### **EXTERNAL ACTIVITIES**

(July-August 1990)

### Africa

#### Sudan

Several surveys carried out by delegates during the period under review showed that the next crops were being disastrously affected by the lack of rainfall. Certain vulnerable groups of the population (children, elderly and newly displaced persons, etc.) are already suffering from the drought. Since it is impossible for other agencies to get food to Malakal (by barge along the Nile) and Aweil (by train), the ICRC organized an airlift to supply these two points. Relief was also flown by large cargo aircraft to the town of Leer, in the area controlled by the SPLA, pending an ICRC barge service there.

Meanwhile, the other programmes set up by the ICRC (health care, hygiene and tracing activities) were continued.

# Ethiopia

Following an agreement reached in mid-June by the ICRC, the Ethiopian government and the National Society on the terms and conditions of an ICRC operation in Ethiopia to build up the existing medical facilities there, three ICRC surgical teams were dispatched to Dessie, Bahr Dar and Asmara, where they began work on 25 June. Along with their specific medical role, these teams are also responsible for training programmes to upgrade local medical staff and for improving hospital services.

#### Somalia

During the period under review, the ICRC continued to provide food for the displaced persons sheltering in the hills near Boroma. In July and August, several road convoys took over 300 tonnes of food from Berbera to Boroma and neighbouring areas.

Moreover, in co-ordination with UNHCR, the governments and National Societies of Ethiopia and Somalia and the Addis Ababa delegation, the Mogadishu delegation organized the repatriation, in several stages, of an initial group of 2,362 Ethiopian refugees living in camps in north-eastern Somalia.

Both at its headquarters in Geneva and on the spot, the ICRC showed keen concern for the repercussions that the ending of the United Nations aid programme for Ethiopian refugees in Somalia may initially have on their living conditions and safety in the places where they have found refuge.

Finally, the ICRC sub-delegation in Berbera continued its medical activities. The ICRC hospital in Berbera admitted war-wounded evacuated by air from five towns in the north-west. In addition, the delegates regularly distributed food aid to district hospitals and other institutions providing care for particularly vulnerable groups of the population (children, the elderly, etc.).

## Uganda

On 9 July, after an agreement was reached by the Ugandan government, WFP and the ICRC, the institution began distributing food aid on a massive scale to nearly 85,000 displaced persons living in half a score of camps in the Kumi area, in eastern Uganda. Beginning in early August, tens of thousands of people started leaving the camps to resettle in their native villages. The ICRC handed out seed grain to enable them to regain self-sufficiency in food.

#### Liberia

At the beginning of August, the activities conducted by the ICRC in Monrovia to protect vulnerable civilians and people in danger owing to their ethnic background were seriously hampered. During the night of 31 July to 1 August, one of the five centres opened at the end of June and placed under the protection of the Red Cross emblem was attacked by armed men. Carried out in utter disregard for the rules of humanity, the attack left hundreds of dead and wounded among the civilians who had sought refuge at the centre. Conditions were so precarious that the five ICRC delegates posted in Monrovia were no longer able to perform their tasks and left the city on 5 August.

In the areas held by armed opposition groups, the delegates twice distributed medical supplies and non-food relief after a survey to identify needs. Finally, the ICRC also set up tracing facilities to meet the needs of the many Liberian families who have found refuge in adjacent countries and been cut off by subsequent developments.

### Rwanda

From 18 June to 16 July, an ICRC team comprising one doctor and two delegates visited 16,165 detainees, in accordance with ICRC criteria, in 16 places of detention throughout the country. Following these visits, aid including medical supplies was distributed to all places of detention to which the ICRC had had access.

## Latin America

## Nicaragua

With the terms of the Toncontin accord being gradually implemented, ending a war more than ten years old, and the Contras being demobilized and resettled, the Managua delegation was able to begin scaling down its activities. However, the delegates kept track of the needs of several groups of demobilized combatants and gave *ad hoc* assistance to facilitate their resettlement. More than 2,000 displaced civilians received similar aid in the Rio Coco Arriba area.

#### **Panama**

From 2 to 7 July, an ICRC team went to three places of detention where, in accordance with ICRC criteria, they visited 55 persons detained for security reasons.

## Asia

### Sri Lanka

In view of the continued fighting between government forces and members of the LTTE (Liberation Tigers of Tamil Eelam), the ICRC stepped up its operations on behalf of the civilian population in the north.

Throughout the period under review, and with the consent of the opposition, the delegates assigned temporary neutral status to government convoys of food and medicine and escorted them to their destination in order to enable the Sri Lanka authorities to provide relief for the inhabitants of the Jaffna Peninsula. This represented a monthly contribution of 8,000 tonnes of food. Convoys of lorries, loaded in Colombo, were able to carry a portion of these supplies. At the end of

July, however, the overland route was abandoned and replaced by the sea lanes for safety reasons.

Sailing from Colombo, vessels laden with food and medicines now round the southern coast of the island and call at Trincomalee, where they take barges in tow which are required to offload the goods at Point Pedro, situated in the far north-eastern corner of the island. From there, lorries belonging to the district authorities distribute the supplies throughout the peninsula.

The main hospital on the peninsula, right next to the fort at Jaffna, was closed when fighting became concentrated around the fort. However, the ICRC managed to declare the only hospital in the area still dispensing surgery, in Manipay, to be a neutral zone and provide medical supplies to the local staff. Meanwhile, the National Society is transporting medicines to various dispensaries (some of which it runs) and to private clinics on the peninsula.

At the end of July, the delegates also proceeded to evacuate 135 foreign civilians from the Jaffna Peninsula to Colombo, where they were taken in charge by their respective embassies.

In addition, the Colombo delegation continued to visit prisons in the south during July and August. Over 17,000 persons held there in connection with the inter-Sinhalese conflict have been registered since October 1989, in 280 places of detention scattered throughout seven provinces.

At the end of August, the ICRC delegation in Sri Lanka included more than 45 delegates and a hundred or so employees recruited locally, working from the Colombo delegation, the Jaffna sub-delegation or any of the seven local offices throughout the country.

# Afghan conflict

In the wake of renewed fighting around Kabul and the shelling directly affecting the city, July and August hummed with intense medical activity. The ICRC orthopaedic centre in the capital was the scene of a tragic accident when, on 16 August, a rocket landed between the centre's two main buildings, killing two patients and one locally recruited ICRC employee. The people injured by the explosion were immediately treated at the ICRC hospital in Kabul. Despite the incident, the centre managed to resume its activities soon after.

The number of patients at the ICRC hospital in Kabul grew steadily from an average of 200 at the beginning of the period under review to 250 at the end of August. The influx of wounded was handled by renting a house near the hospital. Used as an annex, the

building houses patients who do not require intensive care, but who nevertheless cannot be treated as out-patients.

Moreover, the Kabul and Peshawar delegations alike continued to expand and adapt their casualty-evacuation facilities. Several new first-aid posts, designed to prepare the injured for transport to ICRC hospital, are about to be opened in areas of fighting and along the main roads leading to Kabul, Quetta and Peshawar.

In July, the Afghan Red Crescent officially handed over a plot of land to the ICRC to be used for its new orthopaedic centre. An agreement concerning the planned construction of five buildings was reached with the Swiss Disaster Relief Corps, which was consented to finance the project. Construction is now under way.

The ICRC's detention-related activities have expanded significantly. On 15 August, after years of negotiation and constant efforts, the institution finally received the Afghan government's preliminary authorization to visit detainees who are under the jurisdiction of the Ministry of State Security. An initial team of delegates left for Kabul at the end of August to reinforce the delegation and enable the visits to begin.

## Cambodian conflict

In October 1989, the authorities in Phnom Penh agreed in principle to the expansion of ICRC operations in the strife-ridden north-west. Various surveys of medical need carried out since January this year had determined the extent of these requirements. For safety reasons, however, the Cambodian authorities had not allowed the ICRC to establish itself permanently in the area.

On 17 August 1990, the ICRC submitted a new programme to the authorities, which gave their approval. It provides for a new logistics base to be set up in Battambang and a medical team to work at the Mongkol Borei hospital, some 10 kilometres north of Battambang near the town of Sisophon. A team comprising one delegate and two doctors left for the site from Phnom Penh on 27 August. By 30 August, the ICRC surgeon was already performing his first operation at the Mongkol Borei hospital.

#### Indonesia

As part of its programme to visit detainees in the aftermath of the attempted coup on 30 September 1965, the ICRC began a new series of visits on 9 July which it completed at the end of August. In all, 39 detainees were seen. In addition, the delegates interviewed persons

arrested more recently in connection with security matters, mainly in Irian Jaya.

The Jakarta regional delegation also organized the transfer of 21 Timorese to Portugal.

## Middle East

### **Gulf crisis**

Following the outbreak of the conflict in the Arabian-Persian Gulf between Iraq and Kuwait on 2 August 1990, the ICRC immediately reminded all parties of their obligations under the 1949 Geneva Conventions, of which they are signatories.

The ICRC was already present in Iraq at the beginning of August with 21 delegates, mainly responsible for visiting Iranian prisoners of war. The regional delegate for the Arabian Peninsula was moreover himself in Saudi Arabia.

Ever since the crisis began, the ICRC has made repeated approaches to the Iraqi authorities so as to be able to fulfil its mandate vis-à-vis the various categories of victims. At the same time, many governments have expressed concern to the ICRC over the plight of their citizens in Kuwait and Iraq. The ICRC's Central Tracing Agency in Geneva and ICRC delegations elsewhere have also received innumerable individual requests for news of relatives. By the end of the period under review, however, the ICRC was still not in a position to respond either to these requests or to other humanitarian needs arising from the crisis, and was continuing its negotiations with all the parties concerned.

Conversely, the ICRC was soon able to provide assistance for the tens of thousands of civilians leaving Iraq and flocking to the Jordanian border. Following the appeal made by the Jordanian government on 23 August, the ICRC, which had already assumed an active role since mid-August, promptly set up a relief programme for these refugees in conjunction with the Jordanian Red Crescent. Based on an on-the-spot survey conducted largely by an ICRC sanitary engineer, a first reception and first-aid centre was opened at Ruweished, some 90 kilometres from the Iraqi border, followed by a second one about 50 kilometres from the border. The centres were placed under the responsibility of the Jordanian Red Crescent; the ICRC concentrated on sanitation and water distribution, while providing support for the National Society's medical activities. The ICRC also undertook to distribute food to the refugees, should the need arise.

However these centres, set up in a desert environment, soon proved inadequate to cope with the continual flood of refugees throughout August. In the face of this predicament, the ICRC conducted a survey in late August which led to the construction of a third reception centre, near the Azraq oasis some 100 kilometres from Amman.

To transport the equipment needed for its operation in Jordan, the ICRC chartered two special aircraft which left Geneva on 25 and 31 August, each carrying 40 tonnes of supplies plus additional personnel for the delegation there.

# Iran/Iraq

At the beginning of the period under review, the ICRC was continuing intense negotiations on a plan of humanitarian action which it had submitted to Iran and Iraq in May; this plan was part of steps taken over nearly two years to bring about the repatriation or prisoners of war captured during the conflict between these two States. The month of August brought a sudden turn for the better: on the 15th, the Iraqi government initiated the repatriation of all prisoners of war held by both sides.

The ICRC, which has delegations in Iran and Iraq, was asked by both States to carry out and monitor the repatriation involving tens of thousands of prisoners of war, some of whom have spent ten years in captivity. The ICRC reiterated its criteria for such an intervention: it must be able to verify the prisoners' identity, ascertain – prior to repatriation – that each one is returning to his country of his own free will, and secure the guarantee that there will be no reprisals against prisoners not wishing to return to their native country, nor against their families. While the first repatriation was taking place at the Qasre-Shirin border post on 17 August, in the presence of delegates on either side, the ICRC was settling the practical arrangements of the remainder of the operation with Iranian and Iraqi officials.

It was also agreed that, alongside the overall repatriation, that of the wounded and sick prisoners of war would be promptly carried out by air. For this purpose, a medical team comprising one doctor as medical coordinator, two other doctors and two nurses left Geneva on 20 August for Tehran. Two doctors were already stationed in Iraq.

The ICRC also immediately dispatched additional staff to its two delegations. Between 18 and 20 August, 41 delegates were sent out, mainly from the institution's headquarters. Of these, 16 were assigned to Baghdad and the remaining 25 to Tehran (since the ICRC del-

egation in Iran was no longer visiting prisoners of war, it had been cut back to four persons, compared with 23 in Baghdad).

Beginning on 17 August, the overland repatriation proceeded at the rate of 1,000 and 3,000 prisoners per day from either side, in accordance with the arrangements agreed to by both parties. In addition, a total of approximately 2,000 prisoners of war were repatriated by air in three flights organized by the two countries' authorities. All the prisoners were seen individually, prior to their repatriation, by ICRC delegates who ascertained their desire to return home and verified their identity.

At the same time, an aeroplane specially chartered by the ICRC repatriated the wounded and sick prisoners of war. On the four return flights made by this aircraft, 327 Iraqi prisoners and 271 Iranian prisoners were repatriated between 24 and 29 August.

The repatriation programme was continuing at the end of August, by which time it had enabled a total of 21,550 Iraqi prisoners of war and 21,150 Iranian prisoners of war to be reunited with their families under the auspices of the ICRC, at the end of their captivity.

#### Lebanon

For the ICRC, the period under review was highlighted by the fortunate outcome of a drama which had seriously undermined operations in Lebanon: Emanuel Christen and Elio Erriquez, the two ICRC orthopaedists held hostage since 6 October 1989, were released on 8 and 13 August respectively (see below, p. 435).

After taking stock of the harrowing experience endured by two of its delegates for over ten months and making an in-depth analysis of the future of its humanitarian activities in Lebanon, the ICRC decided to carry on with its work in the country, which has been ravaged by 15 years of conflict. Despite this, the delegation was initially reduced in size from 18 to 6, and will be readapted on an ongoing basis as local conditions permit.

The ICRC issued a press release emphasizing that the context of its work is generally fraught with danger and explaining that its decision to stay in Lebanon is based on its assessment of the victims' needs and the help that the ICRC can and must provide, since no other organization is in a position to do so. This decision also takes into account the grave question of the security of everyone working for the ICRC in Lebanon and the safety limits that cannot be overstepped in reaching victims.

The ICRC's commitment in Lebanon calls for full recognition by all the parties involved in the conflict of the indispensable nature of its humanitarian activities, and of the need to facilitate this work and to respect and ensure respect for those conducting it.

The ICRC counts on such recognition and respect wherever it discharges the mandate to act as a neutral intermediary that has been conferred on it by the international community.

Prior to the release of its two members and the reduction of its numbers, the ICRC delegation had assumed a particularly active role in connection with the conflict which, after resuming in mid-July, continued to rage in the Iklim-el-Touffah area in southern Lebanon. At the parties' request, the ICRC appealed on 18 July for a humanitarian ceasefire, and the following day evacuated the mortal remains of 11 combatants in collaboration with the Lebanese Red Cross. As fighting went on, the ICRC was compelled to appeal once again on 29 July, so that the dead and wounded could be evacuated. It was not until 3 August, however, that Lebanese Red Cross relief workers and ICRC delegates managed to reach the scene of the fighting and begin operations. In all, 86 bodies and six wounded or ill civilians were evacuated between 3 and 5 August. In addition, Red Cross messages were delivered on this occasion.

At the same time ICRC delegates and doctors made regular rounds of the hospitals and dispensaries in South Beirut and near the Iklim-el-Touffah area, providing medical assistance where required as a result of the conflict. Food and material aid was also supplied in both Beirut and southern Lebanon to people displaced in connection with the fighting.