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Strengthening health access in conflict areas

World Health Organization

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Introduction

One of the world's most urgent humanitarian issues is access to healthcare in areas affected by conflict. Through the destruction of hospitals, shortages of medical supplies, and the displacement or targeting of healthcare workers, armed conflicts weaken or completely collapse health systems. Millions of civilians are consequently denied access to basic medical care during a period when illness, trauma, and injuries are most common.

Additionally, conflict environments exacerbate pre-existing medical conditions and promote the spread of infectious diseases. Cholera, measles, and other preventable disease outbreaks are made possible by disrupted immunization programs, poor sanitation, food insecurity, and mass displacement. Due to restricted mobility and limited access to care, vulnerable groups—such as children, pregnant women, the elderly, and individuals with disabilities—face disproportionate risks.

To save lives and uphold human dignity, health access in conflict areas must be strengthened. This entails providing safe humanitarian corridors, safeguarding medical facilities in accordance with international humanitarian law, and assisting regional and global health organizations. Enhancing healthcare delivery in these environments not only meets urgent medical needs but also establishes the groundwork for long-term stability, resilience, and post-conflict recovery.

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Definition of key terms

Access to Healthcare

Access to healthcare refers to the ability of individuals to obtain timely, affordable, and appropriate healthcare services when needed. It involves removing barriers that may prevent individuals from seeking and receiving necessary medical care, including physical, financial, cultural, and informational obstacles.

Conflict-Affected Areas:

Areas where political violence or armed conflict interferes with civilian life, governance, and social services.

Disease outbreaks:

An abrupt rise in infectious disease cases, frequently brought on by poor sanitation, overcrowding in conflict areas, and interrupted healthcare services.

Healthcare Infrastructure

The physical and organizational structures required to provide healthcare, such as clinics, hospitals, equipment, and supply chains.

Humanitarian Access:

The capacity of relief agencies to securely reach impacted communities and provide necessary services, such as medical attention, in times of conflict.

International Humanitarian Law (IHL)

 is a body of international regulations intended to safeguard medical facilities, healthcare personnel, and civilians in times of armed conflict.

Internally Displaced Persons (IDPs)

People who have been forced to leave their homes due to violence or conflict but are still inside their nation's borders are known as internally displaced people, or IDPs.

Medical Neutrality

The principles and laws that protect healthcare workers and facilities during armed conflicts.

Primary health care

Primary health care is a whole-of-society approach to effectively organize and strengthen national health systems to bring services for health and wellbeing closer to communities.

General Overview

Increasing access to healthcare in areas affected by conflict is a significant humanitarian and development challenge. Armed conflicts frequently cause supply chain disruptions, damage or destruction of healthcare infrastructure, and the evacuation or extremely dangerous working conditions of healthcare personnel. Civilians are consequently deprived of dependable access to critical medical services during times of greatest need.

Beyond the immediate injuries brought on by violence, conflict has a lasting effect on health. Infectious disease outbreaks are greatly increased by interrupted immunization programs, contaminated water, inadequate sanitation, and crowded living conditions. Measles, cholera, and respiratory infections are examples of preventable diseases that spread widely, especially among young people and the elderly.

Conflict environments also exacerbate non-communicable and chronic illnesses. Patients with diseases like diabetes, cancer, or heart disease frequently lose access to routine care, which can result in preventable complications and fatalities. Long-term exposure to violence, displacement, and loss also exacerbates serious mental health issues like depression, anxiety, and trauma.

Local health providers and humanitarian organizations try to close these gaps, but they are often hampered by funding constraints, insecurity, and limitations on humanitarian access. Attacks on medical personnel and facilities violate international humanitarian law and erode public confidence in healthcare systems. Maintaining medical neutrality is still crucial to providing safe and efficient care.

Long-term dedication and coordinated international action are needed to address these issues. Crucial actions include bolstering regional health systems, promoting mobile and community-based healthcare, and guaranteeing legal protection for medical services. Enhancing access to healthcare in conflict areas promotes healing, resilience, and long-term peace in addition to saving lives in the short term.

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Major parties involved

World Bank

The World Bank supports strengthening health services by funding health system reforms particularly in low- and middle-income countries affected by poverty or conflict.

Médecins Sans Frontières

MSF provides health and medical support in emergencies such as war zones and refugee camps, where trauma and injuries are common and local services do not exist.

BasicNeeds

BasicNeeds operates at basic level in multiple developing countries to restore individuals to productivity and economic independence.

WHO

The WHO provides global leadership on mental health through initiatives such as the *Mental Health Gap Action Programme (mhGAP)*, which helps countries train non-specialist health workers to identify and treat common mental disorders.

Syria

Millions of people lack regular access to healthcare due to years of civil war, which has seriously damaged hospitals and clinics, resulted in a shortage of medications, and frequently attacked medical personnel.

Yemen

A large portion of the country's health system has collapsed due to the ongoing conflict, which has resulted in widespread malnutrition, restricted access to clean water, and significant outbreaks of diseases like cholera that can be prevented.

South Sudan

The country's already precarious healthcare system has been strained by protracted internal conflict and displacement, with many communities depending on humanitarian organizations for basic medical care.

Timeline of events

1949 August 12th   The Geneva Conventions have been signed and adopted in Geneva, Switzerland which contain rules limiting the barbarity of war, involving healthcare in armed conflicts.

2011   UN Security Council (SC) Resolution 1998 declares that all hospitals and schools are off limits for armed groups and military activities.

2012 May 26rd   The World Health Assembly passes resolution WHA65.20 calling for the WHO to improve the documentation of violence against health care in all conflict zones.

2016 May 3rd   UN Security Council adopts Resolution 2286 on "healthcare in armed conflict." It calls for greater protection for health care in armed conflict and attacks on medical personnel and hospitals are war crimes (GCFTRTP)(idk if its eneded)

2023 May 30th   World Health Assembly adopts resolution WHA76.2 which urges for strengthening emergency, critical and operative care for universal health and protection from health emergencies.

Relevant UN treaties and events

S/RES/2286 (2016): UN Security Council adopts Resolution 2286 on "healthcare in armed conflict." It calls for greater protection for health care in armed conflict and attacks on medical personnel and hospitals are war crimes

WHA65.20: World Health Assembly calling for the WHO to improve the documentation of violence against health care in all conflict zones.

WHA76.2: Urges for strengthening emergency, critical and operative care for universal health and protection from health emergencies.

Geneva Conventions: The 1949 Geneva Conventions are international treaties that contain the most important laws for humanitarian treatment. These conventions are the core of the International Humanitarian Law (IHL) which are the laws in armed conflicts.

Previous attempts to solve the issue

Support from NGOs in conflict areas

Support from NGOs in conflict areas: Non-Governmental Organizations (NGOs) such as Médecins Sans Frontières (Doctors without Borders/MSF) have been significantly important in enabling healthcare access in conflict areas. The MSF launched independent medical aid in conflict zones by deploying voluntary doctors, vaccinations, medicine, and food. MSF have been operating hospitals even in besieged areas such as in Yemen (2015), treating wounds caused by war. The support from NGOs helps increase the availability of healthcare in places where care is hard to find.

French 2017 Declaration

In 2017, France led a declaration to strengthen the UN Security Council Resolution (UNSCR) 2286 on protecting healthcare in conflict areas. It served as a previous attempt to strengthen healthcare by shifting focus from direct aid delivery to preventive measures.

Support from the Royal Army Medical Corps during World War One

In the First World War, the Royal Army Medical Corps (RAMC) was crucial for Britain's war effort as the RAMC were responsible for maintaining soldiers' health, evacuating casualties and treating the wounded. The RAMC established first aid posts, running dressing stations and field hospitals for the wounded for treatment or evacuation. The RAMC were the backbone for keeping soldiers healthy in conflict areas.

ICRC-GSF Collaboration to expand Surgical Training in Conflict Zones

The International Committee of the Red Cross and the Global Surgery Foundation have partnered to make war-surgery training material globally accessible through the United Nations Global Surgery Learning Hub called SURGhub. This action allowed free access to thousands of healthcare workers across more than 200 countries.

Geneva Conventions

It forms the basis of humanitarian law, standards for the treatment of people during armed conflicts and protecting those who do not fight (e.g the wounded). The Geneva Conventions mandate that all parties in armed conflict should not attack or harm the wounded and the non-combatants.

Possible solutions

Ensure more aid delivery in conflict zones:

Aid delivery is crucial to help citizens in conflict zones, no matter who. When roads are unsafe, aid should be delivered by drones and airdrops filled with food and necessities to live safely.

Continuation of more support from the MSF

The MSF contributed to a great extent to humanitarian aid in several conflict zones throughout the years. Their contribution helped them support a large number of people with food, medicine, and clothes. To further strengthen healthcare access in conflict access, the MSF should spread news on social media to inform society of their work and ways to help.

Protection of Medical Neutrality Training

Encourage the mandatory training of medical neutrality and international humanitarian law for armed forces and militias to reinforce obligations under the Geneva Conventions. This is important as hospitals are getting bombed and healthcare workers are getting targeted by armed forces.

Temporary Humanitarian Ceasefires

Encourage temporary humanitarian ceasefires for medical access to ensure safe delivery of aid, vaccinations, evacuations and food. These types of ceasefires should be coordinated by the United Nations.