

*EXTERNAL ACTIVITIES**July-August 1989***Africa****Sudan**

ICRC activities continued under the new government following President Omer Hassan el-Beshir's coup d'état on 30 June. Contact was immediately established with the new authorities who gave their permission to the ICRC to pursue its activities.

Prisoners in government hands were visited by the ICRC on 23 August in Wau and the following day in Juba. The three and five prisoners seen respectively wrote Red Cross messages. The 105 government soldiers held by rebel forces and visited in June were seen again on 24 August.

In addition, assistance activities including distributions of food, seed and farming implements or fishing tackle, as well as vaccination programmes for the local population and their livestock went on, with relative regularity in spite of the rains.

**Somalia**

The ICRC set up a surgical hospital in Berbera in order to assist people wounded by fighting in the north west of the country, which has been affected by disturbances since May 1988. The hospital, which has an initial capacity of 33 beds but can be enlarged to accommodate some 100 patients, opened its doors on 19 August and started work immediately.

**Uganda**

In spite of the precarious security situation, ICRC delegates continued their work providing food, material and medical assistance in the Soroti and Gulu regions. They also continued visiting the detention

centres in Kampala and the rest of the country and provided 1,076 detainees released on 19 August with the essentials needed to enable them to return to their homes and resume their lives.

### **Senegal/Mauritania**

With the initial emergency over the ICRC concentrated on its traditional protection and tracing activities. Delegates in both countries worked to trace missing persons, reunite families and visit prisons. In Mauritania, the latter activity took the form of a series of visits to the places of detention in the country. The visits, which were carried out in accordance with the institution's customary criteria, ended on 15 August. Work to assist people who went to Senegal from Mauritania was resumed by the UNHCR during July.

### **Mozambique**

The military situation somewhat impeded the ICRC's ability to move from place to place in the field. Delegates were nevertheless able to maintain a certain continuity in food distributions and medical activities.

The second series of visits to places of detention run by the Ministry of Security continued during the two months under review.

### **South Africa**

From 10 to 14 July, delegates visited two prisons in Transkei where they saw, in accordance with the ICRC's customary criteria, 28 prisoners and security detainees.

### **Latin America**

#### **Peru**

The authorization granted to the ICRC during its President's mission to Peru in early June enabled delegates to resume their visits to places of detention administered by the Ministry of Justice in regions under a state of emergency. Since late June, delegates have therefore resumed their visits to security detainees in the departments of Apurímac, San Martín, Huánuco and Junín.

The delegation has also been working to develop its other activities (mostly medical assistance and dissemination programmes) in regions under a state of emergency, where it has a sub-delegation in Ayacucho, an office in Abancay (department of Apurímac) and, as of 1 September, an office in Tingo María.

Finally, on 14 July, Peru ratified the Protocols additional to the Geneva Conventions. These instruments will enter into force for Peru on 14 January 1990.

## **Nicaragua**

On 26 August, the ICRC delegation carried out a general census of persons detained in the places of detention administered by the National Penitentiary System (SPN), which it visits regularly. There were a total of 1,349 prisoners in nine detention centres. In the previous census carried out in SPN prisons in late February 1988, the ICRC counted 3,398 people held for security reasons. Delegates continue to make regular visits to people held in those places in Managua and other parts of the country.

## **Asia**

### **Afghan conflict**

Fighting in Afghanistan intensified during the period under review, mainly affecting the cities, especially Kabul, where rocket attacks caused a record number of civilian victims in July. This situation was a major concern for the ICRC, which discretely approached the various parties to the conflict to make them aware that such indiscriminate attacks are a violation of fundamental humanitarian principles. There was a considerable increase in the work of the ICRC hospital in Kabul, which admitted over 200 wounded people in July. Each of its surgical teams had to work in particularly difficult conditions; within an hour after each attack, the hospital would be thronged with dozens of casualties, some very serious. The ICRC hospitals in Peshawar and Quetta, in Pakistan, also had to step up their activities.

In order to extend its activities in connection with the Afghan conflict, the ICRC opened sub-delegations in Herat and Mazar-i-Sharif in August to engage in medical, protection and tracing work. A team also left Kabul in August to carry out an initial visit to the Qalai Naw prison in the province of Bagdhis north of Herat.

At the same time, delegates based in Pakistan continued their work in various Afghan provinces. In late June, for example, a team from Peshawar spent six weeks in the Panjshir valley, north of Kabul, on the ICRC's first mission there. Their mission not only provided the delegates with new contacts but enabled them to visit prisoners in the hands of the opposition and assess medical needs related to the conflict.

### **Cambodian conflict**

While media attention was centred on talks to resolve the Cambodian conflict, acute tensions directly affecting the civilians living in camps along the border once again demonstrated how necessary the humanitarian work carried out on the spot by the ICRC and other organizations is for those people. In early July, a number of camps under the control of Democratic Kampuchea in the southern sector of the border were hit by heavy shelling. Over 10,000 people fled the camps, to which the humanitarian organizations do not have access, and gathered in a camp which had just been opened following the ICRC's request that civilians be grouped at an accessible site. Conversely, negotiations by delegates to evacuate wounded people from the area of the fighting were unsuccessful.

At the end of the month Site 8, which is also administered by Democratic Kampuchea but regularly visited by humanitarian organizations, was hit by shelling which killed or wounded several members of the civilian population. While the inhabitants fled to an evacuation site near the camp, the ICRC took the wounded to its hospital in Khao-I-Dang and the more vulnerable members of the camp's population to the Khao-I-Dang camp to await a return to normal which would allow them to go back to Site 8.

The ICRC also continued in its endeavour to provide protection for persons deprived of their freedom in connection with the conflict. Delegates recorded the identity of people—military and civilian—who had been captured in Cambodia by one or the other faction of the anti-government coalition. They were then released and took refuge in various camps along the border. ICRC representatives interviewed them individually to ask them about their wishes regarding possible repatriation or resettlement and endeavoured to fulfil those wishes. The ICRC likewise continued to be concerned about civilians who had escaped from Democratic Kampuchea camps in the southern sector of the border region and sought refuge in the Sok-Sann camp administered by the Kampuchean People's National Liberation Front (KPNLF).

Finally, the ICRC succeeded in August in organizing the reunification of a second family in Cambodia when it arranged the return there of a resident of Site 2 who wished to join her family in Phnom Penh. Though the ICRC had reunited a young man with his family in December 1988, this was the first family reunification involving someone from a camp on the border.

In addition to its activities in the field, the ICRC took advantage of the Cambodian peace conference being held in Paris to make known its position and concerns. Though not officially associated with the work of the Conference, an ICRC delegation closely followed that of its Third Commission dealing *inter alia* with the repatriation of displaced Cambodians on the border. In lobby discussions, ICRC representatives made known the institution's concern about the effects of the conflict and their humanitarian implications, and stressed the need for the Conference, in adopting a resolution, to take the humanitarian considerations entailed by a prospective repatriation of the displaced civilians into due account. The ICRC representatives spoke to this effect with a number of eminent participants, including, in chronological order, Mr. Hun Sen, Prime Minister of the State of Cambodia, Prince Sihanouk, head of the Coalition Government of Democratic Kampuchea, and Mr. Son Sann, head of the KPNLF.

## **Indonesia**

In July, ICRC delegates completed a fresh series of visits begun in June 1989 to detainees arrested following the attempted coup of 30 September 1965. They saw 52 held in 13 places of detention throughout Indonesia. During this series of visits, the ICRC was for the first time able to visit seven detainees arrested in relation to the situation in Irian Jaya.

## **Maldives**

The regional delegate based in New Delhi went to the Maldives in August to take up contact with the government of that State, which has been independent since 1968. It was the first mission by an ICRC representative to the archipelago.

## Middle East

### Lebanon

Beginning on 14 March, the civilian population of Beirut and area were subjected to indiscriminate shelling of ever-increasing violence. These clashes intensified in July and August, resulting in hundreds of civilian casualties and preventing the medical services from working properly. Deeply alarmed by the situation, the ICRC issued repeated appeals both in Beirut and in Geneva and made every possible approach, urging the belligerents to do their utmost to ensure that the basic rules of humanitarian law protecting the civilian population, the wounded and hospital establishments were respected.

The delegation in Lebanon continued its programme to assist displaced Beirut families in southern Lebanon. In addition to distributions of material assistance, work was carried out to improve sanitary facilities in public places (schools, empty warehouses, camping grounds, etc.) where these families had taken refuge. Working together with UNICEF, delegates in Beirut began distributing first-aid kits and disinfectant in mid-August to people living in bunkers which were becoming increasingly inhospitable as the days passed with no let-up in the fighting.

Medical assistance also continued. Delegates went on providing emergency medical supplies to hospitals and dispensaries throughout the country which were inundated with casualties. In addition, on 26 June and 26 July, the ICRC repatriated wounded and sick Lebanese civilians who had been transferred to France by the French authorities for medical treatment.

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