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Conflict and violence are destroying the lives of millions of people across the Eastern Mediterranean Region. Thousands of people have been killed or injured. Millions have been forced to flee their homes. Faced with critical shortages, health systems are struggling to function. Hospitals are under-staffed and under-resourced, and health workers are overwhelmed.

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Escalating conflict and the massive scale of humanitarian needs across the Eastern Mediterranean Region continue to place health care workers, patients and health facilities at great risk. Health care workers are killed, kidnapped and assaulted. Health facilities are damaged or destroyed. In some cases, health facilities are taken over for non-medical purposes. Ambulances are looted, stolen, shot at and denied travel through checkpoints.

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Threats to health workers, patients and health facilities also take place through intentional withholding of medicines and treatment to besieged populations, and through deliberate interruptions to water and power supplies, reducing the functionality of health facilities.

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Syria is now the deadliest place in the world for health workers. Since the conflict began, more than 700 health workers have been killed and more than 300 health facilities have been attacked. More than half of all public hospitals and primary health care centres in the country are closed or partially functioning.

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In Yemen, eight Yemeni Red Crescent Society volunteers and two ICRC staff have been killed since March 2015. Nearly 100 medical facilities have been attacked, and almost 25% of all hospitals are now closed.

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In Somalia -- where one in 10 children dies before their first birthday and one out of every 12 women dies due to pregnancy-related causes -- attacks on health care workers and facilities have forced the suspension of medical activities, delaying critical health and nutrition programmes and the delivery of supplies and outreach activities, such as the expansion of mobile clinics and vaccination activities

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Afghanistan has one of the highest numbers of casualties among humanitarian workers in the world. There are critical shortages in qualified female health workers providing medical care for women, and more than 30% of the population in Afghanistan still has no or difficult access to essential health care, largely as a result of the unsafe environment for health care workers.

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Attacks on health care workers also impede efforts in controlling communicable disease outbreaks. Recurring fatal security incidents involving polio vaccination teams in Pakistan have resulted in immunization campaigns being cancelled or delayed. In 2015 alone, five vaccination rounds were cancelled due to serious security threats, leaving millions of children at risk. 32 health care workers involved in polio campaigns have been killed to date.

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Violence towards health care workers puts everyone at risk and causes people to fear seeking health care. When health workers and health facilities are targeted, populations that are already vulnerable are further deprived of what little access they have to medical care. The right to health means that hospitals, health workers and patients must be respected.

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International humanitarian law and the Geneva Conventions strictly prohibit attacks on health care premises, vehicles, personnel and patients. Documentation is essential to identify violations, create mechanisms for protection and develop the political will to enforce them. Together with partners, WHO is establishing a system for collecting data on attacks on health workers, health facilities, transport, and patients in complex emergencies.

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