

# GUINEA

COVERING: Guinea, Sierra Leone



ICRC delegation ICRC sub-delegation  
\* Sierra Leone is covered by the ICRC delegation in Guinea

The ICRC has worked in Guinea since 1970, opening its delegation in 2001. It seeks to protect violence-affected people, restore links between separated relatives, and improve the water supply and sanitation conditions. It visits detainees, monitoring their treatment and living conditions, and advises the authorities on detention-related matters. It promotes IHL and humanitarian principles among the armed and security forces, authorities and civil society. Since 2009, the delegation oversees the ICRC's cooperation and prevention activities in Sierra Leone. The ICRC works with each National Society to help it strengthen its capacities, including in emergency response, and to promote the Movement.

## YEARLY RESULTS

Level of achievement of ICRC yearly objectives/plans of action

**MEDIUM**

## KEY RESULTS/CONSTRAINTS

### In 2014:

- ▶ detainees benefited from ICRC support for the authorities' efforts to alleviate malnutrition, improve their access to health care, prevent the spread of Ebola and other diseases, and rehabilitate infrastructure
- ▶ dialogue with the authorities and dissemination sessions for security forces tackled the need to respect/protect people during law enforcement operations; reports of violence-related casualties decreased
- ▶ with ICRC support, the Red Cross Society of Guinea trained Ebola responders on preventive measures and the Safer Access Framework; media spots that aimed to boost acceptance of its work were produced
- ▶ people in violence-prone areas had access to clean water through water points constructed/rehabilitated by the ICRC, but dissemination/first-aid sessions for them were postponed because of security concerns

| EXPENDITURE (in KCHF)               |       |
|-------------------------------------|-------|
| Protection                          | 1,818 |
| Assistance                          | 2,216 |
| Prevention                          | 1,282 |
| Cooperation with National Societies | 948   |
| General                             | -     |

**6,264**

of which: Overheads 382

| IMPLEMENTATION RATE       |             |
|---------------------------|-------------|
| Expenditure/yearly budget | <b>101%</b> |

| PERSONNEL                                   |    |
|---|----|
| Mobile staff                                | 10 |
| Resident staff (daily workers not included) | 84 |

| PROTECTION  | Total |
|---|-------|
| <b>CIVILIANS (residents, IDPs, returnees, etc.)</b>                                   |       |
| <b>Red Cross messages (RCMs)</b>  |       |
| RCMs collected  | 107   |
| RCMs distributed  | 138   |
| Phone calls facilitated between family members  | 215   |
| People located (tracing cases closed positively)                                      | 8     |
| <b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>                 |       |
| <b>ICRC visits</b>  |       |
| Detainees visited   | 3,623 |
| Detainees visited and monitored individually  | 72    |
| Number of visits carried out  | 151   |
| Number of places of detention visited   | 49    |
| <b>Restoring family links</b>   |       |
| RCMs collected  | 264   |
| RCMs distributed  | 91    |
| Phone calls made to families to inform them of the whereabouts of a detained relative | 94    |

| ASSISTANCE   | 2014 Targets (up to) | Achieved |
|--|----------------------|----------|
| <b>CIVILIANS (residents, IDPs, returnees, etc.)</b>  |                      |          |
| <b>Economic security, water and habitat</b><br>(in some cases provided within a protection or cooperation programme) |                      |          |
| Water and habitat activities   | Beneficiaries        | 20,000   |
|  |                      | 20,000   |

## CONTEXT

Guinea's new parliament took office in January, but political friction persisted ahead of the 2015 presidential elections. This exacerbated socio-economic difficulties and structural deficiencies that affected the delivery of basic services, fuelling existing intercommunal tensions. Some demonstrations, protests, and other violent incidents occurred, albeit less frequently than in previous years.

The country relied primarily on support from international organizations to address urgent humanitarian needs – particularly those arising from the Ebola outbreak, which reportedly claimed over a thousand lives in 2014. Disease-prevention efforts were hindered by a lack of acceptance from community members; attacks against humanitarian workers were reported.

The government continued the process of reforming the justice and security sectors with support from the international community, though progress was slowed by the need to focus on the Ebola outbreak.

In Sierra Leone, the Ebola outbreak disrupted the relatively calm and stable political and socio-economic situation.

Both countries contributed troops to the UN Multidimensional Integrated Stabilization Mission in Mali. Sierra Leone participated in the African Union Mission in Somalia.

## ICRC ACTION AND RESULTS

In 2014, the ICRC responded to the Ebola outbreak by supporting the Movement response in Guinea, and by helping the authorities implement preventive measures in places of detention. It also raised awareness among the Guinean armed/security forces of their responsibility to respect civilians during situations of unrest, and supported efforts to improve Guinean detainees' nutrition and access to health care, while helping the Red Cross Society of Guinea and the Sierra Leone Red Cross Society boost their capacities.

The need to respect/protect the population during law enforcement operations was tackled during dialogue with the authorities and dissemination sessions for security forces on international norms applicable to their duties. Reports of violence-related casualties continued to decrease. Discussions with local leaders, particularly in Guinea's violence-prone areas, facilitated humanitarian access to casualties of unrest.

The ICRC, together with the local water authorities, constructed/rehabilitated water infrastructure in violence-prone areas, helping people obtain reliable access to clean water. However, owing to hostility against humanitarian workers, it postponed some dissemination sessions that aimed to foster acceptance of the ICRC and its work. Members of dispersed families contacted or received news of their relatives through the Movement's family-links services.

Detainees in Guinean detention facilities received ICRC visits, during which they had their treatment and living conditions monitored in accordance with the organization's standard procedures. Following visits, the ICRC provided confidential feedback to the authorities, who took measures to address those issues. Inmates benefited from a therapeutic feeding programme carried out by the authorities with ICRC assistance; the overall malnutrition rate fell slightly, but budgetary constraints hindered the authorities' efforts to take full responsibility for nutrition in prisons. To improve detainees' access to health care, the ICRC continued

supplying prison dispensaries, covering the cost of treatment for particularly vulnerable detainees, and encouraging coordination amongst the authorities, notably, by facilitating the signing of referral agreements between prisons and district hospitals. Prison health workers received technical support for managing diseases, but training sessions for them were cancelled because of the Ebola outbreak. Detainees mitigated their risk of contracting diseases, including Ebola, via disease-prevention measures and pest-control campaigns implemented by the authorities with ICRC support. Infrastructure upgrades improved living conditions for inmates in some prisons.

The Guinean and the Sierra Leonean National Societies, in close cooperation with the ICRC, enhanced their operational capacities in family-links services and other areas. Following the outbreak of Ebola, in Guinea, the National Society – with material and financial support from Movement partners and the ICRC – raised awareness of the disease, disinfected potentially contaminated homes and properly managed human remains. To help volunteers carry out such activities securely, the ICRC conducted seminars for them on the Safer Access Framework, and produced radio/TV spots that aimed to boost acceptance of their work. Regular coordination among Movement components and with other humanitarian actors, particularly during the Ebola crisis, helped maximize impact and avoid duplication.

The Guinean and Sierra Leonean authorities were urged, through dialogue, to integrate IHL provisions into domestic legislation. In Guinea, a working group tasked with revising legal frameworks as part of ongoing justice and security reforms drew on ICRC input in its work, and the authorities incorporated ICRC recommendations into the national justice reform policy. Guinean troops bound for peacekeeping missions abroad learnt more about IHL through ICRC briefings. Presentations on IHL at Guinean universities helped stimulate interest in the law among students and instructors and students, and dialogue with Islamic circles helped widen acceptance for Movement activities in the country.

## CIVILIANS

### **Authorities respect their obligation to protect the population**

Continued contact and dialogue with the Guinean authorities served to remind them of their responsibilities to respect and protect the population during law enforcement operations; these were complemented by dissemination sessions for the armed/security forces (see *Actors of influence*). While responding to unrest, the police and the *gendarmerie* were said to have demonstrated restraint in using force, in line with the humanitarian principles and international norms applicable to their duties. Reports of injuries and deaths in connection with such incidents continued to decline. When necessary, documented reports of abuses were discussed with the authorities for their further investigation.

Dialogue with local authorities in violence-prone areas helped facilitate humanitarian access for Guinean Red Cross teams, for example, enabling 25 people injured during demonstrations in Conakry to be transferred to hospital.

### **People in violence-prone areas have reliable access to clean water**

Over 20,000 people in 12 violence-prone rural villages in Kankan and N'Zérékoré obtained reliable access to clean water through 50 water points, such as hand pumps and wells, constructed/

rehabilitated by the ICRC in cooperation with the Guinean water authorities. Community members trained in maintenance. However, owing to hostility against humanitarian workers (see *Context*), some dissemination sessions to foster acceptance of the ICRC and its work – which were to be combined with first-aid training – were postponed to 2015.

### **Dispersed families reconnect**

Members of families dispersed by internal violence, migration or natural disasters re-established/maintained contact with relatives through family-links services provided by the Guinean and Sierra Leonean National Societies and the ICRC, though the need for them remained relatively limited. Promotional campaigns broadened the public's awareness of these services. In Guinea, two unaccompanied children who had fled the 2011 post-electoral crisis in Côte d'Ivoire continued to have their situation monitored, with a view to reunifying them with their families or finding alternative solutions for them.

The Guinean and Sierra Leonean National Societies received support to bolster their family-links services (see *Red Cross and Red Crescent Movement*).

### **PEOPLE DEPRIVED OF THEIR FREEDOM**

Inmates in Guinean places of detention under the authority of the Justice Ministry or the police/*gendarmérie* received visits conducted according to standard ICRC procedures. Delegates monitored their treatment and living conditions, paying particular attention to security detainees in Conakry and N'Zérékoré. However, the Ebola outbreak hampered visits to some prisons in affected areas.

Delegates confidentially shared their findings and recommendations, including those concerning allegations of ill-treatment collected during visits, with the authorities concerned. Following such dialogue, the penitentiary authorities implemented sanctions for perpetrators and other measures to prevent future violations, contributing to a continued decrease in such reports. Discussions and awareness-raising sessions with the police/*gendarmérie* emphasized the appropriate use of force during arrest and detention.

In July, the Guinean authorities approved the national justice reform policy, which incorporated ICRC recommendations on the need to respect/protect detainees and sanction perpetrators of abuses, and on internationally recognized standards for detainees' living conditions.

Detainees restored/maintained contact with their families through RCMs/phone calls, which were routinely offered to newly arrived inmates. Foreigners contacted their consular representatives via the ICRC.

### **Malnourished detainees benefit from therapeutic feeding**

Detainees continued to have their health and nutritional status monitored by the authorities/ICRC, and received at least two meals a day from restaurants contracted by the authorities, who supplemented these with a therapeutic feeding programme supported by the ICRC. Over 1,500 people suffering from malnutrition – including those with HIV/TB – augmented their diet with therapeutic food provided by the ICRC; among them were 77 severely malnourished people, who received additional high-calorie biscuits. No malnutrition-related deaths have been reported since 2010.

The overall malnutrition rate in Guinean prisons – 13% at end-2013 – initially decreased to 9.6% by May, but subsequently increased to 12% by December, as the authorities faced budgetary challenges. These financial constraints, particularly from July onwards, hindered the authorities' efforts to assume full responsibility for nutrition in prisons. Plans to replace the high-calorie biscuits with enriched flour were postponed to 2015 because of quality concerns.

### **Inmates gain access to quality health care**

Prison health services continued to strengthen their capacities with ICRC support, which included regular donations of drugs/consumables to 22 dispensaries. With ICRC assistance, prison health staff gave thousands of medical consultations; over 500 people requiring specialized medical attention were referred to hospitals; and hospital fees for 42 destitute detainees with life-threatening illnesses were covered by the ICRC. Prison health workers received technical support for managing diseases, but training sessions for them were cancelled because of the Ebola outbreak.

To improve coordination amongst the parties concerned, the ICRC facilitated the signing of five cooperation contracts between prisons and referral hospitals, as well as dialogue between the Health and Justice Ministries on health care for detainees. The ministries were urged to reactivate a 2004 agreement defining their responsibilities in this regard, and to appoint a coordinator for related activities.

### **Detainees mitigate their risk of contracting diseases, including Ebola**

The authorities drew on ICRC support for measures to mitigate the spread of diseases. At ICRC-conducted sessions, which were adapted to include Ebola-prevention messages, some 200 key people – health workers, prison guards, restaurant staff, and detainees on health committees – boosted their ability to promote hygiene at eight central prisons, where over 2,800 detainees were held. To help ensure the continued implementation of Ebola-prevention measures, prison health workers received financial incentives and infrared thermometers. In 27 prisons, a pest-control campaign reduced the risk of diseases for some 2,800 inmates. Thousands of people received hygiene items, in some cases, alongside the above-mentioned initiatives.

The Justice Ministry/ICRC signed a memorandum of agreement regarding cooperation on prison maintenance/rehabilitation, but budget constraints hampered the authorities' ability to allocate resources to such projects. Nevertheless, dilapidated facilities at three prisons were upgraded, improving the living conditions of almost 530 people.

### **ACTORS OF INFLUENCE**

#### **Policemen/gendarmes deepen understanding of international norms applicable to their work**

Through dissemination sessions, the Guinean police/*gendarmérie* enhanced their understanding of international norms applicable to the maintenance of law and order, including those related to the proper use of force in arrest and detention (see *Civilians and People deprived of their freedom*). Guinean troops bound for peacekeeping missions learnt more about the importance of respecting health-care personnel and the Movement's emblems during National Society/ICRC dissemination sessions.

IHL instruction within the Guinean military continued, although its development was delayed by frequent turnover and the need

for further training among instructors; the final approval of IHL booklets produced with ICRC support was also deferred as a result.

### **Radio and television spots aim to increase acceptance of Guinean Red Cross volunteers**

Hostility against humanitarian workers (see *Context*) underscored the need to raise acceptance of Movement activities and facilitate humanitarian access during emergencies. Radio and television spots were produced in consultation with Movement partners, with a view to increasing public acceptance of Guinean Red Cross volunteers, and in turn, helping them carry out disease-prevention measures safely.

Among Islamic and academic circles in Guinea, the Movement's work was better known and accepted thanks to sustained dialogue with their representatives; with ICRC support, one of them enriched his understanding of IHL in Islamic contexts at a course in Beirut (see *Lebanon*). Guinean universities organized presentations on IHL with ICRC assistance.

### **The authorities draw on ICRC advice regarding justice and security sector reforms**

Dialogue with the Guinean authorities, which expanded to include high-level officials from the Ministry of Security and the National Gendarmerie, focused on the importance of integrating IHL provisions into national legislation and ratifying international treaties. A European Union-supported working group tasked with the revision of the code of criminal procedure, the penal code and the code of military justice as part of ongoing justice and security sector reforms drew on ICRC technical expertise in its work, notably the integration of IHL provisions in the latter two texts. In parallel, the authorities approved the national justice sector reform policy, which incorporated ICRC recommendations (see *People deprived of their freedom*).

With ICRC support, representatives from the Guinean and Sierra Leonean national commissions on the control of small arms and light weapons increased their awareness of regional anti-proliferation efforts at an Arms Trade Treaty conference abroad (see *Nairobi*).

## **RED CROSS AND RED CRESCENT MOVEMENT**

The Guinean and Sierra Leonean National Societies reinforced their operational capacities and organizational development with ICRC material, technical and financial assistance.

### **Guinean Red Cross teams respond to emergencies, including Ebola**

The Guinean Red Cross received financial support for its response to the Ebola outbreak, enabling it to hold public information sessions on communicable diseases and train over 280 volunteers in disease prevention, disinfection of homes and proper management of human remains. To help them carry out their activities securely, almost 250 volunteers attended a workshop on the Safer Access Framework. During ICRC dissemination sessions for the armed/security forces (see *Actors of influence*), the National Society co-organized modules on awareness/prevention of Ebola.

Material support, such as first-aid kits, stretchers and motorcycles, helped the Guinean Red Cross respond to violent incidents (see *Civilians*). It also trained 30 responders from referral hospitals, reinforcing cooperation during emergencies.

### **The Sierra Leone Red Cross incorporates family-links services into its contingency plans**

Guinean and Sierra Leonean National Society volunteers enhanced their abilities to provide family-links services through ICRC-supported workshops. Both National Societies continued the integration of family-links services into their emergency response plans; in late 2014, financial support to the Sierra Leone Red Cross in this regard was reduced because of its increased capacities.

The National Societies also boosted their communication and legal capacities through workshops for their communications personnel and through their legal advisers' participation in a Movement conference abroad. The Guinean Red Cross initiated a global audit of its finances with support from the Danish Red Cross and the ICRC, and drafted a strategic plan of action for 2014–18 with technical support from the Danish Red Cross.

Regular coordination among Movement partners and with other humanitarian agencies – notably in connection with the response to Ebola – helped maximize the impact of activities and prevent duplication of effort.

| MAIN FIGURES AND INDICATORS: PROTECTION  |       | Total |           |                      |  |
|--|-------|-------|-----------|----------------------|--|
| <b>CIVILIANS (residents, IDPs, returnees, etc.)</b>  |       |       |           |                      |  |
| <b>Red Cross messages (RCMs)</b>   |       |       |           |                      |  |
|  |       |       | UAMs/SCs* |                      |  |
| RCMs collected   | 107   |       |           |                      |  |
| RCMs distributed   | 138   | 1     |           |                      |  |
| Phone calls facilitated between family members   | 215   |       |           |                      |  |
| <b>Tracing requests, including cases of missing persons</b>                                      |       |       |           |                      |  |
|  |       | Women | Girls     | Boys                 |  |
| People for whom a tracing request was newly registered   | 28    | 9     | 5         | 9                    |  |
| People located (tracing cases closed positively)   | 8     |       |           |                      |  |
| Tracing cases still being handled at the end of the reporting period (people)                    | 20    | 7     | 5         | 7                    |  |
| <b>UAMs/SCs*, including unaccompanied demobilized child soldiers</b>                             |       |       |           |                      |  |
|  |       | Girls |           | Demobilized children |  |
| UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period | 2     | 1     |           |                      |  |
| <b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>                            |       |       |           |                      |  |
| <b>ICRC visits</b>   |       |       |           |                      |  |
|  |       | Women | Minors    |                      |  |
| Detainees visited  | 3,623 | 151   | 289       |                      |  |
|  |       | Women | Girls     | Boys                 |  |
| Detainees visited and monitored individually   | 72    | 2     |           | 3                    |  |
| Detainees newly registered   | 34    | 1     |           | 3                    |  |
| Number of visits carried out   | 151   |       |           |                      |  |
| Number of places of detention visited  | 49    |       |           |                      |  |
| <b>Restoring family links</b>  |       |       |           |                      |  |
| RCMs collected   | 264   |       |           |                      |  |
| RCMs distributed   | 91    |       |           |                      |  |
| Phone calls made to families to inform them of the whereabouts of a detained relative            | 94    |       |           |                      |  |
| People to whom a detention attestation was issued  | 3     |       |           |                      |  |

\* 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> |               |        |       |          |
| Water and habitat activities  | Beneficiaries | 20,000 | 50%   | 30%      |
| <b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>   |               |        |       |          |
| <b>Economic security, water and habitat (in some cases provided within a protection programme)</b>                |               |        |       |          |
| Essential household items   | Beneficiaries | 11,970 |       |          |
| Water and habitat activities  | Beneficiaries | 2,800  |       |          |
| <b>Health</b>   |               |        |       |          |
| Number of visits carried out by health staff  |               | 388    |       |          |
| Number of places of detention visited by health staff   |               | 30     |       |          |