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# The Protection of Women in International Humanitarian Law

by Françoise Krill

## I. INTRODUCTION

Since the number of women who actually participated in war was insignificant until the outbreak of World War I, the need for special protection for them was not felt prior to that time. This does not imply however that women had previously lacked any protection. From the birth of international humanitarian law, they had had the same general legal protection as men. If they were wounded, women were protected by the provisions of the 1864 Geneva Convention for the Amelioration of the Condition of the Wounded in Armies in the Field; if they became prisoners of war, they benefited from the Regulations annexed to the Hague Conventions of 1899 and 1907 on the Laws and Customs of War on Land.<sup>1</sup>

From 1929 onward, women have enjoyed special protection under international humanitarian law. In that year, the Powers which adopted the Geneva Convention relative to the Treatment of Prisoners of War<sup>2</sup> sought to take into account a new phenomenon: the participation of a relatively large number of women in the war of 1914-1918. This international legal instrument contained two provisions of particular interest: "*Women shall be treated with all consideration due to their sex*" (Art. 3). "*Differences of treatment between prisoners are permissible only if such differences are based on the military rank, the state of physical or mental health, the professional abilities, or the sex of those who benefit from them*" (Art. 4).

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<sup>1</sup> These Regulations, for the first time, granted prisoners of war a legal status which removed them from the arbitrary control of the Detaining Power.

<sup>2</sup> Taking advantage of the possibility provided by the Hague Regulations (Art. 15) for properly constituted relief societies to exercise their charitable efforts, the ICRC during World War I (1914-1918) sent delegates to visit internment camps. In the light of its experience in this conflict, the ICRC suggested two things: a revision of the Geneva Convention of 1864 and the drafting of a new Convention to clarify and supplement the Hague Regulations.

In World War II, women participated in hostilities in greater numbers, although they did not commonly bear arms. In addition, there were many more civilian victims than in the earlier conflict. Of the 50 million persons killed, it was estimated that 26 million were in the armed forces while 24 million were civilians, including many women. The adoption of new legal instruments taking such factors into account was essential. The “Diplomatic Conference for the Establishment of International Conventions for the Protection of Victims of War”, convoked by the Swiss Federal Council, depository of the Geneva Conventions, met from April to August 1949 in Geneva and drew up four Conventions which were adopted on 12 August of that year.<sup>3</sup> The Third Convention, relative to the treatment of prisoners of war, and the Fourth Convention, relative to the protection of civilian persons in time of war, contain some thirty articles of special concern to women. These will be studied in detail in the next chapter.

In armed conflicts which have taken place since the adoption of the four Geneva Conventions of 1949, statistics indicate, more men and more women died than during World War II. The proportion of civilians among the dead, in some instances, was as high as 90%. These terrible totals were primarily a result of new means and methods of warfare with indiscriminate effects. In addition, new types of conflict developed between regular armies and guerrilla forces. In such conflicts, it is difficult to distinguish combatants from civilians, which renders civilians more vulnerable. In view of this new situation, the Conventions had to be supplemented. The ICRC took the initiative and at the conclusion of the “Diplomatic Conference on the Reaffirmation and Development of International Humanitarian Law” (1974-1977), the Additional Protocols were adopted in 1977. These supplemented the Conventions and thus offered better legal protection, primarily to the civilian population and thus to women. In addition, the rules governing non-international armed conflicts, contained in Article 3 common to all four Conventions, were developed and expanded in Protocol II, applicable in these situations. The provisions in these two instruments which give particular protection to women are examined in the following pages of this paper.

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<sup>3</sup> The First Geneva Convention of 1864 has undergone three revisions, 1906, 1929 and 1949. The Second Geneva Convention took the place of the Tenth Hague Convention. The Third Convention replaced the 1929 Geneva Convention on the same subject and supplemented the Hague Regulations of 1899 and 1907. The Fourth Convention was new and supplemented Sections II and III of the Hague Regulations.

PART I:  
THE PROTECTION OF WOMEN IN THE GENEVA  
CONVENTIONS  
AND THEIR ADDITIONAL PROTOCOLS

The Conventions and Protocols protect women both as members of the civilian population not taking part in hostilities and also as combatants, fallen into the hands of the enemy. We shall examine the various aspects of this protection in the following paragraphs, giving particular emphasis to differentiated treatment accorded to women in the light of the following principles.

**I. Principles**

International humanitarian law gives expression in law to the fundamental principle of the equality of men and women, specifying this principle in clauses forbidding discrimination. Articles 12 of the First and Second Conventions, 16 of the Third Convention, 27 of the Fourth Convention and Article 75 of Additional Protocol I and Article 4 of Additional Protocol II (referred to below as C. I, C. II, C. III, C. IV, P. I and P. II) provide for treatment «*without any adverse distinction founded on sex...*» It is also specified that women «*shall in all cases benefit by treatment as favorable as that granted to men*» (Article 14, C. III). This means that women are entitled to all the rights and freedoms specified by the Conventions. Accordingly, any discriminatory measure which does not result from the application of the Conventions is prohibited. However, the prohibition of discrimination is not a prohibition of differentiation. It is for this reason that distinctions are prohibited only to the extent that they are unfavourable. Equality could easily be transformed into injustice if it were to be applied to situations

which are inherently unequal and without taking into account circumstances relating to the state of health, the age and the sex of protected persons.

The principle of equal treatment is extended by the further principle that "*women shall be treated with all the regard due to their sex*" (Article 12, C. I and C. II, Article 14, C. III). This particular regard is not legally defined, but regardless of the status accorded to women, it covers certain concepts such as physiological specificity, honour and modesty, pregnancy and childbirth.<sup>4</sup>

International humanitarian law makes particular reservations concerning the female sex in various cases, either in general terms ("without prejudice to the provisions relating to their sex...") or in more specific terms (separate dormitories, separate places of detention). One should not deduce from this that the principle of differentiated treatment is not applicable in cases where it is not specifically mentioned (protection against insults and public curiosity, questioning, searches, food, clothing, intellectual, educational and recreational pursuits, sports and games, labour, conditions for transfer, prisoners' representatives, identification). An express reference tends to strengthen the scope of the principle, rather than to limit its application, and differentiated treatment is accorded to women even if it is not explicitly mentioned.<sup>5</sup>

It would also be wrong to draw conclusions about a lack of special protection through the following examples. With respect to the labour of prisoners of war, the principle of special treatment for women is referred to (Article 49, C. III), while it is not in the case of women internees (Article 95, C. IV). As to the searching of prisoners of war, differentiated treatment is not specifically mentioned (Article 18, C. III), whereas it is in the case of a woman internee (Article 96, C. IV). At the time of capture, a prisoner of war must be searched immediately, for obvious reasons of security. It is not always possible under these conditions to have a woman available to make the search, whereas in the slower procedure of civilian internment this can be arranged. With respect to work by civilian internees, this is optional and there is thus no need to refer to the principle of differentiated treatment.

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<sup>4</sup> *Commentary on the Third Geneva Convention*, ICRC, Geneva, 1960, Article 14, p. 147.

<sup>5</sup> *Ibid.*, Article 14, p. 147.

## II. Protection of women as members of the civilian population

Like all civilians, women are protected both against abusive treatment by the Party to the conflict in whose power she finds herself and against effects of hostilities: "*A civilian is any person who does not belong to the armed forces*" (Article 50, P. I).

### A. Protection against abuses by the Party to the conflict into whose power women have fallen

In an *international armed conflict*, women are among the persons protected by the Fourth Geneva Convention relative to the protection of civilian persons in time of war. Under these conditions, they benefit from all the provisions which state the basic principle of humane treatment, including respect of life and physical and moral integrity, particularly forbidding coercion, corporal punishment, torture, collective penalties, reprisals, pillage and the taking of hostages. Furthermore, in the event of infractions committed in relation to the conflict, women have the right to trial by an independent and impartial court established by law respecting the generally recognized principles of judicial procedure.

In addition to the general protection from which all civilians benefit, "*women shall be especially protected against any attack on their honour, in particular against rape, enforced prostitution or any form of indecent assault*" (Art. 27, para 2, C. IV; Art. 75 and 76, P. I). This provision was introduced to denounce certain practices which occurred, for example, during the last World War, when innumerable women of all ages, and even children, were subjected to outrages of the worst kind: rape committed in occupied territories, brutal treatment of every sort, mutilations, etc. In areas where troops were stationed or through which they passed, thousands of women were made to enter brothels against their will... Acts against which women are protected by Art. 27, para 2, C. IV are and remain prohibited in all places and in all circumstances, and women, whatever their nationality, race, religious beliefs, age, marital status or social condition have an absolute right to respect for their honour and their modesty, in short, for their dignity as women.<sup>6</sup>

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<sup>6</sup> *Commentary on the Fourth Geneva Convention*, ICRC, Geneva 1958, Art. 27, pp. 205-206.

The origin of Art. 76, P. I, entitled "Protection of women", is the resolution of the United Nations Economic and Social Council of April 1970 on "the protection of women and children in time of emergency, war, struggle for peace, national liberation and independence" which invites the U.N. Secretary-General to give special attention to this problem.<sup>7</sup>

This provision represents an advance for international humanitarian law as compared to Art. 27, para 2, C. IV, since it widens the circle of beneficiaries and also constitutes a substantial extension of the International Covenant on Civil and Political Rights which does not contain particular provisions protecting women.<sup>8</sup> In other words, the new rule refers to all women in the territories of the Parties to the conflict. While protection covers nationals of States which are not Parties to the Conventions and those of neutral and co-belligerent States, it does not extend to nationals of a Party to the conflict who are victims of offences against their honour committed on the territory of that Party under circumstances which have no relation to the armed conflict.<sup>9</sup>

In a *non-international armed conflict*, women are protected by the fundamental guarantees governing the treatment of persons not taking part in hostilities which are contained in Article 3, common to all four Conventions. However, this article does not provide special protection for women. Protocol II completes and develops this provision. Its Article 4 expressly forbids "*outrages upon personal dignity, in particular humiliating and degrading treatment, rape, enforced prostitution and any form of indecent assault*".

### 1. *Respect for preferential treatment of women*

In an *international armed conflict*, the situation of aliens in the territory of a Party to the conflict continues to be regulated, in principle, by provisions concerning aliens in time of peace. However, the state of war creates a situation which will inevitably have repercussions on the standing of aliens and does not always permit

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<sup>7</sup> *International Review of the Red Cross*, November-December 1980: "New code for the protection of civilian population and property during armed conflict" by Ionel Cloșcă.

<sup>8</sup> Article 10 (2) of the International Covenant on Economic, Social and Cultural Rights, which affords families protection, provides for special measures for the benefit of mothers.

<sup>9</sup> *Commentary on the Two 1977 Protocols Additional to the Geneva Conventions of 1949*, by Michael Bothe, K.J. Partsch, W. A. Solf, The Hague/Boston/London, 1982, Art. 76, p. 470.

their previous status to be wholly maintained. Protected persons are compelled to submit to various restrictions which, under these conditions, affect the population as a whole. Even in case of war, however, the special benefits accorded to pregnant women and mothers of children under the age of 7 years by national laws should be respected.

Countries at war generally take some measures for the benefit of persons whose weakness in one respect or another warrants special care. These measures are varied in scope and application: they may cover the granting of supplementary ration cards, facilities for medical and hospital treatment, special welfare treatment, exemption from certain forms of work, protective measures against the effects of war, evacuation, transfer to a neutral country, etc.<sup>10</sup> “*Pregnant women and mothers of children under seven years shall benefit by any preferential treatment to the same extent as the nationals of the State concerned*” (Art. 38, C. IV). Likewise, “*The Occupying Power shall not hinder the application of any preferential measures... which may have been adopted prior to the occupation in favour of children under fifteen years, expectant mothers, and mothers of children under seven years*” (Art. 50, C. IV).

## 2. Interned women

### *General*

A Party to an *international armed conflict* is authorized by international law to take strict control measures over protected persons, on the condition that its security renders these measures absolutely necessary. A belligerent, for example, may intern people if it has serious and legitimate reason to think that they are members of organizations whose object is to cause disturbances, or that they may seriously prejudice its security by other means, such as sabotage or espionage.<sup>11</sup> In addition, an Occupying Power may charge protected persons with infractions of penal laws which it has promulgated for its own protection. Like other protected persons, women may be interned or charged for carrying out acts endangering the security of the Occupying Power. Special provisions are made in international humanitarian law<sup>12</sup> for the benefit of women in such situations.

<sup>10</sup> *Commentary Fourth Convention*, Art. 38, p. 248.

<sup>11</sup> *Ibid.*, Art. 42, pp. 257-258.

<sup>12</sup> Other instruments (human rights, national legislation etc.) also provide for special treatment for the benefit of detained women.

Under the terms of Protocol I, "*Women whose liberty has been restricted for reasons related to the armed conflict shall be held in quarters separated from men's quarters. They shall be under the immediate supervision of women. Nevertheless, in cases where families are detained or interned, they shall, whenever possible, be held in the same place and accommodated as family units*" (Art. 75, para 5).

The Fourth Convention states, "*Whenever it is necessary, as an exceptional and temporary measure, to accommodate women internees who are not members of a family unit in the same place of internment as men, the provision of separate sleeping quarters and sanitary conveniences for the use of such women internees shall be obligatory*" (Art. 85). This paragraph is a case of a particular application of the general principle laid down in Article 27, paragraph 2, concerning the respect due to women's honour.<sup>13</sup> For the same reasons, "*A woman internee shall not be searched except by a woman*" (Art. 97, para 4).

Protocol I provides a further guarantee for the benefit of interned women: "*They shall be under the immediate supervision of women*" (Art. 75, para 5).

With respect to disciplinary penalties, the Fourth Convention also refers to the principle of differentiated treatment, in general terms. "*Account shall be taken of the internee's age, sex and state of health*" (Art. 119). Women accused of offences and those serving sentences "*shall be confined in separate quarters and shall be under the direct supervision of women*" (Arts. 76 and 124, C. IV and Art. 75, para 5, P. I).

There is nothing to prevent the Detaining Power arranging for women a system of disciplinary detention less harsh than that for men and in less uncomfortable premises.<sup>14</sup> Such a distinction between the sexes is not regarded as contrary to the general principle of international humanitarian law forbidding all discrimination.

In *non-international armed conflicts*, Protocol II provides similar rules. It specifies that women who are arrested, detained or interned "*shall be held in quarters separated from those of men and shall be under the immediate supervision of women except when members of a family are accommodated together*" (Art. 5, para 2a). In the event that it is not possible to provide separate quarters it is essential in

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<sup>13</sup> *Commentary Fourth Convention*, Art. 85, p. 388.

<sup>14</sup> *Ibid.*, Art. 124, p. 494.

any event to provide separate sleeping places and conveniences. It should be noted that the foregoing provisions refer both to civilians deprived of their freedom and to captured combatants.<sup>15</sup>

### *Pregnant women and maternity cases*

In an *international armed conflict*, these women benefit from supplementary protection. Protocol I specifies that “*pregnant women and mothers having dependent infants who are arrested, detained or interned for reasons related to the armed conflict, shall have their cases considered with the utmost priority*” (Art. 76, para 2). This is intended to make sure that pregnant women are released as rapidly as possible.

In 1949, a similar provision was included in the Fourth Convention urging the Parties “*to conclude agreements during the course of hostilities for the release, the repatriation, the return to places of residence or the accommodation in a neutral country of interned pregnant women*” (Art. 132, C. IV). This Article does not specify an obligation to reach such agreements but it does constitute an urgent recommendation based on experience. During World War II, numerous repatriations of internees took place by the belligerents. In this connection, emphasis should be laid on the role which can be played by the Protecting Power or by the ICRC in suggesting and inspiring such agreements. The Protecting Power is well placed, especially when it acts simultaneously on behalf of both parties, to understand the deplorable seriousness of certain situations. The argument of reciprocity can be invoked to further, and sometimes even almost to compel, the conclusion of special agreements concerning, for instance, exchanges of internees. Naturally, the International Committee of the Red Cross can also play a role in this. It goes without saying that the ICRC can and does on occasion play a similar role.<sup>16</sup>

This category of women also benefits from other forms of differentiated treatment.

The Fourth Convention provides that “*expectant and nursing mothers in occupied territories shall be given additional food, in proportion to their physiological needs*” (Art. 89). This clause was designed to avoid deficiency diseases which would be particularly regrettable among these women, as they would affect future gener-

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<sup>15</sup> *Commentary on the Two Protocols...*, Art. 5, p. 645.

<sup>16</sup> *Commentary Fourth Convention*, Art. 132, pp. 510-514.

ations.<sup>17</sup> Since internment is not a punishment but a precautionary measure adopted in the interest of the Detaining Power, it cannot be allowed to cause serious prejudice to the persons subjected to it.<sup>18</sup> Thus, “*maternity cases must be admitted to any institution where adequate treatment can be given and shall receive care not inferior to that provided for the general population*” (Art. 91).

“*Maternity cases must not be transferred if the journey might be seriously detrimental to them, unless their safety imperatively so demands*” (Art. 127). As we see, it is the safety of the internee which is decisive, not the military situation. The latter concept, which existed in the 1929 Convention with respect to sick and wounded prisoners of war, was too often interpreted as granting permission to the Detaining State to transfer them when it appeared that military operations might enable them to escape from its power.<sup>19</sup>

### *Mothers of young children*

Protocol I, as in the case of expectant or nursing mothers, asserts that “*mothers having dependent infants who are arrested, detained or interned for reasons related to the armed conflict shall have their cases considered with the utmost priority*” (Art. 76, para 2). The term “mothers having dependent infants” has a wider meaning than “nursing mothers”, the wording which had been previously proposed.<sup>20</sup> The authors of the Protocols were unable to agree on the age when children cease to be dependent on their mothers. Since various provisions in the Fourth Convention refer to mothers of children under the age of 7 years (preferential treatment in Art. 50 and safety zones in Art. 14), we can consider 7 years to be the age below which the application of Art. 76, para 2 of Protocol I is imperative.

As in the case of pregnant women and maternity cases, the Fourth Convention provides that *the Parties to the conflict shall endeavour during the course of hostilities to conclude agreements for the release, the repatriation, the return to places of residence or the accommodation in a neutral country of interned mothers of young children* (Art. 132).

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<sup>17</sup> *Ibid.*, Art. 89, p. 395.

<sup>18</sup> *Ibid.*, Art. 91, p. 399-400.

<sup>19</sup> *Ibid.*, Art. 127, p. 500.

<sup>20</sup> Vol. XV, p. 464, CDDH/407/Rev. 1.

### 3. *Women and the death penalty*

Nothing is said about this subject in the Conventions. Protocol I makes up for this deficiency, drawing inspiration from the International Covenant on Civil and Political Rights which entered into effect on 23 March 1976. Its Art. 6, para 5, provides that a death penalty must not be executed on pregnant women. It was not possible however for the authors of the Protocols to prohibit absolutely in the event of an *international armed conflict*, the pronouncement of the death penalty on pregnant women and the mothers of young children. Such a prohibition would run counter to specific provisions in the national legislation of a number of countries. Nevertheless, international humanitarian law recommends that such pronouncements be avoided to the utmost possible extent. With regard to the actual execution of the sentence, it was relatively easy for the authors to agree to forbid the execution of pregnant women. The fact is that many national legal codes which still provide for the death penalty also recognize this restriction. The barbarous practice of postponing an execution until the birth of the child has been abandoned almost universally, both in law and in fact.<sup>21</sup> *"To the maximum extent feasible, the Parties to the conflict shall endeavour to avoid the pronouncement of the death penalty on pregnant women or mothers having dependent infants, for an offence related to the armed conflict. The death penalty for such offences shall not be executed on such women"* (Art. 76, para 3, P. I).

In *non-international armed conflicts*, Protocol II also makes up for the previous absence of such a protective clause. The Protocol goes even farther than the International Covenant on Civil and Political Rights. It specifies that *"the death penalty shall not be carried out on mothers of young children"* (Art. 6, para 4, P. II).

#### **B. Protection of women against the effects of hostilities**

In an *international armed conflict*, women as members of the civilian population benefit from rules in international humanitarian law which impose limits on the conduct of hostilities. These rules, whose sources go back to the Hague Conventions of 1899 and 1907 and which have to a great extent become a part of customary law, are specifically reaffirmed and developed in Protocol I. They pro-

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<sup>21</sup> *Commentary on the Two 1977 Protocols ...*, Art. 76, pp. 472-473.

vide notably that the Parties to a conflict “*shall at all times distinguish between the civilian population and combatants and between civilian objects and military objectives and accordingly shall direct their operations only against military objectives*” (Art. 48, P. I).

In relation to *non-international armed conflict*, the essential elements of these provisions are also set forth, in simplified form. Article 13 of Protocol II stipulates that “*the civilian population as such, as well as individual civilians, shall not be the object of attack.*”

### 1. *Pregnant women or maternity cases*

In an *international armed conflict*, this category of women benefits from special protection. Protocol I stipulates that “*maternity cases and pregnant women, who refrain from any act of hostility, shall enjoy the same general protection as that accorded to the sick and wounded*” (Art. 8).

Such women are not necessarily in need of medical care but their condition is such that they may need such care rapidly.

The principle of assimilating pregnant women or maternity cases to the sick and wounded was already implicit in the Fourth Convention, which states, “*The wounded and sick, as well as the infirm and expectant mothers, shall be the object of particular protection and respect*” (Art. 16). It adds, “*The parties to the conflict shall endeavour to conclude local agreements for removal from besieged or encircled areas of wounded, sick, infirm, and aged persons, children and maternity cases...*” (Art. 17).

Maternity cases, along with the wounded, sick, and infirm, are among those whose transport by land, sea or air must be respected and protected (Arts. 21 and 22).

### 2. *Pregnant women or maternity cases, nursing mothers and mothers of young children*

In certain circumstances, nursing mothers and mothers of young children, in the event of an *international armed conflict*, benefit from other forms of differentiated treatment. Like other categories of the civilian population whose relative weakness renders them incapable of strengthening the military potential of their country, “*expectant mothers and mothers of children under seven may be placed in hospital and safety zones*” (Art. 14, C. IV), provided, of course, that they do not contribute directly to the war effort.

With regard to the shipment of relief for the civilian population, the Fourth Convention provides for "*the free passage of medical and hospital stores and objects necessary for religious worship, along with special consignments of essential foodstuffs, clothing and tonics for expectant mothers and maternity cases*" (Art. 23). That should be understood to mean basic foodstuffs, necessary to the health and normal physical and mental development of the persons for whom they are intended e.g. milk, flour, sugar, fats, salt.<sup>22</sup>

Additional Protocol I constituted an undeniable advance in international humanitarian law in comparison with Article 23 of the Fourth Convention, by enlarging the circle of beneficiaries. The civilian population as a whole now has the right to receive essential foodstuffs, clothing and tonics. This widening of the circle was attended by a reminder that certain persons should have priority in the distribution of relief. To pregnant women and maternity cases, a new category was added, that of nursing mothers. These groups have the right at all times to priority in receiving relief, in particular foodstuffs, clothing and tonics, and to benefit from special treatment (Art. 70).

### III. Women taking part in hostilities

#### A. Historical note

Participation by women in hostilities is not a new development, for many of them have taken a more or less active part in war throughout the centuries.<sup>23</sup> A great many female canteen-keepers followed armies from the 17th to the 19th centuries to sell food and drink to the soldiers. Other women, behind the front, devoted themselves to the care of wounded soldiers. The image of the young English nurse Florence Nightingale, bringing aid and comfort to soldiers in the Crimean War (1854-1855), is unforgettable. Participation by women in hostilities remained exceptional however until the 20th century.

It was only in World War I that women began to take part in hostilities more systematically. In Germany for example, though not directly incorporated into combat units, women contributed to the war effort in World War I. In addition to their work in arms

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<sup>22</sup> *Commentary Fourth Convention*, Art. 23, p. 180.

<sup>23</sup> Along with such well-known historical characters as Queen Christina of Sweden, Empress Catherine II of Russia and Queen Elizabeth I of England, who were both rulers and military commanders, many other women distinguished themselves in combat. A well-known example of a woman-warrior is Joan of Arc.

factories, they carried out numerous tasks close to the front, in supply services and munitions depots. In March 1917, 67,877 women were replacing men sent to the front.<sup>24</sup>

In England, women also took part in that war, either as paid or unpaid civilians or auxiliaries, 80,000 in female military units, the WAAC, WRNS and WRAF<sup>25</sup>, while others worked as nurses.

Russian women, though in smaller numbers, took part in combat.<sup>26</sup>

In World War II, women took a more active part in the hostilities. In Germany, from 1943 onward, more than a million women worked in arms factories, while 300,000 served as army reservists, with 20,000 in the navy and 130,000 in the air force.<sup>27</sup>

In England, at the end of 1943, female military units (ATS, WAAF and WRNS)<sup>28</sup> had a total of 450,000 women, 9.37% of the country's armed forces. During the war, their units had 624 dead, 98 disappeared, 744 wounded and 20 captured.<sup>29</sup>

Soviet women participated directly in the fighting in World War II, in all services and units, as snipers, riflemen, air pilots, bombardiers, artillerymen, etc. It is estimated that about a million Soviet women took part in the fighting, 800,000 in the armed forces and 200,000 in resistance movements, constituting 8% of the total armed forces.<sup>30</sup>

French women in World War II did not commonly fight in the maquis, but performed many services essential to the existence and survival of the resistance, providing supplies, carrying out liaison missions, producing and distributing newspapers and tracts, hiding and transporting arms, etc.<sup>31</sup>

## B. Status of women prisoners of war

Like men, women who take part in hostilities are protected by international humanitarian law from the moment they fall into the

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<sup>24</sup> *Frauen ans Gewehr*, by Renate Janssen, Köln, 1980, pp. 11-19.

<sup>25</sup> WAAC: Women's Auxiliary Army Corps, 1917. WRNS: Women's Royal Navy Service, 1917. WRAF: Women's Royal Air Force, 1918.

<sup>26</sup> *Great Britain and the World Wars*, by Nancy Loring Goldman and Richard Stites, Greenwood Press, 1982, pp. 24-29.

<sup>27</sup> *Frauen ans Gewehr*, pp. 19-27.

<sup>28</sup> ATS: Auxiliary Territorial Services, 1938. WAAF: Women's Auxiliary Air Force.

<sup>29</sup> *Great Britain and the World Wars*, pp. 30-35.

<sup>30</sup> *Ibid.*, pp. 35-36.

<sup>31</sup> *Les femmes dans la résistance*, l'Union des Femmes Françaises, éditions du Rocher, 1977, p. 15.

power of the enemy. It is essential for them to be members of the armed forces of a Party to the conflict if they are to be considered as combatants entitled to the status of prisoners of war, once captured.

The armed forces of a Party to a conflict are recognized as such if they are organized and placed under a command responsible to that Party for the conduct of its subordinates, even if that Party is represented by a government or an authority not recognized by an adverse Party. In addition, these armed forces must be subject to an internal disciplinary system which, *inter alia*, enforces compliance with the rules of international law applicable in armed conflicts. In particular, this compliance requires combatants to distinguish themselves from civilians, by a uniform or other distinctive sign, visible and recognizable at a distance, or, at least, they must carry their arms openly while taking part in an attack. Violation by a combatant of the rules applicable in armed conflict is punishable but he is not deprived of his right to the status of prisoner of war in case of capture. In case of doubt, this status must be presumed, until the question has been decided by a competent authority.<sup>32</sup>

The drafting of women into the armed forces, as combatants, has generally been marginal up to the present, with the Soviet Union as an exception. As we saw earlier, many Soviet women took part in fighting during World War II. With recognition of the principle of equality of the sexes, at least in the western and socialist countries, it is not excluded that women will participate in combat to a greater extent in the event of new conflicts. We may note nevertheless that Israel, the only country with compulsory military service for women, does not oblige them to take part directly in combat. In case of war, women staff officers at the battalion and brigade levels are withdrawn to the rear.<sup>33</sup>

On the other hand, participation by women as non-combatant auxiliaries is relatively high. In England and the Soviet Union, in World War II, they constituted about one tenth of the total of the armed forces. They perform administrative functions, serve as liaison agents and work in such branches as supplies, motor transport, communications and air control.<sup>34</sup>

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<sup>32</sup> *Basic rules of the Geneva Conventions and their additional Protocols*, ICRC, Geneva, pp. 21-22.

<sup>33</sup> *La participation de la femme à la défense générale*, by A. Weitzel, Département militaire fédéral, Berne, 1979, p. 148.

<sup>34</sup> *Ibid.*, pp. 67 and 129.

International humanitarian law also extends the right to the status of prisoner of war to those taking part in a *levée en masse* — the inhabitants of a non-occupied territory which spontaneously take up arms at the approach of the enemy to resist the invasion, without having had time to organize themselves — if they carry their arm openly and respect the laws and customs of war. The same right is accorded to various categories of persons who are not combatants, such as:

- persons authorized to follow the armed forces without being directly part of them;
- crews of the merchant marine and civil aviation;
- members of military personnel serving in civil defence organizations.<sup>35</sup>

Women may obviously be included in any of these categories.

There are other persons who, although they are not given the status of prisoner of war in the event of capture, nevertheless have the right to corresponding treatment. They include:

- persons arrested in occupied territory because they belong to the armed forces of the occupied country;
- military internees in a neutral country;
- members of the non-combatant medical and religious personnel who are part of the armed forces.<sup>36</sup>

The medical personnel of the armed forces includes many women, nurses in particular.

### C. Treatment of women combatants and prisoners of war

#### 1. General protection

Inasmuch as women “*shall in all cases benefit by treatment as favourable as that granted to men*” (Art. 14, C. III), they have the right to the same protection. Among the numerous provisions in the Third Convention and the two Additional Protocols, we shall refer only to the most important and note the principles involved.

In an *international armed conflict*, it is forbidden to declare that no quarter shall be given, to threaten the adversary therewith and conduct hostilities on such a way that there are no survivors.

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<sup>35</sup> *Basic rules of the Geneva Conventions and their additional Protocols*, ICRC, Geneva, 1983, pp. 21-22.

<sup>36</sup> *Ibid.*, p. 22.

Furthermore, the enemy who is *hors de combat*, who has surrendered or who shows his intention to surrender, as well as one who has parachuted from an aircraft in distress, shall not be the object of attack.

In addition, the Third Convention provides in general that prisoners of war must be treated humanely at all times and it is forbidden to subject them to physical mutilation or to medical or scientific experiments which are not justified by the medical treatment of the prisoner concerned and which are not in his interest.

It is specified that prisoners of war shall not be unnecessarily exposed to danger while awaiting their evacuation from a fighting zone.

Finally, anyone who has taken part in the hostilities but has not been granted the status of prisoner of war must in principle benefit from the provisions of the Fourth Convention unless he is detained as a spy or saboteur (Art. 5, C. IV). In the latter cases, such persons must nevertheless be treated humanely and must benefit from the fundamental guarantees provided in Art. 75, P. I.<sup>37</sup>

In a *non-international armed conflict*, captured combatants do not have the status of prisoners of war but must benefit from the fundamental guarantees of Article 3 common to the four Geneva Conventions and of Art. 4, P. II.

## 2. *Special protection*

Apart from the general protection from which women benefit on the same basis as men, they enjoy special protection resulting from the principles previously stated.

In an *international armed conflict*, Protocol I specifies that “*pregnant women and mothers having dependent infants who are arrested, detained or interned for reasons related to the armed conflict, shall have their cases considered with the utmost priority*” (Art. 76, para 2). This is the principle we considered earlier with respect to the protection of women as members of the civilian population. The authors of the Protocol thus sought to assure that pregnant women and mothers of young children would be released as rapidly as possible.

A comparable concern was the basis of a Model Agreement on direct repatriation and accommodation in neutral countries of wounded and sick prisoners of war, annexed to the Third Conven-

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<sup>37</sup> *Ibid.*, p. 23 and 26.

tion. This proposed agreement has two clauses of particular interest to us:

1. Paragraph 7 of Section B provides for accommodation in neutral countries of women prisoners of war who are pregnant or mothers with infants and small children.
2. Paragraph 3 f of Section A provides for repatriation in cases of normal pregnancy and of prisoners suffering from chronic and serious gynecological and obstetrical disorders, when it is not possible to accommodate them in neutral countries.

The Third Convention contains various provisions based on the principle in Article 14, para 2, stipulating that "*women shall be treated with all the regard due to their sex*". Article 25, para 4 states that "*in any camps in which women prisoners of war, as well as men, are accommodated, separate dormitories shall be provided for them*". The introduction of this paragraph was due to the presence of a number of women in the armies of belligerents in World War II. The interpretation that has been given to this provision is that the separation must be effective, in other words that male prisoners must not have access to the dormitories of women prisoners whether or not the women consent. The Detaining Power is responsible for the effective application of this provision. Strictly speaking, this paragraph refers only to dormitories and the quarters as a whole need not necessarily be separated; the Detaining Power is, however, at liberty to provide separate quarters if it deems fit and in order more easily to fulfil the other requirements of the Convention with regard to women prisoners.<sup>38</sup>

Furthermore, under the terms of Article 29, para 2, "*in any camps in which women prisoners of war are accommodated, separate conveniences must be provided for them*". The question of sanitary conveniences is of the utmost importance for the maintenance of cleanliness and hygiene in camps. These conveniences should be so constructed as to preserve decency and cleanliness and must be sufficiently numerous. It goes without saying that the most elementary rules of decency require that separate conveniences should be provided for women prisoners of war.<sup>39</sup>

Art. 49, para 1, specifies that the Detaining Power "*may utilize the labour of prisoners of war who are physically fit, taking into account their age, sex, rank and physical aptitude, and with a view*

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<sup>38</sup> *Commentary Third Convention*, Art. 25, p. 195.

<sup>39</sup> *Ibid.*, Art. 29, p. 207.

*particularly to maintaining them in a good state of physical and mental health*". This is an instance of the application of Art. 16 (See First Part, I: Principles).

With regard to penal and disciplinary penalties, the Third Convention is consistent with the principle of equality of treatment.

The Convention states that *"a woman prisoner of war shall not be awarded or sentenced to a punishment more severe, or treated whilst undergoing punishment more severely, than a woman member of the armed forces of the Detaining Power dealt with for a similar offence.*

*In no case may a woman prisoner of war be awarded or sentenced to a punishment more severe, or treated whilst undergoing punishment more severely, than a male member of the armed forces of the Detaining Power dealt with for a similar offence"* (Art. 88, paras 2 and 3).

Other provisions result from the principle of differentiated treatment. Articles 97 and 108 provide in particular that *"women prisoners of war, undergoing disciplinary or penal punishments, respectively, shall be confined in separate quarters from male prisoners of war and shall be under the immediate supervision of women"*.

Protocol I has a rule analogous to that in Articles 25, 97 and 108 of the Third Convention: *"Women whose liberty has been restricted for reasons related to the armed conflict shall be held in quarters separated from men's quarters. They shall be under the immediate supervision of women"* (Art. 75, para 5).

In a *non-international armed conflict*, Protocol I also specifies that women arrested, detained or interned *"shall be held in quarters separated from those of men and shall be under the immediate supervision of women except when families are united"* (Art. 5, para 2, a). However, persons captured do not have prisoner of war status.

## PART II:

### ICRC ACTION IN FAVOUR OF WOMAN VICTIMS OF ARMED CONFLICTS

#### I. Activity during World War II

It must not be forgotten that at the outbreak of this war only the prisoners of war were under legal protection with respect to internment, thanks to the Geneva Convention of 27 July 1929 relative to the treatment of prisoners of war. Civilians had no legal protection in that respect, which did not facilitate matters for the ICRC.

At the beginning of the conflict, the ICRC had no occasion to intervene on behalf of women prisoners of war, either because their treatment was in conformity with the provisions of the Convention or because intervention was impossible.

On 2 October 1944, the Polish army of General Bor-Komorowski<sup>40</sup> laid down its arms. The terms of the capitulation recognized the status of prisoners of war of all the combatants who surrendered to the German forces, including the army's female auxiliary personnel. Unfortunately, the German authorities did not respect these clauses of the capitulation, and the ICRC delegates who visited the camps where the women were held could do nothing but corroborate the complaints of these prisoners: the overcrowding and discomfort of the quarters, the lack of heat, clothing and food, the imposition of heavy work, etc. Upon making representations to the German authorities, the ICRC received assurances that there would be no more forced labour for the women auxil-

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<sup>40</sup> The underground Polish army loyal to the Polish Government in exile in London, which was uselessly sacrificed in the Warsaw insurrection.

iaries and that they would be interned in separate camps where they would receive treatment appropriate to their sex and state of health. Despite these assurances, the ICRC delegates did not observe any particular improvements in subsequent visits.

In view of the importance of the problem, the ICRC on 9 January 1945 addressed a general appeal to the German, British, French and American governments drawing attention to Articles 3 and 4 of the Convention (see Introduction) and laying stress on the appropriate differentiated treatment which should be accorded to women prisoners of war.

The replies of the American and French governments disclosed that only very few women belonging to the German Army were in the hands of these Powers, and that such prisoners were accommodated in special camps or in compounds set apart for them in ordinary PW camps. These two governments further stated their intention to repatriate women PWs without delay, beginning with expectant mothers and the sick, and without making it a condition that the German Government should take similar action. The repatriation of German women PWs was effected in part by way of Switzerland; the Committee approached the Swiss authorities to allow their passage through Swiss territory.

In February 1945, acting on a request from the Polish Red Cross in London, the ICRC began negotiations to secure the accommodation in Switzerland of women prisoners from General Bor-Komorowski's army. The German and Swiss governments had signified their agreement in principle to the transfer when, with the fall of the Reich, it became unnecessary.<sup>41</sup>

## 2. ICRC activity after World War II

Since 1949, with the adoption of the Fourth Geneva Convention relative to the protection of civilian persons in time of war, the ICRC has had legal grounds to act for them as well as for prisoners of war. The activity of the ICRC in protecting and assisting civilian populations has steadily increased in recent years as conflicts have multiplied. Among the many tasks of protection carried out, some repatriations deserve attention, to the extent that they shed light on

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<sup>41</sup> ICRC records and *Report of the ICRC on its Activities during the Second World War (1 September 1939 — 30 June 1947)*, ICRC, Geneva, 1948, 3 Vol. — See Vol. I, pp. 295-297.

the special protection which benefits women victims of armed conflicts.

In Cyprus in November 1974, the ICRC was active in transferring from the north to the south, and vice-versa, various categories of especially vulnerable persons: the wounded, sick, elderly, pregnant women and their children.

In June 1977, after capturing the Bardai Oasis in northern Chad, the Frolinat movement requested the intervention of the ICRC to evacuate various families of prisoners of war from the combat zone. Due to numerous technical problems, and a resumption of hostilities in the region, the operation was delayed and could not take place until 5 December 1978. The wives of 15 prisoners and 22 children were returned to the capital of Chad by the ICRC.

In Uganda in 1980, the ICRC made several approaches to the authorities asking them to investigate the situation of civilian detainees and to release various categories among them: minors, old and sick persons and women. This request was granted by the authorities.

With respect to assistance, women were among those who received priority in relief actions undertaken by the ICRC for the benefit of civilian populations. Among these actions were the following:

In Bangladesh in 1972, many totally destitute Pakistani civilians, mostly women and children, were refugees in a camp at Dacca. The ICRC gave them articles of most urgent necessity, such as clothing, blankets, soap, cooking pots and powdered milk.

Following disorders which broke out in February 1979 in the frontier zone between the Yemen Arab Republic and the People's Democratic Republic of Yemen, many civilians sought refuge in the central area of the Yemen Arab Republic. About 45,000 persons, among them a high proportion of women and children, benefited from ICRC assistance.

The ICRC has very often had occasion to act for the benefit of women deprived of their freedom. Intervening at all levels, it has insisted upon differentiated treatment for women, such as separate quarters and supervision by women, and has drawn the attention of authorities to the cases of pregnant women and the mothers of young children. To cite a few recent examples:

ICRC delegates made visits twice a month to a number of women arrested in Lebanon, until their release on 24 November 1983. Originally detained in Israel following their capture in 1982,

these women were transferred to southern Lebanon in March 1983.<sup>42</sup>

At the request of the ICRC, four young Iranian women, captured in October 1980, were transferred by the Iraqi authorities to a prisoner-of-war camp, and were subsequently released on 29 January 1984.

Both in connection with conflicts and with internal disorders or tensions, ICRC delegates continue to visit the following places of detention:

*Union of South Africa:* Sections reserved for women in prisons in Pretoria and Kroonstad.

*Israel:* Women's prison at Neve Tirza.

*Argentina:* Women's prison at Ezeiza.

*Chile:* Several centres reserved for women, known as "Centro de orientación feminino", in different parts of the country.

*Colombia:* "Cárceles de mujeres del Buen Pastor" at Cali, Medellín and Popayán.

*Paraguay:* "Casa del Buen Pastor" at Asunción.

*Peru:* Penal establishments for women at Arequipa, Cuzco and Lambayeque.

*El Salvador:* Rehabilitation centre for women at Ilopango.

*Uruguay:* "Punta rieles (EMR 2)" at Montevideo.

## CONCLUSION

International humanitarian law undoubtedly gives extensive protection to women. They benefit not only from all the provisions which protect the victims of armed conflicts in general. In addition, among the approximately 560 articles in the Geneva Conventions of 1949 and the Additional Protocols of 1977, about 40 are of specific concern to women.

If women in real life are not always protected as they should be, it is not due to the lack of a legal basis. Despite adoption of the Fourth Geneva Convention and the two Additional Protocols, women as members of the civilian population continue to be the first victims of indiscriminate attacks against civilians, since the men are usually engaged in the fighting. Article 27 of the Fourth Convention, which provides special protection for women against any attacks on their honour and in particular against rape, enforced prostitution or any form of indecent assault, did not

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<sup>42</sup> ICRC Annual Reports, from 1965 to 1983.

prevent the rape of countless women in the conflict in Bangladesh in 1971, for example.<sup>43</sup> This was one of the reasons why the authors of Protocol I considered it necessary to repeat in Article 76, para 1, the contents of the earlier article. The same rule is found again in Protocol II. Although these new provisions have been adopted, crimes against honour continue to be committed, with women as the principal victims. We need only think of the tragedy of the “boat people”, even though this is outside the specific framework of armed conflicts. With particular regard to women deprived of their freedom, the ICRC has found that women are in the greatest danger of such assaults at the time of their arrest or capture and during the interrogation which follows, assaults ranging from the threat of rape to obtain “confessions” to the act itself.

The international community will not succeed in remedying this situation merely by adopting new rules. Most of all, it must see that the rules already in force are respected. The responsibility to apply the provisions giving special protection to women, and for that matter all the rules of international humanitarian law, is a collective one. It rests first and foremost with the States party to the Geneva Conventions of 1949 and the Additional Protocols of 1977, which have undertaken to respect and ensure respect for these rules. The ICRC can certainly also help to render the protection accorded to women more effective through its own activities, whether by visiting women held as prisoners of war or in civilian detention or internment, by providing material assistance or by making enquiries into the whereabouts of missing persons. Finally, the dissemination of knowledge of these rules by the National Red Cross and Red Crescent Societies, or by organizations such as the World Veterans Federation, can strengthen the existing law. Every effort made in this respect undoubtedly facilitates the task of those who bear the prime responsibility for the implementation of international humanitarian law, and encourages them in their endeavours.

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<sup>43</sup> *Dignity and Honour of Women as Basic and Fundamental Human Rights*, by Yougindra Khushalani, The Hague, Boston, London, 1982.

**Provisions of international humanitarian law  
according special protection to women**

**Geneva Convention of 1929:** Articles 3, 4

**Geneva Conventions of 1949**<sup>1</sup>

Convention I: Articles 3, 12

Convention II: Articles 3, 12

Convention III: Articles 3, 14, 16, 25/4, 29, 49, 88/2, 3, 97/4,  
108/2

Convention IV: Articles 3, 14/1, 16, 17, 21, 22/1, 23/1, 27/2, 38/5,  
50/5, 76/4, 85/4, 89/5, 91/2, 97/4, 98/2, 119/2,  
124/3, 127/3, 132/2

**Additional Protocols of 1977**

Protocol I: 8,a; 70/1; 75/1 and 5; 76

Protocol II: 4/2,e; 5/2,a; 6/4

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<sup>1</sup> «Index of the Geneva Conventions for the Protection of War Victims of 12 August 1949», by Jiri Toman.

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## *Synopsis IV*

### **Identification Fundamental Principle**

**by J. de Preux**

Families have the right to know the fate of their relatives (P. I, Art. 32).

Each Party to a conflict must search for persons reported missing by an adverse Party and must supply all relevant information on such persons to facilitate the search (P. I, Art. 33).

#### **A. OBLIGATION OF THE POWER OF ORIGIN, OCCUPATION OR RESIDENCE**

##### *I. Identification of members of the armed forces and other specified persons*

###### **Identity cards and discs**

Each party to a conflict is required to furnish every member of its armed forces with an identity card or identity disc showing at least the names, first names, rank, army, regimental, personal or serial number or its equivalent and the date of birth of the bearer (C. III, Art. 17; C. I, Art. 16).

###### **Identity cards for medical and religious personnel**

In addition to the identity disc, military medical and religious personnel must carry a special identity card with the red cross or red crescent emblem. This card must have the same information required for members of the armed forces and must specify the capacity which entitles the bearer to the protection of the Conventions. It must bear the photograph of the owner and his signature and/or fingerprints and must be embossed with the stamp of the military authority (C. I, Art. 40, C. II, Art. 42).

### **Identity cards and discs of auxiliary military medical personnel**

The identity cards and discs of auxiliary military medical personnel must specify the special training they have received, the temporary nature of their duties and their authority for bearing the red cross or red crescent emblem (C. I, Art. 41).

### **Identity cards and discs of the medical personnel of recognized aid societies**

The medical personnel of duly recognized and authorized aid societies, employed on the same duties as military medical and religious personnel, must bear the same cards and discs as this personnel (C. I, Arts. 26, 40).

### **Identity cards and discs of medical personnel of aid societies of neutral countries**

This personnel must have the same identity documents as those of other recognized aid societies and must receive them before leaving the neutral countries to which they belong (C. I, Art. 27).

### **Identity cards of military personnel assigned to civil defence**

Military personnel assigned to civil defence organizations must be provided with an identity card certifying their status. These cards may follow the model shown in Article 14 of Annex I to Protocol I. If persons assigned to civil defence are permitted to carry light individual weapons, an entry to that effect should be made on their card (P. I, Art. 67; Annex I, Art. 14).

### **Identity cards for persons authorized to accompany the armed forces without being members of such forces**

These identity cards, in addition to the bearer's country and the military authority issuing the card, must have the bearer's names, first names, date and place of birth, photograph, signature, blood group, religion and indicate the status entitling him or her to accompany the armed forces. If the bearer becomes a prisoner of war, the card must be immediately shown to the Detaining Authorities (C. III, Art. 4; Annex IV A).

## *II. Identification of civilians not attached to the armed forces*

### **Identity cards for civilian medical and religious personnel**

In occupied territories and in areas where fighting is taking place or is likely to take place, civilian medical and religious personnel, including civil defence personnel, should be recognizable by the red cross or red crescent emblem and by an identity card certifying their status (P. I, Arts. 8, 18, 66; Annex I, Regulations concerning identification, Art. 1, 2 and 14).

### **Identity cards for temporary civilian medical and religious personnel**

The identity card for these persons should, as far as possible, be similar to that of the permanent personnel. If circumstances so require, a certificate may be issued in place of the identity card. (P. I, Annex I, Regulations concerning identification, Art. 2).

### **Identity cards for the personnel of recognized civilian hospitals**

Without compromising the provisions of the first article of the Regulations concerning identification (P. I, Annex I), in occupied territories and areas of military operations, these persons shall in all cases be recognizable not only by bearing the emblem of the red cross or red crescent when on duty, but also by an identity card certifying the status of the bearer or the tasks assigned to him, with a photograph of the bearer and the stamp of the competent authority (C. IV, Art. 20; P. I, Arts. 8, 18).

### **Identification of children**

The Parties to a conflict must endeavour to arrange for all children under the age of 12 to be identified by wearing identity discs or by some other means (C. IV, Art. 24).

### **Identification of children in the event of evacuation**

(See Synopsis III: Special Protection of Children).  
(Protocol I, Article 78).

### **Identity cards for journalists**

Journalists engaged in dangerous professional missions in areas of armed conflict may obtain from the government of the State to which they belong, or of the country in which the agency employing them is located, an identity card similar to the model in Protocol I, Annex II, attesting to their status as journalists (P. I, Art. 79).

### **Interrogation**

No physical or mental torture, nor any other form of coercion, may be inflicted on prisoners to obtain any kind of information from them. When questioned, prisoners are required to give only their names, first names and rank, date of birth and registration number, or equivalent information. Prisoners who are unable to state their identity, due to their physical or mental condition, are to be handed over to the medical service and all efforts made to establish their identity (C. III, Art. 17).

### **Identity documents**

Prisoners of war should at no time be without identity documents. The Detaining Power must supply such documents to prisoners who have none (C. III, Art. 18).

### **Evacuations**

The Detaining Power must draw up as soon as possible a list of prisoners evacuated from the combat area (C. III, Art. 20).

### **Transfers**

The Detaining Power must draw up a complete list of transferred prisoners. (C. III, Art. 46).

### **Capture card**

Immediately upon capture, or not more than one week after arrival at a camp, even if it is a transit camp, likewise in case of transfer, every prisoner of war shall be enabled to write direct to his family, and to the Central Tracing Agency, a card informing them of his capture, address and state of health (C. III, Art. 70).

## **Repatriation**

In the event of repatriation, the same requirements prevail as in the case of transfers. The names of prisoners of war who are detained in connection with indictable offences must be communicated to the Power upon which they depend (C. III, Art. 119).

## **Dispersed prisoners**

Commissions must be established for the purpose of searching for dispersed prisoners and assuring their repatriation (C. III, Art. 119).

## **Identity cards for civil defence personnel**

Civil defence personnel should be provided with an identity card bearing the distinctive civil defence sign, corresponding in other respects to the identity cards of medical and religious personnel (P. I, Annex I, Art. 14).

## **Information about the dead**

Each Party to a conflict, to the fullest extent possible, must facilitate and if necessary carry out the search for and the recording of information about persons who may have died as the result of hostilities or occupation, when such persons have been reported as missing by the adverse Party. This information is to be transmitted either directly or through the Protecting Power, the ICRC or a National Red Cross or Red Crescent Society. In all cases, a copy should be sent to the Central Tracing Agency (P. I, Art. 33).

# **B. PRISONERS OF WAR**

## ***I. Obligations of captor (and Detaining Power)***

### **Wounded, sick and shipwrecked**

As soon as possible, all particulars which may assist in identifying the wounded, sick and shipwrecked must be recorded: the Power on which they depend, their military unit or serial number, names, first names, date of birth, any other information on their identity cards or discs, date and place of capture and information about their injuries or sicknesses. (C. I, Art. 16; C. II, Art. 19).

## **The dead**

The Parties to a conflict must endeavour to reach an agreement which will enable teams to search for, identify and recover the dead from battlefield areas. (P. I, Art. 33).

Interment, cremation or burial at sea, individually as far as circumstances permit, should be preceded by a careful examination, if possible a medical examination, to confirm death, establish identity (see Wounded, sick and shipwrecked) and enable a report to be made providing these details and the date, place and cause of death. One half of the double identity disc, or the disc itself if it is a single one, should remain on the body (C. I, Arts 16, 17; C. II, Art. 20).

## **Death in captivity**

Death certificates or certified lists must be drawn up of all persons who die as prisoners of war. They must contain the following information: names, first names, rank, registration number or equivalent information, date of birth, place, date and cause of death, place and date of burial, and all particulars necessary to identify the graves (C. III, Art. 120 and Annex IV D).

## **National Information Bureaux**

National Information Bureaux, without exercising any pressure on the prisoners (see Interrogation above), must collect the following information about prisoners of war: names, first names, rank, registration number, place and full date of birth, the Power on which they depend, names and first names of the father and of the mother, name and address of the person to be informed and the address to which correspondence for the prisoner may be sent, together with records of transfers, releases, repatriations, escapes, admissions to hospital, health data and deaths. This information is to be sent to the Powers concerned, through the intermediary of the Protecting Power and the Central Tracing Agency (C. III, Art. 122).

## **II. ICRC prerogatives**

### **Work of the Central Tracing Agency**

The Central Tracing Agency centralizes all the information it can obtain about prisoners of war through official or private

channels (C. III, Art. 123). This information is intended for the prisoners' Power of origin or the Power on which they depend.

### **The powers of delegates**

ICRC delegates are entitled to visit prisoners of war at all times and in all places, to speak with them without witnesses and consequently to register them (C. III, Art. 126).

## *III. Prerogatives of the Protecting Power*

Representatives of the Protecting Power have the same prerogatives as those of the ICRC delegates (C. III, Art. 126).

## C. CIVILIAN INTERNEES

### *I. Obligations of Powers responsible for internment*

#### **Identification**

Any person, in particular any person protected by the Fourth Convention, who, because of hostilities or occupation, is kept in custody for more than two weeks, subjected to assigned residence or interned, must be identified and the following information must be recorded: names, first names, place and full date of birth, nationality, latest place of residence, distinguishing characteristics, the names and first names of the father and of the mother, state of health, date, nature and place of the measure taken concerning him, address to which correspondence can be sent to him and address of the person to be notified (C. IV, Arts. 43, 136, 138; P. I. Art. 33).

#### **Deaths of internees**

Deaths of internees must be certified in every case by a doctor and a death certificate must be made out showing the causes of death and the conditions under which it occurred. An official and duly registered record of the death must be drawn up in conformity with the procedure in force in the territory where the place of internment is situated. A certified copy of this record must be sent to the Central Tracing Agency and to the Protecting Power (C. IV, Arts. 129, 131; P. I, Art. 33).

### **Internment card**

Every internee must be enabled, upon internment or within one week of his arrival in a place of internment, likewise in the event of sickness or transfer, to send an internment card to his family and to the Central Tracing Agency (C. IV, Art. 106; Annex III).

### **Prohibited identification**

Identification by tattooing or imprinting signs or markings on the body is prohibited (C. IV, Art. 100).

### **Transfers**

A complete list of all internees transferred must be drawn up before their departure (C. IV, Art. 127).

### **National Information Bureaux**

Each national Bureau must collect information concerning persons protected by the Fourth Convention and send it to the Powers concerned through the intermediary of the Protecting Power and the Central Tracing Agency. It must reply to enquiries it receives concerning them (C. IV, Art. 127).

### **Prohibited communications**

The national Bureaux must not communicate information which might be detrimental to the person concerned or to his or her relatives. Even in such a case, however, the information may not be withheld from the Central Tracing Agency (C. IV, Art. 137).

## **II. *ICRC prerogatives***

See paragraph on prisoners of war (C. IV, Arts 140, 143). The Central Tracing Agency must not communicate information which might be detrimental to the persons concerned or to their relatives (C. IV, Art. 140).

## **III. *Prerogatives of Protecting Powers***

See paragraph on prisoners of war (C. IV, Art. 143).

**J. de Preux**  
*Legal Adviser at the ICRC*

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# INTERNATIONAL COMMITTEE OF THE RED CROSS

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## **ICRC 'hot line' for journalists on dangerous professional missions**

Concerned by the increasing hazards facing journalists on professional missions, the ICRC will try to intensify its efforts on their behalf as persons protected by international humanitarian law applicable in armed conflicts, in conformity with the humanitarian mandate vested on it by the international community. A 'hot line' has now been put into service at the ICRC, so that the editors and professional organizations concerned can rapidly contact it and request its aid in case of need.

The ICRC can take various forms of action, such as tracing missing journalists, registering and transmitting to their families and the professional organizations concerned all information received after notification of their capture or arrest, asking permission for an ICRC delegate to visit them if they are kept in detention, and exchanging messages between detained journalists and their families.

The 'hot line' has been set up in response to a specific request made at a round-table meeting on "the safety of journalists on dangerous professional missions", which was held in April 1985 at Mont-Pélerin, in Switzerland, under the auspices of the ICRC. This meeting was attended by the representatives of 16 international media organizations. (*See International Review of May-June 1985*).

To inform press members and national and international media organizations about the new 'hot line' and how to use it, the ICRC has published a pamphlet setting forth the possibilities of ICRC action and practical ways in which it hopes to protect and assist journalists who fall victim to situations of armed conflict, but also explaining the limits and obstacles that can slow down or even prevent its active intervention.

*(This pamphlet can be obtained from the ICRC Publications and Documentation Service, 17, avenue de la Paix, CH-1202 Geneva, Switzerland.)*

## **Seminar on “The Journalist and International Humanitarian Law”**

The first seminar organized jointly by the Union of African Journalists (UAJ) and the ICRC on the subject “The Journalist and International Humanitarian Law” was held in Nairobi (Kenya) from 16 to 20 September 1985. This event, which was the result of the close co-operation established between the ICRC and the UAJ following a mission to Cairo on 20 October 1984 by Mr Alain Modoux, head of the ICRC Information Department, had several objectives:

- to introduce African journalists to international humanitarian law and to inform them of the activities of the ICRC;
- to examine, in the light of the humanitarian problems in Africa, the role of the media in sensitizing public opinion and promoting humanitarian rules;
- to take stock of the situation with regard to the protection of journalists in their work.

About forty journalists from twenty-eight French-speaking, English-speaking and Portuguese-speaking African countries participated in the seminar along with representatives of the Africa Press Service and the Panafrican News Agency, members of the League of Red Cross and Red Crescent Societies and experts from specialized organizations of the United Nations (UNHCR, UNDRO, UNESCO, UNICEF, FAO) and the Arab League (Arab League Educational, Cultural and Scientific Organization—ALECSO). The ICRC delegation was led by the head of the Information Department.

Throughout the week a series of lectures illustrated by films and followed by lively discussions were given on various subjects: the African journalists were introduced to international humanitarian law and the Red Cross (its principles, organization and mandate); a general survey was given of the ICRC’s activities in Africa both under the Conventions and in situations not covered by their provisions, and the main problems it encountered were described; a round-table discussion was held on the coordination of humanitarian operations by inter-governmental organizations and by the Red Cross in Africa, and finally questions were debated of very direct concern for media representatives, namely the part that journalists can play in promoting respect for international humanitarian law and the spirit of peace, and the protection of journalists in their work.

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## Death of Miss Monique Katz

The ICRC has learnt with deep regret of the death on 29 October 1985 of Miss Monique Katz, the former Assistant Director of the Central Tracing Agency and a faithful staff member for nearly forty years.

Miss Katz, who joined the ICRC on 20 October 1940, was first assigned to the French card index, then appointed head of section for Italian internment in Switzerland. She became assistant head of the Agency's Italian service in 1945, then head in 1954. Afterwards she spent part of her time working with the International Review of the Red Cross and in the Information Department.

She was appointed Deputy Director, then Assistant Director of the Agency, which had, in the meantime, become the Central Tracing Agency, and, in her expert capacity, was a member of the ICRC delegation to the Diplomatic Conference on the Reaffirmation and Development of International Humanitarian Law (1974-1977).

She carried out several missions abroad, especially to Italy, and was made a Knight of the Order of the Italian Republic for her cultural activities and awarded the gold medal of the Italian Red Cross.

At the funeral ceremony, Mr. J. Pictet, Honorary Vice-President of the ICRC, paid a final tribute: *« With her death, a great lady of the Red Cross family has passed away... one of the last witnesses of the humanitarian work accomplished during the Second World War. How many times did her colleagues disturb her, even after her retirement, to get information about that period, information which survives only in the memory of those who actually experienced the events. The world of the Red Cross will never forget this loyal and generous colleague, and I am sure that the thoughts and ideas of this exceptional woman will live on in the publications and studies she has left to us ».*

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*EXTERNAL ACTIVITIES**September-October 1985***Africa****Angola**

The ICRC having been invited as an observer to the ministerial conference of the non-aligned countries, held in Luanda from 2 to 7 September, Mr. Jean-Pierre Hocké, Director for Operational Activities at the ICRC, and Mr. Jean-Marc Bornet, delegate-general for Africa, were received by Mr. José Eduardo Dos Santos, President of the People's Republic of Angola. This meeting provided an opportunity for reviewing the assistance activities undertaken by the ICRC in aid of populations displaced by the fighting in several regions of the country.

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On 18 September, following an incident in which an ICRC aircraft was damaged and a locally recruited ICRC employee killed by a mine planted on the runway at Chitembo, relief operations were suspended in the province of Bié ("Planalto" region) until the ICRC could obtain the necessary guarantees concerning the safety of Red Cross personnel. The ICRC nevertheless continued to build stocks and organize shipments of foodstuffs and seed by transport aircraft from the port of Lobito to the province of Huambo from where the towns in the region were supplied by light aircraft and occasionally by road.

In September, 397.5 tonnes of foodstuffs were distributed to some 37,200 persons. In October, 1,317 tonnes of food and seed were provided to 169,425 persons.

In the context of medical assistance, an average of 900 children suffering from malnutrition were being treated at five ICRC feeding centres. In addition, ICRC medical staff gave 351 consultations, organized the evacuation of 138 persons, who had been wounded in fighting or were otherwise seriously ill, to outlying hospitals, and returned to their homes 216 patients who had completed their treatment. The orthopaedic centre in Bomba Alta, staffed by two prosthetic technicians and a physiotherapist from the ICRC, fitted 93 amputees with prostheses and repaired 1,082 orthopaedic items.

Finally, the ICRC Tracing Agency in Angola dealt with requests for news concerning 32 persons in September and October. In addition, it reunited 25 families, received 35 Red Cross messages and passed on 21 of them.

### **Republic of South Africa**

From 2 to 24 September, ICRC delegates carried out their annual series of prison visits in South Africa. They were permitted access to nine places of detention where they saw, in accordance with established criteria, 309 sentenced prisoners and seven persons being held under Section 28 of the "Internal Security Act".

The delegates carried on their assessment tour in the regions of the Cape, Port Elizabeth, East London, Durban, Kwandelebe, Gazankulu and Johannesburg, in order to determine the needs of the victims of the current situation.

The delegation in Pretoria continued its assistance programmes in which 423 food parcels were provided to former detainees or to the families of current detainees who are in need. Various other relief articles worth a total of 51,000 Swiss francs were distributed during September and October. The ICRC also supplied blankets and cooking utensils (to the value of 35,500 Swiss francs) to refugees from Mozambique living in the "homeland" of Gazankulu.

### **Namibia/South-West Africa**

At Windhoek prison, on 26 September, ICRC delegates visited 21 Namibian prisoners and detainees who had been transferred there from two places of detention in South Africa. This came after much effort by the ICRC to have them transferred in order to

enable the detainees' families—most of whom live in northern Namibia—to visit them.

In the continuing programme to assist detainees, former detainees and detainees' families who are in need, the ICRC provided, in September and October, 128 food parcels and various relief articles to the value of 8,500 Swiss francs. Some four tonnes of enriched food, worth 4,700 Swiss francs, were provided to school-children suffering from malnutrition.

## **Ethiopia**

The relief operation launched jointly by the ICRC and the Ethiopian Red Cross Society to assist persons affected by the drought and the conflict in Ethiopia continued to be carried out with great energy during September and October. In September, the amount of foodstuffs distributed by the ICRC rose to 10,082 tonnes and reached 731,612 persons in Eritrea, Tigray, Wollo, Gondar and Hararge. In October, 10,503 tonnes went to 863,926 persons, bringing to 82,735 tonnes the total quantity of foodstuffs distributed since the beginning of the year.

The nine therapeutic feeding centres run by the ICRC in Tigray and Eritrea admitted 1,632 undernourished children in September and 1,825 in October. In addition to medical attention, these patients, according to their condition, receive between four and six meals per day.

In order to disseminate the basic rules of humanitarian law and Red Cross principles and ideals, the ICRC organized, in September and October, 85 lecture-discussions which were attended by various types of audiences, totalling 75,000 persons, in Addis Ababa, Wollo, Hararge, Sidamo and Bale.

## **Uganda**

The main activities of the ICRC in Uganda were impeded during September because of unsafe conditions, especially along the Bombo and Hoima roads in the region known as the "Luwero triangle".

During the month of October, ICRC delegates took steps to explain to the highest Ugandan authorities the role of the ICRC and obtain from them guarantees of access to the victims of the

conflict. Relief supplies were distributed to small groups of displaced persons in Luwero, Kibizi, Nakazi and in the Kampala region to the east of Bombo. About sixty persons, mostly women and children, were transferred from Luwero to Kampala under the auspices of the ICRC.

In spite of the security imperatives which hampered its movements, the ICRC provided some 70 tonnes of food and other relief supplies (blankets, soap, etc.) to displaced populations during September and October.

Basic medicaments and bandages were distributed to three dispensaries serving some thousand displaced persons in Bamunika and Zirowwe. In addition, a dispensary was opened in Luwero (a region having no medical infrastructure), which the ICRC equipped with medicaments and to which it sent a medical team once a week to give consultations. The dispensary serves about 4,000 displaced persons.

Finally, while travelling in connection with protection and relief activities ICRC delegates gathered family messages and tracing requests and reunited several families whose members had been living in the "triangle".

## **Zaire**

In September, ICRC delegates in Zaire twice visited two places of detention in Kinshasa where they saw 165 detainees. In the same period, they had access to 259 persons being held in four places of detention in Lubumbashi. In October, four visits were made to three places of detention in the capital where 44 detainees eligible for ICRC protection were held.

Relief articles and medical assistance were provided to detainees and members of their families in need.

## **Latin America**

### **Missions by the Delegate-General**

From 21 September to 4 October, Mr. André Pasquier, the ICRC's delegate-general for Central America and the Caribbean, undertook a mission to *Costa Rica*, *El Salvador* and *Nicaragua*.

In San José, Mr. Pasquier met with the regional delegation based there to take stock of the ICRC's activities. In San Salvador, he met President Napoleon Duarte, the Minister and Deputy Minister of Defence and the Chief of Staff of the armed forces. Finally, in Managua, he had talks with the Deputy Minister of Foreign Affairs, among others.

### **El Salvador**

During September, ICRC delegates visited 222 security detainees in the course of 122 visits carried out in places of detention under the jurisdiction of the Ministries of Justice and Defence. In October, the delegates were allowed access to the same number of detainees during 104 visits which were carried out in accordance with the ICRC's established criteria.

Elsewhere, following the abduction on 10 September of Mrs. Inés Guadalupe Duarte, the daughter of the President of the Republic of El Salvador, and one of her friends, the ICRC was asked by the parties concerned to carry out the practical terms of the agreement concluded on 22 October between the Salvadorian government and the Farabundo Marti National Liberation Front (FMLN). This agreement provided, on the one hand, for the simultaneous release of President Duarte's daughter and that of FMLN members held by the government and, on the other, for the freeing of 23 mayors and municipal officials who had been captured by the guerillas, in exchange for the evacuation to other countries of a number of seriously wounded guerillas. And so, on 24 October, as Inés Duarte and her friend were set free, 18 detainees were released by the government and transferred by the ICRC to Tenancingo, while four others were taken to the embassies of Panama and Costa Rica in San Salvador. The wounded, 101 in all, were picked up at twelve different points and taken to the airport in San Salvador where, accompanied by ICRC medical personnel, they boarded two planes, one bound for Panama, the other for Mexico City. Finally, the 23 mayors and municipal officials were freed, again with the ICRC acting as intermediary. This operation necessitated the use of all of the ICRC delegation's personnel and logistical resources, backed up by ambulances and staff from the Salvadorian Red Cross Society.

The ICRC distributed 590 tonnes of food aid in September to 99,000 civilians affected by the fighting. In October, however, the

programme was disrupted by violent clashes and traffic restrictions imposed by the opposition movements. In all, 319 tonnes of foodstuffs were distributed to 49,000 persons.

Medical teams from the ICRC and the Salvadorian Red Cross Society, based in San Salvador and San Miguel, continued to make "sorties" into areas requiring medical assistance, where they treated the sick and distributed medicaments and other medical supplies according to need. In September they gave 6,845 medical and 908 dental consultations and, in October, 1,880 medical and 171 dental consultations.

## Nicaragua

In September, ICRC delegates visited the provincial prisons of Juigalpa, Granada, Esteli, Chinandega and Matagalpa. There they interviewed without witness 186 security detainees and registered seven new detainees. Medical delegates gave consultations to 115 detainees. Some 59 tonnes of relief supplies, worth 146,000 Swiss francs, were provided as part of the programme of assistance for detainees and their families.

Between 8 October and 1 November, ICRC delegates visited the "Zona Franca" penitentiary in Managua. They saw 566 detainees, 230 of whom were given medical consultations. The aid provided to detainees and their families during this period amounted to 91 tonnes (worth 250,000 francs).

Some 800 Red Cross messages were collected and distributed by the ICRC Tracing Agency's office in Managua. Most of these were for detainees and their families.

In addition, the ICRC, in conjunction with the Nicaraguan Red Cross, continued its programme to assist displaced persons in the regions along the Atlantic coast. Thus, 65 tonnes of relief supplies (foodstuffs, blankets, cooking utensils) worth 112,000 Swiss francs were distributed in September and October to some 4,000 persons. Displaced populations were provided with a further 79 tonnes of relief supplies worth 161,000 Swiss francs by the ICRC in co-operation with the Nicaraguan Institute for Social Welfare (INSSBI) and the National Society.

## **Asia-Pacific**

### **Conflict in Afghanistan**

A Soviet soldier, who had been captured in Afghanistan by Afghan opposition movements and transferred to Switzerland by the ICRC, decided to return to the Soviet Union after reaching the end of the two-year period of internment agreed to by all the parties concerned. He left Switzerland on 23 October.

As of 31 October 1985, two Soviet soldiers remained interned in Switzerland.

### **Pakistan**

The ICRC delegation in Peshawar decided to launch an emergency operation to meet the medical needs of a wave of Afghan refugees wounded in the fighting taking place in their country's interior. On 6 September, a fully equipped field hospital, which had been provided by the Norwegian Red Cross, was set up in Hayatabad, a suburb of Peshawar. It went into operation 48 hours later. Two Scandinavian surgical teams, assisted by seven nurses from the Danish Red Cross and the New Zealand Red Cross, worked round the clock performing minor operations on patients transferred from the main ICRC hospital, which was filled to capacity. During September, 268 wounded were admitted to the Peshawar hospital, 130 of them being transferred to the field hospital. In all, 747 operations were carried out. The two hospitals performed 499 operations during October.

The surgical hospital in Quetta admitted 98 wounded persons in September and October. In this period, 235 operations were performed and 950 outpatients given treatment.

The six ambulance teams, which are run by the Pakistan Red Crescent Society with financial support from the ICRC, continued to transport wounded Afghans to the ICRC hospitals in Peshawar and Quetta. Each of the teams has an ambulance equipped for first aid and the treatment of minor injuries. They are posted in Parachinar, Miram Shah, Wana, Khar, Chaman and Badini—the main crossing points between Afghanistan and Pakistan. In September and October these teams treated 397 wounded, 296 of whom they transported to ICRC hospitals.

In addition, 23 patients were admitted in September and October to the ICRC centre for paraplegics in Peshawar. This brought to 513 the number of paraplegics who have come to the centre since it was opened in September 1981.

### **Khmer-Thai Border**

In spite of the relative calm along the Khmer-Thai border during September and October, medical staff supplied to the ICRC by the Austrian, Danish, Finnish and Icelandic Red Cross, the German Red Cross in the Federal Republic of Germany and the British Red Cross Society continued to work steadily in the Khao-I-Dang hospital, where the number of patients rose to 313, of whom 94 had been wounded in the fighting. The Australian and Japanese Red Cross Societies made a monthly contribution of 400 and 100 units of blood respectively to the ICRC blood bank in Khao-I-Dang.

Medical teams from the Thai Red Cross Society continued to assist Khmer refugees and the civilian Thai population in the border area. From 21 August to 20 October, the teams treated 45,745 patients, 35,097 of them Khmer.

The ICRC Tracing Agency in Thailand exchanged 8,213 letters between refugees and their families living either in other border camps or in other countries. It also received 1,912 tracing requests, transferred 56 persons from one camp to another and arranged for 50 families to be reunited. The Tracing and Mailing Service, which was set up by the Thai Red Cross Society and deals with Vietnamese "boat people", received 159 requests for news and forwarded 303 letters.

ICRC delegates distributed relief supplies worth 12,200 Swiss francs in the refugee camps and the prison in Aranyaprathet. These consisted mainly of toilet articles and cleaning products, bedding, cooking utensils and clothing.

### **Kampuchea**

As part of its assistance programme, the ICRC continued to provide medicaments and other medical supplies to the three hospitals and the blood bank in Phnom Penh and to the provincial hospitals in Kandal, Kompong Speu, Kompong Chnnang and Kompong Cham. The aid provided during September and October was worth a total of 140,000 Swiss francs.

Aid was also provided to two particularly needy orphanages in Kompong Cham and Kompong Chnnang.

In addition, the ICRC flew 5 tonnes of relief supplies from Bangkok to Phnom Penh via Ho Chi Minh City and sent three tonnes of equipment by sea from Singapore to Kampuchea.

## **Philippines**

On 18 September, ICRC delegates completed their tour of visits to places of detention in region 10 (northern Mindanao) which they had begun in August. They had access to 107 persons in 25 places of detention.

From 1 to 23 October, 29 detainees were seen in six places of detention in region 3 (the provinces of Zambales, Tarlac, Pampanga, Bulacan, Nueva Ecija and Bataan, north of Manila). In the same month, visits also began in region 11 (eastern Mindanao) and were to continue until the end of November. At the end of October, ICRC delegates had visited 199 persons in 12 places of detention in the region.

It should be noted that these visits were conducted in accordance with the ICRC's established criteria.

## **Taiwan**

Six Taiwanese fishermen who had been shipwrecked in the East China Sea on 31 August returned on 14 October from Beijing to Taipei via Hong Kong, under the auspices of the ICRC. The six men, three of whom had been seriously injured in the accident, were handed over by the Red Cross Society of China to an ICRC delegate sent from Geneva. The head of the ICRC regional delegation based in Manila was present when they arrived in Taipei.

It should be noted that it was at the request of all the parties concerned that the ICRC acted as intermediary in this operation.

## **Middle East**

### **Lebanon**

In September and October, the ICRC in Lebanon was active essentially in providing assistance to victims of the violent clashes between rival factions in Tripoli (northern Lebanon) which resulted in many dead and wounded and forced thousands of families to flee.

ICRC delegates made regular assessment tours of the hospitals and dispensaries in Tripoli where the wounded were being treated. There they delivered medical supplies according to need and to the extent that transport was available. The severity of the fighting,

however, often forced them to remain in their shelter where they set up a first-aid post and endeavoured to maintain contact with the medical treatment centres in order to provide them with emergency medical supplies.

Throughout the fighting, ICRC delegates attempted to negotiate the passage of a convoy in order to evacuate the wounded. Finally, on 5 October, the convoy entered Tripoli. It was made up of six ICRC vehicles, including two trucks loaded with medical supplies and medicaments, and 10 ambulances from the Lebanese Red Cross. There were also about fifty persons on board—a surgical team sent by the Danish and Finnish Red Cross, delegates and first-aid workers. Thirty-nine wounded were immediately evacuated by the ambulances. The surgical team was based at the Islami hospital, which was declared neutral and placed under Red Cross protection. The team went straight to work, co-ordinating its activities with the medical personnel already there. Within several days it had carried out twenty operations and treated fifty other patients. By 9 October, relative calm had returned and the ICRC surgical team was relieved by Lebanese medical personnel.

In addition, a field hospital which had been provided to the ICRC in 1982 by the German Red Cross in the Federal Republic of Germany and held in reserve at Zahlé (Bekaa) was brought to northern Lebanon and set up 5 km south of Tripoli. The hospital, which is equipped for minor surgery and has 80 beds, treated wounded and sick persons evacuated from Tripoli. It was dismantled on 8 October and returned to Zahlé. Those still in need of treatment were then transferred either to the Islami hospital or to other treatment centres.

The Lebanese Red Cross, for its part, operated its first-aid posts in Tripoli throughout the fighting, even though two of them had been hit by shellfire. The first-aid workers carried out their mission with admirable dedication. Tragedy struck when, while taking part in the evacuation of wounded, a volunteer from the National Society was fatally injured by a shell fragment.

The medical assistance (emergency kits, medicaments and medical supplies) provided by the ICRC in and around Tripoli was valued at 100,820 Swiss Francs. In addition, 400 units of blood were given by the German Red Cross in the Federal Republic of Germany and the Swiss Red Cross in response to a request from the Lebanese Red Cross.

ICRC relief operations assisted several thousand displaced persons both in the city itself and in nearby suburbs. Foodstuffs and

blankets were also provided to hospitals and dispensaries which were left with no other source of supply, the city having been cut off from the rest of the country. In September and October, the ICRC gave some 14,100 family parcels (basic foodstuffs, soap, candles) and 27,055 blankets to around 77,500 persons. This assistance was valued at 650,000 francs.

In addition to the medical activities carried out in Tripoli and area, the ICRC continued regularly to visit the hospitals of Beirut and to provide them with medical supplies. The medical delegates also carried on their assessment tours in the regions of Sidon, Tyre and Jezzine. In September and October, 547 standard emergency units, worth 192,000 Swiss francs, as well as medical supplies and medicaments worth 155,000 francs were delivered to a dozen hospitals and 20 dispensaries across Lebanon.

The ICRC also distributed relief supplies (foodstuffs, blankets) to 2,500 members of families which had sought refuge in southern Lebanon after fleeing fighting in the Palestinian camp of Bourj Brajneh south of Beirut in mid-September.

Finally, the ICRC Tracing Agency's offices in Lebanon transmitted 2,473 Red Cross messages in September and October, mostly concerning civilians affected by the events in Tripoli and their families. It also dealt with 15 enquiries concerning missing persons and organised 119 transfers of persons and repatriations.

### **Conflict between Iran and Iraq**

In activities related to the conflict between Iran and Iraq, the ICRC continued regularly to visit the Iranian prisoners of war in *Iraq*. However, it is still not able to carry out its visits to camps holding Iraqi prisoners of war in *Iran*, visits which were suspended by the Iranian authorities more than a year ago.

In the course of a complete series of visits which ended in late October, the ICRC delegates in Baghdad visited 9,832 Iranian prisoners of war in nine camps and four hospitals. Since the beginning of hostilities in September 1980, the ICRC has registered 10,552 Iranian prisoners of war in Iraq.

In addition, from 30 September to 4 October, the ICRC delegates visited Iranian civilians from Khuzistan interned in the Meisan region. There they transmitted some 5,000 family messages from Iran.

On three occasions in September and October, prisoners of war were repatriated. On two occasions the prisoners of war were

Iranian, on the third, Iraqi. On 5 September, 28 Iranian POWs, selected by a mixed medical commission, were released by Iraq and repatriated under the auspices of the ICRC. ICRC delegates accompanied them from Baghdad to Ankara, where they handed them over to representatives of the Iranian authorities. An Iranian aircraft then took the freed prisoners, still accompanied by ICRC delegates, to Teheran. Iran, for its part, unilaterally repatriated 104 Iraqi prisoners via Ankara on 2 October with the co-operation of the Turkish Red Crescent Society. Finally, on 9 October, the ICRC organized the repatriation of 55 Iranian prisoners of war. Accompanied by ICRC delegates, they were brought by an Iraqi aircraft to the Turkish capital, where they were handed over to representatives of the Iranian authorities who had come from Teheran together with an ICRC delegate. An Iranian aircraft then took the released prisoners to Teheran, following the same procedure as on 5 September, again with the close co-operation of the Turkish Red Crescent Society.

During September and October, 104,848 family messages between Iranian prisoners of war and their families, and 171,898 messages between Iraqi prisoners of war and their families were exchanged through the Central Tracing Agency at ICRC headquarters in Geneva.

## Europe

### Missions by the Delegate-General

— From 9 to 13 September Mr Peter Küng, delegate-general of the ICRC for Europe and North America, went on mission to Czechoslovakia to make contact with government authorities and leaders of the National Society of the Red Cross. Mr Küng met the Deputy Minister for Foreign Affairs, among others, and participated in a Red Cross Day held in Prague, during which he made a speech about the activities of the ICRC. Accompanied by the Vice-President of the National Society, the ICRC delegate-general also visited Bohemia where he met numerous representatives of local sections of the Red Cross.

— Mr Küng spent September 24 and 25 in London where he had a long discussion meeting with the new Chairman of the British Red Cross, Lady Limerick, and the new Director-General, Mr J. Burke-Gaffney. The ICRC delegate-general also had the opportunity to meet Mr James Lester, M.P., member of the Foreign Affairs Committee.

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## **Ninth Award of the Henry Dunant Medal**

At its meeting on 25 October 1985 in Geneva the Standing Commission of the International Red Cross decided to award the Henry Dunant Medal to Dr Olga Milosevic of the Red Cross of Yugoslavia and to Mr Tom Willmott Sloper of the Brazilian Red Cross.

Dr Olga Milosevic is a member of the Presidential Commission for Health and Environment of the Assembly of the Yugoslav Red Cross and of the Yugoslav Red Cross training centre for personnel from National Societies of developing countries. She held the position of Secretary General of the Yugoslav Red Cross from 1947 to 1963.

Mr Tom Willmott Sloper is a member of the National Committee of the Brazilian Red Cross and a member of its Finance Commission. He was also a member of the Standing Commission of the International Red Cross for several years and has played a very active role in the latter's development.

The Henry Dunant Medal is intended to acknowledge and reward exceptional services or acts of great devotion to the Red Cross performed by one of its members. It is the highest distinction awarded by the Red Cross. In principle the regulations permit it to be awarded to only five people every two years, but also allow the Standing Commission to reduce this number, or in exceptional cases to increase it.

Established by the Twentieth International Red Cross Conference in Vienna in 1965 and awarded for the first time on the occasion of the Twenty-first International Red Cross Conference in Istanbul in 1969, the Henry Dunant medal has been awarded to forty-one people, twelve being awarded posthumously.

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## **Centenary of the Costa Rica Red Cross**

*Earlier this year, the Costa Rica Red Cross celebrated its hundredth anniversary. The ICRC delegated one of its members, Dr. Athos Gallino, to represent it at the jubilee festivities which took place in early May. In the speech he delivered on that occasion in San*

*José before the Costa Rican governmental authorities and the President of the Republic, Dr. Gallino conveyed the ICRC's congratulations and good wishes to the Costa Rica Red Cross, with which the ICRC has very special bonds of friendship and co-operation.*

*The International Review wishes to take this opportunity also to convey to the Costa Rica Red Cross its best wishes and sincere congratulations.*

### **Speech delivered by Dr. Gallino for the Centenary of the Costa Rica Red Cross**

It is a great pleasure for me to celebrate with you, dear friends of the Costa Rica Red Cross, the hundredth anniversary of your National Society. It is furthermore an honour for me to attend the jubilee festivities as the representative of the International Committee of the Red Cross, the founder body of the Red Cross movement and in a way the "father" of the existing 136 National Societies, since it has the task, and the privilege, of granting them official recognition.

The President of the ICRC would have liked to express personally the high esteem in which he holds your Society and its achievements. Unfortunately, previous commitments have prevented him from being here today and he has asked me to convey to you the ICRC's message of friendship and his own admiration for your National Society's steadfast endeavours over a whole century to alleviate the suffering of the wounded, the sick and the victims of all kinds of disasters.

As has been the case in many other countries, the decision to set up a Red Cross Society in Costa Rica was taken under the pressure of events.

In early April 1885, several countries in Central America were at war, and the conflict—with all the hate, violence and cruelty such a situation usually engenders—was threatening to spread to Costa Rica as well. In that atmosphere of extreme tension, Bernardo Soto, then President of the Republic, decided to set up a Red Cross Society. The magnanimity and humanity of his decision are in such complete contrast to the passions then prevailing that it is well worth while to call to mind its wording:

*"... whereas, considering the present state of war in Central America, it is deemed humanitarian and proper to set up in the*

*Republic of Costa Rica a Red Cross Society in accordance with the Geneva Convention...*

*a Red Cross Society is hereby founded in the Republic of Costa Rica... Its object is to evacuate and care for sick and wounded members of the armed forces, to whatever belligerent party they may belong..."*

As can be seen, Henry Dunant's message of peace and solidarity with the wounded no longer able to fight, his appeal to care for them whatever side they belong to, had not only been heard in Costa Rica, but was actively supported and relayed by your country's highest authorities which upheld the provisions of the first Geneva Convention of 1864.

Fortunately, the war which threatened Costa Rica ended before your country was drawn into it.

After the First World War, in the wake of the terrible influenza epidemic which caused thousands of deaths in Costa Rica and in Europe, your Society set up a permanent structure and became international in its activities: it sent delegates to several American and European countries and, above all, it generously participated in relief operations for the victims of disasters in several other countries. Let us mention, for example, the donation sent in 1921 via the Spanish Red Cross to the wounded in Melilla, the funds raised in 1922 for the victims of an earthquake in El Salvador, for the starving children in Russia, etc.

At that time, your Society expanded rapidly and applied for recognition by the ICRC and for official membership in the family of the International Red Cross.

Fully aware of your Society's increasing activities and convinced of its firm allegiance to our movement's fundamental principles, the ICRC was happy to recognize it formally on 16 March 1922, a few days before it was granted membership of the League and took part as a full member in the Second Session of the League's General Council on 27 March 1922.

Your Society can rightly be proud of its achievements. Yet we know that its future goals are even more ambitious.

I am particularly happy that my presence here with you today, on this felicitous occasion, enables me to bear witness to the close ties which have been established between your Society and the ICRC, particularly in recent years, and to mention a few milestones in our fruitful co-operation.

One of the first was probably our collaboration in 1972 which, with your Society's dedication and the medicaments supplied by

our institution, made it possible to provide assistance to people wounded in the civil war in Nicaragua. In 1979, when the deterioration of the situation in Nicaragua made it necessary to set up and run an ICRC operational base at San José, in Costa Rica, your Society's full support was indispensable to the success of the operation.

A little later, in 1982, when the ICRC approached the Costa Rican government with a view to opening its delegation in San José, the support of your Society and of its President, Don Miguel Carmona Jiménez, was decisive.

Finally, in 1984, our joint co-ordination programme to develop the operational capacity of eight Red Cross branches situated along the border between Costa Rica and Nicaragua further strengthened our co-operation.

It is necessary to call to mind your Society's noble activities which, through its 90 branches, extend over the entire territory of Costa Rica: running the blood bank, providing the country's most efficient ambulance service, not to mention the brigades of voluntary doctors and first-aid workers, the training programme, the committee of voluntary ladies and the reserve brigade. In this hospitable country, this land of refuge, so many men and women are conscious of their duty to show solidarity that your National Society can look forward with assurance to its second century of activity.

Confident of this, the President of the International Committee of the Red Cross, my colleagues and I express to you today our best wishes for the future. May the Costa Rica Red Cross, through its relief work on behalf of those who suffer, continue to be a powerful factor for peace among men and among nations.

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## BOOKS AND REVIEWS

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«DISSEMINATION»,  
*a specialized magazine of the Red Cross and  
Red Crescent Movement*

Last April the first issue of a new ICRC specialized publication entitled «*Dissemination*» appeared. Its aims are:

- To promote the dissemination of knowledge of international humanitarian law and the principles and ideals of the Red Cross and Red Crescent Movement;
- To support efforts by disseminators;
- To publicize what has been produced on dissemination;
- To promote the exchange of ideas, products, experience, know-how and information about dissemination amongst Red Cross and Red Crescent Societies.

«*Dissemination*» is directed at all those people who on account of their position or interest in the Movement would be likely to transmit knowledge of international humanitarian law and the Institution's principles and ideals to its readers in various sectors of the public: Red Cross and Red Crescent Societies, the armed forces, academic, medical and diplomatic circles, young people, the mass media, etc.

The magazine comes out three times a year in French, English and Spanish. The ICRC will send free copies to anyone on request.

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## ADDRESSES OF NATIONAL SOCIETIES

- AFGHANISTAN (Democratic Republic) — Afghan Red Crescent, Puli Artan, *Kabul*.
- ALBANIA (People's Socialist Republic) — Albanian Red Cross, 35, Rruga e Barrikadavet, *Tirana*.
- ALGERIA (Democratic and People's Republik) — Algerian Red Crescent Society, 15 bis, boulevard Mohamed V, *Algiers*.
- ARGENTINA — Argentine Red Cross, H. Yrigoyen 2068, 1089 *Buenos Aires*.
- AUSTRALIA — Australian Red Cross, 206, Clarendon Street, *East Melbourne 3002*.
- AUSTRIA — Austrian Red Cross, 3 Gusshausstrasse, Postfach 39, A-1041, *Vienna 4*.
- BAHAMAS — Bahamas Red Cross Society, P.O. Box N 91, *Nassau*.
- BAHRAIN — Bahrain Red Crescent Society, P.O. Box 882, *Manama*.
- BANGLADESH — Bangladesh Red Cross Society, 34, Bangabandhu Avenue, *Dhaka 2*.
- BARBADOS — The Barbados Red Cross Society, Red Cross House, Jemmotts Lane, *Bridgetown*.
- BELGIUM — Belgian Red Cross, 98, chaussée de Vleurgat, 1050 *Brussels*.
- BELIZE — The Belize Red Cross Society, P.O. Box 413, *Belize-City*.
- BENIN (People's Republic) — Red Cross of Benin, B.P. 1, *Porto Novo*.
- BOLIVIA — Bolivian Red Cross, Avenida Simón Bolívar 1515, *La Paz*.
- BOTSWANA — Botswana Red Cross Society, Independence Avenue, P.O. Box 485, *Gaborone*.
- BRAZIL — Brazilian Red Cross, Praça Cruz Vermelha 10-12, *Rio de Janeiro*.
- BULGARIA — Bulgarian Red Cross, 1, Boul. Biruzov, *Sofia 27*.
- BURKINA FASO — Burkina Faso Red Cross, P.O.B. 340, *Ouagadougou*.
- BURMA (Socialist Republic of the Union of) — Burma Red Cross, 42, Strand Road, Red Cross Building, *Rangoon*.
- BURUNDI — Red Cross Society of Burundi, rue du Marché 3, P.O. Box 324, *Bujumbura*.
- CAMEROON — Cameroon Red Cross Society, rue Henry-Dunant, P.O.B. 631, *Yaoundé*.
- CANADA — Canadian Red Cross, 95, Wellesley Street East, *Toronto, Ontario M4Y 1H6*.
- CAPE VERDE (Republic of) — Cruz Vermelha de Cabo Verde, Rua Unidade-Guiné-Cabo Verde, P.O. Box 119, *Praia*.
- CENTRAL AFRICAN REPUBLIC — Central African Red Cross, B.P. 1428, *Bangui*.
- CHILE — Chilean Red Cross, Avenida Santa María 0150, Correo 21, Casilla 246V., *Santiago*.
- CHINA (People's Republic) — Red Cross Society of China, 53, Kannien Hutung, *Peking*.
- COLOMBIA — Colombian Red Cross, Avenida 68, No. 66-31, Apartado Aéreo 11-10, *Bogotá D.E.*
- CONGO (People's Republic of the) — Croix-Rouge congolaise, place de la Paix, B.P. 4145, *Brazzaville*.
- COSTA RICA — Costa Rican Red Cross, Calle 14, Avenida 8, Apartado 1025, *San José*.
- CUBA — Cuban Red Cross, Calle 23, No. 201 esq., N. Vedado, *Havana*.
- CZECHOSLOVAKIA — Czechoslovak Red Cross, Thunovska 18, 118 04 *Prague 1*.
- DENMARK — Danish Red Cross, Dag Hammarskjölds Allé 28, Postboks 2600, 2100 *København Ø*.
- DOMINICAN REPUBLIC — Dominican Red Cross, Apartado postal 1293, *Santo Domingo*.
- ECUADOR — Ecuadorian Red Cross, Calle de la Cruz Roja y Avenida Colombia 118, *Quito*.
- EGYPT (Arab Republic of) — Egyptian Red Crescent Society, 29, El-Galaa Street, *Cairo*.
- EL SALVADOR — El Salvador Red Cross, 17 Av. Norte y 7.ª Calle Poniente, Centro de Gobierno, *San Salvador*, Apartado Postal 2672.
- ETHIOPIA — Ethiopian Red Cross, Ras Desta Damtew Avenue, *Addis Ababa*.
- FIJI — Fiji Red Cross Society, 193, Rodwell Road, P.O. Box 569, *Suva*.
- FINLAND — Finnish Red Cross, Tehtaankatu, 1 A, Box 168, 00141 *Helsinki 14/15*.
- FRANCE — French Red Cross, 17, rue Quentin-Bauchart, F-75384 *Paris*, CEDEX 08.
- GAMBIA — The Gambia Red Cross Society, P.O. Box 472, *Banjul*.
- GERMAN DEMOCRATIC REPUBLIC — German Red Cross in the German Democratic Republic, Kaizerstrasse 2, DDR 801 *Dresden 1*.
- GERMANY FEDERAL REPUBLIC OF — German Red Cross in the Federal Republic of Germany, Friedrich-Ebert-Allee 71, 5300, *Bonn 1*, Postfach 1460 (D.B.R.).
- GHANA — Ghana Red Cross, National Headquarters, Ministries Annex A3, P.O. Box 835, *Accra*.
- GREECE — Hellenic Red Cross, rue Lycavittou, 1, *Athens 135*.
- GUATEMALA — Guatemalan Red Cross, 3.ª Calle 8-40, Zona 1, *Ciudad de Guatemala*.
- 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, 7.ª Calle, 1ª y 2.ª Avenidas, *Comayagüela D.M.*
- HUNGARY — Hungarian Red Cross, V. Arany János utca, 31, *Budapest V*, Mail Add.: 1367 *Budapest 5*, Pf. 121.
- ICELAND — Icelandic Red Cross, Nótúni 21, 105 *Reykjavik*.
- INDIA — Indian Red Cross, 1, Red Cross Road, *New Delhi 110001*.
- INDONESIA — Indonesian Red Cross, Manggala Wanabakti, 9th floor, Jalan Gatot Subroto, P.O. Box 2009, *Djakarta*.
- IRAN — Iranian Red Crescent, Avenue Ostad Nejatollahi, Carrefour Ayatollah Taleghani, *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, 1-3, Shiba-Daimon 1-chome, Minato-Ku, *Tokyo 105*.
- JORDAN — Jordan National Red Crescent Society, P.O. Box 10001, *Amman*.
- KENYA — Kenya Red Cross Society, St. John's Gate, P.O. Box 40712, *Nairobi*.
- KOREA (Democratic People's Republic of) — Red Cross Society of the Democratic People's Republic of Korea, *Pyeongyang*.
- KOREA (Republic of) — The Republic of Korea National Red Cross, 32-3Ka, Nam San-Dong, *Seoul*.
- KUWAIT — Kuwait Red Crescent Society, P.O. Box 1359, *Kuwait*.
- LAOS (Lao People's Democratic Republic) — Lao Red Cross, P.B. 650, *Vientiane*.
- LEBANON — Lebanese Red Cross, rue Spears, *Beirut*.
- LESOTHO — Lesotho Red Cross Society, P.O. Box 366, *Maseru*.
- LIBERIA — Liberian National Red Cross, National Headquarters, 107 Lynch Street, P.O. Box 226, *Monrovia*.
- LIBYAN ARAB JAMAHIRIYA — Libyan Arab Red Crescent, P.O. Box 541, *Benghazi*.
- LIECHTENSTEIN — Liechtenstein Red Cross, *Vaduz*.
- LUXEMBOURG — Luxembourg Red Cross, Parc de la Ville, C.P. 404, *Luxembourg*.
- MALAGASY REPUBLIC — Red Cross Society of the Malagasy Republic, rue Patrice-Lumumba, *Antananarivo*.
- MALAWI — Malawi Red Cross, Hall Road, *Blantyre* (P.O. Box 30080, Chichiri, *Blantyre 3*).
- MALAYSIA — Malaysian Red Crescent Society, National HQ, No. 32 Jalan Nipah, off Jalan Ampang, *Kuala Lumpur 16-03*.
- MALI — Mali Red Cross, B.P. 280, *Bamako*.
- MAURITANIA — Mauritanian Red Crescent Society, B.P. 344, Avenue Gamal Abdel Nasser, *Nouakchott*.

- MAURITIUS — Mauritius Red Cross, Ste Thérèse Street, *Curepipe*.
- MEXICO — Mexican Red Cross, Avenida Ejército Nacional N.º 1032, *México 10 DF*.
- 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, B.P. 189, *Rabat*.
- NEPAL — Nepal Red Cross Society, Tahachal, P.B. 217, *Kathmandu*.
- NETHERLANDS — Netherlands Red Cross, P.O.B. 30427, 2500 *GK The Hague*.
- NEW ZEALAND — New Zealand Red Cross, Red Cross House, 14 Hill Street, *Wellington 1*. (P.O. Box 12-140, *Wellington North*.)
- NICARAGUA — Nicaragua Red Cross, D.N. Apartado 3279, *Managua*.
- NIGER — Red Cross Society of Niger, B.P. 386, *Niamey*.
- NIGERIA — Nigerian Red Cross Society, Eko Akete Close, off St. Gregory Rd., P.O. Box. 764, *Lagos*.
- NORWAY — Norwegian Red Cross, Drammensveien 20 A, *Oslo 2*. Mail add.: *Postboks 2338, Solli, Oslo 2*.
- PAKISTAN — Pakistan Red Crescent Society, National Headquarters, Sector H-8, *Islamabad*.
- PAPUA NEW GUINEA — Red Cross of Papua New Guinea, P.O. Box 6545, *Boroko*.
- PANAMA — Panamanian Red Cross, Apartado Postal 668, Zona 1, *Panamá*.
- PARAGUAY — Paraguayan Red Cross, Brasil 216, *Asunción*.
- PERU — Peruvian Red Cross, Av. Camino del Inca y Nazarenas, Urb. Las Gardenias — Surco — Apartado 1534, *Lima*.
- PHILIPPINES — Philippine National Red Cross, Bonifacio Drive, Port Area, P.O. Box 280, *Manila 2803*.
- POLAND — Polish Red Cross, Mokotowska 14, *Warsaw*.
- PORTUGAL — Portuguese Red Cross, Jardim 9 Abril, 1 a 5, *Lisbon 3*.
- QATAR — Qatar Red Crescent Society, P.O. Box 5449, *Doha*.
- ROMANIA — Red Cross of the Socialist Republic of Romania, Strada Biserica Amzei, 29, *Bucarest*.
- RWANDA — Rwanda Red Cross, B.P. 425, *Kigali*.
- SAN MARINO — San Marino Red Cross, Palais gouvernemental, *San Marino*.
- SÃO TOMÉ AND PRÍNCIPE — Sociedade Nacional da Cruz Vermelha de São Tomé e Príncipe, C.P. 96, *São Tomé*.
- SAUDI ARABIA — Saudi Arabian Red Crescent, *Riyadh*.
- SENEGAL — Senegalese Red Cross Society, Bd Franklin-Roosevelt, P.O.B. 299, *Dakar*.
- SIERRA LEONE — Sierra Leone Red Cross Society, 6A. Liverpool Street, P.O.B. 427, *Freetown*.
- SINGAPORE — Singapore Red Cross Society, 15, Penang Lane, *Singapore 0923*.
- SOMALIA (Democratic Republic) — Somali Red Crescent Society, P.O. Box 937, *Mogadishu*.
- SOUTH AFRICA — South African Red Cross, 77, de Villiers Street, P.O.B. 8726, *Johannesburg 2000*.
- SPAIN — Spanish Red Cross, Eduardo Dato, 16, *Madrid 10*.
- SRI LANKA (Dem. Soc. Rep. of) — Sri Lanka Red Cross Society, 106, Dharmapala Mawatha, *Colombo 7*.
- SUDAN — Sudanese Red Crescent, P.O. Box 235, *Khartoum*.
- SWAZILAND — Baphalali Swaziland Red Cross Society, P.O. Box 377, *Mbabane*.
- SWEDEN — Swedish Red Cross, Box 27316, 102-54 *Stockholm*.
- SWITZERLAND — Swiss Red Cross, Rainmattstrasse 10, B.P. 2699, 3001 *Berne*.
- SYRIAN ARAB REPUBLIC — Syrian Red Crescent, Bd Mahdi Ben Barake, *Damascus*.
- TANZANIA — Tanzania Red Cross Society, Upanga Road., P.O.B. 1133, *Dar es Salaam*.
- THAILAND — Thai Red Cross Society, Paribatra Building, Chulalongkorn Memorial Hospital, *Bangkok*.
- TOGO — Togolese Red Cross Society, 51, rue Boko Soga, P.O. Box 655, *Lomé*.
- TONGA — Tonga Red Cross Society, P.O. Box 456, *Nuku'alofa*.
- TRINIDAD AND TOBAGO — Trinidad and Tobago Red Cross Society, Wrightson Road West, P.O. Box 357, *Port of Spain*, Trinidad, West Indies.
- TUNISIA — Tunisian Red Crescent, 19, rue d'Angleterre, *Tunis*.
- TURKEY — Turkish Red Crescent, Yenishir, *Ankara*.
- UGANDA — Uganda Red Cross, Plot 49, South Street, P.O. Box 494, *Kampala*.
- UNITED KINGDOM — British Red Cross, 9, Grosvenor Crescent, *London, S.W.1X 7EJ*.
- URUGUAY — Uruguayan Red Cross, Avenida 8 de Octubre 2990, *Montevideo*.
- U.S.A. — American National Red Cross, 17th and D. Streets, N.W., *Washington, D.C. 20006*.
- U.S.S.R. — Alliance of Red Cross and Red Crescent Societies, I. Tcheremushkinskii proezd 5, *Moscow, 117036*.
- VENEZUELA — Venezuelan Red Cross, Avenida Andrés Bello, N.º 4, Apartado 3185, *Caracas*.
- VIET NAM (Socialist Republic of) — Red Cross of Viet Nam, 68, rue Bà-Triêu, *Hanoi*.
- WESTERN SAMOA — The Western Samoa Red Cross Society, P.O. Box 1616, *Apia*.
- YEMEN (Arab Republic) — Yemen Red Crescent Society, P.O. Box 1257, *Sana'a*.
- YEMEN (People's Democratic Republic) — The Yemen Red Crescent Society, P.O. Box 455, *Aden*.
- YUGOSLAVIA — Red Cross of Yugoslavia, Simina ulica broj 19, 11000 *Belgrade*.
- ZAIRE — Red Cross of the Republic of Zaire, 41, av. de la Justice, B.P. 1712, *Kinshasa*.
- ZAMBIA — Zambia Red Cross, P.O. Box 50 001, 2837 Brentwood Drive, *Lusaka*.
- ZIMBABWE — The Zimbabwe Red Cross Society, P.O. Box 1406, *Harare*.