OPERATIONS

THE ICRC AROUND THE WORLD

AFRICA

AMERICAS

ASIA AND THE PACIFIC

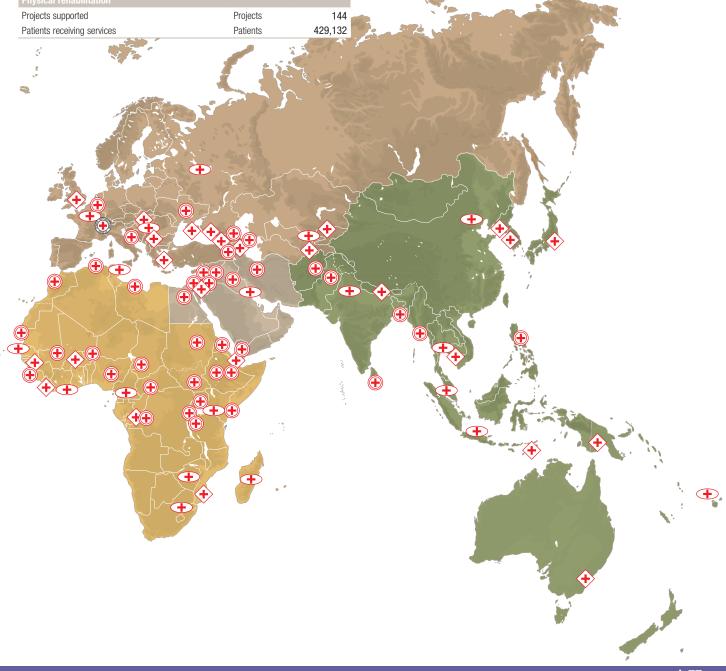
EUROPE AND CENTRAL ASIA

PROTECTION	Total
CIVILIANS (residents, IDPs, returnees, etc.)	
Restoring family links	
RCMs collected	150,632
RCMs distributed	136,863
Phone calls facilitated between family members	777,261
Tracing cases closed positively (subject located or fate established)	7,958
People reunited with their families	980
of whom unaccompanied minors/separated children	800
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)	
ICRC visits	
Places of detention visited	1,437
Detainees in places of detention visited	940,326
of whom visited and monitored individually	35,274
Visits carried out	4,411
Restoring family links	
RCMs collected	25,997
RCMs distributed	13,759
Phone calls made to families to inform them of the whereabouts	41.127



ASSISTANCE		Total
CIVILIANS (residents, IDPs, returnees, e	tc.)	
(in some cases provided within a prote	ction or cooperation progra	mme)
Food commodities	Beneficiaries	7,722,790
Essential household items	Beneficiaries	4,966,300
Productive inputs	Beneficiaries	3,558,480
Cash	Beneficiaries	1,264,416
Vouchers	Beneficiaries	133,153
Services and training	Beneficiaries	1,645,550
Water and habitat		
(in some cases provided within a prote	ction or cooperation progra	
Water and habitat activities	Beneficiaries	35,519,089
Health centres supported	Structures	386
WOUNDED AND SICK		
Hospitals supported	Structures	370
Water and habitat		
Water and habitat activities	Beds	20,485
Physical rehabilitation		
Projects supported	Projects	144
Patients receiving services	Patients	429,132
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EXPENDITURE IN KCHF		
Protection		249,539
Assistance		1,109,837
Prevention		163,911
Cooperation with National Societies		100,364
General		13,498
	Total	1,637,149
	Of which: Overheads	99,560
IMPLEMENTATION RATE		
Francis although Association becomes		
Expenditure/yearly budget		93%
PERSONNEL		93%
. , , ,		93% 2,420
PERSONNEL		



OPERATIONAL HIGHLIGHTS



Central African Republic, Kaga Bandoro. An ICRC staff member visits a camp for IDPs. The ICRC provides water to IDPs through trucking activities and pump systems.

CONFLICT ENVIRONMENTS AND CHALLENGES FOR HUMANITARIAN ACTION

Armed conflicts and other situations of violence continued to affect millions of people around the world in 2017, for instance in Iraq, the Lake Chad region, Mexico, Myanmar and South Sudan. While some of these conflicts were in the media spotlight, others were largely forgotten. In all of them, countless lives and livelihoods were destroyed; this continued suffering called for increased humanitarian action.

With parties to conflict unwilling or unable to reach political solutions, protracted conflicts had become the new norm, hampering reconciliation and reconstruction efforts, and social and economic development. These extended wars also damaged or destroyed basic social systems. Vulnerable populations in countries shattered by protracted conflicts found themselves contending with severe food crises and the spread of diseases such as cholera.

The nature of these protracted conflicts meant that humanitarian agencies had to respond to short-term emergencies, brought about by sudden flare-ups of violence, while meeting longer-term needs in places where vital public infrastructure had been seriously affected. They had to move beyond "palliative care" and address critical vulnerabilities that contributed to, or were caused by, prolonged conflict. Among other efforts, this entailed fixing and installing water supply structures obliterated by war, supporting health infrastructure like hospitals and orthopaedic centres, and enabling people to start sustainable small businesses, thereby contributing to their economic prospects during uncertain times.

Conflicts increasingly affected the stability of neighbouring countries. For instance, violence in northern Nigeria spilled into Cameroon, Chad and Niger. The situation in Syria continued to have consequences for its neighbouring countries, and events in Myanmar affected Bangladesh.

In all armed conflicts, there is a pervading need to improve respect for and implementation of IHL. This has become increasingly challenging because of the complexities arising from, among other factors, asymmetric warfare, the multiplication of parties to conflict, wars waged through proxies, and the regionalization of conflicts. States and armed groups did not always have the political will to ensure respect for basic norms of IHL. Even the most fundamental and unambiguous rules were violated, with devastating consequences for children, women, the elderly and entire communities. While real-time reporting on IHL violations - through social media, for example - offered more visibility to the grim realities of contemporary armed conflict, a sense of prevailing impunity and lack of respect for IHL, and with it indifference towards the plight of victims of war, appeared to be on the rise.

Armed violence continued to ravage a number of cities worldwide. Central America was particularly affected; for example, several states in Mexico faced rising levels of violence and homicide rates. Overcrowding in prisons also had severe consequences in humanitarian terms.

Millions of people worldwide continued to be displaced by armed conflict or other circumstances. IDPs remained the largest group, comprising tens of millions of people. Millions also sought refuge in developing or middle-income countries, which bore the brunt of the burden. To address the specific vulnerabilities of migrants along main transit routes, the ICRC worked with National Societies across borders to ensure that thousands of migrants received support, enabling them to, for example, access health care or restore family links.

OPERATIONS: REVIEW, APPROACH AND THEMATIC CHALLENGES

Together with its partners within the Movement, the ICRC responded to emergencies and ongoing armed conflicts and other situations of violence. It strove to address the needs of millions whose lives were suddenly devastated, or who continued to suffer as a consequence of chronic displacement, lack of basic services, and the loss or detention of their loved ones.

The initial 2017 field budget was CHF 1,612 million. Budget extensions for 12 contexts increased the amount by another CHF 155.7 million, adding up to CHF 1,767.8 million, with a field implementation rate of 92.6%.

It was a particularly difficult year in terms of the security environment. In Afghanistan, in particular, but also in the Central African Republic (hereafter CAR), Mali and South Sudan, the operating environment was characterized by an increasingly fragmented battlefield and a proliferation of armed groups. Eroding respect for IHL and for humanitarian action, and the growing polarization between political and armed actors, had an impact on the security environment.

Overall, the ICRC was able to expand its presence and activities for the people affected in spite of this very difficult and challenging environment. It demonstrated agility and efficiency in its quick response to severe food crises in Nigeria, Somalia, South Sudan and Yemen. In Somalia alone, millions of people received cash, food, or essential household items; in Yemen, the delegation supported health facilities that treated around 86,000 suspected cholera cases. In some contexts, the ICRC remained the only, or one of few, humanitarian agencies on the ground - for example on the front-line areas of the Nagorno-Karabakh conflict, in Crimea, in Marawi in the Philippines, and in northern Rakhine in Myanmar.

It remained vital to the ICRC's operations to maintain relationships with all stakeholders, to forge new ones and to build networks across political, ideological or religious divides. The ICRC thus strove to foster not only acceptance for its activities, but also dialogue on protection and other concerns.

In its response to needs brought about by both acute and protracted crises, the ICRC sought to reinforce and diversify its multidisciplinary approach according to particular vulnerabilities, paying special attention to the specific concerns of children, women, detainees, persons with disabilities, IDPs and migrants. It stepped up its multifaceted response to the needs of victims of sexual violence, including by providing psychosocial support, medical treatment and referrals, and material assistance. It reinforced these activities by engaging in confidential dialogue with weapon bearers on preventing incidents of sexual violence, and implemented campaigns to broaden awareness of the victims' specific needs. Implementing these programmes in contexts where sexual violence was still a highly sensitive issue remained a challenge.

In 2017, the ICRC was sought out as a neutral intermediary, for instance in the well-publicized evacuation of civilians from Aleppo, in the release of a number of Chibok girls in Nigeria, and in the framework of peace negotiations between the Colombian government and the National Liberation Army (ELN). The ICRC was also, in some contexts, one of the only agencies acting on certain humanitarian issues that were largely overlooked: it gave missing persons a voice through its work in the Balkans, Georgia, Peru and elsewhere; and it pursued its efforts on behalf of detainees, including to prevent their ill-treatment, and in support of prison authorities and their work to ease overcrowding.

Being accountable to people affected by conflict is a key part of the ICRC's identity and operational model. In 2017, the ICRC reinforced the effectiveness of its Accountability to Affected People (AAP) approach; it piloted a self-assessment and commissioned an external evaluation, for example, and created a dedicated staff position for overseeing AAP initiatives. Alongside these efforts, the ICRC strengthened existing contact centres, enhancing its ability to analyse and respond efficiently to beneficiary feedback; this complemented the regular, direct engagement of delegations with violence-affected people, and the organization's communications via social media. The ICRC worked with other Movement components to develop an approach that builds on shared experiences, for example by developing and publishing a guide on community engagement and accountability.

Recent years have seen a growing need to support education, which is frequently disrupted by conflict and other violence, often for long periods of time. Following a year-long consultation period, in July 2017, the ICRC approved a formal policy guiding its operational $\,$ response on ensuring or enhancing access to education. Both large and small delegations launched new activities in this regard, or continued existing projects. As a key element of this initiative, the ICRC worked closely with Movement partners and others; a resolution adopted by the Council of Delegates in November 2017 called on the Movement to engage more substantively in this field.

Partnerships – with Movement components and with local organizations - played an increasingly important part in the design and implementation of humanitarian programmes. The International Federation, the National Societies and the ICRC improved their coordination, strengthening the Movement's response in many contexts affected by conflict and other forms of violence.

The ICRC streamlined its operations in certain contexts, enabling it to step up its activities to respond to new developments elsewhere. For example, it opened new offices in the Democratic Republic of the Congo (hereafter DRC) when fresh fighting broke out in the country, and in Mozambique, where tensions between the government and the Mozambican National Resistance had humanitarian consequences. At the same time, it closed its

delegation in Haiti, converted the delegation in Liberia into an office reporting to the Abidjan regional delegation, and prepared to convert the delegation in Guinea into a mission also reporting to the Abidjan regional delegation in 2018.

AFRICA

Across a large part of the African continent, stability remained the exception. The ICRC maintained or stepped up large-scale operations in countries such as the CAR, the DRC, Mali, Niger and Somalia, and responded to urgent needs in others; for instance, it expanded its operations in Libya. It also sought to address the effects of ongoing conflicts on neighbouring countries. For example, while communities in Nigeria bore the brunt, those in Cameroon, Chad and Niger were also affected by attacks and had to cope with the arrival of hundreds of thousands of refugees. In response, the ICRC scaled up its operations in all four countries and coordinated regional action with the pertinent National Societies. In the Sahel region, as needs mounted as a result of spillover from the situation in Mali, the ICRC assisted those affected in the border area of Burkina Faso and Niger.

Many people in South Sudan have lived the past few years on the run. Clashes continued, despite the peace agreement, and nearly 4 million people were reportedly displaced within South Sudan or in neighbouring countries. Food shortages also continued to inflict suffering on hundreds of thousands of people. South Sudan was one of the ICRC's largest operations in 2017; key activities included the provision of food and health-care services, the implementation of projects to ensure access to water and proper sanitation, and visits to detainees.

As an official observer to the African Union, the ICRC worked to highlight issues of humanitarian concern, foster support for Movement operations across Africa and promote greater recognition of IHL and its integration into African Union decisions and policies, while building relations with NGOs and UN agencies based in Addis Ababa, Ethiopia.

AMERICAS

The ICRC's operations in Colombia focused on addressing the consequences of ongoing and past armed conflict and other situations of violence. The government and the Fuerza Alternativa Revolucionaria del Común (FARC) continued to implement their final peace agreement. The ICRC had acted as a neutral intermediary in connection with the peace talks; it also continued to play the same role in, for example, the release of people held by armed groups. As the situation remained precarious for millions of people amid ongoing violence involving other groups, the ICRC continued to respond to the needs of the most vulnerable populations in violence-affected regions.

In the Bolivarian Republic of Venezuela, alongside activities aimed at mitigating the effects of violence in certain areas, the ICRC helped the Venezuelan Red Cross bolster its capacity to respond to medical emergencies, providing support for National Society branches located along the border with Colombia.

In Mexico and in Central and South America, the ICRC - often with the corresponding National Society and local authorities developed programmes to protect and assist people affected by the consequences of armed violence, which included sexual violence and the disruption of essential public services such as health care and education. In El Salvador, Guatemala and Honduras, it worked with specific communities to alleviate the consequences of violence; whenever possible and appropriate, it engaged in dialogue with the authorities on the use of force by military and security forces. In Brazil, the authorities and the ICRC worked to strengthen the availability of health and education services by implementing safer access tools which were developed as part of the "Rio Project", which concluded in 2013.

Across Mexico and Central America, support was given to tens of thousands of migrants who risked their lives on the dangerous journey north, and to the families of missing migrants. The ICRC and the National Societies in Guatemala, Honduras and Mexico encouraged migrants to take measures to reduce safety risks, and provided emergency aid and family-links services along the migration route.

In 14 countries across the Americas, the ICRC regularly visited detainees and supported the authorities' efforts to improve prison conditions and ease overcrowding.

As mandated by the authorities of Argentina and the United Kingdom of Great Britain and Northern Ireland (hereafter United Kingdom), the ICRC exhumed and identified the remains of Argentine soldiers who had perished during the 1982 conflict between Argentina and the United Kingdom; it handed over the results to the authorities for informing the families concerned.

ASIA AND THE PACIFIC

ICRC operations in the vast Asia and the Pacific region faced several exceptional events and challenges. In Afghanistan, a series of serious security incidents prompted the ICRC to scale back its presence and restructure its operations. Although this meant that it assisted fewer people than planned, the organization nevertheless worked to address humanitarian needs brought on by the conflict, providing medical support, clean water and other assistance to those most in need, visiting thousands of detainees and engaging parties to the fighting in dialogue on IHL.

The ICRC also worked to assist those affected by increased violence in the Rakhine state of Myanmar. Together with the Bangladesh Red Crescent Society, it assisted people who had fled the violence and were stranded near or along the Bangladesh-Myanmar border, providing them with emergency aid, medical assistance and familylinks services. In Myanmar, the Myanmar Red Cross Society, the International Federation and the ICRC scaled up humanitarian aid for people affected by the crisis. The ICRC visited detainees in both countries and engaged in dialogue with the authorities on the detainees' welfare.

The ICRC kept up activities in the Philippines to assist detainees and conflict-affected communities, while ramping up emergency aid for those affected by the Marawi crisis. It helped evacuate people stranded owing to the violence, supported those displaced by it, and engaged in dialogue with all parties involved in the fighting.

The ICRC enhanced its cooperation with Movement partners, strengthening its response to urgent humanitarian needs and boosting emergency preparedness, which was especially important given political tensions in Asia and the risk of natural disasters.

Hundreds of thousands of migrants across the region, including asylum seekers, faced terrible conditions and lost contact with their relatives; the ICRC and National Societies did their best to reconnect and reunite them with each other.

In Australia, Indonesia, Japan, New Zealand and Republic of Korea, the ICRC worked to maintain its dialogue with the authorities - as well as with the Association of Southeast Asian Nations and other multilateral organizations - on humanitarian priorities and approaches. In China, it continued to build its relationship with the authorities.

EUROPE AND CENTRAL ASIA

The conflict in eastern Ukraine continued to have a severe impact in humanitarian terms: some 2.8 million people had reportedly been displaced and over 10,000 killed since the beginning of the crisis in 2014. The ICRC continued to work in proximity to those affected: in some areas it was one of the few humanitarian agencies with a significant operational presence and in a position to act as a neutral intermediary between the parties to the conflict. It addressed emergency needs - for instance, in terms of food, housing, and necessities to get through the winter - while continuing to implement longer-term activities related to recovery, such as the protection and repair of critical infrastructure.

The ICRC also continued to respond to the needs arising from the Nagorno-Karabakh conflict and other unresolved disputes in the region. Its close proximity to the most affected communities enabled it to deliver a timely response. In several contexts, for instance in the southern Caucasus and the western Balkans, the ICRC sustained long-term efforts to address the issue of missing persons and the consequences for their families. In Kyrgyzstan and a number of other countries throughout the region, it visited detainees and supported the authorities' efforts to improve detention conditions.

The ICRC consolidated its activities for vulnerable migrants, notably through its operations in Athens, Greece, and Budapest, Hungary, and by backing National Society efforts in countries hosting migrants, such as in Western Europe and the Balkans. It remained focused on its key areas of expertise: monitoring treatment and living conditions in migrant detention centres and strengthening protection for migrants with specific vulnerabilities, such as minors; restoring family links; and helping clarify the fate of missing persons by, for example, providing forensic support.

The ICRC delegations in Brussels (Belgium), London (United Kingdom), Moscow (Russian Federation) and Paris (France) provided essential forums for dialogue and cooperation, particularly on addressing humanitarian concerns relating to major crises and with bodies of regional or international influence, including the Commonwealth of Independent States, the Collective Security Treaty Organization, the European Union and NATO.

NEAR AND MIDDLE EAST

In 2017, much of the world's attention focused on the Middle East, where relentless hostilities and unimaginable atrocities subjected millions of people to enormous hardship and suffering. The ICRC helped provide support for those who remained in the countries concerned, or had fled to neighbouring countries.

The ICRC's operations in the Syrian Arab Republic remained its largest worldwide. From its bases in Aleppo, Damascus, Hassakeh, Homs and Tartus, the ICRC worked closely with the Syrian Arab Red Crescent to respond to needs in government- and oppositioncontrolled areas: millions of people received food and household essentials and/or benefited from projects improving access to water. ICRC delegates visited detainees in central prisons.

Following four years of intense fighting in Iraq, all territories formerly held by the Islamic State group were retaken by government forces, backed by an international coalition; however, while roughly 3 million people reportedly returned home to retaken territories, some 2.6 million people remained displaced at the end of the year. Across the country, the ICRC assisted more than a million of those most affected by the violence by distributing food and essential items, and facilitating access to health care. It also visited places of detention holding tens of thousands of detainees, including foreign nationals, and increased its support for government health projects. In addition to helping families dispersed by the conflict to reconnect, the ICRC continued its work related to people missing in connection with past conflicts involving Iraq.

In Yemen, intensified hostilities led to a sharp deterioration in the humanitarian situation. Indiscriminate attacks were reported on health-care facilities and civilian property, and millions of civilians struggled to obtain basic services and goods; these circumstances contributed to an outbreak of cholera. In response, the ICRC ramped up its operations in the country, providing emergency support to treat tens of thousands of cholera cases and, where possible, scaling up its distributions of emergency assistance. The ICRC continued to engage the different parties to the fighting in dialogue on the conduct of the hostilities and on detention-related issues.

In Israel and the occupied territories, the ICRC continued to support livelihood recovery for people in the Gaza Strip and the West Bank, and helped strengthen emergency preparedness. It visited people in detention and pursued its dialogue with all weapon bearers on IHL and other applicable norms.

The delegations in Egypt, the Islamic Republic of Iran, and Kuwait sought deeper dialogue on humanitarian priorities and approaches with stakeholders in the region.

ICRC OPERATIONS IN 2017 – FACTS AND FIGURES

PRESENCE

In 2017, the ICRC was present in more than 80 countries through delegations, sub-delegations, offices and missions. Its delegations and missions were distributed as follows:

Africa	34
Americas	14
Asia and the Pacific	20
Europe and Central Asia	20
Near and the Middle East	10

PERSONNEL

The average number of ICRC staff in 2017 was as follows:

Headquarters	1,016
Field: mobile staff	2,420
of whom National Society staff	116
Field: resident staff	13,150
Field: total	15,570
Final total	16,586

FINANCE

ICRC expenditure in 2017			
In millions	CHF	USD	EUR
Headquarters	214.4	217.3	193.5
Field	1,637.1	1,659.6	1,477.7
The sub-total comes to CHF 1,851.5 million, from which field overheads (CHF 99.6 million) must be deducted in order to reach the final total.			
Final total	1,752.0	1,776.0	1,581.4

Exchange rates: USD 1.00 = CHF 0.9865; EUR 1.00 = CHF 1.1079

15	15 largest operations in 2017 in terms of expenditure			
In ı	nillions	CHF	USD	EUR
1	Syrian Arab Republic	177.8	180.2	160.4
2	Iraq	128.0	129.8	115.6
3	South Sudan	116.1	117.7	104.8
4	Nigeria	95.4	96.7	86.1
5	Somalia	92.9	94.2	83.8
6	Yemen	77.9	79.0	70.3
7	Afghanistan	75.1	76.1	67.8
8	Congo, Democratic Republic of the	66.8	67.7	60.3
9	Ukraine	53.1	53.8	47.9
10	Israel and the Occupied Territories	49.5	50.2	44.7
11	Lebanon	43.8	44.4	39.6
12	Central African Republic	43.2	43.8	39.0
13	Mali	40.1	40.6	36.2
14	Myanmar	39.5	40.0	35.6
15	Libya	33.6	34.0	30.3

Exchange rates: USD 1.00 = CHF 0.9865; EUR 1.00 = CHF 1.1079

PROTECTION

VISITS TO DETAINEES

ICRC delegates visited 1,437 places of detention, which held a total of 940,326 detainees; they included detainees held by or in relation to the decisions of international courts/tribunals. A total of 35,274 detainees were monitored individually (2,262 women; 2,322 minors); among them, 19,941 detainees (1,776 women; 1,840 minors) were registered and visited for the first time in 2017.

In all, 12,105 people received detention attestations.

RESTORING FAMILY LINKS

The ICRC collected 176,629 and distributed 150,622 RCMs, enabling members of families separated as a result of armed conflict, unrest, migration or other circumstances to exchange news. Of these messages, 25,997 were collected from and 13,759 distributed to detainees.

The ICRC facilitated 777,261 phone and video calls between family members, and made 41,127 phone calls to families to inform them of the whereabouts of a detained relative visited by its delegates. With support provided by the ICRC, 16,792 detainees received visits from their families.

The ICRC established the fate or whereabouts of 7,958 people for whom tracing requests had been filed by their families. Its family-links website (familylinks.icrc.org) listed the names of 15,928 people in a bid to reconnect them with their relatives. A total of 980 people (including minors – see below) were reunited with their families. At the end of the year, the ICRC was still taking action to locate 99,342 people (8,657 women; 19,291 minors at the time of disappearance) at the request of their families.

The ICRC and/or the National Societies concerned registered 3,045 unaccompanied or separated minors (1,228 girls), including 311 demobilized children (72 girls). Once their families had been located and with the agreement of the children and their

relatives, 800 children (291 girls) were reunited with their families. By the end of the year, the cases of 5,511 unaccompanied minors/ separated children (including 253 demobilized children) were still being handled, which involved tracing their relatives, maintaining contacts between the children and their families, organizing family reunification and/or identifying other long-term solutions for the children concerned.

As a neutral intermediary, the ICRC facilitated the transfer or repatriation of 1,559 people, including 273 detainees after their release, and the remains of 1,351 people. It relayed 1,006 official documents of various types across borders and front lines. ICRC-issued travel documents enabled 1,204 people to return to their home countries or to settle in a host country.

A total of 842,571 people contacted ICRC offices worldwide for family-links services or other related concerns.

FORENSICS

The ICRC carried out forensic activities in some 70 contexts to ensure the proper and dignified management of human remains and to help prevent and resolve cases of missing persons. Activities consisted primarily of promoting best practices in collecting, analysing and managing forensic data, and for the recovery, management and identification of human remains in the context of armed conflict, other situations of violence, natural disasters or other circumstances, such as shipwrecks involving migrants. Training and dissemination activities helped build local and regional forensic capacities.

ASSISTANCE

ASSISTANCE SUPPLIES

In 2017, the ICRC delivered the following assistance supplies (purchased or received as in-kind contributions)				
Relief items		CHF 246 million		
Top 10 distributed items				
Food parcels (5 people/1 month)	2,156,424 parcels			
Food parcels (1 person/1 month)	547,545 parcels			
Hygiene parcels (5 people/1 month)	862,711 parcels			
Kitchen sets	376,865 sets			
Blankets	2,478,714 units			
Tarpaulins	669,430 units			
Matting	553,811 units			
Rice	65,585,515 kilograms			
Beans	12,530,121 kilograms			
Oil	4,961,119 litres			
Medical and physical rehabilitation items		CHF 48 million		
Water and habitat items		CHF 36 million		
	TOTAL	CHF 330 million		
		USD 335 million		
		EUR 298 million		

Exchange rates: USD 1.00 = CHF 0.9865; EUR 1.00 = CHF 1.1079

ECONOMIC SECURITY

The ICRC, often in cooperation with National Societies, worked to enhance the economic security of vulnerable individuals, households and communities. 7,794,788 people (residents, IDPs, returnees, refugees - in many cases, people living in rural areas and/or areas difficult to reach owing to insecurity and/or lack of infrastructure - and people deprived of their freedom) received aid in the form of food, and 5,375,228 in the form of essential household items. Approximately 64% of the beneficiaries of food and essential household items were IDPs. A total of 133,153 people were given vouchers that they could exchange for basic commodities or services, and 1,270,811 people received cash, mostly for launching micro-economic initiatives, in exchange for their work on community projects, or as relief assistance. **3,573,222 people** benefited from **productive inputs**, such as seed, tools or equipment, which they used to spur food production or income generation. Assistance in the form of services and training - for instance, animal vaccination campaigns and skills training helped 1,646,433 people boost their livelihoods or employment opportunities.

WATER AND HABITAT

ICRC engineers and technicians, often with local authorities and communities, built or rehabilitated water-supply, sanitation and other infrastructure. This resulted in clean water for drinking or irrigation, reduced health risks or generally better living conditions for 35,519,089 civilians (residents, IDPs, returnees, refugees) and 336,626 detainees.

Infrastructural repairs also contributed to improving services at health facilities with a total capacity of 20,485 beds.

HEALTH

During the year, the ICRC supported - regularly or on an ad hoc basis - 370 hospitals. ICRC personnel provided support or directly monitored activities at 66 of these hospitals, where 24,689 surgical admissions for weapon wounds were registered, and 136,394 operations were performed. Admissions for women or girls receiving gynaecological/obstetric care totalled to 41,808.

The ICRC conducted 5,736 first-aid training sessions for 134,528 people, including National Society volunteers.

The ICRC also implemented community health programmes, in many cases with the help of National Societies. It supported 386 primary-health-care centres (covering an estimated population of 335,116 people, on average), where 4,201,600 curative consultations (children: 30%; women: 23%) and 412,282 ante-natal consultations were carried out.

ICRC staff checked on the health situation of detainees in 535 places of detention and supported 185 health facilities in these places.

PHYSICAL REHABILITATION

People with physical disabilities received good-quality physical rehabilitation services through 144 projects - including physical rehabilitation centres, component factories and training institutions – supported by the ICRC. A total of 12,742 new patients were fitted with prostheses, and 54,382 with orthoses. ICRC-supported projects produced and delivered 26,291 prostheses (of which 6,033 were for mine victims) and 103,995 orthoses (of which 373 were for mine victims). In addition, 7,201 wheelchairs or tricycles were distributed, most of them locally manufactured. Vocational training, sporting events and other activities for disabled persons promoted their social inclusion, while training for local technicians aimed to ensure sustainable service delivery.

WEAPON CONTAMINATON

The ICRC carried out activities for people living in weaponcontaminated areas in 33 contexts. These included mine-risk education sessions, collecting and analysing data on mine-related incidents and contaminated areas, clearance activities and training for local actors. The ICRC also worked with the UN and NGOs to further develop and strengthen international mine-action standards and coordination.

COOPERATION WITH NATIONAL SOCIETIES

ICRC delegations implemented wide-ranging activities in cooperation with National Red Cross and Red Crescent Societies. An important dimension of the ICRC's collaboration with National Societies aimed to strengthen the latter's capacities to carry out their mandates and activities either independently or jointly with the ICRC.

In 2017, the total expenses devoted to cooperation with National Societies in the field amounted to CHF 100 million. These activities were implemented in close coordination with the International Federation of Red Cross and Red Crescent Societies and with National Societies working internationally.

PREVENTION

STATE PARTICIPATION IN IHL TREATIES AND DOMESTIC **IMPLEMENTATION**

The ICRC continued to pursue active dialogue with national authorities worldwide in order to promote ratification of or accession to IHL treaties and their domestic implementation. It provided legal and technical advice to governments and supported them in their endeavours to establish interministerial committees entrusted with the national implementation of IHL. At the end of 2017, there were 111 national IHL committees worldwide.

The ICRC organized or contributed to 35 regional events related to IHL and its implementation in domestic law and policy. Representatives of governments, academic institutions and civil society from over 154 countries attended these events.

This work contributed to 45 ratifications of or accessions to IHL-related treaties or other instruments by 22 States. In addition, 22 countries adopted 31 domestic statutes, and a number of countries prepared draft legislation to implement IHL and other relevant instruments.

RELATIONS WITH WEAPON BEARERS

Throughout the year, ICRC delegates engaged in dialogue with weapon bearers - including State forces, peacekeeping troops and members of non-State armed groups or coalitions of armed groups with a view to promoting respect for IHL and other applicable norms, broadening understanding of the ICRC's mandate and activities, and facilitating safe passage for ICRC staff in the field.

Specialized ICRC delegates also conducted or took part in courses, workshops, round-tables and exercises involving military, security and police personnel in various countries.

Notably:

- ▶ High-ranking officers from 68 countries and several organizations attended the Senior Workshop on International Rules governing Military Operations, held in Mexico City,
- ▶ A total of 105 military officers from 45 countries around the world received ICRC scholarships to attend IHL courses in San Remo, Italy.
- ▶ 30 senior police officers and experts from more than 20 countries exchanged good practices with regard to the treatment of people held in police custody at a round-table held at ICRC headquarters.

RELATIONS WITH ACADEMIC CIRCLES

Through seminars and other events held locally or at the regional or international level, the ICRC stimulated academic debate on humanitarian law, policy and related issues. It worked with various universities, organizing IHL competitions and providing support for IHL teaching and research. Outside the classroom, individual professors participated in the development, implementation and promotion of IHL.

Academic events organized, co-organized or supported by the ICRC included:

- ▶ 14 regional and international IHL training seminars and round-tables, involving professors, experts, lecturers and graduate students;
- ▶ 7 regional IHL competitions, involving students and lecturers;
- ▶ the annual Jean-Pictet Competition on IHL, involving over 140 students from 27 countries.

About 180 groups comprising some 4,600 people, including university students, from over 30 countries learnt more about IHL and the ICRC during information sessions organized by the Visitors Service at ICRC headquarters.

The three latest issues of the International Review of the Red Cross, a peer-reviewed academic journal produced by the ICRC and published by Cambridge University Press, focused on subjects such as war in cities, war and security operations at sea, and detention. The main readership of the journal included lawyers, military experts, academics, humanitarian practitioners and policy-makers. Selected offprints on various topics from previous and forthcoming issues were distributed to targeted audiences and served to enhance dialogue with stakeholders.

Two interactive e-briefings, entitled "Generating respect for the law" and "Humanitarian perspectives on the changing faces of war", were published on the ICRC's website, with content drawn from the International Review.

LAW AND POLICY CONFERENCES AND OUTREACH

The ICRC acted as a convener of public debates and conferences on IHL and humanitarian policy, at which Movement components and members of aid, diplomatic and academic circles reflected on solutions to current challenges and sought to identify ways to improve humanitarian action.

- ▶ The Humanitarium at the ICRC's headquarters in Geneva, Switzerland, hosted 15 public conferences on international law and policy, bringing together 2,300 diplomats, humanitarians and academics.
- ▶ With various partners, the ICRC organized a conference cycle on "War in Cities", comprising ten high-level public events and expert meetings in seven countries. Ten public conferences in Geneva addressed other pressing humanitarian topics.

These events reached a global audience through live webcasts, video summaries, conference reports, blog posts and other online resources.

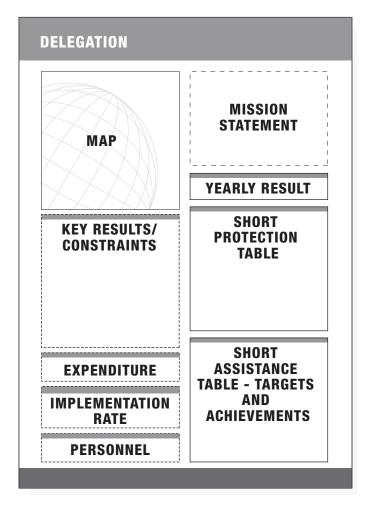
The ICRC's Humanitarian Law and Policy blog showcased analyses and debates on IHL and policies that shape humanitarian action and the interplay between these areas; it generated 65,189 unique visits.

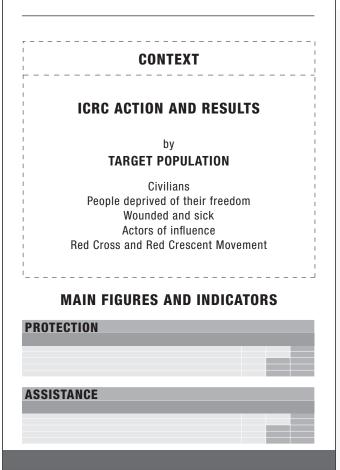
PUBLIC COMMUNICATION

The ICRC's humanitarian concerns and activities were widely covered by the media. The ICRC was mentioned some 20,000 times in traditional and online media, over 5,200 of which were on major media outlets and news agencies such as AFP, Al Jazeera, BBC News, CNN, Deutsche Welle, Le Monde, Reuters, The New York Times, The Guardian and Xinhua. Over 1,000 channels edited ICRC footage into some 6,400 broadcasts; the most popular, covering the cholera crisis in Yemen, was featured on 198 broadcasts on 43 channels. Footage of ICRC operations in Somalia and South Sudan, where journalists struggled to get access, was also widely used.

The ICRC's main website (icrc.org) generated over 500,000 visits. Updates posted on social media helped spread further awareness of humanitarian issues. The ICRC's English-language Twitter account and Facebook page had 2.2 million and 1.2 million followers, respectively; these, and social media accounts in other languages, provided opportunities for the organization to engage directly with stakeholders and the wider public.

ER GUIDE: YOUT OF DELEGATION SECTIONS





Each chapter on the ICRC's field delegations and missions comprises the following elements:

- 1. **Delegation:** the State(s), geographical areas and/or political entities covered by the ICRC's presence
- Map: the country or region showing the ICRC's presence at the end of the year; the maps in this publication are for information purposes only and have no political significance
- 3. Mission statement: the ICRC's reasons for being in the country or region and its main activities there
- 4. Yearly result: the level of achievement of the ICRC's objectives and plans of action
- 5. Key results/constraints: up to six major achievements or examples of progress made by the ICRC - or constraints it faced - in meeting its humanitarian objectives in a given
- 6. Short Protection table: a table providing key indicators regarding activities for restoring or maintaining family links and for people deprived of their freedom
- 7. Short Assistance table targets and achievements: a table juxtaposing targeted beneficiary numbers or other result indicators (as presented in ICRC appeals) against those achieved during the reporting period

- 8. Expenditure: total, and by programme
- 9. Implementation rate: expenditure divided by yearly budget multiplied by 100 (indicator)
- 10. Personnel: the average number of mobile and resident staff employed over the course of the year
- 11. Context: the main developments in a given context and how these have affected people of concern to the ICRC; this segment highlights the elements that the ICRC took into consideration when analysing the situation to carry out its humanitarian
- 12. ICRC action and results: an executive summary of the ICRC's action and results in the given context
- 13. ICRC action and results by target population: a description of the ICRC's action and the results for each main target population; this section reports on the objectives and plans of action in yearly appeals and budget extension appeals, includes qualitative and quantitative results (output, outcome and contribution to impact), and combines activities carried out in the four ICRC programmes, thus illustrating the ICRC's multidisciplinary approach
- 14. Main figures and indicators: two tables providing key output and outcome figures for the delegation's protection and assistance programmes

The ICRC aims to ensure that people affected by armed conflict and other situations of violence receive effective and relevant support, in fulfilment of the organization's mandate and its responsibility to use donor funds optimally. It employs result-based management, a structured approach that focuses on the desired and expected results for the beneficiaries throughout the management cycle.1 A central element of this approach is the ICRC's yearly planning process and continuous monitoring of its activities; where necessary, it re-assesses the needs of the people affected to ensure that its response is adapted to their circumstances. Each year, specialists and managers in the field and at headquarters assess and analyse all ICRC operations, reviewing the progress made in terms of project implementation and the results achieved against the objectives defined during the planning process. On this basis, and in line with its corporate management framework², the ICRC appraises its performance in each operation and defines new plans for the year to come.

The present report provides the outcomes of these appraisals, made exclusively according to the objectives and plans of action defined for each context.

The "yearly result" indicates the level of success in achieving these objectives and plans of action, using the scale below:

LOW

MEDIUM

HIGH

The rating for each context's yearly result is based on the response to these questions: What is the level of achievement of the ICRC's objectives and plans of action for the given year? To what extent did the ICRC implement its plans of action as defined in its appeals? These objectives and plans of action are presented in the yearly appeals and budget extension appeals issued to donors. Scores are not based on the overall humanitarian situation in the context or on the institutional ambition the ICRC may have in that context.

See The ICRC's operational approach to result-based management: improving humanitarian action

See ICRC management framework and descriptions of programmes

USER GUIDE: FIGURES AND INDICATORS — EXPLANATIONS

INTRODUCTION

Each context chapter of the Annual Report presents numerical data for a set of standard indicators for the ICRC's protection and assistance programmes. Where relevant, these figures are presented in the report's narrative and in tables:

- short tables of key figures for each programme, on the front
- main tables of standard figures by programme, at the end of the section; and
- additional tables within the report, with specific disaggregated indicators relevant to the operations in that context.

It must be noted that these figures do not always capture the extent of the ICRC's action, results and priorities. Collecting, interpreting and managing data in contexts as diverse and volatile as those the ICRC is active in is particularly difficult to prioritize, if not impossible to undertake. Factors such as cultural and/or Stateimposed restrictions (e.g. government policies against providing data on health-care activities or gender-specific breakdowns of beneficiaries); inaccessibility due to conflict or other crises; adverse environmental conditions; and internal constraints may be barriers to such efforts.

Moreover, other types of support and results are simply impossible to quantify; however, their relevance should not be discounted: for example, the precise impact of dialogue with different authorities or weapon bearers or the multiplier effect of training initiatives cannot be reflected in numbers.

The standard indicators and their definitions are listed below.

PROTECTION FIGURES AND INDICATORS

GENERAL

Child or minor

A person under 18 or under the legal age of majority¹

A female person under 18 or under the legal age of majority

Woman

A female person aged 18 or above the legal age of majority

Basis for the figures

All figures - except for detainees in places of detention visited are precise and are based on registrations, counting or recorded activities carried out by the ICRC or the ICRC's partners, mainly National Societies. Figures for detainees in places of detention visited are based on figures provided by the detaining authorities.

RESTORING FAMILY LINKS

RED CROSS MESSAGES (RCMS)

RCMs collected

The number of RCMs collected, regardless of their destination, during the reporting period

RCMs distributed

The number of RCMs distributed, regardless of their origin, during the reporting period

OTHER MEANS OF FAMILY CONTACT

Phone calls facilitated between family members

The number of calls, including those made via cellular or satellite phone, facilitated by the ICRC between family members

Phone calls made to families to inform them of the whereabouts of a detained relative

The number of calls made by the ICRC to inform families of the whereabouts of a detained relative

Names published in the media

The number of names of people – those sought by their relatives or those providing information about themselves for their relatives published in the media (e.g. newspaper or radio broadcast)

Names published on the ICRC family-links website

The number of names of people – those sought by their relatives or those providing information about themselves for their relatives published on the ICRC's family-links website (familylinks.icrc.org)

REUNIFICATIONS, TRANSFERS AND REPATRIATIONS

People reunited with their families

The number of people reunited with their families under the auspices of the ICRC and the National Society during the reporting period

People transferred or repatriated

The number of people transferred or repatriated under the auspices of the ICRC during the reporting period (not including those in the context of detention)

Human remains transferred or repatriated

The number of people whose remains were transferred or repatriated under the auspices of the ICRC during the reporting period (not including those in the context of detention)

TRACING REQUESTS

Tracing requests

All cases of people whose fates are unknown either to their families or to the ICRC, and for whom the ICRC is going to undertake efforts to clarify their fate or to confirm their alleged fate; these can include allegations of arrest and co-detention, and tracing requests collected following unsuccessful attempts to restore family links by other means

People for whom a tracing request was newly registered

The number of people for whom tracing requests were initiated by their families during the reporting period, for instance, because there had been no news of them, they could not be located using RCMs, or they were presumed to have been arrested and/or detained

Based on the definition of a "child" in the 1990 Convention on the Rights of the Child $(See\ at:\ http://www.ohchr.org/EN/ProfessionalInterest/Pages/CRC.aspx)$

Tracing cases closed positively

The number of people for whom tracing requests had been initiated and who were located or whose fates were established during the reporting period

Tracing cases still being handled at the end of the reporting period

The number of people for whom tracing requests were still open and pending at the end of the reporting period

UNACCOMPANIED MINORS, SEPARATED CHILDREN AND DEMOBILIZED CHILD SOLDIERS

Unaccompanied minors (UAMs)

A person under 18 or under the legal age of majority separated from both parents and from all other relatives and not being cared for by an adult who, by law or custom, is responsible for doing so

Separated children (SC)

A person under 18 or under the legal age of majority separated from both parents or from his or her previous legal caregiver but accompanied by another adult relative

UAMs/SC/demobilized child soldiers newly registered by the ICRC/National Society

The number of UAMs/SC/demobilized child soldiers registered by the ICRC or the National Society during the reporting period, and whose data are centralized by the ICRC

UAMs/SC/demobilized child soldiers reunited with their families by the ICRC/National Society

The number of UAMs/SC/demobilized child soldiers reunited with their families by the ICRC or the National Society

UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period

The number of UAMs/SC/demobilized child soldiers whose cases were opened but who had not yet been reunited with their families - by the ICRC or the National Society concerned, or by another organization – during the reporting period; these include cases concerning children whose parents were being sought or had been found but with whom the children had not yet been reunited

DOCUMENTS

People to whom travel documents were issued

The number of individuals to whom the ICRC issued travel documents during the reporting period

Official documents delivered across borders/front lines

The number of documents - e.g. passports, power of attorney documents, death certificates, birth certificates, marriage certificates – forwarded or transmitted during the reporting period

People to whom a detention attestation was issued

The number of people who received documents testifying to their detention, according to ICRC records of visits, during the reporting period

PEOPLE DEPRIVED OF THEIR FREEDOM

Places of detention visited

The number of places of detention visited, including places that were found empty when visited, during the reporting period

Detainees in places of detention visited

The total number of detainees, according to the detaining authorities, in places of detention visited by the ICRC

Visits carried out

The number of visits made, including those to places found empty when visited, during the reporting period

Detainees visited and monitored individually

The number of detainees visited and monitored individually those seen and registered for the first time and those registered previously and visited again during the reporting period

Detainees newly registered

The number of detainees visited for the first time since their arrest and registered during the reporting period

Detainees visited by their relatives with ICRC/National Society support

The number of detainees who received at least one family visit that was organized or financed by the ICRC, often in coordination with the National Society

Detainees released and transferred/repatriated by/via the **ICRC**

The number of detainees who were released and whose transfer or repatriation was facilitated by the ICRC

ASSISTANCE FIGURES AND INDICATORS

GENERAL

Woman

Female person aged 15 and above

Man

Male person aged 15 and above

Girl

Female person under the age of 15

Boy

Male person under the age of 15

Basis for the figures

- ▶ Depending on the environment and circumstances of the context concerned, the activities implemented, or the services delivered or supported, beneficiary figures are based either on ICRC-monitored registrations (of individuals or households) or on estimates made by the ICRC or provided by credible secondary sources (e.g. the communities, authorities, published official figures, other humanitarian organizations). Whenever possible, triangulations are used when the figures are based on estimates and secondary sources.
- ▶ In some cases, operational constraints may hamper the collection of disaggregated figures for women, children and IDPs. For example, not all hospitals supported are able to provide precise figures for women and children; this may result in understated figures for these groups. Estimated figures for IDPs are provided whenever possible.
- ▶ In the field of *economic security*, beneficiary numbers are based on the documentation of field distributions and/or on the ICRC's calculated estimates of the number of people who benefited from each commodity type at least once during

- the year. Particular effort is taken to avoid double-counting beneficiaries.
- ▶ In the field of water and habitat, beneficiary numbers are based mainly on ICRC estimates and credible secondary sources.
- ▶ In the field of *health*, beneficiary numbers are based mainly on figures provided by local health authorities and health teams in charge of health facilities.
- ▶ In the field of *physical rehabilitation*, the numbers of beneficiaries and devices are based on the registration of individuals and the number of devices (units) provided.

Target figures

For each context, a table juxtaposes the achieved beneficiary numbers or other result indicators for the target populations Civilians and Wounded and sick against the initial targets set by delegations for the whole year; these targets are determined during the planning process undertaken in the middle of the previous calendar year or, in emergency cases, ad hoc planning processes during the year itself.

Targets are indicated in short summary tables in the ICRC's appeals to donors and in budget extension appeals. These figures include only what can be defined in advance.

During the planning process, delegations use standard averages for the number of individuals per household; these figures may be found to be higher or lower than the actual household sizes once the activities are implemented. Delegations also cannot specifically predetermine the number of health facilities that will receive medical materials on an ad hoc basis, in response to emergencies; hence, targets only include regularly supported health centres and hospitals. However, achieved figures in Midterm and Annual Reports include figures for ad hoc support.

Similarly, delegations face limitations in precisely classifying beneficiaries or the exact type of assistance they will receive. For example, they may establish targets for emergency relief, such as food or essential household items, and record beneficiaries accordingly during their planning. However, the circumstances during the delivery of the assistance could make it more appropriate $% \left(1\right) =\left(1\right) \left(1\right$ to provide the relief through cash or vouchers, with which these commodities may be procured. Moreover, while delegations may count beneficiaries under productive inputs during their planning, beneficiaries may instead receive livelihood support by way of cash or services and training during project implementation, according to what best suits their needs and capacities, and the situation. Even then, some eventual beneficiaries of cash or services and training are not always included in the targets defined for those categories. This may be because cash allowances and training are often provided as complements to productive inputs (e.g. beneficiaries of farming equipment will also receive training on how to operate them; donations of livestock may come with financial support for veterinary services). Despite efforts to harmonize definitions and data entry, operational constraints or differences in the interpretation of indicators may also affect the results presented.

Major differences between targets and achievements – both when targets are not met or are exceeded - highlight the difficulty of precisely foreseeing needs and implementing humanitarian responses, as the dynamics of instability, security and access, as well as operational capacities, can shift very rapidly during the year. These changes may prompt delegations to adapt their approaches - initiating, rescaling, or cancelling certain activities, as appropriate – to the prevailing conditions. The narrative report provides, explicitly or implicitly, information explaining major differences.

ECONOMIC SECURITY

BENEFICIARIES

The number of beneficiaries of each type of commodity or service cannot be cumulated, as some people may have benefited from more than one type of commodity or service during the reporting period. This is typically the case with beneficiaries of microeconomic initiatives, who usually receive a combination of different commodities.

Food commodities

Per population group, the number of individuals who have received one or more food items at least once during the reporting period. This includes people who have benefited from food as compensation for work they carried out, for example, on community projects. Food items distributed typically include rice, wheat flour, maize, beans, oil, sugar, salt and, sometimes, canned food and ready-to-use therapeutic or supplementary food.

Essential household items

Per population group, the number of individuals who have received one or more essential household items or similar commodities at least once during the reporting period; items distributed typically include tarpaulins, blankets, basic clothing, kitchen sets, hygiene kits, soap, jerrycans and mosquito nets

Productive inputs

Per population group, the number of individuals who have, at least once during the reporting period, benefited from at least one form of livelihood input (e.g. fertilizer, animal vaccines, seed, tools, fishing boats, equipment) or other type of material assistance (for instance, for microeconomic initiatives such as carpentry, welding, food processing, trade)

Cash

Per population group, the number of individuals who have benefited from cash assistance at least once during the reporting period; this includes those who have received cash either as a form of relief assistance or for launching microeconomic initiatives, and those who have received cash in exchange for work they carried out, for example, on community projects

Vouchers

Per population group, the number of individuals who have benefited from vouchers to be exchanged for specified commodities, services or training, at least once during the reporting period

Services and training

Per population group, the number of individuals who have benefited at least once during the reporting period from services (e.g. agricultural services, such as tractor ploughing, or veterinary support, such as animal vaccinations) or training that helped them pursue their livelihoods or address other related needs

WATER AND HABITAT

One beneficiary is one person who has benefited from a water and habitat project at least once over the course of the reporting period. A person who has benefited from a project several times is counted only once.

For recurrent projects like water-trucking or the regular provision of materials (chlorine, spare parts, etc.), beneficiaries are counted only once.

Civilians

The number of people - residents, IDPs, returnees and, in some cases, refugees - who have benefited from a water and habitat project at least once during the reporting period; projects include the repair or construction of wells, boreholes, springs, dams, water-treatment plants, latrines, septic tanks or sewage plants; shelter provision or repair; hygiene promotion; and vector-control activities

People deprived of their freedom

The number of detainees in places of detention where the ICRC has undertaken water and habitat projects (e.g. rehabilitation of detention centres, repairs to water-supply, sanitation and kitchen facilities serving detainees, hygiene promotion, vector-control activities)

Wounded and sick

The number of beds in the structures supported; projects include the construction or rehabilitation of hospitals and physical rehabilitation centres

HEALTH

It should be noted that in a number of contexts, data about patients and health activities cannot be provided or are only provided in part. The main reasons include the lack of proper data collection systems at facility level and difficulties in transmitting information from the facility to the central level and/or the ICRC - both of which result in incomplete information. For regularly supported facilities, the ICRC endeavours to help local teams establish data management systems to address these deficiencies. In some cases, restrictions by the authorities may limit the types of data made available to the ICRC or the organization's ability to make further use of the information.

PRIMARY HEALTH CARE

The beneficiaries of primary-health-care activities are registered and tallied based on the particular service they have received (e.g. antenatal consultation, curative consultation, immunization, referral).

Health centres supported

The total number of health facilities supported (target figures include only regularly supported health facilities)

Average catchment population

The estimated number of people covered by ICRC-supported health centres, on average, per month

Consultations

The number of consultations carried out at ICRC-supported health centres, further broken down by type of consultation (curative or antenatal)

Immunizations

The number of patients who benefited from immunization activities; this includes children aged five or under who were vaccinated against polio

Referrals to a second level of care

The number of patients who were referred to other health facilities or service providers for further care

HEALTH ACTIVITIES FOR PEOPLE DEPRIVED OF THEIR FREEDOM

Places of detention visited by health staff

The number of places of detention visited by health staff – as part of an ICRC team during a standard visit, or to address specific medical issues

Health facilities supported in places of detention visited by health staff

The number of health facilities supported in places of detention visited by ICRC health staff

HOSPITAL SUPPORT

Hospitals supported

The total number of hospitals supported, including hospitals reinforced with or monitored by ICRC staff, and those that were given supplies on an ad hoc basis

Hospitals reinforced with or monitored by ICRC staff

The number of ICRC-supported hospitals where ICRC doctors or other staff are managing operations, providing care to patients, assisting local personnel and/or monitoring activities. The ICRC's support can target specific departments or services in these hospitals.

SERVICES AT HOSPITALS REINFORCED WITH OR MONITORED BY ICRC STAFF

Surgical admissions²

WEAPON-WOUND CASES

The number of weapon-wound cases among surgical admissions, including cases of injuries due to mines or explosive remnants of war

NON-WEAPON-WOUND CASES

The number of surgical admissions that are not associated with weapon wounds

Medical (non-surgical) admissions

The number of admissions at the medical department of ICRC-supported hospitals; these include internal medicine and other non-surgical cases

Operations performed

The number of surgical procedures performed on weaponwounded and non-weapon-wounded patients; more than one procedure can be performed per patient

Gynaecological/obstetric admissions

The number of admissions for gynaecological/obstetric conditions

Consultations

The number of consultations recorded at outpatient departments or emergency rooms at hospitals supported by the ICRC

An "admission" refers to an instance of a patient being admitted into an ICRC-supported hospital. A patient may be admitted into an ICRC-supported hospital more than once during the reporting period.

Patients whose treatment was paid for by the ICRC

The number of patients whose consultation, admission and/or treatment fees were regularly or occasionally paid for by the ICRC

SERVICES AT HOSPITALS NOT MONITORED **DIRECTLY BY ICRC STAFF**

Surgical admissions (weapon-wound and non-weapon-wound admissions)

The total number of surgical admissions, including weapon-wound and non-weapon-wound admissions

Weapon-wound admissions (surgical and non-surgical admissions)

The total number of weapon-wound admissions, including surgical and non-surgical admissions

Weapon-wound surgeries performed

The total number of surgeries performed on weapon-wounded patients; more than one procedure can be performed per patient

FIRST AID

First aid training sessions

The number of first-aid training sessions carried out by the ICRC during the reporting period

Participants

The total number of participants in first-aid training sessions carried out by the ICRC during the reporting period; these participants can include community members, weapon bearers, ambulance-service providers, staff of public agencies, health-care personnel of public or private institutions, first-aid trainers, National Society volunteers or staff, or others

PHYSICAL REHABILITATION

Projects supported

The number of projects, including centres, component factories and training institutions, receiving ICRC support or managed by the ICRC

Patients receiving services (sum of monthly data)

The sum of monthly data for patients (amputees and non-amputees) who received services from ICRC-supported projects – both new and former patients who came for new devices, repairs (to prostheses, orthoses, wheelchairs, walking aids) or physiotherapy

New patients fitted with prostheses

The number of new patients (new to the ICRC) who received prostheses during the reporting period – both those fitted for the first time and patients who had previously received prostheses from a centre not assisted by the ICRC

Prostheses delivered

The total number of prostheses delivered during the reporting period, including for victims of mines or explosive remnants of war

New patients fitted with orthoses

The number of new patients (new to the ICRC) who received orthoses during the reporting period – both those fitted for the first time and patients who had previously received orthoses from a centre not assisted by the ICRC

Orthoses delivered

The total number of orthoses delivered during the reporting period, including for victims of mines or explosive remnants of war

Patients receiving physiotherapy

The number of patients who received physiotherapy services during the reporting period

Walking aids delivered

The number of crutches and sticks (units, not pairs) delivered during the reporting period

Wheelchairs or tricycles delivered

The number of wheelchairs or tricycles delivered during the reporting period