INTERNATIONAL COMMITTEE OF THE RED CROSS

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MARTIN BODMER, Hon. Doctor of Philosophy (1940)

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MARGUERITE GAUTIER-VAN BERCHEM, former Head of Section, Central Prisoners of War Agency (1953)

FRÉDÉRIC SIORDET, Lawyer, Counsellor of the International Committee of the Red Cross from 1943 to 1951, Vice-President (1951)

GUILLAUME BORDIER, Certificated Engineer E.P.F., M.B.A. Harvard, Banker, Vice-President (1955)

ADOLPHE FRANCESCHETTI, Doctor of Medicine, Honorary Professor of clinical ophthalmology at Geneva University (1958)

HANS RACHMANN, Doctor of Laws, Assistant Secretary-General to the International Committee of the Red Cross from 1944 to 1946 (1958)

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HANS MEULI, Doctor of Medicine, Brigade Colonel, former Director of the Swiss Army Medical Service (1963)

MARJORIE DUVILLARD, Directress of "Le Bon Secours" Nursing School (1961)

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INTERNATIONAL REVIEW
OF THE RED CROSS

SEVENTH YEAR — No. 76
JULY 1967

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*
FRENCH EDITION OF THE REVIEW

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

*

SUPPLEMENTS TO THE REVIEW

*

SPANISH

J. Meinich: Una nueva tarea de la Cruz Roja Noruega: Visitantes de cárceles. — En el Yemen: La obra de los equipos médicos. — Japón.

GERMAN


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The ICRC and the War in the Near East

GENERAL REVIEW OF ACTIVITIES

When the war broke out on June 5, 1967, in the Near East, the International Committee of the Red Cross had already taken precautions by delegating representatives to Cairo, Tel Aviv, Beyrouth, Damascus and Amman.

From the outset, the ICRC sent all States involved in the conflict an appeal to take steps to ensure the implementation of the Geneva Conventions. It reminded those Governments that these Conventions laid down that wounded, sick, prisoners of war and civilians should be protected and treated humanely and that respect should be shown for hospitals, ambulances and medical establishments. The Committee issued the reminder that it was prepared to undertake all the tasks assigned to it by the Conventions, and take any humanitarian initiative required, and that the Central Information Agency for prisoners of war and civilians had been set up and was already operative in Geneva.

The Committee also requested the Governments to convey to it full details on the military prisoners taken by the Armed Forces and on enemy civilians arrested or interned. It also pointed out that its delegations in the belligerent countries had been assigned to organize, with the co-operation of the authorities and National Societies, practical assistance to all victims of the conflict without distinction. Concomitantly with this appeal to the Governments,
the Committee chartered an aircraft which it had painted white with the red cross sign. This took off from Geneva no more than three days after the start of hostilities, conveying seven further delegates to reinforce their colleagues already on the spot and carrying also almost ten tons of relief supplies, medical equipment and blood plasma.

By June 23, there were some thirty delegates in the countries directly concerned, namely Israel, the United Arab Republic, the Lebanon, Syria and Jordan. These delegates were doctors, specialists in emergency relief programs or in tracing missing persons and handling family enquiries.

The ICRC operates from two bases, one in Nicosia—from where, at least at the beginning of the conflict, the various capitals could be reached most rapidly—and the other in Beyrouth, the latter being geared more particularly to deal with relief programs.

This action in the Near East is of course being carried out in conformity with the Geneva Conventions to which all the countries involved are party.

We shall see what were the International Committee's main objectives by considering in turn the various categories of victims it had to take care of.

**Wounded.** — At the beginning, of course, emergency action had to be taken for the benefit of all the wounded. It took the form, first and foremost, of large consignments by special aircraft, of blood plasma, dressing material and surgical equipment. Several National Societies have also sent medical personnel.

Following the cessation of hostilities, this work was taken over by the various national health services and the ICRC no longer had to participate.

**Prisoners of war.** — All prisoners have been visited by ICRC representatives, some of them twice.

A census of prisoners is in progress and Geneva has already received and transmitted to the countries of origin lists of names.

---

1 Plate. Already on June 8 the ICRC aircraft took off with emergency supplies for the Near East.
Geneva. — Already on June 8 the ICRC aircraft...

Photos Jean Zbinden, Geneva
... took off with emergency supplies for the Near East.

Photos Jean Zbinden, Geneva
June 14. — Arab civilians crossing the Jourdan to leave Israeli occupied territory.

Photos by B. Ryf, Grenchen
June 14. — ICRC delegates cross the other way, taking thousands of civilian messages from Jordan.
June 14. — ICRC delegates about to make another sweep over the Sinai desert.
June 26. — Coming from Jerusalem and Amman, two ICRC delegates meet at the River Jordan to arrange for an exchange of Jordanian and Israeli POW's.
June 27. — Exchange of wounded Israeli and Jordanian POW's under ICRC control.
June 29. — Milk supplied by ICRC being distributed to refugees in Amman.
with the necessary details; these lists, according to the Geneva Conventions, are to be supplied to the Government of the country of origin by the Detaining Power.

Immediate attention was given by the ICRC delegates on the spot to the seriously wounded prisoners. A large number of these have already been repatriated, mostly from Israel to Egypt or Jordan, and this work will be resumed later as some of the wounded are in no condition to be moved.¹

According to the Geneva Conventions, prisoners of war should be repatriated on the cessation of hostilities. Negotiations are proceeding to obtain the co-operation of all the States concerned with a view to general repatriation of all prisoners irrespective of rank or the number held by one party or the other.

Rescue operations in the Sinai Desert. — A large number of Egyptian soldiers were in dire straits in the Sinai Desert after the cease-fire. The ICRC delegates were active in the rescue operations, responsibility for which was assumed first and foremost by the Israeli authorities. These operations were made difficult by the fact that the territory was enormous and that many of the soldiers were widely dispersed. They had often to be sought by helicopter, sometimes one by one, and supplies had to be taken to them by tank-lorries. Some 12,000 troops were enabled to return to their home country. The conveyance of isolated troops towards the eastern bank of the Suez Canal and then to the other side was continued until, by the end of June, the operation was nearing completion.²

Refugees. — The refugee problem is critical. There are of course the refugees from the 1948 war who are looked after by UNRWA (United Nations Relief and Works Agency for Palestine Refugees in the Near East). This specialized agency is still responsible for the welfare of these refugees, whether they be the original refugees or newcomers. So far the Red Cross aim was to supplement the work

¹ Plate. Exchange of wounded Israeli and Jordanian POW's under ICRC control.
² Plate. ICRC delegates about to make another sweep over the Sinai desert.
done by UNWRA by providing additional emergency supplies where the situation was most critical, particularly in Jordan and Syria. This work will be continued and will later be taken over by the League of Red Cross Societies under an agreement between the two institutions.

One June 16, this mission was described to National Societies as follows:

The growing number of civilian refugees and displaced persons, following the conflict in the Near East, and the need to organise on their behalf an efficient and harmonious Red Cross relief action, have created such problems that the International Committee of the Red Cross and the League of Red Cross Societies have agreed to combine their efforts, in close collaboration with the National Societies concerned and the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNWRA).

As in the past, the ICRC will continue to play its rôle of neutral intermediary on behalf of the victims of the events (wounded, prisoners of war, internees, civilian population of occupied areas) and to ensure the strict application of the Geneva Conventions in all the countries affected by the conflict.

The ICRC will continue to aid the refugees and displaced persons in the occupied territories, while the League will take charge in the regions where the refugees are under the control of their governments.

Relief supplies. — The ICRC’s immediate concern was to assist the victims. On June 7, a chartered plane bearing the sign of the red cross delivered six tons of supplies. Other planes followed, and on June 14, the International Committee sent a general appeal to Red Cross, Red Crescent, and Red Lion and Sun Societies. This read:

"Some fifteen tons of relief supplies have been despatched and distributed with the help of the National Societies. Each one of these war-torn countries has received a share of the donations sent to the ICRC by the National Societies of Canada, Denmark, Federal Republic of Germany, Finland, France, Ireland, Italy, Lybia, the Netherlands, Norway, Sweden, Switzerland, Tunisia, the United Kingdom, and the United States of America, or provided by the ICRC itself and various charitable organizations. The distribution was made in accordance with the donors’ wishes."
INTERNATIONAL COMMITTEE

... From hour to hour details are coming in of the enormous needs, particularly in the areas directly affected by the fighting, where the ICRC is working to provide emergency relief.

Attached to this appeal is a list of National Society requirements. The ICRC is now awaiting details of the medical personnel needed: as soon as these are known they will be communicated to National Societies.

Inquiries and generous offers have been received from many National Societies to which the ICRC makes a pressing appeal, so that it may cope with all the widespread distress.”

Subsequently, the ICRC was able to give details of National Societies’ medico-surgical requirements in Iraq, Jordan, the Lebanon, the United Arab Republic and Syria, and it brought attention to the Jordan Red Crescent Society’s announcement that the civilian refugees were in urgent need of assistance.1

The over-all relief program is being developed as the following figures show.2

a) Relief supplies flown out by six planes chartered by the ICRC included various foodstuffs, medical supplies, blood plasma, dressing material, blankets, clothing, tents, etc., weighing in all more than 45 tons, and valued at more than 700,000 Swiss francs.

b) A further plane on loan from the French Government, now based on Nicosia, took off for Beyrouth on June 21, loaded with emergency relief supplies.

c) Cash donations for the benefit of the victims of the war have also been received in Geneva. They came from many Governments and National Societies (particularly Denmark, Great Britain and Switzerland) and towards the end of June had reached a total of more than 1,900,000 Swiss francs.

d) In addition, relief in kind has been forwarded direct to Amman, Beyrouth, Cairo and Damascus by National Societies in many countries; the value of these consignments exceeded 3,100,000 Sw.fr.s.

1 Plate. Milk supplied by ICRC being distributed to refugees in Amman.
2 Figures as at June 23, 1967.

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INTERNATIONAL COMMITTEE

Civilians.—The ICRC was unable to assess immediately the full impact on the population in the territories occupied by the Israeli Forces. Its delegations in these territories will now do so, but the Israeli Government has already declared itself capable of coping with the situation.

The International Committee will certainly give what help is required in this connection. New delegations will be based in the regions of Gaza, West Jordan, Southern Syria; there are delegates already installed in Jerusalem with the agreement of the Israeli authorities.

One of the immediate tasks is communication of family messages and the tracing of civilians who have been dispersed. Delegates have already been able to arrange for transmission of more than 45,000 family messages on behalf of civilians. All have not yet reached the persons for whom they are intended, for many families have been up-rooted and the operation will take time.

Civilians must be traced and restored to their families. This work has already begun; a number of children have been conveyed from West to East of the River Jordan and delivered to their parents.

By the end of June the International Committee’s campaign was in full swing. Its first objective was to ensure implementation of the Geneva Conventions which, it may be said, have in general been respected. The Committee also aims to repatriate prisoners of war, to the very last man, re-group dispersed families and, in a word, aid civilians wherever necessary.

SUCCESSIVE STAGES OF THE CAMPAIGN

The foregoing account of the humanitarian action in the Near East may be supplemented by details of the day-to-day development.

1 Plate. ICRC delegates crossing the Jordan, taking thousands of civilian messages.

2 Plate. Arab civilians cross the other way.
June 7, 1967.—The ICRC chartered an aeroplane which took off from Geneva airport for the Near East with five delegates and six tons of relief supplies.

June 9.—The five ICRC delegates who flew from Geneva to Beyrouth on the night of June 7-8 in a Red Cross plane with 6 tons of relief supplies are endeavouring to assess the most urgent needs in the five countries directly involved in the conflict.

Relief supplies so far sent by the ICRC include dressing material, blood plasma, surgical kits and instruments, milk for babies and various medicaments donated by the ICRC, the National Societies of Switzerland, Sweden, the Netherlands, Italy, and Tunisia as well as by Caritas and various other donors.

The Finnish Red Cross has sent a consignment of blood albumin direct to Nicosia, where the ICRC has laid in stocks.

Donations and many offers of blood plasma continue to reach Geneva. The Danish Red Cross and Government have each sent the ICRC 100,000 Kr. In addition the Norwegian Red Cross has advised remittance of 50,000 N.Kr. whilst a donation from the Red Cross of the Federal Republic of Germany was received in Geneva last night.

Information from the delegates will be relayed rapidly to National Red Cross and Red Crescent Societies, many of which have declared themselves ready to send relief supplies.

June 11.—The ICRC aircraft which left Geneva on June 7 returned on June 10 and took off again with 8 tons of relief supplies for Egypt, Jordan and Syria. This consignment consisted of medical supplies for emergency treatment, such as blood plasma, surgical instruments, mobile X-ray units, bandaging material, blankets, antibiotics, cortisone, glucose, etc.

June 12.—The Central Tracing Agency in Geneva receives the first lists of prisoners of war: they contain the names of 335 Egyptians and 385 Jordanians.

The Government of the U.A.R. sent a list of 9 Israeli pilots captured by the Egyptian Forces.

June 13.—The ICRC delegate in Israel visited 3,000 Egyptian prisoners of war in the old camp at Atlich. He was given every facility to enable him to visit these prisoners as soon as possible.

June 14.—The plight of Egyptian stragglers in the Sinai Desert is the ICRC’s main concern. Although its delegates in Tel Aviv have been prevented so far, for reasons beyond their control, from going to the scene themselves, they have already taken up the matter with the
INTERNATIONAL COMMITTEE

Israeli authorities who agreed to issue orders to the Israeli troops to give every possible assistance to all wounded Egyptian soldiers and those who have laid down their arms.

At the ICRC's request, the water pipeline from Ismailia to Sinai was opened again last night.

The ICRC intends to use for immediate relief work in Sinai, a donation of 250,000 francs from the Swiss Government. Instructions to this effect were given immediately to its delegates on the spot.

The ICRC delegates in the Near East are tackling many large-scale humanitarian problems in territory where communications are extremely difficult. In Jordan, Syria, Egypt, Israel and the Lebanon, they are co-operating closely with the National Societies, with the Magen David Adom and with local authorities, for the despatch and distribution of emergency relief supplies and for the strict application of the Geneva Conventions.

The ICRC has already received lists of prisoners of war from Israel and Egypt. Its delegates have visited prison camps and are enquiring into the needs of the population in various areas affected by the conflict.

The first seriously wounded Egyptian and Jordanian prisoners are scheduled for repatriation tomorrow. They will be conveyed in the ICRC's aircraft. Arrangements for the repatriation of able-bodied prisoners are being studied.

The ICRC continues to transmit family messages between countries separated by the war.

June 15.—At present there are three ICRC delegates in the Sinai region co-operating in the rescue of Egyptian soldiers still in the desert.

They are undertaking this mission following an agreement between the ICRC and the Israeli Government with a view to tackling promptly the humanitarian problem arising from the plight of Egyptian soldiers in the Sinai Desert.

The ICRC has been informed by its delegates in Tel Aviv that in the last few days 300 wounded have been rescued from the desert and are now receiving care.

Yesterday an ICRC delegate to Cairo contacted the Israeli military authorities East of the Suez canal. He crossed the Sinai Desert in an Israeli army vehicle and joined up with the ICRC delegation in Tel Aviv.

June 16.—In order to size up the situation and assist in necessary emergency measures, the ICRC delegates have been flying repeatedly over the Sinai by helicopter at low altitude since June 14; they landed a number of times.
INTERNATIONAL COMMITTEE

They have observed that in the past 48 hours the situation of the civilian population and Egyptian forces has improved. Operations undertaken by the authorities indicate that Egyptian troops who have not yet been aided will be regrouped and given nourishment within the next few hours.

The delegation is taking part in all operations carried out by the Israeli armed forces in lorries, helicopters, and aeroplanes in order to collect, supply and care for Egyptians still in the desert. Every available method is being employed to bring the relief operation in Sinai to a successful conclusion.

The ICRC delegates emphasize that this is an extremely difficult task. It often involves searching for groups or individuals dispersed over a desert four times larger than Switzerland.

June 17.—The essential phase of the regrouping operation of Egyptian troops withdrawing from East to West and who are not considered by the Israelis as prisoners of war has practically come to an end on the main East-West lines of march in Sinai. This operation has been carried out by the Israeli army in co-operation with the delegates of the ICRC.

In the vast Sinai peninsula in which only Bedouins live and where communications are most infrequent, it cannot be excluded that some Egyptian troops have not yet been found by the Israeli army. The latter has therefore decided to continue searches by all methods at its disposal to find Egyptian soldiers who have not yet reached the Suez canal zone. It is probable that this only applies to a relatively low number of men. They will receive every assistance from the Israeli army in co-operation with the ICRC delegates. The latter will continue to make sweeps by helicopter over Sinai for that purpose.

So far, 11,000 Egyptian troops who were temporarily in the hands of the Israeli forces have been authorized to proceed to Egypt across the Suez canal. They have been collected in a transit camp in the canal zone which they have been able to cross to their own country in craft, by agreement between the local Egyptian and Israeli commanders.

June 18.—The ICRC delegates have contributed to arrangements for the repatriation of severely wounded prisoners taken by the Israeli forces. On June 15, the ICRC aircraft conveyed the first twenty Egyptians from Israel to Cairo. A further thirty Egyptian prisoners were repatriated the following day. Repatriation of Jordanian wounded prisoners will be by road; they will be accompanied by ICRC delegates.

June 19.—ICRC delegates in the Near East are continuing to arrange repatriation of seriously wounded prisoners. Yesterday, the
ICRC plane landed at Mafraq airport, near Amman, with nineteen wounded Jordanian troops.

His Majesty King Hussein made a point of welcoming personally these wounded soldiers and the ICRC escort. His Majesty went aboard the Red Cross aircraft to encourage the wounded repatriates.

Two consignments of blankets are scheduled to be sent to Amman today. On June 20 the aircraft will convey a fourth group of wounded Egyptian prisoners to Cairo. On June 12, the ICRC will repatriate from Tel Aviv a second group of Jordanian wounded prisoners and a group of children.

ICRC delegates on the spot are exerting every effort to arrange repatriation of the greatest possible number of wounded.

The ICRC is continuing its intensive action for the benefit of refugees and displaced persons in territory occupied by the Israeli forces. In addition, one of the ICRC delegates has been assigned the task of distributing relief supplies to civilians who have sought refuge in Damascus and to the South of the Syrian capital.

June 22.—The ICRC has taken steps to reinforce its delegations in the Near-East. Today, the aircraft "Nord 262", placed at its disposal through the French Red Cross, left Geneva for Nicosia with ten delegates belonging to its "Group for International Missions". Two other members of that group left Geneva on June 20.

These new reinforcements, which comprise two doctors, supply, transport and radio experts, will be distributed amongst the ICRC delegations already on the spot.

The delegate general of the ICRC in the Near East has already decided to place two delegates to the West of the Suez canal to ensure rapid liaison in the relief of the wounded on the other bank.

Yesterday, the ICRC aircraft arrived in Cairo with 28 wounded Egyptians repatriated from Israel.

June 26.—The delegates of the International Committee of the Red Cross have been given permission by the Israeli Government to go anywhere in the territory controlled by Israel.

On the basis of this agreement, the ICRC intends to set up several sub-delegations in these territories.

June 27.—425 Jordanian troops, including 17 officers captured by the Israelis, returned under the auspices of the ICRC to their own country today. Amongst them were three Iraqi civilians released by the Israeli authorities. About twenty-five wounded Jordanian prisoners at present unable to be moved will be taken to Amman as soon as their condition permits.
Preceded by a truck with Red Cross markings a convoy of 18 vehicles has crossed the Jordan from West to East near the Allenby bridge.

This repatriation operation affecting all Jordanian prisoners of war in Israel is the result of an agreement concluded between ICRC delegates in Tel Aviv and Amman.

In accordance with this agreement Jordan has handed over, through the ICRC, two Israeli pilots taken prisoner by the Jordan forces.

The International Committee has also been able to arrange the return to Jordan of children separated from their families. Thirty of these children were thus transported on June 22 from Tel Aviv to Amman to rejoin their families.

In order to meet the deadline for publication, this report goes up to the end of June, but the ICRC’s activity is being kept up in all the countries where there are victims of the conflict. Our account of this work will be continued in our next issue.
Yemen

The medical team installed at Amara in North Yemen worked at high pressure throughout May. Consultations averaged more than a hundred daily. The same sicknesses (amoeba, bilharzia, typhoid, scurvy, avitaminosis, etc.) are repeatedly mentioned in each of the doctor-delegates’ reports. An epidemic of malaria has been reported in the Amara area where it broke out after the rainy season in April, rainfall being exceptionally heavy this year. Dr. Pietro Duchini, doctor-delegate of the ICRC, had amongst other things to perform minor surgical operations, whose numbers were considerably increased as a result of military action. In the aid post set up by extremely rudimentary means he treated wounds of a more or less serious character caused by fire-arms, often complicated by open fractures, and carried out a large number of extractions of shrapnel. In spite of very insufficient conditions of asepsis, no septic complications took place in four months of daily surgical work.

On June 13, an aircraft left Geneva for Jeddah carrying emergency medical supplies for the medical teams working in the Yemen of a value of 20,000 Sw.frs, drawn on the ICRC’s relief funds.

Vietnam

The South Vietnam authorities have released a number of seriously wounded or sick prisoners of war, selected in co-operation with an ICRC doctor delegate who had visited them in the hospitals where they were undergoing treatment.

Forty-one of these released prisoners desired to return to North Vietnam; on June 12 they crossed the demarkation line on the Hien Luong bridge over the Ben Hai river separating the two
Vietnams. Included in the group was a woman with her baby who was born in captivity.

South Africa

Mr. G. C. Senn, ICRC delegate, who undertook a new mission in South Africa from the beginning of April to the end of May, visited several detention centres where he interviewed prisoners of his own choosing without witnesses. He visited the prisons of Robben Island, Victor Verster, Roaland, Belleville, Pretoria, Koelenhof, Bien Donné and De Doorns. The government authorities granted him every facility to accomplish his mission. His reports will be sent to the authorities concerned.

Rhodesia

At the beginning of June Mr. G. C. Senn visited the Gonakudzingwa camp, recently renamed Sengwe, on the Rhodesian border. He will now go to Malawi to visit Burundi detainees on the shores of Lake Tanganyika, some 60 miles from Bujumbura.

Greece

On June 14 an aeroplane left Geneva with five cwt of medical supplies worth more than 10,000 Sw.fr. and paid for from ICRC relief funds. These essential pharmaceutical products, antibiotics, vitamins, sedatives, etc., are intended for political prisoners interned following the recent events in Greece.

The ICRC has sent by sea, clothing, under-clothing and footwear, particularly for women detained for the same reasons.

Hungary

The International Committee has sent a new mission to Hungary, in pursuance of its activity as an intermediary for the remittance of financial assistance which the Government of the Federal Republic of Germany offers to victims of pseudo-medical experiments which were carried out in concentration camps under the National Socialist regime.
Mr. J.-P. Maunoir, delegate and Dr. Zust, doctor delegate, accompanied by Miss L. Simonius, were in Budapest from June 10 to 19, 1967, to examine a further group of victims. They also consulted the Hungarian Red Cross Society’s medical advisers who had prepared the file for each claimant.

IN GENEVA

At the Central Tracing Agency

Two brothers, Claudio and Antonio V., living in the USSR, wrote the Central Tracing Agency on February 26, 1967, asking it to trace their two sisters, Trinidad and Gloria V. who had been evacuated to France during the Spanish Civil War, when they themselves were taken to the U.S.S.R.

They recalled that at that time they had lived in Bilbao and that their father had been a house-painter. They hoped with this scant information to find at least one member of their family.

The Agency contacted the Spanish Red Cross in Madrid. After various enquiries the fact was established that Trinidad and Gloria V. had been repatriated. Both now live in Bilbao; Trinidad is married and has two children. Enquiries also revealed another brother, Luis Alberto V., at present the father of a family. Their father, formerly a widower, now has two more children from a second marriage.

This information was conveyed to the Alliance of the Red Cross and Red Crescent Societies in Moscow and after being separated for thirty years the family was able to renew the ties which events had severed.
JOINT COMMISSION
of the
EMPRESS SHÔKEN FUND


FORTY-SIXTH DISTRIBUTION OF INCOME

The Joint Commission entrusted with the distribution of the income of the Empress Shôken Fund met in Geneva on 17th March 1967. The Japanese Red Cross was represented by His Excellency Ambassador Morio Aoki.

The Commission noted the statement of accounts and the situation of the Fund at 31st December 1966, and confirmed that the balance available amounted to Sw.Frs. 25,904.70.

Twenty-three requests had been submitted for allocations from the XLVIth Distribution of income. In application of the remarks made in Circular No. 52 of 11th April 1963, concerning disadvantages of making small allocations which do not permit the financing of projects, the Joint Commission decided to make the following allocations:

The Chilean Red Cross Society : Sw.Frs. 9,000
- to provide equipment for the Preventorium for children at Papudo;

The Indonesian Red Cross Society : Sw.Frs. 6,000
- to provide for equipment of disaster relief team;
INTERNATIONAL COMMITTEE

The Malaysian Red Cross Society: Sw.Frs. 10,000

to purchase vehicle to be used as mobile clinic for health work
in rural areas.

The unused balance of Sw.Frs. 904.70 will be added to the
income available for the XLVIIth Distribution.

In accordance with Article 5 b of the Regulations, the benefi­
ciary National Societies are required to report in due course to the
International Committee of the Red Cross or the League of Red
Cross Societies on the use which has been made of the allocation
received. The Joint Commission would like this report, accompanied
by photographs if possible, to reach it at the latest by the end of the
year during which the allocation is used. It furthermore reminds
beneficiaries of Article 5 a of the Regulations which prohibits them
from assigning the grant for purposes other than those specified
without the previous consent of the Commission.

In accordance with the Regulations, the 1967 income will be
distributed in 1968. The Central Committees of National Societies
are now invited by the Secretariat of the Joint Commission to sub­
mit requests for an allocation.

The Joint Commission desires to remind candidates that such
requests must indicate the precise purposes for which the allocation
will be used, in order for them to be considered; they must also, as
far as possible, be accompanied by a plan of financing. Requests must
be submitted to the Secretariat of the Joint Commission before
31st December 1967. To facilitate National Societies to make appli­
cations in conformity with the Regulations, the Joint Commission
has decided to send, as in the past year, model application forms to
all National Societies.

For the Joint Commission

League of Red Cross Societies    International Committee of the
                                 Red Cross

H. Beer                        M. Bodmer
J.-P. Robert-Tissot            R. Gallopin
K. J. Seevaratnam              (Miss) A. Pfirter

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### EMPRESS SHOKEN FUND

**BALANCE SHEET AT 31 DECEMBER 1966**

<table>
<thead>
<tr>
<th>ASSETS</th>
<th>Sw. Frs.</th>
</tr>
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<tr>
<td>Swiss Public Securities, estimated at par (Stock Exchange value Fr.s 184,075)</td>
<td>199,000—</td>
</tr>
<tr>
<td>Time deposit with the League of Red Cross Societies (3 months at 9.2.1967)</td>
<td>304,998.55</td>
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<td>Cash at the Swiss National Bank, Geneva</td>
<td>158,900.74</td>
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<td>Administration fédérale des Contributions, Bern (Tax at source to be reclaimed)</td>
<td>1,804.30</td>
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<tr>
<th>OWN FUNDS AND LIABILITIES</th>
<th>Sw. Frs.</th>
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<tbody>
<tr>
<td>Inalienable capital:</td>
<td></td>
</tr>
<tr>
<td>Balance brought forward from 1965</td>
<td>389,081.64</td>
</tr>
<tr>
<td>Plus:</td>
<td></td>
</tr>
<tr>
<td>Extraordinary contribution received from the Japanese Government in 1966</td>
<td>119,232.15</td>
</tr>
<tr>
<td>Provision for market fluctuations</td>
<td>101,392.60</td>
</tr>
<tr>
<td>Provision for administrative costs:</td>
<td></td>
</tr>
<tr>
<td>Debit balance brought forward from 1965</td>
<td>(187.85)</td>
</tr>
<tr>
<td>Statutory attribution on the income in 1966</td>
<td>991.30</td>
</tr>
<tr>
<td>Less: Actual administrative costs in 1966</td>
<td>(839.55)</td>
</tr>
<tr>
<td>Debit balance at 31 December 1966</td>
<td>(36.10)</td>
</tr>
<tr>
<td>Funds available at 31 December 1966 according to accounts</td>
<td>25,904.70</td>
</tr>
<tr>
<td>Total of Own Funds</td>
<td>635,574.99</td>
</tr>
<tr>
<td>Creditors (allocations to be withdrawn)</td>
<td>29,128.60</td>
</tr>
</tbody>
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<tr>
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<td>664,703.59</td>
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<th>664,703.59</th>
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<td>363</td>
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STATEMENT OF INCOME AND EXPENDITURE FOR 1966

<table>
<thead>
<tr>
<th></th>
<th>Sw. Frs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funds available at 31 December 1965</td>
<td>19,070.30</td>
</tr>
<tr>
<td>Less:</td>
<td></td>
</tr>
<tr>
<td>Forty-fifth distribution of alloca-</td>
<td></td>
</tr>
<tr>
<td>tions to one National Society in</td>
<td></td>
</tr>
<tr>
<td>accordance with the decision of the</td>
<td></td>
</tr>
<tr>
<td>Joint Commission, 23 March 1966</td>
<td></td>
</tr>
<tr>
<td>(Circular No. 57 of 11 April 1966)</td>
<td>12,000---</td>
</tr>
<tr>
<td>Balance brought forward</td>
<td>7,070.30</td>
</tr>
<tr>
<td>Income on investments in 1966</td>
<td>19,825.70</td>
</tr>
<tr>
<td>Less:</td>
<td></td>
</tr>
<tr>
<td>Allocation of 5% of the 1966 income</td>
<td></td>
</tr>
<tr>
<td>to the administration of the Fund,</td>
<td></td>
</tr>
<tr>
<td>in accordance with Article 7 of the</td>
<td>991.30</td>
</tr>
<tr>
<td>Regulations</td>
<td></td>
</tr>
<tr>
<td>Funds available at 31 December 1966</td>
<td>25,904.70</td>
</tr>
</tbody>
</table>
LEAGUE CHAIRMAN, VICE-CHAIRMEN MEET IN GENEVA

The Chairman and seven Vice-Chairmen of the League of Red Cross Societies met at the League headquarters, Geneva, on Monday, 5 June, 1967.

This was one of the periodic meetings that the League’s top executives hold between sessions of the Board of Governors, supreme authority of the world Federation of Red Cross, Red Crescent and Red Lion and Sun Societies.

The Chairman is Mr. José Barroso of Mexico, and the seven Vice-Chairmen are Mr. George Aitken (Canada) (who will be represented by Mr. J. A. Broadbent, immediate Past President of the Canadian Red Cross); Professor A. von Albertini (Switzerland); Ambassador André François-Poncet (France); The Countess of Limerick (Great Britain); Professor Dr. G.A. Miterev (USSR); Chief S.A. Ojo (Nigeria); and Ambassador William E. Stevenson (USA).

Points discussed at the meeting included the proposed agenda for the 29th Session of the League’s Board of Governors to be held in The Hague (Netherlands) from 29 August to 9 September 1967.

The Chairman and Vice-Chairmen also studied the League’s programme of activities for 1968-69, and notably plans of action under the Red Cross Development Programme.

They also heard reports on current major international Red Cross relief actions, including those for the civilian population of Viet Nam, supplementary feeding for famine victims in India, and reinstallation of Sudanese refugees in the Central African Republic (conducted jointly with the United Nations High Commissioner for Refugees).
IN THE RED CROSS WORLD

LEAGUE NURSING ADVISORY COMMITTEE

A great need for well-trained auxiliary nursing personnel exists in many countries, especially in the developing areas, and it is the duty of National Red Cross, Red Crescent and Red Lion and Sun Societies to participate in recruiting and training them.

This was one of the main themes of the League of Red Cross Societies Nursing Advisory Committee, one of several of the League's Advisory Committees, at a two-day meeting in Geneva on June 19 and 20, 1967.

This 16-member committee meets every two years. The meeting brought together 13 delegates representing the National Societies of the following countries: Canada, Denmark, France, Federal Republic of Germany, India, Italy, Norway, Rumania, Spain, Turkey and Yugoslavia.

Observers from the International Committee of the Red Cross, the International Council of Nurses and the World Health Organisation attended the meeting.

The Committee, which is responsible for suggesting Red Cross policy in the field of nursing, agreed to recommend a set of basic guidelines on the recruitment and training of Red Cross auxiliary nursing personnel to be circulated to all National Societies, schools of nursing and international organisations concerned with nursing.

These guidelines stress the need for nursing auxiliaries to be recruited, trained and supervised in their work by fully trained nurses, and that the programmes of National Societies in this respect be planned, bearing in mind the total health programmes of their own countries.

Another of the Committee's recommendations concerned the role of nurses in disaster relief operations, which calls for training in the social sciences so that they may be better equipped for working in cultures and creeds other than their own.
XXTH INTERNATIONAL CONFERENCE OF THE RED CROSS

The report of the XXth International Conference of the Red Cross has just appeared in French, English and Spanish. It has been produced by the Austrian Red Cross to whom orders should be addressed.1

This volume of 120 pages, amply illustrated, contains the programme of the XXth Conference and the list of government and National Society delegates.

The opening ceremony in Vienna on October 2, 1965 is recalled as well as the meeting of the Council of Delegates. There follows a detailed report of the four plenary sessions which took place from October 4 to 9, as well as the text of forty resolutions which the Conference adopted and of which an account has already been given in the International Review. Finally, a list of documents presented, including reports by the ICRC and the League, concludes the volume, which gives a most complete picture of the discussions of a conference, important for the subjects dealt with and also because it solemnly reaffirmed the seven fundamental principles upon which Red Cross action is based.

1 Copies of this publication can be obtained at a cost of 90 Austrian Schillings or 15 Swiss francs, or 3½ US dollars each.
RED CROSS HELPS FIGHT DISEASE

In the fight against disease Red Cross volunteers, both junior and adult, are front-line shock troops in many parts of the world. Here are some of the ways they help to stem, and in some cases eliminate, once dreaded epidemics.

In the Estonian Republic of the USSR, polio is a thing of the past, thanks in part to the intense activity of Red Cross Juniors who make up the striking total of 92 per cent of the school population.

The Juniors played an important role in an anti-polio campaign organised by medical authorities. They helped convince the population of the need for mass vaccination, and distributed oral vaccines to all those under 20.

Threatened by a cholera outbreak in August, 1966, Iraq relied heavily on trained Red Crescent volunteers in thwarting what might have been a grave epidemic.

Armed with anti-cholera vaccines given by the USSR Alliance of Red Cross/Red Crescent Societies, a dozen four-man teams worked 12 hours a day for a fortnight in Baghdad and its outskirts. They inoculated 15,500 men, women and children—and the disease was effectively held at bay.

The Niger Red Cross, youngest member of the League of Red Cross Societies, is active in its country's fight against malaria. Volunteers make regular visits to villages in the interior, bringing precious anti-malaria medicaments and teaching the population elementary rules aimed at preventing the disease.

Parasites which pass from sheep to dogs to humans cause hydatids—cysts which can be fatal if they are not caught in time.

In New Zealand, one of the world's major sheep-raising countries, Junior Red Cross took up the fight against hydatids as a
IN THE RED CROSS WORLD

health education project, in co-operation with government health services and agricultural authorities.

Pilot teams were charged with getting all the facts concerning the pest and how to eradicate it and passing them on to fellow Juniors in their school. They, in their turn, were asked to spread this knowledge to neighbouring schools and adult organisations in their own and nearby communities.

"If everyone implements what you teach, this thief, robber and killer will be eradicated in a short time", was the motto of these young Red Cross members.

In many countries, such as Rumania, Red Cross volunteers participate actively alongside health authorities in national smallpox eradication campaigns.

— They organise “doctor meets the public” sessions, lectures and forums to educate the public on the need for vaccination;
— They help with door to door canvassing to enlist persons needing vaccination, help health authorities draw up lists of those requiring vaccination and distribute reminder notices;
— When the vaccination campaign reaches a district, Red Cross volunteers “mobilise” those needing vaccinations by groups of ten, and guarantee that they attend clinics.

Peru: Young Red Cross volunteers are bringing new hope for better health and more useful lives to families living in the depressed suburbs of Lima, Peru.

What are these suburbs like? Some have mushroomed on a dried-up river bed. Whole families live there, amongst rubbish heaps of all kinds, parents and children crowded in one room, sometimes with a few chickens and rabbits. It is to the huge task of improving such conditions that the Peruvian JRC decided, in 1964, to devote its energies.

First, the Red Cross asked teacher-sponsors and first-aiders to undertake a social survey to enable it to select families on the basis of such criteria as income, number of children, food habits, health status, etc. Would the families be interested in the Red Cross project and give it their active support?

This brought out the most acute needs of the residents: learning to read and write, to sew, to make small pieces of furniture, to
IN THE RED CROSS WORLD

improve their diet, etc. The Red Cross organised courses to meet these demands—and more than 2,000 people are now attending literacy courses and learning how to draw up a well balanced menu, how to wield a hammer and saw, how to use needle and thread...

Learning is but one aim. The other is to use this learning to improve local conditions. So the Red Cross is also trying to show families how to put this new knowledge into practice.

Through a programme of home visits, families are taught how to wash with a minimum amount of water, how to prepare nutritive meals with foods little known to Peruvian families, yet rich in proteins and which can easily supplement traditional dishes; how to make a bed with packing cases.

Many young people living in these fringe areas have joined the Red Cross and formed JRC units. These include both youngsters who are still in the primary school, and others who are already working. They learn first aid and have made it one of their responsibilities to assist in emergencies. They now take an active part in efforts to improve health and living conditions in their own community.
Canada

The Canadian Red Cross devoted an issue of its review *Despatch* (No. 4, 1966) entirely to dissemination of knowledge on the Geneva Conventions in Canada.

In a well presented and illustrated number, it outlined the history of the Red Cross and humanitarian law, as well as the Convention principles and rules. The treatment of the subject was by no means superficial; the concise and clear presentation of humanitarian problems was of constant interest from beginning to end in this exposition of the rules common to the four 1949 humanitarian Conventions. The Canadian Red Cross is to be congratulated for this publication which appeared in both English and French. It is to be hoped that its initiative in devoting an issue to this subject will be taken as an example to be followed by other National Societies which publish a magazine.

Dominican Republic

In the spring of 1965, the Dominican Red Cross accomplished signal humanitarian service during the tragic events which occurred in Santo Domingo. The *International Review* referred to this several times and gave an account of the activities undertaken by the ICRC delegates in the Republic. After the war the National Society resumed its normal activities and moved back into its own building which it had had to evacuate at the time of the fighting as it was in the combat zone. The Government has donated the Society land on which will soon be built a new building to house all the social and first-aid services.
IN THE RED CROSS WORLD

In a special issue of the Dominican Red Cross review, Dr. Manuel E. Saladin Velez, the Society's President, describes present activities. He recalls how "Ines" a 1966 hurricane, ravaged the Caribbean, causing distress which demanded an enormous effort from the Red Cross first-aid and ambulance services. For hours on end most of the Society's vehicles were operating without respite to bring assistance and relief to the villages in devastated areas and taking casualties to the hospitals in the capital. Later a fleet of vehicles was used to take food, clothing, blankets and medical supplies to the affected areas.

This large scale relief action by the Dominican Red Cross under the direction of its President had a sequel of lasting benefit: the local National Society sections in all the larger villages of the affected area were provided with an ambulance.

The National Society operates a blood bank in premises adequate in size for this useful service to the community; this blood centre provides a large part of the supplies required by hospitals in the capital and elsewhere. Noteworthy was its co-operation in 1965 with the second blood bank opened by the Red Cross in San Francisco de Macoris in the North of the country.

Clinics have been operated in the poor quarters of the capital and in the larger villages of the country by the Society for a long time. They are available for consultations and regular medical treatment for children and they provide medicaments free of charge.

Mention must also be made of a report recently received by the ICRC from the Director of the Dominican Red Cross first-aid and water safety services, whose development is in full swing as the following figures show: 176 life-guard certificates have been awarded and 219 first-aid certificates. Instructors give courses to the public in towns and villages. There are today more than six hundred first-aiders and further courses are being organized for training instructors. The Junior Red Cross also plays an important part in these actions.
In the Red Cross World

U.S.S.R.

On May 15, 1967, the Alliance of Red Cross and Red Crescent Societies of the USSR celebrated the centenary of its foundation. The event was commemorated at a large meeting attended by senior officials of the USSR, including the Minister for Public Health, the members of the Presidium of the Alliance and guests from the International Red Cross institutions and many National Societies. There were some six thousand persons at the meeting which took place in the new Congress Hall of the Kremlin.

The session was opened by Professor G. A. Miterev, President of the Alliance, who described how it had developed in the course of the century and the great humanitarian work it undertook within the country and beyond. Mr. Demitchev, the Communist Party Secretary and Government Representative, then stressed the importance for the whole nation of the work carried out under the signs of the red cross and the red crescent and he announced that the Lenin prize for the year had been awarded to the Alliance. He pinned the medal to the Red Cross flag, thereby demonstrating in a tangible manner how the Government appreciated the work of the National Society by awarding it the highest honour in the USSR.

Other speakers included the Minister of Public Health, Mr. Petrovsky; the Vice-President of the Russian Soviet Federal Socialist Republic; and a medical student as a spokesman for youth. Greetings from the Standing Commission of the International Red Cross were delivered by its Chairman, the Countess of Limerick. She expressed her pleasure on being able to congratulate the Alliance for this great anniversary and recalled the National Society’s outstanding contribution to the mission and international actions of the movement engendered and still inspired by Henry Dunant’s work over a century ago.

Next day the VIth Ordinary Congress of the Alliance began and in the course of the first session the Vice-President of the ICRC, Mr. G. Bordier, and League Secretary-General Mr. H. Beer, spoke on behalf of the two international institutions, each paying well
deserved tribute to the Soviet Red Cross which, as Mr. Miterev had made clear in his opening speech, was a living and active force with a membership of some seventy million. Mr. Miterev had also mentioned the Alliance's efforts for peace which must be pursued resolutely.

After conveying the keen regret of Mr. S. A. Gonard, President of the ICRC, at being unable to attend, Mr. Bordier read the following message:

The International Committee of the Red Cross, the founder of our universal movement, extends to the Alliance of Red Cross and Red Crescent Societies of the Union of Soviet Socialist Republics its best wishes on the occasion of the centenary of the foundation of the Red Cross in Russia. This wish is extended to the Congress of the Alliance, the members of its Executive Committee, its Presidium, to the Societies of member Republics of the Union and to the tens of millions of their members.

We in Geneva know the esteem your Society has earned in the service of men, women and children who suffer from sickness, natural disaster and other evils to which humanity is prey.

Faithful to the humanitarian tradition so admirably represented by Feodor Ritchichev in the XVIIth century and by the great surgeon Nikolai Ivanovitch Pirogov in the XIXth century, Russia was one of the first States to participate in the framing of the 1864 Geneva Convention for the protection of the wounded and the sick of armies in the field; a Convention which she ratified in 1867. On May 17 of that year was constituted "the Russian Society for Assistance to the Sick and the Wounded", renamed the "Red Cross Society of Russia" in 1879. On August 7, 1918, Lenin signed the decree defining the activities of the "Soviet Red Cross" which took over the duties of the former Society.

Since that time the Alliance has unceasingly developed its beneficent action through its various medico-social activities and its Junior Red Cross, the importance of which cannot be too strongly emphasized as it trains the young for future responsibility in your vast democratic and popular organization.

We are also aware of the service the Alliance rendered the Soviet people during the tragic years from 1941 to 1945 and after the Second
IN THE RED CROSS WORLD

World War, when it helped sister Societies and developed the Red Cross work for peace internationally by setting up and operating, inter alia, hospitals at Teheran, Addis Ababa, Phnom-Penh and Hanoi; when it sent medical teams to the Democratic Republic of Korea, China, Somalia, the Congo, Algeria and elsewhere; when it also sent generous donations to many places. The Alliance plays a rôle which is highly appreciated in the international meetings of the Red Cross such as the Standing Commission of the International Red Cross of which the Alliance's distinguished President, Professor Gueorgui Andreevitch Miteren, Vice-Chairman of the League, is the senior and one of the most active and respected members.

The International Committee of the Red Cross was pleased to learn that the Alliance has just been awarded the Order of Lenin. It warmly congratulates the Alliance for this great honour and extends the earnest wish that the Alliance will continue on its chosen path and thus alleviate more and more human suffering and contribute to the promotion of peace and understanding among the nations.

In the absence of the Chairman of the Board of Governors of the League, Mr. José Barroso, the League Secretary-General, Mr. H. Beer, conveyed that body's greetings:

When the League of Red Cross Societies brings you its greetings, it is no outside body that brings its compliments during these memorable days. You are a very important part of your own international federation. Without you it would not have the Universality and power to work for humanity and peace it has today.

Your Chairman, as Lady Limerick pointed out yesterday, serves with distinction as our Vice-Chairman. Prominent representatives of your society have served, as Nicolai Tchikalenko, or are serving, as professor Libov, on important posts on our staff.

Your remarkable services to your own country have been eloquently mentioned yesterday by representatives of the Party, the Trade Unions and your Minister of Health.

But we are entitled to thank you for your work on the international front. Your hospitals in many countries, your aid after disasters all over the world, your assistance to developing countries, and your policy of hospitality to sister societies so that they can profit from your ex-
IN THE RED CROSS WORLD

periences, are well known, and this is the occasion to bring the gratitude of those sister society which are not here today.

Finally, we can, today, not avoid to think of the basic conditions for the acquisition of a happier life for all people on this earth, a lasting peace. You have always pushed very hard that your Federation, the League should be a better instrument for peace and it is our sincere hope that with the help of the Red Cross we should see, in our time, that all humanity as a whole can profit from this basic condition for human existence.

In this spirit I offer you, from your friends the world over our congratulations and wishes for the coming 100 years.

* *

Whilst he was in the USSR, Mr. Bordier observed for himself the practical work accomplished by the members of the Red Cross in factories and public institutions. He visited a factory where almost three quarters of the workers were members of our movement. In each workshop there was a rota of people to take charge of the first-aid post. He visited a sovkhose with a nursery and the model sanatorium at Riga.

In schools and universities there is a campaign to disseminate the rules of hygiene among youth and to combat infectious diseases, some of which are now being eradicated. Of the noteworthy activities, recruitment of blood donors is considered essential.

The authorities and Red Cross extended a warm welcome to their guests everywhere, showing them many interesting institutions and contriving to make their stay pleasant.

* * *

The anniversary of the Alliance’s foundation was celebrated with dignity. It was an occasion to demonstrate the growing importance of the National Society and its association with the daily life of the country. This was brought out recently in articles published in the International Review.¹

In addition, the Review of the Soviet Red Cross had itself, in a series of articles, described the main aspects of the Society's history. We cannot conclude more appropriately than by taking a leaf from that history and recalling the outstanding figure at the origin of the Red Cross in Russia, N. I. Pirogov. The determination of this contemporary of Florence Nightingale and Henry Dunant to improve the plight of the wounded and the sick in armies in the field made him one of the prominent men in the outstanding events which soon led to the signing of the first Geneva Convention. It is fitting that we remember his contribution to the movement now that the Red Cross and Red Crescent in the USSR are celebrating their centenary and clearly showing remarkable efficacy today in the struggle against human suffering.
Red Cross interest in disseminating and applying the Geneva Conventions is well known. We therefore believe it worth-while mentioning three recent laws on the implementation of those Conventions. One of these was promulgated in France, with the title "Règlement de discipline générale dans les armées" which came into force in October 1966; in Yugoslavia a law relating to protection for the sign and name of the Red Cross became operative in December 1966; in the Vietnam Republic, the Government issued a decree in March last on the application of the Geneva Conventions.

Last February, M. le médecin général Jean des Cilleuls presented a paper on the first of these laws to the International Medical Law Society. It explains clearly the French decree and we are pleased to quote widely from it below:

On October 8, 1966 decree No. 661769 was published in the official gazette under the heading Règlement de discipline générale dans les armées. This was intended to replace, from January 1, 1967, onwards a regulation of April 1, 1933, entitled Règlement du service dans l'armée the first part of which dealt with discipline in general.

The new Regulations were drawn up by Commissions presided over by General Gambiez and later by General Alleret. The text
was revised under the direct authority of the “Ministre des Armées” before being submitted to the Head of the State for approval.

It gave rise to many comments and criticisms, mostly somewhat unfavourable and expressed before the regulations had been put to the test of time. These criticisms are aimed particularly at the timing of the revision of the 1933 regulations, the decline in disciplinary standards, the rights of subordinates when given illegal orders, and the respect of the laws and customs of war.

We shall not cavil about all the opinions which have been expressed. We shall confine our remarks to those articles which deal with the humanization of war.

The decree of October 1, 1966, laid stress on the respect due to the human person and his dignity, which is the overriding consideration even in war. The same emphasis is apparent in the humanitarian Conventions. It remedies a considerable shortcoming by devoting certain of its articles (34 and 35) to the Laws and Customs of War and the Treatment of Prisoners, thus reiterating the gist of the Regulations annexed to the Hague Convention of October 18, 1907 (art. 1, 3, 23, 27, 28, 56 ...) and the Geneva Conventions of August 12, 1949 (particularly the 1st Convention (art. 4)). Under this new decree, violation of these provisions is included among the most obviously illegal actions, whether they be perpetrated within or without the national territory. Such actions entail disciplinary and penal penalties for subordinates who perform them (art. 22, para. 3) or the officers who order them (art. 21, para. 2).

The new Regulations stipulate that a subordinate may never shelter behind the pretext of an order from a superior to carry out an illegal action.

Article 22 (3) (2) states the procedure a subordinate may follow if he receives such an order; this is an eventuality which, under combat conditions, is so unlikely as to be considered a practical impossibility.

When imputing responsibility, it must not be forgotten that all individuals belonging to States which have signed and ratified the humanitarian Conventions are, like States—on which the onus of treaty obligations generally falls—directly subject to these humanitarian Conventions. This applies also to groups not con-
trolled by the State, since the essential part of the Conventions is also applicable in non-international conflicts.

Consequently, the Conventions should be known to all who are liable to benefit from them and all who may be called upon to apply them or justify their failure to do so before the Courts. In fact, in addition to the rule postulated at The Hague in 1902 on the responsibility of the State, there is the major rule of individual penal responsibility which is related to the aforesaid articles of the new French Regulations. . .

. . . The Regulations of October 1, 1966, contain a long list of prohibited actions, such as the taking of hostages, reprisals, collective punishment, actions detrimental to the life and health of the sick, the wounded, the shipwrecked, prisoners and civilians; murder, injury, cruelty etc. It is also forbidden to use any means of causing useless suffering and damage, to rob the dead and wounded, etc.

Some commentators have asked how the new Regulations can be respected and reconciled with what is known of nuclear warfare, and the school of thought which advocates the use of French atomic weapons.

. . . The essential humanitarian principles contained in International Conventions are of overriding importance and permanently valid so that officialdom cannot too often repeat them and underline them. Their strict observation is essential in all circumstances in warfare, whether conventional or otherwise, no matter what the difficulties.

To meet the objections to the new Regulations of October 1966 and to contend with the problems to which their application and that of the Geneva Conventions may give rise, elementary, clear and convincing instruction should be given to all ranks, by lectures and films, as is the practice in the Bundeswehr schools.

Failure to give such vivid instruction may result in the new Regulations on the Laws and Customs of War, and the Geneva and the Hague Conventions, remaining a dead letter . . .

. . . It must be mentioned that experience has shown the implementation of the Geneva Conventions in the event of conflict to be greatly facilitated by the support of the population. To include the principles of these Conventions in such important
regulations on military discipline as those which have just been promulgated, and to comment on those principles, cannot but have a favourable influence on the dissemination of knowledge on these Conventions and induce the population of France to get to know them better in case this should ever prove useful.

The decree of March 31, 1967 promulgated by the Republic of Vietnam is as follows 1:


In view of Decree No. 001-a/CT/LDOG/SL of 19.6.65 and of the subsequent Acts on the composition of the Central Executive Committee; and

On a proposal by the President of the Central Executive Committee;

The Comité Directeur National, after a discussion and vote, hereby

DECRES:

Article One.—The Geneva Conventions of August 12, 1949, accepted and approved by the Government of Vietnam on November 9, 1953, and including:

a) the Convention for the Amelioration of the Condition of the Wounded and Sick in Armed Forces in the Field;

b) the Convention for the Amelioration of the Condition of Wounded, Sick and Shipwrecked Members of Armed Forces at Sea;

c) the Convention relative to the treatment of prisoners;

1 Translated by the ICRC.
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d) the Convention relative to the protection of civilian persons in time of war, are hereby promulgated.

Article 2.—The President of the Central Executive Committee is vested with authority to enforce the present decree which shall be published in the official gazette of the Vietnam Republic.

The law promulgated by the Yugoslav Government is very comprehensive and important for the National Society, in view of the wide range of situations it covers. We therefore deem it useful to quote the text thereof below ¹:

Act Relating to the Use and Protection of the Sign and the Name of the Red Cross

Article 1. With a view to the implementation of the Geneva Convention for the Amelioration of the Condition of Wounded, Sick, and Shipwrecked Members of Armed Forces at Sea, and of the Geneva Convention relative to the protection of civilian persons in time of war, both dated August 12, 1949 (hereinafter referred to as “the Geneva Conventions”), the present Act lays down the conditions and instructions for the use and protection of the sign and the name of the red cross in time of peace and in time of war, or any armed conflict whatsoever.

Article 2. The distinctive sign of the red cross is a red cross with limbs of equal length on a white background.

Article 3. The sign of the red cross may only be used as a means of protection or of indicating membership or property of army medical services, the health service, or the Yugoslav Red Cross Society subject to the conditions stipulated in this Act.

The Yugoslav Red Cross Society shall use the sign of the red cross in accordance with the provisions of the Geneva Conventions.

¹ Translated by the ICRC.

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The Yugoslav Red Cross shall define in detail in what circumstances it may display the red cross sign in the exercise of its functions.

Article 4. No one may use the name or sign of the red cross if not authorized so to do by this Act and the Geneva Conventions.

Article 5. In Yugoslavia, only the Yugoslav Red Cross Society, as the national organization, is entitled to the name Red Cross.

Article 6. In time of peace, the sign of the red cross shall be used or displayed only by:

1. the personnel, buildings, plant, medical equipment, and means of transport of medical organizations or medical units on emergency service;
2. first aid posts in towns, labour and other organizations, vehicles, medical material and equipment for emergency use in case of occupational injuries or road accidents;
3. the personnel, material and equipment of foreign Red Cross Societies when carrying out their Red Cross functions in Yugoslavia.

Authority to use the red cross emblem according to para. 1 and 2 of this article is granted by the Yugoslav Red Cross.

Article 7. In time of peace, war, or any armed conflict whatsoever, the red cross sign shall be used to identify and protect the medical personnel, units, institutions, buildings, equipment and vehicles (for transport on land, sea or in the air) belonging to the medical services of the Yugoslav Armed Forces or the medical services of the Armed Forces of other countries when operating in Yugoslavia with the approval of the Federal Executive Council.

Article 8. In time of war or of any armed conflict whatsoever, the sign of the red cross shall be used as a protective sign for:

1. Yugoslav Red Cross personnel, buildings, medical equipment and vehicles intended to be used for seeking, collection, transport and care of the injured and of the sick or for the pre-
MISCELLANEOUS

vention of disease, and provided they are subject to the laws and regulations applicable to members of the armed forces;
2. the personnel, buildings, medical equipment and vehicles belonging to civilian hospitals;
3. the personnel, buildings, medical equipment and vehicles belonging to the medical services of foreign Red Cross Societies or other benevolent societies which, with the approval of the Federal Executive Council, assist the medical services of the Yugoslav Armed Forces or Public Health or the Yugoslav Red Cross, in conformity with Yugoslav or international regulations;
4. medical vehicles for transport by land, sea or air (hereafter referred to as ambulances), used for the conveyance of the injured, the sick, the infirm, maternity cases and medical material.

Article 9. In conformity with this Act and the Geneva Convention relative to the protection of civilian persons in time of war, civilian status shall be granted to a hospital or other medical institution organized to provide medical assistance to the injured, the sick, the infirm and maternity cases in time of war or any other armed conflict, and provided it has an ambulance.

The Communal Assembly of the National Defence Council shall decide, and proclaim by ordinance, which hospitals or other medical institutions are recognized as having the status of a civilian hospital in conformity with the first paragraph of this article.

Article 10. In time of war or any other armed conflict the sign of the red cross may, in conformity with the provisions of the Geneva Conventions be used to indicate hospital and safety zones and localities for the protection of the wounded, the sick, the infirm, aged persons, children under fifteen, expectant mothers, mothers of children under seven, and the personnel in such zones and localities who are responsible for fitting, maintenance and management and for medical assistance to the persons residing therein.

The Federal Executive Council shall define the hospital and safety zones mentioned in the preceding paragraph.
**MISCELLANEOUS**

*Article 11.* The Yugoslav and foreign Red Cross organizations, in time of war or any armed conflict whatsoever, may only use their emblem on Yugoslav territory as a sign that they belong to the Red Cross Organization, except in those cases provided for in article 8 of this Act, when they may also display the red cross emblem as a protective sign.

The sign of appurtenance to the Red Cross organization shall be of relatively small dimensions to distinguish it from the protective sign, and it shall not be placed on armlets or roofs.

*Article 12.* The international organizations of the Red Cross, which are permitted to carry out their functions on Yugoslav territory, and their personnel, shall be entitled to display the emblem and name in time of peace and of war or any armed conflict whatsoever.

Authority to act in accordance with the preceding paragraph is issued by the Federal Executive Council.

*Article 13.* Personnel working in medical institutions recognized as civilian hospitals shall, in time of war or any armed conflict whatsoever, be issued with an identity card bearing the holder’s photograph and an official stamp; this card shall be proof that the holder works in such a medical institution in a civilian capacity. The type of work performed by the holder shall be shown on the card.

For the purposes of the preceding paragraph, the personnel shall include any civilian working in these medical institutions for the purpose of seeking, collecting, conveying, treating or caring for military or civilian wounded and sick, the infirm, and maternity cases, or working in an administrative or other capacity in such medical institutions.

*Article 14.* Medical establishments having the status of a civilian hospital shall be indicated in time of war or any other armed conflict by the emblem of the red cross.

Personnel working in the institutions mentioned in the preceding paragraph shall, when on duty, be in possession of an identity card as prescribed in the first paragraph of article 13 and shall wear on the left arm a stamped, water-resistant armlet showing the sign of the red cross.
Article 15. Ambulances, medical institutions recognized as civilian hospitals, their personnel, medical equipment, plant and means of transport, as mentioned in articles 6 to 8 above, shall clearly display the red cross emblem in an obvious place.

Personnel who, according to article 7, article 8 (1) and (2) and article 10 of the present Act, are entitled to display the red cross sign in time of war or any armed conflict whatsoever must be in possession of an identity card issued by the authorities specified in this act.

Article 16. The identity cards mentioned in article 13 above, as well as the armlets mentioned in article 14, shall be issued by an administrative body qualified to deal with health affairs, and shall be deposited in the custody of the medical institution having the status of a civilian hospital. These identity cards and armlets shall be distributed to the aforesaid personnel immediately on the outbreak of war or any other armed conflict.

The administrative body qualified to handle health affairs shall, in accordance with the provisions of article 9 above, ensure availability of identity cards and armlets for delivery to the institutions mentioned in the first paragraph of that article.

Article 17. When any person ceases to be employed for the functions mentioned in the first paragraph of article 13 above, he shall surrender his identity card and armlet to the director of the medical institution where he worked.

Article 18. A fine not exceeding 500 dinars shall be imposed for infringement of the law:

1. on any person responsible for a medical institution who fails to ensure that the red cross sign is clearly displayed in the place stipulated (first paragraph, article 15);

2. on any person responsible for a medical institution who fails to preserve and use the identity cards and armlets or fails to issue them at the proper time to the persons mentioned in the first paragraph of article 16 above.

Article 19. A fine not exceeding 500 dinars shall be imposed for infringement of the law on any person who:
1. whilst on duty does not clearly display the red cross in the place stipulated (articles 7, 8 and 10);
2. when ceasing his work in a medical establishment, does not surrender his identity card and armlet (see article 17).

Article 20. The provisions of this Act apply with equal force to the protection of the emblem and name of the organizations of the Red Crescent and the Red Lion and Sun.

Article 21. The Federal Executive Council shall prescribe ways and means of making the Geneva Conventions known to the Yugoslav population.

Article 22. The Secretary of State for National Defence is authorized to issue regulations for the use of the sign to indicate medical units, buildings, material, plant and means of transport in the service of the Yugoslav armed forces; he shall also appoint the bodies responsible for applying such regulations.

Article 23. The Secretary of State for medical and social policy is empowered to regulate:
1. the use of the sign to indicate the premises of first-aid and emergency medical assistance institutions, and also to indicate emergency medical assistance personnel, plant, equipment and material (article 6 (1) and 6 (2));
2. the location and dimensions of the red cross sign denoting means of transport intended to be used in medical emergencies (article 6 (1)) and ambulances (article 8 (4));
3. the form of the ordinance mentioned in the second paragraph of article 9 above, the wording of the identity card, the shape of the stamp mentioned in the first paragraph of article 13 and the shape of the armlet mentioned in the second paragraph of article 14 above;
4. the registration of the ordinances, identity cards and armlets issued (article 16).

Article 24. Red cross signs in use on the day this Act becomes operative but which do not conform thereto may be used for a period not exceeding two years thereafter.
MISCELLANEOUS

Article 25. From the day this Act becomes operative, the following shall no longer be valid:

1. the provisions of article 6 of the Yugoslav Red Cross Act ("Službeni List FRNJ", No. 59/46 and "Službeni List SFRJ", No. 17/64);
2. the decree relative to the issuance of certificates of civilian status for hospitals in time of war and for civilians employed in such hospitals ("Službeni List FRNJ", No. 7/55);
3. the regulation on special health service transport ("Službeni List FRNJ", Nos. 6/59 and 32/59).

Article 26. This Act shall come into force on the eighth day following its publication in the "Official Gazette of the Yugoslav Federal Socialist Republic".

THE PRINCIPLES AND HISTORY OF NURSING CARE

The lack of nurses is everywhere prevalent. The tasks devolving on them become increasingly difficult and their responsibilities ever heavier. It is therefore essential to make efforts to have the present requirements for the training of nurses made known and also to recall that this profession takes its dignity from a long tradition and that some of its principles give it, to a certain extent, a moral protection in a period of rapid change. We therefore think it useful to mention some of the recent efforts which have been made in that direction.

The League of Red Cross Societies has prepared two series of colour slides, the first of which depicts the Life of Florence Nightingale. These thirty illustrations are accompanied by a commentary based on a number of biographies of the "Lady of the Lamp", concluding with a reminder of what is the Florence Nightingale Medal.
MISCELLANEOUS

The second series deals with the History of Nursing from ancient times to the end of the XIXth Century. The documents carefully chosen after long research in museums and archives of many countries depict the development of the treatment of the sick and wounded, also famous hospital sites. They evoke personalities of the medical world whose rôle was decisive, ranging from Hippocrates to Elizabeth Fry and from Ambroise Paré to Louis Pasteur.

For its part, the International Council of Nurses in Geneva has recently produced two pamphlets. The first of these contains the text of the Code of Ethics adopted by the ICN in 1953 and revised at Frankfurt in 1965. The International Review has already pointed out its novelty and importance for our movement, containing as it does the following passage: “It is important that all nurses be aware of the Red Cross Principles and of their rights and obligations under the Geneva Conventions of 1949”.

In another publication, the International Council of Nurses has summarized the Basic Principles of Nursing Care. Miss Virginia Henderson has undertaken this work which is an excellent analysis of the factors comprising the basis of nursing care.

The ICN has duly realized that whilst specialities in medicine require certain appropriate techniques in the medical and surgical field, the basic principles of nursing care of the sick remain none the less the same and the ICN has therefore considered it worthwhile to define them in a manner which is valid for all.

A EUROPEAN YOUTH CENTRE

The eighteen member countries of the Council of Europe have decided to have a European Youth Centre built. Its aim will be:
— to associate youth in European co-operation;
— to provide as effective a training as possible in European-oriented youth movement leadership.
MISCELLANEOUS

Spain and the Holy See, which are associated with the Council of Europe’s educational and cultural activities, will also participate in this project.

The new centre will be in Strasbourg, probably on a site provided by the town somewhere near the Council of Europe’s headquarters. It will be designed to accommodate 40 persons, with a capacity of 560 annually. The building should be completed in May 1969, coinciding with the Council’s twentieth anniversary.

There has been a pilot project in the Council’s premises since 1963. Its intensive European affairs and language courses will be taken over and extended at the new permanent centre. The full syllabus will include courses and seminars on European cooperation and integration, teaching methods and organization techniques.

The Centre will have a qualified staff under a Board of Administration comprising government representatives, leading members of private youth organizations, a representative of the European Community’s Press and Information Service, and perhaps one or two of the parliamentarian members of the Council of Europe’s Consultative Assembly.

REHABILITATION OF THE PHYSICALLY AND MENTALLY DISABLED

The Association des ergothérapeutes submitted to the 21st Congress of the Fédération des Associations et Organismes de Posture et de rééducation fonctionnelle et professionnelle des diminués physiques in Brussels, a paper on ergotherapy as a means of rehabilitation. We believe our readers will find this of interest.

Among the various rehabilitation procedures available to the disabled, there is a new one which fits in with re-adaptation techniques: ergotherapy.
This method of active re-education when prescribed as a means to achieve physical, psychological and social rehabilitation of physically or mentally disabled, acts in a programme of treatment as a link between medical care and the return to normal activity and a normal occupation. Ergotherapy is carried out under the supervision of a doctor who controls its application and results. It is defined as treatment by physical work.

It involves the practice of movements used in creative craftsmanship, normal daily life, and the patient's former occupation. Ergotherapy, both for adults and children, may be applied as treatment in a wide range of disabilities such as motory and sensory disorders, neurosis, congenital diseases, rhumatism, cardiopathy, pneumopathy, psychological disturbances, geriatrics, etc. It is a branch of medicine which is applied in specially equipped workshops in rehabilitation centres, in general and psychiatric hospitals, in sanatoria and sometimes in the patient's own home.

Ergotherapy is useful in psychotherapy. It enlists the patient's own energy and active co-operation, without which the work could not be done, and it enables social contacts to be resumed through the workshop.

In rehabilitation of the physically disabled, and in conjunction with other re-adaptation techniques, ergotherapy is a means of improving the motory functions, a corrective of movements; it increases muscular strength, the mobility of joints, and movement co-ordination. Whilst working and concentrating on a task, the physically disabled patient exercises his paralysed limb.

Some disabled have to be taught or retrained to do even the most simple gesture of everyday life, such as to get up from bed, wash, dress and feed themselves. Others learn to use artificial arms through playing games and proceeding to more and more complicated activities. Others learn to make themselves independent. Children are taught games and given schooling; women are trained to resume their household duties; men are prepared for occupations; and the elderly learn to make good use of their leisure.

A third aspect of ergotherapy is retraining to exert effort.

Apart from the co-ordination, skill and dexterity which ergotherapy imparts, it makes the disabled patient aware of his possibilities, reveals new ability and trains him to develop these with a
view to future employment. Ergotherapeutic activities may be
graded according to strength, delicate manipulation and accuracy,
depending on the materials, models and equipment used. The
idea of productivity, up to this point discounted in re-educative
ergotherapy, may now be introduced to enable the disabled person
approaching the end of treatment progressively to accustom
himself to an atmosphere where effort is required as will be the case
in his future employment. The assessment made in ergotherapy of
movement ability, behaviour and stamina is of great use for
occupational orientation.

Ergotherapy was first developed as a profession in the English­
speaking countries, where it acquired legal status after the First
World War. A world federation of ergotherapists has a membership
which includes professional associations in 17 countries. The
following extract from Readaptation (1966, No. 133) shows that in
the field of psychotherapy there is at present considerable concern
for this immense problem of disabled persons.

"The segregation of the mentally sick from normal society, as
was mentioned in the earlier pages of this issue, applies not only
to inmates of psychiatric clinics; it occurs on a wider scale within
society itself. It has been estimated that 1.8 \% of the adult popu­
lation between the ages of 20 and 60 display symptoms of serious
disorders (mental impairment in certain cases of physical injury,
schizophrenia, deterioration of skull injuries, psychopathic distress,
etc.) which are incompatible with the demands of self-reliance."
The transformations occurring in modern living conditions are
today slowly reducing the psycho-social field of afflicted persons on
the dual level of primary social environment (family life) and
secondary social environment (the economic sector). Consequently,
new psychiatric structures are becoming more and more urgent.
A system of "flexible, mobile, readily accessible and articulate
arrangements associated with psychiatric hospitals" should enable
the mentally sick to be taken entirely in hand to guide them in
successive stages towards integration into normal society.
WILLY HEUDTLASS: “J. HENRY-DUNANT ARCHIV”

The author, who was for many years director of the press and radio service of the German Red Cross in the Federal Republic of Germany, produced a work on Henry Dunant on the occasion of the Red Cross Centenary. The International Review has given an account of this publication for its great interest and drawn attention to the fact that it contained fresh documents enabling new light to be thrown on some aspects of such a rich and complex a personality as the author of A Memory of Solferino.

However, Mr. Heudtlass has continued his investigations and has now had published in Bonn, in the form of a catalogue of 120 pages, a list of documents, numbering nearly 2500 texts, photographs and photocopies, etc., which he has collected on Henry Dunant and on some of those who supported his undertakings. These items are now deposited at the "Staatsbibliothek der Stiftung Preussischer Kulturbesitz, Berlin", where one may consult material concerning humanitarian ideas and achievements over the past century.

In a preface, the author explains how he discovered and had copies made of certain documents at Gelsenkirchen and Oslo in particular where Mr. Manfred Müller and Dr. Anders Daae respectively gave him access to their archives. He relates the guiding lines in his research work, thanks to which a collection of documents of undoubted interest has been assembled, both for the history of the Red Cross and also to give a better and truer understanding of Henry Dunant, of his work and of the times in which he lived.

J. G. L.

Social service teaching—like social service itself—is beginning to find a place in the general evolutionary movement. The introduction of social service faculties in universities has created new responsibilities. It may be expected that these faculties will contribute to national programmes designed to transform "marginal masses".

There is a reciprocal influence between teaching and practice. The structure and content of the various study programmes still have traces of earlier influences. The traditionally practical content of these programmes is evidence of the character of the social workers' functions in former times.

The increase in the number of schools, the longer periods of courses, the higher qualifications required for admission and the orientation of programmes towards a higher degree of education are the characteristics of the preparation for professional social service in Latin America.

The professional social worker today fulfils a number of functions in the framework of social welfare services. However, some of these functions are still in the nature of auxiliary service and do not require preparation on a professional level. There are five forms of training for auxiliary personnel in Latin America. After obtaining the diploma, the technician is ready to work under the supervision of a professional or on his own, particularly in isolated rural regions.

Some trained professionals in direct social service discharge high level functions, but there is no training specifically for such functions.

The teaching of research methods should contribute to the creation of a more dynamic connection between practice and theory.

Social service teaching makes necessary a sharp watch on the selection of students for training.

Demand for higher education at present is such that the number of applicants has increased more rapidly than the number of places available in schools. Selection has a twofold object, namely to choose those candidates who are able to benefit most, and to make certain aspects of the training and the profession clear to the chosen candidates.

Selection is at present based on three attributes: educational level, personal values and characteristics. It is considered essential that the candidate should have an intelligent awareness of social problems and welfare. The personality factors considered essential are at least average intelligence, emotional stability, receptivity, adaptability, concentration, facility of expression and sound physical and mental health. In general candidates are selected by a faculty committee with the assistance of a specialist who submits candidates to psychological tests.
In former times the pioneers of social service belonged to the traditionally upper class. The majority of social service students today come from the middle class; they belong to a section of the youthful population who rebel against outmoded systems and willingly take the lead in movements among university students.

Whereas social service schools used almost exclusively to be for girls, an increasing number of boys now seek admission to them.

One of the aims of social service is to promote the adaptation both of the individual and his social environment. In societies where the majority of the population is "marginal" it is the role of social service to educate individuals and mobilize them so that they may exercise their rights. The student learns about society in school, but this knowledge will only be transformed into comprehension if the student has a genuine social disposition.
JUST PUBLISHED

THE PRINCIPLES
OF HUMANITARIAN LAW

by

Jean Pictet
Director-General, International
Committee of the Red Cross
Lecturer at Geneva University

In this sixty-page book the writer defines fully and
with concision humanitarian law in its widest sense, the
laws of war of The Hague and Geneva, and the prin­
ciples which form the basis for this humanitarian law.

This clear summary is understandable to everybody
interested in humanitarian ideas and actions in the world
today. In addition, the appendix is a chart of the prin­
ciples of humanitarian law.

It will be recalled that an earlier work by this author,
The Principles of the Red Cross, gives the general reader
a clear exposition of its subject. Copies of this book,
which has already had considerable success, are avail­
able in French, English, German and Spanish, from the
ICRC Geneva, which published the book.

The Principles of Humanitarian Law can be obtained from
the ICRC, 7 avenue de la Paix, 1211 Geneva (postal cheque
account No. 12-5327). Cost Sw.fr. 8.—.
ART. 1. — The International Committee of the Red Cross (ICRC) founded in Geneva in 1863 and formally recognized in the Geneva Conventions and by International Conferences of the Red Cross, shall be an independent organization having its own Statutes.

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

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

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

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

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

(a) to maintain the fundamental and permanent principles of the Red Cross, namely: impartiality, action independent of any racial, political, religious or economic considerations, the universality of the Red Cross and the equality of the National Red Cross Societies;

(b) to recognize any newly established or reconstituted National Red Cross Society which fulfils the conditions for recognition in force, and to notify other National Societies of such recognition;

¹ The International Red Cross comprises the National Red Cross Societies, the International Committee of the Red Cross and the League of Red Cross Societies. The term "National Red Cross Societies" includes the Red Crescent Societies and the Red Lion and Sun Society.
(c) to undertake the tasks incumbent on it under the Geneva Conventions, to work for the faithful application of these Conventions and to take cognizance of any complaints regarding alleged breaches of the humanitarian Conventions;

(d) to take action in its capacity as a neutral institution, especially in case of war, civil war or internal strife; to endeavour to ensure at all times that the military and civilian victims of such conflicts and of their direct results receive protection and assistance, and to serve, in humanitarian matters, as an intermediary between the parties;

(e) to contribute, in view of such conflicts, to the preparation and development of medical personnel and medical equipment, in cooperation 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.
H. Ritschard & Cie. S.A.

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ADDRESSES OF CENTRAL COMMITTEES

AFGHANISTAN — Afghan Red Crescent, Kabul.

ALBANIA — Albanian Red Cross, 35, Rruga Barrikadavet, Tirana.

ALGIERIA — Central Committee of the Algerian Red Crescent Society, 15 bis Boulevard Mohamed V, Algiers.

ARGENTINE — Argentine Red Cross, H. Virreyes 2608, Buenos Aires.

AUSTRALIA — Australian Red Cross, 122-128 Flinders Street, Melbourne, C. 1.

AUSTRIA — Austrian Red Cross, 3 Gusshausstrasse, Vienna IV.

BOLIVIA — Bolivian Red Cross, Avenida Simon-Bolivar, 1515 (Casilla 741), La Paz.

BRAZIL — Brazilian Red Cross, Praça da Cruz Vermelha 10-12, Rio de Janeiro.

BULGARIA — Bulgarian Red Cross, 1, Boul. S.S. Viruzov, Sofia.

BURMA — Burma Red Cross, 42, Strand Road, Red Cross Building, Rangoon.

BULGARIA — Bulgarian Red Cross, 1, Boul. S.S. Viruzov, Sofia.

CAMERON — Central Committee of the Cameroon Red Cross Society, rue Henry-Dessant, P.O. 631, Yaounde.

CANADA — Canadian Red Cross, 95, Wellesley Street East, Toronto 5.

CEYLON — Ceylon Red Cross, 106 Dhammapala Mawatte, Colombo VII.

CHILE — Chilean Red Cross, Avenida Santa Maria 810, Santiago de Chile.

CHINA — Chinese Red Cross Society of China, 22 Kamien Hrutig, Peking, 5.

COLOMBIA — Colombian Red Cross, Carrera 7a, 34-85 Apartado nacional 1110, Bogota D.E.

CONGO — Central Committee of the Cameroon Red Cross Society, rue Henry-Dessant, P.O. 631, Yaounde.

DENMARK — Danish Red Cross, Ny Vestergade 61, Copenhagen K.

DOMINICAN REPUBLIC — Dominican Red Cross, Calle Galvan 24, Apartado 1293, Santo Domingo.

ECUADOR — Ecuadorean Red Cross, Avenida Colombia y Eligindo 119, Quito.

ETHIOPIA — Ethiopian Red Cross, Red Cross Road No. 1, P.O. Box 195, Addis Ababa.

FINLAND — Finnish Red Cross, Tehtaankatu 1 A, Helsinki.

FRANCE — French Red Cross, 17, rue Quentin-Bauchart, Paris (16e).

GERMANY (Dem. Republic) — German Red Cross in the German Democratic Republic, Kaiserstrasse 6, Division A. 1.

GERMANY (Federal Republic) — German Red Cross in the Federal Republic of Germany, Friedrich-Engel-Platz 11, 3300 Bonn 1, Postfach (D.B.R.).

GHANA — Ghana Red Cross, P.O. Box 833, Accra.

GREAT BRITAIN — British Red Cross, 4 Great George Street, London, S.W.1.

GREECE — Hellenic Red Cross, rue Lycavittou 1, Athens 133.

GUATEMALA — Guatemalan Red Cross, Calle 8-40 zona 1, Guatemala C.A.

HAIK — Hail Red Cross, rue Père, Poitou-Paris.

HONDURAS — Honduran Red Cross, Calle Henry Dunant 514, Tegucigalpa.

HUNGARY — Hungarian Red Cross, Arany Jancso utca 31, Budapest V.

ICELAND — Icelandic Red Cross, Oldugdut 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 Ash, Tehran.

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 — Jamaican Red Cross, 76 Arnold Road, Kingston 7.

JAPAN — Japanese Red Cross, 5 Shiba Park, Minato-Ku, Tokyo.

JORDAN — Jordan Red Crescent, P.O. Box 1357, Amman.

KENYA — Kenya Red Cross Society, St Johns Gm, P.O. Box 712, Nairobi.

KOREA (Democratic Republic) — Red Cross Society of the Democratic People's Republic of Korea, Pyongyang.

KOREA (Republic) — The Republic of Korea National Red Cross, 32-3 Kao Nam San-Dong, Seoul.
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<tr>
<th>Country</th>
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<tr>
<td>LAOS</td>
<td>Laotian Red Cross, Vientiane</td>
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<td>LEBANON</td>
<td>Lebanese Red Cross, rue General Spears, Beirut</td>
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<tr>
<td>LIBERIA</td>
<td>Liberian National Red Cross, National Headquarters, Broad Street, P.O. Box 228, Monrovia</td>
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<td>LEBYA</td>
<td>Libyan Red Crescent, Berka Omar Mahkstar Street, P.O. Box 541, Benghazi</td>
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<td>LIECHTENSTEIN</td>
<td>Liechtenstein Red Cross, Vaduz</td>
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<td>LUXEMBURG</td>
<td>Luxemburg Red Cross, P. de la Ville, Luxembourg</td>
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<td>MADAGASCAR</td>
<td>Red Cross Society of Madagascar, rue Clemenceau, P.O. Box 1166, Tananarive</td>
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<td>MALAYSIA</td>
<td>Malaysian Red Cross Society, 519 John Stellfeld, Komala Lampur</td>
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<td>MEXICO</td>
<td>Mexican Red Cross, Sinaloa 20, 4th piso, Mexico 7, D.F.</td>
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<td>MONACO</td>
<td>Red Cross of Monaco, 27 Boul. de Suisse, Monte-Carlo</td>
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<td>MONGOLIA</td>
<td>Red Cross Society of the Mongolian People's Republic, Central Post Office, Post Box 537, Ulan-Bator</td>
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<td>MOROCCO</td>
<td>Moroccan Red Crescent, rue Calmette, B.P. 189, Rabat</td>
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<td>NEPAL</td>
<td>Nepal Red Cross Society, Tripures-wor, P.B. 217, Kathmandu</td>
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<td>NETHERLANDS</td>
<td>Netherlands Red Cross, 27 Prinsengracht, The Hague</td>
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<td>New Zealand Red Cross, 61 Dixon Street, P.O. Box 6973, Wellington C.2</td>
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<td>Nicaraguan Red Cross, 12 Avenida Noroeste, Managua, D.N.</td>
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<td>Red Cross Society of Niger, B.P. 366, Niamey</td>
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<td>Nigerian Red Cross Society, Eko Akete Cross, Boryt, Vaba, P.O. Box 764, Lagos</td>
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<td>Polish Red Cross, Mokotowska 14, Warsaw</td>
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<td>PORTUGAL</td>
<td>Portuguese Red Cross, General Secretaryship, Jardim 9 de Abril, 1 a 5, Lissbon 3</td>
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<tr>
<td>ROMANIA</td>
<td>Red Cross of the Romanian Socialist Republic, Strada Biserica Aniel 29, Bucharest</td>
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<tr>
<td>SALVADOR</td>
<td>Salvador Red Cross, 3a Avenida Norte y 3a Calle Fonseca 21, San Salvador</td>
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<td>SAN MARINO</td>
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<td>SAUDI ARABIA</td>
<td>Saudi Arabian Red Crescent, Riyadh</td>
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<tr>
<td>SENEGAL</td>
<td>Senegalese Red Cross Society, Bid. Franklin-Roosevelt, P.O. Box 297, Dakar</td>
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<tr>
<td>SIERRA LEONE</td>
<td>Sierra Leone Red Cross Society, 6 Liverpool Street, P.O. Box 427, Pretoria</td>
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<td>SOUTH AFRICA</td>
<td>South African Red Cross, Cor. Fruts &amp; Market Streets, P.O. Box 8726, Johannesburg</td>
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<tr>
<td>SPAIN</td>
<td>Spanish Red Cross, Eduardo Dato 16, Madrid, 10</td>
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<tr>
<td>SUDAN</td>
<td>Sudanese Red Crescent, P.O. Box 235, Khartoum</td>
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<tr>
<td>SYRIA</td>
<td>Syrian Red Crescent, 13 rue Abi-Al-Imam, Damascus</td>
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<tr>
<td>TANZANIA</td>
<td>Tanzania Red Cross Society, Upanga Road, P.O. Box 1139, Dar es Salaam</td>
</tr>
<tr>
<td>THAILAND</td>
<td>Thai Red Cross Society, King Chulalongkorn Memorial Hospital, Bangkok</td>
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<tr>
<td>TOGO</td>
<td>Togolese Red Cross Society, Avenue des Alliés 19, P.O. Box 655, Lomé</td>
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<tr>
<td>TRINIDAD AND TOBAGO</td>
<td>Trinidad and Tobago Red Cross Society, 48 Pembroke Street, P.O. Box 357, Port of Spain</td>
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<td>TURKEY</td>
<td>Turkish Red Crescent, Yenisehir, Ankara</td>
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<tr>
<td>UGANDA</td>
<td>Uganda Red Cross, 17 Jinja Road, P.O. Box 494, Kampala</td>
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<tr>
<td>UNITED ARAB REPUBLIC</td>
<td>Red Crescent Society of the United Arab Republic, 34, rue Ramses, Cairo</td>
</tr>
<tr>
<td>UPPER VOLTA</td>
<td>Upper Volta Red Cross, P.O. Box 349, Owangbongom</td>
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<tr>
<td>URUGUAY</td>
<td>Uruguayan Red Cross, Avenue 8 de Octubre, 2990, Montevideo</td>
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<td>U.S.A.</td>
<td>American National Red Cross, 17th and D Streets, N.W., Washington 6, D.C.</td>
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<tr>
<td>U.S.S.R.</td>
<td>Alliance of Red Cross and Red Crescent Societies, Tcheremushinski, J. Tcheremushinkski prospekt 5, Moscow V-16</td>
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<tr>
<td>VENEZUELA</td>
<td>Venezuelan Red Cross, Avenue Andrés Bello No. 4, Apart. 318, Caracas</td>
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<tr>
<td>VIET NAM (Democratic Republic)</td>
<td>Red Cross of the Democratic Republic of Viet Nam, 68, rue Ha-Triez, Hanoi</td>
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<td>VIET NAM (Republic)</td>
<td>Red Cross of the Republic of Viet Nam, 201, duong Hông-Thanh-Tu, No. 201, Saigon</td>
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<tr>
<td>YUGOSLAVIA</td>
<td>Yugoslav Red Cross, Simina ulica broj 19, Belgrade</td>
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<tr>
<td>ZAMBIA</td>
<td>Zambia Red Cross, P.O. Box R. W. 6 Ridgeway, Lusaka</td>
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