

Zeitschrift: Annual report / International Committee of the Red Cross
Herausgeber: International Committee of the Red Cross
Band: - (1968)

Rubrik: Arabian Peninsula

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messages between the prisoners and their relatives abroad; he was also able to send them parcels and medicaments.

In Syria, the ICRC maintained contact with the three Jewish communities in Damascus, Aleppo and Kamichlie, consisting entirely of Syrian nationals.

5. ARABIAN PENINSULA

North Yemen

In 1968, ICRC action, in this part of the Yemen under Royalist control, was mainly medical assistance to the wounded and the sick. This was because, in December 1967, the resumption of hostilities between Royalist and Republic forces in the southern part of the Jauf desert brought in its wake a sudden increase in the number of wounded. As most of them could not be moved, the ICRC sent a medical team to Jihanah near the areas where fighting was going on.

In view of the extent of the needs reported by its delegates, the ICRC decided in January 1968 to step up its action on Royalist territory by establishing a small surgical unit near the front. However, changes in the military situation and technical difficulties were to stand in the way of this project.

On March 21, the Jihanah medical post was bombed for the first time. There were no ICRC personnel among the casualties, but two Yemeni guards were seriously wounded. In addition, the stock of medicaments, foodstuffs and fuel was completely destroyed.

In April, the medical team split into two groups and started a second field post with the intention of converting a cave into an operating theatre. The scheme had to be abandoned as the site chosen was bombed on May 21.

At the end of June the medical personnel could not be relieved as the country between the Najran base and Jihanah was temporarily in the hands of dissident tribes. The two surgeons and one of the male nurses in the relief team were then transferred to Aden where they took over from the ICRC surgical team then working in that

town. One of the medical students was transferred to the Najran dispensary while the second, together with a male nurse, restarted a former ICRC medical post at Omahra.

As soon as the situation permitted, at the beginning of October, the ICRC resumed its medical activity at Jihanah.

By the end of the year, the ICRC team in Royalist Yemen consisted of 2 surgeons, an anaesthetist and 3 male nurses. On an average they treated each day 60 to 70 post operation inmates, 20 to 30 medical cases and performed about 20 operations. In a by no means suitable building they hospitalized the wounded and ran a medical dispensary. Surgical equipment was scant, but they managed to carry out emergency operations.

Although every precautionary measure has been taken, working conditions are still difficult and hazardous. Throughout the year, the team was in constant daily radio contact with the Najran base, the general delegation at Djeddah and the ICRC in Geneva.

Arab Republic of the Yemen

The resumption of hostilities between the Royalist and the Republican Forces led to a critical situation in Sanaa. In January 1968, the heavy fighting around the capital and the bombardments on the town caused many victims among the civilian population.

In view of the deteriorating situation, the ICRC launched a pressing appeal to belligerents to respect the basic principles of the Geneva Conventions.

Medical Assistance.—At the same time, the Government of the Yemen Arab Republic asked the ICRC for help. The shortage of personnel as a result of events had made it impossible to provide wounded with hospital treatment.

The ICRC conveyed this appeal to ten National Red Cross Societies, most of which declared their willingness to provide surgical teams.

Concomitantly, the Committee delegated Dr. Middendorp to examine the situation on the spot. On his return, he confirmed the need for medical assistance but he also pointed out that the military situation in the region of Sanaa made it impossible to guarantee

the safety of surgical teams; his attempts to obtain agreement to the neutralization of the town's largest hospital, under ICRC responsibility, were stonewalled by the government's refusal.

The ICRC therefore decided for the time being not to send the teams but it asked interested National Societies to despatch emergency medical supplies to Sanaa. Several of them—particularly those of Bulgaria, the Democratic Republic of Germany and the USSR—sent large consignments to the Sanaa hospitals either direct or through the ICRC.

The ICRC itself also sent a number of consignments, including ten surgical kits and crutches.

At the beginning of April the situation showed signs of improving considerably and the ICRC considered it could comply with the request of the government of the Arab Republic of the Yemen. After informing the National Societies concerned of the improved situation, it requested them to send to Sanaa the surgical teams they had declared themselves willing to supply.

The Red Cross Societies of the Democratic Republic of Germany and of Czechoslovakia each delegated a surgeon. These two doctors, after operating in the hospital on war wounded, were replaced at the beginning of July by a Hungarian Red Cross team, which was still working in Sanaa at the end of 1968.

War Disabled.—In May, the Yemen Republic Minister of Health asked the ICRC to help the 150 or so war wounded in the country. The Committee sent Dr. Middendorp to Sanaa to examine the disabled cases and to draw up a programme of assistance.

In agreement with the authorities concerned Dr. Middendorp proposed the setting up in Sanaa of an artificial limb workshop by two orthopaedic technicians whose task would be to fit the disabled and train Yemen apprentices to take over operation of the workshop.

The ICRC was prepared to organize this action which should have lasted for four to six months. It appealed to National Societies in order to find the necessary technicians and equipment, but the National Societies, unfortunately, were unable to supply the hoped for help. The project has not been abandoned however and the ICRC is seeking ways and means of putting it into effect.

Reuniting of families.—In May, the ICRC organized the evacuation from the Yemen of 75 members of the Yemen Royal Family. These persons had been interned in Sanaa and Taiz since 1962 when hostilities first broke out.

This action, undertaken at the request of the Republican authorities, necessitated protracted negotiations with the authorities of the countries concerned. It was completed on 7 September.

Relief action.—After the renewed outbreak of fighting around Sanaa in October, the ICRC organized an emergency relief action for needy children in the capital. It made use of a Norwegian aircraft which had been taking part in the Biafra airlift to take from Geneva to Sanaa, on 12 November 1968, seven tons of milk and two tons of cheese donated by the Swiss Government. The ICRC delegates took charge of the goods and arranged distribution to the maternity hospital, children in hospital, three primary schools with 4,200 children, and the tuberculosis ward of the main hospital.

At the end of the year, the ICRC despatched further dairy products by sea, in order to keep the relief action going.

South Arabia

ADEN

Medical assistance.—In November 1967, on the eve of the independence of the People's Republic of South Yemen, Aden was the scene of serious disturbances. Whilst the number of wounded increased, the hospitals, following the departure of the British Forces, were suddenly devoid of personnel. The situation was particularly alarming as regards surgery, since there remained only one surgeon for 500 hospital patients, half of whom were surgery cases. At the request of the local authorities (British and Yemeni) the ICRC sent out two successive surgical teams, recruited in Switzerland.

The new Government found it impossible to set up its own health services and the ICRC decided to continue its emergency action. In order to relieve its medical personnel, it appealed to National Societies. The Rumanian and Bulgarian Red Cross

Societies each made available two surgeons who operated in Aden until the end of May.

By that time, the ICRC considered that the situation was no longer an emergency but was one which required long term technical assistance. In order, therefore, to discontinue its emergency action, it requested the UN Specialised Agencies and the Government of the People's Republic of South Yemen to make arrangements which would permit the withdrawal of its surgical team.

However, nothing having been done, and in view of the persistent disturbances and lack of medical personnel, the ICRC had finally to continue its surgical mission, which it was able to do beyond the end of 1968 thanks to the doctors recruited by the Rumanian and Bulgarian Red Cross Societies. The WHO, incidentally, agreed to refund the ICRC the expense incurred during the last quarter of 1968.

Concurrently with its surgical mission, the ICRC supplied the Aden hospital's emergency medical requirements. The Rumanian Red Cross, just before the end of the year, also sent ten cases of medical and surgical supplies.

Activity for the benefit of Detainees.—Following the repeated negotiations undertaken by Mr. Rochat, the Head of the ICRC mission, the Aden delegation was authorized to resume its work for the benefit of detainees in the People's Republic of South Yemen. On 7 and 8 October, ICRC delegates visited some 200 civilian internees at the Mansura prison. They enquired not only into detention conditions but also into the plight of prisoner's families, with a view to coming to their assistance if need be.

6. EUROPE

Central Europe

Reuniting of separated families and family visits.—In implementation of Resolution XIX of the XXth International Conference of the Red Cross, the ICRC continued its action throughout 1968 on behalf of separated families in Central Europe. The Central Tracing