



ICRC / AR_2015
 ICRC delegation * Dominican Republic is covered by the ICRC delegation in Haiti

The ICRC has been present in Haiti since 1994. It responds to acute humanitarian situations in prisons and supports national authorities in improving conditions of detention and respect for judicial guarantees. While sustaining dialogue with the authorities and weapon bearers on humanitarian concerns, it helps the national security forces disseminate international human rights law, other relevant norms and standards, and humanitarian principles. With other Movement partners, the ICRC helps strengthen the emergency response capacities of the Haitian National Red Cross Society and the Dominican Red Cross.

KEY RESULTS/CONSTRAINTS IN 2015

- ▶ In Haiti, dozens of detainees were released after the justice ministry and penitentiary legal staff, with ICRC support, endeavoured to address prolonged pre-trial detention through improved case management.
- ▶ The Haitian penitentiary authorities took more responsibility for facilitating detainees' access to health care: they established a central pharmacy for prisons and met some of detainees' treatment-related costs.
- ▶ In the absence of official mechanisms for penitentiary reform, such as the sectorial coordination platforms, the ICRC facilitated regular meetings with the pertinent parties on how to address detention-related issues.
- ▶ The Haitian National Red Cross Society and the Dominican Red Cross bolstered their family-links capacities, enabling them to help people dispersed by migration to restore or maintain contact with relatives.

YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

MEDIUM

EXPENDITURE IN KCHF	
Protection	749
Assistance	1,675
Prevention	369
Cooperation with National Societies	845
General	15
Total	3,653
<i>Of which: Overheads</i>	223

IMPLEMENTATION RATE	
Expenditure/yearly budget	75%

PERSONNEL	
Mobile staff	7
Resident staff (daily workers not included)	51

PROTECTION	Total
CIVILIANS (residents, IDPs, returnees, etc.)	
Restoring family links	
RCMs collected	22
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)	
ICRC visits	
Detainees visited	11,455
Number of visits carried out	70
Number of places of detention visited	20
Restoring family links	
RCMs collected	46
RCMs distributed	22
Phone calls made to families to inform them of the whereabouts of a detained relative	17

CONTEXT

In Haiti, the results of the protracted legislative and presidential electoral processes drew controversy, prompting violent protests, preventing the parliament from resuming its functions and increasing political instability.

Difficulties in accessing essential services persisted, including within the penitentiary system. Limited access to clean water, for instance, contributed to cholera outbreaks. The conditions endured by detainees were also compounded by overcrowding, mainly linked to a very high rate of prolonged pre-trial detention. The judicial system remained unable to cope with the increased rate of arrests made by the Haitian National Police (HNP) to curb prevalent organized/gang-related crime, exacerbating the situation in prisons.

The Haitian authorities and their international partners continued to bolster the HNP's capacities. The UN Stabilization Mission in Haiti (MINUSTAH) was undergoing reconfiguration, towards extending more support to the authorities' development initiatives; its troop reduction continued.

Haitians and people of Haitian descent continued returning from the Dominican Republic, voluntarily or otherwise, owing to the Dominican Republic's tightened immigration policies – a source of tension between the two States. Haitian migrants also faced deportation from other countries, particularly the Bahamas.

ICRC ACTION AND RESULTS

The ICRC maintained its focus on helping address detainees' humanitarian needs in Haiti. It monitored the treatment and living conditions of detainees during visits conducted according to its standard procedures. Afterwards, the ICRC shared its findings and recommendations with the Penitentiary Administration Directorate (DAP), the justice ministry and other pertinent authorities, and urged them to take appropriate action. Given the absence of official coordination mechanisms, the ICRC pursued efforts to foster cooperation among the pertinent domestic and international organizations on detention-related issues.

To help tackle prolonged pre-trial detention, the ICRC supported the justice ministry and penitentiary legal assistants in following up the cases of the detainees concerned, leading to the promulgation of court decisions, including for the release of several dozen detainees.

During a cholera outbreak in one prison, the ICRC helped detainees reduce their risk of infection or obtain treatment, either directly or by mobilizing other actors. Partly as a result of ICRC advocacy efforts, the authorities started assuming more responsibility for facilitating detainees' access to health care: they established a central pharmacy, and shouldered the costs of detainees' laboratory examinations and of their treatment at external facilities. The ICRC extended ad hoc medical assistance to some detainees, such as those suffering from malnutrition. The health ministry formed a working group with the DAP, an international organization and the ICRC, towards implementing a prison health policy.

At information sessions conducted by an ICRC mobile team in several prisons, detainees learnt more about lowering their health risks through good hygiene practices; some trained to instruct their

peers accordingly. They saw improvements in their living conditions following infrastructural repairs/upgrades by ICRC-backed local engineers. Amid constraints that contributed to the limited functionality of key equipment/facilities, penitentiary technicians honed their skills in operating/maintaining these. Prison staff enhanced their ability to handle communicable diseases, at ICRC workshops.

The Haitian National Red Cross Society improved its emergency response capacities with ICRC technical/material support. The Haitian Red Cross and the Dominican Red Cross boosted their family-links services, particularly given the influx of returnees to Haiti from the Dominican Republic (see *Context*). In line with a bilateral cooperation agreement, the National Societies expanded an action plan on concerns of common interest. The ICRC worked with the National Societies and other Movement partners to strengthen their coordination.

Through dialogue, training events and public communication, the ICRC fostered acceptance of humanitarian principles, IHL, pertinent internationally recognized standards and the Movement among the authorities, weapon bearers, civil society representatives and international actors. The ICRC kept influential parties updated on its adaptation of activities as it sought to focus on supporting local ownership and sustainability of the response to humanitarian needs.

PEOPLE DEPRIVED OF THEIR FREEDOM

The pertinent authorities received ICRC support to enable them to better fulfil their responsibilities, thus helping ease the adverse situation of detainees in Haiti (see *Context*).

The authorities are urged to undertake coordinated penitentiary-reform efforts

The treatment and living conditions of over 11,400 inmates in 20 places of detention were monitored during ICRC visits, conducted according to the organization's standard procedures. Some detainees obtained support in restoring/maintaining contact with their kin. Particularly vulnerable people, such as women and minors, received close attention as regards respect for their judicial guarantees and their ability to obtain health care. Afterwards, the ICRC shared its findings and recommendations, focusing on detainees' treatment and their access to open air, with the authorities – the DAP, the HNP, the justice and health ministries and the prime minister's office.

Given the continued inactivity of the DAP's sectorial coordination platforms working on penitentiary reform, and the absence of alternative official mechanisms, the ICRC maintained its mobilization and other efforts to foster cooperation among the pertinent domestic and international organizations. These included facilitating regular meetings, where detention-related issues, and ways to keep them on the government's agenda, were discussed.

Eligible detainees are released from overcrowded prisons

In line with the goal of promoting respect for detainees' judicial guarantees, the justice ministry launched an initiative to tackle prolonged pre-trial detention. Its implementation, with ICRC material/technical support, facilitated the release of over 100 detainees from Croix-des-Bouquets prison, Pétion-Ville women's prison and Port-au-Prince civil prison (PCPP). In parallel, penitentiary legal assistants/clerks continued to draw on ICRC input to lobby the judiciary to expedite the resolution

of detainees' cases, especially people held for protracted periods, through individual representations on the detainees' behalf. At two workshops, these personnel strengthened their capacities to handle their caseloads more efficiently. Their efforts led to the promulgation of court decisions, notably for the release of 90 detainees, thus contributing to the alleviation of overcrowding in prisons. The DAP committed to recruiting more legal staff, in line with ICRC recommendations.

At a seminar, some 30 prison guards learnt more about their role in helping to ensure detainees' judicial guarantees and address their needs for food, hygiene, health care and fresh air.

The authorities take more responsibility for facilitating detainees' access to health care

During a cholera outbreak in Les Cayes prison, the DAP worked with the ICRC in establishing a treatment centre, enforcing emergency hygiene measures and mobilizing the health ministry to provide more medical staff. Detainees also benefited from ICRC-provided medical/hygiene items, and the mobilization of WHO to donate oral-rehydration salts to the DAP's pharmacy (see below). To help prevent the further spread of cholera, the health and justice ministries partnered with WHO to vaccinate some 5,000 detainees, thanks in part to ICRC representations to this end. The DAP managed a scabies outbreak in Fort Liberté prison with ICRC support.

The DAP shouldered detainees' laboratory-examination fees and established a central pharmacy to serve prisons countrywide, partly as a result of ICRC advocacy efforts. The pharmacy received ICRC-donated essential drugs for the needs of detainees held in 17 places of permanent detention. The appointment of a new supervisor contributed to improved attendance among DAP medical workers. These workers improved their ability to manage health cases, including making referrals for further care, through an ICRC coaching programme, during which the ICRC covered the costs related to 20 inmates' treatment at external facilities. The authorities assumed such costs afterwards.

Some 400 detainees diagnosed with moderate or severe acute malnutrition improved their health status with the help of ICRC-distributed high-calorie food supplements. Following ICRC-led nutritional assessments of detainees held in six key prisons, the pertinent authorities received recommendations for solving persistent food-supply problems. The DAP developed treatment guidelines for malnutrition; medical staff trained in diagnosing it.

The health ministry formed a working group with the DAP, an international NGO and the ICRC, towards implementing a prison health policy. The health and justice ministries, with ICRC input, continued discussions on strengthening coordination between them.

Detainees lower their health risks and gain from improvements in their living conditions

At various prisons, 9,000 detainees furthered their understanding of good hygiene practices, particularly infection prevention, during information sessions by an ICRC mobile team. They received hygiene kits and cleaning materials so they could apply what they had learnt; some trained to instruct their peers accordingly. Some detainees had reduced health risks following ICRC-led emergency repairs to essential facilities: 4,700 detainees in the PCPP and 780 in Cap-Haïtien prison maintained their access to clean water, and 500 detainees in Jacmel prison benefited from

improvements to a treatment area for sick detainees. Health staff enhanced their ability to handle communicable diseases and logisticians their skills in managing stocks of hygiene/sanitation items, during ICRC-facilitated workshops.

In view of logistical and other constraints that contributed to the limited functionality of infrastructure that the ICRC had supported in the past, the DAP and the ICRC formalized an agreement to help address the issue through training. Thirty-five penitentiary technicians honed their skills in operating/maintaining key equipment and infrastructure during a workshop; afterwards, they participated in ongoing assessments of prison facilities, to enable the authorities to develop a countrywide infrastructure-maintenance plan.

Local engineers continued to receive ICRC backing to finish projects begun in end-2014 and to undertake urgent repairs of fragile/breakdown-prone facilities. In Les Cayes prison, toilets and showers were constructed and septic tanks upgraded, facilitating more sanitary conditions for 690 inmates; a new cell block for minors neared completion. Kitchen renovations in Cap-Haïtien prison boosted cooking capacity in behalf of all 850 inmates there. Repairs to the kitchen, infirmary and courtyard drainage system benefited 73 detainees of Grande Rivière du Nord prison.

In Cap-Haïtien and Les Cayes prisons, the ICRC's systematic follow-up helped ascertain the sustainment of improvements in inmates' access to outdoor areas.

ACTORS OF INFLUENCE

Authorities, weapon bearers, civil society representatives and international actors were engaged by the ICRC through dialogue and IHL-related training; they also had access to radio broadcasts and multimedia resources, including reference materials for university students. These efforts helped promote the protection of vulnerable people, such as detainees (see *People deprived of their freedom*), and facilitate humanitarian activities for them, especially during emergencies (see also *Red Cross and Red Crescent Movement*). Such also fostered their acceptance of humanitarian principles, IHL and the Movement.

The ICRC kept influential parties updated on its adaptation of activities as it sought to focus on supporting local ownership and sustainability of the response to humanitarian needs.

Weapon bearers strengthen their grasp of applicable norms and standards

Members of the Dominican military attended a regional IHL seminar (see *Mexico*); a senior officer took part in an IHL workshop in Algeria (see *International law and policy*). About 150 MINUSTAH military and police officers, briefed by ICRC delegates in their countries of origin prior to their deployment to Haiti to support the HNP's operations, refreshed their understanding of humanitarian principles and the Movement during dissemination sessions. The HNP agreed to proposed ICRC seminars for its officers, on internationally recognized standards on the use of force; these did not push through, owing to scheduling constraints faced by the HNP's academy.

Contact with gang members in Martissant was maintained by the Haitian Red Cross and the ICRC, with a view to facilitating the National Society's activities during emergencies. The Haitian Red Cross drew on ICRC technical/material/financial support for

developing a communication strategy to promote respect for the red cross emblem and safe passage for ambulances.

Haitian civil society representatives discuss new penal code

National IHL committee members of the Dominican Republic participated in a regional conference (see *Colombia*), where they exchanged views on such IHL-related matters as challenges to the domestic implementation of the Arms Trade Treaty, to which the State had acceded in 2014.

In Haiti, the ICRC's efforts to encourage detention-related reform led to some progress: it contributed input for drafting a new penal code, which was discussed among key civil society representatives (see also *People deprived of their freedom*). Political instability (see *Context*) and other government priorities, however, impeded the adoption of IHL-related legislation.

RED CROSS AND RED CRESCENT MOVEMENT

Haitian Red Cross bolsters its emergency response capacities

Amid staffing and other constraints, the Haitian Red Cross enhanced its capacities, including in public communication and the application of the Safer Access Framework (see *Actors of influence*), with ICRC technical/material/financial support. Various National Society branches received supplies for emergencies; the office in the border area of Belladère was refurbished. In the violence-prone area of Martissant, volunteers treated about 3,000 injured people and shared key messages regarding disease prevention and hurricane preparedness with the community. Discussions with the National Society, aimed at promoting the full recognition of the Martissant volunteers and their formal affiliation with a local branch to reinforce the organization's ability to work in Martissant and similar areas, were ongoing.

The Haitian Red Cross continued developing a five-year strategic plan with input from the International Federation and the ICRC. Its newly elected officials learnt more about their duties during ICRC-facilitated information sessions.

Haitian authorities strive to ensure the water supply in Cité Soleil

The water authorities, with ICRC support, completed a plan to mobilize resources – including from within the Movement – that would enable them to maintain the water system in the tension-prone area of Cité Soleil, in Port-au-Prince city. Some repairs were completed; similar work was done by the ICRC in 2013, but renewed backing became necessary after it was found that lack of maintenance prevented people's regular access to water.

National Societies boost their family-links capacities

Both National Societies conducted binational training sessions for volunteers deployed to border areas, with support from the American Red Cross. The Dominican Red Cross hired a coordinator, and the Haitian Red Cross continued to receive ICRC-provided technical/material assistance. All these efforts bolstered the National Societies' ability to facilitate contact between separated relatives, particularly in view of the influx of returnees to Haiti from the Dominican Republic (see *Context*).

In line with a bilateral cooperation agreement, the Haitian Red Cross and the Dominican Red Cross broadened the scope of a joint action plan on migration to include such concerns as disaster-risk reduction/management and public health.

Movement components strengthen their coordination

Periodic contact between the Dominican and Haitian National Societies and the ICRC contributed to common positioning on key issues, particularly during the run-up to the 32nd International Conference.

Discussions towards the formalization of a draft tripartite agreement between the National Society, the International Federation and the ICRC, to help ensure a coordinated Movement response to emergencies in Haiti, were ongoing.

MAIN FIGURES AND INDICATORS: PROTECTION		Total		
CIVILIANS (residents, IDPs, returnees, etc.)				
Red Cross messages (RCMs)				
RCMs collected		22		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
ICRC visits				
Detainees visited		11,455	519	353
Number of visits carried out		70		
Number of places of detention visited		20		
Restoring family links				
RCMs collected		46		
RCMs distributed		22		
Phone calls made to families to inform them of the whereabouts of a detained relative		17		

MAIN FIGURES AND INDICATORS: ASSISTANCE		Total	Women	Children
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security¹ (in some cases provided within a protection programme)				
Services and training	Beneficiaries	8,821		
Water and habitat (in some cases provided within a protection programme)				
Water and habitat activities	Beneficiaries	11,305		
Health				
Number of visits carried out by health staff		9		
Number of places of detention visited by health staff		6		
Number of health facilities supported in places of detention visited by health staff		2		

1. Owing to operational and management constraints, figures presented in this table and in the narrative part of this report may not reflect the extent of the activities carried out during the reporting period.