ETHIOPIA
Violence Against Health Care in Conflict
2021

SAFEGUARDING
HEALTH
IN CONFLICT
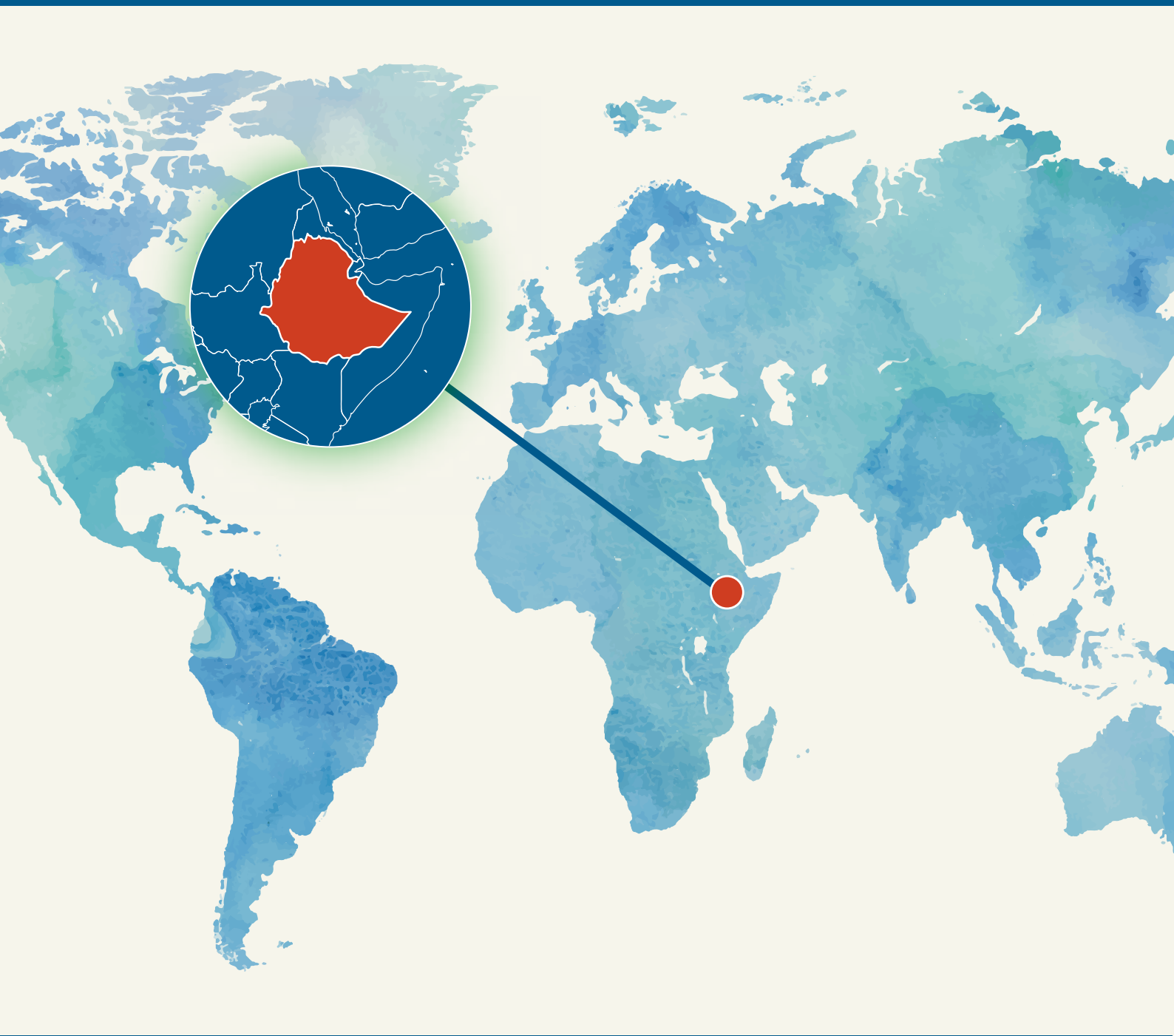
Insecurity
Insight
Data on People in Danger

During the past 18 months the list of health care systems that have been destroyed or severely compromised by war-related violence lengthened. <u>Three-quarters</u> of the health facilities in Ethiopia's Tigray region were destroyed or damaged in the conflict that began in November 2020. In the now-forgotten conflict in Gaza in the spring of 2021, <u>30 health facilities</u> were damaged. In Myanmar the public health system has all but collapsed since the coup in February 2021, because many hospitals have been occupied by the military, while COVID-19, HIV, TB, and malaria programs stalled and 300 health workers were arrested. Then in February 2022 Russia began attacking hospitals, ambulances, and health workers during its invasion of Ukraine. By the end of April 2022, The World Health Organizations confirmed almost 200 such attacks.

The past year was marked by continued international failure to prevent such attacks and hold perpetrators to account. Governments' expressions of horror at the violence continued without being accompanied by action. By the fifth anniversary of the passing of UN Security Council Resolution 2286, in which governments committed to concrete actions to prevent such attacks and increase accountability, very little had been done. Nor did the Security Council consider new course corrections to implement the resolution's requirements.

At the same time, one of the foundations of action, the WHO's systems for tracking attacks, remained inadequate to its function. Except for reporting in Myanmar and Ukraine, where widespread attention increased pressure to collect data, the system severely under-reported incidents. In Ethiopia, despite the effective destruction of the health system and the murder of health workers in Tigray region and other attacks in Afar and Amhara regions, the WHO reported zero attacks in the country for the whole of 2021. This failure no doubt contributed to the lack of global attention to the dire situation in Ethiopia. When the WHO system did report, it continued to withhold information essential to understanding what took place and where attacks occurred.

There were some advances in the area of accountability. Germany obtained a conviction of a Syrian war criminal under principles of universal jurisdiction (although not for crimes involving attacks on health care). The prosecutor of the International Criminal Court (ICC) accepted Ukraine's request to investigate alleged war crimes there. But these cases did not address the continuing structural problem that permits the five permanent members of the Security Council to block certain referrals to the ICC, but nevertheless are a sign that accountability may finally be on the increase.

Perhaps 2022 will be an inflection point, as images and reports of attacks on health care and their consequences in Ukraine continue to go viral, accompanied by frequent and loud demands for accountability – but it won't be if the lassitude of the international community continues.

Len Rubenstein
Chair, Safeguarding Health in Conflict Coalition

Methodology | Full Report

Ethiopia

In the early hours of Sunday morning, May 16, 2021 Ethiopian soldiers armed with assault rifles and grenades stormed the University Teaching and Referral Hospital in Axum, Tigray region. This raid was in retaliation for the staff of the facility speaking to CNN about the health impacts of the Ethiopian government's blockade of medication into Tigray region. The soldiers threatened health care workers and contaminated the operating room, forcing all surgical procedures to stop. The next day the facility was raided again.[1]

REPORTED INCIDENTS AND MOST COMMONLY REPORTED CONCERNS

55	**42**	**13**	**8**
REPORTED INCIDENTS	HEALTH FACILITIES AFFECTED	HEALTH WORKERS SEXUALLY ASSAULTED	HEALTH WORKERS KILLED

Source: 2021 SHCC Ethiopia Health Data

OVERVIEW

The Safeguarding Health in Conflict Coalition (SHCC) identified 55 incidents of violence against or obstruction of health care in Ethiopia in 2021, compared to seven incidents in 2020. At least eight health workers were killed in these incidents, 13 were sexually assaulted, and 42 health facilities were attacked.

This factsheet is based on the dataset 2021 SHCC Ethiopia Health Data, which is available for download on the Humanitarian Data Exchange (HDX).

Regional and national Ethiopian government sources, together with reports from INGOs and OCHA, reported the looting or destruction of thousands of health facilities in Tigray, Amhara, and Afar regions, but no details on the locations of these incidents and specific circumstances or perpetrators have been shared. The WHO Surveillance System for Attacks on Health Care did not report any incidents for Ethiopia in 2021.

This chapter analyses a sample of 55 reported incidents of violence against health care that occurred in Ethiopia in 2021 in order to provide insight into the patterns and nature of reported conflict-related violence against health care in that country.

Ethiopia

THE CONTEXT

The conflict between Tigray and its allies, on the one hand, and the Ethiopian government, on the other hand, started in November 2020 and continued throughout 2021. Between November 2020 and June 2021, the Ethiopian National Defense Force (ENDF) with the support of the Eritrean Defense Forces (EDF) occupied parts of Tigray. After the ENDF's withdrawal from Tigray at the end of June 2021 the Tigrayan Defense Forces (TDF) – the military branch of the Tigrayan Peoples' Liberation Front political movement – moved into Amhara and later Afar. At the end of December, the Tigrayan forces withdrew back to Tigray.

All parties to the conflict have been accused of human rights abuses, including air attacks on hospitals and vital civilian infrastructure needed to run hospitals such as power stations. The Ethiopian government has also been accused of blocking humanitarian aid and food imports from reaching Tigray.
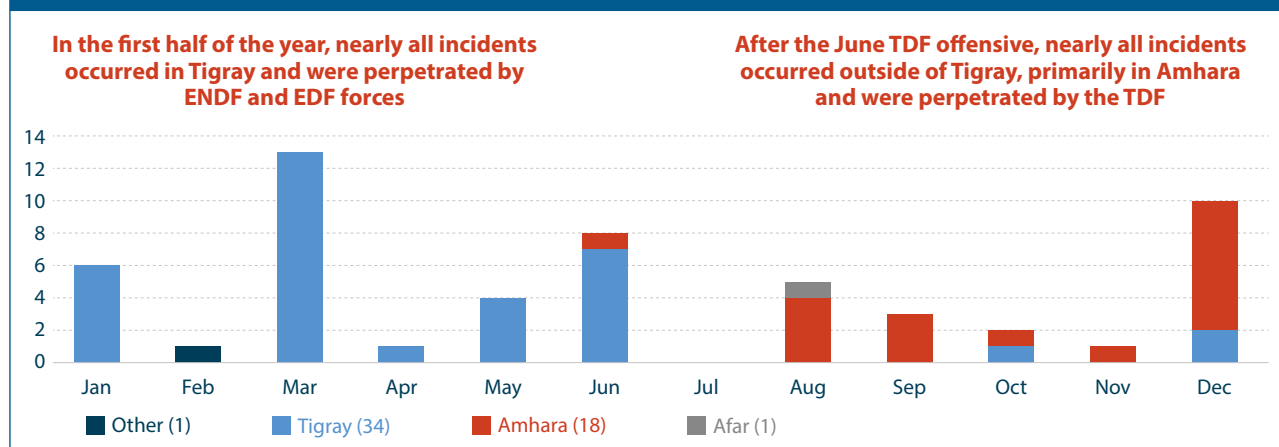
VIOLENCE AGAINST OR OBSTRUCTION OF HEALTH CARE IN 2021

Most reported incidents in this sample took place in Tigray and Amhara regions, with one reported incident occurring in Afar region and one in Oromia region.

Hospitals and health posts were occupied, looted, or destroyed by all parties to the conflict. From January to June all available reports found that attacks on health facilities occurred in the Tigray region and were carried out by Ethiopian and Eritrean forces. Nineteen health facilities were attacked by ENDF and EDF forces during this period. Following the withdrawal of these forces from Tigray in June, TDF forces attacked 17 facilities in Amhara region. The looting and destruction of medication and other supplies severely limited the care that health facilities could provide. For example, in December TDF forces looted ventilators and anaesthesia equipment from Dessie Specialized Hospital in Dessie town, Tigray region, preventing all surgical operations from being performed.[2] From October to December there were three reports of ENDF air strikes on hospitals in Tigray, killing one health worker and injuring five more.[3]

Sexual violence was routinely used against civilian populations during the conflict, including health workers. In 2021 there were three incidents of rape affecting 13 health workers. Two of the victims were female doctors and 11 were medical students.[4] All the reported incidents occurred inside health facilities in Tigray region and were committed by ENDF soldiers.

Reported incidents affecting health care in Ethiopia in 2021 in this sample, by month and region

In the first half of the year, nearly all incidents occurred in Tigray and were perpetrated by ENDF and EDF forces

After the June TDF offensive, nearly all incidents occurred outside of Tigray, primarily in Amhara and were perpetrated by the TDF

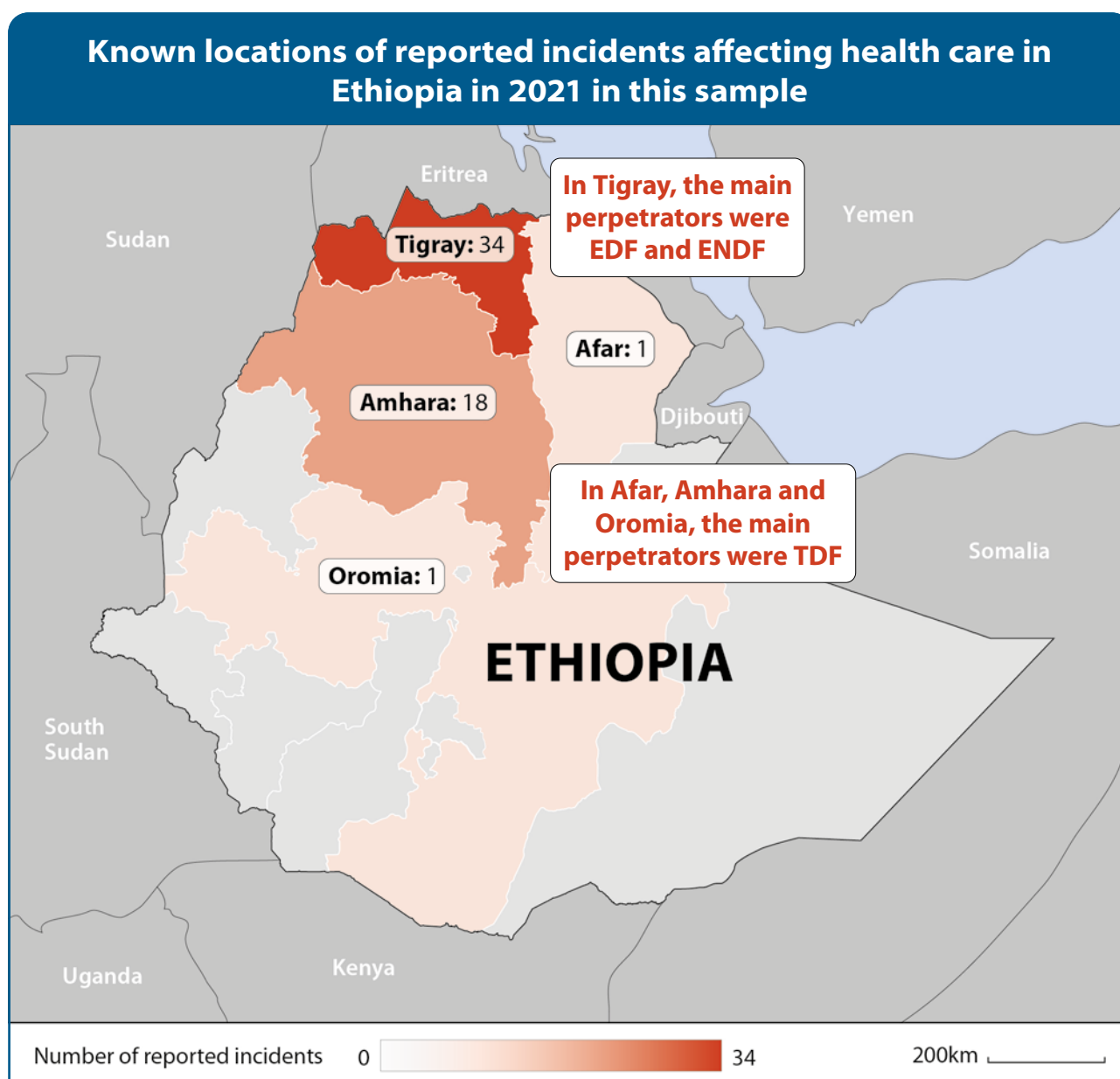Other (1)   Tigray (34)   Amhara (18)   Afar (1)

Ethiopia

Rape and sexual violence in Ethiopia

The conflict in Ethiopia has been marked by widespread sexual violence by Ethiopian and Eritrean forces against civilians in Tigray. More recently, Tigrayan forces have been accused of rape and sexual violence in the Amhara and Afar regions.

Due to the collapse of the health care system in these regions, rape survivors are often unable to access medical care, emergency contraception, HIV prophylaxis, and mental health support. The presence of soldiers occupying medical facilities has often discouraged survivors from seeking medical care. In several instances Human Rights Watch reports that soldiers have forcibly entered health care facilities in search of survivors or the facilities' medical records.

For more information, see 'Sexual Violence in Ethiopia' by Insecurity Insight, 'I Always Remember that Day' by Human Rights Watch, and 'Rape and Sexual Violence in the Conflict in Tigray, Ethiopia' by Amnesty International.

Known locations of reported incidents affecting health care in Ethiopia in 2021 in this sample

Tigray: 34

In Tigray, the main perpetrators were EDF and ENDF

Afar: 1

Amhara: 18

In Afar, Amhara and Oromia, the main perpetrators were TDF

Oromia: 1

ETHIOPIA

Number of reported incidents   0 ⸻ 34   200km

Ambulances were also frequent targets. In March Ethiopian soldiers seized 20 ambulances from a hospital and nearby health service users in Tigray region.[5] The soldiers were later seen using the vehicles to transport goods. A Red Cross Society of Tigray ambulance driver was shot and killed by Eritrean soldiers in March.[6] In two reported instances Ethiopian forces forcibly prevented ambulances from reaching or evacuating civilians.[7]

PERPETRATORS

The main perpetrators of violence against or obstruction of health care in Ethiopia were the ENDF, EDF, and TDF.

EDF soldiers shot and killed three doctors and an ambulance driver during the occupation of Tigray.[8] EDF artillery shelled and destroyed at least one health facility in Tigray in June.[9]

In June 2021 three MSF staffers were shot and killed by **ENDF** soldiers retreating from Tigray. They were reportedly killed under the direct orders of Colonel Tadesse Bekele of the ENDF's 31st Division. Following their deaths, soldiers destroyed their marked MSF vehicle with a rocket-propelled grenade. Col. Bekele is believed to have subsequently died on the battlefield.[10]

Between October and December 2021 the **ENDF** carried out three air strikes that damaged health facilities in Tigray region.[11] These air strikes killed one health worker and injured five.

Unidentified armed units were responsible for six incidents of violence against or obstruction of health care in Tigray in 2021. These include the destruction of a clinic run by the WFP in Tigray region in January and the abduction of six civilians traveling by ambulance in Oromia region in February.

Following the offensive into Amhara and Afar in June 2021, **TDF** soldiers were responsible for the majority of the reported attacks against health care in these two regions neighboring Tigray. **TDF** artillery fire damaged a hospital in Amhara region, killing six nearby civilians.[12]

IMPACT ON HEALTH SYSTEMS AND ACCESS TO HEALTH CARE

Health services

Tigray

Prior to the conflict Tigray had a robust and well-funded public health system made up of over 1,000 medical facilities ranging from village health clinics to two tertiary-care hospitals.[13] In 2021 the health care system in the Tigray region collapsed due to the widespread damage and destruction of health care facilities and the ongoing Ethiopian forces' blockade of health and humanitarian supplies into Tigray.

Mekelle University and the Tigray Regional Health Bureau reported damage to 880, or 79%, of surveyed Tigrayan health facilities as of July 2021.[14] As of December 2021 the WHO reported that only 3% of 251 health facilities surveyed in Tigray were fully functional.[15] Of the approximately 280 ambulances in Tigray prior to the conflict, UNICEF reported that only 30 were functional as of January 2021.[16]

Prior to the conflict there were over 19,000 reported health workers in Tigray. Over half reportedly stopped reporting to work since the conflict began.[17] The Amhara Public Health Institute reported that over 7,000 health workers in the region had been displaced.[18] As of May 2021 more than 2,000 health workers had

registered in displaced persons camps in Mekelle, the capital of Tigray region.[19] An indeterminate number of Tigrayan health workers had also fled to refugee camps in Sudan. In one hospital almost 400 Tigrayan staff reportedly fled, fearing they would be killed by ENDF forces.[20] Most Tigrayan health staff were not paid throughout 2021, and were at risk of starvation, as was most of the civilian population of Tigray. There were reports of doctors and nurses having to beg for food in Mekelle.[21] Due to food shortages some surgeons reportedly collapsed from hunger during long surgical procedures.[22]

The health care system in Tigray was further strained by the Ethiopian forces' blockade of health and humanitarian supplies into the region since mid-July 2021.[23] Access was only granted in April 2022. Doctors at Ayder Comprehensive Specialized Hospital – the major teaching and tertiary care center in Tigray – reported that the availability of essential medications had plummeted to 20%. Advanced imaging, oxygen supplies, and replacement parts for medical equipment were all limited as well. Facilities throughout the region also reported shortages of IV fluids and sterile surgical gauze – basic medical supplies that are critically important in treating a variety of medical conditions. The WHO reports that it was unable to deliver basic medications for chronic conditions to Tigray, such as insulin and other anti-diabetic drugs.[24]

Amhara and Afar regions

In 2021 the health care systems in the Amhara and Afar regions were significantly impacted by the conflict. Health facilities in these regions were subject to systematic looting, damage, and destruction by TDF forces.

In September 2021 the Ethiopian minister of health reported that thousands of health facilities in Amhara and Afar had been severely damaged, including that 20 hospitals were non-functional in Amhara alone.[25] The head of the Afar Regional Health Bureau reported the destruction of over 60 health facilities in the region. The WHO reported that only 22% of health facilities in these regions were fully functional.[26]

The Dessie Referral Hospital – the largest tertiary-care center in eastern Ethiopia – was looted and significantly damaged by TDF forces.[27] In 2020 the facility served over 450,000 patients. The medical director of the hospital reported the destruction of ventilators and anesthesia equipment, limiting the ability of the hospital to perform surgery. Medical records were also reportedly destroyed.[28]

Access to health care

The conflict disrupted access to care for a large segment of the population in the conflict-affected regions of northern Ethiopia. In March 2022 OCHA estimated that approximately 3.9 million people – almost 70% of the population of Tigray – lacked access to basic health care services.[29]

Maternal and child health in the Tigray region suffered significantly. Due to the widespread destruction of the public health infrastructure in Tigray, pregnant mothers lacked access to basic obstetric care. According to the Tigrayan Regional Health Bureau, 94% of pregnant mothers in Tigray received antenatal care prior to the conflict, but in 2021 only 16% did so. Similarly, births accompanied by trained health professionals significantly decreased from 81% of births prior to the conflict to 21% in 2021. Due to the lack of access to obstetric care, 2021 saw a significant increase in deaths during childbirth in Tigray. In 2021, 276 deaths in childbirth were reported in the region, more than double the pre-conflict count of 136 deaths in 2020. These numbers are likely significant undercounts due to the displacement of the health care workforce and collapse of the health care system in Tigray.

The conflict has led to widespread interruptions in routine childhood vaccination programs. Only 20% of children were reported to have received routine one-year vaccinations in 2021, as compared to 73% of children in 2019.

Survivors of sexual violence were often unable to access appropriate health care, including HIV prophylaxis, emergency contraception, and mental health support.[30]

The destruction of the health care system in Tigray also limited access to care for patients suffering from communicable diseases, such as HIV or tuberculosis. Prior to the conflict over 40,000 HIV patients were receiving antiretroviral treatment in Tigray. A preliminary report suggests that 81% of these patients were lost to follow-up in 2021. Similarly, 90% of tuberculosis patients newly diagnosed in 2020 and requiring treatment were lost to follow-up.

Patients also lacked access to routine treatment for chronic, non-communicable diseases such as diabetes, renal failure, and hypertension. Due to the blockade of Tigray and the shortage of medical equipment, health facilities were unable to provide dialysis to patients in renal failure.

The blockade of humanitarian aid into Tigray has prevented food aid from reaching civilians and has produced a severe malnutrition crisis. A January 2022 WFP survey reported that 13% of children in Tigray were malnourished, as were half of pregnant and breastfeeding women.[31] In the districts most affected, the Tigrayan Regional Health Bureau reported that 78% of pregnant and breastfeeding women were suffering from acute malnutrition. A survey of deaths in Tigray reported that 27% of civilian deaths in 2021 could be attributed to malnutrition or starvation. Malnutrition was the leading cause of death in the under-five population.[32]

Government forces also blockaded the delivery of fuel to Tigray. Limited fuel supplies have prevented humanitarian organizations and mobile clinics from delivering aid to remote and rural parts of the region.[33]

1   Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Ethiopia Health Data. Incident number 28134.

2   Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Ethiopia Health Data. Incident number 1018.

3   Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Ethiopia Health Data. Incident number 30021; 30687; 1021.

4   Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Ethiopia Health Data. Incident number 28006; 28001; 28002.

5   Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Ethiopia Health Data. Incident number 28908.

6   Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Ethiopia health Data. Incident number 1006.

7   Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Ethiopia Health Data. Incident number 28573; 28535.

8   Insecurity Insight. Safeguarding Health in Conflict Coalition 2021 Report Dataset: 2021 SHCC Ethiopia Health Data. Incident number 1003; 1004; 1009.

9   Insecurity Insight. Safeguarding Health in Conflict Coalition 2021 Report Dataset: 2021 SHCC Ethiopia Health Data. Incident number 1011.

10   *https://www.nytimes.com/2022/03/17/world/africa/ethiopia-tigray-aid-workers-killed.html.*

11   Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Ethiopia Health Data. Incident number 30021; 30687.

12   Insecurity Insight. Safeguarding Health in Conflict Coalition 2021 Report Dataset: 2021 SHCC Ethiopia Health Data. Incident number 1012.

13   *https://tigrayeao.info/wp-content/uploads/2022/02/final-annual-bulletin-compressed.pdf*

14   *https://tigrayeao.info/wp-content/uploads/2022/02/final-annual-bulletin-compressed.pdf.*

15   *https://herams.org/s.ession/create.*

16   *https://reliefweb.int/sites/reliefweb.int/files/resources/UNICEF Ethiopia Humanitarian Situation Report No. 2 - Tigray Crisis - 14-31 January 2021.pdf.*

17   *https://tigrayeao.info/wp-content/uploads/2022/02/final-annual-bulletin-compressed.pdf*

18   *https://reliefweb.int/sites/reliefweb.int/files/resources/Ethiopia - Northern Ethiopia Humanitarian Update Situation Report%2C 23 Dec 2021.pdf.*

19   *https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8611430/.*

20   *https://apnews.com/article/ethiopia-tigray-minority-ethnic-cleansing-sudan-world-news-842741eebf9bf0984946619c0fc15023.*

21   *https://www.bbc.com/news/world-africa-60169326.*

22   *https://www.devex.com/news/tigray-the-deliberate-destruction-of-a-health-system-102252.*

23   *https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(22)00054-X/fulltext.*

24   *https://healthpolicy-watch.news/who-slams-ethiopias-blockade-on-tigray-region-as-catastrophic-to-health/.*

25   *https://www.bbc.com/amharic/news-58636106.*

26   *https://herams.org/s.ession/create, accessed March 29, 2022.*

27   *https://www.ethiopiancitizen.com/2021/12/tplf-destroys-thousands-of-health-facilities-who-is-quiet.html.*

28   *https://www.facebook.com/watch/?v=333322264933827.*

29   *https://reliefweb.int/sites/reliefweb.int/files/resources/Situation Report - Northern Ethiopia - Humanitarian Update - 17 Mar 2022.pdf.*

30   *https://www.hrw.org/report/2021/11/09/i-always-remember-day/access-services-survivors-gender-based-violence-ethiopias#_ftn90.*

31   https://docs.wfp.org/api/documents/WFP-0000136281/download/?_ga=2.41625698.118314594.1648568276-595479539. 1648568276.

32   *https://www.ethiopia-insight.com/2022/01/26/data-shows-siege-and-destruction-of-health-system-are-causing-preventable-deaths-in-tigray/.*

33   *https://www.who.int/news/item/14-02-2022-lack-of-fuel-prevents-distribution-of-critically-needed-medical-supplies-in-tigray-region.*

SAFEGUARDING HEALTH IN CONFLICT

The Safeguarding Health in Conflict Coalition is a group of more than 40 organizations working to protect health workers and services threatened by war or civil unrest. We have raised awareness of global attacks on health and pressed United Nations agencies for greater global action to protect the security of health care. We monitor attacks, strengthen universal norms of respect for the right to health, and demand accountability for perpetrators.
www.safeguardinghealth.org

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