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# international review of the red cross



INTER ARMA CARITAS

GENEVA

INTERNATIONAL COMMITTEE OF THE RED CROSS

FOUNDED IN 1863

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**GERMAN**

J. Pictet : Die Notwendigkeit einer Bekräftigung der Gesetze und des Gewohnheitsrechts in bewaffneten Konflikten (II) — Weltrotkreuztag.

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# XXIst INTERNATIONAL CONFERENCE OF THE RED CROSS

## Opening Session Speeches

*After publishing in its November issue the resolutions adopted by the XXIst International Conference of the Red Cross and an article by Mr. J. Pictet, member of the ICRC, on the significance and work of this important meeting, the International Review now quotes from speeches which were delivered by the President of the Turkish Republic and by leading officials of the Red Cross movement at the Opening Session of the Conference.*

*This official ceremony at the Istanbul Culture Palace on 6 September 1969, a manifestation of the Red Cross spirit, was enhanced by the music of Mozart and Rossini. After the playing of the Turkish National Anthem, the President of the Turkish Red Crescent welcomed the delegates and, as our readers will see, the eminent speakers who came to the rostrum affirmed how valid in the world today is the humanitarian message symbolized by the flags of the Red Cross, Red Crescent, and Red Lion and Sun.*

\* \* \*

### **H. E. Mr. Sevdet Sunay, President of the Turkish Republic**

It is a pleasure for me to welcome with gratitude the distinguished members of this assembly, who kindly chose our country for the XXIst International Conference of the Red Cross, and thus honour the city of Istanbul with their presence. While performing this pleasant duty on behalf of the Turkish Nation and State, I feel also particular joy in my capacity as Honorary President of the Turkish Red Crescent Society, which celebrated its centenary last year.

## XXI<sup>ST</sup> INTERNATIONAL CONFERENCE

The Turkish nation, which throughout its history considered itself duty-bound to alleviate suffering in all forms of human distress, and the Republic of Turkey, which pursues firmly the policy of "Peace at home and peace in the world" set forth by Atatürk its venerated founder, were overjoyed and immensely proud at the decision of the International Red Cross, which unites in the service of mankind 112 National Red Cross, Red Crescent, and Red Lion and Sun Societies representing 220 million members, to hold this Conference, the supreme body of the organization, in our country which founded the first National Society having the Red Crescent as its emblem . . .

. . . On this occasion, I should like to pay respectful tribute to the memory of Henry Dunant, the great philanthropist, who won the eternal gratitude of mankind by lighting the inextinguishable torch of compassion at Solferino in 1859 and heralding a new era of civilization.

Your charitable institutions, which since that date have tended the wounds of their nations and of all mankind in wars and natural disasters, have achieved remarkable progress deserving of the highest praise for the magnificent services they have rendered and for the circumstances and opportunities allowed.

The efforts exerted by the newly independent nations to set up a Red Cross or Red Crescent Society and to join your League as soon as possible is irrefutable proof of the prestige which your example and your successes have acquired in the eyes of mankind.

I hope that, on the one hand, subjects such as international humanitarian law and assistance to civilian populations in armed conflicts—which have been emphasized from the outset—the protection of life and health, the development of youth and social services and that, on the other hand, ideas promoting the necessary conditions for maintaining world peace will be discussed at this Conference, as was the case at the Vienna Conference, and that our peace-loving aspirations will be expressed.

Despite the sufferings and unhappy experiences of the past, the probable escalation of present conflicts, the arms race, the use of outer space for military purposes and the recurrence of natural disasters may make the tasks of your organization even more onerous.

I should like, in particular, to affirm that your movement, by speedily fulfilling, nationally and internationally, the obligations arising out of all these tasks on the basis of the fundamental principles of the Red Cross which are well known to you all, will achieve further progress in the service of mankind. I should also like to affirm that the Turkish Nation and its Red Crescent will participate with enthusiasm in discharging these tasks and will carry out the duties devolving upon them to the best of their ability. I also wish to thank, on behalf of the Turkish Nation, those who have served this cause, to encourage those who have devoted themselves to it, and to express once more our gratitude for the assistance so generously extended to my country by your States and your Societies following various events and at every opportunity . . .

**Lady Limerick, Chairman of the Standing Commission  
of the International Red Cross**

. . . We are meeting today at a time when many parts of the world are torn by war, dissension and civil unrest. Indeed for many years now the world has been harassed by tension inseparable from the great changes we have seen in political boundaries, theories of government and the rate of scientific discovery. To many it must seem that the stress of human differences must always dominate thought and action.

But luckily the Red Cross stands apart from national, racial, religious or political questions. The ideals which inspire it spring from a wisdom which is indifferent to the ebb and flow of public opinion or the ideologies of the moment: they have outlived those who created them just as they will survive us.

The Red Cross is unique in its impartiality in offering practical help on an international level to the victims of war or natural disaster. It has one object only in mind—to organise human kindness to relieve human suffering irrespective of race, nationality, class, creed or politics. It is this which makes possible the successful partnership of 220 million people in 112 countries throughout the world.

We have not only an opportunity but a responsibility, at this Conference, of proving to the world that humanitarian considera-

tions can overcome political differences: that the distinguished representatives of Governments and the leaders of National Societies gathered here today are animated by one purpose only—to seek practical humanitarian measures to solve some of the acute problems which now confront and divide the world.

International unity is the only way to dispel the insecurity which haunts nations today and which springs largely from a loss of faith in the value of Treaties.

The Geneva Conventions are the greatest effort yet to safeguard the best interests of the human race. They appeal for compassion to combat nationalism, and their originator and guardian—the Red Cross—is accepted among nations as a bridge of practical goodwill. Since it concerns the whole human race it is more important than any group or nation.

Common action between peoples of all races is in itself a force for peace. Common enterprise promotes friendship and understanding and makes for goodwill, showing that people with different ideologies can work together in amity and confidence.

We hear these days much talk about change and progress and we have certainly witnessed these in all things material. But progress itself can never be a sufficient ideal for humanity: it gives us better medical science, but it gives us more powerful bombs too.

We must learn to relate the computer with compassion. Knowledge itself is not enough because it can be used for any purpose—good or evil. Only wisdom and high ideals can ensure that knowledge is used for the benefit and not the destruction of mankind . . .

**Mr. Marcel A. Naville, President of the International Committee of the Red Cross**

. . . Every opportunity which is given members of the various Red Cross organizations to meet is to be welcomed. Such meetings make it possible to define more accurately this image of man which we wish to defend, and also to draw up an inventory of the intellectual, moral and legal resources which we are able to mobilize to this end. It is thereby possible for us to know each other better, to compare our experiences and to assess what divides us and what unites us.

I should like for my part to take this opportunity of submitting to you a few very brief reflections on the role and responsibilities of the ICRC vis-à-vis governments and the other charitable organizations.

The present activities of the ICRC are very diverse, fragmented and often modest for lack of adequate resources. While some of these activities can clearly only be performed by the ICRC, there are others which could in theory be taken over by other institutions. The ICRC has not, and in no way claims to have, a world monopoly of respect for the human person and of relief for victims. It is only one instrument of the Red Cross, in the service of a cause, and it is not the only one.

Circumstances—indifference or passivity on the part of governments or charitable institutions—have too often compelled the ICRC to act alone in the field. The outcome has been that such actions have come to be regarded as part of its regular, quasi-mandatory functions. But they should only be transitory, either to substitute for the National Societies when they are unable to act themselves, or to initiate action by setting an example and providing the first emergency relief. By acting itself in the field, the ICRC accomplishes only a small part of Red Cross action. It would be betraying the very work which it initiated if it were to act as though in some way it were of necessity the “specialist” in direct relief to victims. It would then become, in effect, a pretext for governments to rest on their laurels, absolving them from respecting the commitments to which it has itself invited them to subscribe, and the National Societies from making, through their moral influence and material organization, a contribution for which it itself brought them into being.

The ICRC has a duty, as soon as it becomes necessary, first to seek out, in the Red Cross or elsewhere, the best means of providing for practical action: to instigate relief and to encourage and help the best qualified or best placed institution to act.

When circumstances require the ICRC itself to undertake practical action in the field, it should not be deduced that such action or type of action will henceforth become part of its normal sphere of activities. The ICRC should not lose sight either of its final goal, or of the unity of the Red Cross. Just as it should always be prepared

to intervene, it should always be prepared to modify, to halt or to transfer the action once the compelling circumstances change.

The world lies under the threat of a universal nuclear conflict for which the great Powers are preparing themselves so as to be more certain of staving it off. But at the same time it is plunged into a series of conflicts and troubles which are agitating all the continents: conflicts resulting from national rivalries and aligning States against each other, civil wars which sometimes become internationalized, movements provoked by the desire for independence, liberation and secession, racial and tribal struggles, religious and social upheavals.

Although all such conflicts are of an international nature, in that the opposing parties seek and sometimes obtain foreign support, States take advantage of their sovereignty to protect themselves against intervention from outside. While denouncing foreign interference, they refuse to recognize the international nature of the conflict.

For this reason the ICRC finds itself in a delicate situation. The references made by the opposing parties to the international nature of certain internal troubles and the appeals made to the ICRC on behalf of the victims should induce it to intervene. But its overtures constantly come up against the obstacle of sovereignty. Rightly or wrongly, governments consider that its intervention, which has for them the disadvantage of transforming the refractory into victims, threatens to make the international nature of the conflict official.

Thus, the ICRC runs the risk of seeing itself gradually rejected from the field in which its action should take place and confined, alongside its undisputed role of guardian of the Conventions, to activities which are undoubtedly valid but marginal. It too is the victim of growing anarchy and of what might be called the degradation of international relations, the destroyer of all standards.

These difficulties are due, to a great extent, to the lack of understanding displayed by parties to armed conflict for the application of the Geneva Conventions, their tendency to ignore those Conventions when they consider them incompatible with their military objectives or with the means of achieving those objectives. War aims are given predominance over the humanitarian duties assumed

when subscribing to the Geneva Conventions. Belligerents do not generally contest the existence of such duties, but they do in fact seek to evade them by subordinating, for example, their fulfilment to unacceptable conditions.

What attitude should be adopted when faced with all these obstacles?

First, the validity of the Conventions and the value of their application to all forms of war must be reaffirmed. In this connection, the ICRC's role is capital. There is little doubt that the value of the work undertaken by its legal section has conferred on it an indisputable authority. Consequently, whilst continuing the studies which the changing situation demands, it is important to intensify the dissemination of the Conventions and make better known the Committee's position, through contacts with national and international private or public organizations working for the same objectives.

It is not due to the inadequacy of humanitarian law that its application encounters difficulties. Nevertheless, during the 20 years which have elapsed since the 1949 Geneva Conventions were drawn up, new experience has been acquired, and new forms of conflict and warfare have made their appearance. A number of the States which have been founded in the meantime did not have the opportunity to share in the drafting of the Conventions, but they have disseminated them, thereby showing that they recognize the need for the Conventions.

The 1949 Conventions have lost nothing of their value and they deserve to remain valid. On the other hand, they could be examined for shortcomings and to see whether they could be supplemented by new provisions with a view to the strengthening of humanitarian law, and to ensure and broaden its application. As it did preparatory to the 1949 Conference, the ICRC would willingly draft texts and proposals for submission to a further international conference at which it would be desirable for all States to attend.

Pending such an event, the Committee must recognize that, faced with the generalization of internal conflicts of an international character, it must place a wide construction on the provisions of Article 3 of the Conventions. The world's decline to a state of

belligerent co-existence which circumvents the law of war nevertheless causes victims everywhere which it is the ICRC's duty to take care of, whatever arguments governments may adduce to qualify the kind of war in which they are involved. Prisoners of war, suspected persons, those who submit to re-education, rebels, political detainees, and even populations seeking refuge in conflict areas which no other humanitarian institution is able to assist; all are victims within the purview of the ICRC.

However they are interpreted, the Conventions are the basis of Red Cross action, and the Red Cross, in turn, as an instrument and a set of values, was founded by nations and governments for the safeguarding of the principles of humanity. It is a duty of the Red Cross to continue as that effective instrument and to live up to what is expected of it.

Yet, in the final analysis, responsibility for the success or failure of humanitarian actions rests squarely on the shoulders of nations and governments, as it is for them to decide whether the humanitarian principles shall prevail over other considerations. The Red Cross can and should be subject to criticism for its shortcomings. But only nations and governments can supply it with the means it requires for its action, or compel it to impotency.

In conclusion, I should like to quote you a passage of a French moralist of the XVIII century, a passage which I find beautiful in its formidable exactingness. Montesquieu said: "If I knew something which was useful to me and which was prejudicial to my family, I would reject it from my mind. If I knew something which was useful to my family and not to my country, I would seek to forget it. If I knew something useful to my country and prejudicial to the human species, I would regard it as a crime."

**Mr. José Barroso, Chairman of the League Board of Governors**

In the Constitution of Unesco it is said that, if wars are born in the minds of men, men should also be capable of preventing them.

In the course of this century war has exacted the following toll from mankind: more than 90 million persons killed, 130 conflicts on five continents, two thousand million dollars spent on armaments,

and material damage valued at several times that amount. If we continue on this road of violence with war regarded as inevitable, our century will figure in history as the most humiliating in the existence of the human race.

The technological progress of our civilisation has led man to accomplish marvellous feats. Man has already taken a definite step forward in the conquest of space. Thanks to the development of means of communication, millions of persons throughout the whole world were able to see the first human being reach the surface of the moon. This exploit has reduced the field of the unknown and as a result human power grows and reaches proportions never yet dreamed of.

It is therefore paradoxical that, whilst man takes pride in his conquests, we find ourselves faced with this tragic reminder of all that man has destroyed. It is also paradoxical that throughout the 20th century man has now come to accept war, hatred, domination over other men, hunger, ignorance and slavery as normal features of his destiny, and this at a time when he is capable of making conquests which are the admiration of all. It is sad to think that, if we do not change our ways, we shall not be capable of removing from our onward progress the stain of all these acts of violence and injustice.

There is no doubt that man has not learned much from the lesson of recent years. Indeed his apprenticeship has seen so great a toll in human lives, and whereas technical progress continues on its upward course everything seems to indicate that the norms of international coexistence are being frittered away. The permanent desire for peace is each day on the wane and justice is ever more precarious.

What is the use of all this technical progress if it does not serve to improve human relations?

I think that the moment has come for us to stop to reflect and think out our situation, that the time has come to ask all men of all countries and races, as a matter of urgency, to act in accordance with our needs and on the basis of peace, to seek justice, international cooperation, new codes of behaviour—should these be necessary—or a reappraisal of the old ones, in order to achieve the most important conquest of all, peace of mind.

## XXI<sup>ST</sup> INTERNATIONAL CONFERENCE

The incongruity of our actions has in large measure produced a state of disillusionment in the younger generation who seek a peace they do not know as we have never given it to them. The younger generation reproach us for the lack of the love which we have cast aside. They passionately seek for justice, but not a justice enabling man to despoil and assassinate in its name. They want coexistence without humiliating strings attached; they are hungry for sincerity and confidence . . . it is we who have neglected our duties as educators . . .

. . . I have said that peace cannot be obtained by mere words. Action is required. We have appealed to the political systems which are every day more complicated and in certain cases seem to draw away from our essential aim. It is tragic to see how, for ever less important reasons, peoples resort to violence against other peoples. That is why this time we want our message to cross the frontiers formed by these systems and reach the men and communities which compose our society. It is addressed to families, to each and every one of our families as, if we have not been successful in our efforts to improve the world, by the actions of institutions, we can perhaps proceed in the opposite direction, that is to say, instead of seeking a better world for men, educating better men for our world, men understanding and upholding justice, men understanding and respecting liberty, men concerned with the fate of other men. We have already said it but we shall again repeat: let us hope that our 220 million members adopt these ideas and make them their own, and let us be the first to put them into practice. This is a difficult and long-term task, but I am convinced that we have the time in which to accomplish it.

We must seek to imbue all sections of the community at all levels with our collective Red Cross ideal if we are to give reality to the words of our founder: all men are brothers.

### **Mr. Rıza Çerçel, President of the Turkish Red Crescent Society**

. . . I feel proud and happy that the XXI<sup>st</sup> International Conference of the Red Cross is being held in Turkey, and I would like to express, on behalf of the Turkish Red Crescent Society, my profound gratitude both to the personalities who have spared

no effort in order to make this Conference as positive an event as possible, and to all delegates and observers who are honouring this Conference by their presence. We are gathered together in a friendly atmosphere under the aegis of the International Red Cross with the high ideal of investigating and deciding on the most effective means of serving humanity as a whole, and I count it a sacred duty of our Conference to commemorate with deep gratitude our founders and all devoted men and women of goodwill who are no longer with us. . .

. . . Since our guests are the respected representatives of voluntary organisations and are altruistic individuals pursuing their sacred duty, I hope and believe that they will feel at home in our country in the same way that they believe that their own national frontiers overlap with those of all other countries, having in mind that the ideal of service to humanity covers the entire globe.

Florence Nightingale's philanthropic ideas and her ideal of social aid have become legendary and are symbolised by the Selimiye Hospital, which today is the Selimiye barracks in Istanbul. The role which she played was a basic inspiration of the foundation of the Red Cross and the Geneva Conventions, and I think it historically important to note at this Conference the far-reaching influence of her work at the Selimiye Hospital.

I hope that the XXIst International Conference of the Red Cross will make effective and fruitful decisions which will be of benefit to all humanity, commencing with the nations you represent, in order to extend and give a fuller impact to means of helping human beings. . .

# INTERNATIONAL COMMITTEE OF THE RED CROSS

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## *EXTERNAL ACTIVITIES*

### **People's Republic of South Yemen**

A medical team, consisting of two surgeons and an anaesthetist placed at the ICRC's disposal by the Alliance of the Red Cross and Red Crescent Societies of the USSR arrived in Aden on 18 November 1969.

This team, comprising Dr. Anatoliy Akimov and Dr. Aleksei Glogolev, surgeons, and Dr. Evgeniy Janov, anaesthetist, relieved the Bulgarian team which had, during the last six months, taken on the continuation of the ICRC's surgical action in the Aden Republic hospital.

It was a result of an appeal made by the ICRC that a certain number of National Red Cross Societies such as those of Bulgaria, Rumania and now the USSR have provided medical teams. These have successively relieved the Swiss teams sent as an emergency measure on the independence of the Yemen People's Republic.

The three doctors of the Bulgarian team, Dr. Ivantchev, Dr. Markov and Dr. Ivanov, carried out their heavy task with zeal and remarkable competence. They paid an official visit to the ICRC before returning to their own country<sup>1</sup>.

### **Middle East**

**Suez.**—An exchange of prisoners of war took place on 6 December between Israel and the United Arab Republic under the auspices of the International Committee. Two Israeli pilots and 58 Egyptians—six soldiers and 52 civilians—were thereby able to cross the Suez Canal at El Qantara to return to their own countries. The operation, the result of several weeks of negotiation by the

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<sup>1</sup> *Plate: Geneva*: the Bulgarian medical team which co-operated in the ICRC mission at the Aden hospital, at ICRC headquarters.

ICRC, was supervised by Mr. Marcel Boisard, head of the ICRC delegation in Cairo and Mr. Jacques Moreillon, in charge of the ICRC Israel delegation.

At the same time the Israeli authorities handed over to the United Arab Republic the bodies of three Egyptian soldiers who had been killed east of the Suez Canal.

**Damascus.**—On 5 December 1969, the authorities of the Syrian Arab Republic handed over to the delegate of the International Committee the two Israeli civilians detained in Damascus since the skyjacking of the TWA aircraft. The two civilians left Damascus for Athens where they were met by a delegate of the ICRC.

**Kuneitra.**—The Israeli authorities have handed over to the delegation of the International Committee of the Red Cross in Israel thirteen Syrian prisoners of war and civilians for their return home.

The repatriation operation took place at Kuneitra on 5 December, under the auspices of the ICRC delegations in Israel and Syria.

## **Vietnam**

In October and November 1969 the ICRC delegates in the Republic of Vietnam visited several places of detention administered by the Vietnamese armed forces.

They went to the interrogation centres of Quang Ngai, Bien Hoa and Cantho, the re-educational centres at Cao Lanh, Chau Doc, Tay-Ninh and Tan Hiep. They also visited the penitentiary on the island of Côn Sơn where they saw prisoners of war undergoing sentences for common law offences.

The delegates also visited the " Cong Hoa " Hospital in Saigon and the Bien Hoa POW camp.

Reports on these visits are, as usual, passed on to the Detaining Authorities.

The delegates of the ICRC in the Republic of Vietnam were present at the release of ten North Vietnamese fishermen who had been held by the American armed forces since the end of July 1969.

These persons had been interned in Danang where the ICRC delegates had been allowed to visit them several times.

On 13 October, the fishermen were released by the American armed forces, after they had expressed their wish to the ICRC representatives to return to their own country. They were also examined by Dr. K. Rhyner, ICRC doctor-delegate. They then returned to the Democratic Republic of Vietnam by sea.

## **Rumania**

After attending the VI Congress of the Bulgarian Red Cross in Sofia, Mr. Herbert G. Beckh, ICRC delegate, went to Bucharest. He discussed questions of common interest with the leaders of the Rumanian Red Cross, particularly in relation to resolutions adopted at the XX International Conference of the Red Cross at Vienna in 1965 and concerning the reuniting of families. This is a field in which the Rumanian National Society is very active.

## **German Federal Republic**

Continuing the programme of visits to places of detention in the Federal Republic of Germany, Mr. H.-G. Beckh, ICRC delegate for Europe went to Munich at the beginning of November 1969. Accompanied by Mr. Heinrich, director of the German Red Cross tracing service (Munich section), he visited the Stadelheim prison.

He interviewed two political detainees in private and enquired into their conditions of detention.

## **Mexico**

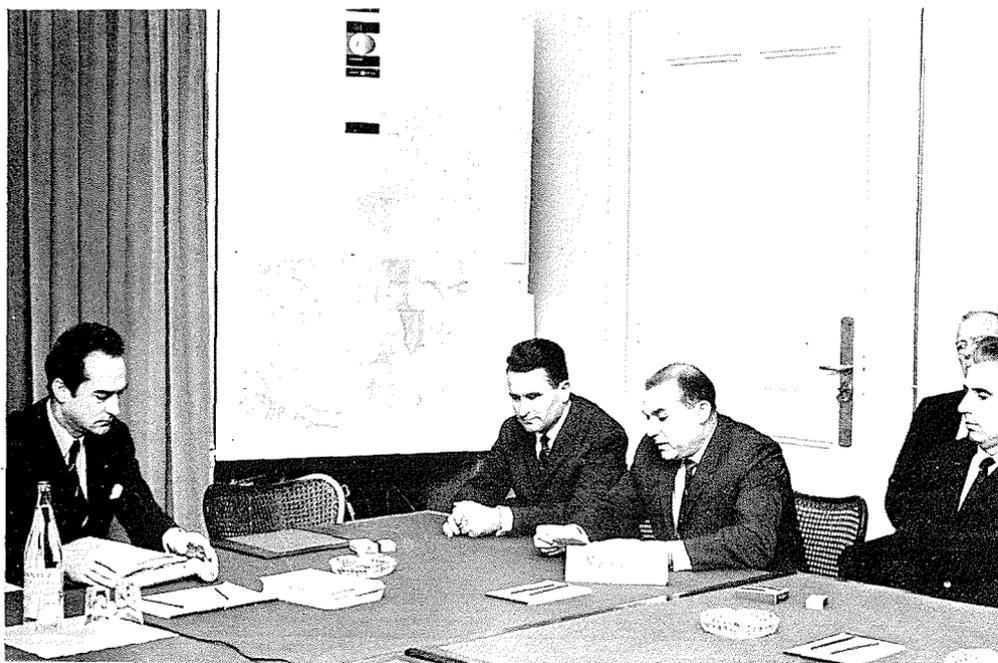
Mr. Serge Nesi, International Committee delegate general for Latin America, went to Mexico to attend the IVth Meeting of Presidents and Technical Personnel of the Red Cross Societies of Central and North America. He also visited and talked in private with political detainees in the prison for women in Mexico City and in the Santa Marta Acatitla prison.

Over the past year ICRC delegates have visited political detainees in Panama, Guatemala, Bolivia, Colombia, Peru and



**Agadir:** Inauguration of a commemorative plaque at the Hassan II Hospital.

**Geneva:** Drs. Ivanov, Markov and Ivantchev, the Bulgarian medical team which co-operated in the ICRC work at the Aden hospital, at ICRC headquarters (*left*, Mr. Naville, President).





Venezuela. They also visited interned civilians in Salvador and Honduras during the conflict which broke out between these two countries last summer.

## **Chad**

Mr. Georges Hoffmann, ICRC delegate-general for Africa, went to Chad for a meeting with the authorities.

Mr. Hoffmann was received at Fort Lamy by the President of the Republic of Chad, Mr. Tomalbaye and several of his ministers. During these discussions the question of Chad's possible accession to the Geneva Conventions and the setting up of a National Red Cross Society was examined. The delegate-general met with considerable understanding and goodwill from the authorities, and the ICRC hopes that a concrete decision will soon bear witness to the success of the talks.

The authorities permitted Mr. Hoffmann to visit a group of prisoners who, arrested for their part in events, are held in Fort Lamy. The ICRC representative observed important shortages, particularly of food and pharmaceutical supplies, among the population. Wishing to contribute to solving this problem, the ICRC will air-freight ten tons of milk powder to Fort Lamy for distribution in schools and hospitals.

## **Greece**

In our December issue we gave the text of the agreement, recently concluded by the International Committee with the Greek Government, which entitles ICRC delegates to visit political detainees in Greece and to increase assistance for detainees families.

From 24 November to 3 December, ICRC delegates visited the Varibobi and Drossia hotels run by the military police, the Oropos and Halikarnassos camps (national police force), the general hospital and the Haghios Pavlos hospital (national police force), the commissariat of the Criminal Investigation Department in Bouboulinas Street (Athens police) and the police commissariats of Nea Ionia, Nea Philadelphia, Petroupolis, Peski, Haghia Paraskevi and Cholargos.

In every place of detention they were free to inspect wherever they wished and to interview detainees of their own choosing without witnesses or time limit.

Comforts were distributed in the Oropos and Halikarnassos camps in Crete.

During the same period, 398 persons went to the ICRC's Athens office to enquire about their kin.

The delegation was headed by Mr. Laurent Marti and included three delegates and two doctor-delegates, all of Swiss nationality.

General reports on these visits, as customary, are sent to the Greek authorities.

Visits continue and will be mentioned in our next issue.

## **Latin America**

Following the visit by its delegate general for Latin America, Mr. S. Nessi, some time ago to the Cárcel Modelo de Panama, the ICRC sent the Panamanian Red Cross in November various medicines including antibiotics and vitamins. In doing so it contributed to the efforts undertaken by the Panamanian authorities to improve the medical situation in this penitentiary. These medical supplies will be stored with the Panamanian Red Cross to which a plan has been suggested for the storage, distribution and supervision to ensure effective use of these medical supplies.

A similar consignment was sent to the Guatemala Red Cross. These medicines are for persons in places of detention visited by Mr. Nessi in April and May 1969, particularly the prisons of Pavón and Salamá, and at the two Police Stations in Guatemala City.

At the end of November two cases of medical supplies were sent by the ICRC to places of detention in Colombia and Peru. They contained antibiotics and vitamins, and the case for Peru included also syringes, hypodermic needles and dressing material. We would mention that in May and June 1969 Mr. Nessi visited nine places of detention for political detainees in Colombia and six in Peru.

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*IN GENEVA***Honorary Members of the ICRC**

At its plenary session of 3 December 1969 the International Committee appointed Mr. Jacques Chenevière, Mrs. Marguerite Gautier-van Berchem, Mr. Samuel A. Gonard and Mr. Frédéric Sordet Honorary Members.

At the plenary session of the ICRC in November last, Mr. M. A. Naville, President, evoked the magnificent career of Mr. Jacques Chenevière, Honorary Vice-President, in the service of the Red Cross, a half century of dedication and fidelity to our common ideal. Last month the *International Review* published the text of the President's speech and Mr. Chenevière's reply; we shall not revert thereto except to pay tribute in this publication, to the development of which he contributed so much by his valuable advice and long experience, to his personality which has left its mark on ICRC history and on the International Prisoners of War Agency.

During the two world wars, Mrs. Marguerite Gautier-van Berchem devoted herself to the Red Cross by directing important services of the International Prisoners of War Agency. She was assigned various missions and in 1951, aware of her wide experience in the humanitarian field, the International Committee called upon her to join it as a Member. Subsequently, and for many years, she was also a Member of the Presidential Council.

In the offices which she held, she rendered signal service to the ICRC, and her profound knowledge of the Arab world was particularly valuable at a time when the Middle East was suffering the

consequences of conflicts followed by extreme tension. Her advice has always evinced an awareness of realities and a broad culture.

The International Committee makes a point of expressing its warm gratitude to Mrs. Gautier-van Berchem and knows that it may still call upon her sound judgment and experience of Red Cross problems.

Mr. Samuel A. Gonard has been a Member of the ICRC since 1961. Later, as a Member of the Presidential Council, he was more closely associated in the institution's management until October 1964 when he was called upon to assume the Presidency of the ICRC. He held that office until January 1969.

As a Member, then as President, he discharged many important missions on several continents. With unflagging energy and rare trenchancy, he worked ceaselessly for the ever greater respect, in a divided world and in difficult circumstances, of the Red Cross, the symbol of humanity.

The International Committee expressed its profound gratitude for the dedication and fidelity he constantly displayed in assuming the heavy responsibilities confided to him.

Mr. Siordet, Counsellor of the ICRC since 1943, was appointed to membership of the Committee in 1951 and on several occasions assumed the vice-presidency.

His work was connected mainly with humanitarian law and he played a decisive part in the preparatory work which led to the conclusion of the four revised Geneva Conventions. He attended the 1949 Diplomatic Conference as an ICRC expert and subsequently contributed considerably to the *Commentary* on those Conventions.

He also undertook other missions. He represented the ICRC in various countries at many Conferences; he is the author of the book *Inter arma caritas*, which gives a conspectus of ICRC activities during the Second World War.

The International Committee is deeply grateful for so much service which he rendered with a keen understanding of the necessities of its humanitarian action and a noble concept which have been so valuable to the ICRC and will continue to be so whenever it has recourse to his always enlightened advice.

## Mr. Gallopin retires from Directorate

It was with keen regret that the International Committee took note of Mr. Roger Gallopin's request to be relieved at the end of 1969 of his directorship, an office which he has discharged for many years with a competence equal to his dedication.

Mr. Gallopin joined the ICRC in 1937 as a member of the Secretariat. From the outset of the Second World War he held important posts which required him to assume heavy responsibility for ICRC action, as related in the *International Review* in January 1968 when he was elected to membership of the ICRC. His responsibilities were particularly important from 1966 onwards when he was appointed, with Mr. J. Pictet, Director-General of the institution.

However, these functions were extremely absorbing and a great strain, and Mr. Gallopin expressed the reasonable wish to be able to devote himself henceforth to other personal activities. The International Committee complied with his request and conveyed to Mr. Gallopin its gratitude for the signal service he has rendered throughout his long co-operation in the work of the Red Cross.

Mr. Gallopin nevertheless will continue to be a member of the International Committee and as such to carry out certain missions.

## ICRC Reorganization

Two Directors-General have so far assumed responsibility, one for the executive and the other for general affairs. As announced on the preceding page, Mr. Gallopin was relieved of his office at the end of 1969. Moreover, Mr. Jean Pictet, for his part, also desired to be relieved of his administrative functions.

A reorganization therefore had to be undertaken in the ICRC. It became effective on 1st January 1970. It involves important appointments and re-assignments adapted to the new and more flexible distribution of responsibilities for planning, co-ordination and execution.

Mr. Jean Pictet is appointed Chairman of the Legal Commission. He is still responsible for work related to the development of

humanitarian law and to the principles of the Red Cross. He will continue to be assisted by Mr. Claude Pilloud, Director.

Mr. Jean-Louis Le Fort will be the incumbent of the newly created office of Secretary-General. He was born in 1917 in Geneva, where he was educated, and after obtaining his lawyer's certificate he successively became Secretary to the *Association suisse des banquiers* (Basle), First Secretary to the *Groupement des holdings industriels* (Bern), Member of the General Secretariat of the Organization for European Economic Co-operation (Paris), and, from 1958, Secretary-General of the Battelle Institute Research Centre in Geneva.

Mr. Raymond Courvoisier, whom we presented to our readers last September and who is the ICRC President's Personal Assistant, will assume on 1 January 1970 the *ad interim* overall direction of operations.

\*

The International Committee's mission will be undertaken by several departments: Legal, International Law Promotion and Development, Planning, Relief Supplies Procurement, Transport and Distribution, Field Delegation Servicing, Central Tracing Agency, International Tracing Service (Arolsen, Germany), Personnel, Administration and Finance, and Information and Press.

In addition, five regional operations divisions will be under a head of operations and each will be concerned with geographic areas where the ICRC is in action: Africa, Latin America, Europe, Asia, Middle East.

## Guests of the ICRC

Princess Gina de Liechtenstein, President of her country's National Society, accompanied by her son Prince Niklaus and her father Count de Wilczek, honoured the International Committee with a visit on 2 December 1969. She was received by the institution's President, Mr. Marcel A. Naville, together with Mr. Pictet, Member of the ICRC and one of the senior officials.

After hearing a brief history of ICRC activities, these honoured guests visited the Central Tracing Agency and then saw two films, one on the Red Cross in the Yemen and the other on the Red Cross in Nigeria.

The following day the Princess and her son went to the headquarters of the League of Red Cross Societies where they were received, in the absence of the Secretary-General, Mr. Beer, by Mr. Dabney, Assistant Secretary-General, and by several senior officials who explained to them the institution's various departments.

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IN 1969

## Three Vaccination Campaigns

We all know the danger of epidemic diseases in countries where the population is undergoing the ordeal of war. Hence the ICRC was concerned at the perilous situation which arose in the secessionist zone of Nigeria (Biafra).

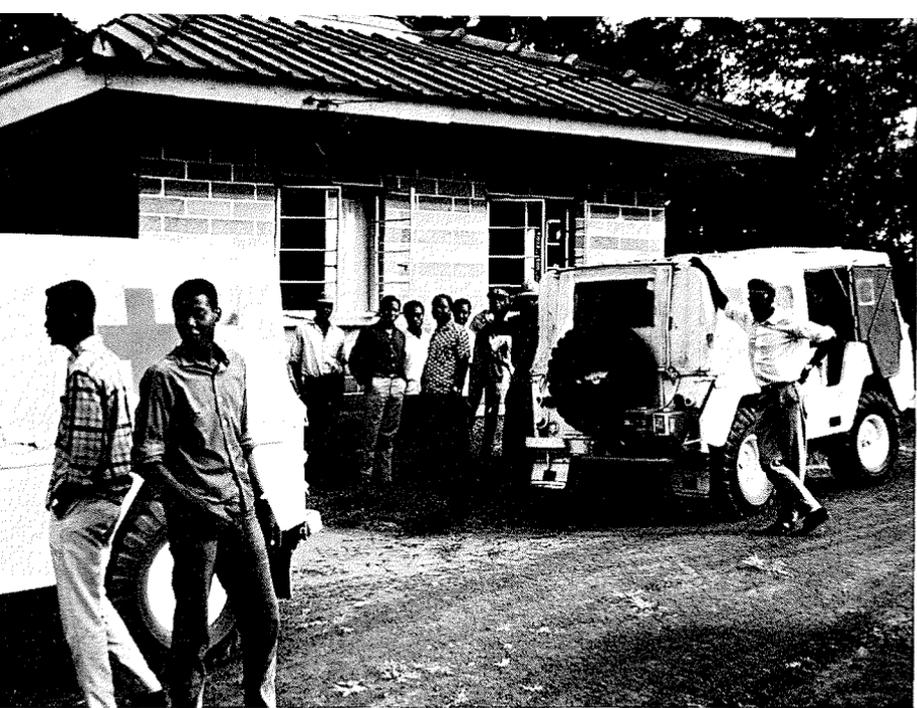
Even in peacetime the mortality rate among children stricken with measles in West Africa may reach as high as 30 %. It is an endemic disease but every three years, towards the end of the year, an epidemic causes havoc. Such an epidemic was expected in the secessionist zone towards the end of 1968 and indeed in November of that year the ICRC was warned by its doctors on the spot, Dr. Ifekwunigwe and Dr. Gans, of the risk of such a situation, aggravated by the consequences of the war.

The Committee had a special study of the problem carried out by a specialist Dr. Nicole Grasset of the Institut Pasteur and on 28 December 1968 it began, under the responsibility of the local authorities, a vaccination campaign. This action could only be undertaken and carried out by the ICRC thanks to the considerable support which it received from such organizations as UNICEF, OXFAM, USAID, the World Council of Churches, Caritas Internationalis, local Red Cross sections, the local authorities, the Ministry of Health and the University Hospital. The vaccines, the refrigerators, the ped-o-jets,<sup>1</sup> and the syringes were supplied by UNICEF and USAID whilst the ICRC, the Swedish Red Cross, the World Council of Churches, USAID and Caritas provided Land Rovers and other vehicles necessary for the transport of teams and material in the field.

Smallpox was also a serious threat to the local population in 1968. Through its delegates the ICRC was aware of the situation

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<sup>1</sup> A pistol-like injector permitting vaccination of many people in a short time.



ICRC vehicles arrive in a village with personnel and equipment...

*In 1969*

...for vaccination of the inhabitants.





ICRC team vaccinating with "ped-o-jet" appliance.

and organized a smallpox vaccination campaign at the same time as the measles vaccination campaign. A few figures will give an idea of the scope of the programme:

By April 1969 more than 1,400,000 children and adults had been vaccinated against smallpox. Later, when the airlift by night had ceased, the ICRC organized an emergency flight on 4-5 August, when 80,000 measles vaccines and 500,000 smallpox vaccines were flown into the secessionist zone. At the beginning of November 1969, 2,300,000 children and adults had been vaccinated against smallpox and 850,000 children aged six months to four years against measles.

The same reasons which induced the ICRC, in association with other relief organizations, to undertake these vaccination campaigns later appeared to apply also to tuberculosis, another threat to the undernourished populations of war stricken countries. A tuberculosis vaccination campaign began in August 1969. In that month Dr. Nicole Grasset, together with another doctor sent by the ICRC, Dr. Vigouroux, returned to the secessionist zone, bringing with her, from Dakar, 500,000 BCG vaccines and two precision balances for preparing the vaccines. All the material was provided by UNICEF.

The ICRC was able to count on the active support of the organizations already mentioned, particularly USAID, and on the competent advice of the World Health Organization, the International Union against Tuberculosis and the Institut Pasteur in Dakar. The campaign continued in September and October. By the beginning of November 180,000 persons, from new born children to 20 year olds had been vaccinated against tuberculosis.

We give below some extracts of the report, covering August and September, drawn up by Dr. Nicole Grasset on this campaign. A description of some aspects will show the scope and the difficulties encountered.<sup>1</sup>

*Vaccine* — The vaccine used—lyophilised, thermostable BCG—was prepared by the Institut Pasteur in Dakar. The solvent was contained in phials adapted to the ped-o-jet. It satisfied WHO requirements according to controls carried out in the WHO laboratories in Copenhagen.

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<sup>1</sup> *Plate*: Vaccinations in a village.

## INTERNATIONAL COMMITTEE

A million injections have been ordered by UNICEF and it is estimated that at least three million will be required for the full campaign.

Unlike the measles vaccine, which is unstable and had to be transported in refrigerated chambers, the BCG vaccine can, if necessary, withstand a temperature of 37°C for a month. It is preserved in refrigerators at Ibi where sufficient room is available (UNICEF recently supplied seven refrigerators which may be run either on petrol or on electricity). The two precision balances, however, must have electric current and had therefore to be installed at Ubulu due to the absence of electricity at Ibi. Sufficient heat-insulated boxes for storing the vaccine are available.

*Equipment* — There are sufficient ped-o-jets (65) and intradermic injection nozzles (177) for changing those clogged up by the BCG.

The World Council of Churches has lent the Executive Committee conducting the campaign 500 needles and 5 ml. syringes. Telex messages have been sent to Dakar requesting the despatch with the next consignment of vaccines of 1,000 syringes and to Geneva requesting 3,000 syringes.

*Personnel* — The Executive Committee conducting the campaign meets twice a month to assess progress of work and to reach the decisions necessary for the continuation of operations. This Committee comprises doctors, an administrator and representatives of the ICRC, the WCC, Caritas, the Ministry of Health and the University Hospital:

- Doctors: 4
- Administrator: 1
- Nurses and office staff: 8
- Members of vaccination teams in various places: 57
- Technicians for maintenance and repair of ped-o-jets: 5.

The 57 members of the teams have been convened twice and Drs. Grasset and Vigouroux briefed them on the vaccinations. The techniques adopted and the operation of the ped-o-jet were demonstrated. Teams received their first practical training by

vaccinating the children at the Ibi relief distribution centre. Five teams were then sent to the provinces of Onitsha and Awka. Written instructions on the simultaneous BCG and smallpox vaccinations were distributed to the members of all the teams.

*Planning* — It appeared necessary for Dr. Vigouroux, assisted by doctors from the secessionist zone, to organise a system of control and daily training for the teams, vaccination by BCG being more delicate than smallpox vaccination. At the second meeting of the Executive Committee Dr. Grasset laid stress on this fact and proposed that if control could not be secured the number of teams would have to be reduced. The primary difficulty is the provision of vehicles and fuel to enable the doctor "inspectors" to visit all teams each day. Although there are ten vehicles, these are frequently subject to mechanical difficulties due to the shortage of spare parts and the fact that maintenance facilities are inadequate.

In addition the heavy rains in this season make roads difficult to negotiate and equipment deteriorates rapidly. During the first working week, three vehicles broke down and a new one had to be provided by the ICRC for the vaccination campaign. This lack of transport (breakdowns, shortages of spares and fuel) is likely to hinder the programme and aggravate the dangers threatening not only the population in the secessionist zone but in the surrounding territories as well.

An inventory of equipment required has been drawn up: aluminium foil to protect vaccines against light during vaccination, spare-parts for the ped-o-jets, etc. As a new syringe and needle has to be used to form solutions after each phial of 100 doses, consumption of syringes which can be used only once would be far too high. With the agreement of the Executive Committee, therefore, Dr. Grasset ordered 3,000 nylon syringes and 6,000 needles and several small petrol-heated sterilizers. In the meantime, 3,000 single-use syringes and needles have been sent so that the vaccination campaign may be continued without interruption.

# IN THE RED CROSS WORLD

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## APPEAL FOR VICTIMS OF NIGERIA CONFLICT

The International Committee of the Red Cross and the League of Red Cross Societies have launched a joint appeal for a total of more than Sw. Frs. 24,000,000 (US \$5,581,000) needed to finance four months of humanitarian operations for the victims of the conflict in Nigeria.

The appeal was addressed to National Red Cross, Red Crescent and Red Lion and Sun Societies, Governments, governmental and non-governmental organisations. It covers all aspects of Red Cross programmes on both sides of the front—programmes operated directly by the ICRC and by the Nigerian Red Cross with the assistance of the League.

A total of Sw. Frs. 16,932,000 (US \$3,938,000) is needed to finance ICRC operations for four months. These include: conventional tasks on both sides of the front (assisting prisoners-of-war, tracing missing persons, re-uniting families); a medical relief action in the secessionist zone; maintenance of an air-base and nucleus fleet of aircraft at Cotonou in the hope of a resumption of Red Cross relief flights under a negotiated agreement on daylight operations; medical care for combat casualties in Nigeria.

The League for its part is asking its member-Societies to contribute Sw. Frs. 8,080,000 (US \$1,879,000) to a Nigerian Red Cross programme supplying food, other relief assistance and medical care for some 500,000 displaced persons. This programme was taken over by the Nigerian Red Cross from the ICRC on 1 October, and the Society has appealed to the League for assistance.

The appeal, dated 19 December 1969, was as follows:

*The situation of the victims of the conflict which is tearing Nigeria apart remains a grave preoccupation for the entire international community. While awaiting a peaceful settlement, which all hope will be reached soon, every day brings new and indescribable sufferings.*

*On each side of the front assistance of ever increasing dimensions*

*is necessary. The Red Cross, as well as other organisations, is engaged in obtaining and distributing relief to those who need it.*

*National Societies who have so generously supported this operation have frequently expressed the wish to receive jointly from the ICRC and the League—the latter in the name of its member Society in Nigeria—an overall picture of the situation, setting out the different programmes devolving on the Red Cross and the needs in cash and in kind required to carry them out.*

*The present appeal, which covers a period of four months, meets this wish. In transmitting it today to National Societies, Governments and governmental and non-governmental organisations interested in supporting the efforts of the Red Cross, the ICRC and the League hope that it will be sympathetically received and that it will secure for the Red Cross the resources that it so urgently needs to continue and develop its humanitarian and neutral action in the spirit of Resolution XXVI adopted at Istanbul by the XXIst International Conference of the Red Cross.*

*The ICRC and the League will respect wishes which donors might express as to the particular assignment of relief in cash or in kind which can be made available. Undesignated gifts will be allocated, according to the urgency and the needs, between the different programmes outlined in the attached documents, in order to ensure their simultaneous development.*

\*

*The ICRC and the League are aware of the magnitude of the effort which is once again requested of National Societies. However, they are certain that, ever mindful of the distress of the conflict victims and convinced of the necessity for the Red Cross to reinforce its action in this troubled region of the African continent, Societies will generously furnish the resources required to carry out the proposed programmes of assistance, and for this they express their thanks in advance.*

For the League of Red Cross  
Societies  
Henrik Beer  
Secretary General

For the International  
Committee of the Red Cross  
Marcel-A. Naville  
President

Two explanatory notes were released and are quoted below. The first is from the International Committee, the second from the League.

## IN THE RED CROSS WORLD

A. In the distressed areas, on either side of the conflict lines, the ICRC is continuing the mission assigned to it by the Geneva Conventions; assisting the POW's, handling thousands of tracing cases and reuniting families under particularly difficult conditions. It maintains its indispensable staff and delegates to protect the civilian population and attend to their most urgent needs, with a particular accent on medical aid.

In the secessionist zone, a delegation of 50 members is running 7 hospitals and 64 sickbays, including 3 leper clinics, with a total of about 15,000 sick and wounded; it is caring each month for some 200,000 out-patients. An artificial limb workshop and re-education centre has recently been set up. The ICRC is also responsible for 6 orphanages. An extensive vaccination campaign is being actively pursued: 2,500,000 persons, mostly children, have now been inoculated against smallpox, 850,000 against measles, and 300,000 against TB. Medical assistance to a weakened population saves countless lives and prevents deadly spreading epidemics.

All the efforts, by so many, to bring the conflict to an end, and the unremitting negotiations conducted by the ICRC for the resumption of Red Cross relief flights, may result in a situation where the ICRC could suddenly be called upon to start daylight operations, which remain the most straightforward and efficient means to bring immediate relief in sufficient quantities. Therefore, and in order to be prepared for any emergency, it is a must for the ICRC to keep minimum airlift facilities in readiness on its base in Cotonou.

In Nigeria, since June 30th when its role as co-ordinator of relief was terminated, and until the end of September, the ICRC has gradually turned over its responsibilities to the Nigerian Red Cross, together with 20,000 tons of relief supplies, and with 400 vehicles on loan or in property. The approximate value of the assets transferred amounted to more than 2,100,000 N£.

Since October last, the ICRC delegation in Lagos has focused its efforts on its traditional duties under the Conventions. Its work will be extended, in the northern and southern zones of the conflict, with the installation of two sub-delegations. It is also planned to recruit two surgical teams, to care for combat casualties.

In order to face emergency situations, the ICRC and the Nigerian Red Cross have agreed that the latter shall keep an emergency

stock of 5,000 tons of foodstuff at the disposal of the ICRC delegation; the necessary steps have also been taken to solve certain distribution problems.

On November 1st, the total financial means of the International Committee for the whole operation amounted to 624,000 Swiss Francs. Although actual expenses over the last two months were kept somewhat under the budgeted figures, the ICRC's operation showed, by the end of November, a deficit of about 4,500,000 Swiss Francs.

A prompt and generous response to this appeal will enable the ICRC to continue its impartial mission on both sides of the conflict, and pursue its fundamental objectives which are those of the Red Cross throughout the world.

#### B. ASSISTANCE TO NEEDY DISPLACED POPULATION IN NIGERIA

On the 1st October 1969 the Nigerian Red Cross Society took over from the International Committee of the Red Cross operational responsibility for the relief action in Federal Nigeria. In the fulfilment of this responsibility some 1,200 Nigerian Red Cross Society workers, assisted by relief and medical teams, are caring for approximately 500,000 displaced needy persons.

The Cabinet Office of the Federal Government of Nigeria recognised the unique position of the Red Cross in a letter dated 9th December 1969 addressed to the President of the Nigerian Red Cross Society reading as follows:

" I wish to refer to recent discussions and correspondence on your relationship with the National Commission for Rehabilitation and to inform you that the Federal Military Government has decided that the Nigerian Red Cross Society be exempted from the provisions of the National Commission for Rehabilitation Decree, 1969 with immediate effect.

" The Federal Government has also decided that the Cabinet Office will be responsible for relations with the Nigerian Red Cross Society. Accordingly, all matters on which the Society is expected to seek the authority or the views of the Government will now be referred to that Office.

## IN THE RED CROSS WORLD

“ The Federal Government has no objection should you decide to convey this information to any other organisation. A copy of this letter has been forwarded to the Commissioner for Rehabilitation.

(signed) H. A. Ejueyitchie  
Secretary to the  
Federal Military Government ”

The role of the Nigerian Red Cross Society is now clear and the Society will be able to continue to give relief to the needy in accordance with Red Cross principles. On the 7th December the Nigerian Red Cross Society appealed to the League for support from sister Societies to assist it to carry out the relief programme described in this circular.

The Nigerian Red Cross Society is at present assisted by several voluntary agencies and National Societies which are providing the services of 15 medical teams operating in the four war-affected States. The Society in turn provides them with the following services:

- a. the collection and distribution to the teams of all basic food, medicaments and other relief requirements;
- b. servicing, maintenance and repair of all team vehicles;
- c. administrative and executive organisation for the relief operation;
- d. radio communications connecting all areas.
- e. logistic facilities.

*Role and Programme of the Nigerian Red Cross Society.* The Society is responsible for distributing food, other relief assistance and medical attention to approximately 500,000 people in need. For this they have appealed to the League for assistance for a four month period: 1st December 1969 to 31st March 1970.

*Role of the League.* The role of the League will be that of counsellor to the Nigerian Red Cross Society in matters of their relief programme, and representative of the donor National Societies.

*THE HONDURAS-SALVADOR CONFLICT*

**Aid to victims by National Societies  
of Central America**

In previous editions the *International Review* has given information on the ICRC's work which lasted several months in Honduras and Salvador as a consequence of the conflict which broke out between these countries in the middle of July 1969. We mentioned the humanitarian work of the National Societies of the belligerent countries and of Guatemala. It was discharged with such dedication and so effectively that we believe it useful to recapitulate below the essential features of that work.<sup>1</sup>

**Honduran Red Cross**

From the outbreak of the conflict and throughout August this National Society had to face two major problems: assistance to interned Salvadoran civilians and to displaced Honduran nationals.

There were about 10,000 internees from Salvador. They were in several improvised camps, the largest being the camps of Agas in San Pedro Sula, Tegucigalpa, the capital, and Choluteca in the south of the country. At one time there were more than 2,500 Salvadorans at the San Pedro Sula camp. From the first day the Honduran Red Cross organized a small dispensary and canteen in which volunteer workers each day prepared three meals from food collected among the population of the town.

In co-operation with the ICRC representatives who had made an on-the-spot survey of the most urgent needs, the Red Cross distributed tents in camps where the plight of the internees was

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<sup>1</sup> *Plate* : Exchange of mail and repatriation of civilian detainees.

## IN THE RED CROSS WORLD

least enviable, to protect them from the season's torrential rains. They also provided plastic dishes and other kitchen utensils and disinfectants for water purification in order to prevent the spread of diseases. Medicines against influenza and diarrhoea were regularly distributed by Red Cross first-aiders to those detainees at Tegucigalpa and Choluteca who required them most. Anti-tetanus vaccinations were given at the San Pedro Sula camp.

In order the better to assist displaced persons, the Red Cross set up in a primary school in the small town of Nacaome, in the south of the country and only a few kilometers from the front, a dispensary manned by a medical team and a permanent detachment of first-aiders. Medical supplies were renewed from Tegucigalpa and at least two ambulances were constantly available in readiness to evacuate any seriously wounded cases to the hospital in the capital.

After the withdrawal of occupation troops at the beginning of August and the complete evacuation of the internment camps towards the end of the month, the main efforts of the Red Cross were concentrated on providing for the Honduran civilians repatriated from Salvador. As early as 12 August the Red Cross of Honduras, like that of Salvador, had closely co-operated with the two ICRC delegates on the spot in the exchange of prisoners of war.

During the successive repatriation operations between 16 August and 6 October, involving some 450 Honduran civilians, many of them women and children, a strong contingent of first-aiders was also present at the frontier post of El Amatillo, with all available ambulances, to attend to the victims and convey them to their villages. At Nacaome, the first town on the road to Tegucigalpa, the Red Cross first aiders had organized a temporary reception camp capable of lodging up to 200 persons. This team often worked almost to dawn to prepare food for these refugees and help them to settle in as best as possible in large rooms where they provided straw-matting and blankets.

It should be pointed out that the Red Cross helped not only their compatriots released by the Salvador authorities, but also helped the Salvador nationals who, after release from internment, wished to join their families in Salvador. Thanks to the free transport service organized by the Red Cross of Honduras to the border,

several hundred families were reunited. Moreover, twice a week, the first-aiders of both National Societies met at El Amatillo to exchange correspondence from detainees to their families or from families to detainees.

### Salvador Red Cross

During the same period the National Society of Salvador helped Salvadoran refugees coming from Honduras, prisoners of war and Honduran civilian detainees.

From 18 June to the beginning of October, the Red Cross helped more than 36,000 Salvador nationals, several thousand of them women and children, coming from Honduras with nothing but the clothes they stood in. Most of these refugees crossed the frontier at El Amatillo on the pan-American highway, to the east of the country, and at El Poy in the north on the San Salvador—Nueva Ocotepeque road. At both these frontier posts the Red Cross recorded the identity of refugees as they arrived and took them to the reception camps at Santa Tecla, Chalatenango, San Miguel, San Vicente and La Union. Other refugees went from Honduras to Guatemala where they were temporarily sheltered by the Guatemalan Red Cross before proceeding west to Salvador where they were lodged in the camps at Santa Ana, Ahuachapan, Sonsonate and Ciudad Arce. These camps were capable of sheltering from 200 to 300 people, and the refugees stayed there one or two days before re-settling in the country.

It was no mean task to take care of all these refugees day after day, often at a rate of 2,000 persons a week. It was discharged by an excellent team formed by the Red Cross first-aiders and Ladies' Committees. In the various towns where there were reception camps they attended to the distribution of clothing and foodstuffs and they gave medical assistance and first aid to many children. In the largest of the camps, at Santa Tecla, there was a clothing centre and at the San Salvador Red Cross headquarters there was a medical supplies and dressing materials centre.

This continuous assistance to refugees by the Red Cross was made possible by the Society's twenty ambulances, the dozen

## IN THE RED CROSS WORLD

lorries lent to it, the dynamic organization set up by the Red Cross Council, and the daily dedication of some 300 volunteer first-aiders.

The National Society also attended continuously to the needs of civilian Hondurans in detention, especially the women and children temporarily interned at Cafetalón, Santa Tecla, the camp near San Salvador, and even at the headquarters of the San Miguel section of the Red Cross. It gave them every necessary material aid (medicines, clothing, straw-matting, food, cigarettes, writing paper, etc.). A member of the Supreme Council of the Salvador Red Cross accompanied the ICRC delegates on each visit to prisoners of war detained at the San Vicente Penitentiary and to Honduran civilians in the prisons of Santa Ana, Sonsonate, Zacatecoluca, Cojutepeque and Ilopango.

### Guatemalan Red Cross

The active solidarity among National Societies in time of conflict and the help given to the victims of war in belligerent countries by neighbouring Red Cross Societies are well known. A further instance was the intervention of the Guatemalan Red Cross.

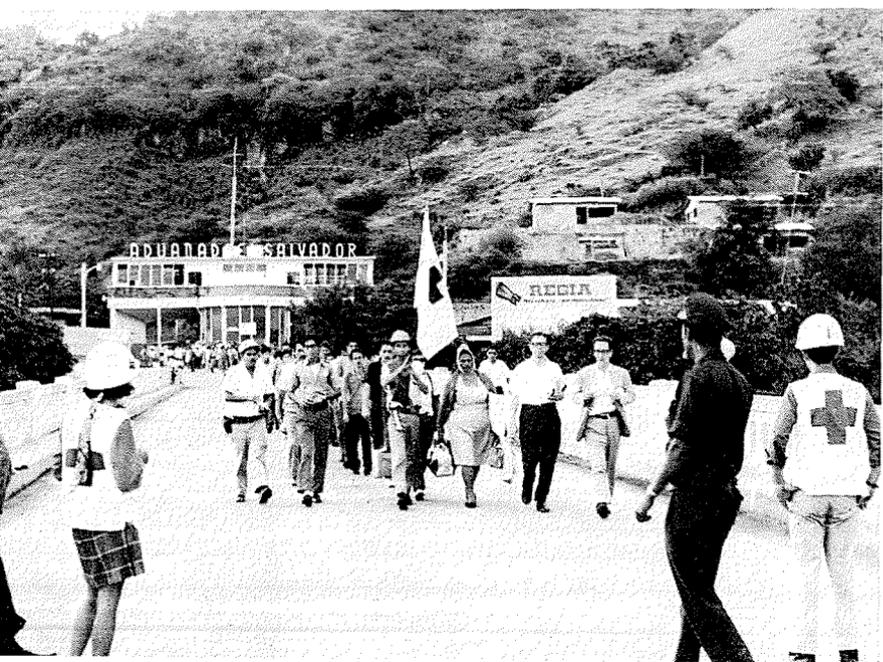
From the outset of hostilities that National Society organized an "Emergency Committee" which, as early as 15 July, sent ambulances loaded with medical supplies and dressing material, and a group of first-aiders to the local sections at Jutiapa, Esquipulas and Izabal in the eastern part of the country bordering on Salvador and Honduras. In those towns, the Ladies' Committees made arrangements to meet any eventuality, collecting clothing and food from the population. At the same time the National Society appealed for blood donations and set up a tracing service in its central headquarters.

From the first day of the conflict until the occupation of the Honduran town of Nueva Ocotepeque, hundreds of Honduran nationals, most of them peasants, sought refuge in Guatemala. With tents lent by the army, the Red Cross set up several reception camps near the town of Esquipulas. As the flow of refugees increased—more than 5,000 Hondurans were sheltered by the Red



At the frontier between the two countries representatives of both National Societies meet (*standing, on left*, Mr. H. A. Segovia, regional head of Salvadoran first-aiders, Mr. Mora-Durón, Honduran Red Cross, director-general, between them Mr. E. Leemann, ICRC delegate) to exchange mail from interned civilians to their families (August 1969).

Under the same auspices, repatriation of Honduran detainees at the same place (October 1969).





Cross in July—private individuals, hotel keepers and the College of Benedictine Friars offered accommodation through the Red Cross.

A census of refugees and a medical service were organized. The most seriously ill were taken to the nearest hospital at Chiquimula. An interesting sidelight was that during the 29 days the refugees spent at Esquipulas there were thirteen births!

When Nueva Ocotepeque was liberated in August, the Red Cross organized repatriation of the refugees in family groups. With the agreement of the Honduran authorities, all were repatriated between 5 and 7 August by ambulances or military lorries to their own towns and villages, or by sea to the Honduran port of Puerto Cortés by the vessel "Hilda".

As early as 3 July some Salvador nationals residing in Honduras took refuge in the North of Guatemala, crossing the frontier at El Cinchado. This exodus increased at the end of July. In groups of 20 to 60 each day, 1,346 Salvadorans had crossed into Guatemala by 16 August.

The Red Cross also helped the victims of the conflict by giving them clothing, food and medicines in the improvised camps at Puerto Barrios and Izabal. By rail, coach and lorry made available freely to the National Society of Guatemala by private companies and by the army, these Salvadoran refugees were taken south and repatriated. In Salvador they were taken in by the first-aiders from the Ahuachapan and Santa Ana Red Cross sections.

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It must be mentioned in conclusion that the Red Cross of Nicaragua also gave Honduran refugees shelter and assistance.

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## Bulgaria

The VIth Congress of the Bulgarian Red Cross was held in Sofia from 11-13 November. Twelve hundred members of the Society took part in this Congress, the supreme body of the Bulgarian Red Cross which meets every four years. The International Red Cross was represented by Lady Limerick, Chairman of the Standing Commission, Mr. Henrik Beer, League Secretary-General, Mr. Jean Pictet, member and Director-General of the ICRC, and Mr. Herbert G. Beckh, ICRC delegate. National Societies of neighbouring countries had also been invited to delegate representatives.

Delegates of various sections of the Bulgarian National Society reported on their activities. These are considerable, particularly in public health education, first aid, mountain rescue work and life-saving.

We now give extracts of Mr. Pictet's address in which he drew attention to the excellent work carried out by the National Society in Bulgaria.

The Bulgarian Red Cross gives effective assistance within its own boundaries, as is its duty as a National Society. It also contributes, however, to alleviating suffering in less favoured countries stricken by conflict or natural disasters. For this it must be congratulated as a member, conscious of its responsibilities, of the community and the wide Red Cross world. Indeed, over the past few years the Bulgarian Red Cross has given exceptional support to the ICRC, without which it would not have been able to accomplish all the tasks imposed by the events. My presence here is therefore above all a testimony of deep gratitude.

I would in particular like to recall the admirable work undertaken during the last two years by the surgical team of the Bulgarian Red Cross, under ICRC auspices, in the Republic of South Yemen. Three of these are still working there at the present moment. Drs. Dobrev, Baer, Ivantchev, Markov and Ivanov have worked in particularly difficult conditions, with a competence and devotion beyond praise. They have deserved well of the Red Cross. I would like here to render the tribute to them which is their due.

Without the continuous support of the National Red Cross Societies, the International Red Cross could not continue its work. This is true for the ICRC and also applies to the League. It is thanks to this support and confidence that the ICRC is in a position to continue its traditional task in the world, as defined by the Geneva Conventions wherever man's folly has kindled the flames of war and trouble, that is, to protect victims, give information to anxious families and provide relief.

The Congress, at which delegates from all parts of the country were present, was the manifestation of the organization's strength and the enthusiasm of its members. Moreover, the Summary Report recently submitted at Istanbul by the Bulgarian Red Cross contains interesting information on characteristic activities: the mountain rescue service which at present comprises 32 sections with over a thousand voluntary rescuers, the life-saving service with 1,200 life-savers, the blood transfusion service (more than 300,000 offer their blood each year), the medical posts which give first aid to over 500,000 agricultural workers in the co-operative farms and the first-aid posts (320) sited on roads in case of accidents.

It should be added that the International Red Cross institution representatives appreciated the warm welcome given them by the Bulgarian Red Cross. In fact, excursions were arranged for them on a number of occasions. They visited one village in particular where they were able to see the extent of the work being carried out for the population.

Whilst in the Bulgarian capital, Mr. Pictet and Mr. Beckh were received by General Ivan Mikhaylov, Vice-President of the Council of Ministers, Mr. Ivan Popov, Vice-Minister of Foreign Affairs, Dr. Cyril Ignatov, Minister of Health and President of the Bulgarian Red Cross, and Mr. Gospodinov, the Society's First Vice-President. Mr. Pictet also had discussions with the professors of the Sofia University Law Faculty.

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## Morocco

It will be recalled that the town of Agadir in Morocco was destroyed in 1960 by an earthquake which caused several thousand deaths. The League of Red Cross Societies then launched an appeal achieving excellent results. In order to express its gratitude to the donors, it inaugurated a commemorative inscription on 27 September 1969 at the new Hassan II Hospital in Agadir.<sup>1</sup> It should be pointed out that this hospital was built, to a large extent, thanks to the donations in cash and kind of many National Societies of the Red Cross, Red Crescent and Red Lion and Sun and that it consists of a number of hutments spread out over a wide area and constructed, like the whole new town of Agadir, in accordance with the latest anti-seismic methods.

The Moroccan Red Crescent had sent out invitations to the ceremony to ICRC and League representatives as well as to those of some fifteen National Societies selected from amongst the large numbers of Societies having taken part in the relief action. An address on behalf of the Moroccan Government was delivered by Dr. Omar Boucetta, Minister for Youth, Sport and Social Affairs, in which he paid tribute not only to the energy and perseverance of the Moroccan people which enabled the town of Agadir to be rebuilt, but also to the spirit of fellowship of which relief work by the movement of the Red Cross, the Red Crescent and Red Lion and Sun had given ample proof. "I would ask you", he concluded, "to express our gratitude to your respective National Societies and if words are unable to express the gratitude of all those inhabitants, a verse in the Koran says: "Whoever does even a particle of good will certainly be repaid".

Mr. H. Beer, Secretary-General of the League of Red Cross Societies, then recalled in what conditions and in how exemplary a manner the aid action developed so rapidly, inspired as it was by a spirit of service which knows no frontier. "In all, 61 National

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<sup>1</sup> *Plate: Agadir*: Inauguration of a commemorative plaque at the Hassan II hospital.

Societies provided 10 surgeons, 48 nurses, 3 disaster relief experts and donations both in cash and in kind estimated at 7.5 million dirhams. This number of sixty-one donor Societies so far remains the highest ever recorded by the League, which is a good indication of the effect the disaster had on world opinion."

Speaking in the name of the ICRC, Mr. P. Gaillard, Assistant Director, brought out the lesson of the grievous events of Agadir. They have taken on moral significance by the very fact that they created a splendid movement of generosity amongst those who deeply felt "the new responsibility assumed by each one towards suffering wherever it may occur".

This ceremony and the words spoken, like the warm welcome given by the Moroccan Red Crescent, were proof of the energy animating the National Society. This was also reflected that same evening in the speeches made by Dr. Hadj Ahmed Djebli-Elaydouni, President delegate, and Mr. Bouacherine, First Vice-Chairman, and also in the second issue of the *Croissant-Rouge marocain*, review which mentioned the international effort made on behalf of Agadir and gives the texts of these addresses.

Since July 1969, this National Society has in fact been producing a review in French and Arabic. Copiously illustrated and with excellent presentation, it gives a complete and lively account every two months of its activities and of its provincial committees, together with news of the ICRC and the League and articles on the Geneva Conventions, first-aid and other subjects of a humanitarian character. As Mr. Gaillard observed when he visited Rabat and Fez, the Red Crescent now works in Morocco with much effectiveness in various fields, and especially with the youth of the country. This applies also to information, as can be seen in the recent creation of a periodical to which we wish all the success it deserves.

# M I S C E L L A N E O U S

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## A NEW STAGE IN THE DEVELOPMENT OF HUMANITARIAN LAW

Readers of the *International Review* will recall that in December 1968 the 23rd session of the United Nations General Assembly adopted an important resolution in this field.<sup>1</sup> This resolution asked, inter alia, the Secretary-General to study, in consultation with the ICRC, steps to secure stricter application of existing humanitarian conventions and rules, and the necessity of drawing up rules in order the better to protect civilians, prisoners and combatants in any armed conflict as well as to limit and prohibit certain methods and weapons of war.

The Secretary-General, in compliance, undertook such studies. The United Nations was represented by a large delegation at the XXIst International Conference of the Red Cross at Istanbul in September 1969 which dealt with subjects related to those covered by the recently adopted resolution.

At the beginning of December 1969 the Secretary-General submitted his report to the General Assembly. This is a copious document which, with its appendices, covers 125 pages (General Assembly document A/7720, 20 November 1969).

Due to shortage of time, the General Assembly could not study that report as thoroughly as it would have wished and on 16 December 1969 it adopted the following resolution:

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<sup>1</sup> See *International Review*, January 1969.

## Respect for human rights in armed conflicts

The General Assembly,

Reaffirming *its resolution 2444 (XXIII) of 19 December 1968 by which it recognized, inter alia, the necessity of applying the basic humanitarian principles in all armed conflicts,*

Noting *with satisfaction the report of the Secretary-General,*

Noting also *the relevant resolutions concerning human rights in armed conflicts adopted at the twenty-first International Conference of the Red Cross,*

Considering *that there has not been time at its twenty-fourth session for consideration of the item entitled " Respect for human rights in armed conflicts "*,

Recognizing *that the study requested in resolution 2444 (XXIII) should be continued with a view to including further data and developments, thus facilitating the presentation of concrete recommendations for the full protection of civilians, prisoners and combatants in all armed conflicts and for the prohibition and limitation of the use of certain methods and means of warfare,*

1. Requests *the Secretary-General to continue the study initiated by resolution 2444 (XXIII), giving special attention to the need for protection of the rights of civilians and combatants in conflicts which arise from the struggles of peoples under colonial and foreign rule for liberation and self-determination and to the better application of existing humanitarian international conventions and rules to such conflicts ;*

2. Requests *the Secretary-General to consult and co-operate closely with the International Committee of the Red Cross in regard to the studies being undertaken by that body on this question ;*

3. Requests *States Members of the United Nations to extend all possible assistance to the Secretary-General in the continuation of the study requested in paragraph 1 above ;*

4. Decides *to transmit the report of the Secretary-General to the Commission on Human Rights and to the Economic and Social*

## MISCELLANEOUS

*Council for their comments to be submitted to the twenty-fifth session of the General Assembly ;*

5. *Decides to give the highest priority to this question at the twenty-fifth session of the General Assembly ;*

6. *Invites the Secretary-General to present a further report on this subject to the General Assembly at its twenty-fifth session.*

It will be observed with interest that this resolution makes provision for fuller discussion at the 25th session of the General Assembly. The report submitted is undoubtedly worthy of full discussion and comment.

In addition, it must be pointed out that the resolution explicitly mentioned decisions adopted in this field by the XXIst International Conference of the Red Cross, mainly resolutions XIII to XVIII<sup>1</sup>. In resolution XIII, the ICRC is requested to continue its efforts with a view to proposing concrete rules which could be submitted to governments. The ICRC is also encouraged to maintain and develop its co-operation with the United Nations Organization.

As can be seen, the United Nations has displayed a like desire for close liaison and co-operation between the institutions.

During the discussion in the General Assembly, the ICRC was represented by Mr. Claude Pilloud, Director, who was available for consultation by the Secretary-General and his staff and by any delegations who so desired. The practical arrangements for effective co-operation have already been outlined and will be given greater precision very shortly.

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<sup>1</sup> The full text may be found in the November 1969 issue of *International Review*.

## THE 14th QUADRENNIAL CONGRESS OF THE INTERNATIONAL COUNCIL OF NURSES

*We give below the text of a report which was kindly sent to us by the International Council of Nurses, and which we are pleased to quote not only because the Congress was of great importance but also because of the close links which for so long have united the ICN and the ICRC. We would mention that the international institutions of the Red Cross were represented in Montreal by Miss A. Pfirter, head of the ICRC Nursing Service, who delivered a paper on "Emergency Health Preparedness" and Miss Y. Hentsch, Director of the Nursing Bureau of the League of Red Cross Societies.*

Ten thousand nurses representing 84 countries meeting in Montreal from June 22-28, 1969, made this the largest gathering of its kind ever to take place in Canada. Paradoxical, perhaps, in relation to the very size of the Congress and scope and complexity of the plenary program, is the ultimate goal of such a meeting—improvement in the personal care provided by each nurse to each one of her patients. The elaborate and expensive preparations for such a meeting are not intended to benefit only those who attend. The impact of the Congress is meant to be felt on national nursing standards and practice.

Significant developments are taking place in nursing throughout the world. New emphasis is increasingly being placed on comprehensive programs of nursing education; overall planning of nursing and health services is being carried out at national level with a resultant need for nurses to assume the leadership role in nursing affairs as related to the whole health program of each country. During the three days of plenary sessions at the ICN Congress, eminent speakers from many countries spoke on these and other subjects, under the Congress theme of *Focus on the Future*.

The plenary program began with an analysis of technological change and its effect on nursing practice, administration, the law and human relations. Predictions indicate that, even with full

## MISCELLANEOUS

use of modern technology, the quality and quantity of nursing care available will still depend on decisions taken by nurses. The whole subject of nursing education came under scrutiny during the second day of plenary sessions—the basic nursing education program in hospital schools of nursing; university, post-basic and post-graduate programs; and the teaching of tomorrow's nurses. Economics received careful attention on the final morning of plenary sessions. Speakers presented their views on health care, economics, socialized medicine, the nurses' personal security and the role of the professional nurses' association in promoting economic security for nurses. The closing session was devoted to the subject of leadership, discussed under the headings: the nature of leadership, leadership and the administrative process, education for leadership, leadership for technological advance in nursing and leadership in the nursing context of tomorrow.

A glance at the topics of the special interest sessions give a further indication of what one observer called the "truly remarkable content" of this Congress. Running concurrently with the plenary programme, the special interest sessions appealed to nurses particularly interested in:

- leadership and management;
- use of computers in education and administration;
- audio-visual aids in nursing education;
- nursing journalism;
- libraries in schools of nursing and for professional associations;
- forming and developing the national association;
- nursing legislation;
- nursing research;
- continuity of patient care;
- nurses and the practice of nursing;
- psychiatric and mental health nursing;
- implications for nursing practice for patients with heart surgery;
- outpost nursing;
- implications for nursing practice for patients with renal transplantations;
- occupational health nursing;

- emergency health preparedness;
- rehabilitation and the assessment of patient needs;
- space-age nursing.

The Council of National Representatives, ICN's governing body, met in open session for two days prior to the plenary program. This body received reports on activities of the International Council of Nurses during the past four years and it proceeded to define the work of ICN for the quadrennium 1969-1973. ICN will, first of all, undertake a study of its own structure and functions in an effort to assess what it can and should do to meet the ever-increasing and ever-changing demands of national nurses' associations.

The Council of National Representatives received a report on the launching, in 1967, of a project on nursing legislation undertaken with funds from the Florence Nightingale International Foundation, which is administered by ICN. A tangible result of the project was presented to the Congress in the form of the publication *Principles of Legislation for Nursing Education and Practice—A Guide to Assist National Nurses' Associations*. The Council of National Representatives then approved the second stage of the project, an international seminar on nursing legislation to be held in Warsaw, Poland, in July, 1970, with regional seminars possibly to follow.

Upon the recommendation of the Membership Committee, the national nurses' associations of 11 countries—Argentina, Bermuda, Bolivia, Costa Rica, Ecuador, Lebanon, Morocco, Nepal, Portugal, El Salvador and Uganda—were accepted into membership, bringing the total to 74. The Committee asked that the ICN questionnaire on eligibility for membership be revised and that a guide be prepared for drafting constitutions and by-laws for national associations. The re-opening of some sort of limited membership for nurses' associations which do not yet qualify for full membership is another of this Committee's recommendations which will be considered in the new quadrennium.

The Membership Committee recommends that ICN should encourage the formation of regional groups of nurses' associations,

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in the belief that there is much to be gained from the study, in small groups, of similar problems arising from similar geographical location, living conditions and resources. This recommendation has a direct bearing on the study of ICN's function: with the rapid proliferation of regional groupings, ICN can perhaps act more as a co-ordinator between groups and as provider of those services not within the scope of regional groups.

The Membership Committee had studied the question of some form of recognition of the "second-level nurse" and had recommended:

- a) that a "second-level nurse" be defined as one with the "next to the highest preparation to that of the 'nurse' as defined" in the ICN constitution;
- b) that this nurse have pre-service preparation;
- c) that national associations have the right to set their own membership qualifications and that, where the second-level nurse is admitted to membership, she have full membership privileges.

Although member associations are free to grant membership privileges to the second-level nurse, they must ensure that voting on ICN matters is restricted to nurses as defined in the ICN constitution. The controversial and complex nature of the question led to the decision that it should undergo further serious study by ICN.

The Professional Services Committee proposed a service entitled "Nursing Abroad" to be provided by mutual agreement through ICN member associations. This is a reform of the existing ICN Exchange of Privileges Program. "Nursing Abroad" is defined as "a service offering nurses from ICN member associations arrangements for salaried employment and/or study abroad" and the purpose of this service is "to offer facilities for the promotion of international understanding among nurses by providing opportunities for professional experience and study abroad".

The major proposal of the Professional Services Committee was the adoption of a statement of philosophy, three years in the making, on nursing education, practice and service and the social

and economic welfare of nurses. The foreword to the statement offers it not only as an affirmation of the basic principles held by ICN, but also as a guide to national associations in working out their own policies in greater detail. The statement calls for educational requirements for entrance into nursing schools to be on a level with those of comparable professions in the country and special preparation for nursing school faculty. It points out the need for health and nursing services in the promotion of health and the elimination of disease, and calls for the participation of nursing at all levels of health service planning and administration. It also states the need and right of nurses to take part in determining conditions of employment.

What did the Congress accomplish? ICN believes that it has truly been able to provide a forum for the sharing of ideas which will help nurses improve and develop their contribution to society for the benefit of people everywhere.

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## BOOKS AND REVIEWS

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**The Inter-American Human Rights Convention, *The Review, International Commission of Jurists*, Geneva, 1969, No. 2**

At the time when the Inter-American Commission on Human Rights was set up (in 1960), it was not possible to draw up a legal instrument defining the rights that the Commission was to protect and promote.

Although the principles of the Universal Declaration of 1948 have been recognised by the vast majority of States, its individual provisions are not binding on the countries that have adhered to it. It is for this reason that the European Convention on Human Rights of 1950 sets out the rights that are to be protected in binding provisions which are interpreted and applied by the European Commission and Court of Human Rights. In the absence of such a regional convention, the Inter-American Commission took as its guide the American Declaration of the Rights and Duties of Man, adopted at Bogota in 1948. This declaration has gradually gained legal force through its application by the Commission.

Next September, an Inter-American Conference of Experts is to be held at San José, Costa Rica, with a view to the discussion and signature of an Inter-American Convention on Protection of Human Rights. This long-awaited Convention, which has been drawn up by the Inter-American Commission, sets out the human rights that are to be protected and establishes detailed implementation procedures. Its signature by the American States will be an immense contribution to the effective protection of human rights at the regional level.

One general comment can be made here: the Draft Convention is much more modern in spirit than its European predecessor in that it gives substantial emphasis to economic, social and cultural rights, which form a new and genuine dimension of human rights today.

**The Geriatrics Hospital**, by Dr. J.-P. Junod, *Revue suisse des Infirmières*, Soleure 1969, No. 10.

In geriatrics a fatalistic attitude that old age explains everything must be discarded. The most outstanding quality of those who mingle with the aged is perhaps retention of the faculty for introspection and surprise. Old age is not an illness in itself and senility is often used as an explanation to justify a lack of interest in geriatrics.

The geriatrics hospital should provide the aged with good quality medical care. It should have the whole range of the usual diagnostic and

therapeutic services. These could, depending on local circumstances, also be used for other branches of medicine. First and foremost it is important not to be content with providing aged people with a type of medicine which might be considered inadequate for children and adults. Such an attitude would deprive the hospital of a dynamic character and would jeopardize the quality of care and also of staff recruitment. The geriatrics hospital should give an example of what can be achieved by active and polyvalent therapy applied to the elderly. The traditional distinction between physical and psychiatric illness can hardly be justified in geriatrics. We know that an aged patient may often be suffering from several illnesses, particularly mental afflictions associated with physical ailments. This type of hospital must therefore have a global approach to the elderly patient and his surroundings.

**University Education for Nurses, *The New Zealand Nursing Journal*,  
October, 1969.**

. . . University education for nurses is relatively new in Australia and as yet totally integrated programmes have not been established. But as interest grows and enrolments increase and more nurses are prepared to teach in university programmes no doubt new patterns will be tried. Regardless of the general plan to the university programme in nursing, there must be a balance between the arts (those courses that help us to understand man and his works) and the biological sciences on which medical care is based. The former correct "the eye of the mind" and awaken our sense of values and the latter give us the knowledge to improve our techniques. Then, of course, all programmes in nursing must have guided experience in hospital wards and community health centres. Much in the development of university education for nurses depends on the realisation by young people and practising nurses of the importance of higher education to themselves as people, as well as the advancement of the nursing profession for the welfare of others.

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

(AGREED AND AMENDED ON SEPTEMBER 25, 1952)

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

It shall be a constituent part of the International Red Cross.<sup>1</sup>

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

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

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

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

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

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<sup>1</sup> The International Red Cross comprises the National Red Cross Societies, the International Committee of the Red Cross and the League of Red Cross Societies. The term "National Red Cross Societies" includes the Red Crescent Societies and the Red Lion and Sun Society.

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

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

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

# THE GENEVA CONVENTIONS OF AUGUST, 12, 1949<sup>1</sup>

## Some publications

	Sw. fr
<b>The Geneva Conventions of August 12, 1949.</b> 2nd Ed. 1950. 245 pp.	9.—
<b>Commentary</b> published under the General Editorship of Mr. J. Pictet, member of ICRC and Director-General:	
— <b>Vol. 1:</b> Geneva Convention for the Amelioration of the Condition of the Wounded and Sick in Armed Forces in the Field — 466 pp.	
bound	18.—
paper-back	15.—
— <b>Vol. 2:</b> Geneva Convention for the Amelioration of the Condition of Wounded, Sick and Shipwrecked Members of Armed Forces at Sea — 320 pp.	
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— <b>Vol. 3:</b> Geneva Convention relative to the Treatment of Prisoners of War — 764 pp.	
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bound	33.—
paper-back	28.—
<b>The Geneva Conventions of August, 12, 1949:</b>	
— Brief Summary for Members of Armed Forces and the General Public, 13 pp. . . . .	1.50
— Course of Five Lessons, 102 pp. . . . .	7.—
— Essential Provisions, 4 pp. . . . .	0.30

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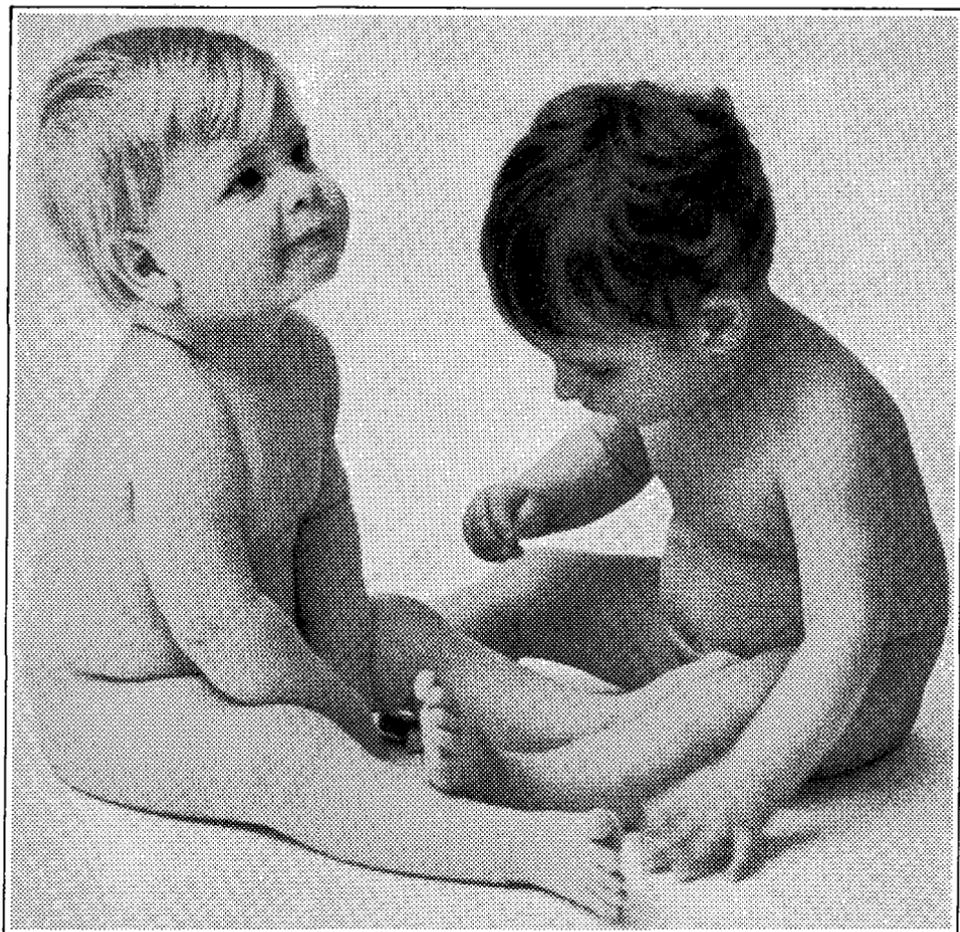
## Transparencies

### The Geneva Conventions of August, 12, 1949:

— Thirty Slides with Comments, 33 pp. mimeographed . . . . .	25.—
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<sup>1</sup>) These publications and slides may be obtained from the ICRC Press and Information Service, 7, avenue de la Paix, CH-1211 Geneva 1.



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- AFGHANISTAN — Afghan Red Crescent, *Kabul*.
- ALBANIA — Albanian Red Cross, 35, Rruga Barrikadavet, *Tirana*.
- ALGERIA — Central Committee of the Algerian Red Crescent Society, 15 bis, Boulevard Mohamed V, *Algiers*.
- ARGENTINE — Argentine Red Cross, H. Yrigoyen 2068, *Buenos Aires*.
- AUSTRALIA — Australian Red Cross, 122-128 Flinders Street, *Melbourne, C. 1*.
- AUSTRIA — Austrian Red Cross, 3 Gusshausstrasse, Postfach 39, *Vienna IV*.
- BELGIUM — Belgian Red Cross, 98, Chaussée de Vleurgart, *Brussels 5*.
- BOLIVIA — Bolivian Red Cross, Avenida Simon Bolivar, 1515 (Casilla 741), *La Paz*.
- BRAZIL — Brazilian Red Cross, Praça da Cruz Vermelha 12 *cz/86, Rio de Janeiro*.
- BULGARIA — Bulgarian Red Cross, 1, Boul. S.S. Biruzov, *Sofia*.
- BURMA — Burma Red Cross, 42, Strand Road, Red Cross Building, *Rangoon*.
- BURUNDI — Red Cross Society of Burundi, rue du Marché 3, P.O. Box 1324, *Bujumbura*.
- CAMBODIA — Cambodian Red Cross, 17, Vithei Croix-Rouge, P.O.B. 94, *Phnom-Penh*.
- CAMEROON — Central Committee of the Cameroon Red Cross Society, rue Henry-Dunant, P.O.B. 631, *Yaoundé*.
- CANADA — Canadian Red Cross, 95 Wellesley Street, East, *Toronto 284* (Ontario).
- CEYLON — Ceylon Red Cross, 106 Dharmapala Mawatte, *Colombo VII*.
- CHILE — Chilean Red Cross, Avenida Santa Maria 0150, Casilla 246 V., *Santiago de Chile*.
- CHINA — Red Cross Society of China, 22 Kanmien Hutung, *Peking, E*.
- COLOMBIA — Colombian Red Cross, Carrera 7a, 34-65 Apartado nacional 1110, *Bogotá D.E.*
- CONGO — Red Cross of the Congo, 41, Avenue Valcke P.O. Box 1712, *Kinshasa*.
- COSTA RICA — Costa Rican Red Cross, Calle 5a, Apartado 1025, *San José*.
- CUBA — Cuban Red Cross, Calle 23 201 esq. N. Vedado, *Havana*.
- CZECHOSLOVAKIA — Czechoslovak Red Cross, Thunovska 18, *Prague I*.
- DAHOMEY — Red Cross Society of Dahomey, P.O. Box 1, *Porto Novo*.
- DENMARK — Danish Red Cross, Ny Vestergade 17, *Copenhagen K*.
- DOMINICAN REPUBLIC — Dominican Red Cross, Calle Galvan 24, Apartado 1293, *Santo Domingo*.
- ECUADOR — Ecuadorean Red Cross, Calle de la Cruz Roja y Avenida Colombia 118, *Quito*.
- ETHIOPIA — Ethiopian Red Cross, Red Cross Road No. 1, P.O. Box 195, *Addis Ababa*.
- FINLAND — Finnish Red Cross, Tehtaankatu 1 A, Box 14168, *Helsinki 14*.
- FRANCE — French Red Cross, 17, rue Quentin Bauchart, *Paris* (8<sup>e</sup>).
- GERMANY (Dem. Republic) — German Red Cross in the German Democratic Republic, Kaitzerstrasse 2, *Dresden A. 1*.
- GERMANY (Federal Republic) — German Red Cross in the Federal Republic of Germany, Friedrich-Ebert-Allee 71, 5300 *Bonn 1*, Postfach (D.B.R.).
- GHANA — Ghana Red Cross, P.O. Box 835, *Accra*.
- GREAT BRITAIN — British Red Cross, 9 Grosvenor Crescent, *London, S.W.1*.
- GREECE — Hellenic Red Cross, rue Lycavittou 1, *Athens 135*.
- GUATEMALA — Guatemalan Red Cross, 3.º Calle 8-40 zona 1, *Guatemala C.A.*
- GUYANA — Guyana Red Cross, P.O. Box 351, Eve Leary, *Georgetown*.
- HAITI — Haiti Red Cross, Place des Nations Unies, B.P. 1337, *Port-au-Prince*.
- HONDURAS — Honduran Red Cross, Calle Henry Dunant 516, *Tegucigalpa*.
- HUNGARY — Hungarian Red Cross, Arany Janos utca 31, *Budapest V*.
- ICELAND — Icelandic Red Cross, Ølduggøtu 4, *Reykjavik*, Post Box 872.
- INDIA — Indian Red Cross, 1 Red Cross Road, *New Delhi 1*.
- INDONESIA — Indonesian Red Cross, Tanah Abang Barat 66, P.O. Box 2009, *Djakarta*.
- IRAN — Iranian Red Lion and Sun Society, Avenue Ark, *Teheran*.
- IRAQ — Iraqi Red Crescent, Al-Mansour, *Baghdad*.
- IRELAND — Irish Red Cross, 16 Merrion Square, *Dublin 2*.
- ITALY — Italian Red Cross, 12, via Toscana, *Rome*.
- IVORY COAST — Ivory Coast Red Cross Society, B.P. 1244, *Abidjan*.
- JAMAICA — Jamaica Red Cross Society, 76 Arnold Road, *Kingston 5*.
- JAPAN — Japanese Red Cross, 5 Shiba Park, Minato-Ku, *Tokyo*.
- JORDAN — Jordan National Red Crescent Society, P.O. Box 10 001, *Amman*.
- KENYA — Kenya Red Cross Society, St Johns Gate, P.O. Box 712, *Nairobi*.
- KOREA (Democratic People's Republic) — Red Cross Society of the Democratic People's Republic of Korea, *Pyongyang*.
- KOREA (Republic) — The Republic of Korea National Red Cross, 32-3 Ka Nam San-Donk, *Seoul*.
- KUWAIT — Kuwait Red Crescent Society, P.O. Box 1359, *Kuwait*.
- LAOS — Lao Red Cross, P.B. 650, *Vientiane*.
- LEBANON — Lebanese Red Cross, rue Général Spears, *Beirut*.

## ADDRESSES OF CENTRAL COMMITTEES

- LIBERIA** — Liberian National Red Cross, National Headquarters, Corner of Tubman boulevard and 9th Street Sinkor, P.O. Box 226, *Monrovia*.
- LIBYAN ARAB REPUBLIC** — Libyan Red Crescent, Berka Omar Mukhtar Street, P.O. Box 541, *Benghazi*.
- LIECHTENSTEIN** — Liechtenstein Red Cross, *Vaduz*.
- LUXEMBOURG** — Luxembourg Red Cross, Parc de la Ville, C.P. 234, *Luxembourg*.
- MADAGASCAR** — Red Cross Society of Madagascar, rue Clemenceau, P.O. Box 1168, *Tananarive*.
- MALAYSIA** — Malaysian Red Cross Society, 519 Jalan Belfield, *Kuala Lumpur*.
- MALI** — Mali Red Cross, B.P. 280, route de Koulikora, *Bamako*.
- MEXICO** — Mexican Red Cross, Avenida Ejército Nacional, n° 1032, *Mexico 10, D.F.*
- MONACO** — Red Cross of Monaco, 27 Boul. de Suisse, *Monte-Carlo*.
- MONGOLIA** — Red Cross Society of the Mongolian People's Republic, Central Post Office, Post Box 537, *Ulan Bator*.
- MOROCCO** — Moroccan Red Crescent, rue Benzakour, B.P. 189, *Rabat*.
- NEPAL** — Nepal Red Cross Society, Tripureswore, P.B. 217, *Kathmandu*.
- NETHERLANDS** — Netherlands Red Cross, 27 Prinsessegracht, *The Hague*.
- NEW ZEALAND** — New Zealand Red Cross, 61 Dixon Street, P.O.B. 6073, *Wellington C.2*.
- NICARAGUA** — Nicaraguan Red Cross, 12 Avenida Noroeste, *Managua, D.N.*
- NIGER** — Red Cross Society of Niger, B.P. 386, *Niamey*.
- NIGERIA** — Nigerian Red Cross Society, Eko Akete Close, off. St. Gregory Rd., Onikan, P.O. Box 764, *Lagos*.
- NORWAY** — Norwegian Red Cross, Parkveien 33b, *Oslo*.
- PAKISTAN** — Pakistan Red Cross, Frere Street, *Karachi 4*.
- PANAMA** — Panamanian Red Cross, Apartado 668, *Panama*.
- PARAGUAY** — Paraguayan Red Cross, calle André Barbero y Artigas 33, *Asunción*.
- PERU** — Peruvian Red Cross, Jiron Chancay 881, *Lima*.
- PHILIPPINES** — Philippine National Red Cross, 860 United Nations Avenue, P.O.B. 280, *Manila*.
- POLAND** — Polish Red Cross, Mokotowska 14, *Warsaw*.
- PORTUGAL** — Portuguese Red Cross, General Secretaryship, Jardim 9 de Abril, 1 a 5, *Lisbon 3*.
- RUMANIA** — Red Cross of the Socialist Republic of Rumania, Strada Biserica Amzei 29, *Bucarest*.
- SALVADOR** — Salvador Red Cross, 3a Avenida Norte y 3a Calle Poniente 21, *San Salvador*.
- SAN MARINO** — San Marino Red Cross, Palais gouvernemental, *San Marino*.
- SAUDI ARABIA** — Saudi Arabian Red Crescent *Riyadh*.
- SENEGAL** — Senegalese Red Cross Society, Bld. Franklin-Roosevelt, P.O.B. 209, *Dakar*.
- SIERRA LEONE** — Sierra Leone Red Cross Society, 6 Liverpool Street, P.O.B. 427, *Freetown*.
- SOMALI REPUBLIC** — P.O. Box. 937, *Mogadiscio*.
- SOUTH AFRICA** — South African Red Cross, Cor. Kruis & Market Streets, P.O.B. 8726, *Johannesburg*.
- SPAIN** — Spanish Red Cross, Eduardo Dato 16, *Madrid, 10*.
- SUDAN** — Sudanese Red Crescent, P.O. Box 235, *Khartoum*.
- SWEDEN** — Swedish Red Cross, Artillerigatan 6, 10440, *Stockholm 14*.
- SWITZERLAND** — Swiss Red Cross, Taubenstrasse, 8, B.P. 2699, 3001 *Berne*.
- SYRIA** — Syrian Red Crescent, 13, rue Mahdi Ben Baraka, *Damascus*.
- TANZANIA** — Tanzania Red Cross Society, Upanga Road, P.O.B. 1133, *Dar es Salaam*.
- THAILAND** — Thai Red Cross Society, King Chulalongkorn Memorial Hospital, *Bangkok*.
- TOGO** — Togolese Red Cross Society, Avenue des Alliés 19, P.O. Box 655, *Lomé*.
- TRINIDAD AND TOBAGO** — Trinidad and Tobago Red Cross Society, 48 Pembroke Street, P.O. Box 357, *Port of Spain*.
- TUNISIA** — Tunisian Red Crescent, 19, rue d'Angleterre, *Tunis*.
- TURKEY** — Turkish Red Crescent, Yenisehir, *Ankara*.
- UGANDA** — Uganda Red Cross, 57 Roseberry Street, P.O. Box 494, *Kampala*.
- UNITED ARAB REPUBLIC** — Red Crescent Society of the United Arab Republic, 34, rue Ramses, *Cairo*.
- UPPER VOLTA** — Upper Volta Red Cross, P.O.B. 340, *Ouagadougou*.
- URUGUAY** — Uruguayan Red Cross, Avenida 8 de Octubre, 2990, *Montevideo*.
- U.S.A.** — American National Red Cross, 17th and D Streets, N.W., *Washington 6 D.C.*
- U.S.S.R.** — Alliance of Red Cross and Red Crescent Societies, Tcheremushki, J. Tcheremushkinskii proezd 5, *Moscow W-36*.
- VENEZUELA** — Venezuelan Red Cross, Avenida Andrés Bello No. 4, Apart. 3185, *Caracas*.
- VIET NAM (Democratic Republic)** — Red Cross of the Democratic Republic of Viet Nam, 68, rue Bà-Trièz, *Hanoi*.
- VIET NAM (Republic)** — Red Cross of the Republic of Viet Nam, 201, đường Hồng-Thập-Tu, No. 201, *Saigon*.
- YUGOSLAVIA** — Yugoslav Red Cross, Simina ulica broj 19, *Belgrade*.
- ZAMBIA** — Zambia Red Cross, P.O. Box R. W. 1, Ridgeway, *Lusaka*.