

SOUTH SUDAN

NEWSLETTER

JANUARY - DECEMBER 2018



70TH ANNIVERSARY OF THE GENEVA CONVENTIONS: WHY THEY CONCERN TO ALL OF US

Is everything allowed in war? Can a fighter attack a civilian? If a fighter is wounded, can he be denied health care? Can the population be used against the enemy? The answer to all of these questions is simple: no.

Even war has its limits.

All of these rules as we know them today were written (partly rewritten) 70 years ago in the Geneva Conventions—a series of four international treaties, reinforced by three additional protocols, which contain rules to limit the effects of armed conflict. The aim is to preserve the life, integrity and dignity of those who are not an active part of the conflict. This means both civilians (including health, religious and humanitarian personnel) and those who are not fighting anymore: the wounded, sick, detained, and whoever is out of combat. These rules should be known and applied by the members of all armed forces and armed groups during conflict and are known as part of the International Humanitarian Law (IHL).



Korean War 1950–1953. First aid in a hospital



War 1939–1945. Central Agency for Prisoners of War, Geneva. Mail service.

THE RULES OF IHL ARE MORE RELEVANT TODAY THAN EVER

One-hundred years ago, almost all of the dead and wounded during confrontations were combatants. Today, more than 94% of the victims are civilians: persons that are not involved in the fighting, children, medical staff and patients in hospitals that are attacked, journalists that are targeted and humanitarian workers, among others.

“Sometimes military commanders believe that following the rules of war limits military operations, but in fact it is right the opposite. Protecting the population and the life and dignity of those who are not involved in the fighting and who do not pose a threat is what makes a professional fighter,”

explains Albert Schoneveld, himself a former military officer currently in charge of IHL promotion among armed forces, police and other armed actors in South Sudan. “Observing the rules of war is part and parcel of effective military command, no matter what level the commander operates. Essentially, it does not suffice to merely know the rules (and make sure your subordinates do), but also that the rules are applied during the planning and execution of the operation”.

The Geneva Conventions were adopted the 12 of August of 1949.

A LITTLE HISTORY

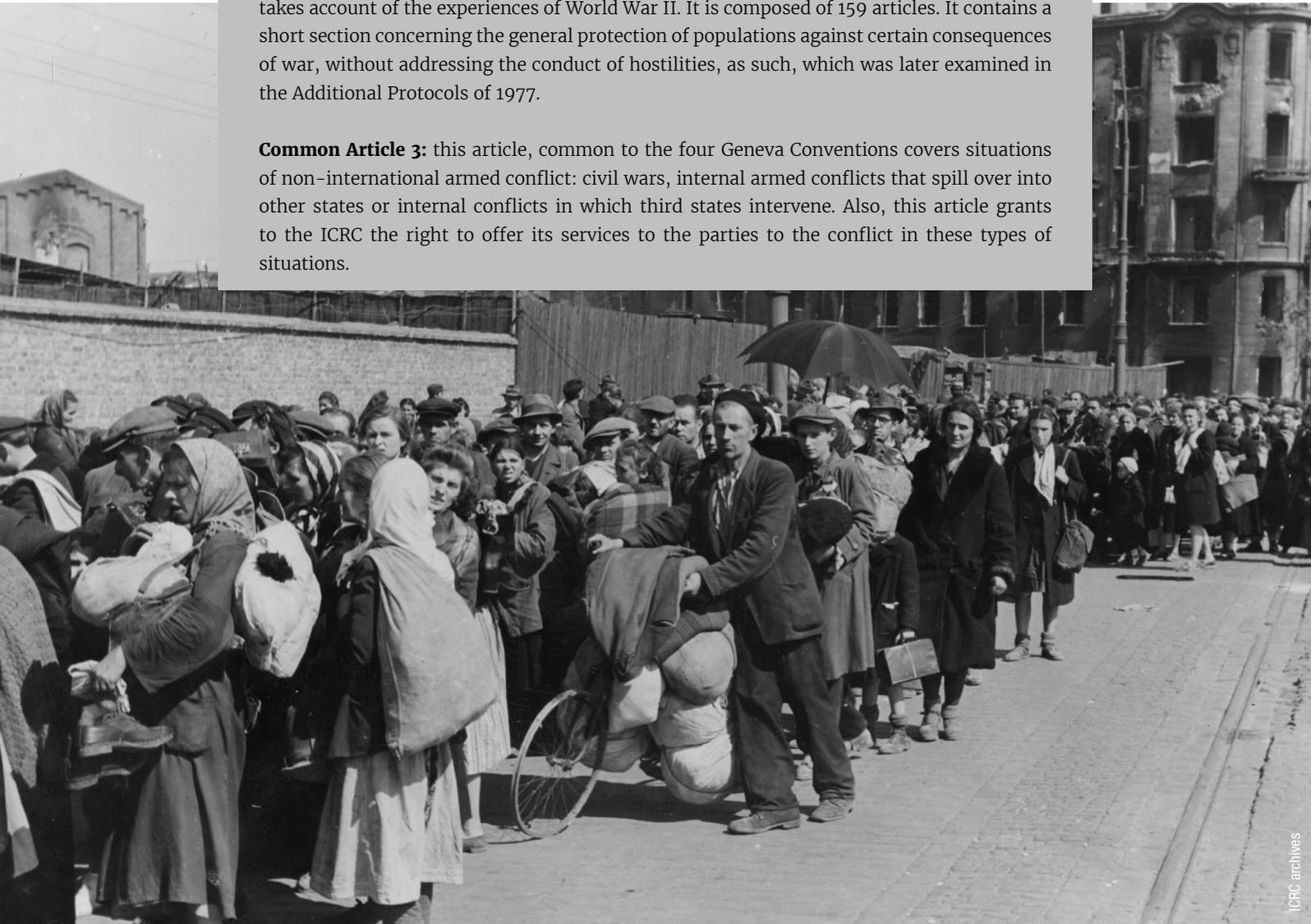
The first Geneva Convention protects wounded and sick soldiers on land during war: this Convention represents the fourth updated version of the Geneva Convention on the wounded and sick following those adopted in 1864, 1906 and 1929. It contains 64 articles. These provide protection for the wounded and sick, but also for medical and religious personnel, medical units and medical transports.

The second Geneva Convention protects wounded, sick and shipwrecked military personnel at sea during war: this Convention replaced the Hague Convention of 1907 for the “Adaptation to Maritime Warfare of the Principles of the Geneva Convention”. It has 63 articles specifically applicable to war at sea. For example, it protects hospital ships.

The third Geneva Convention applies to prisoners of war, replacing the Prisoners of War Convention of 1929. It contains 143 articles. The conditions and places of captivity were more precisely defined, particularly with regard to the labour of prisoners of war, their financial resources, the relief they receive, and the judicial proceedings instituted against them. The Convention establishes the principle that prisoners of war shall be released and repatriated without delay after the cessation of active hostilities.

The fourth Geneva Convention affords protection to civilians, including in occupied territory: the events of World War II showed the disastrous consequences of the absence of a convention for the protection of civilians in wartime. The Convention adopted in 1949 takes account of the experiences of World War II. It is composed of 159 articles. It contains a short section concerning the general protection of populations against certain consequences of war, without addressing the conduct of hostilities, as such, which was later examined in the Additional Protocols of 1977.

Common Article 3: this article, common to the four Geneva Conventions covers situations of non-international armed conflict: civil wars, internal armed conflicts that spill over into other states or internal conflicts in which third states intervene. Also, this article grants to the ICRC the right to offer its services to the parties to the conflict in these types of situations.



War 1939 - 1945. Warsaw. Civilians fleeing from the fighting in the capital and walking towards the transit camp of Pruszkow 17 km away.

FACTS & FIGURES, JANUARY- DECEMBER 2018



TO RESPOND TO PEOPLE'S MOST URGENT NEEDS AND TO HELP THEM BUILD RESILIENCE, THE ICRC, TOGETHER WITH THE SOUTH SUDAN RED CROSS (SSRC) HAVE:



Distributed over **70,087** monthly household food rations, equivalent to more than **7,057** metric tons of food, to over **420,524** people in need;



Provided essential household kits items to over **335,748** people;

Provided over **392,376** people with seeds and tools for farming, and some **244,548** people with fishing kits;

Vaccinated more than **660,000** heads of livestock against **four** diseases, treated another **170,211** benefitting over **290,202** people;



Implemented **eight** community-based resilience projects (vegetable production, canoe building, dyke repairs, goat restocking) benefitting over **14,863** people;

Improved access to safe drinking water for some **400,750** people through the implementation of **27** new water points and **15** rehabilitation of water facilities and **85** hand pumps;

Maintained **two** emergency surface water treatment units benefitting more than **46,000** people in Juba and Aburoch.



TO HELP IMPROVE ACCESS TO HEALTH AND PROVISION OF SURGICAL CARE THE ICRC HAS:



Performed **3,045** surgical interventions;

Provided more than **196,288** outpatient consultations, treated **5,383** in-patients and referred **3,900** patients to a hospital;



Evacuated **534** weapon wounded people;

Carried out renovation and extension work in **nine** health facilities;

Provided antenatal consultations for **17,468** women, safe deliveries for **2,987** women and vaccinated **35,607** women and children;



Assisted **3,224** people with disabilities with mobility devices and physiotherapy;

Counselled **550** patients in the mental health program.



TO HELP IMPROVE CONDITIONS FOR DETAINEES THE ICRC HAS:



Visited **4,065** detainees throughout the country;

Improved living conditions for **3,388** detainees in **13** places of detention;

Improved access to health care, and implemented preventive and curative measures against malnutrition for more than **2,307** detainees in **seven** central prisons.



TO HELP RECONNECT FAMILY MEMBERS SEPARATED BY ARMED CONFLICT AND OTHER VIOLENCE THE ICRC AND SSRC HAVE:



Facilitated **44,195** phone calls between family members separated by the conflict;

Helped exchange **6,247** Red Cross Messages with family news;

Reunited **68** vulnerable persons, including children, with their families;

Facilitated the dignified recovery and burial of the mortal remains of **49** persons.



TO PROMOTE KNOWLEDGE AND RESPECT FOR INTERNATIONAL HUMANITARIAN LAW (IHL) AND INTERNATIONAL HUMAN RIGHTS LAW (IHRL) THE ICRC HAS:



Trained over **3,400** military on IHL and more than **1,700** police personnel on IHRL;

Raised awareness among over **7,800** beneficiaries, other community members and health staff on safe access to life-saving, useful and actionable information about the ICRC and its humanitarian services.



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Cover Photo:

Models used in South Sudan by ICRC for workshops on IHL with armed forces. Each set represents a community with a hospital, religious site and school as well as police and armed forces.

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