



The Colombo Declaration

Attacks on health care facilities in conflict zones have, unfortunately, been documented in many wars throughout history. In the aftermath of World War II, in an attempt to limit the suffering caused by armed conflict, the international community drafted and ratified the 1949 Geneva Conventions, establishing rules to protect people who were not participating in the hostilities – civilians, medical personnel, injured soldiers etc. Violations of these rules of war, such as bombing a hospital, constituted a war crime punishable under International Humanitarian Law.

Despite the global acceptance of the Geneva Conventions, recent years have seen an escalation of the pattern, frequency and nature of attacks on hospitals in conflict zones. Recently termed the “weaponisation” of health care, these hospital attacks have become part of a multi-dimensional war strategy, which uses large scale violence to deprive people of access to health care. While Syria and Yemen have recently suffered the largest volume of attacks on health care facilities, a recent report documented attacks in 23 countries in 2016 alone.

The majority of these attacks on hospitals are perpetrated by Nation States who have signed the Geneva Conventions often using highly advanced precision aerial bombardment. These attacks are not simply collateral damage.

Under mounting pressure from all major international health related organisations, the UN Security Council passed Resolution 2286 in May 2016 condemning attacks on health care and demanding that all warring parties fully comply with the Geneva Conventions. Unfortunately, the resolution has not been implemented or enforced, attacks continue with impunity.

At the 2016 DevelopingEM conference in Sri Lanka an eye witness description of the bombing of the Medecins Sans Frontieres run Kunduz Trauma Centre in Northern Afghanistan was emotional provided by Dr Kathleen Thomas. Forty two staff and patients were killed in the US attack and the Trauma Centre was utterly destroyed. Other presenters and conference delegates later described similar attacks on health facilities in other conflict settings that they too had witnessed.

As a group, evidenced by a signed petition, the faculty and delegates (approximately 300 clinicians) of the conference agreed to cement the overwhelming abhorrence at the ongoing situation globally in the Colombo Declaration.

The Sri Lankan Society of Critical Care and Emergency Medicine (SSCCEM) and DevelopingEM in behalf of the faculty and delegates of the 2016 Conference present the Declaration as follows.

We, the directors and organizing committee of DevelopingEM and the SSCCEM, are concerned about the serious worldwide attacks on healthcare facilities, personnel and their patients. We have assembled at the 2017 Sri Lankan Emergency Medicine Conference (SLEMCON), to consider enhanced action to tackle this problem in a spirit of trust and cooperation. We:

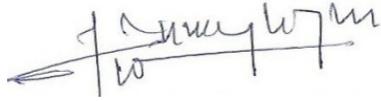
1. Condemn the attacks on health care facilities, health care workers and vehicles in conflict zones.
2. Reaffirm our belief that all people regardless of gender, sexuality, race, ethnicity, political affiliation, or religious beliefs should have the right to access health care, and all medical professionals should be able to deliver this care in facilities without threat of attack
3. Call upon the UN Security Council to take immediate action to fully implement and enforce Resolution 2286
4. Call upon all Member States to uphold and comply with the Geneva Conventions; to commit to making attacks against healthcare in conflict zones an absolute redline; to support the enforcement of UNSC Resolution 2286; and to call for an immediate cessation to any further attacks on health care facilities
5. Call upon national medical societies, specialist colleges and clinicians to individually and collectively condemn attacks on healthcare facilities in conflict zones, and to promote respect and awareness of the Geneva Conventions and enforcement of UNSC Resolution 2286.

These are serious promises which will be difficult to achieve, but we are resolved that such commitments will be met by practical action and the resources needed to ensure real and measurable results;

Together we can raise the profile of this issue and advocate for the correct and proper enforcement of the Geneva Conventions and UNSC Resolution 2286.

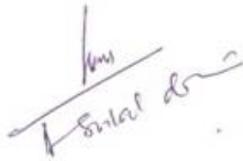
Signed:

**Council of the Sri Lankan Society of Critical Care and
Emergency Medicine (SSCCEM)**



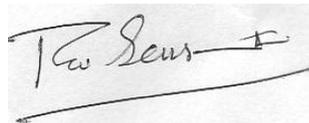
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MSc(Birmingham)



General Secretary Emergency Medicine

Dr Nilanka Wickramaratne MBBS, DCCM, MD

Signed:

Co-Directors Of DevelopingEM Ltd

A handwritten signature in purple ink, consisting of a stylized 'L' and 'F' enclosed in an oval.

Dr Lee Fineberg MD, FACEM, FACEP

A handwritten signature in black ink, appearing to read 'M Newcombe' with a large flourish at the end.

Dr Mark Newcombe BMed, FACEM

A handwritten signature in black ink, appearing to read 'S Fernando' with a large flourish at the end.

Dr Sanj Fernando MBBS, BMedSci, FACEM, FANZCP

Signed:

A handwritten signature in black ink, appearing to be 'N. Thurtle', written in a cursive style.

Natalie Thurtle MBBS FACEM