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Angola

In June 1975, the transitional Government had requested the ICRC to carry out a protection and assistance programme in aid of the war victims in Angola. This move had received the support both of the liberation movements—the MPLA (People's Movement for the Liberation of Angola), the FNLA (Angolan National Liberation Front) and the UNITA (National Union for the Total Independence of Angola)—and of the Portuguese authorities.

The programme continued throughout the first half of 1976, but suffered a number of setbacks arising from the political and military events which occurred during that period:

- from 11 November 1975 to February 1976: the two declarations of independence; the formation of two governments—the Government of the People's Republic of Angola (PRA) in Luanda, set up by members of the MPLA, and the FNLA-UNITA coalition Government in Huambo; and the military thrust of the MPLA.
- 11 February 1976: the recognition of the PRA Government by the Organization of African Unity (OAU).

These events necessarily had repercussions on the conditions in which the ICRC was working, and every attempt was made to effect appropriate adjustments to its programme, without losing sight of the strictly humanitarian, neutral and impartial aims of the organization's activities, an attitude which did not always meet with general approval.

During that period, the ICRC took various steps to create the kind of conditions that would enable its programme to continue. At the time of the extraordinary summit meeting of the OAU in January 1976, devoted to the question of Angola, the delegate general for Africa went to Addis Ababa in order to make sure that all parties to the conflict were aware of the humanitarian problems and the limits imposed on the ICRC's work.

In February, the Director of the Operations Department, accompanied by the programme officer from Geneva, went on mission to Luanda, where he had talks with the Prime Minister and other high-ranking officials of the PRA concerning the ICRC's present and future action in the country.

At the same time, the ICRC rushed a delegate to Zambia, and later—in April—to Zaire, in an attempt to obtain details from the UNITA and FNLA representatives in these respective countries as to the fate of Angolan and other prisoners previously or still detained by them.

June saw the termination of the emergency relief programme as such, and the delegate general for Africa went to Luanda to negotiate an agreement with the authorities for continuing the ICRC's traditional activities and particularly for resuming visits to prisoners, which had been discontinued for several months. The Angolan authorities, however, refused to allow these activities, and the ICRC was therefore obliged to withdraw its delegation from Angola in October 1976, thereby putting an end to its action there.

Protection

During the second half of 1975, the ICRC had visited 29 places of detention, where some 1,640 prisoners were held by the three movements which, at that time, were in conflict with one another: the MPLA, the UNITA and the FNLA. Because of the ever-changing military situation, however, it became impossible to renew these visits in any systematic way. Several groups of prisoners had been seen only once, and their subsequent fate could not be followed up by the ICRC delegates.

These problems persisted in 1976, with regard to both civilian and military prisoners, whether Angolan or foreign, and irrespective of the identity of their captors: the People's Republic of Angola (PRA), the UNITA or the FNLA.

In early January, just after the town had fallen to the PRA forces, the ICRC delegates visited *Uige* and saw 104 civilian and military prisoners.

Also in January, the delegates were able to visit 102 civilian prisoners at *Huambo*, which was occupied by the UNITA troops at that time. These prisoners were later transferred to Silva Porto because of the advance of the PRA forces, at which point the ICRC delegates were no longer able to gain access to them.

In February, at the request of the United States Government, the ICRC approached the PRA Government about two American civilians whose plane, en route for Windhoek, had made a forced landing in Angola. On 21 February, the PRA Government officially handed over these two persons to the ICRC for repatriation to the United States.

In mid-March, the medical team seconded to the ICRC by the Swedish Red Cross was informed of the dangerous state of health of prisoners taken to hospital at *Dalatando*. The team then offered its help to the local authorities, who accepted emergency food rations for the prisoners. At the end of April, these authorities authorized the team to undertake medical examinations at the prison, and the ICRC doctors visited *Dalatando* prison ten times before their withdrawal at the end of June. They were able to arrange for 73 prisoners out of some 550 to be sent to hospital.

With the exception of these medical visits to *Dalatando* prison, the end of the state of war and the international recognition of the PRA brought to a halt the ICRC's work in the country's places of detention. Repeated requests to visit places of detention elicited no response from the PRA Government. The ICRC intervened, in particular, on behalf of the eight South African soldiers detained in Luanda and who, in its opinion, should be granted prisoner-of-war status. In December 1976, the President of the ICRC sent a message to the President of the PRA requesting that these eight prisoners at least be allowed to correspond with their families; subsequently, family messages were dispatched.

The FNLA and the UNITA, for their part, never followed up the ICRC approaches on behalf of the Angolan and other prisoners presumed to be in their hands.

The South African Government authorized the ICRC to make regular visits to three Cuban prisoners of war detained in Pretoria. The ICRC delegates visited these prisoners on four

occasions, and gave them parcels. The prisoners were authorized to correspond regularly with their families right from the start of their detention.

Socio-medical assistance

The activities of the three medical teams. — In July and August 1975, support received from several National Societies had enabled the ICRC to set up medico-surgical teams, initially at Uige (then in the FNLA zone) and later at Huambo/Vouga (then UNITA) and Dalatando (MPLA).

The medical team at Uige, provided by the Swiss Red Cross, was withdrawn in January, shortly after the town had fallen, at the request of the PRA.

At Dalatando, the Swedish Red Cross medical team continued its activities, both at the hospital and in the nearby dispensaries, until 30 June 1976.

The medico-surgical team made available to the ICRC by the British Red Cross, together with a Swiss team, went on working in the hospitals at Vouga and Huambo after the withdrawal of the UNITA. These hospitals were gradually taken over by medical staff sent there by the PRA Government, and the ICRC therefore directed its efforts towards itinerant medical assistance. The Vouga and Huambo medical teams were consequently turned into three mobile medical teams with the following main tasks:

- weekly visits to 18 rural dispensaries;
- detection of the main illnesses;
- polyclinic services for the most difficult cases;
- launching a food programme for malnutrition cases;
- transferring the more serious cases to the hospital at Huambo.

Over the four-month period during which these activities were carried out, the mobile medical teams treated a monthly average of some 4,000 out-patients. In addition, they distributed 10 tons of medicines and medical supplies to the hospitals, dispensaries and health stations in five districts.

Six-month socio-medical plan. — During his visit to Luanda in February, the Director of the Operations Department informed the Prime Minister of the PRA that the ICRC was prepared to launch a six-month socio-medical programme. Under this scheme, which had been devised with the Minister of Health, ten mobile medical teams and three medico-surgical teams were to be provided, under the auspices of the ICRC, together with food according to needs which were to be assessed by the medical staff.

However, this plan was never to become a reality. In fact, just a few weeks after it had been submitted, the PRA Government informed the ICRC that, as part of the national reconstruction programme, it considered the implementation of the plan to

be more appropriate if carried out by national bodies, particularly the Angolan Red Cross which was being constituted at the time.

The ICRC immediately communicated this decision to contributing National Societies, to allow them to abandon their staff and resource mobilization programmes.

Relief

Logistic problems. — At the end of 1975, despite all its efforts, the ICRC had still not succeeded in securing a formal agreement for the return to Angola of a plane authorized to fly from one zone to another.

During 1976, given the way the situation was developing, relief supplies were therefore flown or shipped to Luanda, and then conveyed by road to their final destination.

Furthermore, the PRA Government expressed the wish that all relief supplies for the displaced population—some 225,000 people—be channelled through a national network. ICRC food assistance was thenceforward distributed by the Ministry of Social Affairs (except, of course, foodstuffs distributed directly by the ICRC mobile medical teams).

During its relief work in Angola, from June 1975 to June 1976, the ICRC sent (or passed on) 1,377.8 tons of relief supplies to the war victims, the total value exceeding 5.8 million Swiss francs,¹ broken down as follows:

68 tons of medical supplies and medicines	Sw. fr. 2,325,806
1,250 tons of foodstuffs	Sw. fr. 2,883,918
26,080 blankets,	
338 tents	Sw. fr. 441,911
7,200 tons of clothing, soap, miscellaneous supplies	Sw. fr. 34,831
5 ambulances and	
2 other vehicles	Sw. fr. 146,820

Displaced persons in the north and refugees in Zaire

In the first days of 1976, an ICRC delegate went to the north of Angola to assess the needs of the displaced persons there.

Following this mission, the ICRC sent a second delegate to Kinshasa at the beginning of February, shortly followed by a doctor and a nurse. They carried out emergency medical work with the refugees arriving in Zaire for more than a month, the

¹ Including assistance to refugees in Zaire and Namibia (see below).

time it took for the United Nations High Commissioner for Refugees to organize a longer-term programme. In collaboration with the Protestant and Catholic missions, the medical team focused its efforts on providing a polyclinic service in the villages, distributing milk to children (1,500-2,000 children per day) and protein-rich powder to adults, and organizing six new dispensaries.

In all, 7 tons of relief supplies, worth 7,300 Swiss francs, were forwarded to the area by the ICRC.

Displaced persons in the south and refugees in Namibia/South-West Africa

At the same time, the ICRC assisted persons displaced as a result of the fighting in the south of Angola.

These persons were accommodated in four camps located in Angolan territory, near the border with Namibia/South-West Africa. The South African authorities were ensuring the administration of the camps, and the ICRC's role was restricted to providing the displaced persons with additional material aid in the form of food—particularly for children—medicines, tents and blankets. Those displaced numbered 20,000 at the beginning of March 1976.

Just prior to the withdrawal of the South African troops from Angolan territory, at the end of March, the ICRC made representations to the PRA and South African Governments, drawing their attention to the potential dangers being run by these persons during the interim period before the Angolan authorities arrived. There was indeed a risk that unsupervised armed groups, who had been roaming the area for the past few weeks, might ransack the camps and harm the occupants. A large number of the latter in fact crossed the border into Namibia/South-West Africa on 27 March.

During the initial phase of establishing new refugee camps in Namibia/South-West Africa, the five ICRC delegates concerned continued to distribute relief supplies to the refugees. They also organized a family correspondence scheme and a tracing service.

Between January and mid-April 1976, the ICRC transported some 90 tons of relief supplies, worth 336,000 Swiss francs, to the camps in southern Angola and in the north of Namibia/South-West Africa.

ICRC personnel in Angola

At the beginning of 1976, there were some fifty ICRC staff in Angola, including the three medico-surgical teams made available by the British, Swedish and Swiss Red Cross Societies. From April onwards, staff numbers gradually fell, and only three delegates remained in Luanda on 30 June when the relief programme ended. Their task was to continue the traditional activities of the ICRC for prisoners of war and persons detained as a result of the recent conflict in Angola, whilst keeping up co-ordination links with the southern African liberation movements based in Luanda and to which medical relief supplies were dispatched.

On 31 October 1976, at the request of the Angolan Government, the ICRC closed down its delegation in Luanda and withdrew its last delegate, without having been able to resume its conventional activities.

Southern Africa

During 1976, the ICRC kept a regional delegate in Salisbury (Rhodesia/Zimbabwe), who made periodic visits to South Africa.

The deterioration of the situation in southern Africa led the ICRC to open a regional delegation in Lusaka (Zambia), to cover the following countries: Botswana, Lesotho, Malawi, Mozambique, Swaziland, and Zambia. In the first few months of the year, the regional delegate in Lusaka was mainly occupied by problems resulting from the sequels of the conflict in Angola.

South Africa¹

Assisted by delegates and doctors from Geneva, the regional delegate continued the visits to prisoners in South Africa.

As reported previously, the ICRC had access in this country to *convicted* security prisoners. From December 1976, however, the ICRC received permission to visit persons detained under the *Internal Security Amendment Act*. It was also allowed to double the number of visits to convicted prisoners, from the beginning of 1977, to two visits per year. But the International Committee was not granted permission to visit persons detained under the *Terrorism Act* or other legislation relating to security, despite repeated representations.

Two series of visits were therefore made in South Africa in 1976. During the first one, from 26 April to 4 May, the delegates went to four places of detention—Robben Island, Pretoria, Pretoria Central and Kroonstad—in which there were altogether 258 *convicted political prisoners*. During the second, from 7 to 13 December, they visited six places of detention: in King William's Town, Grahamstown, Poolsmoor, Victor Verster, Modderbee and Johannesburg, where there were 125 *persons detained under the Internal Security Amendment Act*.

The ICRC also offered its services to the South African Government to give aid to the large number of persons arrested, especially children, when the riots broke out in Soweto and in other places in June 1976. The Government did not respond.

As he had been the subject of accusations concerning the treatment of the mentally sick—in particular, that political detainees had been placed in psychiatric institutions—the South African Health Minister invited the ICRC to visit such institutions.

Before accepting the invitation, the ICRC preferred to make an exploratory mission. The purpose of this mission, carried out

¹ For the Cuban prisoners of war in South Africa, see "Angola" section of present report.