

# Foreword

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# FOREWORD

*This Report tells of the intense activity of the ICRC on all five continents during 1975.*

*We have tried to make it lively, interesting and easy to read while in no way detracting from the accuracy of the accounts it contains.*

*We hope that these pages will convince our readers of the importance of our activities, of the excellence of the results obtained in so many cases, of the scope and diversity of our work, the difficulties we have encountered, the urgency with which we have to take our decisions and the responsibilities that our institution and its delegates have to bear.*

*We have to be constantly on our toes and in the year under review conflicts and political tension have not been lacking. Sometimes the ICRC is accused of shrouding its activities in mystery, but its discretion is in the interest of victims. This Report should satisfy anyone who wishes to have an overall idea of what our activities involve.*

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\* \* \*

*Every conflict followed by a flood of refugees makes great demands of our Central Tracing Agency. This department of the ICRC plays an essential role wherever there are refugees, dispersed families, messages to be delivered or missing persons to be found. It has a card index containing 50 million entries which bear witness to more than a century of activity.*

*We are doing more and more to help political detainees; but as our experience in this sector grows, so do the difficulties. Governments do not always provide us with the facilities that we are entitled to expect if we are to work effectively. Nonetheless, the results obtained encourage us to continue even if we cannot be on hand wherever there are political prisoners. The living conditions of those that we do see frequently improve once we have handed our reports to the detaining authorities who take note of our comments.*

*The ICRC methodically tries to draw closer to the National Societies and to understand their problems. Through these Societies, it is able to disseminate the principles of humanitarian law and the Geneva Conventions. This is essential, for if these principles are not made known through schools, universities and armies, the Red Cross message will go no further than the limbo of government archives.*

*The development of humanitarian law is one of our prime concerns. Our high hopes for the third session of the Diplomatic Conference which is to examine the Protocols additional to the 1949 Conventions are justified by the results obtained last year.*

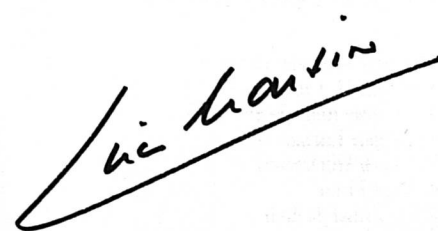
*In its work, the ICRC has to count on the moral and material support of the international community, governments and the Red Cross Societies. Any new activity raises financial problems and, until they have been solved, until the budget has been covered, the activity hangs in the balance or cannot develop as it should. We hope that current fund-raising will be favourably received so that our activities may continue.*

*An important survey appeared last year devoted to the position of the Red Cross in the world, its organisation, its influence and its future. The Red Cross movement submitted without reservation to a thorough examination of its methods, this task being entrusted to Donald Tansley, a Canadian. His Report takes the form of an "agenda" which has been submitted to the International Red Cross for its consideration, appreciation and discussion. If this document is to serve any purpose, it must engender awareness of the role of the Red Cross in the modern world.*

*It is currently being studied by the ICRC, the League of Red Cross Societies and the National Societies and it will be the subject of general discussion at the next International Red Cross Conference which will be held in Bucharest in 1977.*

*We are quite sure that once you have read this Annual Report, you will better understand and appreciate the essential role and specific activities of the ICRC.*

Eric Martin  
President of the ICRC







# I. OPERATIONS

## AFRICA

### Angola

On 31 January 1975, a quadripartite transitional government was set up in Luanda pending the accession of Angola to independence on 11 November. It comprised representatives of Portugal and of the three liberation movements which had previously been fighting the Portuguese, i.e. the *MPLA* (People's Movement for the Liberation of Angola), the *FNLA* (Angolan National Liberation Front) and the *UNITA* (National Union for the Total Independence of Angola).

On 11 June 1975, an ICRC delegation was officially set up in Luanda as a forerunner to the more substantial base which was to follow.

In the meanwhile a new conflict flared up, no longer between the liberation fighters and the Portuguese troops but between the three national factions—the *MPLA*, the *FNLA* and the *UNITA*.

#### Early assessments

On 20 May, two delegates and a doctor set to work in Angola. They found that:

- the medical situation was deteriorating as most of the Portuguese doctors had left the country;
- civilians, the main victims of the clashes, were in a permanent state of flight to escape the combat areas;
- basic foodstuffs were becoming unobtainable in some parts of the country owing to the paralysis of road transport;
- combatants were being captured and imprisoned by all parties;
- the Europeans were taking fright and converging on the capital from the provinces in order to be evacuated to Lisbon;
- Angolans who had taken refuge abroad (mainly in Zaire) were beginning to return, thus creating even further needs.

#### The ICRC called in

This situation prompted the transitional Government to ask the ICRC to help. All of the liberation movements, the Portuguese representative and the Lisbon Government gave the ICRC their full support and offered all necessary guarantees and facilities to enable the delegates to move about and transport supplies.

The ICRC delegation proposed an initial operational plan involving a budget of 2 million Swiss francs. This plan—limited in time and scope (3 months)—provided for three medico-surgical teams, medical supplies and food supplies, the food being

mainly for the civilian victims in the greatest need; young children, the sick, expectant mothers and the aged.

In accordance with the Conventions, the ICRC aimed at obtaining the permission of all parties to visit prisoners. Its other prime concerns were to ensure respect for the Red Cross emblem and for hospitals and clinics.

#### Medical and surgical assistance

Several National Societies and governments, by providing support in response to a fund-raising appeal launched on 1 July, enabled the first medico-surgical team to leave Europe on 10 July to set up base in Carmona (*FNLA* zone)—renamed Uige after independence.

On 12 July, this team split into two, the surgeon and the anesthetist returning to Luanda to help the doctors and surgeons of the Maria-Pia Hospital which had been overwhelmed by the sudden influx of wounded. This team, which was of mixed nationality, was later replaced by an all-Swiss team.

At the beginning of August, as fighting spread throughout the country, two more medico-surgical teams left for Angola. One, provided by the French Red Cross, set up base in Nova Lisboa (which was to become Huambo) in the *UNITA* zone. The second, made available to the ICRC by the Danish Red Cross, was posted to Dalatando, under *MPLA* control. This Danish team was later relieved by a Swedish team.

Now that the ICRC had moved into the three zones controlled by the three opposing movements, each of which placed their confidence in it, its medical and surgical work was more evenly distributed. The teams spread out from their bases, and one surgeon and a nurse from Huambo set up at Vouga, near Silva Porto.

The doctors and surgeons did not concentrate their efforts solely on caring for the war wounded. There were many public health problems to be dealt with also. In one district alone, the Red Cross doctors diagnosed measles, malaria, sleeping sickness, diarrhoea, various types of anaemia and malnutrition. In order to combat these diseases, the ICRC doctors spent some of their time moving around the bush, regularly visiting regional hospitals and clinics and renewing their stocks of drugs and medical supplies.

#### Relief supplies

The ICRC was not idle when it came to supplying relief foodstuffs but, on this occasion, this aspect of its work did not attain the proportions that it had done in other conflicts.

Firstly, the unforeseeable and haphazard population flows to the momentarily calmer areas made any precise assessment of needs impossible. Secondly, there was not a disastrous food shortage despite the temporary stoppage of agricultural production and activities. The ICRC therefore made its priority the relief of the people worst affected, as explained above.

On 12 June, the first relief supplies, 15 tons of milk powder and 30,000 Swiss francs worth of medical supplies, arrived in Luanda. By the end of the year, some sixty consign-