

uganda



The ICRC has been present in Uganda since 1979. Given the progress towards peace in the north of the country, ICRC assistance activities, many of which are implemented in partnership with the Uganda Red Cross Society, have been scaled down in response to decreasing humanitarian needs. In parallel, the ICRC continues to monitor the treatment of detainees and strives to raise awareness of IHL and humanitarian principles among the armed and police forces.

EXPENDITURE (IN KCHF)

Protection	1,156
Assistance	12,660
Prevention	1,102
Cooperation with National Societies	2,008
General	-

► **16,927**

of which: Overheads 1,032

IMPLEMENTATION RATE

Expenditure/yearly budget	90%
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PERSONNEL

27 expatriates
219 national staff (daily workers not included)

KEY POINTS

In 2009, the ICRC:

- boosted the livelihoods of 185,324 IDPs/returnees through agricultural and other income-generating initiatives
- improved 110,507 returnees' water supply and sanitation by rehabilitating/constructing water points and, in partnership with the Swedish and Ugandan Red Cross Societies, promoting good hygiene practices
- concluded a three-year project to support Kitgum Government Hospital, providing it with medical supplies and staff training and rehabilitating key infrastructure
- reunited 40 unaccompanied/separated children with their families, including by repatriating 13 to the Democratic Republic of the Congo or Sudan
- improved environmental health in 3 prisons by upgrading sanitation facilities for 3,983 detainees, launching tuberculosis screening programmes and distributing essential household items
- signed an agreement with the Ugandan army to revise military manuals from an IHL perspective

CONTEXT

Following a military campaign launched jointly with the armed forces of the Democratic Republic of the Congo (DRC) and South Sudan in mid-December 2008 against the Lord's Resistance Army (LRA) in the north-eastern DRC, the Uganda People's Defence Force (UPDF) withdrew most of its troops in March (see *Congo, Democratic Republic of the*). The UPDF nevertheless continued to back military operations against the LRA in the DRC and, later in the year, carried out similar operations against the LRA in the Central African Republic.

The security situation in northern Uganda remained calm, however, with IDPs continuing to return to their home villages or to transit camps nearby. Sporadic violence occurred in Uganda's north-eastern Karamoja region as a result of intertribal cattle rustling and UPDF endeavours to disarm traditional warriors.

Ahead of the country's planned 2011 general elections, the national political climate hardened. In September, violent protests broke out in Kampala over a planned visit by the traditional king of the Baganda, Uganda's largest ethnic group, to an area north-east of the capital.

Since 2008, tens of thousands of refugees had arrived in western Uganda, the majority of them fleeing fighting in the DRC's Kivu provinces. Supported by UNHCR voluntary repatriation programmes, many Sudanese and Rwandan refugees in Uganda returned home in 2009.

Localized border disputes with the DRC, Kenya and South Sudan flared up occasionally and were largely addressed at the political level.

MAIN FIGURES AND INDICATORS

	Total		Total	Women	Children
PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)		CIVILIANS (residents, IDPs, returnees, etc.)			
Detainees visited	4,032	Economic security, water and habitat			
Detainees visited and monitored individually	179	Essential household items	Beneficiaries	30,914	21%62%
	of whom women		of whom IDPs	30,914	
	of whom minors	Agricultural and veterinary inputs and micro-economic initiatives	Beneficiaries	185,324	21%62%
Number of visits carried out	110		of whom IDPs	185,324	
Number of places of detention visited	52	Water and habitat activities	Beneficiaries	110,507	25%50%
RESTORING FAMILY LINKS			of whom IDPs	110,507	
Red Cross messages (RCMs) and reunifications		Health			
RCMs collected	1,934	Health centres supported	Structures	13	
RCMs distributed	806	Consultations	Patients	122,238	
People reunited with their families	40		of which curative		87,03242,363
Tracing requests, including cases of missing persons			of which ante/post-natal		8,501
People for whom a tracing request was newly registered	35	Immunizations	Doses	112,344	
	of whom women	PEOPLE DEPRIVED OF THEIR FREEDOM			
	of whom minors at the time of disappearance	Economic security, water and habitat			
Tracing cases closed positively (persons located)	71	Essential household items	Beneficiaries	5,293	
Tracing cases still being handled at 31 December 2009 (people)	33	Water and habitat activities	Beneficiaries	3,983	
	of whom women	WOUNDED AND SICK			
	of whom minors at the time of disappearance	Hospitals supported	Structures	1	
Unaccompanied minors (UAMs) and separated children (SCs), including unaccompanied demobilized child soldiers		Admissions	Patients	14,577	5,4297,708
UAMs/SCs newly registered by the ICRC/National Society	274	Operations	Operations performed	79	
	of whom girls	Water and habitat activities	Number of beds	202	
UAMs/SCs reunited with their families by the ICRC/National Society	40	Physical rehabilitation			
	of whom girls	Patients receiving services	Patients	240	7170
UAMs/SCs cases still being handled at 31 December 2009	123	Prostheses delivered	Units	89	282
	of whom girls	Orthoses delivered	Units	132	3067
DOCUMENTS ISSUED					
People to whom a detention attestation was issued	3				

ICRC ACTION AND RESULTS

In 2009, the ICRC delegation in Uganda streamlined and adapted its activities in response to the shift from emergency to development needs. Consequently, it closed its sub-delegation in Pader in January.

To support the sustainable return of IDPs, the ICRC focused on assisting communities in four districts in northern Uganda, namely Amuru, Gulu, Kitgum and Pader. Activities were implemented in close partnership with the Uganda Red Cross Society and, where possible, local and national authorities.

To help vulnerable returnee communities restore their livelihoods and to revive local markets, the ICRC distributed seed, tools and agricultural/cash vouchers. It also undertook cash-for-work projects and micro-economic initiatives. Some people received essential household items after their possessions were destroyed in seasonal fires. IDPs and returnees also had improved access to water and sanitation following the drilling or rehabilitation of village boreholes and hygiene promotion activities conducted by the Swedish and Ugandan Red Cross Societies and overseen by the ICRC.

ICRC support to health facilities in northern Uganda involved the provision of medical supplies, the training of local health staff, including traditional birth assistants, and the rehabilitation of water, sanitation and medical infrastructure. As planned, a project supporting the referral hospital in Kitgum came to an end and the

number of health centres receiving ICRC support was reduced. At the same time, to increase the sustainability and reach of services for disabled people, the ICRC started providing expertise and material input to the rehabilitation centre in Mbale, in addition to the one already assisted in Fort Portal.

ICRC delegates monitored the treatment and living conditions of detainees held in civilian and military places of detention. In addition, the ICRC deepened its confidential dialogue with the relevant authorities with a view to gaining access to all detainees falling within its remit and, on the basis of visits, sharing its findings and recommendations with the authorities. The final stage of a project to prevent and treat HIV/AIDS, tuberculosis (TB) and malaria in three prisons focused on improving hygiene conditions and launching TB screening programmes. The ICRC also helped the national prison authorities consolidate and develop agreements with NGOs to ensure the sustainability of these initiatives in the future.

The ICRC continued to support UPDF and Ugandan Police Force (UPF) efforts to integrate IHL and international human rights law and standards into their training, doctrine and procedures. Notably, the UPDF and the ICRC committed to revising military manuals from an IHL perspective.

Government officials attended a seminar on IHL implementation and received ICRC comments on related draft bills. The ICRC also supported IHL teaching in universities and informed the wider public about its mandate and activities through media updates and meetings with key community leaders.

To respond to the influx of refugees from the DRC, the ICRC stepped up support to the National Society's family-links service, including for unaccompanied children. Other ICRC assistance to the Ugandan Red Cross centred on strengthening the National Society's structures and programmes to respond to humanitarian needs in Karamoja, conduct hygiene promotion programmes in northern Uganda and promote the Movement's activities and Fundamental Principles.

ICRC activities were coordinated with those of other humanitarian agencies, including those participating in the UN cluster system, to avoid duplication or gaps in protecting and assisting those most in need.

CIVILIANS

Communities in northern Uganda enjoy improved security

The UPDF and the ICRC kept up their confidential dialogue regarding the protection of people in the north and west of the country and in Karamoja.

The needs of Congolese women and their children living without legal status in northern areas, particularly Acholiland, were brought to the attention of the authorities. Cases requiring specific action were referred to relevant organizations, such as the IOM. Some vulnerable women and their children received essential household items or small cash grants from the ICRC.

Returnees regain their livelihoods

Although improvements in security increased their access to arable land, IDPs/returnees in Amuru, Kitgum and Pader districts faced challenges in re-establishing their livelihoods. They were therefore provided with seed, tools or vouchers for agricultural items or cash to help revive food production and local markets. Returnees who lost crops to drought and had limited food or seed reserves received extra seed for the second farming season.

Cash-for-work projects, such as the rehabilitation of land and access routes, helped boost communities' immediate income and improve agricultural infrastructure for the longer term. Other vulnerable households also generated additional income by producing oil, honey or off-season vegetables after receiving the appropriate equipment and training from the ICRC. In addition, IDPs/returnees received essential household items to meet basic needs, particularly after many people's homes were destroyed in dry-season fires.

- ▶ 185,324 IDPs/returnees (33,695 households) benefited from agricultural/micro-economic initiatives, including:
 - 108,229 from distributions of seed, tools or vouchers
 - 77,095 from micro-economic or cash-for-work initiatives
- ▶ 30,914 IDPs/returnees (5,619 households) received essential household items

Rural communities face fewer health risks

To support already stretched health services in returnee catchment areas, medicines and medical equipment were regularly provided to 11 health centres in Amuru, Gulu, Kitgum and Pader districts, with 2 others receiving similar donations until June. All 13 health centres had vital infrastructure, including maternity wards, inpatient departments and staff quarters, upgraded, and medical staff, including traditional birth attendants, received clinical and administrative training. Community health further

benefited from ICRC support provided, in line with Ministry of Health policies, for vaccinations, ante-natal care, family planning and mosquito-net distribution.

In the 13 ICRC-supported health centres (average monthly catchment population: 115,400):

- ▶ 122,238 people given consultations, including 8,501 attending ante/post-natal consultations and 113,737 attending curative consultations
- ▶ 112,344 vaccine doses administered (including 101,728 to children aged five or under and 10,616 to women of childbearing age)
- ▶ 903 patients referred to a second level of care
- ▶ 566 health education sessions held

To improve 92,890 returnees' access to water, 53 boreholes were rehabilitated and 70 new water points installed, in partnership with the National Society, local authorities and communities. Over 560 new latrines were constructed and health groups were set up in villages, transit camps and schools as part of a hygiene promotion project run by the Ugandan and Swedish Red Cross Societies with ICRC input (see also *Red Cross and Red Crescent Movement*). These same communities were also trained in the use of some 1,690 newly installed fuel-efficient stoves.

The relative stability in northern Uganda meant that emergency distributions of water were not needed.

- ▶ 110,507 people benefited from water/sanitation projects, including 17,717 people from the hygiene promotion project

Family members get back in touch

People separated by past or ongoing conflict in neighbouring countries restored and/or maintained contact with relatives both within and outside Uganda thanks to the tracing and RCM services provided by the Ugandan Red Cross, with ICRC support (see *Red Cross and Red Crescent Movement*). Priority was given to addressing the tracing needs of new Congolese refugees and of unaccompanied children formerly associated with the LRA or left behind by Rwandan refugees who went back to their country.

- ▶ 1,897 RCMs collected from and 779 RCMs distributed to civilians, including 33 from and 143 to unaccompanied/separated children
- ▶ new tracing requests registered for 35 people (12 women; 1 minor at the time of disappearance); 85 people located, including 14 for whom tracing requests had been registered by another delegation; 33 people (6 women; 7 minors at the time of disappearance) still being sought
- ▶ 274 unaccompanied/separated children registered; 40 reunited with their families (of whom 13 repatriated to the DRC and Sudan); 123 cases of unaccompanied/separated children still being handled

PEOPLE DEPRIVED OF THEIR FREEDOM

Detainees falling within the ICRC's mandate were visited by delegates in places of temporary and permanent detention run by the Justice Ministry or the military. Particular attention was paid to people detained in connection with armed conflict in the DRC, the UPDF disarmament campaign in Karamoja and unrest in Kampala.

With a view to gaining access to all detainees of ICRC concern, including individuals formerly associated with the LRA and people arrested by the Joint Anti-Terrorism Task Force, the ICRC developed confidential dialogue with the relevant authorities through bilateral meetings. In addition, military intelligence personnel attended several seminars on the ICRC (see also *Armed forces and other bearers of weapons*).

During ICRC visits, conducted according to the organization's standard working procedures, detainees' treatment and living conditions and respect for their judicial guarantees were monitored. Where necessary, confidential representations were made to the relevant authorities to ensure compliance with human rights standards and IHL, including the principle of *non-refoulement*. Following some such recommendations, the treatment of detainees and food rations improved in several detention facilities in Karamoja. In response to a summary report on 24 months of visits to detainees held by the military, improvements in treatment and material conditions were noted in a number of UPDF barracks.

Detention authorities were reminded of their responsibility to ensure that detainees could maintain contact with their families. Vulnerable detainees, including foreigners and minors, kept in touch with relatives via the RCM service. Upon release, 12 detainees had their transport home paid for by the ICRC.

- 4,032 detainees visited, of whom 179 monitored individually (5 women; 7 minors) and 121 newly registered (4 women; 7 minors), during 110 visits to 54 places of detention
- 37 RCMs collected from and 27 RCMs distributed to detainees

A project to provide over 4,000 detainees in Fort Portal, Gulu and Luzira prisons with preventive and curative treatment for HIV/AIDS, TB and malaria entered its final stage of implementation. A TB screening programme was launched in all three prisons in May and a TB-awareness booklet was distributed to staff and detainees. To further improve environmental health and hygiene in the three prisons, staff and detainees received training and detainees were given essential household and hygiene items. Health care and sanitation facilities at Fort Portal and Luzira prisons were rehabilitated, while similar renovations were ongoing in Gulu prison. Vital medical equipment was also repaired or donated to the hospital attached to Luzira prison.

To ensure the sustainability of services, the prison health authorities, with ICRC support, consolidated and developed agreements with implementing partners involved in the screening of new inmates, the provision of laboratory services, voluntary counselling and testing, TB prophylaxis and the follow-up of HIV cases. The Uganda Prison Service (UPS) and the Ministry of Health also began to consider extending the project to more prisons in 2010.

ICRC technical, financial and material support to the UPS also helped improve the water supply and recreational facilities in Kitalya and Kitgum prisons respectively.

- 3,983 detainees benefited from water/sanitation projects
- 5,293 detainees received essential household and hygiene items

WOUNDED AND SICK

To conclude three years of support to Kitgum Government Hospital, patients' treatment was further improved thanks to the provision of medical supplies and training in management and clinical skills. Water and sanitation systems and key buildings, including maternity/paediatric wards and an operating theatre, were also upgraded. Hospital maintenance teams received training and equipment to ensure that patients would continue to benefit from these renovated facilities.

In the 202-bed Kitgum Government Hospital:

- 14,577 patients (including 5,429 women and 7,708 children) admitted: of whom 450 non-weapon-wounded surgical cases, and 10,721 medical and 3,406 gynaecological/obstetric patients
- 79 surgical operations performed
- 79,527 outpatients given consultations, including 77,472 attending surgical or medical consultations and 2,055 attending gynaecological/obstetric consultations

As the number of weapon-wounded patients admitted to Matany Hospital in Karamoja had decreased, local medical staff received a last delivery of medical items and attended a final ICRC surgical training session. During the session, 25 patients, including 9 weapon-wounded, were operated on by a visiting ICRC surgeon. In addition, 22 emergency cases referred to Kalongo Hospital by ICRC-supported health centres in Pader district (see *Civilians*) were successfully treated, with ICRC support.

To increase the sustainability and reach of services for disabled people, physical rehabilitation centres in Fort Portal and, from December, in Mbale, received ICRC technical input and funding.

- 240 patients (including 71 women and 70 children) received services at 2 ICRC-supported physical rehabilitation centres
- 47 new patients (including 13 women and 1 child) fitted with prostheses and 120 (including 31 women and 55 children) fitted with orthoses
- 89 prostheses (including 28 for women and 2 for children; 19 for mine victims), 132 orthoses (including 30 for women and 67 for children), 36 crutches and 1 wheelchair delivered

AUTHORITIES

Political decision-makers and civil servants learnt about the ICRC and IHL through printed updates and regular meetings with ICRC delegates.

At an ICRC seminar co-organized with the Office of the Prime Minister and the National Society, 31 people, including government, judicial and military personnel and academics, discussed and adopted steps to streamline the national enactment of IHL treaties. The Ministry of Justice received comments from the ICRC on draft bills to implement Additional Protocols I, II and III, the Rome Statute and the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment. A Ministry of Justice representative attended two IHL events held by the ICRC abroad.

In October, high-level African dignitaries visited a stand exhibiting the work of the Ugandan Red Cross and the ICRC during the African Union (AU) Special Summit on Refugees, Returnees and IDPs hosted by the Ugandan government (see *African Union*). At the summit, the government signed the new AU Convention on IDPs.

ARMED FORCES AND OTHER BEARERS OF WEAPONS

After years of ICRC advocacy, the UPDF distributed personalized identity cards and tags to its personnel to facilitate the identification of military casualties and to prevent or resolve future cases of missing persons.

Following a review of their 2005 agreement, the UPDF and the ICRC committed to a three-year plan of action to integrate IHL into military manuals and procedures and to consolidate progress made towards integrating IHL into military training. Joint UPDF/ICRC efforts to integrate human rights standards into police training continued, with the UPDF welcoming ICRC comments on its new curricula.

To reinforce the quality of IHL/human rights tuition for military and police personnel, instructors received ICRC training. Teaching materials, including a UPDF film on IHL, were developed or updated with ICRC technical input and funding. In addition, armed and security officers attended briefings given by ICRC delegates.

- ▶ 50 military instructors attended a train-the-trainer course on IHL
- ▶ 2 military instructors and 1 senior UPDF officer participated in IHL courses abroad
- ▶ 133 military officers, including intelligence officers, and 10 from neighbouring countries briefed on IHL/the ICRC
- ▶ 1,904 police officers, including 30 instructors attending a train-the-trainer course, briefed on human rights standards, including those pertaining to the use of force, arrest and detention

CIVIL SOCIETY

The public was kept informed of the ICRC's work through media reports based on ICRC updates, the ICRC president's attendance at an AU summit (see *Authorities*), a field visit for journalists to ICRC-supported health centres (see *Civilians*) and a workshop for 15 news editors in Kampala. Local opinion-leaders also received ICRC documentation, with 350 community members attending information sessions to enhance understanding of ICRC activities and their changing nature in northern Uganda.

To support tertiary-level IHL teaching, the knowledge and skills of lecturers were honed and shared through their participation in regional IHL courses, an IHL seminar in Kampala (see *Authorities*) and a debriefing session for lecturers previously attending IHL courses abroad. Thanks to ICRC sponsorship, students participated in a regional IHL essay competition and, for the first time, in national and international moot court competitions, the latter held in Nairobi, Kenya (see *Nairobi*). In addition, three universities received IHL reference materials.

RED CROSS AND RED CRESCENT MOVEMENT

The Ugandan Red Cross worked in partnership with the ICRC in northern and western Uganda (see *Civilians*). With Swedish Red Cross/ICRC support, National Society staff assumed responsibility for hygiene promotion in 36 villages ahead of taking the lead in all Movement hygiene promotion efforts in northern Uganda in 2010. To strengthen the delivery of family-links services, particularly for refugees arriving from the DRC, the National Society received ICRC support in the form of funding, materials, training and joint needs assessments.

The National Society improved its capacity to respond to emergencies, with ICRC technical, financial and material contributions. For example, it expanded and maintained its radio network. Particular emphasis was placed on developing a response to humanitarian needs in Karamoja. Subsequently, Ugandan Red Cross volunteers distributed essential household items to over 3,200 households, drilled or rehabilitated 8 boreholes and initiated hygiene promotion activities, including the digging of latrines. Two new branch offices were also constructed in Moroto and Kotido.

Opinion-shapers countrywide learnt about the Movement and its Fundamental Principles as a result of dissemination activities undertaken regularly by 40 National Society branches. To facilitate these efforts, 37 volunteers were trained with ICRC support.

Movement activities and support to the Ugandan Red Cross were coordinated. As part of this, ICRC delegates contributed to a mid-term review of the National Society's 2007–10 strategic plan. The salaries of some national, regional and branch staff were paid by the ICRC, as were incentives to volunteers involved in ICRC assistance programmes. The National Society also received two-wheeled vehicles and administrative equipment from the ICRC.