

MAY

SIXTH YEAR — No. 62



# International Review of the Red Cross



*Inter arma caritas*

GENEVA

INTERNATIONAL COMMITTEE OF THE RED CROSS

FOUNDED IN 1863

1966

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# INTERNATIONAL REVIEW OF THE RED CROSS

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## BOOKS AND REVIEWS

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## FRENCH EDITION OF THE REVIEW

The French edition of this Review is issued every month under the title of *Revue internationale de la Croix-Rouge*. It is, in principle, identical with the English edition and may be obtained under the same conditions.

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## SUPPLEMENTS TO THE REVIEW

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### SPANISH

Vigésima atribución de la Medalla Florencia Nightingale.

### GERMAN

Zwanzigste Verleihung der Florence-Nightingale-Medaille.

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responsibility for material over its own signature.

**TWENTIETH AWARD**  
**of the**  
**FLORENCE NIGHTINGALE MEDAL**

*On May 8, when the world of the Red Cross, the Red Crescent and Red Lion and Sun each year commemorates Henry Dunant's memory, the movement has chosen its universality as a rallying standard for all National Societies in 1966.*

*We find this very universality when considering the place of origin of the twenty-seven candidates who in 1965 obtained the Florence Nightingale Medal. As is known, this award, made every two years by the ICRC on proposals submitted to it by the National Societies, honours nurses and voluntary aids who have distinguished themselves, sometimes to the point of heroism, by their exceptional devotion in the humanitarian sphere. The recipients indeed belong to nearly all the continents and each one of them independently of the conditions of culture and civilization inherent in their own country, has accomplished the same acts inspired by the same ideal; that of following in the footsteps and the example of their great predecessor, Florence Nightingale.*

*One is entitled to think that they have chosen this way because it reflects a certain image of life. They have, when often still young, heard the call of a vocation to which they have remained faithful.*

*There are some who risk their lives on the field of battle or who, at times of natural disaster, carry out their duty without thought for*

## FLORENCE NIGHTINGALE MEDAL

*their own safety. There are also others who day by day anonymously accomplish often thankless tasks for the relief of physical and mental suffering. Thanks to them also the red cross has become the symbol of active fellowship.*

*In answer to the request made by the ICRC, a large number of National Societies gave the awarding of the medal an impressive character by inviting leading personalities of governments and the Red Cross. The International Review wishes to thank all those who have sent it the necessary facts to enable it to produce the present article and its illustration. Unfortunately it has not been possible for us to give a complete account of these ceremonies, some of them having had to be postponed to a later date. Further information on this subject will subsequently be published when received.*

## AUSTRALIA

The ICRC recognized the exceptional merits of two nurses whose names had been submitted by the Australian Red Cross. These were *Miss Lucy Wise MacIntosh*, Home Sister-in-Charge at Duntrine, Sydney Hospital Nurses' Home and *Matron Mary Dorothy Edis*, M.B.E., Registered Nurse, Home of Peace, Perth, Western Australia.

Miss MacIntosh received the Florence Nightingale Medal on August 17, 1965 at an official ceremony at the National Society's Blood Transfusion Centre in Sydney. The award was presented to her by the Divisional Chairman <sup>1</sup>. In Perth a similar ceremony took place on August 3, 1965 at Red Cross House in honour of Matron Edis which was attended by the Society's Council members and the President of the West Australian Division who presented her with the award.

From 1904 to 1915, Miss MacIntosh carried out nursing work in various hospitals. In April 1915, she left for England with the Australian Army Nursing Service and was then sent to Northern France in the theatre of hostilities. In 1919, she returned to Australia and was appointed Matron at the Liverpool State Hospital and

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<sup>1</sup> *Plate.*

## FLORENCE NIGHTINGALE MEDAL

Home, Sydney. She was also for ten years Honorary Treasurer of the Society's District Branch. Thanks to her efforts, a considerable sum was raised for the Prisoner of War Fund. She resigned from the hospital in 1948 after 27 years service. It should be added that in her capacity as Matron she retained the attachment of all members of her staff who held her in high esteem.

Miss Edis trained as a nurse at the Kalgoorlie District Hospital (Western Australia). She was the first nurse to enlist in the Army Medical Service on the outbreak of war and was responsible for inspecting military hospitals in Australia and recruiting nurses for the Australian Military Medical Service overseas. She served in Egypt in 1915, then in Northern France with the Australian forces. In 1918 she was at the Rouen base hospital and returned to Australia in 1921 when she acted as Senior Repatriation Officer. In the Second World War, she was Principal Military Matron in Western Australia until 1943 when she resigned with the rank of Lieutenant-Colonel.

After working at the King Edward Memorial Hospital, she became, in 1948, Matron of the Home of Peace, Perth. In this hospital for incurables she imbued all with hope and inspired the staff with her enthusiasm. Under her management, the hospital has developed into a model institution and at the present time she is engaged in organizing a hospital of a similar type in another suburb of Perth. She is a Fellow of the College of Nursing and in this capacity has trained hundreds of young nurses.

It should be mentioned that wide coverage was given by the press, wireless and television in Sydney and in Perth to the presentation ceremonies of the Florence Nightingale Medal.

## CHILE

On October 2, 1965, in the Puerto Montt Arts Institute an impressive ceremony took place in honour of the new Florence Nightingale medallist, *Mrs. Ines Yuraszeck de Schmidt*, a volunteer nurse and President of the Puerto Montt branch of the Red Cross. The ceremony, presided over by the Vice-President of the Chilean Red Cross, was attended by a large audience including leading members of the Red Cross, the army, the navy, the air force, the

## FLORENCE NIGHTINGALE MEDAL

judiciary, public services, private enterprise and delegates from the National Society provincial branches<sup>1</sup>.

A number of speeches were delivered, notably by the Vice-President of the Chilean Red Cross; all praised Mrs. Schmidt's selfless devotion which was at times nothing short of heroism, as can be seen below.

Mrs. Ines Yuraszeck de Schmidt joined the Red Cross in 1955 as a volunteer first-aider. Four years later she became a volunteer nurse and in 1962 was appointed Vice-President and Directress of courses. In 1963, she organized the Child Welfare Service in co-operation with the National Ministry of Health.

During the dual disaster of 1960 she displayed exceptional courage, risking her own life during the tidal wave and earthquake which killed so many people, destroyed towns and villages and reduced more than two hundred thousand people to destitution.

With responsibility for administration of one of the four relief supply stocks set up in the affected regions, Mrs. Yuraszeck de Schmidt, then Vice-President of the local Puerto Montt branch, took charge of the distribution under great difficulties of over ten thousand tons of relief supplies to some of the most remote villages of the Cordillera, across roads which had been destroyed, by light craft and canoe to the many islands, in the midst of storms, rain and snow, taking off or landing by plane or helicopter on makeshift landing strips. This tragedy went on for eighteen months without a break; throughout she was the first-aider who saved, the nurse who restored. By her actions throughout this period she earned the profound gratitude of the Chilean Red Cross.

## CZECHOSLOVAKIA

The plenary session of the Czechoslovak Red Cross Central Committee on June 6, 1965, took place in an atmosphere of dignified celebration. It was on that occasion that *Mrs. Anna Knapcová* received the Florence Nightingale Medal and the accompanying diploma. The presentation was made by the President of the National Society in the presence of many guests from various government ministries<sup>1</sup>.

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<sup>1</sup> *Plate.*



## FLORENCE NIGHTINGALE MEDAL

The public was informed of the high distinction awarded to a Czech nurse in a communiqué issued by the Czechoslovak Red Cross which appeared in the press and in the Ministry of Health Review. The news was also announced by the Czechoslovak press agency and the radio service broadcast a commentary on the plenary session of the Central Committee and the ceremony at which the Medal was presented.

Mrs. Anna Knapcoková, a volunteer Red Cross nurse since her youth, was awarded that institution's nursing diploma in 1965, in other words after many years of service to the community.

Already during the First World War, she worked in various hospitals where she cared for wounded soldiers. Later on she continued her devotion to duty, always ready to give first-aid. When the Second World War broke out, at the time of the Slovak rising, she was at the head of Red Cross volunteer nurses at the military hospital of Tisovce, where she was untiringly dedicated to her task.

Apart from these merits, she has yet another, one which is very important, namely that she was one of the founders of the Czechoslovak Red Cross in 1919.

At the present time she is devoting her services to social assistance and first-aid. In these fields she has acquired great popularity among the local population where she works in exemplary fashion under the sign of the red cross. We would add that Mrs. Knapcoková is the holder of the commemorative medal awarded by the Czechoslovak Republic President to mark the anniversary of the country's liberation.

## FRANCE

Amongst the applications submitted by the French Red Cross to the ICRC, the latter accepted that of *Mrs. Lilia de Vendevre*, Directress of the "Service des infirmières pilotes secouristes de l'air" (IPSA).

On June 22, 1965, at the headquarters of the French Red Cross in Paris, she was presented with the Florence Nightingale Medal by the National Society's President, Mr. A. François-Poncet<sup>1</sup>. The

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<sup>1</sup> *Plate.*

## FLORENCE NIGHTINGALE MEDAL

ceremony took place in the presence of leading Red Cross personalities, delegations from the Society's air personnel and nurses who are already holders of that high honour.

The Society's President praised the recipient and recalled her outstanding services as a nurse during the two world wars and in Indochina, and above all as the founder and driving spirit of the Corps of Air Pilot Nurses. "She is", he said, "for the French Red Cross, someone who is far above the ordinary level, since she has initiated a new form of devotion to the Red Cross ideal, to which her name will remain attached."

Mrs. de Vendevre is the holder of a senior diploma (1916) and a State diploma. In her one can observe two vocations which meet in the same humanitarian enthusiasm: that of coming to the aid of human lives at the risk of her own and, on the other hand, that of opening up new vistas and blazing a trail for the future. The first found its practical realization in 1944 during the military operations in Normandy, the fighting in Paris and then in Indochina. The second was realized on many occasions, notably in the founding of the first team of pilot nurses in the Union des femmes de France (1933), in the creation of specialized medico-social training at the French Air Club for Air Nurses (1934) in the forming of IPSA (1937) and of the Moroccan State Nursing School (1940), and in the regional direction of French Red Cross Services in various French departments (1945).

In 1947, she became technical adviser to the Red Cross in aviation matters, a post which she still occupies, as well as that of President of IPSA whose development enables the French Red Cross to extend its field of action.

## GERMANY

### FEDERAL REPUBLIC

Amongst the applications submitted by the German Red Cross in the Federal Republic of Germany, the ICRC selected two registered nurses, *Oberin Gertrud Baltzer* and *Schwester Irene von Scheel*.

The former has devoted herself to her humanitarian task for more than forty years. A registered nurse in 1923, the first years of

her work were in Berlin at the Märkischen Hause, from 1933 to 1934 at the Red Cross "Wernerschule" and, until 1939 at the Berlin Free Hospital as Oberschwester where she was outstanding, as throughout her whole career, for her devotion to duty and her strong personality. On the outbreak of the Second World War, she served as "Feldoberin" in the German Army Medical Service until 1941, when she was appointed in charge of the "Schwesternschaft" and Hospital of Maingau. With energy and tenacity she faced all difficulties not only during that period of the war, but also whilst that establishment was being reconstructed and which has now become a modern hospital with 250 beds and also includes a nursing school recognized by the State.

In spite of her length of service, the recipient is still continuing her work in the Red Cross as directress of the Maingau Hospital.

The Florence Nightingale Medal was presented to Oberin Gertrud Baltzer at a ceremony which took place at Frankfurt on May 14, 1965 during the events commemorating the 75th Anniversary of the "Schwesternschaft Maingau" of the local Red Cross. The President of the "Verband Deutscher Mutterhäuser" of the Red Cross, Generaloberin Ilse von Troschke, presented the medal and diploma to the recipient in the Banqueting Hall in front of a large gathering of nurses, members of the Executive Committee, doctors and guests<sup>1</sup>.

Schwester Irene von Scheel first studied at the Red Cross "Frauenverein" and at its "Schwesternschaft Cäcilienhaus" in Berlin. In 1937, she qualified in the Nursing and Child Welfare Examination and in the same year obtained a State Nursing Diploma at the Augsburg Municipal Hospital where she worked until 1939. When war broke out she cared for the wounded and sick in Germany and other countries. In 1945, she was seriously wounded during the course of a move of a field hospital. Without waiting for her health to be restored, she continued working for the sick at Meersburg. With the arrival of peace she was no longer capable of working. This did not, however, prevent her from serving the Red Cross for nearly twelve years as an instructor in home care and of nursing aids.

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<sup>1</sup> *Platè.*

## FLORENCE NIGHTINGALE MEDAL

On July 10, 1965 in Munich, in the presence of leading personalities of the Bavarian Red Cross, members of the Executive Committee and representatives of local branches of the Red Cross, Dr. Hans Ehard, the President of the Bavarian Red Cross and a former State Minister, presented the Florence Nightingale Medal to Schwester Irene von Scheel <sup>1</sup>. Because of the exceptional character of this award, the Künstlerhaus in Munich was filled with flowers and adorned with Red Cross flags.

Dr. Ehard then delivered an address in which he emphasized the significance and the importance of this award bestowed by the ICRC. The distinction can in fact be considered as being the crowning of a life of sacrifice, a life in which one forgets one's own suffering by only thinking of that of others.

## GREAT BRITAIN

*Mrs. Mary Folke* became a Voluntary Aid in 1957 and was then trained as a Headquarters Field Officer by the British Red Cross. She was shortly afterwards posted to the Cyprus Branch of the British Red Cross, arriving in the island during the Emergency.

The British Red Cross was requested by the Government Medical Department to undertake certain duties normally performed by that Department and was called upon to start a District Nursing and Health Visitor Service. Mrs. Folke was responsible for this and ensured liaison between the Red Cross teams in the field and Government Medical Headquarters. She also organized the Red Cross Home for Sick Children in Kyrenia. In recognition of her outstanding services for the people of Cyprus she was awarded the M.B.E. in 1962.

Two years later she returned to Cyprus with the rank of Deputy Commissioner in charge of the operations of the Joint Red Cross and St. John Relief Commission to organize, in conjunction with the ICRC, the distribution of food and medical supplies and the tracing of missing persons in most difficult conditions. The Commission worked in both the Greek and Turkish sectors. Throughout

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<sup>1</sup> *Plate.*

the disturbances, Mrs. Folke's courage and devotion to duty were outstanding. On one occasion, at the height of the fighting she went into the besieged part of a town ahead of the R.A.F. Medical Unit under fire from both sides and cared for the wounded, bringing them out from the line of fire. She always showed impartiality to the victims of the events and her influence was of incalculable benefit.

Mrs. Folke remained in Cyprus some time after the Commission was withdrawn and then settled in Sweden. The British Red Cross has informed the ICRC that the Florence Nightingale Medal will be presented to her, probably in July, at the Society's next Council meeting.

## HUNGARY

The Hungarian Red Cross was pleased to learn that the candidate it submitted in 1965 was approved by the ICRC; the Florence Nightingale Medal was awarded to *Miss Irene Komarik*.

On July 1 last the medal and the diploma as well as the portrait of Florence Nightingale were presented to her by Dr. Zoltan Szabó, Minister of Health, in the presence of leading members of the National Red Cross Society and many outstanding representatives of the Hungarian Ministry of Health<sup>1</sup>. The presentation was arranged as part of a commemoration ceremony in memory of the great Hungarian doctor, Ignace Semmelweis.

Miss Irene Komarik is the holder of the nursing diploma in pediatrics which she was awarded in 1931 by the "White Cross". She continued her career as head nurse in the Pediatrics Division of various hospitals and clinics in Hungary from 1931 to 1951 and also in Korea where she went as a volunteer nurse to work in Hungarian hospitals in that country where war was being waged. There too she devoted herself to children, nursing them, helping them, often saving them from death.

Upon her return to Hungary in 1953 she resumed her work in the Budapest hospital until 1964. During that time, under particularly critical circumstances and together with her colleagues, she saved the children undergoing treatment at the "Heim Pal" hospi-

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<sup>1</sup> *Plate.*

## FLORENCE NIGHTINGALE MEDAL

tal. In 1957 she was appointed Directress of the Zalaegerszeg Centre for infants and also Directress of the town's Nursing School, a function she still fulfils today.

With her qualifications as a nurse, she combines organizing and teaching ability. She has always displayed proficiency in her occupation, and maternal affection for children in her charge. Unpretentious, modest, courageous in exceptional circumstances, she has been a fine example to us all for thirty-three years.

The letter of thanks which Miss Komarik wrote to the ICRC portrays her modesty and vocational integrity: "I think", she wrote, "that I never did more than what was required by the dictates of my professional oath and humanitarian duty. My life's aim is to help to alleviate suffering and to educate the new generations of nurses in a spirit of dedication."

## INDIA

In 1965, the ICRC awarded the Florence Nightingale Medal to a registered nurse and midwife who is at present a Principal Matron with the rank of Lieut.-Colonel.

*Miss Florence St. Claire Watkins* joined the Military Nursing Service in August 1940. In December of that year she was transferred to the Middle East Land Forces and spent five years overseas. Upon her return, she worked successively in various towns in India; at Sialkot, Calcutta and elsewhere. In July 1953, she served at army headquarters, in 1960 at Jubbulpore and since 1961 she has been Principal Matron in a military hospital at Shillong.

Service above self has always been her motto. And it was in this spirit that she carried out her task as a nurse in October and November 1962. During the fighting which was going on at that time the hospital where she worked received some two hundred wounded. At all hours of the day and night, Miss Watkins was ready to receive them and she never left them without first seeing to their assistance and comfort.

Her praiseworthy conduct was not limited to this devotion to duty which earned her the gratitude of so many wounded and sick. It is indeed through her selfless and untiring efforts that the stand-

ard of nursing is so high in the hospital where she fulfils her important function.

The Indian Red Cross Society has informed the International Committee that the medal and diploma will be presented to Miss Watkins in the near future during an official ceremony worthy of such an event.

## JAPAN

Three nurses proposed by the Japanese Red Cross were awarded the Florence Nightingale Medal in 1965, namely *Miss Kikuyo Uchiyama*, *Miss Kiyo Ushioda*, *Miss Kise Makita*.

In the auditorium of the National Society's headquarters in Tokyo, on June 26, 1965, an official ceremony took place, attended by H.I.M. the Empress, the Society's Honorary President, as well as the Crown Princess Michiko and the three Princesses, all four Vice-Presidents. The speaker of the House of Representatives, the Minister of Health, the ICRC delegate to Japan and representatives of the American Red Cross were also present.

The Society's President, Mr. Kawanishi, opened the meeting and the Empress presented the Medals to the three nurses<sup>1</sup>. In her address, Her Imperial Majesty stressed the honour conferred by this award not only on the three recipients but for the country as a whole, "for in the nursing world, this Medal is a symbol of their outstanding merit". She then expressed the hope that the three medallists would continue in their calling, as this would be of great benefit to the young nurses who will be called upon to take over.

After several messages of congratulations from participants, Miss Uchiyama addressed the meeting in the name of her colleagues and herself. There was also singing by the student nurses choir. Later the four Imperial Princesses gave a reception in honour of the medallists.

Miss Kikuyo Uchiyama has given devoted service under our common emblem for 39 years. She graduated as a Red Cross nurse and midwife and became a staff nurse in 1934. During the Sino-

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<sup>1</sup> *Plate.*

## FLORENCE NIGHTINGALE MEDAL

Japanese war she was assigned to a hospital ship then later to the Tokyo Military Hospital. During the Second World War she tended the sick in a field hospital in China, without ever making any distinction of nationality. Due to her sense of duty and qualifications she was appointed Directress of the Red Cross hospital at Okoyama in 1947, a position she still holds today.

Like her two fellow medallists, she has been honoured by a number of decorations and official citations.

Miss Kiyo Ushioda has been dedicated to the National Red Cross for fifty years. She graduated as a nurse, was appointed staff nurse in 1923 and Assistant Directress of the Mito Red Cross hospital in 1940. In 1950, she was appointed Directress, a position she still occupies today. From 1915 to 1923, she was a health visitor, then served on a hospital ship during the Sino-Japanese war. Upon her return in 1940 she resumed her activities at the hospital, where she distinguished herself by her cool courage during a fire caused by an air raid and which completely gutted the hospital. The hospital was later rebuilt and Miss Ushioda contributed to its resumption of operations. Today she devotes her energies to the training of young nurses and her skill and dedication are highly appreciated.

Miss Kise Makita graduated in 1915 after completing her training at the Japanese Red Cross central hospital. From 1915 to 1934 she was a nurse in the Los Angeles hospital in USA, where, in particular, she devoted herself to the care of some 300 patients during an epidemic of Spanish influenza. From 1934 to 1945, she was head nurse at one of the military hospitals in Shanghai, then at a field hospital in China and later at the Shin-hsiang military hospital, where she nursed not only the wounded but also cholera patients, and also supervised the anti-epidemic campaign. During the Second World War she served aboard a hospital ship and later at the naval hospital at Yokosuka.

When peace was declared she devoted herself to improving the training and living conditions of nurses. She was a member of the examinations commission, taught at the Takayama hospital nursing college and presided over the Japanese Nurses Association. In 1949, she was appointed General Directress of nursing at the Toyama central hospital.



KOREA  
REPUBLIC

October 27, 1965, the day chosen for presentation of the Florence Nightingale Medal to the two candidates submitted to the ICRC for approval, namely *Mrs. Chung-Sun Kim* and *Mrs. Bo-Shin Lo*, also marked the 16th anniversary of the National Society's foundation. The ceremony took place at the Drama Centre in Seoul in the presence of the wife of the President of the Republic, the Prime Minister, the National House speaker, members of diplomatic missions and some seven hundred guests<sup>1</sup>.

The Prime Minister read a speech on behalf of the President of the Republic who was absent from Seoul, but whose wife herself presented the medals to the successful candidates.

When embarking on her nursing career, Mrs. Chung-Sun Kim responded to a vocational calling which had stirred her in her youth. She graduated from the Severence School of Nursing in Seoul in April 1927 and in 1935 went to Japan for post-graduate training. From 1950 to 1953 she lived in New York where she completed further post-graduate courses.

At the beginning of her career and during the Second World War, when she was head nurse in the Presbyterian Hospital at Taegu—a position she occupied until 1948—all her resourcefulness and courage were directed to overcoming the most difficult situations. When she returned from America in 1953 she was appointed nurse's superintendent at the same hospital, an office she still holds today. She dedicated herself to the indigent sick and refugees during the Korean war; she nursed them, distributed relief supplies obtained thanks to her efforts, and taught them hygiene. In 1963, she distinguished herself during a cholera epidemic. Her example of self sacrifice was a model for nurses throughout her country.

At an early age Mrs. Bo-Shin Lo had a keen sense of justice and humanity; for her, there was no action more noble than helping one's neighbour whoever and wherever he might be. She achieved her ambition in 1934 when she completed her nursing studies at the Shanghai Sanitarium Hospital Nursing School. In 1953, she was

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<sup>1</sup> *Plate.*

## FLORENCE NIGHTINGALE MEDAL

awarded the nurse licence of the Ministry of Health and Social Affairs and in 1955, she was delegated by the Korean Nurses Association to the Lehai T.B. Hospital in Hawaii to further her nursing studies. Upon her return, she was appointed Chief Nurse at the Pusan Sanitarium and Hospital, a post which she still holds today.

This summary of her professional career would be incomplete without mentioning the events which bear witness to her unflinching courage. In 1931, when she was still only a student, she nursed the many wounded who came from the battle-fields of Manchuria. During the Korean war, she took under her protection thousands of refugees, especially orphans, which earned her the name "mother of orphans". In time of war as in time of peace, Mrs. Lo is always ready to serve the injured and the sick.

## NEW ZEALAND

On the occasion of the XXth Distribution, the New Zealand Red Cross had one of its nurses selected by the ICRC to receive the Florence Nightingale Medal. This was *Miss Muriel Jessie Jackson* who is at present Advisory Director at the Auckland Red Cross Centre.

Miss Jackson is a State Registered Nurse, holder of a Midwifery Diploma and of a Nursing Diploma of Victoria University, Wellington. She attended a three months' course at the Royal College of Nursing in London. From 1940 to 1946, during the Second World War, she served in the New Zealand Expeditionary Force in the Middle East, then in 1943, in Italy, she was with a mobile medical unit where surgery was carried out and casualties were received direct from the forward areas. Miss Jackson did much to maintain the morale of her nursing team at the highest level. She showed outstanding devotion to duty throughout her time on active service with the Middle East Forces and as Matron of their General Hospital.

On her return to New Zealand, she continued and still continues her task with selfless devotion which is in keeping with the high traditions of the Red Cross. We would also mention her work for

# FLORENCE NIGHTINGALE MEDAL

TWENTIETH AWARD

## **SOUTH AFRICA**

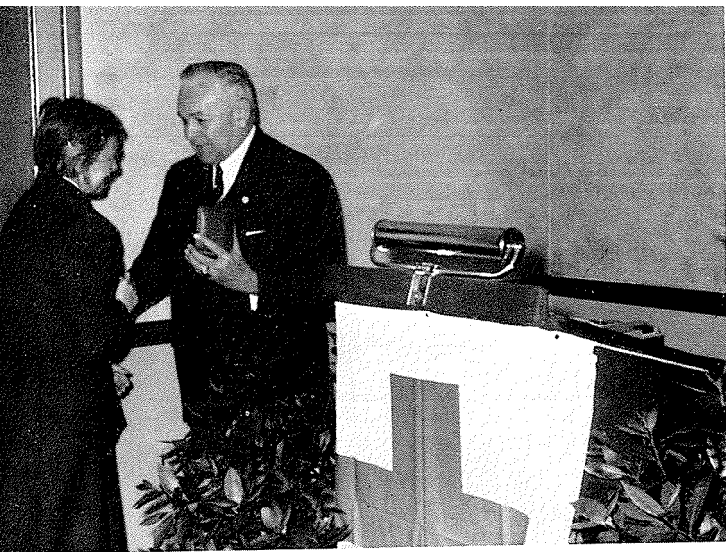
Mrs. V.M. Freeman,  
recipient of the  
award in 1965.



## **GERMANY (Federal Republic)**

In Frankfurt, Oberin G. Baltzer receiving the medal.





### **GERMANY (Federal Republic)**

In Munich, Dr. Ehard, President of the Bavarian Red Cross, presenting the medal to Schwester von Scheel.

### **AUSTRALIA**

The Chairman of the Red Cross, Sydney Division, presenting the medal to Miss L. Wise MacIntosh.





### CHILE

At Puerto Montt, Dr. Bahamonde, Vice-Président of the Chilean Red Cross, awarding the medal to Mrs. I. Yuraszeck.

### KOREA (Republic)

In Seoul, Mrs. Chung-Sun Kim and Mrs. Bo-Shin who have each just received the award and diploma.





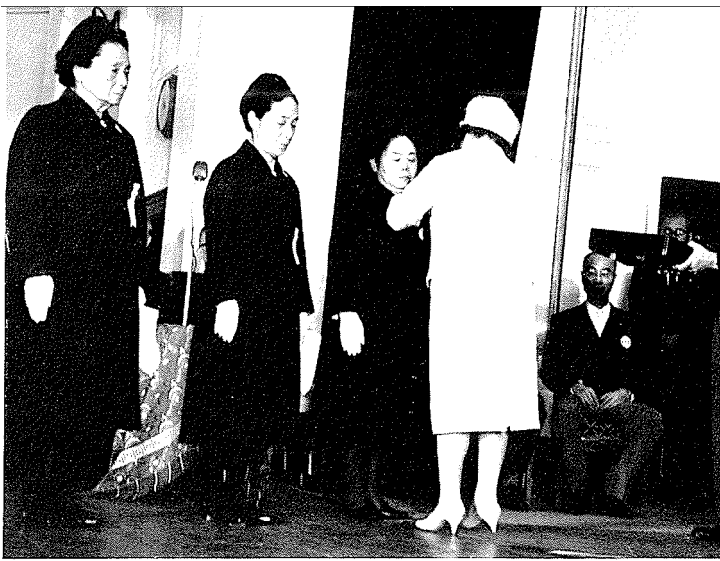
## FRANCE

The President of the French Red Cross, Mr. François Poncet, presenting the medal to Mrs. L. de Verdeuvre.

## HUNGARY

In Budapest, the Minister of Health, Dr. Szabó, congratulating Miss I. Komarik and presenting the medal and diploma to her.





## JAPAN

H.I.M. the Empress, Honorary President of the Japanese Red Cross, presenting the medal to Miss K. Uchiyama (**on left**) Miss K. Ushioda and Miss Makita, also recipients).

## PHILIPPINES

In Manila, in 1965, Mrs. Macapagal, wife of the President of the Philippines (**on right**) with the recipients of the award, (**left to right**) Mrs. Seraspi, Mrs. M. Meñez Concepción and Miss B. Hernando.





## POLAND

Mrs. Domanska, President of the Polish Red Cross, presenting the medal to the recipients, Mrs. W. Steffen and Mrs. L. Blum-Bielicka.

## CZECHOSLOVAKIA

Professor Stich, President of the Czechoslovak Red Cross, presenting the medal and diploma to Mrs. A. Knapcoková.







**U.S.S.R.**

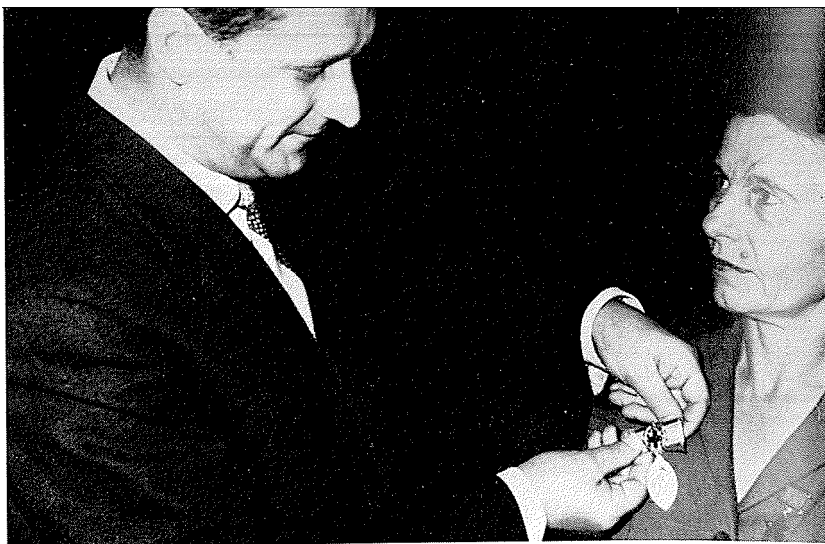
The medal being presented to Mrs. F. Tchanychéva by the Vice-Chairman of the Council of Ministers of the Republic of Tataria.

**U.S.S.R.**

In Leningrad, the President of the city's Red Cross Committee, presents a medal and diploma to Miss A. Khablova.



**U.S.S.R.**



At Polotsk, the President of the Red Cross of Byelorussia presenting the medal to Mrs. Z. Toussnolobova-Martchenko.

**U.S.S.R.**

At Lougansk, the head of the hospital for the disabled congratulating the recipient, Miss M. Serdiouk.



refugees and in teaching. She has in addition been most active in the Nurses Association and in various Government sponsored organizations. As Supervising Tutor Sister she was awarded a special service medal.

A ceremony took place some time ago at Red Cross House in Auckland at which many nurses and members of the Red Cross were present. Tribute was paid to Miss Jackson, and Mr. Eardley Button, Dominion President of the New Zealand Red Cross Society, presented her with the Florence Nightingale Medal on behalf of the International Committee.

### PHILIPPINES

The ICRC has recognized the exceptional merit, displayed particularly during the Second World War, of the three nurses whose names were submitted by the Philippine Red Cross: *Major Honorata P. Seraspi, Miss Basilia Hernando, Mrs. Maria Meñez Concepcion.*

The presentation of the medals took place in a large hotel in Manila on December 5, 1965, in the course of an impressive ceremony organized to coincide with the Society's National Convention <sup>1</sup>. The many people who attended the ceremony included some of the country's high officials, foremost among them being the President of the Philippines and his wife, the Chairman and members of the National Red Cross Board of Governors, and Mr. Calderara, ICRC delegate. The President of the Philippines spoke on the merits of the candidates and on their noble spirit and efficient sense of duty in their country's times of crisis. It was, he added, the true Red Cross spirit, particularly when their duty called these nurses to work among prisoners of war.

Mrs. Maria Meñez Concepcion graduated from the San Juan de Dios Hospital Nursing School, in Manila, in 1938. She was employed by the Manila Health Department as a public health nurse assigned to schools.

When war broke out she was called upon to exercise her profession in the capital's southern district Health Centre, where she worked with dedication until 1945. Her work was particularly

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<sup>1</sup> *Plate.*

## FLORENCE NIGHTINGALE MEDAL

praiseworthy during the enemy retreat, in a nightmare situation. The Centre was bombed and Mrs. Concepcion and some of her companions dug an air-raid shelter in the courtyard where they gave refuge to some thirty wounded. In addition, they went each day to the scene of fighting, with their kits, seeking for victims, tending the military and civilian wounded. In one such operation she was herself wounded and her companions killed. She was taken to the emergency station then to the hospital from which she was discharged two months later. She resumed her nursing activities with the Manila Health Department and is still there today.

Mrs. Honorata P. Seraspi, who retired from the Philippine army with the rank of major, is a graduate of the St. Paul Hospital Nursing School in Manila. It was during the Second World War that she demonstrated her outstanding qualities. She took an active part, as a Red Cross nurse, in the evacuation of prisoners of war at the height of the fighting. At the risk of her life she carried out this mission with devotion to duty, disregarding the dangers which threatened her. In 1942, the misfortunes of war made it necessary for her to go to the prison camp at Cabanatuan. She managed to enter, with several companions, and she observed that the state of health of the prisoners was alarming and that relief was urgently required. With great difficulty she managed to smuggle medical supplies into the camp. When a diphtheria epidemic broke out there, she was among the immediate volunteers who went to the city to obtain the needed antitoxin. In addition, she bolstered up the morale of the prisoners by bringing them news of their families. Upon completion of her mission at Cabanatuan, she attended to the evacuation of thousands of sick prisoners until 1945.

Miss Basilia Hernando obtained her nursing diploma from the Philippine General Hospital School of Nursing in 1922. She then worked under the Office of the Public Welfare Commissioner. In 1929, she went to the United States and worked for several years in various hospital services. Upon her return to the Philippines she was appointed representative and supervisor in various local Red Cross committees, where she was responsible for the training of nursing instructors for home nursing. She was also active in disaster relief.

The outbreak of World War II saw Basilia Hernando discharging the duties of Nurse-in-Charge in the Manila Port Area first-aid

## FLORENCE NIGHTINGALE MEDAL

station. Following the closure of the first-aid station due to intensive air-raids she was assigned to a Japanese concentration camp then, due to unexpected circumstances, she had to perform her nursing duties aboard a Red Cross hospital ship which was taking on the wounded collected around the bay by volunteers of whom she was one of the first. This vessel was overcrowded and constantly in danger of being bombed. Miss Hernando nevertheless continued her heavy task as senior nurse, tending the wounded, helping them with exemplary courage and devotion to duty until the vessel finally arrived in the United States after several calls in Australia. She later returned to the Philippines where she is at present in a senior position with the health authorities.

## POLAND

The Polish Red Cross, on the occasion of the XXth Distribution, saw two of the nurses, whose applications had been submitted to the ICRC, selected to receive the Florence Nightingale Medal. These were *Mrs. Wladislawa Steffen* and *Mrs. Luba Blum-Bielicka*.

Mrs. Steffen is a State Registered Nurse (1939) and holder of the Diploma of the Senior Nursing College of the Polish Red Cross (Poznan, 1939). She started at the Poznan Military Hospital as a member of the Red Cross nursing staff. When war broke out, she was placed at the disposal of the Military Medical Service and then posted to an Army hospital train (September 1939) until its bombing and total destruction at the battle of Kutno. Then there began for her a life of suffering but which was illuminated by the sacrifices she made in the service of others. Indeed, she was spared nothing, fierce fighting throughout while she continued her work as a nurse. In one action she was wounded, then arrested and imprisoned, but was finally able to escape. She endured all these ordeals through her faith in humanity, risking her own life to save others both under fire and in the camps. It was this ideal which constantly sustained her, so demonstrating how vocations are inspired by the Red Cross spirit.

In 1945, she resumed her nursing work at the Pruskov hospital near Warsaw where she is today.

## FLORENCE NIGHTINGALE MEDAL

Mrs. Luba Blum-Bielicka is a State Registered Nurse of the Jewish Hospital Nursing College in Warsaw. From 1926 to 1928 she held the posts of section head nurse and instructress at the Nurse-Instructress School for the training of welfare workers. After attending a course abroad, she returned to her own country and in 1938-1939 was appointed Vice-Directress then Directress of the Jewish Hospital Nursing College in Warsaw. She was holding this post when war broke out.

During the siege of Warsaw, aided by her students, she cared for the military wounded and sick. In the bombing of the capital her nursing college was destroyed and as soon as the fighting was over, Mrs. Blum-Bielicka worked in its reconstruction. In 1940, the College with its students and staff found itself in the Warsaw ghetto area. For her this was the beginning of a struggle to keep her establishment running, a struggle which she pursued with great determination and courage. Furthermore, in spite of the death penalty threatening her, she succeeded in leaving the ghetto several times in order to obtain aid outside for her college. In August 1942, she was able, again thanks to her courage and resolution, to escape death with twenty of her students. When the hospital in the ghetto in which she was working was destroyed and the sick exterminated, she devoted herself to the Jewish children entrusted to her care. She managed to save the lives of five of these and hide them. Having only just been able to save herself before the ghetto's total destruction, she was appointed, on Warsaw's liberation, Directress of the Children's Home at Otwock (1944-1949). Since then, she has been Directress of a Nursing College in Warsaw.

The two nurses were presented with the Florence Nightingale Medal and the accompanying diploma by Mrs. Domanska, President of the Polish Red Cross, at an impressive ceremony which took place in Warsaw in September 1965<sup>1</sup>. Many officials were present, including the Minister of Health and Social Welfare, the Director of the Health Department in the Ministry of Communications, the Vice-President of the Health Service Workers Trades Union and leading members of the Polish Red Cross' Central Committee.

In her address, Mrs. Domanska stressed the deep significance of that medal, whilst the Minister of Health, expanding on the subject,

<sup>1</sup> *Plate.*

paid tribute to the nursing corps and drew attention to the importance of their work within the Health Service.

This particularly moving ceremony was also notable for the words of thanks expressed by Mrs. Luba Blum-Bielicka on her own and her colleague's behalf. We would quote one sentence for its fine sentiment as a pledge for the future: "During the dreadful years of war, years of degradation for human dignity, my work as a nurse enabled me to recover my faith in mankind."

The bestowing of this distinction to two nurses of exceptional merit was given wide and due publicity in the press. A large number of Warsaw and provincial newspapers published articles, often in great detail, describing the careers of the two recipients and on the joyful character of the ceremony amply illustrated by photographs.

### SOUTH AFRICA

On August 13, 1965, in the Sharley Cribb Nursing College of Port Elizabeth, filled with flowers for the occasion, a large number of nurses and guests who had come from far afield were present at a ceremony for the presentation of the Florence Nightingale Medal. This was awarded to *Miss V.M. Freeman*, R.R.C., whose name had been submitted by the South African Red Cross<sup>1</sup>.

Mr. Swart, President of the Republic and Honorary President of the South African Red Cross, together with his wife, took part in the ceremony. After being introduced by Dr. L.B.B. Birt, President of the National Society, Mr. Swart then presented the medal to the recipient amid loud applause.

The event was widely reported in the press to which many newspapers as well as the official Red Cross organ devoted several columns with photographs, giving detailed accounts of her service and of the ceremony itself.

Miss Freeman is a Registered General Nurse and Registered Midwife. She also possesses a certificate as a Medical and Surgical Nurse and as Midwife. She started nursing in East London (South Africa), then became Matron at the Provincial Hospital (1925-1938) and of the Frere Hospital (1938-1940). During the Second World

<sup>1</sup> *Plate.*

## FLORENCE NIGHTINGALE MEDAL

War she served with the Military Nursing Service in East Africa, Egypt, Libya, Italy and South Africa (1940 to 1945). On the cessation of hostilities she assumed duty with the rank of Lieutenant-Colonel (Principal Matron) at the Provincial Hospital. In 1956 she relinquished this post on reaching retiring age, but continues to interest herself actively in the training of nurses as a member of the Nursing Council. Thanks to her, the South African Military Nursing Service has become an institution of which her country can be justly proud.

Of an outstanding personality whose work has been both wide and effective, Miss Freeman has devoted her life to the cause of suffering humanity, irrespective of race, religion or opinion.

## U.S.S.R.

On a proposal by the Alliance of Red Cross and Red Crescent Societies of the USSR, the ICRC awarded the Florence Nightingale Medal to five nurses, namely: *Mrs. Marie Savelievna Chkarletova*, *Miss Marie Dmitrievna Serdiouk*, *Miss Agnia Ivanovna Khablova*, *Mrs. Faïna Khoussainovna Tchanycheva*, *Mrs. Zenaïde Mikhaïlovna Toussnolobova-Martchenko*.

Mrs. Chkarletova, a nurse who graduated from the Koupiansk School of Medicine, first started her activities as a voluntary front line nurse (1943-1945). With never-failing courage, she took care of the wounded during the height of battle then led them behind the lines. In this way, in the course of one action, she saved the lives of more than one hundred wounded men, at the risk of her own.

Since 1950, she has been a nurse in the Koupiansk hospital. She takes an active part in hygiene education in schools and business undertakings and also in the teaching and development of home nursing. In addition, in co-operation with the Koupiansk local Red Cross Committee, she takes part in the blood donor recruiting campaign, in which she has been very successful.

Miss Serdiouk is a graduate Red Cross nurse and during the war was a member of the auxiliary medical personnel. In this capacity, from 1942 to 1945, she was a medical instructor for the Soviet army.



## FLORENCE NIGHTINGALE MEDAL

She carried out a task demanding courage, caring for the wounded, conveying them behind the lines under enemy fire, and also taking care of civilians in the fighting areas. Thanks to her fearlessness, more than 150 wounded were saved. On one occasion when tending seven seriously wounded soldiers whom she conveyed to the nearest field station as night was approaching, she herself was wounded.

Since the end of the war she has devoted herself to the families of soldiers killed in battle and to the war disabled. In 1957 she completed the Red Cross nursing course. At present she is Chairman at the Lougansk local Red Cross Committee which co-operates with the Health Service committees and establishments for the provision of medical training.

Miss Khablova, a graduate Red Cross nurse, is at present the Chairman of the Red Cross first-aiders at the "Electroforce" factory in Leningrad.

From 1938 to 1941, she helped that town's Red Cross Committee in its medical and social scheme for elderly people. When war broke out, she volunteered for the army as a nursing instructor. During the fighting she gave first-aid to the wounded, removed them from the firing lines, and displayed a spirit of human fellowship with remarkable courage under fire. She was wounded twice, the second time severely, but she resumed her station as soon as she recovered.

After the war she carried on her activities, first in a nursery (1945-1959), then at the "Electroforce" factory in Leningrad. Thanks to her ability, the Red Cross organization in this factory is one of the best in the town. The first-aid unit in the factory receives the necessary training to enable it to tend the personnel. In addition, it was she who originated the blood donor recruitment campaign and she herself often sets the example by donating her own blood.

Mrs. Tchanycheva is a State registered nurse and is at present working at the Kazan Secondary School as a senior nurse.

She started nursing in that town in the infectious diseases hospital (1939-1941). The war took her away to the front lines, where she displayed the full extent of her courage and dedication. As a member of a field mobile surgical unit she tended the wounded under fire, disinfected their clothing, several times gave her blood

## FLORENCE NIGHTINGALE MEDAL

for emergency transfusions, and in every way endeavoured to alleviate the suffering of the victims. During the course of the war, not only in her own country but as far afield as East Prussia, she saw action on the battle-fields where, thanks to her zeal and fearlessness, she was able to save hundreds of soldiers.

After the war, with a sense of humanity which is so typical of her, Mrs. Tchanycheva turned her attention to other victims of the war. As a staff nurse, she undertook an enormous task: the care of war orphans and the medical protection of the rising generation.

Mrs. Toussnolobova-Martchenko graduated from the Red Cross rush courses in nursing. She served in the front lines for eight months: there on the front her nursing days began—and ended; there she shed her blood and was severely maimed. She shared with her colleagues the ardent desire to save lives at any price, and for her the price was high. She was on the battle-field already at the beginning of the war; she tended and evacuated 128 wounded officers and other ranks. When she learned that the head of her unit had been seriously wounded during a battle, she hastened to his help in spite of the danger to herself, urged on by her will to serve; but a bullet shattered one of her legs and wounded the other. In spite of her pain she crawled to the head of her unit, but he was dead. She recovered his documents, and crawled away from the firing without knowing whether she would be able to find her own people. It was only two days later that she was found among the dead. She was taken to hospital where she had to undergo eight operations and several amputations which made her at 23 years of age seriously disabled in all four limbs. She was treated at the Moscow Artificial Limb Institute. At present she can use her left hand to take hold of objects with two fingers which the surgeons managed to save and she can write with her right hand.

The Alliance of Red Cross and Red Crescent Societies has kindly sent us many newspaper cuttings which enabled us to observe that the award of the Medal to five nurses has been widely acclaimed, particularly in the towns where these nurses live. Four of the presentation ceremonies have been described to us and it is a pleasure for us to give a brief account.

The award to Miss Serdiouk was presented on October 27, 1965, by the Chairman of the Red Cross Regional Committee in the

Institute of Technology of Lougansk in an atmosphere of dignity and in the presence of the active members of that Committee, the head of the Regional Health Service and the head of the hospital for war disabled congratulated Miss Serdiouk<sup>1</sup>.

In another town of the USSR, Kazan, Mrs. Tchanycheva received the Florence Nightingale Medal and diploma on November 6, 1965. The presentation was made by the Vice-Chairman of the Mari Republic Council of Ministers<sup>1</sup>. On that occasion were gathered the members of the Red Cross Central Committee and officials of the Ministries of Health and Public Affairs.

On September 21, 1965, in Leningrad, took place the Conference of blood donors and municipal and regional medical personnel. On that occasion, the Medal was presented to Miss Khablova<sup>1</sup>. The ceremony was broadcast by radio and television and Miss Khablova addressed the meeting.

In Polotsk, on August 31, 1965, at an official public meeting attended by senior officials, a member of the Executive Committee Presidium of the Alliance, presented the high distinction awarded by the ICRC to Mrs. Toussnolobova-Martchenko, whose exploits have inspired poets and musicians<sup>1</sup>.

A periodical—"Modern Woman"—in an account of the ceremony said of those who attended: "all these people of widely differing occupations and ages were moved by friendship, sympathy and profound respect for a woman known to all the town. This official meeting of workers in the town of Polotsk was for the presentation to their fellow citizen Zenaïde Toussnolobova-Martchenko, Heroine of the Soviet Union, of the Florence Nightingale Medal, the highest award by the International Red Cross . . . A number of speakers addressed the meeting. A group of pioneers bearing a flag and carrying bouquets of flowers entered the hall in close ranks . . . Young girl members of the Red Cross branches in the town's industries came to pay tribute to Toussnolobova . . .".

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<sup>1</sup> *Plate.*

## THE DUTY OF GIVING ASSISTANCE AND THE RIGHT TO RELIEF

by J. Maystre

*In December 1965 there took place in Liège a "Study period on international medical law" which consisted of a discussion by representatives of the International Committee of the Red Cross, of the International Committee of Military Medicine and Pharmacy and of the World Medical Association : the World Health Organization and the League of Red Cross Societies were represented by observers. This was followed by a general meeting of the Medico-legal Commission of the International Law Association and of the International Medical Law Study Centre of Liège.*

*The ICRC had delegated Mr. J. Pictet, Director for General Affairs, to these meetings ; he spoke of Resolution XXV of the XXth International Conference of the Red Cross. This resolution is a definite step forward in the application of the Geneva Conventions by the United Nations forces. The principal item on the agenda bore on the protection of civilian medical and nursing personnel. The participants in the meeting took note of the approval given in principle by the XXth Conference in Vienna of the draft rules drawn up by their working party. Note was also taken of the fact that further study was judged to be necessary as regards the protective emblem.*

*Some preliminary observations were then made by the World Medical Association, presented by Dr. Maystre on "The duty of giving assistance and the right to relief", which the International Review now has pleasure in reproducing below.*

*Amongst other subjects discussed, we would also mention the problem of medical aviation and that of training courses for young military doctors, the latest of which took place in Madrid in 1965, and which are showing encouraging progress. It has been arranged for the next session, that both the ICRC and the League will give courses lasting four hours. The ICRC will devote itself to the Geneva Conventions and to the principles of the Red Cross, whilst the League will deal with the organization of relief at times of natural disaster.*

*It should finally be pointed out that, during the general meeting which followed, an important question was on the agenda, that of the application of the Geneva Conventions in wars not of an international character (Ed.).*

### **1. — The duty of giving assistance in time of peace**

In its introductory note of 1964, the International Committee of Military Medicine and Pharmacy rightly pointed out that legislation in many countries obliges anyone witnessing the grave danger threatening the life of a human being to intervene promptly on pain of penal sanctions.

In most national legislations, the duty of assistance applies equally to all; in other countries the duty of giving assistance in case of peril extends not only to direct but also to indirect witnesses, such as doctors.

As an example of this, the French penal code makes no distinction between a direct and an indirect witness (art. 63, paras 1 and 2). According to this code, felonious abstention is shown when a doctor whose help has been requested by telephone, and warned of a danger of which he alone can appreciate the gravity, refuses his assistance without previously assuring himself that this danger does not require his immediate intervention. (Decree of the Supreme Court of Appeal of January 21, 1954).

Other national legal regulations, as in Germany, Belgium and Italy, are more subtle and admit unblameworthy abstention on the part of the doctor with certain reservations and under certain conditions. Such legislation, for example, recognizes that the doctor has the right to determine a priority scale of urgency, when he is retained by some other more urgent professional duty.

## THE DUTY OF GIVING ASSISTANCE

Codes of medical ethics impose an obligation on the doctor to give assistance in the case of grave peril and in an emergency. There is, in fact, no code which runs counter to such an obligation which has always been regarded by the medical profession as a fundamental duty.

In this connection, one should mention the provisions of the 1955 French Code of Ethics:

Article 5: "a doctor must bring emergency aid to a sick person who is in imminent danger if no other medical assistance is available."

Similar provisions can be found in the majority of national codes of ethics and on the international level in the Geneva Oath and the International Code of Medical Ethics adopted by the World Medical Association and its 60 national associations. The provisions of the International Code of Medical Ethics as regards emergencies are formulated in the following terms:

Duties of doctors to their sick: (paragraph 4) "a doctor must, in the case of emergency, give the necessary treatment out of duty to humanity. He can withdraw after having assured himself that the treatment he has prescribed will be given by another qualified person."

Medical practice today demands that a considerable amount of technical equipment be placed at the disposal of the sick and wounded, most especially in cases of extreme urgency and grave danger.

Such equipment and the specialist personnel assigned to it are generally concentrated in establishments for general and specialist treatment.

The effectiveness of medical assistance is dependent on time, that is to say on the speed with which transport and the personnel and equipment of treatment centres can act. The time factor, in fact, plays a preponderant role and can have a direct influence on the doctor's attitude. Emergency medical aid services have been set up and organized in many places. These "Specialist Services" comprise many variations, but they all attempt to achieve maximum effectiveness on behalf of the sick and wounded.

**2. — The duty of giving assistance in time of armed conflict**

One should first of all quote the Geneva Conventions of 1949 which bind very many States signatories and which comprise valuable factors of positive law in time of conflict, international or otherwise.

Article 3 of the First Convention (Wounded and sick) is reproduced in similar terms in the Fourth Convention (Protection of civilians). Article 3 deals with conflicts not of an international character and stipulates that:

“the wounded and sick shall be collected and cared for.”

Article 12 of the First Convention lays down that:

“only urgent medical reasons will authorise priority in the order of treatment to be administered.”

Article 18 of the First Convention declares that:

“no one may ever be molested or convicted for having nursed the wounded or sick.”

In addition, the International Committee of the Red Cross, the International Committee of Military Medicine and Pharmacy and the World Medical Association have, in common, drawn up two resolutions whose purpose it is to assure, in a more thorough manner, aid and care for the wounded and sick, especially in time of armed conflict.

The first resolution is entitled:

Medical ethics in time of conflict.

It states in particular:

paragraph 1: “medical ethics in time of armed conflict are similar to those in time of peace. These are laid down in the Code of Ethics of the World Medical Association.”

Paragraph 5 states: “in case of emergency, a doctor must always give the treatment which is immediately necessary, with impartiality and without any distinction of sex, race, nationality, religion, political beliefs or any other similar criteria. A doctor will continue to give his assistance as long as his presence with the sick or wounded is necessary.”

## THE DUTY OF GIVING ASSISTANCE

The second resolution is entitled:

Rules to ensure relief and care for the wounded and sick, especially in time of armed conflict.

This states:

Art. II.1: "in case of emergency, doctors and medical personnel of all categories are bound to give their care without delay and in keeping with their conscience, spontaneously or if they are requested to do so. No distinction whatsoever shall be made between patients, except that which may be dictated by medical urgency. They can refrain from giving treatment if this has already been assured by others."

These two resolutions were adopted by the three above-mentioned organizations and they were brought to the notice of governments in 1965 during the World Health Assembly and the International Conference of the Red Cross.

Other international medical organizations, such as the Medico-legal Committee of Monaco and the International Committee of the Neutrality of Medicine formulated similar resolutions.

### 3. — The duty of giving aid in all circumstances

Medical or social legislation in certain countries imposes on doctors the duty of giving assistance in all circumstances, including cases of emergency. Such provisions relative to the treatment of the sick and wounded are a serious threat to the indispensable independence of the medical profession. They can entail, as a consequence for doctors, a permanent obligation to give treatment and reply to every call, they can even lead to the whole of the profession's being set up as a State health service.

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In conclusion, the medical profession considers that the duty of giving assistance in cases of grave peril and emergency is a fundamental principle of medical ethics.

However, the medical profession itself defines the notion of urgency in a setting and in terms which are its own and are not always accepted by the legislator.



## THE DUTY OF GIVING ASSISTANCE

Widely extended interpretation calls for serious reservations. It would not appear wise to impose a sort of permanent requisition on all practitioners which could not fail to have unfortunate consequences.

The question raised by the International Committee of Military Medicine and Pharmacy is of considerable interest to the World Medical Association which has decided to pursue its study.

At the present stage, the position of the World Medical Association as regards emergency treatment is defined in the International Code of Medical Ethics and in medical ethics in time of conflict. This position may be given more precision when the WMA has completed the inquiry it is undertaking with its members. It is in fact a question of examining with the greatest care the influence which legal provisions for medical urgency could have on certain principles of medical ethics.

**Dr. Jean MAYSTRE**  
President of the International  
Liaison Committee  
of the Medical Welfare Association

# INTERNATIONAL COMMITTEE OF THE RED CROSS

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## *EXTERNAL ACTIVITIES*

### **In Vietnam**

*ICRC Relief Actions.*—In the different areas in which it is able to take action, the International Committee of the Red Cross is pursuing its efforts on behalf of victims of the Vietnam conflict. It is co-operating closely with the Swiss Red Cross, whose medical team has arrived in Saigon. This consists of a group of eight doctors and nurses who will be working at the Kontum hospital on the high central plateau. Mr. André Durand, delegate general in Asia, has gone to Saigon to take part in its installation.

Following the example of the Swiss Red Cross, other Red Cross Societies propose sending medical personnel to Vietnam. These new teams will not be integrated in the ICRC delegation, which will however provide them with all assistance they may require.

Also in this sphere of medical relief, the ICRC is continuing its activity for civilian war disabled. In a building specially equipped and installed near the headquarters of the Vietnamese Red Cross in Saigon, some forty disabled are being treated with a view to their being fitted with artificial limbs at the Saigon orthopaedic centre <sup>1</sup>.

A Swiss Red Cross nurse is going to Saigon where she will be assigned to this new Red Cross hospital centre which will be called the "Civilian Disabled Reception Centre". In addition to giving treatment, she will deal with the accommodation of the disabled, the training of first-aiders and young nurses of the Vietnamese Red Cross in orthopaedics and physiotherapy, not counting seeking out the disabled in the provinces or the many administrative tasks she will have to undertake.

The ICRC makes local purchases of equipment for the physical readaptation of the disabled, beds, mosquito netting, fittings for wash rooms and kitchen. The disabled also require strong shoes, on

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<sup>1</sup> *Plate.* War disabled at the Saigon Centre.



In **Portugal**, the President of the ICRC visiting houses built by the National Red Cross for needy families and...

... in **Poland**, at Swidnica, attending a first-aid exercise carried out by the young of the Polish Red Cross.





War disabled fitted with artificial limbs at the Saigon Disablement Centre with the help of the ICRC and the Red Cross of the Republic of Vietnam.

## **SOUTH VIETNAM**

At Giarai, Red Cross relief being distributed by the ICRC delegate, Mr. Modoux.



which orthopaedic appliances can be fixed, and clothing, which they lack.

Furthermore, acting on behalf of the National Red Cross Societies, of various aid committees in Vietnam and individuals having sent it donations, the ICRC is continuing to route relief to both North and South Vietnam <sup>1</sup>. Relief for victims in North Vietnam and in areas under NLF control are sent via Moscow-Peking to the Red Cross of the Democratic Republic of Vietnam in Hanoi. These consignments consist chiefly of blood plasma, antibiotics, sulfamides and anti-malaria sera.

*Return of a wounded delegate.*—Mr. Alain Modoux, a member of the ICRC delegation in South Vietnam, has just returned to Switzerland after a prolonged stay in a military hospital in Saigon. In January when on his way to a relief distribution to refugees, he was wounded by a mine explosion. He has been replaced at the Saigon delegation by Mr. Jacques Moreillon, previously delegate in India.

## **In India and Pakistan**

*A Mission draws to a close.*—It appears that by the end of June, the ICRC representatives in India and Pakistan will have completed the last of their humanitarian tasks arising from the recent armed conflict and its sequel. Mr. Max Stalder, assisted by Mr. Pascal Julmy, is at present in charge of the ICRC delegation in both countries.

ICRC delegations have been on the spot since September 12, 1965, when fighting was taking place on the Punjab front. On both sides, they were able to discharge the main tasks which, by virtue of the Geneva Conventions, are incumbent on the ICRC in the event of armed conflict. In other words, the International Committee was able to bring assistance to prisoners of war and interned civilians and at the same time help refugees on both sides of the firing line.

All prisoners and internees have now been repatriated, generally in the presence of an ICRC delegate. The ICRC is still carrying out various operations and checks in co-operation with both Govern-

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<sup>1</sup> *Plate.* Red Cross relief being distributed by the ICRC delegate.

ments. The latter have provided our delegates with the opportunity of visiting several camps and prisons, particularly in Kashmir, to ensure that there are no longer any of the opponent's nationals in detention.

*Donation of an ambulance.*—The International Committee has recently sent an ambulance to the Indian Red Cross. This National Society had informed the ICRC's delegate in New Delhi of its need in relief actions for a larger number of vehicles, particularly ambulances. The one which the ICRC has just sent was purchased with the balance of relief funds collected from National Red Cross Societies for the benefit of the victims of the recent Indo-Pakistani conflict. The lack of ambulances, indeed, was severely felt in areas affected by the hostilities.

### **In Rhodesia**

Mr. G. C. Senn, ICRC delegate, has just completed a series of visits to political detainees in Rhodesia. In particular, he went to the Khami prison and two camps in the Gonakudzingwa region.

Following these visits, he submitted a number of observations to the authorities which promised to take these into consideration.

In addition, accompanied by the Secretary of State from Salisbury, Mr. Senn made a tour of inspection in regions affected by drought and famine.

### **In Poland**

Pursuing its work as intermediary for the handing over of financial aid offered by the German Federal Government to the victims of pseudo-medical experiments in concentration camps under the Nazi regime, the International Committee of the Red Cross has just sent another mission to Poland. Its representatives, Mr. Jean-Pierre Maunoir, delegate, and Dr. Jacques de Rougemont, doctor delegate, have examined a further group of 85 victims of these experiments. Their inquiries will comprise a thorough study of each case, the examination of files, meeting Polish doctors who have treated the victims, as well as seeing the latter themselves. They will then draw up proposals for the Commission of Neutral Experts charged with deciding on the compensation to be paid.

It should be mentioned that each file includes a certificate of incarceration issued by the International Tracing Service at Arolsen where concentration camp archives are deposited. The ICRC has been administering this institution since 1955.

### ICRC President in Portugal

In its issues for March and April 1966, the *International Review* published brief accounts of the journey in the USA, Mexico and Central America, undertaken by Mr. Samuel A. Gonard, accompanied by Mr. S. Nessi, delegate.

On his way back to Geneva, the ICRC President called at Lisbon towards the end of March and visited the Portuguese Red Cross. He was accompanied by Mr. G. Hoffmann, general delegate for Africa.

He met the new National Society President, General Mario de Castro da Costa Macedo, and several leading personalities of the Red Cross, including the President of the Ladies Section, Mrs. M. Fernandes Thomaz de Morais, as well as Colonel Matheus Cabral, then Secretary-General, and Colonel Joao de Sousa Vairinho, the present Secretary-General. He was later received by Rear-Admiral Americo Deus Rodriguez Tomás, the President of the Republic and also by the President of the Council of Ministers, Dr. Antonio de Oliveira Salazar.

During his stay in Lisbon the ICRC President had the opportunity of becoming acquainted with the Society's activities. Some of these are of considerable interest and are special tasks in the field of social assistance. First and foremost is the problem of eliminating as widely and rapidly as possible the "shanty towns" which have grown on the outskirts of the capital. The Red Cross aims to find accommodation for thousands of the most destitute in small pleasant houses specially constructed and which are very well kept<sup>1</sup>. The women in these houses are given sewing lessons, and medical care is provided by a Red Cross nurse. The members of the Ladies Section look after this estate and are in constant touch with the tenants.

Mention might also be made of two other activities carried on under our common sign and which were witnessed by Mr. Gonard,

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<sup>1</sup> *Plate*. The President of the ICRC visiting houses built by the Portuguese Red Cross.

namely a centre for making up and despatching parcels to soldiers overseas and an establishment which might be called a model hospital, with about a hundred beds.

### **ICRC President in Poland**

Mr. Samuel A. Gonard, accompanied by Mr. Jean-Pierre Maunoir, delegate, left Geneva on April 13, 1966, for Poland, where he visited the National Red Cross Society. During the week he was there, he was able to follow the activities of the Red Cross in Warsaw and other regions of the country.

On his arrival in the capital, the ICRC President was received by the Polish Red Cross which organized a reception in his honour, and he had the opportunity to meet Mrs. Domanska, the President, as well as the other members of the Central Committee. In the course of the meeting, he was introduced to the National Society Committee secretaries for various Voivodships and he delivered a paper on present ICRC activities. In the days that followed, meetings took place in other towns in Poland, at Red Cross provincial section headquarters, some of which displayed their activities to Mr. Gonard. After visiting Wroclaw, he inspected a Junior Red Cross school at Swidnica and attended a demonstration by volunteer Red Cross first-aiders at a rolling-stock factory <sup>1</sup>.

At Krakow, he was received by the Jagiellonian University Rector and Vice-Chairman of the Polish People's Republic State Council. In the course of a meeting with National Society members, Mr. Gonard explained the present day tasks incumbent on the institution in Geneva. Then, accompanied by the leading members of the Polish Red Cross and by Mr. Maunoir, he visited the camp and State Museum at Auschwitz.

When he returned to Warsaw he visited the Polish Red Cross Nursing School. He was received in audience by the Chairman of the Council of Ministers, Mr. Cyrankiewicz, and by the Minister for Foreign Affairs, Mr. Rapacki.

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<sup>1</sup> *Plate.* The President of the ICRC attending a first-aid exercise in Poland.



# IN THE RED CROSS WORLD

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## TOP LEVEL INTERNATIONAL RED CROSS MEETINGS

A series of top level International Red Cross meetings began in Geneva on April 22, 1966.

First was the traditional "three presidents" meeting of the Chairman of the Standing Commission (the Countess of Limerick, Great Britain), the President of the International Committee of the Red Cross (Samuel A. Gonard), and the Chairman of the League of Red Cross Societies Board of Governors (José Barroso, Mexico).

For Lady Limerick and Mr. Barroso it was the first "three presidents" meeting since their elections to their respective posts in October 1965 in Vienna at the XXth International Conference of the Red Cross.

Mr. Barroso presided at a meeting with the seven League Vice-Chairmen: Mr. George Aitken (Canada), Mr. A. von Albertini (Switzerland), Mr. A. François-Poncet (France), the Countess of Limerick (Great Britain), Dr. G. A. Miterev (USSR), Chief S. A. Ojo (Nigeria), and Mr. William E. Stevenson (USA). However, Mr. François Poncet was unable to attend the meeting, due to illness.

The League Chairman conferred with ICRC and League officials, and on 26 April visited the Swiss Federal authorities and the Swiss Red Cross in Berne. He also made courtesy calls on Geneva city and cantonal authorities.

Mr. Barroso, the League's first Latin American Chairman then left Geneva for London and Paris, where he visited the British and French Red Cross Societies.

## THE ROLE OF THE RED CROSS IN DEVELOPING COUNTRIES

*The documentary material prepared by the League of Red Cross Societies for World Red Cross Day in 1966, includes an interesting study by Mr. Kai J. Warras, Executive Chairman of the League Development Programme Advisory Panel and Secretary-General of the Finnish Red Cross. In this monograph the author examines one of the most important problems facing the Red Cross today, at a time when this movement is expanding considerably and when newly created Societies are carrying out their tasks under conditions which are often difficult. We believe the publication of Mr. Warras' study is a useful means of drawing attention to problems which can only be solved by schemes such as the large scale development programme to be carried out under our universal emblem.*

The growth of communities—from families into kinship groups, from kinship groups into tribes, from tribes into larger communities, and from these communities into nations—has been accompanied by a broadening of outlook and an increasing awareness of responsibility. The same feeling of solidarity and joint responsibility that had previously united only the family and the tribe has gradually extended to unite more and more people, a whole nation. People have learnt to settle by means of laws the controversies which they formerly thought could be settled only by means of war and bloodshed.

The relations between nations have not, however, reached such an advanced stage everywhere. Bloodshed with its untold suffering continues. Yet the numbers of enlightened people who already see that coming generations will some day look wonderingly at the wars of our time and at their causes, as we now regard tribal wars or mediaeval religious wars, are fast increasing all over the world.

The consciousness that we all belong to the human race, and that the goal of human progress is the unity of mankind and its joint responsibility for all its members, is growing stronger day by day.

The Red Cross has been working for this goal for more than a hundred years. This is one of the reasons why it gives special attention to young nations and states today. In the transition period of their newly won independence, in the balancing of power groups, it is still often difficult for them to conceive that even enemies need each other, that a general interdependence unites all people. The Red Cross is striving to see further ahead, to tomorrow, to shorten the time of unnecessary suffering.

One of the most important tasks of the Red Cross is to create new mutual confidence and understanding, a joint responsibility between free nations, between their free men and women.

This ideology is supported on the most realistic grounds. The world, so wide in former times, has become small for the first time in the history of mankind. Whether we want it or not, hard reality compels us to deal jointly with the problems of all mankind.

A community where two thirds of the population suffers from the want of the necessities of life, while one third has overproduction and excess of commodities is the case on the globe at the moment. In an individual state, this would before long lead to a catastrophe whose consequences could become irreparable. A wise government tries to prevent such a situation from developing by supporting under-developed areas and by trying to balance the exchange of commodities and services. It is only this way that a healthy and strong community can be built up.

Before the situation reaches uncontrollable proportions, mankind must find a solution to its problems. Disinterested humanitarian work of the Red Cross, directed to the most urgent needs of man, holds a pioneering position in this activity.

This is the practical basis of the Development Programme of the League of Red Cross Societies ; it refers very largely to tomorrow when the problems of the world will be still more closely intertwined than today.

The ultimate aim of this Development Programme is to encourage the establishment of National Red Cross/Red Crescent Societies in all newly independent countries and the development of the basic organization and activity programmes in these Societies or in older Societies that for some reason have not developed rapidly. The League Development Programme, following the principle of uni-

## IN THE RED CROSS WORLD

versality of the Red Cross, which obliges the National Societies to help each other, strives to bring all positive forces in the Red Cross to co-operate constructively in order to develop those 70-80 National Societies that have been or are being founded in the developing areas, i.e. in Africa, Asia or South and Central America. This is being carried out by giving technical assistance and material assistance connected with it ; by arranging regional and other meetings for training purposes or individual study visits ; by sending delegates and experts to assist developing Red Cross Societies ; by giving information and publicity material to these Societies for their general information and training activities ; and by launching special projects which are closely connected with the development of these Societies.

The Red Cross Development Programme in itself—and not least the motives given above in the beginning—shows the important role of the Red Cross in developing countries. It must today be regarded as a fact that, besides relief actions, the Development Programme is of paramount importance in the international activities of the Red Cross, if the Red Cross wants, today and in the future, to fulfil its duties and obligations in alleviating human suffering.

The Red Cross is a relief organization above all, and we know the statistical fact that by far the greatest part of the disasters that have required international relief have occurred in the area on both sides of the equator where most of the developing countries are situated. One of our tasks is therefore undeniably to build up an efficient disaster preparedness system in that area. The only means to do this is to develop the organization and activity programmes of the National Red Cross Societies concerned and to incorporate the disaster preparedness with their everyday Red Cross work. The establishment of a detached preparedness system is of no use, for experience has proved that in an organization like the Red Cross, which is based on voluntary service, the enthusiasm of even the most active members cannot last, if it is maintained only by means of training and by “anticipating a disaster”; other activities must be planned and carried out at the same time.

Each National Society is to act as a voluntary aid society auxiliary to the public authorities of their respective countries. This

provision is contained in the constitutions of all National Societies and was originally to support the medical services of the armed forces in order to alleviate the sufferings of the wounded and sick soldiers. It is evident that this duty of the National Societies in peacetime is to support the work of the national public health and social welfare authorities. In this way, the role of the Red Cross in developing countries assumes almost endless aspects. There is no shortage of tasks ; it is a question of priority and of resources—in personnel, material and, of course, in money. It is these resources that the League Development Programme tries to increase, relying on the generosity of the older Societies, and the sense of responsibility of the younger ones, as well as their willingness to stand on their own feet as soon as possible.

In my opinion, the resources of the Red Cross/Red Crescent Societies in the developing countries can fast be increased through joint efforts so that they can take up, step by step, different activities which will fit appropriately into the worldwide sphere of public health and social welfare. Then the Red Cross, by helping children and old people, the sick and the handicapped in various ways and by increasing knowledge of health education and first aid, performs its important role in developing countries.

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## Pakistan

*The " Newsletter of the West Pakistan Red Cross " (Lahore, 1965) has published an article on " Family Planning " in West Pakistan. We reproduce it because it demonstrates that new fields of action are always open to our movement.*

Pakistan is in the process of development and the present food situation in particular reflects a precarious balance between production and consumption and this uncertainty is expected to grow with the rapid growth in the population. Family limitation is, therefore, an obvious necessity and the basis of all economic

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development. Realising the great significance of this aspect in planning of economic development, the Government of Pakistan included the Family Planning scheme in its development programme to restrict birth rate in order that advancement in education, health and agriculture is not nullified by rapid increase in the population. Fostering of suitable means to build the population growth will ensure the growth of common man's lot. The Family Planning movement has to be a part of an all-round economic and social improvement.

Since the Pakistan Government decided to make Family Planning a part of its Health Services, the West Pakistan Provincial Branch of the Pakistan Red Cross Society in view of the significance of the movement, simultaneously introduced it as an integral part of its Maternity and Health Centres throughout West Pakistan.

Our Family Planning movement has already made a fair start and the trend of opinion is in favour of accelerating it. We are, therefore, intensifying our efforts in this direction. From the reports of our District Branches on Family Planning, we have concluded that the response is encouraging and the people have now begun to show interest in this scheme, which is evident from the increasing demand for contraceptives which we supply at a very nominal cost.

At present there are 43 Family Planning Clinics attached to the Maternity and Child Welfare Centres and dispensaries in rural areas and tribal territories run by the Provincial and District Branches in West Pakistan.

Our family Planning activities are not merely confined to advice and issue of contraceptives. We are also carrying on an extensive motivating campaign. In our Centres the women doctors and women health visitors also educate mothers attending the Family Planning Clinics and deliver lectures on the importance of the scheme.

## Poland

*The Polish Red Cross has recently sent the ICRC the official translation of the Act which concerns it. In view of this legislative regulation's interest, we now reproduce its English version.*

### Act on the Polish Red Cross

*passed by the Diet on 16 November 1964.<sup>1</sup>*

#### I. General provisions

- Art. 1. 1) The Polish Red Cross is a Social Organization based on the principle of voluntary work.
- 2) The Polish Red Cross has the following aims :  
to organize and pursue humanitarian and educational activities aiming at consolidating peace between nations by propagating the principles of humanity, to protect health and lives and to bring aid in all circumstances whenever these values are threatened.
- Art. 2. With the enactment of this law, the Polish Red Cross is the voluntary auxiliary of the public health service and of the medical service of the armed forces.
- Art. 3. The Polish Red Cross has the task in particular of :
- 1) pursuing activities in the sphere of medical health, raising the standard of medical knowledge as well as public health, and above all promoting and undertaking social aid actions in cases of epidemics and natural disasters.
- 2) pursuing humanitarian activities on behalf of persons protected by the international Conventions and, in particular, by the Geneva Conventions for the protection of the victims of war.

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<sup>1</sup> Law Gazette of the Polish People's Republic, No. 41 of 21. XI. 1964.

## IN THE RED CROSS WORLD

- 3) directing the National Information Bureau as stipulated by the international Conventions relating to the treatment of civilian persons in time of war.
- Art. 4. The Polish Red Cross is the sole Polish Red Cross association legally recognized, operating on the territory of the Polish People's Republic and authorized, in this capacity, to maintain outside relations.
- Art. 5. 1) In the accomplishment of its tasks, the Polish Red Cross co-operates with the public powers and social organizations, respecting the fundamental principles of the Red Cross.
- 2) The powers and organizations mentioned in paragraph 1 above, as well as labour institutions and establishments are bound to assist the Polish Red Cross in the accomplishment of its tasks.
- Art. 6. The Polish Red Cross is authorized to bring aid on the territory of the country and outside its frontiers in the framework of the activities determined by the international Conventions and of actions being the object of Red Cross activities and it is authorized to receive such aid from abroad.
- Art. 7. 1) In the performance of its activities, the Polish Red Cross benefits from exemption of postal, telephonic and telegraphic charges, transport and customs dues, as well as from privileges and facilities accorded by international agreements or special arrangements.
- 2) The directing bodies of the Polish Red Cross are authorized—in the framework of Red Cross activities—to communicate direct with the Central Tracing Agency, the organizations in the International Red Cross, as well as with the representatives and delegates as stipulated by the international Conventions on the protection of the victims of war.



II. *Provisions of organization*

- Art. 8. The Polish Red Cross possesses legal personality.
- Art. 9. 1) The National Congress is the supreme authority of the Polish Red Cross.
- 2) Its controlling bodies are the Central Committee and the Praesidium elected from within it.
- 3) The controlling bodies of the Polish Red Cross have their headquarters in Warsaw.
- Art. 10. 1) The Statutes of the Polish Red Cross and their amendments have been adopted by the National Congress and approved by ordinance of the Council of Ministers.
- 2) The Chairman of the Council of Ministers supervises the activities of the Polish Red Cross and can, in this respect, transfer his rights, in whole or in part, to the appropriate Ministers.
- Art. 11. 1) The Polish Red Cross has authorization to confer honours for services rendered in the realization of its aims.
- 2) The Statutes determine the methods employed in the bestowal of these honours.
- Art. 12. 1) The red cross emblem is formed by a red cross on a white ground (Geneva Cross) with or without the inscription of the Polish Red Cross.
- 2) The emblem and title of the Polish Red Cross remain under legal protection.

III. *Protection of the Red Cross sign and title*

- Art. 13. The sign and title of the Red Cross may be employed as emblem, distinctive or protective sign in circumstances and in accordance with the principles laid down by the international Conventions.

## IN THE RED CROSS WORLD

- Art. 14. 1) The sign and title of the Red Cross or Geneva Cross must be employed in conformity with art. 13 above. Imitations of these are forbidden.
- 2) The prohibition defined in paragraph 1 applies also to the employment of the signs and titles of the Red Crescent and the Red Lion and Sun.
- 3) It is forbidden to employ the device of the Swiss Confederation (white cross on a red ground) or any other sign in imitation, against the provisions of the international Conventions.
- Art. 15. 1) Whoever, contrary to the provisions of the Act, makes use of the emblems, signs or titles as laid down in articles 12, 13 and 14 will be liable to a fine which may amount to 4500 zlotys.
- 2) Penalties relating to infringements mentioned in paragraph 1 above will be imposed in accordance with the provisions of administrative penal procedure.

### IV. *Final provisions*

- Art. 16. The following are no longer in force:
- 1) the Regulations of 1 September 1927 on the Polish Red Cross Association (Law Gazette No. 79, text 688).
- 2) article 60 of the Act of 27 October 1932 on associations (Law Gazette No. 94, text 808).
- 3) Act of 8 January 1938 on the protection of the Red Cross sign and title and of the device of the Swiss Confederation (Law Gazette No. 3, text 12).
- Art. 17. The present Act enters into force on the day of its publication.

Chairman of the Council of State — *E. Ochab*  
Secretary of the Council of State — *J. Horodecki*

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## Switzerland

The Swiss Red Cross Central Committee has given its approval to new directives for general nursing schools recognized by the National Society and for maternity and child welfare nursing schools. These directives lay down the aims of the training period and its duration, which is unchanged at three years. They also affect the organization and teaching staff in the schools, the syllabi, reporting on students' work and behaviour, examinations for graduation, and measures taken for safeguarding the health of candidates.

For admission to nursing schools, the Swiss Red Cross regulations require candidates to have had at least nine years schooling, including elementary courses in biology, physics and chemistry. In view of the heavy demands made nowadays on nurses, the age for admission is unchanged at 19 ; schools may however accept qualified candidates at 18 years of age. The aim is to prepare nursing personnel not only sufficient in number but also capable of giving the sick and the injured the most complete nursing care to which they are entitled.

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## Thailand

The Thai Red Cross Society has had the good idea of having translated into its country's language the final report on the World Conference of Educators which was held in Lausanne in August 1963, and whose importance and significance has been described in the *International Review*.

The National Society has now produced this report in the form of a pamphlet with many illustrations and which also contains a number of details of the events which took place in Geneva on the occasion of the Red Cross Centenary, amongst others, the International Exhibition and the official opening on September 1, 1963.

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## THE SICK AND WORKS OF ART

*The International Review has referred on several occasions to an original work of humanity and which started, as we believe, on the initiative of the British Red Cross. This is a mobile picture library in hospitals, a Service known as the "Picture Library Scheme" and which is widespread in a number of countries. This therapy by art could throughout be seen to have excellent results and be of genuinely beneficial influence for the sick.*

*The Review of the British Red Cross, News Review (Vol. 9, No. 6), published an article, extracts of which are given below, in which the author, Mrs. J. I. Hunter, describes how she herself created such a service in the Fiji Islands assisted by some members of the local Red Cross. This is indeed a fine example of what can be accomplished under difficult conditions and with initially extremely slender resources by personal initiative inspired by the original Red Cross ideal, that of helping those who are suffering.*

When the Fiji Branch of the British Red Cross Society heard of the "Picture Library Scheme" which was organised in hospitals in the United Kingdom they felt it would be ideal to introduce it in their Tamavua Hospital.

This hospital deals only with tubercular cases, most of whom are long term patients. The rather old-fashioned wooden building is split up into four large wards, with small private rooms at the entrance to each, and a special nursery section for babies. On three sides of each ward there are wide verandahs; and while the patients lying in bed have a bright outlook, those who are in the central main room have only each other and the walls to look at. These central rooms are sub-divided by wooden partitions, making about six areas, and we felt here was the very place to start our library.

*A patient's reaction to Van Gogh.*—With the help of the branch in Suva, a Picture Library Group was organised. Our first aim was to gather together materials. The Red Cross started the ball rolling by giving a dozen frames; from the prison woodwork section we

received another twelve, and the public responded very well to the appeals made over the air and in the press. We acquired frames of all shapes and sizes, old pictorial calendars, some good prints and attractive pictures taken from magazines. Since all the frames varied in size, we decided that to facilitate ringing the changes, the best system to adopt was to mount at least six pictures and tuck them into the back of each frame. Members of the Fiji Arts Club came to help us restore the frames, adapt the backs to make changing easy and advise us on mounting. Within a month we had about sixty pictures ready—enough for the central section of one wall. The hospital staff were most co-operative and the day we went along, Matron had arranged for a carpenter to be in readiness to put up the picture-hangers. The patients gave us an enthusiastic welcome; and we were gratified by their obvious interest and appreciation. At this stage we were not able to offer them much choice. We had been given a particularly nice set of Van Gogh prints, which certainly appealed to us; but the reaction of one patient to the artist's self-portrait took us by surprise. He observed that since the man in the picture clearly looked as if he had tuberculosis, and as he himself had it, he did not want to lie and look at a fellow sufferer! A fair enough comment, we agree, so that print was promptly removed.

*For the children.*—To cater for the children we decided to make friezes to go along the walls, such as are found in junior schools. From American magazines we cut out gaily coloured advertisements of smart cars and used them to compose a busy highway scene. Among other themes we thought up for the children were, "Children at play", "The sea and boats", "Pet animals" and "Wild animals". The older girls liked flowers; and the advertising material from seed catalogues solved our problem and made gay colourful posters. We bought one or two boldly illustrated books for the very young children; and a talented member of our group copied the illustrations to make a long frieze, clearly printing the story below each picture so that even if the children could not, the nurses could read the story to them. We are always greeted by cries of delight from the children, who are eager to see what we have in store for them.

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Our first target was to offer service to all the central wards and private rooms ; but this completed, we had pleas from the verandah patients who did not want to be left out. So all the patients have pictures by their beds which they look upon as their private property, and to date we must have upwards of 260 pictures in the hospital. As you can imagine, it is a major operation changing them on our hospital visits. Pictures with a religious theme, bright flower prints and modern action pictures are the most popular. Old fashioned ones cater only for a minority and abstracts, even though they are bright and colourful, are just not acceptable. As at home, we find the patients here have very definite likes and dislikes so we do our best to please each individual.

In our little picture library group, we mount and frame the pictures and make the friezes. Though changing the pictures can be quite exhausting, and sometimes depressing to see the rows and rows of beds with sick people, especially the children, it is a reward in itself to be shown how much they appreciate our visits and how eagerly some of them anticipate a chat with a visitor.

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## BOOKS AND REVIEWS

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### **International technical co-operation. *ILO panorama, Geneva, 1966, No. 17.***

The International Centre for Advanced Technical and Vocational Training, established by the International Labour Organisation at Turin, became operational on 15 October 1965. On the morning of that day, the first contingent of trainees was welcomed at a simple and friendly ceremony held in the imposing setting of Pier Luigi Nervi's Palace of Labour, which houses the Centre.

The significance of the event was clear to all those who took part. For the launching of the Centre marks the beginning of a new phase in international technical co-operation. It also brings to successful issue the preparatory work that had gone forward since 31 May 1963, date of the unanimous adoption, by the ILO Governing Body, of a resolution calling for the establishment of the Centre.

Seen in the context of the work of the ILO on behalf of social progress and economic development, the Centre stands out as an advanced training institution designed to crown the ILO's world-wide programme of international co-operation in the field of vocational training.

The Turin Centre is essentially an international technical institution. The object of the Centre, in the words of its Statute, is "to provide advanced technical and vocational training at various levels for persons who are considered suitable for more advanced training than any they could obtain in their own countries or regions".

Established primarily for the benefit of the developing countries, the Centre is open to industrial and commercial workers, highly skilled personnel, foremen, technicians and executives as well as to managers of small-scale industries and of producers' co-operatives.

The Centre also aims to provide technical co-operation experts with training in methods of instruction. Its overall programme is, in fact, tuned to the need to develop the qualities of instructor and educator in each of the participants.

As a follow-up to preliminary studies covering objectives, structure and methods, the Special Study Group responsible for the organisation of the Centre undertook, beginning in December 1963 and in co-operation with the various departments and services of the ILO, a further survey, the purpose of which was to adapt the Centre as nearly as possible to changing needs, as expressed by the developing countries themselves.

This survey, based on an analysis of applications for fellowships and on an examination of reports from ILO officials and experts, led the Centre to provide, at the outset, courses of study devoted mainly to the advanced training of personnel engaged in maintenance and repair of machinery, work preparation and general management of undertakings.

## BOOKS AND REVIEWS

It was also found necessary to lay somewhat more emphasis on courses and in-plant training involving mainly instruction and practice in vocational teaching methods suited to the requirements of the developing countries.

From the same studies, a second series of findings emerged :

In the first place, the notion of co-operation has increasingly superseded that of technical assistance. This means that organised exchanges of knowledge and experience, as frequent and as varied as possible, must take place between international experts and their counterparts in the developing countries.

Secondly, training methods in current use call for the active participation of the trainees themselves together with a parallel progressive effort in the direction of general culture and personal development.

Projects and programmes must, therefore, be developed with the assistance of a planning department composed of highly qualified personnel—technicians, teacher-training experts, sociologists and economists—who will undertake preliminary research, keep the current projects under review and follow the progress of the trainees after they leave Turin.

To sum up, it was considered essential to organise the Turin Centre, from the day it opened :

- on the one hand, as an institution equipped to give advanced training in the basic professions, both to groups of trainees and to individual students ;
- on the other hand, as a study and research centre equipped to train experts, co-ordinate their activities and hold seminars and meetings in the field of vocational and management training.

In its first phase of development the Centre will aim at an annual intake of 600 trainees. Months before the start of the first courses the number of applicants had far exceeded the 400 trainee places available in 1966.

Criteria for the selection of applicants have had to be determined and strictly applied. An applicant must have completed basic training in his own country and have acquired a certain amount of practical experience in his field, whether it be on the job in industry, in a training institute or in government service.

In selecting trainees, preference is given to those who on their return to their own countries will be in a position to pass on their new experience to others. Training conceived in this manner is intended to have a multiplying effect and to produce a deep and lasting influence on the economy of the trainees' home countries.



EXTRACT FROM THE STATUTES OF  
THE INTERNATIONAL COMMITTEE OF THE RED CROSS

(AGREED AND AMENDED ON SEPTEMBER 25, 1952)

ART. 1. — The International Committee of the Red Cross (ICRC), founded in Geneva in 1863 and formally recognized in the Geneva Conventions and by International Conferences of the Red Cross, shall be an independent organization having its own Statutes.

It shall be a constituent part of the International Red Cross.<sup>1</sup>

ART. 2. — As an association governed by Articles 60 and following of the Swiss Civil Code, the ICRC shall have legal personality.

ART. 3. — The headquarters of the ICRC shall be in Geneva.

Its emblem shall be a red cross on a white ground. Its motto shall be "Inter arma caritas".

ART. 4. — The special rôle of the ICRC shall be :

- (a) to maintain the fundamental and permanent principles of the Red Cross, namely : impartiality, action independent of any racial, political, religious or economic considerations, the universality of the Red Cross and the equality of the National Red Cross Societies ;
- (b) to recognize any newly established or reconstituted National Red Cross Society which fulfils the conditions for recognition in force, and to notify other National Societies of such recognition ;

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<sup>1</sup> The International Red Cross comprises the National Red Cross Societies, the International Committee of the Red Cross and the League of Red Cross Societies. The term " National Red Cross Societies " includes the Red Crescent Societies and the Red Lion and Sun Society.

- (c) to undertake the tasks incumbent on it under the Geneva Conventions, to work for the faithful application of these Conventions and to take cognizance of any complaints regarding alleged breaches of the humanitarian Conventions ;
- (d) to take action in its capacity as a neutral institution, especially in case of war, civil war or internal strife ; to endeavour to ensure at all times that the military and civilian victims of such conflicts and of their direct results receive protection and assistance, and to serve, in humanitarian matters, as an intermediary between the parties ;
- (e) to contribute, in view of such conflicts, to the preparation and development of medical personnel and medical equipment, in co-operation with the Red Cross organizations, the medical services of the armed forces, and other competent authorities ;
- (f) to work for the continual improvement of humanitarian international law and for the better understanding and diffusion of the Geneva Conventions and to prepare for their possible extension ;
- (g) to accept the mandates entrusted to it by the International Conferences of the Red Cross.

The ICRC may also take any humanitarian initiative which comes within its rôle as a specifically neutral and independent institution and consider any questions requiring examination by such an institution.

ART. 6 (first paragraph). — The ICRC shall co-opt its members from among Swiss citizens. The number of members may not exceed twenty-five.



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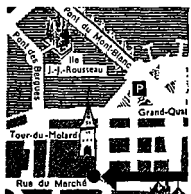
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## ADDRESSES OF CENTRAL COMMITTEES

- AFGHANISTAN — Afghan Red Crescent, *Kabul*.
- ALBANIA — Albanian Red Cross, 35, *Rruga Barrikadavet, Tirana*.
- ALGERIA — Central Committee of the Algerian Red Crescent Society, 15 bis Boulevard Mohamed V, *Algiers*.
- ARGENTINE — Argentine Red Cross, H. Yrigoyen 2068, *Buenos Aires*.
- AUSTRALIA — Australian Red Cross, 122-128 Flinders Street, *Melbourne, C. 1*.
- AUSTRIA — Austrian Red Cross, 3 Gusshausstrasse, *Vienna IV*.
- BELGIUM — Belgian Red Cross, 98, Chaussée de Vleurgat, *Brussels 5*.
- BOLIVIA — Bolivian Red Cross, Avenida Simon-Bolivar, 1515 (Casilla 741), *La Paz*.
- BRAZIL — Brazilian Red Cross, Praça da Cruz Vermelha 10-12, *Rio de Janeiro*.
- BULGARIA — Bulgarian Red Cross, 1, Boul. S.S. Biruzov, *Sofia*.
- BURMA — Burma Red Cross, 42, Strand Road, Red Cross Building, *Rangoon*.
- BURUNDI — Red Cross Society of Burundi, P.O. Box 98, *Bujumbura*.
- CAMBODIA — Cambodian Red Cross, 17 R Vithei, P.O.B. 94, *Phnom-Penh*.
- CAMEROON — Central Committee of the Cameroon Red Cross Society, rue Henry-Dunant, P.O.B. 631, *Yaoundé*.
- CANADA — Canadian Red Cross, 95 Wellesley Street East, *Toronto 5*.
- CEYLON — Ceylon Red Cross, 106 Dharmapala Mawatte, *Colombo VII*.
- CHILE — Chilean Red Cross, Avenida Santa Maria 0150, Casilla 246 V., *Santiago de Chile*.
- CHINA — Red Cross Society of China, 22, Kanmien Hutung, *Peking, E*.
- COLOMBIA — Colombian Red Cross, Carrera 7a, 34-65 Apartado nacional 1110, *Bogota D.E.*
- CONGO — Red Cross of the Congo, 24, Avenue Valcke, P.O. Box 1712, *Léopoldville*.
- COSTA RICA — Costa Rican Red Cross, Calle 5a Sur, Apartado 1025, *San José*.
- CUBA — Cuban Red Cross, Ignacio Agramonte 461, *Havana*.
- CZECHOSLOVAKIA — Czechoslovak Red Cross, Thunovska 18, *Prague I*.
- DAHOMEY — Red Cross Society of Dahomey, P.O. Box 1, *Porto-Novo*.
- DENMARK — Danish Red Cross, Ny Vestergade 17, *Copenhagen K*.
- DOMINICAN REPUBLIC — Dominican Red Cross, Calle Galvan 24, Apartado 1293 *San Domingo*.
- ECUADOR — Ecuadorean Red Cross, Avenida Colombia y Elizalde 118, *Quito*.
- ETHIOPIA — Ethiopian Red Cross, Red Cross Road No. 1, P.O. Box 195, *Addis Ababa*.
- FINLAND — Finnish Red Cross, Tehtaankatu I A, *Helsinki*.
- FRANCE — French Red Cross, 17, rue Quentin-Bauchart, *Paris (8<sup>e</sup>)*.
- GERMANY (Dem. Republic) — German Red Cross in the German Democratic Republic, Kaitzerstrasse 2, *Dresden A. 1*.
- GERMANY (Federal Republic) — German Red Cross in the Federal Republic of Germany, Friedrich-Ebert-Allee 71, 5300 *Bonn 1*, Postfach (D.B.R.).
- GHANA — Ghana Red Cross, P.O. Box 835, *Accra*.
- GREAT BRITAIN — British Red Cross, 14 Grosvenor Crescent, *London, S.W.1*.
- GREECE — Hellenic Red Cross, rue Lycavittou 1, *Athens 135*.
- GUATEMALA — Guatemalan Red Cross, 3, Calle 8-40 zona 1, *Guatemala C.A.*
- HAITI — Haiti Red Cross, rue Férou, *Port-au-Prince*.
- HONDURAS — Honduran Red Cross, Calle Henry Dunant 516, *Tegucigalpa D.C.*
- HUNGARY — Hungarian Red Cross, Arany Janos utca 31, *Budapest V*.
- ICELAND — Icelandic Red Cross, Ølduggøtu 4 *Reykjavik*, Post Box 872.
- INDIA — Indian Red Cross, 1 Red Cross Road, *New Delhi 1*.
- INDONESIA — Indonesian Red Cross, Tanah Abang Barat 66, P.O. Box 2009, *Djakarta*.
- IRAN — Iranian Red Lion and Sun Society, Avenue Ark, *Teheran*.
- IRAQ — Iraqi Red Crescent, Al-Mansour, *Baghdad*.
- IRELAND — Irish Red Cross, 16 Merrion Square, *Dublin 2*.
- ITALY — Italian Red Cross, 12, via Toscana, *Rome*.
- IVORY COAST — Ivory Coast Red Cross Society, B.P. 1244, *Abidjan*.
- JAMAICA — Jamaica Red Cross Society, 76 Arnold Road, *Kingston 5*.
- JAPAN — Japanese Red Cross, 5 Shiba Park, Minato-Ku, *Tokyo*.
- JORDAN — Jordan Red Crescent, P.O. Box 1337, *Amman*.
- KOREA (Democratic Republic) — Red Cross Society of the Democratic People's Republic of Korea, *Pyongyang*.
- KOREA (Republic) — The Republic of Korea National Red Cross, 32-3 Ka Nam San-Dong, *Seoul*.

## ADDRESSES OF CENTRAL COMMITTEES

- LAOS — Laotian Red Cross, *Vientiane*.
- LEBANON — Lebanese Red Cross, rue Général Spears, *Beirut*.
- LIBERIA — Liberian National Red Cross, Camp Johnson Road, P.O. Box 226, *Monrovia*.
- LIBYA — Libyan Red Crescent, Berka Omar Mukhtar Street, P.O. Box 541, *Benghazi*.
- LIECHTENSTEIN — Liechtenstein Red Cross, *Vaduz*.
- LUXEMBURG — Luxemburg Red Cross, Parc de la Ville, *Luxemburg*.
- MADAGASCAR — Red Cross Society of Madagascar, rue Clemenceau, P.O. Box 1168, *Tananarive*.
- MALAYA — Malaysian Red Cross Society, 519 Jalan Belfield, *Kuala Lumpur*.
- MEXICO — Mexican Red Cross, Sinaloa 20, 4º piso, *Mexico 7, D.F.*
- MONACO — Red Cross of Monaco, 27, Boul. de Suisse, *Monte-Carlo*.
- MONGOLIA — Red Cross Society of the Mongolian People's Republic, Central Post Office, Post Box 537, *Ulan-Bator*.
- MOROCCO — Moroccan Red Crescent, rue Calmette, *Rabat*.
- NEPAL — Nepal Red Cross Society, Tripureswore, P.B. 217, *Kathmandu*.
- NETHERLANDS — Netherlands Red Cross, 27 Prinsessegracht, *The Hague*.
- NEW ZEALAND — New Zealand Red Cross, 61 Dixon Street, P.O.B. 6073, *Wellington C.2*.
- NICARAGUA — Nicaraguan Red Cross, 12 Avenida Noroeste, *Managua, D.N.*
- NIGER — Red Cross Society of Niger, B.P. 386, *Niamey*.
- NIGERIA — Nigerian Red Cross Society, Eko Akete Close, Ikoyi, Yaba, P.O. Box 764, *Lagos*.
- NORWAY — Norwegian Red Cross, Parkveien 33b, *Oslo*.
- PAKISTAN — Pakistan Red Cross, Frere Street, *Karachi 4*.
- PANAMA — Panamanian Red Cross, Apartado 668, *Panama*.
- PARAGUAY — Paraguayan Red Cross, calle André Barbero y Artigas 33, *Asunción*.
- PERU — Peruvian Red Cross, Jiron Chancay 881, *Lima*.
- PHILIPPINES — Philippine National Red Cross, 860 United Nations Avenue, P.O.B. 280, *Manila*.
- POLAND — Polish Red Cross, Mokotowska 14, *Warsaw*.
- PORTUGAL — Portuguese Red Cross, General Secretaryship, Jardim 9 de Abril, 1 a 5, *Lisbon 3*.
- RUMANIA — Red Cross of the Rumanian People's Republic, Strada Biserica Amzei 29, *Bucarest*.
- SALVADOR — Salvador Red Cross, 3a Avenida Norte y 3a Calle Poniente 21, *San Salvador*.
- SAN MARINO — San Marino Red Cross, *San Marino*.
- SAUDI ARABIA — Saudi Arabian Red Crescent, *Riyadh*.
- SENEGAL — Senegalese Red Cross Society, Bld. Franklin-Roosevelt, P.O.B. 299, *Dakar*.
- SIERRA LEONE — Sierra Leone Red Cross Society, 6 Liverpool Street, P.O.B. 427, *Freetown*.
- SOUTH AFRICA — South African Red Cross, Cor. Kruis & Market Streets, P.O.B. 8726, *Johannesburg*.
- SPAIN — Spanish Red Cross, Eduardo Dato 16, *Madrid, 10*.
- SUDAN — Sudanese Red Crescent, P.O. Box 235, *Khartoum*.
- SWEDEN — Swedish Red Cross, Artillerigatan 6, *Stockholm 14*.
- SWITZERLAND — Swiss Red Cross, Taubenstrasse 8, B.P. 2699, 3001 *Berne*.
- SYRIA — Syrian Red Crescent, 13, rue Abi-Al-Almaari, *Damascus*.
- TANZANIA — Tanzania Red Cross Society, Unga Road, P.O.B. 1133, *Dar es Salaam*.
- THAILAND — Thai Red Cross Society, King Chulalongkorn Memorial Hospital, *Bangkok*.
- TOGO — Togolese Red Cross Society, Avenue des Alliés 19, P.O. Box 655, *Lomé*.
- TRINIDAD AND TOBAGO — Trinidad and Tobago Red Cross Society, 48 Pembroke Street, P.O. Box 357, *Port of Spain*.
- TUNISIA — Tunisian Red Crescent, 19, rue d'Angleterre, *Tunis*.
- TURKEY — Turkish Red Crescent, Yenisehir, *Ankara*.
- UGANDA — Uganda Red Cross, 17 Jinja Road P.O. Box 494, *Kampala*.
- UNITED ARAB REPUBLIC — Red Crescent Society of the United Arab Republic, 34, rue Ramses, *Cairo*.
- UPPER VOLTA — Upper Volta Red Cross, P.O.B. 340, *Ouagadougou*.
- URUGUAY — Uruguayan Red Cross, Avenida 8 de Octubre, 2990, *Montevideo*.
- U.S.A. — American National Red Cross, 17th and D Streets, N.W., *Washington 6, D.C.*
- U.S.S.R. — Alliance of Red Cross and Red Crescent Societies, Kouznetsky Most 18/7, *Moscow k.31*.
- VENEZUELA — Venezuelan Red Cross, Avenida Andrés Bello No. 4, Apart. 3185, *Caracas*.
- VIET NAM (Democratic Republic) — Red Cross of the Democratic Republic of Viet Nam, 68, rue Bà-Trièz, *Hanoi*.
- VIET NAM (Republic) — Red Cross of the Republic of Viet Nam, 201, duong Hồng-Tháp-Tu, No. 201, *Saigon*.
- YUGOSLAVIA — Yugoslav Red Cross, Simina ulica broj 19, *Belgrade*.