ECOSOC Humanitarian Affairs Segment 2016

Safeguarding health access in conflict, upholding international humanitarian law
Global Protection Cluster

Wednesday, 29 June, 18:15 – 19:30
Room CR11, United Nations Secretariat, New York

This is one of the side-events to be convened during the ECOSOC Humanitarian Affairs Segment, in keeping with this year’s theme: Restoring Humanity and Leaving No One Behind: Working together to reduce people’s humanitarian need, risk and vulnerability.

Background and objectives

With the passage of General Assembly resolution 68/98 in 2014 on protecting health care workers and the unanimous adoption of Security Council resolution 2286 on 3 May 2016, which strongly condemned attacks on health workers and facilities and demanded an end to impunity for those responsible, normative recognition has increased over the past several years that attacks on and interference with health care violate the right to health, as well as international humanitarian law when they occur in the context of armed conflict. Yet, violence and threats against health care workers and facilities continues to occur in conflict zones around the world, with tragic incidents in Afghanistan, Syria and Yemen recently dominating media headlines. In Syria alone, since the beginning of the conflict, Physicians for Human Rights has documented more than 360 attacks on some 250 medical facilities in which more than 730 medical personnel have been killed and attacks appear to be increasingly in ferocity and scale. Consequently, at a time when Syrians need health care support most and also face other health threats such as polio and cholera, almost half of all medical facilities in Syria are now closed or only partially functioning. Yemen has experienced a similar pattern of the seemingly targeted and systematic destruction of health facilities. Despite growing awareness of the gravity of this issue, and its adverse impacts for health access, systems and infrastructure, accountability remains elusive and impunity too often prevails.

Discussion points

Against this backdrop, the side-event will focus on the following suggested questions:

- How can information between various actors be consolidated?
- What would be the elements of an advocacy strategy on attacks on health services?
- What might be the elements of good practice in reducing the risk of attack on health services?

Intended outcomes/conclusions/recommendations

This side event builds on the Secretary-General’s Agenda for Humanity, in particular the Core Responsibilities to prevent and end conflict; to respect the rules of war and uphold norms; and to leave no one behind, as well as Sustainable Development Goals 3, 6 and 16. This event is crosscutting for the pillars of the UN, bridging peace and security, human rights and humanitarian and development agendas. It is an issue that cuts across and galvanizes
many different communities – hence the diverse proposed panel composition – and on which even Member States who cannot find political resolution to intransigent conflicts can agree and provide an entry point for common consensus.

This event will build on the momentum on this issue from last month’s historic adoption of Security Council resolution 2286, which was unanimously adopted and co-sponsored by more than 80 Member States, and subsequent discussions at the World Humanitarian Summit, to take concrete actions and make principled commitments to safeguard access to healthcare and uphold international humanitarian law in conflict zones. This event also provides a platform to elaborate on best practices from practitioners in maintaining neutrality and impartiality to provide uninhibited healthcare access in conflict zones, and for updates from academics and WHO on efforts to collect and make transparent data on attacks on health workers, facilities, transports and patients, as well as updates on other measures agreed by the General Assembly in 2014.

**Format**
A short film, followed by a panel discussion

*If panel discussion:*

**Chair:**
- Norway

**Moderator:**
- Simon Russell, Global Protection Cluster Coordinator

**Panel composition:**
- Mr Richard Wright, UNRWA
- Dr Rick Brennan, WHO
- Mr Pierre Gentile, International Committee of the Red Cross
- Mr Len Rubenstein, Center for Public Health and Human Rights, Johns Hopkins University; former President of Physicians for Human Rights
- Mr Fabien Dubuet, Medics Sans Frontières

**Background Material**


WHO’s Global Strategy on human resources for health: [http://www.who.int/hrh/resources/16059_Global_strategyWorkforce2030.pdf?ua=1](http://www.who.int/hrh/resources/16059_Global_strategyWorkforce2030.pdf?ua=1)

WHO’s Attacks on Health Care webpage with many statements, stories, videos and other references: [http://www.who.int/hac/techguidance/attacks_on_health_care/en/](http://www.who.int/hac/techguidance/attacks_on_health_care/en/)

[www.globalprotectioncluster.org](http://www.globalprotectioncluster.org)

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