**Health Emergencies in Large Populations (H.E.L.P.) Course**

**Module: Health Care in Danger /Violence Against Health Care**

**Time allocated: 45 minutes**

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| **Educational Objectives: What should participants be able to do at the end of the course** | **Enabling Objectives: The interim steps that build on each other and lead to the final educational objectives**   | **Core issues / reference points** |
| 1. *Participants understand basic tenets of protection of healthcare*
 | * 1. Participants are able to list 4 categories of health delivery afforded protection under IHL and under which circumstances they lose protection
	2. Participants are able to generically delineate the different legal frameworks and their meaning towards protection of healthcare
	3. Participants are able to identify relevant information and tools to support their activities / interventions within the Health Care in Danger (HCiD) Initiative

 | * Health Facilities
* Health Transportation
* Health Personnel
* Patients and Accompanying Relatives

Protection is granted when used solely for delivering/receiving health care. Protection is lost when taking part in combat or used for purposes other than health care delivery* National laws
* IHL and IHRL
* Medical Ethics
* Participants are able to locate HCiD resources on the HCiD Resource Center
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| 1. *Participants understand the scope of the problem and consequences of violence against health care*
 | * 1. Participants are able to give examples of different types of violence against health
	2. Participants are able to discuss the consequences of violence against health care and in particular are familiar with the knock-on effect of violence against health personnel
	3. Participants are able to discuss rights and responsibilities of health care providers
	4. Participants are able to explain the value of systematically collecting information and documenting violence against health care
 | * General patterns of violence: obstruction, attacks, threats, adverse discrimination
* Lack of access to health care, lack of trust in medical services, knock-on effect of little to no medical personnel left to provide health care
* Caring for the wounded and sick without discrimination and based solely on medical needs
* Respect confidentiality and the rights of the patients and their families
* Know their rights so can ask for help
* Essential for understanding the magnitude of the problem and developing adequate responses to each context
* Attentive to issues of confidentiality and to all dimensions of the incidents that must be taken into consideration
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