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International Review of the Red Cross



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INTERNATIONAL COMMITTEE OF THE RED CROSS

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INTERNATIONAL REVIEW OF THE RED CROSS

NINTH YEAR — No. 97

APRIL 1969

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BOOKS AND REVIEWS

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FRENCH EDITION OF THE REVIEW

The French edition of this Review is issued every month under the title of *Revue internationale de la Croix-Rouge*. It is, in principle, identical with the English edition and may be obtained under the same conditions.

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SUPPLEMENTS TO THE REVIEW

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SPANISH

M. Esnard: Después de la XIV Conferencia Internacional de Acción Social — Colaboración del CICR y de la Liga — Una Enseñanza sobre la Cruz Roja en las escuelas de Africa Negra.

GERMAN

Zusammenarbeit zwischen dem IKRK und der Liga — Unterricht über das Rote Kreuz in den afrikanischen Schulen — Die Vereinten Nationen und das Genfer Protokoll — Rechtshilfe für Flüchtlinge.

THE
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The International Committee of the Red Cross assumes responsibility only for material over its own signature.

INTERNATIONAL COMMITTEE OF THE RED CROSS

PRESENCE OF THE INTERNATIONAL COMMITTEE IN THE WORLD

Each month the International Review gives an account of its current activities. We now think it will be of interest to give a more general description of some of the important actions in which the ICRC is at present engaged in various parts of the world, what these are and also how they are developing. Relief for the victims of the conflict in Nigeria has, in view of the considerable efforts demanded of the ICRC, often been the subject of largely recapitulatory articles. We therefore now reproduce information and figures showing the situation at the end of March 1969.

Middle East

The International Committee of the Red Cross discharges its mission through its permanent delegates in the States affected by the conflict, namely, the UAR, Jordan, Syria, the Lebanon and Israel, as well as in the Israeli controlled territories. There is a delegate in Cairo, another for Damascus and Beyrouth, one in Amman, one in Tel Aviv, and nine for three sub-delegations in Jerusalem, Gaza-Sinai and Kuneitra.

Co-ordination is ensured by quarterly meetings of chief delegates at Nicosia, presided over by a representative of the ICRC from Geneva.

The ICRC delegates' main functions are described below.

Reuniting of Families

West of the Jordan.—Following the incident on the Allenby Bridge in January 1968, when two ICRC delegates were seriously wounded, the Israeli authorities have made new arrangements for the reuniting of families. These call for co-operation, in particular by the mayors of the Arab localities on the west bank of the Jordan. The only action undertaken by the ICRC is to bring to the notice of the Israeli authorities urgent cases of hardship due to age or ill-health.

According to the Israeli authorities, by the end of 1968 nearly 9,000 permits to return to the West bank of the Jordan had been issued, and 5,750 persons had actually rejoined their families.

El Qantara.—Under the scheme worked out by the ICRC for the two-way reuniting of families between the United Arab Republic and the occupied territories of Gaza-Sinai, some 4,000 people from the Nile Valley or from Gaza were able to return to their families West of the Suez Canal or in the Gaza region.

The crossing of the Canal took place each time at El Qantara, with about 350 people every month making the trip to return to their families.

Syria.—As a result of representations made over several months by the International Committee of the Red Cross, the Israeli authorities have given authorization in principle for the return of about 700 persons to the Golan plateau, to the East of Lake Tiberias on Syrian territory occupied by Israel.

These family reunions started on 4 March with the return of 83 Syrian refugees who crossed the neutral zone in ambulances of the Syrian Red Crescent displaying red cross flags and escorted by ICRC delegates. They were then taken by bus to the hospital in Kuneitra for registration, the issuing of identity and vaccination cards. Afterwards they were taken to their villages: Magdel, Shams, Bogaata, Ain Kenia Massaada, Rhajar and to the town of Kuneitra.

Since then, two further operations of family reunions took place on 12 and 20 March in Kuneitra, when 96 and 71 refugees in camps in Syria were able to rejoin their families remaining in different villages in Israeli-occupied Syrian territory of Golan.

The ICRC delegates in Kuneitra and Damascus have also organised the weekly delivery by lorry, to refugees in Damascus, of possessions abandoned in Kuneitra.

Lebanon.—The ICRC delegation in the Lebanon has frequently had to organize repatriation to or from Israel of persons who inadvertently crossed the border between the two countries.

Tracing of Missing Military Personnel

At the beginning of 1968, the ICRC asked the Israeli authorities for permission to conduct enquiries into the fate of thousands of Egyptian soldiers missing in Sinai after the fighting in June 1967.

These enquiries, carried out in three phases, with delegates going first to the North, then to the South and finally to the centre of Sinai, were unfortunately unsuccessful. However, they did permit a number of interesting observations concerning the application of the provisions of the Fourth Geneva Convention, particularly as regards the medical situation and food supply in the regions inspected.

Hardship Relief

West of the Jordan.—On 17th October 1967, the ICRC and the League jointly launched an appeal for assistance to the Middle East.

In January 1968, the Jerusalem delegates of the International Committee of the Red Cross received the relief supplies intended for people in need on the West bank of the Jordan. In accordance with a programme worked out with the occupation authorities and the eight local branches of the Red Crescent Society, they distributed 40 tons of milk powder in 35 towns and villages. More than 17,000 children under 12 receive 500 grams of milk a month.

In December, the ICRC, with the co-operation of the Israeli Social Welfare organization, distributed 5,000 blankets and several thousand items of clothing among various charitable institutions on the West bank of the Jordan.

Gaza-Sinai.—ICRC representatives on several occasions applied to the Israeli authorities for permission to distribute foodstuffs provided by the United Arab Republic Red Crescent. As a result,

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in April 75 tons of food, and in September 300 tons, were distributed to the needy in the North of Sinai. A further consignment of 700 tons is on the way, via Cyprus.

Apart from these supplies from Egypt, the ICRC distributed 10 tons of milk at El Qantara and El Arish, and 300 tarpaulins for tents in the Sinai. At El Arish the ICRC works in close co-operation with the local branch of the Red Crescent which was reconstituted in March 1968.

Syria.—With the approach of winter, the ICRC sent the Syrian Red Crescent 50 tons of food (milk and cheese) and 4,000 blankets, as a measure of assistance to the 100,000 displaced persons living in camps near Damascus.

United Arab Republic.—During the winter towards the end of 1968, fifty tons of second-hand clothing and medical supplies provided by the German Red Cross in the Federal Republic of Germany were delivered by the ICRC to the Egyptian Red Crescent and other relief organisations, for the benefit of Palestine refugees living in the Nile Valley.

Medical Assistance

Throughout last year, ICRC delegates continued visiting hospitals, particularly on the West bank of the Jordan and in Gaza.

At the end of November, the Committee decided to send to each of these two territories a doctor-delegate to make an assessment of the medical and food situation.

Visits to Detainees

In 1968 the ICRC delegates were authorized by the Israeli government to visit some of the Arab civilians interned in Israel and the occupied territories. They thereupon went to ten prisons (3 in Israel, 6 on the West bank of the Jordan and 1 in Gaza) where nearly 2,000 Arabs were detained.

Family News Transmission

In the course of 1968, ICRC delegates in Israel and the neighbouring Arab States transmitted more than 500,000 Red Cross message forms.

Arabian Peninsula

In response to requests from both parties in the Yemen conflict for assistance, the ICRC went into action in 1963 for the benefit of civilian and military victims of hostilities by:

- sending mobile medical teams throughout the country;
- setting up a field hospital;
- providing medical supplies;
- assisting prisoners of war;
- reuniting families;
- fitting artificial limbs to the war-disabled;
- distributing emergency food and clothing.

So far almost 500 delegates, doctors, surgeons, nurses and technicians have participated in various ICRC missions in the North of the Yemen, in the Yemen Arab Republic (Sanaa) and the Democratic Republic of South Yemen (Aden).

Present mission staff comprises :

- 1 delegate-general
- 4 delegates
- 2 medical teams (including a doctor, 3 male nurses, 2 surgeons and an anaesthetist)
- 1 radio operator

North Yemen

A medical team of two surgeons, an anaesthetist, three male nurses and two delegates was maintained at a field post at Jihannah near the areas of fighting until 15th January 1969. Its daily output was 10 operations on war wounded, in-patient treatment of 60-100 cases and about 30 out-patients.

Development of the military situation in the region no longer permitting the team to carry on safely, other arrangements had to be made at the beginning of January. In view of the persistent need of medical assistance, the ICRC decided to continue its mission. A

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fresh medical team comprising a doctor and three male nurses, with a delegate responsible for logistics, is at present being set up at Uqhd for a period of six months.

Sanaa

Thanks to a Red Cross surgical team and a number of local and foreign doctors, the capital and other towns in the Yemen Republic have hospitals where the wounded and sick may receive treatment. However, there is a serious shortage of medical supplies in all these hospitals. The ICRC has sent several consignments of emergency medical supplies at its own expense and is seeking outside help to remedy this critical situation. So far three large donations have been received and are en route to hospitals in Sanaa.

The food situation having again deteriorated in the autumn of 1968, the ICRC resumed its relief action for needy children in Sanaa and for certain categories of hospital patients. To start with, the ICRC arranged two special flights by Red Cross aircraft to deliver 20 tons of milk powder and cheese. A further 40 tons made available to the ICRC by the Swiss government were sent by sea. Distribution, organized and supervised by the ICRC delegate in Sanaa, began in November and will be continued in the months to come. Supplies are delivered daily to the hospital maternity and tuberculosis wards, to the children's hospital, schools and orphanages. At present there are over 6,000 children and sick adults in receipt of assistance under this scheme.

Aden

Due to the serious trouble which broke out in the capital of the Democratic Republic of South Yemen before independence in November 1967, the Aden hospitals were suddenly deprived of surgeons. In response to a pressing appeal from the authorities, the ICRC immediately sent a surgical team to meet the emergency. Since then, in view of the total lack of surgeons in Aden and the persistent trouble in the country, the ICRC has been obliged by humanitarian considerations to continue its assistance by maintaining a surgical team in Aden. Otherwise the population would

have been bereft of even the most essential surgery. Emergency medical supplies and surgical equipment had also to be provided as they were non-existent.

At the moment, the only surgery available to the population of about 1.5 million is provided by the ICRC team. This comprises two outstanding surgeons and an anaesthetist. Most of the hospitals in the Democratic Republic of South Yemen are inoperative, due to lack of surgeons and surgery staff.

Between 31 October 1968 and 30 January 1969, the team, working like its predecessors at the Al Gamhurian hospital, the only civilian hospital still in activity, carried out 305 major operations, i.e. 100 per month, 154 operations on old war wounds, and 1039 medical examinations at the polyclinic.

The team also carried out some 50 operations on military wounded at the Khormacksar military hospital in Aden. Some of the civilians wounded by guerillas operating in the eastern sector of the Republic have to travel ten to fifteen days to reach Aden. The condition of many of them on arrival at the hospital in the capital is hopeless.

In addition, serious trouble having broken out some time ago in the East of the country, where the victims of the fighting cannot receive the medical attention their condition requires because the local hospitals are unstaffed, the ICRC has decided to send out a surgeon and an anaesthetist to man the hospital at Mukallah, the capital of the Hadhramaut. The team will take up station in April for a 4-6 month mission.

It must also not be forgotten that since 1967, ICRC delegates have been regularly visiting civilian and military detainees arrested for political reasons.

In addition, as soon as it has a Red Cross aircraft available, the ICRC will despatch to the Aden Red Crescent milk powder and cheese, provided by the Swiss government from surplus stocks, to enable the National Society to initiate an assistance operation for the benefit of the under-nourished population in certain regions of the country. This operation, as usual, will be organized and supervised by the ICRC delegates.

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There is a further humanitarian problem in the country: the large number of disabled having lost one or more limbs in the various hostilities which have taken place since 1963 throughout Southern Arabia. The ICRC is seeking outside help to start up an assistance programme for these war-disabled. The scheme would be to set up a workshop in Aden for the production of artificial limbs.

Vietnam

The ICRC is not represented in Hanoi, but it maintains contact with the Red Cross of the Democratic Republic of North Vietnam for the despatch of supplies for the relief of air-raid victims.

The main function of the ICRC's Saigon delegation is to visit detention centres where Vietnamese are held prisoner by the armed forces of the Republic of Vietnam. Visits are made to Collecting Points, hospitals and prisoner-of-war camps. Since the beginning of the year, delegates have also been allowed into the prisons (re-education centres) where civilians are detained. Each visit is carried out by a delegate and a doctor-delegate, accompanied by an interpreter from the Vietnam Red Cross. Reports are sent to the government in Saigon, with any necessary requests or recommendations concerning detention conditions. Relief supplies are distributed according to needs. The Central Tracing Agency in Geneva regularly receives lists of prisoners of war held by the Republic of Vietnam.

On several occasions prisoners of war in the Republic of Vietnam have been released in the Republic itself or, if the prisoners so desired, sent by air or sea to the Democratic Republic of Vietnam.

The ICRC's Saigon delegation also helps the Vietnam Red Cross to carry out its programmes of civilian medical assistance and aid to orphanages, made possible by private and National Red Cross Societies' contributions and donations raised by the Swiss radio « Chaîne du Bonheur » broadcasts.

Assistance to displaced persons in the Republic of Vietnam is another activity of the National Society, in which the League of Red Cross Societies co-operates.

Nigeria and Secessionist territory (Biafra)

Airlifts

As announced by the *International Review* last month, the Government of the Republic of Dahomey authorized ICRC aircraft to take off from Cotonou on the airlift to Uli in Biafra. The first flight took place on 1st February and was carried out by a "Transall" made available to the ICRC by the German Red Cross in the Federal Republic of Germany.

The Cotonou airport has been organized with a view to the quick turn-round of relief flights to Biafra.

From 1st to 28th March 1969, 181 flights were carried out by ICRC aircraft from Cotonou, transporting 1,834 tons of foodstuffs, medical supplies and other relief material.

Aircraft taking off from Cotonou must cover three times the distance of the airlift from Santa Isabel. Here however, in Equatorial Guinea, recent events have impeded the operation of the airlift from Fernando Poo. It was interrupted on 28 February and resumed on the night of 17-18 March, when two DC-7's of the Swedish Red Cross made five flights to Biafra, carrying 50 tons of salt. Since then flights have been regular.

By 15 March, the ICRC had a thousand relief flights to Biafra to its credit. Since 3rd September 1968, when the international airlift in West Africa started, it had flown 9,711 tons of food, medical supplies and other relief goods into the secessionist province. All flights were by night, and often under dangerous conditions.

On 27th March the ICRC air fleet was reinforced by the addition of the eighth aircraft—a C-97 Stratofreighter—which flew from Geneva for Cotonou with a large consignment of vaccines supplied by UNICEF for the current vaccination campaign in Biafra.

Relief

At present some 2 million people divided equally between Nigeria and Biafra are in receipt of ICRC assistance.

As provided for in the second six-month plan, the ICRC budget for March was 14 million francs. Of this amount 2 million francs was to cover medical supplies.

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The ICRC has also set up a commission to investigate the agricultural situation in Biafra. Comprising three agricultural and economics specialists, 1 Swiss, 1 American and 1 Filipino, it will shortly begin its work and submit its conclusions to Mr. August Lindt, ICRC Commissioner General for West Africa.

Messages and enquiries

The ICRC delegation in Lagos has organized a section specifically to attend to family messages and enquiries forwarded by the Central Tracing Agency in Geneva. By 20th March 1969, the Agency had received 1,785 enquiries; of these 291 (i.e. a little more than 16%) were answered satisfactorily.

Seriously wounded Biafrans for hospital treatment

As mentioned in our previous issue, on 18-19 February, a Swedish DC-7 on the ICRC airlift brought to Europe 47 seriously wounded Biafrans most of them with facial injuries. The ICRC is trying to organize hospital treatment in Europe for another fifty or so seriously wounded Biafrans requiring similar treatment. The Austrian Red Cross is prepared to take ten, the Netherlands Red Cross five, the German Red Cross in the Federal Republic of Germany six, the Finnish Red Cross three, and the Iranian Red Lion and Sun Society a number yet to be decided. In addition, the Netherlands Ministry of Defence, through the World Veterans Federation, has expressed willingness to take care of six.

*

Readers may be interested in the following statistics, as at the end of March 1969, which sum up the ICRC's considerable efforts for the benefit of victims on both sides of the front.

1. Personnel	Nationals	Expatriates
In Federal Territory	1,058	265
In Biafra	617	79
In Cotonou	—	33
At Santa Isabel	7	13

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2. **Ships** (for transport Lagos—Port Harcourt—Calabar): 2

3. **Aircraft**

Based at Cotonou:	3 DC-6B 2 Stratofreighters 1 Transall (provided by German Red Cross in the Federal Republic of Germany)	
Based at Santa Isabel:	4 DC-7 (provided by Swedish Red Cross)	
Based at Lagos:	1 DC-4	
Ready in Switzerland:	2 Stratofreighters	

4. **Airlifts from Santa Isabel and Cotonou**

Number of flights to 27.3.69	1,105
Tonnage transported to 27.3.69	10,753

5. **Vehicles** (lorries, Land Rovers, etc.)

In Federal Territory	369
In Biafra	46

6. **Distribution Centres**

In Federal Territory	22
In Biafra	11

7. **Persons dependent on ICRC for food**

In Federal Territory	approx. 989,200
In Biafra	approx. 960,000

8. **Relief/Stocks**

In Federal Territory	36,600 tons
In Biafra	Immediately distributed: 350-400 tons weekly
At Santa Isabel	2,600 tons
At Cotonou	1,800 tons
En route from Europe to Africa	41,644 tons

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9. Composition of relief supplies

Federal Territory:

Yams	20 %
Groundnuts	3 %
Garri	20 %
Cereals	45 %
Beans	3 %
Milk	1,5%
Stockfish	1,0%
Salt	0,3%
Sugar	0,2%
Palm oil	6,0%

Biafra:

Stockfish	40 %
Milk	25 %
Corn Soya meal	24 %
Various foodstuffs	4 %
Fuel	1,5%
Salt	2,5%
Medical supplies	1,0%
Various (other than food)	2 %

10. Persons receiving ICRC medical assistance per week

In Federal Territory	about 50,000 per week
In Biafra	about 80,000 per week

11. Children vaccinated as at 26.3.69

Against measles	457,000
Against smallpox	1,097,000

12. Medical supplies to Biafra in 1968: 130 tons.

The Red Cross in the Yemen

A new film

In 1963, the International Committee answered the appeal for help from the entire Yemeni population. It installed humanitarian missions for both sides of the conflict, in the North as well as in the South and its action is still being pursued today.

One can, moreover, recall the setting up in the middle of the desert at Uqhd in North Yemen of a completely equipped field hospital which functioned from 1963 to 1966. Over 200,000 cases were treated in the polyclinic and nearly 5,000 operations were carried out in the Clinobox.¹

Because of the displacement of the fighting lines to the south of the Jauf desert the ICRC decided to end this activity, as the seriously war-wounded were no longer able to go northwards to the field hospital fully established at Uqhd. Mr. André Rochat, head of the mission in the Arabian Peninsula then proposed to the ICRC that medico-surgical teams cross that desert to be nearer zones behind the lines, so as to be able to give effective help to the war-wounded left without treatment on the ground.

The project was realized and Red Cross medical teams are at present carrying out their work in North and East Yemen where, without them, large numbers of wounded and sick would be entirely lacking in care.² They accommodate themselves to very precarious conditions, working in places most difficult of access and often have to take shelter in caves. Indeed, sites chosen for the installation of aid posts and small polyclinics have to be sheltered as much as possible from air attack, wind, sandstorms and the sun. Together with this medical action there are also distributions of relief to the needy and victims of the war as well as liaison missions.

¹ See *International Review*, April 1965.

² *Plate*. An ICRC medical team entering a defile in order to cross a fighting area in the desert.

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As can be imagined, the ICRC delegates in the Yemen do not have an easy task and they are in constant danger. The work, however, continues in spite of everything and it was fitting to become aware of it not only through reports and photographs, but also by coloured pictures which alone can fully bring out the courage and devotion of the International Committee's representatives, but still more, the absolute necessity for their intervention, in the name of humanity, to bring assistance to these persons in extreme want and to whom none, except the delegates, come to their aid.

It was to show these facts and demonstrate the ICRC's continuous activity in these regions in which war has been raging for six years that Mr. André Rochat made a film on the spot from 15 December 1968 to 17 January 1969, illustrating certain particularly moving scenes of the ICRC's action in North Yemen. One can see the life of a medical team comprising a surgeon, an anaesthetist and three male nurses who each night perform as many as ten operations and give treatment to over a hundred hospitalized war wounded and dozens of lightly wounded and sick.

When speaking of those "hospitalized" one is indeed employing big words. In fact, the hospital is a mere house of no pretension, guarded by a few soldiers and where the unfortunate ones lie often on the ground itself, whose wounds, due to lack of care, have become infected and are often gangrenous. It is only when night falls that the team can go there after sleeping by day in caves out of reach of aircraft.

To reach these isolated places in the midst of jagged rocks it was necessary to traverse 700 kilometres of desert broken by mountains over 4,000 m. high in which hostile bedouin tribes are to be met. A few lorries on which large red crosses are painted follow tracks under the burning sun. Sometimes they stop to enable one of the doctors to give care to a wounded nomad and operate on him on the ground in the vehicle's shade. Mr. Rochat describes this epic which impresses all who have seen his film.¹

¹ The film was shown in Switzerland to the press, municipal authorities, members of the medical corps, medical students' associations and cantonal sections of the Swiss Red Cross in Geneva, Berne, Lausanne, Zurich and Basle. Further showings will be made elsewhere, if technical conditions permit.

This, then, is the task of the Red Cross: to be out in front, to go wherever there is suffering, to help those who cannot be aided except by men who have left their professional occupations, their homes, to assist all victims whoever they may be by their skill. The film is of even greater significance when one sees an ICRC delegate visiting prisoners incarcerated in a fortress. His task is to ensure that respect is given to the Geneva Conventions which protect these prisoners, some of whom were subsequently released thanks to his intervention. Shackles on the feet of some prisoners were removed, as in the Yemen, it is customary in some regions to shackle prisoners.

Thus the International Committee has accomplished its role by obtaining, in the very heart of the desert, that every man, even totally at the mercy of his enemy, is treated with humanity. Its delegates in the Yemen give proof that the Red Cross spirit is still very much alive. Placed in the same situation as Dunant after Solferino they perform the same work as he did, with the same enthusiasm.

IN THE RED CROSS WORLD

INTERNATIONAL COMMITTEE AND LEAGUE CO-OPERATION

The Council of Delegates of the International Red Cross, meeting in The Hague on 6-8 September 1967, adopted the following resolution :

“ Considering the important changes during the two last decades in the conditions for international Red Cross work,

Referring to the increasingly recognized and respected need to accelerate the development of Red Cross activities and their co-ordination,

Requests the International Committee of the Red Cross and the League to consider a revision of the Agreement of December 8th, 1951, in order to obtain a fully co-ordinated effect of the knowledge and capabilities of both organizations in the different situations where Red Cross action is required.”

In order to put this resolution into effect, representatives of the two international institutions of the Red Cross met on a number of occasions since November 1967 with the purpose of drawing up a revised draft of the “ Agreement between the International Committee of the Red Cross and the League of Red Cross Societies for the purpose of specifying certain of their respective functions ”, signed on 8 December 1951.

In the meantime and in view of the urgent need to define certain arrangements for their co-operation in the field of relief to civilian populations, the Directorate of the ICRC and the League Secretariat, on 23 December 1968, agreed to the provisional protocol quoted hereunder.

*

PROTOCOL

Recent experience in the field of relief to civilian populations has shown that it is necessary for the International Committee of the Red Cross and the League of Red Cross Societies to strengthen their present procedure for information, consultation and co-operation. In the spirit of Article VIII of the Statutes of the International Red Cross and pending the conclusion of a new Agreement to replace that of 1951, the Directorate of the ICRC and the League Secretariat have accordingly agreed to put into force, on a trial basis as from 1 January 1969, the following provisions.

Article 1

When the ICRC and the League are called upon to co-operate in the field of relief to the civilian population, the necessary machinery shall immediately be established, both in Geneva and the territories concerned, to ensure maximum efficiency and unity in the action of all the members of the International Red Cross: ICRC, League and National Societies.

As each situation will inevitably present different conditions, the respective spheres of activity of the ICRC, the League and National Societies in the territories concerned should be clearly laid down, from case to case, by the co-ordination body provided for in the next Article.

Article 2

The Directorate of the ICRC and the League Secretariat shall each appoint two delegates and two deputies who should at all times be able to meet without delay and who shall have the task:

- a) of informing each other on the approaches made to their Institutions and on the conduct of the actions under way. The communications addressed by National Societies to one of the

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Institutions and which concern the other within the terms of the Statutes of the International Red Cross shall be passed on to it without delay;

- b) of taking—in accordance with the Statutes of the International Red Cross and the principles of the 1951 Agreement—all the necessary decisions to ensure an immediate intervention of the Red Cross and the speedy conduct of relief actions;
- c) of entrusting the execution of a given action to one of the two international Institutions without, however, excluding—if this seems advisable—a joint action the ways and means of which should then be clearly defined.

The fact that a National Society submits a request to the ICRC or the League or spontaneously donates relief to them shall not change the distribution of the tasks between the two Institutions.

National Societies shall be regularly informed of the decisions taken in accordance with the above-mentioned provisions.

Done in Geneva on 23 December 1968.

(signed:) H. Beer
N. Abut

R. Gallopin
J. Pictet

WORLD RED CROSS DAY

On 24 April, the League of Red Cross Societies celebrates the fiftieth anniversary of its founding. Its creation was proposed in Cannes in April 1919 at a conference at which medical personalities and Red Cross leaders were assembled. A number of events to which we will subsequently return mark this important anniversary in Geneva.

This date being very close to that of 8 May, traditionally reserved for World Red Cross, Red Crescent and Red Lion and Sun Day, it has been considered opportune for the latter's theme to take its inspiration from the event constituting, for the Red Cross world, the jubilee of the League and that it should at the same time be an affirmation of future prospects. It was in this context that the theme: *In a changing world, Red Cross stands for tomorrow* was chosen. In addition, many National Societies have decided to celebrate on 8 May the anniversary of the League whose Chairman of the Board of Governors, Mr. José Barroso sends out the following message on the occasion of World Red Cross Day, 1969:

The League of Red Cross Societies is 50 years of age. During half a century, the men, women and young people throughout the world who make up the Red Cross movement have found through their League a place to work together to fight against suffering and for peace within a worldwide federation which today numbers 111 member Red Cross, Red Crescent and Red Lion and Sun Societies.

Working together in the League means many things: it means international solidarity for natural disaster victims and sufferers from sickness, hunger and the even more terrible calamities caused by man himself—war and civil strife. It means discussing and planning together in international conferences, meetings, seminars and study centres—meeting together in assemblies where all barriers of race, religion, politics and ideology are down. It means learning together ways to better health and happiness—and serving together voluntarily wherever there is need.

At its last Executive Committee meeting late in 1968, the League resolved that 1969 would be its 50th anniversary year and that World

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Red Cross Day, traditionally 8 May, could also be devoted to this event. By reserving a whole year for this commemoration, we felt that every one of the 214 million Red Cross members throughout the world should be able to participate, each in his own way and at a time best suited to his customs, climate, and latitude. The 50th anniversary of the League is not an isolated event, any more than was its foundation in 1919, when many men and women, working over a period of weeks and months, brought to fruition the idea which had germinated in the first post-World War-One European spring. The idea was that the Red Cross, so effective in war, had a role to play in time of peace, if only the forces of many individual National Societies could be brought together.

On May 5 1919, the Articles of Association of the League were signed in Paris. During the ensuing five decades, the world federation has grown from the original five founding Societies, those of France, Great Britain, Italy, Japan and the United States of America, to today's 111. At no time has the growth been more spectacular than in the past few years, and now we approach the goal of true universality.

The peace-time challenges of 50 years ago: suffering caused by natural disaster, disease, hunger, handicaps, and old age are as much as ever with us today and unhappily will continue. That is why we say in our theme for this 50th anniversary year " in a changing world, Red Cross stands for tomorrow". Through its work in developing and encouraging new Red Cross programmes and techniques, in fostering the formation and growth of new National Societies and the training of volunteers, the League is faithful to the wishes of its founders.

Organisations, fortunately, don't age like people. Instead of settling comfortably into late middle age our federation is in fact going through one of the most exciting periods of its life. Instead of commemorating the respectable achievement of half a century of existence we shall be celebrating our arrival on the threshold of an eventful future.

We have been rejuvenated by scientific discoveries and social progress: as these have changed the face of health services they have automatically forced the Red Cross to renew its programmes or adjust its priorities if it is to survive. The explosion of problems which have sprung up with the development of the third world and with which we are still grappling leaves little opportunity to grow old and set in our ways.

THE HENRY DUNANT INSTITUTE

The annual General Meeting of the Henry Dunant Institute opened on 19 February 1969 on a most sad note. Mr. Henrik Beer, Secretary General of the League of Red Cross Societies, voiced the feelings of all over the loss of Leopold Boissier, who should have presided over the meeting.

To succeed him as President of the Institute's General Meeting and Council, votes were cast in favour of Professor Dietrich Schindler, member of the International Committee of the Red Cross, who has already shown keen interest in the Institute's affairs. The International Committee has appointed Mr. Jean Pictet as second member of the Council.

For the first time, the meeting took place in the building occupied since October 1968 by the Institute, not far from the International Committee and the League.

The annual report presented by Mr. Pierre Boissier, Director of the Institute, gave an account of progress during the past year.

The Henry Dunant Institute has undertaken to draw up as complete a record as possible of research which could be useful to the Red Cross. Six students from Germany, Ethiopia, Norway, Sweden and Switzerland are now working with the Institute's help which has, moreover, made a list of other future research workers.

Intended not only as an instrument for research but also for training, the Institute has drawn up a fairly comprehensive course on the Red Cross, its history, organization, principles and action, on the rule of war and the Geneva Conventions, on protocol and even on tropical hygiene. These various matters have already been the subject of study for some sixty hours of courses given chiefly to the cadres and delegates of the two International Red Cross institutions. It is expected, however, that such instruction will be open to National Societies, which could also be given in their own countries.

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It should be added that the Institute is preparing a certain number of publications aimed at members of the Red Cross and the general public and also, of a technical character, for specialists.

The very diverse activities of the Henry Dunant Institute will be described in a report which will be presented to the International Conference at Istanbul. National Societies will thus have the opportunity of being widely informed on the subject.

KUWAIT SEMINAR

As is known, meetings are organized in various parts of the world by the League of Red Cross Societies. National Societies of different regions are thus able to examine together those problems facing them. Following the one which took place in Rabat in 1966, a second seminar of National Red Cross, Red Crescent, Red Lion and Sun Societies of the Middle East and North Africa was held in Kuwait from 25 to 29 January 1969. Organized on the initiative of the Kuwait Red Crescent, the seminar assembled representatives of the National Societies of Algeria, Irak, Jordan, Lebanon, Morocco, Syria, Tunisia, Turkey and the UAR, as well as delegates of the League and the International Committee. Several observers of Societies being formed in this part of the world were also present.

The seminar was officially opened by Mr. Abdul-Aziz Ibrahim Al-Fulcij, Minister of Health, representing H.H. Sheikh Sabah Al-Sabah, Emir of Kuwait. The seminar took place under the chairmanship of Mr. Abdul-Aziz Hammad Al-Sager, President of the Kuwait Red Crescent Society.

The seminar's work bore chiefly on the problems facing a certain number of Middle East countries over several years. An entire day was thus devoted to the question of refugees and displaced persons and, in particular, the role which National Societies have to play in

this sphere. Various proposals were made with a view to giving more effective aid. On this occasion the President of the Jordanian Red Crescent asked the League to launch an appeal on behalf of thousands of refugees and displaced persons living in extremely difficult conditions on the outskirts of Amman and on the East bank of the Jordan.

Delegates exchanged their views at length and described recent information from their respective National Societies concerning first-aid, the prevention of accidents, finance and information.

The presence at the seminar of two ICRC representatives enabled participants to make wide discussion of the problem of the application of the Geneva Conventions and also of the question of revising the rules of war, a subject which is inscribed on the agenda of the next International Conference of the Red Cross at Istanbul.

Amongst the many recommendations adopted at the end of the seminar, we would specially mention the following: The one appealing to National Societies with a view to bringing medical aid to the People's Republic of South Yemen; the second concerning aid for Iran and Syria after the heavy floods in parts of both those countries; and the third which requests the ICRC to continue its humanitarian activity in the Middle East and to use every means to ensure the widest possible application of the Geneva Conventions.

“ PANORAMA ” AND THE JUNIOR RED CROSS

Published every two months by the League of Red Cross Societies, Panorama in 1969 is presented in an attractive form of eight pages with ample illustrations. The first number (January-February 1969, No. 1) gives news of National Societies, an account of the meeting of the Red Crescent of Kuwait, an article on Istanbul, seat of the next International Conference, a chronicle of Red Cross philately, etc. In addition, it devotes two pages to youth, in particular summarizing a UNESCO report analysing the motives for the present agitation amongst the young and, in order to calm the unease, suggests offering the young greater possibilities on the national and international levels.

In fact Youth, which used to be published by the League, now ceases to appear and its integration henceforth in Panorama reflects the desire shown everywhere for the young to play an increasingly active part in each National Society. The last number of this magazine (1968, No. 4) which the International Review has often had occasion to quote, contains interesting items at a time when the Junior Red Cross is facing problems which are as urgent as they are universal.

We now reproduce some extracts of a document in which Mr. Eugene Kirchoffer, Assistant Director of the League Junior Red Cross Bureau, presented a wide and clear analysis of answers received in Geneva from 64 National Societies based on a questionnaire containing 30 questions on the Junior Red Cross in the world today.

Social Welfare. — It is difficult to distinguish where health leaves off and social welfare begins. Health problems often have social implications, and vice versa. As noted in the replies to the questionnaire, National Societies have involved young people in an impressive number of social welfare activities. These generally concern assistance to children, youth and adults in institutions and from families in need, to the handicapped, the lonely and the aged. Occasionally these services include some form of education or instruction related to health. There is, however, probably a lot more which young people could do through education to help meet

specific health needs of these groups, needs which the official health and social welfare agencies are not able to meet alone.

There is also much which could be done to help delinquent and pre-delinquent youth. While a few Societies report working in this area, the problem is becoming universal and is especially acute in countries where rural migration brings more and more youth into the cities seeking jobs which do not exist. Without employment, without income, without education, these young people turn to any activity which will support them: unfortunately this leads many into activities which are harmful both physically and mentally, as well as into conflict with society. Vocational guidance, training and employment opportunities and organised leisure activities in the rural areas, in order to encourage young people not to make the move to the cities, as well as in urban areas, could do much to prevent the human loss which occurs in this process. While the role of the Red Cross may be somewhat limited in this area, National Societies could surely provide support and assistance to the responsible agencies. If service to others has any meaning, this would certainly be an important area for Junior Red Cross efforts by both developing and developed Societies.

Teaching the Geneva Conventions and Red Cross Principles. —

How can one teach children and youth the Geneva Conventions and Red Cross Principles in a practical, interesting way, which illustrates the applicability of the underlying philosophy to daily life? This is something which most National Societies find difficult. But as this instruction is basic to the moral or humanitarian education to which the Red Cross is committed and which Societies feel is increasingly needed, means must be found. At present efforts are made through the schools and particularly with Junior Red Cross groups. A few Societies have been able to prepare special information on these subjects which has been included in school text-books or in materials used in civics, history or social studies classes. It seems that this has been achieved in Societies which have especially close working relationships with educational authorities. Since this is a fairly easy way of ensuring that at least the school-going population receives information on the Red Cross and its philosophy, perhaps more efforts should be devoted to this. At the

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same time, the teacher-training colleges might be the best place in which to instruct teachers in these subjects, so that they will be familiar with them once they start professional life.

One wonders at what age young people can best receive this instruction. It may be helpful if National Societies were able, together with educators in their countries, to determine the age at which instruction in this area is most easily assimilated, and consequently to concentrate their efforts on specific age groups. These might, of course, vary from country to country.

The main problem, however, seems to be the great need for simple course outlines, both for teachers and youth, and for adequate training aids. This will require greater study on the part of the ICRC and the League, in close co-operation with those Societies which have developed successful teaching programmes. Finally, teaching aids would probably be more effective if they were produced by writers and artists who were experienced in working for children and youth.

Youth participation in planning and decision making. — The majority of Societies report that their young people have some voice in planning activities, although this is restricted primarily to the local group level. Membership in the Society's committees for older youth is still fairly closed, though there are some exceptions. Their participation on committees would seem to be one of the best ways of interesting youth and keeping them active in the Society. It is understandable that adults in some cases will not welcome young members on their committees, due to the particular social structure and traditions of the country. But one solution, although perhaps not the ideal one, has been found in several Societies: the creation of special committees, composed entirely of young people (18-25), which advise the executive or central committee on youth programmes at both local and national level.

Attracting Youth to Red Cross—Integrating Youth—Adult activities. — Finally, a question which is basic to the youth programme in all Societies: how to attract young people to the organisation and keep them there. In Societies with interesting, dynamic programmes, where young people are able to take part in policy making and decisions, there is apparently little problem. The

idealism and enthusiasm which youth have in abundance leads them naturally to an organisation such as Red Cross if they find there opportunities to give practical expression to their interests, and if they can see clearly the usefulness of their activities. This requires above all that Societies really be interested in young people, and that they recognise that if offered useful activities, good training and supervision, plus a chance to take part in planning and decision-making, youth are vital and responsible Red Cross members.

A lot has been said and written in recent years about the need to close the gap between Junior Red Cross and adults in National Societies. One wonders if this gap has not been created primarily by adults, unwilling or perhaps unable to open their ranks to youth more freely as equal partners in a shared endeavour and to allow them more responsibility when they are ready for it. Young people's efforts in the Red Cross must be seen as an integral part of the Society's activities. And this for some very practical reasons.

There are things which adults can do which young people cannot do. At the same time, it has been seen that young people can often do certain things more effectively than adults. In services to the aged and the handicapped, it has been shown on many occasions that personal communication is easier between these persons and young people. Because they have not yet formed all their ideas and attitudes, young people are often more open-minded, with less preconceived notions about an individual's abilities. They tend also to be more demanding, with the result that they can often help a handicapped or aged person to do more for himself than he has done before. This has also been found in some cases when youth have worked with the mentally ill.

Another factor should perhaps be considered. Volunteer services in National Societies, particularly in the social welfare field, are usually provided by married women whose children are in school, thus leaving them free to devote some time to this work. When school and other holidays come, however, these volunteers are often forced to interrupt their work to look after their families. A basic principle of Red Cross action in the social welfare field is that service should be continuing. Who, then, can fill the void during holidays if it is not young people, freed from school or

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without family obligations, who have the time and interest to take up this work? This is already the case in several Societies with highly-developed volunteer services.

Is it not time, therefore, to accept the fact that Junior Red Cross programmes and activities are an essential complement to the work carried out by adult members of the Society, and that therefore greater effort must be made to open both activities and decision-making processes to young people. This will undoubtedly be the best means of interesting them in the work of the Red Cross and of keeping them within the organisation.

Honduras

The Honduran Red Cross has just published the first number of an interesting review under the title « *Superación* » intended mainly for the youth of the country. It is also the organ of the National Society's volunteer relief workers.

The contents include articles on the Red Cross principles approved at Vienna in 1965, the duties of relief teams in many parts of the country, the Society's assistance programme in certain districts of the capital, Red Cross action with student participation, and the 1968 meeting in Mexico of National Society representatives from various Central American countries and the United States. There are also sections dealing with the theatre, psychology and practical first-aid.

It is interesting to note other news items, such as the recent formation by the Honduran Red Cross, under the impetus of its Committee, of twelve first-aid brigades, and the foundation by the San Pedro Sula branch of a new blood bank.

It will be recalled that Mr. S. A. Gonard, then President of the ICRC, called at Honduras in the course of a mission he undertook in several Central American countries in March 1966. In Tegucigalpa he was received by the authorities and was able to see for himself the fine work carried out in the country under the red cross.

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HUMAN NEEDS AND SOCIAL JUSTICE

The General Conference of the International Council of Voluntary Agencies (ICVA) meets every third year. The last one was held in London in June 1968. The theme of the Conference was "Human Needs and Social Justice". This involved discussion of such important subjects as "Refugee Problems" and "Development Assistance" which are of concern to private voluntary organizations, intergovernmental institutions and the Red Cross. This is shown by the participation in working groups of the Secretary General of the League of Red Cross Societies, who delivered an introductory paper on emergency relief, and of Mr. P. C. Stanassis, in charge of League disaster preparedness planning, who addressed the meeting on co-ordination of relief in disaster.

ICVA Documents devoted a special number to this Conference.¹ It gives a summary of the main papers after the session was opened by Conference President Wilhelm S. Boe, who in his statement stressed that "Governments must understand that the role of the voluntary agencies is to supplement governmental and intergovernmental effort and not to substitute for it". The extracts given below from some of the papers delivered will show readers what problems of the day were considered.

H.E. Cardinal Heenan, Archbishop of Westminster. — The problem of want is a universal problem. It affects us all because we are all members of one family. Who is my neighbour? The quick answer is every one—every one without exception. Not merely those who share my religion or are the same colour or have the same political views. The fact that we are all children of God means that we are all brothers.

This has a significance even for those who will not accept the religious idea or even admit the brotherhood of man. The fact is

¹ Geneva, November 1968, No. 8.

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that this is a shrinking world. We are not so much next-to-door neighbours as all living in one house. The speed of travel is so great that it is virtually impossible to escape from one another even if we wanted to. It is therefore a matter of self-interest even if we are not capable of higher motives to come to the rescue of those in want.

Mr. A. H. Boerma, Director General of the FAO. — As Director-General of FAO, I am exceedingly conscious of the importance of combining all the efforts, all the resources, all the vigour of which mankind is capable if the challenge of development is to be met. In those matters for which FAO has a direct concern food production, conservation, distribution and use, the raising of standards of nutrition and the complex problems of agricultural and rural development—we are well aware that our resources are too small and our progress too slow. We know also that the programs of governments have so far fallen short of what is needed in this sector and in others. And, recognizing that we deal only with one sector of the development front—though we believe a vital one—we know that success will come only through a massive world-wide effort in which all parts of society, national and international, must take an active part.

Dr. Malcolm Adiseshiah, Deputy Director General of UNESCO. — I believe that education has a key role, a causal one in development and have attempted to demonstrate this truth in various ways. Briefly, education promotes development in two ways, which are part of the growth component of the development equation. First, education provides the specific skills needed for the proper performance of a number of occupations. Second, it creates, influences and conditions the socio-cultural framework which is an indispensable element of the infrastructure for development.

Mr. Ivan Lansberg Henriquez, President of the Dividendo Voluntario para la Comunidad, Venezuela. — Our world is being challenged by a situation of growing inequity and we are awakening to this fact. Social Justice has become indivisible and there can be only one rational answer to this critical challenge—the answer is Development.

Development, of course, is not merely economic growth. It is economic growth combined with structural change. It integrates

volume with equilibrium, quantity with quality, and its essential final objective is the development of human beings and of their ways of communicating, finding values and meaningful work, loving and living together. It has less to do with the things that can be measured than with those that cannot.

Mr. Ernst Michanek, Director General of the Swedish International Development Authority. — The experience gained over these years has shown that the world's population problem has qualitative as well as quantitative aspects. Qualitative, because so much remains to be done in the way of finding new and better family planning methods; quantitative, because so large resources in manpower and supply will be needed. Global problems require global efforts if they are to be solved.

Prince Sadruddin Aga Khan, United Nations High Commissioner for Refugees. — Now, I turn to the problem of assistance. What are the main differences between Europe, Africa and Asia? Well, in Europe I think we all agree that we deal with refugees as individuals. In Africa and Asia we are dealing with refugees in groups of people for whom it is absolutely impossible to conduct individual eligibility, when deciding whether or not they, as individuals one by one, are to be granted refugee status. They are people for whom speedy relief is essential because they have fled from one country in Africa to another, arriving totally destitute and therefore are in dire need of food, medicaments, blankets, because they have been forced to flee without having time to take anything with them. Now maybe the methods are different, but the aim remains the same, we must help these people cease to be refugees. We must ensure that they can start living a normal life, either through voluntary repatriation, through local integration or else through resettlement.

Mr. Dramane Ouattara, Organization of African Unity. — The refugee problem is universal; it is not peculiar to Africa. In fact, it existed long before the International Community began to get organized and to concern itself with the question. However, it must be recognized that in Africa the refugee problem today is particularly acute. In Africa today there are nearly one and a half million refugees.

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Mr. Walter M. Besterman, Deputy Director of ICEM. — Much has been done, much remains to be done. There are no limits to this vast humanitarian problem. But I firmly believe that our organizations, working closely together, with a common and humanitarian aim, can do much to ensure that the fundamental right to Freedom of Movement is one that will not be denied any refugee because of lack of international organization and financing. In extending our services to meet the human needs of these people, we are not only saving concern, uncertainty, and even despair, on their part, but we also directly assist those governments whose countries, for geographical reasons, have borne, and may well continue to bear, the burden of considerable influx of refugees.

As we have already said, Mr. P. C. Stanissis addressed the meeting on "Planning and Co-ordination of Red Cross Relief", in which he said:

Disaster relief is one of the fundamental duties of a National Red Cross Society, but it is never solely the responsibility of the Red Cross. The government of every country retains the basic responsibility for the welfare of its citizens and the role of the Red Cross is as its auxiliary. Major disasters resulting in international appeals for assistance have been repeatedly occurring. National Red Cross Societies have tended to look more and more for help from sister Societies, national and international voluntary organisations.

It is true, however, that there is an inherent goodwill in mankind which crops up in disaster time and makes people rush and help our fellow-men in distress. It is marvellous, and a fact, that many being near a disaster theatre instinctively employ the utmost of their skill and resources. Experience has shown, however, that as long as there is not an organisation, trained personnel working according to a previously prepared plan, directing, co-ordinating and controlling the action, the result to a certain extent is delay, misuse, confusion, duplication, and in many cases tragedy. This is being more and more recognised many times all over the world and in different circumstances. It is realised that efficient help cannot be given by hurried plans, plans which were prepared under tension during an emergency situation. Pre-disaster preparedness is more and more

necessary before emergencies arise. Today, we at the Red Cross have focused our energy not only by giving aid to victims but by helping people not to become victims.

International and national organisations interested in disaster relief and rehabilitation have, especially during recent years, given particular attention to the problems of how to prevent or diminish the catastrophic effect of natural disasters. This activity has been intensified by the fact that experiences from a series of disasters which have caused great loss of life, illnesses and heavy material losses, have shown that the relief and rehabilitation efforts have, in many cases, failed due to both the absence of previously established relief plans and to the lack of co-ordination of relief actions. This has emphasized the obvious need of better preparations which must be considered systematically by all organisations likely to be involved in relief programmes, both on the international and national levels.

Among organisations for which this has been a matter of serious concern are the United Nations and some of its Specialised Agencies, international non-governmental voluntary organisations having disaster relief as one of the main parts of their programme, the League of Red Cross Societies (the federation of the 109 Red Cross, Red Crescent and Red Lion and Sun Societies), and numerous national organisations, governmental and private, which are active in this field.

Within the United Nations "family" discussions and studies in this field had been carried out by different units within the Secretariat interested in relief and technical assistance, and by a number of the Specialised Agencies such as WHO, FAO, World Food Programme, etc. The result of these deliberations, expressed in a special report from the United Nations Secretary-General, and in other papers, was presented to the Economic and Social Council, where important decisions were taken. Finally, the General Assembly passed a resolution (2034 (XX)) "Assistance in Case of Natural Disasters".

This Resolution in particular invited Member States "to consider the advisability of setting up appropriate national planning and operating a machinery most suited to their conditions, and designed to determine the degree and character of the relief required

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and to give unified direction to relief operations . . .". It further indicated "that, in co-operation with the League of Red Cross Societies, the United Nations can offer both guidance and technical assistance in formulating pre-disaster plans to countries requesting it . . .".

At the request of the Council of Europe, the Secretariat of the League of Red Cross Societies was requested to help in the preparatory work with the elaboration of a working paper on disaster relief which will be presented to the next session of the Council of Europe to be held from the 1st to the 5th of April 1968.

The indispensable pre-disaster planning is a project to which increasing attention should be devoted. Therefore in a country lacking it the government should set up national machinery to draw up a plan, allot responsibility in advance and, at the time of a calamity, co-ordinate as far as possible both internal and external assistance.

The National Disaster Relief Plan (Law, Administration Order or the like) should assign specific duties to the different bodies likely to be involved in a relief operation—army, police, public services, Red Cross Society, Civil Defence, national and international voluntary organisations, according to their individual character and specialisations and the personnel and material of which they dispose.

Overall responsibility for relief operations should be assigned in each country according to its traditions and social structures. In some cases it would fall to the government, in others it would be entrusted to the National Red Cross Society, or to Civil Defence, or in others still, a National Disaster Relief Committee would be constituted representing the various bodies referred to above, including, of course, the Red Cross Society.

Whatever the solution adopted, the appointed Central Authority should:

- Direct Disaster Relief Services' activities throughout the country and
- Co-ordinate both internal and external assistance.

The standing machinery is overwhelmingly the most important factor in the disaster relief plan and consequently in the structure of co-ordination. Its duty is to make an accurate assessment of

needs and a progressive evaluation of the extent to which they are covered by the resources of member bodies or those on which they can rely.

International organisations, on both governmental and non-governmental levels, governments and all those desiring to join the relief action should apply to the national counterpart for information, and to advise it of the type of emergency they are in a position to offer. This might represent an important contribution to the better co-ordination of aid.

As for the international non-governmental organisations active in disaster relief, informal consultation and exchange of information has been taking place on an increasing scale, in spite of the rather large numbers concerned. Some of them are currently studying, among other aspects of natural disaster, the question of co-ordination. The larger international non-governmental organisations have themselves, moreover, been engaged for some time past in promoting better co-ordination of the work of the constituent bodies as ICVA, the League of Red Cross Societies, etc. Furthermore, the League Secretariat has established a close collaboration with the United Nations both through the New York office and the regional office concerned, and with the interested branches of this organisation, such as the High Commissioner for Refugees, UNICEF, WHO, WMO and FAO. These contacts have been established not only by an exchange of information and division of work and mutual aid during the actual operation of relief actions, but also by consultation on principles and preparations for future disasters.

With regard to the National Disaster Relief Plan, we would like to underline that the Plan should also assign specific duties to the Red Cross Society. It is not possible to state precisely those which should apply to each Society. This will depend on the degree of development of the Society in question, its organisation, structure, normal activities, the number and qualifications of its staff and volunteers and its financial and material resources, all of which vary from country to country. However, this is no obstacle to "being prepared in advance and act when disaster strikes". The principle remains the same. The Red Cross Society must be prepared to act, because one of its fundamental duties is to assist disaster victims.

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In providing relief, the Red Cross's role is to supply the four primary emergency needs of disaster victims: food, shelter, clothing and supplementary medical aid.

*We would also draw readers' attention to the paper delivered by Henrik Beer, League Secretary General, on "International Disaster Relief: New Problems, New Solutions". This is an important topic for the Red Cross movement and we therefore think it useful to give below the text as published in ICVA Documents.*¹

As a subheading to this speech, the title "New problems, new solutions" has been used. Which are the new problems? Have we not always had disasters? Yes. But the world today is so different from what it was that aspects also on "classical" disasters are new. We know much more about disasters, their causes and what to do about them, and the attitude to the victims is also new.

We cannot do much about the frequency of the natural disasters. During the past ten years, the League of Red Cross Societies has had to make an international appeal every third week, specifically in the great disaster belt, through the Mediterranean basin, over the Near, Middle and Far East, and up through the island countries on Asia's East coast. Another belt spreads along the Andes; and we should not forget that on our disaster relief maps, we have countries which help themselves and do not ask for aid, but are very much disaster prone, such as the United States and the USSR.

But most of the countries in our disaster belts are underdeveloped.

That is why it is so important to be able to send trained people immediately as information and liaison officers, with vaccinations arranged, also from nations where there would be no difficulties to get visas to the countries concerned, and quickly, and ready to take the first plane to the scene of disaster. That is why it is also important that the organization concerned—I am now using an

¹ Geneva, November 1968, No. 8.

example from my own—has such liaisons with their organization on the spot, that the acceptance of such liaison officers is a point which does not have to be discussed. Therefore it is, of course, of the greatest value to have a voluntary organization attached to an international group in every country, with disaster relief as one of their programmes and if possible trained to be on the receiving end. But even in cases where this exists, the need of the outside liaison officer is great, partly because of the fact that the organizational aid itself will get, and rightly so, a priority within the country concerned, and for them the question of giving information is looked upon as a secondary item, which of course it is not if it should serve an international relief action.

The training and recruiting of such liaison officers, ready to go on a few hours' notice, is as important as the training of technicians for other purposes. We must also remember that national pride and feeling of independence make it natural that most disaster-hit countries want to have the responsibility for the leadership of the relief actions themselves, but it is much easier for them to accept someone who does not ask for any leadership, but offers only to be of aid and to channel relief from other countries.

This need for information and the moral conflict between the need to tell the truth also to have the courage of telling when information is not available, and on the other hand lose the opportunity for fund-raising on a great scale, is something quite new which we have to tackle. Moral force is also needed for the delegates and liaison officers. There can be many cases where available resources are sufficient and where international aid should not be forthcoming.

There is, however, one other problem, quite new, which has connections with what has just been said. This concerns disasters happening in countries which basically are so well organized and have such resources that they think they are able to take care of their own disasters without outside aid. They also say so. This means, for instance, that the League of Red Cross Societies has no possibilities to make an appeal; if we have a Society on the spot working in contact with its government, which says 'no appeal', there will be no appeal from our side. But this country can be so popular, there have been so many people visiting it, the pictures

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on TV screens from the scene of disaster are so appalling, that many countries want to give aid which, during an emergency period is needed, without having a direct appeal. Then it can happen, as we have had a good example of during the last period, that the League can be called in to 'co-ordinate spontaneous aid', but all too late to have any influence on where different types of aid were requested and how the aid should be directed. This is a very tricky and difficult situation. The possibilities of proper co-ordination and action are very small and also here moral courage is needed. We should never forget that this aid from affluent countries to neighbouring almost as affluent countries is something which is observed by our friends in the poor far-away countries and that they remark that it is very easy for an affluent country to get help from his friends and neighbours, and much more difficult for a far-away country to get corresponding help. We have to watch this.

But there are new aspects on problems of co-ordination which first concern the national level.

One of the things we are pushing in our activities for pre-disaster planning is the necessity of national plans. This exists in some countries but not in all.

These plans should include a clear table of responsibilities of different ministries, pointing where the basic responsibilities lie, but also of other governmental services and also pointers on the relations between central and local government. It should also include something on co-operation with non-governmental organizations and to give them the role for which their organizations in that respective country makes them specially fit. It should also be quite clear, and that we have pointed out, from the point of view of the Red Cross, that they should have the possibility to be the channel of relief from their colleagues out in the world.

It is also necessary that organizations like the National Red Cross Societies have preparations for disaster relief among their first aims, so that they can serve as channels for aid under all circumstances from their sister Societies. It is also a question of training, not only a plan on paper, and of national preparations when it comes to material, and having personnel, not only in the capital city, but all over the country. It means training courses, selection and

realistic “ play acting ”, in order to get all participants in this to face the problems which can be theirs any moment.

Now on some problems which are new, but where work has started for a better preparedness:

On *material*: It is very good that we are able to use the IATA resolution on air transport, but this cannot be abused and resources are sometimes limited. It is therefore a moral responsibility to see to it that it is used only for those persons and supplies which are absolutely necessary and relatively easy to transport by air. This means that it is of great value if one can have heavy material closer to the scenes of action. This has been done by us, but we have to continue to work with it, by having decentralized relief depots, not containing things that can be easily destroyed, like most foods and medicaments, but heavy items such as tents and blankets, properly packed, registered and marked according to an international standard.

The training of *personnel* and their use is another new problem. We have to avoid the stream of enthusiastic, non-organized amateurs. We must remember that one thing that usually exists on every disaster spot is general non-qualified manpower.

We must cut down as much as we can on numbers and be as hard as possible on quality. Training courses will have to continue and we have to fill the gaps in fields where we have found that personnel available on short notice have lacked the necessary qualifications.

It has been pointed out in the UN Resolutions and on other occasions, that it is the basic task of the Red Cross to continue its work on disaster preparedness and planning.

We have tried to find out the status of planning in many countries. So far, around 60 Societies have answered our questions. Of these, around 25 have national disaster organizations and most of the Red Cross Societies answering are involved. We have given them information on what they can get, for instance, from the League itself and how their country can use the UN relief funds. We emphasized to the new Societies the necessity of creating relief organizations and plans.

We have equally asked National Societies about the facilities they ought to have for disaster relief purposes from their Govern-

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ments. Ninety of them have answered. 63 have one or more of the necessary facilities in form of free or reduced cost of travel and transport in the country, free visas, when necessary, free or priority telecommunications, free mail, exemption of customs for relief goods from abroad, etc. Here there remains much to be done.

There are also a number of other problems where studies have continued or begun. One, important for Europe and also other parts, is the possibility of getting tax exemption or deductions for donations for disaster relief purposes. The question of information, both scientific and more popular must also be further studied. One interesting point to be noted is that UNESCO will take over the archives and some of the duties of the since long defunct International Relief Union, which might mean that the information available can be systematically treated by experts and give hints for future work.

This list is not complete but cooperation in the field and the ad hoc contacts in Geneva during major disasters is already functioning. We cannot be too systematic here. Every situation is different. One cannot handle disaster actions by super committees and councils when every minute counts and there are always different organizations interested in different ways in different situations. But the question of preparedness is so important that it concerns us all, and I therefore hope that it will be possible to see during a not too distant future a significant break-through and that we will be able, all of us, to work in disaster relief with more confidence, safety and efficiency in the future.

WORLD HEALTH DAY

April 7 of each year is World Health Day. In 1969, the theme for the forthcoming event is *Health, Labour and Productivity*, in homage to the International Labour Organisation which is this year celebrating its 50th anniversary.

Dr. M. G. Candau, World Health Organization Director-General, in a message for World Health Day, stresses that many factors go to undermine the workers' fitness: dust, heat, noise, toxic substance, fatigue.

"The technocrat thinking only in terms of production may develop types of machinery which while brilliant in performance are detrimental to health. Paradoxically, also, ill-considered efforts to increase production can have the unintended effect of reducing output because of illness and absenteeism.

However, a properly planned health programme will deal with these and other hazards, and promote health in doing so.

Occupational health work entails the prevention of illness and accidents and the improvement of working conditions. Machinery can be adapted to man, rather than man to the machine. Fatigue can be diminished and monotony avoided. In another context, the worker can be specially selected for his job, and latent skills can be developed.

Doctors, nurses, social-workers, health engineers and architects can all contribute in maintaining the physical and mental well-being of the worker.

But in developed and developing countries alike—wherever industrialization is a potent factor in economic progress—much remains to be done."

Dr. Candau concludes his message:

"The diseases of occupation have long been of concern to the governments of many countries, but only after the First World War was it recognized that the problems of industry, like disease, know no frontiers and call for the setting up of international standards.

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The International Labour Organisation was accordingly established in 1919 and, thus, will celebrate its fiftieth anniversary this year.

It has been WHO's privilege to be associated closely and fruitfully with ILO in many fields, where health and work share common or parallel interests.

A year ago WHO celebrated its twentieth birthday. It is therefore a great pleasure on the occasion of World Health Day this year to offer congratulations to an older member of the United Nations family on its fifty years of continuing achievement."

BOOKS AND REVIEWS

Youth's role in development, by Michael U.R. von Schenck, *Assignment Children, Fise-Unicef, Paris, 1968, No. 8.*

Youth is not only a reason for the medium of development. Youth can also be its subject by having an active constructive role in it. Beyond being the main reason for development efforts, youth can be an agent, a performer of constructive work that serves development.

About 30,000 so-called volunteers, coming from virtually all industrialized countries, and 15,000 '*detachés militaires*' of the French army, now work in almost every field of development in overseas countries. They are teachers and doctors, mechanics and farmers, secretaries and nurses—covering almost the whole spectrum of human activities.

These volunteers are critically important. They are important not only in function of their number, and because their skills are urgently needed by developing countries, but mainly because they work at the most critically needed level: at the level of the people. They work hand in hand with the working population, or they teach in villages, cities and slums. Their number could be raised substantially if more funds could be made available for the sending organizations.

The idea of people volunteering to engage in full-time development work for a year or two, even three, is not new. Neither is the idea of using these volunteers in planned national development programmes, of recognizing volunteers as a necessary part of such planning efforts, and of enabling them to work, an old one. It started only a few years ago. However, it has proved to be such a success that, today, the 30,000 export and 80,000 domestic long-term volunteers working world-wide have become an integral and necessary part of country development efforts.

To many people, volunteer service is a suspiciously romantic, unrealistic notion. But is it unrealistic to invest in one's future, to invest a few years in one's life to contribute to a better tomorrow in the life we all share more and more in the increasingly unsplitable future of the modern world? And is it romantic, indeed, to realize that only a mass mobilization of manpower can truly achieve such development, that the entire people of the developing nations must mobilize their energies? And that they need the help of the men and women of the technically and economically more advanced countries? Is it unrealistic to begin to recognize that the war of development is a people's war, that it has to be fought by the people and at the level of the people? And that the army that will win such a war cannot be composed of officers only?

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OECD, not known for romanticism, stated last year that the importance of export volunteers will increase so dramatically that their number will be doubled before 1972.

However, volunteers are an instrument of, and not a substitute for, planned development efforts. Their efficiency, the worth of their work, depends upon the way they are enabled to work. Their activity has to be integrated more in existing development plans, both national and international. Development poses a multitude of problems, for which multitudes of synchronized approaches on a multitude of fronts are necessary. But these multiple approaches must be covered by one basic plan of operations. Volunteer work should not consist of separate crusades but should be an integral part of a basic plan.

Increased and well planned international co-operation in the volunteer field could also bring important advantages. More development projects could be undertaken by the many private and governmental organizations sending long-term volunteers to work overseas, if those organizations would begin to 'pool' their personnel resources. A kind of 'free exchange of volunteers' arrangement could bring similar advantages that many countries find in 'free-trade area' agreements. Equally, an intensified use of volunteers in international projects would help not only to overcome basically similar problems but, at the same time, would increase international co-operation among different nations—a side benefit becoming even more important in our modern world, and, incidentally, being urged by our young generation. . . .

In the service of all, *World Health*, World Health Organization, Geneva, January 1969.

The International Atomic Energy Agency is the youngest of the agencies of the United Nations. There are a number of reasons for this. Immediately following the Second World War the idea of such an agency was almost inconceivable. One country held a monopoly of the secrets of the atom, and world opinion, disturbed by the staggering examples of nuclear destruction, was far from imagining what peaceful uses atomic energy might have.

In 1953, atomic monopoly ended and the mood changed. President Eisenhower proposed to the United Nations that an international organization be created allowing the technically developed countries to devote a portion of their resources to this new source of energy for the good of mankind rather than for its destruction.

The following year, the UN General Assembly unanimously adopted a resolution on the peaceful uses of the atom and expressed the desire to create, as soon as possible, an international atomic energy agency. A conference in October 1956, at which 81 states were represented,

unanimously approved the establishment of such an agency; on 29 July, 1957, less than a year later, 26 countries had ratified the relevant agreement and the International Atomic Energy Agency was born. Today it has 98 member states. Its headquarters are in Vienna.

Underlying all the activities of the agency is the twin desire to promote the peaceful uses of atomic energy and to assure that these uses do not imperil peace or health.

Today, the work of the Atomic Agency has grown considerably: 3,000 scholarships have been granted, 120 professors were sent out on mission, hundreds of conferences and seminars have taken place attended by 15,000 scientists. Beyond these figures, however, it is the Agency's field work that is making its real contribution to human well-being.

In the field of medicine, the Agency has been carrying out research on goitre in the Andes and the Himalayas, as well as in certain islands of Japan. It is also cooperating with WHO in studying anaemia, malnutrition and the effects of parasitic diseases in man. It has furnished material for the radiological treatment of cancer to seven countries. Methods and techniques for medical diagnosis and treatment using isotopes have been developed and standardized.

A programme to use irradiated serum for snake bites has been started and it may be possible by this means to save the lives of some 3,000 persons a year. The sterilization of bandages and dressings, cat-gut as well as surgical instruments, by ionizing radiation has already considerably reduced the risk of infection. . . .

EXTRACT FROM THE STATUTES OF
THE INTERNATIONAL COMMITTEE OF THE RED CROSS

(AGREED AND AMENDED ON SEPTEMBER 25, 1952)

ART. 1. — The International Committee of the Red Cross (ICRC) founded in Geneva in 1863 and formally recognized in the Geneva Conventions and by International Conferences of the Red Cross, shall be an independent organization having its own Statutes.

It shall be a constituent part of the International Red Cross.¹

ART. 2. — As an association governed by Articles 60 and following of the Swiss Civil Code, the ICRC shall have legal personality.

ART. 3. — The headquarters of the ICRC shall be in Geneva.

Its emblem shall be a red cross on a white ground. Its motto shall be “ Inter arma caritas ”.

ART. 4. — The special rôle of the ICRC shall be:

- (a) to maintain the fundamental and permanent principles of the Red Cross, namely: impartiality, action independent of any racial, political, religious or economic considerations, the universality of the Red Cross and the equality of the National Red Cross Societies;
- (b) to recognize any newly established or reconstituted National Red Cross Society which fulfils the conditions for recognition in force, and to notify other National Societies of such recognition;

¹ The International Red Cross comprises the National Red Cross Societies, the International Committee of the Red Cross and the League of Red Cross Societies. The term “ National Red Cross Societies ” includes the Red Crescent Societies and the Red Lion and Sun Society.

- (c) to undertake the tasks incumbent on it under the Geneva Conventions, to work for the faithful application of these Conventions and to take cognizance of any complaints regarding alleged breaches of the humanitarian Conventions;
- (d) to take action in its capacity as a neutral institution, especially in case of war, civil war or internal strife; to endeavour to ensure at all times that the military and civilian victims of such conflicts and of their direct results receive protection and assistance, and to serve, in humanitarian matters, as an intermediary between the parties;
- (e) to contribute, in view of such conflicts, to the preparation and development of medical personnel and medical equipment, in co-operation with the Red Cross organizations, the medical services of the armed forces, and other competent authorities;
- (f) to work for the continual improvement of humanitarian international law and for the better understanding and diffusion of the Geneva Conventions and to prepare for their possible extension;
- (g) to accept the mandates entrusted to it by the International Conferences of the Red Cross.

The ICRC may also take any humanitarian initiative which comes within its rôle as a specifically neutral and independent institution and consider any questions requiring examination by such an institution.

ART. 6 (first paragraph). — The ICRC shall co-opt its members from among Swiss citizens. The number of members may not exceed twenty-five.

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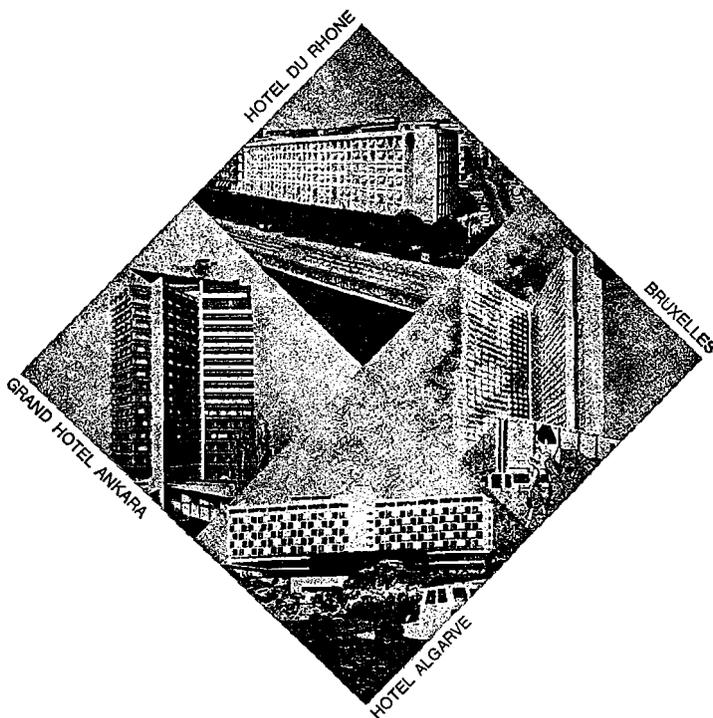
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- AFGHANISTAN — Afghan Red Crescent, *Kabul*.
- ALBANIA — Albanian Red Cross, 35, *Rruga Barrikadavet, Tirana*.
- ALGERIA — Central Committee of the Algerian Red Crescent Society, 15 bis Boulevard Mohamed V, *Algiers*.
- ARGENTINE — Argentine Red Cross, H. Yri-goyen 2068, *Buenos Aires*.
- AUSTRALIA — Australian Red Cross, 122-128 Flinders Street, *Melbourne, C. 1*.
- AUSTRIA — Austrian Red Cross, 3 Gusshaus-strasse, Postfach 39, *Vienna IV*.
- BELGIUM — Belgian Red Cross, 98, Chaussée de Vleurgat, *Brussels 5*.
- BOLIVIA — Bolivian Red Cross, Avenida Simon-Bolivar, 1515 (Casilla 741), *La Paz*.
- BRAZIL — Brazilian Red Cross, Praça da Cruz Vermelha 10-12, *Rio de Janeiro*.
- BULGARIA — Bulgarian Red Cross, 1, Boul. S.S. Bizuzov, *Sofia*.
- BURMA — Burma Red Cross, 42, Strand Road, Red Cross Building, *Rangoon*.
- BURUNDI — Red Cross Society of Burundi, rue du Marché 3, P.O. Box 1324, *Bujumbura*.
- CAMBODIA — Cambodian Red Cross, 17 R Vithei Croix-Rouge, P.O.B. 94, *Phnom-Penh*.
- CAMEROON — Central Committee of the Cameroon Red Cross Society, rue Henry-Dunant, P.O.B. 631, *Yaoundé*.
- CANADA — Canadian Red Cross, 95 Wellesley Street East, *Toronto 5*.
- CEYLON — Ceylon Red Cross, 106 Dharma-pala Mawatte, *Colombo VII*.
- CHILE — Chilean Red Cross, Avenida Santa Maria 0150, Casilla 246 V., *Santiago de Chile*.
- CHINA — Red Cross Society of China, 22 Kanmien Hutung, *Peking, E*.
- COLOMBIA — Colombian Red Cross, Carrera 7a, 34-65 Apartado nacional 1110, *Bogotá D.E.*
- CONGO — Red Cross of the Congo, 41, Avenue Valcke, P.O. Box 1712, *Kinshasa*.
- COSTA RICA — Costa Rican Red Cross, Calle 5a Apartado 1025, *San José*.
- CUBA — Cuban Red Cross, Ignacio Agramonte, 461, *Havana*.
- CZECHOSLOVAKIA — Czechoslovak Red Cross, Thunovska 18, *Prague I*.
- DAHOMEY — Red Cross Society of Dahomey, P.O. Box 1, *Porto-Novo*.
- DENMARK — Danish Red Cross, Ny Vestergade 17, *Copenhagen K*.
- DOMINICAN REPUBLIC — Dominican Red Cross, Calle Galvan 24, Apartado 1293, *Santo Domingo*.
- ECUADOR — Ecuadorean Red Cross, Calle de la Cruz Roja y Avenida Colombia 118, *Quito*.
- ETHIOPIA — Ethiopian Red Cross, Red Cross Road No. 1, P.O. Box 195, *Addis Ababa*.
- FINLAND — Finnish Red Cross, Tehtaankatu 1 A, Box 14168, *Helsinki 14*.
- FRANCE — French Red Cross, 17, rue Quentin-Bauchart, *Paris (8^e)*.
- GERMANY (Dem. Republic) — German Red Cross in the German Democratic Republic, Kaitzerstrasse 2, *Dresden A. 1*.
- GERMANY (Federal Republic) — German Red Cross in the Federal Republic of Germany, Friedrich-Ebert-Allee 71, 5300 *Bonn 1*, Postfach (D.B.R.).
- GHANA — Ghana Red Cross, P.O. Box 835, *Accra*.
- GREAT BRITAIN — British Red Cross, 14 Grosvenor Crescent, *London, S.W.1*.
- GREECE — Hellenic Red Cross, rue Lycavittou 1, *Athens 135*.
- GUATEMALA — Guatemalan Red Cross, 3.º Calle 8-40 zona 1, *Guatemala C.A.*
- GUYANA — Guyana Red Cross, P.O. Box 351, Eve Leary, *Georgetown*.
- HAITI — Haiti Red Cross, Place des Nations Unies, B.P. 1337, *Port-au-Prince*.
- HONDURAS — Honduran Red Cross, Calle Henry Dunant 516, *Tegucigalpa*.
- HUNGARY — Hungarian Red Cross, Arany Janos utca 31, *Budapest V*.
- ICELAND — Icelandic Red Cross, Ölduggøtu 4, *Reykjavik*, Post Box 872.
- INDIA — Indian Red Cross, 1 Red Cross Road, *New Delhi 1*.
- INDONESIA — Indonesian Red Cross, Tanah Abang Barat 66, P.O. Box 2009, *Djakarta*.
- IRAN — Iranian Red Lion and Sun Society, Avenue Ark, *Teheran*.
- IRAQ — Iraqi Red Crescent, Al-Mansour, *Baghdad*.
- IRELAND — Irish Red Cross, 16 Merrion Square, *Dublin 2*.
- ITALY — Italian Red Cross, 12, via Toscana, *Rome*.
- IVORY COAST — Ivory Coast Red Cross Society, B.P. 1244, *Abidjan*.
- JAMAICA — Jamaica Red Cross Society, 76 Arnold Road, *Kingston 5*.
- JAPAN — Japanese Red Cross, 5 Shiba Park, *Minato-Ku, Tokyo*.
- JORDAN — Jordan National Red Crescent Society, P.O. Box 10 001, *Amman*.
- KENYA — Kenya Red Cross Society, St Johns Gate, P.O. Box 712, *Nairobi*.
- KOREA (Democratic People's Republic) — Red Cross Society of the Democratic People's Republic of Korea, *Pyongyang*.
- KOREA (Republic) — The Republic of Korea National Red Cross, 32-3 Ka Nam San-Donk, *Seoul*.
- KUWAIT — Kuwait Red Crescent Society, P.O. Box 1359, *Kuwait*.
- LAOS — Lao Red Cross, P.B. 650, *Vientiane*.
- LEBANON — Lebanese Red Cross, rue Général Spears, *Beirut*.
- LIBERIA — Liberian National Red Cross, National Headquarters, Corner of Tubman boulevard and 9th Street Sinkor, P.O. Box 226, *Monrovia*.

ADDRESSES OF CENTRAL COMMITTEES

- LIBYA** — Libyan Red Crescent, Berka Omar Mukhtar Street, P.O. Box 541, *Benghazi*.
- LIECHTENSTEIN** — Liechtenstein Red Cross, *Vaduz*.
- LUXEMBURG** — Luxembourg Red Cross, Parc de la Ville, C.P. 234, *Luxemburg*.
- MADAGASCAR** — Red Cross Society of Madagascar, rue Clemenceau, P.O. Box 1168, *Tananarive*.
- MALAYSIA** — Malaysian Red Cross Society, 519 Jalan Belfield, *Kuala Lumpur*.
- MALI** — Mali Red Cross, B.P. 280, route de Koulikora, *Bamako*.
- MEXICO** — Mexican Red Cross, Avenida Ejercito Nacional, n° 1032, *Mexico 10, D.F.*
- MONACO** — Red Cross of Monaco, 27 Boul. de Suisse, *Monte-Carlo*.
- MONGOLIA** — Red Cross Society of the Mongolian People's Republic, Central Post Office, Post Box 537, *Ulan-Bator*.
- MOROCCO** — Moroccan Red Crescent, rue Benzakour, B.P. 189, *Rabat*.
- NEPAL** — Nepal Red Cross Society, Tripureswore, P.B. 217, *Kathmandu*.
- NETHERLANDS** — Netherlands Red Cross, 27 Prinsessegracht, *The Hague*.
- NEW ZEALAND** — New Zealand Red Cross, 61 Dixon Street, P.O.B. 6073, *Wellington C.2.*
- NICARAGUA** — Nicaraguan Red Cross, 12 Avenida Noroeste, *Managua, D.N.*
- NIGER** — Red Cross Society of Niger, B.P. 386, *Niamey*.
- NIGERIA** — Nigerian Red Cross Society, Eko Akete Close, off. St. Gregory Rd., Onikan, P.O. Box 764, *Lagos*.
- NORWAY** — Norwegian Red Cross, Parkveien 33b, *Oslo*.
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- PHILIPPINES** — Philippine National Red Cross, 860 United Nations Avenue, P.O.B. 280, *Manila*.
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- PORTUGAL** — Portuguese Red Cross, General Secretaryship, Jardim 9 de Abril, 1 a 5, *Lisbon 3.*
- RUMANIA** — Red Cross of the Rumanian Socialist Republic, Strada Biserica Amzei 29, *Bucarest*.
- SALVADOR** — Salvador Red Cross, 3a Avenida Norte y 3a Calle Poniente 21, *San Salvador*.
- SAN MARINO** — San Marino Red Cross, Palais gouvernemental, *San Marino*.
- SAUDI ARABIA** — Saudi Arabian Red Crescent, *Riyadh*.
- SENEGAL** — Senegalese Red Cross Society, Bld. Franklin-Roosevelt, P.O.B. 299, *Dakar*.
- SIERRA LEONE** — Sierra Leone Red Cross Society, 6 Liverpool Street, P.O.B. 427, *Freetown*.
- SOUTH AFRICA** — South African Red Cross, Cor. Kruiis & Market Streets, P.O.B. 8726, *Johannesburg*.
- SPAIN** — Spanish Red Cross, Eduardo Dato 16, *Madrid, 10.*
- SUDAN** — Sudanese Red Crescent, P.O. Box 235, *Khartoum*.
- SWEDEN** — Swedish Red Cross, Artillerigatan 6, *Stockholm 14.*
- SWITZERLAND** — Swiss Red Cross, Taubenstrasse 8, B.P. 2699, 3001 *Berne*.
- SYRIA** — Syrian Red Crescent, 13, rue Abi-Ala-Almaari, *Damascus*.
- TANZANIA** — Tanzania Red Cross Society, Upanaga Road, P.O.B. 1133, *Dar es Salaam*.
- THAILAND** — Thai Red Cross Society, King Chulalongkorn Memorial Hospital, *Bangkok*.
- TOGO** — Togolese Red Cross Society, Avenue des Alliés 19, P.O. Box 655, *Lomé*.
- TRINIDAD AND TOBAGO** — Trinidad and Tobago Red Cross Society, 48 Pembroke Street, P.O. Box 357, *Port of Spain*.
- TUNISIA** — Tunisian Red Crescent, 19, rue d'Angleterre, *Tunis*.
- TURKEY** — Turkish Red Crescent, Yenisehir, *Ankara*.
- UGANDA** — Uganda Red Cross, 57 Roseberry Street, P.O. Box 494, *Kampala*.
- UNITED ARAB REPUBLIC** — Red Crescent Society of the United Arab Republic, 34, rue Ramses, *Cairo*.
- UPPER VOLTA** — Upper Volta Red Cross, P.O.B. 340, *Ouagadougou*.
- URUGUAY** — Uruguayan Red Cross, Avenida 8 de Octubre, 2990, *Montevideo*.
- U.S.A.** — American National Red Cross, 17th and D Streets, N.W., *Washington 6 D.C.*
- U.S.S.R.** — Alliance of Red Cross and Red Crescent Societies, Tcheremushki, J. Tcheremushkinskii proezd 5, *Moscow W-36*.
- VENEZUELA** — Venezuelan Red Cross, Avenida Andrés Bello No. 4, Apart. 3185, *Caracas*.
- VIET NAM (Democratic Republic)** — Red Cross of the Democratic Republic of Viet Nam, 68, rue Bà-Trièz, *Hanoi*.
- VIET NAM (Republic)** — Red Cross of the Republic of Viet Nam, 201, duong Hông-Tháp-Tu, No. 201, *Saigon*.
- YUGOSLAVIA** — Yugoslav Red Cross, Simina ulica broj 19, *Belgrade*.
- ZAMBIA** — Zambia Red Cross, P.O. Box R. W. 1, Ridgeway, *Lusaka*.