

NEW DELHI (REGIONAL)

COVERING: Bhutan, India, Maldives

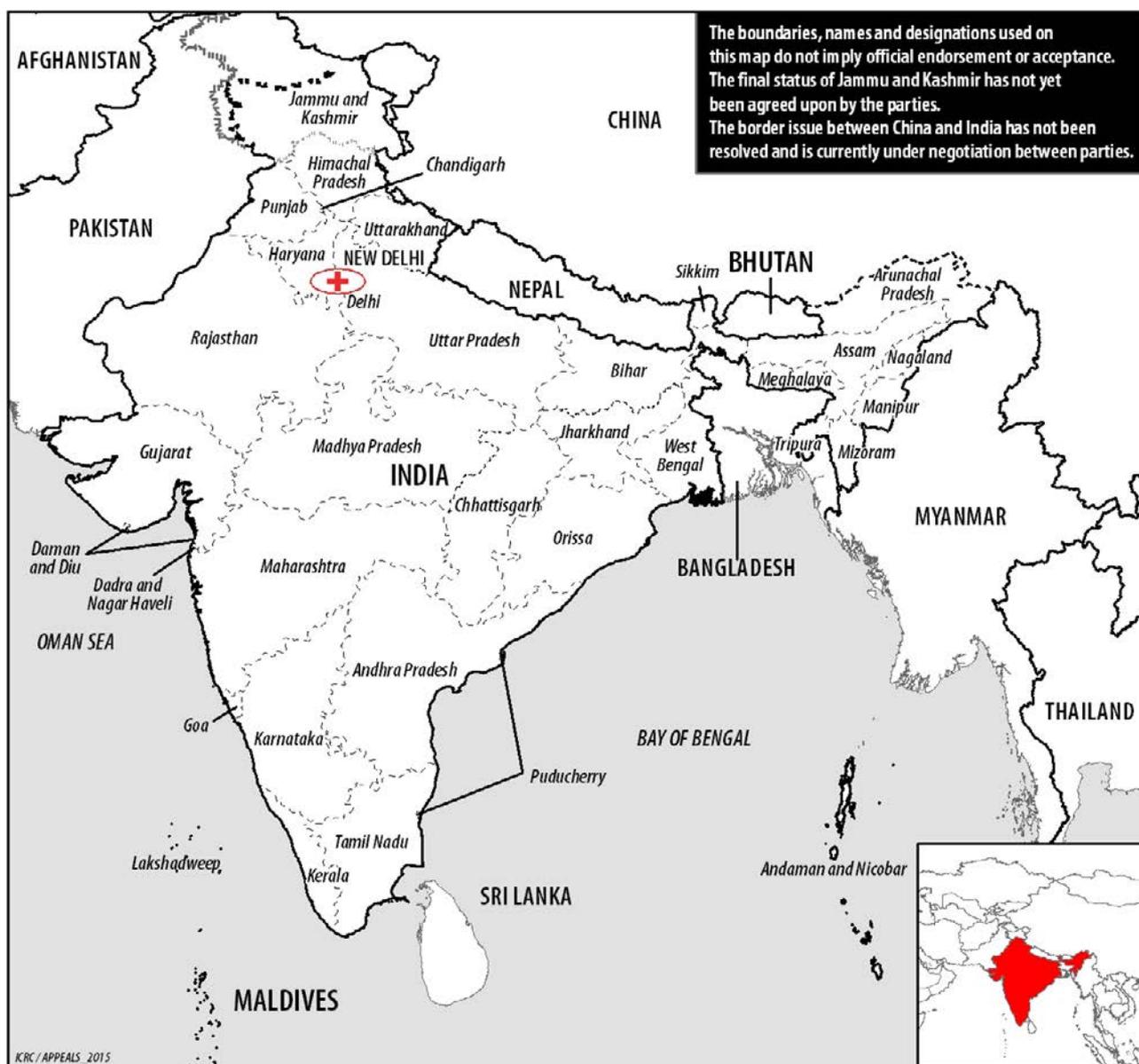
The regional delegation in New Delhi opened in 1982. It works with the armed forces, universities, civil society and the media in the region to promote broader understanding and implementation of IHL and to encourage respect for humanitarian rules and principles. The ICRC visits people arrested and detained in connection with the situation in Jammu and Kashmir (India). With the Indian Red Cross Society, it seeks to assist civilians affected by violence. It supports the development of the region's Red Cross and Red Crescent Societies.

BUDGET IN KCHF

Protection	2,507
Assistance	4,994
Prevention	2,605
Cooperation with National Societies	942
General	166
Total	11,214
<i>Of which: Overheads</i>	<i>684</i>

PERSONNEL

Mobile staff	28
Resident staff (daily workers not included)	142



KRC / APPEALS 2015

 ICRC regional delegation

MAIN TARGETS FOR 2015

- ▶ in India, detainees held in relation to the prevailing situation in Jammu and Kashmir receive ICRC visits aimed at monitoring their treatment and living conditions, and improved health-care services from the authorities concerned
- ▶ Indian authorities, security forces and civil society representatives further their understanding and acceptance of humanitarian principles, IHL and the ICRC's neutral, impartial and independent humanitarian action
- ▶ disabled persons in India benefit from the improved services of the national physical rehabilitation sector, which includes centres directly supported by the ICRC, and from social reintegration support, such as sports activities
- ▶ the Indian Red Cross Society and the Maldivian Red Crescent, supported by the ICRC, develop their capacities to conduct first-aid training, family-links services and/or information campaigns

ASSISTANCE		Targets (up to)
CIVILIANS (RESIDENTS, IDPs, RETURNEES, ETC.)		
Economic security, water and habitat (in some cases provided within a protection or cooperation programme)		
Cash	Beneficiaries	2,100
Water and habitat activities	Beneficiaries	10,000
WOUNDED AND SICK		
Hospitals		
Hospitals supported	Structures	1
Physical rehabilitation		
Projects supported	Structures	6
Patients receiving services	Patients	1,500

CONTEXT

India tackles various economic, social and security issues within its borders, while developing regional and global relationships. The Jammu and Kashmir region continues to suffer from clashes between security forces and militants and from frequent protests. Tensions persist between government forces and armed/ethnic groups in central, eastern and north-eastern regions. These incidents result in casualties and displacements. India's borders with China and Pakistan remain tense.

Economic development is topmost on the agenda of the Bhutanese and Maldivian governments.

HUMANITARIAN RESPONSE

In 2015, the ICRC's regional delegation in New Delhi, India, will continue to visit people detained in connection with the prevailing situation in Jammu and Kashmir, in accordance with its standard procedures. Delegates will monitor detainees' treatment and living conditions, paying particular attention to respect for judicial guarantees, access to health care and the needs of the most vulnerable. On the basis of these visits, they will share their findings and any recommendations confidentially with the authorities. The ICRC will encourage, through regular contacts, and work with stakeholders to coordinate and improve prison health services, including through the continued provision of psychiatric consultations/treatment. In the Maldives, the ICRC will be ready to visit people arrested in relation to unrest. To promote better prison management, it will conduct an assessment of the Maldivian correctional system and share its findings with the authorities concerned. Detainees in Bhutan and India will be given the opportunity to keep in touch with and receive visits from relatives. In India, released detainees individually monitored by the ICRC during their detention will be able to get back on their feet with livelihood assistance from or, where necessary, coverage of the cost of their medical treatment by the ICRC.

With ICRC support, the Indian Red Cross Society will continue to boost its dissemination and emergency response capacities.

Building understanding of and support for humanitarian principles and the ICRC's neutral, impartial and independent humanitarian action in the region and worldwide will remain a priority. The ICRC will develop dialogue with or facilitate discussions among the Indian authorities, security forces and key civil society actors and regional/multilateral organizations. Topics will include matters of common concern, particularly peacekeeping, sexual violence during unrest and issues covered by the Health Care in Danger project. The National Society/ICRC will work with these stakeholders to promote such issues – through information campaigns and local/regional events – among other actors of influence and the wider public. The ICRC will give the necessary support to encourage the Indian security forces and the Maldivian police to integrate IHL and/or internationally recognized policing standards into their training and operations. It will continue to promote ratification and implementation of IHL-related treaties at government level throughout the region.

Where possible, the Indian Red Cross and the ICRC will work together to bring humanitarian assistance to communities in areas affected by violence or natural/man-made disasters and where the availability of basic services is limited.

Wounded and sick people will benefit from life-saving and other medical care from trained and equipped first-aiders, hospital staff or Indian Red Cross volunteers. To serve a higher number of disabled persons, including those in remote areas, the ICRC will provide technical/material support to more physical rehabilitation centres. It will offer similar input to training facilities for professionals and to the national components factory, with a view to enhancing the rehabilitation sector.

Vulnerable households will regain a measure of self-sufficiency with the help of financial grants provided by the ICRC. While providing communities with access to drinking water, the ICRC will also endeavour to work with the local authorities to improve rural water pumping systems.

National Society/ICRC family-links services will be made available to people separated from their families as a result of unrest, detention, natural disasters or migration. Refugees accepted for resettlement in third countries will be issued the necessary travel documents. The ICRC will spon-

sor forensic specialists' participation in courses abroad to help them become more adept at identifying and managing human remains.

The ICRC will continue to support the Maldivian Red Crescent and help it strengthen its capacities in emergency response, family-links services and volunteer management, among others.

The ICRC will coordinate its activities with other humanitarian actors working in fields of common interest to maximize impact, identify unmet needs and avoid duplication of efforts.

HUMANITARIAN ISSUES AND ICRC OBJECTIVES

CIVILIANS

People living in remote parts of India deal with inadequate water/sanitation facilities, limited access to health care and insufficient livelihood support. Vulnerable households, particularly families of detainees and those headed by disabled persons, find it hard to meet their basic needs. Released detainees struggle to reintegrate socially and economically.

Challenges related to obtaining/providing the services mentioned above are exacerbated by tensions and natural/man-made disasters, which displace people and separate them from their families. Identifying the dead is made more difficult by the limitations of national emergency response and the inadequacy of human remains management.

Weapon contamination, particularly in Jammu and Kashmir, hinders the pursuit of daily activities.

India hosts migrants and asylum seekers, as well as refugees who need travel documents to resettle elsewhere.

Objective

Civilians are respected and their basic needs are met. Families separated by violence, migration and natural/man-made disasters are informed of the fate of missing relatives or are able to restore/maintain contact. Refugees have the necessary documents to travel to countries accepting them for resettlement.

Plan of action and indicators

Protection

- ▶ in India, through bilateral contacts and workshops, encourage pertinent institutions to adapt their activities to more effectively address the issues faced by violence-affected populations and health-care workers; provide instruction in professional standards for protection work
- ▶ in coordination with the authorities/organizations concerned, issue travel documents to some 900 refugees in India accepted for resettlement in third countries
- ▶ provide material/financial support and training to the Indian and Maldivian National Societies, particularly Indian state branches in identified priority areas, thus helping them bolster their ability to offer family-links services to people separated from their relatives by unrest, migration or natural/man-made disasters

With the Indian Red Cross:

- ▶ enable the families of refugees, detained migrants and people stranded in Gujarat, Tamil Nadu and West Bengal to communicate with relatives through family-links

services; promote these services through leaflets/films produced for that purpose; evaluate joint family-links activities to improve services

India

Assistance

- ▶ through material/financial support and/or training, help the authorities concerned, emergency responders and National Society volunteers boost their capacities in:
 - disaster preparedness, particularly in assessing/implementing economic security, water and sanitation needs/projects
 - assisting victims of weapon contamination, including through the development of coordinating mechanisms

With the National Society and/or other partner organizations:

Economic security

- ▶ help vulnerable communities regain a measure of self-sufficiency by providing up to 350 vulnerable households with financial grants to start/resume livelihoods, thereby boosting their family's income (2,100 people) by 30% in eight months

Water and habitat

- ▶ improve household water supply/storage for around 10,000 people living in tension-prone areas; supplement these efforts with hygiene-promotion sessions
- ▶ discuss with the central/state authorities the contents of an ICRC-drafted manual on operating and maintaining a solar-powered system for pumping drinking water, with a view to implementing the system in rural areas needing it most

Health

- ▶ monitor the physical and mental health of up to 100 former detainees individually visited by the ICRC during their detention; where necessary, cover the costs of their treatment
- ▶ on the basis of a needs assessment, draft a strategy to address the health needs of communities affected by violence

Weapon contamination

- ▶ support the National Society in assessing the needs of communities affected by weapon contamination; help reduce their risks through information sessions

Forensics

- ▶ during meetings, raise awareness among government officials, forensic specialists and other parties concerned of the need to properly identify and manage human remains; sponsor their participation in courses abroad

PEOPLE DEPRIVED OF THEIR FREEDOM

The detainee population in India includes people held in connection with the prevailing situation in Jammu and Kashmir. Vulnerable detainees have specific needs, including for specialized medical care, that sometimes remain unaddressed. Some detainees are held far from their homes; relatives who wish to visit them cannot always afford the cost of travel. For foreign detainees, means to contact their families are limited.

Nepali-speaking people detained in Bhutan find it difficult to restore/maintain contact with relatives who are refugees in Nepal or have resettled elsewhere.

Despite their efforts, the Maldivian prison authorities struggle to provide basic services for detainees because facilities and financial and human resources are inadequate.

Objective

Detainees are afforded treatment and living conditions, including respect for their judicial guarantees and access to medical care, that comply with applicable national law and internationally recognized standards. They are able to keep in touch with their families.

Plan of action and indicators

Protection

- ▶ in India, visit people held in connection with the prevailing situation in Jammu and Kashmir, according to standard ICRC procedures, to monitor their treatment and living conditions; pay particular attention to preventive detention, respect for judicial guarantees, access to health care, the needs of juveniles and notification of the arrest/repatriation of foreigners
- ▶ backed by summary reports, confidentially discuss with the authorities and other stakeholders the findings during ICRC visits and any recommendations; seek to access all detainees held in relation to the prevailing situation in Jammu and Kashmir, in accordance with the existing agreement between the authorities and the ICRC
- ▶ should people be arrested in the Maldives in relation to unrest, visit them to monitor their treatment and living conditions; conduct an assessment of the Maldivian correctional system and share the findings with the authorities concerned, encouraging them to improve prison management and service delivery

Restoring family links

- ▶ work with the Bhutanese authorities to establish a communication system for detainees and their families; help up to 15 inmates receive biannual visits from relatives living in refugee camps in Nepal
- ▶ with the Indian Red Cross, provide family-links services such as by enabling around 100 detainees, including foreigners, to receive family visits

Assistance

Jammu and Kashmir

- ▶ with the authorities concerned, help enhance health care for detainees by:
 - facilitating coordination between the Health and Prison Departments, including through the establishment of a health in prisons working group
 - organizing at least 1 health care in detention seminar for officials concerned
 - encouraging the continued provision of psychiatric consultations/treatment at up to 3 jails (2 central jails and 1 district jail)
 - providing prison clinics with basic medical equipment/supplies, where necessary
- ▶ with the authorities' approval, distribute educational and recreational items to detainees, particularly minors and women
- ▶ help detainees continue their medical treatment following their release (see *Civilians*)

WOUNDED AND SICK

In violence-affected parts of India, the limited capacities of emergency responders, medical personnel and hospital staff sometimes result in fatalities or unnecessary amputations.

Disabled persons struggle to obtain and pay for rehabilitative services, which are inadequate because of the shortage of rehabilitation centres and qualified staff.

Objective

Wounded and sick patients have access to adequate medical care; amputees and other disabled people have access to sustainable, affordable and good-quality physical rehabilitation services.

Plan of action and indicators

India

Assistance

- ▶ train first-aiders at 8 National Society branches in tension-prone areas in the Safer Access Framework; help these branches design a long-term first-aid strategy
- ▶ with trained National Society volunteers, help ensure that wounded and sick people in violence-affected states receive timely and effective first aid by training and equipping some 900 emergency responders (National Society volunteers, Health Ministry staff, security forces and community members)
- ▶ upon the authorities' request, help hospitals in Jammu and Kashmir improve treatment for wounded and sick patients by:
 - conducting emergency trauma care workshops/seminars for Health Ministry personnel
 - providing 1 hospital in Srinagar with medicines/equipment and training staff in mass casualty management, which includes drafting contingency plans
 - distributing medical supplies to treat around 50 people during emergencies
- ▶ with local partners, organize a Health Emergencies in Large Populations course for local health professionals

Physical rehabilitation

- ▶ enable some 1,500 disabled people to receive free, good-quality physical rehabilitation services at 6 ICRC-supported centres in Jammu and Kashmir and in central and southern regions by:
 - developing referral networks with service providers and organizations to facilitate patients' access to these services
 - covering transport, food and accommodation costs for financially vulnerable patients
 - providing the centres with materials and/or technical guidance for manufacturing prostheses, orthoses and wheelchairs
 - training staff in proper service delivery or operational management
- ▶ on the basis of identified and agreed-upon areas of cooperation with the Social Justice and Empowerment Ministry, help develop and sustain the national physical rehabilitation sector by:
 - reimbursing some of the costs of other centres providing rehabilitation services
 - upgrading the equipment of 1 centre run by the Institute for the Physically Handicapped; supporting the development of its training programme for professionals
 - exploring a partnership with the national components factory for producing artificial limbs using the polypropylene technology

- ▶ promote social inclusion for disabled people through information campaigns, sporting events and livelihood assistance (see *Civilians*)

ACTORS OF INFLUENCE

India contributes contingents to international peacekeeping missions. Internally, the armed/paramilitary forces and the police are engaged in security operations, which include arresting and detaining people allegedly involved in tensions/unrest. With the central and state authorities, these forces help ensure respect for civilians and medical facilities/personnel during such situations. Civil society, particularly academic institutions, regional/multilateral organizations and the media, influence public opinion and contribute to the development of national policies.

In the Maldives, the police are responsible for maintaining public order.

The process of ratifying IHL treaties and incorporating their provisions in domestic legislation is at different stages throughout the region.

Objective

Government officials, security forces and key civil society actors, particularly in India, know and respect IHL and the fundamental rules protecting people in situations of violence, and incorporate these into their decision-making processes. The media, academia and other circles of influence help foster awareness of humanitarian issues and IHL among all those involved in these situations and the wider public, thus achieving greater respect for human dignity. All actors understand the ICRC's mandate and support the work of the Movement.

Plan of action and indicators

Prevention

With the National Society:

- ▶ primarily in India, build understanding of and support for humanitarian principles, IHL and the ICRC's neutral, impartial and independent role in addressing humanitarian issues in the region and elsewhere by:
 - holding bilateral meetings/dissemination sessions with government officials, parliamentarians, armed/paramilitary/police forces and training institutions and civil society representatives, including female interlocutors
 - during seminars, facilitating discussions among the above-mentioned stakeholders on topics of common interest, such as peacekeeping, cyber warfare, sexual violence during unrest and issues covered by the Health Care in Danger project; encouraging the formation of a community of concern to promote respect for medical services
 - briefing operational units of security forces and troops departing on UN peacekeeping missions
 - establishing an IHL working group and enabling post-graduate students and lecturers at universities to participate in national/regional training events and competitions, thereby boosting capacities in IHL instruction and facilitating academic debates on the topic
 - organizing workshops, field visits and competitions for local and regional media to encourage accurate reporting on humanitarian issues

- producing publications and maintaining a website
- ▶ with think-tanks, academic institutions and IHL focal points from the government, increase awareness of and respect for IHL, pertinent treaties and, where applicable, international human rights law by:
 - encouraging the Indian army/police and the Maldivian police to take into account relevant norms, including those related to the use of force and to detainees' judicial guarantees, when reviewing/revising their respective operations and training; sponsoring officials' participation in national/international courses
 - offering the region's governments technical advice on acceding to IHL instruments and enacting implementing legislation; conducting round-tables and consultations or sponsoring officials to attend similar events locally/abroad, such as on the "Strengthening IHL" process and the establishment of national IHL committees; following up pledges in preparation for the 32nd International Conference
 - developing a handbook on best practices in peacekeeping operations
 - strengthening partnerships with multilateral/regional organizations to foster discussion of the subjects mentioned above

RED CROSS AND RED CRESCENT MOVEMENT

The Indian Red Cross, which has over 700 branches countrywide, carries out activities related mainly to health, youth education and disaster management/response.

With support from Movement partners, the Maldivian Red Crescent continues to develop its operational and organizational capacities.

Objective

The region's National Societies have a strong legal basis for independent action. They are able to carry out their core activities effectively. The activities of all components of the Movement are coordinated.

Plan of action and indicators

Cooperation

- ▶ provide the Indian Red Cross financial/material support and training to:
 - strengthen its emergency response capacities during natural/man-made disasters and situations of violence (see *Civilians* and *Wounded and sick*), including by developing contingency plans at 6 branches
 - improve its youth education programmes at 8 branches
 - boost its dissemination/promotional capacities (see *Actors of influence*)
- ▶ provide financial/technical support to the Maldivian Red Crescent to help it develop its emergency response, first-aid, communication and volunteer-management capacities, in accordance with the Safer Access Framework
- ▶ with the International Federation, strengthen partnerships with the Indian and Maldivian National Societies by ensuring the implementation of coordination mechanisms and financial and monitoring controls
- ▶ with Movement components in the region, coordinate emergency response, communication activities and efforts to establish a National Society in Bhutan