Ensuring Respect for the Emblems and Protecting Health Care: How the Movement Can Lead the Collective Effort

**Chair:** Prof. Moamena Kamel, Secretary-General, Egyptian Red Crescent Society

**Rapporteur:** Ms Maryna Kozhedub, Youth Programme Coordinator, Ukrainian Red Cross Society

**Panellists:**
- Ms Mary Werntz, Deputy Director of Operations, ICRC
- Mr John Lobor, Secretary-General, South Sudan Red Cross Society
- Ms Margareta Wahlström, President, Swedish Red Cross
- Dr José Benjamín Ruiz Rodas, President, Salvadorean Red Cross Society
- Mr Abdoul Azize Diallo, President of the Senegalese Red Cross Society and Vice-President of the IFRC (Africa)

(A) EXECUTIVE SUMMARY

Despite the concerted efforts of the International Red Cross and Red Crescent Movement (Movement) and the attention received at the global level, tragic and devastating attacks against Red Cross and Red Crescent staff and volunteers, as well as against hospitals and ambulances, even when clearly marked or identified by the emblem, remain a harsh reality in many of today’s armed conflicts and other humanitarian emergencies. This workshop aimed to highlight and share good practices, tools, achievements, and challenges faced in addressing violence against health care and in ensuring respect for the red cross and red crescent emblems. Another key objective was to remind Movement components of their individual roles and responsibilities in securing government engagement and in ensuring that their own internal practices were fit for the purpose of preserving safe access and visual identification in sensitive and insecure contexts. The workshop discussions and the high level of engagement from National Red Cross and Red Crescent Societies (National Societies), the International Committee of the Red Cross (ICRC) and the International Federation of Red Cross and Red Crescent Societies (IFRC) demonstrated that the Movement has been and continues to lead the collective effort to ensure respect for the emblems and protection of health care in armed conflicts and other emergencies. Yet challenges remain, and the Movement should not only maintain, but also step up efforts to mobilize governments and key stakeholders on these two topics.

(B) GENERAL OBSERVATIONS

Two years ago, at the 32nd International Conference of the Red Cross and Red Crescent (International Conference), Resolution 4 on protecting the delivery of health care in conflict and other emergencies was adopted. It built on Resolution 5 adopted at the 31st International Conference. In 2013, the Council of Delegates adopted a resolution on Movement branding, which reaffirmed the importance of ensuring respect for the emblems – in both their indicative and protective functions – and emphasized the need to work together towards greater
consistency in our practices when displaying the emblems and our respective logos – including in our communication, resource-mobilization activities and partnerships. Furthermore, one of the Safer Access Framework’s eight elements underlines the importance of preserving our visual identity and our logos at all times. This workshop provided a valuable opportunity for Movement components to engage in further dialogue on these topics in the lead-up to the 33rd International Conference.

More than 150 people attended the workshop, with many National Societies, the ICRC and the IFRC sharing a wide range of solutions and challenges – both at the global and local levels – relating to ensuring respect for the emblems and our respective logos, and to protecting the delivery of health care. Thanks to these efforts, the Movement’s recommendations on protecting the delivery of health care are now reflected in global resolutions of the World Health Assembly, the UN General Assembly and the UN Security Council. Awareness of the emblem and its protective and indicative functions have increased around the world. Many practical solutions have also been developed at, or adapted for, the national level.

(C) KEY POINTS RAISED

Much of the conversation centred around the measures put in place that have had a concrete impact on the respect for health-care personnel, facilities and medical transports and/or on the protection of, and respect for, the emblems in our different contexts. These measures included the following:

- National Societies have been working with their governments, and often in collaboration with the ICRC, to:
  o adopt laws that protect the delivery of health care and/or ensure respect for the emblems;
  o ensure that violence against health care is recognized as a critical issue in global forums.
- National Societies have mobilized, and continue to mobilize, other stakeholders involved in protecting health care at the national level, such as: ministries of defence, ministries of foreign affairs, ministries of health, parliamentarians, research institutions and health-care providers.
- Studies have been conducted to better understand the various factors that can cause and/or address violence against health care.
- The obligation to protecting the delivery of health care has also been integrated into National Societies’ own training curricula, military training courses, university medical curricula, and activities to raise awareness of international humanitarian law (IHL). Similarly, the obligation to respect the emblems has been incorporated into some training courses and IHL awareness-raising activities.
- Movement components have developed tools at local and global levels to strengthen the protection of the delivery of health care (e.g. ICRC security survey for health facilities). Similarly, a strong focus has been placed on developing new approaches and materials to promote and ensure better respect for the emblems (e.g. the Movement Branding Initiative guidance on emblems and logos in communications, marketing and fundraising, new emblem brochures, videos and more). Many of these tools have been, or are being, used in specific awareness-raising campaigns and/or promotional efforts on protecting health care (e.g. use of drama and street theatres) and respecting the emblems and National Societies’ logos. These efforts have been aimed at a variety of local audiences, including the general public, health-care workers, armed and security forces, gangs, etc.
- Some National Societies have developed innovative measures to report and address instances of misuse of the emblems. Examples given included volunteers helping track cases of emblem abuse and emblem abuse alert systems being set up on a smartphone application or designated email address.

The participants also discussed some challenges they faced with regard to these two topics. These challenges included the following:

- There is a lack of data and reporting on incidents against health-care personnel, facilities and ambulances, and on emblem misuse.
- In some countries, adopting laws on the use of the emblems and securing commitments from the authorities on their enforcement has proven to be a long process of negotiation.
- It is a challenge at times to engage in discussions with the military to ensure they understand the emblem, both in its protective function in times of war and as the symbol of the neutral, impartial and independent humanitarian work of the Movement.
- There are no tools for verifying the amount of respect there is for the emblems and which practices and approaches are effective in ensuring respect for them.
- It is often difficult to explain the risks of emblem misuse to the public, particularly in peacetime and in countries not affected by conflict, and how misuse of the emblems can jeopardize their protective function in wartime.
- One National Society noted that, “governments can sign resolutions but are not willing to tell their own soldiers what to do”.

**CONCLUSIONS AND RECOMMENDATIONS**

Taking stock of the Movement’s achievements and recognizing the large number of ongoing national initiatives – with their successes, challenges and gaps – the discussion concluded with a call for the following actions in order to better address violence against health care and ensure respect for the emblem:

1) track attacks on health care and instances of misuse of the emblem at the national level;
2) map the procedures and instruments developed by Movement partners at the national and global levels; and
3) measure the national and global impact of our initiatives and efforts on these themes.

Finally, there was consensus that the Movement should not only maintain, but also step up efforts to mobilize governments and key stakeholders on these two topics.