

## ICRC Action in Angola

by Gilbert Etienne

*Professor Etienne, member of the ICRC, was in Angola from 30 August to 13 September 1975. He was accompanied by Mr. F. Schmidt, delegate general for Africa and head of the ICRC Relief Division.*

*The purpose of their mission was to make a new assessment of the situation after three months of ICRC operations in Angola. Official contacts were established with leaders of the People's Movement for the Liberation of Angola (MPLA), the National Front for the Liberation of Angola (FNLA), the National Union for the Total Independence of Angola (UNITA), and also with the Portuguese authorities. Mr. Etienne and Mr. Schmidt were received in Luanda by the President of the MPLA and had talks with the Prime Ministers of the MPLA and UNITA, with the Portuguese High Commissioner and with officials of the regional Red Cross Society of Angola. In Carmona, they saw the Minister of the Interior and the secretary general of the FNLA. Besides attending working sessions at the ICRC delegation in Luanda, Mr. Etienne and Mr. Schmidt visited the ICRC delegations in Nova Lisboa and Carmona and went to Dalatando and Sa da Bandeira.*

*Our readers will no doubt be interested in an article written by Professor Etienne on his return to Geneva.<sup>1</sup> Elsewhere in this issue details are given of the ICRC's practical work in Angola.*

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<sup>1</sup> This article was published in *Journal de Genève*, with whose permission we reproduce it.

### *ICRC action under way*

The ICRC's largest commitment today is in Angola, with some 30 workers in the field, including 3 medico-surgical teams, administrative and logistic personnel, and delegates to the MPLA in Luanda and to the other two liberation movements in the major cities.

The ICRC is in a favourable position because it is not new to the scene in Angola. Its delegates have had cordial relations with the representatives of the three liberation movements for several years and have visited members of those movements when they were in captivity during the Portuguese regime. They have provided humanitarian assistance in the areas occupied by the guerrilla forces and observers from the three movements attended the conference on Humanitarian Law in Geneva.

A special ICRC mission in Angola in May and June had given the ICRC warning. Headquarters then devised a plan of action and launched an appeal to National Red Cross Societies and governments. By the end of September the response to that appeal had amounted to more than 3,000,000 Sw. francs.

Between July and the beginning of September, the ICRC went into action with the full support of the three liberation movements. A French Red Cross medico-surgical team set up its base in Nova Lisboa, in the zone held by UNITA; the Danish Red Cross medico-surgical team went to Dalatando (formerly Salazar) in MPLA territory; the ICRC team went to Carmona, in FNLA territory. There is an ICRC delegate in Nova Lisboa, another at Carmona and the Delegation Headquarters is in Luanda.

It soon became essential for the teams and delegates to have their own transport, for in spite of their readiness to help, the Portuguese had limited resources. At the beginning of September therefore a DC 6 bearing the markings of the International Committee of the Red Cross, and financed by the Swiss Government, began operating in Angola. It provides a shuttle service between the various centres, conveying relief goods and supplies and repatriating Angolan and Portuguese civilians. Approval to the aircraft's operation was given by the Portuguese authorities and the three liberation movements; under the agreement they may check the contents of the aircraft. More than 140 tons have

been conveyed since the start of the operations, first in Portuguese aircraft and later in the DC 6.

### *Operations*

The medical teams do not of course entirely fill the gap left by the departure of the Portuguese. Other teams will be required, particularly mobile teams to go to refugee camps and the bush.

The first visits to detainees held by the MPLA and UNITA have begun. At the same time help has been given to people blocked in a Portuguese barracks in a zone held by hostile forces. There are many civilians being held with military personnel by one of the movements and they must be removed. At the beginning of September, the ICRC sponsored the first repatriation operation, when a dozen women and children held in Luanda by the MPLA flew to Nova Lisboa, and UNITA released some 40 civilian followers of the MPLA.

During our two weeks in Angola the delegates practically never stopped working, just as they had been doing for several weeks. The simplest job becomes a task where the situation is so confused, where the Portuguese administration must be replaced by those of the different movements.

The delegates, young and motivated, have won their spurs in other theatres of war. Events in Cyprus, Bangladesh, and now Angola forge characters which the consumer society we know could hardly produce. Then there are the medical teams, isolated in the interior of the country and working under conditions which are often a hardship. Some of them are new to ICRC action, others have lived through adventures and risks in Nigeria, Indochina or the Yemen desert about which they reminisce between operations.

### *Future tasks*

For the moment (October 1975) the food situation is not too alarming. But 500,000 refugees are returning from Zaire to the northern part of Angola now in FNLA hands and feeding them will be a problem. For instance, in 1961 the 60,000 inhabitants of the area around Bembe all fled. Now, they are returning: but in the meantime, the fields have reverted to forest land which will have to be cleared and brought back into cultivation; cassava must be planted and will not be harvested

for ten or twelve months. Already, there are ominous signs that this vast area will be facing a shortage of food, for even in normal times it was not self-sufficient; now it will be difficult to move supplies because of the fighting.

In the refugee camps the effects of the worst shortages of basic supplies are being staved off by temporary expedients and a makeshift organization. In the long run, however, the situation is bound to deteriorate, as supply routes all over the country are disrupted, and transport is not readily available to bring food from the countryside to the towns and from areas containing adequate stocks to those suffering from shortages. Since we got back to Geneva (in mid-September), disquieting news about the worsening situation in certain regions has already been coming through.

There are no signs so far of epidemics, but the danger of an outbreak does certainly exist.

In conclusion, Angola needs assistance on a massive scale which cannot be provided by the ICRC alone, even if it were to expand its protection and relief programme with the help of National Red Cross Societies. The United Nations specialized agencies are studying various plans of assistance, although the chaotic situation throughout the country will make it difficult to put them into practice. It is to be hoped that timely action by the international community will forestall widespread disaster.

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