EXTERNAL ACTIVITIES

Nigeria

The relief action undertaken in Nigeria and the secessionist province (Biafra) by the ICRC continues and the International Review gives below information available at the end of April 1969.

Nigeria.—On territory overrun more than six months ago by federal troops, the urgency of relief action is diminishing; the incidence of under-nourishment is declining.

But there are still two major causes of concern: the annual period of scarcity and the need to help populations in hiding in the bush.

The ICRC medico-social teams, whilst continuing to provide treatment and foodstuffs, are doing everything they can to assist the agricultural population to put farming back on its feet. Corn, yam and bean seeds to a value of Sw. fr. 750,000 have been distributed.

In addition, the re-opening of more than thirty schools permits displaced persons to re-assemble bit by bit and resume work on the land.

Some imported products such as flour, “bulgur” (a cereal) and CSM (corn, soya, milk) not being the normal diet, the population is being taught how to use them to the best advantage. Bread baking is being taught in almost every village and in camps supplied by the Red Cross.

ICRC assistance must therefore continue, even if only for the many refugees who have not yet been able to return to their homes and are still completely dependent.

All these measures require even greater care as the rainy season, from May to the beginning of July, produces no harvest.

Distribution of food to about a million people a week continues. In the first weeks of April, 782 tons of food were distributed and 32,000 people received medical attention. During the same period
no new smallpox cases were reported, but there was a slight increase in measles and whooping cough cases.

The number of persons whose work in Nigeria is co-ordinated by the ICRC is about a thousand Nigerians and 255 foreigners.

**Secessionist territory (Biafra).—**Due to military events, the ICRC delegation’s headquarters was moved in the last few days of April from Umuahia, the Biafran administrative capital, to Umuowa in the eastern part of the province. This move brings it nearer to the centre of its relief operations, the Uli airstrip, stores, transport depot and medical supervision centre.

According to the present head of the ICRC delegation in Biafra when he was last in Geneva, some 3.5 million meals a week were distributed to about a million children, expectant mothers and persons suffering from deficiency ailments and starvation.

This is based on the capacity of the airlifts. As soon as the relief supplies are discharged from the aircraft, they are forwarded to the eleven main distribution centres run by ICRC teams comprising a physician in charge, an administrator, a specialist in transport and another in nutrition, helped by local voluntary workers.

From 25 to 75 feeding centres depend on each of these main distribution centres. They employ local personnel under the responsibility of the ICRC teams at the main centres. The area covered by each team is worked out in agreement with other charitable organisations, taking into account facilities of access and rational relief distribution throughout the country.

The medico-social teams plan distribution according to the needs of the people. It is essential that the best use be made of the supplies which are completely dependent on the two airlifts. In spite of the efforts of the Biafran authorities to improve the quality of the soil, protein and carbo-hydrate requirements are far from being met.

From the Uli landing strip the supplies are sent to eleven main depots, from where they are distributed to the 500 feeding centres operated by the ICRC throughout the country. Co-operation by locally recruited staff is important. The relief action has brought about a reduction in under-nourishment.

The measles and smallpox vaccination campaign which began towards the end of 1968 is continuing, thanks to the close co-opera-
tion of the ICRC, the Churches, USAID, UNICEF, OXFAM and other organizations. The Ministry of Health is also very co-operative. By 19 April 551,838 children had been inoculated against measles and 1,403,000 had been vaccinated against smallpox.

The ICRC will shortly delegate a team of three experts in agriculture and economics. On completion of their mission they will report to Mr. August Lindt, ICRC Commissioner General for West Africa.

We would add that on 24 April, Mr. Lindt made the following statement on the food situation in the regions affected by the Nigeria-Biafra war;

"In territory under federal control the danger of famine has now been eliminated. In Biafra, on the other hand, in spite of the improvement in the regions where the ICRC and the Churches are at work, there are still large groups of the population which cannot be reached and there is great hardship. The food situation in Biafra is becoming more and more critical and will deteriorate even further in the months preceding the harvest in September. There are signs of general mal-nutrition and a disturbing increase in tuberculosis."

It would not be possible, without "Operation INALWA" (International Airlift West Africa) to supply even part of the population's needs. The airlifts only operate by night and under difficult conditions. In spite of negotiations with a view to arranging transport overland or by waterway, the belligerents have reached no agreement on this subject.

The ICRC's fleet of aircraft continues flying from Santa Isabel (Equatorial Guinea Republic) and from Cotonou (Dahomey). Of the four DC-7's based on Santa Isabel which were provided by the Swedish Red Cross, only three are authorized to fly, At Cotonou there are six planes. A "Transall" which has returned to Europe for overhaul has been replaced by an Icelandic DC-6 chartered by the ICRC.

An average of 15 to 18 flights each night land 170-200 tons in Biafra. To mention but one example, a DC-7B, which the Swedish Red Cross made available to the International Committee completed five return flights between Santa Isabel and Uli on the night of 17 April. This record performance was made possible by the
perfection of flying technique and co-ordination of work on the ground to ensure fast turn-round. Flying time alone is 50-60 minutes each way.

In all, twenty flights to Biafra were made on the night of 17/18 April by the aircraft on the ICRC airlifts — eight from Cotonou and twelve from Santa Isabel — with a total payload of 216 tons of relief supplies.

From 1-28 April, 412 flights (228 in March) were carried out, bringing the total of flights since the operation began to 1,573.

Rhodesia

Mr. Paul Züger, delegate of the International Committee, Dr. François Vulliet and Mr. G. C. Senn, adviser to the ICRC in central and southern Africa, have begun a new tour of detention centres in Rhodesia, an activity traditionally undertaken by the ICRC for the benefit of detainees.

For several years, with the full agreement of the Rhodesian authorities, Mr. Senn has been visiting political detainees in prisons and internment camps.

Bolivia

Following the negotiations undertaken by Miss M. Duvillard, member of the ICRC, when she recently visited the Bolivian Red Cross, the military authorities permitted a visit to six political detainees imprisoned at Camiri.

Accompanied by Dr. Celso Rossell Santa Cruz, President of the National Red Cross, Miss Duvillard talked in private with these detainees, among whom was the French writer and journalist Régis Debray, sentenced by a military court at Camiri to 30 years imprisonment.

Middle East

Families Re-united. — Another family reunion operation took place on 27 March 1969 in the Israeli occupied Syrian territory of
the Golan Plateau East of Lake Tiberias. Eighty-seven persons displaced by the June 1967 conflict were repatriated. Seventy-five of them came from near Damascus and twelve from the Lebanon.

This was the fourth such operation, in March, for the re-uniting of families under ICRC auspices with permission from the Israeli authorities. During the month a total of 250 people returned to their own villages.

A further operation of this nature took place on 29 April at El Qantara, in the programme of family integrations organized and supervised by the ICRC delegations in Egypt and Israel.

Visits to Hospitals. — The ICRC has recently sent to the Jordanian and Israeli authorities copies of the reports issued by its delegates on their visits to ten government and thirteen private hospitals on the West bank of the Jordan.

Aden

A new Surgical Team. — Mr. André Rochat, head of the ICRC delegation in the Arabian peninsula, was received on 10 April by the Ministers of Health and of the Interior in Aden.

He then went to Mukallah, capital of the Hadhramaut, in order to make arrangements for the settling in of the ICRC surgical team which arrived in Aden on 16 April and was accompanied by the ICRC delegate to where it was to work. This new team comprises Professor Walter Hess, surgeon, and Miss Gabrielle Péclat, anaesthetist.

Further visits to detainees. — During his recent talks with the authorities, Mr. Rochat obtained permission to undertake a further visit to political detainees in Aden.

Yemen

Medical Supplies to Sanaa. — The Rumanian Red Cross has just contributed a large donation of medical supplies and clothing to the ICRC’s action in Sanaa.
Mr. Gallopin, ICRC member and Director General, is received by the Japanese Prime Minister, Mr. Sato. (Centre, Mrs. Gallopin; left Mr. Kimura, Deputy Chief Cabinet Secretary).

Japan

Mr. Gallopin presented with the Japanese Red Cross Gold Order of Merit by Princess Hitachi. (In background, the National Society President, Mr. Azuma, and Mrs. Azuma; Left, Mr. Tokugawa, Attaché, Foreign Relations Dept. of the Red Cross).
Cambodia: With other leading members of the Cambodian Red Cross, Princess Monique Sihanouk, President, receives Mr. and Mrs. Gallopin (centre right, Princess Sihanouk; with back to camera, Mr. Durand, ICRC delegate general for Asia).

Laos: Distribution by the Lao Red Cross of blankets and mosquito netting in a refugee centre.
It should be recalled that in December 1968, the ICRC received from the Bulgarian Red Cross medical supplies which were immediately forwarded by air, in view of the severely felt need in Sanaa. The German Red Cross in the Democratic Republic of Germany, for its part, sent at the beginning of the year 56 cases of medicines and clothing.

These various donations have made it possible to cover the lack of medical supplies which the ICRC had brought to the attention of a number of National Societies.

**Medical Mission in North Yemen.** — ICRC medical action in North Yemen continues, practical arrangements having been changed to suit circumstances.

The settling in of a medical team was planned at Uqhd; it will instead go to Bir-Khadra, mid-way between Najran and Uqhd. Dr. Willy Rieben left Geneva on 29 March for Najran, to head the team.

**Laos**

As we mentioned in a previous number, the Lao Red Cross, in close co-operation with the delegate of the ICRC in Vientiane, regularly continued to distribute relief to displaced persons, who, having fled the fighting areas, had taken refuge in the Mekong basin, mainly in the northern provinces.1

On the Laotian New Year's Day (9 April) the Womens' Association of the Lao Red Cross, presided over by Dr. Maniso Abhay, distributed parcels to the civilian and military wounded and sick in four hospitals and an infirmary at Vientiane. Donations were also made to four orphanages. This action, which was attended by Dr. Jürg Baer, ICRC delegate in Laos, was made possible by locally collected contributions.

On 11 April Dr. Baer delivered a quantity of blood plasma to the hospital at Luang-Prabang, the royal capital. He then went to

1 *Plate.—Distribution by the Lao Red Cross of blankets and mosquito nets in the refugee centres.*
Houei-Sai at the confines of Burma, Laos and Thailand, in order to participate in the Lao Red Cross distribution to refugees from fighting areas. He delivered blood plasma, medicaments and multivitamins to the province's two hospitals on which civilian and military wounded and sick, mostly of the Yao, Meo and Kha tribes, converge every day.

**A mission in the Far East**

Mr. Roger Gallopin, member and Director-General of the International Committee of the Red Cross, has returned from a month in the Far East. He had been invited to visit Japan as the guest of the Japanese Red Cross and he saw for himself that Society's considerable development in various actions on a national scale, such as relief operations in natural disaster, administration of many hospitals throughout the country, nursing schools, etc.

He was received in audience by the Emperor and Empress, who displayed the active interest which the Japanese sovereign has always shown in Red Cross work in general. It is 35 years since the Empress Shōken gave her name to a relief foundation for the subsidizing of developing National Societies, and which was financed by successive donations from the Imperial Family. In the course of discussions with Prime Minister Sato and several members of the Japanese government, as well as with the National Society's President, Mr. Azuma, and other leading members, Mr. Gallopin reviewed various subjects connected with Red Cross action at the international level, the preparation and programme for the forthcoming Istanbul conference and the more specific matter of Koreans residing in Japan who wish to return to their own country. He was presented by Princess Hitachi with the Japanese Red Cross Society's Golden Order of Merit.

From Japan Mr. Gallopin went to Cambodia, where he was received by Mrs. Tip Mâm, the Minister of Health, Social Welfare and Labour, on behalf of the Head of State, and by Princess Monique

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1 *Plate.*—Mr. Gallopin received by the Japanese Prime Minister.

2 *Plate.*—He is presented with a Japanese Red Cross decoration.
Sihanouk, President of the Cambodian Red Cross. This Society's work has been considerably increased recently as a result of the war in Vietnam which gives rise to a flow of refugees into Cambodia and to civilian victims of air warfare operations over border regions.

When in Phnom-Penh, Mr. Gallopin convened a meeting of ICRC delegates in South-East Asia in order to enquire personally into ICRC operations, particularly in Vietnam and Laos. His planned visit to the Red Cross of the Democratic Republic of Vietnam at Hanoi, from Cambodia, had to be called off as he was unable to obtain an entry visa in time.

Before returning to Europe, Mr. Gallopin went to Indonesia where, in Djakarta, he was welcomed by Mrs. Hutasoit, First Vice-President of the Indonesian Red Cross. This Society, with a territory equal in size to Europe, assists the victims of natural disasters, such as floods, volcano eruptions and earthquakes, which occur almost daily in one region of the country or another. He was received by Dr. Tambunan, Minister of Social Welfare, Mr. Adam Malik, Minister of Foreign Affairs, and other members of the government. With Mr. Malik he discussed the plight of persons arrested as dangers to State security. Whilst the Minister stressed that the government considered this to be an internal affair of the State, he informed Mr. Gallopin that he would supply the ICRC with details on this subject.

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IN GENEVA

New Participation in the Geneva Conventions

In its number of December 1968, the International Review stated that 122 States were parties to the Geneva Conventions of August 12, 1949.

The International Committee of the Red Cross has now received from the Federal Political Department in Berne a communication

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1 Plate.—Cambodia: Mr. and Mrs. Gallopin are received by Princess Sihanouk.