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A victim of the fighting in Afghanistan is brought for treatment to the Karte Seh hospital in Kabul to which the ICRC gives substantial support.

ICRC/T. Gassmann



## Indian sub-continent and Myanmar

### ICRC delegations:

Afghanistan  
Pakistan  
Sri Lanka

### ICRC regional delegation:

New Delhi

## South-East Asia

### ICRC delegation:

Cambodia

### ICRC regional delegation:

Bangkok

## Far East

### ICRC regional delegations:

Hong Kong, Jakarta, Manila

## Staff

ICRC expatriates<sup>1</sup> : 138

National Societies<sup>1</sup> : 28

Local employees<sup>2</sup> : 1565

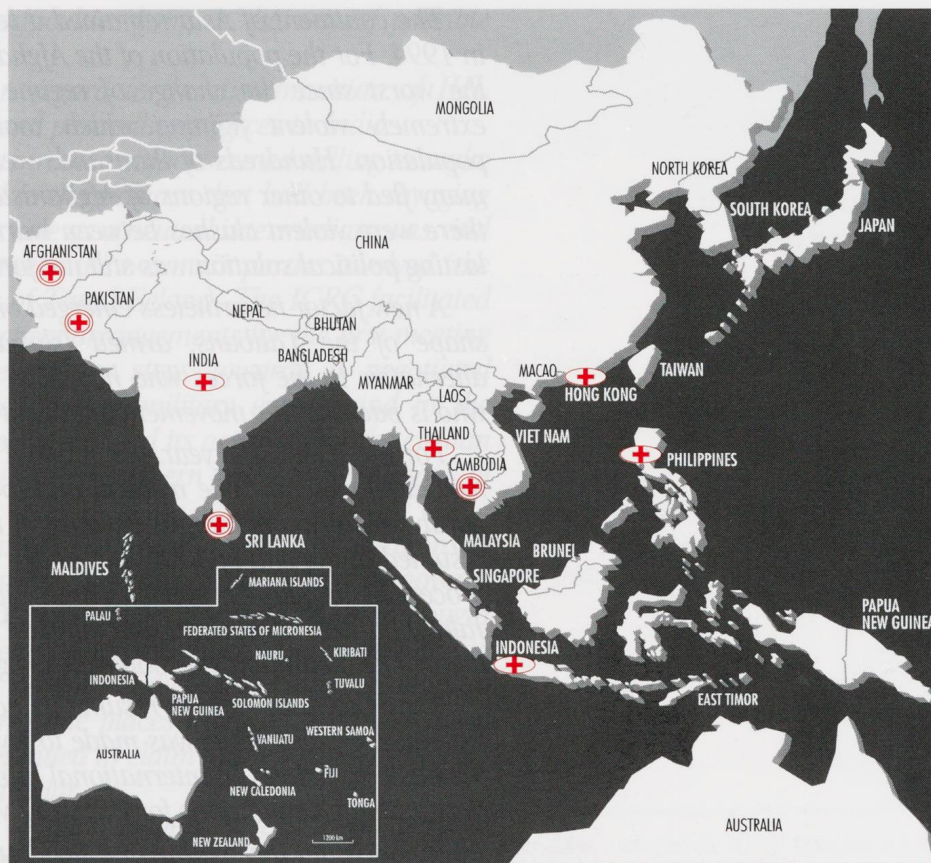
## Total expenditure

Sfr 62,449,049

## Expenditure breakdown

Sfr

Protection/Tracing:	13,387,812
Relief:	11,189,206
Medical assistance:	18,900,613
Cooperation with National Societies:	700,392
Dissemination:	2,101,369
Operational support:	12,704,178
Overheads:	3,465,479



⊕ ICRC regional delegation

⊕ ICRC delegation

ICRC / AR 12.94

# ASIA AND THE PACIFIC

<sup>1</sup> Average numbers calculated on an annual basis.

<sup>2</sup> Under ICRC contract, as at December 1994.



*The continent of Asia remained a source of serious concern for the ICRC in 1994. For the population of the Afghan capital Kabul, the year was certainly the worst since the change of regime in 1992. The city was the scene of extremely violent fighting which took a heavy toll among the civilian population. Hundreds of thousands were displaced within Kabul itself, while many fled to other regions of Afghanistan. Elsewhere, especially in the north, there were violent clashes between warring factions. At the end of the year a lasting political solution was still not forthcoming.*

*A new factor nevertheless emerged on the political and military scene in the shape of the Taliban, armed Islamic students who tried to impose an alternative to the forces who had been fighting for years. It remains unclear who is backing this movement and what direction it will take.*

*For the ICRC, the year was marked by difficulties but also by a number of new developments. The medical and food assistance operation in Kabul was paralysed for many months because of the intransigence of the parties. It was resumed at the end of 1994, but under very precarious conditions. The ICRC proceeded as planned with its food aid programme for displaced people in Jalalabad and its medical and surgical assistance to the government hospital there. The institution's orthopaedic programmes were also pursued.*

*The ICRC was able to resume its activities for prisoners held by the main factions. A major effort was made to give new impetus to the dissemination of the basic principles of international humanitarian law (IHL) among combatants, although conditions for this work were far from propitious.*

*In Pakistan, the signing of a headquarters agreement with the government coincided with encouraging progress in the dissemination of the fundamental rules of IHL among the armed forces.*

*In 1994 the ICRC continued its attempts to gain access to categories of detainees who in various political contexts fell within its sphere of interest. Negotiations to this end were pursued in connection with Kashmir, Myanmar and the People's Republic of China. In India, a first evaluation mission to the Kashmir valley conducted in April by the regional delegation in New Delhi led to a specific proposal for action by the ICRC. After long discussion, a preliminary agreement was reached on the principle of ICRC visits to detainees. Promising talks were under way at the end of the year.*

*The position was similar in Myanmar, where in May the ICRC proposed a draft agreement on visits to detainees. Although the State Law and Order Restoration Council gave the impression that in general it was open to cooperation with the ICRC in this area, there had been no tangible confirmation of this attitude by the end of December. In China, thanks to two missions carried out in January and March, the ICRC began to gain a better*



understanding of the problems and difficulties lying in the way of possible visits to places of detention.

Meanwhile, progress was made in regard to the dissemination of IHL among the armed forces in Myanmar and paramilitary forces in India.

In Sri Lanka, the main protagonists in the conflict seemed willing to make a fresh attempt in 1994 to put an end to the violence that had been ravaging the country for years. Here the ICRC's role as a neutral intermediary was vital during the initial phase of contacts between the two main parties involved (the government and the Liberation Tigers of Tamil Eelam). The ICRC facilitated the exchange of messages and the practical arrangements for the first meeting between the negotiators. These preliminary steps towards a negotiated settlement were accompanied by a decline in military activity and in the number of arrests. The ICRC nevertheless pursued its activities for the civilian population and detainees, particularly in the northern and eastern regions of the island.

In Cambodia, the spring was a season of unrest and military operations of all kinds. In the north-west, the capture of the town of Pailin first by government troops and then by fighters of Democratic Kampuchea (Khmer Rouge) caused a series of population movements. Anti-personnel mines continued to be a very grave problem in Cambodia, because of their sheer number and also because mines had again been laid in some places that had previously been cleared. These treacherous devices continued to claim many victims every day, most of them civilians, children in particular.

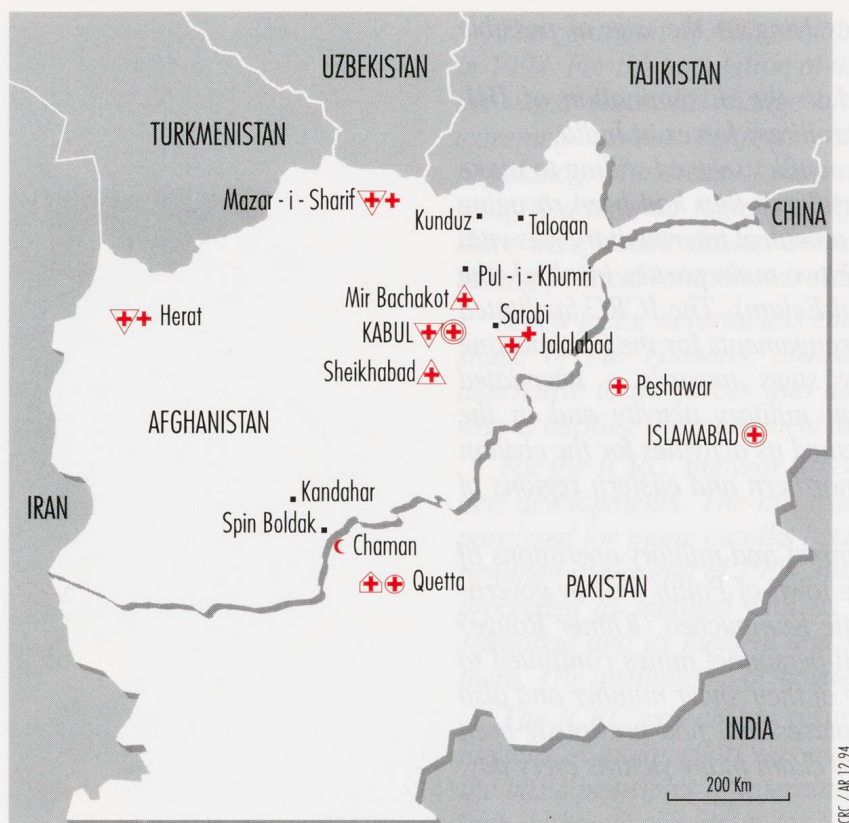
Delegates continued their efforts to gain regular access to all persons captured or arrested by one party or another in connection with the situation prevailing in the country. This was not always possible. By the same token, the ICRC was not always able to reach civilian victims of the conflict and had no access at all to people under the control of the Khmer Rouge.

With regard to East Timor, although the Indonesian authorities did afford the ICRC better working conditions during 1994 and despite the fact that activities on behalf of detainees proceeded normally, the underlying reasons for its presence unfortunately remained unchanged.

The effort to spread knowledge of IHL and the principles and ideals of the International Red Cross and Red Crescent Movement was stepped up and streamlined. The regional delegations in New Delhi, Bangkok, Jakarta, Hong Kong and Manila were closely involved in this long-term endeavour.

Finally, the ICRC began to set up a network of media liaison offices, the aim being not only to make its activities and principles better known but also to strengthen cooperation with National Societies wishing to give the Movement a higher profile in the Asia-Pacific region. During the year offices were set up in New Delhi for South Asia and in Sydney for the Pacific.





⊕ ICRC delegation   ⊕ ICRC sub-delegation   ⊕ ICRC office   ⊕ ICRC first-aid post   ⊕ ICRC/PRCS first-aid post  
 ⊕ ICRC hospital   ⊕ ICRC orthopaedic centre

ICRC / AR 12.94

## Indian sub-continent and Myanmar

### AFGHAN CONFLICT

The situation in Afghanistan degenerated further in 1994. Fighting broke out in Kabul on 1 January following a shift in alliances between the warring parties. In view of the precarious security situation, most development and charitable organizations and United Nations specialized agencies left Kabul but the ICRC, along with a handful of other humanitarian organizations, stayed on. The fighting in the capital was widespread until mid-February, after which it was mostly restricted to the front line. In June, however, a fresh upsurge of violence swept across the city and its outskirts and the eastern part of Kabul became the target of a new offensive. The fiercest fighting occurred in September when densely populated areas in the capital's south-western and western districts, which until then had largely been

spared, were caught in the middle of artillery exchanges. The ferocious and recurrent artillery battles left tens of thousands dead or wounded and led to the displacement of half a million civilians.

The battle for power was not confined to the capital. Violence spread to several provinces, including Baghlan, Balkh, the northern part of Badghis and Kunduz, which was particularly hard hit in 1994. Fighting in the Tagab valley, which had flared up in November 1993, persisted. In June the town of Herat, which was preparing to host a round of peace talks, was shelled, and in July fighting spread to Laghman province, which had enjoyed relative calm for over a year. Although the situation in Kandahar had improved towards the end of 1993, this south-eastern province was again the scene of fierce fighting in February 1994, and in the autumn the Taliban, a new fighting force made up of Islamic students, took control of the province and its capital.

The international community's lack of interest in Afghanistan limited the presence and funding of humanitarian and development agencies.

#### IN 1994 THE ICRC:

- provided medical assistance to over 65 hospitals and health facilities treating the war-wounded in and around Kabul as well as in the provinces;
- manufactured 1,787 prostheses and 306 orthoses in its orthopaedic centres in Kabul, Herat and Mazar-i-Sharif and fitted 1,190 patients with orthopaedic appliances;
- distributed more than 8,250 tonnes of food and other relief supplies to around 135,000 displaced people in Kabul, Jalalabad and Laghman province;
- visited 743 detainees in 14 places of detention.



Despite the intensity of the battle for power, neither of the warring parties made significant gains. Diplomatic efforts, such as missions by the UN Special Envoy and initiatives by the OIC,\* had achieved no tangible results by the end of the year. The Afghan conflict continued to take its deadly toll, largely ignored by the rest of the world.

## AFGHANISTAN

In view of the enormous needs of displaced people in Kabul and Jalalabad and, to a lesser extent, of those in Laghman province, for the first time since the beginning of the conflict the ICRC developed a major food relief programme to assist the most vulnerable groups among Afghanistan's civilian population.

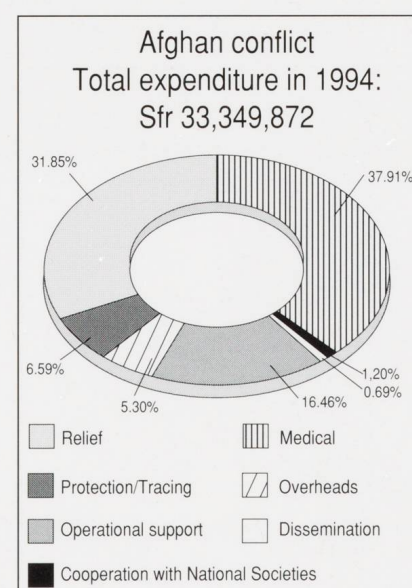
In 1994 the ICRC also provided medical supplies to 65 health facilities treating the war-wounded throughout Afghanistan. Whenever security conditions allowed, the ICRC's orthopaedic centres continued to produce orthopaedic appliances and fit amputees with artificial limbs. The ICRC's delegation in Kabul issued a publication in Dari and Pashto using Afghan art and writings in order to raise awareness among the civilian population of the danger of landmines. Around 8,000 copies were printed.

During the first few months of the year the ICRC's detention-related and tracing activities were limited because all its delegates based in Afghanistan were involved in emergency relief activities and at the same time their freedom to move around the country was seriously restricted by the fighting. However, the ICRC was able to step up its activities for detainees as from September, when delegates resumed visits to places of detention under government control and in some northern and western provinces.

In July the ICRC Delegate General for Asia and the Pacific went to Afghanistan. He discussed the ICRC's activities in the country with the Afghan President, the former Minister of Defence, the head of the Hezb-i-Wahdat, the Governor of Nangarhar province and the President of the Afghan Red Crescent Society (ARCS). Unfortunately, the Delegate General was unable to meet the head of the Hezb-i-Islami.

## Activities for the civilian population

As in previous years, the ICRC was particularly concerned about the plight of the civilian population in Afghanistan. Indiscriminate shelling in densely populated areas was a common occurrence. Medical structures also came under artillery fire and staff were injured and even killed. The ICRC repeatedly



\* OIC: Organization of the Islamic Conference

appealed to all the parties to the conflict to observe the basic rules of international humanitarian law, especially with regard to respect for the lives and possessions of civilians, medical structures and personnel.

The renewed outbreak of fighting in Kabul in January and the ensuing months of violence resulted in the displacement of over half a million people. Some 60,000 people who sought shelter in Kabul's public buildings were utterly dependent on outside assistance. Those staying with friends and family in the capital did not fare much better. The ICRC immediately conducted a survey to determine the needs of Kabul's displaced population. In cooperation with the ARCS, the ICRC distributed food, mainly donated by the World Food Programme, and other supplies to the city's most vulnerable groups.

In April the ICRC launched an emergency relief programme to assist the 60,000 people in the public buildings in Kabul, as well as 45,000 people in the Samarkhel camp in Nangarhar province. The Samarkhel camp was set up by the ICRC and the local authorities near Jalalabad following the displacement of several thousand families fleeing the fighting in the Tagab valley and Sarobi in November 1993. As of April 1994 the ICRC completely took over the running of the camp, providing its inhabitants with food, plastic sheeting, tents and kerosene.

About 5,000 displaced families from Kabul had sought shelter with the local residents of Laghman province. In order to discourage them from migrating to Jalalabad, and thereby putting a further burden on the town's economy, the ICRC distributed wheat flour on the spot. Owing to security problems on the road between Jalalabad and Kabul, the ICRC was obliged to suspend its regular convoys bringing relief supplies from Peshawar to Kabul via Jalalabad as of June. By August the ICRC could no longer provide flour for the ARCS bakery project in the Marastoon psychiatric hospital, and by the end of September the institution's supplies were virtually exhausted.

The ICRC spared no effort to negotiate the passage of road convoys carrying emergency relief and medical supplies. The convoys were at last resumed at the end of the year and the first relief trucks in six months reached Kabul in mid-December. The supplies were distributed to displaced families in the south of Kabul and to over 20,000 people still living in public buildings. In addition, the ICRC was once again able to provide flour for the ARCS bakery project.

In November and December an ICRC nutritionist again conducted a survey among Kabul's displaced population living in schools and mosques or with relatives and neighbours. The results showed that a large number of displaced people had left the capital and that the state of health of those remaining had deteriorated over the year.



## Activities for detainees

The ICRC resumed its activities for detainees in September, following a formal agreement reached earlier with the Ministry of Defence allowing delegates to visit places of detention in areas under government control. In mid-September the ICRC carried out the first visit to a detention centre in the Farkhar valley, in Takhar province. Delegates also visited places of detention in some of the northern and western provinces, as well as in Kabul, Jalalabad and the Panjshir valley. They checked on conditions of detention, registered detainees and gave them the opportunity to write Red Cross messages to their families.

The ICRC made significant progress in obtaining access to detainees in 1994. From September onwards delegates on several occasions visited detainees held by the Jumbesh in the north of the country. Towards the end of the year the ICRC was granted access to some of those held by the Hezb-i-Islami; the first visits were carried out in December. Throughout the year the ICRC kept up its efforts to gain access to *all* security detainees and combatants captured by *all* the parties to the conflict.

On a number of occasions the ICRC acted as a neutral intermediary between the parties to the conflict. For example, in February the ICRC supervised the exchange of the remains of 40 combatants killed in Kabul.

## Medical activities

Many people were killed or wounded in the successive battles for Kabul. Medical facilities were often stretched to the limit by the influx of casualties, and delegates frequently had to evacuate the wounded to hospitals across front lines. The ICRC distributed medical supplies to ten hospitals and 35 dispensaries and clinics in Kabul and the surrounding area, and continued to give substantial support to the Wazir Akbar Khan hospital (in the city centre) and the Karte Seh hospital (in south-western Kabul) in the form of medical supplies, food and fuel. These two hospitals alone treated one-third of Kabul's war-wounded during the year.

The Karte Seh hospital often treated numbers of wounded exceeding its 280-bed capacity. The front-line shift in June made access to the hospital difficult for civilians and combatants from territory controlled by the Hezb-i-Islami. The ICRC evacuated these cases to Jalalabad and increased its support to medical facilities in south-eastern Kabul.

Following the destruction of the Ministry of Health's main warehouse in August, the ICRC extended its distributions to the capital's medical facilities, using its existing stocks. After ICRC convoys were suspended in July, however, medical and relief supplies were gradually exhausted. In October the ICRC

negotiated the passage of a small convoy carrying medical materials, but many items were still lacking. The following month the ICRC chartered an Indonesian Hercules aircraft to fly in 65 tonnes of urgently needed medical supplies to airfields to the north and south of the city. These provisions were then distributed to the ten hospitals and 35 clinics and dispensaries regularly receiving ICRC assistance. In December the ICRC, with the consent of all the parties concerned, organized a road convoy which was able to bring in medicines and medical materials to replenish the ICRC's stocks.

The ICRC also distributed medical supplies to 20 health facilities in the provinces. As in 1993, support was provided for the Public Health Hospital in Jalalabad. The 240-bed surgical department treated war casualties from Kabul, the Tagab valley and the provinces of Kapisa, Laghman and Kunar. The hospital handled a greater number of surgical emergencies than in the previous year, partly owing to the presence of some 150,000 displaced people in the city. In 1994 the ICRC set up two clinics in Samarkhel camp near Jalalabad to treat displaced people from the Tagab valley.

The ICRC provided assistance to regional medical facilities treating the war-wounded where surveys indicated pressing needs. For example, the ICRC stepped up its aid to hospitals and clinics in the provinces of Faryab and Kunduz. Medical supplies were also distributed regularly to surgical facilities in the Mazar-i-Sharif/Pul-i-Khumri/Kunduz triangle, which was particularly hard hit by the fighting. In Pul-i-Khumri an ICRC nurse gave medical assistance to 3,000 displaced people from Kabul by means of a mobile clinic. Supplies were also flown into Herat in November.

Delegates supervised the rehabilitation of the clinics run by the ARCS in Chakhcharan, the capital of Ghor province, and in Mehtar Lam in Laghman province. The ICRC's first-aid posts at Mir Bachakot and Sheikhabad continued to act as clearing centres for the transfer of wounded to hospitals in Kabul. In 1994 medical staff at the two posts treated outpatients and evacuated war-wounded, often across front lines. Delegates based in Quetta (Pakistan) conducted several field missions to Spin Boldak in Kandahar province in order to supervise the setting up of an ARCS first-aid post/dispensary. They also discussed ways of improving access to Quetta hospital with the head of the local *shura* and military commanders.

## Orthopaedic programme

The ICRC's workshops in Herat and Mazar-i-Sharif functioned normally throughout the year. The Kabul programme continued to develop despite the hazardous conditions and at a cost of great effort on the part of the technicians concerned. The small workshop within the compound of the Wazir Akbar



Khan hospital in Kabul closed in January when fighting broke out in the area. Orthopaedic technicians were able to resume work there in November.

At the end of February the Ali Abad orthopaedic centre in Kabul began production again after suspending it during the worst of the clashes. The centre manufactured orthopaedic components, crutches and wheelchairs which were supplied to other ICRC workshops and to non-governmental organizations treating amputees in Afghanistan. On 15 September renewed fighting in south-western Kabul forced the centre to suspend its activities once again. Machinery and raw materials were transferred to the Wazir Akbar Khan temporary workshop.

The ICRC also set up a small orthopaedic workshop in the Jalalabad Public Health Hospital. This was due to become fully operational at the beginning of 1995.

## Water and sanitation

In 1994 sanitation conditions were so bad in Kabul that the ICRC feared an outbreak of cholera in the city. It therefore set up three temporary centres which could treat as many as 300 cholera victims at a time. The institution also supported the Ministry of Public Health's well disinfection programme by sponsoring 30 chlorination teams, providing protective clothing and equipment and assisting with the transport of chlorine bags to distribution centres.

A sanitation programme for displaced people living in Kabul's public buildings was completed by the end of the year. It included the cleaning of latrines, the removal of human waste, the provision of bathing facilities, the construction of wells and the installation and repair of pumps. All these measures helped to prevent a cholera epidemic in the Afghan capital.

In response to the increased demand for water resulting from the rise in the number of displaced people, the ICRC installed bladder tanks in the Samarkhel camp, which brought the daily supply of fresh water to 24,000 litres.

## Tracing activities

In the first half of the year the number of family messages exchanged remained low owing to the low level of detention-related activities, the difficult security conditions which severely hampered delegates' mobility, and population movements throughout Afghanistan. Red Cross messages were collected and distributed only in Kabul, Herat, Mazar-i-Sharif and Jalalabad.

However, when detention-related activities were stepped up in September, there was a substantial increase in the number of Red Cross messages exchanged between detainees and their relatives, as well as between civilians.

From September the network was enlarged to cover other areas. In all, some 1,770 messages were collected and distributed in 1994.

## Cooperation with the National Society and the Federation

In 1994 the ICRC conducted its relief activities in close cooperation with the ARCS. The National Society made trucks and volunteers available and the ICRC paid the salaries of Red Crescent staff participating in the relief operation and provided fuel and maintenance for the vehicles.

Under ICRC coordination, the British Red Cross (BRC) provided financial and technical support to a joint ARCS/BRC vehicle workshop, which opened in the Afghan capital at the beginning of September.

Since February 1993, when security conditions in Kabul deteriorated sharply, the ICRC has been supervising some of the projects previously run by the Federation, such as the five ARCS dispensaries in Kabul which remained open in spite of the fighting and the three ARCS mobile health teams which treated displaced people living in the capital's public buildings. The health teams also looked out for cases of infectious disease or malnutrition, referring people to local hospitals when necessary.

The ICRC provided protection and assistance to the patients in the Marastoon psychiatric hospital run by the ARCS. In addition, the institution financed the Marastoon bakery, which produced over 9,000 loaves of bread a day for the displaced population in Kabul. However, between September and December the ovens remained cold for lack of flour.

The ICRC helped the ARCS reopen a branch in Nangarhar province and strengthened the local Red Crescent in the provinces of Laghman, Ghazni and Ghor.

The Federation maintained a presence and conducted activities in Herat and Mazar-i-Sharif to strengthen the local ARCS branches.

## Dissemination

Afghan radio stations and the British Broadcasting Corporation (BBC) put out broadcasts on matters such as the rules for combatants, respect for medical facilities and the ICRC's daily activities. The delegation produced two new series of radio spots in Dari, Pashto, Uzbek and Turkmen. In cooperation with the ICRC, WHO, UNICEF, UNESCO, UNIFEM\* and UNDCP\*, a serialized drama conveying basic humanitarian messages was broadcast by the BBC

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\* UNIFEM: United Nations Development Fund for Women

\* UNDCP: United Nations International Drug Control Programme



World Service. The delegation in Afghanistan established contacts with the major international media based in Kabul, Herat, Mazar-i-Sharif, Jalalabad and Peshawar (Pakistan).

In April the ICRC held a three-day refresher course for ARCS volunteers on the Red Cross and Red Crescent principles and ICRC operations. It also organized a dissemination programme for all the staff working at the Public Health Hospital in Jalalabad.

As part of their daily routine, delegates explained the basic principles of international humanitarian law to people manning check-points on main roads, to enhance the security of ICRC operations.

## PAKISTAN

A headquarters agreement was signed on 21 March between the government of Pakistan and the ICRC defining the institution's status in Pakistan and granting it the usual facilities.

The delegation in Pakistan continued to provide essential support for the ICRC's operations for the victims of the Afghan conflict. Delegates in Islamabad maintained close contacts with the authorities, diplomats and international organizations with a view to facilitating the ICRC's work in Afghanistan. The sub-delegation in Peshawar served as a logistics base for medical and relief activities in Afghanistan and for the hospital in Quetta. Support was also given to the paraplegic centre in Peshawar run by the Pakistan Red Crescent Society (PRCS).

## Activities for detainees

In the course of the year delegates conducted a series of visits to 29 Afghan detainees held in Baluchistan and the North West Frontier Province. They collected messages from some of them for their families and delivered replies.

## Medical activities

The ICRC continued to support the PRCS paraplegic centre in Peshawar. The centre provided treatment for a monthly average of 60 patients, one-third of whom were Afghan nationals. In the course of the year more than 250 patients were admitted.

As in the previous 11 years, the ICRC ran the surgical hospital in Quetta, which continued to treat war casualties from south-western Afghanistan, although access to the province and town of Kandahar remained difficult. In total, the hospital admitted 1,256 patients, carried out 3,175 surgical

operations and gave 2,766 outpatient consultations. In 1994 various National Societies seconded staff to the ICRC hospital: the Japanese Red Cross provided one surgical team and the British Red Cross provided one surgeon to the hospital for the whole year. At the end of April the hospital's chief surgeon gave a lecture on war surgery at the first Military Medicine Conference organized by the armed forces in Rawalpindi.

Together with the PRCS, the ICRC maintained a first-aid post in Chaman where the wounded from Kandahar province in Afghanistan received basic medical care before being transferred to Quetta hospital by ICRC ambulance.

## Tracing activities

The delegation opened 34 tracing requests and collected and distributed 468 Red Cross messages. Most of these were exchanged between detainees and their families and between Bosnian refugees offered asylum in Pakistan and their relatives. The tracing service also issued travel documents for 725 refugees accepted for resettlement in host countries.

## Dissemination

The delegation in Pakistan supervised the translation of material used for the promotion of international humanitarian law. The ICRC also co-financed a serialized drama on BBC radio. Basic humanitarian messages concerning the treatment of civilians and prisoners and security for humanitarian activities were introduced into this serial, which had a large daily audience throughout Afghanistan and in Pakistan. The broadcasts were backed up by a comic carrying the same story line.

In April the Institute for Strategic Studies in Islamabad invited the ICRC to attend a regional seminar on the subject of "The Indian Ocean: security and stability in the post Cold-War era". The head of delegation in Pakistan and an ICRC legal expert from Geneva presented a paper on the law of war at sea.

Pakistan's Director-General of Military Operations attended an ICRC symposium on humanitarian action and peace-keeping operations which was held in Geneva in June<sup>1</sup>.

The staff of the sub-delegation in Quetta was increased to enable the ICRC to step up its dissemination of international humanitarian law in the region. New programmes were introduced for schools, colleges and the local Red Crescent branch, and initial contacts were established with the staff college in Quetta and the University of Baluchistan.

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<sup>1</sup> See p. 255.

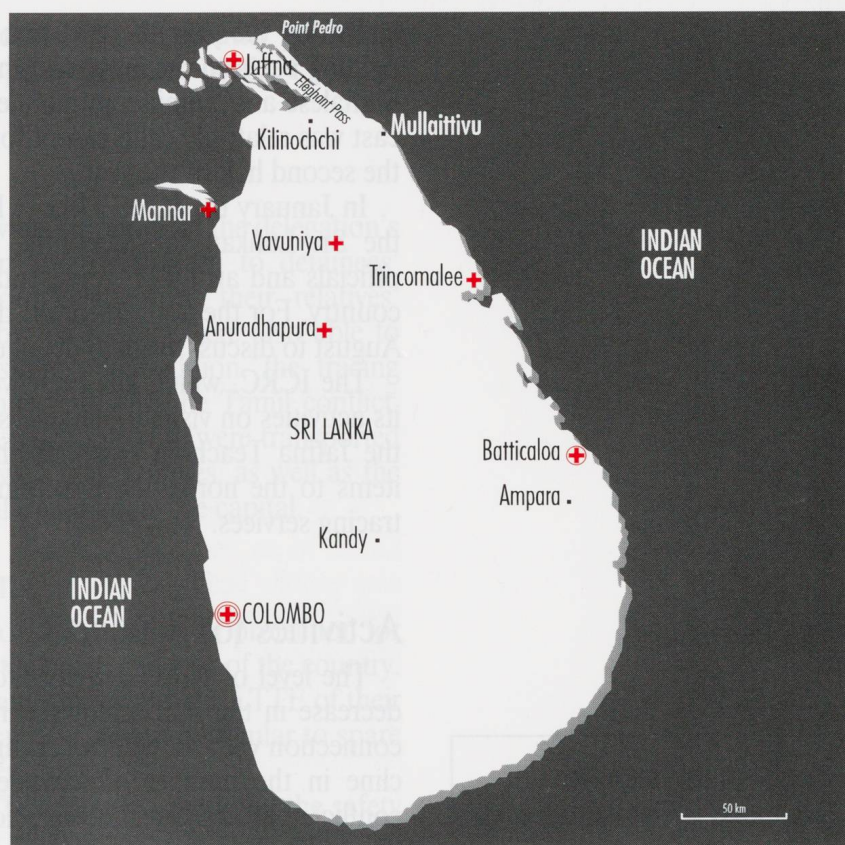


## SRI LANKA

The year brought major political change to Sri Lanka. After 17 years in power the United National Party lost the parliamentary elections on 16 August. The leader of the victorious People's Alliance coalition went on to win the presidential elections in November. The new government pledged to find a settlement for the internal armed conflict and expressed its willingness to hold talks with representatives of the LTTE.\* The Emergency Regulations were repealed in southern and central parts of the country but remained in force in the north and east. At the end of August the government partially lifted the embargo imposed on LTTE-controlled territories. This gesture was welcomed by the LTTE, which released ten prisoners and also stated its willingness to take part in peace talks.

The first round of negotiations between the new government and the LTTE took place in Jaffna on 13 and 14 October. The ICRC acted as a neutral intermediary in an exchange of correspondence between the Prime Minister and the leader of the LTTE concerning the organization of the meeting. Following these talks, the Sri Lankan government released 18 prisoners, who were handed over to ICRC delegates to be returned to their homes. For its part, the LTTE released ten more prisoners.

Whilst addressing an election rally in Colombo on 25 October, the opposition's candidate in the presidential elections was killed in a bomb blast along with 53 other people. This led to a temporary suspension of the peace talks. Following the presidential elections, the exchange of letters via the ICRC was resumed and plans were made to hold a meeting at the beginning of 1995 with a view to agreeing on a cessation of hostilities.



ICRC / AR 12.94

\* LTTE: Liberation Tigers of Tamil Eelam, Tamil opposition



During the year the situation in Sri Lanka was characterized by low-level fighting between the army and the LTTE in the north. Fishermen belonging to Sinhalese and Tamil communities were often the victims of these clashes. The east was relatively calm except for some attacks and ambushes reported during the second half of the year.

In January the ICRC Deputy Delegate General for Asia and the Pacific met the Sri Lankan President, the Minister of Foreign Affairs, senior military officials and an LTTE representative to discuss the ICRC's operations in the country. For the first time ever, the head of delegation met the LTTE leader in August to discuss visits to detainees and other ICRC programmes.

The ICRC, which has been working in Sri Lanka since 1989, concentrated its activities on visits to detainees, the protection of the civilian population and the Jaffna Teaching Hospital, the safeguard of vessels transporting essential items to the north, the dissemination of international humanitarian law and tracing services.

## Activities for detainees

The level of ICRC activities for detainees fell slightly in 1994 owing to the decrease in the number of security detainees. Very few arrests were made in connection with the JVP\* uprising of 1987-1990 and there was a significant decline in the number of new detainees held in connection with the LTTE conflict. Throughout the year, however, the ICRC made constant representations to both parties regarding the treatment and living conditions of detainees.

At the end of the year the newly formed government appointed a new commission to screen hundreds of people held under detention orders and not yet convicted and to make recommendations to the Supreme Court as to the legal action to be taken.

Delegates continued to visit places of detention under government jurisdiction throughout the country, including prisons, detention camps, police stations and military camps. They monitored conditions of detention, focusing on the way detainees were treated in physical and psychological terms. They checked the detainees' state of health, where necessary, and facilitated the exchange of news between them and their families by means of Red Cross messages.

The ICRC also pursued its visits to people held by the LTTE, giving them the opportunity to write messages to their relatives. At the end of the year, the

### IN 1994 THE ICRC:

- had access to 2,469 detainees in 400 places of detention;
- transported to the Jaffna peninsula a monthly average of 9,200 tonnes of essential goods supplied by the government;
- solved 712 tracing cases, exchanged 15,968 Red Cross messages, reunited 217 families and transported 1,229 people between the Jaffna peninsula and the south;
- provided medical support to nine mobile health clinics run by the Sri Lanka Red Cross Society;
- conducted an extensive dissemination programme throughout the country, reaching 7,300 people, including over 950 officers and military instructors, 935 policemen and around 570 members of the LTTE and Tamil political organizations.

\* JVP: Janatha Vimukti Peramuna party, Sinhalese opposition



ICRC was still visiting 19 policemen captured in 1990, 23 security personnel and 24 fishermen. The ICRC also helped 27 people released by the LTTE to return to their homes.

## Tracing activities

The tracing service in Sri Lanka mainly provided support for the delegation's detention-related activities. If no notification had been given to detainees' families by the authorities, the ICRC informed them of their relatives' incarceration. Members of families split up by the conflict were also able to contact each other through Red Cross messages. In addition, the tracing service handled tracing requests made in connection with the Tamil conflict. Delegates also accompanied children and elderly people who were transported between Jaffna and Colombo to be reunited with their families, as well as the sick or wounded in need of specialized medical treatment in the capital.

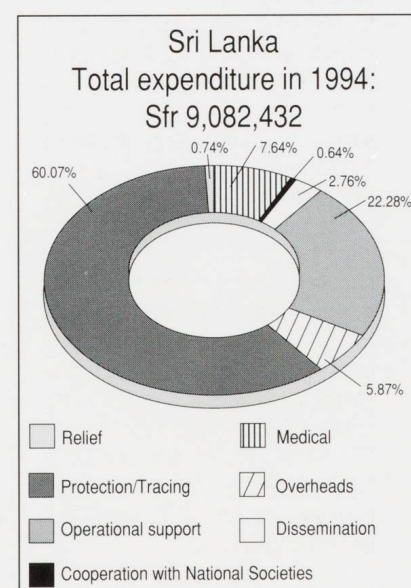
## Activities for the civilian population

Through their presence ICRC delegates provided a degree of protection for the civilian population in the conflict zones in the north and east of the country. Whenever necessary, the ICRC reminded the authorities and the LTTE of their obligation to respect international humanitarian law, and in particular to spare civilians and their property during military operations.

The ICRC continued to protect the Jaffna Teaching Hospital and the safety zone around it. This zone was established in 1990 with the consent of all the parties in order to ensure that, in the event of fighting, the sick and wounded would have access to medical care and the hospital area would be spared from attack.

In January the ICRC ceased its regular truck convoys to Kilinochchi and Mullaittivu, as the government, NGOs and private traders were able to transport enough goods by road to these areas. However, the ICRC occasionally used the red cross emblem to protect trucks carrying medical supplies for health facilities in Kilinochchi.

As the passage of goods and people to and from the Jaffna peninsula was still restricted in 1994, the population there remained dependent on assistance shipped in under ICRC protection. The institution continued to protect government-chartered cargo vessels carrying goods supplied by the government and NGOs from the south to government representatives in the north. The ICRC also protected a government-chartered passenger ship which transported civilians from Trincomalee to Point Pedro. A vessel chartered by the ICRC made a weekly round trip from Trincomalee to Point Pedro, mostly carrying people requiring medical treatment in Colombo hospitals or wishing to be



reunited with their families. The ship also transported medical supplies sent by the government to the Jaffna Teaching Hospital and to the Regional Directorate of Health Services.

## Medical activities

The ICRC's medical activities mainly consisted in acting as a link between the Ministry of Health in Colombo and the Jaffna Teaching Hospital and other medical facilities in the north in order to ensure the delivery of sufficient medical supplies. It also monitored the medical situation in other conflict areas.

The ICRC maintained an emergency stock of medical materials on the Jaffna peninsula for use in the event of a sudden influx of war-wounded.

## Cooperation with the National Society

In September 1994 the Norwegian Red Cross brought its programmes in Sri Lanka to an end and the ICRC therefore took over full responsibility for the nine mobile health clinics set up under the cooperation agreement reached in 1992<sup>2</sup>. The Norwegian Red Cross continues, however, to provide funds for this programme.

Support was given to National Society branches in the north and east of the country, including Jaffna, Mannar, Kilinochchi, Mullaittivu, Trincomalee, Batticaloa and Ampara, to help them meet the needs of displaced people. ICRC assistance took the form of emergency food supplies, kitchen utensils, clothing and materials for the construction and repair of shelters. In Jaffna the ICRC and local Red Cross branch maintained a stock of food supplies sufficient for some 500 families in case of emergency.

## Dissemination

The ICRC continued its efforts to promote understanding of and respect for international humanitarian law among the field units of the armed forces, the police and the LTTE. To this end, an instruction manual entitled *Train your men to respect the law of war* was produced in English, Sinhalese and Tamil. This was given to over 600 military instructors and LTTE representatives and was accompanied by short lectures, case studies and practical exercises. The manual was compiled with the cooperation and advice of the Sri Lankan military and police instructors. In addition, 15,000 booklets on the law of war for soldiers were printed in Sinhalese and Tamil and distributed to members of the armed forces and the LTTE.

<sup>2</sup> See the ICRC's 1992 Annual Report.



Seminars on international humanitarian law were also organized for National Society staff and the general public.

## NEW DELHI

### Regional delegation

(Bangladesh, Bhutan, India, Maldives, Myanmar, Nepal)

In May the ICRC set up a media liaison office in New Delhi covering southern Asia. Throughout the year the media liaison officer established a network of contacts among the international and Indian media and among the press attachés of diplomatic missions. The office issued occasional press releases, consolidated its contacts with the regional and international press and organized sessions for the media on the ICRC's mandate and activities.

## BANGLADESH

In February and July the ICRC and the Bangladesh Red Crescent Society conducted a joint mission to the Chittagong Hill Tracts, where they assessed the situation of the first returnees from the refugee camps in the Indian state of Tripura. The ICRC held talks with local officials and with a number of returnees. On the basis of the findings, the ICRC did not consider assistance or protection activities for the returnees necessary.

However, despite the improvement of the security situation, political problems persisted in the Chittagong Hill Tracts and the potential for further conflict remained. As a result the refugees made no significant move to return to their homeland.

## BHUTAN

Since January 1993 the ICRC has been visiting security detainees in Bhutan in accordance with its standard procedures. In May and October 1994 delegates conducted a round of visits to all people detained for "anti-national" activities. The ICRC visited a total of 168 detainees, 13 of whom were seen for the first time, in two places of detention in Bhutan.

Following each series of visits, the ICRC team was granted an audience with King Jigme Singye Wangchuck of Bhutan and had working sessions with the Minister of Home Affairs and senior officials from the ministry. In May delegates also conducted a survey in four southern districts of Bhutan (Sarbhag, Chirang, Chukha and Samchi), visiting hospitals, medical facilities and seven places of detention in the region. There were no detainees coming within the ICRC's mandate.

## INDIA

In view of the continuing unrest in the state of Jammu and Kashmir, the ICRC pursued its dialogue with the authorities on the subject of ICRC activities in this region. In February the ICRC Delegate General for Asia and the Pacific met the Home Secretary and officials of the Ministry of External Affairs, who authorized the ICRC to conduct a survey in Jammu and Kashmir. During the survey, which took place from 21 to 31 March, a team comprising the regional delegate, a doctor, a delegate and an interpreter went to the towns of Srinagar, Uri, Baramulla, Sopore and Anantnag in Kashmir, and to Ramban, Udhampur and Jammu. The team visited hospitals, met a number of officials, including the Governor of Jammu and Kashmir, and talked with politicians and over 300 families. The ICRC also assessed conditions in camps for displaced Kashmiris near Jammu. Following the mission to Jammu and Kashmir, the ICRC conducted a similar survey in Pakistan-administered Kashmir.

In May the ICRC submitted an offer of services to the Indian government with proposals for ICRC emergency medical evacuations, the dissemination of international humanitarian law, tracing activities and access to all people arrested in connection with the situation in Kashmir. The institution also proposed working together with the Indian Red Cross Society, particularly with regard to assistance to displaced people living in camps.

In June the Delegate General for Asia and the Pacific paid a second visit to New Delhi. He met the newly appointed Home Secretary and officials of the Ministry of External Affairs to pursue the discussions between the Indian authorities and the ICRC regarding humanitarian aspects of the situation in Jammu and Kashmir. In September the Indian government accepted in principle the ICRC's offer to visit detainees. Subsequently, the regional delegate had several working sessions with government officials regarding the ICRC's standard procedures for visits to places of detention. In November the ICRC handed over a draft Memorandum of Understanding to the Indian government.

Meetings were also held with senior representatives of the Indian Red Cross concerning possible ICRC support for the National Society's future work in Jammu and Kashmir.

## Dissemination

Significant progress was made in 1994 in the field of dissemination of international humanitarian law among India's police and paramilitary forces. In February the ICRC organized a three-day seminar at the National Police Academy in Hyderabad. It was attended by the heads of the major paramilitary



forces such as the Border Security Force, the Indo-Tibetan Border Police and the Central Reserve Police Force, and by high-ranking police officers. The course focused on international humanitarian law and rules of conduct for paramilitary and police forces in the maintenance of law and order in situations of internal disturbances and political unrest.

In July the ICRC set up another three-day conference at the National Police Academy in Hyderabad for 15 high-ranking officers of the paramilitary and police forces. A three-day seminar on international humanitarian law was also held in November at the Border Security Force Academy in the state of Madhya Pradesh. Over 20 battalion commanders of operational units took part.

In July the Indian Red Cross organized a symposium for all its branches in New Delhi and invited the ICRC to attend. The National Society decided to develop a dissemination programme, in cooperation with the ICRC, at national level for Red Cross personnel. Two seminars were held in December, in New Delhi and Madras respectively, for representatives of 11 state branches of the National Society.

## MYANMAR

Discussions on ICRC access to people detained because of the prevailing situation in the country continued during the year. Although no agreement with the authorities had been reached by the end of 1994, some progress could be noted, the government of Myanmar having repeatedly and publicly expressed the wish to cooperate with the ICRC in this respect.

The dialogue on the conditions necessary for ICRC visits to detainees, which the regional delegation had initiated during the second part of 1993, continued in 1994. In May the ICRC Delegate General for Asia and the Pacific had a series of discussions with high-ranking officials in the capital regarding access to places of detention throughout the country. At the request of the Minister of Home Affairs, these meetings were followed in June by a formal proposal setting up a framework for ICRC activities in this regard.

In September the regional delegate attended meetings at the Ministries of Home Affairs and Foreign Affairs, and was subsequently informed that the ICRC's proposal was under serious consideration by the government.

## Medical activities

The ICRC upgraded techniques for the manufacture of artificial limbs by introducing the use of polypropylene in the four government orthopaedic workshops. Those in Mingaladon and Maymyo are run by the Ministry of Defence, and the other two, in Yangon and Mandalay, by the Ministry of

Health. In all, 1,444 prostheses and 537 orthoses were manufactured and 1,020 new patients were fitted with an artificial limb. The ICRC supervised production and began a training programme for 25 civilian and military technicians. ICRC participation in this orthopaedic project should be completed by the end of April 1995.

The ICRC extended its joint programme with the Ministry of Health and the Myanmar Red Cross Society whereby civilian amputees from the border areas were selected, transported, housed and fitted with orthopaedic appliances.

## Dissemination

Thanks to the relations maintained with the Myanmar authorities in 1994, progress was made in the field of dissemination of international humanitarian law to the armed forces and National Society staff. In November the ICRC organized a first workshop on the law of war and the basic principles of international humanitarian law for 15 military instructors of Myanmar's defence forces. One of the officers who had attended the San Remo course on international humanitarian law in November 1993 carried out training sessions in the Defence Services Academy for over 100 fourth-year cadets.

A team consisting of representatives from the ICRC and the Myanmar Red Cross gave several talks on Red Cross principles and international humanitarian law. These included a session in Myaungmya (Irrawaddy delta) and Prome, a first seminar at Dagon University and a session for 150 Red Cross volunteers from Karen state.

## NEPAL

The ICRC renewed contacts with the Ministries of Home Affairs and Foreign Affairs as part of its effort to encourage Nepal to ratify the Additional Protocols.

The regional delegation carried out two missions to camps for Bhutanese refugees in eastern Nepal in April and October, to review the Nepal Red Cross Society's system for collecting and distributing mail between detainees in Bhutan and their relatives in the refugee camps.

In September ICRC delegates and a legal consultant organized a three-day seminar for police instructors at the National Police Academy in Kathmandu. Topics under discussion included the rules of conduct for police forces responsible for maintaining law and order in situations of tension, the fundamental principles of international humanitarian law and Red Cross activities. The booklet *Rules of behaviour in combat* was translated into Nepalese by the National Society.



## South-East Asia

### CAMBODIA

In addition to persistent political instability and economic problems, Cambodia was still plagued by sporadic fighting in 1994 and thousands of civilians were directly exposed to the hostilities. In February and April the Cambodian Royal Armed Forces carried out a major offensive on the Khmer Rouge strongholds of Anlong Veng and Pailin. These towns were retaken shortly afterwards by the Khmer Rouge. In May and August Battambang and Banteay Meanchey provinces were the scene of violent clashes between the Khmer Rouge and government forces. These military operations took a heavy toll of civilians and led to the displacement of thousands of people.

In May round-table talks were held in Pyongyang, in the Democratic People's Republic of Korea, between King Sihanouk and Democratic Kampuchea (Khmer Rouge) representatives with a view to finding a peaceful settlement to the internal armed conflict in Cambodia. No agreement was reached. The ICRC took this opportunity to remind the parties to the conflict of their obligation to respect international humanitarian law and urged them to cooperate with the institution.

In July the National Assembly unanimously passed a bill outlawing the Democratic Kampuchea party. The government offered an amnesty valid until mid-January 1995 for Khmer Rouge combatants wishing to surrender, and some 5,000 of them were reported to have defected in the course of the year. Following its banishment, the Democratic Kampuchea party formed a provisional government in the north. Although access to the zones it controlled was extremely difficult, the ICRC maintained a dialogue with its Khmer Rouge contact.

In addition to the ongoing conflict with the Democratic Kampuchea party, the government had to face trouble from other quarters. At the beginning of



⊕ ICRC delegation

⊕ ICRC sub-delegation

⊕ ICRC office

⊕ ICRC orthopaedic centre / workshop

ICRC / AR 12.94

#### IN 1994 THE ICRC:

- opened 2,526 tracing files, resolved 383 cases and exchanged 4,133 Red Cross messages;
- had access to 129 prisoners;
- carried out 3,300 operations in the Mongkol Borei hospital;
- opened four blood transfusion centres;
- manufactured 1,519 prostheses and 50 orthoses and fitted 752 patients with artificial limbs.



July soldiers loyal to Prince Chakrapong and Sin Song, the former Minister of the Interior, carried out an abortive coup. The main protagonists escaped and were finally sentenced *in absentia*.

Anti-personnel mines, concentrated mostly in the north and north-west of Cambodia, continued to wreak havoc, killing and maiming civilians and holding back economic growth and the rebuilding of the country's infrastructure. Despite major clearance efforts, vast expanses of land remained infested with mines. The ICRC supported all initiatives designed to raise awareness of the danger of mines among the civilian population and to discourage their use by the armed forces and the Khmer Rouge.

By means of its medical, orthopaedic, tracing and dissemination programmes the ICRC continued throughout the year to relieve and wherever possible to prevent the suffering of the Khmer people. However, as the troubles in Cambodia dragged on for another year, it was clear that the international community was losing interest in their plight.

## Activities for detainees

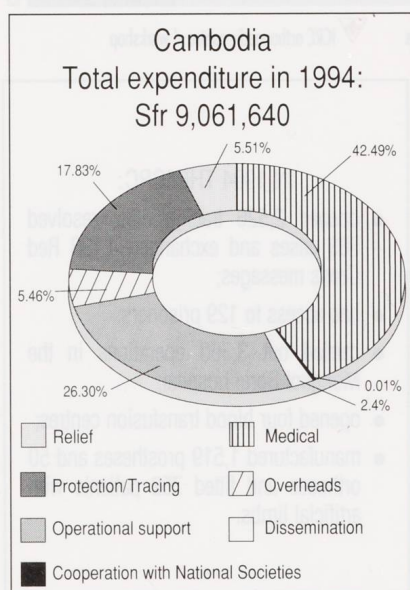
The ICRC continued to visit detainees coming within its mandate held in places of detention run by the Ministry of the Interior in Phnom Penh and in the provinces. Visits were conducted in accordance with the ICRC's standard procedures and detainees were given the opportunity to write Red Cross messages to their families.

Some progress was made regarding access to Khmer Rouge combatants captured by the Cambodian Royal Armed Forces. The army notified the ICRC of the capture of a number of Khmer Rouge combatants in the north-western provinces of Battambang and Banteay Meanchey and these were duly visited by delegates.

The ICRC's water and sanitation projects launched the previous year in five places of detention in Phnom Penh and 13 in the provinces were completed in 1994.

On several occasions ICRC delegates had access to groups of Khmer Rouge combatants who had given themselves up to the authorities. However, defectors were not necessarily notified to the ICRC and delegates did not visit them on a regular basis.

The ICRC was also notified of two prisoners held by the Khmer Rouge, and delegates visited them in Khmer Rouge-controlled territory. These prisoners and 14 others were released at the beginning of April. With the agreement of both parties, the ICRC confirmed the prisoners' wish to return to government-controlled territory and subsequently accompanied them via Thailand.





## Activities for the civilian population

Between March and June the ICRC provided medical assistance to the war-wounded and to displaced people fleeing the fighting in the north-west. Delegates distributed blankets to 380 displaced families in a camp in Khla Koun, near Mongkol Borei, and set up a dispensary, which was later handed over to the provincial authorities.

## Tracing activities

The ICRC's tracing service in Cambodia proved effective and successful in 1994, with one-third of cases resolved.

The reunified Cambodian Red Cross made personnel available to the ICRC for its tracing activities in the country. Red Cross messages were exchanged between detainees and their families and contact was restored between people living in Cambodia and their relatives abroad. The number of tracing requests remained stable in 1994.

Tracing delegates spared no effort to inform people living in Cambodia of the possibility of tracing family members in other parts of the country and abroad. UNHCR's database relating to the 1993 repatriation process was due to be added to the ICRC's database in Phnom Penh in early January 1995. This should considerably enhance the ICRC's ability to trace separated family members living in different parts of Cambodia.

## Medical activities

As in previous years, the ICRC provided medicines and other medical supplies to the Mongkol Borei hospital in Banteay Meanchey province. As a consequence of the fighting in the north-west, admissions of casualties were at their highest in May. However, the hospital coped well with the emergency. Extensive on-the-job training was given to local surgical teams and by July the last remaining ICRC surgeon was able to leave the hospital in capable hands. Two ICRC nurses, however, continued to supervise the running of the hospital, while the ICRC took steps to find a reliable partner to take over the supervision of surgical activities. Although local staff can now handle emergencies, the hospital requires assistance which organizations involved in development aid are better suited to provide.

The ICRC also assisted the military hospital in Battambang, where a sanitation team carried out repairs to the operating theatre's water-supply

system, and took part in a war-surgery seminar held in Calmette hospital in Phnom Penh in June for some 80 doctors.

The ICRC's orthopaedic centre in Battambang continued to assemble prostheses and fit amputees, including those from Khmer Rouge-controlled zones. A new ICRC workshop in Phnom Penh, financed and built by the Swiss Disaster Relief Unit, was inaugurated in June. The workshop manufactured orthopaedic components and supplied them to the Battambang centre and to various other non-governmental organizations also producing prostheses, such as the Cambodia Trust, Indochina Project and Handicap International.

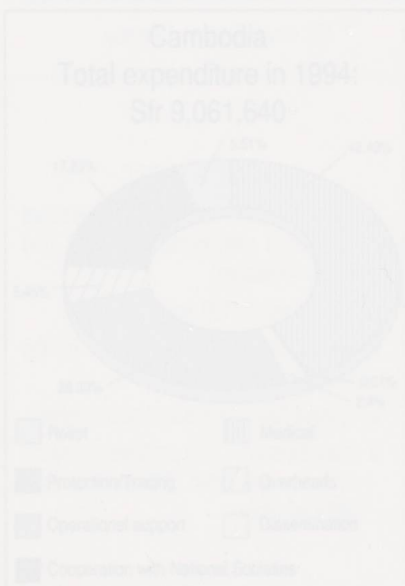
In association with the Ministry of Health, the ICRC continued to run the National Blood Transfusion Centre in Phnom Penh and to supervise the ten provincial centres managed by various non-governmental organizations. The blood was subjected to rigorous screening, including tests for HIV. As in the past, it proved extremely difficult to recruit blood donors for the transfusion programme. The ICRC acquired a bus which went from place to place in the capital collecting blood from donors.

## Cooperation with the National Society

After two years of discussions and with the help of the Federation and the ICRC, the Federative Committee of the Cambodian Red Cross factions formed a united National Society. The reunified Cambodian Red Cross held its first General Assembly in April, during which it adopted a new constitution and elected its Central Committee. The National Society worked closely with the ICRC in the fields of tracing and dissemination of international humanitarian law.

## Dissemination

The ICRC continued organizing regular dissemination sessions for government troops and the police. Because of the difficulty in obtaining access to Khmer Rouge-controlled zones, delegates were not able to conduct extensive dissemination activities in these areas. The Ministry of Defence agreed in principle to having their own instructors teach officers the basic principles of international humanitarian law, but this activity was limited owing to the major military offensives. In order to increase the dissemination material available, the delegation supervised the translation of a number of publications on international humanitarian law and the Red Cross and Red Crescent Movement into Khmer.





## BANGKOK

### Regional delegation

(Laos, Thailand, Viet Nam)

## LAOS

The ICRC strengthened its links with the Lao Red Cross by organizing a tracing workshop for National Society staff.

## THAILAND

As in previous years, the ICRC regional delegation in Bangkok monitored the situation in two areas: the borders with Myanmar and Cambodia.

The ICRC encountered difficulties in monitoring the situation of people displaced by military operations inside Myanmar and on the Thai border.

The ICRC field officer based in Aranyaprathet continued to follow developments along the Thai-Cambodian border from mid-April. In Tapraya he assessed the living conditions of some 1,000 Cambodian civilians who had temporarily sought refuge on Thai territory owing to the fighting in north-western Cambodia. In mid-November the ICRC medical coordinator based in Phnom Penh conducted a survey of medical facilities in Thailand near the Thai-Cambodian border. As a result, the ICRC built up an emergency stock of medical supplies in Aranyaprathet to help Thai medical facilities in the area cope with any influx of Khmer war-wounded during the next dry season.

Following the Cambodian Royal Armed Forces' offensive on Pailin and other Khmer Rouge strongholds, thousands of civilians fled to Thailand. The ICRC was denied access to these people before the Thai authorities allowed them to return to Khmer Rouge-held areas in Cambodia. As in previous years, access to the civilian population in zones controlled by the Khmer Rouge proved virtually impossible.

In the absence of Cambodian diplomatic representation in Thailand, the ICRC continued to visit illegal Khmer immigrants held in detention. Delegates gave them the opportunity to maintain contact with their families in Cambodia through Red Cross messages.

Together with the Thai Red Cross Society, the ICRC organized a course on international humanitarian law at the army, navy and air force Staff College and at the Training Institute for Foreign Affairs.

## Tracing activities

The ICRC's tracing service in Bangkok continued to handle tracing requests for former Cambodian refugees and processed replies coming in from National

Societies around the world, particularly from Australia, France and the United States. As in the past, it cross-checked tracing requests from Cambodia in its card index, which serves as a data bank for the Cambodian conflict. A quarter of these cross-checks produced positive results.

The Bangkok tracing office also dealt with a few tracing requests and Red Cross messages relating to Thailand, Laos and Viet Nam.

## VIET NAM

In 1994 the ICRC renewed its efforts to obtain access to security detainees held by the Vietnamese authorities. To this end, the Delegate General for Asia and the Pacific went to Hanoi in December where he met government officials and senior representatives from the Ministries of Foreign Affairs and of the Interior. Other topics raised included Viet Nam's accession to Additional Protocol II and dissemination of international humanitarian law among the armed forces.

The regional delegate carried out a number of missions to Viet Nam to supervise the translation of Additional Protocol II, to organize dissemination sessions for the army, local authorities and National Society staff and to discuss the ICRC's orthopaedic centre and detention matters with the authorities. The regional delegate also went to four provinces in northern Viet Nam to visit the main Red Cross branches in these areas. He had talks with leaders of the local Red Cross on matters such as the National Society's activities in the region and the conditions necessary for a dissemination course for Red Cross staff and the local authorities.

The ICRC organized a five-day course in Hanoi for 60 high-ranking officers of the Vietnamese army and two seminars given in May and July for 70 representatives of provincial and district Red Cross branches. Together with the National Society, the ICRC called a press conference in Hanoi for the Vietnamese media on 8 May, World Red Cross and Red Crescent Day. The conference focused on the main achievements and challenges of the Movement.

The ICRC's orthopaedic centre in Ho Chi Minh City reached a good level of production in 1994 thanks to the application of the polypropylene technique and the thorough training of its orthopaedic technicians. In 1994 the centre manufactured 3,345 prostheses and fitted 2,563 patients with artificial limbs. The cooperation agreement between the ICRC and the Ministry of Labour, War Invalids and Social Welfare concerning the centre was renewed on 3 May and came to an end, as planned, on 31 December. After five years of involvement, the ICRC did not propose to renew the agreement again as all the necessary expertise had been transferred to the centre. However, the ICRC offered to maintain its presence there until the end of March 1995.



## Far East

### HONG KONG

#### Regional delegation

(People's Republic of China, Hong Kong, Japan, Democratic People's Republic of Korea, Republic of Korea, Macao, Mongolia, Taiwan)

In 1994 the regional delegation in Hong Kong focused on cooperation with the various National Societies and dissemination of international humanitarian law, particularly among the armed forces but also for other specific groups such as the media, civil servants and academic circles. To this end, the delegation developed numerous contacts and organized a number of workshops and seminars in the region. No effort was spared to encourage countries in the area that had not yet done so to ratify the Additional Protocols.

The regional delegation continued to work together with experts from China, Hong Kong and Taiwan in order to establish a glossary of international humanitarian law and Red Cross and Red Crescent Movement terminology: after three years their efforts culminated in the publication of the Chinese version of *Basic rules of the Geneva Conventions and their Additional Protocols*.

From Hong Kong the ICRC coordinated tracing activities in the region. These included handling tracing requests, issuing travel documents, preparing family reunifications and supervising the exchange of Red Cross messages.

At the end of October representatives from the Red Cross Societies of China, the Democratic People's Republic of Korea, the Republic of Korea and Mongolia took part in a two-week study visit to ICRC headquarters in Geneva.

### PEOPLE'S REPUBLIC OF CHINA

Delegates conducted several missions to China during the year. Following the opening of a formal dialogue in November 1993, the Delegate General for Asia and the Pacific held talks with the authorities in January with a view to finding a common basis for a possible agreement concerning visits to security detainees. On this occasion, the ICRC's representatives also had discussions with the Deputy Minister of Foreign Affairs. In April the first meeting between ICRC and Chinese experts took place in Beijing. Talks focused on the standard procedures necessary for ICRC visits to detainees and on the national legal requirements regarding these visits.

The regional delegation further developed relations with the People's Liberation Army, particularly in the field of dissemination. In March the regional delegate took part in a series of meetings with representatives of the Political Commission of the People's Liberation Army on dissemination programmes for military officers. Subsequently, the ICRC provided the armed forces with teaching materials. At the beginning of June two Chinese officers attended the San Remo Institute seminar on naval warfare held in Livorno, Italy.

The ICRC strengthened its ties with the Red Cross Society of China (RCSC). The ICRC Vice-President met the National Society's new Secretary-General in Beijing in October and on a later date in Geneva. Discussions centred on the promotion of Red Cross principles.

Throughout the year the regional delegate maintained contacts with the RCSC and the Hong Kong and Macao branches of the Red Cross concerning preparations for "Red Cross in my mind", a national drawing and essay competition aimed at raising humanitarian awareness among Chinese youth. The theme of this competition was the Red Cross principles and image. To mark its official launch in November, the head of the regional media liaison office in Bangkok held a workshop in Beijing for the media and representatives of the Red Cross. The two-day workshop was attended by 35 journalists, the President of the Macao branch of the Red Cross, staff of the Hong Kong chapter of the British Red Cross and 66 senior representatives of the RCSC.

Together with the RCSC, the regional delegate organized the first training course on international humanitarian law and Red Cross principles for the management level of 30 RCSC branches. The seminar, which was held in June in Changsha (Hunan province), was attended by more than one hundred people, including Red Cross staff from Macao and Hong Kong.

In August ICRC delegates, accompanied by a member of the International Department of the RCSC, carried out a mission to the Xinjiang region and Jilin province for the first time. They met representatives of the provincial Red Cross and the local authorities; they also visited the border area between China and North Korea.

## HONG KONG

The drawing and essay competition "Red Cross in my mind" occupied an important place on the regional delegation's agenda (see above). Representatives of the local Red Cross attended the seminar on Red Cross principles and international humanitarian law held in China in June.



## JAPAN

The regional delegation concentrated on the promotion of international humanitarian law in cooperation with the Japanese Red Cross Society (JRCS). Efforts to persuade the government to ratify the Additional Protocols were pursued. In July the ICRC delegates went on a mission to Japan to discuss with the National Society the possibility of setting up a branch of the media liaison office in Tokyo. At the end of 1994, these issues were still under discussion.

In February the Delegates General for Asia and the Pacific and for Eastern Europe and Central Asia went to Tokyo and met representatives of the Ministry of Foreign Affairs and the JRCS Vice-President to discuss current humanitarian issues. A similar visit by the Delegate General for the Middle East and North Africa took place in October.

The National Society invited the regional delegate to take part in a training course for nurses and nursing teachers held in Tokyo in November.

## DEMOCRATIC PEOPLE'S REPUBLIC OF KOREA

While closely following the tense situation on the Korean peninsula, the ICRC maintained contacts with the authorities and Red Cross staff of the Democratic People's Republic of Korea and the Republic of Korea. In June the Delegate General for Asia and the Pacific was invited to North Korea where he had talks with the acting Chairman and the Secretary-General of the National Society in Pyongyang. The main issue on the agenda remained the fate of the countless families separated since the Korean war and, in particular, the exchange of Red Cross messages between the two Koreas under the auspices of the ICRC. A small number of family messages was forwarded to South Korea via the ICRC. During the same mission the Delegate General, accompanied by the regional delegate, met representatives of the Ministry of Foreign Affairs in order to promote international humanitarian law and the ratification of Additional Protocol II.

In cooperation with the National Society, the ICRC produced four new publications on international humanitarian law and a Korean version of *Basic rules of the Geneva Conventions and their Additional Protocols*.

## REPUBLIC OF KOREA

The regional delegation maintained contacts with the National Society with particular emphasis on cooperation in the field of dissemination of international humanitarian law and the promotion of Red Cross activities. In April the Neutral Commission for Control of the Armistice invited the

regional delegate to address the staff and members of the Commission, together with civilian and military representatives of South Korea and the United States.

The ICRC Delegate General for Asia and the Pacific visited South Korea in June and met the President and Secretary-General of the National Society. Discussions focused on the current situation in the peninsula, the problem of separated families and the exchange of Red Cross messages. The last topic was brought up on several occasions, in particular at talks in Hong Kong in September with senior representatives of the National Society and in Geneva in November when the National Society's President met the ICRC President. In 1994 a small number of family messages was distributed in North Korea.

## MACAO

The ICRC strengthened its ties with the Macao Red Cross, a branch of the Portuguese Red Cross, in particular regarding cooperation in the field of tracing, training and dissemination of international humanitarian law. In February the regional delegate took part in the "Day for the application of international humanitarian law", which was jointly organized by the ICRC and the local Red Cross. Preparations were under way for the organization of a university course in international humanitarian law at the University of Macao Faculty of Law. Staff from the Macao branch of the Red Cross took part in a seminar on international humanitarian law held in China in June. Most of the contacts focused on the launch of the drawing and essay competition "Red Cross in my mind", which was actively supported by the Macao Red Cross branch.

## MONGOLIA

The regional delegation developed good relations with the authorities and Red Cross of Mongolia, particularly with regard to the promotion of international humanitarian law. Between 30 September and 5 October the ICRC Vice-President, together with the regional delegate and a representative from ICRC headquarters, took part in celebrations to mark the 55th anniversary of the founding of the National Society. The ICRC Vice-President met the Mongolian Prime Minister and First Deputy Minister for Foreign Relations. Discussions focused on the ratification of the Additional Protocols and preparations for the 26th International Conference of the Red Cross and Red Crescent. During a short field trip the Vice-President had talks with representatives of the local authorities and provincial Red Cross branches. The Vice-President also took part in the second training course on international



humanitarian law held in Ulan Bator for staff of the provincial chapters of the National Society.

In March the regional delegate conducted a mission to Mongolia to ensure the smooth running of a training course organized for diplomats from the Ministry of Foreign Relations. This two-day course, the first of its kind in Mongolia, put emphasis on the growing implications of humanitarian issues for international relations.

## TAIWAN

Cooperation in the area of dissemination of international humanitarian law and training between the ICRC and the local Red Cross was developed further in 1994. The regional delegate went to Taipei in August for discussions with leaders of the local Red Cross concerning dissemination projects. In November the ICRC and the local Red Cross set up the first workshop for the media and provided the 16 participants with documentation in Chinese.

## JAKARTA

### Regional delegation

(Brunei Darussalam, Indonesia/East Timor, Malaysia, Singapore)

## BRUNEI DARUSSALAM

During a visit to Brunei in June the regional delegate established contacts with the emerging Brunei Red Crescent Society with the aim of preparing for its admission to the International Red Cross and Red Crescent Movement.

## INDONESIA

As in previous years, the ICRC's activities in Indonesia focused on visits to all categories of security detainees. In the light of the persistent tension in Aceh, the ICRC developed its presence in the area. Through regular missions to this northern Sumatran province, delegates were able to extend the scope of their activities for the civilian population. However, the institution's permanent presence in the province remained subject to approval.

Contacts with the Indonesian armed forces regarding the promotion of international humanitarian law among the troops made gradual progress. Ties with the National Society were also strengthened.

In November a Hercules aircraft was made available to the ICRC by the Indonesian government for an emergency airlift to Afghanistan. Medical supplies were flown into Kabul, Herat and Mazar-i-Sharif.

## Activities for detainees

In October the ICRC began its annual round of visits to security detainees held in Sulawesi, Kalimantan, central Java and Irian Jaya. All categories of security detainees were visited, including those suspected of having links to the extreme right and people held in connection with the 1965 communist coup attempt.

At regular intervals delegates went to military and civilian places of detention in Aceh, visiting some 139 detainees, of whom 80 were newly registered. They also visited ex-detainees in their homes and saw families of detainees who were still anxious about their relatives' whereabouts. The ICRC subsequently made the necessary arrangements for family visits to security prisoners.

In Irian Jaya the ICRC developed its contacts in connection with detention matters. It organized two series of family visits for detainees serving sentences in Java, far from their homes, although ideally the Indonesian authorities should consider transferring these people back to places of detention in Irian Jaya.

In all places visited delegates monitored the conditions of detention, provided material and medical assistance when necessary and offered the detainees the opportunity to write Red Cross messages to their families. In 1994 the ICRC visited a total of 208 detainees held in 30 places of detention throughout Indonesia. Around 113 prisoners benefited from the family visits programme.

## Activities for the civilian population

The ICRC carried out several missions to Irian Jaya to assess the situation of returnees from UNHCR refugee camps in Papua New Guinea. Delegates regularly contacted the local authorities in the area and visited villages along the border and transit camps in order to monitor living standards and the conditions in which the Irianese were transferred to their places of origin. In September the ICRC visited UNHCR border camps in Papua New Guinea, which still harboured approximately 3,500 Irianese refugees, and facilitated the exchange of news between separated family members through Red Cross messages.

ICRC delegates carried out regular missions to Aceh. Their activities focused on humanitarian problems encountered by the civilian population. Where necessary, the ICRC informed the relevant authorities.



In Irian Jaya the ICRC worked in cooperation with the Indonesian Red Cross Society, which provided logistic support, liaised with the civilian population and helped to organize family visits to security detainees.

## Tracing activities

The ICRC's tracing service in Jakarta provided support for the delegation's detention-related activities. In 1994 it concentrated its efforts on responding to a number of tracing requests from the civilian population in Aceh and Irian Jaya by collecting statements and allegations of disappearances and family separations.

## Dissemination

As in previous years, the main focus was dissemination of international humanitarian law to the Indonesian armed forces. The ICRC initiated a dialogue with the Indonesian armed forces regarding the incorporation of dissemination courses in military training programmes. Meetings with the decision-making level of the military were held at the headquarters of the armed forces in Cilacap and Bandung.

The regional delegation organized sessions for the police, university students and Red Cross members and personnel. The regional delegation financed and took part in one-day workshops on the International Red Cross and Red Crescent Movement for the management level of Red Cross branches in Sumatra, South Sulawesi, Flores and East Timor.

## EAST TIMOR

The situation in East Timor remained uncertain in 1994. The ICRC kept a close watch on all major incidents which occurred during the year, helping to ease tension by acting as a neutral intermediary between the authorities and the civilian population and by monitoring respect for international humanitarian law. In July demonstrations in and around the university campus in Dili resulted in a number of arrests. The ICRC did its utmost to promote a dialogue between the demonstrators and the authorities and helped maintain contact between those arrested and their families. In addition, delegates gave first aid to a number of students involved in the demonstration and evacuated one person to Dili's civilian hospital. Some 20 demonstrators were arrested and the ICRC was immediately granted access to them in police stations and military camps. They were all subsequently released.

When a group of Timorese staged a 12-day sit-in at the United States embassy in Jakarta in November, the ICRC was called upon to act as a neutral

intermediary by the parties concerned. After receiving confirmation from all the Timorese involved in the sit-in of their wish to leave, the ICRC facilitated their departure for Portugal. The ICRC continued to follow the cases of other Timorese in Jakarta, including those who had been prevented from joining the group in the United States embassy compound.

Sessions on international humanitarian law and the fundamental Red Cross principles were held on a regular basis for the security forces and at Dili University.

### Activities for detainees

Delegates based in Dili frequently visited security detainees in places of detention run by the armed forces, the police and the Ministry of Justice. The ICRC also visited Timorese detainees held in Java, including the leader of the armed opposition detained in a prison in Jakarta.

In all places of detention visited, the ICRC checked on detainees' conditions of detention and treatment, provided material and medical assistance where necessary, gave detainees the opportunity to write Red Cross messages to their relatives and organized and financed two series of family visits for those being held far from home.

### Activities for the civilian population

Since November 1993, ICRC delegates have been able to move more freely in East Timor. In 1994 they had better access to the local population and their activities focused on the protection of the civilian population. Delegates recorded allegations of violations and contacted the authorities on these matters whenever necessary.

### Tracing activities

The tracing service offered support for the ICRC's detention-related activities by collecting and distributing Red Cross messages. It also dealt with 140 tracing enquiries, including cases concerning missing persons, many of which were brought over from the previous year. The ICRC repatriated 31 hardship cases from East Timor to Portugal.

### Water and sanitation

The ICRC worked closely with the Indonesian Red Cross (PMI) in East Timor in the field of sanitation and public health. The water and sanitation programme was launched in 1988 by the ICRC and the PMI, in cooperation with the Ministry of Health in East Timor, in order to give remote villages



access to fresh drinking water. Surveys were conducted by an ICRC water engineer, maintenance work was carried out and four ICRC/PMI teams dug wells or piped water from remote springs. In 1994 eight projects were completed, bringing the total over the past seven years to 42.

An ICRC nurse trained two Timorese nurses to carry out medical surveys and hygiene and public health programmes. Together they conducted surveys in some of the remotest parts of the island, providing assistance where needed.

## MALAYSIA

In 1994 the ICRC focused on visits to detainees, spreading knowledge of international humanitarian law and the ICRC's activities and training National Society staff in order to involve them in international operations.

In April the ICRC completed its round of prison visits to detainees held under the Internal Security Act. Between November 1993 and April 1994 delegates visited 49 detainees throughout Malaysia.

The ICRC, together with the Malaysian Red Crescent Society (MRCS), organized a workshop on international humanitarian law in Kuala Lumpur for 40 military instructors. An information day was held for 80 officers of the armed forces' medical corps. In addition, the regional delegation and the National Society prepared a five-day workshop for 35 directors of provincial branches of the MRCS. This focused on international humanitarian law and the International Red Cross and Red Crescent Movement. At the end of the year a similar workshop was held in Bintulu, Sarawak province, for 34 Red Crescent representatives.

In October the ICRC Vice-President visited Malaysia to hold talks with National Society leaders. The matters discussed included dissemination programmes, preparations for the 26th International Conference of the Red Cross and Red Crescent and ways of strengthening the ICRC's working relations with the MRCS. Talks with government officials centred on the promotion of international humanitarian law.

## SINGAPORE

While in the Far East in October, the ICRC Vice-President conducted a mission to Singapore with the aim of establishing closer relations between the ICRC and both the Singapore Red Cross Society and the government. To this end, the Vice-President met representatives of the Ministry of Foreign Affairs, the Ministry of Defence and the National Society. Topics raised included the promotion of international humanitarian law and the 26th International Conference of the Red Cross and Red Crescent.

The ICRC remained in touch with the National Society and the Ministry of Defence with a view to organizing a training course on international humanitarian law for military instructors in 1995.

## MANILA

### Regional delegation

(Australia, Fiji, Kiribati, Nauru, New Zealand, Palau, Papua New Guinea, Philippines, Solomon Islands, Tonga, Tuvalu, Vanuatu, Western Samoa, autonomous States, territories and colonies of the Pacific)

The ICRC maintained contacts with National Societies and governments in order to encourage ratification of the Geneva Conventions and the Additional Protocols by those Pacific States which had not yet done so, and to support the National Societies in their dissemination efforts. In December the ICRC opened a media liaison office in Sydney, Australia.

## AUSTRALIA

The regional delegate carried out three missions to Australia in the course of the year. He went to Melbourne, Canberra and Sydney to pursue the dialogue with the government and the National Society, to take part in a basic training course for future Australian Red Cross delegates and to prepare the Second Regional Conference on International Humanitarian Law.

In May delegates went to Canberra and Melbourne to brief the Australian Red Cross and government officials on the ICRC's activities in the region and to discuss the government's contribution to the institution's budget. In July delegates took part in a conference organized by the armed forces in Townsville (Queensland) on the impact of international humanitarian law on the conduct of operations by land commanders.

The Second Regional Conference on International Humanitarian Law, which was convened by the Australian government and the National Society, was held in Canberra in December. It was attended by over 150 government and Red Cross/Red Crescent participants from 35 countries throughout the Asia-Pacific region, as well as a large ICRC delegation. The conference's aim was to stimulate debate on international humanitarian law in preparation for two meetings to be held in 1995: the Review Conference of the 1980 UN Weapons Convention and the 26th International Conference of the Red Cross and Red Crescent. This event coincided with the opening of the ICRC's media



liaison office in Sydney. The office's main objective is to establish a network of contacts among the international and Australian media with a view to promoting the ICRC's image and activities in the Asia and Pacific region.

## FIJI

Three missions were carried out in Suva to monitor ongoing dissemination programmes financed by the ICRC and conducted by the National Society and to maintain contacts with the government and the ICRC's local office.

In August the regional delegation organized a dissemination training course in Suva for 11 Red Cross representatives from the following States and territories: the Cook Islands, Fiji, Kiribati, Papua New Guinea, the Solomon Islands, Tonga, Tuvalu, Western Samoa and Vanuatu. The Federation's regional delegate also attended the course.

The ICRC provided teaching materials to the Fiji Red Cross Society to help it promote understanding of international humanitarian law among the armed forces, which provided a contingent for the peace-keeping forces in Bougainville.

## NEW ZEALAND

The regional delegate conducted two missions to Wellington in the course of the year. In May he informed the National Society and government officials about the ICRC's activities in the region and discussed the government's support for the institution. He also took part in a basic training course for members of the New Zealand Red Cross Society who were to be seconded to the ICRC or the Federation.

During the second mission, in November, the regional delegate participated in a training course organized by the National Society for its dissemination officers.

## PAPUA NEW GUINEA

The ICRC carried out four missions to Papua New Guinea with a view to monitoring the situation in Bougainville and pursuing the dialogue with the authorities concerning ICRC visits to people detained in connection with the crisis on the island. Although a formal agreement was eventually reached, visits to detainees were delayed owing to a volcanic eruption in Rabaul in late September. The visits were rescheduled to take place in early 1995. At the end of October the regional delegate gave briefings and dissemination materials to the regional peace-keeping forces assigned to Bougainville.

## PHILIPPINES

The peace process between the government and the various opposition parties continued apace. Whereas talks with the National Democratic Front ended in stalemate and discussions with the Moro National Liberation Front failed to resolve any of the major issues, negotiations with the far right produced some positive results.

As a consequence of the apparent failure of peace talks, tension remained high at the end of the year in northern Luzon, Bicol and particularly in Mindanao, which saw a significant rise in Muslim insurgency and the re-emergence of Christian vigilante groups.

The National Amnesty Commission, which failed to attract a significant number of rebels, extended its deadline for the submission of applications to the end of the year.

The ICRC's main activities in the Philippines consisted of making visits to detainees held in connection with insurgency-related incidents, handling correspondence between detainees and their families, arranging family visits and promoting knowledge of international humanitarian law among the armed forces.

### Activities for detainees

The number of detainees visited decreased in 1994 to about 550. Fewer arrests were made and some detainees were released. During 251 visits, delegates registered 152 new detainees and offered all those seen the opportunity to contact their families through Red Cross messages. An ICRC field nurse followed the progress of all inmates with special medical problems and supervised the disinfection of eight places of detention. Throughout the year the ICRC distributed hygiene and leisure items to 40 places of detention.

The family visit programme, run jointly by the ICRC and the Philippine National Red Cross (PNRC), proceeded smoothly, enabling some 340 detainees to receive visits from their relatives.

### Activities for the civilian population

Fighting between government forces and Muslim rebel groups led to the displacement of thousands of families in certain areas of Mindanao. Following a joint survey, a special ICRC/PNRC relief programme was conducted on the islands of Sulu and Basilan and in North Cotabato. In all, some 4,000 families benefited from this one-off distribution of rice, noodles, sardines, soap and blankets.



## Tracing activities

As in previous years, the tracing service collected, processed and filed information pertaining to people held in connection with insurgency-related incidents, coup attempts or Muslim secessionist activities. In all, the ICRC collected and distributed 183 Red Cross messages and issued travel documents for 80 refugees accepted by host countries for resettlement.

## Dissemination

As all the armed forces and police academies included international humanitarian law in their curricula, the ICRC reduced the number of dissemination sessions held for these groups. In 1994 the delegation took part in a dozen sessions and distributed some 2,500 publications. No dissemination activities could be organized for the armed opposition because of problems in reaching them.

In April a lawyer from the Philippines Commission on Human Rights received a special one-month course of training in Geneva on international humanitarian law and its dissemination to the armed forces.

## SOLOMON ISLANDS

The regional delegate carried out two missions to Honiara. He monitored the programmes carried out by the Solomon Islands Red Cross for refugees from Bougainville and maintained contact with government representatives.

## VANUATU

This country received two ICRC visits in the course of the year. On the first occasion the regional delegate met representatives of the Vanuatu Red Cross Society and the government. They discussed the promotion of international humanitarian law and information campaigns aimed at raising the National Society's profile in the country. The ICRC provided teaching aids for this purpose. On the second the regional delegate went to Port Vila in June to take part in the sixth meeting of Pacific Red Cross Societies, organized by the Federation for 24 participants from 15 States.