

Remembering Hiroshima

by François Bugnion

The seventh largest city in Japan by population size, located on the mouth of the Ota River, whose muddy waters pour into the Inland Sea, Hiroshima had been almost spared by the bombing until the summer of 1945.

At dawn on 6 August 1945, four reconnaissance planes flew over the city and disappeared again without dropping any bombs. At 7:31 the sirens signaled the end of the alert. The inhabitants left their shelters and went about their business.

Three-quarters of an hour later few of them noticed an American B-29 bomber flying at a very high altitude in a cloudless sky. Once over the city, the aircraft dropped an object barely larger than a standard bomb.

Forty-three seconds later, a flash a thousand times brighter than the sun set the sky afire, immediately followed by an incandescent heat and, a few moments later, a whirlwind which swept away everything in its path.

The terrifying heat released by the atomic bomb turned the city centre into one giant furnace, which in its turn caused a violent wind to pick up. The fire spread from neighbourhood to neighbourhood before dying out from lack of fuel, around the middle of the afternoon. By that time the entire city was gone.

Everything within a radius of one kilometre from the point of explosion was obliterated, to the extent that even a building's foundations were unrecognizable. Alone, on the banks of one of the arms of the Ota River, remained the bare skeleton of the Sei Hospital over which towered the metallic frame of an enormous glass dome which was to become the symbol of the disaster.

All around, within four to five kilometres of the bomb's epicentre, houses had been reduced to rubble, trees uprooted, vehicles hurled about,

and railway lines twisted as if by some supernatural force. In all, 90% of buildings were destroyed or badly damaged. Windows were shattered as far as 27 kilometres from the point of impact.

About 80,000 people were killed in the explosion and almost as many suffered serious injuries. Many were to die in the weeks and months that followed, in terrible agony from the burns they sustained or from the effects of the radiation: internal haemorrhaging, cancer, leukaemia.¹

It was 8:15 in the morning. The world had entered a new era dominated by the nuclear threat: humanity had acquired the means to bring about its own annihilation.

Three days later another bomb destroyed the city of Nagasaki, with consequences as horrifying as in Hiroshima. Just a few hours earlier the Soviet Union had declared war on Japan and its armies had begun to invade Manchuria, where the Sino-Japanese war had begun 14 years before.

On 15 August, speaking to his people for the first time over the radio, Emperor Hirohito announced that Japan was accepting the Allied ultimatum and, on 2 September, General Torashivo Kawabe signed his country's surrender on the bridge of the battleship *USS Missouri* anchored in Tokyo Bay. The Second World War was over.

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The Japanese Red Cross Society was the first National Society to be set up in Asia. It was also the most efficient organization with the most extensive resources. The hospital it ran in Hiroshima had miraculously

¹ There are major divergences as regards the number of victims of the disaster. The report from the US Commission on the effects of strategic bombing gives the figures of 80,000 killed and as many injured (*The United States Strategic Bombing Survey, The Effects of Atomic Bombs on Hiroshima and Nagasaki*, Chairman's Office, 30 June 1946, Washington, United States Government Printing Office, 1946, p. 3). A survey carried out by the Hiroshima City Council up to 10 August 1946 arrived at the following figures, for a civil population of 320,081 inhabitants, on the day of the explosion: 118,661 killed, 30,524 seriously injured, 48,606 slightly injured, and 3,677 missing (*Hiroshima and Nagasaki, The Physical, Medical and Social Effects of the Atomic Bombings*, The Committee for the Compilation of Material Damage caused by the Atomic Bombs in Hiroshima and Nagasaki, translated by Eisei Ishikawa and David L. Swain, New York, Basic Book Publishers, 1981, p. 113).

been spared, although the doors and windows had been blown out by the blast and part of the roof had caved in. Thousands of the injured were able to receive treatment there.

The day after the disaster several medical teams from the Japanese Red Cross Society arrived in Hiroshima from neighbouring towns. Two of these teams helped the staff at the Japanese Red Cross hospital, while the others served in improvised dispensaries, set up in tents in different parts of the devastated city. A total of 792 staff members and volunteer workers from the Japanese Red Cross Society treated some 31,000 patients during the three weeks following the disaster.²

Relief operations were, however, seriously hindered by the scale of the catastrophe and the number of victims, the shortage of staff and appropriate equipment and supplies, by the incurable nature of some of the wounds and the uncertainty as to the treatment required; there were no medicines; hygiene conditions were appalling because of the heat and the lack of drinking water, causing wounds to become infected and epidemics to spread. In addition, many relief workers who came in to help the victims in the hours and days that followed were themselves affected by the radiation.

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From the start of the war, the International Committee of the Red Cross had maintained a small delegation in Japan, whose task was to assist Allied prisoners of war held in the archipelago. It came up against the greatest difficulties and, in particular, total incomprehension on the part of the military in power in Tokyo.

On 29 August an ICRC delegate, Fritz Bilfinger, was able to reach Hiroshima. He was the first neutral witness to arrive on the scene of the disaster, and the telegramme he sent the next day to the delegation conveys the full extent of the tragedy:

“Visited Hiroshima thirtieth, conditions appalling stop city wiped out, eighty percent all hospitals destroyed or seriously damaged; inspected two emergency hospitals, conditions beyond description fullstop effect of

² According to information supplied to the author by the Japanese Red Cross Society on 5 June 1995.

*bomb mysteriously serious stop many victims, apparently recovering, suddenly suffer fatal relapse due to decomposition of white blood cells and other internal injuries, now dying in great numbers stop estimated still over one hundred thousand wounded in emergency hospitals located surroundings, sadly lacking bandaging materials, medicines stop please solemnly appeal to allied high command consider immediate air-drop relief action over centre city stop required: substantial quantities bandages, surgical pads, ointments for burns, sulphamides, also blood plasma and transfusion equipment stop immediate action highly desirable, also despatch medical investigation commission stop report follows; confirm receipt”.*³

The head of the ICRC delegation, Dr Marcel Junod, immediately contacted the Japanese authorities and the Supreme Allied Command, which were starting to deploy in the archipelago.

On 8 September it was Dr Junod's turn to fly to Hiroshima, accompanied by a US commission of enquiry and Dr Tzusuki, a professor of radiology at the University of Tokyo. He brought with him 12 tonnes of medicines and dressings donated by the US authorities.

His observations fully confirmed the apocalyptic vision conveyed in Fritz Bilfinger's telegramme: the annihilation of an entire city where, “*there was nothing but silence and desolation*”, the extremely serious and, in many cases, fatal nature of the injuries from burns and radiation, the overcrowding of make-shift hospitals, the lack of equipment and medicines, the powerlessness of medical staff, also decimated and having to cope with totally new types of wounds for which there was no treatment, and finally the despondency of the survivors faced with a disaster which, like lightning, had wiped out their city.⁴

The ICRC did not wait to receive the reports from its delegates before taking a stand on the new means of mass destruction with which mankind had equipped itself. In a circular to the National Societies dated 5 September 1945 — less than one month after Hiroshima — on the end of the hostilities and the future tasks of the Red Cross, the ICRC was already questioning the lawfulness of atomic weapons and appealing to States to reach an agreement banning their use:

³ Fritz Bilfinger, telegramme dated 30 August 1945, copy, ICRC Archives, file No. G. 8/76.

⁴ Dr Marcel Junod, *The Hiroshima Disaster*, extract from the *International Review of the Red Cross*, September-October and November-December 1982.

“War — which remains an anomaly in a civilized world — has undoubtedly become so devastating and universal, amidst the web of conflicting interests on the various continents, that every thought and every effort ought to be directed first and foremost at making it impossible. But the Red Cross should nonetheless continue, of necessity, its traditional activity in the field of human rights, which is to safeguard the requirements of humanity in times of war. The apparent untimeliness of this task, when peace appears finally to have returned, must not distract the Red Cross from this essential duty. The greater the destructive power of war, the greater the necessity — in protest against this reversal of values — to spread the light of humanity, no matter how small, into the infinite darkness.

One may wonder, however, [...] whether the latest developments in warfare technology still leave room, in international law, for any sound, valid order. The First World War already, and even more so the disasters of the past six years, have shown that the conditions which enabled international law to find its traditional expression in the Geneva and Hague Conventions have undergone profound changes. It is primarily obvious that, owing to the progress in aviation and the increased impact of bombing, the distinctions established so far in terms of the categories of individuals who ought to receive special protection — particularly, in the case of civilians, protection from the armed forces — have become practically inapplicable. The development of means of warfare and, therefore, of war itself, has been rendered all the more lethal by the use of discoveries in atomic physics as a weapon of war of unprecedented effectiveness.

It would be pointless to anticipate the future of this new weapon, or even to express the hope that the Powers might give it up entirely. Will they at least want to keep it in reserve, so to speak, in a lasting, secure way, as an ultimate guarantee against war and as a means to safeguard a balanced order? Such a hope is perhaps not entirely vain as, during the past six years of fighting, there has been no use of certain toxic or bacteriological weapons banned by the Powers in 1925. Let us remember this fact of a period which has seen so many violations of the law and so many reprisals.”⁵

⁵ “La fin des hostilités et les tâches futures de la Croix-Rouge” (The end of the fighting and the future tasks of the Red Cross), 370th Circular to the Central Committees, 5 September 1945, *Revue internationale de la Croix-Rouge (RICR)*, No. 321, September 1945, pp. 657-662, *ad*, pp. 659-660. The ICRC was to return to this issue in an appeal on 5 April 1950, entitled “Armes atomiques et armes aveugles” (Atomic weapons and non-directed weapons), *RICR*, No. 376, April 1950, pp. 251-255.

The ICRC's concerns were those of the entire Red Cross: in a resolution adopted unanimously, the Seventeenth International Red Cross Conference, meeting in Stockholm in August 1948, requested the States "*solemnly to undertake to prohibit absolutely all recourse to [non-directed weapons] and to the use of atomic energy or any similar force for purposes of warfare.*"⁶

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Fifty years after Hiroshima, the States have still not managed to come to an agreement on banning nuclear weapons, which remain the cornerstone of the defence strategy of the Powers possessing them, in particular the five permanent members of the Security Council.

However, despite the very profound crises which marked the Cold War, nuclear weapons have never been used since Hiroshima and Nagasaki. No doubt the example of the destruction of the two Japanese cities, and the conviction that the Nuclear Powers on both sides had the means of mutual destruction, were a deterrent sufficient to prevent any recourse to these monstrous weapons.

On the other hand, during the 45 years that elapsed between the end of the Second World War and the destruction of the Berlin Wall, humanity lived under the constant threat of nuclear arsenals capable of destroying all human life on earth. This remained an implicit threat for long periods of time but was openly flourished in moments of crisis, notably during the Suez crisis (1956), the Arab-Israeli war in October 1973, and in particular the Cuban missile crisis in October 1962.

This threat abated with the end of the Cold War. But despite the recent renewal of the Treaty on the Non-Proliferation of Nuclear Weapons the risk of proliferation has increased since the break-up of the USSR. Several States make no secret of their ambition to acquire nuclear weapons, and the vigilance which the Great Powers exercised for more than 40 years has slackened off since the end of the Cold War. So, although the threat of full-scale nuclear war has now receded, the

⁶ Resolution XXIV, *Seventeenth International Red Cross Conference, Stockholm, 1948.*

danger of proliferation of nuclear weapons remains greater than ever. This is undoubtedly the most serious threat currently hanging over humanity.

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