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## AFRICA

With the end of the Rhodesia conflict,\* the ICRC, in 1980, terminated its activities in Botswana and scaled them down in Zimbabwe and Zambia, but other emergency situations developed on the African continent (in Angola, Chad, Uganda) making more extensive calls on personnel and resources.

At the end of 1980, ICRC staff were stationed in eleven African countries: Angola, Chad, Ethiopia, Kenya, Mozambique, Republic of South Africa, Sudan, Uganda, Zaire, Zambia and Zimbabwe. In addition, during the year, ICRC delegates carried out missions to eleven other countries: Algeria, Botswana, Djibouti, Liberia, Malawi, Mauritania, Morocco, Namibia/South-West Africa, Seychelles, Somalia and Tanzania.

To cover the cost of all its activities on the African continent, the ICRC made two appeals for funds in 1980: one in March, for the period from 1 January to 30 June, requesting 22.5 million Swiss francs, and the second in July, for the period from 1 July to 31 December 1980, calling for the sum of 20 million Swiss francs. The appeals were accompanied by situation reports giving accounts of the programmes under way and showing the budgets established by the ICRC for each of the countries where it was active.

As at 31 December 1980, the ICRC had received, in response to those appeals, contributions and promises of contributions in cash, goods and services, for approximately 41 million Swiss francs.

The total value of the material assistance and medical relief provided by the ICRC through its activities in Africa during the period under review amounted to almost twelve million Swiss francs (see Table on page 25).

\* \* \*

Mr. Jean-Marc Bornet was appointed as the new delegate-general for Africa, his term of office being effective from 1 January 1981.

\* In this Report, the conflict situation prior to Zimbabwe's independence is referred to, for greater clarity, as the "Rhodesia conflict".

## Southern Africa

The main event marking ICRC activities in southern Africa was the termination of the Rhodesia conflict, with the declaration of Zimbabwe's independence on 18 April 1980.

Thus, it could be said that 1980 marked a turning-point in the ICRC's role in southern Africa, which until then had been principally centred on emergency measures dictated by a situation of open conflict. Its delegations in Zimbabwe, Zambia and Botswana were gradually phased out, while a new assistance programme for the displaced persons in Angola was put into effect, involving food and medical relief and the dispatch of the staff required to meet the urgent needs of the civilian population there.

At the same time, all through the year, developments in Namibia/South-West Africa and in the Republic of South Africa caused the ICRC to reinforce its permanent delegation in that area.

## Rhodesia conflict

Although by the end of 1979 the London Conference on Rhodesia had resulted in an agreement and in the signature of a cease-fire by all the parties concerned, the ICRC continued for some time in 1980 its activities in connection with the consequences of the conflict — in particular, providing aid to the large number of Zimbabwean refugees, in Zimbabwe itself and in the "Front-line States" on its borders: Botswana, Mozambique and Zambia.

Shortly after Zimbabwe had become independent, the Salisbury delegation began its process of withdrawal and gradually reduced its assistance and protection activities for the conflict victims. In the neighbouring countries, the large-scale repatriations of refugees organized by the United Nations High Commissioner for Refugees (UNHCR) led to the closing of the ICRC delegation in Botswana in May and in a big reduction of staff at the Lusaka regional delegation.

The situation having undergone a radical change, the Salisbury delegation, from June, focused its attention on the customary activities of protection and on Tracing Agency work.

The delegates also increased their efforts to develop the dissemination of knowledge of international humanitarian law and approached the new Government in Zimbabwe with a view to hastening the country's accession to the Geneva Conventions and their Protocols.

## Information campaign

The information campaign launched by the ICRC in 1978 in connection with the conflict in Rhodesia was continued until April 1980.

After the cease-fire was signed, the Patriotic Front fighters, whose bases were in the Front-line States, were grouped in 14 assembly points on Zimbabwe territory. A special information programme was arranged for these men in their camps, and for the first time it became possible to supply Red Cross information direct to the fighting forces of ZANU (Zimbabwe African National Union) and ZAPU (Zimbabwe African People's Union). Information sessions were held and documentary material distributed in the assembly points, except in one camp which could be reached only by helicopter and where it was not possible for the ICRC medical units to carry out any activity (see also the chapter on "Information and public relations").

## Award of Henry Dunant Medal

On 18 May, at a ceremony in Salisbury, attended by Mr. Canaan Banana, President of Zimbabwe, the Minister for Foreign Affairs and the President of the Zimbabwe Red Cross, the Henry Dunant Medal was presented to the family of Charles Chatora, an employee of the ICRC, who had been killed in 1978 at Nyamaropa, together with two delegates, André Tièche and Alain Biéri (see 1978 Annual Report).

## Activities in Zimbabwe

### Protection

The ICRC continued its efforts with the authorities in Salisbury and also in London and Geneva, with the aim of providing protection facilities to all categories of political detainees and persons arrested under the martial law in force at the beginning of 1980.

In February, the delegate-general for Africa, Mr. Frank Schmidt, who was on a mission to Salisbury, again discussed the matter with the Governor, Lord Soames. Then, on 11 February, during a mission to London, the ICRC President, Mr. Alexandre Hay, raised this question with the United Kingdom Foreign Secretary, Lord Carrington. Following these talks, Mr. Hay sent a message to Lord Soames on 22 February, drawing his attention to the importance which the ICRC attached to matters of protection and to their urgency. Despite all these steps, the United Kingdom Government did not depart from its attitude that it was for the new Government of Zimbabwe to authorize the ICRC to increase the range of its protection activities.

When Zimbabwe became independent, those persons who had been held in custody by virtue of the provisions of martial law were released, but the ICRC delegation in Salisbury continued to give considerable attention to questions of protection. These were raised several times with the new

government leaders, in particular in talks between ICRC delegates and the Prime Minister of Zimbabwe, Mr. Robert Mugabe, and the Minister of the Interior, Mr. Joshua N'Komo.

### Medical assistance

The ICRC's medical activities for the benefit of displaced persons were continued until the end of May 1980. Two medical units (each one consisting of a doctor, an ICRC nurse and a locally recruited nurse) visited at regular intervals 24 clinics and six mission hospitals, opened by the ICRC during the conflict to meet the civilian inhabitants' needs.

These units were constituted from the beginning with the help of 25 doctors and 12 nurses made available to the ICRC by the Scandinavian National Societies. Thanks to this specialized personnel, 77 clinics and mission hospitals catering for a population of 630,000 persons were systematically given aid.

On 30 May, the rural clinics were handed over to be run by the Ministry of Health and the Zimbabwe Red Cross. The ICRC medical personnel, who used to visit the mission hospitals, were replaced by Oxfam doctors.

Moreover, at the United Kingdom Government's request for ICRC medical assistance to the Patriotic Front fighters who had returned to Zimbabwe, ICRC medical units visited periodically and supplied with medicaments nine of the fourteen camps where those combatants had been assembled.

During that same period, the ICRC provided medical assistance (visits by ICRC units and supplies of medicaments) to two collecting centres (at Tegwani and Toronto) where civilians returning from Botswana, Zambia and Mozambique were grouped.

### Relief

Medical assistance was accompanied by material aid which the ICRC continued to provide in Salisbury and throughout the country to the persons whom the conflict had compelled to move away from their homes.

During the first five months of 1980, an average of 280 tons of foodstuffs was distributed every month to about 100,000 persons. The food consisted mainly of maize flour and powdered milk. Soap and (just before the cold season) clothing and blankets were also distributed to displaced persons.

In rural areas, ICRC material assistance continued to be provided in protected villages and missions and at the Jairos Jiri amputee centre. With this aid, the families most in need of help, selected according to our ICRC survey, received about 60 per cent of the assistance required to cover their essential wants. In March and April, a substantial increase was registered in the number of people receiving aid, as some regions, previously very difficult to reach because of hostilities, were at last made accessible.

In the urban zones, especially in Salisbury, where a growing number of rural families had sought refuge during the conflict's ultimate phase, regular food aid was kept up by the

ICRC. The shelter construction programme, begun in 1978 at Seke, 20 kilometres from Salisbury, had been completed at the end of 1979: 600 shelters, some made out of wood, and others constructed with the traditional dried mud bricks, were occupied at the beginning of 1980 by 4,500 displaced persons. As soon as independence was proclaimed, some of these people began to move back to the rural areas. At the end of April, therefore, the ICRC handed over the camp at Seke to the Ministry of Labour and Social Affairs and to the Municipal Council of Chitungwiza.

Food aid, in Seke and in the rural areas, continued until the end of May. The infrastructure set up by the ICRC in this field was taken over outright by the Ministry of Labour and Social Affairs on 30 May 1980.

### Tracing Agency

In 1980, the main tasks of the Salisbury Tracing Agency bureau consisted in taking steps to trace persons reported missing and in arranging for family messages to be forwarded. During the first six months there was a constant increase in the number of cases dealt with, as more and more people got to know about this service, and also as it became possible to settle a greater number of cases after Zimbabwe's independence had been proclaimed. In 1980, the number of enquiries registered was 410; by 31 December, 344 cases had been closed. Nine repatriation operations were organized under ICRC auspices, enabling people in "Front-line States" to return to Zimbabwe.

Moreover, during the period when repatriations were organized by the UNHCR, frequent contacts were maintained with its representatives and with various embassies. The ICRC service providing for the exchange of family messages between refugees in the "Front-line States" and their families who remained in Zimbabwe was stopped when normal postal services were resumed.

When the Tracing Agency office in Lusaka was closed at the end of 1980, its files were removed to Salisbury.

### Personnel

The delegation staff, comprising in January 1980 a score of persons, including medical personnel, was gradually phased out during the year, and at 1 July consisted of four persons.

By 17 June, the sub-delegations in Bulawayo, Fort Victoria, Umtali and Gwelo had all been closed down.

### Activities in Zambia

In 1980 the main feature of the ICRC's activities in the "Front-line States", which had been developed in relation to the Rhodesia conflict, was their cessation in Botswana and diminution in Zambia and Mozambique.

As far back as in January 1976, the intensification of the conflict in southern Africa had led the ICRC to open a permanent regional delegation in Lusaka. When the number of Rhodesian refugees in the camps set up by the Patriotic

Front (ZAPU) substantially increased in 1978, the ICRC began to bring them medical and material assistance. These tasks were pursued in 1979 and for the first six months of 1980.

By the end of June, many Zimbabwe refugees had been repatriated and arrangements were made for other humanitarian bodies to take over. The ICRC then terminated its assistance programme but its regional delegation at Lusaka continued all the same, all through the year, to carry out its customary tasks of protection and its tracing activities.

At the end of 1980, because of the changes in the situation in southern Africa, it was decided to transfer the regional delegation from Lusaka to Salisbury, as from 1 January 1981.

### Medical assistance

In the field of medical assistance, the ICRC's role consisted in undertaking public health projects, distributing medications and providing the material for making prostheses for ZAPU amputees. These projects had been elaborated in July 1978 by the chief medical officer of the ICRC (see 1978 Annual Report, p. 14), the President of ZAPU and the Zambian authorities.

In matters relating to public health, the ICRC delegates inspected periodically the sanitary installations and the work of the persons responsible for applying in the refugee camps the knowledge imparted in 1979 by a public health expert lent to the ICRC by WHO. Insecticides and medicaments were also supplied to the camps at regular intervals.

Orthopedic material to a value of 75,000 Swiss francs was delivered by the ICRC to the Prosthesis Centre at Lusaka University Hospital, where ZAPU amputees were treated.

### Relief

Assistance activities were centred mainly on two camps: the girls camp at Lusaka and the boys camp at Solwezi. In June, there were 8,000 people in the Solwezi camp, and the ICRC's task was to provide the refugees with extra nutrition in the form of powdered milk. In the girls camp, ICRC efforts were directed towards the very young girls, numbering about two thousand.

About 70 tons of milk powder and infant food, 45,000 blankets and seven tons of soap were distributed in these two camps in 1980.

In February the ICRC was approached by SWAPO (South-West African People's Organisation) to provide medical aid to some 300 children between 2 and 6 years old who were to be removed from a camp at Niyango to Lusaka. Foodstuffs (powdered milk, cereal foods for babies), medicaments and various other supplies to a value of 20,000 Swiss francs were provided.

Various relief items were supplied to the Christian Council of Zambia for distribution to refugees in different parts of Lusaka, to the St. Francis Hospital at Katete, to a camp of Angolan refugees in Western Zambia, and to the Zambia Red Cross Society.



## Protection

The ICRC continued its efforts to obtain from the Zambian Government the authorization to visit places of detention.

Three persons detained on a charge of illegal entry into Zambia were visited, at the authorities' request, in the Lusaka Central Prison.

On two occasions, ICRC delegates were granted permission by the Patriotic Front (ZAPU) to visit the camp at Boroma Lima: about 150 prisoners were registered.

## Tracing Agency

The work of the Tracing Agency office in Lusaka, opened towards the end of 1978, consisted in tracing persons reported missing or separated from their families, in reuniting members of refugee families, forwarding family mail, and registering the detainees visited by ICRC delegates in Zambia and Zaire.

Zambia Red Cross staff received training in Tracing Agency methods so that the National Society might run its own tracing bureau.

In 1980 about 200 enquiries were submitted to the ICRC. Of the 171 cases closed by the end of the year, 102 had been settled satisfactorily.

## Regional delegate's mission to Malawi

In recent years, the ICRC had been unable to carry out any activities in the Republic of Malawi because of its urgent commitments in connection with the Rhodesia conflict. During a mission undertaken by the regional delegate stationed at Lusaka, from 10 to 17 June, contacts were renewed with the Malawi authorities and the National Society. The regional delegate met senior government officials and gave an account of ICRC activities in southern Africa, and in particular of its visits to places of detention.

## Activities in Botswana

The ICRC's activities in Botswana were chiefly in connection with the problem of Zimbabwe nationals who had sought refuge there. At the beginning of 1978, with the worsening of the situation, the ICRC decided to intensify its action and to provide direct assistance to refugees instead of merely supplying material aid through the Botswana Red Cross. In talks with the Botswana authorities, the National Society, UNHCR, the Lutheran World Federation (LWF) and other benevolent associations, it was agreed that the ICRC would be responsible primarily for medical assistance in the camps, and for the supply of various relief goods (tents, blankets, children's clothes, etc.).

On 1 January 1980 there were 22,586 persons from Zimbabwe in the refugee camps at Selebi Pikwe, Dukwe and Francistown. Their repatriation was completed by the end of February, after which the ICRC delegation in Botswana began its withdrawal.

## Medical assistance

Under an agreement concluded with UNHCR and the LWF, the ICRC was put in charge of medical activities during the repatriations. Its medical units helped wounded and sick refugees and accompanied pregnant women as far as the border with Zimbabwe. On 12 March the last five persons were taken by the ICRC to Bulawayo Hospital.

The ICRC continued to provide medical care at Dukwe camp where about a hundred South African and Namibian refugees were living. Three nurses, recruited locally by the ICRC, worked in this camp until the end of April, after which responsibility for those refugees was transferred to the Botswana Council of Churches.

## Relief

Part of the medicaments and medical supplies stored by the ICRC in Botswana was sent to its delegation at Salisbury and the rest handed over to the Botswana Red Cross. Of the powdered milk, 17.5 tons were sent to the regional delegation at Lusaka, to be distributed to the refugees there. The remainder of the powdered milk, some blankets and various surplus relief goods were also handed over to the Botswana Red Cross, to help it continue assistance programmes for needy civilians.

## Tracing Agency

The Tracing Agency's activities, mainly in connection with the registration of refugees in the camps, were gradually taken over by the Botswana Red Cross. Enquiries which had been opened and were still pending were transferred to the regional delegation at Lusaka.

## Delegation closure

The delegation's withdrawal began in February. The ICRC office in Francistown was closed down at the end of April and the office in Gaborone on 15 May 1980.

## Activities in Mozambique

In Mozambique, as in the other "Front-line States", the ICRC was mainly concerned with the victims of the Rhodesia conflict.

Since 1977, a delegate representing the ICRC had been stationed there. On 12 April 1980, an agreement was signed establishing a permanent delegation in Maputo.

## Medical assistance

The medical aid programme initiated in April 1978 for ZANU war amputees continued throughout 1980 in a private orthopedic centre at Maputo and a rehabilitation centre opened by the Government at Merotte. The ICRC contributed

financial support to the treatment of the disabled and to the cost of the artificial limbs, besides shipping from Geneva some material for making prostheses and physiotherapy equipment. By the end of 1980, some seventy ZANU war disabled had been fitted since the ICRC began its action in 1978.

A rehabilitation project for Mozambican war victims, which the ICRC had submitted to the Government, was approved by the Ministry of Health in June 1980. It provided for the construction of an orthopedic centre at the beginning of 1981 and for the training of Mozambican technicians, with the aim of helping amputees belonging to the Mozambique Liberation Front (FRELIMO) and persons disabled during the Rhodesia conflict. The completion of the project was to be spread over two years. It was estimated that 860,000 Swiss francs would be required in 1981 and 448,000 Swiss francs in 1982 to cover the total cost.

## Angola

In 1980 the main ICRC activities in Angola were related both to the conflict on the Namibian border, where South African forces opposed those of SWAPO (South West African People's Organisation), and to the aftermath of the 1975-1976 conflict in Angola, where armed opposition movements were still active in the centre and south of the country. ICRC efforts were directed to the development of an aid programme for the civilian victims of the fighting.

In 1979, the ICRC had found, as a result of two surveys, first in the provinces of Huambo and Benguela and then in the province of Bié, that food was urgently needed over a very wide area (see 1979 Annual Report, page 19). On 28 February 1980, after various negotiations begun in 1979, the ICRC delegation in Luanda signed an agreement on this aid programme with its partner, the Angolan Red Cross. The agreement, which had been submitted also to the Angolan authorities, set out the terms of a joint project to provide food assistance to displaced persons for a period of six months.

March and April were spent in making preparations, and the operational phase was launched in May. By the end of the year, 23 distribution centres had been opened in various villages, providing relief for some 25,000 persons.

### Problems relating to the delegates' safety and their movements in the field

The development of the programme was, however, slowed down by danger and problems of logistics. Although much effort and material resources were put into extending the activities of the ICRC and National Society, it was not possible to go beyond a test area in Huambo Province. Several missions undertaken to assess the civilian population's needs showed that distress was indeed widespread and that it was urgently necessary to carry out as swiftly as possible a large-scale assistance programme in other areas east of Huambo, in the province of Bié and in the region to the north of Bailundo.

Although the leaders of UNITA, the main opposition movement, had been approached already in 1979, and again in 1980, it proved extremely difficult to obtain the guarantees that would secure the safety of ICRC delegates on mission.

It was therefore decided, in view of the unavoidable risks when travelling on land, to put into service in June, for regular flights between Huambo and Luanda, the Islander aircraft previously used in the ICRC Zimbabwe operations.

A further decision taken at the time of the visit of the delegate-general for Africa, in June, also connected with the matter of safety, was to conduct an information campaign in Angola (see also the chapter "Information and public relations").

### Material assistance to displaced persons

Following an agreement with the Angolan Red Cross, several preparatory missions were performed in March and April by the ICRC regional delegate stationed in Lusaka, the National Society's Secretary-General, an ICRC relief delegate and a nutritionist made available to the ICRC by the Swedish Red Cross. Since the survey made the previous year, it appeared that the plight of the displaced persons had not improved: between 80 and 90 per cent of the people showed symptoms ranging from general weakness to a very advanced state of debility due to malnutrition. Consequently, the initial relief project to provide aid to certain categories of people only (children, pregnant women, sick and injured persons) had to be altered so as to include the whole displaced population.

The programme which was then established was presented in the course of those missions to the provincial authorities of Bié and Huambo.

On 21 April, the aid programme began with the arrival of the relief team at Huambo. Between 25 April and 1 May, an airlift brought from Botswana 100 tons of maize flour (worth 45,000 Swiss francs). The aircraft also carried some all-purpose vehicles, without which it would not have been possible to reach certain villages situated in rough terrain. Various materials were brought over in this way. Once settled in Huambo, the ICRC delegation began its distributions in mid-May at Katchiungo in the eastern part of Huambo Province.

Relief activities began to expand with the establishment of a three-month plan of action (June, July, August) in a "test" area forming approximately a square, the corners of which were situated at Bailundo, Katchiungo, Alto Hama and Huambo. Two relief teams were formed, one for the eastern zone (Katchiungo, Tchikala-Tcholoanica), and the other for the northern zone (Bailundo and Alto Hama).

Until the beginning of July, permission had to be obtained from the provincial authorities every time a relief team wished to make a trip, a procedure that frequently obliged the delegates to cancel planned missions and contributed to slowing down their action. However, on 7 July, the provincial authorities granted the ICRC and its partners of the Angolan Red Cross authorization to move freely throughout Huambo Province, and delivered to them a general permit (*guia de marcha permanente*). But even with this pass the ICRC

encountered difficulties when it wished to obtain access to one of the distribution centres it had opened at Katchiungo.

A second airlift was organized towards the end of June to carry relief goods from Botswana and Zimbabwe: four flights in all delivered 44.2 tons of foodstuffs, 20,000 blankets, soap, clothing, and more vehicles with the necessary spare parts (a total volume of 96.7 tons to a value of about 367,800 Swiss francs). Of the foodstuffs supplied by the European Economic Community (EEC), shipped by sea to the port of Lobito, the first consignment of 30 tons of butteroil arrived in Huambo by train from Lobito on 5 July.

During the three-month action in the "test area", distributions were made periodically in the eastern zone and, after mid-July, in the northern zone to a total of 18,000 needy persons. Two kinds of distributions were organized:

- relief articles (foodstuffs, blankets, clothing and soap) were given to every needy family individually, usually twice a month;
- daily collective distributions of food were made to the most vulnerable groups (mainly children). Large pots of "porridge", a mixture of milk, butteroil, maize flour and sugar, were prepared in the village, each pot containing enough "porridge" for about 300 children. The distributions were supervised.

In September, October and November, these activities were stepped up in Huambo Province, the aid reaching some 25,000 persons in 21 villages. On 20 September, distributions in a different form, aimed at saving the lives of children suffering from severe malnutrition, were introduced at Katchiungo, with the opening of a nutritional rehabilitation centre, under the supervision of an ICRC medical unit. In view of the satisfactory results observed at this centre, where thirty patients could be lodged and given the required care, it was decided to open a similar centre at Bailundo, which would be ready to take patients early in 1981.

In November, a third airlift was organized, this time by the ICRC delegation at Salisbury. In all, 48.9 tons of relief goods, including 35 tons of food and a quantity of soap and various other items, were flown from Zimbabwe to Angola. However, towards the end of the year, ICRC stocks of food in Angola were almost exhausted, as the vessels bringing EEC goods had suffered considerable delays. Consequently, in order to avoid a break in distribution, the areas which had received aid right from the start and where the needs were therefore least acute were given smaller rations in November. In addition, the Angolan Government agreed to lend a quantity of maize flour to the ICRC.

But the programme had to be suspended in the first half of December, as the risks which the delegates already had to run became greater still.

Before this interruption, the ICRC delegates had provided the Katchiungo nutritional rehabilitation centre with supplies for one month and had made a general distribution of food estimated to be sufficient for one month at Alto Chiumbo and Kaialula. Supplies for the children's porridge were sufficient until January 1981.

By the end of 1980, the total quantity of relief supplies distributed in Huambo Province amounted to 795.3 tons, consisting almost entirely of foodstuffs, to a value of 1,860,940 Swiss francs. Some villages in the region of Katchiungo (Amarral, Tchicala-Tcholoanica) had received aid from the start, and the improvements observed among their inhabitants had led the ICRC to consider stopping distributions. On the other hand, in some regions which in September were visited for the first time by the ICRC, for instance at Trappa, north-east of Katchiungo, there were still some 8,000 displaced persons in dire need.

#### Medical assistance

*TO DISPLACED PERSONS.* — At the request of the Government of Angola, following clashes in the southern part of the country in June, an ICRC team (one doctor, one nutritionist and two nurses) performed several missions in July and August to assess the situation on the spot with a view to the provision of medical aid for the victims of military operations. The ICRC team went to Katchiungo and Bailundo where they supplied hospitals with medicaments. Seriously sick and wounded persons were evacuated to Huambo Hospital by the ICRC. In the course of the visits both medical and relief teams observed, apart from the general symptoms of malnutrition among the population, diseases due to lack of food and proper sanitation, especially among the children. In addition to very frequent cases of marasmus and kwashiorkor, several cases of scabies, malaria, bilharziosis, pneumonia and tuberculosis were diagnosed. The medical team gave treatment to a number of cases of malaria, conjunctivitis, lung infections and other ailments. As sanitary conditions were rudimentary in the villages, public health stations were set up: here, under ICRC supervision, a few persons among the population were put in charge and given basic instruction in hygiene and elementary medical care. As the children appeared to be extremely under-nourished, the nutritional rehabilitation centres at Katchiungo and Bailundo were set up (see above).

In September and October, following a field survey by the ICRC chief medical officer and talks with the provincial authorities, public health stations were set up in a number of villages and inspected at frequent intervals by the ICRC medical personnel.

*BOMBA ALTA ORTHOPEDIC CENTRE.* — ICRC medical assistance for war disabled at the Bomba Alta centre (Huambo) began on 2 August 1979 with the arrival of the first orthopedic team (see 1979 Annual Report, page 20). Nine months later, in April 1980, the workshop was fully equipped and the centre, working at normal capacity, was producing about 30 prostheses per month. During the first part of the year, there were some delays in making the various components because of difficulties in obtaining the necessary materials. Although the ICRC specialists had evolved methods making maximum use of local materials so that the Angolan Red Cross could later continue without outside help once the project was well under way, there were difficulties in obtaining the necessary wood and metal.

In 1980, the ICRC personnel at Bomba Alta comprised two orthopedic technicians, a physiotherapist and an ergotherapist. Since the opening of the centre, 185 patients, mostly civilians, had been fitted. The Angolan Red Cross also sent to the centre fourteen employees, including two orthopedic assistants, to be trained. Practical courses were given by the ICRC, in co-operation with a team of specialists from the German Democratic Republic, who for the last three years had been directing the orthopedic workshop at the rehabilitation hospital in Luanda. As it was thought that the inclusion of several amputees among the team working at the centre would be a major factor for its efficient operation, patients who had been fitted out with artificial limbs were trained for work in the Bomba Alta workshop.

There was, nevertheless, a great deal yet to be done, in view of the fact that there were several hundred amputees in need of prostheses in the province of Huambo alone. As it was impossible to find accommodation close to the centre for all these people, UNICEF agreed to finance the construction of huts where the disabled might be lodged during the time they would be fitted.

In 1980, the ICRC spent 58,500 Swiss francs on purchases of material.

### Protection

**SOUTH AFRICAN PRISONER HELD BY SWAPO.** — In 1980, the ICRC visited for the fourth time the South African prisoner of war detained by SWAPO in Angola since February 1978 (see Annual Report 1978, page 16). This visit took place in March, but the ICRC delegate was unable to get permission for an interview without witness with the prisoner. With the help of the Angolan Red Cross, family messages and parcels were handed over to the prisoner.

**APPROACHES TO THE ANGOLAN AUTHORITIES.** — Approaches were made by the ICRC to the South African authorities following the clashes, at the beginning of July, in the southern part of Angola, between South African armed forces and SWAPO armed forces (see below). At the same time, it sent the Angolan Government a message expressing its concern for the victims and reminded the parties to the conflict of the fundamental principles set forth in international humanitarian law.

Furthermore, at the request of the South African authorities, the ICRC approached the Angolan Government to arrange the return of the mortal remains of a South African soldier. The ICRC also made several requests to the Angolan Government to be allowed to visit a number of prisoners belonging to UNITA, after it had come to the ICRC's knowledge that they had been condemned to death. Permission to see all UNITA members in Angolan hands was also requested. By the end of 1980, no reply had been received.

**RELATIONS WITH UNITA.** — On 25 July, UNITA officially expressed its undertaking to respect the fundamental rules of international humanitarian law applicable in armed conflicts.

At the meetings between the ICRC and representatives of UNITA in Europe, the question of access to prisoners held by UNITA was raised. In response to approaches made by both UNITA and the Portuguese authorities, the ICRC offered its services to act as intermediary between the parties concerned with a view to the release of 18 Portuguese prisoners in UNITA's hands.

### Tracing Agency

In 1980, the ICRC continued to co-operate with the Angolan Red Cross tracing service and transmitted to it 73 enquiries. Eleven other enquiries were handled by the ICRC delegation. Several cases of persons wishing to be repatriated, some to Angola and some to other countries, were the object of negotiations between the ICRC and the Angolan authorities.

### Personnel

The ICRC increased considerably its staff in Angola in 1980, in proportion to the growth of its assistance programme. At the beginning of the year, apart from the four specialists at the Bomba Alta orthopedic centre in Huambo, the sole person representing the ICRC in Luanda was the regional delegate. At the end of August, the total staff strength (including the personnel at Huambo, Luanda and Bomba Alta) was 21 persons, two of whom were the pilots of the ICRC aircraft, while at the end of the year the ICRC had 25 persons in Angola.

### South Africa and Namibia/South-West Africa

The ICRC regional delegation, based in Pretoria, continued its protection work on behalf of convicted security prisoners and persons detained under section 10 of the Internal Security Amendment Act, the two categories whom the Republic of South Africa had allowed the ICRC to see. At the same time, during 1980, the ICRC regional delegate took further steps, in Pretoria and Windhoek, to gain access to other categories of political and security detainees in the Republic of South Africa and in Namibia/South-West Africa.

Following clashes at the beginning of July, between South African and SWAPO armed forces in the southern part of Angola and because of frequent outbreaks of fighting in the northern border region of Namibia, the ICRC launched an appeal to the parties concerned, reminding them of the fundamental principles of international humanitarian law in armed conflicts and stressing its concern that they should be respected. It also offered its services to the Government of South Africa in matters relating to protection, assistance and dissemination of knowledge of international humanitarian law among members of the armed forces.

At the request of the South African authorities, the ICRC approached the Angolan Government to obtain the return of the mortal remains of a South African soldier, killed on Angolan territory during the clashes at the beginning of July. At the end of the year, no reply had been received.





*Food assistance to displaced persons in Angola*

## Protection

**PERSONS IMPRISONED BECAUSE OF THE INTERNAL SITUATION.** — In 1980, the ICRC carried out a further series of visits to persons imprisoned because of the internal situation: in October, four delegates, one of whom was a doctor, went to eight places of detention holding 515 convicted security prisoners and four persons detained under section 10 of the Internal Security Amendment Act. However, the ICRC was not authorized to visit detainees who had been arrested following incidents in June 1980 in various townships. Attempts by the regional delegate to obtain permission to visit persons detained under section 6 of the Terrorism Act and to prisoners on whom the death sentence had been pronounced remained unsuccessful in 1980.

**VISITS TO DETAINEES IN NAMIBIA/SOUTH-WEST AFRICA.** — In January the ICRC obtained authorization to visit 32 prisoners held at Windhoek by the South African authorities under the Namibia Administrator-General's Proclamation No. 26 (AG 26), relative to the territory's security.

After the ICRC regional delegate in Namibia/South-West Africa had repeatedly made approaches to the authorities concerning visits to persons imprisoned under the Administrator-General's Proclamation No. 9 (AG 9), the ICRC was granted authorization on 22 April to visit those detainees. Accordingly, in June, ICRC delegates were given access to security detainees held by the South African Army in Mariental Camp, and a second visit was carried out in September.

On 19 November the ICRC obtained the Administrator-General's authorization to see all detainees held under the various proclamations relative to the territory's security. Visits were accordingly carried out to persons held in places of detention at Windhoek, Gobabis, Outjo and Karasburg.

**DECLARATION OF INTENT BY THE AFRICAN NATIONAL CONGRESS.** — On 28 November, Mr. O.R. Tambo, President of the African National Congress (ANC), handed to the President of the ICRC a declaration stating that the ANC, in the course of the struggle in South Africa, intended to respect the principles of international humanitarian law applicable in armed conflicts; the declaration also



stated the ANC's intention to respect wherever practically possible the rules of the four Geneva Conventions of 1949 and of Protocol I additional to those Conventions relating to the protection of victims of international armed conflicts.

### Assistance

The ICRC continued its programme of assistance to detainees, their families and former detainees visited in South Africa. Prisoners received relief following the October visit.

In addition, the majority of the families of the detainees visited by the ICRC received some relief. The travel expenses of persons going to visit their detained relatives were borne by the ICRC. Every month, food parcels and sometimes blankets were given to needy families of detainees and to newly released security prisoners. The ICRC also paid for the medical treatment which the poorest detainees were in need of.

In December, following the visits to places of detention in Namibia/South-West Africa, the ICRC contacted various benevolent associations with the aim of preparing an assistance programme in aid of detainees and their families, similar to the one in South Africa.

### Other activities

The regional delegation in Pretoria worked with the South African Red Cross in tracing persons reported missing and forwarding family news. It also took part in organizing the repatriation of persons to the Transkei from Zimbabwe and to Angola from Namibia.

## East Africa

### Uganda

In Uganda, ICRC tasks were mainly protection and tracing activities all through the year, both during the time President Binaisa was in power and also when the Military Commission, chaired by Mr. Paulo Muwanga, took over the presidential functions on 17 May until the elections in December. Relief and medical assistance actions concerned essentially detained persons.

In the last two months of the year the ICRC, which had observed developments in West Nile Province, organized a special aid programme in that area. The previous month, armed bands, partisans of the former president Idi Amin Dada, had swept through the north-west region of Uganda spreading destruction and distress among the civilian population. On 20 October, the ICRC offered its services to the Ugandan authorities who agreed to an ICRC mission's performing its tasks on a long-term basis in the stricken areas.

The ICRC also undertook to promote the dissemination of international humanitarian law; the regional delegate stationed at Nairobi gave several lectures on the Geneva Conventions to Tanzanian police officers, prison officials and army officers.

### Death of ICRC delegate

The ICRC suffered a grievous loss when one of its delegates, Miss Christine Rieben, lost her life in a car accident near Kampala on 17 January. Miss Rieben had worked first for the ICRC in Chad and had been posted to Kampala on 18 December 1979 as delegate for Central Tracing Agency work.

### Protection

*VISITS.* — The ICRC carried out two series of visits to places of detention in Kampala and other towns, to see persons arrested during the fighting between Uganda and Tanzania or as a result of the overthrow of the old regime. Most of these detainees had been thrown into prison without being charged under any law. The first series of visits took place from 4 to 26 March; the delegates went to eleven places of detention holding 5,793 detainees, including a number of persons transferred from Tanzania (see section on «Tanzania» below). The second series, from 25 July to 21 August, included twelve places holding 4,789 detainees. Relief goods were distributed and reports on every visit were sent to the authorities.

Besides these visits, the delegates went several times to the main prisons of Kampala, Jinja and Mbale and to some smaller prisons to check on the situation regarding hygiene and food, bring relief items and deal with certain individual cases.

In 1980, the ICRC went to 23 places of detention and saw altogether 9,649 detainees, including 156 women.

*STEPS TO OBTAIN ACCESS TO OTHER PLACES OF DETENTION.* — Having been granted authorization in 1979 to visit civilian places of detention, the ICRC began to take steps to obtain access to military places of detention, too. When President Binaisa was in power, its delegates were given permission to visit two military prisons, but after the change in the regime in May, no further visits allowed to any military jails. However, the chairman of the Military Commission agreed to the principle of ICRC visits to civilian detainees in military prisons.

Following the armed clashes in West Nile Province in October, the ICRC asked the Military Commission on 14 November for permission to visit persons put under arrest in connection with those incidents. The authorities granted authorization in December.

*REQUEST FOR RELEASE OF DETAINEES.* — The ICRC several times asked the authorities to examine the situation of civilian detainees and release on humanitarian grounds certain categories of detainees (juveniles, women, the aged, sick persons). On 19 August the chairman of the Military Commission gave his approval to the ICRC's proposal.

Although no releases on a general scale took place in 1980, some detainees were released because of old age or ill-health at the ICRC's request.

## Relief

The ICRC distributed for the detainees in Ugandan prisons medicaments, soap, disinfectants, utensils, clothing, blankets and recreational articles. Food was also supplied in some places where shortages were particularly acute. The value of the food distributed in August was twice as much as in June. The additional supplies of food were donated by the European Economic Community (EEC) and the World Food Programme (WFP).

In the second half of 1980, needy families of detainees also began to receive some relief supplies, distributed to them by the ICRC, with Uganda Red Cross co-operation.

Besides the articles given to the detainees, which constituted the major part of ICRC aid in Uganda, soap, disinfectants and blankets were distributed to government hospitals and dispensaries and to the Uganda Red Cross for some of its first aid posts. In the Karamoja region, where needs were acute, the ICRC with the National Society's co-operation distributed relief to fourteen dispensaries. Most of these goods were donated by the Danish Red Cross, UNHCR and Oxfam, which were not adequately equipped to carry out the distributions on their own. In the first half of the year, the ICRC placed at the disposal of the Uganda Red Cross two heavy-duty trucks to carry relief goods to the civilian population.

Towards the end of the year, the situation in West Nile Province deteriorated (see above). On 8 November a survey was accordingly carried out in the districts of Arua and Moyo. On the strength of this mission, it was decided to set up relief action in aid of some 10,000 to 15,000 displaced civilians. Relief convoys were at once organized, with the co-operation of the Verona Fathers, and were sent, laden with food (donated by WFP and CARE/Uganda), medicaments, cooking utensils and soap, to be distributed to missions and hospitals. In addition, four milk distribution centres for mothers and infants were established in the districts of Arua and Nebbi.

## Medical aid

In all the places of detention visited, the ICRC distributed basic medicaments and, where necessary, provided laboratory material.

The ICRC took steps to get the prison authorities to improve medical care in the prisons and transfer certain detainees to hospitals. Following recommendations made by the medical delegate, a member of the ICRC team visiting the prisons, it was decided to post a nurse to the ICRC delegation in Kampala to pay careful attention to the prisoners' state of health and supervise the utilization of medical relief. The nurse was dispatched to Kampala on 24 October.

As in 1979, the ICRC continued to supply standard kits of medicaments and dressings to hospitals and dispensaries in the affected regions: Kampala, Mbale, Acholi, Bunyoro, Toro, Karamoja and West Nile.

## Tracing Agency

The work of the Kampala Tracing Agency office, which had been opened in September 1979, was:

- registration of detainees at each place of detention visited and of all those who had been transferred, had escaped, had died or had been released;
- exchange of family mail between detainees and their families;
- search for families of detainees;
- search for persons reported missing, undertaken generally in Uganda, and in certain cases also in neighbouring countries, such as Sudan and Kenya.

The forwarding of messages by the Kampala Tracing Agency office was facilitated by the aid it received from the 22 branches of the Uganda Red Cross. The various missions of the Verona Fathers were also helpful in dealing with some of the enquiries about missing persons, and recourse was had to the Ugandan national press and radio to inform the people about the ICRC's tracing office activities and to get into contact with detainees' families.

In 1980, the Tracing Agency processed over 400 cases (the majority about missing persons) and forwarded about 13,000 family messages.

## Tanzania

In 1979, the ICRC had carried out two series of visits to persons detained in Tanzania following the conflict which had broken out between Uganda and Tanzania (see page 23 of the 1979 Annual Report).

A third series of visits had been planned to take place in March 1980, in the course of which some 300 family messages were to have been handed over to prisoners of war in Tanzania. The visits had hardly begun at Rwamumba Prison when the Tanzanian Government decided to transfer to Uganda most of the 704 prisoners of war visited by the ICRC in 1979 and 402 Ugandan civilians in Tanzanian hands. On their arrival at the prison of Mbale on Ugandan territory, they were registered by ICRC delegates. The Kampala delegation handed over relief supplies to help the Ugandan Government cope with this increase in its prison population and asked it to take steps to transfer some of the detainees to other prisons. The ICRC submitted to the Ugandan authorities the case of Ugandan prisoners removed from Tanzania although they and their families had settled in that country. It also approached the embassies of some countries, whose nationals were among the prisoners transferred to Uganda (Burundi, Rwanda, Zaire and Kenya).

About a hundred prisoners transferred from Tanzania were released by the Ugandan authorities.

## Relief

In accordance with the decision made following a visit by ICRC delegates in August 1979 to the Kagera area, a final

distribution was made in the first quarter of 1980 by the ICRC to Tanzanians who had fled their homes at the time of the conflict between Uganda and Tanzania (see page 23 of the 1979 Annual Report). Blankets, cooking utensils and various relief supplies were distributed, with the co-operation of the Tanzanian Red Cross, to some 30,000 persons.

## Ethiopia

In Ethiopia, the ICRC continued its activities in aid of the victims of the armed conflicts in Eritrea and Ogaden. Relief was sent to the inhabitants of the province of Tigre and Gondar, where troubles had also occurred. As it did in 1979, the ICRC took steps to obtain the co-operation of the Ethiopian authorities and National Red Cross Society, with the aim of extending the scope of its traditional tasks (protection and Tracing Agency work).

In December, the delegate-general for Africa, Mr. Frank Schmidt, while on a mission to Addis Ababa re-examined those questions with Ato Tibebe Bekele, Permanent Secretary at the Ministry for Foreign Affairs, and with National Red Cross leaders. By the end of the year, some progress had been achieved in the field of protection.

### Protection

*VISITS TO SOMALI PRISONERS OF WAR.* — After fighting had again broken out in Ogaden, the ICRC asked to have access to recently captured Somali prisoners of war. Permission having been granted, an ICRC delegate, on 24 and 26 April, visited 27 prisoners in a military camp at Harar, in accordance with ICRC procedures. Of these, 17 had already been seen at earlier visits—on 6 March 1978 and 25 October 1979. A further visit took place on 28 October 1980 when 38 prisoners, including 11 new arrivals, were seen by the ICRC. Some relief items were handed to them, through the Ethiopian Red Cross.

*EXTENSION OF PROTECTION ACTION.* — The ICRC sought to extend its protection action to various categories of detainees, other than prisoners of war.

On 3 December, the Permanent Secretary at the Ministry for Foreign Affairs accepted the principle of allowing the ICRC to have access to all places of detention in Ethiopia. The practical details of the programme of visits were still to be discussed with the Minister of the Interior and the Prisons Administration.

### Medical assistance

*DEBRE ZEIT REHABILITATION CENTRE.* — ICRC action at the Debre Zeit rehabilitation centre for the war disabled (amputees and paraplegics), begun in January 1979, was due to be terminated on 31 December 1979. The Ethiopian Government and the ICRC signed a new agreement on 10 January 1980, extending ICRC assistance for a further year. A team of eight specialists, later increased to nine (5 orthoped-

ists, 3 physiotherapists and a nurse specialized in paraplegics care) was therefore maintained throughout the year. Their task was to fit the disabled with artificial limbs and provide them, in particular the paraplegics, with physiotherapy and proper nursing care; to run the workshop, where prostheses, orthoses, crutches and wheel-chairs were made (all with local materials); and to train the local personnel (55 persons at the end of 1980, nearly half of whom were themselves disabled): from November 1979 to the end of December 1980, about thirty local employees took the training course for assistant physiotherapists and orthopedists. Examinations were to be held in January 1981.

In 1980, the Debre Zeit centre fitted 400 disabled persons. ICRC assistance (purchases of material, salaries of some local technical workers) amounted to 200,000 Swiss francs. From the time the programme was launched to 31 December 1980, the centre produced 601 prostheses, 135 supports for paraplegics, 53 wheel-chairs and 550 pairs of crutches.

Following a survey carried out in the first fortnight of August by a paramedical co-ordinator sent by ICRC headquarters, the ICRC decided, in view of the large number of patients requiring treatment, to extend its work at Debre Zeit for another year. At the same time it was to phase out its specialists and gradually place the responsibility for the operation of the centre, and later for obtaining the necessary funds, entirely on the Ethiopians, while ICRC co-operation would only be in an advisory capacity.

*ASSISTANCE IN THE WAR-AFFECTED AREAS.* — To cope with the needs of thousands of displaced persons, the ICRC, in co-operation with the Ethiopian Red Cross, bore the operational expenses and the cost of medicaments incurred by a mobile medical unit working in the provinces of Sidamo and Bale.

In addition, in support of the activities of the Ministry of Health, the ICRC supplied standard kits of medicaments to hospitals, dispensaries and clinics in the regions most affected by the war: Hararge, Tigre, Gondar, Eritrea, Sidamo and Bale. The distributions were made either by the ICRC itself or through the intermediary of the Ethiopian Red Cross and Ministry of Health.

### Relief

The ICRC continued, too, to aid displaced persons in the regions affected by the war by providing them with food, blankets, tents, soap and cloth. The recipients of this aid were the victims of the Eritrean conflict in the region of Asmara, the victims of the Ogaden conflict in the provinces of Hararge, Bale, Sidamo and Arusi, and the inhabitants of the province of Gondar and of the Mekele region in the province of Tigre.

The ICRC worked closely with the Ethiopian Red Cross, which was the main channel for the distribution of the ICRC relief. It contributed financial aid by paying for the operational expenses of five Ethiopian Red Cross branches and provided logistical assistance: a mechanic, made available by the British Red Cross, was sent to Addis Ababa to take charge of the maintenance of the motor vehicles belonging to the

Ethiopian Red Cross and to set up a repairs shop with funds provided jointly by the National Society, the League of Red Cross Societies and the ICRC.

Co-operation between the ICRC and the Ethiopian Red Cross in relief operations was re-examined and improved—mainly as regards the technical details—and an agreement for the period from 1 December 1980 to 30 June 1981 was concluded.

The CICR also worked in co-operation with government relief bodies and with the Churches, such as the Relief and Rehabilitation Commission, the Eritrean Regional Affairs Special Commission and the Social Welfare Center, particularly in Eritrea where the National Red Cross Society did not have a local branch.

A number of missions and hospital establishments received from the ICRC some material relief, in addition to medical items.

The head of the ICRC Addis Ababa delegation travelled to the region of Asmara, to the provinces of Bale, Hararge and Gondar and also, for the first time, to Tigre. His assignment was to re-assess the needs and make a survey of existing relief programmes carried out by the above-mentioned government bodies and the Ethiopian Red Cross, and to settle various technical problems relating to the forwarding of goods and supervision of distributions. His findings confirmed that it was necessary to continue ICRC relief activities.

### Tracing Agency

The ICRC approached the authorities for authorization to open a tracing office in the Addis Ababa delegation. At the end of the year, no reply had been received. The delegation all the same was able to forward messages between Somali prisoners and their families and organized the repatriation of some Namibians. A number of enquiries were registered and transmitted to the Central Tracing Agency in Geneva.

## Somalia

In the Somali Democratic Republic, the ICRC continued its attempts, first undertaken in 1977, to develop its protection and tracing activities (search for Ethiopian nationals, procurement of lists of Somali nationals reported missing, forwarding of family messages) rendered necessary by the Ogaden conflict.

A mission to Mogadishu, undertaken with this end in view from 13 to 27 March, did not secure any result, as the ICRC delegates were not able to meet the officials they had been hoping to see. The delegates handed over to the Somali Red Crescent, their only interlocutor during this particular mission, family messages and capture cards completed by Somali prisoners of war whom the ICRC had visited in Ethiopia in October 1979.

Dr. Ahmed Mohamed Hassan, President of the Somali Red Crescent, was received on two occasions—in May and in November—at the Geneva office of the ICRC by the ICRC President and by the Vice-President, Mr. Richard Pestalozzi.

They discussed the difficulties met with by the ICRC in Somalia and the prospects of Mr. Pestalozzi's travelling a second time on a mission to Somalia (where he had previously conducted a mission in August 1978).

It was only on 3 December, after military operations had again taken place along the Ethiopian border, that the ICRC received an official invitation from the Somali Government, through the Red Crescent Society, to send representatives there.

Mr. Hans-Peter Gasser, head of the Legal Division, and Mr. Francis Amar, assistant to the Director of the Operations Department, went to Somalia on 7 December. Besides their talks with Somali Government representatives, in particular with General Mohamed Ali Samatar, Vice-President of the Somali Democratic Republic and Minister of Defence, General Jama Mohamed Ghalib, Minister of the Interior («Local Governments and Rural Development»), the Director General of the Ministry for Foreign Affairs and the Commander-in-Chief of the Custodial Corps, they also met leading Red Crescent officials. The ICRC delegates once again raised questions relating to protection. They also explained what the role of the ICRC would be should an aid programme in connection with the incidents in the regions close to the Ethiopian frontier be organized.

### Protection

In the course of the December visit, the ICRC delegates had access, near Mogadishu, to two groups of prisoners, one consisting of 197 and the other of 7 men, captured during the combats in Ogaden. A Cuban prisoner, who had been seen for the first time in May 1979 (see page 25 of the Annual Report 1979), was also visited by the delegates, who brought him some comforts and gave him the possibility to write a family message.

### Assistance

From 9 to 12 December, the two ICRC delegates went round three border regions in the north-east of Somalia where military operations had taken place. They were accompanied by members of the Red Crescent and a representative of the Ministry of Defence. They visited several hospitals and made a preliminary assessment of the humanitarian needs, with an eye to action in aid of the civilian victims. It was decided that a more thorough survey would be undertaken at the beginning of 1981.

## Sudan

The ICRC delegation in Khartoum went to the aid of victims of the Eritrean conflict who had sought refuge on Sudanese territory. It provided medical assistance and helped to trace missing persons; it also provided aid for the inhabitants in Eritrea and the prisoners in the hands of the liberation movements, in the form of relief (food and



medicaments) sent through various bodies. Medicaments were also given to the Relief Society of Tigre, in aid of the victims of combats in Tigre.

The ICRC Khartoum delegation also gave assistance to Ugandan refugees in Sudan. In addition, it was in contact with the N'Djamena delegation for exchanges of family messages to and from Chad refugees in Sudan.

At the International Conference on Refugees, convened by Sudan, and held in Khartoum from 20 to 22 June, the ICRC delegate stationed in Khartoum was present as an observer.

#### **Death of an ICRC delegate**

A grievous incident in Sudan claimed still another member of ICRC personnel, the second in 1980. Mr. Jürg Baumann, who had been posted to Khartoum as a delegate in October 1979, was killed in a car crash on 21 September 1980. Mr. Baumann had joined the ICRC at the beginning of 1979 and had at first been stationed in Israel.

#### **Medical aid**

The ICRC's medical activities in Sudan mainly concerned the victims of the Eritrean conflict, some of whom were at Kassala Hospital and others at the Port Sudan Rehabilitation Centre.

The ICRC also sent standard medical kits (for a total value of 715,000 Swiss francs) to medical establishments run by the Eritrean movements. Aid to the victims in Tigre amounted to 40,000 Swiss francs. Transport and distributions of this material were carried out by Eritrean and Tigre humanitarian bodies.

**KASSALA HOSPITAL.** — As in 1979, the ICRC continued to take charge of medical activities at Kassala Hospital, run by a medical and surgical team composed of a doctor and three to four other staff, made available by the Swiss Red Cross. The team tended all the wounded of the Eritrean conflict and, when required, the local people. The team also went several times to the camp of Eritrean refugees at Kashm el Girba and provided medicaments for the dispensaries of this camp and Kassala.

The nurse specializing in the treatment of paraplegics at Port Sudan (see below) made a brief stay in Kassala and demonstrated how to treat seven paraplegics and made some provisional orthoses.

**PORT SUDAN REHABILITATION CENTRE.** — In July 1979, the ICRC, with the co-operation of the Eritrean Relief Association (ERA), had set up a medical aid programme for paraplegics and hemiplegics, who had been disabled in the Eritrean conflict. The aid programme, which consisted in providing personnel (2 physiotherapists and a nurse specializing in the treatment of paraplegics, in 1980), in material and medicaments for the Port Sudan Rehabilitation Centre run by the ERA, was terminated on 28 February 1980. The ICRC trained four nurses to give care for paralytics. Since the

beginning of the project, 174 patients had received care at the Port Sudan Centre. In 1980, the ICRC supplied the Centre with medical material and medicaments to a value of 46,050 Swiss francs.

#### **Relief**

Apart from medical aid, the ICRC gave material assistance to the prisoners held by the Eritrean liberation movements and to displaced civilians in Eritrea. Such aid, mainly in the form of food (supplementary rations for 60,000 persons), blankets, clothing and cooking utensils, was distributed by the ERA, which is the body responsible for aid to the Eritrean People's Liberation Front (EPLF), and by the "Eritrean Red Cross and Crescent Society" (ERCCS), which is the aid body attached to the Eritrean Liberation Front (ELF). The food distributed was provided by the EEC and the Swiss Confederation.

#### **Tracing Agency**

A delegate of the Central Tracing Agency (CTA) was posted to the ICRC Khartoum delegation at the end of February. In April, the ICRC received an official notification authorizing its representatives to enter the refugee camps and carry out the work normally performed by the CTA.

During the year, the Khartoum tracing office established correspondents in seven places in Sudan: six in the east and north-east (in the regions of Port Sudan, Gedaref, Kassala, etc.) and one in Juba, in the south. These correspondents are local employees, recruited by the ICRC or by other bodies, and are each responsible for several refugee camps, with which liaison is maintained by voluntary workers.

The tracing office was mainly engaged in endeavouring to find people (members of families living abroad) at the request of refugees, or people living in other countries. In the latter case, the enquiries were transmitted to the Khartoum office by the ICRC delegations in Kampala and Nairobi and by the CTA Geneva office. If the members of families to be re-united were outside Sudan, the ICRC worked closely with UNHCR, especially during the first phase when the place where the person concerned was living had to be localized.

By 31 December 1980, the Khartoum tracing office had registered 1,406 enquiries, and had closed 165 cases, of which 145 were successful.

#### **Kenya**

In 1980, the ICRC kept up in Nairobi its regional delegation for East Africa. Besides Kenya, the delegation was responsible for ICRC activities in the following countries: Burundi, Comoros, Djibouti, Madagascar, Rwanda, Seychelles and Tanzania; and also on Reunion Island. The Nairobi delegation's activities were mainly centred on Tracing Agency work and on the dissemination of knowledge of international humanitarian law. It also served as a logistics base for the ICRC's work in Uganda and, to a lesser degree, for the activities of the delegations in Addis Ababa and Khartoum.



The Nairobi tracing office handled enquiries about missing persons, especially in connection with Uganda and Djibouti; it forwarded family messages from and to Sudan and Uganda and registered the names of persons on lists of repatriated Ugandan refugees and other categories of persons. Working in co-operation with the Addis Ababa delegation, it organized the repatriation of Namibians from Ethiopia.

With the co-operation of the Kenya Red Cross Society, a programme was prepared by the ICRC regional delegation in Nairobi for the dissemination of knowledge of international humanitarian law and of the Red Cross in general for the Kenya armed forces. After obtaining the consent of the military authorities on 23 July, the regional delegation prepared a programme of lectures, films and slides. In September and October, the programme was displayed to some 5,300 officers and other ranks.

### **Missions to Djibouti and Seychelles**

The regional delegate for East Africa went on a mission to the Republic of Djibouti from 31 January to 9 February 1980.

He met members of the Government and leaders of the local "Red Crescent" organization. The main subject of his talks with the "Red Crescent" of Djibouti was the possibility of its official recognition by the ICRC.

With the authorities, the regional delegate conferred on the question of Djibouti's accession to the four Geneva Conventions (only the First Convention has been ratified so far) and of the dissemination of knowledge of those Conventions among schoolchildren and members of the armed forces. The authorities concerned agreed, in principle, that instruction in the Geneva Conventions should be given to schools and armed forces on the basis of ICRC handbooks.

The regional delegate also discussed the problem of Ethiopian refugees in Djibouti, to whom the "Red Crescent" society had provided aid. He visited four camps holding altogether about 15,000 refugees. Following this mission, the ICRC decided to provide the Djibouti "Red Crescent" with 5 tons of powdered milk supplied by the Swiss Confederation, to help the society in its work for the refugees.

From 10 to 16 February, the regional delegate was in Seychelles, to discuss mainly the possibility of the ratification by that country of the 1949 Geneva Conventions. He also went on several missions to Uganda, Somalia and Tanzania.

## **Other conflicts and countries**

### **Chad**

In 1980, ICRC action in Chad was divided into three periods: during the first three months, the ICRC was mainly concerned with the problem of the prisoners of war and interned civilians, numbering altogether about 2,000 persons, most of whom were detained in the northern provinces of

Borkou, Ennedi and Tibesti (the BET); the second period lasted six months, after the resumption of hostilities on 21 March, when the ICRC was engaged in various activities to protect, bring medical aid, provide relief supplies and seek the victims of the combats, most of whom were civilians; the third phase took place in December with the return of ICRC delegates to N'Djamena after their delegation in Chad had been evacuated from the capital early in October when the situation made it quite impossible for it to fulfil its task.

### **The problem of the release of prisoners of war**

At the end of 1979, the Transitional Government of National Unity (GUNT = "Gouvernement d'union nationale de transition") had confirmed the principle that prisoners of war were to be released, as laid down in August 1979 in the Lagos agreement signed by eleven factions in Chad. A special commission set up to study this question had granted the ICRC all facilities for the movement of ICRC delegations throughout the country, and for the registration and transfer of the prisoners. On 24 January 1980, these points were reasserted by President Goukouni Oueddei himself, who announced that "the Transitional Government of National Unity authorizes the International Red Cross to go to all areas where prisoners are to be found with a view to their unconditional release".

The transfer operation was to free over 2,000 prisoners of war, most of the civilian prisoners having been evacuated in 1979. The prisoners of war were in four different regions: in the BET controlled by FROLINAT (about 1,500 prisoners); in Ouaddaï, where the Armed Forces of the North (FAN) held about 400 prisoners; in Salamat and Guera, where about a hundred prisoners of war and civilians were under Common Action Front (FAC) control; and in Kanem (about fifty prisoners of war and civilians). All the prisoners were to pass through N'Djamena, where a transit centre had been set up, before being taken farther south.

Negotiations with FROLINAT, which held three-quarters of the captives, resulted in agreements authorizing the ICRC to transfer all prisoners from the BET. On 17 February, the chief of staff of the People's Armed Forces (FAP = Forces armées populaires) issued orders to the various armed units in the BET to release the prisoners and to collect them in eight posts organized by the ICRC; he also directed those units to facilitate the work of the ICRC, which had been granted complete freedom of movement in that sector. With the completion of this programme the ICRC was to close down its delegation in Faya-Largeau, and its medical aid and relief projects were to be wound up with the prisoners' departure.

Unfortunately, although the general plan for the prisoners' transfer had been settled in mid-February, it was not possible to put it into operation. At the end of February, the disagreements between the various parties represented in the GUNT broke out into the open and although the Revolution Council (FROLINAT) did not abandon the principle of the prisoners' release it postponed the execution of the plan to an indefinite date.

This new obstacle to the release of the prisoners led the ICRC to take immediate steps to try to secure a solution. At the beginning of March, it dispatched Mr. Laurent Marti to Chad as its special envoy, but all his efforts were of no avail.

The ICRC's decision to withdraw its delegates from Faya-Largeau was nevertheless maintained and the delegation was closed down on 11 March.

The dissent among the various factions that led to the collapse of the negotiations for the release and transfer of the prisoners of war was actually the portent of much graver developments. On 21 March civil war again broke out. The very violent clashes in N'Djamena which opposed President Goukouni Oueddei's People's Armed Forces (FAP), supported by the groups in favour of the GUNT, against Mr. Hissen Habré's Armed Forces of the North (FAN) split the town into two zones.

#### **ICRC activities after the resumption of hostilities**

On 27 March, the ICRC appealed to the two belligerent parties, urging them to settle their differences peacefully at the earliest possible moment. The appeal called also for the application of two humanitarian measures: one was for the Central Hospital, where most of the wounded among the civilians and troops had been taken, and for the buildings around the hospital to be declared a neutralized and protected locality as defined in article 18 of the Fourth Geneva Convention, in order that the ICRC should be able to perform its tasks (the ICRC was to ensure that no military installation would be set up in the zone and no armed men would be allowed to enter it); the other measure was for the two parties to agree to a cease-fire, to allow ICRC delegates to evacuate the civilians caught in the combat zone.

The Central Hospital was declared to be a neutral locality on 28 March. But the cease-fire involved an incalculable amount of parleying. Although it was finally signed on 7 April, it was never actually observed and fighting flared up again soon after.

From the outset of hostilities, the ICRC was active in both zones. But the fighting became so fierce that its delegates were instructed to carry out a partial withdrawal. At first, with the Cameroon Government's agreement, the delegates working in the FAN zone crossed the river Chari every evening to spend the night in Kousséri on Cameroon territory. Then, on 24 May, after an ICRC vehicle had been hit, although plainly marked with the red cross, the ICRC delegates definitely withdrew.

Four weeks later, on 19 June, the ICRC decided to station all its delegates in Kousséri, as the area around the delegation in the FAP zone had been shelled. The delegates continued all the same to cross regularly to the FAP zone.

The ICRC made many efforts (including a mission by the delegate-general for Africa, Mr. Frank Schmidt) to obtain from both parties undertakings that would secure the safety of its delegates and so enable them to carry out their tasks in both zones at the same time. In particular, it expressed concern at the civilians' food situation in the FAN zone and proposed to President Goukouni Oueddei to call a truce in order to provide

that zone with certain items and nourishing foods for specific categories of civilians (children under fifteen, expectant mothers and maternity cases). The proposal was not accepted.

At the end of July, Mr. Marti was again sent out to discuss the basic terms of an agreement that would allow the ICRC to continue its activities in Chad. President Goukouni Oueddei accepted the principle of an ICRC relief action in the FAN zone, provided the convoys were checked by the FAP. A letter setting out those proposals was sent to Mr. Hissen Habré, as conditions were so dangerous that it was not possible to cross the combat area to meet him in person. No reply to this letter was received.

Mr. Marti went on another assignment to Chad at the beginning of September, but the proposals referred to above were rejected by the FAN. The ICRC then submitted to the two parties a project that was to provide aid for both simultaneously from Cameroon. The project was approved and an agreement was signed on 17 September. Under the terms of the agreement, the ICRC programme in aid of the conflict victims was to be expanded: food and medical supplies were to be ferried across the Chari, on board barges marked with the Red Cross emblem, from Cameroon to both zones simultaneously whenever the need arose, and the forces of the GUNT and those of FAN were to respect the emblem of the Red Cross and offer protection and assistance to the ICRC delegates. The Cameroon authorities also proclaimed their agreement to these proposals.

Accordingly, the ICRC delegates were once again able to go to the two zones to assess the needs. Their surveys made it plain that a relief operation was necessary. The preparations for sending the first convoys had barely been completed when the ICRC received information that some groups within the GUNT were opposed to the operation taking place.

In view of this unexpected development, and despite new attempts designed to conciliate the parties on the practical details of its humanitarian action, the ICRC decided on 6 October to suspend its activities in Chad and recall its delegates to Geneva.

In the note announcing its decision to both parties to the conflict, the ICRC stated that it was ready to resume talks if proposals put forward to the ICRC were in line with its traditional impartiality and if its activities could be carried out openly with the approval of all the parties, and secure from political controversies. The international community was also informed through the press of the ICRC's decision.

Later developments in the military situation at N'Djamena, in particular the control of the town and of several FAN strong points by Government coalition forces, opened the way to a resumption of ICRC assistance. After consulting the Minister of Health, Mr. Medela, the ICRC sent to Chad a five-man team, which included a specialist of the Central Tracing Agency and two nurses. A medical delegate was already in the area. Their assignment was to take up again action to protect prisoners captured in the combats, bring medical aid in addition to that provided by the French co-operation organization stationed on the Cameroon side of the river, resume tracing activities and assess the needs in general.

## Protection

Before the outbreak of fighting at the end of March 1980, the ICRC's protection activities had been conducted mainly in connection with the transfer of the prisoners of war and interned civilians whose release had been announced. But on account of the events already referred to above, most of these former prisoners could not be transferred. Only those who were in the Guera and Salamat areas, numbering 96 prisoners of war and 163 civilians, were evacuated to N'Djamena on board French aircraft, under ICRC auspices. Later, those who so wished were conducted, even after the resumption of combats, away from the capital to the south through Cameroon.

At the same time, ICRC delegates continued to visit the prisoners in the camps in the BET provinces and evacuated some of them to hospitals.

After the resumption of hostilities, the ICRC approached the two parties to the conflict for authorization to have access to prisoners captured in the fighting. Visits to prisoners in both zones began at the beginning of April.

In the FAN zone, ICRC delegates carried out visits without witness to 25 prisoners of war held in Ridina Prison. Visits continued to be made until 24 May, after which date the ICRC, for safety reasons, did not attempt to reach the FAN zone. Permission to visit other places of detention in this zone was not granted.

In the FAP zone, ICRC delegates made weekly visits to the gendarmerie prison. Either a medical delegate or a nurse took part in every visit. Food, blankets and clothing were distributed to the prisoners. The ICRC delegates also supplied water to enable the prisoners to wash themselves and their clothes.

As part of its task to protect the civilian population, the ICRC organized the evacuation of women, children and casualties, trapped in the area where fighting was taking place.

## Medical assistance

Although the ICRC had decided at the end of 1979 to terminate its medical activities in Chad, it was compelled to resume them when combats broke out once more in N'Djamena on 21 March: medical staff was sent out, medicaments, medical supplies and assistance were provided to hospitals and dispensaries.

In the FAN zone a four-man surgical team—a surgeon, an anesthetist and two nurses—was sent to reinforce the medical personnel at the Central Hospital; a second team took its place until the end of April. These teams brought more than four tons of medicaments. To relieve the overcrowding in the Central Hospital, the ICRC delegates organized the transfer of the wounded to other establishments in the FAP zone (a procedure which was very soon abandoned as too dangerous) or sent them by canoe across the river to Kousseri (Cameroon) where the French EMMIR (*Equipe médicale mobile d'intervention rapide*) had set up a field hospital. The delegates also

organized within the university a casualty collection centre and hired local workers to collect and bury the dead.

In May, as fighting became fiercer, the Central Hospital had to be evacuated. ICRC personnel continued to work at the university casualty centre and to send the wounded to Cameroon until all ICRC activities in the FAN zone were suspended. Local employees then took over the transfer of the wounded.

In the FAP zone, the ICRC supplied medicaments to help organize a dispensary in Farcha, on the outskirts of N'Djamena, which was visited several times by medical delegates and nurses. The ICRC also opened a medical centre in the transit camp originally set up to receive released prisoners of war. Postoperative care was given at this centre, which also served as a dispensary for the civilian population and as a casualty collection centre for the wounded who were brought to it direct. After the French had departed and the military hospital had been closed, the Farcha dispensary was turned into an emergency hospital. At the end of May, the ICRC opened another casualty collection centre from which the wounded were either carried to the Farcha hospital or taken to a second EMMIR hospital on Cameroon territory opposite Farcha.

During the two months following the outbreak of renewed fighting, about 3,000 wounded were cared for in various centres and hospitals in N'Djamena, and 800 of them were sent across to Cameroon.

The ICRC provided medical assistance in other areas besides N'Djamena. In the zone controlled by Chad Armed Forces led by Colonel Kamougué, it gave material assistance (medicaments, stretchers, etc.) to the first aid centre at Mandelia, manned by Chad doctors.

Medicaments were also supplied by the ICRC to the medical centres at Mongo (zone controlled by the «Common Action Front») and Linia («Democratic Revolutionary Committee»).

After its delegation had retired to Kousseri, the ICRC continued to provide assistance to the Farcha dispensary, to send medicaments to both zones, and to pay for the transport of the wounded from the FAN zone to Cameroon.

When the ICRC suspended its activities in Chad in October, it handed half of its supplies of medicaments and medical material to the different parties to the conflict, the Catholic Mission and the League of Red Cross Societies; both the Catholic Mission and League were providing aid to Chad refugees in Kousseri. The other half of its medical supplies was kept in hand should the ICRC eventually resume activities.

In 1980, the ICRC supplied medicaments and medical supplies to a total value of 599,000 Swiss francs.

## Relief

During the first three months of 1980, part of the supplies still in stock at the end of 1979 was sent to the prisoner-of-war transit and collection centres at Sahr, Moundou, Bongor and N'Djamena. Small quantities of food were also distributed to various groups of needy persons in N'Djamena.

With the resumption of hostilities in the capital, food (wheat, powdered milk, sugar) was distributed to about 20,000 displaced persons in Farcha and various other parts of the town and in a score of villages in the neighbourhood.

Between 1 March and 30 April, nearly thirty tons of relief goods, to a value of 46,720 Swiss francs were distributed. A part was provided by the European Development Fund (EDF) and the remainder came from ICRC stocks.

When the ICRC's activities were suspended, the balance of its relief goods was handed over to the Ministry of Health, to the N'Djamena Municipal Council and to the representative of the United Nations High Commissioner for Refugees.

### Tracing Agency

During the first three months of 1980, the Tracing Agency office at N'Djamena continued to forward family messages from the prisoners of war and interned civilians in the BET to their families in the south, and vice versa, and to make enquiries about persons sought by their relatives.

On account of the very large number of enquiries registered since 1978 (at the beginning of 1980, there were still 580 outstanding), the ICRC delegation at N'Djamena entered into an agreement with a local weekly periodical for the publication, at regular intervals, of lists of persons sought. It also posted up those lists, stationed two tracing office correspondents at Sahr and Moundou and arranged for the Chad radio station to broadcast daily the names of those people. These measures produced some satisfactory results.

The resumption of hostilities in March 1980 led to increasing demands on the ICRC's activities, while the Tracing Agency's work was considerably slowed down: it became difficult, if not quite impossible, to reach certain regions and lines of communication were cut. The ICRC, however, developed its tracing activities in the FAP zone, where the main tracing office had been opened, in the FAN zone, and at Kousseri, where refugees arrived in large numbers. The work consisted in drawing up lists of the wounded and killed, registering prisoners visited, making enquiries and forwarding family messages. In N'Djamena alone, 360 new enquiries were registered, in connection with the conflict.

In 1980, the tracing office registered 504 enquiries; in 150 cases, the enquiry was successful. Moreover, 18,469 family messages were forwarded.

### Personnel

To cope with the increasingly serious situation, more ICRC delegates were sent to Chad. Their number rose from a dozen at the beginning of the year to twenty-two at the end of March; this figure included medical personnel but not local employees. Later, the number declined, especially after the suspension of ICRC action in the FAN zone and the transfer of ICRC personnel to Kousseri. At the beginning of August, there were only 9 delegates at Kousseri.

### Chad refugees

For the Chad refugees who had fled to *Cameroon* on account of the war, the ICRC considered that it was not necessary for it to supply medical aid or relief, as there were other bodies in Cameroon that were providing for their needs. On the other hand, the ICRC tracing office gave its services to the Chad refugees.

The ICRC delegates also went to *Nigeria* to see if Chad refugees in the Bornou area would require any help, but they found that assistance was being provided by the Nigerian Red Cross and other local organizations.

### Zaire

#### Protection

In 1980, the ICRC continued to carry out in Zaire the protection activities which it had commenced in 1979. Although the Government of Zaire had agreed in principle, already in December 1979, to authorize ICRC access to the places of detention under the authority of the State security police, it was only on 1 May 1980, when the delegate for problems concerning detention went to Zaire and entered into negotiations with the authorities concerned, that access to the "Centre national de recherches et d'investigations" (CNRI) at Kinshasa was obtained. The ICRC delegates, in addition to their visits to civilian and military places of detention, went at the beginning of August to all cells in Kinshasa police stations. In October, a further series of visits was carried out in Kinshasa.

During a second mission to Zaire by the delegate for problems of detention, the question of access to other places, under the authority of the armed forces, was again the subject of negotiations. Finally, permission was granted for visits to three places under the authority of the military security forces.

The ICRC also carried out protection activities in various provinces. In April, four delegates, one of whom was a doctor, made a series of visits to civilian and military places of detention in the province of Equateur. In August, visits were also carried out to the CNRI building in Lubumbashi and to the cells in police stations in the province of Shaba.

Altogether, 39 places of detention holding 2,776 detainees were visited by ICRC delegates in 1980. In the course of their visits, the delegates provided the prison dispensaries with medicaments and distributed relief supplies, such as soap, cigarettes, disinfectants, blankets and mats, to the detainees.

#### Tracing Agency

The expansion of protection activities gave rise to an increase in the tasks of the Tracing Agency. In accordance with an agreement with the Government, authorizing the ICRC to develop its tracing activities, more particularly for detainees and their families, a Central Tracing Agency



Tracing Agency delegate was dispatched to Kinshasa in November. His task was to organize the various services for the systematic registration of the detainees visited by the ICRC, the exchange of family messages and the search for missing persons.

## Western Sahara

The ICRC, which since 1975 had been concerned about the situation arising from the conflict in the Western Sahara, continued its contacts with all the parties concerned, in order to obtain their authorization to discharge the tasks incumbent on it under the Conventions in aid of all the victims of the conflict and of the prisoners of war in particular. In 1979, it had had access only to Polisario Front combatants captured by the Mauritanian armed forces, while it had not been possible to arrange any visits to Algerian or Polisario Front prisoners in Moroccan hands (last visits in 1978), nor to any Moroccan or Mauritanian prisoners held by the Polisario Front (last visits in 1976). (See 1979 Annual Report, page 29).

Early in 1980, in an attempt to resume negotiations, the ICRC approached the Ambassadors of Morocco and of Algeria in Geneva and sent a note to the representatives of the Polisario Front in Algiers. Although the ICRC's action met with a sympathetic response, the only tangible effect was obtained in Mauritania.

### Prisoners in Mauritanian hands

Two delegates, one of whom was a doctor, were in Mauritania from 5 to 15 July. They were afforded all facilities for a visit to 115 Polisario Front fighters still held by the Mauritanian armed forces. Since the previous visit in July 1979, thirty-six prisoners had been released, on grounds of old age or ill-health. Two prisoners previously seen at Aioun el Atrous had been transferred, at the ICRC delegates' suggestion, to Nouakchott where the other prisoners were held.

During this mission, the delegates met the President of Mauritania, the chief of staff of the armed forces, the Minister of Health and other government officials, and had talks also with representatives of the Mauritanian Red Crescent Society.

### Prisoners in Moroccan hands

No visits were possible to prisoners of war in Morocco in 1980. But the Central Tracing Agency continued to do what it could. For Algerian prisoners it forwarded 335 family messages and 545 parcels through the Algerian and Moroccan Red Crescent Societies. The prisoners were not, however, allowed to reply to the messages sent by their relatives.

### Prisoners in the hands of the Polisario Front

Two missions were carried out in Algeria (to Algiers in April, and to Tindouf in June), but no progress was made in the negotiations. The ICRC delegate did not manage at any

time to meet Polisario Front representatives. Contacts were maintained with the Algerian authorities, the Algerian Red Crescent and the "Sahrawi Red Crescent".

No visits to any prisoners, whether Moroccan or Mauritanian, in the hands of the Polisario Front were made in 1980, and even enquiries by the Central Tracing Agency concerning those prisoners did not elicit any reply.

After some fishing vessels with persons of various nationalities on board had been captured by the Polisario Front, the ICRC sent it a message drawing its attention to the humanitarian treatment to which prisoners were entitled.

### Medical assistance in Mauritania

The ICRC kept in contact with the United Nations Development Programme (UNDP) regarding the UNDP's project to set up in Nouakchott a rehabilitation centre for disabled persons, which would provide care for the war disabled, too. In 1978, the ICRC had agreed to participate in the scheme and to contribute an amount not exceeding 30,000 dollars for the purchase of basic equipment.

## Liberia

Following the change in the regime in Liberia on 12 April 1980, Mr. Frank Schmidt, delegate-general for Africa, went on a mission to Monrovia, from 9 to 17 August, with the purpose of renewing contact with the Liberian National Red Cross and offering the new Government the ICRC's services for visits to the persons detained in connection with the April *coup d'état*. The ICRC had not been in Liberia since 1975, when visits to places of detention had been discontinued.

Mr. Schmidt had talks with the Head of State, Master Sergeant Samuel K. Doe, the Minister of State for Presidential Affairs, the Minister for Foreign Affairs, the Minister of Defence, the Commander-in-Chief of the Armed Forces, and members of the People's Redemption Council, the country's legislative and executive organ. The Liberian authorities granted the ICRC authorization to visit only certain prisons. The delegate-general for Africa pointed out that the ICRC had set itself a basic rule that it should have access to all places of detention without any exception so that it could provide protection and assistance to all detainees without discrimination, and that if the ICRC were to visit only some of the detainees, it would be acting in contradiction with the Red Cross principles of neutrality and impartiality.

Accordingly, on 5 September, the ICRC President sent a message on those lines to the Liberian Head of State, expressing once more the ICRC's readiness to protect and assist the detainees, should the rules which it had established for carrying out its visits be accepted. The reply sent by the Liberian Head of State confirmed that, for the present, the ICRC, for security reasons, would not be allowed access to all the places of detention in Liberia.



**RELIEF AND MEDICAL ASSISTANCE SUPPLIED  
OR FORWARDED BY THE ICRC IN 1980 \***

*AFRICA*

Country	Recipients	Relief		Medical assistance	Total Sw.Fr.
		Tons	Value in Sw.Fr.	Value in Sw. Fr.	
Angola . . . . .	Displaced and disabled persons	1,017	2,655,120	180,000	2,835,120
Botswana. . . . .	Refugees	27.3	111,320	13,500	124,820
Chad . . . . .	Prisoners of war; displaced civilians	633.4	284,700	599,000	883,700
Djibouti . . . . .	Displaced civilians	5	47,200	—	47,200
Ethiopia . . . . .	Displaced and disabled persons	1,106	2,127,400	243,500	2,370,900
Malawi . . . . .	National Red Cross Society	1.3	7,700	—	7,700
Mozambique ** . .	Refugees	7.1	45,700	20,000	65,700
South Africa . . .	Detainees and their families	41.2	68,040	—	68,040
Sudan . . . . .	Displaced civilians	1,468.9	3,634,440	370,000	4,004,440
Uganda. . . . .	Displaced civilians; detainees; refugees; sick persons	93.2	379,170	94,000	473,170
Zaire . . . . .	Detainees	2.3	11,820	22,000	33,820
Zambia . . . . .	Refugees; displaced civilians	45.7	205,120	10,500	215,620
Zimbabwe . . . . .	Displaced civilians	1,340.6	669,500	200,000	869,500
TOTAL		5,789.0	10,247,230	1,752,500	11,999,730

\* Includes food assistance from the EEC and Swiss Confederation, aid to National Societies, to detainees and families of detainees, and aid provided in connection with programmes financed by specific funds.

\*\* Balance of relief goods sent in 1979, and distributed in January 1980.