



Palacký University
Olomouc



ICRC



Faculty
of Law



HEALTH CARE MATTER
IT'S A MATTER
IN OF LIFE
DANGER & DEATH

Health Care in Danger:

a Central and Eastern European perspective

May 11–12, 2017

Palacký University Olomouc, Czech Republic

A regional conference in Olomouc discusses preventing and addressing violence against patients, healthcare providers and facilities in emergencies.

On 11th and 12th May 2017, over thirty representatives of civilian and military national authorities, academics, health professionals, NGOs and National Societies of the Red Cross from Central and Eastern Europe met in Olomouc, Czech Republic, to discuss the Central and Eastern European perspective on the issue of violence against patients, healthcare providers and facilities in emergencies.

The Conference was hosted by Palacký University and co-organised by Palacký University, the Czech Red Cross and the International Committee of the Red Cross (ICRC).

The Conference started with a **general session on Health Care in Danger (HCiD) from a Central and Eastern European perspective and beyond**. During this session eight panelists representing international and national humanitarian organizations, Czech public authorities and academia shared their experiences, challenges and good practices from a variety of contexts ranging from the migration crisis in Central Europe to the Ebola epidemic in West Africa or the medical response in the armed conflict in Ukraine. A rich open discussion reflecting relevant aspects and details of the presented topics followed.

The second day of the Conference was opened with a presentation of the Citizen AID project and application, and an overview of HCiD thematic recommendations. Both presentations provided an excellent introduction into the work of **three thematic working groups** which sought to consider local and regional challenges and responses to violence against healthcare in the context of Central and Eastern Europe. Recommendations and tools developed in the framework of the HCiD project were used as a basis for discussions.

The first group considered the “**legal aspects** of the protection of the wounded, sick and health care personnel during armed conflicts and other emergencies”. Participants, legal advisers from national authorities, academics and representative from the ICRC, considered possible legal provisions and practical measures (including training of healthcare professionals and other stakeholders, for example through first aid training) that would increase the protection of healthcare providers (such as creating a legally protected status for them triggering heavier penal sentences) as well as respect for medical ethics and confidentiality.

What is the Healthcare in Danger project?

It is an initiative of the International Red Cross and Red Crescent Movement, aimed at addressing violence against patients, health-care workers, facilities and vehicles, and ensuring safe access to and delivery of health care in armed conflict and other emergencies.

A broad Community of Concern, made up of health professionals, academia, States' representatives, weapon bearers, civil society, international organizations and more, seek to address the issue at local, regional and international levels by supporting the implementation of recommendations and measures to protect health care.

More information on:

<http://healthcareindanger.org>

There is a wealth of information, recommendations and tools on:

<http://healthcareindanger.org/resource-centre/>



The second group considered the issue of “**Access to health care during emergency situations** in peace time including migration” and addressed in particular the issue of **preparedness and coordination** of the emergency response. The group gathered representatives of the ICRC, Red Cross national societies, relevant national authorities, academics health professional associations and NGOs. It identified some challenges and key aspects leading to a coordinated response, emphasizing the importance of sound knowledge of the response system by all the stakeholders and good communication and coordination within and between categories of responders and towards the public. (The issue of managing volunteers was in particular highlighted). The importance of preparedness management was highlighted, not only in relation to assistance on physical needs but also in relation to psycho-social needs and information sharing. Besides, while the general impression is that different services are well prepared to handle natural disasters, there seems to be a lack of preparedness mechanisms/capacity in case of terrorist attacks and/or use of CBRN (Chemical, biological, radiological and nuclear) weapons.

Finally, the third group, consisting of military experts (operations, military health services), NGOs, health care emergency responders, relevant national authorities, military students of the University of Defence and the ICRC discussed “**Military and emergency services in the context of armed conflict – Ensuring the protection of health care during armed conflict**”. The group discussed challenges to the protection of the medical mission during armed conflicts, such as complexities linked to the multiplication of actors in current conflicts, the difficulty to articulate conducive civilian-military interactions in the field, as well as the issue of perception of medical services provided by foreign armed forces to local populations. The group, which also explored how some of these points could be addressed in other situations of emergencies than conflicts, highlighted the importance of educating and training all concerned actors on this important topic.

The **plenary session** that followed allowed for multidisciplinary discussions between all participants and to the identification of key outcomes.

Key outcomes of the Conference

- Existing tools developed in the framework of the HCiD initiative and also at national level should be widely shared, contextualized based on needs and used.
- Recognition that HCiD is an issue in the region, perhaps one of the most visible forms is the low-intensity violence against HC personnel and first responders linked either to the interaction with angry patients and their families or, in some contexts also to criminal activities.
- Communication and coordination are essential and must stem from information dissemination to the public and include communication between teams of responders during an emergency. There is also a need to focus and improving management in emergencies (e.g. management of volunteers).
- Importance of raising awareness among the broader public in peace times and prepare communication plan in times of emergencies. Given the access to internet and social media, emergency responders need to be prepared on how to handle the public and media in terms of information sharing during emergency.
- Practical training is key, ensuring the ongoing application of education – training – drills is essential.
 - Initial education on the need to respect and protect health professionals should be carried out at all levels, including through dissemination to the public.
 - Training of professionals (from medical professions to law enforcement authorities) should also consider this issue. Training should encompass drills and simulations.
 - Preparedness is key and “drills” should be organised for responders to assess, in particular, the quality of their own work and of their coordination with others.
- A multidisciplinary approach is fundamental. Addressing this issue and providing an effective response in emergencies requires a multidisciplinary approach at all levels, from education, training to working effectively together in an emergency. Additionally, cultural, gender-related and socio-economic aspects need to be considered and integrated in any response.