Humanitarian Action
Whose rights?

European Masters programme in
Humanitarian Action

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<tr>
<td>ARI</td>
<td>Acute Respiratory Infection</td>
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<td>AUC</td>
<td>Autodefensas Unidas de Colombia; Colombian United Self-defense Forces</td>
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<td>DALYS</td>
<td>Disability Lost Years</td>
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<td>DD</td>
<td>Diarrhoeal Diseases</td>
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<td>DDHH</td>
<td>Derechos Humanos</td>
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<td>ELN</td>
<td>Ejército de Liberación Nacional; Guerrilla group</td>
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<td>EPL</td>
<td>Ejército de Liberación Popular; Guerrilla group</td>
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<td>EPS</td>
<td>Empresas Promotoras de Salud</td>
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<td>ESE</td>
<td>Empresa Social del Estado</td>
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<td>EU</td>
<td>European Union</td>
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<tr>
<td>FARC</td>
<td>Fuerzas Armadas Revolucionarias de Colombia; Guerrilla group</td>
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<td>FCR</td>
<td>Red Cross Federation</td>
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<td>Fosyga</td>
<td>Emergency Account</td>
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<td>GOc</td>
<td>Government of Colombia</td>
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<td>HA</td>
<td>Humanitarian Aid</td>
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<td>HDI</td>
<td>Human Development Index</td>
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<td>HP</td>
<td>Host Population.</td>
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<td>ICESR</td>
<td>International Covenant on Cultural, Economic and Social Rights</td>
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<td>IDP</td>
<td>Internally displaced persons</td>
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<td>IHL</td>
<td>International Humanitarian Law</td>
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<td>INCORA</td>
<td>Instituto colombiano de la Reforma Agraria</td>
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<td>INS</td>
<td>Instituto Nacional de Salud</td>
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<td>IRA</td>
<td>Upper Respiratory Infection</td>
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<td>M19</td>
<td>Movimiento 19 de Abril; Guerrilla group</td>
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<tr>
<td>NGO</td>
<td>Non Gov. Organisation</td>
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<tr>
<td>OECD</td>
<td>Comité de Ayuda al Desarrollo</td>
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<td>OCHA</td>
<td>UN office for Coordination of Humanitarian Affairs.</td>
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<tr>
<td>PAHO/WHO</td>
<td>Panamerican Health Organisation/World Health Organisation</td>
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<tr>
<td>PAB</td>
<td>Essential Health Package</td>
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<tr>
<td>PAI</td>
<td>EPI. Expanded Immunization Programme</td>
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<td>PC</td>
<td>Plan Colombia</td>
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<td>POS</td>
<td>Health Plan (Compulsory)</td>
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<td>PUI</td>
<td>Plan Único Integral</td>
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<td>RSS</td>
<td>Red de Solidaridad Social; Social Solidarity Network</td>
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<td>SISBEN</td>
<td>Subsidized System Identification</td>
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<td>UN</td>
<td>United Nations</td>
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<td>UNDP</td>
<td>United Nations Development Programme</td>
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<td>UNHCR</td>
<td>United Nations High Commission for refugees.</td>
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<td>UNICEF</td>
<td>United Nations Found for children</td>
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<td>UP</td>
<td>Unión Patriótica</td>
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<td>URSS</td>
<td>Soviet Republic</td>
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<td>USG</td>
<td>United States Government</td>
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<td>WB</td>
<td>World Bank</td>
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<td>WRA</td>
<td>Woman Reproductive Age</td>
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In Memoriam

OCHA ex ERC, Sergio Viera de Mello, stated that “the provision of relief material is a feature of humanitarian action not a defining element” and that “the provision of relief must be part of a larger and more integrated approach that includes physical protection and protection of human rights.” The aim should be to re-establish human security where it is threatened. The key to security includes both: “assistance and a substantial effort to provide protection, physical and mental.”
Abstract

Based on a comparative description of health determinants of internally displaced persons and resident populations in five major cities of Colombia, this paper draws an exhaustive analysis of differences and similarities, leading to the diagnosis that both populations suffer from equally unsatisfied needs.

The paper also confirms the hypothesis that the more humanitarian concerns principles that a population group can refer to, the more likely it will receive attention and protection. Consequently, receptor communities that may not be living under direct threats to their lives, but suffer from the same chronic needs as the IDPs, are currently not entitled to receive aid. The work argues the existence of adverse selection of beneficiaries, as the host population, in the authors view, should be included.

The paper also aims to discuss and problematize how the emergency and post emergency assistance can be used as a vehicle to achieve human security in conflict prone areas and brings an approximation of operational limitations of humanitarian action.

The document explores and reveals a series of reflections on the construction of humanitarian solutions by addressing the weakness of the international legislation as well as the national instruments designed to address chronic social and economic structural imbalances identified on the study. It stresses the need to improve coverage of beneficiaries and advocates for the GOC’s immediate fulfillment of the binding International agreements.

Finally, this work enumerates a series of adverse effects on populations as a consequence of poorly coordinated actions.
Justification

Humanitarian work is a relatively new discipline in Colombia, and that leads to the need to expand the knowledge on humanitarian crisis management given the increasingly growing affected communities.

The characterisation of the populations’ “determinants of health” entails the description of the most relevant social, economic and ill-health indicators that will further contribute to the understanding of the complexity of displacement and poverty issues.

The paper also has the intention to provide more information on the IDP situation so as to feed the advocacy activities carried out by different actors. It is also expected to sensitize the reader on the need to rigorously claim the application of the International Treaties and Conventions relevant to health & human Rights and other legal instruments at regional and national levels.

The document will eventually reach communities at regional and municipal levels, helping them to understand their rights and obligations as there is hardly no available information about agency mandates, levels of responsibility and most importantly, about accountability to the citizens under threat.

It is also expected to contribute to the identification of the trends and challenges lying ahead for the organisations if they would eventually take action to solve the chronic failures envisioned within the document. Constructive criticism would eventually prompt the GOC to increase expenditure on the social and economic development of the target population, diverting budget spending from the military, to fight poverty instead.

As regards to protection agendas, this paper will propose a set of ideas on how to protect peoples livelihoods, with the hope that in the future a new student will work on those topics.

Finally, the author has worked extensively for the UN, ICRC, and MSF and would like to transform his experience into constructive reflection.
Objectives and Methods

Problem
A study of differential treatment between IDPs and their host populations: the case of Government of Colombia’s infringements to the “right to health”

Research Hypothesis

• The less a population group can refer to humanitarian concern principles, the less likely it will receive attention and protection, even in cases where human rights conventions give the same rights to both.

Specific Objectives
To analyse the results of the population assessment conducted by PAHO/WHO and draw conclusions on:

• The differences of needs between the ID and HP based on dis-aggregated data analysis of health determinants
• To draw Inferences on the breach to “the right to health”

To describe the modes of action of three major humanitarian agencies, and their level of complementarily to address the humanitarian crisis

To provide recommendations to the improvement of operations leading to assistance and protection of the victims.

Methodology
This Comparative study will examine to what extent there are significant differences of health determinants between the study groups. The nature of the comparison will be based on the assumption that they are typologically similar but received different attention.

Describing the variance of the variables:
They are quantitative in nature taking into account that the field research conducted previously has already been published and this paper is the analytical analysis. Having said that, variables can
become qualitative in the operationalization of the analysis (higher unemployment, lower literacy level, worse sanitation conditions....etc)

Sources

This study will draw analysis from international humanitarian law, international human rights law. The research is based on secondary sources that include policy reports, official documents, treaties, resolutions, and literature from course lectures. The primary sources incorporate reports from leading research groups and testimony from victims and humanitarian workers.

Part I

Chapter 2
Colombia and the Conflict

2.1 Context analysis

Colombia’s Internal conflict is rural in origin and is deeply rooted on the social struggle of the peasantry to profit from newly colonized land in the Eastern planes, Amazon basin, Pacific coast and the areas under the influence of The Sierra Nevada de Santa Marta (annex 1).

Scholars describe the social struggle dating from colonial times, when fertile land along the Andes slopes and valleys was distributed among the new European settlers by means of La Encomienda, a Royal Ordinance of the sixteen century that allowed new colonizers, most of them of Spanish origin, to hold property and legal rights on the land violating the rights of native settlers living in their ancestral land. The unequal land distribution prevailed for centuries even after independence-fueled civil wars of the 1820s. Successive initiatives to draft and implement land reforms were strongly rejected by Congress and Parliament members during several democratic governments. It was not until 1972 that President Carlos LLeras Restrepo managed to put in place the Instituto Colombiano Reforma Agraria (INCORA), an effort to implement a land reform. The initiative faced severe attacks from the ruling classes. Under funded to accomplish the expected objectives, and receiving limited political backup after his presidential mandate, the INCORA was left orphaned. Governments during the 21st century did little to change land tenancy on an equitable basis. As the process of industrialization offered only limited employment to the increasing numbers of landless people, they began to move to the cities, a phenomenon that remains alive.¹

Clearing the jungle (pulling down the bush) was an option for the uprooted peoples’ survival. Since the end of the nineteen-century, this activity turned out to be an opportunity and a lifestyle. For example in the Pacific coast, liberated Afro and Native South American communities secured their food and economy on the rich biodiversity of the region that allowed them to produce food in excess through agriculture, hunting, gathering and fishing. Living away from the center of power and political influences in a complete state of isolation was a protective shell against intruders. Today, several communities spread all over the country are in serious threat as the armed conflict has spread to their previously peaceful sanctuaries.²

In the early 1980’s cattle breeding and the expansion of illegal crops became deleterious to the environment and the people depending on the jungle resources. As land became more profitable for big landowners, people were forced to move inland to avoid intimidation or being killed by armed squads. No authority or protection mechanisms were put in place in such locations.

² Authors field visit to Bojaya, ICRC, Colombia. March 2002.
Gradually, through the end of the 80’s, after the years and, with total freedom and impressive levels of impunity, self defense armed groups (Convivir) started to flourish in the above-mentioned areas of the country aimed at the protection of powerful landowners.

Simultaneously, Marxist/Leninist guerrillas that had flourished in the sixties weren’t totally dismantled by previous ruling parties, giving them a chance to expand secretly among the poor and neglected masses among whom they had good echo. In big cities, an influx of literate scholars trained in URSS and Cuba were feeding the expected rural revolution. Even with the opening up of the communist block of Europe and soon after the fall of the Berlin wall, the world’s changes did not dramatically influence the existence of left wing groups in Colombia; as the Colombian Guerrillas were already obtaining important revenues from kidnapping and extortion of rich people. However, the emergent illegal economies started to play an important protagonist role at a time of political uncertainty and steady guerrilla growth.

A financial structure of guerrilla groups, as well as their political agenda reached somehow a critical point, as the Self Defense Armed Groups grew at an exponential rate to protect economic interests that were targeted by guerrillas. In this way, by the end of the eighties, illegal economies triggered the above-mentioned interest on land to expand illicit plantations - a late wave coming from Bolivia and Peru. These seeds found fertile soil in Colombia as well as greedy individuals interested in getting huge profits from these activities. The poor peasants caught in the vicious cycle of poverty and ignorance had no other choice but to gain a living in these activities or leave. Simultaneously coca collecting migrant workers, or so called “raspachines” became an additional workforce. The overall result was that Guerrillas and Self Defense Armed Groups (AUC) also known as illegal para-military ended up fighting for newly colonized land and the strategic trading corridors throughout Colombia.

As there continued to be no political or geographical conditions for a revolutionary triumph, the political parties of the left wing groups and their isolated followers became stagnated in a political monologue which lead to sporadic acts of terror. Perceived heroic attacks on civilians and state figures were common during the eighties and nineties. During these decades, such unfortunate events created a mixed feeling of rejection and occasional admiration towards the left wing groups, from civil society.

A couple of well-known left wing groups signed up peace agreements and were subsequently demobilized: The Ejercito Popular de Liberación (EPL) and the world famous Movimiento 19 de Abril (M-19). Many followers of the communist party and the Union Patriotic (UP) were also reintegrated to the democratic arena by armed squads in an attempt to erase their political party from the democratic scene. Briefly, the ruling parties- or rather the ruling families, failed dramatically to ameliorate the social and economic conditions of the vast majority of poor existing with an inequitable distribution of wealth.  

Political and social instability at the end of the fifties lead to the so-called La Violencia period (1949-1950), in which the confrontation between conservatives and liberal ruling parties lead to more than 200.000 deaths. In the mid 1950s General Gustavo Rojas gave a stand still to the continuing confrontation between liberals and Conservatives. After his resignation, the political crisis left behind was buffered by the creation of the Frente Nacional (National Front), an agreement whereby the traditional parties would share power over the following 20 years. The negative side effect of this arrangement was the exclusion of the left wing movements into the democratic arena. Therefore, the Guerrilla armed struggle became stronger as they responded to the lack of opportunity they had to participate in this democratic process.

During La Violencia Colombia suffered her first grand scale displacement. The result was an exponential population growth in the capital cities in the fifties, which turned out to be the first alert of what was going to escalate decades later.

Displacement is an old phenomenon in Colombia’s political history. Today, more than 70% of the population is urban as compared to mid century figures when the distribution was exactly the opposite. In addition to the above-mentioned struggle, neo-liberal reforms increased poverty in the late nineties and turned people away from subsistence farming. Agricultural pastoral societies vanished in most parts of the country, as it was no longer possible to have access to a fair trade of their produce. Consequently in Colombia, marginalization, poverty and unemployment reached critical levels.

2.2 Consequences of a Chronic Conflict

Displacement is an old phenomenon in Colombia’s political history. Today, more than 70% of the population is urban as compared to mid century figures when the distribution was exactly the opposite. In addition to the above-mentioned struggle, neo-liberal reforms increased poverty in the late nineties and turned people away from subsistence farming. Agricultural pastoral societies vanished in most parts of the country, as it was no longer possible to have access to a fair trade of their produce. Consequently in Colombia, marginalization, poverty and unemployment reached critical levels.

Across borders, an armed conflict such as Colombia’s is not limited to spreading into neighboring countries. It can also create pressure on fragile ecosystems given the devastation of the rainforest seen so far. The Colombian conflict has been an obstacle to development and brings low or negative economic growth to the nation; it also affects trading partners across borders, as it is the case with Venezuela and Ecuador. Human Development estimates that Colombia’s HDI has fallen 20 places in the last couple of years. The Gini coefficient still shows an undesirable 57, very close to Brazil. Such figures also portray a loss of confidence in external investment and a subsequent slowing down of the economy.

At the national level, the Colombian conflict has led to a series of undesirable effects: First, military hypertrophy vs. political struggle; second, the creation of embryo (autonomies) within the state; third, growth of paramilitary apparatus; and fourth, displacement to urban centers.

For the purpose of this paper, we are going to concentrate on the fourth undesirable effect.

2.3 Levels of Interpretation

There are different levels of interpretation of this complex situation.

On one-hand, a micro level analysis reveals how armed conflict limits an individual’s ability to develop his/her potential despite the government presence and cooperation efforts to respond to social needs. If there is no sustainable peace, free democratic environment or rule of law, growth is a distant objective; human development stagnates and can even reverse.

On the other hand, at a macro level of analysis, conflict disrupts social, economic and political viability of a country. Experts in the fields of development issues agree that the net cost of one-year of the war is equivalent to ten years of development. Colombia’s negative economic growth began to improve slightly at the end of the nineties, but the present trend does not compensate for the harmful effects of the abrupt introduction of the neo liberal reforms, and the baseline internal conflict.

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The overall picture of Colombia is of reduced productivity in the energy sector (of which the economy is highly dependable,) decreased productivity, limited investment, capital flow to safer countries, unemployment rates above 20%, and overall reduced social investment combined with high military expenditure that is symptomatic if not diagnostic of a war economy.

The impact of the war on the environment brings about the issue of degradation of the tropical forest, and depletion and contamination of fresh water sources with the extensive and indiscriminate use of Glyphosate to spray coca plantations. Countries rich in biodiversity and natural resources are depleting them at a pace in which nature cannot recover by itself and the result is soil erosion, draught, expansion of desert and hunger. The tropical rainforest is also shelter to species at threat of extermination, so it is not only the forest but the endemic species that are being restricted to smaller habitats, causing alarming reduction of the populations. Interesting information on the destruction trends of the rainforest is available in different websites.

Systematic violation of human rights accounts for approximately 27% of the deaths attributed to Colombia's armed conflict. There is no clear line that separates deaths due to criminality and conflict as the reasons can overlap each other. Mortality rates range from 20/100.000 to 200/100.000, which reflects the fact that Colombia has areas of high intensity conflict and also peaceful areas. The situation becomes even more complicated when multinational oil companies explore for and pump oil from protected land reserves, violating land and self-determination rights, as mentioned in the Colombian Constitution.

Furthermore, the number of DALY’S due to the conflict account for 95,050 years lost in the age group 15 to 24 in contrast to 65,000 for traffic accidents on the same time period for the whole population. Consequently violence contributes a great extend to a reduction on life expectancy by two years. From an economic perspective, Colombians have seen 17% reduction of the expected per capita income in the last 10 years.

2.4 Direct causes of displacement

Human rights and IHL violations lead inevitably to massive displacement.

The main causes of displacement in Colombia are deaths secondary to massacres, kidnapping, selective killings and fear/intimidation. This phenomenon is mostly experienced in rural, high intensity pressure zones or villages. The Social Solidarity Network (RSS) reported (in 2003) that out of an accumulated figure of 3,000,000 internally displaced persons (IDPs) 56% left their homes because of generalized threats, 32% due to direct confrontation with armed groups and 5% because of direct threats.

Furthermore, the UNDP 2004 reports 1514 victims of landmines between 1990 & 2002 (an under-reported figure,) and killings of 185 professionals and activists (in 2002). Human rights activists under threat are countless; 86 executions of minority members in afro-Colombian communities are reported for 2002. There were 376 reported attacks on female family members for the period 2001 to 2002 as reported by the ICRC Protection Unit for UNDP report.

\[10\]‘Plan Colombia.USAID.Y2000/Y2005’.
\[11\]www.vonhumbolt.org.co
2.5 Internal Conflict and human security

From a human security perspective, it becomes clear that living in security and dignity, free from poverty and despair, with full guarantees of *freedom from fear and freedom from want* is a goal in itself. By definition, human security means freedom from pervasive threats to people right’s, their safety or even their lives.17

2.6 The State, the Conflict, the Policy

Colombia is a sovereign state inhabited by a mix of Indo American, European and African descendants. National identity has been shaped and kept alive for centuries, despite external forces that are eroding cultural and moral values, a phenomenon that has been triggered through the process of globalization taking place throughout the American sub continent.

As regards to the geopolitical configuration, Colombia’s borders are well defined in treaties dating from the eighteen and nineteen centuries. The country has experienced a couple of border disputes in recent years. The first was around the Peruvian territorial claim in the 1920s that was settled after a military confrontation. And today, two territorial claims from Venezuela and Nicaragua are still pending in the high courts without significant progress towards a political negotiable solution. However, these couple of incidents poses no threat to the present national security.

Political and economic power has been traditionally held by the ruling families until the late twentieth century when more democratic process shifted power to the middle classes and social climbers with important economic powers.

Colombia has a long democratic tradition represented by influential people, old politicians, well recognized economic groups as well as less influential people represented by ethnic minorities and the vast majority of the poor that are unevenly represented at local regional and national political levels.

A new Constitution enacted in 1991 gave all groups in society the rights to have access to Congress and Parliament benches in democratic elections. Significant progress has been made to improve representation in the political arena but it is still far from ideal. It is also worth mentioning that political apparatus is not immune to corruption, and the lack of accountability to Colombia’s citizens has created a sense of declining security.

Although there is also a long tradition of democratically elected governments, which at the same time gives the feeling of legitimacy, there is also an ancestral lack of authority that prevails despite an apparent functioning power apparatus.

High conflict areas are characterized by their absence of comprehensive security. In addition, poverty and low human development has left an ideal ground for the increase vulnerability of peasantry’s and indigenous communities.

The “law of the jungle” applied by new settlers in their interest to find new open land to plant illegal drugs has worsened the security scenario. The GOC is currently moving ahead with a military offensive against armed groups. Additionally, the US government has included Colombia as a country that posses a major threat to their society as 2/3 of the drugs currently consumed in the US come from Colombia.18 Not surprisingly, both Colombia’s guerrilla and auto defense groups are in the terrorist list.


The strategy the US enacts to contain the threat is geared towards stopping drug production at the production site by eradication of crops through different means including the aerial spray of herbicides.

2.7 Internally Displaced

By definition, internally displaced person is someone who has been forced or obliged to flee or leave their place of origin or residence, primarily as a result of or in order to avoid the effects of armed conflict, situations of generalized violence, violations of human rights and who have not cross an international boundaries.

This condition deserves structural corrective measures not only to stop the violation of IHL but also to alleviate poverty and suffering if we want to see people developing healthy and productive lives. The GOC drafted the Presidential Bill 07 in 28 Nov 2001 and the CONPES 3057 to ratify its commitment to respond to the needs of displaced persons. In the following chapter, we will analyze the International legal frame tools and mechanisms.

Part II

Chapter 3
The legal Framework:

The United Nations mechanisms for the protection and promotion of human rights

“Everyone has the right to life, liberty and security of person”
(Universal Declaration on Human Rights, 1948, Article 3)

3.1 Introduction

“The references to human rights in the Charter of the United Nations have provided the basis for elaboration of the content of standards and of the machinery for implementing protection of human rights”. The United Nations Charter created the General Assembly (GA) and the Economic and Social Council (ECOSOC) as two of the five principal organs of the United Nations. The representation and voting mechanisms in the General Assembly defines that the Assembly consists of all (state) members of the United Nations. Every state has one vote. By ratifying the Charter the members of the United Nations “pledge themselves to take joint and separate action (…) for the achievement of (...) universal respect for, and observance of, human rights and fundamental freedoms (…)”.

The Charter gives the GA the function to “initiate studies and make recommendations for the purpose of: a. (...) encouraging the progressive development of international law and its codification” and b. (...) “assisting in the realization of human rights and fundamental freedoms”. Furthermore, the organ “may discuss any questions or any matters within the scope of the present
Charter or relating to the powers and functions of any organs provides for in the present Charter”. To perform the functions the Charter allows the establishment of “such subsidiary organs as it deems necessary for the performance of its functions”.  

The ECOSOC has an equal purpose related to the promotion: the respect and observance of human rights. It includes also the preparation (and submission to the GA) of drafts of Conventions, but for “matters falling within its competence” or according to recommendations of the General Assembly. Like for the GA, the Charter of the United Nations specifies that the ECOSOC is enabled to create commissions “as may be required for the performance of its functions” and “in economic and social fields (…) for the promotion of human rights”.

“In its first meeting in 1946, the Economic and Social Council established two functional commissions, one on human rights and the other on the status of women” (citation here). It was decided that these commissions would be composed of state representatives.

The GA requested that the Commission on Human Rights of the Economic and Social Council consider the preparation and drafting of a declaration on fundamental human rights and freedoms. Through the necessary resolutions the GA adopted the Universal Declaration on Human Rights in 1946. Subsequently the International Covenant on Civil and Political Rights (ICCPR) and the International Covenant on Economic, Social and Cultural Rights (ICESCR) in 1966 were “opened for signature, ratification and accession” to the states parties. Through the ratification, the countries assume a legal obligation to incorporate the Covenants within their state’s legal structure “in accordance with its constitutional processes” and adopting “such legislative or other measures” (…) “to give effect to the rights” recognised in the covenant. Today, the three instruments constitute “The International Bill of Human Rights”.

3.2 The functioning of the United Nations mechanism for the protection and promotion of human rights.

“Since human rights and fundamental freedoms are indivisible, the full realization of civil and political rights without the enjoyment of economic, social and cultural rights is impossible. The achievement of lasting progress in the implementation of human rights is dependent upon sound and effective national and international policies of economic and social development” (Proclamation of Tehran of 13 May 1968, paragraph 13).

3.3 The charter based bodies

As mentioned in the paragraph above, the Commission on Human Rights of the Economic and Social Council became one of the first subsidiary organs of the United Nations involved with the drafting of international human rights instruments. Because of its creation through the ECOSOC, the Commission is named a “charter based body” (functional Commission of the ECOSOC, members are state representatives elected by the Council). Today the Commission reports on the human rights situation in specific countries and about the situation on “major phenomena of human rights
violations”. The Commission also established a subsidiary body that is known as the “Sub-
Commission on the Promotion and Protection of Human Rights”.28

3.4 The human rights treaty bodies

Once the Covenant came into force in 1976, the provisions in the ICCPR prompted the creation of
the Human Rights Committee (HRC). The control provisions about the implementation of the
Covenant consist in the obligation for state parties to submit “reports on the measures (...) adopted
which give effect to the rights recognized herein and on the progress made in the enjoyment of
those rights”. It follows the “consideration of state parties reports” and the transmission of
“reports and general comments to the state parties” by the HRC. In accordance to the comments
made, the state party can reply to the comments through submitting observations.29

The provisions in the ICESCR differ from those in the ICCPR. The control provisions for the
implementation of the Covenant and the measures adopted include in the reporting procedure the
participation and monitoring of the specialised agencies of the United Nations. Significant
differences are related to the adoption of measures, as those are expected to be implemented
progressively for “achieving the observance of the rights recognised” and in the reporting
mechanism, to be realised “in stages in accordance with a programme”.30 The Covenant did not
provide the establishment of a committee, the ECOSOC established a “working group on the
implementation of the covenant (...) for the purpose of assisting the Council in the consideration of
reports submitted by states parties” and also entrusted the working group “with the task of
considering the reports of the specialised agencies”. With the purpose of improving the working
methods the working group has been reorganised and renamed twice, and is finally now the
“Committee on Economic, Social and Cultural Rights” (CESCR) in 1985.31

Between 1966 and 1990 five more treaties and the respective committees have been adopted and
established by the United Nations system (Committee on the Elimination of Racial Discrimination
(CERD), Committee on the Elimination of Discrimination against Women (CEDAW), Committee
against Torture (CAT), Committee on the Rights of the Child (CRC) and the Committee on Migrant
Workers (CMW))(?). These five treaty bodies have similar provisions for the reporting procedures.
Four of the Committees (HRC, CERD, CAT and CEDAW) can receive individual complaints from
individuals who claim that their rights under the treaties have been violated.

3.5 The United Nations mechanism and the Colombian context

During the 1980’ the main concerns and issues brought up by the HRC were torture, ill-treatment
and arbitrary detention.32 During those years, an increase in drug trafficking and drug cultivation
was developing in Colombia. Due to the lack of presence of the state in many rural areas of the
country, the armed groups (leftist guerrilla and right wing paramilitary groups) seized the
opportunity to impose taxes on the drug cultivation and trafficking. The benefits were used to
improve their military capacity (recruitment and buying arms and ammunitions.) In 1995, the CAT
referred to a “systematic practice” of torture and abuse of detainees. As well, an increasing
number of displaced people had been mentioned in 1995.33

28 ) United Nations, ECOSOC, “The Commission on Human Rights” (see official website
:http://www.un.org/esa/coordination/ecosoc/sub_bodies.htm)
29 ) ICPR, article 28, article 40 paragraph (1)-(5)
30 ) ICESCR, article 17 and 16
31 ) ECOSOC resolution 1985/17 and 1979/43 (available at www.un.org/esa)
1989 (torture, ill-treatment, related to Art. 7 and 10 of the ICCPR, domestic remedies)
33 ) United Nations, CAT (Summary Record), CAT/C/SR.242/Add. and CAT/C/SR.238 as well as CESC (Concluding
In 1994 it was the first time in Colombia’s history that the issue of human rights and international humanitarian law was incorporated into the National Development and Investment Plan. The first important document exhorting the Colombian government to address all relevant human rights abuses was issued in 1995 by the Commission on Human Rights. The same year, and in spite of the recommendations made, the Colombian congress passed a decree for the setting up of rural safety associations, the so called “Convivir”, which were private armed groups. Violations committed by the guerrilla were not mentioned in the reports at that time.

The following year several UN entities, amongst them the Office of the United Nations High Commissioner for Human Rights, opened their offices in the Colombian capital. Even though under the President Samper (1994-1998), the government had introduced economic reforms and sharply increased public spending, in 1997 the human development indicators and the per capita GDP decreased, while the unemployment rate and the homicide rate increased. In the concluding observations of the HRC at the session in 1997, no recommendations related to the situation of displaced were given, even though the HRC referred to “the continuation of gross and massive human rights violations (……), carried out by members of the armed forces, the police and paramilitary and guerrilla groups”. No document has been released by the HCR to address the poor performance of the health sector in Colombia as regards the attention of vulnerable populations but it is a concern of International agencies working in the field.

Part III

Chapter 4

4.1 The Sphere Standards

The technical sectors of the Sphere project: Water and Sanitation, Health, Shelter, Food, are considered to be the main areas to cover during assistance to the victims, independent of whether it is natural or man made disaster. Each of these areas is evaluated with the same instrument and should be framed taking into account the following aspects: participation, initial assessment, response, targeting, monitoring, evaluation, aid worker competencies and responsibilities, and finally supervision.

Response from humanitarian actors depends on a numbers of factors, including the organizations capacity (areas), knowledge that identify them according to their mandate, expertise, budget constraints, familiarity with the region and security risks for staff. Once a country or region has been selected for intervention, targeting mechanisms are established to enable agencies to provide assistance impartially and without discrimination.

The quality of HA will depend on many factors as enumerated in the above mentioned list. The common standards relate to each chapter of the Sphere Project Handbook (see annex) and agencies are expected to use the standards before, during and after the provision of assistance. This means that standards are common to all sectors, and no single sector (technical sector) should be considered in isolation from the others or in isolation of economics, religious and traditional beliefs, political practices, and religion and security factors. They should be adequately identified and coping mechanism understood. It is also widely promoted in the original SP document that if the problem is not properly identified and understood, then it will be difficult if not impossible, to respond appropriately to the beneficiaries.

36 Decree Nr. 356, 1994
37 United Nations, Human Rights Committee (Concluding observations), CCPR/C79/Add.76, Geneva, 1997, page 3 paragraph 17
One of the most controversial issues is how to define the vulnerabilities and capacities of affected
groups and how to target populations appropriately. This chapter intends to elaborate on the problem
question of correct targeting of the populations.

The thread of the argument lies in the assumption that people with equal unsatisfied needs should
receive equal treatment independently of the causes of their displacement. PAHO/WHO and their local
partners developed a means of characterizing the differences between populations between 2003 and
2005. The findings are now being analysed under the human rights perspective.

4.2 Assessment

Displacement is a complex social phenomenon that has an enormous impact on people’s livelihoods and
leads invariably to increased poverty. Forced migration in the last decade is still under reported
however, the National Solidarity Network (RSS) reporting 3,400,000 people being displaced—most of
them from their rural homes. Almost half of this population, 1,500,000 moved in the last five years to
big suburbs trying to evade stigmatization and threats to their lives in most of the cases.

This alarming situation called the attention of the Colombian Government, Academy, Red Cross and the
UN system, in particular the Office for Disasters and Complex Emergencies from PAHO/WHO, to
promote a better characterization of the populations under threat. The result of this challenge was the
publication of an operational research entitled “Health and Displacement in Colombia” (2005). This
document features the results on the characterization of health determinants of displaced and host
people.

Strong profile similarities (similar poverty indicators) should alert donors to broaden the target
population under assistance. Conversely, if they prove significantly different, the aid can be targeted
accordingly to the needs of those in a less privileged position.

4.3 Demographic and Social Economic features of IDP

The following data has already been published by the collaborative study group represented by
Colombian Government/RSS, Federation of the Red Cross (RCF), National Institute of Health (INS
Colombia), PAHO/WHO Emergency Preparedness and Disasters Regional Offices in Cali, Cartagena,
Monteria, Medellin and Bogota.

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38 Naranjo, Giraldo; Galeano, Hurtado, ‘El derecho a la ciudad. Migrantes y desplazados en las ciudades
39 ‘Presidencia de la Republica de Colombia. Red de Solidaridad Social. Registro Nacional de Población Desplazada
Two cohorts of displaced and host people add up 10,582 individuals out of which 5487 were IDP and 5100 were of the host population. It was found that 50% of the IDPs were less than 15 years of age as compared to 17 years for the host population. By year 2002, almost 50% of the population was below 24.8 years of age.

The proportion of IDPs above 60 years was 3.3% and 3.5% for HP, twice lower than the national average. The assumption would be that vulnerable populations in the countryside have a shorter life expectancy, meaning higher mortality rates therefore few individuals appear at the top of the pyramid. In addition, older family members prefer not to move from home and allow male youngsters to leave their homes. In the event of serious threat's, the elder are more prone to remain in their homes. On the contrary woman, children and youngsters leave they’re parents ancestral land in search of safety and better future.

Gender distribution between groups showed no significant difference upon comparing the two ratios: 100 women to 82 men for IDP and 100/83 in the HP. For the country, the ratio is 98 females per 100 males. The explanation of this conversion remains unclear. Are we loosing more men due to the war? Most women flee with their children to safer places without a companion. This could be a reasonable explanation, which can be confronted with different sources and demographic trends in conflict countries around the world. Surprisingly the host population gender composition is the same between IDP’s and host population.

The (RSS) reported that 74% of IDPs are women and that 81.5% are below 18 years.

<table>
<thead>
<tr>
<th>Population structure</th>
<th>displaced</th>
<th>receptor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>5,487</td>
<td>5,101</td>
</tr>
<tr>
<td>% of male</td>
<td>45.1%</td>
<td>45.3%</td>
</tr>
<tr>
<td>% of female</td>
<td>54.9%</td>
<td>54.7%</td>
</tr>
<tr>
<td>% of population &lt;15</td>
<td>48.5%</td>
<td>45.4%</td>
</tr>
<tr>
<td>% population between 15-60</td>
<td>48.1%</td>
<td>51.1%</td>
</tr>
<tr>
<td>% population &gt; 60 years</td>
<td>3.3%</td>
<td>3.5%</td>
</tr>
</tbody>
</table>

Table 1: Population structure of displaced and host population.\textsuperscript{41}

4.4 Migration

According to the different agencies working on the field, the root cause of migration is violence. At the national level, 85% of Colombia’s internal migrants have migrated due to violence, according to the church estimates (Colombian Episcopate), and 97% according to the UN. Independent of the source of information, there are strong arguments that widespread evidence of systematic violation of human rights and International Humanitarian Law is a leading cause. 17% of the cases reported killings of relatives and family members, 11% - attempts of murders, 4% - coactions and 2% - bombing by Colombian air force. The Ombudsman Report reveals similar figures for 2004. They are in no way contradictive as they depend very much on regional particular profiles.\textsuperscript{42} The cumulative figures of 3 million displaced people reveal that generally speaking, people left because of high intensity confrontation or a rising of war-related tension.

- 56% left their homes because generalized threats
- 32% direct confrontation with armed groups
- 5% direct threats

4.5 Gender and Leadership

The study revealed that 48% of the households choose to live in a remote place far from the province. Life then becomes more difficult because they are not able to find a social network to depend upon. Second, survival becomes even more competitive when families are forced to remain in inadequate shelter and impoverished environments where resources are already short in supply.

Most likely, the existing receptor areas in big cities are already overburdened before massive displacement takes place. Drop to drop mobilization is less noticeable but is indeed intense enough to be noticed by the local community. In 72% of the cases studied, the host household was lead by a man in contrast to 56% of the arrival homes being led by females. This also means that responsibilities become somehow evenly distributed between both sexes after displacement.

It is important to mention that the number of dependants in each family unit was almost the same: 4.7 for IDP and 4.4 for local settlers. However, this figure does not tell us anything about the fertility rate between groups. To what extend do parents have a protection preference towards their offspring? Is there a tendency to protect girls more than boys? Are boys more targeted by armed groups and therefore more susceptible to violation of their rights? Are there preferences when it comes to the question? Who should leave and who would stay? Is there a significant difference, if any?

These questions are critical when it comes to the formulation of protection policy strategies and the right of equal protection without sex discrimination.

4.6 Education

As an indicator of human development, it is interesting to see the profile of the two populations

<table>
<thead>
<tr>
<th>% illiteracy</th>
<th>IDP</th>
<th>Receptor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>26.5%</td>
<td>17.7%</td>
</tr>
<tr>
<td>Men</td>
<td>23.5%</td>
<td>15.2%</td>
</tr>
</tbody>
</table>

\textsuperscript{41} Ibidem.

<table>
<thead>
<tr>
<th>Level of literacy</th>
<th>Woman</th>
<th>29%</th>
<th>19.7%</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
<td>21.7%</td>
<td>11.5%</td>
</tr>
<tr>
<td>Primary. Not completed</td>
<td></td>
<td>35.6%</td>
<td>29.8%</td>
</tr>
<tr>
<td>Primary completed</td>
<td></td>
<td>21.6%</td>
<td>24.6%</td>
</tr>
<tr>
<td>Secondary not completed</td>
<td></td>
<td>13.9%</td>
<td>23.4%</td>
</tr>
<tr>
<td>Secondary completed</td>
<td></td>
<td>3.8%</td>
<td>9.2%</td>
</tr>
<tr>
<td>Technical/university</td>
<td></td>
<td>0.4%</td>
<td>1.5%</td>
</tr>
</tbody>
</table>

Table 2: Literacy level.  

Host communities have a higher literacy level as a percentage than the displaced population; however the proportion of attendance to school falls dramatically by almost two fold, as a consequence of the displacement phenomena. This event is less noticeable among receptor population although there is also a high tendency of dropout.

Providing basic primary school is an obligation of the state. It is free according to the Colombian Constitution. Primary schools are spread all over the country including the territories with high intensity conflict but teacher attendance is poor. Low attendance could be due to a series of factors that could be well enumerated if we ask ourselves the following questions: Is the school accessible to children? Is the school affordable (with accessible uniforms, books, transport, and lunch?) Last but not least, is it accepted, and respected by the armed groups? Violation of IHL leads to the destruction of civil premises like schools and health centers, so as long as the armed actors continue targeting civil facilities, attendance will most certainly be reduced.

Secondary school is not so widely available. Not even in peaceful regions were access is still a major constraint, and it is not so widely available for free. IDPs have fewer opportunities to progress from primary to secondary schools; in addition, they have twice the amount of dropouts as compared to the resident population. IDPs have no possibilities to pursue higher degrees.

4.7 Employment

Up to 71% of household heads had a job before facing displacement, but after moving 53% have no income whatsoever. The table shows employment activities before displacement and after:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Before</th>
<th>After</th>
</tr>
</thead>
<tbody>
<tr>
<td>Independent worker</td>
<td>22.8%</td>
<td>4.4%</td>
</tr>
<tr>
<td>Agriculture and Mining</td>
<td>20.2%</td>
<td>0.7%</td>
</tr>
<tr>
<td>Other jobs</td>
<td>9.2%</td>
<td>10.8%</td>
</tr>
<tr>
<td>Street vendor</td>
<td>1.8%</td>
<td>5.5%</td>
</tr>
<tr>
<td>Construction/Building</td>
<td>1.2%</td>
<td>3.4%</td>
</tr>
<tr>
<td>House maid</td>
<td>0.7%</td>
<td>6%</td>
</tr>
<tr>
<td>Recycling material</td>
<td>0.1%</td>
<td>0.9%</td>
</tr>
<tr>
<td>Begining</td>
<td>0.1%</td>
<td>2.3%</td>
</tr>
<tr>
<td>Proper employment</td>
<td>0.6%</td>
<td>9.1%</td>
</tr>
<tr>
<td>None</td>
<td>29%</td>
<td>52.2%</td>
</tr>
</tbody>
</table>

Table 3: Activities before and after displacement.

45 Source, PAHO/WHO 2005.
After displacement 52.2% of the population didn’t have an activity from which to earn a living, in contrast with 29% before displacement. Furthermore, before displacement only 0.6% was properly employed giving us the idea that no social security scheme or benefits where available for the vulnerable populations before their displacement. Land and mine laboring as well as the traditional migration for seasonal jobs is prevalent for both groups (independent of whether they are displaced or not.)

4.8 Shelter

In the emergency phase (first three months after displacement) IDPs receive relief assistance from humanitarian agencies. Time between a threat and departure could be as short as 6 hours.46

Transport is expensive and IDPs have to rely on small savings. Distance between place of origin and destination is uncertain. Most people move a distance that is far enough for them to be anonymous, into middle size cities where they may have relatives or some kind of contact or social network. This situation increases their vulnerability.

Initially, people move in groups of two to three families, as they can cope better supporting each other in their pilgrimage. After a couple of days, with empty pockets, they will split into fractions. Shelter and sanitation facilities are in great demand and those which are available are not affordable. The state does not provide any help whatsoever. Those who are better off can rely on relatives. This becomes a ‘buffer’ zone; a momentarily solution. The net effect of this phenomenon is overcrowding and unsanitary conditions that were already prevailing among the receptor population.

Availability of shelter in suburbs is dependent on the availability of land for invasion. In areas where horizontal expansion is no longer possible the arrival areas will go through further house over crowding. Quality of housing is by far the worst among the displaced.

Displacement takes place almost everywhere in the country. This survey was conducted in five major capital cities that were acting as reception places. Both populations lack access to pipeline water; forty-four percent of the IDP households have access to an aqueduct; 64% have access in the HP. Electricity services on the other hand are widely available but it is common practice to have illegal extension cables to main energy sources giving a misleading sense of full coverage or ample energy supply.

4.9 Epidemiological trends

It has long been proven by different reports that the first five causes of death among children under five years are Upper Respiratory Infection (ARI) and Diarrhea Diseases (DD). In the third world countries the burden of disease, prevalence, among the displaced population reached 94% for DD and 64% among the receptors. At national, levels the reports shows 218 cases out of 1000 people and 347 p/ 1000 with a noticeable concentration of the cases in the age group 1 to 4 years.

Gastrointestinal diseases (DD) accounts for 272/1000 and 219/1000 among HP.47 These figures reflect the national epidemiological trends for preventable waterborne diseases, the precarious water and sanitation infrastructure available, as well as the lack of promotion activities. Only one quarter of both populations has drainage systems for toilet waters and only 6 out of 10 households have garbage collection systems. The figures for big capital cities by the year 2001 reveal that 96% of the population living in cities had drinking water, 86% waste water system and 95% had garbage collection.

46 Field work
4.10 Health Coverage. EPI as an indicator.

Despite all the efforts made by government and UN system to improve vaccination coverage in the country, the expanded immunization plan coverage (EPI) has failed to reach the most vulnerable populations. Only four out of 1000 children have completed a full protective vaccination scheme in the HP and two in the IDP. Surprisingly, vaccines were available. If we consider that protective schemes should reach 90% of the population of under fives with the whole set of vaccines, Colombia is then far from the WHO targets. Vaccination should therefore be a priority. The fact that vaccines were available reveals a serious weakness of the insurance model. See table below:

Graph 2: Vaccination coverage 2002.48

4.11 Reproductive Health

It has been said that 47% of the displaced women are in fertile age (15 to 49 years) in contrast with 51% of the HP.

The number of children varies but is on the range of three children among IDP in contrast with two children among HP. Out of 100 adolescent girls, 35 have already given birth and are active mothers.49 This figure exceeds 15%, the national average reported in year 2000, which is already unacceptably high. These girls have attended few years of school and have a very deprived environment as well as low opportunities for self-care and access to reproductive health services. There are six-fold more pregnancies among women in reproductive age (WRA) between HP/IDPs as compared to the national average.

49 ‘Salud sexual y reproductiva en Colombia, Encuesta Nacional de Demografía y Salud’, Profamilia (Bogota, 2000).
Attendance to prenatal clinics is around 60%, a figure that falls far below the national 87% attendance. It is equally important to mention that cervical cancer screening was statistically significantly higher among displaced woman aged 29 to 65 years.

4.12 Access to Health Services

Since 1991, the approval of the new Constitution brought about the implementation of a new set of laws leading to a progressive introduction of the Social Security Act 100. This gave way to the privatization of health services. Universal access to the basic health package (PAB) was supposed to be provided by compulsory affiliation of all citizens to the Plan Obligatorio de Salud (POS). Individuals willing to pay an additional fee can access an additional Health Package offered by the Empresa Promotora de Salud (EPS).

After fourteen years of implementation of the Constitutional Act 100, the results achieved are far from satisfactory. Basically, it has created two categories of beneficiaries: those who can pay the POS and the additional package of health services and those who still depend on the state capacity to pay for their high cost diseases. The Government Social Security system is highly in debt and has limited capacity to respond to the growing needs of a new population. The displaced were not visible at the time the bill was drafted 14 years ago, therefore the system remains under huge pressure by the poorest sectors of society. Additionally the Emergency Account (FOSYGA) aimed at the equitable redistribution of benefits through the fair distribution of services, has been financially overburden since its creation.

As for year 2002, only half of the population had membership to the Social Security System. Only 24% of the displaced population has an insurance scheme as compared with the receptor population’s 34%, meaning that there is still 60% awaiting some type of coverage. Not to mentioned that high income sectors of society can afford private supplementary medical schemes.

The identification system for subsidized services (SISBEN) is used as an instrument to identify beneficiaries to government funds for social welfare benefits. They target a reduction of 10% among the HP in the study sample. The Ministry of Health data shows that 18% of the IDP and 27% of the HP hold the SISBEN at the national level. The SISBEN ID provides free social services, however, holding a SISBEN identification card does not mean that the citizens have an easy direct access to health services.

From the previous data, and reports from different authors and field volunteers, the health seeking behavior depends not on the disease itself but the type of identification the beneficiaries hold at any one time. Those who contribute to the system (i.e. employees with a fixed salary,) attend the outpatient clinics more often as compared to those depending on the subsidized regime.

The overall impression is that the Social Security System is inadequately financed to provide universal health coverage to all Colombian citizens. Real access to services is highly deficient and depending on the type of social insurance scheme, health providers will decide on providing assistance or not. There is discrimination towards the IDP; they feel stigmatized and are also forced to pay extra fees.

<table>
<thead>
<tr>
<th>Quantitative summary results of key indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>acc</td>
</tr>
<tr>
<td>ess</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

50 This is a direct consequence of the IMF and World Bank structural adjustment.
Chapter 5

Humanitarian Response

5.1 Who carries the burden of disease and the weight of the law?

Given that human rights obligations relevant to health rest with the government as a whole, health and human rights goals need to be reflected in policies and plans. These may be generated outside the health sector per se, but should have a strong bearing on health, such as national education, food and nutrition policies and plans. The focus on vulnerable population groups draws attention to how national legislation and development policies are obliged to impact upon the status of such groups. Which institutions work to protect their best interests and how civil society represents them?
Human rights norms stimulate the collection of evidence, indicating the data needed in a desegregated way, trying to go beyond the traditional markers that could detect discrimination on the basis of ethnicity, economic status, or political affiliation or other “undefined status.”

In this case study the “undefined status” would apply to a condition that externally would explain the difference between IDP and host person, on the basis of a history of external threats to their lives, but not on the on the determinants of health as a whole. One could argue that living under these conditions can be deleterious to peoples’ physical and mental health. This is true; however the host population is not immune to these unavoidable feelings of insecurity. In the suburbs of big cities similar scenarios of “undefined status” can occur but this status is strongly related to other externalities like rampant criminality that nests in such environments.

This discrimination is considered an underlying determinant of the overall poor status of these groups. In many cases “the political sensitivities which underpin human rights in exposing how different populations are treated, hamper the extent to which human rights are welcome as a driving force for data collection.” The political sensitivities are clearly observed when the government tries to minimize the disabling effects of war on government armed forces, although no data exploring the devastating effects on soldiers’ livelihoods is currently available. Disclosing such register would be unpopular for the government itself.

Upon analysis of the above mentioned data it looks as if there is a structural problem that could be accentuated by a weak incoherent legislation, inappropriate to the times and inadequately implemented.

The data provided previously was a good effort for desegregations. Further efforts should bring together “health indicators” and “human development indicators” to use a common language and a greater common framework for the design, development, use and assessment of indicators.

For example the UNDG working group, is developing a country assessment indicator (CCA) into which human rights indicators are included leading to a CCA indicator framework. This would lead in the future to a single set of development indicators designed to measure “what is” on a “right to right basis. “ In other words a development indicator such as access to education will match the “rights to education” but the development of more sensible and representative indicators will need to be developed to correlate, i.e. “right to freedom of speech or right to dignity ...”

Equally important to mention is that rural poverty and social exclusion is a much misunderstood subject. “Some people ignore it, mistakenly believing that the problems only exist in inner cities. Others try and give it a very particular flavour -focused on the problems of farming - whereas actually, many of the problems are similar to those in urban areas”. This reflection also applies to the displaced and host populations living in small or big towns. There is tendency to separate them instead of doing the inverse exercise in a highly urbanized world. Over time, populations have a tendency to share the same problems. Such is the trend of chronic diseases for example (Disease Control Priorities in Developing Countries-PAHO/WHO.)

5.2 How to subsist in “subsist in dignity?”

Other aspects that are perhaps not visualized in this report refer to the assessment of local capacities. Literacy level, however low, cannot be understood as a lack of capacity to self determination or an

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51 Questions and answers on health and Human rights. WHO. 2005
52 UNDG. United Nations Development Goals
53 Analysis of rural poverty and social exclusion for the Countryside Agency, the Government’s statutory adviser on rural issues. Our report was published on 3rd December 2002
54 Disease Control Priorities in Developing Countries-PAHO/WHO
inability to cope with adversity. The occupational profile reflects people’s resilience and how resourceful they are in tackling adversity. The study also visualizes aspects of gender distribution and roles- the burden of responsibility to their offspring.

5.3 What makes the populations different? The dichotomy between displaced and host persons.

Displaced persons have different legal status as compared to the host population (see principios rectores del desplazamiento and UNHCR). If this is the case there is no easy way to prove that the residents are not being threatened nor is there a way to controvert the fact that resident populations are in some cases sanctioned or harassed by armed groups for providing shelter to new comers. It is even more difficult to controvert the figures shown above where no significant differences are found between groups as regards health determinants and health status.

5.4 How difficult it is to target?

Response programs should then be designed to close the gap between existing living conditions of IDP/Host and those segments of society living closer to the full exercise of their rights. In other words the threshold for compliance should be set above the poverty line. Why should it be below? If we lower our satisfaction line would it be possible to claim “a life in dignity?” Restoring dignity is an important aspect of protection activities and humanitarians are encouraged to promote it. From the data available we could argue a couple interesting visions in this respect.

On the assessment, literacy level however low, cannot be understood as a lack of capacity to self-determination or an inability to cope with adversity. The occupational profile reflects people’s resilience and how resourceful they are in tackling adversity. The study also visualizes aspects of gender distribution and roles played in the household; it reflects the crucial role of women as mothers and that they are an important part of the workforce and a moral engine in this war torn society.

Although the variables cannot explicitly address a concept such as “dignity,” one can presume a life in dignity starts with the self-esteem and self-respect. It is through the daily construction of a better future that you rebuild the foundations of the lost dignity. External presence can help rebuild the weakened structures but it can also be a harmful intervention.55

On this same line of thought we could argue that it is possible to live in “dignity” under hardship like in present-day Cuba. 100% health and education coverage is part of the national pride and a good reason to be proud of oneself despite adversity.

It is nevertheless important to make a distinction between the emergency needs and the chronic needs of a population in a complex emergency. In several humanitarian crises, the resources required to bring a community, area, region or even a country to fulfillment of basic needs, are far greater than the resources available. But is that true?

If governments were really willing to revise their expenditure on social development and the developed world was really interested in putting 0.7% of the PIB on well thought and well implemented cooperation, the compliance threshold for many countries would have been reached by now, despite their conflict. Furthermore, perhaps the conflict could have been averted.

However the ICESR says that “all possible resources should be made available.” So who will carry the burden? An agency cannot expect to bring this single handedly and communities, their neighbors, host governments, donors and local organizations all have a role to play. How are they playing?

55 Anderson Mery. Do no Harm. .......

27
5.5 Analysis with a Human Rights approach

The National Legislation on Health is framed by the National Constitution enacted in 1991 after the National Constitutional Assembly accepted the need to introduce constitutional reforms that were at the same time being influenced by major world changes.

Was the new National Constitution drafted in times of peace or war? The answer to this question is out of the scope of this paper, however it is wise to say that the internal conflict was by that time “contained” and the political scenario allowed the different parties to sit and discuss in the “Constitutional Assembly.” In chorus with the influx of money of different origins and the introduction of neo liberal reforms, the state bodies had “open heart surgery.”

The Ministry of Health became the Ministry of Social Welfare and Employment (1991-1993), while rampant decentralization gave more autonomy to the regions that were ill prepared to be administratively and technically capable to assume high degree of autonomy. In addition the privatization of the health sector was rapidly implemented and the dismantling of the National Health System brought the poorest sectors to the lowest health coverage ever seen in the country.

Resources, both human and financial were not focused upon the people’s needs, but upon the bureaucratic management of this radical change.

The public social security net (ISS) was by this time seriously in debt because of mismanagement, corruption and loss of contributions from high salary employees that choose to invest in the newly created private companies. As of today, the public net has been left with the burden of the poor affiliates (low wages) plus the chronic and costly social needs of the poor. There is an ongoing debate among academics trying to explain what has been more deleterious to the society, fifty years of civil armed conflict or 15 years neo liberal health sector reforms.

The effects of a legislation drafted under the influence of the Chicago School brought about theories that protect private entrepreneurship, leaving behind a realistic legislation that promoted equitable access to health and made provisions for the adequate coverage of health for the vulnerable. The IDPs are not mentioned in the Constitution and only recent bills have addressed the state responsibilities (Ley 343 Ministerio de Seguridad Social.)

The social security bill (Ley 100) has structural deficiencies as regard to the protection of Health Rights. It is currently under revision by the Congress and Parliament. A second heart surgery would lead to amendments that will simply act as a by pass” and surely intensive care will be needed to avoid post surgery heart failure!

5.6 Is the GOC complying with the ICESCR?

The states parties obligation (Art 2, Part 1) of the ICESCR and General Comment 14 stresses that there are obligations of conduct and obligation of results. The Covenant provides for progressive realization and acknowledges the constraints due to the limits of “available resources” and imposes various obligations that are to take immediate effect.

Two are obligated to take immediate effect. The first is that the state immediately “undertake to guarantee” that the relevant rights will be executed without discrimination, and the second immediate obligation was undertaken in Article 2(1) “to take steps, which in itself, is not qualified or limited to other considerations”. As it is explained in general comment 3, in Spanish to undertake means to “adopt measures.”

Indeed, the Constitutional Assembly did so, by drafting a legislation promoting equitable distribution of resources and universal health coverage, however in real time reality shows a different picture. CEPAL
reports that more than 40% of the population lives below the poverty line, and since the 90s, poverty has increased in Latin America as a whole. The rich are richer, the middle class is “raspando la olla” and the poor are poorer. On one hand, the state claims not to have sufficient financial means to cope with the number of health seekers, on the other, the private sector claims that they are only entitled to provide services to their clients.

The full realization of the relevant rights may be achieved progressively, but the Covenant doesn’t give a deadline nor does it give “gold standards” to be achieved on a short or middle term basis. There is no “time limit” or rather “reasonable amount of time” after which the Covenant should enter into force for the state concerned. There is only one obligation undertaken that has been immediately applied: “prohibition of discrimination” based on race, religion… and other status.”

Article 2(1) also states that to achieve compliance with the obligations, the use of “all appropriate means including the adoption of legislative measures” should be considered in this respect. Not surprisingly the courts are full of claims; action popularis, and tutelas (translate) and many other human rights instruments are regularly used by citizens to claim their rights.

The use of all appropriate means is not restricted to legislative measures but it should include a successful decentralization process, political commitment, budget allocation, training of civil servants, control over private health providers, corruption control over contractors, and strengthening of the judiciary.

The statement: "use of all appropriate means" may also mean that the appropriateness of the means chosen should be in accordance with the principals of equity and non discrimination (by virtue of articles2 ( 1 - 3), 3a and 26 of the covenant on ICESCR.)

Other measures that can be considered appropriate in addition to legislation includes the provision of judicial remedies with respect to the rights, which may, in accordance with the national legal system, be considered justifiable. In this sense severe punishment for the corruption practices among civil servants should be included.

5.7 What else can we say about the rights to health?

Comparable indicators among residents and IDP lead us to think of a structural problem: baseline poverty.

The author argues that both populations are entitled to receive the same assistance and protection provided there is ample evidence that not “all means” have been used. I would ask how Cuba manages to make a step forward with much less means available. This reflection escapes the scope of this paper but substantial data to support this statement is paradoxically available in the WB reports, UNDP and many other agencies.

If the reader checks for the expenditure on the military vs. expenditure on Social Programs in Colombia in the last 8 years he/she will find an answer. Furthermore, minority groups living in remote areas of the Pacific coast and the Amazon basin are perhaps in a worse situation because they are not visible to the media or the policy makers.

5.8 Is there political will to comply with the ICESCR?

Privatization of public assets has come at the wrong time. They are part of a counterproductive measure which highlights the contradiction between policy aims and the means to achieve the results. There is no way the private sector can provide equitable universal access to health, assure self sustainability, nor can a humanitarian agency assume such responsibility. The state is “compelled” to provide such services and the law limits the achievement of this goal.
6.1 Cooperation in the nineties

President Pastrana’s office (1998-2002) was highly unresponsive to the human drama observed nationwide. By the end of the nineties, the UN system was already on alert to the forthcoming humanitarian crisis that was not yet openly addressed by the GOC. The slow pace at which the UN system entered the country with a full-blown operation was detrimental to the rapid establishment of a humanitarian workforce. Similarly, efforts enacted by the EU to promote investment in conflict areas
were dependent upon the government’s fragile cooperation structure and lack of clarity to accept
nation wide crisis.

Few missions managed to expand a comprehensive response to the displaced populations. The Red
Cross National Society, ICRC, MSF Holland, and The Church (Pastoral Social) were among the most
active organizations working during this lag period of the nineties and the beginning of the millennium.

6.2 Bilateral cooperation

As for the presence of bilateral cooperation, on one hand we can say that long standing relations with
European missions had always been a major support for local NGO’s and the governmental sector. The
major contribution comes from Germany followed by Sweden, The Netherlands, Spain and minor
contributions by France, Great Britain, Austria, Italy and Belgium. They have been important partners
in bringing forward important development agendas for decades and more recently new partners have
added to the list, such as Norway.

Similarly, through bilateral relations with the USG, the Presidency has been implementing the Plan
Colombia intervention strategy for the period 2000 to 2005. It supports four goals. The first three
are closely related to political and military security.

6.3 Multilateral cooperation.

The European Commission is by far the most important actor with almost 40% of the total non-
reimbursable donation, at 165,542,693 Euro. The overall European Community contribution is
422,045,159 Euro for the year 2004.

According to the Comité de Ayuda al Desarrollo (OECD) the EU is focusing on multi sectoral projects to
strengthen government institutions and human rights, environment and humanitarian assistance with
an emphasis on IDPs. Different areas and investment as a percentage has been distributed as follows:
24% toward peace construction and conflict resolution, 16% to DDHH, 16% for Democracy and State of
law, 13% toward health and education, 15% to the environment and 12% for humanitarian assistance.

The third important actor is the UN system that also has one of the biggest operational teams in war
affected countries. Almost all the UN agencies are presented nationwide.

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2005).

57 Reduce cocaine and heroin flowing from Colombia to the United States.

58 ‘La Union Europea y Colombia’, Informe 2004 CE.

• Bolster Colombian Democracy by: dealing frankly but constructively with the GOC on human rights; sponsoring local
  forum as to promote discussion of civic values and readiness to address Colombia’s conflicts; helping to strengthen
  local political, judicial and legislative norms.

• Promote a long-term foundation of mutual understanding that will support a broader based of acceptance of US
  positions on Bilateral, regional and Global issues.

• Diplomatic Activities. Improve the effectiveness of USG relations with the GOC across a range of issues including
  environmental protection and humanitarian assistance and counter terrorism. Determine motives behind GOC
  positions on multilateral issues in order to better attain support of USG positions.
6.4 Modes of action of the agencies

The term mode of action relates to the means or methods used by humanitarian actors to come to the aid of the victims of the violation or simply how humanitarian agencies operate.

When faced with a violation of the law, agencies will adopt one of the following modes of action which: persuasion, denunciation or substitution. Cooperation is a way to

Briefly speaking, through persuasion, humanitarian actors will try and convince authorities to act on their own accord to put an end to a violation or to assist the victims affected by a violation. It requires a relation of trust between the two sides. This type of relationship can help humanitarian actors get access to the populations under threat.

Denunciation is used to pressure authorities into taking action against them, to put an end to the violation or to assist the victims affected. More often than not denunciation will lead to an antagonistic relationship with the authorities responsible.

Substitution is a situation in which the humanitarian players substitute themselves for authorities that fail to fulfill the obligations and take action in their place to put an end to the violation or to assist the victims affected by the violation. This situation is prompted by the fact that the persuasion or denunciation cannot or can no longer remedy the situation.

Going back to the case study, what would be more efficient to protect the rights of the peoples?

How does denunciation compare to persuasion? Denunciation is generally easier than persuasion. Persuasion means steady patient work to persuade authorities that both populations deserve equal attention, and entails waiting for them to take steps on their free will. Denunciation on the contrary can be made quicker from outside the country, and by gaining access to an implementing body or the media, but still the information gathered needs to be cross checked by a partner agency.

Very little attention has been paid so far to the situation of the host populations for the very simple reason that no one wants to accept the burden of the obligation towards a population that also awaits support.

In some cases substitution is successful, but it is done in exceptional cases and could be regarded as part of persuasion and denunciation, and not as a failure of the previous methods. Substitution could lead to dependency and can eventually hinder self reliance in the long term.

Substitution requires greater financial means than the previous methods. It necessitates costly infrastructure and logistics, since by definition the organization will take over tasks incumbent to the authorities often on a large scale.

If the IDP settlements are spread all over the country, the substitution mission will become non-sustainable with donor funds. In addition, selecting a few settlements will be against the principal of equity, as all the communities deserve the same attention. The ethical dilemma remains. In an emergency situation of massive influx this could be a life saving measure that is well received by the population.

ICRC is one of the humanitarian players that practice the strictest form of persuasion. NGOs operating on the human rights sphere operate mainly on the sphere of denunciation and relief organizations operate on the basis of substitution.

In a Complex Emergency, (defined as a situation where a government has shown themselves to be too weak to cope with the situation on their own and are unable to squash the serious consequences of the armed conflict to an extent that the state apparatus cannot cope with the needs of the population under threat) sovereignty is put into question in some regions of the country. As a response the International community, in this case the UN system, responds by diverting funds to strengthen govern ability and they cooperate with the local government by supporting the Regional Authorities in their endeavors. In this situation technical cooperation can also have an excellent outcome.

This is the case of the current intervention by PAHO/WHO in Colombia through the Emergency response to the displaced population.

6.5 Complementarities in emergency phase.

For the emergency phase in massive or “drop to drop” displacement a good coordination between the national authorities, in this case (RSS), is of vital importance. The problem shouldn’t be centered on the logistical problems faced by Red Cross Societies, ICRC or the church to deliver basic foodstuffs. There is actually great expertise developed in third world countries by highly trained and highly motivated youth. The difficulty is related to how to reach the target and how to develop the protection strategy.

Aspects to be prioritized: Water and sanitation, shelter, food, health, and protection activities.

Food security has been identified as a priority in the first three months after forced displacement Colombia experienced approximately 135,000 IDPs (annex 2) for the year 2004. It is delivered exclusively by the ICRC in close coordination with the RSS. It serves massive displacement as well as drop by drop displacement. This activity is funded by ECHO and USAID together and the Head Delegate of the ICRC is responsible for the outcome of this intervention.

It has national coverage, but due to complexities of Colombian topography and the dynamics of the conflict, aid does not always reach the people on time. Regional Red Cross societies are an important support to ICRC operations and it is equally important to mention the church participation that is highly respected by armed groups in conflict areas.

The assistance provided by the RSS, ICRC and the Church (acting as main actors) also includes non-food items, water for external use, and livelihood support.

In addition, protection activities are developed and on occasion, psychosocial support and health assistance could be available. Mental Health programs are of ECHO’s interest and some pilot projects are currently on trial. This professional advice is part of comprehensive package trying to provide protection to the individual - physically and mentally. Management of posttraumatic stress is indeed a field of great interest and is impacting communities immensely. MSF Holland, the Red Cross and PAHO are moving ahead with these activities, with mental health brigades in different locations of the country.

To what extent are the donor agencies achieving the minimum Sphere standards?

6.6 Complementaries in Post Emergency

The structure of current assistance to long lasting protection activities leads to the overall respect of people’s physical and mental integrity, before and after displacement occurs. How do they best reach and mobilize displaced and host populations to pressure local and national authorities to fulfill their
mandates? How can UN officials and NGOs best engage around a united effort to abandon apathy and boost commitment to protect individuals, not only the displaced?

The answer is a focus towards a comprehensive package of services including community canteens, shelter improvement, psychosocial support, access to water and sanitation facilities, health assistance, livelihood support, and strengthening community and civil society organizations altogether.

ECHO is currently funding these activities through partner’s agencies such as Caritas, Red Cross Societies supporting the Colombian Red Cross, Hilfswerk Austria, Movimundo Italy, etc. The ICRC has produced a document called Oferta Institucional in Colombia and has all the information on agencies registered in the country. See www.icrc.org.co.

The extensive collaborative network available is not big enough to cover all the municipalities in need. They aim to serve approximately 35,000 IDPs in the year 2004-2005 but there is a huge accumulated figure without assistance. Mapa de desplazados

Plan Colombia (PC) Social Services Stability Program (annex 4) looks politically bound to the acceptance of PC by the communities. For example most of the IDPs fleeing from Putumayo are arriving to Nariño (Southern Colombia Province) where USAID program is very much needed. However, only the municipalities that accept the military component of Plan Colombia can become beneficiaries of the investment.

Initially the projects aim for the support of secondary cities where large numbers of IDPs are arriving - either temporarily or permanently. Municipalities are selected according to the number of IDPs, where the security situation is conducive to medium or long-term assistance, and there is local capacity and the interest of local actors. These conditions are not always easy to fulfill and coverage is then limited.

6.7 Health

Health services in the most remote areas are badly equipped and lack medical personnel. In some other locations the facilities have been upgrade with Gov funds but they need to be run as small self finance business (Consequence of the Health sector reform) and the insurance scheme is only affordable for those with income. The system is “exclusive” and consequently the people are only admitted to hospital services unless they have funds. This bizarre situation is also applicable to host communities.

As regards to the role of ICRC, Mobile Health Units that have been operating in Colombia for the last 5 years. They provide health assistance to populations with limited access to urban facilities due to the ongoing conflict. The active participation of Canadian, German, Swedish, and Norwegian National Societies of the Red Cross make it possible. From the protection one aspect to highlight is that the physical presence of an agency in the field is highly protective for the community.

In the most contested regions, substitution has been a hallmark of these activities but gradually as time and the security improves, the engagement of local authorities takes place and the agency pulls out, And activities are transferred to the local authorities and/or community. T

The OPS/WHO program on Complex Emergencies and Disasters has five operational regional offices that are supporting local governments in the improvement of health access for IDPs and the overall development of the Social Service Charter.

6.8 Children
ECHO also identifies children as particularly vulnerable; an estimated 2 million of Colombia’s children are abused each year, 850,000 severely and 36% suffer some form of abuse. The children’s agenda comes combined with the educational, health and human rights component.  

USAID supports the UNICEF agenda for children in the war, demobilization programs and rehabilitation. They offer a special emphasis on programs that prevent the early recruitment of children in the war. A joint effort of ECHO, Deutsche Diakonie and Save the Children UK is similarly working to prevent recruitment of children, protection and reintegration. USAID also expects that health assistance to IDP will be provided by promoting preventive and curative services and by expanding supplementary feeding for at risk people (the elderly, children, and pregnant women.)

6.9 Health Education and Reproductive Health Services

As we mentioned earlier in chapter three, 35% of the displaced female adolescent population have had their first pregnancy. This alarming figure has raised the attention of the PAHO/WHO Reproductive Health Unit in Bogotá. A local NGO Profamilia has done excellent work trying to compensate for the state absence and is currently receiving support by North American partner agencies. The limiting factor is that Profamilia has no coverage in remote areas where their presence is most needed. Strengthening alliances between municipalities and the NGO would be most beneficial.

6.10 Refugees

To the regional dimension of the crisis already described in previous chapters, the EU raises further concern regarding the refugee problem in neighboring countries, an influx that has been triggered by the systematic aerial fumigation operations with the environmentally deleterious Glyfosate in Putumayo Province.

Over 350,000 Colombians are now living in Ecuador, and 30,000 are seeking asylum, while 4,500 sought asylum in Venezuela during the same period in 2004. In view of the regional dimension of the crisis, assistance to refugees in neighboring countries is included in 2005 USAIDS Global Plan. Paradoxically this is the same agency spreading in a indiscriminate way the noxious chemical in backyards.

To improve the levels of protection and social integration of refugees in Ecuador and Venezuela between 2005-2006, the financial support provided by ECHO will benefit at least 70,000 refugees through different agencies such as UNHCR, WHO and CIS. The overall number of beneficiaries will be at least 130,000, and an additional 60,000 vulnerable people will see their living conditions improved. ECHO’s needs assessment and characterization of the target population is well developed thanks to reliable information provided by partner NGOs.

6.11 General comments and Discussion.

According to ECHO needs assessment, food and nutritional support in the three first months of displacement is of vital importance. However, the most vulnerable will find it harder to build such capacities in a short time in a completely strange environment. Non-food and hygiene items are often forgotten in the aid packages and are essential to improve sanitary conditions after displacement and during. Question: Is three months of assistance long enough?

Lack of adequate shelter, access to water and sanitation facilities especially in shanty towns set up’s is a common problem observed in the outskirts of cities. The problem of land tenancy brings about into consideration the need to have national policies to speed up the legalization on property and bring

about mechanism to find fast agreement between landowner and the new communities. The issue of securing satisfactory legal land tenure is a constant problem and grows very quickly nation wide. The GOC should facilitate the legal procedures.

Lack of mental health programs. ECHO also focuses its attention on psychological support and considers its enrollment crucially important to help people get over the trauma they have experienced. Informal education for children is necessary, especially to fill the gap caused by their dropping out of school due to displacement. Children that have not yet reached the minimal school age to enroll in the public schools should receive extra support that helps them avoid being recruited by armed groups. Are those children able to be reached?

Protection of civilians and the dissemination of IHL are of prime importance for the Colombian mission.

ECHO has emphasized vulnerable age groups and gender. Needs assessment can still be improved by improving population targeting. There is also a need to start providing or improving protection activities through an integrated response that later would enable processes towards self-sufficiency.

What about ethnic minorities living in remote areas such as indigenous populations in the Pacific and Amazon basin, communities that have become politically marginalized, or where state and humanitarian agencies are not permitted to reach the beneficiaries due to the intensity of the regional conflict? Are these populations targeted?

These populations are out of reach in most cases and so they have to rely on community response to assure their survival. In these cases international accompaniment is of vital importance and very much appreciated by communities. International accompaniment is based on the theory that international presence can be used as a deterrent to violence instigated by armed actors who are sensitive to international pressure. It is seen as a tool for the nonviolent transformation of conflict, through which third parties contribute to create the necessary conditions for the resolution of that conflict.

Essentially, international volunteers accompany threatened local citizens and organizations, allowing them the “breathing space” to allow them to continue their work for social justice. Methods vary, but often these agencies will rely on a combination of the persuasion, denunciation and substitution methods mentioned above. Members of these projects meet with civil and military authorities as well as state entities, NGOs, the church, the diplomatic corps and international organizations. International accompaniment organizations currently in Colombia include Peace Brigades International, two branches of the Fellowship of Reconciliation (USA and Sweden), Red de Hermandad y Solidaridad-Colombia, and International Peace Observatory.

There is an urgent need to expand support activities to refugees across borders although UNCHR is widening its range. ECHO’s mission has also mentioned the need “to carefully scrutinize costs to assure a certain level of maximum costs per beneficiary, based on the nature of the assistance and the accessibility of the populations” (ECHO, 2005). This will help address the issue of accountability and further develop impact indicators.

6.12 What is the GOC Doing?

In relation to the GOC, coordination by the RSS is weak despite ECHO continuous support of 6,000,000 Euros for year 2005, and it is expected that OCHA will also lead adequately the coordination among the UN system to assure the expected impact of international support. However, the efforts made to draft the Humanitarian Action Plan for 2006 and 2007 has not been successful, and so far the Consolidated Appeal Process has only created false expectations among operators and beneficiaries.

The Strategic Programming for ECHO Global Plan (annex 3) provides a detailed list of activities and an
investment chart for 2006-2007. USAID yearly program Y2000 to Y2005 can be observed as well. (annex 4.)

6.13 Conclusion con comentarios del padre Serrano frente a la política de restablecimiento en post emergencia.

Do the UN reforms address the problems identify so far in the case study?

There is little doubt that the diagnostic aspect of humanitarian response is of mile importance for the future improvement of actions. Donors and agencies need to see credible assessments and results. They will need to continue to provide funding in assessment capacity and in necessary expertise to gather reliable information on demographic trends, epidemiology, etc.

Current information has not yet reached the quality and the amount to allow for a closer agreement on population targeting and the minimum necessary evidential basis for determining the appropriate response.62

The decision to give the UNHCR the lead role in protection and camp management for chronic related internally displaced people has been welcomed by some that have long argued that the collaborative approach between agencies has fallen short of meeting IDP’s needs.

This also implies a potentially misleading view of protection as another service to be delivered analogous to those related to the determinants of health that scarcely does justice to the nature of the problem and the solutions it requires (OCHA 2005.)

Chapter 7

Conclusions

Study Problem

The analysis of the root causes of displacement in Colombia cannot be properly understood outside of a socio-economic, political and historical framework. Sixteenth century power structures prevailed until the independence wars. In the nineteenth and twentieth centuries, little progress was made to achieve a more equitable distribution of land and power. In the late fifties, popular political movements were confronted with the traditional ruling parties and the result was an armed confrontation leading to La Violencia period, causing the first wave of displaced population. They settled in new territories in the absence of the state’s rule of law.

During five decades of progressive gradual colonization of these unclaimed territories, the landowners’ economic interests were threatened by guerrillas, and as a consequence, self-defense armed groups flourished in the absence of the law and state control.

62 The Currency of Humanitarian Reform. HPG Briefing Note. November 2005
Armed confrontation has escalated over time reaching a peak high after the introduction of illegal plantations in the early eighties. Civilian victims of nationwide violence account for an accumulated figure of more than three million by year 2005 and it is still on the rise.

The decline of human security in populated areas of the country is notorious and has had a negative impact on human development. In the eastern plains where the conflict is greater in intensity and magnitude we cannot talk of decline or disappearance of security. It was the land of indigenous populations living in peace with nature before the colonization of their territories.

The Government’s obligation to secure the basic needs of the victims of violence and in particular of the displaced has been inadequate and in many instances non-existent. Therefore, the role of Humanitarian Action is crucial to ameliorate the victims' capacity to cope with adversity in emergencies and promote viable development alternatives in the mid and long term.

The overall contribution of humanitarian agencies has different levels of interpretation. Donors’ points of view follow an International Development Agenda and International Security Policy under which humanitarian assistance is provided. Therefore, the contribution of humanitarian agencies to secure the provision of civilians’ rights such as protection of the rights to have access to food, health and education as well as opportunities to participate in the mainstream economy of the country, is bound to the donors willingness to support such initiative.

Some implementing agencies are more in line with the dissemination and observance of the application of International Humanitarian Law principals using persuasion as a mode of action, in view of the systematic violations of civil rights. Other agencies are more sensitized to provide an adequate response to the needs of children of vulnerable groups, WRA and the elderly by providing substitution programs. Whatever the interest, the International Community has made a significant contribution to Colombia’s victims of the war.

The two major Donors, ECHO and USAID have designed and implemented different National Contingency Plans. ECHO keeps a distance from the USAID political and military approach. The EU has condemned the military approach and the systematic violation of human rights and environmental destruction promoted by the US that enjoys compliance with the GOC.

It is also possible to conclude, that needs assessments have been properly conducted, and that a great deal of human and technical expertise as well as financial support has been delivered to the victims of violence, but there are no visible indicators to measure impact on civilians and perhaps “process indicators will have to be used as proxies between action being monitored and the expected impact” There is a greater need to invest in evidence based data.

From an operational point of view, there is lack of coordination from the government side as the RSS is overburdened and lacks the capacity to orchestrate such aid. Similarly, the UN system machinery shows a coordination weakness that includes overlapping agendas between offices. ECHO has apparently a lower profile, and seems to reach the beneficiaries with far less traumatic maneuvering, through a selected list of partner agencies.

Poverty and underdevelopment is a common denominator for displaced and host populations. The results of the study support this observation. If there are similar needs then response should be delivered without distinction to satisfy both populations. This effort will avoid negative effects of adverse selection of beneficiaries. It will consequently contribute to the construction of a peaceful atmosphere where every individual can work shoulder to shoulder to build a better future without discrimination.

63 Parlamento Europeo. ECHO dice “No a Plan Colombia”.
Assistance should reach all victims of violence and should not exclude host populations or victims of aerial fumigation.\textsuperscript{65} Military actions violating basic human rights should be stopped thus displacement will be reduced. True humanitarian agendas cannot go alongside military interventions against civilians as is currently happening in Colombia.

\textbf{Primary Recommendations (directly derived from the study)}

- First and foremost: host populations should be included as beneficiaries of assistance and protection without discrimination. Protection activities can go alongside assistance through complementary actions between the agencies ICRC, UNHCR, and Human Rights NGOs.
- Protection activities can go alongside assistance through complementary actions between the agencies ICRC, UNHCR, and Human Rights NGOs.
- The ECHO Comprehensive Development Agenda can be a good conductor to orchestrate a coherent humanitarian action network with sound leadership and a strong human rights agenda.
- Strengthen UN system coordination activities (through OCHA or UNHCR) to avoid UN leadership competition and agenda overlaps.
- The RSS should be supported technically and financially to manage the crisis as it is currently overburdened both financially and operationally. There is a need to strengthen accountability systems.
- The government should benefit from cooperation activities to improve performance at all levels of the state apparatus. Advocacy to change antisocial policies is a must. The Social Security Act 100 should be reformed with no delay.
- Non-displaced victim populations of aerial fumigation should be included as beneficiaries of humanitarian assistance and development projects.
- Raspachines should be decriminalized to allow them to enter into the local and regional mainstream economies with their local products.
- IDPs and host populations should be informed of their rights and obligations.
- The undertaken “use of all available means” to comply with the ICESCR and ICCR is a must and any further infringement by commission or omission should be followed closely and made public at the international level.

\textbf{Secondary Recommendations (not directly derived from the study but implicit)}

- Stop the military component of Plan Colombia. Allow only development and Relief.
- The government should reinforce the Surveillance and Control activities to stop the financial drainage of the Social Security System and strengthen the judiciary to sanction the private health sector that is not complying with the obligation to share the burden of disease of poor sectors of the society.

\textsuperscript{65} Zampatti Miriam. The Aerial Eradication of Illicit Crops in Colombia. An essay submitted as part of the requirements for the Degree of Cross border LL.M in Human Rights and Criminal Justice. Queens University Belfast. January 2005
To improve delivery of emergency aid, agencies should continue working on gaining access to war zones based on open communication and truthful dialogue to gain credibility among actors. Promotion of IHL is necessary. No Humanitarian interventions under military mandate should be allowed.

Community based leadership should be strengthened and communities under blockade should be accessed immediately by the ICRC and the Red Cross Movement.

In post emergency, development projects should be agreed upon with the community and not imposed by HQ (minimal standards SP). High Impact Projects to contain the trend of declining security and (Planes Unicos Integrales) to promote socioeconomic security should not wait any longer and resources should be invested with no further delay.

At the municipal level, development projects should be implemented independently of the political affiliation or support provided to Plan Colombia. Civilians not in agreement with Plan Colombia should receive the assistance unconditionally!

An effective warning system should be put in place (where there is none) or the existing system should be improved. Community based systems have proven to be the best way to resist forced displacement whatever the causes. Indigenous movements have proven to be successful to avoid aggression to their communities and have averted unnecessary deaths and displacement.

Donors should visit the field and have direct contact with the beneficiaries and not always through the agency they are supporting. Understanding the field is the first step to delivering adequate assistance and protection. Such strategies will boost confidence between actors. USAID has a high profile at the central level and low acceptance in the villages. This situation widens the possibilities of improved mutual understanding and cooperation.

Monitoring and evaluation units should be established to follow up inter-agency programmatic developments nationwide so as to avoid scattered fragmented evaluations that are often prepared to pleased donors and do not inform of field realities and achievements.

There is a need to decriminalize the coca producers (peasants and raspachines) and to provide them with optional programs that are friendly to the environment and to country development.

Consequently alternative productive solutions to their present situation will flourish. People working in fear and neglect find it very difficult to develop initiatives coming from outside as they feel stigmatized and vulnerable to the law. This also applies to resident populations.

Opportunities

- Colombia is not yet a forgotten crisis but could dangerously become one.
- A country that drops 20 levels in the HDI may have better options to recover than those countries that have not done well in the past.
- Colombia has a critical mass of human resources not available in many war zones around the globe.
- Colombia’s economy can still finance social programs with its own resources so partnerships can lead to excellent long-term results.
- The country has immense natural resources and biodiversity, which could be attractive for foreign investment.
- Peace talks are under way.
- International Agencies are still highly respected among armed and non-armed actors.
It is of utmost importance to make a distinction between military and humanitarian actions. Currently, they are easily confused concepts which put our humanitarian work at risk.

Successful humanitarian missions highly depend on the human factor, their experience and extended knowledge on different aspects of the human nature and conflict. Without a critical mass of human resources no project will be able to reach the expected objectives. It is equally important to highlight the urgent need to provide the operational agencies with adequate funds and material resources to increase the number of beneficiaries and avoid the use of exclusion criteria. Coordination of these aspects continues to be a big challenge.
## Annex 1. Statistics and data on humanitarian situation

<table>
<thead>
<tr>
<th>General</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population, 2003</td>
<td>44,222,000</td>
</tr>
<tr>
<td>Mortality U5 (per 1,000)</td>
<td>21</td>
</tr>
<tr>
<td>% of population urbanized, 2003</td>
<td>76</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Nutrition</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of children born underweight</td>
<td>9</td>
</tr>
<tr>
<td>% Global malnutrition (&lt; -2ZS)</td>
<td>8</td>
</tr>
<tr>
<td>% Acute malnutrition (&lt; -2ZS)</td>
<td>1</td>
</tr>
<tr>
<td>% Chronic malnutrition (&lt; -2ZS)</td>
<td>14</td>
</tr>
<tr>
<td>% of under-fives suffering from underweight (moderate and severe)</td>
<td>7</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Health</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>% using improved water facilities (total)</td>
<td>92</td>
</tr>
<tr>
<td>% using improved water facilities (urban)</td>
<td>99</td>
</tr>
<tr>
<td>% using improved water facilities (rural)</td>
<td>71</td>
</tr>
<tr>
<td>% using improved sanitation facilities (total)</td>
<td>86</td>
</tr>
<tr>
<td>% using improved sanitation facilities (urban)</td>
<td>96</td>
</tr>
<tr>
<td>% using improved sanitation facilities (rural)</td>
<td>54</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Education</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Men</td>
<td>92</td>
</tr>
<tr>
<td>% Women</td>
<td>92</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Population Data</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population under 18</td>
<td>16,599,000</td>
</tr>
<tr>
<td>Population under 5</td>
<td>4,737,000</td>
</tr>
<tr>
<td>Annual growth rate (%) (1990-2003)</td>
<td>1.8</td>
</tr>
<tr>
<td>Life expectancy</td>
<td>72.2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Economic Data</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Gross income per capita</td>
<td>1,819 USD</td>
</tr>
<tr>
<td>% population living with less than 1 USD/day</td>
<td>8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Displacement figures for 2004</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Displaced people up to 30/11/2004</td>
<td>124,411</td>
</tr>
<tr>
<td>Displaced people up to 30/09/2004</td>
<td>205,504</td>
</tr>
<tr>
<td>Displaced people assisted up to 30/11/2004</td>
<td>65,909</td>
</tr>
</tbody>
</table>

Annex 3
### 4.7.1. STRATEGIC PROGRAMMING MATRIX FOR THE GLOBAL PLAN

#### Principal Objectives

<table>
<thead>
<tr>
<th>Specific objectives</th>
<th>Achievement indicator(s)</th>
<th>Expected output and/or indicators</th>
<th>Potential partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improve response to large events and to protect the health and safety of populations through improved levels of preparedness and in response to major disasters and humanitarian catastrophes.</td>
<td>Improved response to large events and to protect the health and safety of populations through improved levels of preparedness and in response to major disasters and humanitarian catastrophes.</td>
<td>UN OCHA, UNICEF, UNHCR, WFP, WHO, MSF, etc.</td>
<td></td>
</tr>
</tbody>
</table>

#### Specific Objective 1: To improve the levels of protection and to protect the health and safety of populations through improved levels of preparedness and in response to major disasters and humanitarian catastrophes.

<table>
<thead>
<tr>
<th>Country/Region</th>
<th>Specific Objective(s)</th>
<th>Expected Output and/or Indicators</th>
</tr>
</thead>
<tbody>
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<td>Colombia</td>
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</tbody>
</table>

#### Specific Objective 2: To improve the levels of protection and to protect the health and safety of populations through improved levels of preparedness and in response to major disasters and humanitarian catastrophes.

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#### Specific Objective 3: To improve the levels of protection and to protect the health and safety of populations through improved levels of preparedness and in response to major disasters and humanitarian catastrophes.

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</tr>
</tbody>
</table>

---

**Risk Assessment**

- Improved preparedness and response to large events and to protect the health and safety of populations through improved levels of preparedness and in response to major disasters and humanitarian catastrophes.

**Assumptions**

- Improved preparedness and response to large events and to protect the health and safety of populations through improved levels of preparedness and in response to major disasters and humanitarian catastrophes.
Annex 4

Promote Peace and Remove Obstacles to Participation in Colombia's Political, Economic, and Social Life

Strategic Objective 1: Promote a More Responsive, Participatory, and Accountable Democracy
- IR.1.1 Improved Effectiveness, Transparency, and Access to the Criminal Justice System
- IR.1.2 Enhanced and Broader Respect for Human Rights
- IR.1.3 Strengthened Local Governance
- IR.1.4 Enhanced Anti-Corruption Efforts at all Levels
- IR.1.5 Broadened Citizen Participation in Political Decision Making
- IR.1.6 Supported Peace Process Initiatives

Strategic Objective 2: Promote Economic and Social Alternatives to Violent Groups, Particularly Internally Displaced Persons
- IR.2.1 Stabilized National and Local Institutions
- IR.2.2 Expanded Rural Social Infrastructure
- IR.2.3 Expanded Local Economic Activities
- IR.2.4 Improved Management of Natural Resources

Strategic Objective 3: Provide Economic and Social Opportunities to Vulnerable Groups, Particularly Internally Displaced Persons
- IR.3.1 Provided Humanitarian and Social Service Assistance
- IR.3.2 Increased Economic Opportunities
- IR.3.3 Broadened Political Participation

Special Objective 1: Provide Earthquake Reconstruction Assistance
- IR.4.1 Reconstruction of Local Infrastructure
- IR.4.2 Increased Preparedness for Earthquakes
- IR.4.3 Stabilization of Mountainside near City of Pasto
- IR.4.4 Provided Emergency Assistance
Strategic Framework: SO3

Strategic Objective 3: Provide Economic and Social Opportunities for Vulnerable Groups, Particularly Internally Displaced Persons

IR 1: Provided Humanitarian and Social Service Assistance
  1.1 Health Assistance to IDPs Provided
  1.2 At-Risk Children Registered and Enrolled in School
  1.3 Low Cost Shelter Options Provided

IR 2: Increased Economic Opportunities
  2.1 Income Generating Abilities of IDPs Enhanced
  2.2 Community Strengthening Projects Implemented

IR 3: Broadened Political Participation
  3.1 Local Capacity to Absorb IDPs Increased
  3.2 IDP Political Participation Increased
  3.3 Participatory Dialogue on IDP Issues Developed
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