

MISCELLANEOUS

of peace, mediation, and international control of violence by political, diplomatic or military means, was something of an experiment. Several working parties examined differing aspects of peace-keeping, peace-building and peacemaking, and the ways in which international institutions could contribute to those aims.

2. *The Inter-University Colloquium on Polemology* was sponsored by the *Université catholique de Louvain* and the *Katholieke Universiteit te Leuven*. Although the papers delivered, and the discussions, revealed divergent views on the definition of polemology, there was agreement that its methods should be scientific and necessarily inter-disciplinary. Humanitarian law and Human Rights should therefore be included in the concerns of polemologists. Some speakers considered that if polemology is the study of conflicts, conflicts should be studied as obstacles to peace.

A DOCTOR'S DUTY TODAY

The Archives de l'Union médicale balkanique (vol. VI, No. 5), Bucharest, has published the text of a lecture given in Sofia, at the third international refresher course on "Current developments in medicine", by Dr. Raphael Ellenbogen, Secretary-General of the International Committee for Neutrality in Medicine. The author dealt with the application of the Geneva Conventions and with the purposes of his Committee, and it may be of interest to reproduce some extracts from the text in which special reference is made to the dissemination of the Geneva Conventions, as well as to the duties and rights of doctors in the world of today.

A summary of the basic provisions of the four Geneva Conventions of 1949 is given in the Archives at the end of the text of the conference.

In 1966, the Second International Congress on Medical Ethics (Congrès international de la morale médicale), which was held in Paris and attended by a large number of persons eminent in the

worlds of medicine and the law, sought to review some of the problems with which a doctor is constantly faced in his practice, and which often become for him matters of conscience.

Whatever the point at issue—the personal responsibility of the doctor, the collective responsibility of the medical profession, professional secrecy, the removal and grafting of organs—a host of questions may give rise to conflicting feelings and perplex the doctor as he comes face to face with the strict precepts of his professional duty, on the one hand, and with considerations of a quite different order, whether national or ideological, on the other.

It is very difficult to define everything, to codify everything. Granted that the circumstances, the conditions, the environment in which the doctor carries out his task may have a profound bearing on his deportment; yet he must never forget the fundamental rules of humanitarian medical law, which, from earliest times, have had but one purpose: to alleviate suffering and save human life.

The moral responsibility of the doctor remains inescapable regardless of the place and time at which he practises his profession.

The fantastic progress made in recent years in every sector of science and medicine, the introduction of antibiotics and new surgical techniques that vie with one another to prolong men's lives and relieve their suffering have proved disruptive factors; they transform the social system in which we live and radically alter our conceptions of social and legal responsibility, without—for all that—correspondingly adjusting the moral obligations that remain binding upon doctors.

Whilst doctors find little difficulty in peacetime in solving problems associated with observance of the rules of medical "deontology", the case is different in time of war or political upheaval: impassioned feelings or ideological links may cause some of them to forget the duties incumbent upon them in the capacity of physician.

Hence you will perhaps permit me to take up a subject that is intimately connected with the "deontological" rules from which a doctor's duties derive—that is to say, the application of the Geneva Conventions, the "International Code for the Protection of Man in Wartime" and the basis of international humanitarian medical law.

MISCELLANEOUS

The Geneva Conventions do not merely lay down the conduct to be observed towards the sick, the wounded, prisoners of war and civilians in case of war; they also prescribe the rights and duties of doctors who are called upon to give aid to victims of armed conflicts.

The duties of a doctor, being strictly humanitarian, require that he show absolute neutrality in the practice of his profession in wartime.

The Geneva Conventions have been signed and ratified by almost every country in the world. It is the International Committee of the Red Cross, a body composed exclusively of Swiss nationals, whose impartiality and devotion to humane causes are universally acknowledged and esteemed, that is entrusted with supervising the application of the Conventions and ensuring the necessary control.

During the past twenty years, however, acts of violence have increased at such a pace in the various countries beset by political upheavals or in a state of armed conflict that the International Committee of the Red Cross has not always been able to intervene effectively on behalf of the victims. Often—and this applies also to certain internal conflicts—its offers of good offices have been declined.

The complexity of international politics and the ideological division of the world at times lead belligerents to question the impartiality of those whose sole aim is to alleviate the victims' sufferings. It is still more difficult to dispel the mistrust felt by belligerents when the disturbances or conflicts are of a non-conventional nature, particularly in a case where one of the parties to a conflict declines to regard its adversary as a belligerent. Doubts concerning the impartiality of the members of a relief mission are augmented by a party's fear that the adversary will be favoured at its expense.

It was incidentally from that standpoint that the International Committee for Neutrality in Medicine was set up by Professor Charles Richet and the army Physician General Voncken. There was of course no question of establishing an organization to compete with the International Committee of the Red Cross. On the contrary, the International Committee for Neutrality in Medicine set itself

the aim of gathering together, in every country, persons capable of contributing, in co-operation with the International Committee of the Red Cross, to the dissemination and interpretation of the Geneva Conventions, as well as to the control of their application.

Specifically, the programme which the founders of the International Committee for Neutrality in Medicine hoped to carry out was outlined in the preamble to the Statutes approved by the 1959 Congress:

"The tasks which the Committee sets itself are: in peacetime, to offer its collaboration to States, to the International Committee of the Red Cross and to the League of Red Cross Societies; in wartime, to the Protecting Powers and their substitutes, to the International Committee of the Red Cross and to the Parties in conflict, with the object of satisfying itself that humanitarian rules are applied, assisting in their improvement, and ensuring respect for the neutrality of doctors in the fulfilment of their mission."

To impose respect for the neutrality of doctors and their qualified assistants is the sole means of effectively helping those who are suffering.

There is no question of claiming on behalf of doctors and their associates a privileged status within their own countries or of proposing to them any system of conscientious objection. Their humanitarian activities in no way exempt them from the obligations by which every fellow-citizen is bound.

A doctor's rights and duties in time of conflict and disturbances have, without exception, been specified in the relevant Hague Conventions and Geneva Conventions. Clearly, their mission is a strictly humanitarian one, devoid of any partisan or ideological attitude.

From this standpoint, at the 1964 International Congress on Neutrality in Medicine, I studied with Mr. Raymond de la Pradelle the conditions attaching to respect for the neutrality of doctors in the event of disturbances and conflicts. It seemed to us indispensable that in time of war or armed conflict a doctor should cease to carry out any activity beyond that of giving medical aid and care. It follows that a doctor must, in certain circumstances, renounce any activity that is not strictly medical.

MISCELLANEOUS

Unquestionably, in peacetime and in regard either to the internal affairs of his country or to international affairs, a doctor may—in isolation from his profession—overtly espouse given points of view or the cause of a given political party. But in the event that, domestically, there occurs a period of political upheavals, or, internationally, war is being waged, a doctor must make his choice:

— either to renounce his medical status; or

— to undertake to be nothing but a doctor, and to accept as the definition of neutrality in medicine the following formula: “A doctor is one who declares himself to be at the service of every man, whoever he may be, and who acknowledges no other duty than to comfort, care for, and aid his fellow-men, without distinction as to their nationality, their race, their colour, their opinions or their aims.”

A fortiori, a doctor is not called upon to stand in judgement, and his duty towards a person whom he may consider a criminal is identical with his duty towards any other person.

This principle of neutrality must first be accepted and applied by the world of medicine itself. To inspire universal respect for the doctor's neutrality, it is, above all, necessary that he himself should make every effort, in times of disturbances and conflicts, to cease to be anything but a doctor, discarding his ideological and social ties. He must look upon his profession as a ministry in the service of humanity. All men, from the highest in rank to the humblest, should be enabled to feel the highest possible respect for doctors.

It is with the competent authorities, with the civil or military hierarchy, that responsibility for making the principle of medical neutrality known and acceptable most fittingly rests.

Doctors should no longer be convicted by military tribunals for having tended the sick and the wounded, or pharmacists indicted for having supplied medicaments or bandages.

To bring effective aid to those who are suffering, the doctor has to feel himself protected. To that end, domestic legislation should shield him from any arbitrary prosecution to which he might be exposed by reason of the fulfilment of his humanitarian mission.

There is need for a “jurisdictional guarantee” (*garantie juridictionnelle*) giving full weight to the principle of the doctor’s neutrality.

Naturally, a doctor who devotes himself to such a mission must receive positive guarantees respecting his personal security. There have been too many cases where, in given circumstances, doctors have been molested, maimed or even massacred by members of an opposing party to whom they were bringing medical aid.

If it is genuinely intended to establish neutrality in medicine, it is likewise indispensable that the humanitarian principles set forth in the Hague Conventions and the Geneva Conventions should be taught and widely disseminated. It is first and foremost in the faculties and schools of medicine and the various related institutions for the training of doctors and auxiliary medical personnel that such teaching should be made compulsory.

The principles in question must be instilled in all those persons who, in whatever capacity, are called upon to apply them...

“RÉALITÉS DU MONDE NOIR ET DROITS DE L'HOMME”

This was the title to an article in Revue des droits de l'homme written by Mr. Kéba M'Baye, First President of the Senegalese Supreme Court and, incidentally, one of the experts invited by the ICRC to a panel in Geneva in February 1969. A recent issue of that review, whose important contribution to international and comparative law we have emphasized on several occasions, was devoted to an analysis of the human rights situation (Vol. II-3, Paris). Mr. M'Baye is a contributor to that number and in view of his reputation and the interest of the subject, we deem it useful to reproduce his conclusion below¹.

The States of the black races seem keen to accede to the Universal Declaration. Their constitutions contain the Declaration’s principles or refer to them. Unfortunately, practice is at variance

¹ Our translation.