Abductions in Uganda—two Red Cross people still held

ELEVEN members of a Red Cross relief team working in Uganda were abducted on January 7 by unidentified armed men while carrying out a mission in an area north-west of the capital, Kampala.

Nine of the team were promptly released, but as the ICRC Bulletin went to press two others were still missing, Dr. Pierre Perrin, the ICRC’s medical coordinator in Uganda, and a Ugandan Red Cross worker.

The incident occurred while the team, travelling in two vehicles clearly marked with the Red Cross emblem, was on its way to visit a camp for displaced persons in the Mpigi district. Those freed were able to make their way to the Red Cross offices in Kampala two days later (Monday).

The Red Cross relief operation, run by the ICRC, along with the League and the Ugandan Red Cross, is aimed at bringing food, medical aid and protection to some 137,000 people living in a state of insecurity in make-shift camps scattered across a wide area north of the capital.

The victims are supplied by convoy, often under difficult and trying conditions, and receive medical treatment from six Red Cross teams in the field— in an action that is expected to last about six months.

Three wounded

Two Swiss ICRC medics, a doctor and a nurse, and their Lebanese driver were slightly wounded when a landmine exploded in front of their car during a mission in the southern part of Lebanon’s Chouf mountains.

The incident occurred on December 23 when the team was on its way from Sidon to the town of Chhim to carry out a medical survey.

The three were evacuated by ambulance to a hospital in Beirut.

In brief...

The American pilot captured by the Syrians, and released last week, had been visited twice during his captivity by the ICRC, and he was able to receive and send Red Cross family messages.

The three Israeli prisoners detained by the Syrians were also visited by ICRC delegates at the beginning of last month, as were two other Israelis held by a Palestinian group.

On December 13 and 14, ICRC delegates based in Ethiopia visited Somali prisoners of war in the region of Harar. Four delegates, including a doctor, saw 107 POW’s, and registered seven new prisoners.

Delegates have completed a series of visits to prisons in Uruguay. They visited nine places of detention, including La Libertad and the Punta de Rieles prison for women, seeing a total of 806 political detainees.

Bolivia has deposited its instruments of accession to the two Protocols Additional to the Geneva Conventions, while Syria has notified its accession to Protocol I.
**ICRC welcomes new protection for war victims**

In the past few weeks the International Committee of the Red Cross appealed to parties in the various conflicts of the Middle East to refrain from the bombardment of civilian targets.

In the Iran-Iraq war and in Lebanon hundreds of civilians have been killed or wounded recently in indiscriminate attacks. Far from being isolated incidents during 1983, such attacks have been all too frequent in many areas of conflict.

The increased suffering of innocent civilians in the war-stricken regions of the world comes at a time when a new United Nations Convention aimed at limiting or restricting the use of conventional weapons with indiscriminate effects has just come into force.

The entry into force of the new U.N. Convention demonstrates the growing will of some countries, particularly those situated in areas of tension, to place limits on their own right to choose methods of warfare. This trend was further marked last year by an increase in accessions to the Two Protocols Additional to the Geneva Conventions.

Based on its witnessing of the terrible suffering caused by conflicts around the world, and in welcoming into force the new U.N. Convention, the ICRC appeals to all parties involved in conflict to observe the provisions of international humanitarian law by putting them into practice on the battlefield. Even for states not bound by particular legal texts, humanitarian necessity should be a guiding principle, whatever the nature of a conflict or entity of an adversary.

**Concern**

Although continually concerned at the flaunting of existing legal provisions of International Humanitarian Law, the ICRC welcomes the new U.N. Convention as a further strengthening of international law for the protection of war victims.

The need to continue the codification and progressive development of the rules of international law applicable in armed conflicts is a general principle long accepted by the community of nations, while every state has a duty under the dictates of public conscience to see that existing international treaties protecting war victims are abided by.

**Radio engineers from the Salvadoran Red Cross setting up the three solar panels for the relay station. A second transmitter has been fitted with solar energy equipment, since this photo was taken last month.**

**Red Cross radio network in El Salvador powered by solar energy**

The new solar transmitter-receiver was set up recently in Western El Salvador by the ICRC and the Salvadoran Red Cross to serve the radio network used by Red Cross ambulances, mobile teams, local branches and ICRC delegations, after difficulties were experienced in servicing the wholly-battery powered relay stations, situated in inaccessible combat zones of El Salvador.

El Salvador was chosen for the experiment because of its favourable atmospheric conditions. The Head of the ICRC’s Radio-Communications Service, Mr Kurt Ruesch, explained that solar panels have only now been introduced to radio installations in the field because of their falling price. It cost SFr. 4,000 for the three solar panels that are powering the station (pictured left). Conventional transmitters require battery changes every week but engineers are often prevented from servicing them because of fighting in the areas they are situated. But the solar panels allow the transmitter to go on functioning indefinitely, even if some of the elements are partially damaged by, for example gunfire, although the Red Cross is hoping the ICRC flag flying on the transmitters in El Salvador will be respected. Latest reports say the new system is functioning extremely well.
ICRC supervises movement of 10,600 people

By land, sea and air the International Committee of the Red Cross organised the transfer, evacuation or hand-over of 10,600 people within Lebanon and from the war-torn country to other destinations during the final two months of last year.

The culmination of these vast operations was the evacuation of 5,000 stranded civilians from the Christian village of Deir-el-Kamar — where a smaller action had been mounted in early November for the sick, the aged, women and children blocked there.

The latest evacuation began on December 15 when nearly 500 people were taken in a fleet of 12 buses to Beirut and continued until December 22 with the departure of 500 private cars carrying about 1,500 people under ICRC protection. The week-long evacuation involving 5,000 people went relatively smoothly apart from several incidents on the second day, that led to the temporary suspension of the operation for 24 hours, and on the final day when two people were slightly injured by gunfire.

Each day, the ICRC published the names of those leaving Deir-el-Kamar in Lebanon’s daily newspapers, with the date of their scheduled arrival in Beirut or Sidon so that relatives could meet them.

All the evacuees had been stranded in Deir-el-Kamar for about four months, and had received regular supplies of food from ICRC convoys.

While Christians were being escorted from Deir-el-Kamar by the ICRC, another team of delegates and Lebanese Red Cross personnel were organising the evacuation of 94 wounded Palestinians from Tripoli to Cyprus. In less than four hours, the evacuees had been transported from hospitals in the Northern Lebanese port to an Italian ship neutralised with the Red Cross emblem. Two ICRC doctors, four nurses, a delegate and several Lebanese Red Cross workers accompanied the wounded to Larnaca, from where they were taken to Egypt, Jordan or Yugoslavia for further treatment.

Making up the total number of those who passed through the ICRC’s hands were the 4,426 prisoners involved in the hand-over between Israel and the Palestine Liberation Organisation.

This operation was marred by the fact that a number of prisoners who should have been freed according to agreements were not, while others had been removed from buses taking them to freedom after being registered by the ICRC and without the knowledge of delegates. The ICRC is still trying to clarify the situation of the prisoners involved.

All these actions were carried out at a time when the ICRC was attending to the other pressing needs that are part of its daily work in the country, including the treatment of wounded, protection visits to refugee camps and prisons and the distribution of relief to hospitals, clinics and groups of displaced people.
WITH THE TURN of the year in the Western calendar bringing its usual spell of optimism, there is one group of people in South-East Asia who have cause to view the future with nothing but pessimism and anxiety.

Living among hostile armed factions and stranded between fighting parties, over 200,000 Kampuchean refugees, remembering events of the past three years, are awaiting with trepidation a repeat of the dry-season clashes on the Thai-Kampuchean border.

Seemingly condemned to live as victims of a political impasse, the refugees have taken the brunt of the seasonal border violence for three consecutive years, and no one has given them cause to think that 1984 will be any different.

Far from being resigned to the fact that bloody clashes on the Thai-Kampuchean frontier should be inevitable, the ICRC has nonetheless been forced to make the necessary medical and logistical provisions, based on its past experiences of seeing thousands of innocent men, women and children mutilated during the so-called "dry-season offensive".

The Thai authorities, with the safety of their own civilian population in mind, recently moved tens of thousands of Kampucheans to new locations. As in past years, the authorities have set aside evacuation sites to where civilians can be brought for protection in case of emergency, and in cooperation with the ICRC have worked out evacuation routes.

Over the past two months, since the start of the dry-season, the ICRC’s two surgical hospitals at Khao-I-Dang, 20 kilometres inside Thailand and at Kab Cheng in the north, have seen a marked increase in admissions, many of them war wounded. The ICRC which provides mainly surgical treatment for the victims has four surgical teams from the Red Cross Societies of Denmark, Finland, Italy and New Zealand on permanent stand-by. In addition to caring for the wounded, they also accept serious cases for emergency surgery from other hospitals in the area run by voluntary organisations.

**Vietnamese “land people”**

The ICRC medics are continuing to deal with certain categories of illness among the refugees, including malaria which is prevalent in many camps, particularly in the southern region of the frontier.

By its presence, the ICRC also aims to provide a measure of protection to the prisoners and to the refugees, particularly those vulnerable to intimidation from opposing Kampuchean groups, and to the so-called “Vietnamese Land People”. ICRC delegates make constant representations to all parties concerned, reminding them that all prisoners and refugees, whatever their nationality or political stance must under International Humanitarian Law be protected from abuse. The “land people”, numbering more than 1,000, have been arriving recently at the rate of about 100 a month and are presently grouped together in the camp of Dong Rak, which is visited daily by ICRC delegates.

As for protecting the whole refugee population, the ICRC in previous years has appealed for civilians to be spared.
Uganda: two Red Cross members released

The ICRC’s medical co-ordinator in Uganda, Dr. Pierre Perrin, and a member of the Ugandan Red Cross, Mr. Moses Luutu, who had both been abducted on January 7, were released separately on January 24 at places approximately 30 kilometers from Kampala.

Dr. Perrin and Mr. Luutu had been part of a team of eleven ICRC and Ugandan Red Cross personnel. Nine of the group were released two days later. The team had been on its way to a refugee camp north of Kampala when the abduction took place. Dr. Perrin took up his post at the ICRC delegation in Uganda in September 1983. He was in charge of co-ordinating the medical activities of ICRC teams in the districts of Luwero, Mubende and Mpigi, and he frequently carried out assessment missions in the field.

A previous abduction

In 1980, when he was the ICRC medical co-ordinator on the Khmer-Thai border, Dr. Perrin was abducted with another member of the delegation.

Official Voice

For readers seeking more detailed information on Red Cross activities and policy, the “International Review of the Red Cross” is available on subscription.

As the official organ of the ICRC and the International Red Cross, “the Review” specializes in international humanitarian law, and ICRC doctrine. It appears every two months in English, French and Spanish, while extracts in German are also published in a short edition.

In brief...

The ICRC has opened a permanent office in the Peruvian capital Lima, where delegates have begun a third series of visits to detainees held by the authorities in connection with events in the country, particularly in the southeastern region of Ayacucho.

ICRC delegates last month completed a full series of visits to prisons in Paraguay, seeing 42 detainees at five places of detention in the capital, Asuncion.

The Cuban captured by South African forces in Southern Angola during a military operation, was visited by the ICRC at his place of detention in Pretoria on January 12.

End of year statistics from the ICRC delegation in South Africa reveal that 4,990 food parcels were distributed during 1983 to families of detainees or former detainees. The ICRC also financed 1,079 family visits to relatives under detention.

After having been suspended for ten days, the Red Cross relief operation in Uganda restarted on January 17. At the gate of the warehouse in Kampala, a truck leaves to distribute emergency food rations.
In the front-line

Last month a young Red Cross first aid worker died while helping firemen rescue survivors from a blazing building. Aged 20, the young man had been a volunteer with the Red Cross for three years, and met his death doing humanitarian work not usually carried out by Red Cross first-aiders in other countries of the world.

But then, this incident took place in Lebanon, where since 1975, as internal strife and war devastated the country, the first aid volunteers of the Lebanese Red Cross have become used to acting well beyond the call of duty.

The Lebanese Red Cross has presently 550 volunteers, between the ages of 18 and 24. They come from 16 different religions and sects representing every part of the country – giving the National Society the unique character of being truly representative of the whole of Lebanon and its diverse society.

Impressive record

During 1983, the Lebanese first aid workers, under the most trying conditions imaginable: gave first aid to 5,812 war wounded, transported 8,460 wounded and sick, and with their 65 ambulances also ensured that all hospitals and clinics in the country received constant deliveries of urgently needed blood.

Last month’s death of the young volunteer was the fourth fatality among the workers of the Lebanese Red Cross since 1981, and during 1983 three others were wounded while helping victims during the fighting.

The President of the Lebanese Red Cross, Ms Issa-el-Khoury, said after the latest incident: “You know the motto of the first-aiders: beyond duty. I can say that everywhere they do far more than their duty. I have often warned them because they take a lot of risks: the dead cannot help the victims.”

The ICRC is more aware than anyone of the courage and devotion continually being demonstrated by the Lebanese Red Cross volunteers. Despite the fact that some of their colleagues have paid the ultimate price while helping others, these young men and women never cease in their everyday work to personify the finest traditions of the Red Cross movement.

A historic meeting in Geneva

Starting this month, a new regular feature “Looking Back” will present extracts from the 121-year-old history of the ICRC — covering famous actions and milestones that have marked the Committee’s evolution.

Appropriately, the series begins with an historic meeting in Geneva on February 17, 1863:

The Public Welfare Society of Geneva inspired by a book written by one of its members, “A Memory of Solferino”, had elected a special commission of five to look into ways of providing better medical care for soldiers wounded on the battlefield, and they met for the first time on this day.

Although the atmosphere was informal, the methodical Swiss elected office-bearers, with the author in question, Henry Dunant, becoming Secretary and General Guillaume-Henri Dufour being appointed the Commission’s first President.

Another member Gustave Moynier, supported by Dunant, proposed that the Commission become a permanent International Committee, with Henry Dunant noting in the minutes the new name of “International Committee for aid to the Wounded.”

Suggestions on what direction the Committee should take came particularly from Dunant, who was adamant that it was not just a question of sending nurses into the battlefield: “It should also concentrate on improving the transportation of wounded, on the perfection of military hospital services, and on the universal adoption of new treatments for wounded and sick soldiers.” The Committee was to be permanent and driven by a true spirit of international charity.

Looking Back

Finally, Dunant insisted, in the terminology of the time, on the wish put forward in his book for: “The adoption by the civilised Powers of an international and inviolable principle which will be guaranteed and sanctioned by a treaty between governments: this would serve to safeguard everyone, official or unofficial, dedicating themselves to the victims of war.”

As so often, Dunant had just given proof of his acute sense of what was possible. The other four members of the Committee, perhaps less imaginative, and more prudent, regarded these proposals as rather farfetched.

The meeting was closed with none of the others bothering to reply to Dunant’s suggestions.

Action resumes in Uganda

Amid climate of insecurity

THE ABDUCTION of eleven Red Cross workers in Uganda in early January has highlighted the persistent security problems which have affected some areas of the country since the overthrow of former President Amin in 1979. This latest incident, following the killing of two Ugandan Red Cross personnel in November, led to a 10 day suspension of the emergency relief operation being carried out in three districts north west of the capital Kampala. On January 17, the food distributions began again. Nic Sommer of the ICRC's Press Division, reports from Kampala:

The man's face was expressionless as a field worker of the Ugandan Red Cross explained to him that his daughter was dead. He had carried her, a limp and wasted child of about eight, to the land cruiser shortly before we left for Kampala, asking for a ride so that she could receive special care in the capital. But it was too late: minutes before we were due to leave she died and he took her away again, looking for a place to bury her.

We had travelled that morning to Bukomero, a hamlet some 80 kilometres up the main road going north-west from Kampala. It was the first trip there for two weeks, and as we got to within a few kilometres of the place the rough dirt track gradually filled with people walking to the distribution point, carrying sacks, bags, tins — anything in which to take home their ration of "posho" (ground maize) and beans. As the trucks lurched past they waved and smiled, unmistakably relieved that the Red Cross was coming again.

Bukomero is a collection of derelict one storey buildings set back on either side of the road, most of them without doors and windows or even roofs. Clustered around them are several small shacks made of corrugated iron or grass, and on the day we were there women, surrounded by children, prepared fires to cook the meal that was to follow the distribution.

In the centre of the hamlet, spaces had been cleared on either side of the road, and roped off. Several hundred people, sitting patiently in long lines, were waiting — the first had arrived there at eight a.m. not even knowing whether we would come or not. For people who had not been given any food for two weeks their discipline was extraordinary — in the fifteen minutes or so that it took to back up the trucks, unload the sacks and go over the procedure with the Ugandan Red Cross staff who were to give out the rations, the hungry people of Bukomero just waited.

Procedure

All of them were clutching their new ration cards — ironic, in that the day they received them was the day on which the 11 Red Cross workers had been abducted while travelling to another relief centre. This had provoked the 10 day suspension of the relief operation and the break in deliveries for more than 100,000 beneficiaries in the so called Luwero triangle.

Claudio, the delegate in charge of the convoy, repeated the instructions: the card, numbered for one to 31 was to be clipped on the number one, then for each person for whom the card entitled food, three nearly full cups of posho and one of beans was to be given. Fortunately everyone seemed good at mental arithmetic, though some extra concentration was needed for the man whose card indicated 18 beneficiaries.

For three and a half hours the people shuffled forward slowly to get their rations then moved away, either to one of the huts in the hamlet or to other places lost in the lush green vegetation. They were pathetic figures, tired, weak, many of them in rags, yet there was no complaining, no jostling. As the distribution proceeded, a Ugandan Red Cross tracing officer called out names through an electronic megaphone, in the hope that someone there would have news of someone reported missing or come forward to receive a message from a relative living elsewhere.

Separated families

A couple of hundred metres away from the food queues stood the only intact storey building in the place. On the verandah of this grimy building Michel, the chief tracing delegate of the ICRC, had set up office, surrounded by a group of Ugandans eager to send a message to a distant relative, or ask for news about someone, or demand to be taken to join their family.

Everyone agrees that the handing out of food and other relief to the people of the Luwero triangle can only be a temporary measure: what they need is to be able to settle back into their homes and become self-supporting once again. When this will happen depends on the security situation — and the resultant food shortages that proved so costly for the little girl who never set off on the ride to Kampala.

Delegate relates experience

Romaine Tissières who was abducted in Uganda in January with 3 other delegates.

Q. Romaine, can you tell us first of all how you and the rest of your group were taken prisoner?

A. We set off on Saturday 7 January at 7.30 in the morning, intending to visit the villages of Masulita, Kabale and Kirolo in Mpigi district to the north-west of Kampala. We were supposed to register the displaced persons in these villages. There were eleven of us altogether, four ICRC delegates and seven members of the Ugandan Red Cross. About 9 o'clock, as we were getting near to Kirolo, we were stopped by a group of about 10 armed men.

Q. Were you afraid at that moment?

A. Not right away, we didn't really understand what was happening. We thought it was just the sort of check that we were well accustomed to. However, the men seemed very edgy, and because of this we tried to turn around. This only made them more agitated, and they forced us to get out of the vehicles and sit on the ground. Then we had to follow them into the bush, and not just walking; they had us running.

Q. What was it like being kept prisoner?

A. Yes. We had no problems apart from the long distances we had to cover on foot at night. During the day we rested. On the first evening, they split us into two groups: Pierre Perrin, the medical co-ordinator and two Ugandan Red Cross Workers were taken off in one direction; my two other Swiss colleagues, the five remaining members of the Ugandan Red Cross and myself were taken off in another.

Q. Romaine, do you think this experience has changed you in any way? Will you carry on doing ICRC work in the field?

A. I think I need some time to get over it, but I look forward to going out into the field again and working with the people directly. I think that's the only way of really helping them.
Background

ICRC maritime expert invents new protection

AN ELECTRO-ACOUSTIC system, invented by the ICRC's maritime expert, Philippe Eberlin, to clearly identify hospital ships and the merchant fleets of neutral countries for protection against submarine attack during conflicts, is to be brought into operation on a test basis later this year.

Transmitting underwater acoustic signals, the system known as “the fish”, is towed behind a neutralised ship and periodically transmits the Morse letters “NNN” for a vessel from a neutral country or “YYY” in the case of a hospital ship, along with their recognised call-signs.

The acoustic transmissions can be picked up by the passive sonar of submarines and surface warships up to a distance of over 40 kilometres, allowing offensive naval forces to pin-point the position of the vessel equipped with the system and formally identify it as neutral.

Manufactured by the Marine Division of the French-based electronics firm, Thomson CSF, the first two versions of “the fish” have been ordered by the Swiss government and will be tested on two of Switzerland’s 22 merchant ships off the West coast of France towards the end of 1984.

The system is expected to be adopted as an official security measure for hospital ships when the Maritime Security Committee of the International Maritime Organisation holds its annual meeting in April.

Philippe Eberlin, himself a former seaman, has devoted his life’s work since World War Two to improving the identification of neutral ships after serving on two neutral merchant vessels during the war that were later sunk in tragic cases of mis-identification.

Neutral ships sunk

Mr Eberlin recalled: “In 1943 a ship sailing under the Swiss flag, the “Maloja”, and on which I had previously served was sunk by a torpedo during an air attack. I lost many friends in this incident, as I did the same year when another of my former ships, the “Padua” chartered by the Red Cross, struck a mine because she was allowed to sail into a minefield off Marseilles in the Mediterranean when troops onshore had no idea of its identity.”

He explained that these tragic cases gave him the necessary impulsion to try and better protect neutral ships, and eventually brought him into contact with the International Committee of the Red Cross.

Work on the acoustic system began more than 12 years ago when Mr Eberlin was working with a committee of experts to update maritime aspects of the Geneva Conventions, and as he explained backers for the project were not readily available: “When I first approached the experts in 1972 they were working on exclusively military projects, and could not spare the research funds for the development of my invention.”

Prototype

To pursue his research Mr Eberlin finally turned to a science college in his native Switzerland, “L’Ecole Poly-technique Fédérale de Lausanne”, where the first prototype of the invention was constructed in August 1979. However, it had several drawbacks, as the inventor soon realised. He explained that the prototype was in fact not “a fish” but an electro-acoustic system fitted into the ship’s underside. It had to be installed in dry-dock and was inaccessible afterwards unless the vessel returned to port. It also consisted of four transducers and weighed an unwieldy 300 kilos.

But with the rapid development in the late 70’s of micro-processing, he was already working on a reduced system that was to be 10-times lighter and have none of the disadvantages of the prototype.

The whole concept of “the fish” system is based on rapid-fitting, that is an absolute necessity since most conflicts break out without prior warning.

Mr. Eberlin said this fact was illustrated during the conflict in 1982 in the South Atlantic: “The British had four vessels that had to be turned into hospital ships within a few days, and had the British wanted to use the prototype, it could not have been fitted in time.

“My experience in the South Atlantic, overseeing for the ICRC the identification of hospital ships on both sides, confirmed my belief that the acoustic system was invaluable, for none of the ships were, in my opinion, properly identified to meet every eventuality, especially sonar detection by submarines.”

International interest

The breakthrough for Mr Eberlin’s new system came in October 1982 when he made a speech to the International Maritime Organisation in London, when he mentioned the deficiencies in the underwater identification of hospital ships during the South Atlantic conflict, and put forward his invention as a solution: “Many countries heard my ideas with interest, and more importantly Thomson CSF came forward and offered to develop and produce my invention — 10 years after my initial approach to the experts of this company and others.”

Although the system has now become the underwater equivalent of the Red Cross or Crescent flag, it can never wholly replace these traditional signs of neutrality, as Mr Eberlin pointed out: “The “fish” is meant only as a complementary protection to the conventional signalisations such as, notification of voyage, special radio signals, radar transponders, and the use of the Red Cross flag and flashing blue light. The technology used also means that the system cannot be abused, for each “fish” is programmed to be used by only one particular ship.” A dangerous loop-hole in the signalisations available for the protection of hospital ships and neutral vessels from attack has now been filled, but like all dedicated inventors Mr Eberlin will not rest on his success. He has already begun work on an improved version.
ICRC again speaks out for victims of the Gulf War

THE ICRC has issued its second appeal in nine months for an end to grave violations of international humanitarian law in the context of the Gulf War that began three-and-a-half years ago.

The appeal calls for all States parties to the Geneva Conventions to take steps to ensure the Conventions are respected by Iran and Iraq.

In particular, the text states that in Iran the ICRC is no longer able to discharge its mandate as prescribed by the Third Geneva Convention relative to the treatment of prisoners of war.

Following the first appeal, on May 9, 1983, the ICRC had resumed its activities in the POW camps in Iran. But the ICRC delegates noted the continuing use of ideological pressure and intimidation in a re-education process by Iran with the aim of turning Iraqi POW's against their own government, and at obstructing the work of the ICRC.

The activities of the ICRC were again suspended on 27 July 1983, leaving 50,000 prisoners without the international protection they are entitled to by virtue of their status.

Some improvement

In Iraq, visits to POW camps take place every month in accordance with the conditions laid down in Article 126 of the Third Geneva Convention, a main stipulation of which is that the delegates must be able to talk freely and without witnesses with prisoners of their choice. Some improvement in the conditions and treatment experienced by Iranian POW's held by Iraq has been observed. However, it is pointed out that a considerable number of Iranians, some of whom have been held since the start of the conflict, are still hidden from the ICRC.

Following the first appeal, the Iraqi air force has continued to carry out bombing raids against Iranian civilian zones occasioning "loss of life on a large scale". (Since the second memorandum was released last month, the Iranians have bombed civilian areas of Iraq in retaliation. The ICRC responded by publicly offering to help in the establishment of 'military free zones' to spare civilians on both sides.)

The President faces the press

THE PRESIDENT of the ICRC, Mr Alexandre Hay, gave his annual press conference to some 50 Geneva-based journalists from the international media on February 20.

In a wide-ranging presentation of the ICRC's activities during 1983, Mr Hay highlighted the major difficulties facing the institution in gaining respect for international humanitarian law particularly in the Iran-Iraq conflict, and in Afghanistan.

Mr Hay said that the ICRC managed to balance its budget last year with an expenditure of Sfr. 212 million in cash, kind and services but that only 86 countries of the 155 states signatories to the Geneva Conventions made contributions.

Other issues he brought up included the ICRC's concern for the so far small number of ratifications of the 1977 Additional Protocols, and the difficulty in having the Red Cross concept of neutrality understood by governments and opposition groups, particularly in Africa. (More details, page two.)
Main points from press conference

Iran-Iraq: Mr Hay expressed ICRC concern for the 50,000 Iraqi POW's in Iran who have been without ICRC protection since July 1983. He stated that ICRC visits would only resume when a written undertaking had been received from the Iranian authorities guaranteeing future visits will take place under normal conditions. He appealed on Iran and Iraq to declare a number of towns “military free zones” to reduce civilian casualties. The ICRC is ready to act as neutral intermediary to achieve that end.

In the “particularly grave case” of Afghanistan, the Afghan government continues to contest the fact that an armed conflict is in progress, thus denying the ICRC access.

Soiviet soldiers captured by the Afghan movements and now interned in Switzerland: The President repeated that when the Soviets were handed over to the ICRC by the Afghan movements, they stated their own intention to return to the USSR, but that the ICRC would have no part in a “forced repatriation.”

The question of the application of the Fourth Geneva Convention in Israel-occupied territories was another point, notably in Africa,” Mr Hay stated.

Western Sahara: The ICRC is hoping to begin visits, in the not too distant future, to Moroccan prisoners held in the Western Sahara by the Polisario movement, and to those taken prisoner by Morocco.

Financing: of ICRC operations: a great proportion of the contributions come from states in the West and little from the rest of the world. Arab contributions are “disappointing.” “A more universal financing by the 155 states signatories to the Geneva Conventions is desirable as a supplementary guarantee of neutrality for the ICRC,” Mr Hay stated.

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Hundreds of Ugandan victims find small Red Cross haven

From Nicolas Sommer, Kampala

A FORMER laundry building in Kampala is playing a key part in efforts by the Ugandan Red Cross to help people suffering because of the insecure situation near the city.

Since May last year, Red Cross medical teams working in the affected area have brought hundreds of sick and hungry people needing emergency care to the old wash-house behind Kampala’s famed Mulago hospital. Known as the Yellow House, because of its brightly-painted walls, the place is run by the Kampala North branch of the Red Cross.

“We started out with 100 people, and we thought we’d be able to keep it to that number,” says Daniel Etole, the man in charge. “But as our medical teams visited more and more camps of displaced people, more patients kept coming back here.”

“We have had up to 600 people staying here, with every inch of floor space taken up and people sleeping in the kitchen as well. At the moment, there are 475, and it’s still very crowded.”

The inmates of the Yellow House are among more than 100,000 people who have been chased from their homes in a triangular area north-west of the capital.

A large-scale relief operation was launched by the Ugandan Red Cross, which was later joined by the League of Red Cross and Red Crescent Societies and the International Committee of the Red Cross.

Every day teams of foreign and Ugandan doctors and nurses visit camps and villages, where the displaced people live, to give open-air consultations to long queues of sickly children and adults.

Daily convoys

To overcome food shortages in the area, the Red Cross operates distributions at some 30 places, with convoys of trucks leaving Kampala each day with some 50 tons of food. Some of the affected population who need more intensive care have been brought to Kampala. When the patients arrive those needing surgery or intensive medical care are admitted to the main hospital building. The influx of patients from the insecure area outside Kampala has swelled the number receiving care to the extent that, in one ward designed for 60 people, I was told there were actually 130.

Children needing special feeding are taken care of in a building near the Yellow House, under the supervision of nutritionists from the Save the Children Fund.

The Yellow House itself accommodates people needing out-patient treatment as well as those who have recovered and are waiting to be able to go home. But with the insecure conditions and transport problems, more people have been arriving than leaving — a situation the ICRC is trying to remedy by transporting people back to their villages.

Improved sanitation

“Despite the growing numbers here, conditions have improved greatly, thanks to the ICRC,” points out Daniel Etole. “Their water engineer has fixed up running water and toilets, and we now have outside lighting. The ICRC also provides all our food.”

Thanks to Daniel Etole’s own efforts, and those of his 15 staff and Red Cross youth member volunteers, the residents of the Yellow House also have a pleasant open space where they can walk, talk and play.

At present Daniel and his team are in the process of overcoming another source of concern: “There are 175 children of school age here and keeping them occupied is a problem. During the holidays we had the use of a nearby school, but now term has started again we have to leave. I’ve managed to get the materials to put up a temporary classroom in our yard, and that will help the children in order. In the past I’ve had groups of them wandering off for up to two weeks at a time — and it’s been a headache getting to look for them.”

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Thousands of displaced Ugandan civilians wait patiently for the distribution of Red Cross assistance at a camp north-west of the capital, Kampala. (Photo Nicolas Sommer, ref. oug 10/26.)
Over 2,500 wounded during 10 days of turmoil in Beirut

THE International Committee of the Red Cross was again forced to make public appeals on behalf of victims of the Lebanon conflict as the heaviest fighting since September '83 raged in and around Beirut last month.

Surveys of hospitals and clinics in the Lebanese capital carried out by the ICRC during lulls in the fighting revealed that over 2,500 people had been wounded, many of them civilians, during the 10 days of clashes.

As shellfire pounded most sectors of Beirut and the neighbouring mountains, first aid workers operating in the combat zones were also among the casualties. Four volunteers lost their lives on February 3 when their ambulance was hit by a shell in Beirut, and a Lebanese Red Cross worker died in action three days later.

Just before the most serious fighting broke out, ICRC delegates were able to conduct surveys in 13 hospitals and dispensaries, providing blood and medical supplies for the treatment of more than 400 wounded.

But the heaviest bombardments, that prompted the ICRC appeal, took place on February 6 and 7, striking at the headquarters of the Lebanese Red Cross and the ICRC delegation, where personnel were forced into shelters and often experienced difficulty in helping the sick and wounded during the short pauses in the fighting. In the face of what the ICRC described publicly as an "intolerable situation", an appeal was made for an immediate and general ceasefire, and for the various parties to accord respect to the Red Cross emblem.

Ambulances destroyed

The heavy artillery battles of last month also destroyed many of the ambulances of the Lebanese Red Cross while those still in working order were appropriated by armed factions. The ICRC's own fleet of vehicles was severely damaged, and the replacement of Beirut's Red Cross ambulances is being given top priority by the ICRC, as is the replenishment of stocks used up during the emergency.

Thanks to its existing medical stocks and to local purchases of relief, the ICRC was soon able to organise limited assistance to the victims. But it was not until February 12 that the ICRC was able to mount its first major assistance operation for the civilian population, sending a fleet of eight trucks across the "green line" to the West with flour, blankets, medical supplies and other foodstuffs.

On the same day, 19 tons of food and 5,900 blankets were distributed to displaced people in the areas of Zahra, Moussaitbe and Zahrif, while 13 tons of food and 900 blankets were provided for the Lebanese Red Cross to give to needy civilians in East Beirut. Distributions have continued where necessary ever since.

One of the other serious consequences of the fighting was that vital supplies of oxygen were also depleted in the hospitals of Beirut, but eventually the ICRC was able to bring in 500 units for operating theatres in the Lebanese capital. Large quantities of blood were also sent to Lebanon by the National Societies of Switzerland, Norway, Finland and France and distributed by the ICRC.

Six special appeals launched

LAST MONTH saw the launching of the ICRC's appeals for funds to finance the six emergency operations currently being run for victims in Africa, the Iran-Iraq war, the Afghan conflict, on the Thai-Kampuchean border, in Lebanon and in Central America.

Governments and National Societies have been asked to donate over SFr. 170 million to these actions, with the ICRC stressing the importance of swift and non-earmarked contributions, so that every operation can be pursued according to plan. Slow responses from donors have in the past caused serious cash flow problems, as was the case last year for the Thai-Kampuchean frontier when 80% of donations were received only from the beginning of July onwards.

The 1984 appeals unlike last year has no appeal for El Salvador alone. This has been replaced by a global appeal for all actions in Central America.

The "consolidated appeal" for the region was launched in view of the stepping up of operations in Nicaragua, the vital need to improve co-ordination with National Societies in the area, and as a means to establish better and more regular contact with governments there.

As in previous years, Africa will be the main area of ICRC activity during 1984 with SFr. 118 million budgeted, more than half of which is asked for in the appeal. The coming year will see stepped up food distributions to victims of the numerous internal conflicts, particularly in Ethiopia and Uganda. It is hoped the food will be provided by non-governmental agencies.

Financing required from governments and National Societies: Afghan conflict, over SFr. 14 million; Africa, nearly SFr. 68 million; Central America, nearly SFr. 26 million; Iran-Iraq, SFr. 10.5 million; Lebanon, SFr. 33 million; Thailand-Kampuchea, SFr. 19 million.

ICRC opens new centre for paraplegics

THE ICRC has opened a new paraplegic centre on the outskirts of the Pakistani city of Peshawar as part of its four-year-old medical programme for Afghan war wounded.

The new para-bloc can cope with up to 100 patients at a time, and replaces an existing centre in Peshawar's University district that had been in operation since November 1981. Seventy Afghan paraplegics have already been transferred to the new complex, which consists of six buildings erected on land donated by the Pakistani provincial government.

The old centre had already been over-stretched, with capacity for just 50 patients. However, in the new para-bloc places will also be reserved for paraplegics among the local Pakistani population, and eventually the full running of the centre will be taken over by the Pakistan Red Crescent Society.

Adequate funds have already been received from donor governments to pay for equipment and the ICRC hopes to be able to cover short-term running costs.
ICRC visits to detainees—protection through procedure

In 1983, ICRC delegates visited tens of thousands of people deprived of freedom in about 30 countries. ICRC visits to detention centres are either provided for by the Third and Fourth Geneva Conventions (prisoners of war, civilian internees) or are undertaken on the basis of the organization’s right of initiative, which is recognized by the international community (persons detained for security reasons).

The teams visiting places of detention normally consist of two delegates and a doctor, but the number varies according to the size of the places visited. As an additional protection the Central Tracing Agency records the names of the prisoners visited and, when necessary, arranges for detainees and their relatives to exchange family news. A detailed report of the visit, in number and order, down their findings as objectively as possible, is submitted to the detaining authorities. The purpose of the report is to convey an accurate impression of the physical and psychological conditions of detention and of the treatment of prisoners. On the basis of the observations which make up the report, the ICRC can, if necessary, recommend improvements in those conditions.

Prison conditions

The first stage in a visit to a place of detention consists of a discussion between the delegates and those in charge of the prison or camp. During this initial contact, the delegates are given the authorities’ own view of the conditions of detention, are informed of the number of detainees held and, if possible, obtain a list of their names. In the ensuing visit proper, the delegates examine all the facilities of the camp or prison, paying careful attention to the detainees’ accommodation, to which they are often virtually confined 24 hours-a-day. In all the cells, dormitories and huts the delegates examine the lighting, ventilation and the general construction and condition, and establish how many detainees are occupying each accommodation unit. Poor ventilation, lighting, sanitary facilities and, in particular, overcrowding can have severely damaging effects on persons shut up for months or even years. Great importance is attached to the visit to the kitchens, the delegates gathering information on the quality, quantity, nutritional value and variety of the food provided for the detainees. These points are naturally included in the visit report.

The delegates ask to see the prison canteen, if there is one. The delegate writing the visit report has to take into consideration local conditions and climate, since these obviously have a bearing on any recommendations to be made.

The medical delegate discusses the health of the detainees with the medical staff of the place of detention. He checks the stocks of medicaments and other medical materials held at the infirmary, notes how often prisoners requiring medical treatment have access to a doctor and how emergencies are dealt with (admission to hospital, treatment on the spot). All detainees under care in the infirmary and any other detainee wishing to see the ICRC doctor can be examined by him.

Discipline

Since an account of the detainees’ living conditions alone would not present a complete picture, the delegates also investigate their daily activities. The type and hours of any work which the detainees are allowed or are forced to do are noted, as are any resultant remuneration or advantages. The facilities for leisure and physical exercise, games, reading and study are also investigated. The delegates must also gather information on the detainees’ relations with the exterior — visits, correspondence, permission to receive parcels — and also on religious observance: availability of chaplains, facilities for worship, religious freedom generally.

To report on the important question of treatment and discipline, the delegates obtain details of the detainees’ daily routine, of their relations with the guards, and a copy of the regulations in force. They also enquire into measures taken in the event of infractions of the regulations. Particular attention is paid to the stipulated and actual duration of any disciplinary confinement and to the cells or other premises used for this purpose.

Interviews without witnesses

The ICRC makes visits to places of detention conditional on permission to interview detainees without witnesses. During these interviews, which generally take place in premises of the delegates’ choosing, the conditions of detention are discussed. This personal contact is usually much appreciated by the detainees, not least for its generally favourable effect on their morale.

Delegates are sometimes confronted with allegations or evidence of mistreatment or torture. They have to form their own judgement of the situation on the basis of solid facts and corroboration of statements made during the interview without witnesses.

The delegates try to form a complete picture of the conditions of detention from the statements of those in charge of the detention centre, their own observations during the visit, and the statements made by the detainees themselves, especially during the interview without witnesses. At the end of the visit, the delegates have a final interview with the commander or governor of the establishment, during which they state what they have observed and put forward their suggestions. The question of the assistance which the ICRC can provide for the detainees, e.g. toiletries, food, is also raised at this point.

Reports

After the visit, the delegates write their report, which can turn into quite a lengthy document, depending on the size of the place of detention visited, the number of detainees there, and the problems uncovered.

A further condition imposed by the ICRC is that visits must be repeated, and it is during the subsequent visits that the delegates can determine whether or not previously recommended changes have been made. Problems which remain unsolved after several visits can be taken up with the appropriate authorities, or in some cases with the head of state himself.

As a detainee once told a delegate, however, what counts is not so much what the ICRC gets done for prisoners as what its mere presence prevents being done to them.

The International Committee of the Red Cross (ICRC), together with the League of Red Cross and Red Crescent Societies and the recognized National Red Cross and Red Crescent Societies, is one of the three components of the International Red Cross and Red Crescent Movement. An independent humanitarian institution, the ICRC is the founding body of the Red Cross. As a neutral intermediary in case of armed conflicts or disturbances, it endeavours on its own initiative or on the basis of the Geneva Conventions to protect and assist the victims of international and civil wars and of internal troubles and tensions, thereby contributing to peace in the world.

4
Afghan wounded: ICRC treats over 2,800 in two-month period

The number of Afghan war wounded crossing the Pakistani frontier for medical treatment at the ICRC's two surgical hospitals at Peshawar and Quetta has increased steadily since the end of last year.

During the first two months of 1984, 2,156 Afghans made their way across the border in harsh weather conditions for out-patient treatment, and 717 others underwent major operations.

The increase was particularly marked in Quetta, in Pakistan's Baluchistan province, where in the month of February the ICRC medical team from the Italian Red Cross, treated 111 seriously wounded Afghans. This is a record total for the eight months the hospital has been open.

The Quetta medical team is continuing to discharge patients to other local hospitals so that beds are always available for people in a critical condition. Blood donations from local Afghans are being supplemented by supplies sent every two weeks by the West German Red Cross.

At the Peshawar hospital, a West German medical team has now finished its tour of duty and has been replaced by the Finnish Red Cross. Bed occupancy at Peshawar up until early last month was 100 patients, relatively high in that region for the time of year.

The mobile first aid teams operated on four points of the frontier by the Pakistan Red Crescent gave on-the-spot treatment to nearly 200 wounded during the same period, with half of them being transferred to hospital.

The ICRC medical action also includes the training of Afghans in basic first aid and since the programme started 349 students have successfully completed the course.

Meanwhile, the ICRC's new paraplegic centre that was opened recently on the outskirts of Peshawar, is also working smoothly with about 70 patients undergoing treatment. (See page two.)

Do medics working in war zones have sufficient protection? (see page 4)
ICRC appeals over wounded in Iran-Iraq conflict

Press release, March 7

Geneva (ICRC) - A medical team of the International Committee of the Red Cross (ICRC) in the Islamic Republic of Iran, surveying the needs caused by the latest clashes at the Iran-Iraq war front, was confronted on 6 March, during visits to several hospitals at Teheran, with 160 cases of wounded combatants who presented a disquieting clinical picture, whose nature leads to the presumption of the recent use of substances prohibited by international law.

The common symptoms found by the ICRC doctor among all the wounded — extensive superficial burns (first and second degree), serious respiratory problems, keratoconjunctivitis — appear to be responding favourably to treatment. However, the clinical progress of some patients is marked, eight days after exposure, by severe problems of the blood crisis, accompanied by a major drop in the number of white corpuscles (leukopenia). These problems, linked to respiratory and renal difficulties, have led to the deaths of several patients, two of them during the ICRC delegates' visit.

Parallel to the steps it is undertaking with the parties concerned, the ICRC strenuously recalls that the use on the battlefield of toxic substances is incompatible with the respect of the principle of humanity and constitutes a violation of customary and codified rules of the law of war.

Welcome advances in campaign against torture

A CONVENTION aimed at making torture a crime under international law was adopted by consensus last month by the United Nations Human Rights Commission in Geneva.

After six years of arduous discussions the Commission agreed on a draft of 32 articles backing the imposition of dissuasive measures at international level against states guilty or suspected of practising or condoning torture.

The draft, which will now be passed on to the U.N. General Assembly for discussion, re-affirms the universal view that no extraordinary situation, whether by reason of internal conflict or political tension can ever be invoked to justify torture. Its various articles are intended to prosecute the practitioners of torture, try and suppress it, and recommends the setting up of a committee of experts to look into alleged violations.

Regional action

Six months earlier, in September 1983, the Parliamentary Assembly of the Council of Europe voted unanimously for the eventual adoption by the Committee of Ministers of a project it has drawn up for a European Convention against torture. The idea for this Convention was launched back in 1975 by a Swiss lawyer, Mr Jean-Jacques Gautier, impressed by what he termed the "positive results" of ICRC visits to prisoners of war. Under the Geneva Conventions, POW’s along with civilian internees must be protected from torture and ill-treatment during conflicts, international and non-international.

More progress required

The proponents of both the projects would be the first to admit that these drafts are still some way off from being formally adopted and implemented by states — especially those countries suspected of practising torture.

However these advances are a heartening sign of international willingness to get to the roots of these most atrocious manifestations of inhumanity that show no sign of diminishing, and indeed are becoming more sophisticated and difficult to detect.

In continuing with its own independent approach to combating torture, with its programme of prison visits followed by confidential reports to the states concerned, the ICRC is nonetheless resolved to encourage all efforts at international and domestic level to eradicate a practice by which state terrorism and ideological blindness renounce the human character of helpless individuals.
A day in the life of the Beirut delegation

The ICRC's work for victims of the conflict in Lebanon has been marked over the years by many large-scale operations that have made worldwide headlines. But even during a "normal" day, as ICRC delegate Serge Caccia relates in this report from Beirut, the life of the delegation remains extraordinary.

0600: The echoes of heavy machine-gun fire and rocket-propelled grenades signal the start of another day. A night of heavy shelling has just ended and in the residential areas of Beirut the population counts the victims. At the ICRC's headquarters in the Lebanese capital, the 18 delegates have no need of alarm clocks. By seven o'clock the coffee has been warmed and the radio switched on for the bulletin they all know almost by heart. For the past nine years the contents have been the same, the number of dead, abductions, negotiations, ceasefires...

0715: A few taxis have ventured out into the streets and at various crossroads garbage is piling up. Our arrival in Rue Sadat sends a swarm of rats scurrying into the basement of a bombarded building. Burnt-out cars litter the streets, but an example of the contradictions of Beirut is the florist's across from the delegation, that displays its delivery of freshly-cut roses.

0800: The delegation's daily meeting has just ended. A discussion about yesterday's activities and plans for today are followed once again by the head of delegation's insistence that everyone abides by the security regulations.

0900: Michel, the tracing delegate is driving to Kabr Chmoun. His mission is to recover the bodies of soldiers from the mountain village, that was the scene of recent heavy fighting. Before we arrive at our destination we pass through other villages — destroyed and abandoned, their orchards mowed down by shell blasts. After stopping at a check-point we proceed round a bend to Kabr Chmoun, overlooking the vast blue sea. The first body lies in front of us, a second is in a courtyard and another further on.

1100: Roland has another problem on his hands. He must begin repairing 10 ICRC vehicles damaged in the recent shelling. Fortunately, a car-body specialist has come to join the team of mechanics. It's then time to go and recover three other ICRC cars that were "lost" during the night of heavy bombardments. Roland makes sure he has enough tow ropes and the team sets off, but not before the Red Cross flag has been fixed on the back of the car.

1500: The head of delegation is meeting with a chargé d'affaires from one of the embassies, his deputy and an ICRC doctor have talks with the Minister of Health about medical supplies. On the roof of the delegation, the two radio operators are replacing an aerial.

1700: This text is sent off to Geneva after its author has dealt with a press inquiry from a French television journalist.

Progress on the roads in and around Beirut is rarely smooth. ICRC delegates like everyone else are often held up by aspects of everyday life such as check-points or sniping.
Aiding war wounded — a legal right

There is a variety of charitable medical associations which would like to have the benefit of protection identical to that which international humanitarian law affords the Red Cross. A charter was presented at the end of February in Strasbourg during a meeting organised by the International Federation for the Rights of Man and attended by some thirty nations, and will shortly be submitted to the Council of Europe and the U.N. with a view to the drafting of a new international treaty. The charter demands recognition of two rights: the right of any civilian to be tended by competent and impartial medical personnel, and the medical personnel’s right to protection during their missions. Yet those who tend the injured and the sick are in most cases already covered by international humanitarian law and that protection has unceasingly grown in extent between the first Geneva Convention of 1864 and the 1977 Protocols.

Sirens blaring, the ambulance races through the streets of the town under bombardment. Somewhere a casualty lies groaning on a stretcher while the first-aid workers make haste in the tumult of fighting. Elsewhere the man running with a child in his arms who board bearing a red cross or a red crescent, the emblem which, throughout the world, identifies those whose mission is to provide help; the emblem protecting them and which must be respected.

International humanitarian law, born of the horror of war, was originally intended to remedy the shortcomings of armed forces’ medical services. Only one year after the founding of the ICRC, the 1864 Geneva Convention gave protection to doctors and nurses on the battlefield. In the event of their capture they were to be returned to their army. With time the four Geneva Conventions and the two Protocols were evolved, codifying and developing that protection.

The First 1949 Geneva Convention provides that the medical personnel of armies and the personnel of relief societies helping the military medical corps shall be respected and protected. The Convention’s protection extends also to National Red Cross and Red Crescent Societies which help the army medical services in their work of caring for the wounded and sick. So that they may be identified they all display the red cross or red crescent emblem. Consequently, the Geneva Conventions already afford effective protection to medical personnel, but the latter must act under control of the military authority.

The 1949 Diplomatic Conference did not feel that civilian medical personnel — other than those of societies for the relief of wounded and sick — should be protected and authorized to bear the protective emblem. That reservation was due to the fear that the sign might be misused and used by groups not subject to control.

A step in the right direction

Yet modern conflicts affect civilians as much as, if not more than, soldiers and it is important that medical personnel be able to move around unhindered even in dangerous areas. It therefore appeared necessary to extend legal protection to all civilian medical personnel. Protocol I has bridged that gap by affording them protection similar to that provided for medical personnel subject to military authorities. However, the need to prevent abuse persists. Consequently, the law provides that civilian medical personnel shall work under the authority of a party to the conflict.

Two first-aid workers killed in El Salvador

On 6 March, two first-aid workers belonging to the Salvadoran Red Cross were killed when the ambulance in which they were driving at night was attacked by gunfire. They were 17 and 22 years old.

Deploring the tragic death of these two young volunteers, the Salvadoran Red Cross and the ICRC have vehemently protested against this violation of the rules of international humanitarian law and contempt of the protective emblem of the Red Cross. They have again stressed the fundamental principles of humanity, impartiality and neutrality which are applied by the medical teams of the Red Cross in all their missions.

This rule applies also to foreign medical personnel. A neutral State, a relief society of a neutral State or an international humanitarian organization may make medical personnel available to a party to a conflict in the event of its agreement is necessary and the medical personnel must work under its control.

Protection of medical duties

Article 16 of Protocol I and Article 10 of Protocol II stipulate that “under no circumstances shall any person be punished for carrying out medical duties compatible with medical ethics”. This provision is extremely important, for by its general nature it extends protection not only to medical personnel designated as protected persons under the Geneva Conventions and Protocols, i.e. medical personnel assigned to medical duties by a party to a conflict, but to any persons who intervene on their own initiative to care for the sick or wounded, whether friends or foes.

The international community has formally acknowledged the ICRC’s right to make use of the distinctive emblem at all times for protection in discharging its humanitarian mandate. However, the ICRC may authorize the use of the emblem only for persons working under its own responsibility. Were it to delegate the right to use the Red Cross emblem to other organizations or institutions, it would be acting in contravention of the express desire of the States and of the International Red Cross.

Both in international and in internal conflicts, those who care for the victims are largely covered by the Protocols additional to the Geneva Conventions. Yet seven years after the formulation of these additional legal instruments, only 38 States have acceded to Protocol I and 32 to Protocol II, whereas 155 States are party to the Geneva Conventions.

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Ethiopia — over one million disaster victims out of reach

From John McKay, Addis Ababa

Upwards of a million people in disaster-stricken areas of Ethiopia will have to go without emergency food aid this year despite the massive presence in the country of United Nations relief agencies, the International Red Cross and other humanitarian organisations, according to senior relief officials here.

The Ethiopian government's Relief and Rehabilitation Commission that coordinates the emergency aid programme for victims of drought and "man-made disasters", has provided ample warning and has sought to organise international help.

But insecurity in many areas and the logistical problem of moving large amounts of food around a mountainous and under-developed country have left large sections of the civilian population especially in Eritrea, Tigray and North Wollo without hope of aid and on the brink of starvation. Relief workers operating in Eritrea and Tigray say children are already dying in large numbers.

The government's RRC says huge sections of the population in disaster areas have already lost their livestock. According to the RRC, the death-rate among cattle has been "quite tremendous", a certain prelude to disaster in a country where the bulk of the population lives by subsistence pasturing.

The methods of survival for Ethiopia's victims of drought and "man-made disasters" over the past decade have been itinerancy and dependency on food aid from the international community. However, for more than a million people living in conflict areas and regions that have been without rain for at least two years these options are not open. These starving people are either hidden in isolated valleys or plateaux: are afraid to leave their villages: are too weak from hunger to travel: or are simply ignorant that food is being distributed along main roads in the worst affected areas. These highway distribution points are as far as trucks can go for logistical reasons, and as far as the Red Cross and other organisations are allowed to venture for reasons of security.

Estimates of the number of people suffering severe shortages of food and water vary from over three million to five million, and on the purely logistical side a senior spokesman in Addis Ababa for the U.N.'s World Food Programme summed up the dilemma: "To get food to just two million people in need of emergency assistance, you come up with commodity requirements that virtually exhaust the total transport capacity of this country. This is due to a number of factors," the U.N. spokesman explained, "Mainly, the problem of getting food from the ports into the country in a timely manner, an acute shortage of long and short-haulage transport, the rugged nature of the terrain and of course the security situation that varies at times."

Slow progress

The relief delegate in Ethiopia for the International Committee of the Red Cross, Daniel Berthoud, gave an example of the time required to get emergency assistance to the victims: "If we want to move a truck-load of assistance from the port of Assab to one of our distribution points in the city of Gondar we are faced with a trip of 1,350 kilometres via Addis Ababa through an insecure area and on rough roads. These supplies can take up to 10 days to reach the victims."

The ICRC in a joint relief operation with the Ethiopian Red Cross has been (Continued page three)
Red Cross Day message — “Through humanity to peace”

The seeking, shaping and maintaining of peace is achieved in part by man’s spirit of humanity — the only force that may, one day, succeed in driving away the threat of annihilation facing the human race.

“Through humanity to peace” is the theme of this year’s World Red Cross and Red Crescent Day, on May 8. Our movement helps to build a more peaceful world by encouraging a spirit of peace, reducing obvious causes of tension and fighting the suffering caused by war.

The Red Cross speaks with one voice on peace. Its 250 million members in over 130 countries address one and the same message to their fellow men.

The world solidarity that Red Cross action demonstrates pays no regard to ideologies, religions, races or beliefs. The practice of such solidarity is also a contribution to peace. Within nations and among States the Red Cross spirit of peace can reduce the fear and mistrust that lead to violence.

The Red Cross sees peace as not just the absence of war but a dynamic process of co-operation among peoples. Its contribution to the development of National Red Cross and Red Crescent Societies, assistance to victims of natural catastrophes and the provision of medical and social services are all ways of expressing worldwide solidarity and are a real factor of peace.

When young people take part in Red Cross activities they develop ties of friendship and understanding and join forces against the prejudices born of ignorance.

Red Cross action, conceived on a battlefield, creates an oasis of peace in the very heat of conflict. Its story is one of millions of lives saved through its intervention.

In time of conflict the trust placed in the Red Cross, thanks to its neutral and impartial action sometimes enables it to promote the renewal of contacts between hostile parties.

Finally, by contributing to the reduction of tensions the Red Cross endeavours to create a favourable atmosphere for disarmament. Even though it is up to governments to decide how to disarm, it does appeal to them with all its moral force to accept general, total and controlled disarmament as their ultimate goal.

THROUGH HUMANITY TO PEACE is the message that each and every member of the Red Cross movement wants to convey this year on the May 8 anniversary of the birth of Red Cross founder Henry Dunant.

East Timor: protection activities for displaced and detainees

The ICRC last month visited over 2,000 displaced people on the island of Atauro, off East Timor, and delegates saw 266 detainees held on the main island.

However, the ICRC’s assistance operation on the main island remains suspended. The action, in cooperation with the Indonesian Red Cross, was stopped in July last year after ICRC delegates were refused access to all villages requiring assistance to evaluate food and medical needs. But the relief action for displaced people on Atauro has continued uninterrupted.

The prison visit during March was to Comarca prison in the capital, Dili, and at the same time delegates were also able to see seven sick detainees at a military hospital. Following the visits, the ICRC and the Indonesian Red Cross organised the distribution of family parcels to those being held.

This action is the first stage in a programme of visits the ICRC has negotiated with the Indonesian authorities, and from now until October delegates should be able to see all those detained in East Timor because of the events. The last ICRC visit to detainees in East Timor was in November 1982. Then, delegates saw 27 detainees in two places of detention and nearly 3,800 displaced people on the island of Atauro.

The ICRC’s programme of repatriations and family re-unions for people wishing to go to Portugal and Australia has also continued. Since the start of the year 81 people have been flown to Portugal and 10 to Australia under the auspices of the ICRC. Last year 239 inhabitants of East Timor benefitted from the programme.

Thai-Kampuchean border: medics on full alert

Armed clashes and increased tension last month along the Thai-Kampuchean border forced an estimated 75,000 Khmer refugees to flee their camps, and ICRC medical teams had to deal with the largest monthly influx of war wounded from the frontier in over a year.

Most of the casualties were from a camp in the Ban Sangae area that came under attack on April 15. Approximately 29,000 Khmer civilians living there sought safety on other parts of the border, and 128 wounded were evacuated from the camp to the ICRC hospital at Kha-o-i-Dang. Those with light wounds were treated on the spot. However, the number of civilians killed in the clashes is unknown.

Widespread panic

There was an increase in anxiety among the refugees in many camps untouched by the fighting, and tens of thousands of people were moved to evacuation sites as a preventive measure. The sites, on Thai soil, had been worked out in advance by the authorities and the ICRC in anticipation of the so-called “dry season offensive” that over 200,000 Kampuchean civilians have had to endure for the past four years.

To cope with the increase in casualties and any eventualities, the ICRC sent an extra surgical team to the frontier to join the four teams already working in its two hospitals at Kha-o-i-Dang and Kab Chong. The medical teams were provided by the National Societies of Belgium, Britain, Denmark, Finland, France, Iceland, Japan, Sweden and Switzerland.

Hand-over operation in Angola

A total of 89 captives of the UNITA opposition forces in Angola were handed over to ICRC delegates in the south of the country last week.

The 19 children and 70 adults of various nationalities, including 66 Portuguese and 15 Filipinos, were then flown in an ICRC-chartered aircraft to Johannesburg, South Africa, and handed over to their respective consulates.

Since the start of 1983 the ICRC has carried out four such operations, involving a total of 194 people.

The ICRC is continuing to act as neutral intermediary in negotiations for the release for humanitarian reasons of groups of Czechoslovak and British citizens still being detained by UNITA.
 Victims out of reach...

engaged in relief work in the country since 1979 and is distributing aid and running supplementary feeding programmes in five regions, Eritrea, Tigray, Hararghe, Gondar and Bale, consisting of monthly distributions of 75,000 complete rations.

Daniel Berthoud in acknowledging that the ICRC’s programme was a “drop in the ocean” compared to the work of other agencies emphasized that it was aimed at helping some of the most drastic cases who cannot be reached by other organisations.

He added that a re-evaluation of the ICRC’s programme was underway and the institution was hoping to almost double its number of beneficiaries in the coming months, despite the already severe logistical and security constraints.

Ordeal of the victims

These problems faced by the international agencies are light compared to the severe ordeal experienced by those starving people who are lucky enough to hear about the distribution points.

One of the most affected areas in Ethiopia today is North Wollo, where the League of Red Cross and Red Crescent Societies has been running a joint relief programme with the National Society since last January. Many of the victims have to trek up to 150 kilometres from their mountain villages to the main Asmara-Addis Ababa road to collect the one bag of food each beneficiary is entitled to.

In recent weeks as the situation has deteriorated many starving people have arrived too late. Numerous women fatigued by the journey to Kobo, Korem or Alamata were unaware that the babies strapped to their backs were already dead.

League delegate, Karl Walter Bauer, explained the task facing the League and the National Society in North Wollo: “The League is a terrible especially in Kobo. It is at an altitude of 4,000 metres with many people especially the children, running naked. They have no clothes, no food, no blankets and are sleeping on the ground. When they see a Red Cross car they are crying and begging for help. The victims are arriving in greater numbers every day because they have heard that the Red Cross flag is flying in North Wollo. They feel we are responsible for them and we are going to try and do more.”

The ICRC and the League are in the process of boosting their programmes in the country, but for the millions of hungry and drought-stricken people who will receive no emergency assistance the coming months will be critical. Those who manage to scrape some sustenance from the parched earth will survive, many others mainly children will die in their isolated villages — victims of man-made and natural disasters.

Waiting for a relief convoy in the midst of disaster

Disaster victims flock to a distribution point in the Wollo region of Ethiopia. Most of them pictured here are men who have left their families in their mountain villages and travelled up to 150 kilometres on foot in the hope of finding food. (Photo, E. Winger)

Dust clouds whipped up from the parched earth around this capital of Tigray region provide a spectacular testimony from the air to the fact there have been no rains in the area for the past five years.

On the ground, evidence of the disaster is seen only in human terms, tens of thousands of half-starved people who have fled the combined consequences of drought and the insecurity that reigns in many areas of Tigray.

A light aircraft sent up from Addis Ababa by the ICRC with a consignment of medical supplies is greeted on arrival by an ICRC delegate and an Italian Catholic priest. The package is gratefully accepted, although it is quickly explained that the greatest need in Mekele at the moment is more emergency food supplies for the relief convoy is six weeks late.

The two men, ICRC delegate Louis Christ and Father Cesare Bullo of the Catholic Social Action Committee, are deep in discussion about their present problem, how to feed an increasing number of displaced people with diminishing food stocks. A local government official then steps forward and informs the two men “the convoy will be arriving tomorrow.” The biggest talking point in Mekele is the overdue convoy.

Mekele and other towns in Tigray are accommodating about 100,000 displaced people, who are mostly living in government-built corrugated iron shelters, or come to the distribution points daily from the surrounding countryside to receive rations under an emergency relief programme coordinated by the Relief and Rehabilitation Commission.

The ICRC along with the Ethiopian Red Cross runs a feeding centre in Mekele for some 600 malnourished children as part of their aid programme for 5,000 people in Tigray.

The unseen victims

Delegate Louis Christ explaining why this figure was not larger said: “The big problem for us is that for security reasons we do not have access to people who are starving out in the countryside. The condition of the people we cannot reach must be disastrous.”

Father Cesare Bullo’s organisation has a feeding programme for 85,000 people in Tigray, and over the next month he is hoping to increase the number to 150,000 — providing of course that fresh relief supplies can get through.

Children dying

“Many children are dying of starvation out there,” he said pointing to the inhospitable mountains that virtually surround Mekele, “And in areas we are operating in now about 25% of the children are suffering from severe malnutrition, and the rest are badly undernourished.”

He recalled as we left the airstrip how two years previously when the situation was not as drastic he was able to have a Hercules transporter flown up from Addis Ababa loaded with relief supplies, but that such an operation was not possible today.

In the town of Qiha, seven kilometres East of Mekele, the arrival of a Red Cross jeep illustrates the desperate plight of those who have not yet been registered for distributions. Within 10 minutes, hundreds of people have converged on the Red Cross vehicle from the surrounding countryside, thinking that the relief convoy had finally arrived.

The displaced people in Mekele and the hundreds of thousands of others inaccessible to relief agencies are caught up in a vicious circle of disaster, for even if the rains finally arrived there would be no harvest for five months, if indeed there were any seeds to plant or arable ground available for those who have abandoned their small patches of land.

The next day, as the 30,000 registered displaced people in Mekele are into the diminishing supplies of soya, wheat flour, rice and oil, the convoy did not arrive.

At the airstrip, as a light aircraft flew in with another batch of medicines for the ICRC and while Father Bullo again reminisced about the arrival of his Hercules two years previously, the local official whispered he had it on good authority that the convoy would arrive tomorrow.
ICRC action in northern Chad

ICRC delegates have now been operating in Bardai, northern Chad for the past six months. They regularly visit 190 prisoners of war who have been held since June 1983 by the forces led by Goukkouni Oueddei.

The ICRC is still negotiating to gain access to prisoners held in other provinces in the north of the country. The prisoners currently being visited are held at Bardai and three other locations, to which the delegates go every two months, each time driving for five or ten days over very difficult terrain. The delegates register the prisoners, hold conversations with them without witnesses, and hand out Red Cross family message forms. The prisoners are also examined by an ICRC doctor and given assistance in the form of foodstuffs, toiletry articles, clothing and blankets.

The provision of medical treatment to the local civilian population of Tibesti is a further important component of the work of the Bardai delegation, the six members of which include a doctor and a nurse. When they go out to the villages to see their patients, the doctor and nurse cooperate closely with the Chad health workers, to whom they also give further training. There is a hospital at Bardai, at which the ICRC doctor and nurse train the staff and take charge of the difficult cases. Most of patients have pulmonary or intestinal diseases or various forms of arthritis.

Living conditions

When back in Geneva after six months in Tibesti, Claire Bellmann, the head of the delegation, described the delegates' primitive living conditions in Bardai: “We have a brick house without doors and windows and fitted out with camping equipment.

“Bardai is a thousand metres above sea level, and in winter the temperature falls below freezing every night.” Food and other supplies are brought to the delegation once a month, but despite the infrequency of these deliveries, the delegates do not feel cut off from the outside world, since they are in permanent radio contact with Geneva. “What’s more, we have been well accepted by the local people,” reports Claire Bellmann, “and we have got used to our new way of life. We’ve even made our quarters more comfortable little by little, by installing electricity and a shower, putting in a bread oven, starting a kitchen garden and rearing chickens.”

Many women and children among new influx of wounded Afghans

The recent intensification of fighting inside Afghanistan has resulted in the ICRC’s two surgical hospitals on the Pakistani frontier being stretched to maximum capacity.

In both hospitals, in Peshawar, North West Frontier Province and in Quetta, Baluchistan, the number of admittances of women, children and old people is also at an all-time high.

Since the start of the year, the ICRC has been treating a larger number of Afghan wounded than at any time since its medical action began four years ago, with the number of patients and outpatients running into several thousand.

To cope with the influx of wounded to the Quetta hospital, the ICRC had to ask the Italian Red Cross to draft an extra surgeon into the medical team that National Society has provided for the hospital since it opened 10 months ago.

The medical staff in Peshawar say that about one third of recent admissions have had to have limbs amputated because of the severe types of wounds.

Meanwhile, a Danish doctor and a blood transfusion specialist are setting up a blood collecting centre in Peshawar for the ICRC surgical hospital. Up until now blood has been supplied for the hospital by the West German Red Cross.
Uganda: difficulties in the way of Red Cross assistance activities

April 1984: more than 730 tons of food relief were distributed to about 120,000 people in the districts of Luwero and Mubende to the north of Kampala. Since then, the relief teams of the Ugandan Red Cross, the League, the ICRC and the other humanitarian organizations on the spot have been finding it increasingly hard to obtain the Ugandan government’s permission to go out to the victims.

Last month, Jean-Marc Bornet, ICRC Delegate General for Africa, went to Kampala in an attempt to negotiate with the relevant authorities the resumption of the relief work that had been carried out on a vast scale from June 1983 by the Ugandan Red Cross and the League, and from October 1983 by the latter two bodies plus the ICRC.

Two highways cross the triangular area in which the victims of the events are located. The first is the Bombo road, which runs northwards across Luwero district. About 50,000 undernourished persons can be reached by this route, but since 27 April it has been closed to Red Cross convoys.

The other is the Hoima road, by which regular food supplies were brought into Mubende district, considerably improving the condition of 62,000 persons there. This road was closed on 17 May at a time when it would have been possible to start reducing the food supplies brought in, since the local population was expected to achieve self-sufficiency with good harvests forecast for June and July.

Now, however, every day that passes detracts from the good results obtained during over six months of provision of aid, and the condition of the groups worst affected deteriorates steadily.

If it were now possible to make a combined effort to rectify this situation, tens of thousands of Ugandans would again be able to view their future with confidence. The ICRC hopes that it will be allowed to provide the assistance on which so many lives depend, and to carry on its protection work in all places of detention in Uganda without exception.

Distribution of relief in Uganda. (Photo L. de Toledo)
Viewpoint

Children must be protected from the horror of war

In the shattered city of Beirut, in the streets of Belfast and elsewhere many children brought up in an atmosphere of conflict can be seen clutching their toy guns imitating the soldiers and gunmen who are part of everyday life.

The psychological damage suffered by children living in conflict areas is a prime concern for psychiatrists and sociologists and so it should be. The ICRC for its part is currently preoccupied with a more outrageous and shocking aspect of "children in war".

In many parts of the world today, children as young as 11 or 12 years old are clutching automatic weapons and grenades that are terrifyingly real and are fighting in wars - contrary to all existing principles of international humanitarian law.

Deprived of their childhood and thrown into battle, many have died this year amid the full horrors of war, with world opinion seemingly helpless before this flouting of basic humanitarian principles.

The ICRC, as guardian of the Geneva Conventions, feels entitled to say loudly and unequivocally that this practice must stop, whether on the Gulf war front, in Central America, the bush wars of Africa, or in Asia.

Consensus

At the Diplomatic Conference that drew up the Two Protocols Additional to the Geneva Conventions, Article 77 of Protocol I, barring children from fighting in armed forces, was adopted by consensus with most of the world's states in attendance.

"The Parties to the conflict shall take all feasible measures", says the Article, "in order that children who have not attained the age of 15 years do not take a direct part in hostilities and, in particular, they shall refrain from recruiting them into their armed forces."

Furthermore, children enjoy the general protection accorded to civilians under the Geneva Conventions, and are also recognised under international humanitarian law as being among the most vulnerable sections of the civilian population. To ignore their special category is to attack the very core of the laws of war, namely that the weak and defenceless must be protected in times of conflict.

Many states which attended the Diplomatic Conference felt the age limit should have been even higher. But in the end it was thought that to make the limit 18 years would pose problems for some countries' domestic provisions, concerning the legal situation of children.

However, Article 77 of Protocol I states that in recruiting children of 15 years and over, priority should be given by armed forces to those who are oldest.

The Geneva Conventions and their Additional Protocols are very clear on the acceptable level of human conduct in times of war, and the protection of children from hostilities depends on respect for the fundamental principles on which international humanitarian law is based.

Sending children to a war front has the same sinister and alarming implications as to argue that it is right for pregnant women to be forced to fight, or for patients from mental institutions to be enrolled in armed forces.

ICRC intervenes to end siege

Five Salvadoran leftist guerrillas who seized 35 hostages in a supermarket and held them for nine hours were flown to Mexico on May 12 after the ICRC acted as neutral intermediary during negotiations for the release of the hostages and safe-conduct for the guerrillas.

The ICRC's services were requested and accepted by both the government and the guerrillas, belonging to a dissident group of the Salvadoran guerrilla movement.

After being guaranteed safe-conduct by the Salvadoran authorities, the five guerrillas, four men and a woman, were driven by the ICRC to the embassy of Mexico, which had agreed to give them asylum.

International humanitarian law strongly condemns the taking of hostages, an act of violence that is on the increase in today's world.

However, under exceptional circumstances when there is no direct dialogue between the parties and no other intermediary available, the ICRC, if both parties agree, will act as a go-between when innocent lives are at stake.

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Victims of the Afghan conflict - position of the ICRC

ICRC press release

Since 1979, the International Committee of the Red Cross has made every effort to provide protection and assistance to the civilian and military victims of the armed conflict in Afghanistan, in accordance with the mandate conferred upon it in the Geneva Conventions and the statutes of the International Red Cross.

On several occasions, it has reminded the parties whose armed forces are engaged in the conflict of their obligations under international humanitarian law. However, in spite of repeated offers of services to the Afghan government and representations to the government of the USSR, the ICRC has only on two occasions — during brief missions in 1980 and 1982 — been authorized to act inside Afghanistan. Consequently, the ICRC has to date been able to carry out very few of the assistance and protection activities urgently needed by the numerous victims of the conflict on Afghan territory.

Due to the serious consequences of the situation in Afghanistan, the ICRC decided in 1980 to undertake protection and assistance activities in Pakistan. It opened two surgical hospitals for Afghan war wounded, the first in Peshawar, the second in Quetta. In addition, being deeply concerned by the plight of persons captured by the Afghan opposition movements and by information to the effect that several such persons had been executed, the ICRC tried to find a way of protecting the lives of both Afghan and Soviet captured persons.

Negotiations carried out by the ICRC with, successively, the USSR, the Afghan opposition movements, Pakistan and Switzerland led to partial success. The parties agreed to the transfer and internment in a neutral country of Soviet soldiers detained by the Afghan opposition movements, in application, by analogy, of the Third Geneva Convention, relative to the treatment of prisoners of war.

On the basis of this agreement, the ICRC has had access to some of the Soviet prisoners in the hands of the Afghan movements and has informed them, in the course of interviews without witness, of the possibility for transfer by the ICRC to Switzerland, where they would spend two years under the responsibility of the Swiss government before returning to their country of origin.

The ICRC made this proposal to the Soviet prisoners on the basis of the principle worked out at the 1949 Diplomatic Conference and stipulated in the Geneva Conventions, i.e. that repatriation of a prisoner of war signifies the return to a normal situation and is in the best interests of the prisoner. The above-mentioned procedure therefore applies only to Soviet soldiers who consider themselves to be in a situation comparable to that of a prisoner of war in enemy hands. Consequently, the entire operation is based on respect for the principle according to which the ICRC never acts against the wishes of the person it is assisting.

To date, eleven Soviet soldiers have accepted the proposal. The first three were transferred to Switzerland on 28 May 1982. Eight others arrived in August and October 1982, January and October 1983, and February and April 1984. One of them escaped to the Federal Republic of Germany in July 1983.

The first three Soviet soldiers reach the end of their period of internment on 27 May (they have since been released). In conformity with the spirit of the above-mentioned procedure, the ICRC has had access to some of the victs of that conflict, and thereby fully respect international humanitarian law and its principles.

Concern over situation in South Lebanon

Despite progress towards a government of national unity in Lebanon, there was no let-up in the ICRC’s emergency medical and relief activities for civilian victims of the fierce fighting that continued in several parts of the country.

During the month of April alone, over 86,000 civilians had to rely on ICRC food distributions and 96 hospitals and dispensaries were given medical supplies by the ICRC, as stocks of anaesthetics, dressings and other materials were completely used up in some of the worst-hit areas.

Meanwhile, the Danish, Finnish and Norwegian Red Cross Societies have provided ambulances to replace those destroyed or damaged by shelling earlier this year. They sent 30 ambulances to Lebanon to add to 12 recently supplied by the West German Red Cross. The ICRC is also financing a socio-medical and first aid centre opened by the Lebanese Red Cross in South Beirut, paying for the installation and running costs for six months.

Refugees intimidated

In the field of protection, ICRC delegates have continued to make daily visits to Palestinian refugee camps around Sidon and Tyre, where the civilian population is the object of intimidation and attack by armed elements in the area.

Inser camp, from where over 4,000 prisoners were liberated last November under a hand-over operation supervised by the ICRC, now has over 450 new inmates. The ICRC has resumed weekly visits to the camp to register those newly arrested. Some of the prisoners are also being allowed weekly visits from their families.

However, there remain several points of concern for the ICRC in relation to its protection activities in Southern Lebanon, namely the intimidation of sections of the civilian population and the fact that the ICRC does not have access to all Israeli detention centres existing in the area.

Moroccan POWs

The ICRC has resumed its protection visits to victims of the conflict in the Western Sahara. Delegates recently visited 210 Moroccan prisoners of war held in five places of internment by the Polisario Front.

Ten of the Moroccan POWs were released to the ICRC and repatriated on May 9.

An Afghan casualty in the ICRC hospital at Peshawar. (Photo T. Gassmann)
Geneva meeting proposes better protection for lifeboats during conflicts

A special working group of the International Lifeboat Conference has proposed that lifeboats during conflicts should receive better protection. The meeting, held recently at the Henry Dunant Institute in Geneva, aimed to discuss ways of ensuring the safety of lifeboats in times of armed conflict.

The problem has arisen through the technological advances in lifeboat construction, allowing the craft to travel more than 100 nautical miles into the open sea to carry out their rescue missions rather than being confined to their own coastal waters.

Lifeboats are protected under the Second Geneva Convention, but only if they fall within the category of "coastal rescue craft". The ICRC's naval expert, Mr Philippe Eberlin, explained: "Lifeboats are protected by Article 27 of the Second Geneva Convention, but when it was drawn up in 1949 it referred specifically to coastal rescue craft, at a time when many lifeboats were still propelled by oarsmen. "Article 27 no longer corresponds to the present situation where we have constructed more solid and durable craft that are all motorised, and under present International Humanitarian Law lifeboats travelling into the area of a naval engagement could face enormous risks" Mr Eberlin stated.

Five proposals

The working group finally drew up a five-point plan which is to be considered by the International Lifeboat Conference, and is expected to be adopted by September this year.

The proposals are:

— In future, vessels employed by the State or officially recognised lifeboat institutions, used in search and rescue operations in accordance with the Second Geneva Convention, should be known as "rescue craft", irrespective of their size or range of operations.

— The mentioned rescue craft should not be restricted to coastal operations in order to be "respected and protected, as far as operational requirements permit" as provided for in the Second Convention.

— Crews of recognised rescue craft should be "respected and protected" in the same manner as religious and medical personnel, during the time they are involved in rescue operations. The same protection should apply to personnel of fixed coastal installations when involved in rescue operations.

— Much of the improved signalisation for the better identification of rescue craft has been tied to the term "medical transport" in the First Protocol Additional to the Geneva Conventions, and States not parties to the Protocols should be informed of this.

— Finally, the working group declared that the need exists to ensure that the protection provisions of medical transports be made applicable to all rescue craft utilized solely for humanitarian reasons.

Once the proposals have been approved by the International Lifeboat Conference they will be submitted to the ICRC for placing on the agenda of the 1986 International Red Cross Conference; they can also be taken into consideration at the next revision of the technical annex to Additional Protocol II, also due in two years' time.

Mr Philippe Eberlin said that another problem covered was the lack of lifeboat services in developing and under-developed countries: "At a time when we are on the point of using space satellites in sea searches other countries in the Third World are suffering from a shortage of rescue craft and trained personnel, leading to many deaths off their shores every year."

He said that an example of how the Red Cross can get more involved in this area of activity is demonstrated by the Spanish Red Cross, the only National Society that can carry out deep sea rescues.

The Lifeboat Service of the Spanish Red Cross operates a fleet of "all-weather" rescue craft in the Bay of Biscay and the Atlantic Ocean. Mr Eberlin concluded that there is scope for other National Societies to take the initiative in developing such services, where none presently exists.

An "all-weather" lifeboat capable of carrying out rescue missions more than 100 nautical miles from its own coastline. The protection for such vessels under the Geneva Conventions is considered by the International Lifeboat Conference to be ambiguous. (Photo C. van der Meulen)

The "Voice" of the Red Cross

Important changes have taken place in the programme scheduling of the Red Cross Broadcasting Service (RCBS), which transmits the movement's news worldwide by short-wave radio in six languages. Omnidirectional broadcasts mainly to Europe, in English, French, German and Spanish will now be made on the last Sunday of each month, while the programme destined for the Arab world can be heard on the preceding Friday. The changes are aimed at bringing a regularity to the programming and at catering to the needs of short-wave listeners who will now be able to hear the programmes during their free time.

Listeners to RCBS in Africa and Asia (in English, French and Portuguese) can now pick up the programme monthly instead of every two months. A special transmission for Central America has also been introduced.

Full details of the RCBS programme schedule can be obtained from the International Committee of the Red Cross in Geneva.

The International Committee of the Red Cross (ICRC), together with the League of Red Cross and Red Crescent Societies and the recognized National Red Cross and Red Crescent Societies, is one of the three components of the International Red Cross. An independent humanitarian institution, the ICRC is the founding body of the Red Cross. As a neutral intermediary in case of armed conflicts or disturbances, it endeavours on its own initiative or on the basis of the Geneva Conventions to protect and assist the victims of international and civil wars and of internal troubles and tensions, thereby contributing to peace in the world.
Editorial

Displaced people—The problem can be dealt with at its roots

There are countries where refugees are accepted without hostility; there are others where they are at the very most tolerated; and finally states which reject them. They are then condemned to present themselves at other border crossings, even further away from their roots until one of these countries allows a refugee a place on its quota list, and a home of sorts.

For some refugees it is a happy ending but for many others their difficulties are just beginning. Even under the most favourable circumstances, refugees face immense difficulties in rebuilding their lives: adaptation to a new and sometimes alien culture, the language problem, and the shock of having to adapt perhaps to Western ways. Finding new employment or another profession will also have varying results. Some will find satisfaction in their new way of life, others will not be able to adapt, and for all refugees there is the lasting trauma of coming to terms with the fact they are almost certain never to see their homeland again.

What more can be done for these victims of conflicts who are for the most part unwanted? Set up special programmes in a flurry of benevolence to favour their reinsertion into a new society, or refuse them entry under some economic or political pretext?

A remedy to the mass exodus of civilians in times of conflict does exist, a sort of humanitarian vaccine, which when well administered can help allay the anguish and fear that provoke mass displacements in countries struck by hostilities: the intervention into the very interior of these conflict zones to protect and assist the victims and displaced people, and so stem their departure.

This solution can appear ridiculously simple, or even naive, to the political ideologists, but standing in the way of this concrete realisation are alas in the most part the intransigent attitudes adopted by some governments and other parties to conflicts. The International Committee of the Red Cross, whose traditional role is to come to the aid of all victims of conflicts and armed hostilities throughout the world—and in Africa in particular where most of its activities take place—is the unfortunate witness to such attitudes.

Many times during the past few years the ICRC has been prevented from setting up delegations in troubled regions to carry out food and medical programmes for entire civilian populations suffering in and around the fast-moving fronts that characterise internal conflicts. Forced to flee their small havens of self-sufficiency, millions of people have been displaced in Africa, abandoning everything except perhaps a small ray of hope that someday they might be able to return to their original homes.

Many times, despite formal guarantees from the different parties and the observance of strict security measures by the ICRC, humanitarian convoys have been ambushed or blocked, thus depriving desperate victims of aid.

One would think certain armed parties have no respect for the civilian populations they are trying to win over to their side, by the way they often appear indifferent to the suffering of these men, women and children forced to flee in terror, sometimes starving, wounded or sick and with no one to help them.

It would appear, finally, that in their political reasoning there is no place for a neutral organisation that works by a purely humanitarian ideal to improve the situation of war victims, asking only one thing in return: to be allowed to work where the needs are greatest, according to its universally accepted criteria.

These criteria cannot be compromised by trading in the rights of the victims, who have a legal right to protection in times of hostilities and who in the final analysis only want to survive—if possible in their own country but only elsewhere as a last resort.

Some states, all too few, appear to have accepted these principles. If only their example was followed by others, the problem of refugees could begin to be dealt with at its roots.
War amputees:
A long-term programme

War handicapped are not exclusively confined to the ranks of the combatants: too many civilians have also been deprived of a limb, or even several, because of hostilities. Mines explode no matter who walks over them, bombs and shells explode without discrimination, and gangrene sets in whenever conditions are favourable.

An old proverb says, it is better to teach the hungry man how to fish than to offer him one. During a conflict, there is no alternative but for aid organisations to provide food, but in the field of rehabilitation there is much that can be taught to the local population.

That is why, in several African countries affected by hostilities, or recovering from them, the ICRC has opened orthopaedic and rehabilitation centres which not only make artificial limbs from local materials, fit them and provide physiotherapy, but also ensure that local personnel are trained to take over when the ICRC leaves.

In Southern Africa, the ICRC has opened two of these centres which mainly treat displaced civilians. The first was established in Angola in 1979, at Bomba Alta in Huambo province, and the second in April 1981 at the central hospital of Maputo, in Mozambique. Both are now functioning under the responsibility of the Ministries of Health of the respective countries, and under the direction of locally-trained recruits.

At Bomba Alta, an average of 30 people per month are fitted with artificial limbs. Insecurity in the region makes travelling by the victims very dangerous, so that many who need treatment have not been able to reach the centre, which has yet to work at maximum capacity. The ICRC is continuing to give the centre technical and financial help, aimed at achieving the social reintegration of the victims.

In Mozambique, where the main roads are also unsafe, the rehabilitation centre shares the same problems as the one in Angola, reaching the handicapped who undoubtedly exist around the capital. Since it was set up the Maputo centre has fitted 400 people with artificial limbs. The ICRC has in addition constructed a factory for the production of wheelchairs, where several of the handicapped themselves work. The project has the double advantage of providing work to the disabled and avoiding expensive imports. The ICRC is hoping to establish smaller centres outside the capital.

In Eastern Africa, too, the ICRC has launched several projects of the same kind.

In Sudan, a prosthesis workshop manufacturing very simple wooden legs was opened in January of this year at Kassala, where the patients are mainly refugees from Tigray and Sudanese citizens. It works on the same basis as the other centres, with patients being taught how to repair their own artificial limbs by using basic materials. It is currently being run by a prosthesis technician and a physiotherapist from the ICRC.

It was in Ethiopia, at Debré Zeit, that the first orthopaedic centre was set up, under a vast government project in favour of military invalids. After receiving treatment the handicapped occupy themselves in various workshops, or in agriculture. Between 1979 and 1982, the ICRC trained 30 local technicians, who now run the centre.

Given that civilians could not be treated at Debré Zeit, the ICRC during 1982 opened two other centres in Asmara and Harar, mainly for civilians. The government's "Fund for the Disabled" has helped in the realisation of this programme in many other ways by manufacturing certain artificial limbs in Addis Ababa. Production has already surpassed existing needs, and the government has come up with the idea of exporting the products to other African countries, which would enable the easy establishment of such programmes wherever required.

The ICRC has seven specialists working in the centres at Asmara and Harar and they are winding up their training of local employees, who should be able to take over by the end of this year. The ICRC will then be able to pull out gradually from the beginning of next year. The centres will then, it is hoped, come under the administration of the "Fund for the Disabled" and their newly-trained technicians.
**Uganda**

**Conflicts in close succession**

In May 1979, the ICRC opened a delegation in Kampala to visit people imprisoned following the conflict with Tanzania.

In January 1981, due to the deterioration of the situation in the West Nile region, a sub-delegation was set up in the town of Arua to help displaced people and refugees returning to their areas. It was in June of that year that armed elements attacked and pillaged the Ombachi mission, where some 10,000 people and members of aid organisations had sought refuge under the Red Cross emblem.

This attack left 60 people dead and more than 100 wounded, and the fear it brought to the civilian population sent 80,000 people fleeing to Sudan and Zaire, creating yet another wave of refugees. The ICRC for its part was forced to interrupt its work in the region for five weeks.

One month later, fighting broke out around Kampala. The ICRC occupied itself with protecting the civilian population, providing aid for 120,000 people affected by the combat.

In the same year, 3,000 prisoners, most of whom had been visited by the ICRC, benefitted from an amnesty. The ICRC was then informed by the government its services were no longer required, and was asked to hand over its activities to the Ugandan Red Cross. The delegates left the country on March 31, 1982.

**A new influx of victims**

By May last year, the civilian population in Uganda was again suffering from the results of internal conflict. People living in the districts of Luwero, Mubende, Mpigi and Mukono, to the north and north-west of the capital, faced drastic problems because of fighting. Aware of the humanitarian problems which could arise from such a situation, the ICRC again made an offer of service to the Ugandan government, with a view to offering its traditional protection activities and to aiding the victims of the renewed hostilities.

In August of last year, an evaluation mission was authorised. Delegates were able to visit 18 camps for displaced people in the districts of Luwero, Mubende and Mpigi, see the needs of the people and what had already been done for them in the field of medical and food aid by the Ugandan Red Cross and the League of Red Cross and Red Crescent Societies.

The Ugandan authorities and various other organisations recognised that it was time for the ICRC to assume its traditional responsibilities in assistance during conflicts. The delegation was opened on September 22, while in the meantime assurances had already been given by the government for the ICRC to visit those under detention (the visits started at the beginning of 1984).

Since last year, the ICRC has concentrated on protecting the displaced civilian population from armed elements, by making regular visits to their camps and by keeping in continual contact with the authorities in Kampala.

A tracing bureau to find missing people was opened in the capital. It immediately received 629 tracing inquiries, and over 1,000 other demands from people to be re-united with their families, many of them presumed to be in camps for displaced people.

Between December 1983 and April 1984, 1,125 family reunions had been organised, and from over 2,000 tracing inquiries on missing people, 479 had been solved; in addition several thousand family messages had been transmitted. The ICRC also transfers people from one district to another when their camps are dismantled or when, for security reasons, they are not able to travel alone.

Delegates are aiding the Ugandan Red Cross in its own tracing activities, in cases of refugees from Rwanda in Uganda and of Ugandan refugees in Sudan, Zaire or Kenya.

**Nutritional and medical assistance**

In the field of food distributions, five joint Ugandan Red Cross/ICRC teams are ensuring the feeding of the whole displaced population with rice, corn, beans and oil. Part of the food supplies for the "Red Cross emergency action", as it is known, is being provided by the World Food Programme.

By December last year, the food was reaching an average of 88,000 people a
ICRC ACTIVITIES IN AFRICA

week. From the end of October to the beginning of this year, 1,294 tons of food, valued at 731,561 SFr. had been distributed. During the first three months of 1984, 300 tons of food had been given to more than 110,000 displaced people, situated in about 30 different points. Other basic necessities including toiletry articles, blankets and plastic sheeting for shelters were also given out.

This general programme is supplemented by special feeding for malnourished people, run by the British-based OXFAM and “Save the Children Fund”. In cooperation with these two organisations, the ICRC assures the supply of fresh water to the camps, and the digging of wells where possible. Aid is also given to the Mulago hospital in Kampala, where many displaced people are being treated.

Medical care for the displaced is provided by six teams of doctors and nurses, made up of personnel from the Ugandan Red Cross and the ICRC. During the first phase of the action, over 46,000 people were treated. Despite several interruptions for security reasons a further 67,200 people were given medical treatment during the first four months of 1984. The seriously ill were transferred to hospitals in the capital by the Red Cross. Another team from the Ugandan Red Cross, assisted by the League and “Save the Children Fund” has been carrying out a vaccination programme for children against measles, whilst statistics furnished by the medical teams were studied by an epidemiologist with a view to finding better cures for the diseases most prevalent among the displaced.

Much more could have been done, however, if several problems could have been overcome: namely the insecurity and the all too frequent halts imposed on the action by the authorities for their own particular reasons.

The lack of security has been marked by a series of grave incidents, which have cost the lives of several Ugandan Red Cross workers over the past six months.

This situation is worrying in that every interruption, however limited, seriously compromises the stringent efforts being made to improve the nutritional conditions of vast sectors of the civilian population. The continuity factor is essential in this type of operation, and the ICRC is making every effort to make all parties understand that regular access to the victims is an indispensable condition for their survival.

Angola: A step in the right direction

The International Committee of the Red Cross has been asked by the Angolan authorities to give urgent food and medical aid to some 200,000 disaster-hit people in the country’s southern provinces.

The government’s decision last month was welcomed by the ICRC, which has been trying for some time to mount an emergency aid programme in the region where the state of the civilian population has been deteriorating rapidly.

Plans for the action have still to be worked out, but it will aim in the first instance to slow down the aggravation of the victims’ precarious condition brought about by a long-lasting internal conflict. The ICRC has been seeking to give better food and medical aid to the civilian population of Southern Angola since 1980.

This huge assistance operation is expected to take place in three phases, with emergency aid being brought in for affected people in six provinces: Huambo, Benguela, Bie, Moxico, Huila and Cunene.

The success of the action depends largely on the ICRC being able to solve the great logistical problems involved, and on gaining access to the worst-hit areas in conditions of security.

If the logistical and security problems can be overcome the ICRC is hopeful of reaching in successive phases all those in need of emergency aid.
Ethiopia
Victims face double disaster

If the ICRC's most regular activities in Ethiopia remain visits to Somali prisoners of war and tracing work linked to the Ogaden conflict, its most serious concern remains the fate of hundreds of thousands of Ethiopian civilians in regions afflicted by a combination of conflict and drought.

For the past decade Ethiopia has had to endure the terrible burden of being at the head of the underdeveloped world's small group of countries suffering from the consequences of both conflict and the ravages of nature.

Persistant drought has turned certain areas of the country into virtual deserts unable to support the subsistence pasturing by which the majority of the peasant population lives. Some regions, already struck by drought, have also had to cope with the torment of almost permanent conflict and the situation of the civilian population in these areas, mainly Eritrea and Tigray, has become desperate.

Many civilians in both these regions have only managed to survive in recent years by migration to points where international aid is distributed. But for many others, upwards of a million, no aid has so far this year been within reach, isolated as they are in their valleys and plateaus. Many are afraid to leave their villages because of the conflict, or are either too weak from hunger to travel or do not know where the food distribution points are, along the main roads in the affected areas.

Although relief convoys travel as far as the state of the roads and the security situation permit, for too many victims it is not far enough...

The principal objective of the ICRC action in Ethiopia is ambitious: to come to the aid of victims of conflict and drought in the most inaccessible areas. The organisation is trying at the moment to find the means to do this, adapting its activities to meet this final goal, which unfortunately still seems a long way off...

A joint action

The ICRC has been present in Ethiopia since 1977 with a mandate to help victims of the Ogaden conflict. In 1980, it signed an agreement with the Ethiopian Red Cross to help the victims of conflict or "man-made disasters". This joint action, financed and supported logistically by the ICRC, officially began in January 1981, with aid being distributed to several hundred thousand displaced people in the troubled provinces of Eritrea, Tigray, Bale, Sidamo, Gondar and Harrarghe. An intensification of the fighting in Eritrea and Tigray during 1982 led to the assistance operation being stepped up in these regions.

However, it was only in 1983 that the ICRC received permission from the authorities to base delegates permanently in the country. Also authorised A revised distribution programme was set in motion, consisting of monthly food aid for the displaced, and the provision of blankets, clothes, soap and cooking utensils for the most destitute.

It was also in 1983 that the ICRC, along with the League of Red Cross and Red Crescent Societies expanded its programme of assistance to cover the most vulnerable sections of the civilian population. Apart from the normal distributions, the ICRC set up nutritional programmes for malnourished children in various districts of Gondar, Bale and Sidamo. In all 5,540
technicians from the ICRC and about 20 local employees. As in other parts of Africa, these centres were opened with a view to training local personnel and using materials easily available in the region.

**An increasingly alarming situation**

By March of this year, the food and aid distributions had reached 45,000 people in the worst-hit areas and totalled 566 tons. In April, this was increased to 843 tons for 73,800 beneficiaries.

As the situation deteriorated in the Tigray region, the ICRC opened a nutritional centre for children in the town of Mekele, run by an ICRC nurse. During the first 10 days of March, 950 malnourished children were fed and treated there. New assistance programmes were pursued in the towns of Rama, Axum, and Adua, also in Tigray. Large amounts of aid were also sent to certain regions of Gondar, to where the ICRC up until then had no access.

The conclusions the ICRC had drawn from its recent evaluations were the following:

- The situation has deteriorated rapidly in the regions of Eritrea and Tigray, where the ICRC is now concentrating on trying to reach the most isolated victims.
- The institution is now looking into the possibility of organising an airlift to reach victims in the most inaccessible zones, because of the security and logistical problems posed by travelling by road.
- The ICRC believes that the survival of tens of thousands of starving people depends on such an operation being mounted.

**Ethiopia:** Volunteers of the Ethiopian Red Cross prepare a food distribution for displaced people in Mekele, capital of Tigray. 
*Photo: E. Winiger*
Sudan
A diverse programme

The geographical position of Sudan has turned it into a country of refuge over recent years for victims of conflict in four neighbouring countries. The influx of exiles from Ethiopia, Uganda, Chad and Zaire was estimated at the end of 1983 to have reached nearly half-a-million, and was still increasing during the first months of 1984.

Established in Khartoum since 1978, the ICRC has tried in various ways to ease the suffering of these successive waves of displaced people. The most destitute have received medical assistance and food distributions, while many have also taken advantage of the ICRC's Central Tracing Agency. The ICRC delegation in Khartoum has also supplied relief and medical goods to assistance organisations of the Eritrean and Tigray movements for distribution to needy civilians displaced inside Ethiopia by hostilities and drought. This indirect assistance, which continued during 1983 and the first months of this year, is aimed at the most vulnerable: the old, mothers and children, orphans, and the handicapped, as well as prisoners of war held in Tigray. For example, in January 1983, the ICRC gave 495 tons of relief goods, valued at 525,000 Swiss Francs, to the "Eritrean Relief Association". For its part, from June 1983, the "Relief Society of Tigray" distributed ICRC relief goods to some 124,000 displaced people, 1,000 prisoners and 1,700 orphans. This food, blankets, cooking utensils and other necessities were valued at 1,327,140 SFr. The latter operation, scheduled to last six months, was extended because of transport and security problems to June 1984. In addition, from December 1983 until January 1984, the ICRC has given limited food aid to several hundred Ethiopian refugees in the Gedaref region, in eastern Sudan. The government organisation "Sudanaid" carries out the distributions.

In 1983, the ICRC spent 8,154,100.- SFr. on the activities of its delegation in Sudan.

Somalia
Tracing and medical assistance

The ICRC delegation in Mogadishu was set up in August 1982, and occupies itself mainly with Ethiopian prisoners captured in the Ogaden conflict, visiting them regularly and registering them. Since the start of 1983 the delegation has also received tracing requests linked to the Ogaden conflict. By the end of last year many of these searches remained unresolved but will be pursued this year by the Mogadishu delegation.

Because of the increased frontier tension between Somalia and Ethiopia during 1982, the ICRC provided emergency medical aid for several frontier hospitals dealing with victims of the fighting. This assistance was wound up in June 1983 with the donation of surgical equipment to the Martini hospital in Mogadishu. An evaluation was also made of the country's medical infra-structure to verify it was able to cope with the growing number of combat victims.
The International Committee of the Red Cross (ICRC), together with the League of Red Cross and Red Crescent Societies and the recognized National Red Cross and Red Crescent Societies, is one of the three components of the International Red Cross.

An independent humanitarian institution, the ICRC is the founding body of the Red Cross. As a neutral intermediary in case of armed conflicts or disturbances, it endeavours on its own initiative or on the basis of the Geneva Conventions to protect and assist the victims of international and civil wars and of internal troubles and tensions, thereby contributing to peace in the world.
Air-lift for Ethiopia

Last month the ICRC air-lifted 492 tonnes of emergency relief supplies to the Ethiopian regions of Tigre and North Wollo.

Between 7 and 25 June, a Hercules aircraft chartered by the ICRC made 31 flights to transport relief mainly from Addis Ababa and Asmara to the towns of Mekele and Aksum in Tigre and to Lalibela in North Wollo.

Relief convoys were no longer able to get through to these regions by road because of the prevailing danger. The air-lift was the only way of tackling the emergency, enabling the ICRC to continue its relief programme and replenish stocks. In the mountainous regions, people suffering from chronic hunger needed protection from the extremes of the climate, so clothing, blankets and tents had to be flown out to them in addition to food and medical supplies. In addition the big cargo plane conveyed material with which to erect buildings for storage and distribution and also to construct shelters. It also delivered two lorries and four heavy-duty vehicles for transporting the relief supplies in the area.

This large-scale operation went off without a hitch showing that air-lifts are a feasible proposition if needed in future.

In Mekele, the capital of Tigre, the ICRC is collaborating with the Ethiopian Red Cross in running a feeding centre for 900 children suffering from malnutrition. This is part of the assistance programme for more than 50,000 people in Tigre province.

ICRC delegates recently went on a mission to North Wollo to evaluate the critical situation there. They found that large quantities of relief were urgently needed in the area of Lalibella. By taking in relief supplies by aircraft, uninterrupted assistance can be ensured for the victims of the fighting and the drought. The ICRC has been working in Ethiopia since 1979, distributing relief supplies and running feeding programmes in five regions: Eritrea, Tigre, Harrarge, Gondar and Bale.

The air-lift ensures that the Mekele feeding centre will continue to feed the children. (Photo: E. Winiger)

Middle East: Repatriation operation

On 28 June, at Kunaitra, Syria and Israel released prisoners of war, civilian internees and bodies of soldiers killed in Lebanon in 1982, which they handed over to the ICRC for repatriation.

Syria released three prisoners of war who had been captured in Lebanon in 1982, three captured in May 1984, and the bodies of five Israelis.

Israel handed over to the ICRC 291 POWs captured in Lebanon in 1982 and 72 bodies. In addition seven interned civilians were returned to Damascus and 13 to their homes on the Golan Heights.

This operation was the result of several months of negotiations initiated by and conducted through the ICRC.

Angola: Czechoslovaks released

Twenty Czechoslovak citizens, held in Angola by UNITA since 12 March 1983, were released on 22 June. They were flown via Johannesburg on board an ICRC-chartered aircraft to Kinshasa, where they were met by representatives of the Czechoslovak authorities. They then continued on to Prague, where they arrived on 23 June.

The twenty Czechoslovaks were part of a group of 66, forty-five of whom had been released on 30 June last year.
Putting up a humanitarian front

Underlying international humanitarian law in general and the Geneva Conventions in particular is the principle that the defenceless enemy — wounded, sick, prisoner or non-combatant — must be respected.

The purpose of all ICRC action is to assist and protect those who suffer as a result of man-made disasters.

In today’s world, however, the following scenario is all too familiar:

— relations between States or opposing political movements within a country become more tense and characterized by a lack of dialogue that serves to widen the comprehension gap;
— the absence of dialogue makes the States or groups less willing, or even unwilling, to tackle the real problems and find lasting solutions to the conflicts, which become drawn out and bogged down in dialectic debates carried out in a vacuum;
— at the negotiating table, humanitarian issues come last;
— worse, the victims — displaced persons or prisoners — are often used as a bargaining lever in shameful haggling to consolidate the political power of governments or groups.

Must we conclude that the ICRC’s activities are being used by some authorities as a diversionary tactics, to put up a humanitarian front?

The ICRC cannot resign itself to this state of affairs; it must continue unflinchingly, stubbornly, its efforts to gain ground for its humanitarian ideals. It must convince the States not only to support it financially, but also to undertake a true commitment to advance the humanitarian cause and, above all, to hide no more behind a humanitarian front that gives them a pretext to claim a clear conscience.

El Salvador: More Receive Assistance

On the basis of assessments made by its delegates in the field, the ICRC set itself the target, for 1983, of providing food assistance to 100,000 displaced persons in the central and eastern areas of the country, yet only recently has ICRC assistance reached so many — and even more — people in distress.

In May 1984, nearly 302 tonnes of foodstuffs was distributed to 42,818 people in the central region, and more than 402 tonnes to 58,303 people in the eastern region.

These two areas of the country, in which the constant fighting of government and opposition forces is concentrated, have always been difficult of access for the ICRC, since both parties to the conflict have at different times refused it the necessary guarantees or authorizations to allow it to reach all the victims.

In May, the ICRC delegates were again able to go to the province of Morán, in the eastern zone.

The ICRC activities for the benefit of displaced persons in El Salvador are not limited to distributions of food; they include a medical and dental programme.

This programme is not purely remedial: prevention of illness by instruction in nutrition and hygiene plays an important role.

Angola: Deadlock Soon to Be Broken?

The Angolan government has accepted an ICRC plan to provide relief to 200,000 people in need in various provinces of the country. This acceptance follows numerous ICRC representations during the past months.

The various assistance programmes for the benefit of displaced persons in the provinces of Huambo, Bié and Benguela that the ICRC had been carrying out since 1980, had had to be reduced considerably in view of the dangerous conditions and the difficulty of obtaining the agreement of governmental authorities to the ICRC’s working principles.

In September 1982, following an attack on its Katchiungo base, the ICRC was forced to suspend its relief work in these regions until UNITA provided adequate safety guarantees for its delegates and local employees. No sooner had the ICRC resumed its work than the agreement governing the whole operation was called into question again, forcing the ICRC to cut back on its relief activities.

Since its attempts to establish a new agreement failed, the ICRC had no option but to hand over its large stocks to various other organizations for them to go ahead with the distributions, and to await the outcome of its many overtures with an eye to the resumption of its work.

This was in July 1983.

Since then, only a few distributions of seeds have taken place. In contrast, the Bomba Alta orthopaedic centre, run by Angolan technicians advised by ICRC specialists, was able to carry on working.

The ICRC delegation was therefore compelled to spend months in virtual inactivity and anxious waiting, while hostilities continued and the plight of the civilians in Planalto grew ever worse.

The ICRC is now planning a vast three-stage operation to reach, step by step, conflict victims in six of the most affected provinces: Huambo, Benguela, Bié, Mexico, Huila and Cunene. The success of such an operation, however, depends largely on the infrastructures available for bringing the necessary relief to the victims.

It depends also, and above all, on safety conditions: these will be crucial in enabling the ICRC to reach the regions most affected.

Iraq and Iran: protection of prisoners

In mid-May, the ICRC was able to resume its visits to Iraqi prisoners of war held in Iran. The number of delegates and doctors in Teheran was increased to 14, so that a complete series of visits to all the Iraqi prisoners of war could be undertaken. ICRC delegates in Baghdad continued their visits to the eight Iraqi camps, in which 8,000 Iranian prisoners of war are being held.
Assistance in emergency situations: A new approach

From Henry Dunant to the 1980s

Since the day, 125 years ago, when Henry Dunant unwittingly laid the foundations of the Red Cross movement on the battlefield of Solferino, the idea of what constitutes "victims" has grown to form the much wider concept held by today's ICRC.

At the time of Solferino, most of the victims of warfare were soldiers and sailors, whereas modern conflicts often cause more suffering among civilians than among those actually doing the fighting. Formerly, assistance to the victims of warfare was limited almost exclusively to medical treatment. Today, attempts to preserve life and health in vast numbers of people caught up in conflicts require the setting in motion of a complex and delicate machine, in which the devotion of doctors and nurses and the availability of medical supplies form only one of the vital components.

For too long, in planning operations to provide emergency material assistance, there has been a tendency to separate what is really inseparable, to isolate medical aid from the other forms of emergency assistance. Throughout its years of experience in the whole world, and learning from its mistakes, the ICRC has gradually become aware that emergency aid to the victims of modern conflicts must be conceived as a single whole, a sort of building made of interdependent components rather than a group of separate smaller edifices.

The "assistance pyramid"

An ICRC doctor, Pierre Perrin, illustrates what is meant by a concerted emergency assistance operation by means of a diagram composed of irregular blocks forming a rough pyramid. Each block represents an important part of the whole and medical assistance as we think of it, i.e. curative medicine, forms the apex of the pyramid.

The basis of the operation

The base of the structure comprises sanitation and nutrition. Health depends on awareness of the importance of these two blocks as much among those carrying out the operation as among the group receiving the assistance. There would be little point, for instance, in giving medical treatment to a group of victims whose defences have been weakened by lack of food or a poorly balanced diet. If priority is not given to overcoming the nutritional deficiency, the diseases in question would not only fail to respond to treatment, they might actually get worse. Looked at from another angle, what is the point of administering medications to the victims of an epidemic without attempting to eradicate the causes of the epidemic? Inadequate or non-existent waste-disposal, polluted water, vectors such as insects or rodents?

An example from real life

One of the ICRC doctors based in Uganda recently described how the medical and sanitation teams employed a very simple method to stop an epidemic of diarrhoea which threatened to spread to all the inhabitants of a displaced persons camp. The people in question were not used to certain features of community life, and had not realized that they had to use their wells in such a way as to avoid pollution. The resultant dirty water was the cause of the epidemic. If the people affected had been treated with drugs they would certainly have recovered, but the cause of the condition would not have been eliminated. Disinfection of the wells was out of the question: in the context it would have been unrealistic and, moreover, would have made the victims dependent on a technique with which they were not familiar. The solution to the problem turned out to be more simple: it consisted of getting the displaced persons to boil all their drinking water, and great importance was attached to explaining to them why this measure was necessary.

The third component of the pyramid

A great many people, no matter what their education, find it rather hard to understand that, when fighting disease, curative medicine and the sacrosanct pharmaceutical preparation should not be resorted to until they are absolutely indispensable. The important elements for a group affected with or at risk of disease are education, information and prophylaxis. In carrying out an emergency assistance operation, it should be borne in mind that the sick generally constitute only a small part of the group. If the health of the majority of the population is satisfactory, it can be kept so by means of well thought-out programmes of nutrition and sanitation, training in hygiene, and preventive campaigns.

Education and prophylaxis in the fields of nutrition and sanitation form part of what Dr. Perrin calls "public health", the third component of his pyramid.

The apex

If the needs represented in the first three blocks of the pyramid are not adequately met, an increase in the number of sick in the group receiving assistance can be expected. Only when steps have been taken to close any gaps can the point of the pyramid, curative medicine, be put in place. Curative medicine will continue to be essential, but cannot fully perform its function unless it rests on the solid foundation of nutrition, sanitation and public health.

Constraints and objectives

To illustrate the reality behind Dr. Perrin's diagram, we can take the example of a general assistance operation, though it would be exceptional for the ICRC to be responsible for all aspects of such an operation. The objective may be summarized as the provision to the victims of the assistance represented by the four components of the pyramid.

When a conflict is taking place, it is unfortunately not often possible to get the activities under way which would be required to achieve the priority objectives. If, for example, direct access to the zone requiring assistance could not be had, because of political reasons, the operation would have to be mounted around the edges of the zone. Medical aid could be provided from a hospital in the vicinity, provided that those requiring the aid could get to it. The same consideration applies to potential food distribution points around the edges of the zone in question. It would not be possible in the short term, however, to set up supplementary food programmes and activities to provide waste disposal, vaccination and treatment of minor outpatient disorders, all of which require more direct access to the people concerned.

Although the aid provided in such a situation would be limited, it would nevertheless be beneficial to the victims. It would also allow the ICRC to remain close to the troubled zone, to monitor the situation, and to foster contacts which might enable it to overcome the constraints imposed.

When a conflict is taking place, the order in which the assistance operations are mounted may have to be varied in accordance with circumstances, but the order of priority of the objectives remains unchanged and as long as the opportunity arises, the pyramid must be placed on its proper foundation.
The Red Cross “is guided by an absolute belief in the dignity of the human being, no matter who or from where, and by complete respect for the individual”, said Mr. Alexandre Hay, President of the ICRC, speaking at a ceremony commemorating the 125th anniversary of the battle of Solferino.

This ceremony, organized by the Swiss Red Cross, was held in Berne on 24 June, for it was on 24 June 1859 that the Genevan businessman, Henry Dunant, witnessing the bloodshed of Solferino realized the need to help victims of conflicts. This dreadful clash between the Franco-Sardinian and Austrian armies caused 40,000 casualties, dead or wounded, on the field of battle.

Stressing that 24 June marked the “anniversary of an idea”, Mr. Alexandre Hay said in his address that the Red Cross idea was “care organized for any man who is suffering, regardless of his race, his convictions and his beliefs, priority going to those most in distress.”

Putting the question whether, 125 years after Solferino, this idea had stood the test of time and would survive the upheavals of the present, Mr. Hay said that he was “convinced that the Red Cross principles continue to be the living strength of the movement, because they do not represent values which change in our society could shake; they are not an ideology or a philosophy that only some could share; rather are they principles of action born of experience, and they are of universal import.”

Nicaragua:
Relief supplies transported by water

A new phase has started in the ICRC-Nicaragua Red Cross joint action for displaced civilians: a programme of assistance transported by water.

The purpose of the new phase, which got under way in May, is to meet the basic needs of the some 3,600 persons, for the most part Miskito Indians, affected by the troubles in the province of Zelaya, between Puerto Cabezas and Puerto Isabel. As this isolated region on the Atlantic Coast is almost inaccessible by land, the ICRC, in co-operation with the National Red Cross Society, decided to charter a boat which, twice a month, brings relief supplies from Puerto Cabezas to Puerto Isabel. From Puerto Isabel, two smaller vessels visit the various villages of displaced persons in the Rio Prinzapolka delta and in the interior, on the banks of the river.

During the first month of the operation, 700 families benefited from distributions of 66.3 tonnes of foodstuffs (cereals, butteroil and salt) and articles for hygiene worth 146,000 Swiss francs.

The water transported aid programme is part of a larger assistance programme started in August 1983 to bring relief supplies in several provinces to the thousands of persons displaced as a result of the clashes between the Nicaraguan army and anti-governmental forces on the borders with Honduras and Costa Rica.

On 8 June, 14 people from East Timor left Jakarta for Portugal; some were being repatriated, others were going to be reunited with members of their families. Since 1979, 285 persons have left East Timor for Portugal, 108 of them during the first half of 1984. Since 1982, 150 people have left the island to go to Australia, 24 of them so far this year.

During the month of May, 82 Afghan war-wounded were admitted to the ICRC hospital at Quetta in Pakistan. The Italian Red Cross surgical team performed 123 operations in the same period. In addition, 466 consultations were given to outpatients. Owing to the growth in the hospital’s work load, its capacity has been increased from 40 to 60 beds, and a further surgeon, made available to the ICRC by the Italian Red Cross, has been sent to Quetta.

Last month the Republic of Togo deposited instruments of ratification of Protocols I and II additional to the Geneva Conventions. The two Protocols will come into force for Togo on 21 December 1984.

Two ICRC delegates and a doctor have completed between 6 May and 2 June a series of visits to prisons in Spain. They visited seven places of detention and saw 424 people detained under Spain’s “anti-terrorist” laws.

On 2 June, the ICRC began a series of visits to security detainees on Haiti. The first place of detention visited by the delegates was the Port-au-Prince central penitentiary.

The ICRC is continuing its visits to victims of the West Sahara conflict. Last month 99 Algerian prisoners held in Morocco were visited by an ICRC delegate and an ICRC doctor.

Following recent incidents on the border of Algeria and Morocco, the mortal remains of four Moroccan soldiers were handed over to the ICRC by Algeria. A delegate organized their return to Morocco on 22 June.
North and South Lebanon: ICRC still active

Although the situation in the Lebanese capital, Beirut, has improved somewhat over the past few weeks, the increasing violence in the north of the country and the endemic tension in Southern Lebanon continue to require the presence of ICRC delegates.

The ICRC remained particularly active in Southern Lebanon, where the delegates continued their protection activities. On 5 July, a further complete monthly visit was carried out at Insar, which now holds 602 detainees. Interim visits to register new arrivals are carried out every week.

Fierce fighting

In the north, the ICRC was called upon to act following the bombing, on 27 June, of a small island off the coast of Tripoli; local relief workers who tried to bring relief to the wounded were hampered in their action. In the absence of adequate security conditions, only 10 wounded and two bodies could be evacuated. In view of this situation, the sub-delegation in Tripoli set up an evacuation operation with the Lebanese Red Cross. One wounded person and 7 other bodies were brought back on 28 June.

Several days later, clashes again broke out between rival factions in Tripoli. By July 15 there was also heavy fighting in the Koura region, and the ICRC sent a nurse to the town of Amioun, which has 15,000 inhabitants, to set up an emergency unit. The Lebanese Red Cross for its part set up three other first aid centres to help victims on both sides.

Concurrent visits to Atlit and Damascus

On 9 July, concurrent visits were made to prisoners in Israel and Syria.

In Damascus, ICRC delegates visited three Israeli prisoners held by the FPLP-CG: two of them had been seen three times in 1983; for the third, who had been reported missing in June 1982, it was a first visit.

In Israel, the object of the visit was Atlit prison, which are detained 121 prisoners who were not released during the exchange of prisoners between Israel and the PLO on 24 November 1983. There were originally 130 prisoners, but nine of them have since been released. In this case too, the visit was the first since November 1983.

Mr. Arafat at the ICRC

Mr. Yasser Arafat, President of the PLO, visited ICRC headquarters on 10 July. He spoke with Mr. Maurice Aubert, ICRC Vice-President, and the members of the Directorate on various subjects of humanitarian concern with regard to the situation in the Near East. Mr. Arafat was accompanied by Mr. Farouk Kaddoumi, head of the political department of the PLO, and Mr. Nabil Ramlawi, permanent representative of the PLO in Geneva.
ICRC Presidency: Mr. Alexandre Hay re-elected.

During its last meeting, the ICRC Assembly elected Mr. Alexandre Hay to the presidency of the International Committee for a third term of four years, as from 1 January 1985.

Born in 1919, Mr. Alexandre Hay has been a member of the International Committee since 1975 and President of the ICRC since 1 July 1976.

On 5 July, Mr. Hay was awarded the United Nations Peace Medal by Mr. Javier Perez de Cuellar, Secretary General of the U.N.O.

Note to our subscribers

The ICRC Mailing Service is being computerized and the addresses of our subscribers are now registered electronically. There may, however, be dispatching errors (inaccurate addresses, double mailing) until the new system is run in. Thank you for your understanding.

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Assistance to displaced Khmers: a review of the situation

Nearly 80,000 Khmer refugees — men, women and children—evacuated last April to temporary camps on Thai territory have not yet been able to return to their home camps on the Thai-Kampuchean border from which they were forced to flee during the events of the dry season.

With the rainy season approaching, bringing an increased risk to the health of the refugee community, especially through an acuter shortage of food, the ICRC remains concerned by the plight of these masses who have become particularly vulnerable by being forced to live in precarious and thoroughly abject conditions.

During the first six months of the year, 4 surgeons, 4 anaesthetists and 13 nurses placed at the disposal of the ICRC by the National Red Cross Societies of Belgium, Finland, France, Iceland, Japan, Norway, Sweden and Switzerland, treated war wounded and other emergency cases in the ICRC surgical hospitals at Kao I Dang and Kab Cherng. At Kao I Dang, 1,168 patients were admitted between January and June; at Kab Cherng there were 650 admissions during the same period. In order to provide sufficient blood for these two hospitals, 3,695 units, donated by the Australian and Japanese Red Cross, were transported to the Kao I Dang blood bank. The ICRC ambulance shuttle brought in 1,513 patients from the border regions. 1,781 patients were seen at the clinic for Vietnamese refugees at the Dongrek camp. The ICRC also provided medical care to Khmers held in places of detention along the border and to Vietnamese detained in Aranyaprathet Prison.

During the same period, the delegates of the Central Tracing Agency passed on 9,993 letters and made inquiries, at the request of relatives, about 4,000 persons in various camps or, for the most part, already settled in host countries. 1,363 persons were transferred by the ICRC, including 138 as part of a family reunification programme. 1,292 new Vietnamese refugees were registered, bringing their number in the Dongrek camp to nearly 2,500.

Visits to prisons in Latin America

At the beginning of July, the regional delegate for the Andean countries and the Caribbean carried out a mission to Grenada, during which he visited 30 detainees at the prison of Richmond Hill.

On 10 July, the regional delegate went to La Paz, Bolivia, where he made an offer of services to visit the persons detained following the attempted coup d'etat of 30 June. The offer of services was accepted by the Bolivian authorities and, starting on 13 July, the ICRC had access, in accordance with its conditions for visits, to 23 persons in two places of detention. The detainees were provided with mattresses, blankets and medicaments through the Bolivian Red Cross.
ICARA II: «Time for Solutions»

It was under this motto that the second International Conference on Assistance to Refugees in Africa (ICARA II) was held from 9 to 11 July 1984 at the Palais des Nations in Geneva. The first Conference took place in 1981.

The aim of the Conference, which was opened with addresses by the Secretary General of the United Nations, the Acting President of OAU, the High Commissioner for Refugees and the Administrator of the United Nations Development Programme, was to find lasting solutions to the refugee problem in Africa, and to help the African countries having to cope with a large influx of refugees to develop their infrastructure accordingly.

In response to an invitation from the Secretary General of the United Nations to attend the conference as an observer, the ICRC delegated its Vice-President, Mr Maurice Aubert, its Director for Operational Activities, and several members of staff directly concerned with African affairs.

In his speech to the Conference, the ICRC’s Vice-President stressed the role of the ICRC which, endeavouring to discharge its humanitarian mandate in situations of conflict and internal tension and working to protect and assist those displaced within their own countries, helps to prevent even greater movement of refugees between countries. He also said that the generosity of those who had the means to give and the work of the various organizations involved in aiding refugees should not lead us to forget the considerable problems faced by the African peoples themselves. What the ICRC believes should be brought out—as far as the Red Cross movement is concerned—is therefore above all the achievements of the National Red Cross and Red Crescent Societies themselves, which “have contributed unrelentingly to the solution of the distressing problems connected with the forced displacement of persons, even of whole communities”.

Concluding, Mr Aubert pointed out that the ICRC today has 16 delegations and sub-delegations throughout the African continent, which is few considering the massive tasks facing it. “I am thinking especially of the extremely difficult situations confronting Ethiopia, Uganda and Angola”, he said. In these three countries ICRC activities are mainly aimed at the question of internal refugees and the problem of bringing about the conditions necessary to prevent communities from being unsettled.

Background

Hans’ postal network

Faced with problems entirely new to him, the ICRC delegate in the field often has to display imagination and ingenuity in dealing with them.

A case from amongst many others: one handled by Hans, a Central Tracing Agency delegate in Uganda from November 1983 to June 1984.

Although Hans was initially assigned to tracing persons in refugee camps inside the Luwero “triangle” he found himself, some three months later, in charge of all the Agency’s tasks in the hinterland, i.e. all the regions situated outside the “triangle” and the Ugandan capital.

An impressive heap of messages

Among other things, he had to get more than 7,000 Red Cross messages and tracing requests to their addressees at all costs. Indeed, since November 1983, mainly because of the lack of means of transport, and then for several other reasons, including the dangerous situation, a very large number of messages and requests coming from the camps and addressed to people thought to be living in villages more than 15 km from Kampala were held up at the ICRC delegation. The Uganda Red Cross had built up a large backlog in its own tracing activities in the interior of the country because of a chronic shortage of vehicles. Moreover, since the beginning of February 1984 some 1,500 extra messages were given to the delegates during their visits to places of detention. These had to be sent on their way without delay. Two-thirds of these messages were addressed to places in the hinterland, thus confirming the necessity of assigning a delegate to solve these “postal” problems.

So here we see Hans transformed into a “postman” and shouldering a heavy responsibility. This huge heap of messages and request forms, far from being a pile of ideal paper, represented the hopes of more than seven thousand people, who were separated from one or more of their nearest and dearest, and who were relying on the Red Cross to re-establish contact for them with their families. In so far as possible, it was a matter of doing everything possible to avoid disappointing them.

The budget for the whole of Africa was originally set at 118 million Swiss francs for this year. Recently it had to be increased by 69 million to meet increased needs.

Mr Aubert also added that “the ICRC hopes that its appeal will be heard not only by the donor countries, whose financial support is indispensable to its work, but also by the host countries which alone can give it the chance to carry its operations through in cases where, very often, it is the only organization that can intervene”.

In brief...

On 10 July, Mr. Fikre-Selassie Wogderess, Secretary General of the Ethiopian Provisional Military Administrative Council and Vice-Chairman of the Council of Ministers, accompanied by Dr. Dawit Dawde, Chairman of the Ethiopian Red Cross, was received at ICRC headquarters by Mr. Maurice Aubert, Vice-President, and Mr. Jean-Pierre Hocké, Director for Operational Activities. During their meeting, the visitors and their hosts were able to discuss several matters relative to the joint ICRC/ Ethiopian Red Cross assistance action for displaced persons, under way since 1980, and ICRC protection activities for Somali prisoners of war.

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geographical maps: of East Africa, of the districts, counties and sub-counties of Uganda, plus a series of 16 maps (scale 1:250,000) covering the entire country. He also consulted a report on the 1980 population census showing, by administrative region, the results of this operation. His researches made him realize that it was pointless to forward messages to addresses where the sub-county or nearest important locality could not be pinpointed in this documentation. Sometimes additional information could be obtained in the districts concerned; failing that, his only option was to return the messages to their senders for them to complete the address.

During his frequent journeys through Uganda, Hans compiled his own atlas, which, by the end of his mission in the country, had become a highly detailed and intensely practical aid to his work.

Intermediaries

Hans' entire “postal infrastructure” consisted of one vehicle and one field-officer/driver. It was therefore out of the question for his service to distribute all the messages and handle all the enquiries. Consequently, he had to find volunteers to assist him in completing this task, i.e. people (intermediaries) who were familiar, if possible, with every nook and cranny in their district. He chose to approach the local branches of the Uganda Red Cross and the various Catholic and Protestant parishes scattered almost everywhere throughout the country. Having obtained their agreement, Hans and his field-officer therefore set up an entire network of “letter-boxes”: most of the branches of the National Society had their own, as did a large number of the parishes. Through their knowledge of the people and the geography the mission workers rendered very valuable assistance to Hans. With their help he could confirm or learn about a person’s presence in the region, check an address or ask his way. Some of them even undertook to forward messages (enclosed in envelopes) to the people they were intended for. Indeed it frequently happened that he was offered board and lodging in the mission houses.

The branches of the National Society were directly involved in the Agency’s work in this sphere. Once the ICRC has left the country, it will be they who will carry on some parts of its operations, such as the distribution of Red Cross messages. Each time he passed, Hans chose to set up “crannies” in the local branches and gave advice to the people in charge on ways of improving and strengthening their distribution network.

Nevertheless, this postal system had its weaknesses: the missionaries were concerned to the limits of their parishes and, since they often had no means of transport, the members of the Uganda Red Cross were obliged to cover sometimes quite large distances on foot, which amounts to very hard work in a tropical climate.

Various systems

In the regions closest to the capital — where the number of messages for distribution was the highest and the distances to be covered were reasonable — the delegate and his field-officer were able to visit each individual parish to ensure its co-operation, but it soon became clear that this system could not be applied to the entire country. The delegate therefore sought another way of handling the most distant regions to which very few messages, in some cases just one, had to be sent. When he visited the Vatican tried out in Lugazi, an agglomeration of sugar-cane plantations, factories and several villages spread over an area of about 35-kilometre radius. It was a long and arduous task to trace people and transmit messages in such a vast sugar-cane processing enterprise. Having obtained the consent of the personnel department, the delegate passed on to it the list he had drawn up of the people he wanted to see, fixing an appointment with them a few weeks later. On the appointed day, the personnel department assembled the employees whose names were on the list, so that they could talk with Hans.

Satisfactory results

The different methods of setting up a “postal network”, which Hans tried, met with varying success depending on the regions and the situation and motivation
Angola—huge ICRC emergency aid operation is underway

A massive relief operation by International Committee of the Red Cross for tens of thousands of people displaced by fighting in Angola is well underway.

A total of 3,300 tons of assistance including food, medicines and construction materials have already been shipped to the country in two vessels chartered by the ICRC and the West German Red Cross.

Aircraft and trains and over 50 trucks and vehicles are to be used to move the enormous amounts of aid from the seaports of Lobito and Moçamedes (now called Namibe) to the civilian victims who are suffering desperate food shortages in the Highland provinces of Huambo, Benguela and Bié.

A first rail shipment of food, blankets and tents has already been sent from Lobito to the town of Ganda in Benguela province for victims of the recent troubles in the region.

A further 400 tons of assistance was taken by ship further South to the port of Moçamedes, where a Hercules transport plane was standing by to airlift the relief to Huambo and Kuito. The Hercules is one of four aircraft that will be used in the operation.

Evaluations of needs have already taken place in the provinces of Benguela, Huambo and Kuito, in the province of Bié. In all, over 20 affected areas were visited, with ICRC delegates forced to travel by light aircraft because of the precarious security situation on the ground.

Appeal for respect

The ICRC has made representations to the parties concerned that its personnel, vehicles and installations be respected so that the action can be developed to meet the needs of the current emergency. The ICRC evaluations have shown that the needs of the displaced civilian population are greater in Huambo province than in Benguela and the emergency feeding programme will be adjusted accordingly.

The ICRC is also carrying out large emergency operations in Uganda and Ethiopia. The three actions cover an estimated quarter-of-a-million displaced people in these countries. Because of the sheer scale of these three actions in particular the institution has had to appeal for nearly 60 million Swiss Francs in additional donations from governments and National Societies to cover the 1984 African budget.

Two Soviet soldiers captured in Afghanistan were flown back to the Soviet Union last month after finishing two years of internment in Switzerland.

The two had maintained their wish to return to their country after the internment, which was the result of an agreement worked out by all the parties concerned. Five other Soviet troops remain interned on Swiss territory under the same agreement.

The ICRC delegates last month completed a series of visits to five places of detention in Uruguay. Among the 718 detainees visited were nine people, who up until now had not been seen by the ICRC since their detention began.

The Australian Foreign Minister, Mr Bill Hayden, visited the ICRC last month, accompanied by Australia’s ambassador to Geneva, Mr David Sadleir.

During talks with Mr Hayden the ICRC President, Mr Alexandre Hay, thanked the Australian government for the scale of its financial support for the ICRC during 1984.

Under its aid programme for detainees in South Africa and their families, the ICRC in July spent 42,819 Swiss Francs on food parcels and travelling expenses for family visits.

ICRC delegates distributed 16.6 tons of food and medicines to detainees being held in the Chadian capital, N’Djamena, during prison visits in July. Meanwhile, the ICRC is still seeking access to other detainees being held, particularly in the capital.
“The spirit of Aaland”

A spirit of peace —

“It is a spirit of peace which our humanitarian action brings into battle, in the name of the movement as a whole, a spirit which prepares the way for and facilitates the return to a genuine peace. This has been the spirit of the Red Cross since its first day.”

A relationship between the contribution of the Red Cross to peace and its contribution to human rights —

“It seems very clear to us that the humanitarian activity of the Red Cross, undertaken in compliance with its fundamental principles, is not only a contribution to peace but also a contribution to the respect for certain basic human rights.”

Protection and assistance, based on humanitarian law, certainly form a Red Cross contribution to peace but are first and foremost a decisive contribution to the respect for certain basic rights of the human person, in the first place a right to life.”

Appeal for the peaceful solution of conflicts —

“Since we are talking about common sense, we should start by suggesting that the States settle their disputes peacefully, using the mechanisms provided for that purpose by the United Nations Charter.”

Appeal concerning humanitarian law —

“Let all States ratify the Protocols additional to the Geneva Conventions. Let them adhere to the United Nations Convention on the Prohibition of Certain Conventional Weapons... Let them refine and update these texts. The ICRC is ready to help in any way it can.”

Appeal for disarmament —

“We should also ask them to agree on across-the-board supervised disarmament. This is something we shall always support — with all our 230 million voices, with all the conviction of our peaceful and universal movement.”

“The movement is only too well aware of the increasing need for disarmament. We must therefore step up the pressure on governments to reach agreement on this matter, especially with regard to weapons of mass destruction.”

* A full roundup of the Aaland Conference will appear in next month’s “ICRC Bulletin”, including extracts from the speech delivered by the President of the League, Mr Enrique de la Mata, whose key-address had not been delivered at the time of going to press.

Background: Setting up a relief operation

THE WORD “relief”, in particular when coupled with the word “emergency”, brings to mind a flurry of spontaneous humanitarian activity, long columns of vehicles laden with goods on their way to devastated landscapes, thousands of people stoically waiting in line for the aid which may very well represent their one chance of survival.

This image seems to be borne out by some pictures and press reports; in reality, preparing, carrying out and supervising a large-scale relief operation requires considerable organization: only by applying strict rules and with careful planning are the operation’s chances of success to be increased.

(continued back page)
Caught between two armies

The village of Ezze lies in Lebanon’s Bekaa Valley. Situated 20 kilometres from the main Beirut-Damascus highway, the collection of run-down houses is the demarcation line for the Syrian and Israeli armies, as well as home for 75 Lebanese families, writes Serge Caccia.

Surrounded by barren hills, the sun-baked village is cut in two by an enormous earthenwork mound that also serves as defences for Syrian heavy machine-gun emplacements.

Although Ezze is in the frontline, the 400 people living there have refused to leave their partially-destroyed village despite the daily tensions and dangers.

All around Ezze the ground is devastated and scorched, full of shell craters and littered with mines. On the ridges of the nearby hills the silhouettes of heavy cannon stand out menacingly in the gruelling heat and heavy silence.

It’s 11 o’clock in the morning when an ICRC truck pulls up in front of the earthenwork mound. The villagers slowly appear, pushing their small donkeys before them: cars are forbidden in Ezze. They are for the most part women, children and old people, who make their way to the food distribution point.

Rations for a month

The village head walks to the front and greets ICRC delegate Meinrad Studer. They don’t speak each other’s language but formalities and essentials are quickly dealt with in sign language.

The distribution begins. Each family receives a food parcel containing basic rations for one month. Later the village head offers tea at his home. The delegate’s Lebanese assistant acts as interpreter as they discuss the life of the village.

 Civilians killed

They talk about the two villagers killed two weeks previously when they wandered into a forbidden zone. A shepherd recalls his own personal experience and the fear he felt when shots were fired in front of his feet when his goats wandered too close to military positions. And of course the greatest problem, the impossibility of growing food under the present circumstances.

Finally it’s time to go. A last flurry of sign language, the truck’s engine bursts into life and the doors are slammed. Meinrad and his assistant return to Ksara.

The village’s only street quickly empties and is silent.

Handicapped former guerrillas first to benefit from new Fund

Former guerrillas who lost limbs in Zimbabwe’s war of independence will be the first beneficiaries of an ICRC “Fund for the Handicapped” that was set up this year with an initial donation of one million Swiss Francs.

The establishment of the Fund is the result of a resolution passed at the International Red Cross Conference in Manila in 1981 and is aimed at rehabilitating war amputees who have remained without orthopaedic treatment years after being wounded.

The Zimbabwe orthopaedic programme, scheduled to last three or four years, will begin within the next few weeks. Final details are also being worked out for a similar action in Nicaragua, and both programmes will be run on a bilateral basis with the governments. Since the ICRC began its rehabilitation operations for war amputees in 1979 about 5,000 people have been fitted with artificial limbs in 11 orthopaedic centres run by the Committee in Africa, the Middle East and on the Afghan-Pakistani frontier.

The centres are usually set up in partnership with the authorities or National Society and in addition to providing funds and expertise the ICRC also trains local personnel. In the past five years, Red Cross experts have trained some 150 people in orthopaedic techniques. A central feature of the ICRC action is the construction of artificial limbs from locally available materials, so that costs are kept to a minimum and replacements can be readily provided.

The first programmes were established in 1979 at Debre Zeit in Ethiopia and in Chad, where locally trained staff are now in complete control.
Setting up a relief operation...

(cont. from page 2)

Humanitarian motivation, the desire to provide on-the-spot help for the unfortunate victims of a conflict, are very real sentiments; they must, however, be channelled and directed, for the sake of efficacy and for the good of the victims.

Basic criteria

When, why and for whom does the ICRC decide to set up a large-scale assistance operation? The ICRC takes action only if certain basic prerequisites are met. In relief operations, the overriding criterion is urgency: as long as the fundamental needs of vulnerable categories of the people affected have not been met, there is an emergency.

The people being assisted must be the victims of a conflict situation and the ICRC must supervise the distribution of the relief supplies it provides.

Assessment

An assessment mission will produce a complete report comprising, besides geographical, demographic and logistical information, data on the food and material situation of victims, their primary and secondary needs, a study of the local market and prospects for a programme of action. This "survey" will become the basis on which operational decisions are made.

Sources of information

The ICRC's specialists draw on numerous sources so that their report reflects the actual situation as clearly and as faithfully as possible. The local Red Cross or Red Crescent is, of course, the first to be consulted, followed by civilian and religious leaders, government officials and diplomatic representatives. Useful information can also be gleaned from foreigners residing in the country for a long time, other humanitarian organizations that are active in the area, merchants, or even from teachers, tradesmen, doctors and, last but not least, the victims themselves.

If an ICRC delegation is already operational in the country — as is the case in Angola, where a large-scale relief operation put on hold a year ago is at present being reactivated — access to information will be easier.

From words to deeds

At ICRC headquarters, the survey is painstakingly gone over at all decision-making levels; a budget is then drawn up. Once approved, the green light is given to act. Obviously, the ICRC's goal is to be operational as quickly as possible.

Personnel will have to be quickly dispatched to the field, but from where? About fifteen specialists are always on call at ICRC headquarters, ready to leave on practically 24 hours notice. They are experienced delegates, able to set up a new operation swiftly; sometimes delegates are temporarily "borrowed" from other delegations; National Red Cross and Red Crescent Societies can often quickly supply technical staff such as medical teams and relief specialists.

Relief supplies

Although they may take place in similar contexts, no two conflict situations are ever identical; for this reason, no relief operation can be carried out exactly as a past or concurrent one. There are, however, certain guidelines which simplify the operation in its initial stages and which increase its chances for success.

According to the ICRC's mandate, material relief supplies should cover only the victims' most basic needs; it can therefore limit its distributions to essential items. Past experience has shown that pre-packaged standardized kits facilitate both distribution and supervision.

First used in medical emergencies (dressing kits, pediatric kits, hospital kits, etc.), the use of "mixed parcels" is becoming more widespread in relief actions, and there are now family kits, comprising basic foodstuffs supplemented at times by hygiene products, sufficient for the needs of an average family for a period determined on a case-by-case basis. If necessary, the kits are supplemented with cooking utensils, blankets or tents.

Where supplies come from

In the case of a medical emergency, ICRC stocks in Geneva are sufficient to meet needs in the initial stages of the operation; any other products should ideally be bought in the region affected, for reasons of cost-efficiency, availability and, above all, the beneficiaries' familiarity with indigenous products. This is not always possible, as large-volume purchases can destabilize an already weak market. In that case, the ICRC tries first to find supplies in neighbouring countries; only as a last resort will it make purchases overseas.

When the ICRC decides to proceed with a large-scale relief operation, it launches a general appeal to the international community for the funds necessary to finance it. Donors contribute either in cash or, very often, in kind. A list of products and materials, the need for which has been observed by ICRC delegates, is drawn up and transmitted to the donors, specifying priorities.

Items offered that are not on the list are in principle turned down. Nearly a year ago, incidentally, the ICRC's Relief Division compiled a handbook of guidelines for potential donors who wish to contribute in kind to ICRC relief operations, be it in the form of foodstuffs, hygiene products, cooking equipment, blankets, tents, material for shelters, or even vehicles. The handbook was drawn up on the basis of years of experience and should prevent a number of errors, such as the donation of merchandise and material ill-adapted to a specific region or situation and which then rots or lies idle in warehouses — or finds its way to the black market.

Logistics

In the first stages of an operation, aircraft are frequently used. Being both rapid and safe, this means of transport facilitates the rapid constitution of the basic stocks necessary to launch the operation. If the ICRC has to ship goods on regularly-scheduled flights, it sometimes benefits from IATA's resolution 200, which stipulates that cargo be used for humanitarian purposes can be transported free-of-charge or at reduced cost. The ICRC may itself charter an aircraft for a long or short time, an expensive but sometimes unavoidable solution. Plans had been made in the past to purchase aircraft, but have been set aside for the time being: the aircraft would not be used regularly enough.

Furthermore, since almost each operation needs a different kind of aircraft, the cost of having on hand a suitable aircraft for each situation would quickly become prohibitive.

Once the operation is beyond the initial stage, sea transport is the rule, even though, especially for Africa, it cannot be considered a reliable means of transport. One of the major drawbacks of sea transport is the length of time needed, which does not suit the idea of "emergency": several months may go by between the mobilization of relief supplies and their arrival in the area affected, after the sea voyage, unloading and transport overland by road or rail. It may even be necessary, in order to build up stock rapidly near the distribution centres, to charter a short-term airlift from the port of arrival to the regions affected. In the meantime, solid warehouses, immune to theft and the elements, will have been rented or even constructed to store the goods.

In any emergency action, it is important to keep to a strict minimum the amount of time between making the decision to act and launching the programme. This is the task of the ICRC's Relief Division specialists both in Geneva and in the field.

The International Committee of the Red Cross (ICRC), together with the League of Red Cross and Red Crescent Societies and the recognized National Red Cross and Red Crescent Societies, is one of the three components of the International Red Cross. An independent humanitarian institution, the ICRC is the founding body of the Red Cross. As a neutral intermediary in case of armed conflicts or disturbances, it endeavours on its own initiative or on the basis of the Geneva Conventions to protect and assist the victims of international and civil wars and of internal troubles and tensions, thereby contributing to peace in the world.
Zaire: protection activities resumed

Following the discussion in early July by the ICRC delegate-general for Africa with President Mobutu Sese Seko of Zaire, the ICRC regional delegation in Kinshasa has been able to resume its protection activities under normal conditions, after a series of difficulties in recent months. ICRC delegates were thus able, in July, to make six visits to four places of detention in the capital.

Notable in August was the series of visits carried out by the ICRC delegates to Mbuji-Mayi (Kasai Oriental province); it was the first time Mbuji-Mayi was visited by ICRC delegates, and was furthermore the first series of visits for more than a year to places of detention in the provinces. The delegates visited the Central Prison there, the premises of the National Documentation Agency (A.N.D.) and four National Police Force jails.

In Kinshasa, also in August, ICRC delegates visited the B2, G2 and A.N.D. detention centres. In all, they went to ten places of detention and saw 339 detainees.

In addition, regular visits were made to the Makala Central Justice Prison and to the Ndolo Central Military Prison, both situated in the capital.

Visits to places of detention in Zaire are combined with a programme of material aid for the detainees visited and their families. In the course of this programme, 2,500 kg of medical and food aid was distributed to 1,824 persons in August.

Iranian aircraft hijacked: passengers repatriated by ICRC

In the early hours in the morning of 4 September an aircraft chartered by the ICRC touched down in Teheran, bringing back 189 passengers and 11 aircrew of an Iranian Airbus hijacked on 28 August and forced to land in Iraq. On 7 September another Iran Air plane, a Boeing 727, was hijacked and forced to fly first to Cairo, then to Iraq. The repatriation of 57 passengers and 8 aircrew from Baghdad to Teheran took place in the morning on 15 September, likewise on board an aircraft chartered by the ICRC.

Baghdad, 15 September: Registration by the ICRC of the hijacked Iranian Boeing passengers. (Photo: E. Hegetschweiler)
A Lebanese Red Cross care centre
by Françoise Derron, ICRC information delegate in Beirut

who have taken part in this programme have gained educational experience which they will, if necessary, be able to turn to valuable account elsewhere.

Apart from the medico-social centre’s activities, which are organized at intervals to meet specific needs, the Lebanese Red Cross has also set up a first aid post which is open 24 hours a day, thanks to 30 first aid workers who have just completed their training. This centre has two ambulances, supplied by the ICRC, which also takes active part in its work by providing an orthopaedist to give consultations there once a week. Assisted by a Lebanese Red Cross volunteer, this specialist gives an average of fifteen consultations each time he comes.

The Red Cross on Screen

“A plea for humanity”
(Running time: 35 minutes)

The general principles of international humanitarian law are the subject of this new film, made for the ICRC by the Swiss film director Peter Ammann. Its setting is war, in all its cruelty, combining archive material showing sequences from the First and Second World Wars, the Spanish and Algerian wars, with scenes filmed on the spot in several of the world’s areas of combat today.

In the midst of horror, the film makes a poignant plea for an end to indiscriminate violence, for an oasis of humanity in the heart of conflict, namely for respect to be shown for civilian and military victims, for non-combatants — a respect which in itself is a definite step towards peace. The film “A Plea for Humanity” was moreover given its first showing for the participants at the Second World Red Cross and Red Crescent Conference on Peace.

The film material included is not all new, yet even the most hardened of audiences will not remain unmoved by this compelling presentation. “A Plea for Humanity” is not intended as a didactic film, but rather to sensitize public opinion. It is an ideal support for the work of the entire Red Cross and Red Crescent movement to disseminate knowledge of international humanitarian law, especially among the armed forces.

While filming “A Plea for Humanity” with his team in various conflict areas, Peter Ammann took the opportunity to direct another three films showing the activities of the Red Cross:

“Salvador 83”
(Running time: 20 minutes)

“The border people”
(Filmed on the border between Thailand and Kampuchea. Running time: 28 minutes)

“Alliance for survival”
(Filmed in Ethiopia. Running time: 30 minutes)

These four films are available from the ICRC, Geneva, in 16 mm and as videocassettes.
The Aaland Conference — a success

It can safely be said that the Second World Red Cross and Red Crescent Conference on Peace was a success. Firstly, it achieved its main objective as defined in the rules of procedure established before: 102 National Societies present, the League and the ICRC were able to agree, by consensus, on a text consisting of about a dozen pages and laying down "Fundamental Guidelines for the contribution by the Red Cross and Red Crescent Societies to a true peace in the world". Admittedly, this text called for numerous consultations within the movement, both before and during the Conference, for it to be finally acceptable for all. The rule of consensus does in fact have the specific characteristic of compelling participants in debates to seek what they have in common, rather than make a point of their differences of opinion. For it would obviously be wrong to claim that there were no divergences: they certainly did exist, especially with regard to the direct contribution of the Red Cross to peace. Such differences arose, for instance, over the part which certain National Societies would like to see played by the Red Cross movement as a whole in the field of disarmament, of outside the strictly humanitarian domain. But ideas which did not meet with a consensus were simply not included in the Fundamental Guidelines, which are binding for the entire movement, even though the right to hold individual opinions remains.

Another factor in the success of the Conference was the spirit in which the debates took place. Everyone expressed their views in a spirit of tolerance devoid of any polemic argumentation. This was all the more remarkable — and was indeed noted as such — in that the Aaland Conference assembled representatives from National Societies in countries at war with each other, or openly opposed in major international fora. It was a notable feature of the Conference that direct but discreet contacts took place in the lobbies between certain delegates from such countries, contacts which the nature and setting of the conference could not fail to be conducive.

One final remark, but which merits particular attention: several Third World delegates expressed their regret, in asides, that the debates of the Commission which dealt with the contribution of the Red Cross to "true peace" had been centred more on preserving peace in the northern hemisphere than on means of putting an end to the wars savagely tearing apart a number of indigent countries in Africa, Asia and Latin America. In other words, the preoccupation with "East-West" issues has all too often taken precedence over the tragic realities afflicting various Third World countries today. These are comments which must and will certainly be taken into future account.

To return to the Conference, however, a worldwide movement which not only succeeds in defining a unique concept of peace, but also in adopting, by consensus, fundamental guidelines for its contribution to attaining that peace, is a movement which remains remarkably dynamic in its universality.

Alain Modoux
Head of the ICRC Information Department

Background

"Through humanity to peace"

The Second World Red Cross and Red Crescent Conference on Peace ended in Stockholm on 7 September 1984. The five-day conference, held on the chief island of the demilitarized archipelago of Aaland (Finland), was attended by some 300 delegates representing all the components of the Red Cross and Red Crescent movement.

A long standing commitment

The International Red Cross has for many years been actively working to promote peace, both through its traditional activities and through special initiatives. As far back as 1921, the Tenth International Red Cross Conference, held in Geneva, appealed to all peoples of the world "to combat the spirit of war"; the subsequent Conferences of 1923, 1930 and 1934 issued declarations aimed at preventing war and fostering deeper understanding among nations, and the Stockholm Conference of 1948 stressed the "importance (...) of humanitarian action for the maintenance of peace", affirming that in times of war and peace alike such actions "are practical, productive measures in the cause of peace". At the following International Red Cross Conferences more and more emphasis was put on Red Cross activities for peace, until in Teheran in 1973 a specific recommendation called for "the convoking, in the near future, of a Red Cross Conference devoted to the study of the role and the activities of the Red Cross to promote peace".

Pursuant to this recommendation, the First World Red Cross Conference on Peace was then convened in Belgrade in 1975. The decisions of this conference were endorsed by the Twenty-third International Red Cross Conference at Bucharest in 1977. The establishment of the First Red Cross Conference on Peace was the adoption of the "Programme of Action of the Red Cross as a Factor of Peace" which defined the meaning of the word "peace" as understood by all the components of the Red Cross, thus by the movement in its entirety: "The Red Cross movement does not view peace simply as the absence of war, but rather as a dynamic process of co-operation among all states and peoples; co-operation founded on freedom, independence, national sovereignty, equality, respect of human rights, as well as a fair and equitable distribution of resources to meet the needs of peoples."

The 1977 International Red Cross Conference set up a Commission on the Red Cross and Peace with the task of following the implementation of the "Programme of Action" and proposing new means of action aimed at contributing to maintaining peace. The newly created commission, consisting of representatives of twelve National Red Cross and Red Crescent Societies, was placed under the chairmanship of Mr. Harald Huber, then Vice-President of the ICRC. The Commission has met regularly since 1977, adopting all its decisions by consensus. Needless to say, its work has not always been free from difficulties, but the spirit of tolerance and understanding among its members, and their common desire to contribute actively to the work of the Red Cross for peace, have always successfully prevailed.

One of most controversial issues debated by the Commission so far, "Red Cross and Disarmament", formed the subject of Resolution 1 adopted by the Council of Delegates in October, 1983, which stated inter alia that "the Red Cross must do what it can to bring about an atmosphere favourable to the lessening of tension, as a necessary preliminary to adopting agreements on disarmament". It was primarily with this aim in view that the Second World Conference on Peace was proposed, both by the Commission on the Red Cross and Peace and by the other bodies of the International Red Cross.

Peace-time and war-time activities

At the request of the Commission on the Red Cross and Peace, 34 National Red Cross and Red Crescent Societies, 50 Youth Sections, the League of Red Cross and Red Crescent Societies and the ICRC submitted reports on the measures they had taken to implement the 1975 "Programme of Action". A summary of these reports, prepared by the Commission, was presented at the first plenary meeting of the Aaland Conference by Mr. Harald Huber, elected President of the Conference.

The National Societies had also been invited to submit reference or working papers on the various subjects on the agenda of the Conference, which were then distributed and debated by two Commissions: Commission I, headed by Mr. Enrique de la Mata, President of the League, concentrated on peace-time activities and in particular on sections of the
"Programme of Action" dealing with relief, health, development and youth programmes and the question of organizing and co-ordinating Red Cross work for peace; Commission II, focused on the following five sections: knowledge and dissemination of international humanitarian law, development of international humanitarian law, Red Cross activities in aid of war victims, direct contribution of the Red Cross to peace, and organizing and co-ordinating Red Cross work for peace.

Fundamental guidelines

In addition to the reports drawn up by the two Commissions at the end of their deliberations, at the plenary meeting the Aaland Conference adopted "Fundamental Guidelines for the contribution of the Red Cross and Red Crescent movement to a true peace in the world". The guidelines are designed to promote and direct the movement's work for peace and to facilitate the implementation of the 1975 "Programme of Action" which was drawn up by the Conference in Belgrade, adopted by the Conference in Bucharest, then reviewed, updated and supplemented at Aaland. These guidelines state that "By their humanitarian action, the National Societies, the ICRC and the League constantly further the cause of peace. Through consistent, patient and all-encompassing effort, each component of the movement contributes to this dynamic process of co-operation, which is to build such future of humanity to which we all aspire. Whereas war is most often the consequence of the inhuman policy of increasing tension, the Red Cross and the Red Crescent movement contributes to reducing tensions and defusing the causes of conflicts. In this way it works constantly — within the limits of its competence — for true peace."

The Aaland Message

The Conference also adopted a Message to the World Community, in which it expressed the movement's deep concern about the tension, violence, domination and military superiority, which it expressed the movement's deep concern about the tension, violence, racial discrimination and violation of human rights in many parts of the world. The Message recognizes that inequitable social and economic factors are major causes of unrest and notes "with giving work. It is the first step on the road to preventing and eliminating war: humanity is an essential factor of the peace which can never be attained through domination and military superiority". "Per humanitatem ad pacem" — this motto of the Red Cross movement itself thus became the motto of the Aaland Conference: "Through Humanity to Peace."

The "Fundamental Guidelines" also encourage the whole Red Cross movement to "consolidate peace by reducing suffering", recalling that "the Red Cross and Red Crescent Movement is peace even in war" and proposing initiatives aimed at strengthening that positive role. The document ends with the following words: "The Red Cross and Red Crescent movement hopes that by following these guidelines, it will give inspiration to all the peoples and governments of the world, and will thus contribute to finding the path which will lead humanity to lasting peace."

The International Committee of the Red Cross (ICRC), together with the League of Red Cross and Red Crescent Societies and the recognized National Red Cross and Red Crescent Societies, is one of the three components of the International Red Cross. An independent humanitarian institution, the ICRC is the founding body of the Red Cross. As a neutral intermediary in case of armed conflicts or disturbances, it endeavours on its own initiative or on the basis of the Geneva Conventions to protect and assist the victims of international and civil wars and of internal troubles and tension, thereby contributing to peace in the world.
Ethiopian airlift

Thousands and thousands of men, women and children are suffering from starvation following the drought that has reigned over a large part of Ethiopia during the last three months and more. The ICRC, in a joint operation with local branches of the National Society, is fighting hard to bring relief to the sufferers.

One of the worst hit areas is Tigray. The ICRC has already set up an airlift from the supply centres of Addis Ababa and Asmara, sending up to the small town of Mekele, where there are between 20,000 to 40,000 people in need, relief supplies and medicaments by Hercules and Twin Otter aircraft. In an airlift mounted between 24 September and 7 October, 508 tons of supplies, worth 1 million Swiss francs, were flown in to Mekele and immediately distributed.

The airlift by Hercules is continuing. The ICRC/ERCS have built shelters for the displaced persons, and are building a new feeding centre on the outskirts of Mekele. Monthly rations of 10 kg of wheatflour, 3 kg of beans, and 2 kg of butter- or vegetable-oil are being distributed. Sanitary installations and water pumps are being installed, and relief work is being undertaken by 1 delegate, 2 nurses, an ICRC construction delegate, and members of the ERCS.

The ICRC hopes to be able to supply Mekele by land from the north, since the route from the depots at Asmara to Mekele is only about 400 km, while that via Addis Ababa is about 1500 km. At the present time, however, convoys are spasmatic and slow. The urgency of the situation demands that supplies be brought in by air as fast as possible. Army worms have devoured what crops survived the drought, and more people are making their way to the feeding centres, some dying on the way. Some, too, arrive with dead infants who have not been able to survive the journey from the interior to the centres.

This tragic picture can be repeated over a large part of the country, and the ICRC is increasing its efforts to bring relief in operations in the districts of Eritrea, Tigray, Wollo, Gondar and Harar. At the end of September, more than 150,000 people were being aided by the ICRC/ERCS and this number is expected to increase.

El Salvador: Red Cross presence at La Palma

In connection with the meeting on 15 October between the Salvadorian President José Napoleon Duarte and representatives of FMLN/FDR, the ICRC was requested by both the government and the guerrillas to assume the security and to organise the transport of opposition leaders coming from outside the country to attend the meeting. The ICRC had to meet them at San Salvador airport, and escort them to the small town in the north of Chalatenango under the protection of the Red Cross flag; the same operation was mounted for the return trip at the end of the meeting. In collaboration with the Salvadorian Red Cross, four aid posts and a radio link were set up along the route taken by the convoy, which crossed the whole country. Sixty members of the Salvadorian Red Cross and fifteen ICRC delegates were mobilised to ensure the success of the operation. Red Cross services were also held in readiness to deal with any problems arising from the presence of large crowds at the meeting place.

Iran-Iraq: Repatriation of prisoners

On 20 October, 100 prisoners and civil internees were handed over to the ICRC at Ankara airport (Turkey) by representatives of the Iraqi authorities. Acting as the neutral intermediary between the belligerent parties, the ICRC delivered the prisoners to representatives of the Islamic Republic of Iran for repatriation. Before being handed over, each and all of the 100 Iranian prisoners had been seen by the ICRC in interviews without witnesses; they were accompanied by ICRC delegates and doctors to Teheran.

On 25 October, 72 wounded and sick Iraqi prisoners were repatriated under the auspices of the ICRC, when an identical procedure was used.

During the two repatriations, the reception of the prisoners and the medical infrastructure at Ankara airport was organised by the Turkish authorities and the Turkish Red Crescent Society.

(Jean-Jacques Kurz, ICRC Press Attaché, reported the first repatriation. See his article on page 2).
Between two worlds
by Jean-Jacques Kurz

They were just 99, squatting in a close-packed group in front of the camp kitchens at Ramadi, some 75 miles (120 km) from Baghdad in Iraq. 99 Iranian prisoners, who were still asking themselves whether they could really believe in the good news: that that night they would leave the camp, tomorrow night they would be back in Teheran. Of course, the camp commander had told them more than six weeks ago, and the ICRC delegates had come to the camp specially to ask them, individually, if they were willing to be repatriated. But after that, nothing.

Thus, on that afternoon of 19 October, they were still a little wary. Five ICRC delegates had penetrated the thick, spiky double barbed wire barriers. They counted and re-counted them. They called the roll, the Iraqi major called it again. The delegates told them that they would be taken by bus to Baghdad, and be put on board an aircraft for Ankara, where an Iranian aircraft would come to meet them. Meanwhile, it was nearly cold, thanks to the keen wind that eddied round the two-storey buildings; even the weather was hostile, inimical. The delegates explained yet again what was to happen, then left. There was still a night to get through. Now they were 100; a mutilated adolescent had come to join the group.

It was precisely half-past midnight—nothing will alter those Swiss — when the door of the dormitory where they were all gathered together opened. The delegates were there, and out in the yard the night air was coloured orange by the floodlights. They were lined up in a single column, and one by one, group after group, marched off. For the first time, a civilian led them, another delegate bringing up the rear. Off to the first gate, which was opened for them through. Now they were 100; a civilian led them, another delegate bringing up the rear. Off to the second gate, the men stooping to go through it. When they straightened up, they saw their way clear to the three buses that were drawn up waiting for them.

At last to be on the right side of the wire. On the other side, goodbye. Waves. And the rest was a long dream.

Ankara airport: The reception of prisoners leaving the aircraft. (Photo: J.-J. Kurz)

The gentle warmth of the heated buses, where the delegates climbed in with them. Faces relaxed, outside it was night and cold, inside it felt good, and the first smiles appeared. The buses started off, sandwiched between security service vehicles with flashing red and blue lights. It was three in the morning, Saturday 20 October.

Two and a half hours drive to Baghdad. Just before the dawn, they reached the airport. They had to wait again, but after four years of captivity, one more hour made no difference. Nobody slept, though many tried; but tension, anxiety as well, kept them awake confronted by a host of questions: the children have grown up over these last four years, what are they like? What has happened to the house? And the neighbours? Some of the prisoners had no idea of what they felt when they went up the aircraft gangway. They floated between two worlds. The tray they were given in the aircraft, with plastic knife, fork and spoon all wrapped up, had them thinking again how to eat with all those utensils rather than using their fingers to feed themselves.

The rest of the journey was extended for endless hours. Waiting for the arrival of the Iranian aircraft. Waiting to board it. And the to-ing and fro-ing of a host of officials — Iraqis, Turks, Red Cross, Red Crescent, and Iranians as well. The endless last minute, during which they came to realise that their future was really there, in front of their eyes, concretised by the presence of the Iranian aircraft, and nothing would be the same again. Nobody can emerge unaffected by four years of captivity by the enemy. At the moment of liberation, it is another man who starts another life. Another story, which waits to be written.
Dissemination at Peshawar: theory and practice

At Peshawar, 699 Afghans have followed the first-aid courses organised by the ICRC delegation to Pakistan since March 1984. These courses, mainly for commanders, but by extension for all those Afghans who, passing through Peshawar, will later cross the frontier to return to their country, consist of four hours basic instruction in the use of dressings and the making-up of bandages, together with the immobilisation and transport of the wounded, while two further hours are devoted to the dissemination of the rules of humanitarian behaviour in warfare. Taking place on two afternoons, these courses enable Afghans wanting to bring help to the wounded in future combats to acquire, not a nurse’s training, still less a doctor’s, but the knowledge of how to give the necessary first aid to the wounded, and within the limits of their means, to make them comfortable.

The serious attention observable on the faces of the men who take part in the courses well demonstrates the value that they attach to those few hours spent in the ICRC’s premises.

The basic instruction is given by an Afghan doctor employed by the ICRC or by Afghan field officers from the delegation, who have been specially trained for the task. To make things easier, all demonstrations such as putting on bandages or splints are made on a member of the course.

Humanitarian rules

At the end of each course, Paul Früh, delegate in charge of the dissemination of basic humanitarian rules and Red Cross principles, gives each participant an illustrated booklet, written in Pushtu and Dari, explaining the role of the ICRC in cases of conflict and the principal rules of the Geneva Conventions. Very often, the members of the courses mention to the delegate the similarities that exist between the Koran and human rights. Very often also, the problem of the ICRC’s non-authorisation to develop its activities inside Afghanistan is raised.

For people confronted each day with the realities of the conflict which prevails in Afghanistan, it is not always easy for them to admit that these rules should overcome the feeling of injustice they are capable of harbouring in the face of the situation. For the ICRC, the passing on of this humanitarian message to the inside of Afghanistan is for the moment the only way to act so as to protect those who do not take part, or who no longer take part, in the fighting. At the end of the course, also, each participant receives a first-aid packet containing a triangular bandage, a field-dressing, a bottle of disinfectant and anti-neuralgic tablets. These first-aid packets, however derisory they may seem to those who have seen the atrociously-wounded patients in the ICRC hospitals, nevertheless carry an immense symbolic power, as is explained by Paul Früh: “During the course, we tell the Afghans to respect prisoners and to render assistance to the wounded, friends or enemies. These packets are, in their way, the means of putting into practice this basic principle of the Red Cross.”

News in brief

Two Taiwan fishing boats and their crews (7 and 6 people respectively) left Qui Nhon, in the south of Vietnam, on 2 October to return to Taiwan. The head of the ICRC delegation to Hanoi was there to see them leave. The two boats, reported missing since November 1983, had entered Vietnamese territorial waters as the result of a break-down. The ICRC delegation negotiated with the Vietnamese authorities, who decided to repatriate the two boats and their crews, which event was witnessed by the ICRC.

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In Chile, 15 October saw the completion of a series of visits to 17 places of detention, visits which started on 25 September. In the course of their visits, ICRC delegates saw 223 detainees, of whom 31 were women.

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Mrs Aleskerova, President of the Executive Committee of the Azerbaijan Red Crescent, and Mrs Parsadanyan, President of the Armenian Red Cross, spent the day at ICRC headquarters on 17 October. They met with Mr Alexandre Hay, President of the ICRC, and other staff.

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Mr Getachew Araya, Secretary-general of the Ethiopian Red Cross, who made a journey through Europe in order to make public opinion aware of the tragic situation in his country, was received at the ICRC headquarters on 8 October by the Director of Operational Activities, and those responsible for the African zone and the Relief Division.
Fifteen months on Atauro:
a nurse-delegate tells her story

I was posted to Atauro, a small island off the coast of Timor to which civilians have been displaced following the events on East Timor. Since the end of 1982, the ICRC, in conjunction with the Indonesian Red Cross (Palang Merah Indonesia — PMI), has been assisting the people sent to Atauro. It provides medical care, protection and food relief supplies, it being impossible to grow sufficient food on the island itself.

By Mary-Josée Burnier

During the quiet time just before nightfall, I enjoy walking along the beach, taking advantage of the refreshing sea breeze and the silence to think about the day’s events. Images, faces, voices, problems go round in circles in my head — mutual misunderstanding, fear, communication gaps, physical and sometimes moral distress: how are they to be dealt with, so as to ease the pain of those that suffer?

I feel alone, cut off — I have had no contact with the ICRC delegation in Jakarta for two weeks — as though I were at the end of the world.

And yet, for over a year I have regularly come to Atauro alone. A year of struggling against malnutrition, lack of hygiene, illness; a year of patient effort to learn a language, win the confidence of the people, bridge the communication gaps.

The first weeks were difficult ones, due to differences in mentality and customs. My role was greatly misunderstood, both on Atauro and in Dili; I felt myself the subject of some suspicion. It took time to make everyone understand that my presence, that of the ICRC, was only for humanitarian purposes, and to gain the acceptance and the confidence of those around me through attitude, word and deed.

But let’s start at the beginning: When I arrived on Atauro, in May 1983, the malnutrition of the children was still one of the problems to be solved. The team of PMI volunteers recruited from among the displaced people had been helpless since the recent and accidental death of the doctor in charge.

Together, we got down to work: sorting and checking the malnourished children, enlarging the supplementary feeding centre, reorganizing meal distributions, training kitchen and administrative personnel. Every month, we could see the effects of our work when checking the weight and height of all the children receiving extra food: little by little, they were getting back to health.

At the start of the dry season, the water supply, which until then had been just sufficient, became our main concern. Emergency wells were sunk near the camp in case the main well ran dry. Pipes were cleaned and repaired, damaged taps were changed.

At the same time, we started a cleanliness campaign in the whole camp to limit and prevent insofar as possible illnesses such as conjunctivitis, malaria, intestinal parasites and diarrhoea. The huts were cleaned and repaired, separate stalls set up for domestic animals — and garbage pits and latrines were dug.

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Of course, the ICRC has not been able to resolve all the problems of the displaced persons on Atauro; however, Red Cross activities have helped to improve the situation of these people, with whom, for more than a year, day-by-day, Mary-Josée Burnier has shared an enriching experience.
The ICRC in Iran: Work Suspended

Because the ICRC alone cannot save some 50,000 Iraqi prisoners-of-war in Iran threatened in both their mental and their physical integrity, it has once again had to resort to the States signatory to the Geneva Conventions. As they have undertaken to ensure the respect for the Conventions by countries at war, these States now hold in their hands the fate of tens of thousands of prisoners-of-war.

Addressing 82 representatives of signatory states at Geneva on 23 November 1984, the ICRC President, Mr Alexandre Hay, confirmed that Iran had suspended all ICRC activities on its soil from 10 October 1984. This date was that of the incident that took place during the visit of ICRC delegates to Gorgan Camp, an incident that caused the deaths of several Iraqi prisoners-of-war. The grave and repeated violations of the Geneva Conventions by Iran are the reflection of a policy that seeks to turn the Iraqi prisoners against their own government, thus dividing the population of the camps into opposing groups which frequently fight, and sometimes kill each other, with the risk, as has been seen, that the Iranian soldiers responsible for guarding them make an armed intervention.

Already, on 7 May 1983 and 10 February 1984, the ICRC has publicly denounced these violations of international humanitarian law committed in the conflict between Iraq and Iran. These only had a temporary positive effect upon the behaviour of the Iranian authorities. For Alexandre Hay, it is a question of the survival of some 50,000 prisoners-of-war, and of the future for the respect of the Geneva Conventions.

Between April and October, ICRC delegates based in Tehran had access to nine camps, where they were able to register some 29,000 Iraqi prisoners-of-war. The number of Iranian prisoners-of-war in Iraqi hands amounts to about 8,000 people.

Military tension on the Khmer-Thailand frontier

On the frontier between Thailand and Kampuchea, where some 240,000 displaced Khmers live, the start of the dry season traditionally coincides with an increase in military tension. From 18 November, Nong Chan camp, in the central sector, has been the site of armed clashes. Following procedures established between the Thai authorities, the UNBRO and the ICRC, 1,000 Khmer civilians went the same day to a place of evacuation situated on Thai territory, soon to be rejoined on the following day by the rest of the population of Nong Chan, which amounted to some 20,000 people.

Medical evacuations

Thanks to a system of evacuation by ambulance, organised by the ICRC, 70 war wounded needing hospital treatment have been transferred to the surgical hospital at Kao-I-Dang, between 18 and 25 November. On the frontier, lightly wounded who do not need surgical treatment are cared for by a dispensary, installed close to the evacuation site, which is run by the Thai Red Cross and a voluntary agency, “Youth with a Mission”.

News in brief

The People’s Republic of Angola adhered to the four Geneva Conventions of 1949 and the first additional Protocol of 1977 on 20 September 1984. The Republic of the Seychelles lodged its instrument of adhesion to the four Geneva Conventions of 1949 and to the two additional Protocols of 1977 on 8 November 1984, bringing to 161 the number of states signatory to the Conventions. As for the protocols, 47 are now party to Protocol I, and 40 to Protocol II.
In the field

ANGOLA
the situation

According to ICRC delegates recently returned from a survey mission in Angola, the situation of the estimated 200,000 displaced persons in the country is becoming worse and worse. Preparations have been made to distribute food supplies to the needy.

In the meantime, the ICRC has been stockpiling supplies, although badly hampered by logistical difficulties. The only practical way to move staff and goods from the coast to the worst-affected areas is by air, since the railway is repeatedly put out of action, and the roads are in disrepair and unsafe.

An airlift, principally by Hercules aircraft, has been laid on, and supplies are being accumulated at critical points. Unfortunately, the runways are badly in need of repair, which hampers operations. Nevertheless, ICRC aerial activity is great, and some 1,000 tons of stores are being delivered per month and this will increase to up to 2,000 tons by the end of the year. It is intended to organise general distributions in various areas, and establish feeding centres in the provincial capitals.

The ICRC is up against enormous difficulties, since the country is so large, and communications are so difficult, that its resources are greatly stretched. However, 23 pilots, 21 medical delegates, 11 delegates, 10 relief workers and 32 supporting posts show the kind of effort that is involved.

The problem of accurately surveying the country's needs remains, for even in those areas that can be visited — some are inaccessible by reason of the military situation — the population is widely dispersed, and no camps or refugee centres can be established. A better idea will be possible when the feeding centres are fully operational.

The relief work mentioned above is now in full swing. The airlift between the Planalto and depots is functioning, a Hercules making between 2 to 3 round flights per day. Another Hercules will join to help replenish stocks in Huambo and Kuito. As well as the general distributions to 82,000 displaced persons, a total of 3,200 malnourished children and their mothers are being fed in supplementary feeding centres in Alto Hama, Katchiungo, Bailundo, Mungo, Kuito and Huambo town. Nutritional surveys have been made in the provinces of Bie, Huambo, Benguela, Mexico, Cuando Cubango and Cunene revealing a serious malnutrition problem. A total of 3,207 tons of food is now stocked in Angola. It is foreseen that by the end of the year 200,000 displaced persons will be assisted by ICRC distributions.

On 7 November, at ICRC headquarters in Geneva, Mr Jean Pictet, who has worked for nearly 50 years for the ICRC, was awarded the ICRC's Gold Medal by ICRC President Mr Alexandre Hay. On 16 November, Mr Pictet gave a lecture on the development of International Humanitarian Law at the University of Geneva, and afterwards the President presented him with "Studies and Essays in honour of Mr Jean Pictet".

Ethiopia: displaced people inside a shelter. (Photo: E. Winiger)
Harry, Ole, Chris, Torleiv and the others...

In Angola, where the ICRC has been operating for several years, and where it has recently increased its aid, a small fleet of aircraft, in Red Cross colours, assists in carrying relief goods from the capital, Luanda, where the ICRC delegation has its headquarters, to the sub-delegations situated in the most affected areas.

Erie de Decker, Information delegate, gives a picture of the team-work that enables the ICRC to make its distributions.

Two Twin Otter aircraft have landed; they touched down one after the other as soon as the Pilatus and the other Twin Otter had taken off again. Teams of local employees are unloading bags of "fouba" — maize meal — which is the staple diet back to Katchiungo.

"Roger RX Two. Do you have any passengers on board? Over." — maize meal — which is the staple diet back to Katchiungo.

chiungo one-one-four-zero ETA Huambo

"Go ahead Red Cross Zero-Two." "Hotel Bravo from Red Cross Zero-Two."

"Red Cross Zero-Two taking off Katchiungo one-one-four-zero ETA Huambo one-one-five-five need refuelling before back to Katchiungo."

"Roger RX Two. Do you have any passengers on board? Over."

"No pass, no wounded. Over and out."

However, this morning the local official in charge of the airfield security team has waved his white flag to indicate the all-clear when the planes flew over for the first time. The security team have to inspect the earthen landing strip three times a day and, should anything be wrong, the white flag must remain positioned in the middle of the landing strip. Today 18 round trips will be made to Kachiungo — which is only fifteen minutes flying time from Huambo. The medical team and the delegate who have been working all day in the town will return to Huambo on the last flight.

ICRC Pilots

The pilots come from just about every country in Europe: Holland, Norway, Switzerland, the Federal Republic of Germany, Luxembourg and England; Roland is French. Generally, most of them have logged many flying hours either in Africa or Latin America working in agriculture or the oil industry. But apart from an Angola "veteran" and Roland, who has carried out several other missions, they had no previous experience of working for the ICRC. However, they very soon understand what the mission is all about, its requirements and the difficulties confronting it, when they talk to the delegates and see the paramedical staff at work in the feeding centres set up near the landing strips. They quickly get caught up in the challenging work of bringing aid to the victims of the conflict — victims who would otherwise be inaccessible but for their plane, which they have nicknamed the "White Lady". Now they step up the pace so as to make one trip more than the number scheduled in their flight plan; nothing but the violent thunderstorms which sometimes break out towards the end of the afternoon over the Planalto can keep them grounded.

They have complete faith in the safety measures introduced by the ICRC despite the fact that accidents can always happen: one plane hit and slightly damaged in thunderstorms which sometimes break out towards the end of the afternoon over the Planalto can keep them grounded.

The Red Cross Squadron

Permanent fleet: 2 Pilatus Porter
PC6, 2 pilots. 3 Twin Otter DHC6, 3 pilots, 3 co-pilots, 4 mechanics
Occasional airlift: 1 Hercules L 100.30, 1 pilot, 1 co-pilot, 1 mechanic, 1 load-master
Total weight at take-off: Pilatus - 2.5. tonnes /carrying capacity 0.9 tonnes
Total weight at take-off: Twin Otter 5.7 tonnes /carrying capacity 1.8 tonnes
Total weight at take-off: Hercules 71 tonnes /carrying capacity 22 tonnes
Number of passengers carried
(delegates, medical personnel, Angola Red Cross, religious workers, etc.) in the month of October 1984: 1,132 including 19 wounded or seriously ill persons transferred from local regions to the provincial hospital.

Number of flying hours in October 1984: Fleet — 492 hours, Hercules — 74 hours
Number of take-offs and landings: 965
Fuel consumption: Fleet — 92,546 litres, Hercules 172,927 litres

Safety

Roland, the flight co-ordinator, keeps track of his teams as closely as possible so that he can intervene at the slightest snag. It has already happened that a Pilatus failed a take-off at Cubal, fortunately without causing damage or injury.

Today, for safety reasons, Roland has diverted to Katchiungo the two Twin Otter aircraft scheduled to bring supplies to Alto Hama because the air space there is not clear. For the children of Katchiungo it is like a holiday — but not for the aircraft maintenance personnel: the dipping and soaring white aircraft with red crosses painted on them are virtually providing a non-stop air display. And meanwhile the other Pilatus, which is assigned to the province of Benguela, is bringing supplies from the port of Lobito to Ganda and Cubal. A few days ago mines were discovered near the runway in Katchiungo itself and a woman lost a leg when one of the mines exploded.

Today records are being broken in Katchiungo: six minutes to unload the 36 bags of fouga from the RX 2 aircraft operated by Ole and Michel. The pilots are pleased; they raise the rear safety bar, close the cargo doors and strap themselves into their seats. Engines on and testing. No children or livestock on the landing strip. O.K.

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Today records are being broken in Katchiungo: six minutes to unload the 36 bags of fouga from the RX 2 aircraft operated by Chris and Mario and eight minutes to unload the 1,800 kg of butteroil from the RX 4 aircraft operated by Ole and Michel. The pilots are pleased; they raise the rear safety bar, close the cargo doors and strap themselves into their seats. Engines on and testing. No children or livestock on the landing strip. O.K.

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San Miguel: An everyday war
by our special reporter Philippe Grandjean

San Miguel (East of San Salvador) — At first glance there seems to be nothing distinguishing San Miguel from any other small town in El Salvador. It is more a large village than a town; its ruler-straight streets are permanently bustled with good-humoured crowds of people who hardly give the impression that they are aware of the interminable civil war ravaging their country. There is little sign of tension. Even the small groups of soldiers excite little attention as they discreetly proceed on their patrol.

Multiple assistance

Yet San Miguel is at the very centre of one of the most troubled areas of the country. To the north is the department of Morazan, where fighting is an almost daily occurrence, causing the flight of thousands of people to the relative calm of San Miguel and its surroundings. These continuous population movements and conflicts have made it necessary for the ICRC to open a sub-delegation in San Miguel. This is manned by eleven delegates and provides more than 50,000 displaced persons with medical care, food, shelter and building materials. Its operations cover a wide area which includes the country’s eastern departments of San Miguel, Morazan, La Union and Usulutan. In addition the sub-delegation endeavours to assist some seventy families which each month swell the ranks of the persons uprooted from Morazan. The relief delegate’s main difficulty, said ICRC delegate Frank “is keeping up to date our ration cards and erecting enough shelters for newly arriving displaced persons.” The situation changes rapidly in the east of the country and there more than elsewhere the ICRC must be quick and flexible in action. “But we are not trying to take the initiative from the Salvadorans”, adds Frank. “They continue building their own little houses, and we just give them tools and material, such as corrugated iron sheets. The wood, on the other hand, is bought locally. “And I”, he adds with a broad smile, “give them advice, as I am an architect.”

Family messages

A more usual side to the ICRC sub-delegation’s work is the tracing of missing persons and the transmission of mail between members of dispersed families.

A message starts on its way from prison, El Salvador. (Photo: T. Gassmann)

However, the danger around San Miguel sometimes holds up the work, when the delegates cannot leave town, and relief distributions, visits and the search for missing persons have to wait. Discretion is sometimes the better part of valour. The story of a typical day continues:

Today is wet and hot, but we are lucky because the road south is practicable; yesterday’s skirmishes made it impossible for us to use it. At two o’clock in the afternoon we climb into the Toyota and Pierre — a relief delegate who deals also with Tracing Agency work, the two jobs being complementary to each other — takes the wheel to drive to Chirilagua, a hamlet some 25 miles away, in the centre of a very troubled region. All he is going to do is deliver a message to a woman from her son, merely to say that he is well; a message which will fill with joy a mother who had begun to lose hope.

The son was somewhere in San Salvador and had contacted the ICRC because he felt he was being threatened. He was a person who above all needed protection, and whose mother hoped for news of him.

When contact was made, in the small cabin where the young man’s family lived, Pierre himself, as well as the mother and grandmother, was deeply moved. They talked in hushed voices around the fire over which the “frijoles” were simmering. It was agreed to send a reply to the son in the capital

If she wishes, the mother may even visit him, the delegate in charge of tracing in San Salvador making all the arrangements for their meeting. After a good hour’s reassuring conversation, with everyone showing patience, a bond of trust was established. The two women looked upon Pierre as a friend come to bring them fresh news of a son they had not seen for so long.

When we set out to return to San Miguel we took with us an old woman, so that she could be treated in the town hospital for a broken arm. Pierre seems to be his usual imperturbable self. For him, this mission, this humanitarian action in the finest tradition of the ICRC, was all in the day’s work. But for us, seeing it for the first time, it was a striking example of a need and of service to war’s victims.

A busy scene in El Salvador, with two ICRC trucks unloading relief supplies. (Photo: T. Gassmann)
Ethiopia: the general situation

It is estimated in Ethiopia that there are more than 7 million people affected by drought and “man-made disaster”. A massive relief operation has been mounted, and supplies and technical help are being rushed to the country. Within Ethiopia, it is the responsibility of the Relief and Rehabilitation Commission (RRC) to oversee, co-ordinate, and distribute relief goods to people in need, and it does this in conjunction with voluntary societies and government agencies. Within this framework, the League of Red Cross and Red Crescent Societies and the Ethiopian Red Cross Society (ERCS) work to bring relief to the drought victims.

As far as the International Committee of the Red Cross (ICRC) is concerned, it operates in close co-operation with the ERCS within the framework of a Joint Relief Operation. The specific task of the ICRC is to reach those people who are affected by both drought and conflict.

These people are found in Eritrea, Tigre, Gondar and Wollo. At the present time (November 84), the JRO has registered and is assisting 228,511 people in these regions, a figure which is constantly rising.

For operational reasons, the affected area is divided into two zones, North and South, both of which are north of Addis Ababa (see map). Material for the south zone comes in from the ports of Assab and Djibouti, and is distributed from warehouses in Addis Ababa and Dessie. Relief is also delivered by air to Addis Ababa.

The north zone is supplied from the port of Massawa via the depot at Asmara, and the area covered is Eritrea and North Tigre. Wherever possible, food and relief goods are sent by road. Trucks can pass freely from Asmara to Adigrat, but from there on have to wait for convoys to take them on to Mekele. This may mean that trucks and their loads are held up for considerable periods of time.

An airlift is used to supply both Axum and Mekele, and in this way urgently required loads of food, tents, and blankets can reach those places and their surroundings quickly and safely.

Asmara also supplies feeding centres in Eritrea, situated at Hamasen, Keren, Akorda, and Barentu, as well as a new one at Senate. A total of 66,585 people were supplied; but this number must eventually be increased.

Supplies from the south are sent up to centres at Maychew, Mehoni — where an airstrip is being constructed by ICRC — and Ambalage in Tigre, and Alamata in North Wollo. To the West of the Asmara/Addis road, supplies are taken to Sanca, in North Wollo; and Nefas Mewcha, Dabat, Debark and Ibnat in Gondar. Until recently, Lalibela was also supplied, but since the incident, ICRC services have been suspended temporarily.

Needs in these conflict areas are food, shelter and medical care — in that order. Even a single blanket can mean the difference between life and death in these highlands where night temperatures drop close to freezing, and there is often a searching wind.

The League and the ERCS are active in centres at Korem, Alamata, Kobo and Bati, all in Wollo. Korem was the site of the BBC film that so influenced world
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The Valley of the Shadow of Death — Mekele, Ethiopia
11 November 1984

Mekele, the capital of Tigre, is a dusty little town lying just off the main Addis/Amsara road about 2 hours flying time in the Red Cross Twin Otter from Addis Ababa. During the day, the streets look full of animation, but only a brief passage through under the main roads shows the contrasts. The townspeople, dressed in colourful clothes, move about with an air of purpose. The displaced people, estimated by all relief organisations at the beginning of November as nearly 57,000, shuffle aimlessly from one feeding centre to another as the rumours circulate about the possibilities of obtaining food. They are mostly dressed, men, women and children, in sack-coloured clothes, which distinguishes them sharply from the townspeople.

Off one of the main streets, a square compound, grand east and west, with the Red Cross flag fluttering in the dusty breeze. Outside, a large stony place, filled with squatting figures, the silence only broken by the wail of a child. These are the displaced families with malnourished children, waiting, hoping, that their children can be admitted to the intensive feeding centres for malnourished children, under the Red Cross flag. As children are discharged, having reached 80 per cent of height/weight, more can be accepted from the worst cases gathered outside the gate. So everytime a Red Cross vehicle arrives, there is a ripple of movement among the squatting figures, and the worst cases are quickly brought up to be shown.

Inside the compound, a bell rings. At once the west gate opens, and a long file of mothers and children enters the compound and swiftly seats itself on stone benches, grouped under corrugated iron roofs around three sides of the compound. ERCS personnel and Red Cross youths quickly carry mugs of enriched milk to the children, while others carry bread baked in the kitchens to parents and children.

The 600 children and parents now being fed three times a day are divided into two shifts. Those waiting their turn outside the compound are given instruction in elementary hygiene by a member of the ERCS, who illustrates his talk with large drawings that drive the lessons home.

Meanwhile, back in the compound, the first shift is finishing its meal. The bell rings again, and people line up in one corner of the compound where there is a ICRC nurse and a medical clinic. The children suffer from diarrhoea, lice, malnutrition, TB, congenitalVD, and a host of allied diseases.

In October, 178 children were admitted to the centre, 132 were discharged to receive dry rations with their parents, 24 were hospitalised, and 55 died. The high death rate was increased by the sudden drop in temperature and a typhus epidemic.

As the line decreases in front of the clinic, the mugs are collected and sterilised in huge cauldrons, the parents and children file out to find what shelter they can, and the next shift is admitted. The two ICRC nurses and the ERCS staff prepare to start all over again, three times a day. . . .

The Valley behind the Church

Picture a stony track running along the shoulder of a hill. On the right, a parallel hill, crowned by a circular Coptic church. In between, a dried-up river bed. Both sides of the track, and spreading down to the riverbed and up the opposite slopes, people waiting to be registered by the ERCS, who takes it as a sign of the poor they might find food, shelter, blankets. Ethiopians with long sticks work along the lines, keeping order, keeping the road clear for
the occasional truck, or the more frequent camel caravans and strings of donkeys that trod past, loaded with a few sticks of firewood or shapeless bundles of rags. These are the displaced, wandering into Mekele, which represents their last hope of survival. 15,000 arrived in October, and more come and go each day, so that at times the whole valley is covered with people, waiting.

The Catholic Relief Society feeding centre and shelters

Opposite the Political School, one of the best-kept buildings in Mekele, a cluster of corrugated iron sheds interspersed with tents and people squatting in the dust, or moving from one group to another with their eyes on the ground, which is patterned with myriads of naked footprints. This is the Catholic Relief Society feeding centre, run by devoted fathers and nuns from the Don Bosco Society.

Some 15,000 people receive dry rations there, and are housed in the shelters and in tents. Inside one of the shelters, once the eyes have become used to the gloom after the strident sunshine outside, there is a scene of confusing activity. The people are clustered on platforms, with narrow channels in between the raised portions to allow movement. There they form groups and islands of humanity, quietly going through another day. Some are eating, some looking after the children, others, women, helping each other plait their hair into the picturesque and remarkable local hairstyles. And some are dying, quietly and without fuss.

At the present time, aid is arriving by airlift in Hercules aircraft, and there is hope that the CRS had to rely on spasmodic convoys, things were more precarious.

The new ICRC clinic and shelters

On the outskirts of Mekele, a new ICRC clinic is being solidly built in stone, and new shelters are being rapidly near the original complex of three shelters and a store. Hans Daepp, the construction delegate, supervises a team of 100 construction workers, aided occasionally by students from the school. When the clinic is completed, which it should be in January, there will be 50 beds in an isolation ward, consulting rooms and medical stores and pharmacy. The new shelters should be ready in two to three weeks.

The old shelters present a scene of purposeful activity. Outside, clusters of clay fireplaces and biscuit-tin braziers are used to cook the grains or to make the pancakes that are the basic food of the people. The occasional round-bottomed coffee pot is propped over a fire, while the women cluster round preparing a meal.

In Mekele and surroundings, the ICRC is assisting 27,000 displaced people. It is estimated, on the basis of ICRC surveys, that there are another 8,000 people to be aided immediately. The Air Botswana Hercules made a total of 22 flights to Mekele, bringing in a total of 393 tonnes of materials. An convoy of 50 trucks for Mekele was organised in Asmara, but the trucks were stopped in Adigrat and offloaded. Goods will be reloaded as soon as a convoy is arranged.

Quiha — the quick and the dead

Just past the airstrip outside Mekele, on the side of a hill near the junction with the Addis/Asmara road, lies the village of Quiha. A group of Red Cross shelters stands at the upper entrance to the village, surrounded by a low stone wall. Above the shelters rises a low, flat-topped hill. Between the upper slopes, the wall round the Red Cross compound, and the road to Mekele, a small triangle of stony ground, containing a watertank raised on its shallow windbreaks, the people began to stir beneath the scanty covering of their everyday clothes, pulled over themselves as cloaks. Or rather, some did; while others stay stiff under their cloaks, their journey in search of food finished, for ever.

As the light grew stronger, the camp as a whole began to stir, amidst an ominous coughing and the thin wails of starving children. A light mist seemed to cover the intermingled groups, as the smoke of hundreds of tiny fires drifted over the site. The light continued to strengthen, and the first warmth of the sun penetrated the chill. Parties went out to fetch water, to gather sticks, to herd the asses. Other daily tasks also had to be performed.

The dying were taken out of the camp, away from their families, and laid down on the sharp stones beside the road, to die the quicker. Some betrayed the last flickers of life by a feeble movement of head or hand; others hurled their despairing desire to die quickly, to die now, to die, to die, to the beautiful light blue sky.

The first funeral set off down the road, the men carrying the bier covered with a patched piece of light curtaining containing the bodies of a 40-year-old woman and her 3-year-old child. The men clustered round the bier and their priests; the women followed at an interval, carrying large rocks on their left shoulders, wailing and sobbing.

The procession, with many halts for prayer, moved off to the rapidly expanding graveyard below the village church. One unforgettable scene that is being re-enacted daily, hourly, all over Tigre, North Wollo, Gondar, and Eritrea.

Bati — League camp in Wollo

Bati lies to the east of Dessie, on the road that leads to the port of Assab, one of the two Ethiopian seaports. It was finished in October 1984, has a medical staff consisting of a British doctor, and League nurses, and distributes a dry ration of 1 kilo every 3 days to 25,000 displaced people from Tigre. The corrugated iron buildings stand on a low hill, looking down on a flat plain with the village in the distance.

At the time of the visit, large numbers of Affars, nomadic people from the east, Danakil country and above, were coming into the camp to be registered, as well as people from the surrounding areas. As they filed down from the hills, they were grouped together by tribes and districts. There were people from 4 tribes and 3 districts — Haussa, Ambassa, Gallo and Oromos.

They squatted down patiently in huge lines, three to five people deep, stretching across the stony plain in the full glare of the sun. One Affar woman questioned said that there had been no rain for seven years, and that she had lost her husband, 5 camels, 30 cows, and 500 goats.

Many hundreds of such people arrive every day, in some cases so malnourished that their survival is problematic.

The death rate is 50 persons per day.
Tim Chilvers

Axum and Adwa — 15 November

Axum — the town of the verandah people

Axum, once a tourist attraction, now presents a very different scene, with 12,000 destitute residents to be fed, 6,000 displaced persons being fed, and a further 11,000 displaced people enregistered on the day of the visit.

The Red Cross has four warehouses in the Church Compound, which were originally built by the American Lutherans for a local kalawat. The warehouses contain fuel, medical stores, soap, wheatflour, butteroil and horsebeans/chick peas. There was need for more space, and this was being negotiated.

The next visit was to the displaced persons' camp. The way there led past the arcaded town centre, where the “verandah people” who have no other shelter, sleep, and the dispensary, newly installed in a former bank, where the medical kit is supplied by ICRC to an Ethiopian doctor.

The camp has been moved from a site near the airstrip, where increased air traffic made for danger, especially to the children, to a site on the outskirts of town near the road leading to Adwa. The first view is of lines of Red Cross tents, which sleep 8 to 15 people each. The clinic was in a crazy old court — the Red Cross is supplying a new and more suitable tent, plus a further 50 tents for the camp, and blankets against the cold. During the day, the Twin Otter made three flights advancing the ICRC vehicle bringing in 60 bales of blankets — 3,000 items to be distributed.

The sick call conducted by the Ethiopian doctor revealed many orthopaedic needs — children crawling on hands and knees affected by polio, an elderly man balancing with difficulty on the stumps of his legs, etc. Other main diseases: TB, meningitis, VD.

The ERCS chairman is deputy Mayor of Axum. He said that he could find space easily for the constant influx of people, but not shelter or food.

As the camp had just moved, one of the urgent problems is to provide proper sanitation. New latrines are being built by the ICRC, while a further 12,000 destitute in the town receive half-rations.

The object of the visit was to make a sample evaluation of the malnutrition among the children under 5 of the new arrivals by the “quack-stick” method, a method that relates the dimensions of the left upper arm with the height of the child. The mass of people was asked to squat down while the proceedings were explained by the ERCS field officer. Meanwhile, the ICRC vehicle was drawn up in such a way that the people could only file past it, and the measuring baton attached vertically to the back.

Then, by groups of five mothers and their children, the measuring began. Some children were silent and apathetic; others, quite naturally, screamed and kicked at the sight of the strange faces and equipment. Gradually, the measuring proceeded, with one member of the team entering the results on a list after the delegate has measured the child. Now and again, a mother smiles shyly at the delegates, delighted that her child is the centre of attention.

The crowd presses closer, anxious to see what is going on. The list grows, and the smells and the flies increase. Someone spits from behind the bamboo hedge, just missing the list. A roar of mock fury from one of the elders, who takes a swinging blow at the fence with his stick. At once, dozens of little boys run away.

Finally, the list is completed: 1 1/2 hours after the sample started, the results were: 167 children under 5 examined, 17 category A, 85% or over of standard height/weight; 70 category B, 75 to 85% of proper height/weight; 80 category C, under 75%, 8 anaemic children. 80 children who will probably die, may even now to be dead.

The party climbs into the vehicles, with the crowd, now pressing round, pleading for food, for help, for medical attention.

The ICRC nurse examining a baby in the Valley behind the Church, Mekele.

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ERCS officer giving lessons in elementary hygiene, Mekele. Photos: C. Peduzzi, ICRC