

MISCELLANEOUS

INTERNATIONAL ASSISTANCE IN DISASTERS

*Mr. Guy Genot has published an interesting and well-documented study of the main problems in providing assistance in cases of natural or man-made disasters, in the journal *Studia diplomatica* (Brussels, 1976, No. 3). Man-made disasters are usually due to armed conflicts and their aftermaths, but they may also have other causes, such as the deficiencies of authorities, mistakes or construction errors.*

In the first part of his work, Mr. Genot summarizes the characteristics and general effects of different types of disaster. In the second part, he discusses the structures and resources of the international community for dealing with all kinds of disasters. He then considers the principal limitations and defects in the international system. He devotes the fourth part to a critical examination of some of the various solutions proposed to overcome the limitations and correct the defects.

In a chapter devoted to those who supply and support international emergency actions, Mr. Genot discusses in particular the work of the Red Cross, including the League, the ICRC and the National Societies, as well as governmental organizations and the specialized agencies of the United Nations. Among the various responsibilities and duties established by the international community for providing relief to disaster-stricken regions, he refers to certain articles in the Fourth Geneva Conventions and the additional Protocols, proposed by the ICRC, which are on the agenda of the Diplomatic Conference scheduled to meet next spring for its fourth session. He cites a resolution by the twenty-first International Conference of the Red Cross concerning the principles and rules governing Red Cross relief in disasters. Mr. Genot concludes with an appeal to the conscience of humanity, pointing out that in this field the real problems are not only national ones, but go beyond all State frontiers:

In defining the subject, we have touched upon a few related questions which should be kept in mind at all times when considering other

matters, namely, relief planning at national level, foreseeing disasters and providing relief after disasters. We have then described briefly the characteristics and effects of natural disasters and insisted on the important distinction between natural disasters and man-made disasters. There follows a list of the agencies for international emergency aid, grouped under headings; voluntary assistance, bilateral aid, plurilateral aid, multilateral aid. Each time we have tried to sketch the main outline of the organization and the ways and means of action within each of these modes of assistance.

We have thus been able to see that the States, while pursuing a policy of assistance on their own account, have nevertheless set up within the United Nations an aid scheme headed by a co-ordinating office; and the National Red Cross Societies, statutory—albeit autonomous auxiliaries— of the public authorities, are grouped together in a League which co-ordinates its activities with the United Nations and which, moreover, backs up an International Committee whose competence is everywhere recognized in the event of armed conflict. Onto this intergovernmental and paragovernmental system are grafted a multitude of voluntary organizations with different means of action, the bulk of which is by no means negligible.

Even so, the efficiency of this system set up by the international community is found to be subject to significant constraints, some of which—legal, material, and factual—we have mentioned. Insofar as an answer to them existed, could it be thought that they were deficiencies in the system rather than inevitable limitations? In any case, it appeared that concerted action by the States, assisted by the other international aid agencies, would be able to remove some of those constraints within a relatively short time. Nevertheless, the question remains whether it is not time for some of the most favoured nations to modify the aims of their aid policy in a direction which some would describe as more altruistic. Yet the fact should be faced that this is only one aspect, and a limited one, of organizing relations among all the States from the standpoint of general guiding principles, not only between the developing and the well-endowed countries but also within these two categories.

These considerations seem to demonstrate that if any fundamental improvements to the system were possible, they would have to be made at a level quite different from the organization and methods currently in use. The latter have shown their potential efficiency, at least.

There should therefore be no question of rethinking their principles but of strengthening them, essentially with regard to financial resources.

The real problems—national sovereignty, the nature of international relations—go beyond the confines of any State, however large, taken in isolation.

In the final analysis, it is from the degree of maturity attained by the international community, from the convergence of genuine interests of the States and, no doubt, also from a certain humane philosophy transcending economic and ideological interests, that hope may be derived for a solution to these problems and, in consequence, to the difficulties encountered by international emergency aid. The question is not academic. Too many victims, alas, can testify to that.

THE STORY OF BLINDNESS PREVENTION

We mentioned in our April 1976 issue that the theme chosen in 1976 for World Health Day was "Foresight Prevents Blindness". In this connection, WHO published "The Story of Blindness Prevention" by John Bland. Excerpts from this article are given below :

The earliest medical records known to us, derived from the ancient river cultures of Mesopotamia, show that even 5000 years ago medical care for the eyes was a speciality in its own right. The Hammurabian Code, discovered in 1902 by archaeologists working at Susa, itemized Sumerian Laws from about 3000 B.C. which included an indication that eye surgery must have been as perilous for the surgeon as for the patient. A surgeon was forbidden to charge more than 10 sheckels of silver for a successful eye operation; but if the operation failed, the surgeon would have his hands chopped off.

A papyrus discovered at Thebes, the ancient capital of Egypt, names 20 eye diseases, and the Greek historian Herodotus, who visited Egypt in the fifth century B.C., met doctors there who specialized in ophthalmology because of the high incidence of blinding diseases.