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RIGHT TO HEALTH, ARMED CONFLICTS AND PEACE-BUILDING **How can ensuring the right to health contribute to peace processes?** 

in collaboration with







# Preamble

Interlinkages between armed conflicts, health, and peace are well known. Violence and armed conflicts have devastating implications for health. Health is always under attack. A recent report found that there were 1,335 incidents affecting healthcare facilities reported across 49 countries and territories in 2021; these conflicts not only constrained access to care but directly affected nearly 1,500 health workers, with at least 94 assaulted, 161 killed, 170 kidnapped, 320 injured and 713 arrested [Safeguarding Health in Conflict, 2021]. These attacks on health and healthcare workers are unacceptable under international human rights and humanitarian laws. The World Health Organization (WHO, 2022) constitution recognizes health as fundamental to the "attainment of peace and security". It is dependent upon the fullest cooperation of individuals and States. Health can be a bridge to peace, especially in settings where conflict torments people's lives. It may be both, a contributor to and a beneficiary of peace. While there cannot be health without peace, there cannot be peace without health either: lack of access to basic social services, such as healthcare, for specific population groups, often on ethnic or religious grounds, leads to feelings of exclusion, sentiments of unfair treatment by the government and perceptions of unequal treatment vis-à-vis other groups. These inequities lead to grievances, which often boil over into protests and later violence (Coninx et al. 2022).

A study shows that there are three possible avenues of interventions that health as a bridge for peace programs can adopt. First is delivering health services in underserved places of conflict zones and promoting trust. This option is the traditional role of the health community. The second is providing a neutral platform and bridge for conflicting sides to work on health, convening actors and building confidence. This option is perhaps the most challenging as it requires actors to leave their comfort zones and create win-win solutions. Third is providing mental health, psychosocial support, and rehabilitation services to foster healing in conflict affected communities. This can facilitate reconciliation and sustain peace. These three avenues, fostering trust, facilitating health cooperation, and enhancing social cohesion can provide pathways to reconciliation (Khan et al., 2022).

Experts argue that health policymakers can do more to operationalize health as a bridge to peace through conflict analysis, advocacy, and improved capacity building of the health workforce for peace skills and partnerships. Others find that having diverse gender leadership in health systems during conflicts offers greater prospects for sustainable peace and more equitable social economic recovery in the post-conflict period. They argue that focusing on gender diversity of leadership and governance in health systems improves the link between peace and health, particularly in active conflict settings.

# The Policy Council Dialogue

The Policy Council Dialogue was held face-to-face on February 1st, 2024, at the MBRSG premises in Dubai. The panel event's organizers, the Geneva Centre for Human Rights Advancement and Global Dialogue and the Mohammed Bin Rashid School of Government (MBRSG, Dubai), believe that the relationship between peace and health remains complex, multifactorial, and fraught with challenges of definitions, measurements, and outcomes. Healthcare initiatives at the community level address more basic, service-dependent needs, have smaller budgets, rely on local organizations, and distribute credit across stakeholders, making them less amenable to cooptation in conflict with more pro-peace potential. Peace-building health initiatives are more likely to materialize in the community than at higher political levels. While conflict and violence affect physical and mental health, damaging health systems and other determinants of health, peace is also a critical prerequisite for health and well-being. The drivers of conflicts are often health-related, and health can be a goal to help competing groups unite for peace.





The policy dialogue panel featured multidisciplinary experts from the International Humanitarian City (IHC) in Dubai, Mr. Giuseppe Saba, CEO; Dr. Umesh Palwankar, Executive Director, Geneva Centre for Human Rights Advancement and Global Dialogue, Geneva, Switzerland; Dr. Khulood Alsayegh, Head of Health Policies and Regulation, Dubai Health Authority, Dubai, UAE and Ms. Clare Dalton, Head of Delegation, International Committee of the Red Cross, Dubai UAE, moderated by Professor Immanuel Azaad Moonesar, Professor of Health Policy and Systems Research of MBRSG. Esteemed panelists discussed the role of healthcare policymakers in operationalizing health as a bridge to peace through conflict analysis and advocacy and enhancing the capacity building of the health workforce for peace skills and partnerships.

## **Policy Dialogue Panel Objectives**

- Raise awareness of and identify some of the health-related issues that, when appropriately and addressed, could directly or indirectly provide ways to promote peace as well as mitigate and prevent conflict;
- Explore policies and initiatives that enhance the right to health in peace-building processes;
- Discuss challenges and barriers to the right to health in decision-making processes;
- Provide an opportunity for dialogue and information between different stakeholders.

#### The policy dialogue panel event addressed several questions, including

- How can health, directly and indirectly, promote peace and mitigate and prevent conflict?
- Are there specific past or historical examples of where or when this occurred?
- What are the fundamental principles of health for peace?
- What frameworks or methodologies should be applied and used?
- What will be the role of medical practitioners in the promotion of peace?
- What is the importance of women's role in health services to reinforce peace processes?
- How can health professionals participate in mediation, mitigation, and prevention of conflicts?

Panelists and Participants' views, experiences, and shared knowledge enriched the dialogue. The dialogue intended to encourage action and put the policy issue on the policy agenda by engaging with the stakeholders who took part in the dialogue and sharing the summary with those who may review the summary and take action within their own institutions.





# Introduction

The opening remarks were by Dr Umesh Palwankar, Executive Director, Geneva Centre for Human Rights Advancement and Global Dialogue. The Geneva Centre is an independent human rights think-tank and advocacy institution, founded in 2013, whose goal is to promote a universal, value driven human rights system based on the principles of equity, justice, non-discrimination, inclusiveness and solidarity. We believe in human rights as essential to the dignity of all human beings, and in global dialogue as a vital means to promote inter-cultural and interfaith understanding, foster tolerance, harmony and the celebration of diversity, to build a just, peaceful and participative society. The Centre has special consultative status with UN ECOSOC. The mandate, and subsequent activities, of the Geneva Centre rests on four interconnected pillars: research and publications; training and national capacity building, with a special focus on the MENA region; international advocacy, mainly through following and reporting on important human rights developments and conferences, in particular the

Human Rights Council sessions; and, offering a platform for a global dialogue on current, vital human rights issues, through the organization of international conferences and panels, and publication of their proceedings with an incorporated think-piece on lessons learned and ways forward, for universal distribution.

The Geneva Centre's focus areas include equality, non-discrimination including gender based, racism, access to justice, to education, women and children's rights, inter-religious dialogue, empowerment of women, youth, right to a safe, healthy and sustainable environment, business and human rights. To cite a few examples from 2023, the Geneva Centre held 4 panels on respectively women and girls' right to education, interfaith dialogue and reconciliation, digital surveillance and human rights, and human trafficking and human rights.

In September, prior to COP28, the Centre organized a major conference at the UN in Geneva, sponsored by 3 Permanent Missions, on *Environment, Climate Change and Women and Children's Rights: Challenges, Perspectives and the Role of Indigenous Peoples.* 

Training sessions were held on cybersecurity, human rights, human rights law, structures, and mechanisms. Our Human Rights Council reporting has over 600 subscribers to our mailing list, including Permanent Missions to the United Nations, international organizations, academia, media. The 2023 Human Rights Recognition Awards annual event, commemorating international human rights day, was held on 8 December on the theme Women championing environmental rights. All publications, reports and events held can be found on our user-friendly website <a href="https://gchragd.org/">https://gchragd.org/</a>

# Right to health in human rights law

International human rights instruments incorporate the right to health and other health-related human rights. Physical and mental health are also fundamental human rights. Countries have a legal obligation to develop and implement legislation and policies that guarantee universal access to quality health services and address the root causes of health disparities, including poverty, stigma, and discrimination. A human rights-based approach to health commits countries to develop rights-compliant, effective, gender transformative, integrated, accountable health systems and implement other public health measures that improve the underlying determinants of health, like access to water and sanitation. As outlined in General Comment No. 14 of the Committee on Economic, Social, and Cultural Rights, State parties are also required to respect, protect, and fulfill the right to health at the national level.



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This is enshrined in several international legal instruments, including the International Covenant on Economic, Social and Cultural Rights (Art. 12); the Elimination of All Forms of Racial Discrimination (Art. 5(e) iv); the International Convention on the Elimination of All Forms of Discrimination Against Women (Articles 11(1) (f), 12 and 14(2)(b)); the Convention on the Rights of the Child (Art. 24); the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families (Articles 28, 43 (e) and 45 (c); and the Convention on the Rights of Persons with Disabilities (Art. 25). The Universal Declaration of Human Rights also mentions health as part of the right to an adequate standard of living (Art. 25).

# **Deliberations about the Policy Elements**

The policy elements were presented along with the relevant literature to include: element description, the underlying factor it addresses, benefits, risks, cost and cost-effectiveness, and uncertainty around elements as cited in the examined literature. The context of humanitarian diplomacy and *health diplomacy* was presented in terms of the following:

**Humanitarian diplomacy** refers to the use of diplomatic strategies and negotiations to address humanitarian crises, alleviate suffering, and protect human rights in conflict zones, natural disasters, and other emergencies. It involves advocating for humanitarian principles such as neutrality, impartiality, and independence to ensure access to affected populations, facilitate the delivery of aid, and negotiate ceasefires or safe passage for humanitarian personnel and supplies.

**Health diplomacy**, on the other hand, focuses specifically on using diplomatic channels and negotiations to address health-related issues at the national, regional, and international levels. It encompasses efforts to promote public health objectives, strengthen health systems, and address global health challenges such as infectious diseases, access to healthcare, and health inequalities. Health diplomacy involves collaboration between governments, international organizations, civil society, and other stakeholders to develop and implement policies that improve health outcomes and advance health as a key component of foreign policy agendas.

#### The policy elements were:

- Element #1: Strengthen Healthcare Infrastructure
- Element #2: Prioritize Equity in Healthcare
- Element #3: Implement Human Rights Approach
- Element #4: Engage Medical Practitioners in Peacebuilding
- Element #5: Empower Women in Health Services

Panelists and Participants acknowledged the importance of all the elements and the challenges in exploring the Healthcare's Role in Peacebuilding Initiatives.





## Context

Armed wars have a devastating impact on health and obstruct peace efforts, with countless instances targeting healthcare institutions and staff in 2021 alone. The atrocities, which included assaults, kidnappings, and deaths, violated international human rights and humanitarian norms. Recognizing health's critical role, the World Health Organization considers it essential for attaining peace and security, stressing collaboration between individuals and nations. In conflict-affected communities, health may both contribute to and benefit peace, since unequal access to healthcare exacerbates grievances and generates violence.

Efforts to bridge health and peace can take three approaches: delivering services in conflict zones to foster trust, providing a neutral forum for warring parties to work on health concerns, and providing mental health care to promote healing and reconciliation. These initiatives seek to build trust, increase collaboration, and improve social cohesiveness, opening the road for reconciliation.

Experts recommend that health officials improve the operationalization of health as a bridge to peace by conducting conflict analysis, advocating for peace, and training health professionals in peace-related skills and collaborations. Furthermore, encouraging gender diversity in health leadership during conflicts is viewed as critical for long-term peace and fair socioeconomic recovery after the conflict, providing a viable approach to effectively linking peace and health, particularly in active conflict contexts.

*Humanitarian diplomacy* is the application of diplomatic techniques and discussions to handle humanitarian crises, alleviate suffering, and safeguard human rights in conflict zones, natural catastrophes, and other emergency situations. It entails lobbying for humanitarian values such as neutrality, impartiality, and independence in order to secure access to impacted communities, expedite assistance distribution, and negotiate ceasefires or safe passage for humanitarian workers and supplies.

On the other hand, *health diplomacy* focuses on utilizing diplomatic channels and discussions to address healthrelated challenges on a national, regional, and worldwide scale. It includes initiatives to advance public health goals, build health systems, and address global health issues such as infectious illnesses, healthcare access, and health disparities. Health diplomacy include working with governments, international organizations, civil society, and other stakeholders to create and execute policies that enhance health outcomes and position health as an important component of foreign policy objectives.





# The policy dialogue policy discussion points:

Ensuring the right to health is an important part of promoting peace, with both direct and indirect implications for peace processes. Here's a comprehensive look at the insights provided:

## 1. Promoting Peace Through Health:

**Direct Impact:** Adequate healthcare infrastructure and services directly contribute to peace by meeting the population's fundamental requirements, promoting stability and avoiding disease transmission. When individuals have access to healthcare, they are more likely to feel comfortable and content with their living situations, which reduces tensions and potential conflict.

**Indirect Impact:** Improved health outcomes contribute indirectly to peace by addressing the root causes of conflict. For example, improved health in communities boosts economic growth since healthier people are more productive. Furthermore, greater health leads to increased access to education, which can help to alleviate poverty and inequality while also helping to social cohesion and stability.

## 2. Historical Examples:

Historical examples, such as the provision of healthcare in post-conflict conditions following World War II, highlight the critical importance of healthcare in reconstructing society and promoting reconciliation. In conflict zones such as Rwanda and Bosnia, efforts to restore health services were critical for reestablishing confidence and stability, demonstrating how healthcare can serve as a foundation for peacebuilding initiatives.

### 3. Basic Principles of Health for Peace:

**Equity:** Ensuring equal access to healthcare for all people, regardless of socioeconomic position or geographic location, is critical for fostering inclusion and trust in communities. When everyone has access to healthcare, sentiments of exclusion are reduced, and social cohesiveness improves.

**Prevention:** Prioritizing preventative efforts to reduce the possible health consequences of conflict is critical. Addressing health inequities and adopting disease preventive initiatives decreases the chance of conflict over health-related problems.

**Community Engagement:** Involving communities in healthcare decision-making builds trust and encourages people to take control of their own health. This encourages inclusion and ensures that healthcare services are responsive to community needs, so helping to peacebuilding efforts.

### 4. Frameworks and Methodologies:

**Human Rights Approach:** Emphasizing the right to health as a basic human right and incorporating it into peacebuilding efforts is critical. Healthcare interventions that adhere to human rights values such as non-discrimination and equality can help to foster peace by resolving underlying grievances and promoting social justice.

**Health Impact Assessments:** Evaluating the possible health repercussions of policies and measures can assist to reduce negative health effects during conflict. By performing health impact evaluations, policymakers may ensure that peacebuilding initiatives are in line with public health objectives and that community wellbeing is prioritized.





## 5. The Role of Medical Practitioners:

**Humanitarian Action:** Medical professionals play an important role in delivering medical treatment in war zones and post-conflict areas. They help to create peace and stability by reducing suffering and treating health needs.

**Advocacy:** Medical practitioners may campaign for health-focused policies as a method of achieving and sustaining peace. By utilizing their knowledge and reputation, they may persuade decision-makers to prioritize healthcare as a basis for peacebuilding.

#### 6. The importance of women's roles:

**Women have important roles in healthcare**, and their participation increases community resilience. Women's engagement in health care in post-conflict contexts helps to reconstruct communities and foster social cohesion. Recognizing and supporting women's contributions to healthcare is critical for long-term peacebuilding initiatives.

#### 7. Health Professionals in Conflict Resolution:

**Mediation:** Medical professionals can serve as mediators by encouraging communication and understanding among disputing parties. They can help to resolve conflicts and foster reconciliation by using their communication abilities and neutrality.

**Mitigation:** Health professionals play critical roles in conflict prevention via early warning systems, health inequalities reduction, and community resilience promotion. They help to achieve long-term peace by addressing the underlying causes of conflict and strengthening societal cohesiveness.

Finally, safeguarding the right to health is inextricably tied to peace processes and necessitates a comprehensive strategy that takes into account the socioeconomic determinants of health. By addressing both the direct and indirect links between health and conflict, as well as involving health professionals in a variety of roles, attempts may be made to achieve long-term peace and stability in conflict-affected areas.





# Summary of Insights

Ensuring the right to health is critical to advancing peace processes by addressing the direct and indirect links between health and conflict. Here are some summary observations regarding the replies given:

## 1. Promoting Peace Through Health:

**Direct Impact:** Adequate healthcare infrastructure and services can help to promote peace by addressing the population's fundamental requirements, promoting stability, and limiting disease transmission.

**Indirect Impact:** Improved health outcomes boost economic growth, education, and social cohesiveness, indirectly supporting peace by addressing the root causes of conflict.

## Key stakeholders for responding to this initiative:

- Local (UAE): Ministry of Health and Prevention, Department of Health Abu Dhabi, Dubai Health Authority, other emirate health authorities.
- Regional (Arab World): Arab League, Pan Arab Union of Infectious Diseases, Gulf Cooperation Council Health Ministers Council.
- International: World Health Organization (WHO), United Nations Development Programme (UNDP), World Bank, International Red Cross and Red Crescent Movement.

## 2. Historical examples:

The provision of healthcare in post-conflict contexts, such as after World War II, has helped to reconstruct communities and create reconciliation.

In conflict zones such as Rwanda and Bosnia, attempts to restore health services were critical to reestablishing confidence and stability.

### Key stakeholders for responding to this initiative:

- Local (UAE): Ministry of Foreign Affairs and International Cooperation, Ministry of Interior, Ministry of Education.
- **Regional (Arab World)**: Arab League, United Nations Economic and Social Commission for Western Asia (ESCWA), Organization of Islamic Cooperation (OIC).
- International: United Nations (UN), European Union (EU), African Union (AU), Organization for Security and Co-operation in Europe (OSCE).

### 3. Basic Principles of Health for Peace:

**Equity:** Ensuring that healthcare is available to everyone, regardless of socioeconomic position or geographical location.

Prevention: Prioritizing preventative actions to reduce the health consequences of conflict.

**Community Engagement:** Bringing communities into healthcare decision-making to foster inclusion and trust.





#### Key stakeholders for responding to this initiative:

- Local (UAE): Ministry of Health and Prevention, National Health Insurance Company (Daman), Emirates Foundation for Youth Development.
- Regional (Arab World): Arab League, Islamic Development Bank, Arab Fund for Economic and Social Development.
- International: WHO, United Nations Children's Fund (UNICEF), United Nations Population Fund (UNFPA), International Federation of Red Cross and Red Crescent Societies (IFRC).

#### 4. Frameworks and methodologies:

**Human Rights Approach:** Treating the right to health as a basic human right and incorporating it into peacebuilding efforts.

**Health Impact Assessments:** Assessing the possible health repercussions of policies and activities in order to mitigate harmful effects.

#### Key stakeholders for responding to this initiative:

- Local (UAE): National Human Rights Committee, Emirates Human Rights Association, Dubai Foundation for Women and Children.
- **Regional (Arab World):** Arab League, Arab Network for National Human Rights Institutions, Arab Organization for Human Rights.
- International: United Nations Human Rights Council (UNHRC), Amnesty International, Human Rights Watch, International Committee of the Red Cross (ICRC)

#### 5. The role of medical practitioners:

Humanitarian Action: Providing medical treatment in conflict zones and post-conflict situations to alleviate suffering and promote stability.

Advocacy: Medical practitioners may campaign for health-focused policies as a method of achieving and sustaining peace.

#### Key stakeholders for responding to this initiative:

- Local (UAE): Emirates Medical Association, Dubai Healthcare City, Abu Dhabi Health Services Company (SEHA).
- **Regional (Arab World):** Arab Medical Association Against Cancer, Arab Medical Union, Arab Board of Health Specializations.
- International: International Physicians for the Prevention of Nuclear War (IPPNW), Médecins Sans Frontières (Doctors Without Borders), International Medical Corps, International Council of Nurses.

#### 6. The Importance of Women's Roles:

Women frequently play critical roles in healthcare, and their participation boosts community resilience.

Women's engagement in health care in post-conflict contexts helps to reconstruct communities and foster social cohesion.





### Key stakeholders for responding to this initiative:

- Local (UAE): UAE Gender Balance Council, Dubai Women Establishment, Women's Union Abu Dhabi.
- Regional (Arab World): Arab Women Organization, Arab Women's Solidarity Association, Arab Women's Health Association.
- International: UN Women, International Women's Health Coalition, Women Deliver, Global Fund for Women.

#### 7. Health Professionals and Conflict Resolution:

**Mediation:** Medical practitioners can function as mediators, encouraging communication and understanding between opposing groups.

**Mitigation:** Taking part in conflict prevention through early warning systems, addressing health inequities, and fostering community resilience.

#### Key stakeholders for responding to this initiative:

- Local (UAE): Ministry of Foreign Affairs and International Cooperation, UAE Peaceful Nuclear Energy Program.
- Regional (Arab World): Arab League, Arab Parliament, Arab Center for Dispute Resolution.
- International: United Nations Department of Political and Peacebuilding Affairs (DPPA), United States Institute of Peace, International Peace Institute, Centre for Humanitarian Dialogue.

In conclusion, the right to health is inextricably related to peace processes, and a comprehensive strategy that takes into account the socioeconomic determinants of health is critical for long-term peacebuilding. Health professionals may play critical roles in delivering treatment and pushing for policies that prioritize health as a building block for peace.





# **Recommendations:**

Here are 7 major recommendations based on the information offered.

- 1. Strengthen Healthcare Infrastructure: Invest in appropriate healthcare infrastructure and services to address the fundamental requirements of conflict-affected communities, therefore promoting stability and averting disease outbreaks.
- 2. Address Underlying Causes of Conflict: Recognize the indirect influence of health on peace by increasing health outcomes, which contribute to economic growth, education, and social cohesion, so addressing the root causes of conflict.
- **3. Prioritize Healthcare Equity:** Ensure fair access to healthcare for all persons, regardless of socioeconomic position or geographic location, in order to foster community inclusion and trust.
- 4. Implement the Human Rights Approach: Emphasize health as a basic human right and incorporate it into peacebuilding efforts, using frameworks like health impact assessments to reduce the negative effects of policies and actions.
- 5. Engage Medical Practitioners in Peacebuilding: Encourage medical professionals to participate in humanitarian action by delivering medical treatment in war zones, as well as advocating for policies that prioritize health as a method of achieving and sustaining peace.
- 6. Empower Women in Health Services: Recognize and promote the critical roles that women play in healthcare, particularly in post-conflict situations, to boost community resilience and improve social cohesion during the rebuilding process.
- 7. Use Health Professionals for Conflict Resolution: Use medical professionals' mediation abilities to promote discussion and understanding between warring parties, as well as to engage them in conflict prevention through early warning systems, health inequalities, and community resilience.

Finally, long-term peacebuilding requires a holistic approach that incorporates health into peace processes. By addressing the direct and indirect links between health and conflict, as well as involving health professionals in a variety of roles, attempts may be made to achieve peace and stability in conflict-affected areas.

Summary of recommendations:

- 1. Strengthen Healthcare Infrastructure
- 2. Address Underlying Causes of Conflict
- 3. Prioritize Equity in Healthcare
- 4. Implement Human Rights Approach
- 5. Engage Medical Practitioners in Peacebuilding
- 6. Empower Women in Health Services
- 7. Utilize Health Professionals in Conflict Resolution





# **Next Steps**

It was agreed that further steps need to be taken to build on the discussion and its findings, and the participants offered support in disseminating the dialogue summary and policy brief within their teams. In addition, both documents will be communicated with relevant departments, institutions, and professionals to advocate for action. All relevant stakeholders, subject matter experts, and institutions in public and private sectors shall be engaged in agenda-setting, priority-setting, and implementation. Additional work is needed to set the implementation plan and evaluation process to ensure evidence is collected throughout the implementation and not only at the end-stage. Generated evidence can aid in planning the next steps.

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- 1. Abu Hail Management & Administration Training
- 2. Al Manar Islamic Centre
- 3. American University In The Emirates
- 4. Arab Planning Institute
- 5. BWH
- 6. Center On Democratic Performance
- 7. Central Bank Of UAE
- 8. Centre For Technology, Innovation & Economic Research
- 9. Cleveland Clinic Abu Dhabi
- 10. COP28
- 11. Dubai Air Navigation Services
- 12. Dubai Airports
- 13. Dubai Health Authority
- 14. Dubai Media
- 15. Fuji Office Machines
- 16. GCHRAGD

- 17. HCT
  - 18. Human Rights
  - 19. ICRC
  - 20. Independent Consultant
  - 21. International Committee Of The Red Cross (ICRC)
  - 22. International Humanitarian City
  - 23. IQVIA
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  - 27. Ministry Of Energy And Infrastructure
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The views expressed in this report are those of the author(s) and do not necessarily reflect those of the trustees, officers, and other staff of the Mohammed Bin Rashid School of Government (MBRSG) and its associated entities and initiatives.





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# Research at The Mohammed Bin Rashid School of Government

The Mohammed Bin Rashid School of Government (formerly Dubai School of Government) is a research and teaching institution focusing on public policy in the Arab world. Established in 2005 under the patronage of HH Sheikh Mohammed bin Rashid Al Maktoum, Vice President and Prime Minister of the United Arab Emirates and Ruler of Dubai, in cooperation with the Harvard Kennedy School, MBRSG aims to promote good governance through enhancing the region's capacity for effective public policy.

Toward this goal, the Mohammed Bin Rashid School of Government also collaborates with regional and global institutions in delivering its research and training programs. In addition, the School organizes policy forums and international conferences to facilitate the exchange of ideas and promote critical debate on public policy in the Arab world. The School is committed to the creation of knowledge, the dissemination of best practice and the training of policy makers in the Arab world. To achieve this mission, the School is developing strong capabilities to support research and teaching programs, including:

- Applied research in public policy and management;
- Master's degrees in public policy and public administration;
- Executive education for senior officials and executives; and,
- Knowledge forums for scholars and policy makers.

The MBRSG Research Department focuses on the following seven priority policy areas:

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- 4. Public Leadership
- 5. Social Policy, Wellbeing and Happiness
- 6. Sustainable Development Policy
- 7. Economic Policy

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# About the organizers

The **Geneva Centre for Human Rights Advancement and Global Dialogue** is an independent, human rights think-tank and advocacy institution, established in 2013 with its headquarters in Geneva. The Centre is dedicated to promoting a universal, value-driven human rights system anchored in the principles of equity, non-discrimination, inclusiveness, and solidarity. The Centre was granted special consultative status with the United Nations Economic and Social Council (ECOSOC) in July 2017. The Centre's principal activities consist of research and publications, training in human rights, reporting on human rights conferences, in particular the Human Rights Council sessions, and organization of thematic panel debates and international advocacy to further the promotion of human rights.



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