



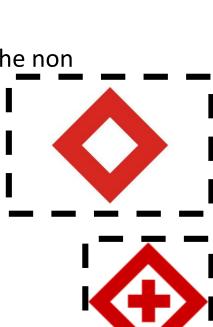
Inhoud

- Inleiding
- Rechten en plichten
- In hedendaagse operaties (course extract)
- Kosovo 1999
- Libanon 2006-07
- Afghanistan sinds 2001
- Conclusie



2. How to use a red cross in the military

- a. <u>Authorized emblems</u>
 - 1) RED CROSS
 - 2) RED CRISTAL: when ratified and O/O
 - 3) O/O competent mil authority (CHOD)
- b. <u>Protective</u> use: to enhance protection
 - 1) Relative obligation to put it visible
 - 2) Communicates the legal position of a <u>non combattant</u>
 - a) Medical or religious
 - b) BEL: there are <u>no</u> temporary assigned or auxiliaries
 - 3) Use/ non use <u>doesn't influence</u> rights/ obligations of the non combattant
 - a) Allow inspections
 - b) Lt weaponry
 - c) Don't resist capture
 - 4) Use on: transport, materiel, installation, ...
 - 5) Permanent: peacetime and « war »time
 - 6) No Tac markings
- c. <u>Indicative</u> use: NS and ICRC only



2. How to use a red cross in the military

e. <u>No use</u>

- 1) Possible, O/O Bde Cdr or equivalent
- 2) « so far as military considerations permit »
- 3) aim is highest protection not the promotion of the red cross
- 4) When suspicion of non combattant status: don't fire
- f. <u>Selective use/ visibility</u>: land / air , yes / no

g. <u>Misuse</u>

- 1) Imitation: medical bags Combat Life Savers
- 2) Improper: INT collection
- 3) Double use: with other emblem/ sign
- h. <u>Abuse</u> or perfidy: war crime
- i. Supplementary signs/ signals
 - 1) Mandatory when sea and air transport
 - 2) On land, today, to avoid friendly fire
- j. Trg and instruction in use/ recognition of red cross is mandatory
 - 1) Sometimes inadvertance/ ignorance
 - 2) (...)
- k. Combat life savers
 - 1) Are combattants, are NOT authorized to use the red cross
 - 2) AP I en II: don't fire on combattants performing first aid and collection

- a. Medical and Tactical Mission
- b. <u>Ennemi:</u>
- c. <u>Terrain</u>
- d. Troops
- e. <u>Timing</u>
- f. Civ considerations

a. Medical and Tactical Mission

- 1) Military medical mission with mission authorized PAR:
 - a) Save scarce medical resources
 - b) Don't attract customers: avoid Humanitarian Assistance when not ordered
- 2) Meet the medical planning timelines: 120 mins to the Fd Hosp
 - a) The tactical mission is the medical mission
 - b) Collection of the wounded: shared mission with the combattants
 - c) Use any asset that is available: CASEVAC- dual use helicopters
 - d) Embed Med Troops in Comb Troops (proximity) iot the meet the platinum 10 min
- 3) Conform to the Tac plan of the supported component
 - a) Support / enable the fight: SOF
 - b) Don't mix a Red Cross with Combattants: LAND
 - c) Profit from collective defense and FP measures: AIR
- 4) Med Troops are conform to the Tac plan, same mobility, survivability as combattants
- 5) Consider the effect of targetted Med Troops

a. <u>Medical and Tactical Mission</u>

b. <u>Ennemi:</u>

- 1) Modus operandi?
 - a) Does he fire more often on something he sees better?
 - b) Are emblems targetted (« terrorism »)
 - c) What is the local red cross score?
- 2) C² structure or isolated cells? Behaves like a combattant?
 - a) LOAC known, understood, applied by actors in the battlespace
 - b) Is there a reasonable (non) reciprocity
- 3) Which signs does he use?
- 4) Conduct a thorough « Threat Evaluation » as part of the Med Intelligence Preparation of the Battlespace

- a. Medical and Tactical Mission
- b. <u>Ennemi:</u>
- c. <u>Terrain</u>
 - 1) Technical characteristiques iot make emblem visible
 - 2) Supplementary signs/ sounds/ active/ passive beacons, trackers, IT enabler
 - 3) AIR- GROUND- SEA
 - 4) Regional differences

a. <u>(...)</u>

d. <u>Troops</u>

- 1) SOFA
- 2) Dedicated or dual use Med assets?
- 3) Attitude of coalition Troops? Joint combined use and SOP's?
- 4) Which signs are (not) used?
- 5) Host Nation Support In Country Resources: IO, NGO, PME
- 6) Physically separate combattants from non combattants









a. <u>(...)</u>

e. <u>Timing</u>

- 1) Change is authorized
- 2) Notification to whom?
- 3) Latest Time Information of Value?



a. <u>(..)</u>

f. <u>Civ considerations</u>

- a. Cultural connotations (« red cruisaders »)
- b. Avoid assimilation with IO/ NGO









4. Conclusions

For the BEL military non combattant...

- a. There is a relative obligation to use the red cross
- b. A red cross should augment protection
- c. (Non) use of a red cross has potential consequences
- d. Modern medical support by the military requires
 - 1) combattant in combination with non combattant assets to execute the medical mission
 - 2) METT-TC analysis to estimate if the use of the red cross is indicated
- e. Variable use of the red cross, but invariable legal position of non combattant
 - 1) Rights remain
 - 2) Obligations remain
- f. Modern tactical activities put pressure on the correct use of the red cross: INT, hearts and minds, eligibility for care,...
- g. Misuse in BEL military is rare, has minor character and is due to ignorance or inadvertance





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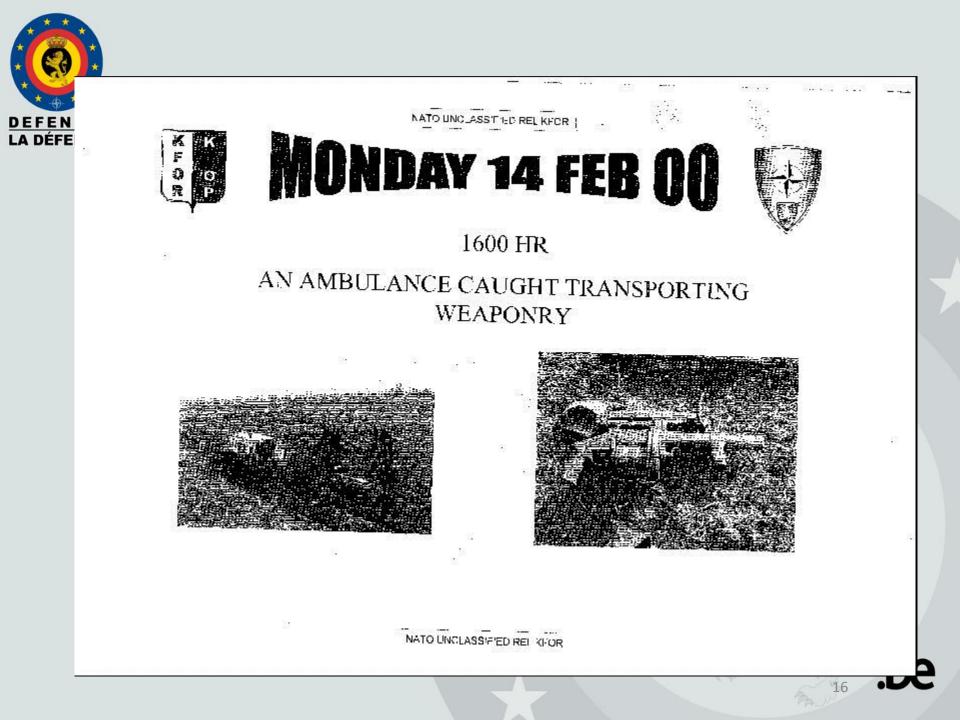
BELMED Provide Lifesaving Transport

(Text: 1Sgt Inge Belmans - Photos: SSgt Vanessa Klutsch)



Kidney patient: Three times a week personnel from BELMED2 transport the man to vital treatment at the hospital in Pristina.

Podujevo: This man would die if he did not get to hospital for kidney dialysis three times a week. **Belgian military ambulances provide the transport**. The BELMED 2 detachment three times a week transport his man and one other kidney patients from Podujevo to the hospital in Pristina, where they get their vital treatment.





Grenade attack on Serb market leaves two dead

Published: Wednesday, September 29, 1999

PRISTINA, Yugoslavia {AP} Two rifle-propelled grenades exploded Tuesday in an outdoor suburban market packed with Serbs, killing two people and injuring dozens of others, NATO said.



In response, Serbs blocked Kosovo's main highway and demanded better security. Hundreds of vehicles were backed up for miles on the road from Pristina to Pec, while British soldiers prevented traffic from reaching the roadblock.

NATO said 39 people were injured in the explosions in the outdoor market in Kosovo Polje, just west of the provincial capital, Pristina. But head nurse Jasmina Brosic at Kosovo Polje hospital said 47 were injured, five of them seriously. She said the two dead were middle-aged men.

Peacekeepers arrested four people two of them ethnic Albanians and the others unidentified, NATO spokesman Maj. Ole Irgens said.





World: Europe

Four arrested after Kosovo attack



A UN investigator checks the site of the explosion

Four people have been arrested by international peacekeepers in Kosovo following Tuesday's grenade attack on a marketplace, which killed two Serbs and injured 39 others.



Two of those arrested are ethnic Albanians; the identity of the other two has not yet been determined. a K-For spokesman said. The attackers struck at a busy outdoor market in Kosovo Polje, one of the few towns in the province where there is still a strong Serb presence.

18

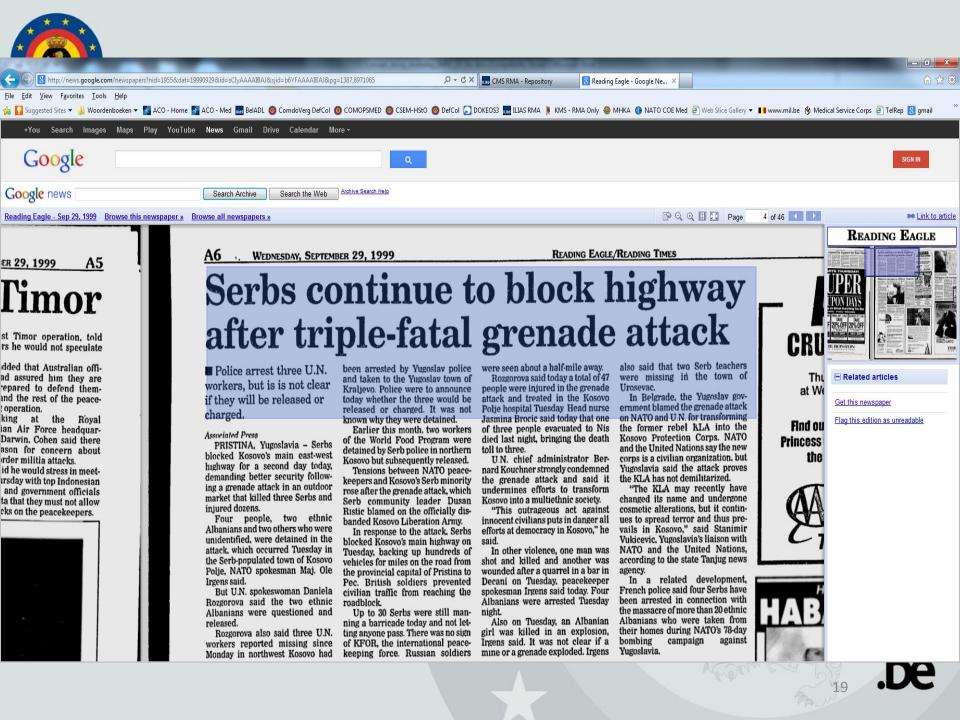
Two killed in Kosovo grenade attack as hostilities continue

Laura Rozen in Pristina

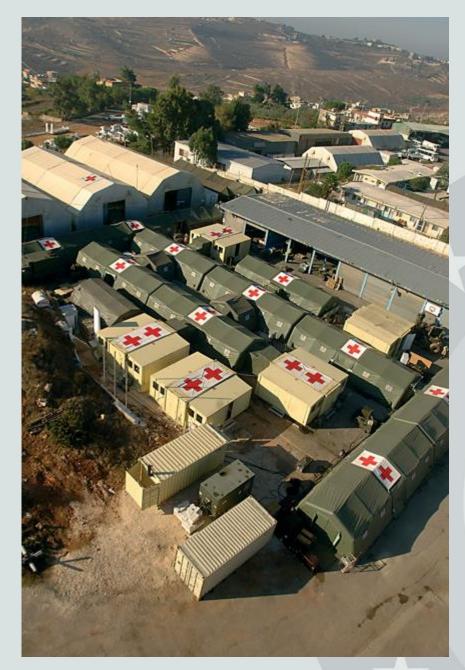
Wednesday 29 September 1999

A GRENADE attack on a marketplace killed two people and wounded nearly 40 yesterday morning in Kosovo Polje, a mostly Serb suburb south- west of the Kosovo capital, Pristina.

Officials with the Nato-led Kosovo peace-keeping force, K-For, said two rocket-propelled grenades exploded at about 10.30 in a market crowded with shoppers in the Bresje neighbourhood. Four of the survivors were said to be wounded critically, and were taken for treatment to a Russian military clinic in the town, the site of a 1389 battle that Serbs associate with their conquest by the Ottoman Turks.







Belgisch veldhospitaal TIBNIN, Zuid-Libanon 2006-2009



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AFG Veiligheidssituatie, 17 Jul 08

HERAT Province :

01 AC-332 MEDEVAC helicopter was engaged with SAF (Small Arms Fire) en RPGs (Rocket Propelled Grenade), resulting in 03 impacts in the fuselage and 01 on the main rotor blade. Futhermore, 02 (ESP) ISAF soldiers from the aircrew were slightly wounded.



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Suicide attack at Kabul military hospital, 6 killed Associated Press, Updated: May 21, 2011 16:31 IST

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Kabul: A suicide bomber struck a tent filled with medical students eating lunch at a military hospital in Kabul Saturday, killing at least six people and wounding 23, Afghan officials said.

The blast, which thundered across the capital, came as the Taliban have stepped up attacks as part of a spring offensive against NATO, Afghan government installations and officials. Afghan army and police stepped up patrols on the streets.

Taliban spokesman Zabiullah Mujahid claimed responsibility for the attack, saying it was targeting foreign trainers and Afghan doctors who work with them. He claimed two bombers took part, but Defence Ministry spokesman Gen. Mohammed Zaher Azimi spokesman said only one attacker was involved and only one blast was heard at the Mohammad Daud Khan military hospital.

The hospital is the largest in Kabul with 400 beds, and its grounds contain numerous buildings and small parks.



Ref : Newsletter DIH 178 - Du 01 au 15 avril 2011 7 avril 2011 - Afghanistan - Une ambulance utilisée dans l'attaque contre un complexe de la police

Le Comité international de la Croix-Rouge (CICR) condamne avec la plus grande fermeté l'emploi d'une ambulance – destinée au transport des blessés et des malades – dans l'attaque suicide commise aujourd'hui contre un centre de formation régional des forces de police afghanes dans la périphérie de la ville de Kandahar (sud de l'Afghanistan).

L'assaut a fait plusieurs morts et blessés parmi les forces de sécurité.

« Utiliser une ambulance pour tromper l'adversaire et perpétrer une attaque est un acte de perfidie. Cela est strictement prohibé par le droit international humanitaire et absolument inacceptable », a déclaré Jacques de Maio, chef des opérations du CICR pour l'Asie du Sud.

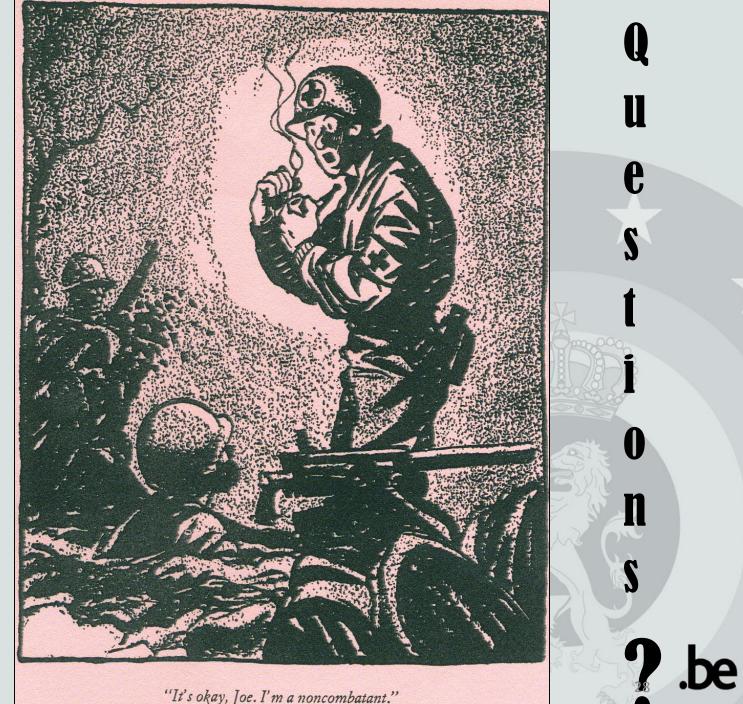
De tels actes violent la neutralité des services médicaux et mettent en danger le personnel sanitaire qui s'emploie à soigner les blessés et les malades dans les hôpitaux, les dispensaires et les postes de santé ruraux. « Ils entravent la fourniture des soins et l'accès aux services de santé, déjà précaires pour les Afghans dans de nombreuses régions du pays », a ajouté M. de Maio.



Save the date !!







"It's okay, Joe. I'm a noncombatant."