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PROTOCOL I AND NEUTRAL STATES

by Dr. Erich Kussbach

1. INTRODUCTION

The Protocol additional to the Geneva Conventions of 12 August 1949, relating to the Protection of Victims of International Armed Conflicts (Protocol I) contains several articles which relate expressly to neutral States—not only to the permanently neutral States but also to those which remain neutral in a particular conflict (temporary neutrality).1

Apart from a legal definition of the Protecting Power 2 these provisions lay down rules of conduct in cases where the victims of armed conflicts are in the hands of neutral States,3 and norms serving for the protection of neutral humanitarian relief actions 4 or prohibiting the misuse of emblems of neutral nationality.5

It would however be erroneous to assume that States which remain neutral in an armed conflict would have only to comply with the legal norms which concern neutral status. Nonetheless it would be totally wrong to consider the neutral States merely as 'privileged' contracting parties. Indeed, with their non-neutral contracting associates they carry the responsibility for the achievement of the aims of the Protocol, as they do, moreover, for those of the Geneva Conventions.6

1 Articles 2 (c), 9 (2), 12 (2), 19, 22 (2), 31, 37 (1), 39 (1) & 64.
2 Article 2 (c).
3 Articles 19 & 31.
4 Articles 9 (2), 12 (2), 22 (2) & 64.
5 Articles 37 (1) & 39 (1).
They are obliged, therefore, to comply with all provisions of the Protocol and naturally also with those of the Conventions which are not exclusively concerned with the conduct of the parties to the conflict. The responsibility of the neutral States is, however, even greater when they exercise the functions of a Protecting Power because, amongst other factors, Protecting Powers have the contractual task of generally monitoring compliance with the Conventions and the Protocol by the parties to the conflict. The neutral States must accomplish this task in the interests of all the parties to the conflict and indeed in the interests of the contracting parties as a whole. In this respect these States execute a mandate which has been assigned to them by the community of States in the service of common good and humanity.

In contrast to the other provisions those concerning neutral States are devoted directly to neutral status and from the point of view of the neutral States are understandably of great importance. This paper, with one exception, is restricted to an analysis of the articles of Protocol I which are expressly concerned with neutral States. The exception concerns Article 5 which governs the appointment of the Protecting Powers and their substitutes. Because only neutral States and those not parties to the conflict can become Protecting Powers, Article 5 directly concerns the neutral States and for this reason must be taken into consideration in this paper. It is true that Protocol I contains a series of articles which allocate definite tasks to the Protecting Powers but these are outside the scope of this paper.

2. NEUTRAL AND OTHER STATES NOT PARTIES TO A CONFLICT

The Protocol always uses the phrase “neutral States and (or) other States which are not Parties to a conflict” in place of “neutral Powers” or “neutral countries” which is normal usage in the Conventions.

This new wording which represents a further development of the text of the 1949 Conventions requires explanation.

The renunciation of the customary term first occurred in the Draft Protocol drawn up by the ICRC in consideration of the results of the two sessions of the Conference of Government Experts and which served

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8 Pictet, ibid. p. 102.
as a working document for the Diplomatic Conference. Nowhere does it contain the familiar term “neutral powers”. In place of this the authors use the expression: “State not engaged in the conflict” or “State which is not a party to the conflict”). In the ICRC Commentary the introduction of the new phrase was substantiated as follows; the experts preferred this expression to the term “neutral States” which also occurred in the earlier ICRC draft because it was “broader”. The Report on the Work of the Second Session of the Conference of Government Experts in 1972 in fact confirmed that amongst the experts the notion was dominant that the traditional expression must be replaced by the new designation because the institution of neutrality was subject to further development and the new and more comprehensive terminology would better express the position of these States.

This argument was by no means convincing. It is frankly astonishing that the experts treated such a serious question so lightly. The trend towards the abandonment of the concept of the neutral State conceals dangers not only for the neutral States but for the community of States as a whole. These dangers must absolutely be avoided. The justifiable misgivings which at that time were expressed by the delegations of permanently neutral States were summarized by me in a paper in which—in my opinion—it is clearly shown that this is not merely a problem of terminology. I do not wish to repeat here all the arguments which can be put forward against the introduction of the new terminology: they can be looked up in my paper. I wish here to make reference only to one fundamental objection based on the spirit of Protocol I itself.

The Protocol specifies and supplements not only the so-called “Geneva Law” but also, in important spheres, the “Hague Law”. A constituent of the Hague Law however is the Convention respecting the Rights and Duties of the Neutral Powers and Persons in case of War on Land

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(Hague Convention No. V) and the Convention respecting the Rights and Duties of Neutral States in the case of Maritime War (Hague Convention No. XIII). Doubtless these are still the keystones of the law of neutrality which is in force. If now, seventy years after the second Hague Peace Conference, in an instrument of international law which at least in part was intended to update the Hague Law to the latest stage of development of the conduct of warfare, and in the preparatory work for that instrument, the traditional institution of neutrality were represented as being “in the process of development” and the term ‘neutral States’ replaced by ‘Parties not in conflict’, the erroneous impression would have been gained that the previously undisputed law of neutrality had become outdated. The experts who were in favour of the new terminology were not clear about the far-reaching and serious consequences of their suggestion. We were therefore on the point of discarding—fundamentally without replacement—a properly legally safeguarded and clearly defined status which had proved itself well in the past, without a thorough investigation of the problem and without consideration for the increasing significance of neutrality in international relations. The extremely vague and flexible expression—enjoying no legal protection—‘States which are not parties to the conflict’ cannot be regarded as an adequate replacement.

Conscious of this fact, the delegations of Austria, Finland, Sweden, Switzerland and the United Kingdom proposed to the first session of the Diplomatic Conference an amendment reading “Neutral States and (or) other States which are not parties to the conflict”. This represents a compromise because it retains the expression “States which are not parties to the conflict” but at the same time reintroduces the notion of the “neutral State” into the Protocol. Nevertheless, consideration was given to the basic objection submitted.

Finally the compromise, after being accepted by the Conference was included in the final text of the Protocol. In this way the watering down of the legal significance of neutrality was for the time being avoided.

3. THE NEUTRAL STATE AS A PROTECTING POWER

In the Protocol we encounter the term ‘neutral State’ for the first time in Part I (General Provisions). Article 2 defines the concepts which repeatedly occur in the Protocol, including the concept of a Protecting

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14 CDDH/45.
Power (para. (c)). In accordance with this, a 'Protecting Power' is understood to be a 'neutral or other State not a Party to the conflict' (hereafter, for the sake of simplicity, only the words 'neutral State' will be used) which has been appointed for this function by a party to the conflict and accepted by the adverse party and moreover is prepared to carry out the functions assigned to a Protecting Power under the Conventions and this Protocol.

The subject of the following consideration however is not the institution of the Protecting Power as such. This is only of interest insofar as the execution of its functions are entrusted to a neutral State. The principal consideration is the prerequisites governing the enlisting of a neutral State to act as a Protecting Power. This concerns not so much the mechanism as detailed in Article 5 for the appointment of the Protecting Power but rather the basic thought fundamental to the commitment. The question is of crucial significance because the appointment of a Protecting Power carries not merely advantages for the participating parties but also considerable burdens; namely in respect of personnel and material—for the Protecting Power itself.

Additionally, the appointment of Protecting Powers has the consequence for the parties in conflict that, in the pursuance of their military aims, increased vigilance must be applied in respect of legally mandatory self-restraint for humanitarian reasons because their actions are subject to the neutral surveillance of the Protecting Power. The words of Klausewitz to the effect that war is an act of force subject to no limitations have been inapplicable for some time. Furthermore, in order not only to denounce this maxim in a treaty but also to ensure that it is no longer applied in practice, the Conventions and the Protocol have provided the Protecting Power with extensive rights of surveillance. The proper exercise of this function, however, presupposes that participating parties trust the Protecting Power.

Precisely for this reason it is vital that the Protecting Power, in accordance with the Protocol definition, (a) be invited by one of the parties to the Conflict to exercise the Protecting Power functions in accordance with the provisions of the Conventions and the Protocol for the safeguarding of their interests (mandate), (b) can only be appointed with the agreement of the adverse party (agreement) and (c) must be prepared to accept the task (acceptance).

Although the parties to a conflict have the obligation, in accordance with Article 5 (1), to make use of the system of Protecting Powers, the

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voluntary principle extending to all participating parties is valid as before in respect of the appointment of a particular Protecting Power.

In my opinion the voluntary principle is of fundamental significance for the neutral Power for two reasons. Firstly because in this way co-operation as a Protecting Power cannot be assigned to a party to a conflict, which would in any case render its activity difficult if not impossible and would moreover unquestionably impair its neutral status. Secondly a neutral Power cannot be burdened against its will with the functions of a Protecting Power as more closely defined in the Conventions and the Protocol. On the contrary it is free to accept or refuse this function.

The right of free decision is in particular granted when the neutral State has already exercised the restricted functions of a Protecting Power before the outbreak of hostilities within the meaning of Article 45 or 46 of the Vienna Convention on Diplomatic Relations, 1961. The clarification of this important question is one of the merits of the Protocol.

It was previously the case that the Geneva Conventions presupposed the existence of a Protecting Power. They commenced from the assumption that this 'diplomatic' Protecting Power accepted automatically the function assigned to it by Geneva Law in the case of armed conflict. For reasons which are understandable, the ICRC did not wish to change this legal position. Therefore the Commentary to the ICRC draft still mentioned a direct transition of the Geneva mandate to the State which held a mandate in accordance with the Vienna Convention. In this way the appointment of a Protecting Power after the outbreak of hostilities—a procedure frequently protracted and sometimes unsuccessful—could have been avoided. However, the ICRC was unable to find acceptance for its views at the conference.

From a consideration of the new regulation the first point noticed is that Article 5 (6) of the Protocol makes a clear distinction between the Protecting Power function according to Articles 45 and 46 of the Vienna Convention on Diplomatic Relations of 1961—that is to say, the 'diplomatic' Protecting Power function and the Protecting Power function according to the Geneva Conventions. This distinction is important because it clarifies the legal position of the neutral Power. The neutral Power is not obligated to accept the function assigned to it by Geneva Law, but is free to decide whether or not to exercise the restricted functions of a Protecting Power before the outbreak of hostilities. This right of free decision is particularly important when the neutral State has already exercised the restricted functions of a Protecting Power before the outbreak of hostilities. The clarification of this important question is one of the merits of the Protocol.

16 See J. S. Pictet, Commentary, p. 102.

17 Draft Protocols, Commentary, p. 12: "If diplomatic relations are broken off between the Parties to the conflict, then the mandate of Protecting Power under the Conventions and the Protocol is automatically by law vested in the third State, acceptable to the receiving State, which may already have been entrusted by the sending State—in accordance with customary international law or with Article 45 of the Vienna Convention on Diplomatic Relations of 1961—with the protection of its interests and those of its nationals and which has been accepted by the receiving State. A Party to the conflict wishing to entrust to two different third States the 'Vienna mandate' and the 'Geneva mandate' should therefore make known expressly and immediately its position."
Vienna Convention (‘... in accordance with the rules of international law relating to diplomatic relations ...’) and those in accordance with the Geneva Conventions and the Protocol. In accordance with this the transfer of the protection of interests of a party to a conflict and of its nationals to a third State in accordance with the law concerning diplomatic relations presents ‘no obstacle’ to the appointment of Protecting Powers for the application of the Geneva Conventions and the Protocol. Therefore there could be two Protecting Powers: one in the execution of the ‘Vienna mandate’, the other ‘for the purpose of applying the Conventions and this Protocol’. In practice this may well lead to difficulties but can bring advantages to the parties. At any rate, the most important consequence of the separation of the two spheres of function is that a neutral State must be specially appointed for the execution of the Protecting Power function in accordance with the Conventions and the Protocol. This is evident without any doubt from para. 2 together with para. 6 (para. 2 states clearly: ‘... each Party to the conflict shall, without delay designate a Protecting Power for the purpose of applying the Conventions and this Protocol...’). From the two paragraphs in combination it is evident that automatic extension of the assignment in accordance with the Vienna Convention to the application of Geneva Law was not intended by the authors of the Protocol. Such extension can only take place with the agreement of all participating parties.

However, the ruling in Article 5 goes a step further to procure full recognition of the voluntary principle in the mechanism for the appointment of Protecting Powers. If lists of States are provided in accordance with para. 3 the ICRC has the obligation to obtain the agreement of the States named (‘... it ... will seek the agreement of any proposed State named on both lists’). Therefore, in this way, the voluntary cooperation of the neutral State will also be ensured if the party to the conflict which has nominated it had not obtained its prior agreement; a circumstance which should hardly ever occur in practice. This requirement coincides with the definition in Article 2 (c) which postulates that the neutral State ‘has agreed to carry out the functions assigned to a Protecting Power under the Conventions and this Protocol’.

Therefore, in this respect, with the coming into force of the Protocol a clear turning point is introduced as opposed to the earlier legal position. Whilst the four Conventions still postulate that a Protecting Power once appointed in accordance with the law concerning diplomatic relations not only retains its mandate in the case of an armed conflict but also has ‘automatically’ to carry out the additional functions arising from the Geneva Conventions, such an extension of the sphere of activities of the
Protecting Power will henceforth only be possible with the latter’s agreement. The solution seems to me to be thoroughly justified. It cannot be merely assumed that a neutral State prepared to represent the interests of a State within the meaning of Articles 45 or 46 of the Vienna Convention can ipso facto be assigned the far more extensive functions arising from humanitarian law. The newly introduced free decision of the neutral State is all the more befitting because that State is expected to exercise the common mandate of all the Contracting Parties to the Geneva Law which overrides the original bilateral assignment.

There are still two questions to be discussed in connection with the functions of the Protecting Power.

Firstly a word of clarification concerning the field of application of the legal definition in Article 2 (c) seems to be appropriate. Article 2 commences with the standard formula for definition articles, namely: ‘For the purposes of this Protocol’. Normally, in treaty compilation, such a formula signifies that the following definitions are only applicable to the relevant document, that is to say, in the present case, to the Protocol. This applies to (a) and (b) but not however to (c) and (d). This restriction cannot be applied to (c) as it would lead to an absurd division of the obligations of Protecting Powers according to whether they were neutral States or merely ‘not parties to the conflict’.

As Protecting Powers the neutral States would have to fulfil the obligations of the Protecting Power specified in both the Conventions and the Protocol, whilst other States who are ‘not Parties to the conflict’ would have to act as Protecting Powers exclusively in terms of the Protocol, for according to the Conventions the function of the Protecting Power was unequivocally reserved to neutral States (cf. the common Articles 8/9, para. 1, second sentence ‘... the Protecting Powers may ... appoint delegates ... from amongst the nationals of other neutral Powers’). Such an interpretation however would certainly not correspond with the intentions of the authors of the Protocol. From the outset the Protocol was conceived as something completely dependent on the four Geneva Conventions. This is clearly expressed in Article 1 (3): ‘This Protocol which supplements the Geneva Conventions...’. Apart from this formal interrelation there is also a close material interdependence.

14 The Conventions still give no definition for the Protecting Power. It was obviously a foregone conclusion that only neutral States were in a position to exercise the functions of a Protecting Power. It was therefore not considered necessary to give a definition.

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between the Protocol and the Geneva Conventions. Many of the Protocol provisions refer explicitly or implicitly to the provisions in the Conventions. The same applies to Article 2 (c), a definition which, like Article 5, would be incomplete without the relevant provisions of the Conventions. Therefore the definition of Protecting Power in Article 2 (c) can only be meaningfully interpreted on the assumption that it is determinant for both the Protocol and the four Conventions. This has the natural consequence of enlarging the original smaller circle of Protecting Power candidates to include not merely the neutral States but also other States which are 'not Parties to the conflict'. In all events, to place the definition given under (c) here was an editorial error which interferes with the interpretation.

The second problem can only be briefly touched upon here. It relates to the personnel and material burdens imposed with reference to the function of the Protecting Powers. Strange to say, neither the Conventions nor the Protocol contain a norm which specifies who carries the financial burden of the activities of a Protecting Power. In the State practice relating to the mandate provided for in Articles 45 and 46 of the Vienna Convention, the principle applies that the Protecting Power is entitled to reimbursement of costs from the mandator. Strictly speaking the same should apply to the Protecting Power assignment in accordance with the Geneva Conventions. Here, however, the solution is more complex because this is a special type of mandate, that is to say, one from the Contracting Parties as a whole for public good and humanity. It would at any rate be welcomed if this question could be looked into more thoroughly and where possible clarified.

4. PERSONS IN THE HANDS OF NEUTRAL STATES

For many reasons the victims of armed conflicts and other protected persons may find themselves in neutral territory and hence under the sovereignty of a neutral State. The most important cases have already been provided for in Article 14 of the Hague Convention No. V. This concerns the transit of the wounded and sick of the armies engaged in hostilities through neutral territory or brought to the neutral territory by their adversary. In accordance with Article 15 of that Convention, the Geneva Convention of 1906 also applied to sick and wounded interned in neutral territory.
The provisions of the Hague Convention No V were supplemented by the Geneva Conventions 19 and extended to additional categories of war victims (shipwrecked, children, expectant mothers, nursing mothers and those with small children, as well as wounded and sick internees) and to the medical and religious personnel of the armed forces. Coupled with these provisions are Articles 19 and 31 of the Protocol. It is the purpose of these provisions to ensure that the protected persons are granted at least the same treatment as would have to be afforded to them by the parties to a conflict.

1. Protected persons within the territory of neutral States (Article 19)

Article 19 of Protocol I supplements Article 4 of the First and Article 5 of the Second Geneva Conventions of 1949 by extending the range of protected persons. Whilst hitherto the Conventions protected only wounded, sick and shipwrecked persons and armed forces medical and religious personnel, henceforth all protected persons in accordance with Part II of the Protocol benefit from the application of Article 19. Added to these are the civilian wounded, sick and shipwrecked as well as nursing mothers, the newly born and other persons in need of immediate medical aid or care, e.g. the infirm and expectant mothers (Article 8 (a) & (b) of the Protocol), the civilian medical and religious personnel (Article 8 (c) & (d)) and if necessary other members of military or civilian medical units (Article 8 (e)). Whether these persons are newly admitted by the neutral States or already interned in neutral territory is irrelevant. Also protected are the dead held by a neutral State.

The protection is in accordance with 'the relevant provisions of this Protocol'. The Conference did not agree on this formulation. In imitation of the wording of the Conventions, the ICRC draft used the term: 'shall by analogy apply the provisions of the present Protocol'. The Australian, Canadian, New Zealand and UK delegations proposed the following formulation in an amendment: '. . . shall comply with the provisions of this Part to the extent that they are applicable . . .'. In the explanation given by the New Zealand delegate, the expression 'by analogy' was criticised as not being an accurate reflection of the true

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19 Articles 4 and 37 of the First, Articles 5 and 40 of the Second and Article 132 of the Fourth Conventions.
20 Draft Protocols additional to the Conventions, Commentary, p. 28.
21 CDDH/II/242.
position of the neutral State. The objection that many provisions of the Protocol could not be applied just 'by analogy' was sustained and was taken into consideration in the final editing although—as we have seen—using different wording to that of the proposed amendment. On the other hand the suggestion to make reference only to the provisions of Part II instead of to the 'relevant provisions' of the Protocol was not adopted. It is regrettable that this correction which would have had a clarifying effect had to be waived for formal procedural reasons.

2. Medical aircraft and neutral territorial sovereignty (Article 31)

For various reasons which will not be discussed here the provisions of the Geneva Conventions with respect to medical air transport are inadequate and in part obsolete. They have not proved effective in practice. The transport of wounded and sick by fixed-wing aircraft, and also to an increasing degree by helicopter, has become much more frequent in recent decades. Due to the rapidity of technical development the existing legal position has even proved to be a hindrance. For this reason the ICRC and subsequently the Diplomatic Conference have devoted particular attention in the preparation of the Protocol to the sphere of medical air transport. The result is to be seen in Articles 24-31. Logically the entire complex of questions relating to the use of neutral airspace by medical aircraft must be included in order to guarantee the uniformity of the law concerning medical air transport.

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23 Ibid. p. 259.
24 Ibid. p. 260.
26 Draft Article 32 corresponded to Article 31 of the Protocol (Neutral or other States not Parties to the conflict). There were a series of other amendment suggestions to this draft Article: CDDH/45, CDDH/II/82, CDDH/II/247, CDDH/II/82/rev. 1 & CDDH/II/290, the last two, the most comprehensive, (CDDH/II/82/Rev. 1 introduced by Belgium, Canada, USA, France, Norway, Holland & Great Britain; CDDH/II/290 suggested by Austria, Finland, Sweden, Switzerland & Jugoslavia) were only slightly different. Cf. also the explanations by the Austrian delegate Bastl in: Official Records, vol. XI, p. 544.
Two important new developments require in particular to be stressed. Firstly, the relevant provisions will henceforth also apply to civilian medical transport. Here, happily, one of the most important aims of the revision work—namely the improvement of protection for the civilian population and civilians—has been fully achieved. Secondly, the new provisions will henceforth also be applicable to temporary medical aircraft, so that considerably greater use will be made of aircraft for the rescue and rapid transport of wounded and sick to distant hospitals.

In addition to these two significant corrections to the former legal position the law has been changed by Article 31 of the Protocol. A comparison of Article 31 with Article 37 of the First and Article 40 of the Second Conventions clearly shows that the concept underlying previous regulations on the use of neutral airspace and landing on neutral territory has been replaced by a new one. Whereas up to now the basic principle was that medical aircraft were permitted to overfly and land on neutral territory without prior agreement, henceforth they are in principle prohibited from doing so (para. 1, first sentence), unless a prior agreement is made between the relevant parties to the conflict and the neutral State.

The change, even if minor in practice, has serious legal implications for the legality of using neutral airspace. This legality was given ex lege in accordance with Article 37/I and Article 40/II. The reservations of para. 2 and the agreement concerning altitude, timing and flightpath (para. 1, 2nd sentence) certainly permit the modification of the basic overflying law but do not annul it.27

In accordance with Article 31 of the Protocol, overflights and landings (or the alighting on water) are in principle prohibited and therefore illegal. They are only legal when prior agreement for them is made. With such agreement the legal protection of the neutral State in the sequence of events is advanced a stage. The agreement concerning altitude, timing and flightpath in accordance with the second sentence of para. 1 of Article 37/I and Article 40/II is principally for the safety of the medical aircraft itself which could thereby be more easily identified when using the airspace of the neutral State. Naturally, in such an agreement the security needs of the neutral States should also be given consideration. Aircraft which do not comply with the agreed flightpath can be attacked. In accordance with Article 31 of the Protocol such store is set to the security needs of the neutral States that henceforth they do not have to divert a threat to their security by force but can forestall it by

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declining to conclude an agreement, though for humanitarian reasons they would seldom make use of this right.

To this fundamental rule the only exception is overflight due to an error of navigation or an emergency situation affecting the safety of the aircraft (para. 2). In this respect it matters not whether the flight takes place without agreement or in deviation from one. The medical aircraft must make every effort to give notice of the flight and identity itself. As soon as the neutral State has identified the aircraft as a medical aircraft, it shall make every reasonable effort to give it a chance to land before attacking it. Here the problem is the same as in Article 27 (2) of the Protocol, which concerns the overflight of territory controlled by an adverse party.\(^2\) Attacking an aircraft is the ultimate security measure which the neutral State should as far as possible avoid.

After landing (or alighting on water) the medical aircraft can be examined by the neutral authorities with the maximum possible concern for the wounded and sick (para. 3). If the aircraft is indeed a medical aircraft, it and its occupants—with the exception of categories of persons we shall discuss later—shall be permitted to continue the flight. If it is found that the aircraft has unlawfully claimed medical status it shall be seized and the occupants treated in accordance with para. 4.

With respect to the further treatment of the occupants, both para. 3 and para. 4 make reference to the 'rules of international law applicable in armed conflict'. Relevant are Articles 11 and 14 of the Hague Convention respecting the Rights and Duties of Neutral Powers.\(^3\) In accordance with Article 11 the neutral Power 'which receives on its territory troops belonging to the belligerent armies shall intern them, ... in camps or fortresses, ... as far as possible, at a distance from the theatre of war'. In accordance with the second paragraph of Article 14 the wounded and sick of a belligerent who are brought to neutral territory by their adversary 'must be guarded by the neutral Power so as to ensure their not taking part again in the military operations'. In accordance with this the neutral State has, where necessary, the obligation to evacuate wounded and sick prisoners of war from the medical aircraft and to intern them in the same way as members of the armed forces who have been transported in an aircraft illegally stating itself to be a medical aircraft.

\(^{2}\) Concerning this, see American delegate Solf in *Official Records*, Berne 1978, vol. XII, p. 32.

\(^{3}\) Cf. also the statements of the Austrian delegate Bastl in: *Official Records*, vol. XI, p. 547. However, Bastl did not make express mention of Article 11. Nonetheless in my opinion this Article must be included here.
Moreover, the neutral States shall apply the same treatment to all parties participating in the conflict (Article 31 (5) of Protocol I).

5. PROTECTION OF NEUTRAL HUMANITARIAN AID

Several of the Protocol provisions relate to the aid which is offered to the parties to a conflict by neutral States or their relief organizations. Such aid usually takes the form of certain goods, transport facilities or trained personnel.

In this regard, in Committee II of the Diplomatic Conference, the British delegate posed the interesting question as to whether such humanitarian aid was consistent with neutral status. His American colleague gave his support to this compatibility. This opinion is to be approved.

In accordance with Article 27 of the First Convention National Societies of neutral States already had authorization to place their medical personnel and medical units at the disposal of a party to a conflict, provided, of course, that they had the consent of their government. The neutral government was even required to notify its consent to the adversary of the State receiving such assistance. By this necessary approval, the neutral government duly assumes the responsibility in international law for such humanitarian aid. The third paragraph of Article 27 states that this type of humanitarian co-operation is under no circumstances to be regarded as interference in the conflict. From this it can be concluded that the humanitarian aid provided by the National Society with the agreement of the neutral government cannot be considered as support which infringes neutrality. If this is the case there is no reason to consider direct State aid as being incompatible with neutral status.

1. Neutral medical units and transportation facilities (Articles 9 (2); 12 (2); and 22 (2))

Article 27 of the First Convention is supplemented by Article 32. This deals with medical personnel and medical units of a national humanitarian society within the meaning of Article 27 which fall into the hands of the adverse party. They are to be guaranteed return to their own country or to that of the party to the conflict in whose service they

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31 The delegate Solf, ibid.
were. Until that time they can continue with their duties. They have a right to suitable accommodation and subsistence.

Article 9 (2) of the Protocol henceforth extends the field of application of both these articles of the First Convention to permanent medical units and medical transports which are made available to a party to a conflict by a neutral State itself or by one of its recognized and authorized relief societies. This part of the treaty speaks of the 'relevant provisions of Articles 27 and 32 of the First Convention', it being understood that the two articles are not applied without restriction but only in a manner compatible with Article 9 (2). In this respect, for instance, a neutral government obviously approves the humanitarian relief it is itself providing. In the same way the provisions of Article 32 concerning medical transportation are without doubt only to be applied by analogy. What is new at any rate, is that henceforth direct State humanitarian aid, too, falls under the protection of the Geneva Law and furthermore is only applicable to permanent medical units and transports. Consistent with the definitions of 'medical units' and 'medical transports' given in (e) and (g) of Article 8, the conclusion to be drawn from the wording of Article 9 (2) is that the neutral State can offer not merely civilian but also military medical units and medical transports. By medical transports is to be understood any vehicle on land, water or in the air (Article 8 (h), (i) & (j)). The only exceptions are hospitals ships, to which Article 25 of the Second Convention applies.

The rules applicable to neutral medical units and transports assisting a party to a conflict cover three phases: (1) the offer of their availability to the party (Article 27 of the First Convention together with Article 9 (2) of the Protocol), (2) their possible retention by the adverse party (Article 32 of the First Convention together with Article 9 (2) of the Protocol), and finally (3) their service under the control of the party to the conflict to which they are made available (Articles 19, 21, 22 & 36 of the First Convention and Articles 38 and 39 of the Second Convention together with Articles 12 (2), 21 and 23-30 of the Protocol). We have already considered the first two phases. Now let us briefly turn to the third phase.

In accordance with Article 12 (1) of the Protocol, medical units are at all times to be respected and protected and shall not be the object of attack. In accordance with para. 2 this applies also to civilian medical units insofar as they (a) belong to a party participating in the conflict, (b) are recognized and authorized by the responsible authority of a party participating in the conflict, or (c) are authorized in accordance with the terms of Article 9 (2) of the Protocol or Article 27 of the First Convention. At first glance it may not be obvious why Article 12 (2), which must be
read in conjunction with Article 9 (2), speaks only of civilian medical units whilst Article 9 (2) makes no distinction between civilian and military medical units. However, the main purpose of Article 12, right from its conception, was to bring civilian medical units under the protection of Geneva Law because the military medical units were in any case already protected in accordance with the First Convention (Articles 19, 21 & 22). This protection also extends to any military medical units of a neutral State within the meaning of Article 9 (2) of the Protocol. However, the neutral civilian medical units do not fall under this protection. They are now expressly included in Article 12 (2) (c).

Whether civilian or military, neutral medical transports—with the exception of hospital ships—enjoy the relevant protection of Articles 21 and 23-30 of the Protocol together with Article 36 of the First and Articles 38 and 39 of the Second Conventions.

Special regulations have hitherto been applicable to hospital ships (Chapter III of the Second Convention). Hospital ships used by national relief societies (Red Cross Societies, etc.) or private persons of neutral countries enjoy, in accordance with Article 25 of the Second Convention, the same protection as military hospital ships. They are not to be captured when, with the prior agreement of their own government and the authorization of a party to the conflict, they have placed themselves under the control of that party and have informed all parties to the conflict of their names and descriptions ten days before going into operation (Article 22). In addition, Articles 26, 29, 31, 32, 34 and 35 are applicable to such ships. In accordance with Article 22 (2) of the Protocol, the protection available to ships described in Article 25 of the Second Convention is henceforth extended to such hospital ships as are placed at the disposal of a party to a conflict by a neutral State under the prerequisites of the said Article 25. Accordingly no distinction is made between military and civilian hospital ships.

2. Neutral civil defence (Article 64)

The Geneva Law doubtless underwent significant further development by the assignment to the civil defence organizations of appropriate legal status in case of armed conflict. A complete chapter (Chapter VI of Part IV; Articles 61-67) is devoted to civil defence in the Protocol. Article 64 is concerned with the aid which neutral States can provide to

parties to the conflict in the sphere of civil defence. In view of the circumstances that many States possess either no civil defence organization at all or are just in the process of developing it, neutral States are in a position to provide these countries with a very useful humanitarian service by placing at their disposal personnel and matériel of their own civil defence organizations.

As in the case of legal norms relating to the neutral medical units and medical transports, here too three stages can be distinguished on which the provisions of the Protocol concentrate: (1) the making available of personnel and material of a civil defence organization by neutral States, (2) the protection of these units during their operation under the control of a party to a conflict, and (3) the activities of these civil defence units in occupied territory.

With respect to the making available of civil defence units the same concept forms the basis of Article 64 as that with which we are already acquainted from Article 27 of the First Convention. The fundamental points of this regulation are as follows: (a) the neutral, civilian civil defence units carry out their function in the territory of a party to a conflict with their agreement and under their control, (b) the adverse party is to be notified of the neutral aid as soon as possible, and (c) the activities of the civil defence units are not to be considered as interference in the conflict (Article 64 (1)). All conference drafts are in agreement on these three points.

With respect to the protection of personnel and matériel which is made available by the civil defence organizations of neutral powers, no distinction is made between the neutral civil defence units and those of the party to the conflict in whose territory they are active. Articles 62, 63, 65 and 66 are also applicable to the neutral units.

In occupied territories the occupying power shall in principle permit the activity of civilian civil defence organizations provided by a neutral State. Only if the occupying power can ensure the adequate performance of the civil defence functions with its own means or the means of the occupied territory is it authorized to restrict or totally decline the activities of the neutral organization (para.3).

In contrast to Article 32 of the First Convention, Article 64 (3) of the Protocol says nothing concerning the return of the neutral civil defence personnel to their own country or to the territory of the party to the conflict which they are serving which is not occupied by the adverse party.

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85 See the suggestions CDDH/I/324, CDDH/I/405 and CDDH/I/426.
The reason for this is most likely that because these personnel exercise their activity in the interests and for the well-being of the civil population they must therefore reasonably remain with the population even when the territory concerned falls into the hands of the adverse party. However this does not apply when the occupying power revokes the civil defence functions of the neutral civil defence organizations and demands the cessation of their activities. In the absence of an explicit norm the analogous application of Article 32 of the First Convention would suggest itself for such cases.

Article 64 (2) has its origin in the ICRC draft. However, whereas the ICRC draft assumes that the international organizations fulfill the same civil defence functions as the national civil defence organizations Article 64 (2) is different insofar as it refers to 'international co-ordination' of the civil defence actions by the "relevant" international organizations. It is true that this does not preclude the international organizations themselves from also undertaking civil defence tasks, but it does make it clear that international co-ordination is their principal function.

6. MISUSE OF EMBLEMS OF NEUTRAL STATES (Article 37 (1) (d) and Article 39 (1))

Articles 37 and 39 of the Protocol, the subject of which is the prohibition of perfidy and the misuse of national emblems, are part of a group of norms (Section I of Part III) which supplement and specify the law in force relating to methods and means of warfare.

Article 37 is an important advance on the Hague Regulations concerning the Laws and Customs of War on Land because for the first time it supplies a legal definition of perfidy. The definition is put in more concrete terms by means of examples in paragraphs (a)-(d).

36 Article 57 (2) of the ICRC draft (Article 64 in the final Protocol adopted by the Conference) reads: "The personnel, material and means of transport of international civil defence bodies engaged in civil defence activities on the territory of a Party to a conflict under the conditions mentioned in the preceding paragraph shall also be respected and protected".

37 See Note 36; also the suggestions CDDH/II/324 & CDDH/II/426.

38 Article 23 (b) and (f).

From our viewpoint, (d) is of particular interest. This example of perfidy consists in the feigning of protected status by the use of insignia, emblems or uniforms of neutral States. This type of perfidious warfare method was only included in the article during the course of the Diplomatic Conference. The Conference of Government Experts had already earlier suggested the prohibition of the improper use of neutral flags, military insignia and uniforms. The prohibition was also included in the ICRC draft Protocol (Article 37). The Commentary to the draft states that this article is an instance of the application of Article 35 of the draft, relating to perfidy. Nevertheless the ICRC could obviously not decide to include the acts prohibited by draft Article 37 in the examples given in draft Article 35. This step was taken by the Diplomatic Conference.

In accordance with Protocol Article 37, it is prohibited to kill, injure or capture an adversary by resort to perfidy. Accordingly the feigning of protected status by the use of insignia, emblems or uniforms of neutral States is only legally relevant and reprehensible when it is resorted to for the purpose of killing, injuring or capturing. This rule in itself would not be satisfactory and would be incomplete without Article 39 (1) which prohibits in an armed conflict the misuse for any purpose whatsoever of flags or military emblems, insignia or uniforms of neutral States. This prohibition is absolute. Therefore, in spite of Article 37 (1) (d) the Conference included into the final version of the Protocol the prohibition contained in the ICRC draft, thereby ensuring that Article 39 (1) closes the gaps left by Article 37 (1).

The protective purpose of both provisions is the fair conduct of warfare. Additionally, confidence in the neutral status of parties not participating in the conflict is protected.

Dr Erich Kussbach

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41 See Draft Protocols, Commentary, p. 44.
The Red Cross is a worldwide institution in which all Societies have equal status and share equal responsibilities and duties in helping each other.

This heading also has three parts: universality in the strictest sense—a mixed principle comprising both substantive and organic aspects—the equality of National Societies and the solidarity among them, the latter two belonging to the organic domain.

1. UNIVERSALITY

The Red Cross has a universal vocation. This signifies that it must extend to all men, in all countries, in the terms used in 1955. The first part of this idea—"to all men"—has an essential significance for the Red Cross, whose ideal requires it to open its arms to all who ask its assistance. The principles of humanity and non-discrimination imply the principle of universality, as their natural and necessary consequence. One of the characteristics which gives the Red Cross its unique quality and perhaps its virtue is the fact that it has put into effect, in its own domain, that universality so often dreamed of and so seldom realized.

The second part—"in all countries"—is a consequence of the first: in order to reach all men the charitable action must be carried out

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1 Jean Pictet: Red Cross Principles.
everywhere on the surface of the earth. The Red Cross must be able to traverse and explore every part of the great vale of suffering, where all men are brothers.

To achieve universality, the Red Cross had a choice between two roads, that of federalism or that of unity. Standing as an obstacle to unity is the variegated nature of the world, with its multiple facets. The work is therefore shaped along the lines of the widely differing nationalities, crystallized by such elements as sovereignty, culture, political regimes and the characteristics of peoples. On the national basis, the Red Cross proceeded step by step to develop its structures. From the beginning, the National Societies have been created as independent and self-governing institutions. The authority of the international Red Cross bodies has been mainly of a moral character. This reciprocal independence is also a powerful and unique characteristic of the movement.

The National Red Cross Societies, as such, are not governed by the principle of universality. No one expects them to disperse their resources throughout the entire world. Their mission is above all a national one. It is the international bodies of the Red Cross which practice universality and place no geographical limits to their action.

As noted by Donald Tansley, the extremely flexible structure of the Red Cross is remarkably well suited to its universal calling. It is the only institution of its type, combining an action of protection and one of assistance, and, depending on circumstances, disclosing one or another of its three countenances: ICRC, League or National Society.

Has the Red Cross attained true universality? The fact is that there are now National Societies in all the countries in the world, with very rare exceptions of a temporary nature. When a new country accedes to independence, a new Society is created, sooner or later.1 Does this mean that the Red Cross has come anywhere near to dealing with all the suffering which it has set out to relieve? We cannot claim that it has. The results achieved by the Red Cross in only a little more than a century are already considerable, but the road ahead of us is a long one, with many new tasks to accomplish. The territory already covered must be cultivated

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1 There are now 125 National Societies, whereas there are 149 member States in the United Nations, as a result of the time lag between the moment when a country accedes to independence and the time when the National Society is organized and is internationally recognized.
in greater depth. The vital thing is that the Red Cross must strive unceasingly and with all its energy to achieve true universality. In doing this, the principle will take on its full meaning, that of universalism.

There are certain people, even within the Red Cross, who have expressed doubt as to the real value of universality, which they regard as a façade, and prefer what they speak of as "purity", by which they mean rigid adherence to the letter of the law of the Red Cross. We have previously referred to this problem.

We shall limit ourselves at this point to a single wish: that all concerned should be wary of breaching or violating, by any hasty and unconsidered gesture, a universality which was so long in the winning. Even if it is not always as authentic as we would wish, it nevertheless represents for the Red Cross a precious heritage from which the institution has derived a good deal of its power of achievement.

It is naturally necessary to examine each case on its merits and weigh the pros and cons. In this matter as in others, the golden rule—the interests of the persons needing assistance—will show us the way. We are sure however that we shall usually find that it is better for an imperfect Red Cross Society to exist in a country than to have no Red Cross there at all. Perfection exists only in the phraseology of the Pharisees.

2. THE EQUALITY OF NATIONAL SOCIETIES

Red Cross Societies, as we have seen, vary considerably in importance from one country to another. Nevertheless, from the beginning, all Societies have been established on the basis of equality. As a result, equality of rights in international terms has made up for factual inequality.

In 1921, the ICRC adopted a "summary" of fundamental principles in which it included "the equality of National Societies". It should be recalled that at that time the League had recently been established on a different basis: the federation was at that time open only to the Societies in countries which had been allies on the winning side in the First World War, and, following the pattern of the League of Nations, the five principal victorious powers played a preponderant role in it. To many people, this notion appeared partisan and incompatible with the spirit of the institution. Shortly afterwards, in any event, it was discarded.
Opening its doors to all Red Cross Societies on an equal basis, the League cleared the way for that universal solidarity which gives it the strength it has today. The principle of the equality of Red Cross Societies emerged stronger than ever from this venture.¹

Parity of rights is the rule which best fits an institution which does not have the same motivations as those of States and which is entirely devoted to the welfare of the human being. Without it, there would be the danger of introducing elements of a political character into the Red Cross, which would soon make of it an arena for power struggles.

The equality of Societies can be compared to the great principle of the equality of men in the face of suffering, the basis of Red Cross law. The Red Cross is essentially individualistic. In addition, the equality of National Societies is the consequence of their desire for independence. How could one consider a Society to be fully independent if, in international terms, it were dominated by other Societies? The equality of the Societies is also in conformity with the principle of the equality of States, which has now won worldwide recognition.

3. SOLIDARITY

The National Societies are completely independent and have equal rights. Nevertheless, while remaining masters of their destinies and conserving their freedom of action, they have created mutual ties among themselves and have recognized that they have duties in helping each other.

Recognizing that it is better to co-operate than to isolate themselves, the Societies cultivate solidarity. Each one works, to a varying degree, for the welfare of all. This is what distinguishes humanitarian work from individual charity. The latter is free from any idea of reciprocity: a free gesture is made and no return is expected. This is the essence of its nobility, but is also a source of weakness. The Red Cross has grown up in an organized world, a world endowed with memory.

¹ Only one thing remains from the original system: Societies belonging to the major world powers usually belong to the Executive Council of the League and to the Standing Commission of the International Red Cross. But, since this is not the result of a statutory provision—the League Constitution for example refers only to "fair geographical representation"—one cannot speak of an infringement of the principle of equality of rights.

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The concept of solidarity has been firmly established since the beginning of the Red Cross. In the Conditions for Recognition of New Societies as they exist today, it is set forth in the statement that the Society shall share in the fellowship which unites its members—the National Societies and the international bodies—and keep in close touch with them. In addition, the International Red Cross Conferences have passed numerous resolutions on the subject of solidarity. It was clearly the birth of the League of Red Cross Societies, however, which provided the decisive impulse and made this principle a reality. It is thanks to the League that this mutual co-operation has attained the splendid development of today.

As we have seen, the National Societies primarily give their help to people in their own countries; their specific task is carried out within national boundaries and they are not expected to exhaust their resources by attempting to deal with all suffering throughout the world. But when a nation is stricken by a natural or social disaster whose proportions surpass its national capacities, its Society appeals, through the League, to other Red Cross Societies which, on a voluntary basis, bring assistance to it in the form of personnel or material aid. Even though it may cover only a small part of the needs, this assistance is none the less precious. When an armed conflict is involved and a neutral intermediary is needed, it is the ICRC which is competent.¹ There has recently been a tendency for Red Cross Societies in the same region to conclude mutual assistance agreements.

In this way, the National Societies exercise an international action over and above their own specific task. As a rule, the international effort is quite small as compared to the domestic activities, but the Societies of some countries have shown such great generosity that the two spheres of action tend to become equalized.

Charitable solidarity is not only precious in material terms. By the selflessness it displays, it also has symbolic value. When a Red Cross Society devotes itself to the welfare of its countrymen, it is faithfully carrying out its task, but it is not doing anything exceptional and is not acting in a manner essentially different from that of other philanthropic institutions. On the other hand, when it spreads its benefits beyond its own frontiers and in so doing acts beyond any national interest, it then truly represents what is meant by the “Red Cross”.

¹ Generally speaking, assistance between the Societies of allied countries in times of conflict is direct, with no intermediary.
The National Red Cross organizations refer to one another as “sister Societies”, and this means more than the mere words would indicate. Solidarity in the face of suffering, which makes of the Red Cross a “body”, indeed a “family”, is closely related to the original gesture—that simple gesture performed by Henry Dunant as day fell after a great battle, a gesture which did something to change the face of the world.

Such mutual assistance, a branch of activity which is so much in keeping with the spirit of Red Cross work, is now in a phase of full and active development and appears to have a productive future ahead of it. We may well hope that the National Societies will find in this activity an occasion to strengthen even more the bonds between them and to give even more power to that fraternal solidarity which is one of their most glorious accomplishments.

Jean PICTET

This instalment concludes the publication of Mr. Jean Pictet’s work, “The fundamental Principles of the Red Cross—Commentary”, which has been appearing since the May-June 1979 issue (No 210) of International Review. The book is published in the series “Scientific Collection” of the Henry Dunant Institute, 1979.
ICRC delegate killed in an accident in Sudan

The International Committee of the Red Cross was greatly dismayed to learn of the sudden death of one of its delegates in Sudan, Mr. Jürg Baumann, in a road accident on 21 September 1980.

A nurse from the Swiss Red Cross, Mr. Günther Omozik, was also in the car and was slightly injured.

Jürg Baumann was 25 years old and a bachelor; he was first sent to Israel, where he worked as a delegate from February till October 1979 and on 3 October 1979 he took up his new post in Khartoum.

His death has come as a great loss to the ICRC as a whole, which expresses its deepest sympathy to his family and friends.

Protocols: Ratification and Accession

The Embassy of Finland in Berne has forwarded to the Swiss Government two instruments, dated 4 July 1980, signifying the ratification by Finland of the Protocols Additional to the Geneva Conventions of 12 August 1949, adopted on 8 June 1977.

The instruments having been deposited on 7 August 1980, the Protocols, in accordance with the relevant provisions, will enter into force for Finland six months after that date, on 7 February 1981.

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This instrument was registered on 8 September 1980 and the Protocols, in accordance with their provisions, will enter into force for the People's Republic of Bangladesh six months after that date, namely on 8 March 1981.

This latest ratification and accession brings to sixteen the number of States parties to Protocol I (Ghana, Libya, El Salvador, Ecuador, Jordan, Botswana, Cyprus, Niger, Yugoslavia, Tunisia, Sweden, Mauritania, Gabon, Bahamas, Finland and Bangladesh) and fifteen to Protocol II (Cyprus having ratified only Protocol I).
The Joint Commission entrusted with the distribution of the income of the Empress Shoken Fund met in Geneva on 15 April 1980. The Japanese Red Cross Society was represented by H. E. Ambassador Fumihiko Suzuki.

The Commission noted the statement of accounts and the situation of the Fund as at 31 December 1979 and confirmed that the balance available amounted to S. Fr. 212,783.96.

In examining the applications, the Joint Commission reviewed the experiences of the past few years. The Commission noted that the criteria (a.b.c.) it had established for allocation were still valid:

a. to restrict the number of allocations and thereby increasing the allocations so as to permit the beneficiary National Societies to implement the plans envisaged;

b. to uphold only those from developing National Societies unable to have their projects financed otherwise and, among such Societies, whenever feasible those which have hitherto benefited least from assistance from the Shoken Fund;
c. to refrain from considering the requests from those National Societies which have not conformed to the requirements under article 5ter of the Regulations according to which the beneficiary National Societies are expected to report on the use of the allocations received.

The Joint Commission further decided that:

i. allocations be transferred to the beneficiaries only upon presentation of either invoices or proof of purchase;

ii. allocations remaining unclaimed or unused after six months of such allocations are to be withdrawn and added to the amount available for the next distribution.

Eleven National Societies submitted requests for allocations from the 59th Distribution of income and the Joint Commission decided to make the following grants based on the above-mentioned criteria:

**Afghan Red Crescent Society:** S. Fr. 30,000.— for the purchase of an ambulance

**Haitian Red Cross Society:** S.Fr. 40,000.— for the purchase of a vehicle for the Blood Transfusion Centre

**Pakistan Red Crescent Society:** S.Fr. 10,000.— for the purchase of material for the first aid programme

**Salvadorean Red Cross Society:** S.Fr. 40,000.— for the purchase of a mobile unit for the Blood Transfusion programme

**Senegalese Red Cross Society:** S.Fr. 25,000.— for the purchase of a vehicle for the emergency and medical activities

**Syrian Arab Red Crescent Society:** S.Fr. 35,000.— for the purchase of a vehicle for the medico-social activities of the Aleppo Committee
The Joint Commission also decided that S.Fr. 30,000.— be voted to the reserve as “guarantee” against fluctuations and that the unused balance of S.Fr. 2,783.96 will be added to the income available for the 60th Distribution.

In accordance with article 5ter of the Regulations, the beneficiary National Societies are required to report in due course to the Secretariat of the Joint Commission on the use which has been made of the allocations received. The Joint Commission would like this report, accompanied by photographs if possible, to reach it at the latest by the end of the year during which the allocation is used. It furthermore reminds beneficiaries of article 5bis of the Regulations which prohibits them assigning the grant for purposes other than those specified without the previous consent of the Commission.

In accordance with the Regulations, the 1980 income will be distributed in 1981. To facilitate application by National Societies in conformity with the Regulations, the Joint Commission has decided to send, as in the past year, model application forms to all National Societies.

The Joint Commission desires to remind National Societies that such requests must indicate the purposes for which the allocation will be used, in order for them to be considered; they must also, as far as possible, be accompanied by a plan of financing. Requests must be submitted to the Secretariat of the Joint Commission before 31 December 1980.

For the Joint Commission

League of Red Cross Societies
B. Petterson
J.-P. Robert-Tissot
K. Seevaratnam (Secretary)

International Committee of the Red Cross
R. Gallopin (outgoing Chairman)
M. Aubert (present Chairman)
P. Gaillard
M. Martin

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## Empress Shōken Fund

**BALANCE SHEET AS AT DECEMBER 31, 1979**

*(expressed in Swiss Francs)*

| ASSETS |  | LIABILITIES AND CAPITAL |
|--------|  |  |  |
|        | S.Fr. |  | S.Fr. |
| Securities in portfolio |  |  |  |
| Foreign bonds in Swiss Francs (market values: S.Fr. 2,278,000.—) | 2,255,387.75 |  |  |
| Foreign bonds (market value: S.Fr. 355,000.—) | 395,360.55 |  |  |
| Total of assets | 2,650,748.30 |  |  |
| Fixed deposits |  |  |  |
| Banque Hypothécaire du Canton de Genève | 67,260.48 |  |  |
| Union Bank of Switzerland, Geneva | 260,673.55 |  |  |
| Swiss Credit Bank, Zurich (DM 300,000.—) | 272,760.— |  |  |
| Total of fixed deposits | 600,694.03 |  |  |
| Debtor |  |  |  |
| Account receivable, withholding tax recoverable | 4,851.27 |  |  |
| Cash at Bank |  |  |  |
| Messrs. Bordier & Co, Geneva | 14,275.95 |  |  |
| Total of assets | 3,270,569.55 |  |  |
| LIABILITIES AND CAPITAL |  |  |  |
| Capital as at 1.1.1979 | 2,758,569.13 |  |  |
| Plus: |  |  |  |
| Contributions from the Japanese Government and the Japanese Red Cross | 70,941.60 |  |  |
| Funds available at 31.12.1979 | 212,783.96 |  |  |
| Provisions: |  |  |  |
| Reserve against fluctuations | 29,782.75 |  |  |
| Reserve for administrative expenses: |  |  |  |
| Balance carried forward from the previous year | 13,360.80 |  |  |
| Transfer from the income statement as per the statutes | 31,163.82 | 24,524.62 |  |
| Less: |  |  |  |
| Administrative expenses for the year 1979 | 6,923.70 | 17,600.92 |  |
| Commitments |  |  |  |
| Allocations to be withdrawn | 62,231.90 |  |  |
| League of Red Cross Societies | 118,639.29 |  |  |
| Total of liabilities | 3,270,569.55 |  |  |

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SITUATION OF INVESTMENTS AT AS 31 DECEMBER 1979

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<thead>
<tr>
<th>Securities</th>
<th>Nominal Value</th>
<th>Purchase Price</th>
<th>Market Value</th>
<th>%</th>
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<tr>
<td>4½% Taiyo Yuden Co., convert. 1979/84</td>
<td>100,000.—</td>
<td>100,300.—</td>
<td>93,500.—</td>
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<td>100,166.—</td>
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<td>101,675.—</td>
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<td>100,166.—</td>
<td>95,000.—</td>
<td>95</td>
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<td>200,000.—</td>
<td>202,000.—</td>
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<td>300,350.—</td>
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<td>4½% World Bank Washington 1979/89</td>
<td>200,000.—</td>
<td>200,300.—</td>
<td>195,000.—</td>
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Total: 2,255,389.— 2,277,600.—

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<th>Purchase Price</th>
<th>Market Value</th>
<th>%</th>
</tr>
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<td>5½% Tokyo Rubber Industry Co. Ltd. 1978/83. DM</td>
<td>100,000.—</td>
<td>86,756.—</td>
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<td>6½% Nippon Koken K.K. 1979/84</td>
<td>100,000.—</td>
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<tr>
<td>6% Kansai El. Power, convert. 1979/84</td>
<td>200,000.—</td>
<td>161,182.—</td>
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<td>87,50</td>
</tr>
<tr>
<td>6% Tokyo 1965/80</td>
<td>14,000.—</td>
<td>56,851.—</td>
<td>21,898.—</td>
<td>99</td>
</tr>
</tbody>
</table>

Total: 395,360.— 354,857.—

Total Bank Deposits: 600,694.—

STATEMENT OF INCOME AND EXPENDITURE
FOR THE YEAR ENDED DECEMBER 31, 1979

INCOME

<table>
<thead>
<tr>
<th>Description</th>
<th>SFr.</th>
<th>SFr.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interest income from bonds</td>
<td>208,846.95</td>
<td></td>
</tr>
<tr>
<td>Interest in bank deposits</td>
<td>13,430.27</td>
<td></td>
</tr>
</tbody>
</table>

Total income: 222,277.22

EXPENSES

5% of total income above transferred to the Provision for administrative expenses (article 7 of the statutes of the Fund): 11,163.82

RESULT

Excess of income over expenditure for 1979: 212,113.40

STATEMENT OF APPROPRIATION

Balance carried forward from previous year: 204,670.56

Less:

Fifty-eight distribution of income for the year 1978 to seven National Societies: 180,000.—

Allocation to the reserve against fluctuations: 24,000.—

Unusual balance: 670.56

Excess of income over expenditure for the year 1979: 212,113.40

Balance as at December 31, 1979 as per balance sheet: 212,783.96

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Concerned for the victims of the military operations at the beginning of July at the Namibia-Angola frontier and in the south of Angola, the ICRC asked all the parties to the conflict to apply the fundamental principles of international humanitarian law. It also offered its services as a neutral and impartial intermediary in matters of protection and assistance.

During July the ICRC delegates in Pretoria carried out surveys in localities around Pretoria and Johannesburg (Atteridgeville, Saulsville, Mamelodi, Tembisa and Alexandra) and in the townships of Queens-town and East London. Their purpose was to review ICRC action for families of detainees and former detainees visited by the ICRC while in captivity. That action is threefold: monthly food parcels for every detainee’s family in need; paying the fare two or three times a year for families to visit detained relatives; medical examination, by a doctor chosen by the ICRC, of the most destitute persons (continuation or cessation of medical aid is decided on the basis of the medical report).

In July and August the value of assistance provided in the course of this action amounted to almost 28,000 Swiss francs.
Angola

The ICRC has been conducting a food assistance operation since May for several tens of thousands of displaced persons in Huambo province in Angola. In July it was asked by the Government in Luanda to provide medical assistance for the victims of military operations in the south of the country.

Consequently an ICRC medical team of a doctor, a nutritionist and two nurses undertook several surveys in the region to assess the extent of needs. It visited, in particular, Katchiungo and Bailundo, providing the hospitals with medicaments. Six patients, including three starving children, were taken to the Huambo hospital by the ICRC. In addition, the ICRC organized a nutrition centre at Katchiungo.

When visiting the villages of Chiumbo, Alto Chiumbo, Sfinge and Capange, the ICRC doctor observed symptoms of malnutrition among the whole population and ailments among children which were mainly the result of alimentary deficiency and lack of hygiene. Cases of scabies, malaria, bilharziosis, pneumonia and tuberculosis were also observed. The medical team gave treatment to some patients for malaria, conjunctivitis, lung infection and other ailments.

With further reference to medical action, the equipping of the Bomba Alta orthopaedic centre for amputees, financed and managed by the ICRC, has been practically completed, nine months after the start of work on the project. The centre has now reached its normal output capacity of about thirty artificial limbs per month.

Two teams are at work distributing relief to displaced persons, one in the east (Katchiungo, Tchikula, Tcholohanca) and the other in the north (Bailundo, Alto Hama). These teams have extended their action to five more conglomerations where the lack of food has been serious.

Relief distributed in July included 43 tons of food, 5,900 blankets and 2,750 kgs of soap to 12,300 displaced persons, 5,400 of them children. In August 155 tons of relief was distributed to 15,000 persons.

At the same time as this assistance work, the ICRC carried on a protective action in Angola. The head of the ICRC delegation has approached the authorities with a view to visiting captured members of UNITA (National Union for the Total Independence of Angola) detained by the Angolan Government.

UNITA, for its part, in a letter dated 25 July addressed to the ICRC, solemnly undertook to respect the fundamental rules of international humanitarian law applicable in armed conflicts.
ICRC staff in Angola at the end of August consisted of 21 persons: relief delegates, doctor, nurse, nutritionist, physiotherapists, prosthetist, administrators and two pilots who are flying three times a week since 4 August the ICRC's "Islander" between Luanda and Huambo. This aircraft had previously been assigned to the Salisbury delegation.

Zimbabwe

Continuing its phasing-out since the end of the conflict in Zimbabwe, the ICRC Salisbury delegation ceased all relief and medical assistance in June. Arrangements have been made for the Zimbabwe Red Cross to take over tracing activities as soon as possible. In the last three months there has been an increase in the number of enquiries by former refugees and relatives of former combatants in the nationalist movements. From the beginning of the year until the end of August, the tracing office at the Salisbury delegation opened 282 enquiries and dealt with 3,431 cases by mail, telex, telephone, or by visits from or to enquirers. It also organized eight repatriation operations.

For the dissemination of international humanitarian law, the delegates made several approaches to the authorities with a view to hastening Zimbabwe's accession to the Geneva Conventions and their additional Protocols.

Zambia

In the previous issue of International Review, it was stated that in June, ICRC delegates in Zambia had carried out distributions of relief supplies. This report should have added that those supplies were distributed to refugees from Namibia and Zimbabwe and to Zambian children suffering from malnutrition.

Zaire

Continuing their visits to civilian and military places of detention, two ICRC delegates, between 25 July and 4 August, had access to all the nine gendarmerie prisons in Kinshasa. A further series of visits to 29 places of detention in Shaba started on 19 August.
East and Central Africa

Ethiopia

In July and August the acting head of the ICRC delegation in Addis Ababa, Mr. François Droz, carried out a series of missions in the administrative provinces of Eritrea, Harrar and Tigre, with a view to reassessing needs for material assistance and to settle transport problems affecting relief supplies. On 28 and 29 July he was in Asmara, where the ICRC flew in 33 tons of food and medical supplies for the civilian population. On 12 August Mr. Droz went to Harrar and, on 15 and 16 August, to two camps near Mekele in which there were some 5,200 displaced persons. Observing urgent needs, he had several medical assortments (1 hospital kit, 3 dispensary kits, 3 paediatric kits), ten tents, blankets and food delivered to the camps.

Uganda

Since the end of the emergency following the Uganda-Tanzania conflict the ICRC, in accordance with its usual practice, had ceased its relief and medical assistance activities—taken over by the government, National Red Cross and other charitable organizations—to concentrate on its work of protection and tracing.

As part of such action, a new series of visits to places of detention took place from 25 July to 21 August. In that time, five delegates, one of them a doctor, went to the prisons of Luzira (Murchison Bay, Upper and Women's), Mba1e (Main and Women's), Jinja (Main and Remand), Rwimi, Tororo, Kiburara, Port Portal, Kigo and Gulu. They saw 4,789 detainees, including 112 women.

In the interval between that series of visits and the previous series in March-April, each place of detention had been visited at least once, and the situation in the large prisons like Murchison Bay, Mba1e and Jinja had been closely followed by the delegates.

Relief supplies (food and medicaments) distributed for detainees were increased. Funds appropriated for the action rose from 10,000 dollars in June to 14,100 in July and 20,700 in August.

In tracing activities, the Kampala office recorded a marked increase in the proportion of replies to family messages transmitted by it.
Chad

Forced by the persistent fighting and danger to withdraw to Kousseri on the Cameroon side of the river Chari, the ICRC delegates nevertheless went daily to N'Djamena to continue to give assistance and protection in the zone controlled by the People's Armed Forces (FAP) and to run the Farcha dispensary. In the part of the town held by the Armed Forces of the North (FAN), to which they had had no access since 24 May (the delegation had on several occasions been a target) the ICRC delegates have organized the removal of casualties to Cameroon and have continued seeking missing persons.

Many attempts have been made to overcome the obstacles to ICRC action in Chad. After the visit in June of the ICRC delegate-general for Africa (mentioned earlier), the ICRC delegates, on 8 July, during an interview with President Goukouni Oueddei, proposed a cease-fire in order to take enriched powdered milk to under-nourished children in the FAN zone where food was scarce. This offer came to nought, and the Geneva headquarters delegated Mr. Laurent Marti to undertake a special mission to Chad from 25 July to 1 August, for the purpose of negotiating with the leaders of the various factions the continuation of ICRC action for the benefit of conflict victims. At the end of August this effort had not been successful.

Whatever the difficulties encountered in negotiation, ICRC assistance did not abate: in July and August 220 tons of wheat (donated by the European Development Fund), milk, sugar, medical supplies and various relief goods were distributed in a score of villages and districts north-west of N'Djamena for the benefit of some 20,000 displaced persons.

In so far as protection is concerned, 42 detainees (FAN prisoners of war and civilian internees) were visited on 5 and 6 July in the FAP gendarmerie in N'Djamena and were given supplies. The visiting delegate interviewed 20 of them without witness. Two further visits were made to the same place of detention on 18 and 25 July.

It should be mentioned that the impossibility of travelling greatly hindered the tracing activities, particularly the transmission of family messages.

West Africa

Liberia

ICRC delegate-general for Africa, Mr. Frank Schmidt, carried out a mission to Monrovia from 9 to 17 August with a view to renewing
contact with the Liberian Red Cross and offering the new authorities the services of the ICRC to visit persons detained as a result of the coup d'etat of 12 April 1980. The previous visit of an ICRC delegate to Liberia had been in 1975, when the visits to places of detention, begun in 1973, ceased.

Mr. Schmidt conferred with the Head of the State, Master Sergeant Samuel K. Doe, the State Minister for Presidential Affairs, the Minister for Foreign Affairs, the Minister of Defence, the Commanding General of the Armed Forces and members of the “People’s Redemption Council”, the legislative and executive body of the State. As a result of these discussions, the Liberian authorities agreed that the ICRC might visit some, but not all, places of detention. Mr. Schmidt made it clear to the officials with whom he talked that the ICRC’s basic rule was that it should have access to all places of detention without exception in order to extend its humanitarian assistance to all detainees without discrimination. He pointed out, also, that if the ICRC did agree to visit only some detainees it would contravene the Red Cross principles of neutrality and impartiality.

On 5 September the President of the ICRC wrote a letter to that effect to the Liberian Head of State.

Western Sahara

Whilst carrying out a mission in Mauritania from 5 to 15 July, two ICRC delegates, one of them a doctor, visited on 8 July 115 combatants of the Polisario Front still detained in that country. Since the previous visit in July 1979 the Mauritanian authorities had released 36 prisoners, most of them wounded, sick or elderly.

On the other hand, not since September 1976 have ICRC delegates been able to visit Mauritanian and Moroccan prisoners held by the Polisario Front, despite the many requests to the persons in charge. The Moroccan authorities, for their part, have still not acceded to the ICRC’s request to visit again the hundred or so Algerians and Polisario Front combatants whom they hold prisoner. The last time the ICRC visited those captives was in 1978.

Latin America

Bolivia

After the coup d’Etat of 17 July, the ICRC regional delegate for the Andean countries and a medical delegate went to La Paz where, on 25 July,
EXTERNAL ACTIVITIES

pursuant to the ICRC mandate, they approached the authorities with a view to developing protection and assistance, especially for persons detained as a consequence of the events.

The ICRC protective action began as soon as the authorities gave their agreement. During the first series of visits, which took place from 4 to 16 August, the ICRC delegates interviewed without witnesses 176 detainees, in four places of detention and three hospitals in La Paz and in outlying localities. From 20 to 22 August the delegates were in the Beni department where they saw 69 detainees in two camps. By the end of August, 263 detainees in sixteen places had been visited in accordance with ICRC standards.

To help some detainees deprived of all resources or support from their families, medicaments, toilet articles, blankets and palliasses to a value of 6,500 dollars were handed out during the visits. In addition, the ICRC paid the fare of five destitute persons from La Paz, where they had recently been released, to their home town of Trinidad.

The Central Tracing Agency office at the Bolivian Red Cross headquarters in La Paz, directed by an ICRC delegate who arrived there on 13 August, has received many requests for information. Since mid-August some thousand people have been to the office to explain their cases (quest for news from missing relatives, transmission of family messages, etc.).

El Salvador

In July and August the ICRC delegates continued their activities to protect and assist the victims of the violence prevailing in El Salvador.

Protection: visits were made, from 24 June to 20 July, to 26 places of detention (penitentiaries, military precincts, places run by the national police and the Customs police) in the capital and the provinces and in which there were 52 persons detained for reasons connected with the events. In addition, on 23 August, the delegates had access to nine other persons arrested following a strike.

In their assistance work, the ICRC delegates collaborated with the El Salvador Red Cross Society in its action during the occupation of the Costa Rican embassy in San Salvador (11-26 July). In particular, they accompanied the National Red Cross representatives to the embassy on 14 July when 53 persons were medically examined. Medicaments, toilet articles, sheets, children’s clothing and baby-food were distributed. The Red Cross action consisted mainly of medical assistance, as a
government institution supplied adequate food. To this joint action by
the ICRC and the National Society the ICRC devoted 2,000 dollars.

The occupation of the embassy came to an end on 26 July with the depar­
ture of the occupiers for Costa Rica attended by ten members of the
El Salvador Red Cross, including a doctor.

In the context of a programme to inform the El Salvador population
of the role of the ICRC and of the National Society, and of the Red Cross principles and fundamental humanitarian rules, an information-delegate was sent from Geneva and reached San Salvador on 29 August,
for a survey mission.

Nicaragua

The ICRC delegates are continuing their protection of persons
detained for reasons connected with the events and held in 12 places
of detention. From 28 July to 22 August they went to seven places where
there were 3,427 detainees. The most important series of visits were to
the Tipitapa Centro de Readaptación social, from 28 to 31 July, and to the
Nueva Guinea Centro de Readaptación social, from 4 to 7 August.

In view of the material conditions of detention the ICRC is continuing
its assistance programme for detainees, and each month provides food
to a value of 50,000 dollars and medical aid estimated at 10,000 dollars.

Tracing activities have involved the collection of more than 2,000
family messages during the visits to prisons in the first half of 1980.
Of that total, more than 1,700 have been despatched. For want of a
system of correspondence these messages are often the only link between
detainees and their families.

Asia

Assistance to Kampuchean people

The confused situation and lack of security following the armed
confrontations which occurred at the end of June along the Khmer-Thai
border made high-level negotiations necessary in both Bangkok and
Phnom Penh, with a view to bringing about the conditions necessary for
continuation of the humanitarian action for the Kampuchean people.

From 16 to 20 July the representatives of the ICRC, UNICEF and
the World Food Programme (WFP), and Sir Robert Jackson, special
representative of the United Nations Secretary-General, had several interviews with the Thai authorities during which they set forth in detail the situation of the humanitarian organizations in the face of the difficulties they had encountered and stressed their concern to continue their assistance programmes, it being understood that the activities carried out in Kampuchea itself and on the Thai side of the border were two constituents of the same action. They emphasized that relief should be distributed in equitable fashion to all the needy civilian population, that distribution should be strictly controlled and that the safety of operations should be guaranteed.

These discussions and others held later made it possible to redistribute tasks between the organizations responsible for food assistance programmes at the Thai border. UNICEF will continue distributing food to the most vulnerable civilians (women and children) with the aid of the WFP and a number of voluntary agencies; the ICRC will participate in distribution to non-residents (Kampucheans who go to the border to obtain supplies across two "land bridges", situated only to the north of Aranyaprathet but will no longer be involve in distribution to the resident population. As for the other traditional activities of the ICRC, especially protection and the work of the Central Tracing Agency, these were again explained to the Thai authorities at the end of August by Mr. François Perez, head of the Bangkok delegation. In respect of medical assistance, the Thai Government once more expressed the wish that the ICRC continue co-ordinating all medical activities for the Khmer population at the border.

After their stay in Thailand, Mr. Jean-Pierre Hocké, ICRC Director of Operations, and the senior UNICEF and WFP officials, went to Phnom Penh where, from 21 to 25 July, they discussed with the authorities the various problems relating to humanitarian assistance. They again explained the position of principle of the ICRC and UNICEF pursuant to the respective mandate of the two institutions, and they defined the joint programme objectives for the period September-December 1980, underlining the importance of distribution control and medical activity development. Assurances were received in respect of the recipients of the relief and concerning possibilities for supervising the distribution of food and seed.

Kampuchea

In Kampuchea the joint action delegates had the opportunity to make several trips into the interior of the country. In July a mission to
assess and control distributions was conducted around Lake Tonlé Sap, namely at Kompong Chhnang, Pursat, Battambang, Sisophon, Siem Reap and Kompong Thom. In two districts of the Prey Veng province the delegates attended the direct distribution to the inhabitants of 280 tons of relief (rice, maize, oil, sugar, and milk powder). From 5 to 12 August the head of the ICRC delegation in Phnom Penh and a medical delegate again toured the Tonlé Sap region. Everywhere they saw progress in the rice plantations for which the seed had been provided by the international community. Furthermore, they noticed that a special effort was being made by the Kampuchean personnel in the hospitals and infirmaries which they visited.

The first phase of the medical programme, the revival of the country’s hospital services—begun by the ICRC in April—has come to an end. More than 600 standard kits of medical equipment and medicaments have been distributed to village infirmaries and district dispensaries, and ten surgical kits to hospitals. The value of this assistance amounted to almost a million Swiss francs; it will continue during the second half of the year on the basis of a similar budget and distribution plan (500 dispensary kits for a population of about 5 million).

A fifth medical team, provided by the Swedish Red Cross, began working at Svay Rieng at the end of August. The other four, sent by the Red Cross Societies of East Germany, Hungary, Poland and the USSR, are at work in the provinces of Kompong Thom, Kompong Speu, Kompong Cham and Takhmau. As an example of the work they are doing, we would mention that of the Polish Red Cross medical team of eight persons: it tends an average of 400 inpatients at the Kompong Cham hospital and also treats 400 outpatients each day.

For the air-lift of relief, the Hercules aircraft made available for the joint action by the Australian Government flew 73 times between Bangkok and Phnom Penh from 15 June to 15 August, conveying 859 tons of equipment and relief (milk powder, baby-food, medical supplies, agricultural implements, schools material, etc.).

Thailand

The skirmishes along the Khmer-Thai border resulted in population movements which hindered food distribution. After an interruption for several days, distribution to non-residents resumed after the introduction of a new procedure: two distributions a month of 100 kg of rice
per buffalo cart and 30 kg of rice per person coming on foot to the
"land bridges".

Medical activities, on the other hand, increased considerably in July
and August as a result of the situation and the outbreak of a malaria
epidemic to the south of Aranyaprathet. Almost a thousand persons
(wounded, sick and their relatives) were transferred from the frontier
zone to Khao I Dang camp by four medical teams; quinine and mosquito
nets were distributed.

At the end of August the number of ICRC medical staff in Thailand
was 114, including 21 doctors and 68 nurses.

Viet Nam

Mr. Jean de Courten, ICRC delegate-general for Asia, was on a
mission to Viet Nam from 11 to 18 June, when he introduced the new
head of the ICRC delegation in Hanoi, Mr. Thierry Germond, to the
authorities. On that occasion the delegates and the National Red Cross
reviewed the International Red Cross assistance programmes and
visited some of the projects completed thanks to that assistance, includ­
ing the Rach Gia hospital, the emergency centre in Ho Chi Minh City
and the radiology department of the Tu Du hospital in the same city.

In addition, the delegate-general explained the ICRC's activities in
South East Asia to the Minister of Foreign Affairs, Mr. Nguyen Co
Thach, and to other Vietnamese authorities.

Moreover, as part of its work for the protection of nationals of
countries having no diplomatic representatives in Viet Nam, the ICRC,
on 3 July, organized the transport of 140 people of Chinese origin who
were resident in Viet Nam and wished to rejoin relatives in Taiwan.
Since September 1976, when this action began, 3,678 persons have made
the journey in 25 flights.

Refugees in South East Asia

On 28 July the League and the ICRC made a further joint appeal
for funds for the continuation of the assistance to South East Asian
refugees. The appeal, for 6,986,000 Swiss francs to cover the period
from 1 August 1980 to 31 January 1981, was made following a meeting
in Djakarta on 9 and 10 July, when representatives of the National
Societies of the countries directly involved in the refugee programme and those of the ICRC and the League reviewed the situation and drew up the programme for the new budget period.

For the ICRC, the budget estimates amount to 1,438,000 Swiss francs, mainly to cover the needs at headquarters and in the field of its Central Tracing Agency, including support for the Tracing and Mailing Services (TMS) of the Red Cross and Red Crescent Societies working for refugees in South East Asia. According to the estimates of the Office of the High Commissioner for Refugees the number of refugees still in the countries of first asylum on 30 June was 223,339.

The International Red Cross action for South East Asian refugees is co-ordinated by the "League-ICRC Intervention Group", set up in July-August 1979. Working in co-operation with the National Societies of China, Hongkong, Indonesia, Macao, Malaysia, Philippines, Singapore and Thailand, the Group plans assistance programmes and their financial implications for the National Societies directly involved in the relief operations and for those providing the funds, supplies and staff.

From 8 to 11 August, three delegates, one of them a doctor, carried out a mission in the Songkhla region in the far south of Thailand to survey the situation of refugees between their arrival on the coast of the countries of first asylum and their admission to camps. They saw the excellent work of the HCR with the assistance of Médecins sans frontières and other voluntary agencies.

Iran

Continuing his visits to places of detention, the ICRC delegate in Iran went in July to two prisons in Khuzistan province: he saw 330 detainees at Ahvaz and seven at Abadan. On 17 August he visited some thirty others in the prison at Zanjan.

On 26 July, accompanied by officials of the Iranian National Society, he visited a camp which had been set up near the border by the Teheran authorities in which there were more than 3,000 persons of Iranian origin who had left Iraq. Family message forms were distributed for those wishing to write to relatives who had remained in Iraq.

Afghanistan

As a consequence of certain difficulties encountered in the discharge of their humanitarian mission, the ICRC delegates in Kabul were recalled to Geneva on 15 June for consultations.
Anxious to extend its protection and material and medical assistance to all victims of the conflict, the ICRC several times approached the Afghan authorities, proposing the despatch of a high-level mission to Kabul to discuss problems relating to its action. On 26 July the Afghan Government replied that it was not prepared to receive such a mission. In a message on 1 August to President Babrak Karmal, the ICRC requested the Afghan authorities to reconsider their position, pointing out that its persistent effort to obtain authorization to carry out its activities in Afghanistan was motivated solely by its concern to alleviate the suffering of the victims. Approaches were made also to the Government of the USSR.

Its overtures having met with no response, the ICRC, on 16 September, publicly appealed to all the parties militarily engaged in the conflict in Afghanistan to respect international humanitarian law and permit the ICRC to discharge to the full its traditional tasks of protection and assistance. In particular, the ICRC asked the Afghan Government to authorize it to resume and extend the activities it had carried out from January to June 1980. It also urged all States parties to the Geneva Conventions to give its appeal their firm support, in discharge of their obligation to ensure respect for those Conventions.

We point out that it was after the receipt of assurances from the highest Afghan authorities that the ICRC opened and permanently maintained a delegation in Kabul from the end of January until mid-June. During their first few months in Afghanistan, the ICRC delegates twice visited (6-7 February and 12-13 April) the Pul Charki prison, where they saw 427 detainees. In addition, at the request of the Afghan Red Crescent, they distributed two tons of medical supplies to various hospitals in the capital.

Pakistan

Professor Gilbert Etienne, a member of the ICRC, carried out a mission to Pakistan from 16 to 31 August in order to assess the ICRC action in the joint ICRC-League operation for Afghan refugees.

Operational since mid-February in the provision of medical assistance in co-operation with the Pakistan Red Crescent, the ICRC had, at the end of August, three mobile medical teams, each comprising a doctor, two nurses and a locally recruited driver. Two of these teams are based at Parachinar and cover the Kurram region. The third, based at Miram Shah, operates in North Waziristan. During their first three months of
activity (April-June), two teams treated 15,624 patients in a dozen camps which had dispensaries under canvas. With the reinforcement by the third team, the total number of consultations given from 1 to 24 July amounted to 12,828.

Staff strength in Pakistan includes two delegates, one of whom, a doctor, supervises the medical action.

Indonesia

The joint Indonesian Red Cross-ICRC assistance programme for displaced civilians in East Timor, started at the beginning of October 1979 for an initial period of six months, was prolonged by agreement for a further six months, i.e. until 15 October 1980. At present it covers fourteen villages, ten of which, with a total of 61,629 inhabitants, receive food and medical assistance, the other four, with 27,276 persons, receiving only medical assistance.

The general improvement in health in these villages is noticeable. In addition to this food and medical assistance, the Red Cross distributes rice and maize seeds with a view to developing agriculture. The seeds are provided by Catholic Mission Relief Services (CRS). In some villages, where protein sources are inadequate, a start has been made to the breeding of hens which are resistant to local conditions. Where there is water, a study of duck-breeding possibilities is under way. Vegetable gardens have been started for hospital patients and other projects have been completed, such as the laying of new drainage systems, the construction of a reservoir to supply water to the Uatulari hospital, the repair of bridges, roads and sanitation systems. Courses in hygiene and first aid are being given to the population.

With the end of the rainy season there arose new problems (heavily damaged roads, gales combined with poor visibility limiting helicopter flights, high seas making the south coast almost inaccessible to shipping) which made repeated readaptation of the logistic infrastructure for the programme necessary.

The medical assistance programmes undertaken in the initial phase of the operations are continuing. Although the effect of under-nourishment in the assisted villages has not been eradicated, the number of marasmic children is declining, as also is the incidence of malaria. A programme has been started to combat filariosis, and tuberculosis patients are regularly checked. An increase in births has been observed.
To continue the action, 500 tons of dried beans, 61 tons of oil, 30 tons of salt, 8 tons of milk for children, 32 tons of sugar, 88 tons of soap and 15,000 blankets have been purchased in Djakarta. In addition, the Australian Government has donated 1,300 tons of maize and 110 tons of protein-rich biscuits; the CRS has donated 25 tons of rice; and the Indonesian Red Cross 50,000 items of clothing. By recent generous donations (1.4 million Swiss francs from the Japanese Government, 500,000 dollars from the United States, etc.) the budget for the second phase of the action, amounting to 6,800,000 Swiss francs, has been covered.

Staff engaged in the joint operation as of 25 August was 264 employees of the Indonesian Red Cross (6 executive staff, 11 doctors, 16 nurses, 135 local voluntary workers, 14 drivers and 82 labourers) and three ICRC delegates (one doctor and two relief delegates).

Middle East

Israel and the occupied territories

The ICRC kept a watchful eye in July and August on the grave situation prevailing in the Israeli prisons following the hunger strike which the detainees at Nafha (a prison in the Negev desert) started on 14 July and which resulted in the death of two civilian Arab detainees. Immediately after the start of the strike the ICRC delegates made special visits to the places of detention affected. On 18 July they went to Nafha prison and interviewed prisoners of their choice without witnesses. On 23 July, after being notified by the Israeli authorities of the death of one of the 26 detainees transferred from the Nafha prison to the Beit Maatsar prison, the delegates went to the latter where they talked privately with 23 detainees. They also went to the hospital in which there were two detainees, one of whom died the following day. On 24 July the delegates again went to Nafha and interviewed six detainees without witnesses. They conveyed news to families about the health of detainees and obtained permission from the authorities for families to go to the Beit Maatsar prison on 27 July. On 6 August the delegates again went to Nafha and saw the 47 prisoners still detained there.

In the meantime, detainees' relatives occupied the premises of the ICRC sub-delegation in Jerusalem and started a hunger strike. This came to an end with the cessation of the strike in Nafha on 15 August.
The detention conditions and hunger strike in the Israeli prisons, incidentally, were discussed in several interviews between ICRC delegates and senior Israeli officials. On 14 August Mr. Jean-David Chappuis, head of the ICRC Tel Aviv delegation, met the Israeli Minister of the Interior, Mr. Yosef Burg.

ICRC delegates have been visiting detained Arab civilians in Israel and the occupied territories for thirteen years. From the day the Nafha prison was brought into commission, on 2 May 1980, until the outbreak of the hunger strike, the delegates visited the prison three times and conveyed their comments on detention conditions to various echelons of the Israeli Government.

**Transfers**

Three operations for the transfer of persons between Israel or Israeli occupied territory and Syria took place under ICRC auspices. On 6 August, a family of five, including three children, was transferred from Syria to occupied Golan via the Quneitra check point. The family returned to its own village, Majdel Chams. Two other operations enabled 47 students (45 from Golan and 2 from Gaza) to return from Damascus to the occupied territories for the university holidays.

**Lebanon**

The main work of the ICRC delegation in Beirut during the last few months was tracing. In June and July 4,906 family messages were exchanged, 235 enquiries instituted and 117 closed, most of them with a positive reply. Seventy transfers of persons took place, 52 of them from one zone of Lebanon to another.

Relief distributed in June, mainly to the victims of the recent events in the north of Lebanon, comprised 5.6 tons of supplies (milk, baby-food, layettes and clothing). Since July the delegation has supplied no food.

Medical assistance took the form of a few distributions to the Lebanese Red Cross or directly to hospitals, dispensaries and mobile clinics. The delegation's work in this sphere consists mainly in conducting enquiries in regions where only the ICRC may go, in order to inform the Lebanese Red Cross and the Government services of needs in those regions and to help them to draw up suitable medical assistance programmes.
THE SOUTH AFRICAN RED CROSS AND DISSEMINATION OF KNOWLEDGE OF INTERNATIONAL HUMANITARIAN LAW

Since the Mombasa seminar on the dissemination of international humanitarian law, in August 1978, the South African Red Cross has continued its efforts to disseminate knowledge of that law and we believe readers might be interested in the main directions of its efforts.

In the first place, the Society has issued several publications for various sectors of the public.

The study written by its President, "The Influence of the Red Cross upon Public International Law, with special reference to Southern Africa" has been widely distributed in university circles. In addition, the Society encourages law students to write theses on subjects related to humanitarian law.

In other schools, it distributes many copies of *The Red Cross and My Country* and the accompanying *Teacher's Manual*, both of which were published by the ICRC.

The South African Red Cross has also had the Geneva Conventions translated into Zulu and Xhosa, so that these treaties may be accessible to a wide public.

Apart from promoting these publications, the South African Red Cross has organized several training seminars.

From 29 October to 2 November 1979 a seminar on the dissemination of knowledge of the Geneva Conventions was held in Johannesburg, attended by representatives of the National Societies of Botswana, Kenya and Mauritius, and of the ICRC. Important resolutions were adopted with a view to encouraging the dissemination of knowledge of international humanitarian law, particularly among the armed forces, and in schools and universities.

In the years 1979-80 various branches of the South African Red Cross also organized local seminars on the Geneva Conventions, such as the one held in Capetown in February 1980.
The South African Red Cross endeavours to make the principles of international humanitarian law known to the general public. For that purpose it has published articles in the press and broadcast on the subject by radio and television.

This summary does no more than mention the action taken, but all who work for the dissemination of knowledge of humanitarian law will appreciate the sum of thought, work and dedication necessary to make a success of such undertakings.

MUSEUM OF THE SOVIET RED CROSS

In November 1979, Mr. V. A. Baltiyski, Chairman of the Executive Committee of the Alliance of Red Cross and Red Crescent Societies of the USSR, opened the Soviet Red Cross Museum in Moscow. Those present included the participants in the fifth plenary session of the Alliance's Executive Committee, veterans and staff of the Red Cross and Red Crescent and the representatives of various organizations and associations.

Five years earlier, the Soviet Red Cross Review had asked readers to send in any objects and documents which could be used to illustrate the history of the Red Cross in the USSR. There was an extraordinarily big response to the appeal, and today the museum has a large collection of manuscripts and printed material, albums, medals and various objects dating from the end of the nineteenth and the beginning of the twentieth century, many of which are unique. The USSR Defence Ministry's museum of military medicine gave models of ambulance wagons, medical vehicles and aircraft of the type used during the First World War.

Each of the eight rooms of the museum is arranged like the interior of a field dispensary. Visitors moving through the various rooms may follow the development of the Red Cross in the USSR from the time it was founded under the Tsarist régime until today, and may learn all about its present organization and activities.

In the course of the one hundred and thirteen years of its existence, the Red Cross Society has become one of the most important institutions in the USSR. Very soon after coming to power, Lenin said: “We need a Red Cross which works sincerely and loyally for the State, the workers
and the peasants" and, in 1918, he signed in succession nine decrees which defined the essential tasks to be performed by the Society in the USSR. These decrees are exhibited in one of the museum's rooms, together with the portraits of eminent Red Cross workers at the time when the Society was reorganized after the establishment of the Soviet State. A section is given over, also, to its activities during the civil war after 1917 and to the tremendous work it did to counter the havoc caused by the disastrous drought in 1921.

The Alliance is a powerful auxiliary organization of the medical services. In one of the rooms one can see how medical assistants were trained 50 or 60 years ago to teach elementary notions of hygiene and health to the country's inhabitants. A special section is devoted to the Red Cross nurses, health instructors and medical units, whose dedication and heroism during the Second World War knew no bounds.

Another part of the museum displays the international activities of the Soviet Red Cross, the aid brought to the victims of disasters or armed conflicts in various countries and the work of Soviet doctors sent on mission abroad.

The medals and insignia of the Alliance and of other National Red Cross and Red Crescent Societies are displayed in a show-case, together with the presents and mementoes presented to the Soviet Red Cross in recent years.

The Soviet Red Cross Museum is a remarkable achievement, and it will certainly serve to spread knowledge of the Red Cross Principles and to inform visitors on the history and background of the National Society in the Soviet Union.

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1This article has been adapted from an account written by N. Ternova, of the Executive Committee of the Alliance of Red Cross and Red Crescent Societies of the USSR, and which appeared in the January 1980 issue of the Soviet Red Cross Review.
Two new publications on Henry Dunant

FELIX CHRIST: HENRY DUNANT, LIFE AND FAITH OF THE FOUNDER OF THE RED CROSS

Dr. F. Christ, a doctor of theology of the University of Basle, is chief press officer of the Swiss Red Cross in Berne and for several years he has studied the spiritual side of the Red Cross founder's character.

In his book Henry Dunant's life is outlined in five chapters: early years, the Red Cross, solitary wanderings, hope, and lasting fame. At each stage, Dr. Christ places the emphasis on the relation between faith and work, an unusual approach to the deep motivations of the man who was a great deal more than merely "the good Samaritan of Solferino".

The author's theological studies and his careful reading of manuscripts preserved in Geneva have enabled him to fill out aspects of Dunant's personality which are still little known. For example, he describes and comments on, with great exactitude and pertinence, three diagrams by Dunant displayed in the Institute which bears his name. These bizarre compositions, with bright colours and symbolic emblems trace the history of the human race as recounted in the Bible. Such representations always fascinated Dunant; they gave him insight into the risks of a world war and spurred him to work for peace.

Dealing with a subject which has no implications for the present day—religious and theological speculation—the theologian in Dr. Christ has developed his ideas very fully in what is, on the whole, a very interesting book.

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1 Felix Christ: *Henry Dunant, Leben und Glauben des Rotkreuzgründers*, Imba Verlag, Fribourg-Switzerland, Friedrich Wittig Verlag, Hamburg, 1979, 64 pp., collection «Gelebtes Christentum». 
Unfortunately, some of Dunant's extreme attitudes to events of his time are not mentioned. The inner life of this philanthropist of genius was probably more animated and contained more contradictions than can be inferred from the book.

JACQUES POUS: HENRY DUNANT L'ALGÉRIEN

Mr. Pous' book illustrates quite another side of the complex personality of Dunant "The Algerian", in other words, the colonizer and financier. The author had access to archives only recently made available to the public and his work deserves the closest attention.

While Algeria was still smarting in the aftermath of the French conquest, Henry Dunant was among those Europeans who came to colonize it and he later became involved in speculative operations which were neither philanthropic nor completely untainted by questionable dealings. These are the thorny problems surrounding the activities of Dunant which embarrass his admirers. But it must be conceded that a great man may also have his weaknesses; and Dunant, in later years, outgrew the phase in which men seek to conquer their fellows to impose their will and their culture on them, and in his writings he defended each individual and each culture. His final attitude and message, set against the ideas prevalent at the end of the 19th century, gain in originality and grandeur.

Thus Mr. Pous' book discloses some aspects of Dunant's viewpoints which, far from diminishing him, show him as a man who is fallible even though he is a genius, in other words, it brings to light Dunant's humanity.

Roger Durand

IONEL CLOȘCA: HUMANITARIAN LAW AND THE NEW INTERNATIONAL ORDER

The author of this closely-packed and extensively documented book analyses the changes that have occurred in recent years on the scene of international armed conflicts, their impact on international law in general and humanitarian law in particular, and the role and functions of humanitarian law in the frame of the new international order.

The chapter headings are a useful indication of the steps in Dr. Ionel Cloșca's thinking: Humanitarian law in history—From classical wars to international conflicts—The new types of armed conflicts and international law—Weapons of mass destruction and their prohibition—The new code for the protection of the civilian population—The new status of the wounded and sick—The purposes of humanitarian law in the frame of the new international order.

We would like to mention, too, that Dr. Ionel Cloșca is preparing a "Small dictionary of international humanitarian law for members of the armed forces", which is expected to be issued soon.

A recent ICRC publication:
The International Committee of the Red Cross and its Activities in the World

Original text by Michel Testuz, chief-editor of the International Review of the Red Cross.
Illustrations taken from ICRC records.
A 96-page album containing a commentary in both English and French, with 103 illustrations, about half of which are in colour. Geneva, ICRC, 1980.
Price: 8 Swiss francs or 5 US dollars.

ADDRESSES OF NATIONAL SOCIETIES

AFGHANISTAN (Democratic Republic) — Afghan Red Crescent, Pahlavi, Kabul.

PEOPLE'S SOCIALIST REPUBLIC OF ALBANIA — Albanian Red Cross, 35, Rruga e Barrikads, Tirana.

ALGERIA (Democratic and People's Republic) — Algerian Red Cross Society, 15, boulevard Mohamed V, Alger.


AUSTRALIA — Australian Red Cross, 206, Clarence Street, Sydney.

AUSTRIA — Austrian Red Cross, 3 Ganshaussstrasse, Postfach 39, Vienna E.

BHUTAN — Bhutan Red Cross Society, Box N 91, Thimphu.

BAHRAIN — Bahrain Red Crescent Society, 29, EI-Galaa Street, Manama.

BANGLADESH — Bangladesh Red Cross Society, 34, Bahadurhadi Avenue, Dhaka 2.

BELGIUM — Belgian Red Cross, 98 Chaussee de Vleurgat, Brussels.

BOLIVIA — Bolivian Red Cross, Avenida Simon Bolivar, 1515, La Paz.

BRAZIL — Brazilian Red Cross, Avenida 8, Apartado 1025, Rio de Janeiro.

BURMA (Socialist Republic of the Union of) — Burma Red Cross, 42 Strand Road, Red Cross Building, Rangoon.

BULGARIA — Bulgarian Red Cross, 7a, 34-65, Apartado nacional1110, Sofia 27.

BURUNDI — Red Cross Society of Burundi, rue du Marche 3, P.O. Box 324, Bujumbura.

CAMEROON — Cameroon Red Cross Society, rue Henry-Dunant, P.O.B. 631, Yaounde.

CENTRAL AFRICAN REPUBLIC — Central African Red Cross, B.P. 1429, Bangui.

CHILE — Chilean Red Cross, Avenida Santa Maria 2465, Correo 28, Santiago.

CHINA (People's Republic) — Red Cross Society of China, 53, Kaumien Hutung, Peking.

COLOMBIA — Colombian Red Cross, Carrera 7a, 3a, 34-55, Apartado nacional 1110, Bogota D.E.

COLOMBIA — Colombian Red Cross, Carrera 7a, 3a, Apartado 1202, Bogota.

CUBA — Cuban Red Cross, Calle 23 201 esq. N. Vedado.

CZECHOSLOVAKIA — Czechoslovak Red Cross, Zizkovska 18, 119 04 Prague 1.

DENMARK — Danish Red Cross, Dag Hammarskjold Afd 28, Postboks 2600, 2100 København 0.

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, 3a Avenida Norte y 3a Calle Poniente, San Salvador, C.A.

ETHIOPIA — Ethiopian Red Cross, Ras Desta Dambaw Avenue, Addis Ababa.

FUJI — Fiji Red Cross Society, 193 Rodwell Road, P.O. Box 569, Suva.

FINLAND — Finnish Red Cross, Tehtaankatu 1 A, Box 158, 00181 Helsinki 14/17.

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 Federal Republic of Germany, Kastanienallee 2, DDR 801 Dresden 1.


GHANA — Ghana Red Cross, National Headquarters, Ministries Annex A3, P.O. Box 835, Accra.

GREECE — Hellenic Red Cross, rue Lykavittou 1, Athens 117.

GUATEMALA — Guatemalan Red Cross, 3a Calle de Benin, B.P. 1, Portoviejo.

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EL SALVADOR — El Salvador Red Cross, 3a Avenida Norte y 3a Calle Poniente, San Salvador, C.A.
LIBERIA — Liberian Red Cross, National Headquarters, 107 Lynch Street, P.O. Box 225, Monrovia.

LIBYAN ARAB JAMAHIRIYA — Libyan Arab Red Crescent, P.O. Box 561, 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 3080, Chichiri, Blantyre 5).

MALAYSIA — Malaysian Red Crescent Society, JKR 2358, Jalan Tun Ismail, Kual Lumpur 11-02.

MALI — Mali Red Cross, B.P. 280, Bamako.

MAURITANIA — Mauritanian Red Crescent Society, B.P. 344, Avenue Gamsal Abdal Nasser, Nouakchott.

MAURITIUS — Mauritius Red Cross, Ste Therese Street, Curepipe.

MECOX — Mexican Red Cross, Avenida Ejecutivo Nacional no 1032, México 10 D.F.

MONACO — Red Cross of Monaco, 27 Prinsessegracht, 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, Taltalchul, P.B. 217, Kathmandu.


NEW ZEALAND — New Zealand Red Cross, Red Cross House, 14 Hill Street, Wellington 1.

NIGER — Niger Red Cross Society, B.P. 377, Niamey.

NIGERIA — Nigerian Red Cross Society, Eko Akete Close, off St. Gregory Rd., P.O. Box 764, Lagos.

NORWAY — Norwegian Red Cross, Drammenveien 20 A, Oslo 2, Mail add.: Postboks 2339, Sollid, Oslo 2.

PAKISTAN — Pakistan Red Crescent Society, National Headquarters, 169, Sarwar Road, Rawalpindi.

PAPUA NEW GUINEA — Red Cross of Papua New Guinea, P.O. Box 6545, Port Moresby.

PANAMA — Panamanian Red Cross, Apartado Postal 668, Zona 1, Panama.

PARAGUAY — Paraguayan Red Cross, Brasil 2/6, Asuncion.

PERU — Peruvian Red Cross, Jirón Chacay 881, Lima.

PHILIPPINES — Philippine National Red Cross, 960 United Nations Avenue, P.O.B. 210, Manila D 2807.

POLAND — Polish Red Cross, Mekotowska 14, Warsaw.

PORTUGAL — Portuguese Red Cross, Jardim 9 Abril, 1 a 5, Lisbon 3.

ROMANIA — Red Cross of the Socialist Republic of Romania, Strada Biserica Aman 29, Bucuresti.

SAPFARIA — Saafarian Red Crescent, Palais gouvernemental, San Marino.

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 Pasir Panjang, Singapore 0932.

SOMALIA (DEMOCRATIC REPUBLIC) — Somali Red Crescent Society, P.O. Box 937, Mogadishu.


SPAIN — Spanish Red Cross, Eduardo Dato 16, Madrid 50.


SUDAN — Sudanese Red Crescent, P.O. Box 235, Khartoum.

SWAZILAND — Baphalali Swaziland Red Cross Society, P.O. Box 377, Mbabane.

SWEDEN — Swedish Red Cross, Fock, 5-104 40 Stockholm 14.

SWITZERLAND — Swiss Red Cross, Rämistrasse 27, 8001 Bern.

SYRIAN ARAB REPUBLIC — Syrian Red Crescent, Bd Mahdi Ben Barake, Damascus.

TANZANIA — Tanzania Red Cross Society, Umegaa Road, P.O.B 1133, Dar es Salaam.

THAILAND — Thai Red Cross Society, Pathittharam Building, Chulalongkorn Memorial Hospital, Bangkok.

TOGO — Togolese Red Cross Society, 51 rue Boko Soga, P.O. Box 655, Lome.

TRINIDAD AND TOBAGO — Trinidad and Tobago Red Cross Society, Wellington 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, Yenisehir, Ankara.

UGANDA — Uganda Red Cross, Nakasuga Road, P.O. Box 494, Kampala.

UNITED KINGDOM — British Red Cross, Grosvenor Crescent, London, SW1X 7EL.

UPPER VOLTA — Upper Volta Red Cross, P.O.B. 340, Gaoua-Nouveau.

URUGUAY — Uruguayan Red Cross, Avenida 8 de Octubre 2990, Montevideo.


U.S.S.R. — Alliance of Red Cross and Red Crescent Societies, J. Tcheremushkinskii pr. 5, Moscow 117035.

VENEZUELA — Venezuelan Red Cross, Avenida Andes Bello No. 4, Apart. 3185, Caracas.

VIET NAM, SOCIALIST REPUBLIC OF — Red Cross of Viet Nam, 68 rue Bk-Trung, Hanh. YUGOSLAVIA — Red Cross of Yugoslavia, Simina ulica broj 2, Sarajevo.

REPUBLIC OF ZAIRE — Red Cross of the Republic of Zaire, 41 av. de la Justice, P.B. 170-01, Kinshasa.

ZAMBIA — Zambia Red Cross, P.O. Box R.W.1, 2837 Brestwood Drive, Lusaka.