



## Our world. Your move.

31<sup>st</sup> International Conference of the Red Cross Red Crescent  
Geneva, 28 November–1 December – For humanity



### COMMUNICATIONS BRIEF HEALTH CARE IN DANGER

#### BACKGROUND

In armed conflict and other situations of violence all over the world, violence disrupts health-care services at the moment when they are needed most. Thousands of wounded and sick people can be denied effective health care when hospitals are damaged by explosive weapons or forcibly entered by fighters, when ambulances are hijacked and when health-care personnel are threatened, kidnapped, injured or killed. Entire communities can be left without access to adequate services as hospitals close, and vaccinations campaigns come to a halt. Combatants and civilians die of injuries that they ought to survive because they are prevented from receiving the timely medical assistance to which they have a right. Violence, both actual and threatened, against the wounded and the sick, and against health-care facilities and personnel, is one of the most crucial yet overlooked humanitarian issues of today.

**“They entered through the parking lot, ordered us at gunpoint to lie on the ground, then shot dead the patient on the stretcher and left again as if nothing had happened” – Red Cross volunteer describing the execution of a patient on Red Cross premises**

#### RED CROSS RED CRESCENT RESPONSE

Providing assistance to the wounded, regardless of the side on which they fought, is the idea that gave birth to the International Red Cross Red Crescent Movement close to 150 years ago. Protective symbols such as the red cross and red crescent were introduced to clearly identify medical installations, vehicles and personnel as protected entities. These provisions are enshrined in the four Geneva Conventions of 1949 and their Additional Protocols, and are binding on all States and parties to conflicts around the world – yet they are not always respected.

Despite the challenges, national Red Cross and Red Crescent societies as well as the International Committee of the Red Cross (ICRC) mount emergency responses to outbreaks of conflict around the world including a range of medical activities, from collecting the wounded to war surgery. The ICRC takes practical initiatives to create an environment of respect for the work of the Red Cross Red Crescent Movement, such as providing information on the location of health-care facilities to all parties to a conflict, marking health-care centres with signs barring weapons inside, and negotiating ceasefires to enable humanitarian assistance or safe passage for ambulances through checkpoints.

In order to aid these efforts, in 2008 the ICRC launched a study to evaluate how violence affects the delivery of health care in 16 countries where it is operational. The study serves as the basis for a four-year initiative which kicks off at the International Conference and aims at improving security and delivery of effective and impartial health care in armed conflict and other situations of violence.

The Red Cross Red Crescent Movement believes that it is foremost the responsibility of states, security forces, and policy-makers to resolve what is today one of the biggest yet least recognized humanitarian problems. It is committed to engage these stakeholders over the next years and jointly work out solutions that will improve security around the delivery of health care in armed conflict and other situations of violence, helping millions around the globe.

### **CALL TO ACTION**

The Red Cross Red Crescent Movement is using the opportunity of the 2011 Statutory Meetings to address the issue of violence against health care. Through the draft resolution, “Health care in danger: respecting and protecting health care in armed conflict and other situations of violence”, States and the Red Cross Red Crescent Movement are requested to take action on the following:

#### **States are requested to:**

- Remind parties to armed conflicts and actors involved in situations of violence of the obligation to respect and protect the wounded and sick, health-care personnel and facilities and medical vehicles, and to ensure safe and prompt access for the wounded and the sick to health care.
- Intensify efforts adopting domestic implementation measures - based on relevant international legal obligations for protection of wounded and sick and health-care services in armed conflict and other violent situations - including the adoption of legislative, regulatory or practical measures.
- Adhere to Protocol III (additional to the Geneva Conventions of 1949, relating to the Adoption of an Additional Distinctive Emblem), and adopt legal and enforcement measures on the use and protection of emblems. This includes the adequate marking of medical facilities and vehicles for purposes of identification and protection.
- Ensure armed and security forces implement international legal obligations with regard to protection for the wounded and sick and health-care services, including development and adoption of policies, guidelines and training.
- Develop and adapt criminal legislation to aid the investigation and suppression of crimes committed against health-care personnel, their facilities and means of transport, and the deliberate and arbitrary obstruction of the delivery of health care.

#### **The Red Cross Red Crescent Movement is called upon to:**

- Support efforts to gain safe access to the wounded, sick and others in need of health care during armed conflict and other situations of violence.
- Enhance understanding on the problem of violence against patients, health-care workers and facilities, including lobbying for implementation of solutions and building a global community of concern.
- Gather information on security incidents affecting health care in accordance with mandates to protect and assist those affected by armed conflict and other situations of violence.



Yemen, 2011: Ambulances take huge risks during armed conflicts to reach and transport the wounded and can fall victim to stray bullets.

- Strengthen representations to parties to armed conflict, particularly through dialogue with non-State armed groups, in order prevent attacks against health-care services, and remove unwarranted restrictions on safe and prompt provision of health care.
- Continue supporting and strengthening capacity (i.e., training and instruction) of local health-care facilities and personnel for protection and safe health-care delivery. This includes training for National Society staff and volunteers on the provision of effective medical assistance and security.
- As auxiliaries to public authorities, National Societies are requested to address violence against health-care workers, facilities and beneficiaries in their respective countries. National Societies are also called upon to disseminate information on obligations under international humanitarian law and human rights law as related to protection of health care during armed conflict and other situations of violence. This includes the adoption of measures to create safer access for health-care services and personnel.

## EXAMPLES FROM THE FIELD

### Safe access for polio vaccinators

In 2007, the Afghan health ministry and the World Health Organization asked the ICRC to use its unique contacts with the armed opposition in Afghanistan to negotiate safe passage for polio vaccinators. Although some areas remain inaccessible, the armed opposition's agreement to this plan enabled the countrywide vaccination campaigns to resume, and the coverage has dramatically increased the number of vaccinations being carried out to this day.

### Ambulances in Mexico: caught in the crossfire

As gang violence continues to increase in Mexico, so does the demand for ambulance services. The Mexican Red Cross operates around 80 per cent of all emergency ambulances in the country and sometimes finds itself caught in the crossfire between rival gangs, or between police and gangs, when trying to evacuate victims. Ambulance crews live in constant fear of being caught in the middle. The ICRC is helping the Mexican Red Cross review its current procedures and practices, introducing new ways to assure the safety of these dedicated ambulance crews.

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#### **ADDITIONAL RESOURCES**

[31st International Conference website](#)

[31st International Conference official documents](#)

["Health care in danger: respecting and protecting health care in armed conflicts and other situations of violence" draft resolution and background document](#)

[ICRC Health Care in Danger campaign](#)

[Health care in danger: questions and answers](#)

[Health care in danger: making the case](#)