

INTERNATIONAL COMMITTEE OF THE RED CROSS

EXTERNAL ACTIVITIES

Vietnam¹

A Swiss medical team.—It will be recalled that on December 27 1965, the ICRC had offered, to the Hanoi and Saigon authorities, as well as to the National Liberation Front (NLF), to send Swiss medical teams to each of the belligerents.

The Republic of Vietnam having given a favourable answer to this proposal, a doctor-delegate, Dr Ulrich Middendorp, was charged with studying the conditions in which a medical team could work and what should be its composition. He stayed from January 30 to February 21 in South Vietnam as doctor-delegate representing the ICRC and the Swiss Red Cross. On the basis of Dr. Middendorp's detailed report, the latter stated its agreement to sending such a team to South Vietnam and to attach it to a civilian hospital.

In Saigon, the doctor-delegate immediately made contact with the Ministry of Health and the committee of the Vietnamese Red Cross and with them studied the problems which would be raised by the forthcoming arrival of the Swiss medical team in Vietnam.

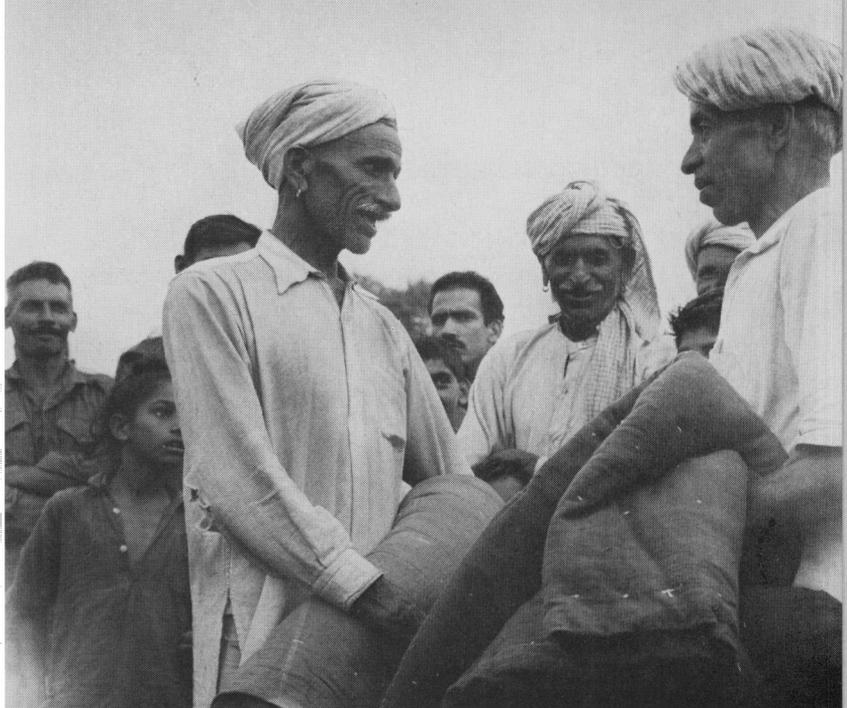
He visited several hospital centres, in particular those for the disabled, whose surgical work has been interrupted through the lack of an anaesthetist, and a home run by a Swiss sister in which there are 1,400 infirm, orphans and old people.

At Cantho the ICRC delegate visited the town hospital, the anti-tubercular centre and the local Red Cross. He then went to the Danang base whence he continued his journey to Hué and Quang-Ngai.

Basing himself on his observations, Dr. Middendorp recommends that the Swiss medical team be installed in a provincial hospital, such as at Kontum, in the central highlands. He considers that the team should be composed of eight to ten persons to be able to work

¹ *Plate.* In South Vietnam, refugees receiving Red Cross parcels.

IN INDIA



Refugees receiving Red Cross relief.

IN SOUTH-VIETNAM



in an autonomous manner under the official responsibility of a Vietnamese senior medical officer. It would replace a Philippine medical team at present in action in this area.

Medical requirements in this remote region are immense, the mountain population having been somewhat forgotten in the present medical equipment programme in Vietnam.

The Swiss team would certainly bring most valuable medical aid to the many refugees around Kontum whose conditions of existence are extremely precarious. It would also have the possibility of distributing emergency relief to them, after having won the confidence of an entire population rendered fearful by the events.

First list of prisoners of war.—The Saigon authorities have handed to the ICRC delegate the first list of 161 names of prisoners of war, held in the Republic of Vietnam. This list has been immediately forwarded to the institution's headquarters in Geneva.

As a result of a meeting which he had with Mr. Phan-van-Thinh, Secretary-General at the Ministry of Foreign Affairs in Saigon, who has recently been appointed Ambassador to Berne, Mr. André Tschiffeli, delegate of the ICRC, hopes to undertake very shortly further visits to camps and receive fresh prisoner of war lists.

Dissemination of the Geneva Conventions.—Mr. André Tschiffeli, ICRC delegate, had a meeting on February 7, 1966, with Mr. Matthews, Secretary of the American Embassy and Colonel George Shipley Prugh, legal adviser to General Westmoreland and head of the legal services of the US Army in Vietnam.

He affirmed that he had a thorough knowledge of the Geneva Conventions and was engaged in their application. The Americans have had the four Conventions translated into Vietnamese, of which 2000 copies have already been distributed.

We would recall that the Red Cross of the Republic of Vietnam in Saigon had, on its own initiative, distributed precise instructions on the application of the Geneva Conventions to its army units. It had also made official translations of the Third and Fourth Conventions which it had handed to all unit commanders. (Conventions relative to the treatment of prisoners of war and to the protection of the civilian population in time of war).

Application of the Geneva Conventions.—The Prime Minister of New Zealand, Mr. Keith Holyoake, has given the International Committee of the Red Cross the assurance that his country's forces engaged in Vietnam had received all the necessary instructions for the application of the Geneva Conventions, especially as regards the treatment of prisoners of war. The New Zealand Head of State was replying to a letter sent to him by the ICRC on January 19, 1966 asking him what the attitude of his Government was as regards the application of the Conventions in the Vietnam conflict.

Mr. Holyoake's letter states in particular: "I am able to say that the New Zealand Government has, from the beginning of its involvement in this conflict, taken the position that the humanitarian standards set out in the 1949 Geneva Conventions for the Protection of War Victims should be applied by all parties to the conflict. So far as the conduct of New Zealand forces is concerned, our personnel are always instructed to follow the principles of the Geneva Conventions in any conflict in which they are engaged, and this instruction holds good in the case of Vietnam".

India and Pakistan¹

The repatriation of Prisoners of War.—The Indian and Pakistani prisoners of war with whom, by virtue of the Geneva Conventions, the International Committee of the Red Cross had concerned itself since the beginning of their captivity, have now mostly been repatriated. In India, as in Pakistan, the delegates of the ICRC had on several occasions visited these prisoners in internment camps and military hospitals. They saw to their well-being, organized their mail and distributed large numbers of parcels to them from the Red Cross Societies of their country of origin and then exchanged meetings on the cease-fire line.

Since the end of the hostilities, the delegates had advocated the repatriation of captives, insisting especially on the repatriation of wounded prisoners without delay, in accordance with the terms of the Geneva Conventions. After the first exchange arranged in January 1966 relating to some air force personnel on both sides, it

¹ *Plate.* In India, refugees receiving Red Cross relief.

was not until February that the wounded were able to be repatriated.

The more seriously injured have been transported by air. On February 2, an Indian aircraft left New Delhi carrying 19 wounded Pakistani prisoners, three of whom were officers, accompanied by Professor Egon Wildbolz, doctor-delegate of the ICRC. Shortly afterwards, the aircraft landed at Lahore aerodrome in Pakistan, where a group of 17 Indian wounded were waiting. These in their turn, again accompanied by the ICRC's representative, were flown in the same aircraft to New Delhi, after a captivity which for some had lasted more than five months.

On the same day, in the presence of Mr. Otto Burkhart, delegate in Pakistan and Mr. Jacques Moreillon, assistant delegate in India, the reciprocal repatriation of a much larger number of prisoners took place at Husseiniwala on the frontier between the two countries. This crossing point, situated in a sector where the cease-fire line corresponds with the former international boundary was, in some measure, the door opened by the Red Cross to enable the first peaceful exchanges to be made between the two countries since the war in which they had been opposing each other. In fact, it was at Husseiniwala that the first civilian meeting, arranged on December 3, 1965, under the ICRC's auspices, took place between the representatives of the two National Red Cross Societies. Parcels for prisoners of war on both sides were then exchanged. Such meetings took place on two further occasions until, on February 2, parcels were no longer exchanged, but the prisoners themselves.

This exchange involved 583 Indian prisoners of whom 22 were officers, and 552 Pakistani, including 15 officers. Similar operations were continued throughout February and did not concern military prisoners exclusively, but also a certain number of interned civilians who had not yet had the opportunity of being repatriated.

Federal Republic of Germany

In January, Mr. Herbert Beckh, ICRC delegate, visited Bonn where he had talks with representatives of the Federal Government, as well as with leading members of the German Red Cross in the

Federal Republic of Germany, on various humanitarian problems and in particular with the reuniting of dispersed families.

We would also point out that the Berlin Section of the German Red Cross has expressed its thanks to the ICRC and its delegate for the efforts made on behalf of the temporary reunion of Berlin families during the end of year festivities.

ICRC President in the USA and in Central America

The President of the International Committee of the Red Cross, Mr. Samuel Gonard and Mr. Serge Nessi, delegate, stayed from the 7th to the 12th February 1966 in New York and Washington where they had talks with U Thant, Secretary-General of the United Nations, Mr. Dean Rusk, Secretary of State and leading members of the American Red Cross and with General Collins, the Society's President. At these meetings they discussed the development and the application of humanitarian law, questions which were the subject of important resolutions adopted by the recent International Conference of the Red Cross in Vienna. They spoke in particular of the humanitarian mission devolving on the ICRC in armed conflicts. The ICRC's representatives recalled that, during the Vietnam conflict, the ICRC has offered its good offices and services as neutral intermediary to all the parties to the conflict.

The President of the International Committee of the Red Cross, Mr. Samuel Gonard, and Mr. Serge Nessi, delegate, also visited Guatemala, after having stayed several days in Mexico, where they met notably the President of the Mexican Red Cross, Mr. Barroso Chavez, who is also Chairman of the League of Red Cross Societies. They discussed all the problems raised on the international level for the ICRC and the League. Mr. Gonard and Mr. Nessi then visited hospital establishments in two provinces, in many cases reserved for the poor which are administered and financed by the Mexican Red Cross.

Further stages of this journey in Central America will be described in a forthcoming issue of the *International Review*.