

PEACE BUILDING THROUGH HEALTH, AND HUMANITARIAN OBJECTIVE

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Mistakenly, we think of peace as the opposite of war. When we were schoolkids, we had to match the items in column A with their antonyms in column B. Tall - short, big - small, peace - war, and so on. But is peace truly the opposite of war? If a country is not at war, is it definitely at peace? In the case of Mexico, it really isn't so.

In recent years, war has sometimes been described as a public health issue. A global one. Certainly, when you move from war to peace, a region's health status starts improving. But can health be a tool for peace? There is evidence that it can. The number of attacks on not only humanitarian workers but also healthcare providers has grown. Why is that? Because dictators, martial-law governments, terrorists, and aggressors know that such professions can be used as antiwar weapons. Plus, peace and health cannot exist without one another. **So, I'm here to say that even if peace is not always the opposite of war, we can see health in that role.**

Health work in war zones or zones of conflict does help to spread peace with the use of various mechanisms. These are (1) conflict management, (2) solidarity of all health workers (indigenous and foreign), (3) reinforcement of the social system, (4) public dissent and opposition, and finally (5) restriction of war's destructive effects.

We know that said mechanisms characterized by the coordination and close co-operation of humanitarian workers and health professionals really do work, because they *have* worked for many years in numerous places around the globe:

Haiti (1991-1994), Angola (1994-1997), Mozambique (1989-1995)

Croatia (1996-1997), Bosnia & Herzegovina (1997-1999),
Russia (1998)

Sri Lanka (1999-2000), FYROM (2000-2001), Indonesia
(2000-2001)

It is however, impossible to organize the work necessary without strong Health Institutions.

First of all, the health sector has long been recognized globally as one of the most honest and ethical. Unfortunately, we can't say the same about the political sector. Generally speaking, health professionals are highly regarded and respected. Society accords them much legitimacy.

And secondly, the health sector has long been associated with a feeling we call altruism. International organizations, such as WHO, Medecins sans Frontieres, the Red Cross, and Red Crescent have established reputations around health as a public service.

And now, back to the mechanisms through which Health Institutions, through their professionals can contribute to peacebuilding.

(1) Doctors can sometimes access the highest political offices, especially in times of turmoil. At the same time, the internationality of the scientific community, their contacts with colleagues all around the world can help them become... our diplomats - after having taken the appropriate training, of course. They can facilitate dialogue and be mediators on a high level.

Considering that there are many common goals between conflicting parties, goals concerning the population's health, medical diplomacy appears to be a realistic approach. The immunization of children in El Salvador in the 1980's is a great example. In the mid-1980s, UNICEF, the Roman Catholic church, and other organizations negotiated "days of tranquility" in El Salvador. **Fighting was suspended for the immunization of**

children for 3 days each year from 1985 until the peace accords in 1992.

(2) Then, there's another aspect: Medical Practitioners in zones of conflict become... our reporters.. They go to places that would not get any medical help otherwise; they have direct access to battle witnesses and can tell us how exactly things are unfolding. Organizations like Amnesty International and Physicians for Human Rights deal with protecting doctors and other workers in areas where there's a threat **as well as provide us with much-needed information to advocate for human rights, security and peace.**

(3) Imagine a community that has no system for healthcare - no hospitals, no doctor's offices, no pharmacies etc etc. What comes to your mind? You're probably thinking of a small village, a remote one, with low-quality infrastructure, undeveloped. That's because healthcare provision is an intrinsic part of a modern society.

A great example is the case of Uganda, where the renewal of healthcare structures encouraged displaced people to return home. Both physical and mental recovery are indispensable for people to erase hate-based feelings and reestablish more peaceful ones. **A proper healthcare system creates feelings of security and inclusion for all.**

(4) The fourth mechanism is public dissent and opposition. Those can have the form of protest, persuasion, non-cooperation, or intervention. **Given their respected position, healthcare workers, when they join such actions, can have a major impact.**

(5) Finally, you can restrict wars and their effects by banning the tools necessary to create them, for example; the ban on various classes of missiles in the late 20th century. Other examples could be the abolition of napalm and other incendiaries, cluster bombs, and antipersonnel landmines.

Not to take anything away from **the financial aspect**. Specifically, in a state of economic crisis, a state is forced to reduce its budget for health and relief operations, in order to give priority to defense. As a result, it depends more on international assistance, which will bring about tensions with the donors.

Although we would all like to ban all weapons of war, we need to be practical and approach this on a step by step basis (until we have a ‘world police force) and it is in this area that the major Health Institutions can have a real and lasting effect through their Global Reach.

To achieve almost any of the above we need to **develop and apply a wider public health vision** which is effective, accountable and inclusive and which, as described by the World Health Organization, “works closely with Member States, international partners, and local institutions to help communities prevent, prepare for, respond to, and recover from emergencies, disasters and crises.” In these areas, humanitarian roles are closely connected and are often the same as those that health workers take on in such situations.

The way this health vision is aided by humanitarian assistance, is that the latter relieves, stabilizes, reconstructs and even prevents militarization and violence. Humanitarian workers can aim at equitable relief in the areas they can have access to and use military resources for civilian health purposes as well as ensuring that people affected by conflict have an equitable access to the healthcare provided by their co-operating health professionals.

It would be better if, even before conflicts develop, there were health projects promoting democratic stability. During open conflict, such projects must continue to promote an effort to overcome the enduring trauma, encourage reconciliation, and help prevent further outbreaks of violence. And after the conflict, the health sector can change previous systems that may have contributed to the conflict in question or other inequities.

More specifically, these situations need detailed strategic planning based on a broad political understanding of the conflict and its root causes, a comprehensive perspective of victims and political actors, while human rights must be fully considered. Of course, local capacities must be used to create partnerships with local civil institutions. Local and international organizations for a civil society must cooperate with real coordination to achieve the strategic goal of a peaceful resolution to the conflict.

Furthermore, we need to **develop an extensive, integrated database** with information concerning health, war and population movements. Specifically, this database must incorporate information about the health conditions in places from which emigration waves set off, local cultural values regarding health, the level of conflict, disease, violence and human rights violations in every place, the accessibility to healthcare facilities, the living and working conditions, the common ways of transportation, the commonest migration routes, any health-related risks along said routes, and so on.

And all this knowledge must also be accessible to migrating populations. Healthcare providers will know in as much detail as possible what they will have to face or prevent, while migrants will know to an extent what to expect along their journey. As a result, both groups will cooperate more efficiently when necessary.

Now, let me point this out: This kind of holistic, all-inclusive approach must also be reflected in state policy. Which means that we cannot rely on the good will of every government, because dictatorial, nationalistic or extremists of the left or right within governments might not want to adopt elaborate, multisided migration policies. So, there needs to be a mechanism that binds the “Ministry of Migration”, for instance, to involve the sectors of health, education and labor – and thus their respective ministries too – in the drafting of migration policies.

To address both the short-term and long-term consequences of conflict, we must pay attention to the lessons that history has

taught us, not to repeat them. So, if we want to effectively contribute to the maintenance of peace, we must fight the causes of conflict to their very core. Such a fight needs the best coordination possible, including both the database and the training I mentioned earlier.

Health assistance must be delivered in proportion to the existing needs, while attention is paid to any human rights violations as well; the latter should not be a concern of only the humanitarian workers. Also, it would be better if development assistance and emergency assistance work closely instead of separately. And on the level of planning, there need to be various types of partnerships, be that national-international, public-nonprofit, etc., that consist of a comprehensive and locally owned main strategy.

Overall, such crucial health initiatives can only have a positive impact on peacebuilding if they're based on a wide perspective and have a very specific strategic planning and targeted goals laid out. Health can play a role as catalyst in processes towards peace and reconciliation. Two aspects that must absolutely be taken into consideration are **human rights** and **basic human needs**. Also, local capacities for change must be involved, while international partnerships and networking must be promoted at all times. On the contrary, when such conditions are not met, when the situation is only thought in the short term, the health initiatives described won't have an impact on peacebuilding. They might even indirectly contribute to a deterioration of the economy.

We should not talk about peace building and peace accords without mentioning the lack of women involved at the highest levels - at least, I cannot.

It is my contention that, even though women make up the majority of health professionals and are in the majority in medical schools in the West, that to have 'talks' without a full complement of women will mean that they will be less productive.. As UN Secretary-General Antonio Guterres stated a few days ago,

“Sexual and gender-based violence continues to be used as a weapon of war, and this year alone, millions of women and girls were in need of life-saving sexual and reproductive health services.” Progress is agonizingly slow.

The fact is that gender balanced teams are usually much better at reaching the woolly solutions that are often necessary in trying to reach 'peace deals' between warring factions and it is almost always better to have the key professionals who have been on the ground and seen the horrors wrought by armed conflict on the team. It is also a fact that it is the health professionals who are those most likely to have been around longer than almost everyone else, and that includes women.

Let's make no mistake. Healthcare provision in zones of conflict is nothing less than an extremely important tool in the establishment of peace. If planned and applied as described above, with all the individual mechanisms and the multifold co-operations, healthcare provision can save as many human lives as a Peace Treaty, if not more. This means that the Health Institutions are of prime importance in almost every Peace Process.