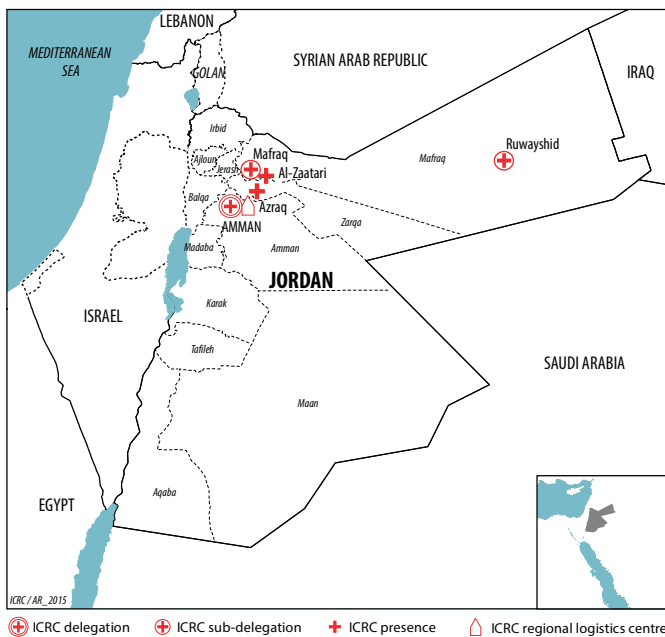


JORDAN



The ICRC has been present in Jordan since the 1967 Arab-Israeli war. It visits detainees, monitoring their treatment and living conditions, and provides tracing and RCM services to enable civilians, including refugees, and foreign detainees to restore contact with their family members. In cooperation with the Jordan National Red Crescent Society, the ICRC supports and assists refugees from across the region. It also partners the National Society in promoting IHL throughout Jordanian society. The delegation provides logistical support to ICRC relief operations in the region and beyond.

KEY RESULTS/CONSTRAINTS IN 2015

- ▶ Asylum seekers at the Syrian Arab Republic's border with Jordan met their urgent needs with food, water, cold-weather supplies and other emergency aid from the ICRC/Jordan National Red Crescent Society.
- ▶ Wounded/sick asylum seekers were treated at ICRC-supported facilities. Their access to medical care expanded after the ICRC had opened new facilities, such as two clinics at the border's crossing points.
- ▶ Families separated by armed conflict in the region, and detention reconnected using phone calls, RCMs and other Movement family-links services. Some resettled abroad with ICRC-issued travel documents.
- ▶ The authorities were apprised of the needs of vulnerable foreigners, concerning *non-refoulement*, for example. Some people were allowed to proceed inward to receive medical attention, owing to ICRC efforts.
- ▶ The detaining authorities and the health ministry acted jointly to improve penitentiary health services. An agreement was reached to implement ICRC recommendations at two pilot places of detention.
- ▶ Weapon bearers – Jordanian Armed Force commanders and leaders of Syrian armed groups – were encouraged and helped to take IHL into account in operational decision-making, at briefings in Jordan.

EXPENDITURE IN KCHF

Protection	3,637
Assistance	22,763
Prevention	3,039
Cooperation with National Societies	1,480
General	413
Total	31,331
<i>Of which: Overheads</i>	1,903

IMPLEMENTATION RATE

Expenditure/yearly budget	98%
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PERSONNEL

Mobile staff	57
Resident staff (daily workers not included)	238

YEARLY RESULTS

Level of achievement of ICRC yearly objectives/plans of action

HIGH

PROTECTION

	Total
CIVILIANS (residents, IDPs, returnees, etc.)	
Restoring family links	
RCMs collected	66
RCMs distributed	55
Phone calls facilitated between family members	16,427
People located (tracing cases closed positively)	51
People reunited with their families	1
<i>of whom unaccompanied minors/separated children</i>	1
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)	
ICRC visits	
Detainees visited	11,278
Detainees visited and monitored individually	820
Number of visits carried out	59
Number of places of detention visited	19
Restoring family links	
RCMs collected	339
RCMs distributed	117
Phone calls made to families to inform them of the whereabouts of a detained relative	109

ASSISTANCE

	2015 Targets (up to)	Achieved
CIVILIANS (residents, IDPs, returnees, etc.)		
Economic security (in some cases provided within a protection or cooperation programme)		
Food commodities	Beneficiaries	63,000 45,077
Essential household items	Beneficiaries	78,000 45,077
Cash	Beneficiaries	30,000 26,100
Water and habitat (in some cases provided within a protection or cooperation programme)		
Water and habitat activities	Beneficiaries	330,000 182,904
Health		
Health centres supported	Structures	1 4
WOUNDED AND SICK		
Hospitals		
Hospitals supported	Structures	2
Water and habitat		
Water and habitat activities	Number of beds	34

CONTEXT

Jordan continued to deal with the consequences of regional conflict. To maintain its stability amid developments in Iraq and the Syrian Arab Republic (hereafter Syria) (see *Iraq and Syrian Arab Republic*), Jordan launched a crackdown on perceived threats to national security, which often led to arrests, and reinforced security along its borders with the two countries.

The influx of conflict-affected people from Syria into Jordan continued, mainly via two crossing points at Syria's eastern border with Jordan. However, owing to tightened security policies, the number of persons awaiting entry, for months in some cases, surged to some 17,000 by year's end. Stranded in the desert, these people had little access to basic services/humanitarian aid, because of the remoteness of the area and heavy rains/flooding in late-2015.

About 500,000 registered refugees lived among host communities, and some 100,000 in the Al-Zaatari and Azraq camps in the Mafraq and Zarqa governorates; many more had yet to register. This exacerbated the strain on Jordan's limited resources and public services, particularly water-supply systems; State/UN agencies were increasingly hard-pressed to meet all needs.

Jordan continued to participate in multilateral airstrikes against the Islamic State group, and supported a Saudi-led coalition in Yemen (see *Yemen*).

ICRC ACTION AND RESULTS

The ICRC's Jordan delegation strove to protect and assist asylum-seekers/refugees from Syria, meet the needs of detainees, and raise support for IHL and other norms. It worked closely with the Jordan National Red Crescent Society, and helped it develop its capacities.

The ICRC and the National Society supplemented the efforts of the authorities and the UNHCR, by providing direct assistance to asylum-seekers from Syria for tiding themselves over until they obtained regular assistance/refugee status. People were assisted several times during their passage from Syria's eastern border with Jordan and through transit/registration points run by the Jordanian Armed Forces (JAF); they had food and water, and household essentials, including winter supplies, and obtained basic services at ICRC-upgraded/installed/maintained facilities. Wounded and sick people received treatment at health facilities run by the Royal Medical Services (RMS) with ICRC support, and at a newly opened health post at the Ruwayshid collection site; training for thousands of first responders made obtaining timely care likelier for ailing/wounded people. Within the year, the ICRC adjusted its assistance strategy to better cover the needs of those awaiting entry: besides delivering urgent relief, it opened two mobile clinics at the border in November.

On a smaller scale, the ICRC/National Society sought to ease the situation of people in host communities. Monthly cash distributions to Syrian refugee households, primarily those headed by women, helped them cover their essential expenses. After completing vocational courses, some Syrian and Jordanian women had better livelihood prospects and were less vulnerable to sexual violence. Potential returnees to Syria learnt more about the risks posed by mines/explosive remnants of war (ERW). Tens of thousands of residents and refugees had easier access to clean water, following upgrades to water systems in host communities.

While assisting the above-mentioned people, the ICRC documented their needs and protection concerns. These were shared with

Jordanian authorities, who were reminded notably of their obligations regarding the principle of *non-refoulement*, and the need to facilitate access to medical care. Asylum-seekers/refugees reported abuses, and relatives arrested or who went missing in Syria; cases were forwarded to the ICRC delegation there.

Families separated by conflict – in Syria, for example – detention and other circumstances reconnected using Movement family-links services. Refugees in camps made phone calls, and people awaiting entry at the border had their families notified of their situation. Some rejoined their relatives or, using ICRC-issued travel documents, resettled in third countries. Detainees, such as those not receiving family visits, contacted their relatives, embassies or UNHCR.

The ICRC visited detainees, including security inmates and vulnerable people; afterwards, the authorities received confidential feedback, helping them improve detainee treatment and living conditions. In line with a 2014 assessment of penitentiary health services, detaining authorities and the health ministry acted jointly to improve these services; an agreement was reached to implement the assessment's recommendations at two places of detention. Medical/security personnel in the region discussed medical ethics and health care for detainees at local events.

To facilitate the work of the Movement in Jordan and the region, the ICRC raised awareness of and support for IHL and the Movement among actors of influence. JAF commanders and military legal advisers, and leaders of Syrian armed groups, were urged and helped to take IHL into account in operational decision-making. The JAF continued efforts to attain full autonomy in IHL education; it trained instructors with ICRC support. The national IHL committee promoted IHL among parties capable of supporting/facilitating its implementation.

The delegation remained a key logistical hub for ICRC operations in the region and beyond. Amman hosted the main training centre for staff members working in the Middle East, the Balkans and the Caucasus.

CIVILIANS

With the National Society and in a complementary role to the authorities and UN agencies, the ICRC worked to protect and assist conflict-affected people from Syria. To help the authorities meet all needs, these people's concerns were documented and shared with them.

Asylum seekers at the Jordan-Syria border meet their urgent needs

Thousands of people tided themselves over with ICRC aid until they received regular assistance and/or were assigned to refugee camps. Many were assisted multiple times throughout their passage from Syria's eastern border with Jordan and through JAF-run transit/registration points. However, amid entry restrictions, the number of those awaiting entry increased, particularly in late 2015 (see *Context*), while that of those proceeding inward dwindled.

In total, over 31,200 people (6,240 households), among whom children, elderly people and pregnant women, consumed high-energy biscuits and nearly 1,490,000 meals cooked by a local restaurant, up to three times daily; many also drank/washed with bottled water, or water trucked to transit sites – totaling 21 million litres. These people maintained their hygiene and improved their living conditions with household essentials, and clothes, firewood and other cold-weather supplies, provided by the ICRC.

Distributions of blankets and mattresses, and upgrades to their improvised shelters, enabled those awaiting entry to stay warm and to sleep more comfortably at night, particularly in winter.

People passing through JAF transit points used facilities – caravans/tents, heaters, toilets and showers, and other infrastructure – installed, upgraded or maintained by the ICRC. Moreover, tens of thousands of residents and refugees had easier access to clean water, following upgrades to water systems in host communities.

Asylum seekers receive health care at two newly opened ICRC mobile clinics at the border

People awaiting entry at Syria's eastern border with Jordan could obtain care on-site after the ICRC opened one mobile clinic each at the Hadlat and Rukban crossing points in November 2015; these were staffed by RMS and ICRC personnel. At briefings, people learnt more about good hygiene practices; together with distributions of hygiene items, these helped people safeguard their health more effectively. People also had medical check-ups at an ICRC-run clinic at the UN/interior ministry-run Raba'a Al-Sarhan transit facility; some received primary health care. The ICRC also established a health post at the Ruwayshid collection site, where a mobile ICRC medical team – staffing the facility on an ad hoc basis – tended to patients.

Other patients, including pregnant women, were treated at RMS-run border health posts or were evacuated by National Society/ICRC ambulances to specialized facilities (see *Wounded and sick*).

Syrian women living outside camps cover their households' basic needs

In host communities in Madaba and Mafraq governorates, monthly National Society/ICRC cash distributions helped some 5,200 Syrian refugee households (26,000 people), primarily headed by women, cover their basic expenses – such as rent and winter expenditures – for up to four months. Some 140 economically vulnerable Syrian and Jordanian women completed vocational courses run by the National Society with ICRC support; along with first aid, they also learnt more about issues related to sexual violence, including the available assistance. This helped them improve their livelihood prospects and mitigate risks of sexual violence.

In Aqaba, Karak, Ma'an, Madaba and Tafileh governorates, 2,772 refugee and vulnerable resident households benefited from distributions of food rations and hygiene items; notably, this helped displaced Syrians resettle into host communities more easily.

In northern Jordan, thousands of potential returnees to Syria learnt more about mine/ERW-related hazards through mine-risk education sessions conducted by the National Committee for Demining and Rehabilitation with ICRC financial/technical support.

Authorities are reminded of their obligations towards people fleeing to Jordan from Syria

During field visits, ICRC delegates documented the concerns of people at the border, in transit facilities or in host communities and refugee camps. Where necessary, the ICRC shared them with the Jordanian authorities at field level and, in cooperation with UNHCR and other humanitarian actors, with the central authorities. Officials were reminded of the need to uphold the principle of *non-refoulement* and facilitate unhindered access to health care. In some cases, oral and written representations by the ICRC led to particularly vulnerable people – such as those in need of medical attention or those separated from their families – being granted passage to access care.

The ICRC used its expanded network of contacts among Syrians in Jordan to gather first-hand accounts of alleged IHL violations committed in Syria. These allegations were conveyed to the ICRC delegation in Syria, which submitted representations to the parties concerned whenever possible; it also processed tracing requests and followed up the situation of people said by their relatives to have been arrested in Syria (see *Syrian Arab Republic*).

Jordanians and foreigners restore/maintain family links

Families in Jordan restored or maintained contact with relatives – including detainees held in Iraq, Lebanon, Yemen, Israel or the occupied Palestinian territory – through RCMs, short oral messages, and, for refugees in camps, phone calls provided with the National Society (see also *Red Cross and Red Crescent Movement*). Those unable to travel to ICRC offices availed themselves of these services during delegates' visits to their homes. People waiting to proceed further from Syria's border with Jordan had oral messages relayed to their relatives in Jordan or elsewhere (see, for example, *Kuwait*).

People resettled or joined their families in third countries with ICRC support. Under ICRC auspices, an unaccompanied 14-year-old minor rejoined his family in Turkey. Over 1,100 people used ICRC travel documents, issued in coordination with IOM, UNHCR and the embassies concerned. Some particularly vulnerable people received special assistance after being referred to other organizations.

The fate of 18 Jordanians missing in Israel since the 1980s remained unresolved.

PEOPLE DEPRIVED OF THEIR FREEDOM

People held by the General Intelligence Department (GID) or detained at police stations and "correction and rehabilitation" centres (CRCs) run by the interior ministry's Public Security Directorate, received regular visits conducted according to standard ICRC procedures. Security detainees and other particularly vulnerable people, including detainees sentenced to death, were followed up individually. Women held for their own protection – against so-called "honour crimes" – administrative detainees and foreigners were referred to NGOs for assistance, as necessary.

Afterwards, findings and recommendations were shared with the detaining authorities and others concerned through confidential oral/written reports, and meetings; discussions covered reinforcing respect for judicial guarantees, and ensuring the social re-integration of released detainees. They were also reminded of the need to uphold the principle of *non-refoulement* for foreign detainees, such as Iraqis, Palestinians and Syrians, fearing persecution in their home countries.

Seventy-six Palestinians from Syria, formerly held in a facility under the authority of the Interior Ministry, resettled in third countries following ICRC advice/encouragement to the authorities; fewer than a hundred of them remained. Owing to decreased demands on penitentiary services, planned assistance with the authorities was reduced; nevertheless, around 10,000 inmates eased their monotony with ICRC-provided books.

Detainees contact their relatives

Detainees, mainly foreigners and security detainees who could not receive family visits, stayed in touch with their relatives through RCMs and short oral messages; the ICRC lobbied for more frequent phone calls for these groups.

At their request, 281 foreign detainees obtained consular protection/advice after their embassies/UNHCR were notified of their detention. Embassy and NGO representatives discussed improving their services for migrant workers during bilateral meetings. Recently released detainees or their families were issued ICRC-issued attestations of detention, qualifying some of them for State benefits.

Health and penitentiary authorities jointly tackle health care for detainees and medical ethics

The findings of a 2014 assessment of health care in CRCs was discussed with the detaining authorities and the health ministry to facilitate/encourage their cooperation, and advise them in reinforcing penitentiary health services. Afterwards, the health ministry and the detaining authorities concluded an agreement to jointly implement the assessment's recommendations at two pilot CRCs; and initiatives for ensuring the supply of medicines/equipment to clinics and improving the management of health information began, reducing the need for direct ICRC support. The health ministry, with ICRC encouragement, also created a division specifically for overseeing matters related to detainees' health, and liaising with detaining authorities.

At three seminars, 95 medical and security personnel from various detaining authorities, including the GID, added to their knowledge of ethical considerations relating to health care in detention, and solitary confinement, hunger strikes and other situations; one official attended an advanced course in Switzerland. Members of medical associations from Jordan and other countries discussed medical ethics in detention, and ways to help detention staff foster respect for them, at an international conference held in Amman and attended by the Jordanian health minister.

WOUNDED AND SICK

Conflict-affected people from Syria receive health/medical care at RMS-run border/transit facilities

At Syria's eastern border with Jordan, wounded/ailing asylum seekers received treatment at three health posts/clinics run by the RMS with ICRC logistical, material and technical support. At Syria's western border with Jordan, another RMS facility, which admitted weapon-wounded Syrians and provided life-saving surgery for them, received medical supplies and upgrades to infrastructure from the ICRC.

Thousands of Jordanians and Syrians train to treat casualties and respond to emergencies

Over 6,500 potential first responders in refugee camps and host communities practiced administering first aid and responding to emergencies, with National Society instructors; following more advanced training, some became first-aid instructors themselves. The National Society was further supported for such activities (see *Red Cross and Red Crescent Movement*).

At ICRC seminars/workshops in Jordan, to help them manage trauma, people treating Syrian casualties had training in: pre-hospital care and war surgery, for 183 Syrian medical personnel working in southern Syria; the Safer Access Framework and the proper handling of remains of deceased people, for 135 Jordanian health workers.

ACTORS OF INFLUENCE

Commanders – JAF officers and Syrian armed group leaders – train in applying IHL in operations

Weapon bearers were encouraged/helped to take IHL into account in operational decision-making. For example, during simulation

exercises in workshops at the JAF's Peace Operations Training Centre (POTC), 47 JAF commanders and 28 military legal advisers learnt more about the principles of distinction, proportionality and precaution, and practised how to apply them. In addition, 144 commanders from Syrian armed groups discussed the conduct of hostilities and the importance of not hindering people's access to health care. Troops from the United States of America, stationed in Jordan, consulted the ICRC on these issues as well.

The JAF continued efforts to become fully independent in IHL training. With ICRC support, the POTC held briefings for: some 40 officers/instructors, helping them boost their ability to train troops in IHL; peacekeepers deploying abroad, familiarizing them with IHL applicable to peacekeeping, and the ICRC's mandate.

Gendarmerie officers learnt more about internationally recognized standards governing law enforcement and the use of force, and issues related to sexual violence. Accordingly, 31 *gendarmes* and 25 peacekeeping police officers took part in train-the-trainer courses, to passing on their knowledge to their peers.

The national IHL committee promotes IHL, amid minimal progress in its implementation

Owing to the government's other priorities, little progress was made in ratifying/implementing IHL-related treaties. Nevertheless, the national IHL committee continued promoting IHL among stakeholders capable of supporting/facilitating its implementation. With the ICRC, the committee published its biannual IHL magazine, and organized workshops at which diplomats, lawyers, newly appointed governors, and others learnt of the obstacles to implementing IHL. Jordanian officials, academics and representatives of Islamic circles attended pertinent events abroad (see *Lebanon*): State officials participated in the Strengthening IHL process, at a meeting in Switzerland.

With a view to reaching future decision-makers, universities were urged to incorporate IHL in their curricula for journalism and law. Academics learnt more about IHL through briefings and ICRC-supported events: law students tested their knowledge at a national moot court competition, organized by the national IHL committee/ICRC; and academics from the region discussed the obstacles to implementing IHL during an international conference at a Jordanian university. Academics could also consult ICRC-provided references at the libraries of some universities and that of the national IHL committee.

State officials and organizations share best practices on humanitarian action

Parties capable of facilitating neutral, impartial and independent humanitarian action or urging others to do so were encouraged to support IHL, the goals of the Health Care in Danger project, and Movement/ICRC action in Jordan.

The authorities, foreign diplomats, international organizations, National Societies, and the ICRC discussed shared concerns, towards enhancing humanitarian action. In particular, with the ICRC: the National Society organized a forum at which 85 participants exchanged best practices for addressing the needs of people affected by the Syrian crisis and Jordanian host communities; and the Jordanian interior ministry held workshops on improving coordination of humanitarian work. At a conference on preventing sexual violence, legal and medical experts were briefed by the ICRC on its approach to the issue. Over a dozen journalists

were encouraged to accurately report on humanitarian issues, at a workshop at a local institute.

The public learnt of the Movement's activities and its history and the Fundamental Principles, at events organized by the National Society with the International Federation/ICRC; the Arabic version of the ICRC's family-links website (familylinks.icrc.org) was launched in this way. A wider audience was reached through communication efforts with the media, and Arabic/English publications and audio-visual materials.

RED CROSS AND RED CRESCENT MOVEMENT

Work with the National Society focused on its expanded activities for conflict-affected people from Syria (see *Civilians* and *Wounded and sick*), and the implementation/development of its strategic plan. Thus, the National Society strengthened its economic-security, family-links and first-aid services, using ICRC financial, material and technical support, for example, to hold courses for staff/volunteers at its national training centre, and fund the salaries of key employees. The National Society was assisted in promoting IHL, raising its profile as a relevant humanitarian actor (see *Actors of influence*), and furthering understanding of the Safer Access Framework among volunteers to help them more safely conduct activities in violence-prone areas.

The National Society took steps to enhance its organizational/financial capacities; it drew on ICRC expertise to adapt its national training centre's services, for example, its first-aid courses, to generate income from external clients.

Regular meetings enhanced coordination among Movement components: the National Society and the Arab Red Crescent and Red Cross Organization hosted one for the region's National Societies; and National Society representatives attended statutory meetings in Switzerland. Movement components drew on ICRC guidance while planning a joint response to the effects of the Syrian crisis.

MAIN FIGURES AND INDICATORS: PROTECTION	Total			
CIVILIANS (residents, IDPs, returnees, etc.)				
Red Cross messages (RCMs)		UAMs/SC*		
RCMs collected	66			
RCMs distributed	55			
Phone calls facilitated between family members	16,427			
Reunifications, transfers and repatriations				
People reunited with their families	1			
Tracing requests, including cases of missing persons				
People for whom a tracing request was newly registered	684	Women	Girls	Boys
People located (tracing cases closed positively)	51			
Tracing cases still being handled at the end of the reporting period (people)	1,532	33	17	59
UAMs/SC*, including demobilized child soldiers				
UAMs/SC reunited with their families by the ICRC/National Society	1			
UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period	1	1		
Documents				
People to whom travel documents were issued	1,130			
Official documents relayed between family members across borders/front lines	2			
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
ICRC visits				
Detainees visited	11,278	Women	Minors	
		608	8	
		Women	Girls	Boys
Detainees visited and monitored individually	820	71	1	7
Detainees newly registered	688	64	1	7
Number of visits carried out	59			
Number of places of detention visited	19			
Restoring family links				
RCMs collected	339			
RCMs distributed	117			
Phone calls made to families to inform them of the whereabouts of a detained relative	109			
People to whom a detention attestation was issued	6			

*Unaccompanied minors/separated children

MAIN FIGURES AND INDICATORS: ASSISTANCE		Total	Women	Children
CIVILIANS (residents, IDPs, returnees, etc.)				
Economic security (in some cases provided within a protection or cooperation programme)				
Food commodities	Beneficiaries	45,077	25%	55%
Essential household items	Beneficiaries	45,077	21%	45%
Cash	Beneficiaries	26,100	93%	5%
Water and habitat (in some cases provided within a protection or cooperation programme)				
Water and habitat activities	Beneficiaries	182,904	25%	50%
	<i>of whom IDPs</i>	182,904		
Health				
Health centres supported	Structures	4		
Average catchment population		4,719		
Consultations	Patients	19,756		
	<i>of which curative</i>		6,642	7,997
	<i>of which ante/post-natal</i>		371	
Referrals to a second level of care	Patients	2,465		
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)				
Economic security (in some cases provided within a protection programme)				
Essential household items	Beneficiaries	10,000		
Health				
Number of visits carried out by health staff		15		
Number of places of detention visited by health staff		5		
WOUNDED AND SICK				
First aid				
First-aid posts supported	Structures	1		
Water and habitat				
Water and habitat activities	Number of beds	34		