



DOSSIER: WAR, EMPIRE, SCIENCE, PROGRESS, HUMANITARIANISM. DEBATE AND PRACTICE
WITHIN THE INTERNATIONAL RED CROSS MOVEMENT FROM 1863 TO THE INTERWAR PERIOD

ON “WAR TASK” AND “PEACE WORK”. THE DUTCH EAST INDIES RED CROSS BETWEEN THE COLONIAL WARS AND THE SECOND WORLD WAR

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ABSTRACT: After the wars against Atjeh (1873-1907) finished, Dutch rule over the Dutch East India was total. The Dutch East Indies Red Cross (DEIRC) awaited a new task, preparing to give aid in the case of a foreign invasion. The problem was that the end of the wars against the autochthonous “rebellions” also meant the end of Red Cross visibility and in the minds of many, the end to Red Cross urgency. Aid in wars against a real opponent is from a point of public relations much more important than the preparation of aid against an unknown opponent. “Work in times of peace” had to be the answer to this problem, but this work was only in name, and not de facto different from preparation of aid in times of war. Through “peace work” the DEIRC prepared itself for the war-task. To be able to fulfil the war-task the Red Cross had to have enough doctors, nurses, and stretcher-bearers. Visible peace-work had to provide for that. It enlarged the Red Cross’ popularity and trained its volunteers. However, at the beginning of 1942, when the Japanese invaded the Dutch East Indies, it turned out to be too little, too late.

KEY WORDS: Red Cross; colonialism; humanitarian aid; Dutch East Indies; First World War; Inter war period.

SOBRE LAS “TAREAS DE GUERRA” Y EL “TRABAJO DE PAZ”. LA CRUZ ROJA DE LAS INDIAS ORIENTALES HOLANDESAS ENTRE LAS GUERRAS COLONIALES Y LA SEGUNDA GUERRA MUNDIAL

RESUMEN: Tras el fin de las guerras contra Aceh (1873-1907), el dominio holandés sobre la India Oriental Holandesa fue total. La Cruz Roja de las Indias Orientales Holandesas (DEIRC) quedaba a la espera de una nueva tarea: prepararse para proporcionar ayuda en caso de una invasión extranjera. El problema era que el final de las guerras contra las “rebeliones” autóctonas también significaba el fin de la visibilidad de la Cruz Roja y, a juicio de muchos, el final de la perentoriedad de la Cruz Roja. El socorro en guerras contra un adversario real era desde el punto de vista de las relaciones públicas mucho más importante que los preparativos de socorro contra un enemigo desconocido. El “trabajo en tiempo de paz” debía ser la respuesta a este problema, si bien resultó diferente solo de palabra, no de hecho, en relación a los preparativos de socorro en tiempo de guerra. A través del “trabajo en tiempo de paz”, la DEIRC se preparó para las tareas relacionadas con la guerra. Para poder cumplir este último objetivo, la Cruz Roja debía conseguir suficientes médicos, enfermeras y camilleros. Las tareas visibles en tiempo de paz debían suministrarlos. Ello amplió la popularidad de la Cruz Roja y formó a sus voluntarios. Sin embargo, a comienzos de 1942, cuando el ejército japonés invadió las Indias Orientales Holandesas, todo resultó demasiado poco y demasiado tarde.

PALABRAS CLAVE: Cruz Roja; colonialismo; ayuda humanitaria; Indias Orientales Holandesas; Primera Guerra Mundial; Periodo de Entreguerras.

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INTRODUCTION

One of the first rules of the Dutch East-Indies Red Cross (DEIRC) –set up in 1870, three years after its mother organisation in the Netherlands, the Dutch Red Cross (DRC)– was that it in case of war or other threats to the Dutch East Indies possessions, as they were called, it would contact the chiefs of the departments of War and Navy forces to see what it could do “to fulfil the needs of the Dutch land and sea forces”.¹ Even theoretically there was no mention whatsoever of aid to sick or wounded adversaries. This of course can –and nowadays mostly will– be seen as contradictory to the Red Cross spirit, but it was anything but contradicting the statutory rules of the International Red Cross of 1863, or the Geneva Convention of 1864. The laws of war did not apply to colonial warfare but only to violent disagreements between members of the so-called civilised countries, that is: Europe, America, Turkey and, from the end of the 19th century, Japan, after it had proved itself militarily superior to China (Best, 1983, p. 20). And indeed, the DEIRC was never reprimanded by the Geneva Committee of the Red Cross for neglecting aid to wounded autochthonous warriors. On the contrary, according to the DRC-board, *primus inter pares* of these authorities, Gustave Moynier, offered not only the Dutch society, but also its overseas department all help imaginable.²

One would think that discrepancies like these between the (imagined) spirit and letter of an organisation, would trigger historical research, but that has hardly been the case. The more or less official Red Cross history, the works of Pierre Boissier (1985) and André Durand (1978), do not mention Red Cross activities in wars of (de)colonisation. In the voluminous work of Caroline Moorehead (1998), there are some pages on the British Red Cross, hardly worth mentioning, on its work during the Boer War 1899-1902, but none for instance on British India. Even the critical work of John F. Hutchinson (1996) neglects colonial Red Cross action, and this goes for the work of Dieter Riesenberger (1992), or the recent bundle of articles by Wolfgang Eckart and Philipp Osten (2011) as well.

However, this last omission was coincidental because Eckart, in his huge *Medizin und Kolonialimperialismus* (Medicine and colonial imperialism), is one of the few who have paid attention to Red Cross work in a colonial context.³

Furthermore, with the exception of two English articles and one Dutch book (Van Bergen, 1992, 2004, 2013), literature on the Dutch East Indies Red Cross is more or less absent. The articles focus on the Aceh wars (1870-1907) and the war of de-colonisation (1945-1949). In the article below I will focus on the time of relative peace in between and especially on the relationship between war tasks and peace work.

DECREASING INTEREST IN RED CROSS WORK

At the suggestion of the conservative Minister of War, J.A. van den Bosch, the DRC was established by Royal decree in 1867, by the equally conservative, militaristic king William III - nicknamed King Gorilla and not (solely) because of his looks⁴. Partly because of this aristocratic, conservative, militaristic footprint, the DRC encountered a huge problem in the years of peace between the Franco-Prussian war (1870-1871) and the Boer war (1899-1902), a war that was closely followed in the Netherlands because of the originally partly Dutch Boers. In fact: one of the ambulances sent there by the DRC was arrested and confiscated by the British, which became one of the reasons why a new Geneva Convention, declared in 1906, was thought to be necessary (Aan de Stegge, Van Bergen, 2013).

What was this problem? During the Franco-Prussian war and again during the Boer war, the Red Cross ambulances attracted a great deal of attention. Attention causes popularity which in turn brings members. Shortly before the Boer war, however, the DRC had almost ceased to exist. In fact, around 1890 it consisted solely of a few small local branches and the main council at The Hague.

Due to its own regulations, which only provided aid to wounded and sick soldiers in time of war, in the years between these wars, the Society for the Lending of Aid to Sick and Wounded Combatants in Times of War, as the DRC in those days was officially called, had been all but invisible and invisibility automatically leads to loss of popularity and members. The main board had long resisted the obvious answer to this problem, work in times of peace, but around 1900 came to admit that there was no real alternative. If the Red Cross ceased to exist it would of course never be able to fulfill its commitments: assisting the Dutch military health service, the MHS, in a war in which the Netherlands were involved, or sending ambulances to foreign battlefields if this was not the case. However grudgingly at the beginning, it soon embraced the advantages work in peacetime would give, as well as recognising the growth of membership and volunteers. For, although this never was officially admitted, this “peace work”, as it was called, was nothing more than a training exercise for work in times of war.

THE DUTCH EAST-INDIES RED CROSS

The DEIRC was founded in 1870 officially as a local branch of the DRC, but of course, due to the distance from the Motherland and the vast size of the territory, with rather more independence and autonomy than local branches in the Netherlands themselves. As was the case with the DRC, its members were largely recruited from upper, conservative classes. Military health officers were common and women played al-

most no part, certainly not in the decision making. Although some small military expeditions had already taken place in which the DEIRC had assisted, the real job began when in 1873 the first of three Aceh wars broke out; in fact three periods of heavy fighting in one long war from 1873 up until 1907.

However, when in 1907 it was declared that the whole of the Archipelago was part of the Dutch Empire –although it would never be completely quiet in Aceh– the DEIRC would face the same problem as the mother organisation had had in the decades before. Without war, no activity. Without activity, no visibility. Without visibility, loss of popularity and membership. But the organization had one advantage. The DRC had already pointed to a way out of all this misery.

THE GREAT WAR

Between the expedition to Flores in 1907 and the First World War there was no military activity and therefore no Red Cross activity worth mentioning.⁵ It was the Great War that directed attention to a somewhat forgotten goal of the colonial Red Cross organisation: preparation for its wartime task in the case of *foreign* rather than domestic hostility.⁶ "Somewhat forgotten" because already in 1912 there had been some debate on the possibility of military conflict with another country in the region. Japan, by the way, was not among the usual suspects, who were all European. Although Japan had just militarily put the Chinese and Russian in their place, it was not until the nineteen thirties that non-colonised Asian countries could be considered to pose a threat as well.⁷

In this debate, the Minister of War T.B. Pleyte pointed out that transport and nursing units, the so called "kolonnes", were of the utmost value. They had to make sure that the Red Cross could take care of the sick and wounded in the rear, because in the case of a war with a European adversary the Dutch East Indian MHS would never be able to do its job completely on its own.⁸ This meant the Red Cross had to be totally reorganised, because, according to Pleyte, as it was, the organisation was incapable of fulfilling such a job. To support this reorganisation, for the first time in its history the DEIRC received government funding.⁹ Setting up new local departments especially increased Pleyte's enthusiasm. They were of the highest interest to "spare the organisation decay and deterioration and give it the extra personnel and materials needed for fulfilling its wartime job".

But this could only lead to success if "already in peacetime it was prepared for and designed according to what in wartime, in a short period of time, had to be done by government and civilians".¹⁰

Pleyte was right. To fulfil such a job the DEIRC was much too frail. In fact, it consisted of no more than

the 11 persons forming the Batavian main board.¹¹ Reorganisation therefore was indeed indispensable, also because it could no longer distract itself from work in peacetime; work which by then was being carried out not only by the DRC, but by almost all national Red Cross organisations. Nevertheless it would take more than two decades before it really got off the ground, leaving aside the work done in some polyclinics which determined its work in the nineteen twenties.

EARLY "PEACE WORK"

However, some work was certainly done. To get the peace work started and to simplify the creation of new departments, the governors of the different parts of Dutch East India were asked to take steps in that direction personally.¹² The goal of the DEIRC was rephrased into dedicating itself in times of peace to social work which would increase interest in the organisation, and in times of war assisting the MHS in the form of nursing and further transport of the wounded brought behind the lines by the MHS "especially those of our own country".¹³ Although a telling remark, this also was somewhat superfluous because the wounded transported back by the MHS would already have been "especially those of our own country". Again, this rephrasing meant nothing more than that the peacetime work was mainly considered important because it would deliver the number of personnel needed to satisfactorily fulfil the wartime task.¹⁴

Indeed, several new departments were set up, but to the taste of the main board, they were frequently over-enthusiastic in fulfilling their social tasks, however important for the war task.¹⁵ An attempt to solve this problem, by creating transport and nursing units partly independent of the local departments, and required to mainly practise together with army units, was too much to ask of almost all departments. It completely failed. It was considered too complicated and too expensive.¹⁶

Actually, to undertake the reorganisation, the DEIRC had to wait for approval by the DRC of its new rules and regulations, for officially it was still the mother organisation. Although in hindsight it probably would not have mattered much, luckily for the DEIRC it had not done so for this approval had not arrived before 1920, which had everything to do with a complete reorganisation of the DRC itself during World War I (Van Bergen, 1994, pp. 226-256). The main point of this reorganisation was that, what was in practice, an already existing subordination of the Dutch Red Cross to the MHS, was made official, in fact stripping the organisation of every claim to neutrality and independence, although it naturally rejected such criticism. But it is no surprise that in World War I the DRC did not send ambulances to the battlefields of Verdun, Somme and Ypres. Every man,

woman and piece of material had to stay within Dutch borders until it was absolutely certain the Dutch army would not get involved in the fighting. And this certainly was not reached before a truce had been signed (Van Bergen, 1994, p. 210; Van Bergen, in print).

According to the Dutch main board this reorganisation was on a par with the wanted development of the DEIRC.¹⁷ New in the rules and regulations of this latter organisation was article 10:

The central committee promotes as much as possible that in peacetime everything is done to prepare all departments and sub-departments for what is asked of them in the case of war or uprising.¹⁸

As the word “uprising” indicates, the new task would not endanger the old one, which was assisting the Royal Dutch East Indian Army if it had to suppress autochthonous resistance to Dutch rule.¹⁹

In spite of all this, the First World War and the above mentioned reorganisation only resulted in a short revival. As had been the case between 1907 and 1914, between 1922 and 1932 the history of the Dutch East Indian Red Cross was again written mainly in Batavia and Buitenzorg, and it was no coincidence that they were the two places with Red Cross polyclinics. The only other activity was financially supporting other Red Cross organisations, but this too was drastically reduced after a short period, because of the economic crisis.²⁰

CONSERVATISM VERSUS PEACE WORK

Another reason for this limited activity however, is that until the nineteen twenties the Batavian board kept insisting on a highly conservative interpretation of peacetime work, although aiding healthy military men –as the DEIRC did for instance by providing tobacco or even a billiard table if asked for– also contradicted the letter of the rules and regulations. This conservatism is already demonstrated in the reprimand the all too enthusiastic sub-departments had received. The Red Cross had to restrict itself to aid in times of war and preparation for this task in times of peace. Anything else was out of order.

An early example, typical of this attitude, was the ambulance for aid in the Transvaal during the Boer War. It was established by a ladies committee at Semarang, especially set up for the occasion, but with the support of the local Red Cross branch. However, every request to Batavia to also support this ambulance was rejected as “contradicting the goals of the organisation”,²¹ although sending ambulances to foreign battlefields was the *raison d'être* of the Red Cross in general, and part of the rules and regulations of the Dutch mother organisation. The ambulance went anyway, and in spite of its opposition, the central com-

mittee in later years presented it as an example of the noble deeds the DEIRC had done over time.²²

This continued concentration on the wartime task led to an even stranger situation one decade later. It prevented the Dutch East Indian Red Cross from giving aid during the plague epidemic which raged in the Dutch East Indies from 1911 onwards. So the DRC felt obliged to send an ambulance all the way from the Netherlands;²³ an act of medical care seen by most Europeans in the archipelago as a total waste of money, for the plague was thought not to endanger the European, but only the autochthonous inhabitants.²⁴ Just as the First World War had caused the DRC to seriously look at preparation of the wartime task in case of foreign hostility, so it was probably this inexplicable situation that led to the conviction that some adjustments in the rules and regulations had to be made, making room for peace work. But as said, it nevertheless would take another twenty years before this really would get off the ground.

AID IN TIMES OF PEACE

The year was 1932 when finally the DEIRC seriously undertook some attempts to broaden its field of work, to aid in situations not directly linked to wartime preparation. This in spite of the fact that since 1922 –even as a separate organisation, although officially still a DRC-department– it had already been a member of the Paris-based League of Red Cross organisations, an organisation primarily directed at aid during natural disasters or epidemics. This was in contrast to the International Committee of the Red Cross in Geneva, which continued to focus on aid during war. At the same time it was concluded that the preparation for wartime tasks in the case of a foreign attack, needed a new and powerful impulse. It became particularly clear when Japan invaded Manchuria, although neutrality did not permit this to be made explicit.

According to the Red Cross historian H. Bakker, this meant that the real Red Cross spirit in the Dutch East Indies had finally awakened. And his colleague J.W.F.A. van den Berg de Bruyn stated consensually that the time of “sweet composure” had ended.²⁵ In any case it had a major positive effect on membership. Soon the number had reached 6000, spread over no less than 32 local departments.

Of those members in 1937 1,000 had done their first aid-exam, with another 1,000 studying.²⁶ What triggered this change in comparison with the rigid policies in the years around World War I? Or better: was it really a change? Not particularly. Preparation of the wartime task was and remained the underlying reasoning, only it had finally dawned upon the DEIRC, about thirty years after its mother organisation, that for this broadly interpreted peacetime work

had proven to be the perfect instrument. But that the peacetime work had to be in the service of wartime preparation was explicitly written into the new rules and regulations, which were approved in 1939.²⁷

The nineteen thirties peacetime work was regarded as being quite the opposite of the social work of the nineteen twenties in polyclinics. It had to remain perfectly clear that the social work was a means and not a goal in itself, as the work in the polyclinics had been. For this could only hinder the second most important task of every Red Cross organisation: preparing in times of peace for the aid to sick and wounded soldiers during war. This could hardly be called social work, but it certainly was an important part of the nineteen thirties peace work description. This also explains why the sheer fact of putting together new transport units –by far the most important executors of the wartime task– was considered to be peace work. But all this had little to do with work *on behalf of* peace. Peace work was work in times of peace, explicitly or implicitly directed at the task expected from the Red Cross in times of war.

PEACE WORK, WARTIME TASKS AND PROPAGANDA

Of course propaganda said different. Probably under the influence of the critique of radical Dutch peace organisations, who accused the Red Cross, and certainly the national Red Cross, of being nothing more than a militaristic organisation in sheep's clothing, in the nineteen thirties disaster aid was accentuated, followed by the words "war included". War therefore was considered to be a disaster, a more or less natural phenomenon, rather than a man-made display of enormous violence. The wartime task was pushed into the background and imbedded in the Red Cross work as a whole.²⁸ At the request of the central committee the actual primary task was presented as a mere side show or even completely left out, because this could harm the Red Cross popularity.²⁹

It was not before a DEIRC-Conference in 1938, that a plea was made to put the wartime task up front again, also in the propaganda, although this still had to be done with some caution. The pacifist critique had worn off, and the thunderclouds of war were beginning to appear on the horizon. To quote health officer and member of the central committee J. Th. Wilkens:

We now have to prepare ourselves, there is no other way possible, for the support we have to give to the MHS when war comes. The public –and here some tact must be used– which will come to the aid of the Red Cross, must be fully alive to the fact that at this moment it will do so first and foremost in the service of the Red Cross wartime task; it is forbidden to deviate from this point of view.³⁰

Furthermore a few months before the conference, Wilkens had already written that peace work

and war work were not necessarily incompatible. On the contrary, Red Cross work in times of war eased the suffering and therefore was in fact peace work as well. He therefore in one stroke defined all Red Cross work as peace work, even as work on behalf of peace. For every bit of Red Cross work during war was a step towards peace.

In a certain way the wartime task of the Red Cross has been somewhat snowed under in propaganda. It is about time to set matters right. A *war* propaganda can never be distilled from this and certainly not in our Dutch and Dutch East Indies community, for there only the necessity of retaining our neutrality, our independence, could be the cause of war. One would rather not dwell upon the possibility that the misery of war could strike us as well, and one is afraid, that, if the Red Cross merely points at this possibility, the public will turn away from us. But *if*, somewhere in the future, our army, no: our entire population, is exposed to the disasters of war, then it must be absolutely impossible that the Red Cross would fail to fulfil its wartime duties. Everyone who admits this can, fully imbued with its peace ideal, propagate the war work of the Red Cross.³¹

PLANNING PEACE WORK AND WAR TASKS

From the middle of the nineteen thirties the plans for preparation of the work during wartime, in which now also according to the Red Cross employees, Japan would be the most likely adversary, were made in abundance. The above mentioned conference was already the second dedicated to the subject. In both planning and at the conferences peacetime work was praised because it was deemed necessary as wartime preparation. In one of these plans, already written in 1934, it could be read that peacetime work was useful, but wartime work had to remain up front.³² And even the slight distinction between the two would soon disappear. In a speech of Van den Berg de Bruyn held only one year later, it was said that the transport units could do their job because they had been "prepared through peace work".³³

All in all it is no wonder the first statement to be discussed during the 1938 conference was:

The inescapable extension of the war task of the Red Cross will only be possible if as intensively as possible, sympathy for the Red Cross can be aroused; the development of the peace task can widely awaken the interest in the Red Cross and therefore contribute largely in building an organisation more powerful and productive.³⁴

Only a widely popular organisation could be a constant factor in society and only then could preparation for its main task be possible. Practice had shown "that peace work had become the essential element in making the Red Cross ready to really take preparation for its wartime job into its own hands".³⁵

It was also no wonder that one of the common factors in all the plans presented was that peace work had to be expanded, not in its own right, but precisely because it was of use for the wartime task. And a second common factor was that Red Cross work was more than an act of voluntary humanitarianism. Red Cross work was an act of national interest, making it, in a war against a foreign foe, a national duty comparable with fighting in the army. Surprise was frequently expressed at the fact that the society was imbued with the importance of an army, but not of a well functioning national Red Cross society.³⁶

RED CROSS AND MILITARY HEALTH SERVICE

What was meant when talking of a “well-functioning Red Cross society”? As had been the case during the Aceh wars, a well functioning Red Cross meant a Red Cross working completely according to the wishes of the MHS, of which it would be a mere extension. Different from what had occurred in the Aceh wars, however, it was said that the task of the Red Cross had to be complementary because –as Pleyte had already said twenty years before– it was impossible for the MHS to take the entire care for the sick and wounded on its shoulders. To make this complementary work possible, civilian hospitals had to be requisitioned and Red Cross personnel had to be subordinate to military personnel, under the military rules of discipline and punishment. That the Red Cross was supposed to be a *cheap* extension is proven by the remark that an MHS fully prepared, would simply be too expensive.³⁷ And this, by the way, is exactly why in the 1860s so many governments and military authorities had embraced Dunant’s Red Cross idea. It provided the answer to the widespread call for a better care of wounded soldiers, without being too much of a financial burden.

But this was all theory. The problem was that even after the growth of the Red Cross there were simply not enough men and women to staff the necessary transport and nursing units, as there were not enough doctors to fulfil the medical tasks. And it was highly uncertain that there would be within a reasonable time span. Nevertheless the central committee kept on demanding that the “wishes uttered from military side” would be met, also when in 1939 it turned out that it would be impossible to fulfil even the minimal demands.³⁸

For instance, on 1 September 1938 there were 269 aid workers registered, of the almost 1000 who were thought to be essential. The lowest estimate of physicians thought to be necessary, was by far not met. The DEIRC, so the conclusion had to be, was quite unready to fulfil its task if war should come. Wilkens tried to explain how it had come to this disastrous situation and concluded that Dutch East Indian society simply was not ready for the Red Cross ideals of:

grand, international aid everywhere where there is suffering, irrespective of individual, nationality, race or religion. To really understand the Red Cross ideals demands a certain international culture, an environment with a certain spirituality deeply embedded in the entire population. Although living together in a most harmonious way, our Indian society exists of extremely different races and peoples. It is therefore not a unity that can be seized by one common ideal. We must not forget that especially the indigenous character is completely strange to the international ideals the Red Cross propagates. Of course, the native community is largely built on helping and assisting each other; but this aid confines itself to family and village. A sense of assistance to the entire human race is completely strange to the native.³⁹

As well as the lack of acceptance on a psychological level, neither were the autochthonous inhabitants very inclined to do any practical work.

In comparison with the Western community, the native one, only to a far lesser degree, sees the necessity of anticipation, of preparation, of what possibly is going to happen in a future far, far away. Nature, which delivers everything necessary for the here and now, and fatalism, part of the Eastern character, cause it not to concern itself with days yet to come.⁴⁰

This, by the way, was exactly the same criticism Westerners had received sixty years before if they were considered not anxious enough to embrace the Red Cross ideal and organisation. But in the nineteen thirties in the Dutch East Indies, practical European disinterest in the Red Cross needs another explanation. Although psychologically and spiritually totally prepared to engage in this fine work, the Europeans in the Archipelago lacked:

a character of national or local patriotism. Here, one is inclined to engage in work for the good of a residence in which one often stays only temporarily, to a much lesser degree. But also towards the Empire, the urge, which in the Netherlands causes many to voluntarily join an organisation on which in times of war one can depend, is lacking. The sense of responsibility towards the nation is felt much less by Europeans in the Indies than is the case in the Motherland.⁴¹

In taking this stand, Wilkens could explain the lack of voluntary Red Cross personnel in the Dutch East Indies with the help of what is seen as one of the great Red Cross paradoxes: a neutral, international ideal executed by national organisations working in close contact with anything but neutral military health services. The autochthonous inhabitants were too fatalistic to get any work done and did not think internationally enough to comprehend the ideal, and the European inhabitants did not care enough for temporary house and hearth to get involved in the ideals practical translation. It must be said, by

the way, that Wilkens was a bit rosy on Red Cross cooperation in the Netherlands before World War II. Again mainly due to the fact that it recruited its board members primarily from conservative, aristocratic circles, until the end of the Second World War, or even later, until February 1953 when parts of the provinces Zeeland and South-Holland were flooded, it was not the people's movement it is today.

To end this situation, in the whole of the Indies propaganda had to be used to make the population accept the ideal of the Red Cross and especially the work that followed from it. There was sympathy, judging by the donations regularly made, but the willingness to translate sympathy into action, was missing. This was the reason Wilkens again put the wartime task up front in the propaganda, because for that specific task, financial support alone could and would never be enough.⁴² But peace work as well remained of the utmost importance. Not only out of its ongoing propagandistic value or because it delivered the training for the wartime task, but also because it was the foremost means to get the autochthonous population to assist as well.⁴³

OBLIGATORY RED CROSS AID

Nevertheless, as time progressed and the possibility of war grew, it became clear that propaganda alone, would probably not do the job in time. There seemed to be only one way out of this problem, for which the mentioned subordination of Red Cross work to military wishes, provides a hint. This subordination not only raises questions about the humanitarian and neutral content of Red Cross aid, but also its voluntary character. "Force", "duty" and "sanctions" became words heard more and more in Red Cross circles, because, so it was said, the army could not depend on such an uncertain factor as voluntary aid. The question as to how to raise enough personnel to staff transport and nursing units, who were also willing to accept military orders,⁴⁴ was answered by pointing to the possibility of obligatory Red Cross work.

At the second conference, November 1938, the shortage of doctors and assistants especially, was brought to the fore, leading again to the necessity of forceful measures even though at the first conference of 1936 these had not been without criticism.⁴⁵ An attempt to get medical students involved in Red Cross work on a voluntary basis had failed entirely, so P. Peverelli, head of the Batavian health service, pointed out a fine initiative of the Dutch Indies School of Physicians. The students of the highest grades did take part in exercises of transport units, and this was not a coincidence. In the report of his speech it is put as follows:

Force is executed. It is not left to the young themselves, they are not asked if this work maybe has their

sympathy, or if they do not mind if their pair of white trousers gets dirty or wrinkled on the field, or if their nails get torn a bit. That's the spirit and the speaker honours the director of the school who by so doing has promoted our task.⁴⁶

Peverelli hoped directors of other medical schools would soon follow this example of force given, an example that has to be seen in the light of conscription. Because of conscription armies existed of sons and husbands, who could not be denied the right to be well cared for when wounded or sick. Many were of the opinion that the *right to receive* care could only be met sufficiently if there was a *duty to provide* care.⁴⁷

The problem of the autochthonous inhabitant's unwillingness to participate also played its role in the difficulties in getting enough unit assistants. The course they had to follow was not easy and so a certain development was needed. This meant that "in present day circumstances mostly Europeans had to be asked". But they were frequently conscripted and many of the non-conscripts were required for civilian services.

This meant the Red Cross had to look for assistants among autochthonous and Chinese inhabitants too, but only amongst "the more intelligent ones" and even those would only be recruited for minor Red Cross positions.⁴⁸ This proposition was supported by the physician Ch.W.F. Winkel, who some years earlier had been part of the Ethiopia-ambulance of the DRC, during the Italian-Abyssinian war. He made a plea for the introduction of an extra ordinary, non-combatant, Red Cross conscription for non-Europeans who were a bit more "intellectual", a word he himself provided with brackets. It was in line with a proposition of the central committee member Van der Werf that to get enough unit personnel, introduction of forced labour was essential.⁴⁹

A committee following the second conference studying the diverse resolutions accepted, reached the same conclusion. There was no way the necessary number of doctors, nurses and assistants could be found only with the means available at that moment. History had shown that nothing could be expected if Red Cross work was to stay voluntary. The exact solution was still not clear, but the committee did know it could not come from the DEIRC itself, but had to come from the Dutch East Indies government. If the government could not or would not come up with a solution, the Red Cross could do nothing more than to let the government know that assisting the MHS would be impossible.⁵⁰

The only way out seemed to be civil conscription, which was in fact introduced in 1940. The intention was "to select persons to fulfil activities indirectly concerning the countries' defence, if not enough vol-

unteers were available".⁵¹ On this, in the middle of July 1939 Wilkens had already mentioned that the army "wanted to create a forced civil conscription organisation of certain officials who for the Red Cross itself were hard to get, and put them at Red Cross' disposal". J.A.J. Meijer, DEIRC-main board member, added that the army command thought that this could help the Red Cross in its hour of personnel need "without losing its voluntary character". He was convinced that the Red Cross could get enough doctors this way, because those doctors who refused Red Cross service could be "captured by means of this organisation set up by the army".⁵²

Nevertheless it remains questionable that even if civil conscription could solve the gigantic personnel problems of the Red Cross, if only because the wish to force autochthonous inhabitants into Red Cross service was being questioned, at a time when it was also being contested that there should be a separate autochthonous army. Perhaps that is why this point was handled with extreme care. Not everybody was a supporter of a substantial increase of autochthonous personnel in the Dutch East Indies army. Red Cross service could perhaps give supporters an extra argument in favour of their plea.

The question is if the words of Pleyte before World War I, i.e. that the Red Cross was anything but ready, were still valid at the time World War II came to the Archipelago. One might wonder, because of all the concentration on the war task of the Red Cross, through propaganda, force, or so called peace work. Besides, the 1950 account of all the work the Red Cross had done in the Indies from days of old stated that the DEIRC had been completely up to its task at the time Japan invaded.⁵³ But this hardly can be further from the truth. In spite of all the preparation, little had changed, if only because of a lack of personnel. It, furthermore, is very much the question if it would have made any difference whether the DEIRC

had been prepared or not. Probably this question has to be answered in the negative.

CONCLUSION

For the Dutch East Indies Red Cross the times between the three major wars fought in the Dutch East-Indies –the Aceh war 1873-1907, the Second World War (1942-1945) and the war of decolonisation (1945-1949)– were times of little activity. The main reason for this was a conservative interpretation of the statutory words "aid in times of war". However, in the case of absence of war this means invisibility and therefore lack of popularity. Around and about World War I there was some deliberation on the obvious answer to this problem, work in times of peace, but the main board would not have it. For this it took until the nineteen thirties before it finally started to work, too late to really make a difference in Red Cross strength before the Japanese invasion.

This Red Cross peace work, as it was called, was nothing more than preparatory work for the war task the organisation had to fulfil if war with a foreign adversary was to come. In contrast with a war against "indigenous rebellions", it was thought in such an event the military health service would not be up to its task on its own. This also was the reason for finally embracing peace work.

Without it there probably would not even be a Red Cross organisation anymore to assist the army's physicians and nurses. So, although in propaganda it was often pictured otherwise, peace work and the war task were in fact one and the same, only differing in time: a time of peace and a time of war. Completely in agreement with the old line "if you want peace, prepare for war", the Red Cross peace work was nothing more than a preparation for the task expected from the organisation in times of war.

NOTES

- 1 *Handelingen van het Nederlandsche Roode Kruis* [Minutes of the Dutch Red Cross], III, p. 101 (henceforth: *Handelingen*); *Verslag der Verrichtingen van het Nederlandsch-Indisch Roode Kruis* [Account of the Activities of the DEIRC], 1870-1873, p. 32 (henceforth: *Verslag der Verrichtingen*).
- 2 Wiltens, van Delden (1873), pp. 14-16; also: Pitteloud (1999), pp. 296, 313, 316.
- 3 Eckart, 1997, esp. pp. 41-55.
- 4 For this and the following parts on the DRC, see van Bergen, 1994.
- 5 The connection between military action and Red Cross activity was noticed by van den Berg de Bruyn as well. See van den Berg de Bruyn, c.1935, p. 13; *2e Congres van de Afdeling Nederlandsch-Indië van de Vereeniging Het Nederlandsch-Indische Roode Kruis gehouden te Batavia-Centrum op 16 november 1938*, [2nd Conference of the DEIRC] part I, II, III (without place; without date) (henceforth: *2e Congres*), I, p. 9.
- 6 *Handelingen*, XXV, p. 278; *Verslag der Verrichtingen*, 1914, pp. 3-4.
- 7 *Handelingen*, XXI, pp. 105-106.
- 8 Archive-DRC (Dutch National Archives), nr. 51 (map: 1915-1925), Pleyte to Governor-general, 14-10-1914 (nr. 55/2520), p. 21.
- 9 Pleyte to Governor-general, 14-10-1914, pp. 3-4; Pleyte to Governor-general, 23-6-1915 (nr. 82).
- 10 Pleyte to Governor-general, 23-6-1915; *Verslag der Verrichtingen*, 1915, p. 3; *2e Congres*, I, p. 9.
- 11 *Handelingen*, XXV, p. 303.
- 12 Berg de Bruyn, 1935, p. 12; *Handelingen*, XXV, pp. 303-306; *Verslag der Verrichtingen*, 1915, pp. 4-5; 1916, p. 3.
- 13 *Verslag der Verrichtingen*, 1915, p. 5.
- 14 *Verslag der Verrichtingen*, 1915, p. 5.
- 15 *Verslag der Verrichtingen*, 1916, p. 4.
- 16 *Verslag der Verrichtingen*, 1917, pp. 4, 7, 15; van Dijken, Helfferich, 1934, esp. p. 1192; Peverelli, 1935, esp. p. 725.
- 17 Van den Berg de Bruyn, 1935, pp. 12-13; *Verslag der Verrichtingen*, 1925-1926, p. 28.
- 18 *Verslag der Verrichtingen*, 1915, p. 18.
- 19 Van den Berg de Bruyn, c.1935, p. 24.
- 20 Van den Berg de Bruyn, (1935), pp. 12-13; *Verslag der Verrichtingen*, 1925-1926, p. 28.
- 21 *Verslag der Verrichtingen*, 1899, p. 4; *Handelingen*, XVI, p. 25.
- 22 *Verslag der Verrichtingen*, 1919, p. 4; Bakker, 1932, esp. p. 197.
- 23 Bakker, 1932, pp. 200-201; *1e Congres van de Afdeling Nederlandsch-Indië van de Vereeniging Het Nederlandsch-Indische Roode Kruis gehouden te Batavia-Centrum op 21 april 1936* [1st Conference of the DEIRC], Part I, II, III (without place, without date) (henceforth: *1e Congres*) III, p. 34; Rombach, 1992, pp. 67-68; van der Mandere, 1927, p. 36.
- 24 Archive DRC (National Archives The Hague), nr. 51 (map: 1915-1925), Lingbeek to main board, 25-8-1915.
- 25 Van den Berg de Bruyn, 1935, p. 13.
- 26 Bakker, 1938, esp. p. 821.
- 27 DEIRC Statutes, 1939, p. 10.
- 28 Archive-DRC (National Archives The Hague), nr. 51 (map: 1925-1935), J.W. Meyer Ranneft, *Aan de ingezetenen van Nederlandsch-Indië* [To the people of the Dutch East-Indies] (propaganda-leaflet), 1 Nov 1935.
- 29 For instance: *1e Congres*, III, pp. 25-26.
- 30 *2e Congres*, I, p. 54.
- 31 Wilkens, *Prae-advies*.
- 32 Ten Siethoff, 1936, esp. p. 53; Van Dijken, Helfferich, 1934, p. 1190.
- 33 Van den Berg de Bruyn, 1935, p. 10; Spit, 1939, p. 86.
- 34 J.A.J. Meijer, 'Het Roode Kruis-congres 1938 in Nederlandsch-Indië' [The Red Cross Conference 1938 in the Dutch East-Indies], in: *Het Reddingwezen / De Samaritaan*, 1938, pp. 349-352, esp. pp. 349-350 (quote: p. 350); *1e Congres*, I, p. 60; *2e Congres*, I, pp. 50-53.
- 35 *1e Congres*, I, p. 9.
- 36 Spit, 1939, p. 88; Tissot van Patot, 1936, esp. p. 1051; Van Dijken, Helfferich, 1934, pp. 1193-1194; *2e Congres*, I, p. 20.
- 37 Van Dijken, Helfferich, 1934, pp. 1193-1197; Mobilisatie van het Roode Kruis [Red Cross mobilisation], *Deli-courant*, 16 Dec 1941, 1e paper, p. 3.
- 38 *1e Congres*, II, p. 44; *1e Congres*, III, p. 53; *Verslag der Verrichtingen*, 1936, p. 20; *2e Congres*, I, p. 2.
- 39 Wilkens, *Prae-advies*, p. 14.
- 40 Wilkens, *Prae-advies*, p. 14.
- 41 Wilkens, *Prae-advies*, p. 15.
- 42 Wilkens, *Prae-advies*, pp. 18-19.
- 43 Wilkens, *Prae-advies*, p. 24.
- 44 *1e Congres*, III, p. 15.
- 45 Wilkens, *Prae-advies*, pp. 25-26, 30.
- 46 *2e Congres*, I, p. 46.

- 47 *2e Congres*, I, p. 46; see also Van Bergen (2011).
- 48 *Handelingen*, 21 June 1940, p. 44; Dossier Central Committee Dutch East-Indies (DRC-Archives, The Hague) historical archive, ordner 2: Indië, Chapter: Samenvatting van de hoofdzaken van hetgeen tijdens de vergadering van het dagelijks bestuur op 27 juli j.l. verhandeld werd [Summary of the main points brought to the fore at the main board meeting on 27 July], p. 2.
- 49 Archive DRC (National Archives, The Hague), nr. 51 (map: 1938-1940), Winkel to main board, 13-9-1939; *2e Congres*, I, pp. 42-43.
- 50 Dossier Central Committee, chapter: samenvatting, pp. 4-5 (quote: p. 5).
- 51 Archive NIOD-Amsterdam, doc. nr. 029891.
- 52 Dossier Central Committee, chapter: samenvatting, pp. 1, 8.
- 53 Archive NIOD-Amsterdam, doc. nr. 029883: H.J.V.O. Kluit-Kelder, *Eindverslag van de werkzaamheden door het Nederlandse Rode Kruis gedurende vele jaren in Ned. Indië verricht* [End report on the work of the DRC in the Dutch East-Indies from days of old] (unpublished manuscript).

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