



High Level Side-Event on Protection of Health Care

The objective of the event will be to mobilize states and organizations to:

- Translate high-level political engagement on the protection of health care into concrete action at national level to make progress towards operationalizing Security Council resolution 2286
- Support implementation of concrete commitments at the national level through international cooperation and dedicated resources
- Share best practices and challenges: highlighting successful initiatives and existing tools

Background:

The continuing attacks on healthcare deeply affect the civilian population and strike at the core of their communities. These attacks often lead to institutions closing, staff leaving, and systems breaking down. The lack of health care services has both immediate and long-term effects on the mortality and morbidity of the population. It drives displacement and destabilizes communities. Rebuilding and restoring these systems and services after conflict often take a very long time, in turn deterring return of the population and hampering development.

In 2016, with the full support of the Security Council and the co-sponsorship of more than 80 Member States, resolution 2286 showed a high level of political will on the need to draw attention to the protection of healthcare. With 2021 marking the five-year anniversary of UN Security Council Resolution (SCR) 2286, there is both a need and an opportunity to revitalize the discussion on the protection of healthcare. The ongoing pandemic has again highlighted the impact of attacks on healthcare. Safe access to healthcare will be a key element to be able to treat the sick, vaccinate the population, and end the pandemic. Following the International Red Cross and Red Crescent conference in 2011, the ICRC launched its Health Care in Danger (HCiD) initiative to garner political and public attention on the protection of healthcare. In 2014, the UN General Assembly adopted a resolution on the protection of health care and global health. Since 2016, protection of health care has been raised consistently across the protection of civilian's agenda. In 2021, the issue is at the center of the UN Secretary General's (SG) annual report to the Security Council on the protection of civilians.

SCR 2286 "strongly urges states and all parties to conflict to develop effective measures"¹. The SG's recommendations pursuant to the resolution lays out practical measures to enhance the protection of healthcare, including "adhering to relevant international treaties; reinforcing national legislative frameworks; ensuring legal protection for medical ethics; promoting regular cooperation and the sharing of best practices; enhancing the role of United Nations peacekeeping operations; exerting influence to ensure respect for the law; and promoting awareness of the law and a culture of respect"²

Despite clear recommendations, there has been very limited progress on their implementation. The five-year anniversary of the resolution offers an opportunity to acknowledge the continued challenge posed by attacks on healthcare and even more importantly to discuss the measures taken by States to protect healthcare in armed conflict. It is an occasion for states and organizations to redouble efforts and focus on the implementation of practical measures.

The COVID-19 pandemic has demonstrated that the functioning and performance of the health care system is more critical than ever. At the same time, the pandemic has also demonstrated the challenges of responding to public health emergencies in countries where health systems have been decimated by conflict and when violence against health care appears to be on the rise. Added to these challenges is the phenomenon linked to stigmatization of healthcare in the context of the pandemic, which has been observed globally, included in contexts where there is armed conflict.

As a way forward, what can states and other actors do to strengthen the protection of health care?

In line with IHL obligations and the recommendations of the Secretary-General, states can:

- a. Review and, if necessary, amend their military doctrine and practice;
- b. Review and, if necessary, amend their domestic legislation;
- c. Deploy programming aimed at fostering preparedness and resilience of health systems;
- d. Implement campaigns aimed at increasing respect for healthcare by the civilian population;
- e. Invest in strengthening evidence base on violence against healthcare (e.g., occurrence, consequences)
- f. Promote regular cooperation, including exchanges of good practices amongst all stakeholders at the national and international level

¹ <https://digitallibrary.un.org/record/827916?ln=en>

² <https://reliefweb.int/report/world/recommendations-un-sg-submitted-pursuant-para-13-sc-resolution-2286-2016-measures>

Agenda (tbc)

- I. Introduction**
- II. Development and Follow-up of SCR 2286**
- III. Implementation of SCR 2286**
- IV. Conclusion**

Guiding questions for participating members states

Within the six areas of action identified:

- What actions have members states taken at home since the adoption of Security Council Resolution 2886 to promote the security and safety of healthcare workers in times of conflict?
- What actions do members states envision to scale up existing good practices to strengthen the protection of healthcare?
- What existing options for international cooperation, development and humanitarian aid can be better used to assist in protecting healthcare in conflict?
- What challenges and opportunities have member states noted while responding to the Covid-19 pandemic in the context of armed conflict?
- What actions have been taken by regional organisations for the protection of healthcare? What challenges and opportunities have they faced, and are there any lessons learned that can be applied to the future?