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SAVE LIFE

... everybody is needed



CROATIAN RED CROSS

ZAGREB, 1999



**CROATIAN RED CROSS
BOOK COLLECTION**

Slobodan Lang
Branko Čulo
Bosiljko Domazet

SAVE LIFE

Care for abandoned people
on the liberated territories of the
Republic of Croatia

Zagreb, 1997



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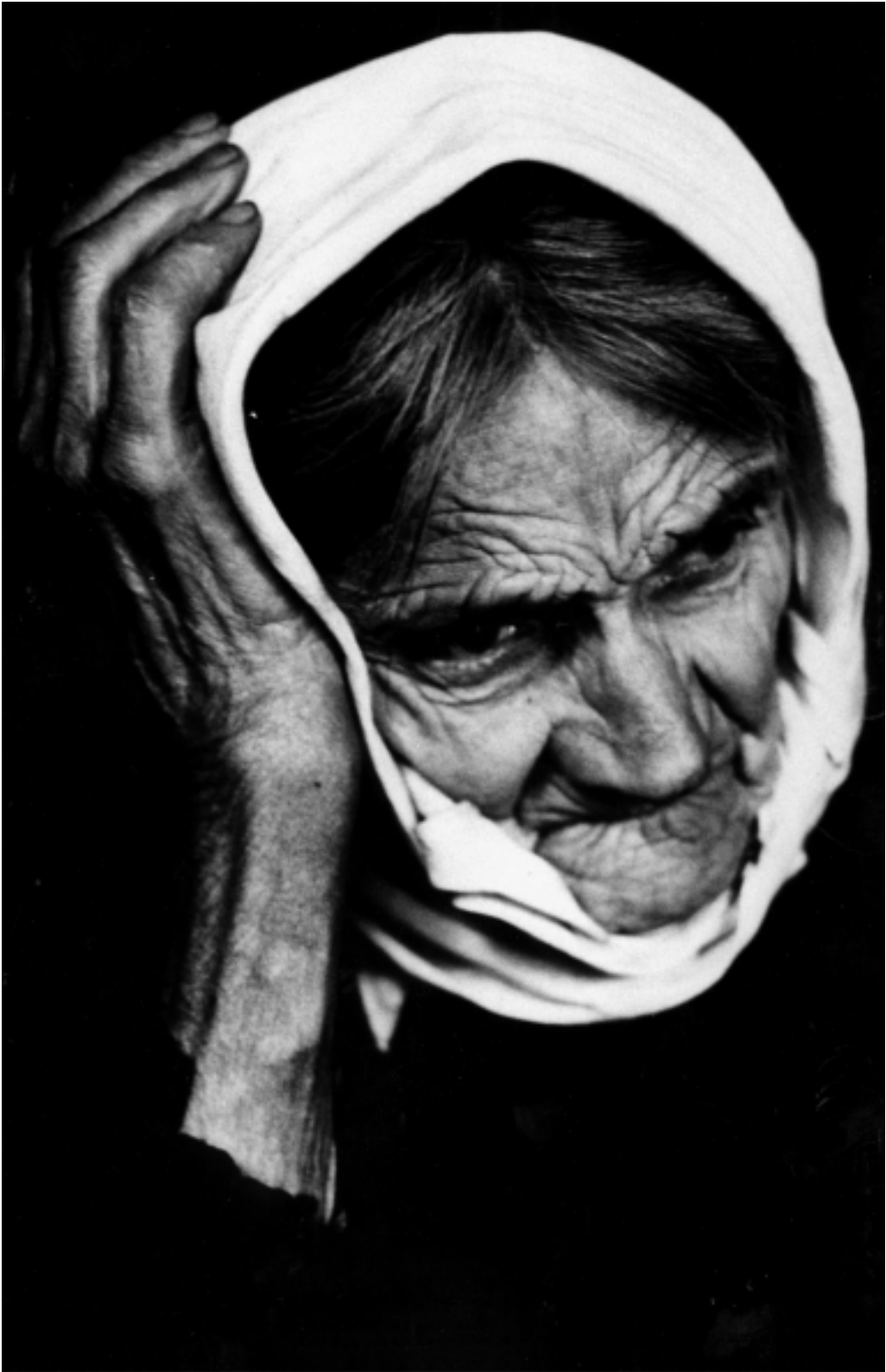
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RED CROSS BOOK COLLECTION

ZAGREB

1997



CROATIAN RED CROSS BOOK COLLECTION



JADRANKO CRNIĆ
President of the Croatian Red Cross

A book is always, or at least tends to be, a gift. That is the purpose of the Croatian Red Cross Book Collection. Its assignment is to offer the most important range of information about the work of the Croatian Red Cross and Red Crescent in general, about ideas that the Red Cross Movement is an advocate of, about ideas of the Movement's creator, Henry Dunant, back there in 1859, at the battlefield near Solferino, where the tragic conflict of three hundred thousand people left forty thousand casualties. Horrors of war, natural disas-

ters, any cause to human pain and suffering, are the source for goodness with the Movement's participants or any person who is set on selfless confrontation with pain and suffering.

The aim of the Croatian Red Cross Book Collection is to, learning from facts, point at great people and their ideas, significant activities and operations under extraordinary circumstances within the past record of the Red Cross, ranging from World to Our Beautiful Homeland, during the Patriotic War as well as after. Original evidence of suffering, but also any form of relief in the course of Patriotic War, will be reviewed. Examples of goodness must be kept record of so that remembrance should not fade, and for that matter, world should be shown such examples in order to find a possible source of inspiration hopefully in future but never again in the circumstances of war - in such cases of emergency when and where help is sought for.

The first book to see the light in the Collection is of entirely practical and widely pragmatic nature: "First Aid". Everybody needs to know the first aid, thus the book is meant for anyone as a book of right action and help.

The second book in a row has been written by those who have known most for their direct part in the "Save Life" Action. Their efforts have made it possible for abandoned and vulnerable people to go on with their lives

in accordance with the Republic's Constitution when it comes to safety and dignity and to the largest possible extent given by very difficult circumstances. This book is a contribution to moral renewal. It is the principal support to the idea of aid that will be given to any human being, to prevent or at least relieve human suffering throughout the world. What the book deals with is the same kind of topic as presented in two unique books since the beginning of World, Bible and Republic's Constitution. These books would not reach their goal only by looking at the World in terms of community. Man as an individual is in focus here - individual with their good and bad sides, their pain and anguish, but also their need to be given a hand when necessary.

Human rights and freedoms and their protection will be the topic in one of the following books, handbook meant for anyone to exercise or protect either their own or somebody else's rights.

Yet another forthcoming edition will bring to light facts relating to the Croatian Red Cross foundation and history.

Croatian Red Cross Book Collection is open for any new subject. Any new suggestions will be considered with respect.

JADRANKO CRNIĆ
Head of the Croatian Red Cross

The second book in a row has been written by those who have known most for their direct part in the "Save Life" Action



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*Mr President, I plead with
you to sponsor the care for
the Serb elderly population
in need of relief*

Excerpt from the letter of Dr Slobodan Lang, addressed to Dr Franjo Tuđman,
President of the Republic of Croatia, dated October 6, 1995





Dr. Franjo Tudman
Croatian President

*That same day the President replied:
"Take all necessary steps."*



President's Address

We wish to begin the book with the President's Address, issued by Dr Franjo Tudman at the very start of Operation "Storm", clearly substantiating President's will to take action without casualties, particularly in relation to Croatian Serb citizens who have not taken active part in the Rebellion.

The book itself is to present objectives of the Project, attitudes of the Project holders toward coordination methods, humanitarian population census and state of art at the beginning of the Operation, aid given by each organization, several short stories recorded about people during the Operation, and some significant documents.

We hope that our experience will be usefull in helping people, no matter who, where or when.



Excerpt from the President's Address to Croatian Serb citizens, dated August 1995:

"... I invite ethnic Croatian Serbs, who have not taken active part in the Rebellion, to stay at their homes and without fear for either their lives or property, await Croatian Authority, their civil rights as well as local self-management elections firmly guaranteed in accordance with the Croatian Constitution and Constitutional Law, alongside with international monitoring..."

Dr. Franjo Tudman



PREFACE

What we think or speak, does or doesn't, have a significant impact on people. Ethical significance of our actions is huge.

Operation "Save Life" proves our commitment to real world, our readiness to seek, see, hear and feel any difficulty during hard times.

We have never run away, no matter how painful reality has been, or how helpless we may have felt.

We have committed ourselves to the action of goodness, care for abandoned mostly elderly persons.

For that purpose, we have established Coordination of Care for Elderly and Abandoned Persons, carried out humanitarian population census, established facts, offered support, organized services, and built, and felt, and...

"Save Life" book is entirely based on the premises of our work, going all the way from action planning to a series of short stories. We have deliberately left out references from the book - our wisdom has sprung from action - we have been saving lives.

We have committed ourselves to the action of goodness, care for abandoned mostly elderly persons.



The village of Plavno - Abandoned persons

ACKNOWLEDGEMENTS

A number of human rights violations, accusations and criminal actions have been reported in the area. "Save Life" Project is one of the rare reports on how much good has been done by loving people who were in the middle of disaster.

Therefore I would like to give my thanks to each and every organization participating in the "Save Life" Operation, especially hundreds of Croats and foreigners who have from autumn and winter 1995 and 1996 to this moment, a big army of goodness, saving lives and caring for elderly and abandoned, regardless of their religion or nationality.

Thanks to them all.

This book describes their work.

Dr. Slobodan Lang



Croatian Red Cross - Field support

*This book describes
their work.*



SOCIAL COLLAPSE



Dr. SLOBODAN LANG

Adviser to the Croatian President for Humanitarian Issues

"Save Life" Action has been the first planned intervention since "social collapse" was defined and the Action itself began at the President's request, October 6, 1995.

"Social collapse" means that there is an abrupt loss of social peace and welfare, with subsequent poverty, hunger, and terror; resulting in the loss of dignity, equality and finally with deprivation of the very right to life itself.

"Social collapse" means that there is an abrupt loss of social peace and welfare

After the defeat of the rebel army and when the greatest part of the population was taken away, the situation in the newly liberated territories was total social collapse. There were remaining 3% of the residents, mostly of elderly age, scattered in more than 600 settle-

ments, not at all safe, their families scattered, without medical care, often in destroyed houses without electricity, water or heating, in the settlements without public transport or supply, without any information, without social care (pension, health care...), even without awareness about existence.

During the UN mandate international community did not manage: to disarm the rebels; to enable the return of 100.000 Croats expelled from their homes in 1991; to stop the terror; to report about it, as far as the remaining non serb or even Serb population was concerned; it failed to support the peace initiatives of the displaced persons; or prevent Serbs from being taken away in 1995, prevent attacks on Bosniacs from one UN Zone to another, or take any effective step which would lead to a peaceful end of conflict.

After the liberation of the territories in question, international mediators did not provide for sufficient humanitarian support.

There was a number of separate relief actions carried out by Croatian and international organizations, as well as individuals, achieving marvellous results, but there was no overall and efficient concept of humanitarian intervention, and quite an amount of energy was wasted in order to avoid responsibility in a not too productive mandate.

"Save Life" Action joined government and non-government, Croatian and international organizations.

It was a perfect example of humanitarian action, with a primary goal of "saving life", which was accomplished by doing the following :

- Care for individuals in life- threatening circumstances
- Carrying out population census

- Securing civilian safety (health care, health insurance, pensions, family re-unions, food supply, clothing)
- Restoring basic households needs (renovation, electricity, water, heating)
- Determining basic conditions of the settlement, communications, traffic and supply.
- Establishing connecting and coordinating fundamental social structure (homes for the elderly, social work centres, Red Cross and international humanitarian organizations).

First two objectives and greater part of the third one were realized, which means that the "Save Life" Action was realized too. All other objectives were effectively approached so that social collapse began to give way to social reconstruction and renewal.

Timely anticipation of the social collapse provides opportunity for planned and organized measures of prevention and intervention, or at least makes it easier to save lives or improve consequences of any potentially disastrous situation.

Dr. SLOBODAN LANG,
Adviser to the Croatian
President for Humanitarian Issues

*It was a perfect
example of
humanitarian action ,
with a primary goal
of "saving life"*



BEGINNING OF THE PROJECT

During the "Flash" and "Storm" Operation, most Serbs, who lived in these territories during the four year occupation, left the Republic of Croatia under the leadership of their representatives and paramilitary formations.

Several thousand Serbs and unknown number of other people remained in the newly liberated territories. Reviewing statistics of various humanitarian organizations, taking into account figures concerning refugees, it was presumed that some 7000 residents remained in those territories. Most of them were elderly, some of them were accommodated in, for that purpose, organized centers, a great number of them returned home several days or weeks later. Due to their elderly age, living conditions and soon coming winter peri-

od, a special Project has been started in order to organize care during the winter.

To plan and organize care, it was necessary to determine actual situation: number, social or health structure and age group of the residents, as well as their need for care. Therefore it was essential to carry out overall population census so as to prevent casualties among elderly and abandoned persons due to the hard winter conditions. On October 6, 1995, the Draft for the Project was presented to Croatian President, Dr Franjo Tudman. The President not only expressed his support, but also assigned top priority to the Project.

To plan organized care , it was necessary to determine actual situation



Census-takers in the field

OBJECTIVES

- 1 The most vulnerable persons should be taken care of as urgent as possible.
- 2 Plans for care should be completed and models for humanitarian intervention worked out with respect to the coming winter period. Funds are to be raised in order to finance aid (both internal and international funds).
- 3 Census is to give us insight into health, social and humanitarian status of the population in the liberated territories, targeted aid is to be supplied according to Census results.
- 4 Abandoned persons should not fear but welcome institutions of the Croatian State.
- 5 As for this Project, jobs and activities of the social work centres and other institutions in the liberated territories should be specified.
- 6 Information system as a tool of the Ministry of Labour and Social Welfare should be secured for the territories in question.
- 7 Both Croatian and international general public should be presented with census results through any existing media (television networks, radio networks, publications, books, INTERNET).
- 8 Personal documents should be issued (certificate of citizenship, identity card, medical insurance card, social card, passport...).
- 9 Reunion of family members should be made possible.
- 10 Family members should be informed of their abandoned relatives so that they could get involved in the aid itself.



Nurse Štefanija, in charge of accommodation at the Knin Hospital, during Dr Lang's visit, January 11, 1996

*First objective:
The most vulnerable
persons should be taken
care of as urgent as
possible.*



MINISTRY OF LABOUR AND SOCIAL WELFARE



JOSO ŠKARA
Minister of Labour and Social Welfare
with the Croatian Government

Address of the Croatian Leader, Dr Franjo Tudman, has guaranteed all human rights based on international standards to the remaining population in the territories liberated by the Operations "Flash" and "Storm".

After liberation of Croatian occupied territories and accessibility of the territories to prerogatives of Croatian legislative, legal and executive power set all administrative bodies to establish both formal, as well as concrete system in compliance with national legislation. Any required facility for the purpose of immediate improvement of the current situation, as well as for the meeting the needs of everyday life, was secured.

Ministry of Labour and Social Welfare have mobilized all their capacities in order to provide elderly and vulnerable population with complete care and social welfare benefits in accordance with the proclaimed policy of Croatian Government, and Despite initial negative reactions from abroad, Republic of Croatia has subsequently been given positive evaluation for their efforts in the report of Elizabeth Rhen, special UN Commissioner for Human Rights.

With the assistance of international humanitarian organizations, as well as the Croatian Red Cross, through Croatian social welfare centres and immediate field support, basically according to the highest achievements in the sphere of human and social rights, Ministry of Labour and Social Welfare managed to aid a great number of elderly and vulnerable abandoned persons, doing practically everything to urgently and efficiently put things back in order in the liberated territories.

Despite circumstances of war, aid has been given to the most vulnerable ones, therefore Croatian Government has proved loyal to democratic principles of the free and democratic world.

We remain thankful to anyone who was professionally and good-heartedly involved in the Project, especially the Office of the Croatian President and

President's Adviser for Humanitarian Issues, Dr Slobodan Lang, Ministry of Health, Ministry of the Interior, Government Office for Refugees and Displaced Persons, and others.

And last but by no means least, perhaps most important of all - many thanks to each and every social worker or

employee of the Republic's Fund for Pension and Disability Insurance, as well as social work centres.

JOSO ŠKARA

Minister of Labour and Social Welfare
with the
Croatian Government

Ministry of Labour and Social Welfare has mobilized all their forces in order to provide elderly and vulnerable population with complete care and social welfare benefits in accordance with the proclaimed policy of Croatian Government. Despite initial negative reactions from abroad, Republic of Croatia has subsequently been given positive evaluation for their efforts in the report of Elizabeth Rhen, special UN Commissioner for Human Rights.



SURVIVE WINTER - SAVE LIVES



Dr. NENAD JAVORNIK
Head of the Croatian Red Cross

Even at the very beginning of August, 1995, immediately after the liberation of Northern Dalmatia, Lika, Banovina and Kordun, during the occupation of the so called UNPA South and North, Croatian Red Cross established its branches throughout liberated territories, thus offering urgent aid to the local population. On August 15, any urban or municipal CRC Organization was involved in relief efforts in Benkovac, Donji Lapac, Drniš, Dvor, Glina Gračac, Gvozd, Hrvatska Kostajnica, Knin, Korenica, Obrovac, Petrinja, Slunj, Vojnić. CRC Organizations in Biograd at Sea, Duga Resa, Gospić, Karlovac, Ogulin,

Otočac, Sinj, Vrlika, Sisak, Šibenik, Bribir and Zadar starting their work in the formerly occupied parts of these municipalities.

Croatian Red Cross representatives are involved in the field work, estimating the needs of the population and distributing aid. Fifty-five tons of humanitarian aid were being distributed through the Croatian Red Cross Distribution Network even by the end of August, 1995 - above mentioned aid has been given by UNICEF for the remaining population in the previously occupied territories.

Aid was also being distributed among refugees coming from the Republic of Bosnia and Herzegovina, precisely Banja Luka Region, on daily basis. According to the estimates formed by the Government Office for Refugees and Displaced Persons, in October, 1995, there were remaining 10.000 persons at their homes situated in the liberated territories, and close to 10.000 persons who have arrived from the neighbouring Bosnia and Herzegovina. At the same time, first Croatian displaced persons who were also in great need for support start with their return.

Together with the International Federation of the Red Cross and Red Crescent Societies, the Croatian Red Cross foresaw that, before the arrival of winter, practically any person in the newly liberated territories was in the most urgent need for basic things which will mean survival, particularly regarding

the fact that a vast majority of the remaining population was mostly elderly.

At the beginning of October, 1995, during the talk with Admiral Swedlund, the Head of the Delegation to the International Federation of the Red Cross and Red Crescent in Croatia, immediate start of the Survive Winter Action was agreed upon, which meant distribution of the required amounts of food, firewood, and clothes in the course of winter, 1995-1996. Medical care, as well as accommodation for fragile elderly, was also agreed upon.

In order to initiate the Action, the International Committee for the Red Cross, Agency of the European Union for Humanitarian Aid, UNHCR, and UNICEF were asked for help and support. UNCIVPOL units were also involved during the formation of mobile teams, which are supposed to pay visits to the most vulnerable residents of the remotest hamlets all throughout the Action. There were mutual efforts shared by both Ministry of Labour and Social Welfare, as well as Ministry of Health, which were supposed, to secure accommodation for elderly, ailing persons.

President's Adviser for Humanitarian Issues, Dr Slobodan Lang, has given initiative concerning the most urgent population census in the liberated territories in order to establish facts about health and social requirements of the population.

Population census has been carried

out, involving giant efforts of the social services and the Croatian Red Cross.

Judging by the Census results, it is perfectly clear that any decision with respect to the beginning of the Action in order to save lives during the upcoming winter period has been fully justified and on time. Through joint efforts of the governmental institutions and non-governmental organizations, the Action known as Save Lives is being continued and developed even today. There is absolutely no doubt whatsoever that a number of human lives indeed has been saved by the efficient collaboration of all subject involved and by the timely intervention with the aim to save lives.

The Action has proved that even at hardest times there is room for hope and faith in people, faith in their readiness to give help jointly and unselfishly.

I am profoundly grateful to anyone whose efforts and willingness have made the Save Life Action possible.

Dr. NENAD JAVORNIK

Head of the Croatian Red Cross



INTERNATIONAL FEDERATION OF THE RED CROSS AND RED CRESCENT



STEN SWEDLUND,

Head of the Red Cross and Red Crescent Delegation in
the Republic of Croatia

The Croatian delegation of the International Federation of the Red Cross and Red Crescent Societies has, together with the Croatian Red Cross - CRC, been actively involved in assisting the very vulnerable residents of the Former Sectors North and South - Banovina, Kordun and Lika who remained after the Croatian Government's actions in early August. The area has also been settled by about 11000 newly arrived refugees from northern Bosnia - Herzegovina and some 13000 returnees.

The Federation first entered into this region on 12-14 September in a cooperative

fact-finding mission with the International Committee of the Red Cross - ICRC, whose mandate encompassed this region. As a result, the Federation opened field offices in Knin and Vojnić on 1. October to better facilitate the decided handover of international relief coordination from the ICRC on 1. January 1996. The ICRC welcomed the Federation's presence to support the Croatian Red Cross in re-establishing its services in the Former Sectors North and South and meeting the needs of the vulnerable groups there. At the same time, a working group made up of Croatian Red Cross, ICRC and Federation relief representatives began weekly meetings to ensure effective coordination in the field.

By mid-October, it was evident that urgent humanitarian intervention was required for estimated 300-500 elderly, bed ridden residents of the FSNS who can not survive the winter without daily care. The majority of the 10000 remaining residents can receive assistance only if it is distributed to them directly since most live in remote areas that are inaccessible without all-terrain vehicles. Former CRC Social Welfare Programme staff began going into the field in the last half of October with ICRC and UNCIVPOL mobile patrols in the region. In the meantime, 10 CRC/IFRC mobile social service teams and 2 technical teams were established to provide assistance to the most vulnerable. Concurrently, the CRC branch secretaries and volunteers have been



carrying out an assessment to identify the most urgent cases that need immediate institutional care.

On 27 November 1995, the Federation and Croatian Red Cross signed an agreement with the Ministry of Social Welfare which stipulates that 200 beds will be made available as soon as possible in institutions within each of the former sectors - the elderly home in Petrinja - FNS - and a part of the hospital in Knin - FSS. The Federation and the CRC will support this programme by :

- partly financing the renovation of the Elderly Home in Petrinja - repair of war damages, water and sewage system, installing sanitary equipment, carpentry, elevators, kitchen equipment, etc.-in the amount of CHF 170000;
- providing medical equipment and supplies for the care of 200 elderly, disabled persons in the amount of CHF 100000;
- financing the salaries for 25 qualified staff employed by CRC to work in the Elderly Home in Petrinja and the hospital in Knin, for a period of 4 months in the amount of CHF 70000;
- providing social workers to work with the 200 beneficiaries ;and
- providing hygiene care supplies for a period of 4 months

This very demanding emergency operation is planned to continue throughout the

winter period. During this period the more long-term needs will be assessed in order to develop an efficient social service programme within the CRC local structure.

STEN SWEDLUND

Head of the Red Cross and Red Crescent
Delegation in the Republic of Croatia

*By mid-October ,
it was evident that
urgent humanitarian
intervention was
required for estimated
300-500 elderly*



EUROPEAN COMMUNITY TASK FORCE (ECTF)



FRANCISCO MARTINEZ ESPARZA,
Head of the European Community Task Force - ECTF

European Community Task Force /ECTF/ was established by the European Council of Birmingham in October 1992 as an implementing body of the European Community Humanitarian Office/ECHO/, now the largest contributor of humanitarian aid in the world. Since the beginning of the conflict in former Yugoslavia, ECHO has committed, until February 1996, in the form of humanitarian assistance over 1063 million ECU /1.4 billion USD/.

ECTF Activities include :

- Direct Food to Croatia
- Medical, Psycho - Social, Coordinated Hygienic Program, as well as food assistance, given through non-governmental organizations
- Indirect assistance provided through multi-lateral humanitarian organizations, namely UNCHR, UNICEF, WHO, WFP, ICRC and IFRC.

Another important role of ECTF is to provide continuous assessments of new needs for humanitarian assistance and advise ECHO on policy matters and likely further requirements.

After Operation Storm and the large scale influx of refugees from Banja Luka, ECTF responded very quickly with emergency food and hygienic supplies. These developments also influenced ECHO's decision to allocate additional funding for recently arrived refugees, as well as the remaining population in Former Sectors North and South.

The Direct Food Aid Program is being implemented in collaboration with ODP, and together with ECTF implementing partners - the Croatian Red Cross, Caritas and Merhamet who are responsible for secondary distribution. The majority of people who remained in Former Sectors will thereby keep on being supplied by food and hygienic products funded by the European Union Humanitarian Office /ECHO/ and distributed through the Croatian Red Cross. It is considered to be a great challenge to the Croatian Red Cross to cover such a huge area with existing means, equipment and staff resources, particularly in order to reach people in isolated villages which are considered to be the most vulnerable. The need for reinforcement of their efforts has been identified. ECHO is thereby ready to provide funding for

SAVE LIFE

4 additional mobile teams to accomplish this task. This operation will be coordinated by ECTF and the field action will be implemented by our NGOs : Equilibre and MPDL.

Since the people who remained in the area are mostly elderly, who besides food aid are also in need of special care, namely emergency psycho-social assistance, two NGOs: HelpAge International and Oxfam, with considerable experience in providing psycho-social service to the elderly have been supported to provide these services.

ECTF will guide NGOs to concentrate on providing services to the people in isolated villages, and those in which less than 5 people remained . The basic aim of this emergency operation is to provide additional assistance to these people until the spring time when we hope that our local partners, like the Croatian Red Cross will be able to take over the action, and when the Social Welfare System will be able to function in this area the same way as in the rest of the country.

ECTF welcomed the Project of Care for Abandoned People, and established close contact with the project team . ECTF representatives visited the area together with the Croatian Red Cross social workers to get a closer overview of the problem . The project as well as experience gained through coordination with project participants was presented to NGO teams in order to prepare them for difficulties they will face while reaching isolated people and implementing their programs . The project team will provide ECTF with data collected by social workers, which will be of great help to us and will ensure efficiency and successful accomplishment of our task . ECHO/ECTF will continue to collaborate closely with the other partners in the Project

of Care for Abandoned People to avoid possible overlaps as well as to keep informed on new needs, to be able to respond to them rapidly.

FRANCISCO MARTINEZ ESPARZA,
Head of the European Community
Task Force - ECTF

*After Operation Storm
and the large scale
influx of refugees
from Banja Luka ,
ECTF responded very
quickly with emergency
food and hygienic
supplies.*



UN HIGH COMMISSARIAT FOR REFUGEES (UNHCR)



PIERRE JAMBOR
Head of the UNHCR Delegation
in the Republic of Croatia

Since the beginning of the UN Mission in Croatia, 1992, UNHCR have been present in UN Sectors North and South, taking care of any resident's need without discrimination.

Direct aid of the UNHCR is currently being targeted at two categories of population, Serbs who remained in the territory after the "Storm" Operation in August 1995 (mainly elderly and vulnerable persons) and those Croatian Serbs who have run away but are coming back to the area. There are 6000 ethnic Serbs in the former Sector North and 4000 in the former Sector South. Many of them belong to a group of extremely vulnerable individuals (EVI), who are bed-ridden and because of that, their life depends upon humanitarian aid of international and local

non-governmental organizations (NGO - non-governmental organization).

Primary tasks of the UNHCR are protection, care, accommodation and permanent solutions. Together with ECMM, ECHO, OSCE, UN Centre for Human Rights and non-governmental organizations, UNHCR has been actively involved in the monitoring of the situation and helping the most vulnerable mostly elderly residents, remaining in the former UN Sectors.

Most of extremely vulnerable persons live in settlements. Those persons have been remote supported by the Croatian Red Cross through two relief programmes : firstly, ECHO Programme for Returnees, Remaining and Displaced Persons, and secondly, Croatian Red Cross Social Welfare Programme for Socially Vulnerable Persons. UNHCR target groups are of key importance within the ECHO Programme. However, there are two problems : food parcels running behind schedule is the first one, insufficient amount of food in the parcels is the second one. For the most vulnerable (elderly persons) among extremely vulnerable (EVI), those parcels mean survival. If relief in food was any less due to donators' indifference, the impact of such a situation would be terrible and possibly tragic for those persons and stability in the former Sectors.

Karlovac based UNHCR Mobile Teams paid a visit to 515 households between July and August 1996. Since 90% of the population are over 65 years old and most of them faced with serious health disorders and other sorts of problems, UNHCR carried out firewood supply programme in the period between November 1996 and March 1997. This year firewood supply programme for Sector North will be done by Zagreb based Italian-French Caritas. There are different regular programmes in Sectors South and North. Technical Teams do minor repairs, cut down the trees for firewood, mow the lawn, cultivate smaller areas of land, etc. Repairs of the

SAVE LIFE

returnees' houses or other sorts of buildings are being done by IRC. UNHCR supports social activities of the displaced persons, Bosnian Croats and Serbs, also activities of the youth. UNHCR also delivers food and other goods for household use directly to the most vulnerable persons or through the local non-governmental association.

UNHCR regularly follows and reports about the human rights situation in the region with the assistance of the OSCE, ECMM, and UN Centre for Human Rights. UNHCR also offers legal and social assistance, helping persons to obtain legal documents, certificates of citizenship, pensions, payments of health services for vulnerable individuals, etc. UNHCR provides for transport means in case of a family reunion, for any health or humanitarian need. UNHCR gives information to refugees and returnees (repatriation).

UNHCR coordinates activities with the "Save Life" Project to avoid overlapping and improve effectiveness. UNHCR helps the Federation with the registration of returnees who have come back through their organization or the Government's Office for Displaced Persons and Refugees, as well as those who have independently returned and asked for assistance of the UNHCR in the Sectors North and South. Therefore, the Federation is in position to support extremely vulnerable persons / cases.

UNHCR authorizes local and international organizations (DOS, Help Age, Papa Giovanni, Homo), which support the vulnerable population by using their own funds.

In July 1996, UNHCR and ICRC initiated their plan to find a permanent solution as far as extremely vulnerable persons are concerned. The plan enables the return of Croatian Serbs, family members of extremely vulnerable persons staying in Yugoslavia, in terms of the existing mechanisms of the Government's Office for Displaced Persons

and Refugees. Returnees, i. e. family members, are becoming the ones who care most for extremely vulnerable persons, offering necessary emotional, material and physical assistance, making the situation a lot easier for humanitarian organizations and Croatian institutions.

UNHCR is concerned about a slow process of getting approval within the Project of Extremely Vulnerable Persons : up to now, as few as 80 family members have returned, all in all, since June 1996, 1028 Croatian Serbs have been assisted by UNHCR on their return from Yugoslavia ; supported by UNHCR and UNTAES, total number of returnees to the former Sectors is 761 (up to July 17, 1997).

As for the return from the UNTAES Region, UNHCR 's role has been changed after the Agreement on the Return, dated April 23 (between the Croatian Government, UNTAES and UNHCR). UNHCR mainly provides for logistic and advisory support.

Further efforts need to be invested into the support of any ethnic group in the former Sectors, both of the persons who are coming back home, as well as the ones who have never even left the area. It is necessary to continue with the assistance not only in order to help people to survive through the up-coming winter, but also to improve the social and economic situation - UNHCR will continue to be involved in the support of multi-ethnic co-existence of the population in the former Sectors North and South as the only way to secure political, social and economic stability of the strategically important territories of the Republic of Croatia.

PIERRE JAMBOR

Head of the UNHCR Delegation in the
Republic of Croatia



COORDINATION



Tomislav Ćurko, Head of the Social Work Centre in Knin and Dr Slobodan Lang, during the visit to the abandoned elderly people - hamlet of Dragišići, village of Gornji Radljevac, January, 1996

For the purpose of more efficient planning of aid and actual aid operation, as well as media coverage, it has been suggested to set up the Coordination of government and non-government, Croatian and international organizations



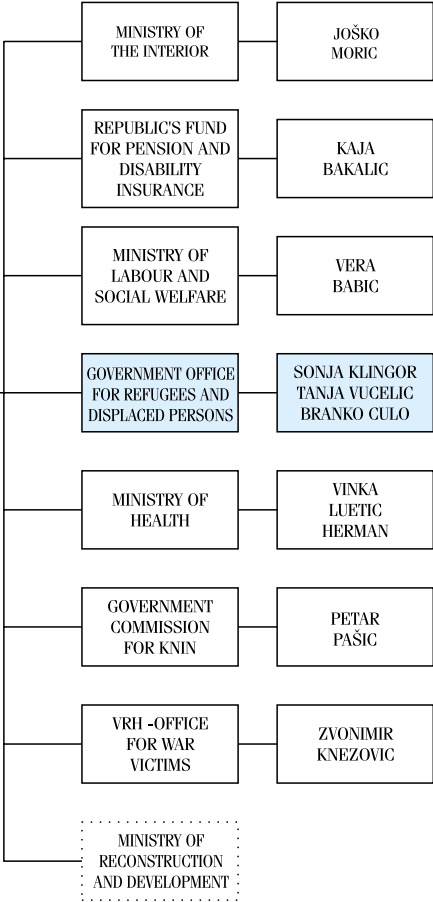
COORDINATION OF THE
CARE FOR
ELDERLY PEOPLE

ZAGREB

October 17, 1995

COORDINATION -
- ZAGREB -
- ELDERLY PEOPLE

PRESIDENT'S OFFICE
SLOBODAN LANG



The following organizations became members to the Coordination as of October 24, 1995: the Office of the Croatian President, Ministry of Labour and Social Welfare, Republic's Fund for Pension and Disability Insurance, Ministry of Health, Ministry of the Interior, Government Office for Refugees and Displaced Persons, Office for War Victims, Parliamentary Committee for Human Rights and Ethnic Minority Groups, Croatian Red Cross, International Committee for the Red Cross, International Federation of the Red Cross, Caritas, Working Team of the European Union for Humanitarian Aid (ECTF), European Monitors (ECMM), and UNHCR.



Immediately after the start of the "STORM" Operation in the former UNPA North and South, August 4, 1995, Croatian President, Dr Franjo Tudman, announced "... ethnic Croatian Serbs, who have not taken active part in the Rebellion, should stay in their homes and, fearing for neither their lives nor property, receive Croatian Authorities..."

"... We are determined to stop the suffering and uncertainty felt among the Croatian displaced persons from the occupied territories and on the other hand, to guarantee human and ethnic rights to the Croatian Serbs..."

A number of humanitarian organizations urgently started their independent humanitarian aid - including the Office of the President, the Croatian Government, the Red Cross Family (International Committee for the Red Cross, International Federation), as well as

President, Dr Franjo Tudman, with the "Draft for a project of care for abandoned, elderly and unprovided for, mostly Serb population in the liberated territories of the Republic of Croatia". The following is emphasized and suggested:

- 1 It is absolutely necessary to carry out the targeted project of care for abandoned, elderly Serb population.
- 2 The population mentioned above have stayed in Croatia at your President's immediate request and, by doing so, confronted the Serb campaign aimed at taking the population away, with the aim to engage Serbia in war and at the same time compromise Croatia.
- 3 If the targeted project is not carried out, a great number of people will not survive through the upcoming winter period.
- 4 I kindly ask your President to sponsor the targeted project of care for the people, making it a part of your continuous humanitarian activities, ever since the time prior to the conflict up to the moment of sending me to the UNCRO Camp in order to protect human rights and bring to Serbs humanitarian aid.

The situation with the people in Knin and elsewhere in the liberated territories is described further in the text.

Before the war, Knin had a population of 13.000, and now there are 2.000. There



Dr Javornik and Dr Lang, visiting the former UNPA North

European Coordination of Humanitarian Organizations (ECHO), European Monitors and others.

During August and September, the organizations operate separately, however, on October 6, 1995, Dr Slobodan Lang, the Adviser to the Croatian President for Humanitarian Issues, presents Croatian

If the targeted project is not carried out, a great number of people will not survive through the upcoming winter.

were 40.000 residents in the Municipality of Knin, and now that number has been reduced to 4.000.

Among the remaining Serb population there is a great number elderly persons. In the area of Knin there are 2.000, and in the liberated territories altogether 3.500 abandoned elderly persons.

Before the war, Knin had a population of 13.000, and now there are 2.000. There were 40.000 residents in the Municipality of Knin, and now that number has been reduced to 4.000.

From single to somewhere close to a hundred abandoned persons live in 40 local communities or 150-200 settlements in the Municipality of Knin. Whole area is similar to this.

Rural area has seen the social collapse which still continues, shown by the fact that there is no public transit, electricity, water, heating, food supply, food for winter, medical or social welfare.

Social security represents particularly big problem in these territories, with to omnipresent fear and constant risk of criminal activities.

The situation will become untenable with the upcoming winter period.

For the purpose of more efficient planning of aid and actual aid operation, as well as media coverage, it has been suggested for the Coordination of govern-

ment and non-government, Croatian and international organizations to be set up. In the remaining part of the letter it says:

Mr President, after the "Storm" Operation, Serbs have not only left their possessions, but also people. We must not care for possessions only.

Mr President, I beg you to sponsor the care for the Serb elderly population in need of relief. It is obvious why sympathy toward these people is in short supply, however, they need to be protected - for their sake, for our sake, for the world's sake, and for your sake.

Highest-ranking officials of the Croatian Government, Minister of Social Welfare and Health, Office for Displaced Persons, Croatian Army, Police, as well as local authorities, have been presented



Sten Swedlund and an employee of the International Federation of the Red Cross in the field

with the letter.

That same day the President replied:

"Take all necessary steps." That was



"Take all necessary steps."

the very beginning of the largest humanitarian operation of care for elderly, abandoned population in the course of war.

At the same time, proposal was put forward by the International Federation of the Red Cross and Red Crescent, concerning this same issue - care for elderly population in the liberated territories.

The first meeting of the Coordination of Care for Abandoned Elderly Population took place on October 17, 1995.

Following organizations became members to the Coordination: the President's Office, Ministry of Labour and Social Welfare, Republic's Fund for Pension and Disability Insurance, Ministry of Health, Ministry of the Interior, Government's Office for Refugees and

Displaced Persons, Office for War Victims, Parliamentary Committee for Human Rights and Ethnic Minority Rights, Croatian Red Cross, International Committee for the Red Cross, International Federation of the Red Cross, Caritas, Working Team of the European Union for Humanitarian Aid (ECTF), European Monitors (ECMM), and UNHCR.

Following announcement was made to the public:

"... it has been established that the withdrawal of both Serb paramilitaries and Serb civilians has left a great number of elderly people abandoned, Croatian Authorities have been faced with a commitment to work out a targeted programme of care.

Furthermore, importance of the most urgent aid has been stressed due to the upcoming winter period."

Following issues were also on agenda: safety, medical and social welfare, family reunion, international cooperation, as well as other needs with respect to elderly and abandoned population.

At the end of the meeting, support was given to the position of the Bishop's Conference concerning social care for the population in the liberated territories.

At the end of 1995, Coordination submitted their work report to the Ministry of Labour and Social Welfare, Ministry of Health, Ministry of Development and Reconstruction, Ministry of the Interior, as well as prefects of the following counties: Sisak-Moslavina, Šibenik, Zadar-Knin, Lika-Senj and Karlovac.



Mrs Emma Bonino, the Commissioner for Humanitarian Issues to the EU, accompanied with Dr Adalbert Rebic, Head of the Office for Refugees and Displaced Persons, and Dr Slobodan Lang



SAVE LIFE

Folowing letter was sent to the Croatian Prime Minister:

Dear Mr Mateša,

According to President's request for better protection of life, particularly civilian, we have begun the "Save Life" Action in order to take care of abandoned persons throughout the liberated territories of the Republic of Croatia.

Coordination is supported by a number of ministerial or governmental offices, representatives of the Parliament, both Croatian and International Red Cross, European organizations, UN organizations, and church organizations - total of 15 organizations.

For the first time in history social collapse was established for a fact, and humanitarian census was carried out in order to form social register of vulnerable persons throughout the liberated territories. At the same time, immediate support was given to 200 most vulnerable persons, who might have never even survived without it.

Immediate renovating of buildings was started in order to provide accommodation, and certain amount of aid in food and other things was expected. Both actions are still in process.

Any step taken so far has been fully in line with President's position about liberated territories, or any human being, regardless of religion or nationality.

In view of the key role and responsibility held by the Croatian Government as far as necessary measures are concerned, having in mind that a specific approach might be required in the territory of the Eastern Croatia, we beg you to receive most urgently the Coordination representatives to inform you of the Project in full, so that the Croatian Government could take over further activities of the Project.

Mr Prime Minister, this relief action means hope for thousands of most tragic, abandoned, vulnerable people in Croatia. We have gathered together in order to offer hope.

We believe that we could not have give you a present more humanitarian than this one for Christmas and for the New Year 1996.

Merry Christmas and a happy New Year.

Respectfully yours,

Adviser to the Croatian President for
Humanitarian Issues
Dr. Slobodan Lang

*For the first time in
history social collapse
was established
for a fact*



At the fifth meeting of the Coordination dated January 18, 1996, all participating organizations submitted their reports of what had been done so far. It was established that the network connecting social and medical institutions of the Red Cross Committee and international organizations had been set up in the whole area of the liberated territories. Special institutions for the accommodation of elderly people were formed in Knin, Petrinja and Glina, mobile teams were formed as well, humanitarian census was carried out, and 326 persons were accommodated as planned.

Apart from further relief efforts, more activities have been added to the Coordination programme - information dissemination as far as international public is concerned (OSCE in

In February 1996, value and significance of the Action were strongly emphasized by the UN Secretary General and Security Council.

Following announcement was issued at the seventh meeting of the Coordination:

It was concluded that the first stage of the "Save Life" Action had been accomplished, and the time came to start with the second stage "The Quality of Life".

Increased number of vulnerable population in the territory makes the Project all the more important (return of the Croatian displaced persons, Serb refugees, Croats expelled from the North-Western Bosnia, and others). We talk mostly about elderly and vulnerable persons, and that is why it is necessary to use both intersectional, as well as international efforts in order to restore basic social provisions for normal life.

Civilian security was assessed as a matter of great significance that should be constantly supervised.

There was a review of the assessment submitted on February 14, 1996, by the UN Secretary General, B.B.Ghali and also the one submitted on February 23, 1996, by the President of the UN Security Council - significant improvement of the situation in the liberated territories, especially with respect to the remaining elderly population, was fully supported by the Council.

Difficult social situation as regards a great number of Croats, mostly elderly persons in the Banja Luka Region and the still occupied Croatian Danube Region, was reviewed at the meeting. There was a presentation of Croatian efforts and plans in order to help vulnerable population respectively. As many international representatives as possible were invited to participate.

At the request of both domestic and international representatives, joint humanitarian operation regarding the peaceful reintegration

It was concluded that the first stage of the "Save Life" Action had been accomplished

Vienna), spotting most recent problems in the liberated territories, as well as resolving similar kind of situation elsewhere.

It was specifically pointed out that care for elderly Serb population need to be started in the still occupied Danube Region.



Vittorio Ghidi, Head of the ECTF Office

SAVE LIFE

of the Croatian Danube Region was agreed upon. During 1996 and 1997, humanitarian activities were also extended to the Croatian Danube Region.

Coordination kept meeting once every week or two, sharing experience, providing information, making agreements.

In order to assess the situation and make plans, acknowledging rights of each and every individual, Humanitarian Census was started - as early as November, more than five thousand people were identified and included into the Census, and these people's needs for all sorts of help were established.

By that time, institutionalized care was secured for 85 persons. There were priorities such as health care and community nursing, as well as any other form of humanitarian aid, mainly food, fuel, or clothing. Threatening with even greater consequences, winter conditions and rough terrain proved to be insurmountable obstacles as regards the functioning of the humanitarian/social and health system due to the shortage of off-road vehicles. To help directly with a motor fleet, Coordination suggested a possibility of such a donation, which should meet the needs of the social and health insurance, social welfare or any other form of humanitarian activity

Coordination's primary goals were: to care for the most vulnerable persons, to carry out Humanitarian Census in the liberated territories, to coordinate aid, to plan and carry out relief operation during the upcoming winter period, to initiate the formation of the social structure, to keep both domestic and world's media up to date as far as needs and results of the "Save Life" Action are concerned.

Before the end of 1995, Humanitarian Census was carried out by the staff members of the Croatian Red Cross. That was when the situation abruptly changed, and direct aid to abandoned persons became reality.

Close to 200 persons were admitted into

social and health care institutions, and throughout the liberated territories operational activities became real in any county or municipality after the establishment of the framework of social welfare centres, Red Cross and health care institutions. That significantly increased the safe status of the whole region - mobile teams were organized to take part in relief activities, improve the situation, and put residents' homes in order. Electricity, water supply, as well as public transit was secured, and food supply during the winter period was agreed upon.

The end of 1995 meant also the end of the social collapse.



General Francisco Martinez Esparza
and Dr. Slobodan Lang



UN World Summit of Social Development held on March 9, 1995, in Copenhagen saw the Press Conference of the Croatian Delegation and the Delegation of Bosnia and Herzegovina, and the title of the Conference was "The Most Tragic Europeans". It was about the tragic events in Croatia and Bosnia and Herzegovina since the beginning of the Serbian Aggression, especially those which happened in the UN Safe Zones and

Collapse" was used for the first time.

Coordination of care for abandoned persons was, in the aftermath of the Storm Operation, the first organized Action in order to prevent and resolve the social collapse situation.

"Save Life" Action has achieved remarkable results in saving lives, caring particularly for elderly people, as well as developing humanitarian methods (Census, Coordination) in the extraordinary circumstances.

*Unfortunately,
despite warnings, the
tragedy of Srebrenica
was not prevented.*

the occupied area.

It was about suffering of detained or imprisoned people, refugees or displaced persons, under siege or occupation.

That was when the term "Social



EU Commissioner for Humanitarian Issues,
Mrs Emma Bonino



STATUS



Abandoned old women , Dрниš , August 1995

It was soon realized that more than half of the remaining inhabitants were elderly who needed accommodation in appropriate facilities for geriatric care and external assistance in order to survive



An Emergency Public Health Action to Assist Abandoned Elderly Population



Abandoned old woman

Slobodan Lang, in cooperation with Nenad Javornik¹, Kaja Bakalic², Sten Swedlund³, Vittorio Ghidi⁴, Vinka Luetic⁵, Branko Čulo⁶

Aim

Presentation and analysis of an extensive humanitarian action aimed at saving abandoned, mostly elderly people in a post-conflict situation.

SETTING. After almost two years of war in Croatia, the United Nations Protected Areas (UNPAs) were established in 1992, in the parts of the country under control of the local Serb population and paramilitary forces. On August 4, 1995, the Croatian military and police forces stormed the North and South UNPA zones and took over control of an area covering 10,497 square kilometers in four days. The Serbian forces fled to Bosnia and Herzegovina and Federal Republic of Yugoslavia, followed by the majority of civilians. Immediately after, it was realized that the remaining population (about 3% of the inhabitants compared to the 1991 census) was mostly made up of the elderly, who needed substantial external assistance to survive.

METHODS. Reconnaissance, follow-up, direct assistance and interview data regarding 10,594 persons, in 524 settlements are presented. 136 professionals and volunteers from 28 Social Welfare Centers and 14 Croatian Red Cross branches interviewed the population. Interview data on all 10,594 persons have been analyzed.

RESULTS. The results found that more than 75% of the remaining population were over the age of 60. They were found scattered across 524 villages or hamlets, in 73 of which there was only one inhabitant. One third had no income, and only about 17%

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² Ministry of Labour and Social Welfare

³ International Federation of the Red Cross and Red Crescent Societies

⁴ European Community Humanitarian Office

⁵ Ministry of Health

⁶ Office for Displaced Persons and Refugees of the Republic of Croatia, Zagreb, Croatia.



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were eligible for pensions or welfare. Only approximately one fourth had access to public transportation or supply of goods and food, and half had electricity in their homes. Two thirds considered themselves ill, and some 6% needed emergency assistance, including a change of living conditions. The Save Lives Operation included a "humanitarian census", immediate financial, material, medical, and social assistance, security and a gradual establishment of contacts with families, administrative assistance and approach to various other needs.

CONCLUSION. The exodus of most of the area's inhabitants, leaving behind only 3% of the pre-war population, and the fact that most of this remaining population was elderly is an undescribed phenomenon so far, and thus the Save Lives Operation is a unique model of assistance. The military operation, first of low-intensity and long-lasting, and then an abrupt defeat of one side caused a total social collapse. The exodus of the inhabitants left behind a selected population of the elderly and helpless. Deprived of their family support network and having to deal with the consequences of the military operations grossly worsened the problems of the elderly. The humanitarian action helped substantially in saving lives, but was unable to increase security or to significantly restore the quality of life for this vulnerable group of people.

The military operation undertaken by the Croatian police and military forces had the objective to integrate the former UN sectors North and South (Fig. 1) into Croatia. In 1991, after local Serbs took control over that region, the majority of the Croatian popu-

lation was expelled from their homes and the region (1). In 1992, the UN Protected Areas (UNPAs) were established. The mandate of the UN forces had three goals - the cessation of the armed conflict, disarming of



Bed - ridden old man left home alone

the paramilitary forces and the return of displaced persons. In the three years of its mandate, it succeeded in ending the armed conflict (2). During this period, social disintegration continued with further expelling of the remaining Croatian population and the Serbian population leaving the area, seeing no perspective for a decent and secure life. The situation in neighboring Bosnia-Herzegovina was also difficult for minorities in the Banja Luka area (4). The Operation Storm was launched in August 1995, resulting in a massive exodus of the Serb population. An additional result shortly thereafter was the expelling of over 20,000 minorities from Banja Luka to Croatia.



The Save Lives Operation was an effort to secure coordinated care of the remaining, primarily older population (around 10,000 people, 75% older than 60), scattered throughout the area. It was performed by different institutions of the Croatian government, members of the Red Cross family:



Old woman at the door

CRC (Croatian Red Cross); IFRC - (International Federation of the Red Cross and Red Crescent Societies); ICRC - (International Committee of the Red Cross); ECHO - (European Community Humanitarian Office) and UNHCR (United Nations High Commissioner for Refugees). It was coordinated on the Governmental level by the Office of the President and supported by other organizations.

Organization of the Action

Vital governmental institutions such as the Centers for Social Welfare, health insti-

tutions and non-governmental organizations, such as the Croatian Red Cross, were re-established within the first few weeks of August 1995. Due to the shortage of professionals, personnel was reassigned from other parts of the country.

The coordination of the Save Lives Operation began in October 1995. All active humanitarian organizations were invited to participate - Croatian and international, governmental and non-governmental. An assessment showed that the entire social framework had collapsed in the former UNPAs North and South, and it was important to help the remaining population immediately. Three goals were given priority: (a) institutional care, (b) family reunion, and (c) offering home support where needed.

It was decided that a humanitarian census of the remaining population was needed in order to assess their psycho-social condition and to specify their needs. The census was performed by multidisciplinary teams made up of employees of the Ministry of Social Welfare and Red Cross staff and volunteers. 136 interviewers from 28 Social Welfare Centers and 14 Red Cross branches visited 10,594 persons, in 524 communities within an area of 10,497 square km.

The Situation Found in September 1995

According to census 1991, there was 318,446 inhabitants in the area. Some 100 000 Croats were first expelled in 1991/92,

SAVE LIFE

and the local Serbs were gradually leaving due to difficult life conditions until August 1995. It is estimated that more than 120.000 people left the area after August 1995, and thus only 14.613 remained. However, 10.777 displaced persons (mostly Croats) soon returned to the region and 13.209 persons (Croats) arrived as refugees from Bosnia and Herzegovina and FRY.

It was soon realized that more than half of the remaining inhabitants were elderly who needed accommodation in appropriate facilities for geriatric care and external assistance in order to survive. Some two thousand of them were practically immobile.

Out of 10.594 persons analyzed in this study, only 39.2% reported that they had a family member who could take care of them.

The abandoned people were scattered throughout the large, remote, mostly mountainous and poor area (Table 1), in hundreds of villages and hamlets. Their age ranged from 1 to over 100, but three quarters were older than 60 (Table 2). Their ethnic structure included: 70.4% Serbs; 27.6% Croats; and 1.1% Muslims (Table 2), with no difference in other aspects of their lives. Before the 1991/92 war, more than a third had no income, whereas others reported that they were eligible for various kinds of salaries, pensions or welfare income (Table 3). Naturally, at that time, none of them had any money or official income, which all had to be solved through an extensive administrative search and verification.

Living conditions were quite unfavorable (Table 4); almost half of the people had no electricity, three quarters had no access

to public transportation (no private vehicles either), two thirds had no access to food and supplies, and approximately one fifth lived unprotected in the areas where the security situation was unacceptable, and many more were protected only partially.

Two thirds considered themselves ill, one third needed medications, and some 5% needed urgent medical assistance (Table 5). They reported a spectrum of diseases, which was generally not differing from the spectrum of diseases found in any elderly population (Table 6). However, apart from medical, social and economic needs, less than 10% wanted to change their way of life (Table 7). Indeed, after weighing needs and possibilities, our interviewers judged that about 89% of the people could remain in the present premises; yet 676 (6.4%) persons had to be urgently transferred to more suitable accommodation to ensure they received proper care (Table 8). Finally, medical care was recommended to 24.4% and social care to 39.6% of persons, some 40% were referred to the Red Cross and 5.5% to the Office for Assistance to Refugees and Displaced Persons, and improvement of security was required for 427 (4.0%) of the examined (Table 9).



Abandoned old man , Knin surroundings



Action

By mid-October 1995, the first meeting concerning the issue of systematic assistance to the elderly in the former UNPAs North and South was held in Zagreb, emphasizing the need to coordinate all aspects of the Save Lives Operation: humanitarian emergency support, security, family reunification and long-term social care. The representatives of the Croatian Red Cross and International Federation of Red Cross in Croatia fully supported the estimates and actions planned.

The most urgent need was to provide accommodation in homes for elderly or health care institutions for those who would not survive otherwise. For this purpose, an immediate network was established of transferring people to elderly homes. Urgently needed capacities were estab-

and the International Federation. All people with urgent needs were placed into elderly homes. By the end of 1995, 379 consented to be accommodated in various geriatric facilities throughout Croatia. About 500 (see Table 8) persons who were in need of institutional care refused to leave their homes. In order to help these and many others, the Croatian Red Cross (supported by the International Federation) organized Mobile Teams to provide food, clothes, social, medical and technical assistance at home. Food was ensured through donations from the Danish and Swedish Red Cross Societies for the remainees and from ECHO for refugees and returnees. The operational coordination was established through weekly follow-up meetings in Zagreb as well as in the field (Knin and Vojnić). The Ministry of Social Welfare provided financial assistance of HRK200 to individuals found in the area. By 18 August, 1,203 persons had received it. This assistance was repeated three times so that, by December, 7,456 households, with 13,185 members had received it.

The hospital in Knin was immediately put into function (5), and a pharmacy opened by the Red Cross thanks to donations. The network of other medical institutions was planned and gradually established. The Ministry of Health entitled health care for all remainees in urgent need, even if they did not have health insurance.

The urgent intervention was effectively secured for the entire population up to Christmas 1995. The humanitarian aspect was covered in all segments with the exception of proper security.

The Croatian Red Cross (with 22 local



Return to Vojnić

lished in one floor of the Knin hospital, part of the Petrinja hospital, and the reconstructed part of the Elderly Home in Petrinja. The total capacity of these institutions was 250 beds. This was a joint effort of the Ministry of Labour and Social Welfare

SAVE LIFE

organizations) and the International Federation of Red Cross and Red Crescent Societies assisted all in need, as follows: the Serb civilians who headed to Serbia (through Bosnia and Herzegovina) were assisted at aid points in Glina, Sisak, Lipovljani, Lužani and Lipovac; the local people who fled to Croatia to avoid the fighting zones were accommodated in a number of school gymnasiums; the Croat refugees expelled from Bosnia and Herzegovina and Serbia in retaliation for the operation "Storm" were placed in improvised reception centers in Bjelovar, Slatina, Orahovica and Virovitica. The local Red Cross branches either returned from exile to the area, or new ones were established (Dvor, Hrvatska Kostajnica, Glina, Vojnić, Gvozd, Donji Lapac, Korenica, Knin, Drniš, Benkovac, Obrovac and Gračac). The coordination within the Red Cross family was established with ICRC in charge of coordination until the end of 1995 when this role was handed over to International Federation. The cooperation between the Croatian Red Cross, ICRC and IFRC was completely synchronous.

After collecting the data, two seminars were held in Zagreb, where it was concluded that the mobile teams would be crucial in the delivery of aid. Abandoned people were scattered in hamlets which could not be reached by car and their only hope was teams acquainted with them and able to reach them. With the oncoming winter, it was decided that 300-500 persons had to be evacuated from their homes. The Red Cross mobile teams enabled the isolated persons to exchange messages with their

families which left Croatia. In September 1996, ICRC initiated the second phase of its program, aimed at the protection of people from mines.

Since November 1995, 8 mobile social teams, two medical and two technical teams of the CRC - with the support of the International Federation - have been perma-



Grandmother Stana , one of the three remaining residents of the Dragišići hamlet , village of Gornji Radljevac , Knin

nently engaged in the area. A number of programs and actions delivered by other humanitarian associations are also active in the area, providing extremely important aid to the people.

Large sums of money donated by both the Croatian government and many international organizations, headed by the International Federation, ECHO and ICRC were invested in helping the people in this area.

Discussion

This operation was based on a premise that the present warfare was targeted against the civilian population (6-8) that



resulted in total social collapse which required a planned and coordinated effort to regain control. In order to perform it we



Waiting in one of the yards of the abandoned village

used the highest authority in Croatia, joined the efforts of all the involved, planned the entire operation, coordinated the action on a regular basis on the highest level as well as on the operational level, applied the method of humanitarian census to achieve accuracy, individual rights and the possibility of quality evaluation. The work had a person-to-person approach and was goal orientated. There was success in helping the majority of the abandoned population, but it has to be stressed that suffering could have been reduced and lives saved if overall coordination had started even earlier - at the very beginning of the Storm Operation. Before the Save Lives Operation, the humanitarian efforts were planned for three types of population: prisoners-of-war,

refugees and occupied population. This case created a new category - the abandoned population, for which there have been no agreed approaches and methods, or reported experiences. The specificity of this population was that it was primarily made up of elderly, who were in all aspects dysfunctional. Their very existence was unknown, they were often in poor, even dramatic health conditions, without their families, in destroyed homes and in communities without transportation, services or even food supply. The urgent action by a large number of people with defined goals was immediately required. For that purpose, a specific program had to be developed. On the basis of the described experience, the term "social collapse", "remaining, abandoned population" and "aged population" must become included in any planning of the protection of the civilian population during the warfare, especially after the larger conflicts (battles) and changes of authority. When the social collapse diagnosis is made, the highest existing authority should take a direct responsibility over the coordination of all activities. The coordination should include all levels available and required elements in securing the assistance. It should allow planning of the work, mutual assistance and directly informing one another as well as the public in general. If possible, a humanitarian census should be performed to achieve accuracy and individual human rights and needs.

In the beginning, the Save Lives Operation was limited to emergency intervention, and at a later stage was extended

SAVE LIFE

by other humanitarian activities such as family, home and community renewal. Physical security is a major need of the remaining population after the social collapse, but, unfortunately, it is not possible to ensure it only by humanitarian coordination. In the case of the military activities in the former Sectors North and South in Croatia, the post-battle security problems were underestimated, and, together with



Waiting for the accommodation in Vojnic

the difficult terrain and dispersion of the remaining people caused a loss of some 50 lives and widespread arson, looting and threatening cases. It was realized too late that the coordination of the humanitarian assistance as a whole should directly communicate with those responsible for the security (police, army). The strong advocacy role should be played by both international and national NGO's as well as supported by the authorities.

Social collapse conditions should be internationally registered and monitored. The international support should be offered and a subsequent quality evaluation should be performed. In the future, such conditions of social collapse can be anticipated and therefore all available knowledge and experiences should be gathered, which can lead to prevention, therapy or, at least, assistance to the population of old people who are in direct and urgent need of help. They should not be abandoned, and professional knowledge and methods should be applied in such situations.

Social collapse conditions should be internationally registered and monitored. The international support should be offered and a subsequent quality evaluation should be performed.



ABANDONED ELDERLY POPULATION, A NEW CATEGORY OF PEOPLE SUFFERING IN WAR



Dr. Lang visiting abandoned old people, hamlet Dragišići, Gornji Radljevac near Knin

*During the war in Croatia and Bosnia
and Herzegovina, a new, hitherto
unclassified category of people
appeared - the abandoned population*



Abandoned elderly population

Sirs,

In war everybody suffers and only real therapy is peace. Medicine must be willing to help the suffering, not just ask for health. To help patients, the problems must be classified. Three key populations suffering in war have forced health and humanitarian systems and organizations to develop specific forms of assistance: (1) populations under occupation, (2) prisoners-of-war, and (3) refugees; with respective subgroups, such as missing persons, etc.¹

During the war in Croatia and Bosnia and Herzegovina,² a new, hitherto unclassified category of people appeared - the abandoned population. After Operation "Storm" in Croatia (August 1995), 90 per cent of the local Serb population left their homes, leaving behind 10594 persons (28.8 per cent of Croatian nationality and 71.2 per cent Serbian nationality), i.e.³ per cent of the 318466 pre-war (1991) population of the region. The abandoned persons were found in 524 hamlets, villages and towns. A single person remained in 73 communities, 2-5 in 155, 6-10 in 104, and none in almost 100 settlements. The departure of the majority of inhabitants enormously increased the proportion of elderly among the abandoned people: 75.6 per cent were older than 60, creating a demographic cloud of suffering (Fig. 1).

A humanitarian intervention was organized in the autumn and winter of 1995, the "Save Life" action. The approach was: (1) a co-ordinated activity of all involved organizations: international humanitarian organizations, the Red Cross and responsible state institutions; (2) a precise definition of tasks; (3) informing the public; and (4) an immediate humanitarian

census to define the new population and diagnose their existing health and social needs. For this we engaged 220 interviewers. We assisted all found persons in medical, humanitarian and technical aspects of care. Nursing homes throughout Croatia received 490 persons. The situation improved the sense of safety, accommodation and food supply, but lonely old people, abandoned in their houses and without knowledge of their families, need more for decent living. However, that is more than a humanitarian action can provide.

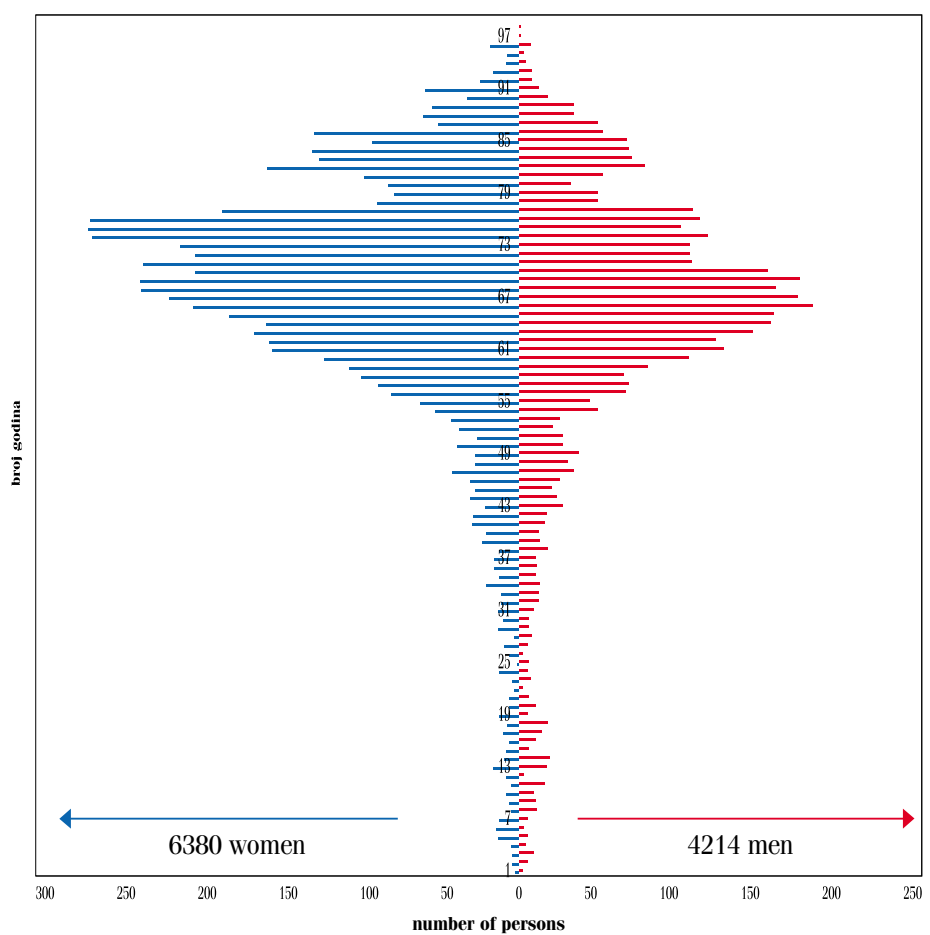
Yours faithfully,
Slobodan Lang

*Journal of PUBLIC HEALTH
MEDICINE*

*volume 19 number 4 December 1997
published by Oxford University Press*



Demographic Bomb of Suffering



The graph above represents age structure of women and men and population in general. This is the demographic structure, not alike any known structure relating to either young or elderly population, and nothing similar to it has been found so far. It is abandoned, mostly elderly population in extraordinarily hard circumstances, and it took a huge amount of efforts in order to help such population. Because of the structure of the population, the chart is given the following title - DEMOGRAPHIC BOMB OF SUFFERING.



HUMANITARIAN CENSUS

Information Part of the "Save Life" Project



Croatian Red Cross, education of census - takers, November 3, 1995

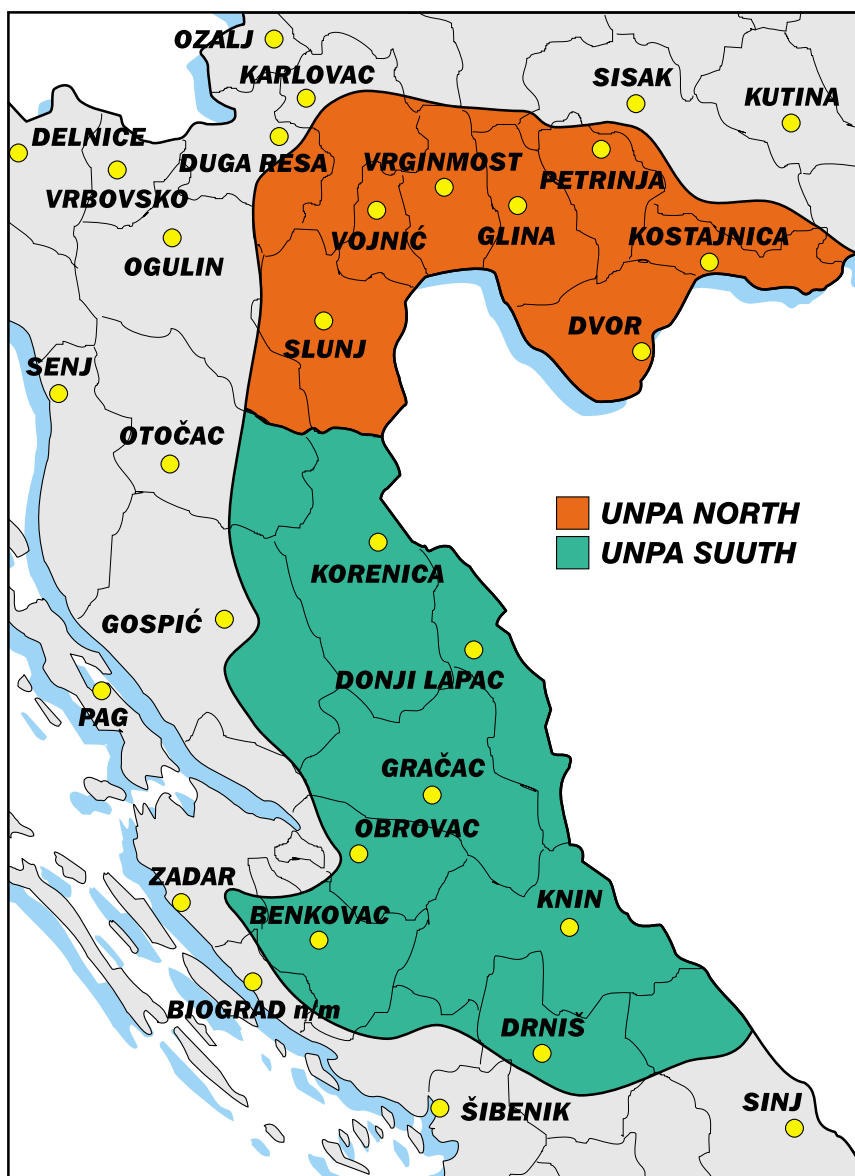


Zvonimir Orsag,
Senior Legal Adviser with the Republic's Fund of Pension and
Disability Insurance, Census Coordinator in the field

Census of abandoned persons was accomplished in November and December, 1995.
10.594 persons from 524 settlements were included into the Census.



Map of the Former UNPA Zones North and South



MAP 1:

Territories within the former UNPA Zones North and South after Operation "Storm". Humanitarian Action SAVE LIFE, which was the most complex one in the course of the Patriotic War, was carried out in these territories. During the period of just two months in, 1995, 604 settlements were visited and 10.594 abandoned persons visited and accommodated.

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Source:

- **Information part to the "Save Life" Project, ENEL-Split, January 1996**
- **Internet: <http://www.vlada.hr/projekti/spas/index>**
- **Tables and figures as a result of listed and computer-processed data with respect to 10.594 abandoned persons (see questionnaire-p 138)**
- **List of abandoned persons: November 1995**

Questionnaire regarding the quality of life of elderly, abandoned persons was created by Dr. Slobodan Lang on October 25, 1997.

Data base, as well as report design, was created by the Government Office for Displaced Persons and Refuges. Software (computer programmes for data base input, updating and listing) was manufactured by ENEL - Software House from Split.

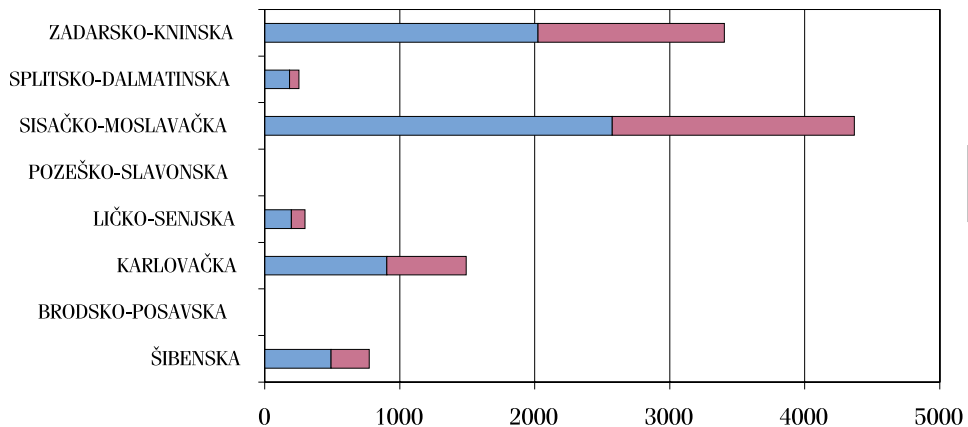
Census - taking in the field regarding 10.594 persons was accomplished by the employees of the Croatian Red Cross and Republic's Fund of Pension and Disability Insurance. Data input was done by the employees of ENEL - Software House and Republic's Fund of Pension and Disability Insurance. Design, production and INTERNET implementation of the final results were done by Slavenska banka d.d. Osijek and ENEL - Split.



Table 1: NUMBER OF LISTED PERSONS BY THE COUNTY

| | F | M | TOTAL |
|----------------------|-------------|-------------|--------------|
| ŠIBENSKA | 492 | 282 | 774 |
| BRODSKO-POSAVSKA | 2 | 0 | 2 |
| KARLOVAČKA | 904 | 588 | 1492 |
| LIČKO-SENJSKA | 198 | 101 | 299 |
| POŽEŠKO-SLAVONSKA | 1 | 0 | 1 |
| SISAČKO-MOSLAVAČKA | 2575 | 1792 | 4367 |
| SPLITSKO-DALMATINSKA | 183 | 71 | 254 |
| ZADARSKO-KNINSKA | 2025 | 1380 | 3405 |
| TOTAL | 6380 | 4214 | 10594 |

Graph 1: NUMBER OF LISTED PERSONS BY THE COUNTY



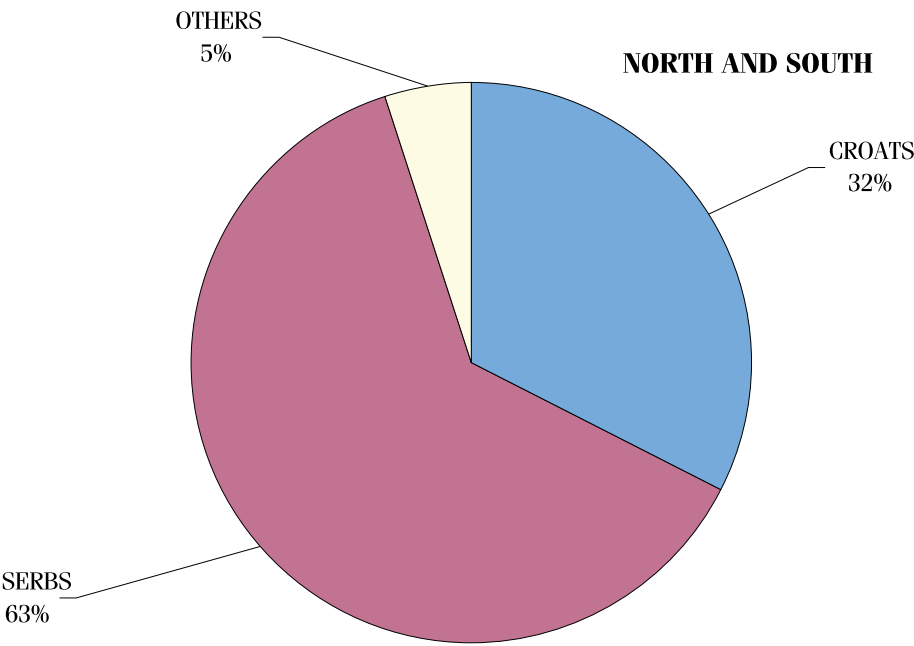
Census was performed in November and December 1995, in 6 counties, 604 settlements, within the area of 10.497 square kilometers - 10.594 abandoned persons were included.

Close to one person per square kilometer was identified and taken care of.

Table 2 : POPULATION OF UNPA ZONES BY THE NATIONALITY

| UNPA ZONE | CROATS | | SERBS | | OTHERS | | TOTAL | SETTLEMENTS | km² |
|---------------|--------|------|--------|------|--------|------|--------|-------------|-------|
| | NUMBER | % | NUMBER | % | NUMBER | % | | | |
| WEST | 32569 | 35,9 | 38496 | 42,4 | 19766 | 21,8 | 90831 | 159 | 2112 |
| NORTH & SOUTH | 103167 | 32,4 | 199073 | 62,6 | 15744 | 5,0 | 317984 | 604 | 10497 |
| EAST | 86096 | 44,5 | 67567 | 34,9 | 39850 | 20,6 | 193513 | 159 | 2153 |
| TOTAL | 221832 | 36,8 | 305136 | 50,7 | 75360 | 12,5 | 602328 | 922 | 14762 |

Graph 2 : POPULATION OF UNPA NORTH AND SOUTH BY THE NATIONALITY



From 1992-1995 whole UN-protected area was populated by more than 600.000 residents-some 50% Serbs and 50% Croats plus other nationalities. Both Croatian and non serb population had mostly been expelled from their homes prior to the begining of the UN-mandate. In the course of the mandate, there was no success in getting expelled population back home as planned, while emigration went on, so in the summer 1995, prior to the "Storm" Operation, there was remaining 100.000 to 120.000 population in the area, i.e. one third of population (mostly Serbian) according to 1991 Population Census.

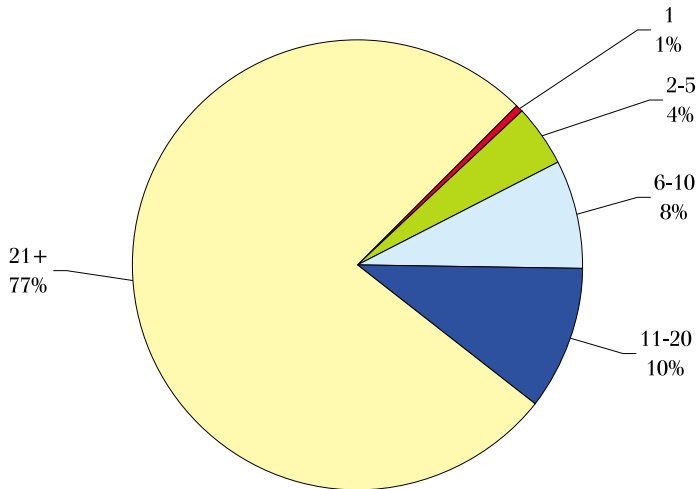


Graph 3 : NUMBER OF REMAINING RESIDENTS IN SETTLEMENTS

| NUMBER OF RESIDENTS IN A SETTLEMENT | TOTAL | % |
|-------------------------------------|--------------|--------------|
| 1 | 73 | 0,7 |
| 2-5 | 470 | 4,4 |
| 6-10 | 806 | 7,6 |
| 11-20 | 1108 | 10,5 |
| 21 + | 8137 | 76,8 |
| TOTAL | 10594 | 100,0 |

Table3 : NUMBER OF REMAINING RESIDENTS IN SETTLEMENTS

NUMBER OF REMAINING RESIDENTS IN SETTLEMENTS



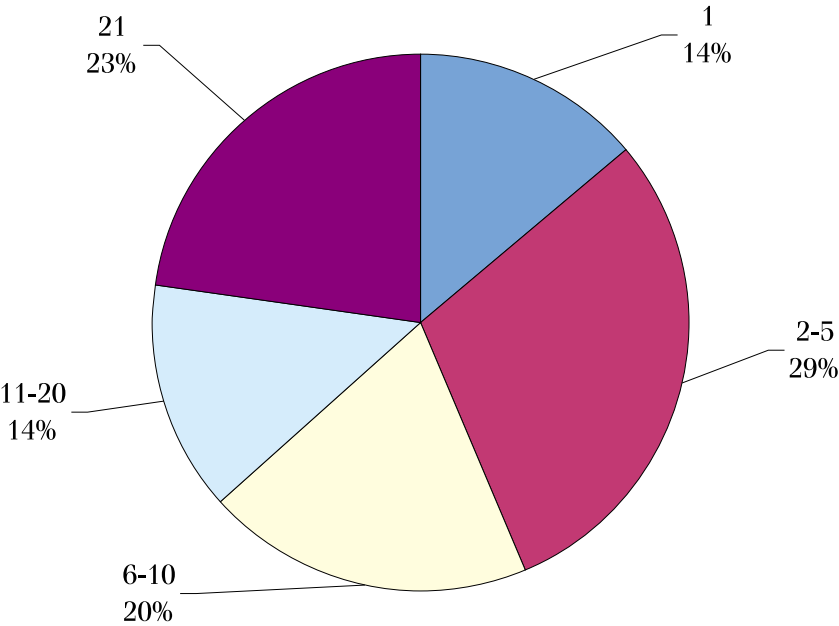
After the "Storm" Operation, there were remaining 3% of 1991 population, 5% of which (543) were in an extremely risky situation, and there were 5 or less persons by the settlement. These persons were the Target of the relief project specially designed by ECTE

Table 4 : SETTLEMENTS BY THE REMAINING NUMBER OF RESIDENTS

| NUMBER OF RESIDENTS IN A SETTLEMENT | SETTLEMENTS | |
|--|-------------|-------|
| | Br. | % |
| 1 | 73 | 13,9 |
| 2-5 | 155 | 29,6 |
| 6-10 | 104 | 19,8 |
| 11-20 | 73 | 13,9 |
| 21 | 119 | 22,7 |
| TOTAL | 524 | 100,0 |

Graph 4 : SETTLEMENTS BY THE REMAINING NUMBER OF RESIDENTS

SETTLEMENTS BY THE REMAINING NUMBER OF RESIDENTS



Out of 604 settlements, remaining residents were found in 524. There were as many as 5 or even less residents in almost half a number of settlements.

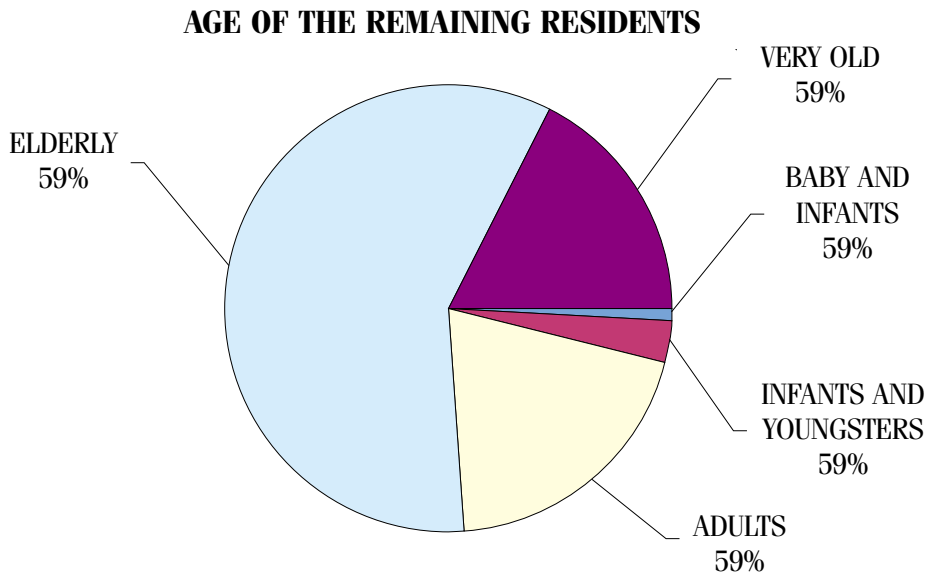
In 73 settlements there was one resident only.



Table 5 : AGE OF THE REMAINING RESIDENTS

| AGE | GROUP | No | % | No | % |
|------------------------|-------|-------|--------|------|------|
| BABIES AND INFANTS | 0-1 | 13 | 0,12 | 87 | 0,8 |
| | 2-3 | 22 | 0,21 | | |
| | 4-6 | 52 | 0,49 | | |
| INFANTS AND YOUNGSTERS | 7-14 | 156 | 1,47 | 314 | 3,0 |
| | 15-18 | 82 | 0,77 | | |
| | 19-25 | 76 | 0,72 | | |
| ADULTS | 26-39 | 332 | 3,13 | 2144 | 20,2 |
| | 40-59 | 1812 | 17,10 | | |
| ELDERLY | 60-69 | 3448 | 32,55 | 6206 | 58,6 |
| | 70-79 | 2758 | 26,03 | | |
| VERY OLD | 80 > | 1843 | 17,40 | 1843 | 17,4 |
| TOTAL | | 10594 | 100,00 | | |

Graph 5 : AGE OF THE REMAINING RESIDENTS

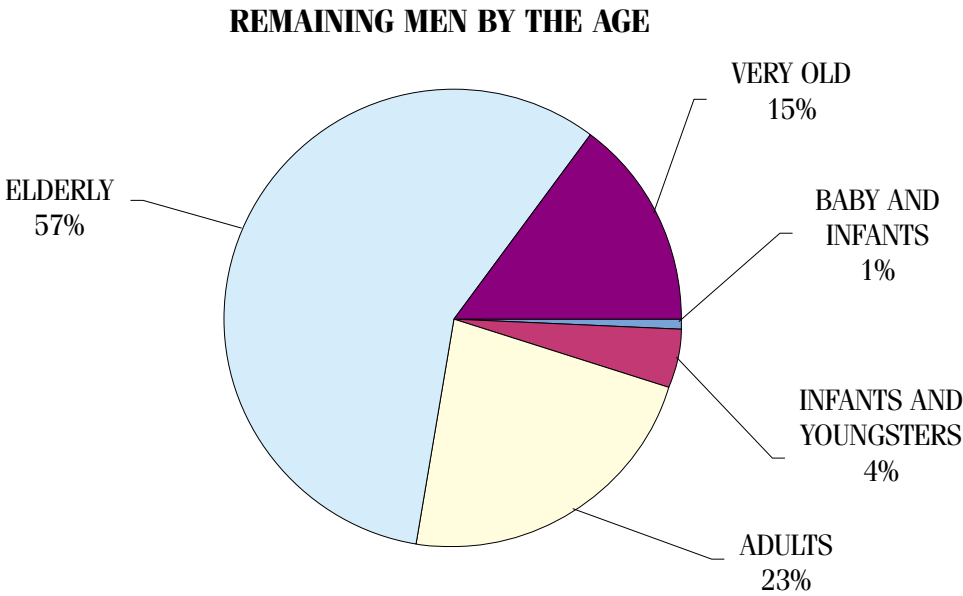


Elderly residents represent 60% of the remaining population thus making the most important group of remainees.

Table 6 : REMAINING MEN BY THE AGE

| AGE | GROUP | No | % | No | % |
|------------------------|-------|------|--------|------|------|
| BABIES AND INFANTS | 0-1 | 7 | 0,17 | 33 | 0,3 |
| | 2-3 | 13 | 0,31 | | |
| | 4-6 | 13 | 0,31 | | |
| INFANTS AND YOUNGSTERS | 7-14 | 91 | 2,16 | 176 | 1,7 |
| | 15-18 | 47 | 1,12 | | |
| | 19-25 | 38 | 0,90 | | |
| ADULTS | 26-39 | 145 | 3,44 | 951 | 22,6 |
| | 40-59 | 806 | 19,13 | | |
| ELDERLY | 60-69 | 1550 | 36,78 | 2436 | 57,8 |
| | 70-79 | 886 | 21,03 | | |
| VERY OLD | 80 > | 618 | 14,67 | 618 | 14,7 |
| TOTAL | | 4214 | 100,00 | | |

Graph 6 : REMAINING MEN BY THE AGE



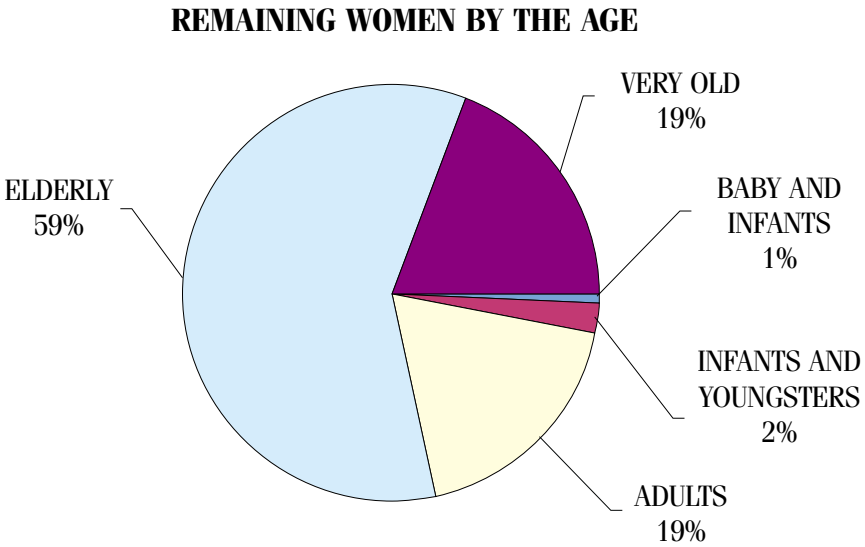
Out of 4214 men (39,8%) in the remaining population, 3054 men (72,5%) are past the age of 60.



Table 7 : REMAINING WOMEN BY THE AGE

| AGE | GROUP | No | % | No | % |
|------------------------|-------|------|--------|------|------|
| BABIES AND INFANTS | 0-1 | 6 | 0,09 | 54 | 0,5 |
| | 2-3 | 9 | 0,14 | | |
| | 4-6 | 39 | 0,61 | | |
| INFANTS AND YOUNGSTERS | 7-14 | 65 | 1,02 | 138 | 1,3 |
| | 15-18 | 35 | 0,55 | | |
| | 19-25 | 38 | 0,60 | | |
| ADULTS | 26-39 | 187 | 2,93 | 1193 | 18,7 |
| | 40-59 | 1006 | 15,77 | | |
| ELDERLY | 60-69 | 1898 | 29,75 | 3770 | 59,1 |
| | 70-79 | 1872 | 29,34 | | |
| VERY OLD | 80 > | 1225 | 19,20 | 1225 | 19,2 |
| TOTAL | | 6380 | 100,00 | | |

Graph 7 : REMAINING WOMEN BY THE AGE

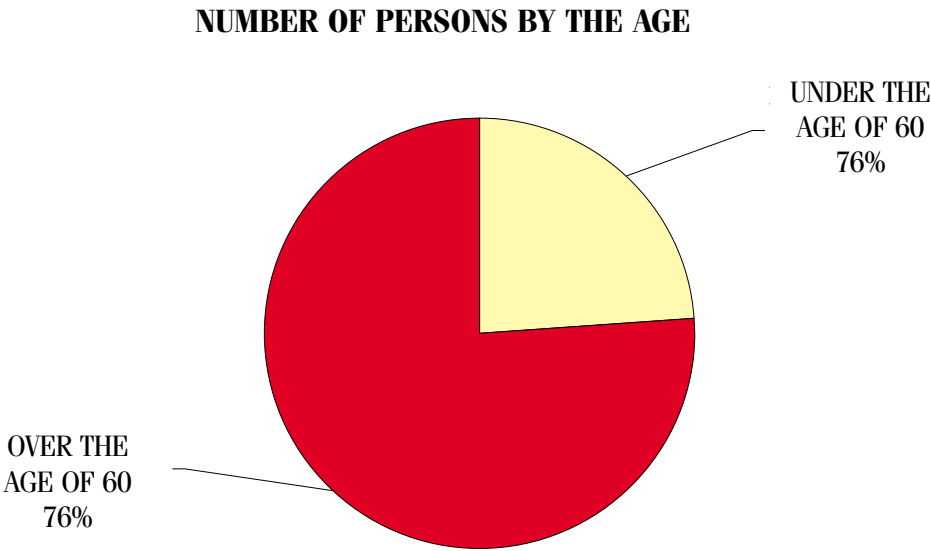


Women make 60% of the remaining population many of them elderly or very old. Out of 6380 women, 4995 (78,3%) are past the age of 60.

Table 8 : NUMBER OF PERSONS BY THE AGE

| AGE | No | % |
|----------|-------|-------|
| UNDER 60 | 2545 | 24,0 |
| OVER 60 | 8049 | 76,0 |
| TOTAL | 10594 | 100,0 |

Graph 8 : NUMBER OF PERSONS BY THE AGE



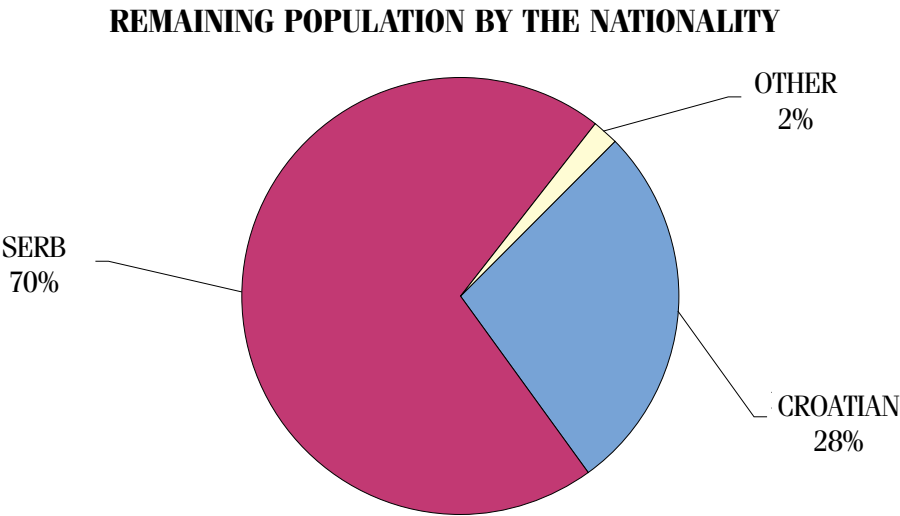
There are 8049 persons (76%) past the age of 60.



Table 9 : REMAINING POPULATION BY THE NATIONALITY

| NATIONALITY | No | % |
|-------------|-------|-------|
| CROATIAN | 2920 | 27,6 |
| SERBIAN | 7459 | 70,4 |
| OTHER | 215 | 2,0 |
| TOTAL | 10594 | 100,0 |

Graph 9 : REMAINING POPULATION BY THE NATIONALITY

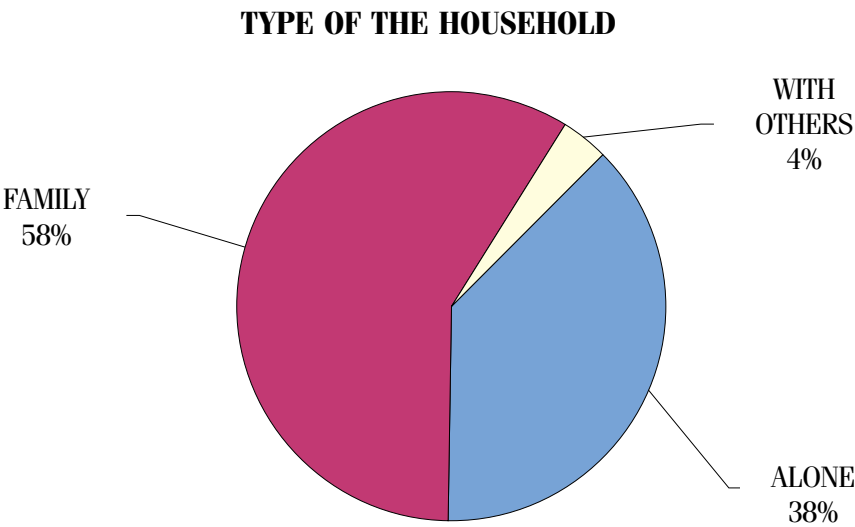


National structure of the remaining population corresponds very much to the Census results of 1991 (Serbs 63%, Croats 32%, others 5%).

Table 10 : TYPE OF THE HOUSEHOLD

| HOUSEHOLD | WOMEN | % | MEN | % | TOTAL | % |
|-------------|-------|------|------|------|-------|-------|
| ALONE | 2688 | 67,1 | 1320 | 32,9 | 4008 | 37,8 |
| FAMILY | 3428 | 55,2 | 2777 | 44,8 | 6205 | 58,6 |
| WITH OTHERS | 264 | 69,3 | 117 | 30,7 | 381 | 3,6 |
| TOTAL | 6380 | 60,2 | 4214 | 39,8 | 10594 | 100,0 |

Graph 10 : TYPE OF THE HOUSEHOLD



More than one third of the remaining residents live in their households alone.



Table 11 : SETTLEMENT CONDITIONS

| CONDITION | YES | % | NO | % | TOTAL |
|------------------------|------|------|------|------|-------|
| SECURITY | 9212 | 87,0 | 1382 | 13,0 | 10594 |
| POLICE STATION | 3625 | 34,2 | 6969 | 65,8 | 10594 |
| REGULAR PATROL | 4669 | 44,1 | 5925 | 55,9 | 10594 |
| CASUAL PATROL | 7665 | 72,4 | 2929 | 27,6 | 10594 |
| PUBLIC TRANSPORT | 2720 | 25,7 | 7874 | 74,3 | 10594 |
| ELECTRICITY - LIGHTING | 4916 | 46,4 | 5678 | 53,6 | 10594 |
| PUBLIC SUPPLY | 3104 | 29,3 | 7490 | 70,7 | 10594 |

Table 12 : HOUSING CONDITIONS

| CONDITION | GOOD | % | AVERAGE | % | BAD | % |
|----------------|------|------|---------|------|------|------|
| BUILDING | 7612 | 71,9 | 2207 | 20,8 | 775 | 7,3 |
| HEATING | 7843 | 74,0 | 1951 | 18,4 | 800 | 7,6 |
| ELECTRICITY | 5150 | 48,6 | 432 | 4,1 | 5012 | 47,3 |
| WATER | 5966 | 56,3 | 2608 | 24,6 | 2020 | 19,1 |
| TRANSPORT | 2413 | 22,8 | 1538 | 14,5 | 6643 | 62,7 |
| COMMUNICATIONS | 2918 | 27,5 | 1653 | 15,6 | 6023 | 56,9 |

Table 13 : INCOME

| TYPE OF INCOME | NUMBER OF PERSON | % |
|------------------|------------------|--------------|
| PAY | 84 | 0,8 |
| PENSION | 1403 | 13,2 |
| AGRICULTURE | 244 | 2,3 |
| SOCIAL INSURANCE | 45 | 0,4 |
| OTHER | 83 | 0,8 |
| NO INCOME | 8735 | 82,5 |
| TOTAL | 10594 | 100,0 |

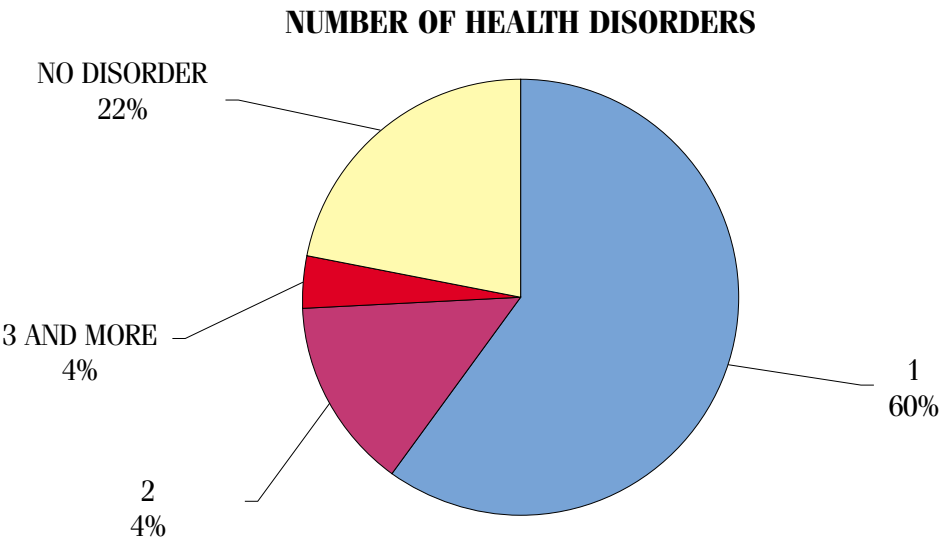
Settlement conditions : Both settlement and housing conditions need immediate improvement. more than 80% of the remaining residents and without any income.



Table 14 : NUMBER OF HEALTH DISORDERS

| NUMBER OF HEALTH DISORDER | N | % |
|---------------------------|------|------|
| 1 | 6368 | 60,1 |
| 2 | 1484 | 14,0 |
| 3 + | 420 | 4,0 |
| NO HEALTH DISORDER | 2322 | 21,9 |

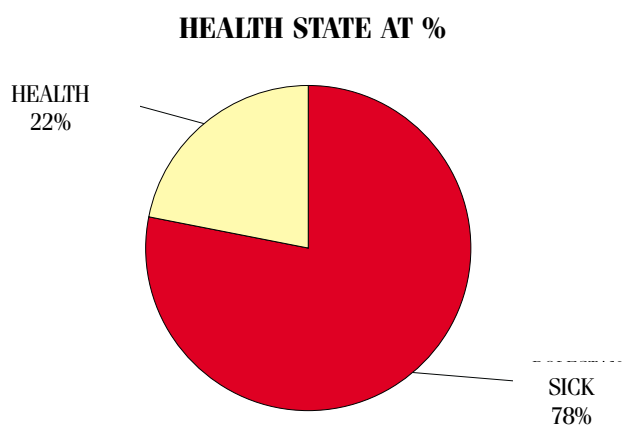
Graph 14 : NUMBER OF HEALTH DISORDERS



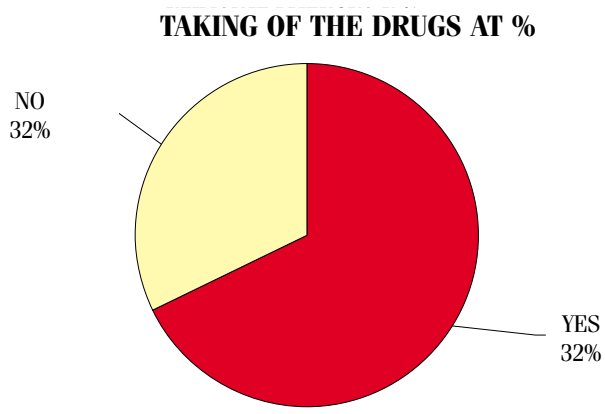
Some 80% of the remaining residents have certain kind of disorder.



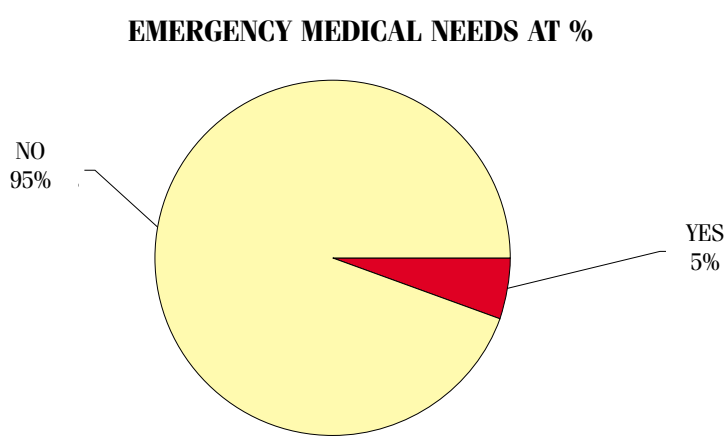
Graph 15 : HEALTH STATE



Graph 16 : TAKING OF THE DRUGS



Graph 17 : EMERGENCY MEDICAL NEEDS



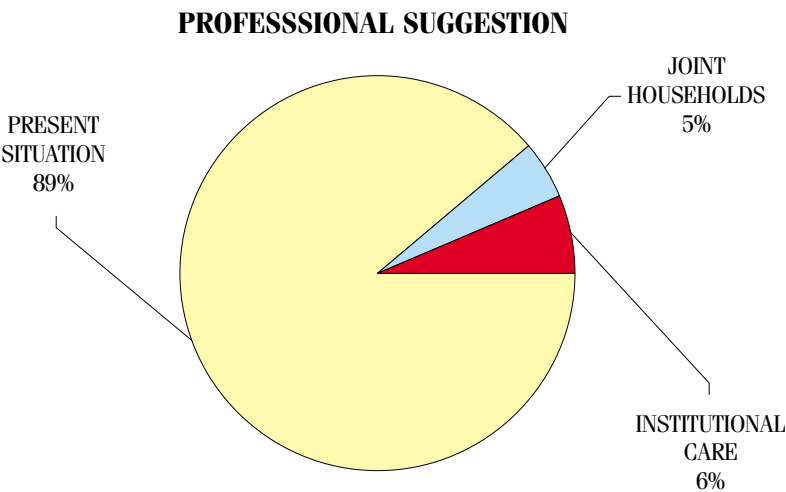
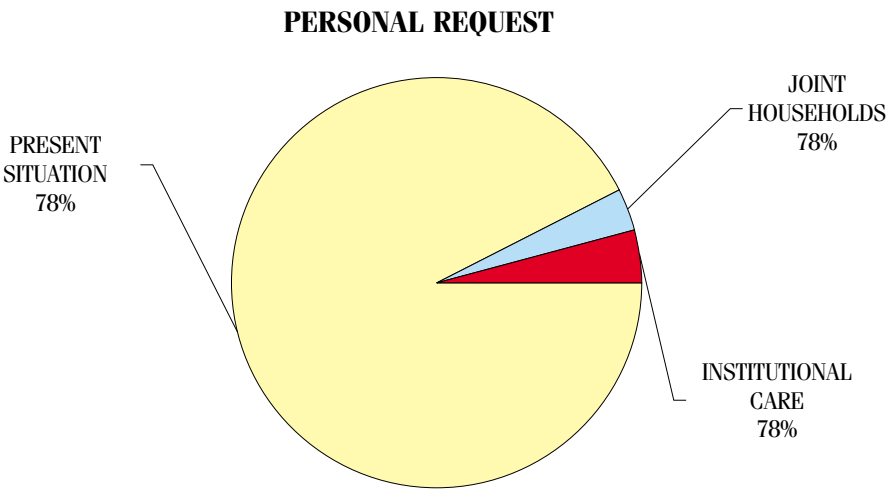
78% of the residents consider themselves sick, more than 2/3 of the residents have taken drugs, while 5% or about 500 persons require emergency medical intervention.



Table 18 : ACCOMMODATION REQUESTS AND SUGGESTIONS

| REQUEST | PERSONAL REQUEST | | PROFESSIONAL SUGGESTION | |
|--------------------|------------------|------|-------------------------|------|
| PRESENT SITUATON | 9785 | 92,4 | 9419 | 88,9 |
| JOINT HOUSEHOLDS | 373 | 3,5 | 492 | 4,6 |
| INSTITUTIONAL CARE | 436 | 4,1 | 683 | 6,4 |
| TOTAL | 10594 | 100 | 10594 | 100 |

Graph 18 : ACCOMMODATION REQUESTS AND SUGGESTIONS



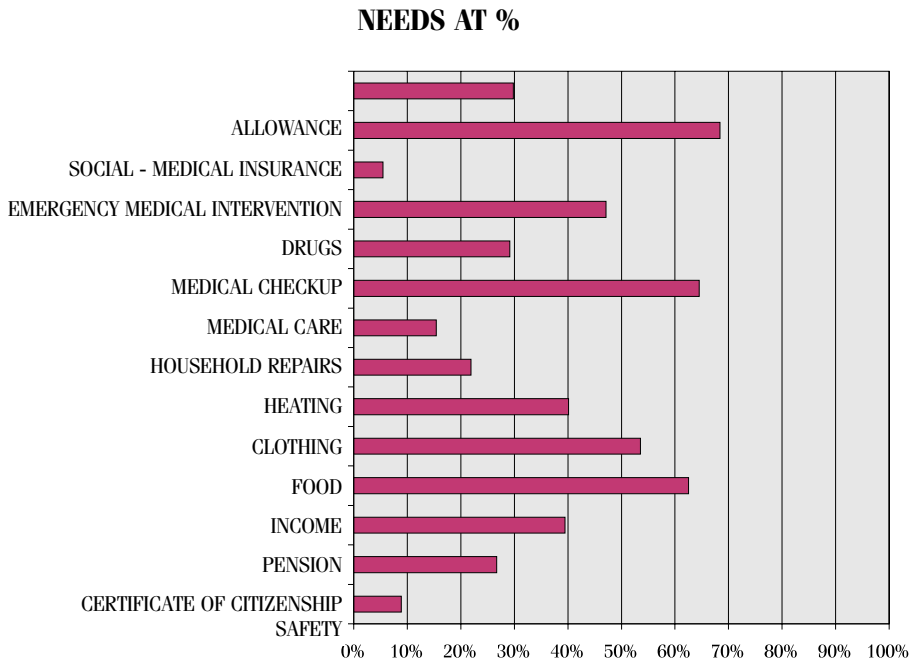
More than a thousand residents need to have a new accommodation organized.



Table 19 : NEEDS

| | NEED | No | % |
|----------|--------------------------------|------|------|
| A | SAFETY | 942 | 8,9 |
| | CERTIFICATE OF CITIZENSHIP | 2827 | 26,7 |
| B | ALLOWANCE | 4179 | 39,4 |
| | PENSION | 6624 | 62,5 |
| C | INCOME | 5673 | 53,5 |
| | FOOD | 4249 | 40,1 |
| | CLOTHING | 2322 | 21,9 |
| | HEATING | 1631 | 15,4 |
| D | HOUSEHOLD REPAIRS | 6834 | 64,5 |
| | MEDICAL CARE | 3086 | 29,1 |
| | MEDICAL CHECKUP | 4992 | 47,1 |
| | DRUGS | 579 | 5,5 |
| | EMERGENCY MEDICAL INTERVENTION | 7244 | 68,4 |
| E | SOCIAL - MEDICAL INSURANCE | 3158 | 29,8 |

Graph 19 : NEEDS

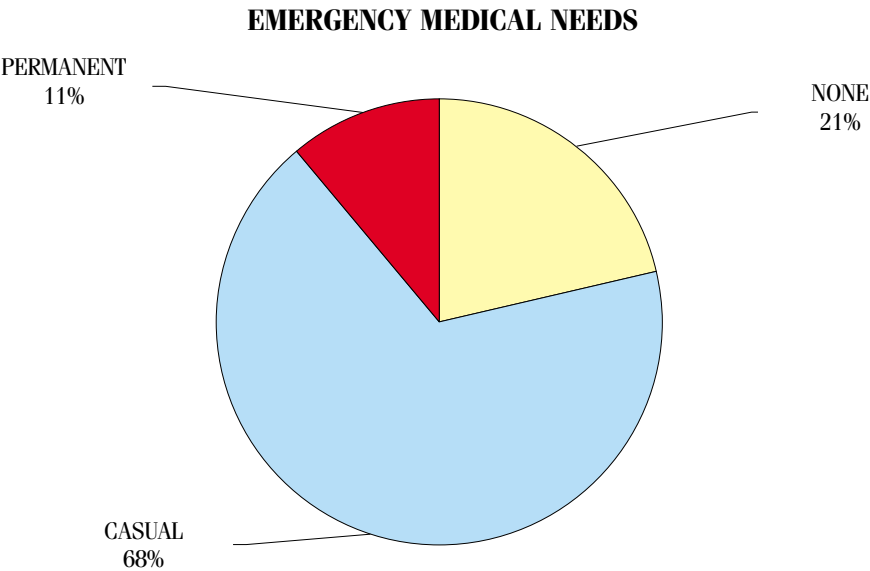


More than 50% of the residents have the following needs : income (62,5%), food (53,5%), medical care (64,5%), social care (68,4%). These needs are the target of our efforts.

Table 20 : MEDICAL NEEDS

| MEDICAL NEEDS | No | % |
|---------------|-------|-------|
| NONE | 2264 | 21,4 |
| CASUAL | 7164 | 67,6 |
| PERMANENT | 1166 | 11,0 |
| TOTAL | 10594 | 100,0 |

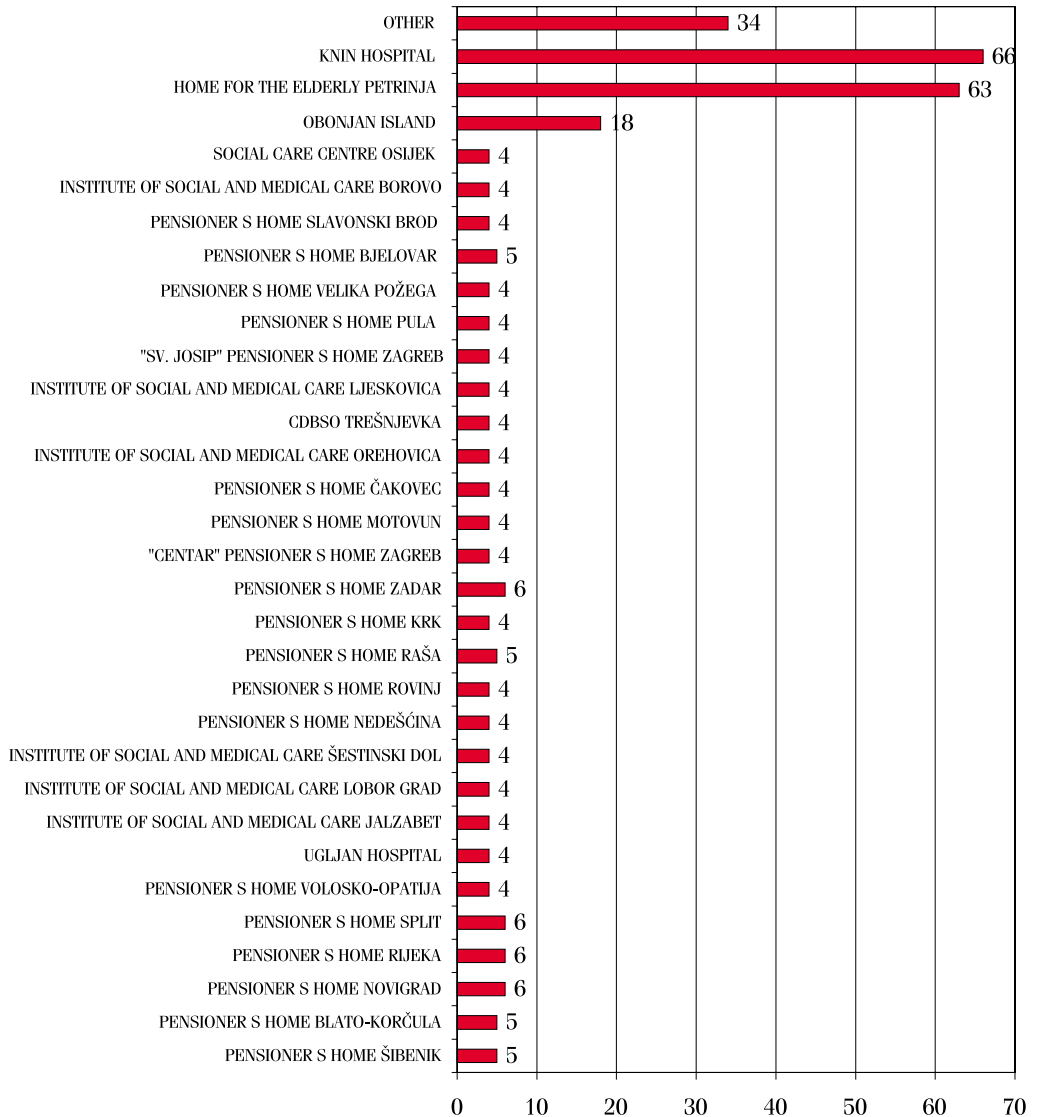
Graph 20 : MEDICAL NEEDS



78,6% of abandoned residents are in need of medical attention.



Table 21: NUMBER OF ACCOMMODATED PERSONS



By the end of 1995, 379 abandoned persons were accommodated at one of the institutions for the care of elderly persons in Croatia.



A I D



Visiting persons cared for at the Old Age Home in Petrinja

Since October 1995, IFRC/ICRC mobile teams provide daily assistance to the needy population



**Ministry of Labour and Social Welfare,
Ministry of Health, Croatian Red Cross,
IFRC, other humanitarian organisations)**

After the Croatian military action "Storm" at the beginning of August 1995, a great exodus of civilians from the area occurred leaving around 10.000 mainly elderly persons on the territory of Banovina, Kordun, Lika and the Dalmatian hinterland. The majority of them were scattered throughout small settlements, villages, and hamlets, far away from urban areas and roads, and many among them were ill, even bed-ridden. Others were left to take care of themselves and they required external assistance in order to survive the coming win-



Old woman at the Red Cross Station

ter. The area soon afterwards, saw the arrival of refugees from Bosnia and Herzegovina and returnees also started to return to their homes.

Social Welfare Centres

Immediately after the military operation, as well as non-governmental and humanitarian, Croatian and international organizations, joined in the effort to help the remaining population.

The Ministry of Labour and Social Welfare immediately undertook all the necessary measures in order to protect elderly and disabled remainees in the area. Representatives of the Ministry, led by the Minister, visited Sector South three days after the "Storm" Operation, on 8 August, 1995, and two-three days later Sector North.

Centres for Social Welfare were re-established in Knin, Drniš, Benkovac, Glina and Petrinja, while new centres were opened in Hrvatska Kostajnica, Slunj, Topusko, and regional offices in Vojnić and Gvozd (Vrginmost), Dvor, Korenica, Obrovac and Gračac, with the regional centre in Donji Lapac.

The Republic's Insurance Fund for Retirement and Disability also joined in the protection of inhabitants in the liberated area by renewing the activity of its local offices and branches or, when needed establishing new ones. The offices started to deal and process the requests for the renewal of retirement and invalid payments. More than 5,000 such requests were submitted.

The Employment Bureau, already in August and September of 1995, resumed the activities of already existing branch offices as well as opening new ones, in order to immediately register the unemployed and provide

SAVE LIFE

them with financial support. According to the estimates by the State Institute for Statistics, there were 44,209 unemployed persons in the reintegrated area of the former Sectors North and South on 30 September 1992. According to the same source, at the end of 1990 there were 12,852 unemployed in that area, and in June 1995, before the military operation, the number was 9725.

The Centres for Social Welfare were provided, in co-operation with the local authorities, office, space and equipment where necessary, adaptation work was carried out. The Republic's Fund invested 750.000 HRK for that purpose. The main problem these newly established centres faced in their work was the lack of professional employees and other staff. Therefore, the Fund following a proposal by the Ministry of Labour and Social Welfare, temporarily assigned staff from other Centres in Croatia to work in this area. The Republic's Fund for Social Welfare ensured transportation and paid for all their costs incurred in the field.

The Centres throughout this area were faced with social problems that grew bigger and harder to deal with each day. In order to be able to cover the most basic expenses and needs, the population in the reintegrated area was given a single financial incentive of 200 HRK per family, which was provided by the State Budget. Unfortunately, due to some sporadic fighting, as well as the mine hazard, the distribution of this financial incentive was proceeding very slowly. With the improvement of the security situation, the general tension was slacked off. By 18. August, 1995, the distribution of the financial incentive was completed, in the total amount of 168,312 HRK, to 826 households with 1203 family members.

These individual financial incentives in the amount of 200 HRK, were distributed two more times, so in total three times, as regulated in the book of regulations for achieving social protection. By December 1995, 4934 households with 7135 household members in the areas of Banovina, Kordun, Lika and North Dalmatia received that assistance. Through



Yasushi Akashi , Head of UN Mission , Dr Visković , Head of Knin Hospital , Dr. Lang and others
visiting the Hospital

the three distributions, 7456 households with 13.185 members received help, amounting to a total of 2.006.222 kn. After the third distribution of this financial incentive in December 1995, beneficiaries were integrated into the regular social welfare system. In mid-September 1995, the Ministry of Labour and Social Welfare was tasked to provide accommodation capacities for elderly Croats and Serbs from the reintegrated areas. The Ministry was also responsible to find personnel to work in the area, and to ensure necessary funds for taking care of those who are in need. Funding for putting the facilities in function were received through different channels, European Union, UNHCR, Croatian Red Cross, International Federation of Red Cross and Red Crescent Societies, budget of the Republic of Croatia ...



According to estimates of the respective Centres for Social Welfare, 38,594 persons were living in the area of Former Sectors North and South at that time, out of which 14,613 were found there after the military operation, 10,722 of the displaced who returned, and 13,209 of which came from Bosnia and Herzegovina, and Vojvodina. The Majority of the remainees are elderly, and it is estimated that more than 7,000 of them are in need of accommodation in social welfare institutions.

Out of that 7,000, more than 2,000 were hardly mobile or bed-ridden. The most appropriate way to take care of elderly which due to their serious health condition, family situation



Assisted old man

or for some other reason cannot live alone in their homes, would be by accommodating them in homes for the elderly. Facilities which could be used for such a purpose are those homes already existing in or bordering the reintegrated areas, in areas partly affected by the military operations or any other facilities which could serve that purpose.

In mid-October 1995, the first co-ordination meeting regarding assistance to the abandoned elderly population in the Knin area was held at the Office of the President. However, discussions were not only limited to the situation in the Knin area but also about taking care of the remaining population throughout the former sectors North and South. It was decided as necessary then to form a social "commission" on both, the state and local levels, that is to determine the exact number of persons and their social condition, and to do the follow-up of the operation and its achievements through regular reporting.

It was decided then, that the most vulnerable among the population were to be assisted in three ways: by accommodating them into adequate institutions for care; by undertaking all necessary activities to reunite them with their families; and by offering all kinds of assistance in their homes.

On the second co-ordination meeting held in October, it was decided that multidisciplinary teams should be formed in order to register the population and evaluate their psycho-social condition. Numerous expert teams formed at the Centres for Social Welfare had already been active, visiting the reintegrated area and assisting the remaining population. It was decided that these teams should be the foundation for the multidisciplinary teams to be formed. All those willing and able to help were invited to join in the operation.

Contacts with the International Federation of Red Cross and Red Crescent Societies showed full agreement concerning the approach needed for the care for the most vulnerable. Daily contacts were maintained also with other humanitarian organizations active in the field.

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Unfortunately, it was impossible to immediately accommodate all persons in need of institutional care. That is why the centres for Social Welfare in the reintegrated areas were tasked in their respective areas to determine the exact situation and to produce thorough case histories for all persons which due to their medical, family or living conditions must be provided without delay accommodation in facilities for geriatric care. These persons were accommodated in homes for elderly throughout Croatia according to a plan made by the Ministry of Labour and Social Welfare.

All geriatric facilities in Croatia were ordered to provide 3-5 places within their premises to accommodate elderly identified in the field. Thanks to that, it was possible to immediately accommodate 150-250 persons. Until 31 December 1995, 148 persons were accommodated in facilities for elderly care and 63 in the General Hospital in Knin. The Refugee Centre in Gašinci offered shelter to 36 persons, mainly from Šibenik County. The Renovated Home for Elderly in Petrinja accommodated 90 persons, and the old hospital in Petrinja, that was re-designated as a geriatric facility, accommodated 42 persons.

In this way by the end of 1995, there were 379 persons placed in social welfare institutions. It is important to mention that from the total of 9773 registered persons, those institutionalized were persons who had consented to being moved. Some 500 persons refused the offered accommodation despite social workers' evaluation that they need it. The direct humanitarian assistance was organized for such persons in their homes. By the end of 1996, social welfare institutions accommodated a total of 411 beneficiaries from the reintegrated areas.

In order to efficiently carry out the social welfare assistance, it was necessary to make a list of elderly and abandoned persons. That job was done by the Republic's Fund for Social Welfare through its offices - the Centres for Social Welfare - in co-operation with the Croatian Red Cross. 136 workers from 28 Centres for Social Welfare were involved in the registration - a total of 9773 persons were registered.



French Ambassador , Mr J. J. Gaillarde , on the spot

The Republic's Fund for Social Welfare ensured through the state budget a total of 1,680,000 DEM for the "Save Lives" Operation, most of it intended for the accommodation of beneficiaries into health or social welfare institutions (565,000 DEM), for single financial incentives (550,000 DEM), for the establishment of Centres for Social Welfare in the reintegrated area (200,000 DEM), and renovation of the Home for Old Age in Petrinja (200,000 DEM).



Ministry of Health

Soon after the military operations "Flash" and "Storm", the Ministry of Health and the Medical Corps headquarters began the task of organising health care services throughout the entire reintegrated territory. The General hospital in Knin was immediately put into function for providing secondary health care, while pri-



Ten - year old boy who has lost both his legs in the war

mary care with services were re-established with one team for general, family practice and one dental care team. At the same time, a pharmacy was opened in order to ensure the supply of medicines.

The Ministry of Health produced an evaluation and a provisional plan of needs in the health sector, which was the basis for organising medical activities on the entire reintegrated territory. The Croatian Institute for Health Insurance established a network of medical institutions and signed contracts with newly-

founded clinics. New primary community health care centres were opened in several areas.

In an agreement between the Ministry of Health and the Ministry of Labour and Social Welfare, the surplus of office space used previously in the Health sector was given for use to the Department of Social Welfare, of the Ministry of Labour and Social Welfare. By this agreement the entire floor of the General hospital in Knin, part of the hospital in Petrinja, the hospitals in Glina, Zemunik and Udbina were relinquished for accommodation of the elderly and disabled.

Within the network of re-established health institutions, a specialised hospital for chronic diseases is planned in Petrinja, and clinics for long-term care within the primary community health care centres in Slunj and Gracac.

Health service was organised based on contracts signed with the Croatian Institute for Health Insurance, as a regular service which includes all shifts, training and on-call services. In that way, continuous health service is provided in the area.

When the health care network was being re-established, the number of remainees and refugees that were in the area after the military operations, and estimations on the number of returnees that might return to their homes, was taken into consideration. Attention was also paid to the age of the population, as well as geographical and traffic conditions of the area around a respective institution. Apart from taking care of the health care beneficiaries' needs, rational and sustainable principles were respected.

The pharmaceutical service in the area

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was restored by the re-opening of pharmacies in Petrinja, Glina, Benkovac, Knin, Drniš. Stocks of medicines were provided to primary community health care centres in Obrovac, Hrvatska Kostajnica, Dvor and Slunj. Donation pharmacies were opened in Gvozd (Vrginmost), Vojnic and Unešić.

As the return process intensifies, the Ministry of Health of the Republic of Croatia, the Croatian Institute for Health Insurance and the primary community health care centres will increase the number of teams, and introduce new services such as paediatrics, school medicine, work medicine, etc.

Croatian Red Cross and the Federation, other humanitarian organisations

Both the International Federation of Red Cross and Red Crescent Societies and the Croatian Red Cross actively joined in the effort to take care of the most vulnerable beneficiaries in the FSNS, immediately after the military operation.

At the onset of the military activities, Croatian Red Cross branches were active in the field, assisting everyone who needed assistance, evacuated displaced persons from Eastern Slavonia accommodated in collective centres in Bjelovar, Slatina, Orahovica and Virovitica, displaced persons from areas caught by the military operation, for security reasons relocated to 9 collective centres (Novska, Kutina, Ivanicgrad, Sisak, Otocac,

Gospic, Zadar, Sinj and Šibenik), civilians in liberated areas (mainly elderly, refugees from Vojvodina accommodated in the collective centre in Donji Miholjac) civilians from the reintegrated areas of Croatia on their way to the Federal Republic of Yugoslavia (in: Glina, Sisak, Lipovljani, Lužani and Lipovac) and refugees from the Banja Luka region that arrived to Davor / Nova Gradiška.

22 Croatian Red Cross branches were involved in receiving and assisting beneficiaries in collective centres and abandoned villages. The national office sent daily, then weekly situation reports on the number of beneficiaries and the humanitarian help distributed to them.

At the beginning of August, the International Federation of Red Cross and Red Crescent Societies provided CHF 150.000 for



IFRC Technical Team in action

covering the needs in the field, in order to overcome the period before the first donations were received. At that moment, CRC regional warehouses had only blankets and hygienical



items on the stock. The logistics department initiated the purchase of baby food, spreads, fish and meat tins, milk and bedlinen. The Red Cross branches in the field directly bought bread, milk, juice and other necessary items. Clothes, shoes, mattresses, diapers and hygiene napkins were also distributed.

ICRC provided ready-made meals, powdered milk, blankets, and the UNHCR provided 4 tons of marmalade, 24 tons of canned meat, 1,9 t of fish tins, 28 t of laundry soap, 6330 blankets. UNHCR also provided funds for management and supply of transit centres in Novska and Pustara (Nova Gradiška).

Most of the transit facilities were, immediately after the military operation, organised in sport halls of primary or secondary schools. At the beginning of September, however, people started to return to their villages.

Red Cross representatives visited the reintegrated areas, when and where the secu-

Those Red Cross branches that were displaced during the past four years now restored and intensified their activities. The majority of their activities were focused on tracing and distributing humanitarian assistance. The Red Cross branches in Dvor, Hrvatska Kostajnica, Glina, Vojnic, Gvozd, Donji Lapac, Korenica, Knin, Drniš, Benkovac, Obrovac and Gracac were restored. At the same time, the RC branches of Duga Resa, Karlovac, Sisak, Ogulin, Sinj, Otocac, Gospić, Šibenik, Zadar and Biograd extended their activities and services to the entire territory of their respective municipalities or towns.

RC Branch Secretaries and National Office staff visited the areas with ICRC mobile teams, which had been working in the former UN sector, during all four years. A co-operation with UNCIVPOL was established as well.

In September 1995 the close co-operation between the International Federation of Red Cross and Red Crescent Societies and the Croatian Red Cross was intensified. Their representatives visited the field together, trying to make an additional evaluation and to determine which persons were in need of immediate organised care. Information was gathered from the organisations in the field and ICRC. It was estimated that there were 10,000 remainees in towns, villages and hamlets in need of help. These were the reasons why the operation was started.

Information was gathered on the number of persons that needed help, their health condition and ways of assistance they should receive etc. Teams who visited consisted of experienced staff: social workers employed in the IFRC/CRC social welfare programme who during the conflict worked in the collective



Red Cross Mobile Team

rity conditions allowed. The Tracing Service staff registered the population in the area: remainees, returnees and refugees from Banja Luka region that moved out from collectives into abandoned houses.



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centres for refugees and displaced persons, as well as representatives of the Croatian Red Cross. "Assessing" the situation took two and half weeks, but at the same time, in order not to waste time, the International Federation and the Croatian Red Cross together worked out a proposal for assistance to the most vulnerable people.

Before the "field assessment", two seminars were organised in Zagreb and Split for the RC workers and volunteers of Banovina, Kordun, Lika and the Dalmatian hinterland regions. 1722 persons were interviewed (1015 in Lika and the Dalmatian hinterland regions, 707 in Banovina and Kordun). These interviews were important for creating future assistance programmes in the area.

It was clear from the beginning: that it was necessary to establish mobile teams that will be able to access the most remote villages or hamlets, inaccessible by normal vehicles since roads, if any at all in the winter period, hardly existing. It was then decided that urgent humanitarian help and intervention is necessary for about 300 to 500 elderly persons. They could not survive the winter without constant care and attention.

The majority of 10,000 remainees in the area lacked access to humanitarian assistance, only receiving it if it was delivered to their homes. This could be done only by all-terrain vehicles, since these remainees live in remote and hardly accessible places. Among them, there was a high percentage of persons over 60 years old, in difficult health condition, immobile and bed-ridden, and living all alone.

At the end of September 1995, a task force made up of the ICRC, IFRC, ECHO and

CRC was formed that discussed the distribution of humanitarian aid at weekly meetings held in Zagreb, Vojnic and Knin. On 1 October, the joint offices for the International Federation of Red Cross and Red Crescent Societies and the Croatian Red Cross Branch



Getting ready for humanitarian aid distribution

in Knin was opened.

From 3-5 October, representatives of the ICRC, IFRC, Danish Red Cross, Swedish Red Cross and Croatian Red Cross visited the reintegrated areas and the newly established Red Cross branches. Such occasions formed the basis for several humanitarian actions and programmes. Already on 16 October, written approval and a plan of distribution of humanitarian aid was formulated which included monthly distribution of 20,000 individual parcels and 150 tons of wheat flour for the most vulnerable beneficiaries in the remote villages and hamlets.

The International Committee of Red Cross (ICRC) was working in the former Sectors North and South primarily on tracing, as well



as family reunification and one smaller scale, distribution of humanitarian aid. The ICRC's mobile teams made it possible to receive and send family messages from and to those isolated beneficiaries, which was very important to the remainees in the area.

Efforts were undertaken to inform the population on the dangers of mines.



ICRC convoy of humanitarian aid at Kupljensko near Vojnic

Therefore, 13,800 brochures were distributed and more than 1,000 posters were hung at strategic locations. The second phase of the ICRC programme commenced in September 1996, which included the training of 50 Red Cross volunteers to inform children and others on mine hazards.

In October 1995, several types of joint mobile teams of the International Federation of Red Cross and Red Crescent Societies and Croatian Red Cross started working - eight teams for psycho-social care, three teams for technical assistance and three teams for medical care. At the beginning of 1997 there were still 8 mobile social teams active in the "Save Lives" Operation - four in the area of former Sector South and four in Former Sector North,

three medical teams - two in FSS and one in FSN, two technical teams - one in each Sector. All mobile teams are visiting the field on a daily basis, reaching the most remote hamlets and assisting the population.

In December 1995, a bilateral distribution programme of Individual parcels and flour started. The Swedish Red Cross was the donor for the areas of Banovina and Kordun, while the Danish Red Cross covered the area of Lika and Dalmatian hinterland. Furthermore, the ECTF Delegation (European Union for humanitarian help) supported the programme by providing funds for four mobile teams to distribute humanitarian aid: two teams of the French humanitarian organisation "Equilibre", in the area of Banovina and Kordun, and two teams of the Spanish humanitarian organisation MPDL, for the area of Lika and Dalmatian hinterland. Later on, "Equilibre" and MPDL increased the number of teams from two to three on each of their respective territories.

"Equilibre" carries on with its programme in the area of Karlovac, Ogulin, Slunj, Vojnic, Sisak, Glina, Petrinja, Kostajnica, Plaški, Dvor and Gvozd. Every morning "Equilibre" teams go to one of ten local RC branches where they collect beneficiary lists and accordingly distribute humanitarian aid. Parcels containing food and hygiene articles are distributed by the Equilibre teams - the mobile teams are active as well.

Since June 3, 1996, Equilibre and the Ministry of Labour and Social Welfare have been implementing a programme to assist elderly and disabled persons who remained in the reintegrated area (FSNS), in obtaining personal documents. Within this programme, 224 persons were visited in the area of Hrvatska



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Kostajnica, Dvor, Sisak, Karlovac, Ogulin, Topusko, Petrinja, Glin and Slunj and the process for obtaining their documents was initiated. This process in the area of Dvor and Hrvatska Kostajnica is burdened and time-consuming by the fact that the birth-registration books and other documentation were destroyed by fire. Difficulties also occur when it comes to persons that due to their psychological or mental conditions cannot give any personal data, so the procedure is then carried out through a caretaker appointed by the respective Centre for Social Welfare.

Homes

The International Federation of Red Cross and Red Crescent Societies and the Croatian Red Cross signed on 27 November 1995 an Agreement with the Ministry of Labour and Social Welfare which stipulates that 200 beds in the Homes for Elderly in Petrinja and part of the hospital in Knin are to be made available as soon as possible for beneficiaries identified by the mobile teams. The International Federation and Croatian Red Cross took over the obligation to support the programme by partially financing the reconstruction of Home for Elderly in Petrinja (repair of war damages, water supply system and sewage system, installation of sanitary equipment, carpentry work, elevators, kitchen equipment etc.) in the amount of CHF 170,000. Medical equipment and medical supplies for the care of 200 elderly and disabled elderly persons was provided in the amount of CHF 70,000. Salaries for 25 qualified staff employed by the Red Cross and working in the home for elderly in Petrinja and in hospital in Knin were financed, for a period

of four months (CHF 70.000), which was later on prolonged, and by providing for two social workers to work with the facilities' 200 social welfare beneficiaries.

It was of great importance to put in the function the Homes for Elderly in Petrinja and Knin. Initially, after the military activities, 6 abandoned and visibly scared elderly people of Serbian origin were found in the Home in Petrinja. They were immediately given necessary care in the Home for Elderly in Sisak since at that time, the kitchen, laundry room and other services in the Petrinja home, were still out of order.

The home can otherwise accommodate 230 to 250 beneficiaries. The building itself was in relatively good condition. Some damages on the building were caused by the military activities, but also due to long-term use. There were also 8 sleeping rooms inadequate for use, while the biggest damages were on



Hospital for geriatric care in Knin

the glass surfaces. The Republic's Fund for Social Welfare estimated that the most necessary adaptation would cost 1,5 mil HRK. In order to put the facility in the function at least 58 workers had to be employed, and to have it



functioning at all standards as other Homes for elderly, it was necessary to invest 9,000,000 HRK from the State budget.

The Agreement on the reconstruction of the Home was completely realised, and humanitarian organisations continued to support it by assisting in equipping the facility and management.

The Home for elderly in Knin was placed on the third floor of the General hospital. The Home had to be opened since there were many elderly and abandoned persons who could not be accommodated elsewhere. It was also decided that the home operates as a branch of the Home for Elderly in Zadar. It can accommodate 79 beneficiaries, who are taken care of by 16 workers.

About 40 patients of the General hospital were immediately moved to the Home for elderly, while the rest was used for accommodation of abandoned elderly persons from

accommodated 74 persons.

Efforts are still being made to improve conditions and increase the accommodation capacities for elderly throughout Croatia. Following that, the Ministry of Labour and Social Welfare, the International Federation of Red Cross and Red Crescent Societies and the Office for Displaced Persons and Refugees, on 4 October 1996 signed a Humanitarian Co-operation Agreement that stipulates the reconstruction of Homes for Elderly in Donji Zemunik (former psychiatric hospital), Dubrovnik (Termoterapija), Udbina (former rehabilitation centre) and in Pula (Kamenjak). The reconstruction of these facilities will provide 700 new beds for accommodation and professional care of elderly and disabled displaced persons, refugees and domicile population. The project is jointly financed, where the International Federation invests, from a donation by the Cooperazione Italiana, CHF 1,056,000, and the Ministry of Labour and Social Welfare covers the rest of the funds necessary for the reconstruction of these facilities.

The assistance that was given to the remaining population in the of former Sectors to date was extremely valuable in helping to survive. Without it, the beneficiaries would have hardly survived two harsh and cold winters. The importance of this help is proved by the figures:

In the period from 1 December 1995 - 31 December 1996, 11 teams for distribution of humanitarian help - 5 joint Federation/CRC teams and 6 ECHO teams (3 Equilibre and 3 MPDL) distributed in total:

- 240,000 Individual Parcels with



Member of the Mobile Team during the talk with the abandoned old man

nearby villages. Food for beneficiaries was provided by the Croatian Army. From 31 December 1995 to 31 December 1996, there were 146 beneficiaries in total that passed through the home - at the end of 1996, it



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food and hygiene items

1,920,000 kg flour

2655 m3 of firewood

300 water tanks (20 litre capacity)

5,280 hand-operated radios

28,500 vegetable seed sets

10,000 sets of provisions for winter

9,350 tools for agriculture (4,810 shovels
and 4,540 hoes)

The IFRC also provided: candles, matches, kerosene lamps, kerosene fuel for beneficiaries living in villages and hamlets without electricity, clothes, plastic sheets, cutlery, and vitamins for distribution.

Vegetable seed sets were very important donation, and thanks to it people still able, mobile and healthy enough, could cultivate their gardens again, and survive on the fruit of their land and their work. The CRC, in co-operation with the IFRC, ICRC, UNHCR and Austrian RC, distributed 37,815 sets of vegetable seeds. The ICRC delivered 9,500 sets of vegetable seeds to the areas of Banovina and Kordun, and 7,500 sets to Lika and Dalmatian hinterland. Each set contained 12 sorts of seeds sufficient for a 4-member family. Sets were distributed to displaced people, returnees, refugees and the remaining population.

At the request of the Austrian Red Cross, who for that purpose donated 23,500 HRK, the Croatian Red Cross purchased locally, 10,000 sets of vegetable seeds. The UNHCR contributed to the programme by providing 10,815 sets, distributed in the same area since the number of refugees suddenly increased in the Spring of 1996. In the Summer and Autumn of 1996, 10,000 sets with provisions for winter were distributed, as

well as cultivation tools.

In February, March and April 1996, 450 m3 of firewood were distributed to beneficiaries in Banovina and Kordun and 755 m3 were distributed to the most vulnerable elderly households in Lika and Dalmatian hinterland to cover the winter period 1995/96.

The same programme was repeated for



Preparing parcels of humanitarian assistance

the following winter period, but this time earlier than before. In December 1996 and January 1997, 710 m3 were distributed to the most vulnerable in Lika and the Dalmatian hinterland and Banovina and Kordun.

Since the beginning of November 1995 to the end of February 1997, 8 CRC/IFRC mobile teams visited 20,249 persons in 5,742 villages and hamlets. In 901 villages and hamlets, 4,748 persons receive constant care, attention and various help: from delivery of bread and milk to bed-ridden beneficiaries that cannot make their own bread out of distributed flour, to assistance in obtaining all necessary personal documents.

Beneficiaries are also assisted on a daily basis by technical and medical teams. Two technical teams during the same period visit-



ed 1,924 persons in 942 villages and hamlets, doing repairs on and in the house, and when needed, chopping firewood and performing other chores.

Three medical teams visited 7,420 persons. Medical check-ups were, in co-operation with medical institutions, organised in their homes or in medical centres, medicines were delivered and transportation organised for taking people to homes for elderly in Petrinja and Knin. In co-operation with the Ministry of Labour and Social Welfare, transportation to homes for elderly was provided to 436 persons.

The International Federation, Croatian Red Cross - mobile teams



Red Cross Mobile Team - mud is no obstacle whatsoever

Since October 1995, IFRC/CRC mobile teams provide daily assistance to the needy population. After the field assessment revealed the need to form mobile teams that

could reach even the most remote places in Banovina, Kordun, Lika, and the Dalmatian hinterland - quick action was undertaken.

Thanks to the Federation's Headquarters in Geneva, terrain vehicles were delivered in just a month and half - which is, considering the regular required procedure, a very short period.

At the end of October mobile teams were "on their own wheels", which was an important precondition to start the planned humanitarian action. Ensuring that everything goes as planned was the task of two co-ordinators, Sabina Slottke from the IFRC and Silvana Radovanovic from the CRC.

The situation in the field was very serious. There was no electricity and water in many villages and hamlets. In many of them, the situation is still unchanged. Many elderly people were left alone, in bad physical and psychological condition. Moreover, some of them did not even know what was going on - except that they have been left alone. The mobile teams found elderly persons that had already died, were hardly mobile or completely immobile, bed-ridden persons, seriously ill... Most of them were completely confused and unable to do something to help themselves. At the beginning there were also many suspicious beneficiaries - they would hide from the mobile teams by running into woods. Fear and mistrust were present at the beginning.

The IFRC/CRC mobile teams spent most of their time at the beginning identifying people. They also had a hard time not knowing the areas they were travelling to, especially the villages and hamlets far away from the main and secondary roads, were very hard to find. Geographical or car maps were not useful at



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all times. Lists of people they had that were made by other organisations were not always precise - very often while searching for people on the list they would find others that were not even registered. How does one day of a mobile team look like?

First, they go to the local RC branch to decide the plan of action, that is, which area and village they will visit that day. Of course, they have regular contacts with local Centres for Social Welfare and with medical institutions.

Mobile social, medical and technical teams all together make one joint team, where everyone knows that only by working together can they achieve their task. That is how they act. Thanks to that co-operation, it is possible to achieve a maximum.

It is not problem to come to villages which are on the main road, but to reach those that are far away from the asphalt is impossible without all-terrain vehicles. It is a real miracle to see where these vehicles can pass through and their driver, although not being professionals, certainly learned all the tricks of the trade while working in the "Save Lives" Operation. Simply put, there is no road they won't or cannot pass. In the winter, when the snow falls, often on a thick layer of ice, or after heavy rains that leave thick mud, one should have the knowledge, skill and bravery to drive. If there is no road at all and it is impossible to reach the house by any vehicle, the team members take the parcels and reach their destination - on foot.

Although it depends on the area, the mobile team visit seven/eight addresses per day. One village with its hamlets can often be scattered on a few hills and then most of the

time is spent on going from one to another beneficiary. Every house that is visited, and now they know well who lives where, gets the needed and long-awaited parcel, 8 kg flour, and other provisions and items. Teams also deliver milk, yoghurt, blankets... and bread to those that cannot bake it themselves.

The mobile teams are trying to visit each household at least once a month. But, in some special cases they visit once a week. There are



And neither is snow ...

people that cannot live alone and take care of themselves, but do not want to leave their homes. They refuse to be accommodated in institutions for care of elderly. "I was born here and here is where I will stay" they say, and this is to be respected. These persons are given food every week since they really depend on it, and could not survive without it.

Provisions are important, but the technical team is also irreplaceable. They repair everything in the house, on the house and around it - windows, doors, stoves... In villages where there is no electricity during winter, one warms up and cooks throughout the whole year on firewood. Without firewood there is no life there, and the technical team



chops the wood for the beneficiaries. Guys from the technical team are therefore more than welcome in every village, in every household...

... Just like every doctor or nurse. The great majority, more than 90% of the beneficiaries have slight or serious health problems. Most of them are older than 65, and went



Dr Akashi and Dr Lang visiting wounded Serbs in Knin ,
August 7 , 1995

through psychological stress, by being left alone and not knowing where their dearest are - therefore they need medical attention. Often, a house visit is not enough and they have to be taken to the hospital. When the nature of the road does not allow the medical team's ambulance to reach the patient, the mobile social team helps out with a heavier all-terrain vehi-

cle and picks-up the patient and hands him/her over to the ambulance.

Emergency cases are of course, part of the care within the "Save Lives" Operation. When beneficiaries need an urgent transportation to the hospital or to go to a specialists for care due to: heart attacks, acute psychosis and other emergency interventions - a fully equipped ambulance is called. These cases are classified as hot, "red" emergency cases.

Important, warning "yellow" cases are all chronic diseases of the heart, digestive system, acute infections, open wounds, etc. For these patients, mobile teams provide medicines, and make regular bi-monthly visits as well as transportation to specialist check-ups in ambulance vehicle. "Blue" i.e. "cold" cases include rheumatism, sight, hearing or moving problems, etc. The do not require urgent medical attention, but when emergency occurs they inform mobile social teams.

Beneficiaries in the "Save Lives" Operation suffer from various illness and health difficulties: hyper tension, heart diseases, breathing problems, diabetes, neurological and mental difficulties (psychosis, dementia, alcoholism) digestive problems, bad circulation, cancer... Until 1 February 1997, more than 6,000 cases were assisted by the medical team in one way or another.

A person needs food, medical help, technical assistance, but what he really needs more than anything, even bread, especially in the remote villages - is human contact and conversation. The mobile psycho-social teams are for those lonely and abandoned people, in fact, the only link to the outside world. Many of them live alone, sometimes only one or two persons in a village, and visits by the mobile

*A person needs food,
medical help,
technical assistance*



SAVE LIFE

team, are a big happening for them.

This is not only because they know they will receive their much-needed parcel. The human contact and conversation means a lot to them. They are so grateful for everything they receive and they want to share every little thing they have - they offer eggs, apples, make coffee, offer a cup of real home-made "rakija"... That is why they welcome mobile teams as their own, closest one, as their children... and mobile teams know each and everyone of them, their problems and fears.

Mistrust, even fear that were so obvious during the first days of the "Save Lives" Operation are completely forgotten today, replaced by a special friendship. Today, the beneficiaries share with the mobile teams their problems, all the suffering, hopes and fears, they talk of the whereabouts of family that is gone, they dream of the return of their daughters, sons... or at least neighbours. And when it finally happens, when the dream comes true and somebody is back, a cousin or at least a neighbour, mostly elderly person - then they are so happy.

Thanks to the Croatian Red Cross many of them managed to, through family messages, get in contact with their dearest that are no longer in Croatia. When a message or a letter arrives from the family, it is read when the mobile team visits the village not once, but ten times. As there are some who are illiterate and thus cannot write a message, very often they are written by members of the mobile teams. If they see somebody in the mobile team who has a camera, they will ask for a photo so that they can send it to their families - so they can see that they are alive, smiling, still hanging on.

The separation from their dearest ones is the hardest to live with. When they talk about how difficult it is for them, not having enough food, missing some needy ingredient or not feeling well or being in pain, they will hardly ever cry. But when they talk about their families, wondering where their daughters and grandsons are, then they cannot hide tears. Separation from family and loneliness are, to the majority of them, the biggest problems.

One old lady who was left alone in a remote village in the Dalmatian hinterland, who finally agreed to be taken to the Home for Elderly in order to be given the care she needs. Looking at all the empty houses, she asked the mobile team that drove her out of her village:

- Who else lives here, my children?
- Nobody now granny, they are all gone.

In the next village she asked again:

- And who lives here?
- No one lives here, either.



Regularity of checkups - trust has been regained

- Oh my God, I have been left alone in Yugoslavia!

Her village and the neighbouring ones were the whole world to her. She knew of no



other places. She was in fact, unaware of what had happened during the last few years.

Mobile teams of the International Federation of Red Cross and Red Crescent Societies and the Croatian Red Cross were active in the field since October 1995. They are witnesses of everything that was and still is happening out there. In some areas the roads have been repaired, a new layer of asphalt laid, electricity and water supply re-connected, water wells cleaned, shops and restaurants are re-opening - normal life is being restored. Mostly though, that is in towns or villages near the roads. For those that are far from the main or important roads, the situation is not that good -on the contrary - mobile teams agree.

The main problem of these lonely people is of psychological nature. At the beginning they thought their relatives would return or start to come back but it did not happen. They used to have food stocks and they have been depleted. Their livestock died since they couldn't take care of it, or their food and cattle were looted by burglars that "sailed" through the area... They are simply not sure any more of what to do with themselves.

For all these problems, people in the remote villages need the assistance of the IFRC/CRC mobile teams, as well as other organisation's help now, more then ever before.



If there is no other way , parcels of humanitarian aid are being delivered on foot

PEOPLE

Conversation with abandoned persons

The name of grandpa S. was on the list, basic data - old, deaf, alone, address, small stamped letters.



DOCTOR, PEOPLE NEED HELP

On the morning of August 6, 1995, we reached Pakovo selo. There was UN Crossing Point there. During the road blockade imposed by displaced persons, I was standing with them at the same spot, and they were, looking toward hills, pointing their fingers to the same



UNCRO Base in Knin - Dr Lang during his conversation with Dr Travica , August 6 , 1995

direction, saying: "My village is there". They had already been displaced for three years. It was impossible for them to pass the UN Checkpoint at the time, and there was no sign whatsoever from the "other" side. At this par-

There was a wounded Christ with Friar Ante

ticular moment UN Checkpoint was deserted.

I found the Diary of Kenia's Muhthar Ali. He came from Africa to curb suffering and enable return. He was even faced with his own personal difficulties. There was a feeling that he was not very well accepted because of his African roots. He kept criticizing the French for their racism, he was even bothered by snow and poor economic conditions. His opin-

ion was that UN soldiers tend to be too familiar with Serbs, which is why the latter are encouraged to act stubbornly during the negotiations. Apart from finding the Diary of the African peace keeper, I also met first Croats to be returning home.

I was in Drniš when food was being distributed, also visited Croatian villages and found , forgotten and frightened, elderly Croats. There was a wounded Christ with Friar Ante in the Otavice church, there was, deserted and lonesome, the Mausoleum of Ivan Meštrovic.

Despite being warned of mines, accompanied by Beri, I went inside. Large staircase was covered in branches, and we walked carefully, step by step. Like a guard, yet another wounded Christ was standing in front of the Mausoleum. Whole interior of the Mausoleum was dirty, sculptures were preserved with a certain amount of damage, which was probably inflicted by the use of hammer. Coffins in the crypt had been opened.

We set off for Knin, visiting the Hospital immediately on arrival. Chief of staff with the Medical Corps was Lozo, whom I had known for quite a period of time (he used to run one of the hospitals in Lika). I ran into Serbian doctors (Dr Jejina), who had refused to abandon their patients. A few paramilitaries and more than a few elderly people were lying in their beds. In the evening, I visited UNCRO Base, where several hundred people sought refuge and expressed their wish to leave Croatia. The Base itself used to be the Yugoslav Army barracks, and permission for the attack at the Croatian village of Potkonje, May 1, 1991, was given out of here. We had just formed the Committee for Human Rights, having asked for peace, possibility for the children to attend school, medical treatment for the sick.

It was right at the time when a paramilitary group of soldiers, armed with heavy machine guns and rifles, attacked 137 Croats, mostly women, children and elderly, expelling them from their homes.

I went off to spend the night on the hospital bench. On August 7, I paid a visit to

SAVE LIFE

General Cermak, and afterwards I met Mr Akashi, who had arrived by helicopter. I immediately warned him that the hospital should need adjustments in order to receive abandoned elderly people.

Alongside General Cermak, we went off to the UNCRO Base. Three patients were being without dialysis for five days. A pregnant lady was due to deliver shortly. These people were afraid of the Croatian hospital, "who knows what Croats might do to them". I warned UN Commanders that charges should be pressed against themselves if those people came in harm's way. The Commanders put some pressure on the people, and only after that they were taken to the Šibenik Hospital. A new family was created. Baby Anika was born. Her father, Damir Mijakovac, was a Serb and her mother a Croat. Her father was an art photographer, and during the spring 1997, he had a remarkable exhibition in Split, whereas right in the centre of Knin his business was re-established.

As for the wife and children of Dr Jejina, I managed to talk them into getting back home, so that their family should not be separated. I myself gave them a lift. I also persuaded Nurse Dobric and some 30 people not to leave their homes. Talks with assembled, distraught people lasted as long as 3 hours. I was urging them not to leave, not to allow themselves into being detained. I admitted it would be difficult, but nothing could be as bad as leaving one's own home. Most of them were crying all the time. Some of them listened to me, but mostly they did not.

After I had left the UN Detention Camp, I walked through the town for the first time. In a house we found an elderly Croatian teacher, who used to be a long time correspondent to "



Friar Ante Cavka holding wounded Christ in Drniš

Slobodna Dalmacija". The door to his house was wide open, while the eighty-year-old was sitting alone at his table. He had been hit on the head, so there was some dried out blood on his face. He was hard to communicate with. We took him to the hospital. A few days later, he passed away.

Late in the afternoon, we went to Potkonje. There I ran into a young man who was a grammar school student in 1991, and, as long as half an hour prior to the 1991 attack, he was the Vice President to the Committee for Human Rights, as well as a Zagreb student. After having been expelled, he was a soldier for 4 years. He had not been into his studies. He received me by saying: "Doctor, people need help".

Ph. D. Slobodan Lang

*Like a guard, yet
another wounded Christ
was standing in front of
the Mausoleum*



BIRTH



Mrs Dušanka Loncar during her stay at the Karlovac Hospital

After visiting Knin, we were rushing to Vojnic. My friends were there. Nurse Nena and others. I had been taking students to the Hospital in the Petrova gora for years. Each generation of students was being taught that employee in the health care should primarily be humanitarian, that such a person, no matter what, could always help.

*The couple's reunion
was one of the extraordinary
moments of
human happiness*

It was a few days after the "Storm" Operation that Beri and me arrived in Vojnic in the afternoon, and we immediately went off to a building which housed the

International Committee for the International Red Cross (ICRC). It was up on the hill, overlooking the whole town.

Vojnic was an empty place, no civilians, partly destroyed, but mostly preserved. The only presence was that of the Croatian Army.

There was a horse standing in front of a large store, staring at its own reflection pictured against mirror-like glasses. It was standing there for days.

I mingled with the remaining assembled people at the Red Cross premises. I was looking for Nurse Nena. I was told she was around, but went to fetch some water. I began talking to people, comforting them. They were scared. Most important to them was to be heard, to utter an ordinary, simple word that would give hope of getting back to normal life.

They were beginning to give me strong support, asking me to visit a neighbouring house with some people in it. In the house there were mostly elderly people. There was a married couple, he was 94 years old and bed-ridden, she was 87. He was looking at me from the depth of his eye-sockets, asking in silence: "Do people, such as myself, at a time like this, have the right to be given care, time, or aid".

That was the first time I had laid my eyes on Dušanka Loncar. She was pregnant. She was sitting on a wooden chair, short tiny woman in an advanced stage of pregnancy. She was looking at the whole of Vojnic in front of her. At the same time, I could see in her both a beginning and an end. I stepped toward her and asked her who she was. She was hardly willing to speak. In the field in front of us there was a small, cosy house, which had been built by her and her husband Milan in order to expect their child and raise family in it. They had wanted that for eight years, she had had fertility treatment for as long as that, and then everything seemed to be at stake. They remained in Vojnic, accepting and placing their trust in the Appeal of the Croatian President. Vojnic was liberated when she was almost full eight months pregnant. Milan was taken to Karlovac, and she did not know whether he was alive or not, while the house was there,





Baby Stefan, year and a half later

empty, waiting for either death or life.

She was not willing to talk, I did not have much to tell her. It was necessary to act. I gave a call to Beri and we set off for Karlovac. There we went to the Police Precinct, after that to the local Prison. Milan had already been interrogated, so I got permission to take him home. The couple's reunion was one of the extraordinary moments of human happiness. I asked them to go back home and get it ready for a baby.

We went off together.

For the next several days, I concentrated all my attention toward refugees from Velika Kladuša at Kupljensko. There was some 25 thousand people there. One true civil war in the course of conflicts - Bosnian against Bosnian, Muslim against Muslim.

We paid our next visit to the Loncars in the early evening, they had put their home in order, but Dušanka was not feeling well. I was scared - what if her condition deteriorated, she was eight months pregnant, it was curfew there, no doctors available. On the other hand, if we took her to the Karlovac Hospital for no apparent reason, and we were not able to get her back. What were we

supposed to do? I picked out Karlovac. We took her there round 21 hours and left her at the Maternity Ward.

Next two days we were constantly at Kupljensko. Then I rang up in the Hospital to ask what was going on. "Don't you know?", the doctor asked me. "No", I said. "An hour after her arrival, she started to bleed. If you had come any later, she would not have been alive. We have done the Caesarean cut. The baby has been in the incubator, while she has been transferred to the Intensive Care Unit. We'll see..." I asked to see them, and did so through the glass. It was the time for hope, pray and faith.

I kept interrogating about them from day to day, and after a week elapsed, I was told that she was all right and they would both live. I was grateful both to the doctors and God, it was a genuine partnership for good.

I paid a visit to them. They were together.



Two generations of the Loncars - father Milan and new-born son Stefan

After a period of time, they were both reunited with Milan in Vojnic. It was a family reunion at their own home. After some time they were joined by the grandmother. The house was full of life, it was a place that saw the remaining Serbs, Croats from Banja Luka and Croatian soldiers getting together.

Life prevailed.

Ph. D. Slobodan Lang



RETURN ALSO BEGINS

January in the Slunj area was not at all too cold, sheer luck so to say. All the way there, further from completely destroyed Turanj, even outside Karlovac, a road is winding toward Slunj. There is a bridge over the Slunjica falls, a view from the bridge reach-



Mobile team - welcome guests

es as far as destroyed mills at Rastoke, the bridge itself has been damaged, but not completely destroyed.

We are entering Slunj, it is Thursday, January 11, 1996. At the Social Work Centre

Centre and a clerk.

There are other two persons in the Office for Return, founded with the Government Office for Refugees and Displaced Persons.

Some 384 returnees have come back to Slunj and its surroundings. They are a kind of users of social welfare benefits, and because of that they have all been registered. Actual number of returnees must be more than that. Hundred and forty persons have received single amounts of money in aid, food is distributed by the Croatian Red Cross on Tuesdays and Thursdays.

Winter is always too soon to start in the region, even early autumn tends to be very cold, and the Social Work Centre lacks off-road vehicles necessary in order to pay a visit to far-fetched hamlets with only one or two residents. Village Bogovlja off the border with Bosnia and Herzegovina is mentioned as the one with families of numerous children.

Both institutions are having problems with not enough rooms. Mr Hazler, Deputy Mayor of Slunj, is trying to organize a soup-kitchen.

According to the police records, in Slunj, right after the joint military-police Action, there were between 840-870 residents: 350 Serbs, 328 Croats, 192 Muslims.

We are taking the tour of several hamlets in the vicinity of Slunj. Red Cross employee, Mrs Marija, Slunj born, is taking part in the Census of abandoned elderly people. Not far from the town centre, near the petrol station, her parents' house was situated. Now, instead of their house, there is a miraculously saved cooker, all sooty from fire, and we also meet the lady's father in the empty space there. He is telling us how Serbs used to clear out rubbles in the course of occupation, bit by bit, and finally just the site itself has remained.

*Winter is always too soon
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we have been told that they were founded not even a full month after the "Storm" Operation. During the last four months of 1996, there were just two persons working with the Centre, Ljiljana Sablic, Head of the

Bosiljko Domazet

NOW BE YOU SMART AND HELP

In mid-January there were 56 people at the Knin Hospital, and Nurse Štefanija from the Zadar Nursing Home was in charge.

Five persons were employed with the Knin Social Work Centre, according to Tomislav Curko, Chief of Staff, despite the fact that they had been given permission to hire nine employees.

Before the war, Nursing Home in Knin had never accommodated more than five-six elderly people. According to Mr Curko, care for elderly people had never been a problem. In Knin and its surroundings, 1.750 abandoned elderly people were registered, but the Red Cross estimates tended to be even higher, said Biserka Culina. Nursing Home as housed within the Knin Hospital came into operation on 18 December, 1995.

A number of people will not give their consent to be admitted into the Home, they prefer staying at their homes, but they will be out of reach when it comes to regular visits. Yet most of the town services have started with their work. It is interesting to state that, due to the preserved documentation, as well as the fact that current employees with the Social Work Centre used to do the same job before, 27 users of the Social Welfare Fund from the pre-war period still receive their cheques. There are remaining 1.515 families in Knin, with 2.100 members, 179 of them Croats and 1.952 Serbs.

Afterwards our destination was Gornji Radljevac, or precisely Dragišići. We were climbing up for almost two hours to a hamlet, where we found three elderly persons: Stana, Ilinka and Dušan. In front of the old woman's house, a skinned hen could be seen, hanging on a hook in front of the entrance. The old woman would then cut off a piece or two from time to time, they said they rarely started fire for the fear of robbers. They were extremely glad to get two loaves of bread, the old man

was particularly satisfied with real cigarettes. Up to that moment he would smoke something wrapped up in the newspaper.

Upon our return, we were shown the Cupkovica Bridge, the largest viaduct in the



Đuro Grmuša with his mother, the village of Plavno, January 1996

ex-Yugoslavia, separating Lika from Dalmatia.

We are entering Plavno. Đuro Grmuša lives here with his mother, he is meeting us apparently drunk, telling me the following: take a piece of paper and write down what I used to have! Before that, he has poured "golden yellow" home-made brandy into the two small glasses. While I am taking notes,

*The church at Plavno
is preserved and open,
holy books and relics
are in place*



Đuro is talking and staring at his bed-ridden mother: 13 cows, 4 horses, 3 calves, 14 swine, 50 sheep, 300 hens, 30 rabbits. Now there is just one cow, he goes on, and right this morning, January 11, 1996, seven policemen have announced that they will take it away. Brandy is no problem at all, Đuro Grmuša finishes his speech goggling at me, but my mother needs milk, so be you smart and help!

Down below their house, in somebody's cellar, a stream of water is pouring out and the whole lower part of the house has been flooded, and in the middle of the room there is a huge box. Village of Plavno is very well supplied with water thanks to natural streams and constant water flow.

The church at Plavno is preserved and open, holy books and relics are in place, even candles and small objects to practise religion. Italian humanitarians from the Catholic Association have been working at Plavno, distributing clothes, footwear, some food, helping elderly people to prepare firewood.

At the village, a little further away, there are three women: Jeka Rusic, born 1928, Milica Bursac, born 1911, and a little younger Milica Bursac, born 1931. The latter saw her husband's killing with her own eyes, she has brother Branko in Zagreb and son Todo in Rijeka. She says: "I prefer being here where I grew up and lost my strength".

At the neighbouring village of Radljevac

Donji, there are 15 remaining persons. At dusk we are approaching small crowd of elderly people, humanitarian aid is being distributed at the moment. Everything has been put on small piles, down on the floor, mostly matches and candles, some rice and few cans with no label.

Bosiljko Domazet

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The village of Plavno - Jeka Rusic and Milica Bursac during the conversation with Dr Lang



SMILE WITHOUT EXPRESSION

To participate in the Operation Save Lives means very often to wish for the power of magic to cast off the dark side of reality. Before you is an understandable need - to help - and behind you unperceivable suffering and pain.

Grandpa Mihajlo - 75 years old, disabled, without legs, living alone, was sitting in a cold yard covered by snow, trying to reach the water well. In a completely abandoned part of the village, he, helpless and immobile, watched the Red Cross car approaching him. On his face a smile but devoid of expression. Even before I managed to say something he started to talk how everybody abandoned him, how there was nobody here, about cattle that died because he could not take care of it, about hunger, thirst, illness..., how if we do not help him he will take his life before next morning. He was talking urgently, patiently, confidently, and I knew we were facing an innocent victim and a living prisoner of injustice.

It was untidy in the house, a mixture of unpleasant odours, remnants of food gone bad and the smell of death sneaking up my nostrils,

To participate in the Operation Save Lives means very often to wish for the power of magic to cast off the dark side of reality

into my mouth... Almost instantly I turned to him and gave him a firm promise that we will return that same day and place him somewhere where he would be cared for. I was more than sure he did not believe me. We drove all day, called the Federation Office in Zagreb, contacted the Ministry of Social Welfare, Home for Elderly in Petrinja, requested approval and finally it was time to go back to pick up grandpa Mihajlo.



Old man cared for in the Petrinja Hospital

It was already twilight. He was sitting on the floor and when he looked up to us it seemed as if his eyes were phosphorescent. I brought in candles, we dressed him and in that moment an energy for life roused inside of me while at the same time I was scared by the darkness of possible death if we had not found.

Together, in a warm car, leaving the shadows of this sad village I was looking for the lights of the Home for Elderly, for people, a room, a bed, food, all that meant a longer or shorter, but dignified life for the abandoned Mihajlo. As we were saying our goodbyes in the corridor of the Home his grip signified strength among individuals, a consequence of choosing between life and death. "Grandpa Mihajlo" was my first and most profound experience of saving a life.

Irena Barišić



GRANDPA FROM PERNA

How to write a story, how to isolate one of the many, when I am daily "struck" by numerous, still lasting stories. How to walk on a wire, balancing between cynicism, pathos and whatever else? To live daily between Zagreb and some, until recently, places unknown to me, so close and yet so far away. Like a voyeur observe the traces of someone's destiny made public so cruelly.

How to pass daily by sites of fire, by bits, once dear to someone, scattered all around and worn-out by passing of time. Passing by chips of bared privacy.

How to stay restrained (and only a professional) meeting the eyes of starving dogs, with their tails tucked in, their eyes big and warm, dogs that although frightened are running to people, because they remember better times. Seasons are changing. Days are passing in the same calendar flow. On the fire sites new sprouts are springing up, people are slowly coming back.

Some names are fading, but the faces remain imprinted like crosses.

I remember some sentences. Fragments. Once, after us, someone will get the picture. The children will learn facts in school.

What about pain? Will they tell them about it as well? I know that the pain experienced by real characters does not fade. In their homes the clocks are standing still. Ticking between the lines of letters I sometimes write to their beloved who are gone. I wonder, if it is possible to remain just a mediator of words in those sad entanglement? Thank you destiny, you are kind to me, you gave me a Red Cross badge - yearning towards humanity.

You did not show me how to stay awake all night completely alone in ghost village, alone with only the memories. I don't know how it feels to be feeble, old, without will and hope.

Days are passing by with no difference, there is no one to talk with, no one to shake hands with, no one to meet the eyes. When I will not or do not want, can not, I don't think of hunger, coldness, darkness, horror all the time present in the bones, and of fear sneaking up of me.

I don't think of gangrenes stench, of chickens picking at the dead cows bodies. When I do not want, I just switch off. Or, do I? I want to remember their pain for all those faces, imprinted like crosses.

I imagine myself to be grandpa S. from Perna, who is gone. I was born in 1906. Now it is winter 1995 and I don't know which day, but who cares. I am sitting alone. I am deaf. Tired. In my nostrils I feel the smell of smoke, arson from the previous wars, I remember my mother. They say this war is over, perhaps, it is the third one to me.



Old man

The sons are gone, grandsons with them. Daughter is visiting me when she is able. It's hard to live. I don't want to go to her to Ogulin. I shall die in this house. It is enough. Picture after picture, some nice moments, sometimes far back into my childhood.

Pictures of some anniversaries, children, grandchildren, wife, friends, drunkenness and

SAVE LIFE

so many other. Where are they now? The children, the grandchildren are far away on different sides. I am tired. How to help them? How can I help anybody at all? The door is opening, but I do not expect anyone.

The name of grandpa S. was on the list, basic data - old, deaf, alone, address, small stamped letters. We found the village on the map, since there was no one to ask for directions.

The front door. I am knocking. No answer. I am shouting. I know it is written that he is deaf, but like that it is easier for me to ease this comfort.

I am opening the door and I hold my breath. A narrow corridor, one more door, the room is empty, on the floor scattered things. I smell smoke.

Will he be dead like that grandfather we found dead on "my first working day at the Operation Save Lives"?

Another door. Here he is. Relieved. An old man is sitting on the bed, void gaze in his eyes, no reaction, yet he sees me. He looks like a boy to me. The room is filled with smoke, the stove is old. Beside him a wooden chair covered with bread pieces and crumbled tobacco.

I am looking at him. I am shouting at his ear, and only after some time he waves his hand wearily. I am looking at him. Our eyes meet. Big clear bright eyes, so gentle.

Pain. I feel it, I don't know whether it is his or mine, my imagination, but I do know it is here and it is human. I am squeezing his hand. He squeezes back. I take a paper and write that I am from the Croatian Red Cross. He reads, moves slowly his lips in a shivering voice. He is asking my name. I write the answer. I offer him a cigarette. He slowly lights it, telling me who he is.

Most of the time he is bedridden, hardly mobile. He talks. We hold hands. I answer his questions writing big letters on the paper. He slowly spells them out. And now, how to tell this story without pathos or cynicism. Just facts, it is easier that way.

Grandpa S. has passed away. Later on we meet his daughter and his son-in-law. They visited usually on weekends, leaving us written notes.

They took care of him, but grandpa didn't want to leave with them. He didn't want to be settled to the Home for elderly.

We brought him food, medicines, newspapers, shoes.

He talked to me. He was wise and tremendously dear. He grew to like me (as well as I



Red Cross employee with the abandoned old man

him), maybe he was imaging his grandchildren. Sometimes he smiled and made jokes.

But, each time when I was leaving, his clear eyes were moist, and the question: "When do you come again?"

During the Operation Save lives, we have literally saved many lives. There are facts and statistics about that. There are many stories, more upsetting ones, more desperate and sadder than this one. About many others who are completely alone.

We did not save grandpa's S. life, but he actually did not want it, he was old and it was his choice. I know, although it might sound overbearing, that each of our visits meant a lot to him. If you feel such pain, talk about it, for the pain does not suppress humanity, and out of it arise new sprouts - of love.

Vesna Vulic

TOYOTA HILLUX 921

The sky built up to a green cloud over Kadina Glavica between time and space, as it seemed to me then...are we going to find him, in what state?!?! Thousands of stupid questions and sinister anticipation. Toyota Hillux, carrying insignia of the International

*God, how powerful
this is, everything
was changing like
on the tape*

Federation of Red Cross and Red Crescent Societies, hummed along rhythmically on the bed of a flooded creek, supposedly a road...I am not in the mood for driving today, hopefully it won't stop here. Suddenly an image of

the tape and banish black thoughts...How good Santana sounds in this dreariness, how much sun, brightness, rhythm, will-power for life... "Black magic women". God, how powerful this is, everything was changing like on the tape, even the rigid face of my colleague softened in the first shy sun rays breaking through a dark grey-green curtain, announcing victory of the sons and daughters of the light over the darkness.

Now, there is no doubt, we will find him, we have to, I felt this is it, we are on the right path. A little dreary house hung in the air in front of my eyes, while the road was turning around the hill vanishing in a new cloud of green haze, obviously still fighting for supremacy.

I stopped, more instinctively, unrealistic scenes were changing rapidly and finally the house glittered like a golden tiara, bathed in the pure light of the invincible sun, I moved and felt there is a life up there, we have found, this is like a story... Quietly we left our terrain vehicle, climbing with hope and excitement, what shall we find? a strange force dragged us up and really, an old man was sitting in the door exposed to the sun, immobile, speechless, alive?? First, silence was so dense that we stopped, then it froze and nobody spoke a word, even today I do not understand this silence, this anxiety so hasty, so sudden. Yet I knew, that's him I. T. from Kadina Glavica, needing any help, I. T. tortured and humiliated, lost and unreal, only suffering and pain could be felt in those eyes that opened for a moment, eyes that obviously died many times and came back. The words we spoke sounded miserable to me, empty compared to magnificent victory of the life-sparkle, smouldering in that tortured, but still strong old man, somehow confused by two strangers arriving so suddenly, so noiseless on such a day. I believe



Talking with elderly old man

changing a flat tire flashes through my mind, increasing coldness and dampness, I am shivering and quickly I turn up the heating, change



SAVE LIFE

it all seemed unreal to him as well. We stopped, silence, again, we looked at each other. I reacted quickly, not allowing him to close his eyes again. I offered him a cigarette while uncertainly lighting my own, he startled, just as if I caught a flash of memories, from not so long ago...No thanks, not any more, it doesn't matter any more..., nothing matters any more...it took me by surprise, he speaks, he's alive, really speaks, I was confused, I don't know how Ljubica felt, he reached out his hand to me, a hand I'll never forget!!!

Look, he murmured quietly, take a good look, here were hands once, look what they did ... I watched those hands, mutilated but healed, though in a strange denial, they were still full of strength, here the life was still not wiped out. We have to, we must wake him up, set him in motion, it was ringing in my ears, despite all despair and helplessness I managed to get a grip.

Don't give up Ivan, the worst has passed, I heard myself from distance, look it's over, your suffering is behind you and the sun is on our side...he smiled vaguely, and yet in that smile I felt the sparkle of a new spirit, the faith it is not over yet, not for him.

Immense was my joy, on our next visit seeing him looking at us with a cheerful smile and willing to host us in his humble home, shining with a new cleanliness and brightness

You know, Tonci, I do not hate anyone, I am not looking for revenge, have God mercy with them, let him forgive them...

revealing awakened life and spring knocking on the door (1996), so real one might touch it

You know, Tonci, I do not hate anyone, I am not looking for revenge, have God mercy with them, let him forgive them... again he surprised me with a new strength, divine tran-



Toyota Hilux 921

quillity rested on this tortured face. I knew, this time for sure, that again he is in God's mercy. Toyota Hilux hummed away towards new challenges, this time with a stronger faith in its own mission.

Authority of Field Officer 921:
Tonci Gerner



GRANNY MILJKA

November 1995

The village Rausovac is situated about ten kilometers away from Kostajnica. After the military operation "Storm" five persons remained in the village. Four of them live on one side of the village and granny Miljka lives on the other side, rejected, as if completely alone. We learn that her husband died recently and that she is 84 years old.

After all that happened she feels fear and anxiety, and is lonely. As we leave the village, empty houses, lifeless yards and complete silence see us off.

December 1995

We bring Miljka some food, coffee, candles. The days are short, there is no electricity in the village, and the nights seem longer than they really are. She cannot sleep, severe rheumatism, which disfigured her hands, is troubling her and she moves only with great difficulty.

We will try to acquire a cane to ease her walking. She is happy we are visiting because she has someone to talk to. We have many questions for we are eager to know what she needs, how she feels. She too is curious and

communicative.

Suddenly she asks if this is freedom. We answer - yes. If it is, she says, why are there no people around me?

We have no answer.

January 1996

Happy and satisfied we bring a walking cane. Granny Miljka is not in a good mood, she weeps for herself and her fate. We show her the walking cane and she waves her hand peevishly telling us that now she will walk to Kostajnica without any problems.

We laugh.

Through her tears and laughter she says she loves us like her own children.

February 1996

We are welcome guests in granny Miljka's house. We are sitting, drinking coffee, talking about her life. She is telling us about her relatives and neighbors as if we know them. She complains that the only thing changing around her is the weather, while all the rest is the same - lonely and deserted. She is asking us about ourselves, our families, children. She reproaches us for not coming often, what if she dies, who will bury her. We comfort her and tell her not to think about it. We have to go on. She is holding us back for a while.

Finally we leave, for many of similar destiny await us. Granny Miljka understands. It's difficult, but she understands.

She sees us off and says: "Don't be long." "We won't" - we reply.

Branko Kljaić



Madam Sabina Sllotke on tour

EPILOGUE



Admiral Sten Swedlund and Minister Joso Škara , putting their signatures to the Agreement on the Care for Abandoned Persons

Initial steps have already been taken towards this integration process. The Homes for Elderly in Petrinja and in the Knin hospital are fully integrated into the state social welfare network.



The Croatian Red Cross has been implementing the Operation Save Lives since the Autumn of 1995 with the financial and technical support of the International Federation of the Red Cross and Red Crescent Societies. This support has been unchanged throughout 1996 and over the winter period 1996-1997. Numerous other international humanitarian organisations, such as the International Committee of the Red Cross and the ECHO, have also participated significantly in this humanitarian effort.

As the emergency phase of the programme has passed, it has become increasingly difficult for the International Federation

*As the emergency
phase of the
programme has passed,
it has become increas-
ingly difficult for the
International
Federation to attract
donor support*

to attract donor support. This does not mean that the need for the work of the Red Cross mobile teams no longer exists. Living conditions in hundreds of villages and hamlets - far from the asphalted roads - remain extremely difficult, especially for those elderly beneficiaries living alone. It is, in fact, their isolation which makes mobile assistance a necessity. Family reunification, that is, return of family

members which fled after the military activities, is seen by the International Federation as the only other long-term solution for providing these vulnerable elderly with the support they require.

Realising that people are still in need and that there are difficulties in maintaining funding, the Operation Save Lives has been scaled down in the Spring of 1997 from 20,000 to 6,000 beneficiaries. The number of mobile teams has also been reduced from 17 to 12 teams. The International Federation intends to provide support for this scaled-down version of the programme.

The services provided by the mobile teams should be continued by the Croatian Red Cross as long as they are needed, but as an integrated part of the national Home Care programme. As well as providing the most vulnerable elderly with the support they need, the integration into the Croatian social welfare system will ensure the programme's long-term sustainability.

Initial steps have already been taken towards this integration process. The Homes for Elderly in Petrinja and in the Knin hospital are fully integrated into the state social welfare network. Initially, the International Federation paid salaries for 25 staff for a period of 4 months, as well as for 2 social workers to work in the Homes through March 1997. All staff and associated costs for the two Homes have been assumed by the Ministry of Labour and Social Welfare.

The next step will be to integrate the medical teams into the regular health care system. The four-wheel drive ambulances used by the



SAVE LIFE

medical teams will be donated to CRC branches within the Former Sectors who will provide ambulance services in direct agreement with the health authorities.

The third and final step will be to prepare a budget and plan of action for 1998 to include 7-10 CRC mobile Home Care teams as part of the national Social Welfare system. The vehicles needed for the field will be donated by the International Federation to the CRC once the final agreement is signed.

The running costs for the mobile teams will be gradually assumed by the Ministry of Labour and Social Welfare. Through September, the International Federation will cover these costs in their entirety, while from October to the end of the year, the costs will be shared equally between the International Federation and the Ministry of Labour and Social Welfare. This will develop the basis for the Ministry to completely take over full responsibility from 1998 onwards.

All preparations for the process of integrating the Operation Save Lives will be completed through the efforts of a joint working group made up of representatives of the Croatian Red Cross, the International Federation, the Ministry of Labour and Social Welfare and the President's Advisor for Humanitarian Affairs.

The third and final step will be to prepare a budget and plan of action for 1998 to include 7-10 CRC mobile Home Care teams as part of the national Social Welfare system.





BASIC RESULTS OF THE FIELD STUDY IN THE COURSE OF THE "SAVE LIFE" ACTION

There are five basic results , springing from the direct field experience during the "Save Life" Action.

1 RECOGNITION AND PROTECTION OF THE ABANDONED POPULATION

In this case , it is essential to know that , apart from the population so far pointed out at under the circumstances of war (detained and missing , occupied , displaced and exiled) , after a massive flight of the population there are abandoned and remaining persons. Such persons are at terrible risk , and it is necessary to find a way and know how to take care of them.

2 IMPROVEMENT OF THE SITUATION CAUSED BY THE SOCIAL COLLAPSE

"Social collapse" means that there is an abrupt loss of social peace and welfare , with subsequent poverty , hunger and terror , resulting in the deprivation of dignity , equality and finally mere right to live.

Under such circumstances , there are vulnerable groups at extraordinary risk , such as : elderly , children and young people , mothers with small children , mentally or physically handicapped , sick , families with one of their members either killed or wounded , separated families , families left without their home or property.

In case of the social collapse , first of all , there is the action targeted at saving lives , after that , there is the reconstruction of household and community.

3 ELDERLY POPULATION

Elderly population is highly exposed to specific dangers of modern wars , which means that there is almost no protection of

the population , moreover , we are talking about the situation we do not even know very much about. In our work , we have specifically turned to elderly persons as a part of the abandoned population under the circumstances of the social collapse.

4 HUMANITARIAN COORDINATION

Due to the social collapse, it is necessary to associate and coordinate operations in the humanitarian , social and medical fields.

Humanitarian coordination should gather together governmental and non-governmental , local , as well as international organizations. The highly-authorized coordination is responsible for informing , planning , but also realization of the action.

5 HUMANITARIAN CENSUS

Under the circumstances of the social collapse , having in mind abandoned or any type of vulnerable population , taking into account human rights , protection , improvement or prevention of suffering , it is absolutely necessary to carry out humanitarian census , which will include all relevant data regarding the detection of a dangerous situation , also individual rights and rights of the whole population.



SUGGESTIONS



Madam Emma Bonino and Dr Lang , making
heir rounds

The most significant thing is to coordinate persons of various professions , who speak different languages , professionals and volunteers, in order to support vulnerable population



SUGGESTIONS

On the one hand , this book is an account of suffering , and on the other , humanitarian assistance aimed at a massive group of vulnerable civilian population under the circumstances of war. Modern world has seen huge amount of destruction and human suffering at the times of large-scale violence and bloodshed. There is no adequate studying of the endangered population , which is the reason why there is insufficient education of the general public or specialist education , but also advancement of methods aimed at assistance prevention.

Prevention of physical , mental , as well as social suffering, with respect to a great number of people in extraordinary circumstances, depends on the amount of knowledge , development of methods and putting the methods into effect respectively. For that matter , research and method development in the field need significant improvement.

The most significant thing is to coordinate persons of various professions , who speak different languages , professionals and volunteers, in order to support vulnerable population.

It is necessary to put the contents of the book into effect through the collaboration and partnership with the suffering , to listen to the account of what the suffering have been through , to take their suggestions into consideration , to urge the suffering to rehabilitation and new start. No human being is that poor , sick or old to be unable to make their contributions either to themselves or to the whole world.

THERE ARE NO PEOPLE WHO ARE IN THE WAY

That is the bottom line of dignity , and without dignity, success tends to be significantly limited , if at all possible. At the times of suffering , any account of injustice , even crime , needs to be accompanied by the account of human dignity , its efficiency and strength.

Any description of the suffering population should first of all produce self-respect in the suffering themselves , as far as other people are concerned , such a description should produce readiness to help, but also learn from the suffering.

Knowledge is being gathered with respect to war , disease , evil , however , we should do so too with respect to peace , health and goodness.

This book is an account of joint activities , research and method development in the field of goodness.

*Knowledge is being
gathered with respect
to war , disease , evil
, however , we should
do so too with respect
to peace , health and
goodness*



*No human being is that poor ,
sick or old to be unable to
make their contributions
either to themselves or to the
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ing population should first of
all produce self-respect in the
suffering themselves , as far
as other people are concerned
, such a description should
produce readiness to help, but
also learn from the suffering*



REPORTS



Mobile teams (CRC , IFRC , ICRC and ECTF)
distributing food assistance

Within the "Save Life" Action , we have collected both requested as well as filed reports on the state of humanitarian affairs in the area , starting from the local humanitarian organizations to the United Nations



**UNITED
NATIONS**



Security Council

Distr.
GENERAL

S/1996/1011
25 November 1996

**FURTHER REPORT ON THE SITUATION OF HUMAN RIGHTS IN CROATIA
PURSUANT TO SECURITY COUNCIL RESOLUTION 1019 (1995)**

...

13. Notable progress has been made in the Government's programme to meet the most urgent humanitarian needs of vulnerable persons, including unaccompanied elderly persons residing in the former Sectors. Measures taken by the Government in cooperation with local and international relief agencies were assessed in a generally favourable manner by the Special Rapporteur in her report of 22 October 1996 to the Commission on Human Rights (E/CN.4/1996/9). Special attention will have to be paid to this matter, however, with the imminent onset of winter when isolated persons will be at greatest risk.

14. The Government's programme "Let's Save Lives", conducted in association with the Croatian Red Cross, has been engaged in providing individualized care, surveying the general needs of the population, endeavouring to meet social security needs such as health insurance and pension benefits, and establishing specialized care institutions. Important support has been provided by international humanitarian organizations including UNHCR, the International Federation of Red Cross and Red Crescent Societies, the ICRC, and Equilibre. The Government signed an agreement with the International Federation of Red Cross and Red Crescent Societies on 4 October 1996 for the jointly-financed reconstruction of specialized care facilities, including a psychiatric hospital and a rehabilitation centre which will have the capacity to care for some 700 persons. The Government reports that Equilibre is participating in a joint project to provide social documentation to elderly Croatian Serbs who remained in former Sector North.

...



UNITED
NATIONS

Security Council

Distr.
GENERALS/1996/109
14 February 1996FURTHER REPORT ON THE SITUATION OF HUMAN RIGHTS IN CROATIA
PURSUANT TO SECURITY COUNCIL RESOLUTION 1019 (1995)

...
17. Significant progress appears to have been made in the former Sectors in the provision of humanitarian assistance to needy persons, particularly Croatian Serbs, although the need for vigilance remains great. The Government indicates that it has undertaken a census of the former Sectors, which has identified 9,773 such persons living there following the summer's military operations.

18. As indicated in my previous report, the Croatian Ministry for Labour and Social Welfare has opened reception centres for sick and elderly persons in Petrinja, former Sector North, and Knin, former Sector South. According to the report by the Government, 60 persons have been accommodated in the reception centre at Knin. The centres were opened by the Ministry in coordination with the Croatian Red Cross and the Croatian Delegation of the International Federation of Red Cross and Red Crescent Societies, pursuant to an agreement reached on 27 November 1995. The Government reports that it has also established social work centres in 15 locations throughout the former Sectors North and South, although it concedes that these centres suffer from a lack of qualified and other personnel. Similar centres also exist in the towns of Pakrac and Daruvar in the former Sector West.

UNITED
NATIONS

Security Council

Distr.
GENERALS/1996/456
21 June 1996FURTHER REPORT ON THE SITUATION OF HUMAN RIGHTS IN CROATIA
PURSUANT TO SECURITY COUNCIL RESOLUTION 1019 (1995)

...
20. Reports from international and local observers are generally positive concerning progress in efforts to alleviate the humanitarian suffering of residents of the former Sectors. The situation varies, however, from area to area depending on the attitude of the local authorities. The Government of Croatia has received assistance in humanitarian programmes from many international organizations, including UNHCR, ICRC, the International Federation of Red Cross and Red Crescent Societies and other international non-governmental organizations; the Croatian Red Cross also has been active in this field. The basic survival requirements of the remaining Serb population, including food and essential medical services, appear generally to be satisfied through ongoing programmes. The report by the Government notes, for example, that 448 "abandoned" persons are now receiving care in different social welfare institutions for elderly and infirm persons throughout the country.





Republic of Croatia
Ministry of Health
Baruna Trenka 6
Zagreb
Phone: 01/4591333
Fax: 01/431067

Class: 510-03/ 95-01/501
Entry no: 534-02-26-95-0002
Zagreb, October 19th 1995

Republic of Croatia
Office of the President
Attn : Slobodan Lang, M.D.
Advisor to the President for humanitarian issues

Reference : Providing aid to the abandoned and old population in the municipality of Knin

Dear Sir,

In order to meet the needs of the population in the municipality of Knin concerning primary health care we have set up three medical teams /1.100 inhabitants in charge of each/ and two stomatological teams, which were stationed in the hospital at first and now in the community health centre.

Gynaecological and paediatric surgeries have been set up as well.

The medical centre has been divided into the hospital and the community health centre (the registration is conducted at the Zagreb Commercial Court), acting administrator has been appointed and the hospital systematisation completed. We expect to announce vacancies in two weeks' time.

War damage has been assessed and the repairs are being carried out, both in the hospital and the community health centre. We intend to continue with the renovation and repair war damage in keeping with the needs of the returnees.

We have informed the prefect, the mayor and the Ministry of Development and Reconstruction that we consider securing accommodations for health care employees a top priority.

The Ministry of Health and the Ministry of Labour and Welfare have agreed that 120 beds in the Knin hospital are to be ceded to the Ministry of Labour and Welfare for the accommodation of the old and abandoned persons.

SAVE LIFE

The requirements for the organisation of primary health care :

10 medical teams
 10 stomatological teams
 2 paediatric teams
 1 school children's health care team
 1 gynaecological team
 4 community-health nurses
 1 biochemist
 3 laboratory technicians
 2 pharmacists
 4 drivers
 3 cars and 1 ambulance
 surgery equipment
 laboratory equipment
 medical supplies for the surgeries and pharmacy

It is also essential to organise primary health care in the existing building in Kijevo and in other places.

The Knin general hospital

Normal operation of the Knin general hospital /120 beds/ requires 15-20 doctors and 60-80 health-care employees /at a ratio of 1 doctor per 4 health-care employees in other Croatian hospitals/. The number of administrative and technical employees should not amount to more than 40 per cent of the total number of employees /30-40 persons/.

Emergency medical treatment is organised and administered by primary health care teams on duty.

The Public Health Institute in Zadar is in charge of the organisation and implementation of the hygienic and epidemiological protection.

The organisation and implementation of these actions are supervised by the Ministry of Health and the Sanitary and Veterinarian Inspectorate.

Yours truly,


 MINISTAR
 Prof. dr. sc. Andrija Hebrang





Government of the Republic of Croatia
Office for Displaced Persons and Refugees
Department of Humanitarian Aid and Transport
Zagreb, October 19th 1995

Office of the President
Attn: Slobodan Lang, M.D.
Advisor to the President for humanitarian issues

Reference : Looking after the population in the liberated areas of the Republic of Croatia

The Department of Humanitarian Aid and Transport, acting within the Government Office for Displaced Persons and Refugees, took an active part in looking after the population found in the liberated areas right after their liberation (enclosed please find the record on the distribution of humanitarian aid to the regional offices in charge of the newly liberated areas).

Humanitarian aid was distributed through existing regional offices and their branches in the liberated areas. Since our priority has been the municipality of Knin, we would like to inform you that it comes within the competence of the Zadar regional office and its Knin branch, run by Mrs. Nada Galijat. The Croatian Red Cross has also established its branch in Knin, managed by Mr. Grgić. The Ministry of Labour and Welfare has established a social service centre. The Office for Defence has been set up as well, with Mr.T. Čurko in charge. Mr. Pašić has been appointed Government Commissioner for the Knin municipality.

The Department for Humanitarian Aid and Transport collaborates with all these institutions.

In my opinion, local authorities should organise and enable the functioning of the civilian rule and make proposals for rebuilding the electricity and telephone systems wherever possible.

We have been organising our activities and providing humanitarian aid according to the existing requirements and needs. A survey of the population in the surrounding villages should be urgently carried out so that the requirements for humanitarian aid could meet their needs.

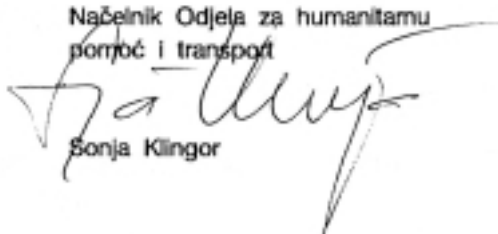
(i.e. there is no need for wood stoves if there is another kind of fuel)

Having been informed that some representatives of foreign media and institutions visited those villages, I have to express my surprise at the fact that none of the Croatian humanitarian institutions were invited. Croatian humanitarian organisations should be solely in charge of organising humanitarian actions on the Croatian territory.

With winter approaching, it is necessary for the Red Cross and social services centres to establish the conditions and requirements for humanitarian



aid in the area. The Department of Humanitarian Aid and Transport is capable of providing food, furniture, clothes, footwear and construction materials. We are open for co-operation with the Red Cross, the Caritas, social service centres and other humanitarian organisations.

Načelnik Odjela za humanitarnu
pomoc i transport

Sonja Klingor

Encl: tables
c.c. Adalbert Rebić, Ph.D.
Head of the Office





Government of the Republic of Croatia
Office for displaced Persons and Refugees
Republike Austrije 14
Zagreb
Phone: 01 173 699
172 642
Fax: 01 171 234

Zagreb, October 19th 1995

Office of the President
Attn: Slobodan Lang, M.D.

Reference : taking care of the abandoned population in the liberated areas of the Republic of Croatia

The Šibenik regional office examined 63 people, most of them over 60 years of age, living in the Skrad hinterland. All of them showed signs of physical exhaustion, which could be accounted for by their long-lasting isolation, fear of enemy propaganda, separation from their families and all kinds of abuse they had experienced. They were provided with financial and psychological aid and supplied with medicine.

Since its very foundation the Office has been engaged with bringing together separated families, on the basis of the submitted claims.

In co-operation with the Ministry of Labour and Welfare and the international community, we have been planning to set up several in-patient clinics (in Glina, Slunj and Knin) for the population in need of medical attention.

We propose that every household in the village should be provided with fuel. Also, it is urgent that "mobile expert teams" should be set up within competent ministries, consisting of experts in various fields.

In addition to this, we would like to stress the importance of a close co-ordination between the ministries in charge of the revitalisation of the liberated areas. The dissemination of information will not be possible without rebuilding the electricity and telecommunication systems.

Tanja Vucelić



SAVE LIFE



Government of the Republic of Croatia
Deputy Prime Minister
Ivica Kostović, M. D.
Trg Sv.Marka 2

Zagreb, October 23rd 1995

Attn: Slobodan Lang, M.D.
Advisor to the President
Office of the President

Dear Mr. Lang,

As arranged, I am submitting the list of the actions taken in order to accommodate the elderly population in the liberated areas of the former North and South sectors.

1. Immediately after the liberation of the former North and South sectors, the Croatian Red Cross was entrusted with carrying out a survey of the population housed in the centres set up by the Office for Displaced Persons and Refugees and those who remained in the liberated villages and towns. The Red Cross personnel paid visits to both categories of the population.
2. During the visit to the European Community Commission in Brussels, by the beginning of September, Mr. Ivica Kostović, Deputy Prime Minister of the Croatian Government, demanded from the Commission to assist Croatia with housing the abandoned population in the liberated areas. We enclose a copy of the short report on the present conditions submitted to the Commission. The efforts the Croatian Government made to accommodate the abandoned population were judged favourably by the Commission, which agreed to consider the possibility of financially supporting these actions.
3. The International Federation of Red Cross (IFRC) was asked to organise visits to elderly persons in the liberated areas. We have been informed by the Croatian Red Cross that IFRC has already commenced with these activities in the former North and South sectors.
4. UNHCR has been approached with the proposal to support the programmes for housing the elderly in the liberated areas, which they agreed to.
5. We have established co-operation with the International Red Cross Committee (ICRC), related to the exchange of information concerning the housing of the elderly in the liberated areas.
6. UNHCR and ICRC have agreed to take an active part in the co-ordination of the actions dealing with the housing of the elderly population.

Yours truly,

Prof. dr. Ivica Kostović

Deputy Prime Minister



Regional Office for Displaced Persons and Refugees

Zadar

Entry no : 50407-19-95-2689

Zadar, October 23rd 1995

Office for Displaced Persons and Refugees

Health care Department

Attn : Tanja Vucelić

Reference : Report on the actions initiated by the Zadar Regional Office to aid civilians living in the liberated areas

The above mentioned actions commenced on August 4th with the opening of the first Zadar shelter, which received the first civilians on August 5th. By their closing date, September 23rd, there were four shelters in Zadar and one in Knin which provided accommodation for 1600 civilians, mostly old and infirm. During that period, the Regional Office provided food and clothing, co-ordinated health care, and kept records on the number of the civilians and their release from the shelter to their families. In co-operation with the Police Department and the County of Zadar and Knin, as soon as the circumstances allowed us, we organised the transportation to the place of living for those who demanded it, as well as the transportation for those who wished to leave the Republic of Croatia.

The Knin branch of the Office for Displaced Persons and Refugees commenced work on September 11th, with three employees, which was a relief for the Knin Social Service Centre. This branch is primarily in charge of accommodating displaced persons, returnees and refugees, but it also collects valuable information on the civilians who remained in this part of the County. As the Regional Office itself, the Knin branch is entrusted with organising humanitarian actions, so that it closely co-operates with the Knin Red Cross branch, which stores and distributes food and other goods, while their supply comes within the competence of the Office /ECTF etc/.

Frequent inspections of the area and consultations with the authorities in Knin and the County, led us to conclude that housing the old and abandoned should be given priority. Due to the lie of the land and the fact that the villages are scattered around, it is almost impossible for the medical teams to reach them and for food and medicine to be regularly supplied. Setting up a geriatric institution in Knin came as the only solution to this problem. The Knin hospital offered to accommodate those in need of medical attention and the homeless, so that the Office deals with such cases if they appeal directly to us. However, being aware that such accommodation is of temporary nature, and that the number of returnees and refugees in the Knin area is increasing, we have made a proposal to the Knin authorities to adapt a few buildings for accommodation purposes. Having been offered donations by the institutions we co-operate with, we are planning to commence the realisation of the project this month.



Predstojnik:

S. Kaurič

The analysis of the abandoned persons statistics
/provided by ICRC on November 30th 1995/

| Mjesto | Naselja | 0 | 1 | 2-5 | 6-10 | 11-20 | 21+ | Total | Izvor | + ostali |
|----------------------------|------------|-----------|-----------|-----------|-----------|-----------|-----------|-------------|----------|-------------|
| Benkovac | 34 | 3 | 5 | 13 | 4 | 5 | 4 | 217 | ICRC | 423 |
| Bribir | 20 | 13 | 3 | 2 | 1 | 1 | - | 30 | ICRC | - |
| D.Lapac | 28 | 17 | 4 | 5 | 1 | - | - | 35 | ICRC | - |
| Dmš | 18 | - | - | 4 | 3 | 4 | 7 | 429 | ICRC | 609 |
| Gračac | 26 | 6 | 3 | 9 | 1 | 3 | 4 | 192 | ICRC | 240 |
| Kistanje | 13 | 1 | - | 2 | 2 | 5 | 3 | 282 | ICRC | 293 |
| Knin | 24 | - | 1 | - | 2 | 2 | 18 | 1009 | ICRC | 1480 |
| Korenica | 40 | 2 | 3 | 14 | 9 | 7 | 5 | 416 | ICRC | 472 |
| Obrovac | 12 | 3 | 1 | 3 | 2 | 3 | - | 53 | ICRC | 62 |
| Oklaž | 5 | - | - | - | - | - | 5 | 142 | ICRC | - |
| Vrlika | 13 | 2 | - | 6 | 3 | 1 | 1 | 23 | ICRC | 75 |
| UKUPNO "UNPA SOUTH" | 236 | 47 | 20 | 58 | 28 | 31 | 47 | 2828 | - | 3861 |

| Mjesto | Naselja | 0 | 1 | 2-5 | 6-10 | 11-20 | 21+ | Total | Izvor | |
|----------------------------|------------|----------|-----------|-----------|-----------|-----------|-----------|-------------|----------|-------------|
| Dvor | 27 | - | 2 | 10 | 3 | 9 | 3 | 248 | ICRC | - |
| Glina | 29 | - | 2 | 6 | 5 | 11 | 5 | 346 | ICRC | - |
| Graduša | 10 | - | 2 | 4 | 2 | 2 | - | 61 | ICRC | - |
| Karlovac | 1 | - | - | - | - | - | - | 184 | ICRC | - |
| Kostajnica | 11 | - | 2 | 2 | 3 | 3 | 1 | 95 | ICRC | - |
| Krnjak | 26 | - | 2 | 13 | 6 | 4 | 1 | 176 | ICRC | - |
| Potrinja | 30 | - | 10 | 9 | 8 | 2 | 1 | 199 | ICRC | - |
| Plaški | 8 | - | 1 | 2 | 3 | 2 | - | 95 | ICRC | - |
| Štunj | 14 | - | 2 | 2 | 5 | 3 | 2 | 137 | ICRC | - |
| Vojnić | 45 | - | 3 | 18 | 13 | 7 | 4 | 394 | ICRC | - |
| Vrginmost | 29 | - | 3 | 18 | 3 | 3 | 2 | 185 | ICRC | 345 |
| UKUPNO "UNPA NORTH" | 230 | - | 29 | 84 | 51 | 46 | 19 | 1896 | - | 3478 |

| | | | | | | | | | | |
|---------------|------------|-----------|-----------|------------|-----------|-----------|-----------|-------------|--|-------------|
| UKUPNO | 436 | 47 | 49 | 142 | 79 | 77 | 66 | 4724 | | 7339 |
|---------------|------------|-----------|-----------|------------|-----------|-----------|-----------|-------------|--|-------------|

Prepared by : Slobodan Lang with associates Branko Čulo and Bosiljko Domazet
October 31st 1995



Centre for Psychological and Social Aid to the Victims of War
The County of Zadar and Knin
Attn: Zvonimir Knezović

Reference : Report on caring for the elderly in the
liberated areas and proposals for
increasing its efficiency

The liberation of our County expanded the range of our activities, but also brought about many problems whose solutions lie not only within our competence but within the legal system as well.

Inspecting the areas of Ravni kotari, Bukovica and Lika proved that the most pressing problem is housing the abandoned, mostly old and infirm people and families. The Knin hospital asked for urgent assistance after they had accommodated 60 old men,

We also found elderly people or families (married couples) of Serb nationality who willingly remained or were abandoned in the liberated areas.

The village of Kistanje has 17 inhabitants. We found them living on 20 square metres in the burned down surroundings, without electricity, telephone or any other connection to the outside world, frightened to death. They were using up their own food supplies the or the humanitarian aid provided by the Caritas or the Red Cross. Only those vital enough were able to obtain some firewood. Being old and weak, they are unable to have their personal documents issued, and they have no relatives to help them do that.

The situation in Dnopolje near Donji Lapac (20 inhabitants) and other villages scattered around Lika and Bukovica is similar.

Furthermore, our returnees are middle aged or elderly people. Many of them lacking any means, they live in improvised dwellings in the same way as the inhabitants of Kistanje. There is no electricity in their villages, water is obtained from cisterns, there is no telephone.

Still, unlike the elderly population of Serb nationality, their relatives visit them and provide them with groceries, which gives them a sense of security.

We have also been concerned with the cases of abandoning elderly people in refugee camps. Two bed-ridden old men from the Punta skala refugee camp were accommodated at a health care institution.

Conclusion

The circumstances in the liberated areas are adverse and alarming.



Therefore it is imperative :

1. to undertake measures in order to afford physical, material and moral protection for the inhabitants living in the liberated areas or returnees
2. to issue Croatian personal identification papers, in a way which suits the age and health status of the elderly population
3. to enable the achievement of their rights, i.e. pension and health care, as well as social welfare benefits for those without pension rights or enough means to support themselves
4. to set up community- health teams which will visit the elderly in the sparsely populated areas in regular intervals and arrange it with the competent authorities that their basic needs are met
5. to insist on setting up an establishment which will provide accommodation to the old and infirm in this area
6. to make sure the Centre has the legitimacy to provide aid to those who appeal to it.

Vesna Burčul



Centre for Psychological and Social Aid to the Victims of War





INTERNATIONAL COMMITTEE OF THE RED CROSS

Zagreb, 12 December 1995
ZAG 95/3491 - ABR/SM

Dear Dr. Lang,

Please find attached a self-explanatory radio message received a few days ago from our office in Knin.

I hope we can count on your help and support to resolve the outstanding issues which seemingly prevent that the hospital premises in Knin be made ready to receive the hardship cases amongst the remaining population in former Sector South.

Thanking you for your understanding, I remain,

Yours respectfully,


Alex Braunwalder
Head of Delegation

Dr. Slobodan Lang
Presidential Adviser for
Humanitarian Matters
Presidency of the Republic of Croatia
Zagreb



REPUBLIC OF CROATIA
COUNTY OF ZADAR AND KNIN
COMMISSION OF THE CROATIAN GOVERNMENT
FOR THE MUNICIPALITY OF KNIN

Class : SI./95

No: 2198/20-01/95-1

Knin, December 18th 1995

Office of the President
Attn: Slobodan Lang
Advisor to the President

Dear Mr. Lang,

Since we cannot attend the meeting scheduled for today, this way I would like to inform you of the actions taken in order to provide aid to the elderly and abandoned persons in the municipality of Knin.

1. We stated the number of persons and carried out a survey related to their accommodation in the geriatric ward of the Knin general hospital. As they showed little interest, I believe that the hospital accommodation will be under-utilised.
2. The electricity system has been reinstalled and repaired in the following villages:

| | | |
|-----------|--------------------|-----------|
| Ljubač | / 34 inhabitants/ | |
| Vrbnik | / 58 inhabitants/ | |
| Zvjerinac | / 14 inhabitants/ | |
| Orlić | / 76 inhabitants/ | |
| Biskupija | / 87 inhabitants/ | |
| Plavno | / 121 inhabitants/ | aggregate |
| Golubić | / 144 inhabitants/ | |
3. "Čazmatrans" transport company will provide us with a bus, and thus enable us to launch a weekly passenger service between Knin and other villages.
4. Despite all our efforts and frequent visits of humanitarian organisations the forthcoming winter is bound to make those people's adverse living conditions even more difficult.

Yours truly,



-----C:\GLPLUS\in\RC2KNI.002-----

Wed 06.12.95 07:48:46 To: RC2ZAG from: rc2kni msg: ZAGM1223.001
X-GLPTO:RC2ZAG

ICRC KNI 05-12-1995
ICRC ZAG NR 1223

CC ICRC VOJNIC NR 395

URGENT

ATTN : ALEX/MED/CO-OP
RE : ALARMING SITUATION OF THE "MOST VULNERABLE" IN THE
FORMER SECTOR SOUTH

| | |
|---------------|---|
| 06. Dec. 1995 | |
| A TRAITER | POUR INFO |
| CO-MED | ABR/HCW LRC COOP INFO (2x) DP - - - + ABR |

PRIMO

ICRC KNIN IS BECOMING INCREASINGLY ALARMED WITH THE LACK OF
PROGRESS BEING MADE TO OPEN THE NURSING HOME FLOOR IN KNIN
HOSPITAL AND THE SUFFERING THAT THE IDENTIFIED "MOST VULNERABLE"
PERSONS ARE ENDURING.

SECUNDO

SINCE THE TRANSMISSION OF THE LIST OF THE (117, INCREASED TO 146
TO DATE) "MOST VULNERABLE" TO THE KNIN AUTHORITIES, THE
FEDERATION AND THE CROATIAN RED CROSS,

- 10 VULNERABLE PERSONS HAVE BEEN TAKEN TO KNIN HOSPITAL BY THE
FED TEAMS/AMB.
- 05 VULNERABLE PERSONS HAVE BEEN TAKEN TO KNIN HOSPITAL BY
LOCAL DOCTORS, THE UNCIVPOL ETC.
- 06 PERSONS HAVE SUBSEQUENTLY DIED IN KNIN HOSPITAL.
- 05 VULNERABLE IDENTIFIED PERSONS HAVE DIED IN THEIR HOMES.
- 142 VULNERABLE PERSONS CURRENTLY AWAIT BEDS IN THE HOME FOR
THE ELDERLY, OF WHICH 35 ARE CURRENTLY INPATIENTS AT KNIN
HOSPITAL.

TERTIO

BOTH ICRC AND THE FEDERATION HAVE TRANSPORTED DESPERATE CASES
TO KNIN HOSPITAL, THE LATTER BEING YET "OVERFLOWING" WITH SOCIAL
CASES AND IS NOT COPING WELL WITH THE INFLUX.

ICRC HAS NEVER BEEN DENIED ADMITTANCE TO THE HOSPITAL OF A
PATIENT, BUT THERE IS A FEAR THAT THE HOSPITAL WILL BE SATURATED
AND THAT FURTHER ADMISSIONS WILL BE BARRED.

THESE MOST VULNERABLE ARE ELDERLY AND WERE TAKEN TO THE
HOSPITAL ON A PRIORITY BASIS ACCORDING TO THEIR STATE OF
DESPERATION. THE ALARMING FACTOR IS THAT THESE PEOPLE ARE
SUFFERING AND OFTEN DYING ALONE WITHOUT DIGNITY.

QUARTO

SINCE EVERY SINGLE STEP HAS BEEN TAKEN ON ICRC'S SIDE, WE DO
REQUIRE THAT THE CROATIAN AUTHORITIES COMPLY IMMEDIATELY WITH
THE AGREEMENT SIGNED IN ZAGREB REGARDING THE OPENING OF THE
NURSING HOME AND THAT CONSEQUENTLY THE MEANS AND STAFF BE MADE
AVAILABLE TO THE KNIN HOSPITAL AUTHORITIES.

WE EQUALLY DO REQUIRE THAT THE FEDERATION, ACCORDING TO THE
AGREEMENT SIGNED WITH THE CONCERNED AUTHORITIES, AMPLY GLOSS

SAVE LIFE

AS OPERATION "SAVE LIFE" IN THE PRESS, DO TAKE THEIR RESPONSIBILITIES REGARDING THE IMPLEMENTATION AND THE SUPPORT OF THE PROJECT.

QUINTO
ICRC KNIN REQUESTS ADVICE AND SUPPORT ON HOW TO BEST FACILITATE AN IMMEDIATE OPENING OF THIS HIGHLY NEEDED 100 BEDS. THANKS TO RELAY WITH FEDERATION INFORMING THEM THAT WE ARE - NOW - NOT ONLY IN THE "RED CODE" BUT THAT IT'S ALARMINGLY BLINKING.

THANKS FOR YOUR INDISPENSABLE INTERVENTION REGARDING THIS MATTER.

KD RGDS,
CARMEN
++++

CC : - CHRONO

NNNN





INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES
DELEGATION IN CROATIA

MEĐUNARODNA FEDERACIJA ORGANIZACIJA CRVENOG KRIŽA I CRVENOG POLUMJESECA
DELEGACIJA U HRVATSKU

REPORT: "SAVE LIVES" OPERATION DECEMBER 1995

Logistics & Relief

Distribution of the respective bilateral projects of the Danish and the Swedish RCs started in December. Croatian RC logistics facilities (warehouse, truck) in Zagreb and Knin are being used for the regional distribution. The micro-distribution has brought members of the Red Cross Movement (CRC, Federation, ICRC, Danish RC and Swedish RC) and two implementing partners of the ECTF (Equilibre and MPDL) together in Croatia for the first time. In order to co-ordinate field activities, the partners organised weekly meetings in Vojnić (Former Sector North) and in Knin (Former Sector South). Information regarding beneficiaries in each micro-locale is compiled at the CRC Branch offices. Branch warehouses are used by all mobile teams; the teams are obliged to provide the branches with distribution results. The daily challenge is presented by the unfavourable winter conditions, which make some areas completely inaccessible.

Distribution of goods (received in response to the Emergency Appeal) is on-going—as a supplement to the bilateral projects. In December, from the emergency stocks, the CRC distributed: 66,576 kg of food items; 9,658 kg of baby food; and 8,880 kg of hygiene articles. Emergency stocks are currently at: 58,406 kg of food; 9,971 kg of baby food; and 58 625 kg of hygiene items. Distribution will continue through the winter.

Shelter & Camp Management

Reconstruction of the Elderly Home in Petrinja is expected to be completed in January. The official opening ceremony will take place on 19 January 1996. Capacity is set at 180 beds, 100 of which will be available for the care of elderly remainees from the FSN; i.e. beneficiaries of Operation: Save Lives.

Social Welfare - Medical

Social Service was provided to beneficiaries in the former sectors North and South (FSNS) through the work of Mobile Teams (MT). An average of seven to eight MTs were out in the field on a daily basis, including Christmas Eve and New Year's Eve, searching for and assisting the most vulnerable in the remote villages of the FSNS. The MTs also took part in the micro-distribution of the respective bilateral programmes, under the umbrella of the local CRC branches.

Since the MTs began their work on 06 November 1995 and through to 13 January 1996, 918 visits were carried out and 2,237 persons were assisted. Of the 2,237, 9-10% are in need of institutionalisation, while 80% require medical and winter assistance to survive.



Since mid-December, Technical Teams (TT) in both sectors have been involved in winter assistance to those beneficiaries identified by the MTs as being in need of it. The TTs are responsible for journeyman work; i.e. small repairs on broken windows and doors and firewood preparation. (statistics will be available next month)

At the Geriatric Care department in the Knin hospital, there are 53 elderly people. In co-operation with the Social Service MTs, 18 beneficiaries in need of medical treatment were transported to the Knin hospital. Of the 55 people accommodated in Petrinja's Home for Elderly, 31 are there as a result of Operation "Save Lives". Patients in need of medical attention are forwarded to the Petrinja hospital. In co-operation with the Logistics Department, two institutions (Knin and Petrinja) were provided with sheets, blankets and eating sets. Furthermore, 10 sets of basic medical equipment (medical bag, stethoscope, otoscope, sphyngomanometer, examination lamp, transportable EKG) were dispensed to medical teams in the field.

The donation of the Austrian Red Cross (disinfectants, drugs, adult diapers and other consumable medical supplies) was distributed to Petrinja. Due to road closures, Knin's allotment of the donation was not delivered; it will be received on 08 January 1996.

In co-operation with WHO, a one month's supply of insulin and diabetic supplies for 10 beneficiaries in the Former Sector North was provided by the Federation.

PROBLEMS ENCOUNTERED

While the security of the remaining population in the former Sector South has improved as a result of increased police presence, the situation in former Sector North has deteriorated. The Mobile Teams report that burning of houses, looting, threatening conduct by soldiers still occur on a regular basis in that area.

Some areas - Dvor, Kostajnica, Donji Lapac, Gračac - are difficult to access due to poor road conditions and were restricted until recently due to security reasons. As a result, the needs of the population in those areas have been unable to be addressed adequately, and in some cases, not at all.



MEDICAL CARE WITHIN THE SAVE LIVES OPERATION PROPOSAL

1. SOCIAL WELFARE CRITERIA

- person living in remote area
- living alone ?
- low or no income

2. CATEGORIES OF BENEFICIARIES QUALIFYING FOR MEDICAL CARE:

A) HOT (RED)

- Emergency cases: a) emergency transportation (stroke, cardiac infarct, renal insufficiency, acute psychosis, etc.)
 b) specialist check up (susp. tumours, cardiac diseases, diabetes, TBC, etc.)
- Action: a) emergency evacuation to the hospital (hospitalisation) & referring to the responsible physician
 b) referring to the responsible physician, referrals and therapy: laboratory, RTG, medication, specialist check up
- Taken by: Medical Field Officer (co-ordination)
 Responsible physician from PHCU (referrals and prescriptions)
 Ambulance (transportation)

B) ATTENTION (YELLOW)

- Cases: All chronicle cardiac, renal, gastric diseases, acute infections, open wound,
 bed-ridden, etc.
- Action: Regular visits (within 2 months)
 Medication, dressings, follow up (event. transportation for specialist check up)
- Taken by: Medical Field Officer (co-ordination)
 IFRC Doctor in team (info to the responsible physician)
 Ambulance (transportation)

C) COLD (BLUE)

- Cases: various: rheumatism, cataract, sight difficulties, mobility difficulties,
- Action: to be referred by social teams if medical attention is required (yellow - red)



From: MEDICAL DEPARTMENT

Subject: FORMER SECTORS NORTH AND SOUTH -
BENEFICIARIES & COMMUNITY ASSESSMENT

Date: 01/02/97

| | FSN | FSS |
|---------------------------------|-----------------------|----------------------|
| NO. MEDICAL CASES-BENEFICIARIES | 972 | 1411 |
| (provided with med.assistance) | (19/06/96 - 01/02/97) | (19/02/96- 01/02/97) |
| TOTAL= 2383 | | |

DIAGNOSIS:

| | | |
|--|-----|-----|
| Hypertension | 419 | 462 |
| Cardiac diseases | 126 | 155 |
| Pulmonary diseases | 108 | 131 |
| Rheumat./Orthopaedic | 189 | 381 |
| Diabetic patients | 58 | 67 |
| Neurological (brain strokes, epilepsy, parkinsonism etc.) | 71 | 81 |
| Hearing & eight problems | 59 | 69 |
| Psychiatry (psychosis,alcoholism, dementia) | 56 | 76 |
| Gastric diseases | 58 | 66- |
| Urinary & genital diseases | 63 | 78 |
| Insuff. blood circul.(thromb.,ulc cruris) | 74 | 82 |
| Carcinoma (various) | 29 | 42 |

(* significant number of patients suffer from two or more mentioned diseases)

NO. CASES REFERRED BY:

| | | |
|---------------|-----|-----|
| MSST | 40% | 40% |
| OTHER NGO | 25% | 35% |
| PHCU - DOCTOR | 35% | 25% |

NO. OF MED. ASSISSTANCE -

| | | |
|--------------------------------|-----------------------|---------------------|
| TOTAL= 3877 | 1621 | 2256 |
| | (19/06/96 - 01/02/97) | (19/02/96-01/02/97) |
| HOME VISITS = 2681 | 1024 | 1657 |
| TRANSPORTATION(various) = 1196 | 597 | 599 |

NO. OF GIVEN MED. ATTENTION-

| | | |
|-------------|------|------|
| TOTAL= 6125 | 2553 | 3572 |
|-------------|------|------|



MEDICAL STAFF IN SAVE LIVES OPERATION AND THEIR DUTIES:

1. MEDICAL FIELD OFFICER

Co-ordinate work of medical staff involved in the operation by producing weekly plan in co-operation with SWD and responsible physicians from PHCU. Organising all necessary check ups for red and yellow category. Compiling and analysing lists of beneficiaries in medical care.

Responsible to: Project co-ordinator
 Programme co-ordinator

2. DOCTOR IN MOBILE TEAM

Joining one of the SW teams (according to list of medical priorities) with exception of FIRST visit to unknown area (priority - triage).

In charge of regular (yellow, blue) follow ups (triage, check up, medication).

Identifying cases requiring attention or emergency care.

Responsible to: Medical Field officer

3. RESPONSIBLE PHYSICIANS

In close co-operation with field officer : ordering transportation, exam referred patients, ordering therapy, referrals, performing home visits

Responsible to: Medical Field officer





Republic of Croatia
Ministry of Internal Affairs
Police Sector

No: 511-01-12-413/96

Zagreb, January 4th 1996

Office of the President
Advisor to the President for Humanitarian Issues
Slobodan Lang, M.D.

Dear Sir,

With regard to the implementation of the action "SAVE LIFE", we would like to inform you that the Ministry of Internal Affairs has been meeting its obligations within co-ordinated efforts to extend aid to the population in the liberated areas of the Republic of Croatia.

Related to your letter of December 22nd 1995, we can provide you with the following information:

- our Police Departments of Split-Dalmatia, Šibenik, Zadar-Knin, Karlovac, Lika-Senj and Sisak-Moslavina, as the constituting units of this Ministry, have been fulfilling operational tasks in the area where the action is implemented.
- we have been fulfilling our tasks since the beginning of the "Storm" campaign. The presence of police officers in the liberated areas has been manifested in constant patrolling. We have protected the lives and possessions of our citizens, prevented the violations of public order and performed other kinds of police work.
- we have co-operated with the local authorities and humanitarian organisations active in those areas, and assisted them with the implementation of the action "SAVE LIFE".

The Ministry of Internal Affairs has contributed to the implementation of the action by considerably improving public safety in the whole area.

With respect,





Republic of Croatia
County of Sisak and Moslavina
Prefect

Class: 815-01/96-01/02
Entry no: 2176-96-1

Sisak, January 18th 1996

Republic of Croatia
Office of the President
Slobodan Lang, M.D.
Advisor to the President for humanitarian issues

Reference : Accommodating abandoned persons in the
liberated area of the County of Sisak and Moslavina

Immediately following the "Storm" campaign, the Serb leadership organised the departure of the Serb population from the territory of Banovina. There were 1600 persons, most of them elderly, who left the convoys and expressed their wish to remain in Croatia.

Their temporary accommodation in schools, old people's homes and similar institutions was organised by the County Office for Labour, Healthcare and Social Welfare and the Public Services Department, in co-operation with the mayors and local civil leaders in the liberated areas, the Social Service Centre, the Office for Displaced Persons and Refugees and the Red Cross.

The Public Services Department, together with the County Office for Labour, Healthcare and Social Welfare and the Team for Psychological and Social Aid have managed to put up about forty ill, bed-ridden and old persons in the old Petrinja hospital. The rest of the old population will be taken care for / housing, humanitarian aid etc./ by the Social Service Centre and the Red Cross.

The Red Cross has delivered humanitarian aid on four occasions, and it has also taken part in carrying out the survey on the basis of which the elderly were put up in the Petrinja old people's home.

As instructed by the State Fund for Social Welfare, the Social Service Centre has carried out a survey, with an aim to state the total number of the old and establish the social standing of those in need of accommodation. The population surveyed received financial aid at the amount of 200,00 HRK. Almost all those persons possess required documents ("domovnica" and identification papers), so that the provisions of the Law on Social Welfare will apply to them, as well as to all other persons in need.

The Red Cross branches in Sisak, Petrinja and Glina should be equipped with vehicles, while the number of employees in social service centres should be increased and the centres themselves financially supported.

Yours truly,



Prefect of the County of Sisak and Moslavina

SAVE LIFE



Republic of Croatia
Ministry of Foreign Affairs
Office for International Law, Human Rights,
Ethnic Minorities and Emigration
Human Rights Department

Ministry of Defence
Ministry of Internal Affairs
Ministry of Justice
Ministry of Administration
Ministry of Labour and Welfare
Government's Office for Displaced Persons and Refugees

Reference : Latest report of the UN Secretary General on the state of human rights in the liberated areas of the Republic of Croatia

We are submitting the latest report of the UN Secretary General, given on February 14th 1996, regarding the state of human rights in the liberated areas of the Republic of Croatia. The report was done in keeping with the Presidential statement of January 8th 1996, which instructed the Secretary General to inform the Security Council of the measures undertaken by the Croatian Government concerning the Resolutions 1009 (1995) and 1019 (1995).

The report deals with the period from the beginning of December 1995, to the end of January 1996. In a few instances it refers to the Croatian Government's Report on the implementation of the Security Council Resolution 1019 (1995), which had been submitted to the General Secretary.

In general, the Report is favourable for Croatia. Vital to the Report is the statement made by Mr. Ghali that the cases of the violation of human rights observed in the last two months in the former sectors in Croatia were significantly reduced in number, compared to the period immediately after last summer's military operations. (item 39)

The Croatian Government was commended for its efforts put into meeting the needs of the elderly Serbian population for humanitarian aid, and the legal measures introduced in order to protect the human rights of the citizens of Croatia.

Since these initiatives have produced such a favourable impression, we believe that this Report will influence the Security Council to refrain from further condemnation of Croatia related to the state of human rights and even remove this issue from its agenda.

On the other hand, we should neither overlook nor underestimate some unfavourable judgements presented in the report. They are related to the insufficient presence of the Croatian police forces in the former three Sectors, the differences between the number of the cases of murder and the breach of human rights presented in the reports made by the UN observers and those made by the Croatian Government (most of these cases were neither investigated nor sent for trial), the problems the Serbian population had with receiving humanitarian aid, the difficult situation in Kupljensko etc.

In spite of the fact that this report is likely to bring about a release of the pressure exerted on Croatia by the Security Council, some of its parts lead us to the conclusion that international humanitarian and human rights organisations will continue to hold their attention on Croatia.

Therefore, I strongly recommend that the competent Ministries should continue with observing the protection of human rights, especially in the liberated areas, collecting relevant data and presenting them when required.

This way we would like to extend our thanks to those who participated in the compiling of the Government's Report, which was the basis of the latest Mr. Ghali's Report.

Yours truly,



mr. Dubravka Šimonović
načelnica odjela i
savjetnica ministra

D. Šimonović





EUROPEAN COMMISSION
EUROPEAN COMMUNITY HUMANITARIAN OFFICE
ECHO - Croatia
Zagreb

The European Community Humanitarian Office - ECHO involvement in the "Save lives" operation

Since 1992, the European Community Humanitarian Office /ECHO is present in the area as the major key donor to the Republic of Croatia, until 31st of May 1996 through the European Community Task Force /ECTF and as from 1st June 1996 directly as ECHO.

It is ECHO policy to be the first one on the spot in order to ease the sufferings of the needy population.

At the time of the "Storm" action in Croatia, August 1995, the European Community Task Force/ECTF was on behalf of the European Union and ECHO responsible for and implementing the humanitarian assistance in Croatia. ECTF rapidly responded on the humanitarian crisis which emerged after the "Storm" operation as well as met the requests addressed from the Croatian Red Cross concerning the food assistance to the area.

Indeed the "Storm action" caused a massive flight of most Serb population living in the area. However a significant number of people remained in dispersed areas, isolated mainly because of their old age and sickness. The two areas were divided in North and South and ECHO intervened with two NGOs, already active in Croatia, respectively "Equilibre" and MPDL.

It also has to be underlined that at that time the ECTF in coordination with the Croatian Office for Displaced Persons and Refugees/ODPR was responsible of providing food to refugees and displaced persons in the non-occupied areas of the Republic of Croatia.

Soon after the military operation was finished, the Croatian Red Cross opened local offices in the area liberated by "Storm" at that time UNPA Sectors North and South, and requested ECTF supported by ECHO, for food assistance.

The response was rapid - the first food assistance was sent already on 16 August 1995 to Drmis (South) as well as on 21st August to Sunja (North). After the complete net of Red Cross Offices was spread in the area, the complete area was covered and included in the Direct Food Aid assistance.



The ECHO funded psycho social NGOs "Oxfam" and "HelpAge" were present in the area, one with counselling centres in Vojnic, Vrhovine and Knin, while "HelpAge", supported by UNHCR offered the assistance to the acute needs of elderly who stayed in the Sector South.

When the coordination for the "Save live" operation was established, ECTF/ECHO supported it and joined it.

The ECHO support for the operation targeted to help elderly Serb remainees was focused in providing two mobile teams capable to reach elderly and abandoned beneficiaries.

The first "MPDL" and "EquiLibre" contract for the support of the "Save live" operation covered the period from 1st December 1995 until 31st March 1996.

These contracts were renewed according to the ECHO budget period in order to maintain the continuity of the action which is now still ongoing.

At the beginning, two "MPDL" and "EquiLibre" teams were monitoring as well as implementing the micro-distribution of the Red Cross parcels (Swedish Red Cross at the North, Danish Red Cross in the South) to the most vulnerable individuals, mainly elderly remainees in both former Sectors.

These deliveries were at the beginning made by 4x4 vehicles due to the bad road conditions and isolation of the villages from the main road and inhabited places, which means the each parcel was and still is taken to the doorstep.

As from 1st May 1996, three teams of monitors by each organisation were set up. ECHO financial support to these NGOs for carrying out these specific operation until 31st March 1997 is in total of ECU 689.400 (approx. 1,378 million German marks.).

Zagreb, 10 February 1997



REPORT ON THE IMPLEMENTATION OF THE ACTION "SAVE LIFE"

This October the International Federation of Red Cross and Red Crescent /IFRC/ initiated a humanitarian action to aid the population found in the liberated areas of Croatia. The Croatian Red Cross /CRC/ joined the action which was entitled "Surviving the Winter".

On the basis of the questionnaire "The Quality of Life of the Old and Abandoned ", CRC and its local branches, especially those from the Counties of Zadar and Knin, Sisak and Moslavina and Karlovac, carried out a survey of the population found in the liberated areas, together with the Ministry of Labour and Welfare and the State Fund for Social Welfare.

The stated institutions were also assisted by the CRC branches from, Zadar, Obrovac, Šibenik, Drniš, Sinj, Knin, Biograd, Benkovac, Ozalj, Vojnić, Sisak Dvor, Jastrebarsko, Vrginmost Duga Resa and Slunj.

The collected data was a basis for providing medical, social and humanitarian aid. The results of the survey indicated that about 20 percent of the population, being old ill or infirm, was unable to take care of themselves, so that they were accommodated in the Petrinja old people's home and a ward of the Knin hospital. Those who remained in their homes are regularly provided with humanitarian and other kinds of aid by the Red Cross and by so called "mobile teams" of IFRC, ICRC and ECTF.

Humanitarian aid for these areas is provided through IFRC by the Danish and Swedish Red Cross. The beneficiaries are :

- the population found on the territories of Banovina, Kordun, Lika and Zagora after their liberation
- refugees (mostly from the area of Banja Luka) who were residing in deserted houses
- returnees

The action is expected to last from December 1st 1995 to March 31st 1996.

The action deals with distributing single food packages, flour and hygienic family packages.

Four distributions of food packages with flour have been planned /20.000 packages and 160.000 kilos of flour/, as well as one distribution of hygienic packages /20.000 packages/.



Contents of the food package

| | |
|---------------|---------|
| Sugar | 1 kg |
| Oil | 1 l |
| Tinned cheese | 300 gr |
| Pasta | 500 gr |
| Salt | 200 gr |
| Yeast | 7x11 gr |
| Detergent | 400 gr |
| Soap | 200 gr |

Contents of the hygienic package

| | |
|--------------------|------------|
| Toilet paper | 4 rolls |
| Soap /100 gr/ | 2 bars |
| Shampoo /250 ml/ | 2 packages |
| Sanitary napkins | 20 pieces |
| Toothpaste /75 ml/ | 1 tube |
| Detergent | 3 kg |

Since there are about 35.000 people in need of humanitarian aid in Kordun, Banovina, Lika and Zagora, the estimated monthly amounts of the bilateral programme have proved to be insufficient for meeting their requirements. Moreover, distributing humanitarian aid to returnees was anticipated.

Therefore, in co-operation with ICRC and IFRC, it was demanded from ECTF to provide aid for 15. 000 people not provided by the programme, which they accepted.

We have been informed that ECTF is bringing food directly to the storehouses of CRC. Most CRC branches have undertaken to distribute food packages and flour into remote villages and settlements, while the other kinds of food are distributed in towns. It is important to point out that the "mobile teams" of the above mentioned international organisations have been involved with the distribution, aided by the representatives of local CRC branches.

The secretaries of local CRC branches are charged with contacting CRC administrators and arranging the arrival of the mobile teams that CRC is in direct contact with : Equilibre, MPDL /ETCF monitors for food programmes/ and the Danish or Swedish Red Cross.

During the course of the action, CRC holds regular meetings with the ICRC and the IFRC, in order to co-ordinate and control the implementation of the action.



LIST OF PARTICIPANTSInformation meeting, April 9, 1997

| | | |
|-------------------------|-------------|---|
| Embassy of | AUSTRIA | Mr. Andreas Stadler (Deputy to Ambassador) |
| | FRANCE | H.E. Mr. J.J. Gaillarde Ms. Natacha Andonovska (Attache for hum. affairs) |
| | GREECE | H.E. Constantin Yerocostopoulos |
| | ITALY | H.E. Francesco Olivieri |
| | NETHERLANDS | H.E. Jozef Scheffers |
| | NORWAY | Ms. Toril Langlete (Second Secretary) |
| | GERMANY | H.E. Volker Haak Mr. Georg Olbrich (Third Secretary) |
| | U.S.A. | Mr. Robert Finn Ms. Martha Patterson (Political Officer) |
| | SWEDEN | H.E. Sune Danielsson Ms. Viktoria Flodh (Second Secretary) |
| | SWITZERLAND | H.E. Peter Troendle |
| | U.K. | Mr. Julian Metcalfe (Deputy Head Of Mission) |
| U.N.L.O. | | Ms. Nina Gardner (Humanitarian Affairs Officer) |
| ECHO | | Mr. Per Winter (Special Envoy to EC for the RC) |
| Office of the President | | Dr. Slobodan Lang (Advisor on Humanitarian Affairs) |
| CRC | | Dr. Nenad Javornik (Executive President) |
| | | Mrs. Silvana Radovanović (Save Lives Co-ordinator) |
| IFRC | | Mr. Sten Swedlund (Head of Delegation) Ms. Sabina Slottke (Social Welfare Co-ordinator) Dr. Mirela Dobrić (Repatriation Liaison Officer) Dr. Polona Bencun-Gumzej (Health Co-ordinator) Mr. Žarko Čižmar (Save Lives Co-ordinator) Mr. Stjepan Malović (Information Officer) |

INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES
DELEGATION IN CROATIA

Florijana Andrašeca 14, HR-10000 Zagreb, tel. 306-000, fax. 334-251



MINISTARSTVO RADA I SOCIJALNE SKRBI VLADE REPUBLIKE HRVATSKE

*MINISTRY OF LABOUR AND SOCIAL WELFARE OF THE GOVERNMENT OF
THE REPUBLIC OF CROATIA*

*i
and*

MEĐUNARODNA FEDERACIJA DRUŠTAVA CRVENOG KRIŽA I CRVENOG
POLUMJESECA, DELEGACIJA U HRVATSKOJ (u daljnjem tekstu Međunarodna Federacija)

*INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES,
DELEGATION IN CROATIA (further referred to as The International Federation)*

*i
and*

HRVATSKI CRVENI KRIŽ
CROATIAN RED CROSS

sklopili su sporazumno dana 27. studenog 1995 slijedeći

have stipulated, on the day of 27 November the following

SPORAZUM O HUMANITARNOJ SURADNJI

HUMANITARIAN CO-OPERATION AGREEMENT

Imajući u vidu teško stanje starih i nemoćnih osoba na područjima bivših sektora Sjever i Jug - Banovine, Like i Korduna, a uvažavajući napore Vlade republike Hrvatske za pružanje djelotvorne pomoći za njihovo preživljavanje u nadolazećim zimskim uvjetima, uvodno stranke suglasno utvrđuju da je predmet ovog Sporazuma HUMANITARNA SURADNJA između istih, a koja će se u naravi provoditi radi institucionalnog zbrinjavanja starih i nemoćnih osoba, u za tu svrhu hitno osiguranim kapacitetima.

Having in mind the critical condition of the elderly and abandoned persons in the area of the former Sectors North and South - Banovina, Kordun and Like, and respecting the efforts of the Government of the Republic of Croatia for providing an efficient help for their survival in the forthcoming winter conditions, the above-mentioned parties agree that the subject of this agreement is HUMANITARIAN CO-OPERATION, which will be realised through provision of institutional care for the elderly and abandoned persons in rapidly established facilities for that purpose.



Article 1.

Članak 1.

Humanitarna suradnja navedena u preambuli i uvodu ovog sporazuma ostvarit će se tako da će se starim i napuštenim osobama koje se nalaze na području bivših sektora Sjever i Jug - Banovine, Like i Korduna pružiti mogućnost odgovarajućeg smještaja u institucijama za skrb o starim i nemoćnim osobama, te da će se u tu svrhu hitno osigurati ukupno oko 200 kreveta, od čega oko 100 u osposobljeni Dom umirovljenika u Petrinji, a ostatak u Općoj bolnici u Kninu.

The Humanitarian co-operation stated in the preamble and introduction of this Agreement, will be realised in such a way so that the elderly and abandoned persons in the former Sectors North and South - Banovina, Kordun and Lika are given adequate accommodation in institutions for care of elderly and disabled persons, and urgently provide a total of 200 beds for that purpose, out of which 100 in the renovated Home for elderly in Petrinja and the rest in the hospital in Knin.

Stranke potpisnice ovog Sporazuma suglasne su da će stare i napuštene osobe koje budu smještene u Dom Umirovljenika u Petrinji i dio bolnice u Kninu dobiti odgovarajuću skrb i njegu.

The signatory parties agree that the elderly and abandoned persons that will be institutionalised in the Home for elderly in Petrinja and in a part of the hospital in Knin will receive adequate care and help.

Članak 2.

Article 2.

Međunarodna Federacija i Hrvatski Crveni križ će sukladno programima humanitarne pomoći te načelima Međunarodnog Pokreta Crvenog križa i Crvenog polumjeseca pomoći ostvarenje programa zbrinjavanja starih i napuštenih osoba, te će u to svrhu poduzeti slijedeće:

The International Federation and the Croatian Red Cross will in accordance with humanitarian help programmes and principles of the Red Cross and Red Crescent Movement, support realisation of the programme of help to the elderly and abandoned persons and therefore undertake the following:

a) djelomično financirati obnovu Doma umirovljenika u Petrinji, na temelju usklađene tehničke dokumentacije predložene od strane Republičkog Fonda socijalne zaštite i to u iznosu od 170,000.00 CHF,

a) partly finance the renovation of the Home for elderly in Petrinja, in agreement with the coordinated technical documentation submitted by the Republic Fund for Social Welfare, in the amount of 170,000 CHF,

b) dobiti medicinsku opremu i sitni inventar za skrb o starim osobama, na temelju specifikacije potreba predložene od strane Republičkog Fonda socijalne zaštite, u iznosu od 100,000 CHF,

b) provide medical equipment and supplies for care of 200 elderly persons, confirming the specification of needs submitted by the Republic Fund for Social Welfare, in the amount of 100,000 CHF,



c) u skladu s popisom neophodno potrebnog osoblja dostavljenog od strane Republičkog Fonda socijalne zaštite snositi cjelokupne troškove plaća, kao i doprinose za 25 osoba odgovarajućih kvalifikacija, koje će biti zaposlene putem Hrvatskog Crvenog križa za rad u Dornu umirovljenika u Petrinji i bolnici u Kninu, za vremenski period od 4 mjeseca, računajući od dana njihova zaposlenja, u iznosu od 70.000 CHF,

c) in agreement with the specification of the needed personnel, submitted by the Republic Fund for Social Welfare, finance the salaries as well as the contributions for 25 qualified staff, that will be employed by the Croatian Red Cross, and work in the Home for elderly in Petrinja and Knin hospital for a period of 4 months, starting from the day of employment, in the amount of 70.000 CHF.

d) dodatno osigurati do 4 socijalna djelatnika, koji će pružati pomoć korisnicima ustanova u Petrinji i Kninu u okviru Socijalnog programa Hrvatskog Crvenog križa.

d) additionally provide up to 4 social workers, that will provide assistance to the beneficiaries of the institutions in Petrinja and Knin, within the Croatian Red Cross Social Welfare Programme.

e) osigurati higijenske potrepštine u okviru tekućeg humanitarnog programa Međunarodne Federacije i Hrvatskog Crvenog križa za 200 osoba u razdoblju od 4 mjeseca.

e) provide hygiene items for 200 persons through the current humanitarian programme of the International Federation and the Croatian Red Cross, for a period of 4 months.

Članak 3 Article 3.

Stranke suglasno utvrđuju da je nositelj realizacije cjelokupnog projekta navedenog u Čl.1 ovog Sporazuma Ministarstvo rada i socijalne skrbi u suradnji s Međunarodnom Federacijom i Hrvatskim Crvenim križem.

All parties agree that the party responsible for the project realisation stated in Art.1 of this Agreement is The Ministry of Labour and Social Welfare, in co-operation with the International Federation and the Croatian Red Cross.

Ministarstvo rada i socijalne skrbi je suglasno da će se poduzeti sve ostale potrebne aktivnosti na razini Vlade Republike Hrvatske, te županijske i lokalne uprave, kako bi navedeni kapaciteti bili stavljeni u upotrebu u najkraćem mogućem roku.

The Ministry of Labour and Social Welfare agrees to undertake all other necessary activities at the level of The Government of The Republic of Croatia, county and local authorities, to put the mentioned capacities into use as soon as possible.

Ministarstvo rada i socijalne skrbi suglasno je, da će se poduzeti sve potrebne radnje kako bi se nakon isteka perioda od četiri mjeseca, osoblje neophodno za normalan rad Doma umirovljenika u Petrinji i dijela Kninske bolnice, u koje postojeće će biti smještene stare i nemoćne osobe, zaposlilo u okviru programa Republičkog Fonda socijalne zaštite.



The Ministry of Labour and Social Welfare agrees that all necessary activities and measures will be taken to provide that after expiration of the period of four months the needed qualified staff necessary for the normal functioning of the Home for elderly in Petrinja and part of the hospital in Knin is employed within the programme of the Republic Fund for Social Welfare.

Stranke su suglasne da će Međunarodna Federacija i Hrvatski Crveni križ imati pravo uvida u način odabira korisnika, koji će se odvijati u skladu s osnovnim načelima međunarodnog humanitarnog prava, te načelima Međunarodnog Pokreta Crvenog križa i Crvenog polumjeseca.

The parties agree that the International Federation and the Croatian Red Cross retain the right to inspect the selection of beneficiaries, which will be done in accordance with International Humanitarian Law and the basic principles of the Red Cross and Red Crescent Movement.

Članak 4.
Article 4.

Stranke su suglasne da će se osobama korisnicima Doma umirovljenika u Petrinji i dijela bolnice u Kninu pružati sva potrebna njega i skrb, kao i osigurati sva prava u skladu s postojećim propisima i Ustavom Republike Hrvatske, te načelima Međunarodnog humanitarnog prava, a posebice da će korisnici imati pravo na besplatnu medicinsku skrb i njegu neovisno o socijalnom, odnosno zdravstvenom osiguranju, odgovarajući broj obroka, pravo da po svojoj osobnoj volji napuste Dom umirovljenika ili bolnicu u Kninu u kojima borave, pravo na slobodan prijevoz u i iz Doma i bolnice u kojima borave, pravo na posjetu, kao i sva ostala građanska prava, uključivo i ona koja se odnose na njihovu privatnu svojinu.

The parties agree that the beneficiaries of the Home for elderly in Petrinja and part of the Knin hospital, will be given all the needed help and care and rights according to the existing regulations and Constitution of the Republic of Croatia, as well as the International Humanitarian Law, especially: free medical care regardless of their social or health insurance; a right to the adequate number of meals; to leave the Home for elderly or hospital in Knin on their free will; free transportation to and from the facility they are in; the right to be visited; and all other civil rights, including those concerning their private property.

Članak 5.
Article 5

Stranke su suglasne da će se provedba aktivnost navedenih u članku 2., te sva pitanja koja nisu utvrđena ovim Sporazumom rješavati zasebnim pravnim aktima, komplementarnim ovom Sporazumu.

The parties agree that all issues not regulated by this Agreement will be settled through additional legal documents, complementary to this Agreement.

Članak 6.
Article 6.

Ovaj Sporazum je sastavljen u šest istovjetnih primjeraka, i to na hrvatskom i engleskom jeziku, od čega svaka strana zadržava po dva primjerka.

This Agreement is made in six equivalent copies, in Croatian and English, with each party receiving two copies.



Članak 7.
Article 7

Stanke su ovaj Sporazum pročitale, te ga u znak pristanka potpisale i proglasile pravovaljanim s današnjim danom.

The parties have read this Agreement and placed their signature thereunder as a sign of consent. Consequently this Agreement becomes valid from the date of signature.

U Zagrebu, 27 studenog 1995.

Zagreb, 27 November 1995.

Ministarstvo rada
i socijalne skrbi

*Ministry of Labour
and Social Welfare*



Međunarodna Federacija
društava Crvenog križa
i Crvenog polumjeseca

*International Federation of Red
Cross and Red Crescent Societies*



Sten Swedlund
Šef Delegacije
Head of Delegation

Hrvatski Crveni križ

Croatian Red Cross



Dr. Nenad Javornik
Predstojnik
Executive President



OSOBNİ PODACI

| Red. br. | Prezime i ime | Usta- nova | Spol | God- ina | Nacionalnost | Vjera | Općina rođenja | Mjesto rođenja | Adresa stanovanja | |
|----------------------------------|------------------|---------------|------|-------------|--------------|-------------|-------------------|-------------------|-------------------|---------|
| | | | | | | | | | Ulica i broj | Telefon |
| Županija: 09 LIČKO-SENIŠKA | | | | | | | | | | |
| Grad: 5126 VRHOVINE | | | | | | | | | | |
| Naselje: 13064 DONJI BABIN POTOK | | | | | | | | | | |
| 1 | ČUDIĆ MIKA | 061 | Ž | 85 | SERB | PRAVOSLAVNA | TRUBINECA | ŠČEČARIV IZAJ | G.Š.POTOK 15 | |
| 2 | ČULAN MILO | 061 | M | 91 | SERB | PRAVOSLAVNA | VRHOVINE | DB.POTOK | DB.POTOK 97 | |
| 3 | ČULAN TRIFUN | 061 | M | 86 | SERB | PRAVOSLAVNA | VRHOVINE | DB.POTOK | D.BABIN POTOK 97 | |
| 4 | VUKMIRKOVIĆ MIKA | 061 | Ž | 89 | SERB | PRAVOSLAVNA | VRHOVINE | G.Š.POTOK | G.Š.POTOK 36 | |
| Naselje: 55891 RUDOPOLJE | | | | | | | | | | |
| 1 | ČVIĐIĆ MIRJANA | 061 | Ž | 56 | SERB | PRAVOSLAVNA | NOVI TRAVNIK | BOŠIČI | RUDOPOLJE 88 | |
| 2 | ČVIĐIĆ VASKOŠIJE | 061 | M | 54 | SERB | PRAVOSLAVNA | TRNLAC | BEŠILO BOŠIČI | RUDOPOLJE 88 | |
| 3 | IVANŠEVIĆ MARIJA | 061 | Ž | 58 | HRVAT | KATOLIČKA | ORLAJ | LUGAR | | |
| 4 | IVANŠEVIĆ PERKA | 061 | Ž | 88 | SERB | PRAVOSLAVNA | VRHOVINE | VRHOVINE | RUDOPOLJE 107 | |

Napuštene osobe (zdravstveno stanje)

| NAPUŠTENJA OSOBA | | | | | ZDRAVSTVENO STANJE | | | | | | |
|----------------------------------|------------------|---------|-------------------|---------|--|------------|----------------------------------|-------------------------|-----------------|------------|--|
| Red. br. | Prezime i ime | God-ina | Adresa stanovanja | | Popis bolesti | Ostrog-ama | Zdrav. potrebe Koje? | Prima/potrebni lijekovi | | Hrana pos. | |
| | | | Ulica i broj | Telefon | | | | Lijek | Ostali lijekovi | | |
| Županija: 09 LIČKO-SENIŠKA | | | | | | | | | | | |
| Grad: 5126 VRHOVINE | | | | | | | | | | | |
| Naselje: 13064 DONJI BABIN POTOK | | | | | | | | | | | |
| 1 | ČVIĐIĆ MIKA | 85 | G.Š.POTOK 15 | | BOLESTI ŽILARNOVA DUSEVNI BOLESTI OSTALE BOLESTI | N | POVRREMNO LIJEČNIČKI PRISLEDI | NEPOZNAT | D/D | N | |
| 2 | ČULAN MILO | 91 | DB.POTOK 97 | | OPALA MEXERIA SLABOVIDNOST OSTALE BOLESTI | N | STALNO LIJEČNIČKI PRISLED | NEPOZNAT | N/D | D | |
| 3 | ČULAN TRIFUN | 86 | D.BABIN POTOK 97 | | NEPOZNAT OSTALE BOLESTI | D | STALNO LIJEČNIČKI PRISLED | NEPOZNAT | N/D | D | |
| 4 | VUKMIRKOVIĆ MIKA | 89 | G.Š.POTOK 36 | | SLABOSTA POKRETNOST DVA RUKA RANJE U MOKU IMEDI STANJE BOLESTI ŽILARNOVA BOLESTI ŽILARNOVA | D | POVRREMNO LIJEČNIČKI PRISLED | NEPOZNAT | D/D | N | |
| Naselje: 55891 RUDOPOLJE | | | | | | | | | | | |
| 1 | ČVIĐIĆ MIRJANA | 56 | RUDOPOLJE 88 | | BOLESTI ŽILARNOVA | N | POVRREMNO LIJEČNIČKI PRISLED | NEPOZNAT | N/D | N | |
| 2 | ČVIĐIĆ VASKOŠIJE | 54 | RUDOPOLJE 88 | | BOLESTI ŽILARNOVA ŽILJAKO OBLJEVNE D | N | POVRREMNO | NEPOZNAT | N/D | N | |
| 3 | IVANŠEVIĆ MARIJA | 58 | | | BOLESTI ŽILARNOVA | D | POVRREMNO | NEPOZNAT | N/D | N | |
| 4 | IVANŠEVIĆ PERKA | 88 | RUDOPOLJE 107 | | OSTALI BOLESTI | N | POVRREMNO | NEPOZNAT | D/D | N | |
| NEPOSREDAVA | | | | | | | | | | | |

Napuštene osobe (ocjena ispitanika i prijedlog zbrinjavanja)

| NAPUŠTENJA OSOBA | | | | | Ocjena ispitanika | | | | | |
|----------------------------------|------------------|----------|-------------------|---------|------------------------------------|--|------------------------|--------------------------------------|---------|------------------|
| Red. br. | Prezime i ime | God. ina | Adresa stanovanja | | Prijedlog i želja za zbrinjavanjem | Služe li se ocjenom ispitanika - rođak soci. | Prijedlog zbrinjavanja | | | Odob. Svoj. Zbr. |
| | | | Ulica i broj | Telefon | | | Naselje | Dom | Bolnica | |
| Županija: 09 LIČKO-SENIŠKA | | | | | | | | | | |
| Grad: 5126 VRHOVINE | | | | | | | | | | |
| Naselje: 13064 DONJI BABIN POTOK | | | | | | | | | | |
| 1 | ČUDIĆ MIKA | 85 | G.Š.POTOK 15 | | ŽELI OSTATI U POSTOJEĆEM STANU | D- | | MOŽE OSTATI U POSTOJEĆEM OBJEKTU | N | N |
| 2 | ČULAN MILO | 91 | DB.POTOK 97 | | ŽELI OTIĆI U ZAJEDNIČKI SMJEŠTAJ | D- | | TRIEDA OSIGURATI ZAJEDNIČKI SMJEŠTAJ | N | N |
| 3 | ČULAN TRIFUN | 86 | D.BABIN POTOK 97 | | ŽELI OSTATI U POSTOJEĆEM STANU | D- | | IMO MOŽE OSTATI U POSTOJEĆEM OBJEKTU | N | N |
| 4 | VUKMIRKOVIĆ MIKA | 89 | G.Š.POTOK 36 | | ŽELI OTIĆI ČLANOVIMA OBITELJI | D- | | TRIEDA GA ODVESTI ČLANU OBITELJI | N | N |
| Naselje: 55891 RUDOPOLJE | | | | | | | | | | |
| 1 | ČVIĐIĆ MIRJANA | 56 | RUDOPOLJE 88 | | ŽELI OSTATI U POSTOJEĆEM STANU | D- | | MOŽE OSTATI U POSTOJEĆEM OBJEKTU | N | N |
| 2 | ČVIĐIĆ VASKOŠIJE | 54 | RUDOPOLJE 88 | | ŽELI OSTATI U POSTOJEĆEM STANU | D- | | MOŽE OSTATI U POSTOJEĆEM OBJEKTU | N | N |
| 3 | IVANŠEVIĆ MARIJA | 58 | | | ŽELI OSTATI U POSTOJEĆEM STANU | D- | | MOŽE OSTATI U POSTOJEĆEM OBJEKTU | N | N |
| 4 | IVANŠEVIĆ PERKA | 88 | RUDOPOLJE 107 | | ŽELI OSTATI U POSTOJEĆEM STANU | D- | | MOŽE OSTATI U POSTOJEĆEM OBJEKTU | N | N |

OFFICE DES NATIONS UNIES A GENÈVE

CF LES DROITS DE L'HOMME



UNITED NATIONS OFFICE AT GENEVA

CENTRE FOR HUMAN RIGHTS



Tél : +41 22 917 1234
Tél : +41 22 917 1234
Tél : +41 22 917 1234

Palais des Nations
CH - 1211 GENEVE 10

REF. N° :
(à remplir dans le message)

TO: Branko Ćulo
FROM: Saša Milošević, UNCHR, tel/fax: 176 - 704
SUBJECT: pomoć starijim osobama
DATE: 14 prosinac 1995

Postovani gospodine Ćulo,

po našem telefonskom dogovoru, obavještavam Vas da smo dobili informaciju da se u selima Vrhovine Gornje i Turjensko (Plitvice), nalazi nekoliko starijih osoba koje su, uslijed vremenskih nepogoda odsječene od svijeta te im je potrebna pomoć (hrana, ogrjev, lijekovi).

Nažalost nisam uspio stupiti u kontakt s gospodom Brajković iz Centra za socijalni rad u Gospiću - nitko se ne javlja na telefon.

Potvrđujem primitak faza kojim ste nam dostavili spiskove napuštenih, starijih osoba.

S poštovanjem,



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QUESTIONNAIRE



Data Processing Centre of the Republic's Fund for Pension and Disability Insurance - employees who have completed the input of data



Kaja Bakali', Adviser to the Minister of Labour and Social Welfare



REPUBLIC OF CROATIA
MINISTRY OF LABOUR AND SOCIAL WELFARE

QUESTIONNAIRE

ELDERLY AND ABANDONED PERSON'S QUALITY OF LIFE
(WRITTEN INFORMATION IN FULL DETAIL AND BLOCK LETTERS ONLY)

A - PERSONAL DATA

NAME AND SURENAME
PERSONAL IDENTIFICATION NUMBER
SEX M F
NATIONALITY
RELIGION
MUNICIPALITY AND PLACE OF BIRTH
PLACE OF RESIDENCE
CITY
SETTLEMENT
STREET AND HOUSE NUMBER
TELEPHONE

B - KEY FAMILY MEMBER (FOR THE ASSISTANCE)

SURENAME AND NAME
SEX M F
DATE OF BIRTH
PLACE OF RESIDENCE
CITY
SETTLEMENT
STREET AND HOUSE NUMBER
TELEPHONE

C - DEPARTED FAMILY MEMBERS

| | 1 | 2 | 3 | 4 |
|-------------------------------------|---|---|---|---|
| NUMBER | | | | |
| NAME AND SURENAME | | | | |
| SEX M F | | | | |
| NEXT OF KIN | | | | |
| TEMPORARY RESIDENCE | | | | |
| ANY CONTACT (YES - NO) | | | | |

QUESTIONNAIRE



SAVE LIFE**D - ABANDONED PERSON'S CURRENT SITUATION*****LIVING CONDITIONS (ENCIRCLE)***

| | | |
|-------|-------------|-------------|
| 1 | 2 | 3 |
| ALONE | WITH FAMILY | WITH OTHERS |

HOUSING CONDITIONS (ENCIRCLE)

| NO. | DESCRIPTION | ASSESSMENT | | |
|-----|-----------------|------------|------------|-----------|
| | | 1 GOOD | 2 BAD | 3 NONE |
| 1 | HOUSE CONDITION | 1 | 2 | 3 |
| 2 | HEATING | 1 | 2 | 3 |
| 3 | ELECTRICITY | 1 | 2 | 3 |
| 4 | WATER SUPPLY | 1 | 2 | 3 |
| 5 | TRANSPORTATION | 1 | 2 | 3 |
| 6 | COMMUNICATION | 1 | 2 | 3 |
| 7 | MEDIA | RADIO | TELEVISION | TELEPHONE |

HEALTH STATUS

DISEASE (WRITE IN):

REGISTERED - INSURED (ENCIRCLE) YES NO***MEDICAL NEEDS (ENCIRCLE)***

GIVE DESCRIPTION:

PERMANENTLY OCCASIONALLY

| | | |
|------------------------|-----|----|
| RECEIVING MEDICATION ? | YES | NO |
| MEDICATION REQUIRED ? | YES | NO |

(IF YES - STATE WHICH):

| | | |
|------------------------------------|-----|----|
| URGENT MEDICAL ASSISTANCE NEEDED ? | YES | NO |
|------------------------------------|-----|----|



D - ABANDONED PERSON'S CURRENT SITUATION (CONTINUED)

SOCIAL STATUS

ANY INCOME ? YES NO

(IF YES STATE WHICH):

ENTITLED TO PENSION? YES NO

(IF YES - WRITE IN THE AMOUNT AND COMMENTS):

PSYCHOSOCIAL STATUS

EXPOSED TO:

- | | |
|-------------|--------------------|
| TORTURE | 1 - ONCE |
| | 2 - MORE THAN ONCE |
| THREATENING | 1 - ONCE |
| | 2 - MORE THAN ONCE |
| ASSAULT | 1 - ONCE |
| | 2 - MORE THAN ONCE |
| ROBBERY | 1 - ONCE |
| | 2 - MORE THAN ONCE |

SUGGESTION AND WISH FOR CARE

1. WISHES TO REMAIN AT PRESENT PLACE OF RESIDENCE
2. WISHES TO BE VISITED
3. WISHES TO MOVE SOMEWHERE
4. WISHES TO MOVE IN WITH THEIR FAMILY

CITY: SETTLEMENT

5. WISHES TO BE ACCOMMODATED

SETTLEMENT HOME HOSPITAL

6. UNABLE TO SUGGEST



SAVE LIFE**E - SOCIAL WORKER ASSESSMENT (ENCIRCLE AND DESCRIBE)*****IN AGREEMENT WITH EXAMINEE'S ASSESMENT***

YES

NO

(IF NOT, STATE WHY):

SUGGESTION - TYPE OF CARE (ENCIRCLE)

1. ABLE TO STAY WHERE THEY ARE
2. IN NEED OF PERMANENT ASSISTANCE
3. TO BE MOVED WITH NEIGHBOURS
4. TO BE MOVED WITH FAMILY
5. TO BE ACCOMODATED

SETTLEMENT

HOME

HOSPITAL

F - THERAPY***FIT FOR INDEPENDENT LIVING (ENCIRCLE)***

YES

PARTIALLY

NO

MEDICAL NEEDS - REQUIRED

- | | | |
|--------------------|-----|----|
| 1. REGISTER/SECURE | YES | NO |
| 2. KEEP FILES | YES | NO |
| 3. CURE | YES | NO |
| 4. MEDICATION | YES | NO |
| 5. URGENT CARE | YES | NO |

HOUSEHOLD CONDITIONS - REQUIRED

- | | | |
|-----------------|-----|----|
| 1. INCOME | YES | NO |
| 2. FOOD | YES | NO |
| 3. CLOTHING | YES | NO |
| 4. HEATING | YES | NO |
| 5. HOUSE REPAIR | YES | NO |

FAMILY REUNIFICATION

- | | | |
|----------------|-----|----|
| MESSAGES: | YES | NO |
| REUNIFICATION: | YES | NO |



F - THERAPY (CONTINUED)

ENTITLED TO:

| | | | |
|----|-----------------------------|-----|----|
| 1. | CERTIFICATE OF CITIZENSHIP | YES | NO |
| 2. | PENSION | YES | NO |
| 3. | SOCIAL AND HEALTH INSURANCE | YES | NO |
| 4. | SAFETY | YES | NO |
| 5. | | | |
| 6. | | | |
| 7. | | | |

NOTES/SUGGESTIONS:

G - SETTLEMENT ASSESSMENT (ENCIRCLE)

| | | | |
|----|------------------------|-----|----|
| 1. | PUBLIC TRANSPORTATION | YES | NO |
| 2. | SUPPLY | YES | NO |
| 3. | ELECTRICITY - LIGHTING | YES | NO |
| 4. | SAFETY | YES | NO |
| | POLICE PRECINT | YES | NO |
| | REGULAR PATROL | YES | NO |
| | OCCASIONAL PATROL | YES | NO |

NOTES:

H - REQUIRED INTERVENTION (ENCIRCLE)

- 1. MEDICAL (HEALTH CARE)
- 2. SAFETY (SAFETY IMPROVEMENTS)
- 3. SOCIAL CARE (SOCIAL CARE IMPROVEMENTS)
- 4. DISPLACED PERSON'S OFFICE (FAMILY REUNIFICATION)
- 5. CROATIAN RED CROSS (MESSAGES, ASSISTANCE)
- 6. INTERNATIONAL RED CROSS (MESSAGES, ASSISTANCE)

PLACE:

EXAMINER:

DATE:

SIGNATURE:





REPUBLIC OF CROATIA
MINISTRY OF LABOUR AND SOCIAL WELFARE

Mr/Ms: _____

Address: _____

Person: _____

REFUSES TO ACCEPT CARE DURING THE WINTER AS SUGGESTED BY THE REPRESENTATIVES OF CROATIAN WELFARE INSTITUTIONS, ENCLOSED PLEASE FIND THE CORRESPONDING STATEMENT. THIS IS TO INFORM YOU OF POSSIBLE HEALTH OR SOCIAL CONSEQUENCES DUE TO THE REFUSAL IN QUESTION.

TAKING THIS INTO ACCOUNT, WE ASK YOU TO ACT ACCORDINGLY.

Signature: _____

Place and Date: _____





MESSAGE TO A FAMILY MEMBER

NAME AND SURENAME: _____ ADDRESS: _____

SOCIAL WORKER: _____

SOCIAL CARE CENTRE ADDRESS: _____

TEL/FAX: _____

DEAR:

I AM CONTACTING YOU TO INFORM YOU OF MY SITUATION AS WELL AS NEEDS.
I WANT TO KNOW ALL ABOUT YOU, YOUR SITUATION AND WHERE YOU ARE. REPLY AS
SOON AS POSSIBLE AND SEND ME YOUR ADDRESS.

I ALSO WANT TO TELL YOU THE FOLLOWING:

Signature: _____

Place and Date: _____

LETTER*(IN CASE A PERSON REFUSES TO ACCEPT PROPOSED CARE OR ASSISTANCE)*

Mr/Ms (SOCIAL WORKER) _____

EXPLAINED THE NEED TO MOVE TO ONE OF THE FOLLOWING ACCOMODATIONS:

1. PENSIONERS' HOME
2. HOSPITAL
3. FAMILY MEMBER'S RESIDENCE
4. OTHER:

STATEMENT

- I AM VERY WELL INFORMED OF GRAVE CONSEQUENCES MY STAY POTENTIALLY COULD HAVE CONCERNING MY HEALTH AND SOCIAL STATUS.

I DECLINE ANY PROPOSED ACCOMMODATION OR CARE DUE TO THE FOLLOWING REASONS:

- I TAKE FULL RESPONSIBILITY FOR MY DECISION AND POSSIBLE CONSEQUENCES, WISHING TO INFORM THE FOLLOWING PERSON OF THE SITUATION:

NAME AND SURENAME: _____

ADDRESS: _____

Place and Date: _____ Signature: _____

NAME AND SURENAME: _____

MUNICIPALITY: _____

SETTLEMENT: _____

STREET AND HOUSE NUMBER: _____

TELEPHONE NUMBER: _____





STATEMENT
OF A KEY FAMILY MEMBER

KEY FAMILY MEMBER

KEY FAMILY MEMBER
PERSONAL IDENTIFICATION NUMBER
SEX M F
DATE OF BIRTH

PLACE OF RESIDENCE

PLACE OF RESIDENCE
CITY
SETTLEMENT
STREET AND HOUSE NUMBER
TELEPHONE

ABANDONED PERSON’S PERSONAL DATA

KEY FAMILY MEMBER
PERSONAL IDENTIFICATION NUMBER
SEX M F
DATE OF BIRTH

PLACE OF RESIDENCE

PLACE OF RESIDENCE
CITY
SETTLEMENT
STREET AND HOUSE NUMBER
TELEPHONE

TO BE FILLED IN BY KEEN FAMILY MEMBERS SEEKING INFORMATION ON AN ABANDONED PERSON.

THIS STATEMENT IS TO BE FORWARDED TO THE FOLLOWING ADDRESS:

REPUBLIC’S FUND FOR PENSION
AND DISABILITY INSURANCE
10000 ZAGREB, 7, GJURE DEŽELIĆA STREET
FAX: 01/434 101; 412 011

PARTICIPANTS IN THE OPERATION EMPLOYEES AND ORGANIZATIONS

LIST OF ORGANIZATIONS PARTICIPATING IN THE OPERATION

GOVERNMENT AND STATE ORGANIZATIONS

President's Office
Ministry of Labour and Social Welfare
Republic's Fund for Pension and
Disability Insurance
Ministry of Health
Ministry of the Interior
Ministry of Foreign Affairs
Office for Displaced Persons and
Refugees
Office for War Victims
Parliament Committee for Human
Rights and Ethnic Minority Rights

RED CROSS AND RED CRESCENT

Croatian Red Cross
IFRC
ICRC
Danish Red Cross
Swedish Red Cross
Austrian Red Cross

INTERNATIONAL ORGANIZATIONS

UNHCR
UNCRO
UNCIVPOL
UNICEF
ECHO
ECTF
ECMM
EQILIBRE
MPDL
Humanitarian Section of Italian
Embassy
HELPAGE
Oxfam

OTHERS

ENEL - Split
PULSAR - Split
CARITAS
MERHAMET
SLAVONSKA BANKA - Osijek
IBL d.o.o. - Osijek



Employees with Croatian Red Cross

No. Surname and name Professional / volunteer

Biograd n/m

1 Dujmović Ljubica volunteer
2 Eškinja Ivan professional
3 Kulaš Branka professional
4 Tolja Nediljko volunteer

Bjelovar

5 Bemšić Josip professional
6 Blažeković Ratimir professional
7 Čabrić Zvonimir volunteer
8 Farkaš Đurdica volunteer
9 Grgić Svjetlana volunteer
10 Hrga Ruža volunteer
11 Jurković Ilija volunteer
12 Kirinčić Senka professional
13 Kovačević Katica professional
14 Mrak-Jelić Mirjana volunteer
15 Prka Mira volunteer

Čakovec

16 Karaga Zlatko volunteer
17 Labazan Petra volunteer
18 Lazar Siniša volunteer
19 Lesinger Rudolf professional
20 Majnarić Goran volunteer
21 Paler Svjetlana professional
22 Peras Marija volunteer
23 Špoljarić Nada professional

Daruvar

24 Pupovac Otilka professional
25 Slivar Vlado professional
26 Tuček Vlasta volunteer

Drniš

27 Badžim Vinka professional
28 Čulina Biserka professional

Glina

29 Rožanković Ivo professional
30 Sućec Mato professional

Gospić

31 Maljković Radmila professional
32 Tomičić Ankica professional

Hrvatska Kostajnica

33 Došen Davorka professional
34 Ikšić Vladimir professional

Ivanić Grad

35 Antolković Štefica volunteer
36 Duh Ivan volunteer
37 Kunovec Vesna volunteer
38 Lovrečić Vladimir volunteer
39 Lovrečić Zdenka volunteer
40 Mahmet Vlatka volunteer
41 Šelaj Borivoje volunteer
42 Topić Mira volunteer

Karlovac

43 Rožman Boris professional
44 Malčak Jadranka professional
45 Trgovčić Jadranka professional
46 Starčević Sonja professional
47 Holjević Bernarda professional
48 Bogović Renata professional
49 Vučković Ana professional

Knin

50 Čulina Biserka professional
51 Grgić Tanja professional

Koprivnica

52 Janković Zdravko professional
53 Remenar Čedomir professional
54 Šmić Josip volunteer
55 Vrabelj Slavko volunteer
56 Miletić Zoran volunteer

Križevci

57 Puček Stjepan professional
58 Štefanek Dragutin professional
59 Puček Igor volunteer
60 Novosel Nikola volunteer
61 Mikulčić Ivica volunteer
62 Panić Mirko volunteer
63 Jakrlin Marijan volunteer

Kutina

64 Bučar Marija professional



SAVE LIFE

| | | |
|----|---------------------|--------------|
| 65 | Filipović Krunoslav | professional |
| 66 | Mlinar Dubravka | volunteer |
| 67 | Špičak Đurdica | professional |
| 68 | Zeman Katica | professional |

Ludbreg

| | | |
|----|-----------------|--------------|
| 69 | Horvat Stanko | professional |
| 70 | Smolčić Petar | volunteer |
| 71 | Novosel Darinka | volunteer |
| 72 | Kišček Štefica | volunteer |
| 73 | Zdelar Jasenka | volunteer |

Nova Gradiška

| | | |
|----|-------------------|--------------|
| 74 | Pavlović Franjo | professional |
| 75 | Čar Almira | professional |
| 76 | Mačević Slavica | volunteer |
| 77 | Pejaković Marija | volunteer |
| 78 | Lalić Sandra | volunteer |
| 79 | Svilar Zdravka | volunteer |
| 80 | Figurić Milica | volunteer |
| 81 | Tomašić Ksenija | volunteer |
| 82 | Maga Leonida | volunteer |
| 83 | Štanfar Jasminka | volunteer |
| 84 | Krizmanić Stjepan | volunteer |

Novska

| | | |
|-----|----------------------|--------------|
| 85 | Banović Darko | volunteer |
| 86 | Beg Josip | volunteer |
| 87 | Bjelanović Blaž | volunteer |
| 88 | Blažević Tomo | volunteer |
| 89 | Bradašić Jasna | volunteer |
| 90 | Bradašić Sanja | volunteer |
| 91 | Čumurdžić Ana | volunteer |
| 92 | Dvoržak Silvija | volunteer |
| 93 | Hadžiomerović Ankica | volunteer |
| 94 | Ilić Slavka | volunteer |
| 95 | Jelinek Josip | volunteer |
| 96 | Jovanović Alenka | volunteer |
| 97 | Jovanović Renata | volunteer |
| 98 | Jurić Ivanka | volunteer |
| 99 | Jurković Tomo | volunteer |
| 100 | Karačić Ivanka | volunteer |
| 101 | Mačković Ruža | volunteer |
| 102 | Matić Petar | volunteer |
| 103 | Mihalić Melita | professional |
| 104 | Prpić Ljubica | volunteer |
| 105 | Prpić Zoran | professional |
| 106 | Šejatović Slava | volunteer |
| 107 | Šneperger Zeljka | volunteer |
| 108 | Vistić Barbara | volunteer |

Otočac

| | | |
|-----|-------------------|-----------|
| 109 | Cvitković Dragica | volunteer |
| 110 | Modrić Zorica | volunteer |

| | | |
|-----|-------------------|--------------|
| 111 | Šimatović Dragica | volunteer |
| 112 | Vrhovčić Josipa | professional |

Ozalj

| | | |
|-----|------------------|--------------|
| 113 | Gvozdanić Marina | volunteer |
| 114 | Kučas Sanja | volunteer |
| 115 | Novosel Lidija | professional |

Pakrac

| | | |
|-----|-----------------|--------------|
| 116 | Ivezić Verica | professional |
| 117 | Lipušić Đuro | volunteer |
| 118 | Lipušić Ljubica | professional |
| 119 | Lovrić Blanka | volunteer |
| 120 | Mateš Jadranka | professional |
| 121 | Meringer Marija | volunteer |
| 122 | Ožegović Marija | professional |
| 123 | Pavičić Jasna | professional |
| 124 | Pintarić Zdenka | professional |
| 125 | Sabo Ivan | volunteer |
| 126 | Tomaši Ljiljana | professional |
| 127 | Višić Marija | volunteer |

Petrinja

| | | |
|-----|-------------------|--------------|
| 128 | Bešlić Ana | volunteer |
| 129 | Kovačević Ljubica | volunteer |
| 130 | Malović Ana | professional |
| 131 | Maričković Marija | volunteer |
| 132 | Norković Marica | professional |
| 133 | Sučić Ana | volunteer |

Požega

| | | |
|-----|-------------------|--------------|
| 134 | Brkić Ivanka | volunteer |
| 135 | Čavar Vesna | volunteer |
| 136 | Lukačević Dragica | volunteer |
| 137 | Obradović Zeljko | volunteer |
| 138 | Zadro Zdenka | volunteer |
| 139 | Zelenika Ivanka | professional |
| 140 | Zelenika Kazimir | volunteer |

Sinj

| | | |
|-----|-------------|--------------|
| 141 | Omrčen Ante | professional |
|-----|-------------|--------------|

Sisak

| | | |
|-----|----------------------|--------------|
| 142 | Bašić Tihomir | professional |
| 143 | Belovarac Joso | professional |
| 144 | Blažek Đurda | volunteer |
| 145 | Cimermančić Katica | volunteer |
| 146 | Čavlović Božica | volunteer |
| 147 | Damjanović Josipa | volunteer |
| 148 | Diner Marica | professional |
| 149 | Grgurinović Zlata | professional |
| 150 | Kastmiller Viktorija | volunteer |
| 151 | Klopac Maca | volunteer |
| 152 | Legek Ljubica | professional |





| | | |
|-----|-------------------|--------------|
| 153 | Mareković Đurdica | volunteer |
| 154 | Mulalić Mersiha | volunteer |
| 155 | Petrović Vladimir | professional |
| 156 | Relić Katica | volunteer |
| 157 | Špišić Tihana | volunteer |
| 158 | Vrbanac Blaženka | professional |
| 159 | Zaloker Marija | volunteer |
| 160 | Zaloker Vesna | volunteer |

Split

| | | |
|-----|----------------|--------------|
| 161 | Kovač Jakov | professional |
| 162 | Krstinić Jakša | professional |

Sveti Ivan Zelina

| | | |
|-----|--------------------|--------------|
| 163 | Čegec Ksenija | volunteer |
| 164 | Jurinčić Ljiljana | professional |
| 165 | Kostelić Ivan | volunteer |
| 166 | Mladić Marina | volunteer |
| 167 | Poldrugrač Viktor | volunteer |
| 168 | Puhelek Branka | professional |
| 169 | Tonjac Ivica | volunteer |
| 170 | Vizec-Tonjac Jasna | volunteer |
| 171 | Zagoršček Boris | volunteer |

Šibenik

| | | |
|-----|------------------|--------------|
| 172 | Krvavica Sladana | volunteer |
| 173 | Perić Ankica | volunteer |
| 174 | Šalinović Dane | professional |

Varaždin

| | | |
|-----|--------------------|--------------|
| 175 | Baltić Lidija | volunteer |
| 176 | Cikać Tea | volunteer |
| 177 | Dragišić Vera | volunteer |
| 178 | Dugandžić Nikola | volunteer |
| 179 | Fejer Nada | volunteer |
| 180 | Galić Jozefina | professional |
| 181 | Jakopović Kristina | volunteer |
| 182 | Kanižić Josip | professional |
| 183 | Kokot Antonija | volunteer |
| 184 | Krehonja Liza | volunteer |
| 185 | Likić Nada | volunteer |
| 186 | Majcen Milica | professional |
| 187 | Mintas Biserka | professional |
| 188 | Mintas Zagorka | volunteer |
| 189 | Novoselec Emerik | volunteer |
| 190 | Rogina Snježana | professional |
| 191 | Sabati Mirjana | professional |
| 192 | Slunjski Rade | volunteer |
| 193 | Stolnik Slavica | volunteer |
| 194 | Šalamon Snježana | volunteer |

| | | |
|-----|-----------------|--------------|
| 195 | Štefić Jasenka | volunteer |
| 196 | Štefić Marija | volunteer |
| 197 | Vereš Stanka | volunteer |
| 198 | Vugrinec Suzana | volunteer |
| 199 | Vuković Nada | volunteer |
| 200 | Zirovec Đurdica | professional |

Vrbovec

| | | |
|-----|------------------|--------------|
| 201 | Bochnicek Zeljko | volunteer |
| 202 | Lopatny Ivan | volunteer |
| 203 | Markuš Dragutin | professional |
| 204 | Mudrić Vladimir | volunteer |
| 205 | Sedlar Milan | volunteer |
| 206 | Zgela Jure | volunteer |

Zabok

| | | |
|-----|-------------------|--------------|
| 207 | Bedeniković Maja | volunteer |
| 208 | Bedeniković Petar | volunteer |
| 209 | Fučkar Višnja | volunteer |
| 210 | Goluban Davorka | professional |
| 211 | Hrastinski Mirko | volunteer |
| 212 | Ivančić Rudolf | professional |
| 213 | Krznar Mirko | volunteer |

Zadar

| | | |
|-----|-------------------|--------------|
| 214 | Antunac Helena | volunteer |
| 215 | Bilaver Chaterine | professional |
| 216 | Jusup Katarina | professional |
| 217 | Mišlov Bruno | professional |

**Hrvatski Crveni križ
-Stručna služba-**

| | | |
|-----|---------------------|--------------|
| 218 | Belošević Gordana | professional |
| 219 | Bortek Božica | professional |
| 220 | Damjanović Antonija | professional |
| 221 | Damjanović Katija | professional |
| 222 | Drašković Ninka | professional |
| 223 | Dundić Zeljko | professional |
| 224 | Hajnić Zdenka | volunteer |
| 225 | Horvat Dubravka | professional |
| 226 | Horvat Franjo | professional |
| 227 | Jovančić Vlasta | professional |
| 228 | Krivošić Vesna | professional |
| 229 | Krznarić Mira | professional |
| 230 | Kuljić Ljiljana | professional |
| 231 | Lazić-Tafra Gordana | professional |
| 232 | Ledinsky Blaženka | professional |
| 233 | Levačić Sanja | professional |
| 234 | Lovrečić Danijela | professional |
| 235 | Metličić Marin | professional |

SAVE LIFE

| | | |
|-----|----------------------|--------------|
| 236 | Ožbolt Slavica | volunteer |
| 237 | Pleša-Golubović Vera | professional |
| 238 | Sopta Drinka | professional |
| 239 | Stipetić Hrvoje | professional |
| 240 | Topličan Zrinka | professional |
| 241 | Vrbnjak Irma | professional |



Employees with the Social Work Centres

| Name (SWC) | Surname and name (employee) |
|-------------------------|--|
| 1. SPLIT (for Knin) | 1. Škare Božena 2. Jakoliš Nevenka 3. Marinković Matko 4. Živković Slavko |
| 2. KNIN | 1. Pavletić Vesna 2. Jurić - Šimunović Albina |
| 3. BENKOVAC | 1. Polegubić Mirjana 2. Zrilić Kosa |
| 4. DRNIŠ | 1. Jerković Joso 2. Stojaković Zoran 3. Marjan Ivan 4. Duvančić Sanja 5. Duvančić Ante 6. Braila - Delalija Adela 7. Klarić Branka 8. Hrpa Neda 9. Ramuković Davorka |
| 5. SINJ | 1. Radan Tajana 2. Vojković Marija 3. Župić Stjepan 4. Vejić Alenka 5. Mravak Slavka 6. Poljak Snježana 7. Jurela - Jerkan Anka 8. Jurišić Anđelka 9. Poparić Anka 10. Babić Anka |
| 6. ŠIBENIK | 1. Skočić Ante 2. Pendjer Rosanda 3. Gulin Sanda 4. Grubišić Biljana 5. Palinić Stana 6. Beg Nadica |

| | |
|------------------------------------|--|
| 7. OBROVAC | 1. Baričević Marija |
| 8. ZADAR (za Gračac i D. Lapac) | 1. Biloglav Miroslav 2. Mavar Njegomir 3. Šarić Irena 4. Šišeta Eli 5. Uranija Ana 6. Rogić Svjetlana 7. Špralja Jelka 8. Redepagić Mara 9. Tomas Sonja 10. Raguž Slavija |
| 9. HRVATSKA KOSTAJNICA | 1. Mateković Zlata 2. Novak Verica 3. Pavešić - Herkov Đurđica 4. Kelava Saša |
| 10. TOPUSKO | 1. Mareković Snježana 2. Abramović Nikola |
| 11. TRNJE (za Vrginmost) | 1. Makarun Zlatko 2. Požega Jasenka |
| 12. MEDVEŠČAK (za Vrginmost) | 1. Razlog Božena 2. Ilić Maja 3. Čukelj Danica |
| 13. MAKSIMIR (za Vojnić) | 1. Žugić Vesna 2. Končić Milka 3. Peršin Višnja |
| 14. DUBRAVA (za Vojnić) | 1. Penić Jadranko 2. Mešter Jadranka 3. Štulić - Marinović Branka 4. Keserica Drago |
| 15. SUSEDGRAD (za Vrginmost) | 1. Novosel Melina 2. Glivarec Ivan 3. Ilić Danica 4. Deban Krešimir |
| 16. NOVI ZAGREB (za Slunj) | 1. Đurić Anka 2. Srac Carmen |



- | | | | |
|---------------------------------|---|---------------|--|
| 17. CENTAR (za Slunj) | 3. Šošćarić Miro 1. Pavin Sanja | 24. DUGA RESA | 1. Malović Dubravka 2. Magličić Jadranka 3. Dol Irena 4. Perković Ljiljana 5. Desović Ljiljana 6. Roth Jasenka |
| 18. TREŠNJEVKA (za Korenicu) | 1. Paun - Knežević Josipa 2. Gbubač Janko 3. Koren Milena | 25. KARLOVAC | 1. Miklić Marica 2. Vlanić Ankica 3. Pogačić Mirjana 4. Oštrina Dijana 5. Živčić Ksenija 6. Mašek Vlado 7. Vukelja Nada 8. Blagaić Dubravka 9. Delač Petar |
| 19. PEŠĆENICA (za Korenicu) | 1. Tvrtković Žerar 2. Čavajda Dragutin 3. Banjec Saša | 26. PETRINJA | 1. Stanešić Nada 2. Bartolin Alenka 3. Išek Nada 4. Đukić Branka 5. Horvatić Katica 6. Lakić Gordana 7. Golac Jadranka |
| 20. SESVETE (za Korenicu) | 1. Pleše Bernarda | 27. GLINA | 1. Rožanković Ivan 2. Grgić Marija 3. Vujević Rudolf 4. Babić Tatjana 5. Pšeničnjak Zlatica 6. Bužančić Mladen |
| 21. DVOR | 1. Radišić - Malić Jelena 2. Jurjević Slavko 3. Šamac Angela | 28. OTOČAC | 1. Drakulić Božica 2. Čorak Biserka |
| 22. SISAK | 1. Petrić Saša 2. Sarkotić Željko 3. Ivnik Ksenija 4. Japundžić Nikolina 5. Matasović Jadranka 6. Pintarić Snježana 7. Turk Mirna 8. Knežević Brankica 9. Podgoršak Vanja 10. Čučković Zorica 11. Marton Davorka 12. Toporan Marinela 13. Mačković Marijana 14. Marković Vesna 15. Klasnić Anka 16. Žunić Katica | | |
| 23. OGULIN | 1. Sakson Ljiljana 2. Cindrić Vesna 3. Gerovac Nada 4. Kulić Ivanka 5. Sertić Slavica 6. Kučinić Ljiljana 7. Klarić Gordana 8. Božićević Senka | | |



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CONCLUSION

Tragedy of abandoned and old people - that is , remaining population , requires not only maximum but optimal strength and energy to care for such people.

Regardless of person's health status or social isolation , anyone's wish to stay at their own home has been respected. Paradoxically , that is how their life has directly been put in jeopardy.

After the social collapse , people should be organized into very small groups and constantly visited by humanitarian participants , therefore provided with complete humanitarian security (communication , supply , permanent medical care , normal social life , security).



Coordination, Knin, december 1995

COLLABORATION



PRESS CONFERENCE, APRIL 30, 1999



1ST MEETING OF CENTRAL EUROPEAN FORUM FOR CO-OPERATION OF
NATIONAL RED CROSS SOCIETIES

DUBROVNIK, CROATIA, APRIL 26-30, 1999



SAVE LIFE:

COLLABORATION BETWEEN THE MINISTRY OF LABOUR AND SOCIAL WELFARE AND THE INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES

I INTRODUCTION

Demographic aging of the Republic of Croatia could be seen based on the results of 1991 Population Census, i.e. 13.1% was taken up by people older than 65. According to the UN criteria, Croatia falls among countries with very old population for that matter. Any country's demographic aging is usually connected with a number of demographic, economic or social reasons that should be dealt with in the most suitable and socially effective way. Even developed countries find it difficult to handle the problem, that adds more difficulty to the transition process, following exquisitely hard war and post-war circumstances in the Republic of Croatia.

Living conditions at present make it difficult for a family to care for its most senior members. Therefore, the quality of life in the third age depends largely on the type, as well as scope of social intervention and well-developed network of institutions. At the time Croatia declared independence,

care for elderly persons was solely carried out by state institutions, having accommodated just 2% of inhabitants older than 65. Care outside institutions was very weak (in some communities) or zero (in other), so that institutional care was under increased "pressure".

In the above circumstances, there was an outbreak of aggression against the Republic of Croatia, with straightforward impact on both social and economic level. Great part of the country saw a huge devastation of social, communal, economic, traffic and other types of infrastructure, however, human casualties were the worst part. In December, 1991, precisely 550,000 displaced persons were registered (1), and the crisis was at the peak of its height when, in 1992, 800,000 refugees and displaced persons from Bosnia and Herzegovina were cared for by the Republic of Croatia. By the time Government Office for Displaced Persons and Refugees was founded at the end of 1991, accommodation and care for displaced persons had been organized by the Ministry of Labour and Social Welfare.



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(It should be noted that the very first displaced persons showed up in May, 1991, after they had been expelled from Knin and Kijevo, of which the documentation may be found in the Ministry of Labour and Social Welfare).

Displaced persons were accommodated in any place available (hotels, resorts, reception centres, social care institutions, families). Great number of persons were cared for in elderly homes.

Even though elderly homes were suitable for accommodation of just 12,386 persons, assembly-rooms were temporarily turned into private ones, so that in the end 13,254 persons were accommodated. First persons to find accommodation there were the residents of the Pensioners' Home in Petrinja, Nuštar, Vukovar and Beli Manastir, due to their evacuation because of the aggression in the area.

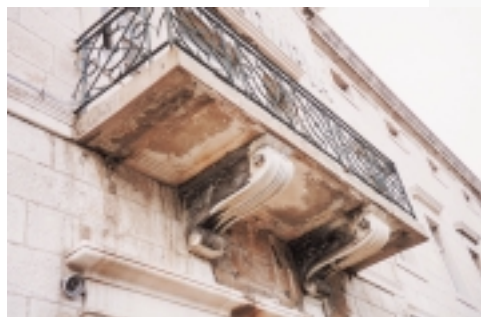
At the same time, requests for accommodation were several thousand. Persons past the age of 60 were among the displaced persons' population represented by more than 20%. Great number of them had to find accommodation in elderly homes due to difficult circumstances in the settlements for the displaced persons and their altered health status as well.

The above mentioned data point out a very grave situation within the domain of care for elderly persons in the Republic of Croatia during the Serbian aggression.

Following the Military-Police Operation "Flash" and "Storm" during the autumn, 1995, the situation around the care for



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elderly persons became alarming. The fact is that the remaining population in the liberated territories was about 7,000, mostly elderly persons in the extreme need of care in order to survive through the coming winter.

Ministry of Labour and Social Welfare were responsible for the organization and coordination of care in the way that each and every social care institution was supposed to secure accommodation for at least 5 displaced persons from the liberated territories. However, that was not nearly enough and the Ministry had to reorganize their efforts in order to resolve the situation.

The following was done by the Ministry to improve care for elderly persons with limited funds only:

- securing new types of accommodation at lower initial rates - abandoned military installations, hospitals, schools, were sought for in order to be restored as soon as possible for elderly persons' accommodation,
- building up new system of social care that enables and urges other institutions (church institutions, organizations, local administration, etc.) to get involved in the institutionalized care for elderly persons,
- initiating alternative forms of care for elderly persons (help and care at home, care in the recipient family, etc.),
- appealing to the local and foreign humanitarian organizations to concentrate on the care for elderly persons.

II COLLABORATION IN THE DOMAIN OF INSTITUTIONAL CARE FOR ELDERLY PERSONS

International Federation of Red Cross and Red Crescent (IFRC further in the text), whose Head in the Republic of Croatia at the time was Sten Swedlund, was among few organizations bringing about, among other things, care for elderly persons, resuming an active role in the care for the most vulnerable residents of Former Sector "North" and "South" (other organizations primarily cared for children - casualties of war). Mutual efforts in securing overall and efficient care for elderly persons in the liberated territories resulted in the Agreement on Humanitarian Collaboration, ratified by the IFRC, Croatian Red Cross and Ministry of Labour and Social Welfare, on November 27, 1995 (Supplement 1).

Two hundred beds were secured by the Agreement in question (100 in the Pensioners' Home in Petrinja, the rest in the Knin General Hospital), offering accommodation for elderly and vulnerable remainees in the territory.

IFRC was bound to do the following:

- partially finance the restoration of Pensioners' Home in Petrinja, securing the amount of 170,000 CHF
- secure the income for 25 employees of the Croatian Red Cross, that would be engaged in the Pensioners' Home in Petrinja and Hospital in Knin for the



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- period of 4 months - in the amount of 70,000 CHF
- employ 4 social workers to offer assistance to the institutions in Petrinja and Knin,
- secure hygienic products for 200 persons for the period of 4 months.

The success of the Agreement, genuine efforts of the Ministry of Labour and Social Welfare in dealing with the problem of care for elderly persons, readiness for any form of collaboration as common characteristics of the Minister of Labour and Social Welfare, Joso Škara and his associates, Deputy Minister, Vera Babić, and Assistant Minister, Marijan Pokrajčić - all lead to further negotiations concerning any possibilities of collaboration between IFRC and the Ministry.

IFRC Projects were very much appreciated by the Ministry of Labour and Social Welfare - their objective was to restore some of the existing buildings, turning them into homes for elderly persons. It was done by Damir Čizmek, IFRC Coordinator, and Ana Balaband, Head of the Department, who took over the potential buildings and worked out a model of future homes. Following these activities, the Agreement on Humanitarian Collaboration was signed on October 4, 1996, between the Ministry of Labour and Social Welfare, Government Office for Displaced Persons and Refugees, and IFRC, on the topic of joint restoration of several buildings (Agreement - Supplement 2).



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Buildings suitable for adaptation into homes for elderly and vulnerable - no matter whether they were elderly displaced persons or refugees or socially vulnerable domicile population - were defined by the Agreement, alongside the relationship between the IFRC and Ministry.

1 "Termoterapija" Dubrovnik

Following the adaptation and restoration of the "Termoterapija" building in Dubrovnik, accommodation was secured for 55 persons. According to the Agreement between the Government Office and the Town of Dubrovnik, in September, 1995, the building was placed at the disposal of the Government Office for the period of 5 years - later, based on the Decision of the Dubrovnik Town Administration (Reg. No.: 2117/01-08-96-10, dated July 25, 1996), and due to the Request of the Government Office and Ministry, 5-year- period was extended to 15 years. Restoration of the building was commenced according to the Agreement on Humanitarian Collaboration, dated May 27, 1996, and made by the Government Office and IFRC. In accordance with the Agreement, Government Office gave up their rights regarding the building to the Ministry's benefit, so that the future institution could be integrated into the social care system.

In accordance with the Agreement, the amount of 346,000 CHF was set aside by the International Federation for the restora-

tion, the rest of the required sum was set aside by the Ministry through the Republic's Fund for Pension and Disability Insurance.

It was determined that 90% of the building would be occupied by displaced persons and refugees, 10% by the most vulnerable domicile population, totally according to the social care centres' priorities.

Parties to the Agreement agreed about permanent functioning of the home of care for elderly in "Termoterapija" through its integration into the social care system, functioning as an annexe to the existing Home for Elderly and Vulnerable in Dubrovnik. The Ministry was bound to secure the required number of employees for the institution, alongside respective costs, while Government Office for Displaced Persons and Refugees remained under obligation of paying for the accommodation costs to the displaced persons and refugees.

"Termoterapija" building was restored and placed in operation in January, 1998 (Photo: "Termoterapija" building).

2 Psychiatric Hospital, Donji Zemunik

Agreement on Humanitarian Collaboration set the following terms:

According to the Ministry's Request (Reg. No.: 524-01-01/96-01-1/5, dated June 24, 1996), following the Decision of Zadar-Knin County (Reg. No.: 2193/3-96-2, dated July 1, 1996), former Psychiatric Hospital at Donji Zemunik was placed at the permanent

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disposal of the Ministry, accommodation was secured for 400 elderly persons. Main object to the Agreement was the first stage of restoration, which would secure 70 beds in Pavillion 1 and 2 within the building. Parties to the Agreement agreed about the foundation of a new, self-contained institution of care for elderly, that would operate within the boundaries of the social care system. Parties to the Agreement, particularly the Ministry, were placed under obligation of dealing with the administrative or any other issue, leading to the final stage of moving in. The Ministry's obligation was to secure the required number of employees with the assistance of the Republic's Fund for Pension and Disability Insurance in order to place the institution in operation.

- The amount of 350,000 CHF will be assigned by the International Federation for the purpose of restoration of the Pavillion 1 and 2 at Donji Zemunik, the rest of the amount required will be assigned by the Ministry with the assistance of the Republic's Fund for Pension and Disability Insurance or Ministry of Reconstruction and Development - specific-purpose funds intended for the reconstruction of the devastated territories.
- Users of the building, 90% of them will primarily be selected among displaced persons and refugees from the Zadar Region, alongside returnees to the Region from other parts of the Republic of Croatia, but not from



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abroad. Remaining free beds will be assigned according to social care centres' priorities.

Following the completion of the first stage, 70 users were settled in the building (Photos: the destroyed and reconstructed Donji Zemunik).

3 Institute for Medical Rehabilitation, Udbina

It was arranged by the Agreement on Humanitarian Collaboration that:

- In accordance with a long-term programme of the Ministry, the building in question will contain a self-contained institution for elderly and vulnerable persons. The Ministry is under obligation of securing the required number of employees and making up for the costs respectively, while Government Office remains obliged to pay for the displaced persons and refugees' accommodation costs. The Ministry's obligation is to handle administrative issues all the way from the institution's foundation to the completion of reconstruction works, i.e. to the moment of moving in.
- Full capacity of 120 beds will be obtained by the reconstruction of the former Rehabilitation Centre building in Udbina, that was placed at the long-term disposal of the Ministry for the

purpose of care for elderly persons - it was done to the Request of the Ministry (Reg. No.: 524-01/96-04-1/5, dated Sept. 9, 1996), according to the Decision of Zadar-Knin County and Government Commission for Udbina Municipality (Reg. No.: 2193-37-01/96-1, dated Sept. 12, 1996).

- Parties to the Agreement decided that the Federation should invest 150,000 CHF into the reconstruction of the building, the rest of the sum required for the beginning of operation will be provided for by the Ministry, with the assistance of Republic's Fund for Pension and Disability Insurance.
- It was agreed that elderly remainees from the Former Sector "North" and "South" will make 80% users of the building - some of them are currently being cared for on the third floor of the Knin Hospital and other institutions of social care - and elderly returnees who were scattered all over Croatia, not those who went abroad. The rest of the beds will be occupied based on social care priorities.

The building has been reconstructed as well and 70 users have been settled in (Photos made at the beginning and end of the reconstruction works).

Object of the Agreement was also the former military barracks "Kamenjak" in Pula - its reconstruction was secured by the IFRC for the purpose of care for the displaced persons. The buildings were going to

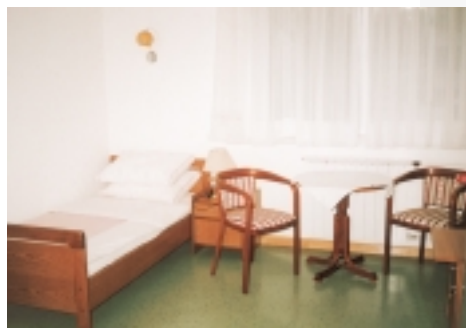
SAVE LIFE

become a part of social care system, however, due to unsolved property-rights relations (the buildings as well as the land are the property of the Pula Archdiocese), it was all dropped.

Extremely significant about these projects was that the reconstruction of the buildings in question made it possible for elderly displaced persons to be cared for, i.e. elderly displaced persons not capable of repairing their own homes, having no relatives to care for them. The fact that the buildings were situated in the war-torn territory was equally important because a number of returnees took part in the reconstruction.

Non-governmental organizations, church communities, humanitarian associations, internal as well as foreign legal or physical persons, were to a great extent urged by both the reform of social care system and the new Law on Social Care, to get involved into the social care, specifically the founding of homes and centres of care.

For that matter, Elderly Home at Marino Selo near Pakrac was placed in operation. In fact, following Operation "Flash", the local Red Cross Society of Pakrac-Marino Selo placed in care some thirty elderly, displaced and socially vulnerable persons, that found home at an old, abandoned school building and were cared for with the assistance of IRFC. In order to put this institution in operation, Ministry of Labour and Social Welfare agreed to finance the accommodation of socially vulnerable persons. This prompted IFRC to secure funds for the



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reconstruction of the building, creating some thirty new places. (The old school building and the new one).

Altered political circumstances at the end of 1995 lead to the return of the displaced persons to the liberated territories of Croatia. After that, many buildings remained vacant, so they had to be used for a different purpose. That was the case with the displaced persons' communities, consisting of prefabricated buildings, some of them in a very good shape. Preservation of the buildings and their putting up for a different kind of use inspired the IFRC and Ministry of Labour and Social Welfare to give meaning to a settlement of care for elderly persons. The Project is currently being under way in Ilok. Best preserved prefabricated buildings were transferred from the Kutina displaced persons' settlement to Ilok, also a solid, new construction with lounges and an infirmary was built. Relatively healthy elderly persons will live independently in their small houses. Due to their needs and wishes, they will be presented with certain kinds of organized help. If and when they cannot look after themselves, they will be transferred to the central building in order to receive total care.

Building of the settlement has completely been financed by the IFRC and will be run by the Ilok Red Cross. Implementation of the Project is being given the specialist support of the Ministry of Labour and Social Welfare. Completion of the Project is due by the end of 1998.

III COLLABORATION IN THE FIELD OF NON-INSTITUTIONAL CARE FOR ELDERLY PERSONS

Despite all the efforts to increase accommodation, Ministry of Labour and Social Welfare know that there are many more elderly persons in need of institutional care, among them quite a few who are not ready to leave their home for an institution. Therefore, one of the goals of the long-term policy of care for elderly persons is to develop non-institutional forms of care, more than anything, help and care at home.

Implementation of the "Save Life" Action and Mobile Team operations in the Former Sector "North" and "South" speak for themselves. However, it should be emphasized that right upon the completion of the Action and due to the fact that a number of Mobile Teams still operated in the field, Agreement on Non-institutional Care for Elderly Persons in the Republic of Croatia was signed between the Ministry of Labour and Social Welfare, IFRC and Croatian Red Cross at the beginning of 1997.

The Agreement was aimed at providing home care and help for elderly and vulnerable, as well as handicapped persons in the Former Sector "North" and "South" and Eastern Slavonia. Help and care services will be offered by the local Croatian Red Cross Societies, through the involvement of their employees and volunteers. Care will specifically be offered to the beneficiaries of

SAVE LIFE

the Social Care Centres. That is why collaboration is urged between local Red Cross Associations and Social Care Centres within the territory.

In order to educate employees of Red Cross and other non-governmental organizations for this or any other form of collaboration with Social Care Centres, in association with IFRC and Croatian Red Cross, Ministry of Labour and Social Welfare organized a train of courses in Topusko and Split during November and December, 1996 - the title to the courses was "Social and legal assistance to the employees working in the social care department in the territories of the Republic of Croatia, liberated by Military/Police Operation Storm".

Relief workers, who were getting in touch with elderly and other vulnerable persons in the field, were to be informed of any right and form of relief, secured by the state through the Social Care Centres.

There were more than 50 participants at each course - employees of Croatian, as well as foreign non-governmental organizations.

Distinguished results of various forms of collaboration with IFRC meant that Mr. Sten Swedlund, Head of the IFRC in Croatia, would to the end of his mandate be selected for Order of Croatian Danica with the image of Katarina Zrinska.

Following the cessation of the war operations and the restoration of peace, law and order in the whole territory of Croatia, attention of foreign donators was averted from our country and IFRC potentials



MARA'S VILLAGE



MARA'S VILLAGE

reduced. However, the point is that, owing to the successful collaboration with this Ministry, a few projects of permanent value and a life beyond the IFRC mandate in our country were implemented.

Report written by:
Ana Balaband

Assistant Minister:
Marijan Pokrajčić





Dunant's Dream

WAR, SWITZERLAND AND
THE HISTORY OF
THE RED CROSS



CAROLINE MOORHED

HarperCollinsPublishers

DUNANT'S DREAM



When the Croatian armed forces launched their offensive in the north and south in early August 1995, the Krajina Serb population gathered up their possessions and took to the roads in the biggest single exodus since the start of the hostilities. One hundred and fifty thousand people were reported to be on the move. Some seven thousand others - the sick, the elderly, the

resigned, for the most part women, old, bedraggled and distraught at being separated from their families - stayed behind. Delegates travelled from apparently deserted village to village, looking for signs of life, a thread of smoke from a chimney perhaps, a faint noise among the ruins, trying to coax terrorized people into the open.



MISSING PEOPLE



SLOBODAN LANG

The Challenge of Goodness

- *Humanitarian Globality*
- *XII Humanitarian Proposals*
- *Good People*

... everybody is needed



CROATIAN RED CROSS

ZAGREB, 1999



HUMANITARIAN GLOBALITY

- The term "**Globalization**" came into use in the last ten years, and has become the key word of the post-communist world. It symbolizes the internationalization of economic activities seen by many as a **heartless economic** process that destroys jobs and cultures
- Prof. Klaus Schwab founder of the World Economic Forum in Davos, in February 1999 pointed out a need to look beyond the economic dimensions of what is happening
- There is a global need for something larger than business and economics, a goal, a phase, a condition, something pointed towards the **future**

There is a need to integrate the heart and the soul, mind and faith into our thoughts and action

- There is a need to look at the world in a **multidimensional** way -economy, plus politics, technology, society, health, culture, goodness
- There is a need for social and global economic responsibility
- All of this is **Globality-Responsible Globality**
- Globality is here to stay said U.S. Senator John Kerry, and Bill Gates said that he would add globality to Microsoft's dictionary
- Here in Strasbourg, at the first conference on health and human rights, I propose to you - Humanitarian Globality

- **Humanitarian Globality** means working seven days a week, 24 hours a day, in order to achieve needed professional, medical and political connections all over the world that will facilitate humanitarian recognition, notification and action wherever and whenever is needed

- Humanitarian Globality includes global **responsibility** during any conflict for each hospital, refugee, and prisoner's camp or any other key humanitarian point in the area of conflict

- Humanitarian Globality is based on the fact, that thanks to the unstoppable growth in the importance of **human rights, communication technology** and influence of **media**, borders are eroding, uniting the world into a network of global communities

- **Humanitarian Globality** is based on a fact that today it is possible to **prevent, stop** or lower conflict, wars and natural disasters using technological and political means which were unthinkable just few years ago

- What will be the rules of this reality?

- How shall we transform humanitarian globality from **vision to realization**?

- What will be the consequences for the millions of sick, wounded, imprisoned, displaced, refugees and all endangered and persecuted? What will it mean for peace throughout the world

- Globality is inescapable

- It will influence more and more the lives of those most endangered when and where most needed

- Humanitarian globality and responsibility express **necessary vision** and enable **new reality**

Humanitarian globality and responsibility express necessary vision and enable new reality

GOOD PEOPLE - EXPERIENCE OF GOODNESS

1. Righteous among nations

2. Humanitarian actions

1989 Physicians for Kosovo

1990 Candle light ceremony

1991 Potkonje

Dubrovnik - Convoy Libertas

1993 Ilić Family

1993 Mostar camps

1993 White Way Convoy for Central Bosnia

1994 Humanitarian Roads of Peace and Love

1994 Hospital in Nova Bila

1995 Tuzla - Srebrenica

1995 Return to Kladuša

1995 **Save Live**

1997 Renewal of trust

3. Distinguished for humanitarian work

4. Victims

-displaced / refugees

-wounded / handicapped

-families of missing in action

-camp inmates

-veterans

5. Crisis Communities

-occupied

-front

-surrounded / siege

-destroyed

6. Red Cross

-ICRC-IFRC

-Croatian Red Cross (CRC)

7. Humanitarian Organizations

-religious

-Healthy Cities

8. Emigrants

9. Nobel Prize winners

10. International Community





THE CHALLENGE OF GOODNESS - humanitarian pro- posals

1. Humanitarian research and education

- humanitarian studies should be pursued as interdisciplinary and intersectional studies at the University
- after each conflict or war, studies should be pursued in the area of the conflict with international support to collect humanitarian experience
- introducing the term genocide in Index Medicus

2. Humanitarian Evaluation

- Red Cross Forum on effectiveness and efficiency of humanitarian work
- experience of good people

3. Humanitarian work in different stages of conflict or war

- Prevention of conflict
 - Hate watch
 - Right to home
- During conflict
 - Displaced and refugee camps
 - Prisoners of war camp
 - Global hospital
- After conflict
 - Saving remaining population
 - Supporting return of people and renewal of community and environment





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The challenge of goodness



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