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## OPERATIONAL ACTIVITIES

The Gulf war had a significant impact on all the ICRC's operational activities in 1991, both at headquarters and in the field. Not since the Second World War had the institution had to find such enormous resources, in terms of staff, funds, food aid, medical relief and logistic support, in such a short space of time. In facing this challenge, the ICRC enjoyed the backing of the entire International Red Cross and Red Crescent Movement.

Hostilities in the Gulf must nevertheless not be allowed to overshadow other situations which also mobilized the institution in many areas of the world, including elsewhere in the Middle East and in Asia, where protracted conflicts continued; on the African continent, where needs remained an urgent priority during the year; or even in Europe, where far-reaching political change gave rise to mounting humanitarian needs. In contrast, the Latin American continent in general evolved in 1991 towards a more peaceful situation, thereby significantly improving the living conditions of people hitherto affected by conflicts or insecurity and enabling the ICRC to scale down its activities there.

In 1991, the ICRC had 49 delegations and regional delegations worldwide, employing on average over 720 delegates, 190 staff from National Red Cross and Red Crescent Societies and nearly 4,800 local employees.

### Activities for people deprived of their freedom

ICRC delegates conducted more than 8,000 visits in nearly 2,000 places of detention in 49 countries (prisoner-of-war camps, civilian and military prisons, centres run by police forces), and saw nearly 154,000 persons deprived of their freedom (prisoners of war, security detainees, civilian internees).

The Gulf conflict resulted in a significant expansion in detention-related activities. The number of detainees visited by delegates in

the Middle East and North Africa rose sharply to around 113,000 (as against 84,000 in 1990). Major developments in Africa enabled the ICRC virtually to double the number of visits conducted (564 as against 245 the previous year), its delegates having gained access to more detention centres in a greater number of countries and, for the first time, to provisional places of detention (police stations, military barracks). In Asia, too, the ICRC was granted access to new categories of detainees (in particular in Afghanistan and Indonesia), while the political upheavals and conflicts in Europe, chiefly affecting the Balkans, prompted the institution to initiate visits to detention centres in two countries (Albania and Yugoslavia).

### Central Tracing Agency

There was also a rise in Tracing Agency work owing to the Gulf conflict. The number of staff assigned to tracing-related tasks in Geneva had to be doubled during a period of five months so as to register around 80,000 prisoners of war and civilian internees. Throughout the world, the Tracing Agency processed more than 72,300 requests concerning people presumed missing, forwarded nearly 420,000 messages between separated family members and issued more than 6,400 travel documents (enabling people who no longer had any identity papers to travel to a host country).

### Material relief

Relief was another area in which the Gulf conflict prompted the ICRC to launch its most extensive programmes since 1985. Record figures were also registered in Africa, in particular on the Angolan Planalto, where the ICRC launched the final phase of a 12-year assistance programme, in Ethiopia, in Somalia and Mozambique. In Europe also, the ICRC was

more active than ever before, mainly in Yugoslavia. Without the generous financial and material support of the European Community and the International Red Cross and Red Crescent Movement, the institution would certainly not have been able to deploy programmes of such magnitude simultaneously. The Gulf conflict also introduced a new form of cooperation within the Movement: National Societies no longer confined themselves to dispatching material or personnel, but took entire responsibility for specific projects, such as the setting up and management of refugee camps.

In 1991, the ICRC purchased and dispatched directly to operational areas 61,422 tonnes of goods not including medicines, worth a total of 69.5 million Swiss francs. In addition, 70,684 tonnes of relief, worth 126.8 million Swiss francs, were provided to the ICRC by donors, in the form of contributions in kind. Altogether, 132,106 tonnes of relief worth 196.3 million Swiss francs were dispatched by the ICRC to 56 countries in 1991. In addition, a total of 44.1 million Swiss francs worth of medical aid was purchased and dispatched in 1991. The overall value of material and medical relief purchased and dispatched in 1991 thus amounts to 240.4 million Swiss francs.

Actual distributions by the ICRC in 1991 totalled 96,522 tonnes of material relief, worth 142 million Swiss francs, and medical aid worth 43.7 million Swiss francs. A geographical breakdown of the total amount of material and medical relief distributed by the ICRC in 1991, which came to 185.7 million Swiss francs, is given below:

	Swiss francs	%
Africa	79,427,802	42.77%
Latin America	2,203,132	1.19%
Asia	7,599,034	4.09%
Europe	10,471,402	5.64%
Middle East/ North Africa	86,002,191	46.31%
<b>TOTAL</b>	<b>185,703,561</b>	<b>100 %</b>

Medical and other aid for detainees and their families, which is included in the above figures, amounted to more than 910 tonnes of relief supplies worth 3,328,186 Swiss francs.

(See detailed tables on pp. 50, 61, 83, 93 and 120.)

### Medical activities

The magnitude of ICRC operations in 1991 was also reflected in its medical activities, in relation both to the Gulf conflict and to other emergency situations, particularly in Africa and Asia. The cost of medical activities amounted to some 125 million Swiss francs, as against 71 million in 1990. Two doctors, assigned to operational zones, were added to the staff of the ICRC Medical Division, and 777 missions were conducted for 290 posts by personnel largely seconded by the National Societies.

Six ICRC war surgery teams worked in the institution's hospitals or in local establishments in the field. In all, over 20,000 patients were admitted to ICRC hospitals, another 28,000 received out-patient treatment and 38,400 operations were carried out by ICRC staff.

Two new orthopaedic centres for war disabled were opened, one in Kabul (Afghanistan) and the other in Battambang (Cambodia), bringing the total number of ICRC prosthesis workshops to 24 in 12 countries. Altogether, these workshops produced over 11,000 prostheses, nearly 4,000 orthoses (supports), 7,600 pairs of crutches and 700 wheelchairs, and carried out nearly 5,000 major repairs.

Considerable work was undertaken in the field of sanitation and water supply. Apart from the many existing projects, two large-scale programmes (Iraq, Liberia) required a special effort owing to the technical difficulty of the problems to be solved and the prevailing security problems. In the Gulf alone, at the height of the conflict, over 50 ICRC and National Society engineers and technicians were at work on the spot.

In addition to operational activities, the ICRC Medical Division also expanded its work in various specific areas, such as specialized publications, contacts and cooperation with various medical and paramedical

organizations, training of medical staff, and seminars and courses, including:

- a seminar on *Famine and War*, which brought together some 50 international experts in Annecy (France), in March, to study the precipitating factors of famine in situations of armed conflict and the appropriate response within the framework of international humanitarian law;
- a seminar on *War Surgery*, held in Geneva in March, which brought together 53 surgeons and anaesthetists from various parts of the world;

the sixth “*HELP*”<sup>1</sup> course for specialized staff with experience of emergency situations, held in June in Geneva. The second “*SOS*”<sup>2</sup> course was organized in November for Spanish-speaking participants and a similar course was held in Brussels.

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<sup>1</sup> Health Emergencies in Large Populations.

<sup>2</sup> *Salud en Operaciones de Socorro* (Health in relief operations).