Uniting in Humanity: The Role of Indonesian Red Cross, 1870-1960

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Abstract

The Red Cross is an important organization engaged in the humanitarian field. Red Cross had a long history regarding its important contributions among national movement to the Indonesian Revolution period. The history of the Red Cross from Bataviaasch Comite to be the Indonesian Red Cross (PMI) was very Received: complex, due to many dynamics and chronicles in it. There were lots of interesting June 8, 2020 problems to study on the Red Cross transition from the colonial government to the Republic of the Indonesia government. Based on the reason above, this research Revised: discusses the Red Cross transformation from the Bataviaasch Committee into the June 9, 2020 Indonesian Red Cross (PMI). The research was historical research by applying four stages. Analysis results indicated that Red Cross's development from Bataviaasch Accepted: June 10, 2020 *Committee* to PMI had many obstacles, both internal and external ones. Moreover, political constellation at that time also gave a great effect on Indonesian Red Cross development. However, these uncertain conditions have confirmed the Indonesian Red Cross establishing process.

Keywords: Red Cross; Bataviaasch Comite; Humanity.

Introduction

Human has a moral obligation to provide humanitarian assistance as long as they live in the world. The assistance is not limited to some obligations in certain areas, but it extends to international level based on human solidarity. Voluntarism is not divided into religious, philosophical, political or ideological frames. In this case, voluntarism has a noble goal that is providing assistance and development based on individual encouragement to help those in need. The urge is a symbol of mutual security as social beings. In addition, the government has the responsibility related to people's welfare. However, the government cannot always effectively respond to all consequences that occur to humans, both from artificial disasters or natural disasters. So, this is the function of humanity organizations in helping, and completing services and efforts that the government cannot provide, because injured people have the right to receive treatment from medical personnel (Beigbeder, 1991, p. 386). The importance of humanitarian organization underlies the formation of a humanitarian organization. The Red Cross is an organization with an important role, mainly in humanitarian missions. At the beginning of Red Cross period, humanitarian assistance focused on casualties caused by war only. At the end of 19th century, natural disaster aid was increasingly distributed by the International Red Cross which then standardized aid provision. Although, its initial aim to help injured victims among war as a result of armed conflict, mainly in Europe, International conference resolution in Geneva for the first time in 1863 clearly indicated that Red Cross establishment was a shadow of post-conflict rebuilding, through peacetime relief activities. Jean Henry Dunant himself escorted this activity, so, the various resolutions of Red Cross International Conference in the 19th century reaffirmed the mandate to launch post-conflict humanitarian aid that occurred among countries in Europe (Smith, 2013, p. 18).

In February 1863, several Switzerland elite figures gathered in Geneva to join Henry Dunant. They gathered to embody various ideas, so they formed "International Committee" to help wounded soldiers" (*International Committee for Aid to Wounded Soldiers*). In 1873, the committee used the name "International Committee of the Red Cross" (*International Committee of the Red Cross/ICRC*) (Haug, 1993, p. 52).

Geneva Convention idea reached the Netherlands, which was subsequently formed Nederland Roode Kruis (NRK). NRK was established based on a Royal Decree on July 19, 1867. Subsequently, on 8 October 1870 the Bataviaasch Committee (Batavia-Embryo Red Cross Committee) was established, and became the first part of the Dutch East Indies. In 1872, there was a changing on its name to Centraal Committee Nederlandsch-Indie van de Nederlandsche Vereeniging tot het Verleenen van Hulp aan Zieke en Gewonde Krijgslieden in Tijd van Oorlog (Central Netherlands Indies Committee of Dutch Association to Provide Aid to Soldiers who were Injured and Wounded during War), which then on October 21, 1873 the Dutch colonial government changed it to Het Nederland-Indiche Rode Kruis (NIRK) which in 1895, it changed once again to Central Committee in Nederlandsch Indie-van de Vereeniging van het Nederlandsche Roode Kruis (Central Committee in Indies of Dutch Red Cross Association). In 1920, the nomenclature changed once again to Nederlands Rode Kruiz Afdeling Indie (NERKAI). After the changing, there were three polyclinics established in Batavia and *Buitenzorg*. The committee in the Dutch East Indies dealt with nursing, assistance to disaster victims, work welfare, and personnel training (Jaquet, 1983, p. 112). Since 1934, the Dutch Red Cross activity has grown, including donor and blood transfusion activities.

Some changes to the nomenclature indicated that before it became Indonesian Red Cross (PMI), their activities had gone through many processes in Indonesia. The nomenclature changes that happened several times were accompanied by strong reasons and various events. Based on that reason, the main problem in this research is the changing process or dynamic of the Red Cross organization since the formation of the *Bataviasch Committee* to become Indonesian Red Cross (PMI). By using the historical method, this research was studied diachronically. The research problem as a reference in the article is how was the organizational transformation that occurred in *Bataviasch*

Committee to become Indonesian Red Cross (PMI); who were the involved parties in the organization from *Roode Kruis* to Indonesian Red Cross (PMI); and what were the organizational contributions from *Bataviasch Committee* to PMI for the Dutch/ Indonesian Indies community. By utilizing colonial-era newspaper articles and related libraries to international and national interest, this research was prepared with a social science approach mainly related to the organizations. This article describes the role of the Red Cross organization from the *Bataviasch Committee* to the Indonesian Red Cross, from 1870 to 1960.

Establishment of *Bataviaasch Comite* and *Nederlands Rode Kruis Afdeling Indie* (Nerkai)

The Red Cross establishment in the Dutch East Indies was based on a decision issued by the Netherlands Kingdom, on 19 July 1867 under the name *Het Nederlandsche Rode Kruis* (NRK). Based on the decision, on 8 October 1870 *Bataviaasch Comitevan Het Rode Kruis* (Batavia Red Cross Committee) was established in the Dutch East Indies. *Bataviaasch Comite* was chaired by J.F.R.S. Van Den Bossche and assisted by secretary A.J.W. Van Delden (*Java-bode: nieuws, handels- en advertentieblad voor Nederlandsch-Indie,* November 27, 1870). In the beginning, this organization handled general social problems. The colonial government then made a forum by forming the subdepartment under *Bataviaasch Comite* (Batavia Committee). It was beyond expectations, the sub-department turned out to have a good performance in overcoming war casualties (Fauzia, 2013, p. 143). Meanwhile, from 1930 onwards Dutch East Indies Red Cross activities were operated under the name of the Dutch East Indies Red Cross (*Het Nederland-Indiche Rode Kruis*-NIRK).

This sub-department then developed into a Red Cross embryo in the Dutch East Indies. In 1872, the name was changed to *Centraal Comedy Nederlandsch-Indie van de Nederlandsche Vereeniging tot het Verleenen van Hulp aan Zieke en Gewonde Krijgslieden in Tijd van Oorlog* (Central Netherlands Indies Committee of the Dutch Association to Provide Aid to Soldiers Who Were Injured and Wounded during the War).

The organization then underwent a change back on October 21, 1873, under the name *Het Nederland-Indiche Rode Kruis* (NIRK). In 1895, it was transformed once again into the *Centraal Committee* in *Nederlandsch Indie-van de Vereeniging van het Nederlandsche Rode Kruis* (Central Committee in the Dutch East Indies of the Dutch Red Cross Association). It was temporary until in 1920 the organization changed its name to the *Nederlands Rode Kruis Afdeling Indie* (NERKAI). After the nomenclature change, three polyclinics were established in Batavia and Buitenzorg, then in 1929 a hospital was also established. The organization had a humanitarian mission related to nursing, assistance to disaster victims, social assistance and nursing training, then developed in 1934 including handling blood transfusions (Frits, 1983, p. 112).

Dutch East Indies Red Cross Organization and its Contribution

At the beginning of its establishment, the *Bataviaasch Committee* was successful in collecting donations of *f*19,000 from a number of donors (*Java-bode: nieuws, handels-en*

advertentieblad voor Nederlandsch-Indie, 27 November 1870). NRK also collected donations through the lottery, with 434 prizes and a grand prize of *f*100,00. The lottery was distributed to several districts, including: Semarang, Yogyakarta, Surabaya, Jakarta, Bogor Tangerang, Cirebon, Pekalongan, Surakarta, Padang, Deli, Aceh, Pasuruan, Palembang, Banjarmasin, and Makassar. The donations in the form of lotteries caused negative excesses even it did not have significant impact (*Java-bode: nieuws, handels-en advertentieblad voor Nederlandsch-Indie* October 9 1878).

Regardless of the purchase of an ambulance that cost a lot of money because it was used by NRK in the Franco-Prussian war, NRK managed to transfer 25,000 to NIRK. That amount was added to another 10,000 transferred by the Rotterdam division, during the second expedition of Aceh (early summer of 1873). NIRK was satisfied with the amount. It indicated that the Dutch did not forget their "sons" who fought "to defend the rights of their citizens", after the Indies had made an effort to help Franco-Prussian war victims. NIRK did not only accept remittances, but also clothes, analgesic (pain relievers), antipyretics (fever drugs) and supplements (vitamins). The shipment was commissioned by King William III personally. According to W. Hingman, a former infantry general, NRK transferred more than f70,000 for the benefit of troops during an extensive Aceh expedition. It was added by the cost of Lombok expedition (1894) which reached around 18,000 (*Java-bode: nieuws, handels-en advertentieblad voor Nederlandsch-Indie* October 9, 1878).

Large donations were also obtained from military action in the East Indies. Van den Berg de Bruyn said that military action in the East Indies received more than f100,000 contributions during the Aceh expedition. According to historian NRK H. Ch. G. J. van der Mandere, NRK supports were in the form of money and goods amounted to f15,000 during the Aceh expedition until 1888. The General Assembly concluded that due to this money, the Dutch could minimize the loss of life by conducting intensive care on the army and navy forces, and moving it from Aceh to Padang. The intensive care maximized the assistance provided by the Dutch community "(van Bergen, 2019, p. 1). In 1873-twentieth century, the Netherlands experienced a period of depression. In addition, the Netherlands had to face a bloody conflict when expanding (in the form of *punitive expedition* and administrative expansion) in Aceh, so it led to the outbreak to Aceh War until 1903. The number of fatalities was around 100,000 and it became the most fatalities number in Dutch military history (Holland, Porter, Robinson, 2005, p. 64). This was the reason why NRK's role was very important in minimizing casualties, so they obtained a lot of support from the Netherlands.

In the process, the management of NIRK encountered many challenges, due to several factors, including the distance between the Dutch East Indies and the Netherlands which was quite far away, the vast area of the Dutch East Indies, as well as the independence and autonomy to regulate the Red Cross activities. Similar to NRK, NIRK members were mostly recruited in a conservative and closed manner. Therefore, general military health workers and women did not have the opportunity to make NIRK decisions and strategic plans (van Bergen, 2014, p. 31).

Despite facing many challenges, NIRK kept to contribute on several military expeditions. NIRK's contribution in embodied humanitarian values began in 1873, when the Aceh War occurred for the first time. The war that lasted for three periods from 1873 to 1907 claimed many injuries and deaths, both from Dutch and native forces. The main priority was helping the wounded Dutch troops. After several time from the Aceh war, in 1907 it came a statement that the entire archipelago became part of the Dutch Monarchy. While NIRK's tasks for the humanitarian mission in Aceh had not yet been completed, the problems faced by NIRK were still the same as the NRK organization under the *Bataviasch Committee* which had emerged for decades.

Without war, NIRK did not have activity, and without activity, there was no visibility. Similarly, without visibility, NIRK would lose popularity and membership. On the other hand, the NIRK organization had an advantage, because it was supported by the Dutch Red Cross (NRK). The complicated problems encountered by NIRK could be resolved after NRK provided assistance and intervention. A common problem was the scarcity of medicines and medical equipment for NIRK operation (van Bergen, 2014, p. 31).

It was important to remember that NIRK had collected more than *f*90.000 until 1871. F60,000 from the donation was sent to the Dutch Red Cross in Den Haag. In 1875, NIRK had branches in Batavia, Padang, Semarang, Surabaya, and Makassar. NIRK also established three clinics in Batavia and Bogor regions in 1920 and established a hospital in 1929 (Fauzia, 2013, p 143).

In addition, NERKAI equipment was also supported by Morris branded ambulance, standard medical equipment, and others. The officers in the NERKAI Team polyclinic consisted of the head, a Dutch doctor, several female nurses, male nurses, a guide (a nurse in the field). Female nurses wore nurses' clothes as nurses in general, with a Red Cross symbol tied to the hand (MacCormack, Tilbury, Triggs, 2001, p 159).

The development of military nursing in the Dutch East Indies was not as fast as other European countries. This was due to the condition of good stability in the Dutch East Indies region which was marked by infrequent wars and conflicts. This had an impact on the dynamics of Netherlands Red Cross in the Dutch East Indies. The organization that was established in 1867 received support from the community, especially women. Such support was showed by the large number of women involved in organizing nurse training (Lynaugh, 1995, p 85).

Nurses who participated in the Red Cross organization were sometimes allowed to work in hospitals to improve their practical skills. Learning process at the hospital was performed by becoming an assistant of military surgeon. The lessons received were, for example, routine handling faced in daily life, such as handling accidents, influenza diseases, and others. The nurses did not have much capability about the handling of war victims because the victims had to be provided by psychological treatment as well. Nevertheless, some nomenclature of local Red Cross incorporated in the Netherlands Red Cross, especially the Red Cross in the Dutch East Indies, continued to educate nurses who had passed the theory test, the nurse was provided the opportunity to practice (van Bergen, 2014). The Netherlands Red Cross nurse had the first opportunity and practical experience during the Franco-German War of 1870-1871 (Lynaugh, 1995, p 85). In addition, colonial imperialism also encouraged the development of nurse training in Britain. The British colonial war of the second half of 19th century in India and Africa was part of an imperial expansion scheme as well as a trial of Army Nursing Services. The nurse's services could not be realized in the Netherlands, even though Netherlands had greater colonial powers. The Dutch attitude was very paradoxical, due to almost unmatched exploitation of the colonial economy, but the Dutch did not comply the policy of formal expansion through war. Dutch military medical services in the Indies reflected this situation. Military Medical Services that had been designed in 1817 remained unchanged throughout the nineteenth century, although international policies on the Red Cross were issued (Lynaugh, 1995, p 85).

The Establishment of the Indonesian Red Cross and the End of Dualism

Actually, there was a passion to establish the Indonesian Red Cross (PMI) since 1932 which was pioneered by Dr. RCL. Senduk and Bahder Djohan. Then, the establishment proposal was submitted at the NERKAI congress (1940), but it was rejected. During the Japan occupation, the proposal was resubmitted, but it was still rejected. On September 3, 1945 President Soekarno ordered the Minister of Health Dr. Martoatmodjo's Buntaran to establish a National Red Cross Agency to show the international world that the existence of the Indonesian State was a real fact after the proclamation of independence on August 17, 1945. On September 5, 1945, Dr. Buntaran established the Five Committee consisting of Dr. R. Mochtar, Dr. Bahder Johan, Dr. Joehana, Dr. Marjuki and Dr. Sitanala, to prepare for the establishment of Red Cross in Indonesia. On September 17, 1945 the Executive Board of Indonesian Red Cross (PMI) was established with the first chairman, Drs. Mohammad Hatta.

At its inception, the Dutch-Indonesian Red Cross received support from the American Red Cross. This support was provided in the form of food and drug packages. In 1945, PMI received greater assistance. The aid packages were mostly distributed to Java for prison camps. It was heard by the Japan, so Japan tried all means to thwart the shipment of the package. There was no detailed information about the packages sent to the Netherlands Red Cross, but the American Red Cross was trying to provide assistance in large numbers, although threat of sabotage toward the shipment could occur more (Rode Kruis-pakketten voor Indië. Het vrije volk: democratisch-socialistisch dagblad August 23, 1945).

Prof. Supomo in the capacity of the Republic of Indonesia delegation held an informal meeting to conduct consideration with the Dutch Prime Minister, Dr. Drees. Then, they held a meeting to discuss the cooperation of the Netherlands Red Cross with the Indonesian Red Cross. It was also attended by high representative of the Kingdom, Dr. L.J.M. Beel. The Netherland Red Cross, the Indonesian Ministry, and the Central Committee of the Indonesian Red Cross during the meeting in Yogyakarta approved the collaboration between the two parties. Under the leadership of the

coordinating committee, all Red Cross workers in Central Java coordinated in order to provide the necessary assistance to the community (Indonesië Dr. Drees ontmoet prof. Supomo Samenwerking Rode Kruisgroepen - Compromitterende brieven, in De Heerenveensche koerier: onafhankelijk dagblad voor Midden-Zuid-Oost-Friesland en Noord-Overijssel January 14, 1949).

Several Javanese medical staff were intensively trained in the program to socialize hygienic life, and also teaching simple treatment in the villages. The training should be performed by moving from one location to another. This was caused by the conditions of the physical revolutionary war between Indonesia and Dutch. The program was assistance from the colonial government through the Dutch East Indies Red Cross. The Hygiene Mantri School program was revived in 1945 by trained health workers in the Rockefeller unit before the war, then transferred to Magelang in 1947 (Harper & Amrith, 2014, p. 104).

"Nederland helpt Indië" Foundation and the Netherlands Red Cross jointly provided assistance in the form of some Alasphine drugs worth around five thousand guilders to fight yaws in Indonesia. The assistance arrived in the first half of February in Batavia (Tegen Framboesia Het dagblad: uitgave van de Nederlandsche Dagbladpers te Batavia 31 January 1949). In its development, in 1948, the Red Cross in the Dutch East Indies (NIRK) had experienced a crisis and weakening in the organization, one of which was caused by Corruption. This had an impact on the decline in public confidence in the organization. Prominent NIRK figures from Batavia, donors, and chief of the logistics department of the Red Cross in the Dutch East Indies (NIRK) (Arriens) intervened to overcome the problem by visiting several areas, one of which was Semarang for several days. The visit was aimed at stabilizing the performance of the Red Cross to carry out its humanitarian mission well. The main step that should be taken was to restore the trust of donors and the community as a result of problems arising internally, one of which was related to issues about misuse of funds, the arbitrariness of management in the leadership and other problems hampering NIRK operations. The Red Cross branch of Semarang actually had reliable human resources, because it had long been managed by prominent figures from the Red Cross in Batavia. Then, NIRK officials evaluated and replaced NIRK leadership positions in Semarang. Some NIRK leaders in Semarang were temporarily replaced by figures from the Red Cross who had served in Jakarta (De Rode Kruis Affaire Eerste en Belangrijkste Taak: Het Vertrouwen Herwinnen Leidende Figuren uit Batavia in De locomotief: Samarangsch handels- en advertentie-blad January 13, 1948).

In 1948, Yogyakarta region was largely under the Dutch control. The central area and eastern as well as northern suburbs were occupied by the Dutch, with a garrison estimated to consist of a thousand soldiers, several Stuart tanks and armored cars as well as Machine Gun operators. The suburbs were occupied by Republican forces. In a major attack on the night of December 29, 1948, Republican forces encroached into four blocks from the center of the city. On January 9, 1949 the Siliwangi Battalion carried out a four-hour attack (with mortars and machine guns) penetrating into the city center, in which battalions continued to fight for two hours before Dutch tanks and armored vehicles were finally forced to retreat.

Instructions of the Armed Forces Commander on November 9, 1948 governed the implementation of military and civilian wehrkreise. By the civil wehrkreise arrangements, it was also reflected in the participation of civilians in the enforcement of independence at that time. Likewise, Java Command Headquarters Instruction No. 4 / MBK.D / 1949 allowed members of military families working in public kitchens and the Indonesian Red Cross to participate in the unit and command posts.

Civilian casualties during the revolutionary war in Yogyakarta until 1949 were numerous, especially in the suburbs. Red Cross could not provide the maximum contribution in this area. Because one ambulance was destroyed by the Dutch in the 19 December 1949 attack; The Dutch had refused to cover of any damaged Indonesian Red Cross facilities. Yogyakarta Hospital treated 108 civilian casualties during December 19-25, 1949 (Kratoska, 2001, p.105).

On January 16, 1950, there was only one national association in one country, the Dutch Government dissolved NERKAI and handed over its assets to Indonesian Red Cross. NERKAI was represented by Dr. B. Van Trich while Indonesian Red Cross was represented by Dr. Bahder Djohan. From 1950 to 1963 the Indonesian Red Cross continued to provide assistance. Finally, the Government of the Republic of United State of Indonesia issued Presidential Decree No. 25 on January 16, 1950 and affirmed by Presidential Decree No. 246 on November 29, 1963. The decree contained the appointment of the Indonesian Red Cross Organization as the only organization authorized to carry out Red Cross activities in the Republic of United State of Indonesia, in accordance with the Geneva Conventions (1864, 1906, 1929, and 1949) (MacCormack, Tilbury, Triggs, 2001, p. 159).. The main task of the Indonesian Red Cross based on Presidential Decree No. RIS 25 of 1950 and Republic of Indonesia Presidential Decree No. 246 of 1963 was to provide first aid to victims of natural disasters and victims of war in accordance with the contents of the 1949 Geneva Convention. Internationally, the existence of Indonesian Red Cross was recognized by the International Committee of Red Cross (ICRC) on June 15, 1950. Then, Indonesian Red Cross was accepted as a member of the 68th National Association by the League of Red Cross and Red Crescent Societies (League) which is now called the International Federation of Red Cross and Red Crescent Societies (IFRC) at the International Federation of Red Cross and Red Crescent Societies in October 1950 (Rode Kruispakketten voor Indië. Het Vrije Volk: Democratisch-Socialistisch Dagblad August 23, 1945).

Conclusion

The Red Cross is a very important organization in the Indonesian history. The organization engaged in the field of humanity has contributed a lot to the communities. Since it was first established in Indonesia with the name *BataviaaschComite* under the Dutch government until, it finally became the Indonesian Red Cross facing various problems ranging from the scarcity of equipment and drugs to negligence of the majors and corruption in the body of the organization. However,

it has a lot of contribution and role to humanity. *Bataviaasch Comite* at that time of its activities received many donations from donors through the lottery. These donations were used to sustain humanitarian activities performed at the time.

Subsequently, the *Bataviaasch Comite* changed its name to *Het Nederland-Indiche Rode Kruis* (NIRK), at that time, NIRK focused on helping Dutch soldiers who were victims of the war, especially the Aceh War. After Indonesian independence, President Soekarno ordered that a National Red Cross agency should be established on September 3, 1945. It was intended that the existence of Indonesian state could be further proven to the international world after the proclamation of independence on August 17, 1945.

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