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COMITÉ INTERNATIONAL
DE LA
CROIX-ROUGE

I N F O R M A T I O N N O T E

- 4 -

Reply of the International Committee of the Red Cross to requests for information on the Geneva Conventions and cognate questions.

GENEVA.
May 1954

Contents

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MEDICAL PERSONNEL

(The provisions of the 1st Geneva Convention of August 12th, 1949, concerning medical units and establishments, i.e. Articles 19 to 23, are considered in particular on pages 221 to 227 of the Commentary on the above-mentioned Convention.

However one Red Cross Society, wishing for further information, asked the Committee several questions, the majority of which concerned the interpretation of Articles 21 and 22 of the Convention.

Item 1 of Article 22 expressly authorises the bearing of arms, and their use in self-defence, by members of medical units and establishments. What are the limits and conditions of the armed defence implicit in Article 21 of the same Convention which forbids "all acts harmful to the enemy" under penalty of the discontinuance of the protection afforded in virtue of the Convention ?).

Bearing of Arms by Medical Perssonel and the Defence of Medical Establishments.

The proclamation of the immunity of medical units and establishments (the Geneva Convention of 1864 used the term "neutrality") was an attempt to de-militarize them, to remove them from direct conflict. Medical establishments, which shelter only the wounded and non-combatants, offer virtually no resistance whatsoever. These establishments and their personnel will be respected and protected by the belligerent forces to the extent in which they refrain from taking part in hostilities.

If they fulfil this condition no attack against them can be considered lawful. The word "attack" implies the use of force. It means the action of combatants, who, using all means authorised by war, try either to take possession of an objective or attempt to destroy it. If no violence is used the term "attack" does not apply. This distiction is important, because, whereas

the enemy has no right to attack a medical unit, he has the right to take possession. Such an action cannot be considered an attack and it cannot be opposed.

Article 22 of the First Geneva Convention of 1949 grants medical personnel the right to "use arms in their own defence or in thar of the wounded and sick in their charge".

It is certain that this article was intended to permit the medical personnel to maintain order and discipline in the hospital and to protect it against individual acts of hostility, (pilferers, powlers and irresponsible soldiers). A hospital is in fact under military discipline, and must have an adequate police force, even if only to prevent nationals in hospital from leaving their billets without permission, to ensure that due respect is paid to the nurses, etc. Also care must be taken that access is not granted to all and sundry, to persons seeking a refuge to which they have no right, to looters and deserters. Therefore health workers only need personal and portable weapons; side-arms, pistols, or possibly rifles.

On the other hand, a hospital, as such, cannot have any real system of defence against military operations. It is out of the question for a medical unit to use armed force to oppose a systematic and deliberate attack by the enemy. To resist such an attack would require considerable strength of arms and numbers which a hospital, by its very essence, cannot contain. In the ovent of such an attack the resistance of a few male nurses, or watchmen would be folly and would probably only lead to a more savage onslaught. Such offensives can only be repulsed with any success by armed troops, whose duty fighting is.

If however a medical establishment were attacked - and it is sincerely hoped that such cases will be exceptions rather than the rule - the medical personnel should use all means at their disposal to inform the enemy of his error and also of the consequences of his action (marking of buildings, notification, the sending of a messenger under cover of a flag of truce, etc.)

If it is clear however that if in spite of the warnings given, the adversary in question made a deliberate attack on a medical unit in flagrant violation of the Convention, the medical personnel could only surrender and hoist a white flag. Naturally if the opponent shows that he had the criminal intention of destroying the establishment and killing the occupants the medical personnel could use their weapons. Men cannot be expected to let themselves be meekly led to slaughter like sheep. But it is hardly possible that this desperate act would have any effect on the situation. In no event could the fact that a person, engaged in this humanitarian work, defended himself against a volontary and unlawful attack be considered as a "harmful act" and he could not be deprived of his right to protection. Likewise the armed defence against a violation of its neutrality on the part of a neutral State is not a hostile act (Vth Convention of the Hague, 1907).

It is obvious that the medical personnel should be familiar with the arms which they are entitled to use. But no criticism can be levelled against them if they know how to handle other weapons.

The Committee considers that all measures for the defence of medical personnel and the wounded should be provided for and that all necessary instructions should be given in advance.

The question as to whether a hospital may be surrounded by barbed wire fences, mine fields or other means of defence is a difficult one to answer as it is a matter of good will and good faith. As we have already said, a hospital may be protected against individual acts and discipline must be maintained. On the other hand it may not be barricaded against enemy forces. Thus a hospital may be surrounded by a paling or even a barbed wire fence to prevent uncontrolled entries and exists. But the gates must be opened if the enemy's armed forces wish to either visit or occupy the hospital. It is inconceivable that a hospital, as such, should be surrounded by a mine field, but obviously it can be near to one if the establishment is close to the line of battle.

PRISONERS REPATRIATED FOR REASONS OF HEALTH

Prohibition for prisoners repatriated for reasons of health to re-enter military service. ("No repatriated person may be employed on active military service", C.III, Art. 117).

(As clearly shown by the Korean conflict, the repatriation of prisoners of war can cause difficult problems for the belligerent Powers. The interpretation of the Third Geneva Convention of August 12th, 1949 concerning this important question, and particularly Article 118, which deals with the liberation and repatriation of prisoners of war after the cessation of hostilities, will be considered in detail in the Commentary on the said Convention.

However, the International Committee was asked by a Government to make a commentary on one of the provisions of the Convention concerning the repatriation of prisoners of war. This commentary is given below. It concerns Article 117, which does not deal with the general question of the repatriation of prisoners of war but solely, as will be seen at a glance, with the repatriation of certain categories of prisoners of war, before the cessation of hostilities, for humanitarian reasons).

This provisions is a faithful repetition of Article 74 of the Convention of 1929, the same principle having already been expressed in Article 6 of the Geneva Convention of 1864. But it is in Article 105 of the 1863 Instructions for the United States of America's armies in the field, drawn up by Francis Lieber, that this idea appears in print for the first time (1).

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(1) Article 105. The exchange of prisoners will be carried out on a basis of man for man, rank for rank, wounded for wounded under conditions equally binding for both parties. e.g. The prohibition for all prisoners exchanged to engage in military service during a certain period.

The opinion was expressed at the Meeting of neutral members of Mixed Medical Commissions, held in Geneva on the 27th and 28th of September, 1953, that this article did not meet the conditions of modern war and that it should be withdrawn (1). This line of thought was not accepted, although during the Second World War the belligerents often expressed the fear that, once prisoners of war had been returned to their countries, they would engage in work which was of direct assistance to the war effort (2).

Four main questions are raised by the interpretation of this provision : first of all it must be decided which categories of repatriated persons are concerned in Article 117, secondly the duration and extent of the prohibition must be fixed, then the notion of "active military service" must be defined, and lastly the question as to who is responsible in the case of violation of he rule must be examined.

A. Repatriated persons.

This article applies to prisoners repatriated by the detaining Power in application of Articles 109 and 110, included in the same Section as Article 117.

This Section concerne three categories of repatriated persons: seriously sick and seriously wounded persons, whom the detaining Power is bound to repatriate regardless of their number or rank (Art. 109, Par. 1); prisoners who have been in hospital and who can be repatriated by virtue of an agreement between the Powers concerned (Art. 110, Par. 2), and thirdly valid prisoners of war who have endured long captivity and whose repatriation can also be the object of an agreement between the Powers concerned.

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(1) See "Rapport sur les travaux de la réunion des membres neutres des Commissions médicales mixtes", page 33.

(2) See the Report of the International Committee of the Red Cross on its activities during the Second World War, Vol. 1, page 376

There can be no doubt whatsoever that Article 117 applies to prisoners of war of the first category. i.e. seriously wounded and seriously sick persons whom the detaining Power is bound to repatriate by the provisions of the Convention (Art. 109 and 110). The reservation made in Article 117 would, indeed, seem to be the logical corollary of the principle of obligatory repatriation of seriously wounded and seriously sick persons : as the repatriated persons are not exchanged man for man, but according to categories, the number may be greater for one or the other belligerent, Therefore the security of the belligerents requires a partial neutralization of the persons so exchanged to avoid one of the Powers being placed at a disadvantage in relation to the other. Furthermore, and this second reason is even more important, it is in the interest of the repatriated person, whose health is seriously affected, that he should no longer be assigned to tiring and dangerous work.

Does Article 117 also apply to the other two categories considered, i.e. those accommodated in neutral countries and valid prisoners ?

Contrary, to the case of seriously wounded and seriously sick persons, for whom the repatriation conditions are expressly laid down by this Convention, the repatriation of the other two categories of prisoners of war is subject to the conclusion of an agreement between the parties concerned. Are these parties free to go beyond Article 117 by purely and simply forbidding all military service for instance, or, on the contrary by excluding the application of Article 117 ? The letter and the spirit of the provisions adopted must be considered to answer this question. In its actual woring Article 117 appears to be categorical : the term "no repatriated person" can be read as meaning all cases of repatriation provided for in the section in which this article is inserted.

Furthermore, it is an undeniable fact that the repatriation of these two categories of prisoners of war is also provided for by the Convention for humanitarian reasons. Repatriated

hospital cases are also seriously sick and seriously wounded, Repatriated valid prisoners of war are those who, as a result of long captivity are the most seriously affected, either physically, mentally or in their family interests. It is therefore according to the spirit of the Conventions, and also according to the letter, that repatriated hospital cases should be dealt with according to categories and not exchanged man for man. For security reasons mentioned above, and also in the interest of the repatriated persons themselves, these two categories of repatriated persons should be dispensed from all active military service. Such was, indeed, the practice followed for the agreements concluded between belligerents in 1917-1918 which provided for the repatriation of certain categories of valid prisoners of war (1).

We conclude, therefore, that an agreement concerning the repatriation of prisoners of war who come under the categories laid down in Articles 109 and 110 should respect the rule stated in Article 117. The parties to the agreement are naturally free to go beyond the minimum required by this article in the interest of the repatriated persons, as for example granting the repatriated persons exemption from all military service; but they cannot make the conditions more difficult without going against both the spirit and the letter of the Convention. An agreement concluded between belligerents concerning the repatriation of the categories of prisoners of war mentioned in Article 109 and 110, and which did not respect the minimum laid down by article 117, could not be considered as having been concluded in application of this Convention.

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(1) Anglo-German agreement of July 2, 1917, Section 11, Par. 4, and Section 111. Par. 11; Franco-German arrangement of March 15th, 1918, Chapter 1, Section 1, Art. 1-6; Franco-German arrangement of 26th April, 1918, Section 1, Art. 1-20. See also "Les Prisonniers de guerre" (1914-1918) by Georges Cahen-Salvador, Payot, Paris 1929, Pages 239, 244, 247, 262.

Mention should be made here to the special position of medical personnel and chapleins who fall into enemy hands, and who should be returned to the belligerent party responsible for them by virtue of Article 30 of the First Convention. These persons shall only be retained insofar as the state of health, the spiritual needs and the number of prisoners make their presence necessary.

Whether they be retained to care for their compatriots or whether they be only awaiting their return, medical personnel and chaplains should be granted at least all the advantages conferred by the Convention concerning the treatment of prisoners of war, without, however, being considered as such. If therefore, among the retained personnel there are some who fulfil the conditions laid down in Articles 109 and 110, they should be repatriated on the same terms as prisoners of war. It is hardly likely that the detaining Powers would consider holding medical personnel or chaplains whose state of health did not permit them to render the services expected of them. It is however certain that Article 117 does not apply to medical personnel or chaplains who fall into enemy hands and who are restituted to the belligerent power to which they belong. In fact, the First Convention formally states that members of that personnel should not, in any circumstances, be considered as prisoners of war. (Art. 28, Par. 2). Furthermore, the military service of chaplains and medical personnel could never be considered as "active military service".

B. Duration and extend of the Prohibition.

(1) Duration.

The prohibition to again take up active military service is obviously valid for the duration of the hostilities during which the prisoners of war were captured and liberated, but for those hostilities only. This conclusion issues on the one hand, from the fact that the notion of active military service is unconceivable

in time of peace, and on the other, from the fact the only justification for the imposition of such a restriction on the Home Power would be the security exigencies of the detaining Power. Hostilities could only be considered as terminated when the parties to the conflict have applied the first paragraph of Article 118, which provides for the repatriation of all prisoners of war after the cessation of hostilities.

The possibility, which, it is true, would only very rarely become fact, of the re-opening of hostilities after the general repatriation of prisoners had taken place and without a peace treaty having been concluded in the interval, should also be considered. In that case prisoners repatriated by virtue of Article 118 would again be free to take part in armed offensives against the Power which had held them prisoner. But can the same be said for those prisoners repatriated in application of Article 109, or should Article 117 continue to be applicable to them ? We believe that, in this case, Article 117 would no longer apply to prisoners repatriated during the first stage of hostilities.

If the belligerents had carried out the general repatriation of prisonners, without making provisions for a possible re.opening of hostilities, it was because they were prepared to accept the risks involved. Article 117 is merely the particular application, for well-defined humanitarian reasons, of the general principle of capture to which the Convention, as a whole, is dedicated. Instead of being neutralized in the territory of the detaining Power, prisoners repatriated by virtue of Article 109 remain neutralized to a certain extent, but on the territory of the Power upon which they depend. It can therefore be admitted that, inasmuch as the belligerents renounce the security conferred upon them by the capture of prisoners, they also renounce thereto within the limited frame-work of Article 117, and that the letter article is no longer applicable.

(2) Extent.

It is clear that the application of Article 117 only concerns the detaining Power and its allies, but not a third Power.

Nevertheless, good faith requires that prisonners repatriated by virtue of Article 109 should not be engaged in combat (even after the capitulation of the detaining Power which had granted their repatriation) against the allies of the said detaining Power.

C. The notion of "active" military service.

The question whether the term "active" should be deleted or not gave rise to long discussions within the Commission for the Convention relative to Prisoners of War at the 1949 Diplomatic Conference. The Committee of Medical Experte, after examining the provisions of this section, proposed that it should be deleted for several reasons : the expediency of putting Article 117 into line with one of the stipulations of the Model Agreement, which only referred to "military service" : the interest for repatriated persons, whose health was seriously impaired, to be entirely freed from military discipline : finally, the necessity of avoiding the use of an ambiguous expression by having recourse to a term which covered all froms of service.

It is a fact that, if the notion of "military service", by which is meant all activity carried out under military authorities and discipline, and subject to military law, is relatively easy to define as opposed to any other activity contributing to the war effort, such is not the case for the distinction between "military service" and "active military service". In so far as these two terms are concerned can they be considered to hold the meaning given to them by the national legislations which make use of such terms ? It would appear difficult to do so because the meaning of the terms differs from one country to another; but it

is pointed out that the meaning given to them in British legislation seems to very nearly correspond with that which the authors of the Convention probably had in mind (1).

It would be better therefore to be guided by the spirit of the Convention itself in the interpretation of the term rather than by national legislations. A precise definition is not possible, but, by giving the term a wide meaning all direct or indirect participation in armed operations against a detaining Power or its allies will be covered (2). Practically speaking Article 117 is a prohibition for all repatriated persons to serve in any units whatsoever which depend on armed forces, but does not prevent their incorporation in non-armed military units exclusively in auxiliary, complementary and similar duties.

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(1) In England, the term "on active service", applied to all persons engaged on military service, means that those persons are attached to, or are part of a force engaged in operations against the enemy, or in operations in a region or town, entirely or partially occupied by the enemy, or that they belong to occupation forces in a foreign land. See "Manual of Military Law, 1929" London, 1940. p. 559. In Switzerland, distinction is made between active military service, which includes all service either in the defence of the country against enemy agression or for the maintenance of internal peace and order, and instructional service exclusively intended for the training of troups. French military law distinguishes between the active army and the reserve, but this distinction has absolutely no correlation with the term "active" in the sense which the authors of the Convention wished to convey.

(2) See Geneva Convention of 1864, Article 6, Par. 4
"..... on the condition that the repatriated person shall not take up arms..."

D. Responsibility in case of violation

The authors all agreed that a prisoner of war could not be accused of the violation of this rule. A belligerent Satte would therefore have no right to try prisoners of war in a law court, if they were captured again, for violation of Article 117, because they should not be made to bear the responsability of a act of the State which they were bound to obey. (1)

In actual fact it is likely that the prisoner of war and not the State would suffer for this act at the hands of the detaining Power. Scheidl therefore suggested that, on liberation in application of Article 117, the prisoner of war should give his solemn promise not to take up active service. In the case where the Home Power obliged him to do so, it would be for the prisoner to prove that there had been constraint (2).

By virtue of article 8, facilities should be accorded to the protecting Power to enable it to control, on the territory of the Home Power, the application by the latter of Article 117.

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(1) See Bretonnière, "L'application de la Convention de Genève aux prisonniers français en Allemagne durant la seconde guerre mondiale", thesis submitted to the Faculty of Law of Paris University, 1949, Page 464. See also Charpentier : "La Convention de Genève et le droit nouveau des prisonniers", thesis, Rennes, 1936, Page 160: Ramussen, "Code des prisonniers de guerre", Copenhagen, Page 47.

(2) See Scheidl, "Die Kriegsgefangenschaft", Berlin 1943, Pages 482-483.

PREPARATION OF DOCUMENTS FOR WHICH THE CONVENTION PROVIDES

Identity cards for prisoners of war. (1)
(Third Convention, Art. 17)

(Wishing to proceed with the establishing of identity cards for members of the armed forces, one administrative body noticed a discrepancy between Article 17, Par. 3 of the Third Convention and Article 122, Par. 4, of the same Convention.

Article 122, which concerns official Information Bureaux set up by the detaining Powers, expressly states in Par. 4 that the nationality of the prisoner must be communicated, along with other indications, to the bureau of the country concerned. However Par. 3 of Article 17 does not require this indication and therefore the nationality of a soldier does not appear on the identity cards established in conformity with this Article. The same observation applies to the provisions stated in Par. 1 of the same Article concerning the questioning of prisoners. Is this difference intentional, and if so for what reason ? Such was the question put to the International Committee by a National Red Cross Society).

If Article 17 limits the information which a prisoner of war is obliged to give to the authorities of a detaining Power when questioned and that inscribed on the identity disc, it is so as to protect him. Certain cases might occur where the life of the prisoner or that of his family could be endangered if the detaining Power were aware of his place of birth, particularly when, on account of his place of birth, the prisoner could be considered as a national of the detaining Power.

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(1) See information Note for May 1853, Pages 6-20 on the same question.

At the 1949 Diplomatic Conference several delegates related experiences of this kind which certain of their compatriots had undergone.

It is therefore obvious that military identity cards should only contain the information required by Article 17.

On the other hand, where there is no danger for the prisoner or his family, it is highly desirable that all indications mentioned in Article 122 should be given by the prisoner, in order to assist in identifying him, and to facilite his contacts with his family.

A prisoner of war may therefore refuse to give information other than that required by Article 17 if he considers it advisable but in the majority of cases it will be to his advantage to give the officials of the detaining Power who question him all the information provided for in Article 122 (1).

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(1) In this connection useful reference could be made to the "Analysis for the use of National Red Cross Societies", Vol. II, Pages 61-62, also to the September, 1953, issue of the Revue internationale de la Croix-Rouge, Page 694.

DISSEMINATION OF THE CONVENTIONS

(The problem of the dissemination of the Conventions is among the most important with which the National Red Cross Societies and the ICRC have to deal.

In virtue of Articles 47, 48, 127 and 144 of each of the Geneva Conventions the High Contracting Parties "undertake to disseminate as widely as possible, both in time of peace and in time of war, the text of the Convention in question throughout their respective counstries, and particularly to incorporate their study in military and possibly civilian instruction programmes, in such a way that all the principles be brought to the notice of the armed forces and the population".

Several Governments and National Red Cross Societies have already taken more or less extensive measures in this field, and other Societies are drawing up plans and projects. It was precisely with the aim of drawing up such a programme of work that a National Society questioned the ICRC on the achievements of Governments and National Red Cross Societies in other countries concerning this matter. Although it is not easy to answer such a question in full, because the information received is in no way complete, a brief survey of attemps on the part of different countries to further the dissemination of the Geneva Conventions is given in the lines that follow.

MEASURES TAKEN BY CERTAIN GOVERNMENTS OR NATIONAL RED CROSS SOCIETIES TO ENSURE THE DISSEMINATION OF CONVENTIONS.

Many countries have taken measures with a view to ensuring the dissemination of the Geneva Conventions, but these measures vary in their scope from one country to another. It is pointed out first of all that all the countries which have ratified the Conventions have edited an official version in the language of the country. As to the measures of dissemination themselves, it is necessary to distinguish between :

(a) dissemination among the members of the armed forces : Govennments' responsability;

(b) dissemination among the specialised personnel of national Societies : the National Societies' responsaibility;

(c) dissemination among the general public: a task to be carried out by Governments in co-operation with National Societies, or by those Societies in co-operation with private or official institutions.

ad a. Dissemination among members of the armed forces.

The information received up to date by the ICRC, concerning the efforts made by certain Governments to disseminate the Conventions among the armed forces, shows that, in the main, these measures consist in the distribution of either in extenso copies of the Conventions or extracts accompanying other instructions on the conduct of war, to the majority of commanding officers, and others such as Company sergeant-majors, information officers, medical officers and chaplains. In addition a simplified version is sometimes issued to all soldiers during training. In some armies theoretical courses have been introduced to teach some of the officers and N.C.O., and in some cases, all the troops, the main rules of the Conventions. In all events, it would be desirable for a course of these main rules of the Geneva Conventions to be made an official part of the training of officers and N.C.O. and be given the same importance in the programmes as accorded to other subjects. The possibility of testing the regiment's knowledge of the Geneva Conventions during exercices and manoeuvres should also be considered (treatment of enemy prisoners, or wounded on capture, questioning, attitude to be adopted towards the civilian population of an occupied territory, towards partisans, the protections of hospitals, etc.).

ad b. Dissemination among specialised personnel of National Red Cross Societies.

Here, the efforts made by certain National Societies to drawn up effective plans consisting of the training of instructors and the giving of practical courses, should be pointed out. Some of these plans have already been put into action while others are being carried out or are in the process of being drawn up.

As an example the following general scheme of one of the plans carried out is given below.

(1) A certain number of courses, spead out over a more or less extensive period, are given in all parts of the country for the benefit of active members of the National Red Cross Society.

These courses deal with certain aspects of the Conventions, chosenaccording to the nature of the audience and the work it would do in time of war.

(2) Organisation, on the level of local Red Cross Sections, of refresher courses mainly for nurses and male and femele hospital orderlies.

With regard to the allotment of subjects for the different courses, we will make a brief reference to the plan adopted by one National Society, and which we consider to be of particular interest :

First Series: Efficacity of the Geneva Conventions
(aim, signatures and ratifications, requirements and common interests of all States, field of application, etc.).

Second Series: The Red Cross Emblem
(protective and indicative sign, limitation of use and abusive use).

Third series: Captivity and internment
(limits of the "military necessity" clause, intervention ou an international level, hospital accommodation repatriation and liberation, special position of civilians).

Fourth series : Protection of civilian populations in occupied territories
(limitation of measures taken by the occupying Power concerning the civilian population, for the requirements of military security, evacuation, safety zones).

It is obvious that it is not possible to propose a model programme for National Societies without taking into account the meand available to them, and particularly the participation of previously trained instructors or the collaboration of persons who are well acquainted with the Conventions. However the ICRC is willing to place its knowledge at the disposal of all National Societies who may require it. (1).

ad c. Dissemination among the general public,

This last task is the corollary of the first two. It is obvious that the work undertaken to desseminate the Conventions among members of the armed forces or among the personnel of National Red Cross Societies - we have in mind the printing of pamphlets containing extracts or summaries of the Conventions -

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(1) When drawing up this plan it would be useful to consult the Commentary on the First Geneva Convention for the amelioration of the condition of the wounded and sick in armed forces in the field, ICRC, Geneva 1952.

is of equal value in the dissemination of the Conventions among the general public.

But in the case of the general public, different pamphlets with a wider scope could be considered. Many countries have already solved the problem by printing several booklets, each one stressing a different aspect of the Conventions. The technicality of the wording varies according to the aspects under review.

The ICRC has already, in its possession a certain number of these pamphlets edited by National Societies or Governments, and a list of them will be found on the last page. Obviously this list only contains those pamphlets which have been brought to the attention of the International Commitee. The Committee will be only too pleased to communicate them to any National Societies which wish to use them as models for their own publications intended to circulate knowledge of the Conventions among the population. The financing and method of distribution of these publications naturally falls within the province of the authorities concerned. All publications issued by public authorities and destined for the army are usually distributed to the soldiers free of charge, and the cost is borne by the Government itself. It is also possible that National Red Cross Societies may be supported by their Government in their work for the dissemination of Conventions. It is naturally desirable that the pamphlets should receive as wide a distribution as possible.

In conclusion it is pointed out that the Law Faculties of some Universities have included the study of humanitarian law, the basis of which is now the Geneva Conventions, in their programmes. It is sincerely hoped that all Universities will follow this example, so that the intellectual elite of the countries signatories to the Geneva Conventions will be acquainted, not

only with the fundamental principles, but also the rules of the Conventions concerning humanitarian law (1).

The preceding lines are devoted to the work undertaken on the national level to ensure the dissemination of the Geneva Conventions; but mention should also be made of the efforts made in the same connection by the International Committee of the Red Cross and the League of Red Cross Societies. At the end of the list of booklets on the subject (see following page) a further list is given of publications by the International Committee and the League.

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(1) Useful reference could be made to the work published by Mr. Henri Coursier, Member of the Legal Section of the ICRC "Etudes sur la formation du droit humanitaire", Geneva 1952, 106 Pages; as well as to the Commentary already mentioned.