



# No health without peace: Health justice in armed conflict settings

6<sup>th</sup> June 2024

A webinar of Health System Global's Thematic Working Group on  
Health Systems in Fragile & Conflict-Affected Settings

# Health Systems in Fragile and Conflict-Affected States

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The TWG FCAS is an active group of more than 2000 members. We aim to connect and engage researchers, policymakers, donors, practitioners, health managers and providers, educators, civil society, private sector, and beneficiaries to advance the field of HSPR in FCAS.

## Objectives

- Connect and **network** with a broad range of actors on issues related to health systems in FCAS
- Share **knowledge**, information and **resources** on these issues and promote research uptake
- Promote **advocacy** for health systems and health systems research in FCAS,
- Ensure **capacity strengthening** and skills-knowledge brokering.





## Learn more and join us



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## ReBUILD for Resilience

ReBUILD for Resilience examines health system resilience in fragile settings experiencing violence, conflict, pandemics and other shocks.

We are an international research consortium that aims to produce high-quality, practical, multidisciplinary and scalable research which can be used to improve the health and lives of many millions of people.

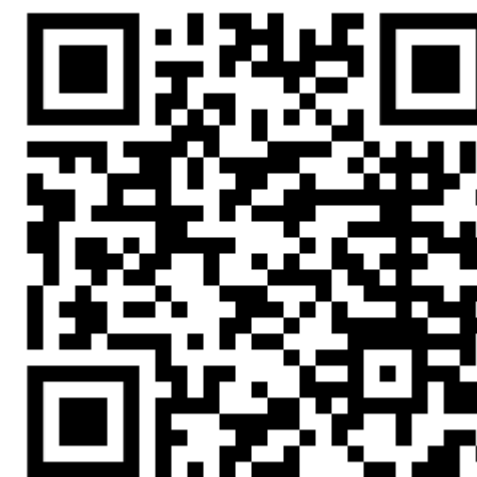
ReBUILD for Resilience is funded by the UK government.



Current study: What can we learn about health system resilience in fragile contexts from Afghanistan?



Register for our new webinar - No health without peace: Health justice in armed conflict settings



ReBUILD for Resilience

# Agenda



## Introduction

**Dr Wesam Mansour** – *Beyond equity: Unpacking health justice in health policy and system*

## Case studies

**Yemen - Professor Najla Al-Sonboli** – Head of the Paediatric Department at Al-Sabeen Hospital for Maternity and Children in Sana'a

**Sudan - Dr Mohammed Abdalgadir** – Chief of Party, MOMENTUM Integrated Health Resilience

**Myanmar - Dr Khine Wai Wai Oo** – Deputy Chief of Party, Community Partners International, Thailand

## Panel discussion

**Dr Mohammed Alkhaldi** - Canadian University Dubai

**Professor Fouad Fouad** – Liverpool School of Tropical Medicine and ReBUILD for Resilience

**Dr Egbert Sondorp** - Senior Health Advisor KIT Health and TWG FCAS



# Introduction



**Dr Wesam Mansour**

Liverpool School of Tropical Medicine  
and ReBUILD for Resilience

*Beyond equity:*

*Unpacking health justice in  
health policy and system*

# Beyond Equity: Unpacking Health Justice in Health Policy and System Research

**Wesam Mansour**

Health Systems Researcher

Department of International Public Health

Liverpool School of Tropical Medicine



# Background

## *Health justice advocates for:*

- Equal distribution of resources
- Equal access to quality care
- Fair health outcomes for all



An IRC clinical officer examines a young patient in Mogadishu ©Peter Biro/IRC

Health justice is not explicitly  
defined in HPSR

Lack of empirical evidence on  
what it means and how to use it

## *Health justice in fragile and conflict-affected settings (FCAS) faces multiple challenges:*

- Lack of independence
- Corruption
- Improper government influence
- Institutional and administrative problems
- Inadequate access
- Inefficiency

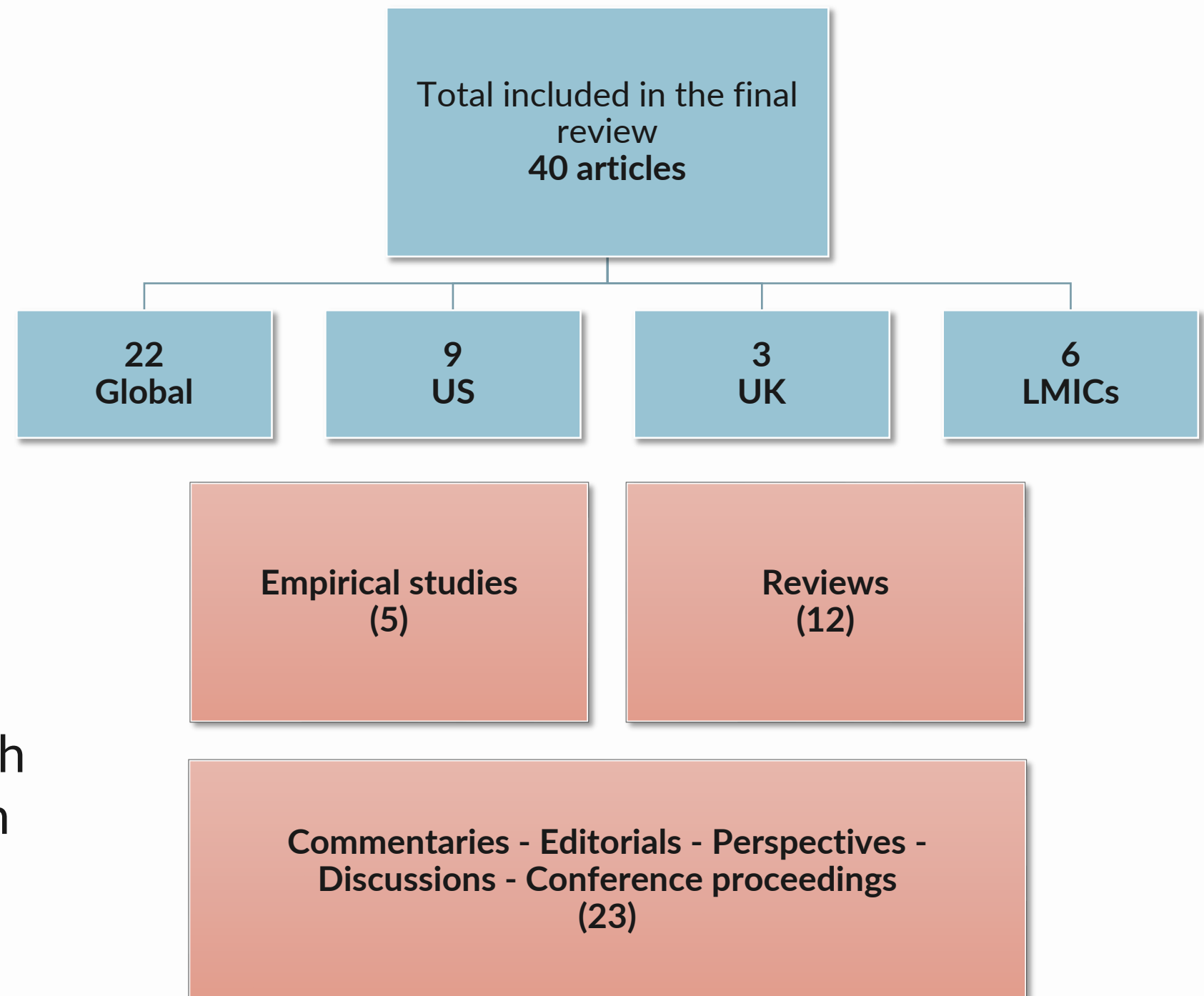


# ReBUILD for Resilience

ReBUILD's Gender, Equity and Justice (GEJ) working group – a collaboration with the Early Career Researchers working group

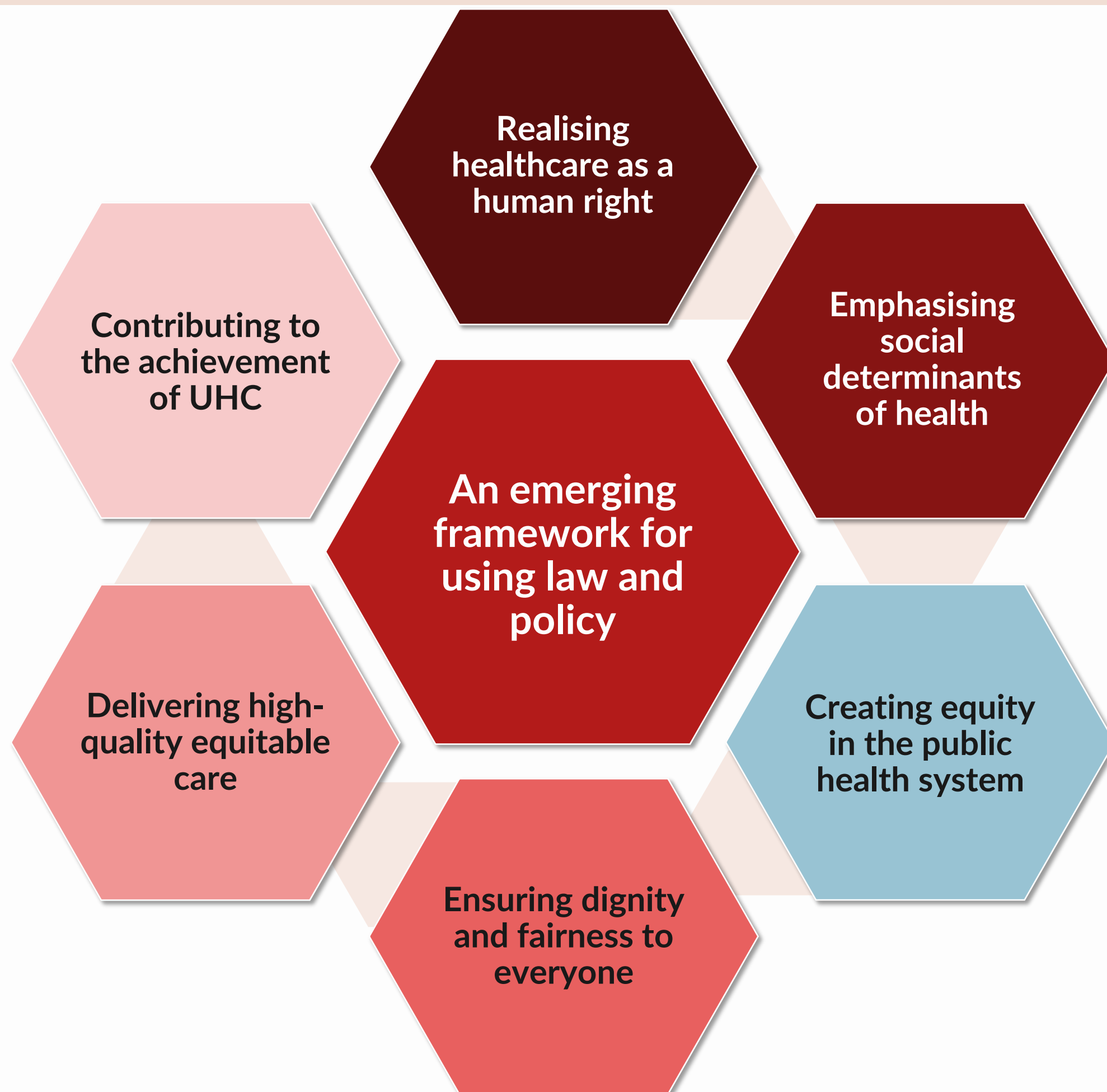
**A rapid literature review: 40 articles**

- **Aim:** to understand the concept of global health justice and explore how health justice has been used in health systems research



**Co-authors:** Giulia Loffreda<sup>1</sup>, Wesam Mansour<sup>2</sup>, Thazin La<sup>3</sup>, Shophika Regmi<sup>4</sup>, Joanna Khalil<sup>5</sup>

**Affiliations:** 1 Queen Margaret University, UK; 2 Liverpool School of Tropical Medicine, UK; 3 Burnet Institute, Myanmar; 4 HERD International, Nepal; 5 American University of Beirut, Lebanon.



# What is health justice?

- Health justice goes beyond acknowledging inequities
- It transforms the underlying social, economic, and political factors contributing to unequal health outcomes - fostering a more equitable and just society
- This requires a comprehensive range of strategies:





# Theories of social justice



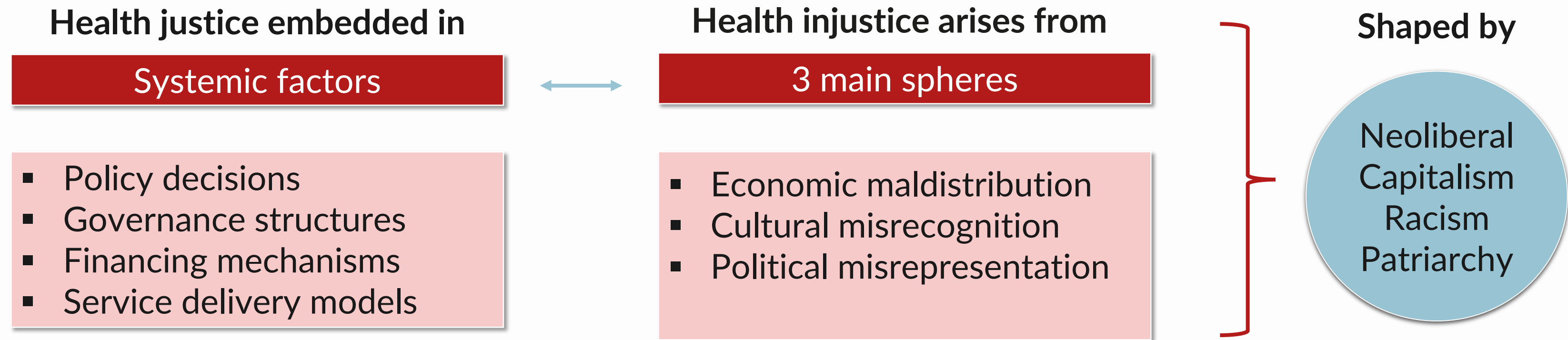
# Right to Health

- Health justice is an extension to the right to health - human rights framework
- 3 conditions give everyone a fair opportunity for a healthy life:
  - Public health services
  - Universal health systems
  - Addressing social determinants of health
- The right to health imposes obligations on governments – a range of principles



*Principles related to health systems and services*

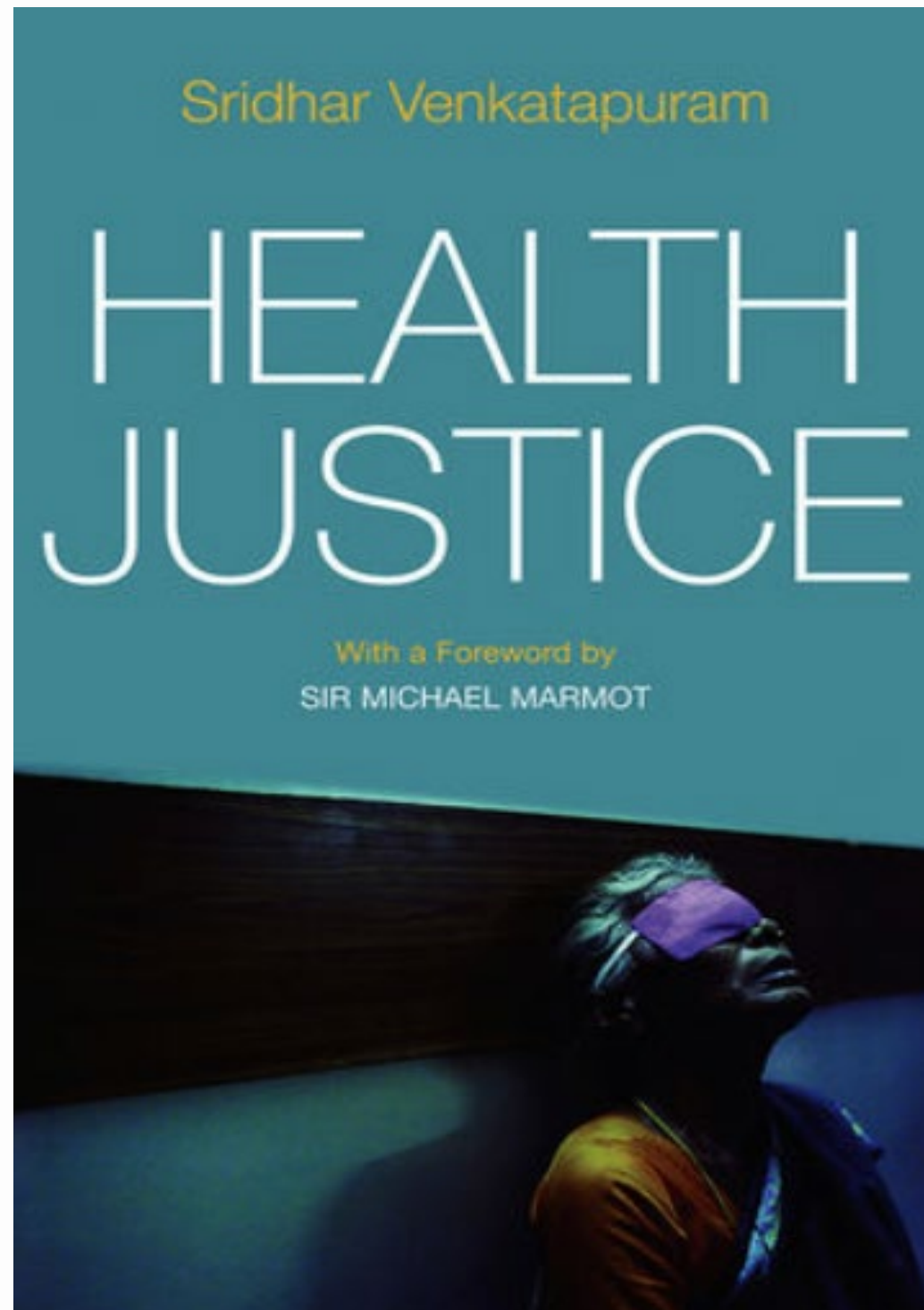
# Justice and intersectionality



Health justice requires an integrated intersectional approach  
– bringing together the three above spheres of health injustice



# Health justice and capability approach



- The health capability approach is **Venkatapuram theory of justice**
- Health is not just the absence of illness – a fundamental capability
- Linked to other capabilities
- Underscores the importance of the context
- Protracted conflicts destroy health systems, eroding the capabilities of citizens and governments

# Health justice and power

Health justice necessitates a redistribution of power to change the status quo by:

1. **Building power**
2. **Breaking the power**

Building power means cultivating the political capacity of people who are disproportionately harmed by health injustice.

It involves three reinforcing mechanisms...



# Conclusions

- Health justice goes beyond health equity by providing **approaches to address inequalities**
- Incorporating **analysis of power**, system methods, working closely with communities esp. **vulnerable** populations, engaging stakeholders are needed to foster health justice.
- **Intersectoral collaborations** are essential to developing health policies.
- **FCAS** experiences different forms health injustices exacerbated by **political and economic instabilities**
- Health justice remains in the **theory**/normative realm - empirical research is needed esp. in FCAS.



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# Thank you

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# Case study - Yemen



**Professor Najla Al-Sonboli**

Head of the Paediatric Department at  
Al-Sabeen Hospital for Maternity and  
Children in Sana'a, Yemen



**Professor Najla Al-Sonboli, Yemen**



# Case study - Sudan



**Dr Mohammed Abdalgadir**

Chief of Party

MOMENTUM Integrated

Health Resilience in Sudan

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Sudan Case Study from MOMENTUM Integrated Health Resilience

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Dr. Mohammed Abdalgadir | MOMENTUM Integrated Health Resilience

TWG FCAS Webinar | 6/6/2024|



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FROM THE AMERICAN PEOPLE



# Sudan Context

Large-scale armed conflict, economic volatility, and environmental disasters (April 2023)

- Over 16,532 fatalities, including thousands of children
- Massive displacement
- Imminent famine and acute malnutrition
- Impeded humanitarian access

Health system collapse and disease surge

- 4 million women and girls at risk of gender-based violence with limited access to services
- High burden of non-communicable diseases (NCDs) - > 51% of mortality
- 62 verified attacks on health workers (38 deaths and 45 injuries)
- At least 45 humanitarian workers killed

# MIHR Sudan

## Geographic coverage

### GOAL

Increase the capacity of Sudanese institutions to sustainably plan, manage, and maintain quality MNCH and WASH services

### OBJECTIVES

- Improved access to and use of evidence-based, quality MNCH and WASH services
- Strengthened capacity of host country institutions at locality and state level to deliver quality MNCH and WASH services
- Adaptive learning and use of evidence in MNCH and WASH programming

**PERIOD OF PERFORMANCE** October 1, 2021 – June 2026

**TECHNICAL PRIORITIES** Maternal, Newborn and Child Health; Water, Sanitation and Hygiene (WASH)



### Consortium Partners

- **CARE** (lead agency)
- IMA World Health (MNH, Nutrition)
- JSI (MERL, Child Health, Immunization, Digital Health)
- Pathfinder International (Gender, Youth)
- ACHAP (Organizational Capacity Building)
- GOAL (Resilience)



# South Kordofan Midwives Association (SKMA)

- SKMA is a **politically-neutral local institution** with access to localities other actors cannot access.
- Supportive supervision and clinical mentoring of midwives in 12 PHC clinics and 3 hospitals using competency-based checklists.
- Adaptation due to war context: shift from facility-based activities to **community-based** supportive supervision and clinical mentoring activities; **one team per locality**
- Organizational capacity development
- 91 midwives mentored per quarter since conflict started



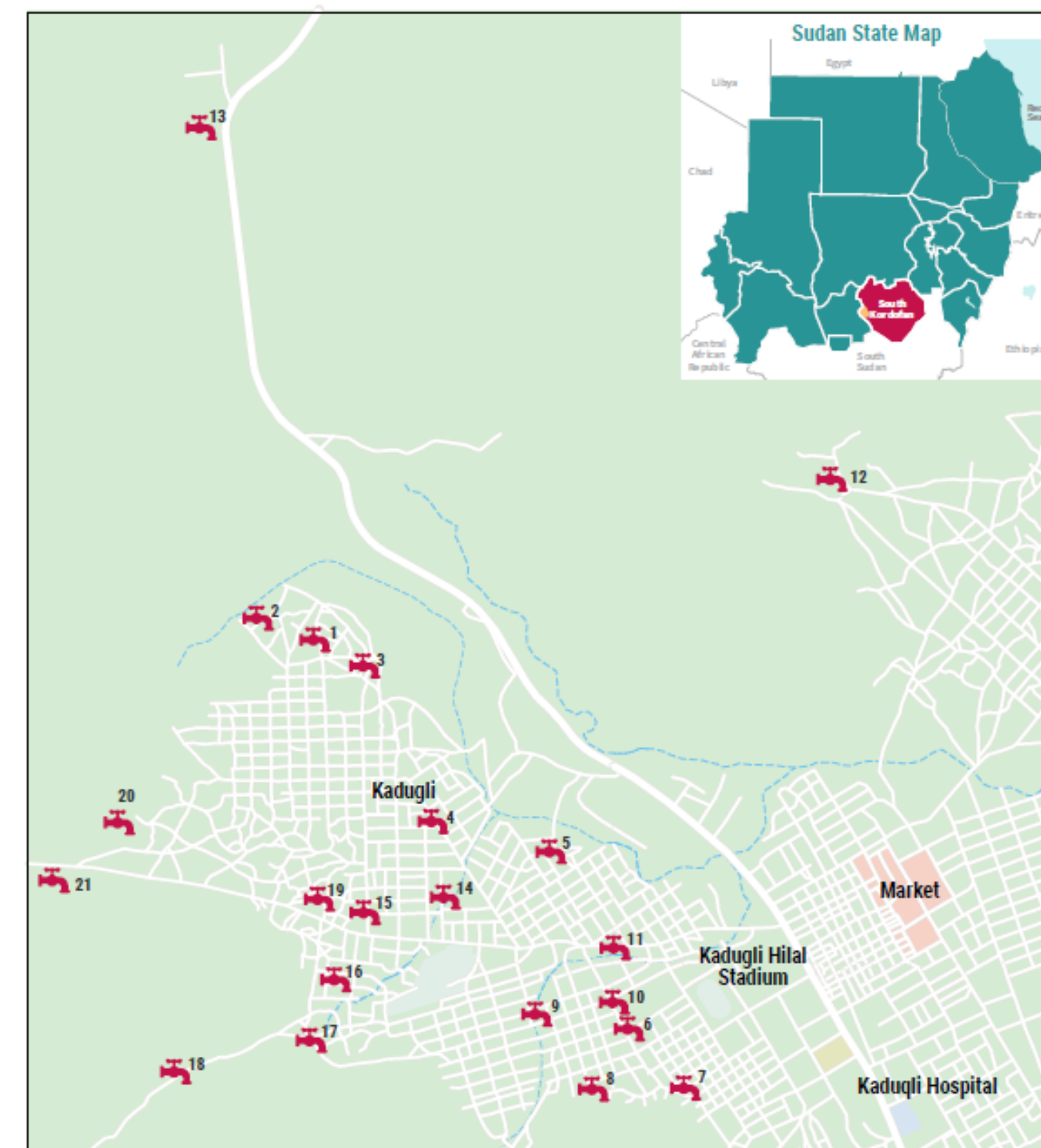


# Circuit Riders

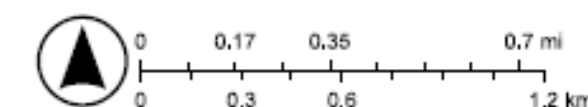
- Community-managed preventive maintenance and repair of water points (including those for health facilities)
- Repaired 23 hand pumps to increase access to safe drinking water
- Reduced risk of inter-ethnic conflict over scarce water resources



## WATER POINTS SUPPORTED BY MIHR



- |                                    |                             |
|------------------------------------|-----------------------------|
| 1. Hagar Alnar Block one HP1       | 12. HagarAlmak Block #1 HP  |
| 2. Hagar Alnar Block 5 Kashmar HP2 | 13. Kulba Eifaet HP         |
| 3. Hagar Alnar Block 1 HP3         | 14. Albangadeed Clinic HP   |
| 4. Alban Gadeed (Mosque) HP        | 15. Albangadeed Block 2 HP  |
| 5. Alban Gadeed Block 8 HP         | 16. Almathat Block #1 HP    |
| 6. Alradeef Boys School HP         | 17. Gar Alhagar Block #2 HP |
| 7. Algarbia HP                     | 18. Gar Alhagar Algogba HP  |
| 8. Upper Alradeef HP               | 19. Tafari Block #1 HP      |
| 9. Alradeef Clinic HP              | 20. Tafari Block #3 HP      |
| 10. Alradeed Girls School HP       | 21. Tafari Block #4 HP      |
| 11. Almalakia Market HP            |                             |





# Thank you!

MOMENTUM Integrated Health Resilience is funded by the U.S. Agency for International Development (USAID) as part of the MOMENTUM suite of awards and implemented by IMA World Health (IMA) with partners JSI Research & Training Institute, Inc. (JSI), Pathfinder International, GOAL USA Fund, CARE, and Africa Christian Health Associations Platform (ACHAP), along with Premise, Harvard T.H. Chan School of Public Health Department of Global Health and Population, Johns Hopkins Bloomberg School of Public Health Department of International Health, and Brigham Young University as resource partners, under USAID cooperative agreement #7200AA20CA00005. For more information about MOMENTUM, visit [www.USAIDMomentum.org](http://www.USAIDMomentum.org). The contents of this [document/product] are the sole responsibility of IMA World Health and do not necessarily reflect the views of USAID or the United States Government.

Learn more about MOMENTUM!



# Case study - Myanmar



**Dr Khine Wai Wai Oo**

Deputy Chief of Party

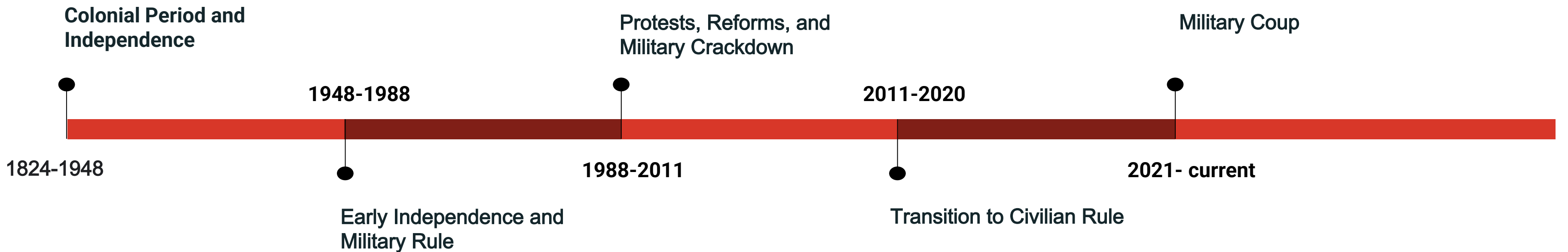
Community Partners International

Thailand

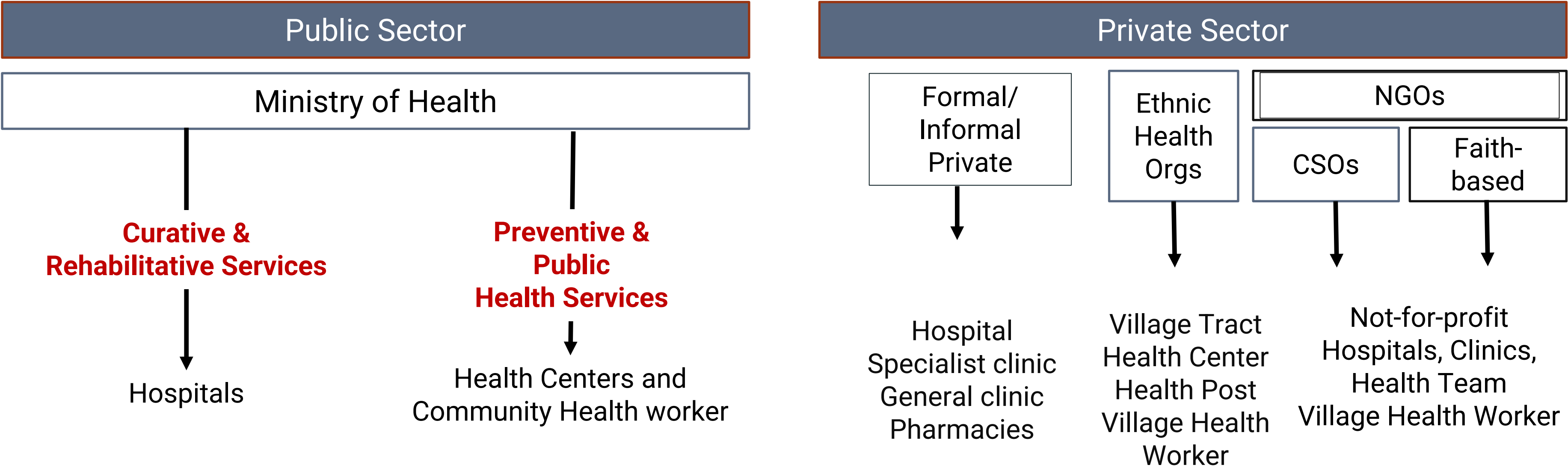


# No health without peace: Health justice in armed conflict settings

**Khine Wai Wai Oo**



# Health Care System in Myanmar





# Health as a Bridge for Peace



Patient referral at conflict-affected, hard to reach area



Implementation of EPI activities in EHO areas together with MOH



# Health sector after coup



Medical workers pose during a protest against the coup



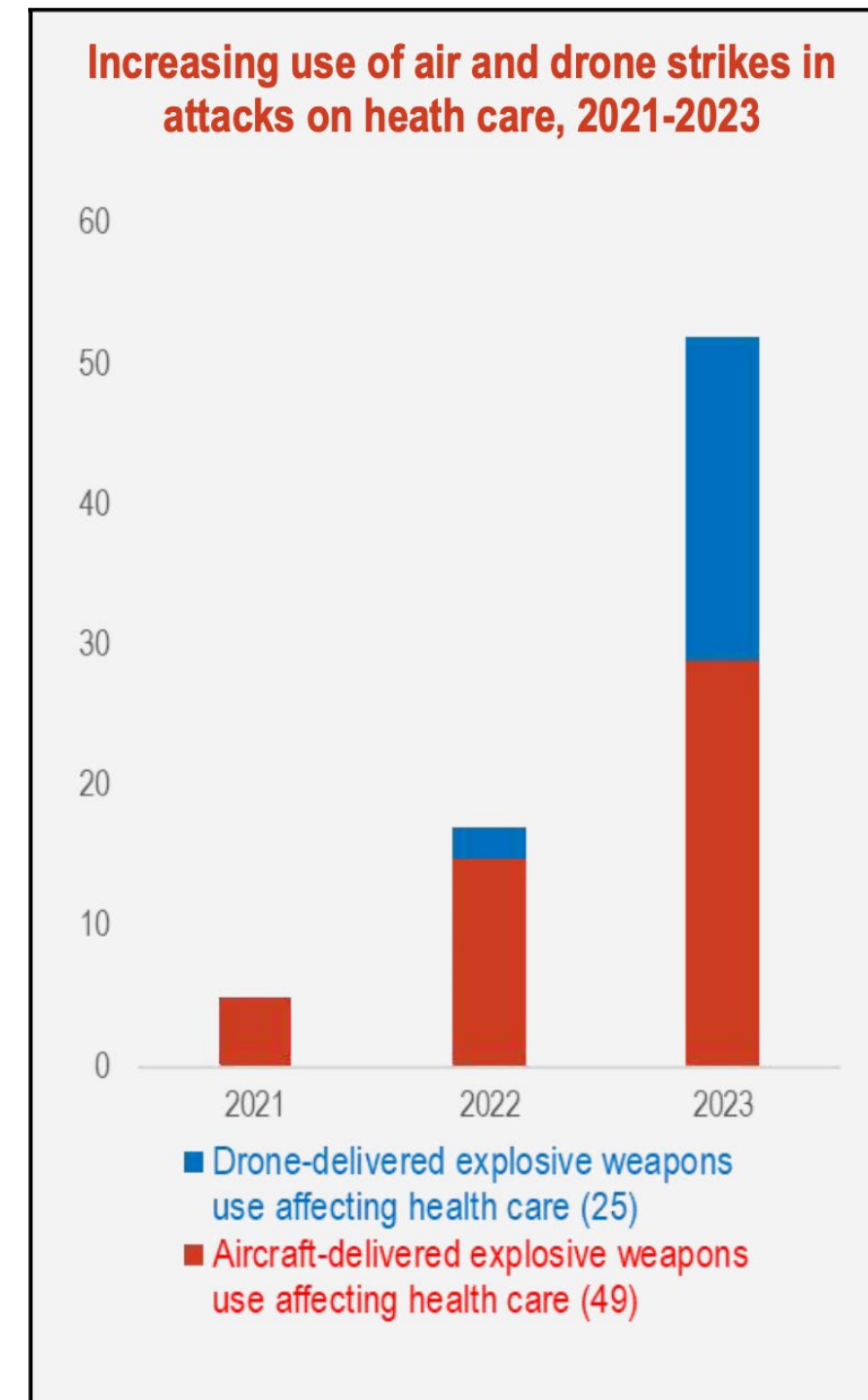
A member of the Loyalty Mobile Team for Karenni provides healthcare to IDPs in Kayah State  
(Mar Naw | Frontier)



# Health sector under attack



Source: Myanmar Witness



Source: Insecurity Insight

# Health resiliency



Source: WHO Health Services Resilience Team, WHO headquarters.

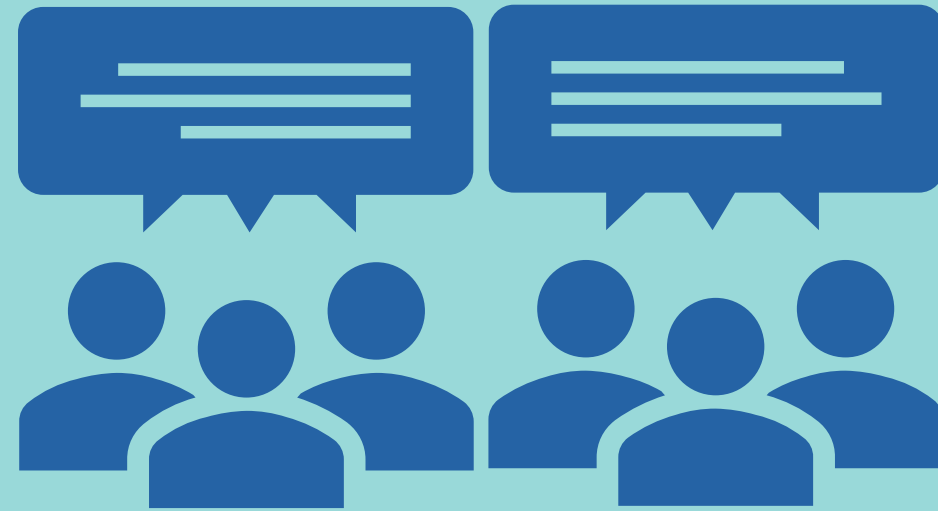


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**Press release**
- 2. Myanmar Witness : Graphic of the Pekon township airstrike that affected the local rural hospital**  
**(sources: Karenni's Voice; additional sources were redacted for privacy).**

**Thanks for your attention**

# Panel discussion



Any questions?



# Panel discussion



## **Dr Mohammed Alkhalidi**

Assistant Professor

Canadian University Dubai and  
Scientific Lead from TGHN-MENA  
network at University of Oxford

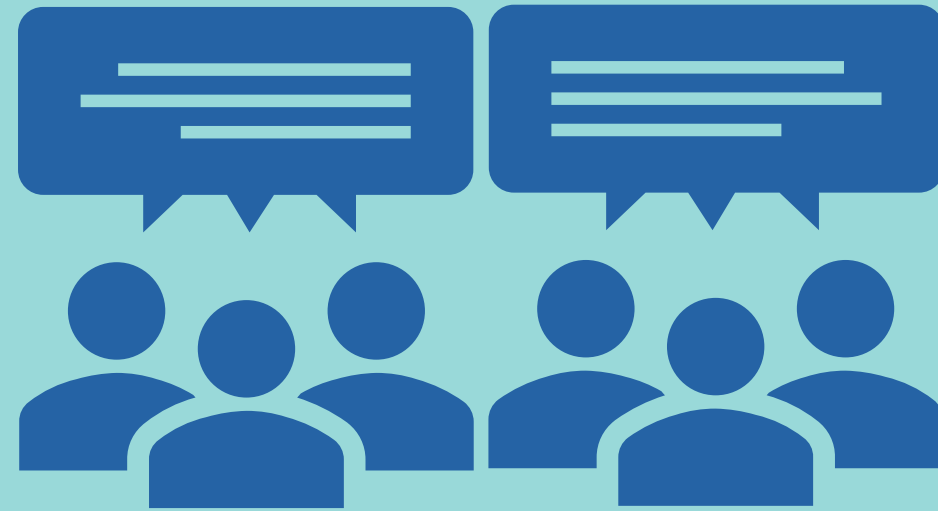
# Panel discussion



## **Professor Fouad Fouad**

Professor in Social Science &  
Global Health at  
Liverpool School of Tropical Medicine  
and ReBUILD for Resilience

# Panel discussion



Any questions?



# Thanks for attending



ReBUILD for Resilience



TWG FCAS

## The recording will be available soon



An ambulance at Shifaa Hospital, Gaza, November 2023. Gigi Ibrahim via Flickr

