torture. They may be subjected to inhumane living conditions and lose contact with their families.

The ICRC aims to secure decent treatment and conditions of detention for all those deprived of their freedom, regardless of the reasons for their arrest and detention. It also seeks to alleviate the suffering of their relatives, particularly by facilitating family contact and visits. It promotes respect for legal safeguards and, in some cases, the ICRC helps former detainees by facilitating their return to society.



## The visits

The ICRC's work for detainees is based on a comprehensive assessment of the situation both inside and outside places of detention, including through dialogue with the detaining authorities and visits to the detainees themselves. These visits are subject to five basic conditions. The ICRC must be given:

- access to all detainees within its field of interest;
- access to all premises and facilities used by and for the detainees;
- authorization to repeat its visits;
- the possibility to speak freely and in private with the detainees of its choice;
- assurances that the authorities will provide the ICRC with a list of all detainees within its field of interest or authorize it to compile such a list itself.

## The action

The ICRC expects the detaining authorities to take the necessary steps to ensure humane treatment and conditions of detention. To that end, it makes confidential reports to them on its findings, on relevant national and international standards, and on any action and resources required to improve the situation of the people detained.

The ICRC also offers the detaining authorities technical and material support to effect any necessary improvements in areas such as water supply, sanitation and infrastructure in general, detainee management, access to health care and respect for judicial guarantees.



Charles/ICRC



Charles/ICRC

► In 2014, the ICRC supported a project by the prison administration of **Haiti** to build a new custody area for female detainees in the civilian prison in the southern city of Les Cayes. The prison is one of the most overcrowded detention facilities in the country, holding more than 600 people.

Although women are the minority in the prison, it was crucial for their own privacy and protection that they be separated from male detainees.

New cells were fitted with metal bunk beds to maximize the area available for sleeping; separate sanitation facilities were built for the women. The ICRC also installed an electrical system and improved air circulation.

ICRC engineers also worked on the water-supply system as a whole and the prison's water-storage capacity for the benefit of everyone being held there.

Around the country, the country, a mobile hygiene-promotion team made monthly visits to places of detention to raise awareness of the link between good hygiene and health, and how to prevent communicable diseases. The team also trained peer educators to share their knowledge with other detainees.

During the visits, detainees received personal hygiene kits (soap, a toothbrush, etc.) and cleaning materials to enable them to practise better hygiene.

## ► AROUND THE WORLD IN 2014

# 800,891

**DETAINEES** visited by ICRC delegates

# 318,021

**DETAINEES** benefited from improved living conditions

# PROTECTING THE VULNERABLE AND PROMOTING THE LAW

The ICRC's mission is to protect the lives and dignity of victims of armed conflict and other situations of violence, and to provide them with assistance.

One way in which it does this is by promoting respect for humanitarian principles and norms with the aim of preventing – or at the very least limiting – the worst excesses of war. The very spirit of international humanitarian law (IHL) – the body of law that protects victims of armed conflict – is to strike a balance between legitimate military action and the humanitarian consequences of such action.

The ICRC engages, in particular, with individuals and groups who are able to determine the fate of victims of armed conflict or who can facilitate (or obstruct) ICRC action. These include armed forces, police and security forces, other weapon-bearers, such as members of non-State armed groups, and government and other decision-makers and opinion-leaders, at local and international level. With an eye to the future, the ICRC also has contact with students and their teachers.

The ICRC works on three levels:

- Raising awareness of humanitarian principles and IHL obligations, through public communication about the general principles to be respected, and through teaching and training events for influential groups;
- Providing advice and technical support for the systematic integration of IHL or humanitarian principles into official legal systems, military and police doctrine, training and operational procedures and school and university curricula;
- Promoting respect for IHL during confidential, one-to-one dialogue with alleged perpetrators of abuse.

The ultimate aim is to influence people's attitudes and behaviour so as to improve the protection of civilians and other people protected by IHL in times of armed conflict, facilitate access to the victims and improve security for ICRC staff and other humanitarian workers.



## **The Geneva Conventions of 1949 and their Additional Protocols of 1977 are the cornerstone of IHL.**

The basic notion underlying these treaties is that of respect for the life and dignity of the individual. Those who suffer in conflict must be aided and cared for without distinction.

Today, every single State is bound by the four Geneva Conventions of 1949, including the world's newest State, South Sudan, which became party to the treaties in 2013. **These legal obligations are therefore universally accepted.**



## ▶ AROUND THE WORLD IN 2014

# 45,000+

More than 45,000 **military, security and police personnel** attended ICRC-supported events

# 200+

More than 200 **armed groups** engaged in dialogue with the ICRC

# 400+

More than 400 **universities** received ICRC support for IHL teaching



▶ Each year, the Senior Workshop on International Rules governing Military Operations (SWIRMO) brings together senior military officers from around the world. It aims to provide them with the tools necessary to improve compliance with the laws governing military operations and focuses on the integration of IHL into the decision-making process in combat and law-enforcement operations.

SWIRMO 2014 was jointly hosted by the People's Liberation Army of **China** in Xi'an. In a brigade exercise featuring a virtual battle zone, participants were expected to carry out the mission of liberating an island under enemy control while issuing orders that ensure compliance with IHL.

Colonel Kamarudzan bin Mohd Thani (bottom right), Commandant of the Malaysian Army's Johor Training Centre, found the event particularly useful.

"It was such a rich experience, meeting with and exchanging views with officers from nearly 60 countries. In my group alone, we had 20 nations working together. The insights and experience shared, particularly by those had seen war, really enhanced my knowledge and understanding and showed us the practicalities of IHL in action."

# PARTNERING WITH NATIONAL SOCIETIES: A WORLDWIDE NETWORK

Wherever it is active, the ICRC works closely with National Red Cross and Red Crescent Societies. There are currently 189 of these volunteer-based organizations, which, together with their umbrella organization – the International Federation of Red Cross and Red Crescent Societies – and the ICRC itself, make up the International Red Cross and Red Crescent Movement.

The mission of the National Societies is to carry out humanitarian activities within their own countries, particularly in the role of auxiliaries to the public authorities.

Cooperation and coordination within the Movement help make the best possible use of the capacity of all of its members. Because National Societies and the ICRC share a responsibility to provide assistance for victims of conflict, they need each other to accomplish this common mission. In countries affected by conflict, the National Societies and the ICRC therefore very often work together to mitigate human suffering by mounting joint assistance operations for the victims.

## MUTUAL BENEFIT

- Not only does the ICRC have more than 150 years' experience in providing humanitarian aid in conflict situations, it has also developed substantial expertise in promoting humanitarian law and the Movement's Fundamental Principles and in restoring family links. This specific expertise is valuable to National Societies and they can count on the ICRC's technical, financial and training support to enhance their performance in these areas.
- It is often thanks to the National Societies' presence, resources, local knowledge and motivation that the ICRC can successfully carry out its work in the field; the ICRC benefits substantially from this unique worldwide network.



T. Voeten/ICRC

## The Fundamental Principles

The seven Fundamental Principles of the International Red Cross and Red Crescent Movement, which it is each member's duty to uphold, were officially proclaimed at the 20th International Conference of the Red Cross, held in Vienna in 1965. They are:

**HUMANITY, IMPARTIALITY, NEUTRALITY,  
INDEPENDENCE, VOLUNTARY SERVICE, UNITY,  
UNIVERSALITY.**

➤ The ICRC's operation in the **Syrian Arab Republic** was one of the ICRC's largest in terms of financial resources in 2014. Millions of people in need received food and household essentials, gained improved access to safe drinking, better sanitation and health care, and were able to stay in touch with relatives. However, none of this would have been possible without the invaluable support of and partnership with the Syrian Arab Red Crescent.

Close coordination with local actors such as the Syrian National Society is needed more than ever for the ICRC to be able to operate and deliver aid.

"The Syrian Arab Red Crescent's presence in both government-controlled and opposition-controlled areas, its proximity to affected populations, the dedication of its staff and volunteers and their in-depth knowledge of the terrain allow the ICRC to deliver aid even in the most challenging environments," says Daphnée Maret, deputy head of the ICRC delegation in Syria.

According to Firas al Nakeeb, the National Society's Damascus-based field coordinator, "close cooperation means well-coordinated and effective assistance for people directly affected by the conflict. The ICRC lends us the support of its long experience of working in armed conflicts worldwide and we in turn provide it with our understanding of local needs and dynamics."





# OUR BENEFICIARIES: 2014 IN FIGURES



**9,128,800**

people received food



**1,375,869**

vaccinations were given  
to children under five



**4,263,288**

people were given  
household essentials



**318,363**

people benefited from  
ICRC-supported physical  
rehabilitation services



**3,294,742**

people received goods to help  
boost their livelihoods



**800,891**

detainees were visited  
by ICRC delegates  
in 1,614 places of detention



**660,310**

people were given cash grants



**318,021**

detainees benefited from  
improved living conditions



**26,218,811**

people gained access  
to clean drinking water,  
proper sanitation and/or  
better living conditions



**590,410**

instances of family contact  
facilitated by the ICRC



**399,612**

inpatients and 1,581,836  
outpatients were treated at  
ICRC-supported hospitals



**1,058**

people were reunited  
with their families,  
including 949 children



**2,692,636**

people attended curative  
consultations at ICRC-  
supported health centres

# FINANCIAL INFORMATION 2014

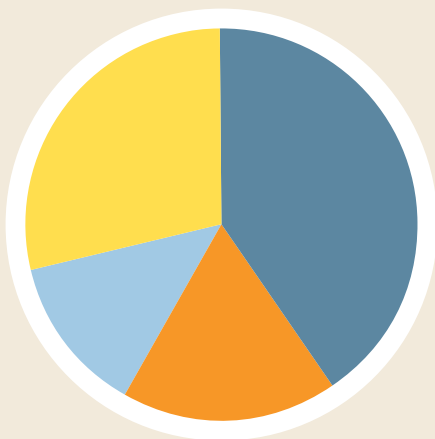
## CHF 1.2 BILLION

2014 FIELD EXPENDITURE

### TOP 10 OPERATIONS IN TERMS OF EXPENDITURE

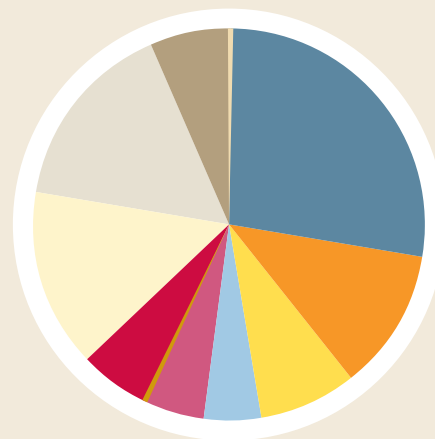
RANKING	OPERATION
1	South Sudan
2	Syrian Arab Republic
3	Afghanistan
4	Iraq
5	Israel and the Occupied Territories
6	Democratic Republic of the Congo
7	Somalia
8	Philippines
9	Mali
10	Central African Republic

### BY REGION



- Africa
- Asia and the Pacific
- Europe and the Americas
- Middle East

### BY ACTIVITY



- Economic security
- Water and habitat
- First aid and hospital care
- Primary health care
- Physical rehabilitation
- Weapon contamination
- Restoring family links
- Detainees
- Protecting the vulnerable and promoting the law
- Partnering with National Societies
- Other (e.g. core support costs for logistics and training)

### ➤ AROUND THE WORLD IN 2014

## 93.5%

The percentage of every donation that goes to the field

## 6.5%

The percentage of every donation that is used at headquarters

# OUR DONORS: YOU CAN HELP US



To stay ahead in these unsettled times the ICRC is diversifying the sources of its funding, placing greater emphasis on the private sector.

Contributions from individuals, foundations and companies will make a mark because they are leveraged by the weight, credibility and the existing support of the States party to the Geneva Conventions.

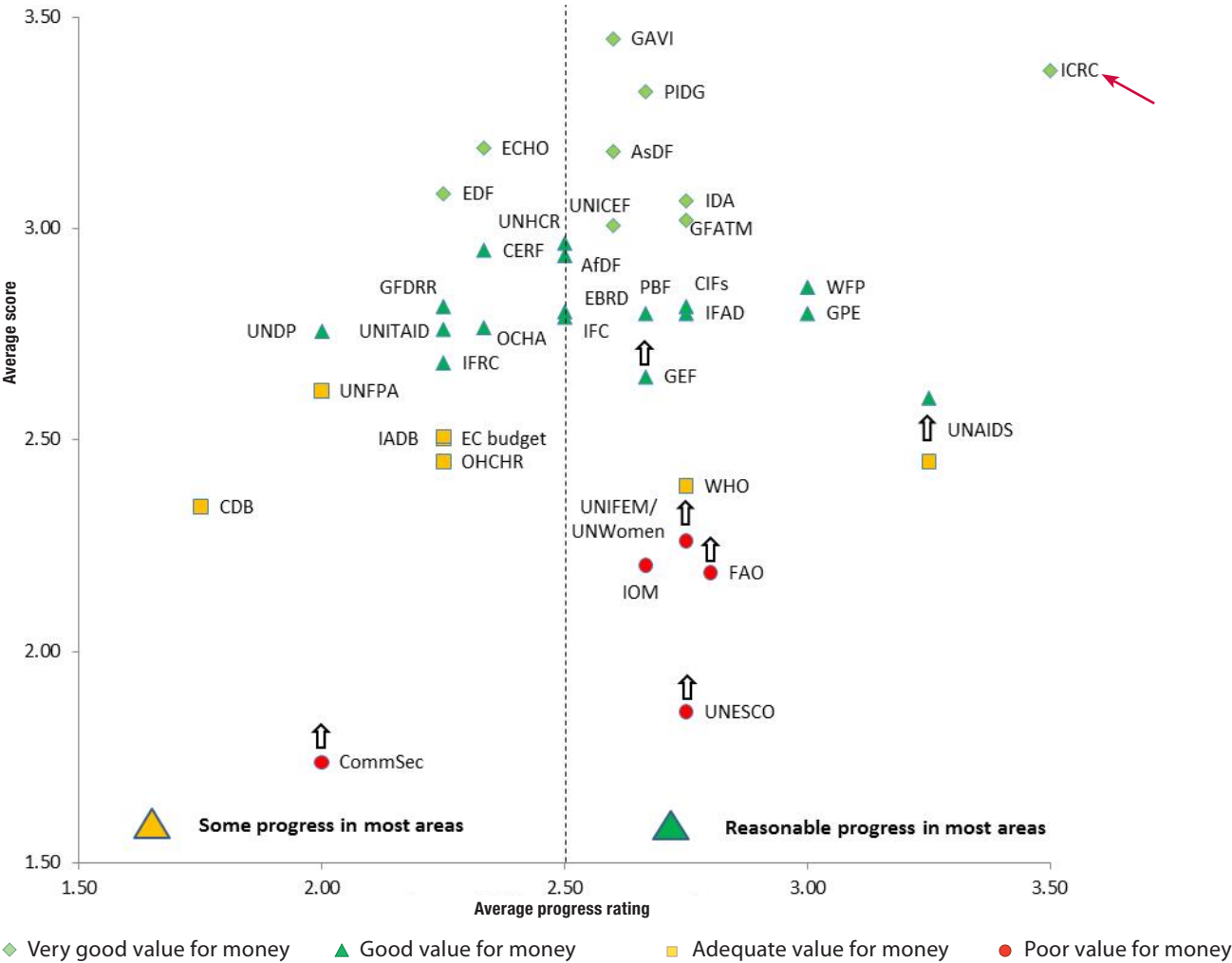
The ICRC undertakes to spend your money wisely, making intelligent choices and enforcing stringent control measures that will ensure the best possible service for beneficiaries and the greatest value for money for you.



In a recent British Government review of 37 of the organizations it funds, the ICRC was graded as “very good value” for money and, of all the organizations surveyed, it was deemed to have made the most progress since the previous review. The ICRC is committed to forging

ahead with its efforts to provide needy people all over the world with the most appropriate and effective humanitarian services, while offering its generous donors superior value for money.

© UK Government Department for International Development Multilateral Aid Review (MAR) Update December 2013



Legend	
AfDF	The African Development Fund
AsDF	The Asian Development Fund
CDB	The Caribbean Development Bank
CERF	Central Emergency Response Fund
CIFs	The Climate Investment Funds
CommSec	The Development Programmes of the Commonwealth Secretariat
EBRD	European Bank for Reconstruction and Development
EC budget	European Commission Budget
ECHO	European Commission Humanitarian Aid and Civil Protection
EDF	European Development Fund
FAO	Food and Agriculture Organization
GAVI	The Global Alliance for Vaccines and Immunization
GEF	Global Environment Facility
GFATM	The Global Fund to Fight AIDS, TB and Malaria
GFDRR	Global Facility for Disaster Reduction and Recovery
GPE	Global Partners in Education
IADB	Inter-American Development Bank
ICRC	International Committee of the Red Cross
IDA	International Development Association

IFAD	International Fund for Agricultural Development
IFC	International Finance Corporation
IFRC	International Federation of Red Cross and Red Crescent Societies
IOM	International Organisation for Migration
UNAIDS	Joint United Nations Programme on HIV/AIDS
OHCHR	Office of the High Commissioner for Human Rights
PBF	United Nations Peacebuilding Fund
PIDG	The Private Infrastructure Development Group
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNICEF	United Nations Children's Fund
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commission for Refugees
UNIFEM/UN WOMEN	United Nations Entity for Gender Equality and the Empowerment of Women
UNITAID	UNITAID
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
WFP	World Food Programme
WHO	World Health Organization



ICRC

**We very much appreciate the interest that you have shown in our organization and the support that you have given us. This is a source of motivation for all our staff, and especially for our teams in the field. We would like to thank you on their behalf and on behalf of all the people whose lives we were able to improve in 2014.**

## **MISSION**

The International Committee of the Red Cross (ICRC) is an impartial, neutral and independent organization whose exclusively humanitarian mission is to protect the lives and dignity of victims of armed conflict and other situations of violence and to provide them with assistance. The ICRC also endeavours to prevent suffering by promoting and strengthening humanitarian law and universal humanitarian principles. Established in 1863, the ICRC is at the origin of the Geneva Conventions and the International Red Cross and Red Crescent Movement. It directs and coordinates the international activities conducted by the Movement in armed conflicts and other situations of violence.



