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Challenge of Goodness: Twelve Humanitarian Proposals Based on the Experience of 1991-1995 Wars in Croatia and Bosnia and Herzegovina

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Based on the 1991-1995 war experience of peoples of Croatia and Bosnia and Herzegovina, I made twelve proposals regarding the following aspects of health, humanitarian work, and human rights: 1. Broadening of the WHO definition of health by including spiritual well-being (absence of hatred) in it, 2. Inclusion of the term genocide into the Index Medicus (MeSH), 3. Establishment of concepts of prevention of hate, 4. Right to a home, 5. Right of civilians to participate in defense and renewal, 6. Right to deliberation from enslavement and right to find out the fate of missing persons, 7. Global hospital, 8. Monitoring of prisoner-of-war camps, 9. Refugee camps, 10. Providing of care for the abandoned – a new category of people suffering in war, 11. Introduction of the Helping Hand concept, 12. Organization of the Red Cross Forum after the cessation of hostilities. The fundamental objective was to establish the legitimacy of honesty in practice, regulative social mechanisms, and science.

Key words: *Bosnia and Herzegovina; Croatia; human rights; refugees; war; World Health Organization*

Dedicated to the 50th anniversary of the Universal Declaration on Human Rights and the Convention on the Prevention and Punishment of the Crime of Genocide.
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The immense humanitarian experience gained during the 1991-1995 conflicts on the territory of the former Yugoslavia is of invaluable significance for the promotion of humanitarian work in the entire world. There is nonetheless a danger of not using it adequately or disregarding it.

The twelve proposals presented here were formed gradually over the course of this period. They originated from personal and common experiences and practical work with thousands of people in most difficult conditions (1), and therefore range from daily practicalities to the concept of righteousness. The fundamental objective was to establish the legitimacy of honesty in practice, regulative social mechanisms, and science. In essence, I propose a definition of a “technology of goodness”.

In the beginning, I was focused on the struggle against genocide, gradually realizing that the efforts should concentrate on the promotion of goodness, because that approach constitutes a direct method of genocide prevention. People subject to suffering and expulsion possess an immense power to do good. Under conditions in which humanity is stifled, unimaginable forms of creativity and mutual human support appear. They can be extensively utilized in spite of limited resources. This power, ability, and readiness should be given legitimacy and room to develop. A basic prerequisite for this is that international humanitarian activists and institutions collect more information on the strength and initiative of goodness under conditions of hardship and suffering.

After the Second World War, thanks to the victory of the allied forces, as well as to the personal contribution of great humanists such as Eleanor Roosevelt and scientists like Dr Victor Frankl, the Universal Declaration on Human Rights was adopted, and the United Nations (UN), the United Nations International Children's Emergency Fund (UNICEF), the United Nations High Commission for

Refugees (UNHCR), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the World Health Organization (WHO), and other organizations were established (2).

Today, the humanitarian approach is in crisis (3), because it has an unsatisfactory reputation in the public (4) and lacks sufficient intellectual, political, and economic support. Present scholarship does not cherish enough interest in the truth on the knowledge of humanitarian needs and possibilities, nor does it adequately appraise the desire for creating goodness. Humanitarian organizations themselves, particularly the specialized agencies of the United Nations, waste more time justifying their failures than ensuring the necessary support for the improvement of their work. Nevertheless, after the 1991-1995 wars in Croatia and Bosnia and Herzegovina, we cannot limit ourselves to record experiences of warring, crimes, and human rights violations, but we must also record humanitarian, peacemaking, and all other experiences of goodness. During 1998, which marks the 50th anniversary of the Universal Declaration on Human Rights, the world must remember the people in our region who strived to do good during this past war, and, based on that experience, strengthen international humanitarian work in the future.

Proposals

Based on the experience of peoples of Croatia and Bosnia and Herzegovina, twelve proposals on various aspects of health, humanitarian work, and human rights were made. The proposals call for the responsibility of medicine, particularly regarding the technology and potentials of public health medicine, with the emphasis on the struggle against hatred and genocide.

General Principles

The first two proposals aim at improving general aspect of peace and humanitarian work as seen from a medical perspective. Both proposals are easy to achieve, but it may be difficult to convince those in charge to accept them.

1. Redefinition of Health

We have seen that the spiritual well-being entails an absence of spiritual “contamination” (hatred), with a disposition for tolerance and reconciliation. A person who hates cannot be considered healthy. Thus, the definition of health as given by the World Health Organization (WHO) (5) should be extended to read: “Health is a state of a complete physical, mental, social, and *spiritual* well-being, and not simply the absence of illness or incapacity.”

2. Inclusion of the Term GENOCIDE into the Index Medicus

The term “genocide” should be classified in the *Index Medicus* (Medical Subjects Headings, MeSH). This would emphasize the responsibility of medicine, particularly of public health, in the prevention and cessation of genocide, and systematic action and research on it.

Peacemaking Rights

The group of the following four proposals is associated with peacemaking rights – human rights which can potentially enhance peacemaking in situations of conflict, armed or other.

3. Prevention of Hatred

Hatred can increase, sustain itself, diminish, and cease in an individual or population. Raising the level of hatred in a community is one of the leading early signs that becomes apparent before the commencement of persecution, war, genocide, and other extreme forms of the mass violation of human rights. The advancement of tolerance and prevention and mitigation of hatred are human rights which allow the realization of the foundations of humanity – the dignity and mutual relationships in the spirit of brotherhood. For this purpose, the monitoring of hatred (“Hate Watch”) must be introduced, with defined and comparable indicators of its intensity, origin, targets, etc.

Hatred is sustained and fostered through political, cultural, scholarly, and other organizations and individuals, through writings, laws and other decisions and statements, and particularly through the mass media (6). Determining the extent of hatred, its reduction and the prevention of its growth among national, religious, and other groups must be the subject of regular study and monitoring. This can be implemented by scientific research, parliamentary organizations, the media, and other methods.

4. Right to a Home

The right to a home is a fundamental human right. Destruction of a single home and expulsion of an individual is a global event. A system of international human rights and an effective organization for the prevention of seizure of homes and creation of refugees must be implemented.

In case of refugees, the right to return home must be realized within a period of two years since their expulsion. If this is not implemented, the refugees must have a right to choose a country in which they wish to find their new home.

The UNHCR has so far primarily organized the reception of refugees, their accommodation, and assisted in their resettlement to third countries. This entire concept, i.e., taking people away from their homes, must be completely reversed: the Right to a Home, i.e., the right to remain or return home, should be established as one of the fundamental human rights.

Refugee insurance must be introduced with the goal of protecting refugees' social rights. The social welfare of refugees should be ensured from the very beginning of their exile. The financing of this project should be implemented as a part of the obligations of all United Nations member-states.

5. Right of Civilians to Participate in Defense and Post-War Renewal (Overall Civilian Support)

The role of civilians in the implementation of defense and renewal should be particularly emphasized.

Aggression against civilian population and their common suffering, as well as the first phases of post-war renewal, are marked by a significant increase in the readiness of civilians to assist one another, strengthen their common defense and participate in the post-war renewal. In general, civilians show their altruism and readiness for personal, active participation in the accomplishment of the common goals. This is all the more important since aggression against civilians has become one of the key features of modern wars.

6. Right to Liberation from Enslavement and Right to Find out the Fate of Missing Persons

The location of missing persons and release of prisoners should be an unconditional part of every peace treaty implemented on the international level.

The implementation of this goal will require the establishment of a body consisting of international political representatives (the UN and regional organizations), humanitarian organizations (UNHCR, ICRC; IFRC, the UN Special Rapporteur on Human Rights), the conflicting parties, and special participants. This appointed group must have a right to demand the unconditional location of all missing persons and secure the release of all detainees taken in the theater of war. Any obstruction of its work should be considered a war crime and a violation of a peace treaty (truce).

The introduction of an international war crimes tribunal actually indirectly endangers the missing persons and detainees. Fearing that these persons, after being released, will testify against them, the warring sides abandon the agreements regarding their fate, refuse to release the prisoners or tend to do even worse things. A large number of today's conflicts end in compromise. The release of detainees and the provision of information on missing persons must be unconditional.

Protection of Endangered Groups and Institutions in War

The following four proposals relate directly to war and to actions that can be undertaken for a more efficient protection of endangered groups and institutions during an armed conflict.

7. Global Hospital

The current forms of hospitals in wartime conditions have considerably stagnated, and they do not satisfy the basic needs, such as safety, supplies, information, care for patients dependent on technology/dialysis, intensive care, incubators, chemotherapy, etc. Modern hospital is a technological center, immobile and dependent on energy supplies and in other ways. New human rights-protection possibilities have not been utilized in hospitals protection and continuation of work in cases of emergency (e.g., war). These possibilities include UN neutrality, public support, and the computer and communications development – all in conjunction with the growth in the global importance of health and human rights.

The safety of hospitals proved to be one of the most delicate problems of 1991-1995 wars in Croatia and Bosnia and Herzegovina, i.e., the readiness to attack hospitals became one of the greatest surprises of the war (7,8). I propose the improvement of hospital organization during wars and other forms of violence, general strife, and times when normal hospital operations are impeded. The proposal is based on (a) the changes in modern technology in medicine and communications, (b) increase in the destruction and prevention of hospital operations in modern wars, (c) changing face of illness and breakthroughs in public health, and (d) growth of the opportunities for human rights in this field. I propose that in war, every hospital in the world has a right to become a member of a global hospital which would coordinate the following: 1. Registration of hospitals with the Red Cross, and WHO which would head the organization of the global hospitals' program; 2. During conflicts, hospitals become neutral territory (UN-protected); 3. Hospitals have international observers during times of general strife; 4. Hospitals are obliged to receive all patients, regardless of nationality, race, language, sex, age, social status, political affiliation, health or loyalty to either conflicting party; 5. Hospitals receive supplies from the international organizations if needed; 6. Hospitals have sister hospitals on the safe territories with which they cooperate. The sister hospitals would offer support in professional consultations, and representation before the international community; they would also provide direct assistance in material, personnel, and expertise; 7. During times of general strife, the hospital submits daily reports on its functioning and general situation (e.g., safety, supplies). The UN (WHO) and the public would be regularly informed through world news and Internet; and 8. In cases of emergency, the UN (Secretary General, Security Council) and the public are informed (9).

8. Prisoner-of-War Camps

The existing forms of humanitarian protection provided to the prisoner-of-war camps do not include the obligation of registration, constant international presence or sufficiently effective monitoring and action (10). The following new and concrete measures, in addition to the known ones, should be considered as a regular tool in the future: 1. Prisoner-of-war camps must be registered with the International Committee of the Red Cross (ICRC) immediately upon their establishment; 2. Failure to register camps is a war crime on the part of the party that establishes the camp, and this party will be directly responsible for all further developments in the camp; 3. Immediately upon receiving this information, the ICRC must designate a permanent representative who would reside in the camp as long as it is in operation. The international representative would be obliged to monitor the observance of the existing regulations, regularly submit reports on conditions in the camp, and undertake all necessary measures as needed; 4. UN (Department of Human Rights) and the public must be regularly informed; and 5. In cases of emergency, the representative would inform the UN (Secretary General, Security Council) and the public.

9. Refugee Camps

Based on our 1991-1995 experience, I think that the humanitarian approach to refugee camps is not sufficient to provide the maximum possible assistance to the refugees (11). I propose the following innovations with this respect: 1. Refugee camps must be registered with the UNHCR immediately upon their establishment; 2. UNHCR must designate a permanent commissioner who would reside in the camp as long as it is in operation; 3. UN (Department of Human Rights) and the public (media and

Internet) must be regularly informed of the situation in the camps; and 4. In case of emergency, the UNHCR is obliged to inform the UN (Secretary General, Security Council) and the public.

10. Care for the Abandoned

When the majority of the population massively departs from an area, regardless of the cause, the rest of the population remains, and this may lead to a social collapse (12,13). The remaining, abandoned part of the population, generally the sick and elderly who are not mutually connected in any way, is exposed to great additional risks (12,13).

Up to the present, humanitarian care for displaced persons and refugees, and for detained persons or persons living on the occupied territories, has been developed, but the same cannot be said for the abandoned population.

Care for the abandoned population was defined and implemented for the first time in Croatia in 1995 (12). An abandoned population is a new humanitarian category, and it will be necessary to systematize and develop care for them. Our experience has shown that such populations are generally elderly persons requiring additional forms of humanitarian protection (12,13). This too has yet to be adequately defined.

Peacemaking and Humanitarian Evaluation

Humanitarian concern with war should not cease with the cessation of a conflict. The peace should be used to prevent future potential conflicts, first and above all by the analysis and utilization of peacemaking experiences from the most recent conflict.

11. Helping Hand

God accepted Abraham's request to forgive everyone in Sodom and Gomorrah if he could find ten righteous men in them. There were only five, so the towns were destroyed. However, in human history, the importance of good and righteous people in saving the lives of individuals and communities has been proven many times. After the Holocaust and the formation of the state of Israel, the Yad Vashem Memorial Center was founded. It pays tribute to the millions of victims, and even today, it still collects data on each individual victim. At the same time, it has been proven that there were righteous people in every nation, who have saved Jews without any compensation and at risk to their own lives. Such experiences have also been collected, one by one, so that today over 13,000 people have been proclaimed Righteous. This was the first time in the history that the experiences of righteous people were collected and preserved (14).

Based on these experiences, we have attempted to collect the experiences of the work of good people since the beginning of the war in Croatia, and (partially) in Bosnia-Herzegovina.

I propose the methods introduced in Yad Vashem to be applied: 1. Righteous acts should be recorded and righteous people should be proclaimed after each war, in accordance with the defined criteria and methods of conferral; 2. The proclamation of righteous people would be performed by the Red Cross through a special Committee, defined criteria and conferral methods; 3. Each proposal must be accompanied by verified documentation on the righteous acts; and 4. The archives of righteousness should be located at the Red Cross and be at disposal to the public.

In Vinkovci, Croatia, at the end of the war, we found the left hand of Christ, lacking the forefinger, pierced by a nail from the cross. Christ's hand was outstretched, ready to receive and assist others despite his own suffering and wounds. Thus, we propose that in Croatia this award is called "A Helping Hand."

Righteous people and their deeds have always existed, but unfortunately neither specialized organizations nor science developed methods of collecting their experiences and the creation of a technology of goodness. The international community has been much more involved with politicians, soldiers and criminals than with the righteous. This diminishes the respect and aid to the suffering, and

even supports prejudices against nations when they are undergoing the greatest hardship. The experience of righteousness acquired through suffering should be used much more in order to prevent further suffering and aid other nations and people.

12. Red Cross Forum

After every war, the Red Cross family (local organizations, ICRC, IFRC) would hold a mandatory Red Cross Forum. The goal of the forum would be to assess the effectiveness of the existing and applied humanitarian aid models, the observance of humanitarian laws, and to review a survey of new approaches and methods. Representatives of the UN, governments, humanitarian organizations, research organizations, interested individuals, and others would participate in the work of the forum. The work would be organized as a Research Plenum, with testimonies and presentations on specific topics.

The Red Cross Forum would be announced concurrently with the proclamation of truce and cessation of hostilities, and it would be held two years later, on the same day, in the country in which the conflict occurred. The introduction of the Red Cross Forum would mark the end of the tragic tradition of a systematic sustaining and fostering of the memory of military activities and perpetration of evil (6,15). In this manner, a right to the experience of goodness is introduced, not only within communities that underwent suffering and hardship, but in the international community as a whole.

Discussion

The twelve proposals depicted here should not appear either too ambitious or far-fetched. The peoples of Croatia and Bosnia and Herzegovina have passed through extremely hard times, and their awesome experiences are among the worst of all wartimes. Nevertheless, both countries are civilized, with advanced medicine, ability of local intellectuals to communicate with professionals from other countries, and subsequent awareness and appreciation of human rights and their relationship with medicine. The peoples of Croatia and Bosnia and Herzegovina were not only able to endure the horrors of the war, but also to learn from the respective experiences, and, above all, to retain the ability to forgive, and to – give. We want to give to others, who may be unfortunate like ourselves to find themselves in the state in war, and to all the mankind, our experiences arranged not only as a course of suffering (16,17), but also as a piece of advice, a call for action that may be important at any point of our future. The experience of the past should be used as a preparation for future, as the knowledge of a disease allows the development of a vaccine that will stop or at least alleviate the disease in the future, in all people encompassed by the vaccination.

Some of the twelve proposals are technically simple, and their implementation depends on initiative and good will only. Others require more extensive actions, more participants and stronger public, medical, and political support. Some are more local in character, but none of them is unnecessary, and without a concrete goal and definite strategy, and all extend, directly or indirectly, to all inhabitants of our planet, those living now or those who are yet to be born.

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