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## Working within and beyond the Conventions

In 1975, the ICRC devoted some of its energy to helping the victims of *international armed conflicts* to which all of the provisions of the four Geneva Conventions were applicable.

The ICRC also took a hand in *non-international armed conflict* situations, by offering its services to the parties, as it is authorised to do by Article 3 common to the four Geneva Conventions. These offers, which the parties to a conflict are under no obligation to accept, were, on the whole, well received by the government authorities concerned. They provided the ICRC delegates with certain facilities to enable them to offer protection and help to the victims of civil wars.

But the ICRC has also been very busy *beyond the scope of the Conventions* by helping political detainees on the strength of its universally recognised right of initiative.

Nonetheless, it should be pointed out that this last-mentioned activity—the purpose of which is purely humanitarian—is in practice possible only with the agreement of the governments concerned.

Confidential reports on visits to political detainees are sent *solely to the detaining authorities*, whereas the reports on visits to prisoners of war, who are protected by the Third Geneva Convention, are sent simultaneously to the *detaining powers* and the *prisoners' own governments*.

## ASIA - OCEANIA

### Indo-China

On 25 March 1975, after receiving alarming information from Vietnam and Cambodia, the ICRC and the League of Red Cross Societies launched a joint appeal for funds and donations in kind to a value of 5 million dollars.

In view of the rapid aggravation of the situation, the ICRC and the League made an additional appeal on 3 April to governments and National Societies. The new objective was to raise 35 million dollars—the equivalent of 87.5 million Swiss francs—to meet the most urgent humanitarian needs for shelter, food, medicine and clothing for a period of three months.

In Geneva, the *Indo-China Operational Group* (IOG), jointly organized by the League and the ICRC in 1972 to co-ordinate Red Cross activities in Indo-China (see annual report for 1972, page 46) was replaced on 1 April by a more comprehensive organization designated as the *Indo-China Bureau* (INDSEC).

This working group, supervised and directed by ICRC and League officials, was assigned the task of co-ordinating and carrying out the Red Cross international relief operation for which the ICRC had ultimate responsibility.

The range of activity of the *Indo-China Bureau* included Cambodia, where the situation was also changing rapidly, Thailand, which received an influx of refugees, and Laos, in addition to Vietnam.

### Vietnam

At the beginning of 1975, the ICRC dealt with three entities: the Democratic Republic of Vietnam (DRVN), the Provisional Revolutionary Government of the Republic of South Vietnam (PRG) and the Republic of Vietnam (RVN).

In DRVN, the prefabricated dwelling programme, financed by the International Red Cross (costing 6.6 million Swiss francs in 1974), continued.

In RVN, an ICRC delegate accompanied by a doctor visited 1,228 prisoners of war at Can Tho, while another doctor co-ordinated and supervised a medico-social aid programme (mainly to help orphans, handicapped children or invalids) financed by the ICRC. In addition, the International Red Cross was helping the National Society with its displaced persons programmes.

The ICRC also kept in touch with the PRG to which the International Red Cross had, throughout 1974, continued to send equipment for a new 250-bed hospital.

#### The first calls for aid

In the catastrophic situation prevailing at the end of March, the Red Cross of the PRG—whose President, Dr. Nguyen Van Thu, had visited ICRC headquarters in Geneva on 19 March—asked for help for six million persons, one million of whom had recently been displaced. The food supplies needed were estimated to cost five million Swiss francs.

The Saigon Red Cross also appealed to the International Red Cross to finance a plan, based on estimates by an ICRC delegate, to care for 100,000 destitute families—some 500,000 persons—for a period of three months. The cost of this was also estimated at 5 million Swiss francs.

Without waiting for its appeals of 25 March and 3 April to bear fruit, the International Red Cross granted these two requests and large sums of money were transferred to the Saigon and PRG Red Cross Societies for the immediate purchase of relief supplies on the spot.

The Indo-China Bureau then organised the purchase, collection and shipping to Vietnam from abroad of more than 20,000 tons of food, clothing and medicaments.

Since those areas of South Vietnam which had fallen under the control of the revolutionary forces were not directly accessible, the authorities of the DRVN granted permission to ship relief supplies via the Democratic Republic of Vietnam. On 23 April, the ICRC's DC-6 started a shuttle service between Vientiane (Laos) and Hanoi. An ICRC delegate acting on behalf of *INDSEC* set up a base in the North Vietnamese capital to provide liaison with the authorities of the DRVN and the special representatives of the PRG.

While these contacts were being made with the GRP in Hanoi, the International Red Cross remained in constant contact with the *GRP Liaison Bureau* which had been opened in Geneva on 16 January.

### Plans rapidly outstripped

Hardly had the operational plans been established for GRP zones and the territories still under the control of Saigon than they were outstripped by events.

According to specialists sent by the Indo-China Bureau to South Vietnam in mid-April, the original estimate of 5 million francs to provide the victims with relief had increased to more than 30 million francs.

The PRG Red Cross submitted a new list of requirements to a total value of 38 million francs. The bulk of the requirements were medical and hospital equipment and food, but the list also included raw materials (raw cotton, synthetic fibres, cloth) with which the Vietnamese would be able to manufacture some of the most urgently needed items themselves, such as clothes and coats which were essential at the onset of the rainy season.

To finance these programmes, thirty countries (governments and National Societies) and other donors, by 25 April, had promised 37.5 million francs in cash. By the same date the value of gifts in kind amounted to 4.5 million francs.

### The closing days of the war

In the field, Red Cross teams were hard at work. Forty lorry-loads of relief supplies left daily for the still accessible provinces. The distribution of food and water was organised along the highways crowded with people fleeing the fighting. Other supplies were sent by sea and air and, in some cases, were parachuted to isolated groups of civilians.

Around Saigon and in the neighbouring provinces, dozens of camps—54 by mid-April—had sprung up containing a displaced population of several hundred thousand persons. In the region of Vung Tau alone, a few tens of kilometers east of Saigon, there were about twenty such camps.

On the island of Quan Phu Quoc in the Gulf of Thailand, thousands of persons in quest of shelter moved in to replace the prisoners freed after the signing of the Paris Agreements. By mid-April, there were already 50,000 spread over 14 camps. This war-wracked mass was being cared for by 11 doctors, some 20 nurses and 127 Red Cross relief workers. Other doctors, nurses and relief workers were at work in Long-Binh, An-Loi, Phuoc-Tuy, Binh-Tuy, Long-Dien, Chi-Linh, Long-Hai, Long-Hoa, Bau-Sen, Trang-Bom, Long-Khanh, An-Loc, Ben Binh-Dong, etc.

### Red Cross neutrality respected

On 30 April, the revolutionary forces entered Saigon where the International Red Cross delegation was still installed (five ICRC delegates and one League delegate).

The Saigon delegation had already taken steps to create a hospital and safety zone in case of fighting there.

Two buildings, that occupied by the delegation and that of the National Society, facing one another across the *Rue de la Croix-Rouge*, were thus neutralised on 29 April. This measure was not officially announced.

On 29 and 30 April, some 60 wounded and sick persons received care in the zone. The two buildings also took in orphans and lost children as well as persons left destitute and isolated.

No act of hostility or looting was committed against the two hospital and safety zones.

### From 30 April onwards

As the revolutionary forces entered Saigon and as the Republic of Vietnam (RVN) became the Republic of South Vietnam (RSVN), the International Red Cross delegation was faced with three problems:

- to make quick contact with the new authorities which had hitherto been kept informed of the activities of the delegation through the GRP representatives in Geneva and Hanoi;
- in co-operation with the National Society, to cope with the most urgent needs from available stocks;
- to redefine—with the authorities and the National Society—what aid the International Red Cross was to provide over the medium term.

The first contact was made at the beginning of May. Then regular relations were established with Dr. Nguyen Van Thu, President of the "Liberation Red Cross of the PRG" which had become the Red Cross of the Republic of South Vietnam, a full-fledged member of the International Red Cross.

To cope with the most urgent needs was the next problem, and the delegation continued its aid to the victims. The wounded

were given care by the delegation's doctor with the help of the Red Cross relief workers; food was provided for displaced persons as they wandered the highways, not knowing where to go, or heading back toward their homes.

For security reasons, the new authorities later limited movement to the outer confines of the town.

### **Relief—a new type of aid**

Exactly one month after the taking of the South Vietnamese capital, the new authorities welcomed to Saigon-Hô Chi Minh a delegation consisting of representatives of the United Nations Children's Fund (UNICEF), the United Nations High Commissioner for Refugees (HCR) and the International Red Cross. This humanitarian delegation was officially invited to discuss continued international assistance, the third objective of the International Red Cross.

The progressive extension of administrative control over the whole territory enabled the new authorities to better assess the extent of the needs. These needs were considerable, especially for food and medical care. Help had to be continued for the vast numbers of displaced persons, and the medical services had to be reorganised in order to make them accessible to all.

Unemployment was also a problem. One way of helping to solve this was to get certain processing industries under way to produce the foodstuffs and other goods most urgently required. In this respect, Red Cross assistance assumed a new form. By supplying Vietnam with raw cotton, synthetic fibre and cloth, the International Red Cross enabled the National Society to clothe the destitute. By providing basic chemical products it helped the Vietnamese pharmaceutical industry to start up again, with the double advantage of creating jobs and providing cheap drugs. Powdered milk was processed on the spot to provide milk for babies.

It should be made clear that in North and South Vietnam alike the National Society has been a vital element in social development. The younger members of the Red Cross in particular went into people's homes to help them learn and observe the rules of hygiene.

In addition to its new departure, the International Red Cross also continued giving help in more traditional spheres. Thousands of tons of food have been shipped to Danang by sea and then on to Saigon.

A 1000-ton cargo vessel chartered from 25 April covered the Singapore-Danang-Saigon run six times.

The International Red Cross DC-6, which had at first been allowed access only to Hanoi, was authorized to go to Saigon from June onwards. It made 56 round trips in all and brought several hundred tons of relief foodstuffs and medical supplies to Hanoi and Saigon from Bangkok, Singapore and Vientiane.

All of these supplies reached their destination via the Red Cross of the Republic of South Vietnam which sent distribution reports to the Indo-China Bureau. By the end of December, these reports showed that a total of 135,000 families or 820,000 persons had been given aid.

By the same date, the International Red Cross had received a total of 75 million francs in contributions from governments,

National Societies and others, of which 43 million francs had been donated in cash. The total value of the aid provided to Vietnam by the end of 1975 amounted to 31.5 million francs.

### **Medico-social activities after 30 April**

Although our delegates were prevented from directly helping the victims of the conflict during a two-week period subsequent to the entry of the revolutionary forces into Saigon, they were nonetheless able to continue certain activities with the consent of the new authorities.

For example, the delegation doctor regularly visited several orphanages, especially at Gò-Vap, where he gave treatment, ensured that the rules of hygiene were observed and arranged for vaccinations. Throughout 1975, the International Red Cross continued to pay the wages of five kindergarten teachers at the Gò-Vap orphanage.

In June, the delegation opened an out-patient clinic at its headquarters, with treatment free of charge. It was attended mainly by destitute foreigners but also by Vietnamese. During its first three months of activity, this clinic treated 286 foreign patients of 11 nationalities, including 85 children under 12 years of age, and 61 Vietnamese of whom 11 were children.

### **Assistance to foreigners**

Another great problem for the delegation after 30 April was that of the foreigners still in Saigon. There were several thousand, stranded without any diplomatic representation, trying to find a way of leaving the country as their funds dwindled.

Not knowing where else to turn, they reported to the delegation where their names were taken (see page 31). The lists of names were then given to the Foreign Affairs Committee in Saigon-Hô Chi Minh and were also sent to Geneva, whence they were forwarded to the various countries of origin.

The ICRC provided aid, mainly in the form of food, to needy communities while awaiting a solution. Several homeless foreigners were temporarily housed in the delegation building.

### **Repatriations**

The beginning of a solution to the problem of foreigners wishing to be repatriated was found towards the end of 1975 after a visit to South Vietnam, from 28 November to 3 December, by the Director of ICRC operations, who was also Co-Director of the Indo-China Bureau. On behalf of the authorities, the Red Cross of the Republic of South Vietnam officially asked the International Red Cross for help in repatriating certain foreign groups mainly Indians, Pakistanis and Yemenis.

The first two flights in this operation took place on 28 and 30 December 1975. A total of 444 Pakistanis returned home aboard a specially chartered DC-8-63.



## Vietnamese children evacuated abroad

During the latter part of April, a controversial procedure took place, the evacuation of Vietnamese children from Saigon to foreign countries, mainly to the United States.

The attitude of the ICRC, expressed in particular in a telegram to the Red Cross of the Democratic Republic of Vietnam, was as follows:

- The ICRC, acting under the terms of the Geneva Conventions, is at all times concerned with providing its medical and material assistance to children in their own country and in their own cultural surroundings.
- This is provided for in Article 24 of the Fourth Convention, which also establishes the conditions for the transfer and reception of children outside of their country, in the event of war and *for the duration of the conflict*.
  - Considering that Article 24 is applicable in this instance, the ICRC refuses to act upon requests for adoption which it receives.

To make possible the eventual return to their country of these children, not all of whom were orphans, the ICRC sent a recommendation to the American Red Cross to the effect that every Vietnamese child should be identified and that information should be provided as to its location in the United States. This measure is a part of the customary procedure for the reuniting of families.

At the end of 1975, no solution had been found to this problem.

## Accidental death of the chief of a Swiss Red Cross medical team in the service of the ICRC

Dr. Jacob Sturzenegger, 49, chief of a Swiss Red Cross medical team working at Luang-Prabang in Laos, was killed on 12 March 1975 while on his way to Saigon, where he was to make another visit to prisoners of war, in the company of an ICRC delegate.

The Air-Vietnam plane which he had boarded at Vientiane crashed near the village of Thanh-An, not far from Pleiku.

Since the region was at that time in a zone of hostilities, the usual official investigation did not take place and the causes of the crash were not determined.

In the person of Dr. Sturzenegger, the Swiss Red Cross and the ICRC lost a highly esteemed professional worker who had devoted himself for many years to our humanitarian cause. In the course of an outstanding career, he had served in a number of responsible positions in Swiss hospitals before undertaking ICRC missions which took him to the Congo in the early 1960's and later to Rwanda and other countries.

## What is the International Red Cross?

**Red Cross assistance in Indochina is officially the work of the *International Red Cross*, so called because it is the joint effort of the *ICRC*, the *League of Red Cross Societies* and the *National Red Cross, Red Crescent and Red Lion and Sun Societies*.**

**The term "*International Red Cross*" is frequently incorrectly used in referring either to the *ICRC* or the *League*.**

## Cambodia

At the beginning of 1975, large areas of territory were under the control of the revolutionary forces although the main towns still resisted and were accessible by air. Phnom Penh was the main target of the revolutionary forces.

### Delegation activities

The International Red Cross had bases at Phnom Penh, Kompong Chhnang (80 km north of the capital) and in Battambang (350 km north-west of Phnom Penh). In the last-mentioned town, the ICRC had set up a secondary logistic-support base.

The delegation was made up of 34 members. Seven were delegates of the ICRC and League, while the medical and surgical teams came from the French, British, Belgian, Swedish and Swiss Red Cross Societies. There were also some 90 local employees working with the International Red Cross delegates.

The operation, for which the ICRC had overall responsibility, was mainly as follows:

- *material assistance*: some 300,000 displaced persons, 120,000 of whom were concentrated on the outskirts of Phnom Penh, received monthly rations—rice, dried fish and salt, and also clothes and soap;
- *construction of shelters*: the International Red Cross financed and supervised the construction and maintenance of some twenty camps (of which fourteen were in Phnom Penh) for displaced persons.
- *medical assistance*: mobile medical teams provided care twice a week in the camps and distributed milk and vitamins to prevent malnutrition in the children; a medical team (1 doctor and 4 nurses) worked in Kompong Chhnang; a surgical team (2 doctors and 3 nurses) at the *Prea Keth Mealea* Hospital, Phnom Penh's largest civilian hospital; a Swiss team, special-

ising in pediatry, worked at the *Kantha Bopha* children's hospital in Phnom Penh.

The delegation also tried to accomplish its conventional tasks. A local branch of the Central Tracing Agency employed local workers under the supervision of an ICRC delegate. They could register reports of missing persons but the absence of contact with the opposite side limited the scope of their activities (see page 31).

After January 1975, the ICRC was again authorised to visit prisons. Until April, delegates could enter nine detention centres and speak with prisoners without a witness. Relief was given to prisoners among whom were members of the People's Armed Forces for the National Liberation of Kampuchea.

All of these activities called for a monthly expenditure of 700,000 Swiss francs at the beginning of 1975. Finance was provided by donors (National Societies, governments and others) through the Indo-China Operational Group and then through the Indo-China Bureau which took over its functions on 1 April.

In observance of Red Cross principles, the ICRC constantly tried to help all victims of the conflict, wherever they were and whatever the camp to which they belonged. It was unfortunately impossible to reach that goal as approaches in Paris to the GRUNK Mission (Kampuchea Royal Government of National Union) had been in vain. Efforts made by the delegates on the spot had also been unsuccessful.

The GRUNK Mission in Paris, however, continued to regularly receive lists of International Red Cross personnel in Cambodia as well as information on the activities of the delegation.

### March: acceleration of events

In March, the situation was intensified as the FUNK (United National Front of Kampuchea) forces began an irresistible advance.

On 14 March, the ICRC received a telegram from Peking, signed by Norodom Sihanouk, President of FUNK and Cambodian Head of State. Referring to a pending "offensive by the People's Armed Forces for National Liberation against Phnom Penh", Prince Sihanouk asked international organizations to evacuate their personnel, adding that their security could no longer be guaranteed.

The ICRC, which bore overall responsibility for International Red Cross activity in Cambodia, could not ignore this warning. On the other hand, it could not simply order its delegates and doctors to abandon the victims. A reply to that effect was sent to Prince Sihanouk.

At the end of March a decision was taken to cut down staff. On 3 April, the surgical team from Kompong Chhnang returned to the capital. On 5 April, fourteen delegates (the Swedish and Swiss teams, 5 nurses and an administrator) were withdrawn to Bangkok.

Sixteen delegates, all of them volunteers, remained at Phnom Penh. Thereafter, the International Red Cross was the only humanitarian institution still at work in Cambodia.

On 14 and 15 April, while activities in the camps continued in the face of the peril, the fronts surrounding Phnom Penh gave way, resulting in an influx of thousands of persons into the city's suburbs. An emergency action — distribution of rice, water and milk — was organized by the delegation. The delegation also took charge of 110 children suffering from undernutrition who had been cared for by another organization.

### Establishment of a hospital and safety zone

On 16 April, there was no longer any doubt about the outcome and the Phnom Penh delegation, with the approval of the ICRC in Geneva, took the initiative of setting up a hospital and safety zone.

A zone of this kind, which has no status of extra-territoriality and cannot constitute a refuge for persons seeking political asylum, is only intended to provide a *temporary shelter from the effects of war*, with priority for the wounded and sick and for those who care for them.

Such a zone was established at the Hotel Phnom, chosen for the following reasons: its distance from any military objective, its separation from any nearby buildings and the fact that it had the necessary facilities to receive a large number of people for a period of several days. A medical and surgical dispensary was installed.

By the end of the day, some 1,500 persons fled into the zone. All of them were searched and any weapons found were confiscated.

### Transmission by the ICRC of an offer of surrender

Another important event took place during the last 24 hours of the delegation's activity. On 16 April, Mr. Long Boret, who was at that time Prime Minister, asked the International Red Cross to transmit to the revolutionary forces a proposal for a cease-fire, to be followed immediately by a transfer of power.

The ICRC agreed to perform its traditional function as a neutral intermediary and, without expressing itself on the contents of the surrender offer, sent the text to Peking, addressed to Prince Norodom Sihanouk, Cambodian head of state.

The ICRC based its decision on the following considerations:

- every passing hour increased the number of victims;
- if any chance existed, however small, for bringing a quick end to the fighting, it should be seized;
- the ICRC had no way of determining whether transmission of the surrender offer could be made by another intermediary.

A few hours later, the ICRC in Geneva received a reply from Prince Sihanouk, a refusal to accept the message. The International Red Cross was asked "to cease to concern itself with the internal affairs of Cambodia".



## The end of ICRC activity in Cambodia

During the morning of 17 April, when the revolutionary forces entered Phnom Penh, another thousand persons fled into the hospital and safety zone. Five seriously wounded persons were also admitted and after first aid treatment were sent to the *Prea Keth Mealea* Hospital, where it was found that the hospital had been abandoned by its surgical personnel. It was then decided to send the British surgical team to the hospital, but they were unable to pass the road blocks. The wounded therefore remained in the care of local nurses.

Between 11 a.m. and noon, a meeting took place at the Phnom Hotel between the head of the International Red Cross delegation and a representative of the revolutionary forces.

In the early afternoon, armed groups entered the zone and requisitioned medical supplies. A short time later, the head of the delegation and his deputy left the hotel and were taken under escort to the office of the delegation where they had to turn over the medical supplies.

On returning to the Hotel Phnom, they found that evacuation of the zone was under way, on orders of the revolutionary forces. The delegation had already returned to their families the last of the slightly wounded persons still remaining at the hotel. Foreigners, including the delegates of the International Red Cross, were given asylum in the French embassy, which they left about two weeks later, under escort, for Thailand.

## Thailand

Some weeks before the end of the war in Cambodia, the ICRC set up a base in Bangkok to support the delegation in Phnom Penh.

A radio station, permanently tuned to the frequency of the Phnom Penh delegation, was opened in the Thai capital because the conditions for transmitting between Cambodia and Geneva were such that contact could be established only at certain times, whereas in the rapidly deteriorating situation it was vital that permanent contact be maintained.

Working with the Thai authorities and Red Cross, some of the ICRC delegates who had pulled out of Phnom Penh prepared towards the end of April to receive the foreigners who had taken refuge in the French Embassy in Phnom Penh when they crossed the Thai-Cambodian border at Aranyaprathet. This operation was completed on 8 May when the second and last convoy of foreigners left Cambodia.

The International Red Cross then concentrated its efforts on helping the tens of thousands of refugees who had left, or were still pouring out of Cambodia, Vietnam and Laos.

The Thai authorities took charge of this help with financial support from the United Nations High Commissioner for Refugees (HCR) in particular. Until the arrangements envisaged in the agreement between the Thai authorities and the HCR could be put into effect, the International Red Cross offered its help to the National Red Cross in the emergency medical assistance and food distribution services it was providing. By the

end of 1975, some 300,000 Swiss francs had been allocated to the National Society.

The ICRC delegates regularly visited the camps set up by the Thai administration and systematically registered all the refugees (see p. 31). They also provided direct help by supplying the refugees with farming implements, study books and articles for their leisure.

## Laos

As all the prisoners of war had been exchanged in September and October 1974, the ICRC delegation in Vientiane concentrated most of its attention on assistance work during 1975.

In particular, the delegation supported various activities of the Lao Red Cross and continued helping the village of *Ban Kok Van*, where displaced persons had been rehoused since 1974.

The political changes during the year, which changed the Kingdom of Laos into the *Lao People's Democratic Republic*, did not affect the activities of the ICRC which had been in contact with the *Patriotic Laotian Front (Neo Lao Hak Sat)* for several years. Many gifts of medical supplies were forwarded to that movement in 1975, especially during the first six months.

It should be noted that between April and June, Vientiane became the hub of the operation for forwarding relief supplies to Vietnam. The International Red Cross DC 6 took off from Vientiane on its relief supply transport missions until the sea ports of Danang and Saigon were reopened.

### Financial situation of the Indochina mission by the end of 1975

**The accounts of the joint ICRC-League mission in Indochina were closed on 31 March and are published separately.**

**By way of indication, here are some figures for this mission as they appeared at the end of 1975:**

- **contributions from governments, National Societies and various organisations in response to appeals launched on 25 March and 3 April: Sfr. 75 million, of which about Sfr. 32 million were in the form of goods and services;**
- **expenditure and commitments at the end of December: over Sfr. 60 million;**
- **relief supplies sent to Indochina throughout 1975 (IOG and INDSEC purchases + gifts in kind from governments, National Societies, the EEC and other sources): Sfr. 77.6 million.**



# Timor

August 1975 saw the sudden outbreak of a new conflict on Timor, an island in the Indonesian archipelago, the eastern part of which was a Portuguese colony. The fighting took place between the *Timor Democratic Union (UDT)* and the *Revolutionary Democratic Front for the Independence of East Timor (FRETILIN)*. The hostilities were mainly in Dili and civilians were the principal victims. Hundreds of refugees left the island in boats and sought safety in Darwin, Australia. Others fled into the mountains.

When news of the outbreak of hostilities first reached it, the ICRC established contact with the Australian Red Cross which acted quickly to care for refugees.

On 21 August, Portugal officially requested the assistance of the ICRC in evacuating foreigners from East Timor. This was followed by other requests for more extensive assistance.

On 28 August, the ICRC regional delegate for south-east Asia, stationed at Kuala Lumpur, Malaysia, arrived at Baucau, East Timor, after a short stopover on Atauro, a nearby island, where he conferred with Portuguese authorities and the medical personnel who had been forced to leave the Dili hospital.

In Baucau, second largest town in East Timor, he met a representative of the UDT, who expressed approval for a twofold ICRC action of protection and assistance, pursuant to the Geneva Conventions, which the UDT representative said his organization would respect.

On 31 August, Mr. Xavier do Amaral, President of the FRETILIN, and Commander Lobato, commander-in-chief of the armed forces of this movement, also agreed to an ICRC action. The ICRC thus had the agreement of all parties for its assistance programme, which continued until 6 December.

## Urgent needs: medicine and surgery

As early as 1 September, the Dili hospital, containing 200 wounded and sick persons, began to function again, thanks to medical personnel provided to the ICRC by the Australian Red Cross.

On the same day, another Australian medical team went to work at the hospital in Baucau, which was under the control of the UDT.

Doctors and nurses also went to other towns and villages, to see what was needed and to provide care. Such itinerant medical missions visited the following places: Viqueque, Manatuto, Aileu, Maubisse, Same, Ainaro, Maliana, Liquica, Maubara, Suai, Ermera, Atabae, Railaco, Latefoho, Bobonaro, Lautem, Hatudo and Atsabe.

On 4 September, the ICRC doctors opened another polyclinic at Dili, which received 150 patients on the first day. The most urgent medical and surgical needs were thus met.

In other respects, reports from the delegation to the ICRC in Geneva gave the following picture of the situation:

- about 150,000 persons were affected by the events, to a greater or lesser extent;

- there were a large number of displaced persons, which complicated the job of estimating needs and providing medical assistance—which was provided only by the twelve ICRC doctors aided by qualified local medical personnel;
- East Timor was no longer receiving its normal supplies of food, and shortages were developing. These did not reach dangerous proportions however. The ICRC dealt with local needs but distributions of food continued to be limited;
- while Dili did not suffer much damage, there was great destruction in other localities, where many families lost everything they owned.

## Western Timor — refugees by the thousands

The ICRC was concerned not only with East Timor, for thousands of refugees were fleeing westward into the Indonesian part of the island. Here they were helped by the Indonesian Red Cross, and further help was soon provided by a committee with representatives of the Indonesian Ministry of Health, the Salvation Army and the churches.

One month after the outbreak of hostilities, the number of refugees was estimated at 40,000.

Between 19 and 26 September, an ICRC delegate was permitted to visit various camps near the frontier separating Portuguese and Indonesian Timor, to estimate the needs of the refugees.

On receiving his report, the ICRC decided to assist the efforts of the Indonesian Red Cross, with which it had been in contact for several weeks. It undertook to finance a specific programme providing for medical assistance, purchase of textiles and help in the training of volunteers to work in the camps. A special budget was drawn up, totalling 825,000 Swiss francs. An appeal for funds to cover this budget was sent to various governments and National Societies.

During the initial phase, seven tons of powdered milk and 45,000 pounds of baby food—since a great number of infants were among the refugees in Western Timor—arrived in Indonesia. The ICRC turned over an initial sum of 100,000 Swiss francs to the National Society. By the end of November, the Indonesian Red Cross had received a total of 300,000 francs in cash.

## Eastern Timor: rapid development of traditional activities

As noted above, the ICRC regional delegate was present in East Timor from 28 August onwards. He was soon joined by three Swiss delegates, and an administrative officer and radio operator from Australia.

A support base was set up at the same time at Darwin, Australia, with the co-operation of the Australian Red Cross, which arranged for the Australian Government to lend the ICRC an aircraft. Dili and Darwin were in contact by radio.

The ICRC's conventional activities developed rapidly, with visits to prisoners, exchanges of Red Cross messages, listing of missing persons, searches, relief, etc. (see page 31).

The ICRC obtained the approval of the *FRETILIN* to visit freely all the places of detention under its control. Within two days after his arrival in East Timor, the head of the delegation made three visits to some 100 *UDT* prisoners in the hands of the *FRETILIN*. In Baucau, he was granted comparable facilities by the *UDT*.

From September to 15 October, delegates, usually accompanied by a doctor, visited some 15 places of detention with a total of 1,500 prisoners. From 15 October to 15 November, 33 visits were made to 18 places of detention with 1,546 prisoners. The ICRC arranged for transfer of badly wounded prisoners to the hospital at Dili.

The final visits took place on 5 and 6 December at Dili, where about 680 persons, mainly *UDT* and *APODETI*<sup>1</sup> soldiers, were still held by the *FRETILIN*.

During these visits, the delegates distributed relief consisting for the most part of blankets, clothing and underclothing, toilet articles and cigarettes.

Relief was also given to the civilians most directly affected by the events, but these needs were relatively small. Distributions from 2 September to 15 November included 1,900 kg of powdered milk, 7,870 tins of baby food, 14 tons of rice and several hundred articles of clothing, the latter mainly to orphanages.

### Portuguese military prisoners

Soon after the conflict began, some Portuguese soldiers were captured by the *UDT* and the *FRETILIN*.

On 9 September, 28 Portuguese soldiers were released by *FRETILIN* to the ICRC which took them to Darwin the following day.

The *UDT* was holding 23 Portuguese soldiers. An ICRC delegate encountered them between 22 and 24 September at Atapupu, on the Indonesian side of the frontier. Despite numerous requests, this visit could not be repeated. Contacts with leaders of groups opposed to the *FRETILIN* were also broken off.

### Reversal of the situation

At the end of November there was a sudden change in the general situation, due to military developments.

On 28 November, as a result of these developments, the *FRETILIN* unilaterally declared the independence of East Timor. On the following day, four other political groups—the *UDT*, *APODETI*, *KOTA*<sup>2</sup> and *TRABALHISTA*<sup>3</sup>—announced the attachment of the territory to Indonesia. Portugal reaffirmed its sovereignty over the territory.

<sup>1</sup> People's Democratic Association of Timor.

<sup>2</sup> KOTA: Klibur Oan Timor Aswain.

<sup>3</sup> TRABALHISTA: Workers' Party.

Various sources reported an impending military offensive in the direction of Dili.

With the agreement of headquarters in Geneva, the ICRC delegation took certain precautionary measures. The humanitarian action continued, but the delegates and doctors left Dili every evening to spend the night at Atauro, returning to Dili the next morning.

The anticipated offensive took place on the night of 6-7 December, making it impossible for the ICRC plane to return to Dili. The delegates and doctors withdrew to Darwin three days later, ready to resume their mission as soon as it was possible to do so.

From 7 December onwards, the ICRC intervened repeatedly with interlocutors in Jakarta, Geneva and at the United Nations in New York, seeking permission from the parties to the conflict for the delegates to return to East Timor to resume their humanitarian activities. At the end of the year, however, this had not been possible.

## Asian Sub-Continent

The regional delegation in India and the delegation in Bangladesh and Pakistan continued to be busy in 1975, dealing with the aftermath of the 1971 conflict.

Following the Delhi agreements of 28 August 1973 and 8 April 1974, the Governments of India, Pakistan and Bangladesh had asked the Swiss Confederation, the United Nations High Commissioner for Refugees and the ICRC to arrange the transfer of the persons concerning whom agreement had been reached. During 1974, all prisoners of war and civilian internees were enabled to return to their countries of origin and large numbers of other civilians were taken to countries of their choice.

At the end of 1974, there were two problems still outstanding: one concerned those persons who had received the necessary authorization to emigrate but had not been able to leave before the deadline fixed for July 1974; the second problem related to « non-locals » in Bangladesh whose request to go to Pakistan had been refused.

For persons of the first category, some solutions were found and 212 persons belonging to non-Bengali minorities left Bangladesh for Pakistan in 1975 with travel papers issued by the Central Tracing Agency, each case being considered individually.

For persons in the second category, the ICRC had to deal with appeals by those who did not accept the Pakistan refusal since they considered that they belonged to one of the groups of persons eligible to immigrate under the Delhi agreements.

In 1975, the delegation in Dacca continued to receive these appeals, accepting them until the spring, and transmitted them to the Pakistan authorities.

Later, it was the delegation's task to inform the prospective immigrants of the Pakistan government's decisions on their appeals and prepare the necessary papers for those who had been granted permission to enter Pakistan.



At the request of the Pakistan Government, the delegation also had to gather further information in a number of doubtful cases, which sometimes required travel into the interior of the country to trace the persons concerned.

From the beginning of these transfer operations, the delegations in Dacca and Islamabad sent about 30,000 appeals, involving some 200,000 persons, to the Pakistan authorities.

At the end of 1975, there were still about 15,000 persons waiting to be repatriated.

In addition, still in relation to the conflict, the ICRC repatriated 53 Pakistanis who had illegally crossed the border into India in 1971. Of this number, 42 had been detained in various Indian prisons, where they had been visited by the ICRC.

Two other Pakistanis, who were already in prison in India before the outbreak of hostilities, were repatriated by the Swiss Embassy, with ICRC assistance.

## EUROPE

### Cyprus

As all the prisoners of war had been liberated in the autumn of 1974, the basic reason for keeping an ICRC delegation in Cyprus in 1975 resulted from the Fourth Geneva Convention (protection of civilian persons). However, as the situation on the island developed, the volume of activities was progressively reduced and the number of delegates—nearly 50 at the beginning of the year—was cut to three by December.

In the spring of 1975, a feature of the situation on the island, henceforth split into two zones (the north being in Turkish-Cypriot hands and the south under Greek-Cypriot control) was that, on each side of the demarcation line, there were groups of persons who belonged to the other community on the other side.

In fact, there were several thousand Greek-Cypriots in the northern zone, mostly concentrated in Karpasia and in the regions of Kyrenia and Morphou, and consisting of aged people, women and young children.

In the southern zone, several thousand Turkish-Cypriots were spread over some sixty villages. In August 1975, an agreement signed in Vienna by the two communities enabled these Turkish-Cypriots to leave the south of the island for the north. The United Nations took charge of the transfer which was completed in September.

#### Transfer of persons

Beginning on 30 November 1974, the ICRC started transferring certain categories of person (wounded, sick, pregnant women, mothers and their children and the aged) from the north to the south and vice versa for humanitarian reasons in

accordance with an agreement signed—at the suggestion of the ICRC—by the representatives of the two communities. These transfers were suspended by the Greek-Cypriot authorities towards the end of January. Transfers for urgent medical reasons were, however, still permitted. Such cases, proposed by the ICRC doctors, were generally just a few per week.

In addition, the ICRC frequently had to deal with soldiers (patrols) and civilians who occasionally wandered across to the wrong side of the demarcation line. Such persons were taken prisoner and were, in most cases, allowed visits by the ICRC delegates, after which they were repatriated.

#### Medical assistance

At the beginning of 1975, there were still five mobile medical teams operating in Cyprus. These had been made available to the ICRC by the National Red Cross Societies of the Federal Republic of Germany, Denmark, Finland, Ireland and Sweden.

*In the north*, three of the teams were looking to the medical and sanitary conditions of the Greek-Cypriot communities.

*In the south*, the mobile medical teams were holding general surgery at various centralised points, especially in the hospitals of Limassol, Larnaca, Polis and Paphos. Most of the cases were geriatric.

The fact that the Turkish-Cypriot authorities set up a medical infrastructure in the north and the fact that the Turkish-Cypriots in the south were allowed to move about within their district meant that the ICRC was able to pull its medical teams out by May. However, one doctor remained with the delegation until August.

#### Relief supplies

Until the summer, the ICRC kept a co-ordinator in Nicosia and two specialised delegates in charge of the northern and southern zones and the Limassol and Nicosia depots.

*In the north*, the ICRC provided various authorities with emergency supplies but distributed them itself only when the delegates noticed any urgent need among the Greek-Cypriot communities. The bulk of the supplies were provided for the Turkish-Cypriots by the United Nations High Commissioner for Refugees (HCR). The Greek-Cypriots received supplies from the south via the United Nations Forces in Cyprus (UNFICYP).

*In the south*, the Cyprus Government and the HCR provided assistance for the displaced Greek-Cypriots. The ICRC regularly provided large quantities of emergency food supplies, mainly through the Cyprus Red Cross, including meat, baby food and powdered milk. The delegates also distributed supplies to the Turkish-Cypriot communities to supplement those provided by the Cyprus Government.