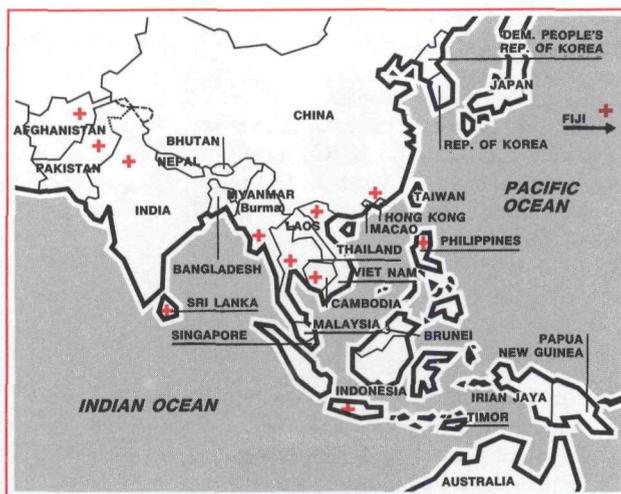


ASIA AND THE PACIFIC

ICRC action in Asia and the Pacific in 1990 adapted to the rapid succession of events in the different political contexts during the year. The ICRC was able to further develop detention-linked activities in many of the continent's countries: ICRC delegates visited security detainees in Afghanistan and Pakistan, Sri Lanka, Indonesia, and the Philippines. President Sommaruga's mission to Phnom Penh led the ICRC to hope that it would be able to visit security detainees in Cambodia. This



hope was not fulfilled in 1990. Visits should have taken place in Malaysia in 1990, but were postponed by the authorities. Visits to the remaining Vietnamese prisoners of war in China were also postponed. Discussions of the possibility of detention-related ICRC work in Viet Nam went on. As required by its mandate, the ICRC also continued to provide specific medical care for conflict victims, including war surgery, to cover their needs. It continued running its hospitals in Kabul, Peshawar, Quetta, and Khao-I-Dang (Thailand), and had teams working at the government hospitals of Pursat, Kampot and Mongkol Borei in Cambodia. Orthopaedic projects were kept up or introduced in Peshawar, Kabul, Mazar-I-Sharif, Yangon, Mandalay and Ho Chi Minh City. In the course of many missions ICRC representatives maintained and intensified negotiations with governments and National Societies in Asia and the Pacific to promote the dissemination of international humanitarian law and encourage ratification of the Geneva Conventions and/or their Additional Protocols.

At the end of 1990, the ICRC had 323 expatriate personnel (including medical and administrative personnel and staff seconded by National Societies) and more than 2,100 locally recruited employees working in six delegations in Afghanistan, Pakistan, Sri Lanka, Cambodia, Thailand and the Philippines. There were also the four regional delegations of New Delhi, Hong Kong, Hanoi and Jakarta, to which a fifth one was added later in the year in Suva.

To finance all its activities in Asia and the Pacific in 1990, the ICRC made a regional fund-raising appeal for 108,416,500 Swiss francs, which took into account donations in kind and the balance brought forward from 1989. It also made an appeal for further

funds following an extension of its budget for the operation in Cambodia/Thailand, prompted by an expansion of ICRC activities there. Total expenditure for the region in 1990 was 76,526,800 francs.

AFGHAN CONFLICT

AFGHANISTAN

Brought to Afghanistan in 1987 by its mandate to protect and assist the victims of armed conflict, the ICRC developed its activities there considerably. As a result, it opened sub-delegations in Mazar-I-Sharif and Herat in 1989 and became one of the few humanitarian organizations operating in most parts of the country with the consent of both government authorities and opposition movements.

Starting in April, with the agreement of all parties concerned, ICRC delegates were able to carry out missions regularly to opposition-held zones from government-controlled towns and areas. During such missions, they treated war-wounded and evacuated the most serious cases to the surgical hospital in Kabul. After treatment the wounded were brought back across the lines from where they had been evacuated. Another significant step forward was made in April/May, when the first of a number of "joint missions", which were to become an almost regular feature of ICRC activities, took place. This meant that one group of delegates, coming from Peshawar or Quetta in Pakistan, met up with another team, coming from Kabul, and both groups together administered emergency medical assistance to war-wounded. Several other joint missions took place throughout the year, and ICRC activities also included visits to detainees held by various opposition groups.

The number of field missions from Herat and Mazar-I-Sharif multiplied during the year.

The delegation in Kabul and the two sub-delegations had nearly 700 Afghan employees and over 100 expatriate staff, some two-thirds of whom were medical staff. Most of the medical personnel were sent from the National Societies of various European countries, Australia, Canada and New Zealand.

Activities for detainees

ICRC delegates carried out tracing visits and complete visits to detainees held under the authority of the Ministry of the Interior in Blocks 3 and 4 at Pul-i-Charkhi prison, in Kabul. Access to non-sentenced security detainees held by the Ministry of Security was granted in August, but the visits had to be suspended as they could not be carried out according to ICRC standard criteria. The ICRC immediately took measures to renegotiate access. The question was also raised, among others, during a working meeting between President Najibullah and ICRC President Sommaruga at Geneva headquarters in November, but remained unresolved.

The visits to Blocks 3 and 4 of Pul-i-Charkhi prison took place in November and December. Visits also took place to Dar-ul-Tadib detention centre in Kabul (run by the Ministry of State Security) in May, and to provincial prisons under the Ministry of the Interior in Mazar-I-Sharif in April and October and in Herat in May and November. Since delegates were permanently based at the sub-delegations in those two cities, the ICRC was able to make *ad hoc* intermediary visits to both prisons on Tracing Agency matters, as they also did twice monthly to Blocks 3 and 4 of Pul-i-Charkhi prison in the

capital. In the course of missions outside Kabul, the ICRC extended its activities by visiting the following prisons under the jurisdiction of the Ministry of the Interior for the first time: Baghlan provincial prison in Pul-i-Khumri, Charikar prison (Parwan province), Jalalabad prison (Nangarhar province), Kunduz prison (Kunduz province), Maimana prison (Faryab provincial jail) and Samangan provincial prison in Aibak. They also visited the following prisons which had already been visited in previous years: Faizabad prison, Farah prison, Quala-I-Nau prison and Shibirgan prison.

During their prison visits, the ICRC delegates regularly distributed one-off assistance to the detainees, amounting to 61,451 Swiss francs' worth of food, clothing, blankets and other items, half of which was distributed at Pul-I-Charkhi prison. All ICRC visits to Afghan government prisons took place according to customary ICRC criteria, and confidential reports on all of them were sent to the detaining authorities.

In 1990, for the first time, delegates based in government-controlled territory were able to visit people held by opposition forces. Delegates from the Mazar-I-Sharif sub-delegation visited people detained by two opposition groups in May and July.

Other visits to persons detained by the Afghan opposition were conducted from Pakistan and are listed under that heading.

Tracing Agency

Tracing delegates forwarded Red Cross messages between Kabul and Pakistan, where many people have sought refuge from the conflict, and enabled prisoners and their families, in Kabul or in different provinces, to exchange messages.

Altogether 7,968 Red Cross messages were distributed in Afghanistan in 1990.

The ICRC also brought 18 ex-detainees, including a Saudi and an Afghan national, released from Pul-i-Charkhi prison, to Peshawar. Some 266 tracing enquiries were opened, and tracing requests submitted to the Ministry of Security received the first positive replies. Ninety-eight tracing requests were solved.

Medical programme

On 6 March 1990, an attempted *coup d'état* took place, causing about 100 deaths and 300 casualties, of whom 46 were admitted to the ICRC's war surgery hospital in Kabul. Admissions to this hospital reached a record high of over 500 patients in August, when the capital came under heavy shelling and rocket attacks. The hospital started out with 50 beds in October 1988, and by the end of 1990, had increased the number to 280. March 1990 saw the arrival of a third surgical team, which, in view of rocket raids on Kabul and intensive combat around the capital, was followed by a fourth team in June.

Between January and December 1990, the ICRC hospital in Kabul admitted 4,088 patients. The medical teams carried out 8,724 surgical interventions, gave 7,189 consultations for out-patients, and collected 2,321 blood units during the reporting period.

From March 1989, with the authorization of both the Afghan and the Pakistani Ministries of Foreign Affairs, an ICRC aircraft carried out flights between Peshawar and Kabul twice weekly to keep the ICRC hospital in the capital supplied with medical supplies. As from November 1989 these flights included Herat and Mazar-I-Sharif. The aircraft, based in Kabul, was also used occasionally to

evacuate war-wounded or disabled persons to the Afghan capital. Thus, on average 15 amputees were flown from Mazar-I-Sharif and Herat to Kabul each month to be fitted with artificial limbs as part of the ICRC's rehabilitation programme.

Starting in February 1990, ICRC delegates increased their field trips from Herat and Mazar-I-Sharif, and later also from Kabul, to areas controlled by the opposition. War-wounded patients encountered during these missions were evacuated by ambulance or occasionally by air. The ICRC opened two more first-aid posts, north and south of Kabul respectively. At these posts, the wounded received immediate treatment or, if necessary, were evacuated to the surgical hospital in Kabul. Other first-aid posts were in the process of being made operational.

The ICRC's surgical dispensary in Herat gave 304 consultations for war-wounded and about 3,000 for other patients since opening on 24 October 1989.

On the basis of an agreement concluded with the Afghan Red Crescent Society in April 1989, the ICRC continued to support the 10 Afghan Red Crescent dispensaries in Kabul, where six expatriate nurses were working regularly, and dispensaries run by the Afghan Red Crescent in Herat and Mazar-I-Sharif. Where necessary, the ICRC provided medical assistance for civilian hospitals and the Afghan Red Crescent hospital in the capital, as well as in several provinces.

The orthopaedic centre in Kabul, operational since 1988, produced 3,682 pairs of crutches, 1,333 prostheses, and fitted 1,213 new patients in 1990. It also continued to train local orthopaedic technicians and physiotherapists. The construction of a larger orthopaedic centre to replace the existing one was begun, with

a view to enabling ICRC and local staff to meet growing needs. An orthopaedic field unit was set up in Mazar-I-Sharif, where each month 20 to 40 amputees were fitted or had artificial limbs repaired.

Throughout 1990, the ICRC continued its efforts to help develop the National Society. Thus, the dispensaries programme received sizeable support. The ICRC took part in reconstructing the Red Crescent administrative centre which had been damaged by a rocket. National Society dispensaries were made operational in Herat and Mazar-I-Sharif. The Red Crescent received four vehicles (two of them given by the Netherlands Red Cross) to help upgrade its logistic capacity and develop its ambulance service, and received other medical assistance.

Dissemination

Within the framework of their extended cooperation with the delegation in Pakistan, the delegates in Afghanistan focused their dissemination activities in Kabul and further afield on local ICRC employees, Afghan Red Crescent (ARCS) staff, beneficiaries of ICRC activities (patients and their families at ICRC and ARCS medical facilities in Kabul and in the field), schools and universities (international humanitarian law having been part of the syllabus since autumn 1990), representatives of government ministries, and officers and members of the government armed forces. The programme also reached combatants in opposition-controlled areas.

Dissemination work, which grew considerably in 1990, included talks and conferences for various audiences, presentation of ICRC films translated into local languages, and preparation and distribution of printed matter and other visual material.