

High-Level panel debate

“Health Care and Violence: the need for effective protection”

Thursday 25 September 2014

09:00 - 10:30 a.m.

UN General Assembly building, Conference Room 6

– Concept Note –

Rationale

The protection of the wounded and sick and of those who take care of them during conflict was the focus of the first Geneva Convention, 150 years ago. The idea that such persons deserve a specific protection under international law was unambiguously consolidated in the four Geneva Conventions of 1949 and their two additional protocols of 1977. Today, with increased frequency, incidents involving violence against healthcare personnel, facilities and transports, or obstruction of healthcare delivery, are regarded and accepted as being no more than the inevitable side effect of conflict, or even worse, part of a deliberate strategy.

Violence against patients and healthcare workers is one of the most crucial yet overlooked humanitarian issues today and disregards the sanctity of healthcare and the right to health. Violence affecting the delivery of healthcare services is a multifaceted and complex issue that concerns a large number of countries. It might involve direct attacks against those providing or receiving healthcare or the unlawful obstruction of healthcare delivery; the attacks might be directed not only against healthcare workers and wounded and sick people, but also against healthcare facilities and transports. Lack of safe access to healthcare can be both acute and chronic and almost invisible.

Violence immediately disrupts healthcare services when they are needed most. One single attack may have a knock-on effect with serious consequences, such as the departure of professional healthcare workers, creating the perception that careers in the medical field are high-risk – dissuading individuals from following these paths, and the closure of healthcare facilities, leaving hundreds, even thousands, of people in need without access to healthcare, encouraging the unwell or injured to seek care from informal or unprepared health facilities.

Over the long term, violence can also affect the sustainability of healthcare systems and their capacity to recover quickly after a crisis, undermining development gains and eroding once effective systems with devastating consequences for the entire population.

Objectives

The objectives of the High-Level panel are:

- **To raise awareness of the phenomenon of violence affecting healthcare services** and its consequences over the national healthcare systems and the population they treat;
- **To highlight the importance of building a comprehensive protective environment** for national healthcare systems, of which the development of national legislation in full respect for international law and medical ethics are important elements;
- **To recommend preventive measures member states can take to strengthen the protection and resilience of their health-care systems to face crises** in order for them to continue ensuring the safe and impartial delivery of healthcare services in all circumstances.

The participants

The event will be chaired by the President of the ICRC and the Director-General of the World Health Organisation (WHO) and moderated by the UN Under-Secretary-General for Humanitarian Affairs. The UN Deputy Secretary-General will share opening remarks . The panellists will be eminent representatives of various stakeholder groups – governments, the international health and humanitarian response system and health professionals.

Chair:	Mr Peter Maurer , President of the International Committee of the Red Cross (ICRC) and Dr Margaret Chan , Director-General of the World Health Organisation (WHO). [Introduce the event]
Opening remarks:	H.E. Jan Eliasson , United Nations Deputy Secretary General [The DSG will give a broad statement along the lines expressed in his report on the strengthening of the coordination of the humanitarian assistance, highlighting the importance of the subject and the need for the international community to find solutions to address it]
Moderator:	Ms Valerie Amos , Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator [Highlight the current challenges that affect health-care systems during conflicts]

Panellists: [5 minutes each]

H.E. Boerge Brende, Minister of Foreign Affairs of Norway

[The panellist will mention the close relationship established by Norway with the Norwegian Red Cross and the ICRC in the context of Health Care in Danger project since 2012. He will also inform the audience on initiatives supported by Norway – such as the Foreign policy and Global Health initiative - that work towards building a stronger protective environment for national health care systems through enhanced commitment from States].

H.E. Carl Bildt, Minister of Foreign Affairs of Sweden

[Panellist will share his view on how a country with a strong reputation for its engagement in peace building can promote respect for health care delivery and international law at international level; he will also present the active role of the Swedish Red Cross in the Health Care in Danger project]

Prof Thérèse Aya N'dri-Yoman, former Minister of Health and HIV prevention of the Republic of Ivory Coast

[Panellist will share her experience in re-establishing a functioning healthcare system in a country recovering from a crisis]

Dr Margaret Chan, Director-General of the World Health Organisation (WHO)

[Panellist will highlight the principles of the sanctity of health care and the right to health. She will also reaffirm the commitment of WHO to document the problem, propose solutions, and advocate for the protection of health workers and facilities]

Mr Peter Maurer, President of the International Committee of the Red Cross (ICRC)

[Panellist will share the ICRC and broader Red Cross and Red Crescent Movement's understanding of the widespread phenomenon of violence affecting healthcare services and the imperative to restore acceptance and respect for rules that protect the delivery of safe and impartial healthcare services]