

ETHIOPIA

Violence Against Health Care in Conflict 2023



Letter from the Chair



The year 2023 was a grim one for violence inflicted on health care. In 2022, the Safeguarding Health in Conflict Coalition identified the highest number of incidents since we began reporting. Yet in 2023 the number was 25% greater, exceeding 2,500.

The intensity of conflicts characterized by pervasive attacks on health care in recent years declined somewhat in 2023, including in Syria, Yemen, and the Tigray region of Ethiopia. As a result, it might also have been expected that the global trend of violence against health care would turn downward. Instead, from the first days of two new and catastrophic wars, one in Sudan and the other between Israel and Hamas, health care came under ferocious assault. In both conflicts warring parties killed health workers, attacked facilities, and destroyed health care systems. Meanwhile, attacks on health care in Myanmar and Ukraine continued at a relentless pace, in each case exceeding 1,000 since the start of the conflicts in 2021 and 2022, respectively. In many chronic conflicts, fighting forces continued to kidnap and kill health workers and loot health facilities.

At the same time, new and disturbing trends emerged. In Burkina Faso, Ethiopia, Gaza, Lebanon, Myanmar, Sudan, Syria, Ukraine, and Yemen combatants employed drones to attack health clinics, hospitals, and ambulances. In many conflicts, combatants violently entered hospitals or occupied them as sites from which to conduct military operations, leading to injuries to and the deaths of patients and staff. In many conflicts, the conduct of combatants revealed open contempt for their duty to protect civilians and health care under international humanitarian law (IHL). Israel, while purporting to abide by IHL, promoted a view of its obligations that, if accepted, would undermine the fundamental protections that IHL puts in place for civilians and health care in war.

The one consistent feature of the attacks was continued impunity for these crimes. For more than a decade, despite their repeated commitments, governments have failed to follow through on these commitments and reform their military practices, cease arms transfers to perpetrators, and bring those responsible for crimes to justice.

We need a new approach, starting with stronger leadership from UN agencies and governments willing to join with civil society and the health care community to take far more assertive action to end the scourge of violence against health care. Among other steps, they can press prosecutors domestically and internationally to bring cases of war crimes and crimes against humanity committed against health care, to develop political support for special tribunals to circumvent UN Security Council members' vetoes of referrals to the International Criminal Court, and restrict the sale of arms to forces that commit crimes.

There are some sources of hope. After years of lassitude, the World Health Organization has spoken forcefully against vicious assaults on health facilities and health workers. Civil society groups are exerting pressure to stop arms transfers to perpetrators of violence, while some militaries have launched initiatives to reduce civilian casualties in war. Leaders must build on these initiatives. Ending the suffering of millions of people depends on their doing so.



A handwritten signature in black ink, appearing to read "Len Rubenstein". The signature is fluid and cursive.

Len Rubenstein
Chair, Safeguarding Health in Conflict Coalition

[↓](#) [Executive Summary](#) | [Full Report](#) | [Recommendations](#) | [Methodology](#) | [Data](#)



REPORTED INCIDENTS AND MOST COMMONLY REPORTED CONCERNS

 REPORTED INCIDENTS	 HEALTH WORKERS KILLED
2023	
14	4
2022	
13	4

↓ Source: 2022-2023 ETH SHCC Health Care Data

OVERVIEW

The Safeguarding Health in Conflict Coalition (SHCC) identified 14 incidents of violence against or obstruction of health care in Ethiopia in 2023, 13 in 2022, and 64 in 2021, when the last SHCC Ethiopia country chapter was published.¹ In 2023, at least four health workers were killed. The actual number of incidents and the severity of the problem are likely much greater, because of probable under-reporting. This factsheet is based on the dataset [2022-2023 ETH SHCC Health Care Data](#), which is available for download on the [Humanitarian Data Exchange \(HDX\)](#).

THE CONTEXT

Despite an end to the conflict in Tigray following a [cessation of hostilities agreement](#) between the Tigray People's Liberation Front (TPLF) and the Ethiopian central government in November 2022, 2023 saw an [escalation of conflict](#) in neighboring Amhara and Oromia regions between the Ethiopian government and regional security forces.

In the [Amhara region](#), violent protests and militia activity escalated following attempts by the government to integrate regional security forces into the national security services. In August 2023, the Ethiopian federal cabinet declared a [six-month state of emergency](#) and the Amhara region was placed under military command.

Tensions and fighting in the [Oromia region](#) also increased, and in November a [third attempt at holding peace talks](#) between the Ethiopian government and the Oromo Liberation Army (OLA) failed.

[All parties](#) to the conflict have been accused of human rights abuses, including violence affecting health care. Ongoing conflict and insecurity, internal displacement, [telecommunications blackouts](#), and natural hazards, including [floods](#) and [drought](#), all [increased humanitarian needs](#) in the country in 2023.



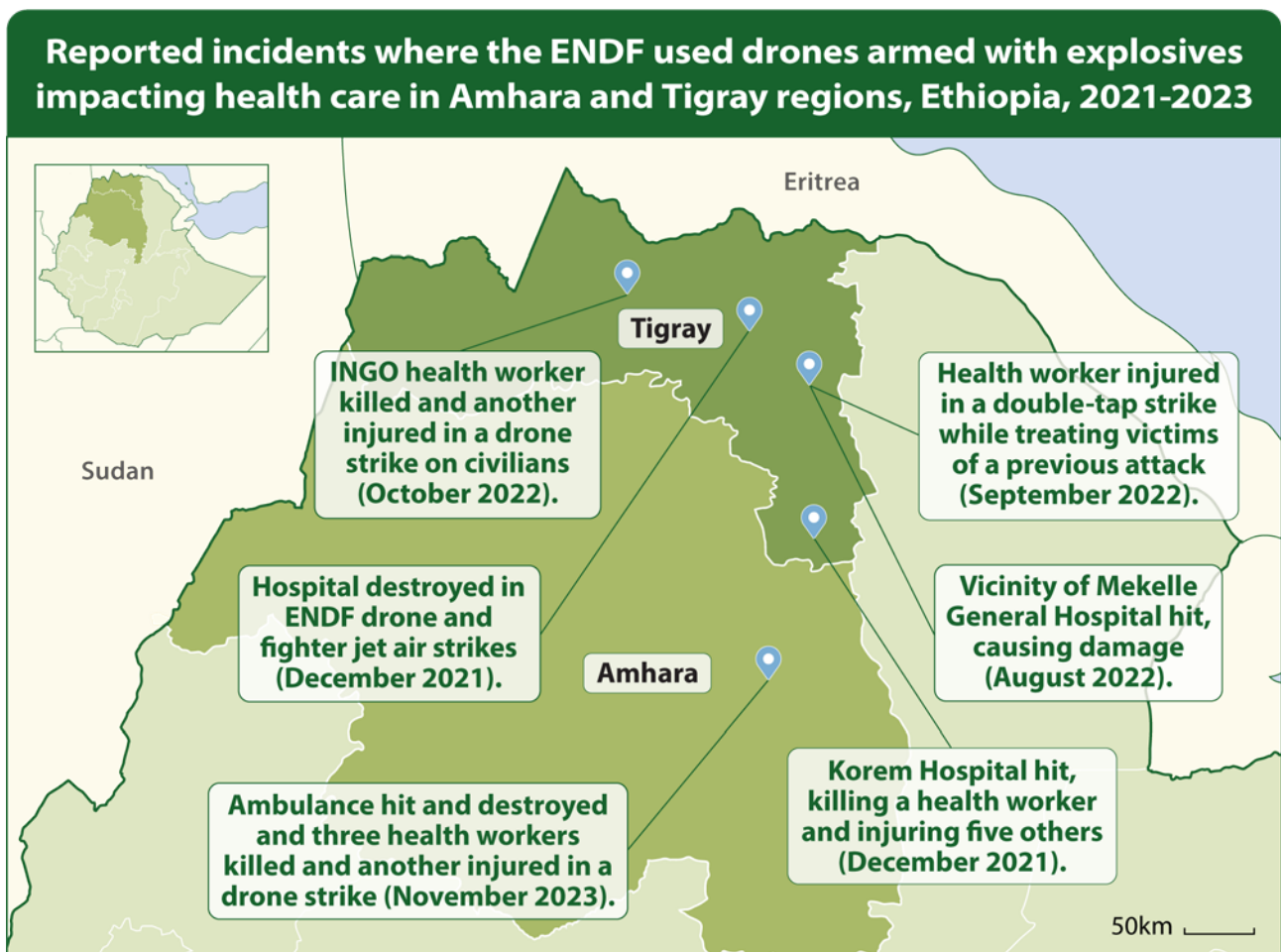
VIOLENCE AGAINST OR OBSTRUCTION OF HEALTH CARE IN 2023

Incidents of violence against or obstruction of health care in 2023 were spread over three regions. Cases tripled in Oromia and doubled in Amhara during armed conflict between Ethiopian government forces and various ethnic militias. This was a change from previous years, when incidents were largely recorded in Tigray during the armed conflict that lasted from November 2020 to November 2022 between the Ethiopian National Defense Force (ENDF) and TPLF. Fewer incidents were documented in Afar in 2022 and 2023.

In 2023, as in previous years, most incidents affected health care providers working in public health structures. Red Cross societies were directly affected on two occasions. A similar number of health workers were killed in 2023 as in 2022. Two health workers were killed in a drone strike in Amhara and two were shot and killed in Oromia.² Incidents where health facilities were damaged decreased from 2022 to 2023.

A quarter of the violence against or obstruction of health care in 2023 was attributed to the ENDF. Health workers in Amhara and Oromia faced pressure from government forces, who accused them of treating and/or affiliating with Fano (an ethno-nationalist Amhara militia) or the OLA. TPLF forces in Afar region were named as perpetrators of violence on two occasions and the OLA in Oromia on one. Fano militia in Amhara region hijacked a convoy loaded with medical supplies on route to Tigray's Mekelle city.³ In other attacks, the attackers remained unidentified.

Explosive weapons use





One incident in Amhara impacting health care in 2023 involved explosive weapons use, compared to three incidents in Tigray in 2022.⁴ On November 30, 2023 the ENDF carried out two drone strikes in Delanta woreda (district). The first strike around 5:55 p.m. hit an ambulance transporting medicine from Dessie to Delanta, killing an ambulance driver and pharmacist, wounding the head administrator of a hospital, and destroying the ambulance.⁵ The second drone strike hit Goshiamba Kebele, not far from the scene of the first incident. Confirmation of the attack was delayed for nearly a week due to communications restrictions imposed by local authorities. During the Tigray war, the ENDF, the only armed drone operator in the country, regularly deployed armed drones against opposition forces, killing hundreds of civilians and destroying vital infrastructure, including hospitals. The psychological impacts of attacks affected staff and patients in profound ways, resulting in a reduced-skilled workforce and barriers to people seeking health care, with wide-ranging consequences for individuals and public health.

Amhara Region

At least six incidents of violence against or obstruction of health care were recorded in Amhara in 2023, compared to three in 2022. Health facilities were raided and burned down, ambulances damaged, health workers threatened and injured, and medical supplies looted. Three of the six incidents were attributed to ENDF forces who, as well as perpetrating the November drone strike, shot and injured a health worker and arrested other health workers at Tibebe Ghion Specialized Hospital in October after accusing them of having ties to Fano militia.⁶ Later that month, ENDF soldiers raided the hospital and opened fire on staff before dragging six patients from their beds and executing them.⁷

Fano militia stole the previously mentioned medical supplies, and Amhara regional special police forces and local militia burned down a health center, a mosque, and homes in Jilye Tumuga woreda.⁸ Unidentified perpetrators shot at an Ethiopian Red Cross ambulance that was transporting a pregnant woman to a health facility, wounding an ambulance driver and a midwife.⁹

Oromia Region

Six incidents of violence against or obstruction of health care were recorded in Oromia in 2023, compared to two in 2022. Health workers were arrested and shot, and at least one ambulance was set on fire. ENDF forces arrested a doctor on suspicion of collaborating with the OLA and shot and killed a doctor they accused of providing medical treatment to Fano militia.¹⁰ OLA forces burned down a health center during a wider attack on the area.¹¹ Other attackers shot at an ambulance, killing a health worker; looted beds, equipment, surgical sets, and medicines from a health facility; and set an Ethiopian Red Cross ambulance stationed at Haru District Health Center on fire.¹²

Afar Region

Two incidents of violence against or obstruction of health care were attributed to TPLF forces in Afar. Both incidents took place at health facilities on January 25, 2023, during which the TPLF fired at the INGO ALERT German Hospital and attacked the Bureau of Health, damaging four mobile health team vehicles that were used to treat displaced people.¹³

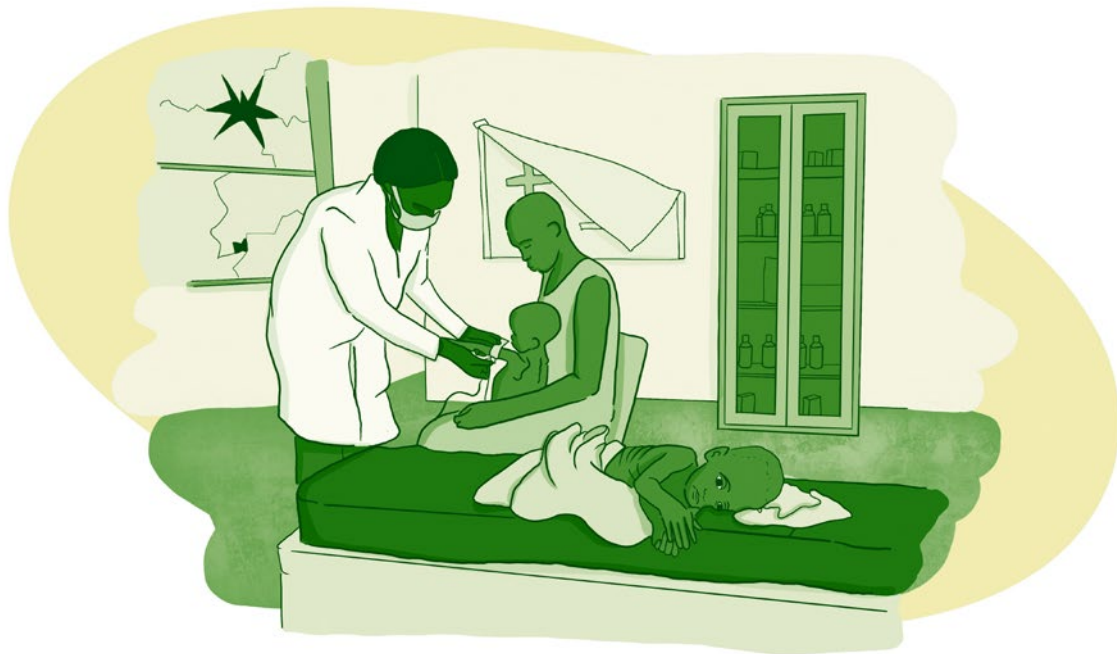
THE IMPACT OF ATTACKS ON HEALTH CARE

According to the WHO, conflict, drought, and displacement drove widespread malnutrition and disease outbreaks in Tigray and Amhara. In Amhara, ongoing conflict and road blockades resulted in restrictions on movement, impeding patients' access to health facilities and disrupting supply chains, which contributed



to a shortage of medical supplies in the region. These disruptions led to some health facilities providing partial services due to lack of medical supplies, while one hospital reported being unable to obtain blood supplies due to road closures, making it difficult for health care workers to treat patients. Road blockades made it harder to move medical supplies and medication from major cities to other areas, resulting in broader impacts on the population and the health care system in the affected areas. Road blockades also prevented ambulances from reaching patients or health centers, and health workers faced intimidation and threats during these obstructions.¹⁴

Violence and insecurity impacted health facilities, with Finote Selam Hospital in Amhara region ceasing its operations in September 2023 as a result of high levels of violence and insecurity in the area. Health workers at the hospital reported facing pressure from government forces, who accused them of treating Fano militants.¹⁵



In the Oromia region, patients were unable to receive urgent care due to the minimal functioning of health facilities and lack of medical supplies following widespread looting of or damage to health infrastructure. Violence against health care affected the country's ability to cope with public health emergencies, particularly in regions most affected by conflict. Ethiopia was experiencing a prolonged cholera outbreak that began in August 2022. Both Amhara and Oromia reported some of the highest numbers of cases; however, due to communications challenges caused primarily by internet blackouts, it was difficult to collect proper disease data, and figures were likely to be an underestimate. Additionally, conflict and instability made it difficult for cholera response activities to be implemented, contributing to the further spread of the disease. The regions were also dealing with outbreaks of malaria, measles, and dengue fever, which placed additional strain on an already struggling health care system.

As a result of the strain placed on the health care system due to trauma-related injuries and increasing cases of communicable diseases, the country's public health system was overstretched and struggling to cope. As a result, some patients were being sent to private pharmacies, which had reportedly been overcharging for medication, leaving the local communities unable to access medication.¹⁶



Although the conflict in Tigray had ended, the scale of destruction continued to have a massive impact on the health system. Health facilities were still reporting shortages of medication, or that obtaining supplies had taken some time.¹⁷ Additionally, women and girls who had suffered widespread conflict-related sexual violence were still coping with unaddressed health needs, since many damaged health facilities remained unrepaired or non-operational, primarily due to the widespread looting and destruction of health facilities.

In Amhara, ongoing conflict and road blockades resulted in restrictions on movement, impeding patients' access to health facilities and disrupting supply chains, which contributed to a shortage of medical supplies in the region.

- 1 The SHCC report contains a country chapter when at least 15 incidents of violence against health care were reported in one calendar year or at least 30 incidents over multiple years. The reported incidents from Ethiopia were included in the total figures for past years, but because the SHCC report did not list these incidents individually in 2022, the recorded incidents are listed here.
- 2 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 ETH SHCC Health Care Data. Incident numbers 39622; 42805; 39618.
- 3 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 ETH SHCC Health Care Data. Incident number 38307.
- 4 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 ETH SHCC Health Care Data. Incident numbers 42805; 35100; 34853; 34565.
- 5 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 ETH SHCC Health Care Data. Incident number 42805.
- 6 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 ETH SHCC Health Care Data. Incident number 44615.
- 7 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 ETH SHCC Health Care Data. Incident number 42013.
- 8 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 ETH SHCC Health Care Data. Incident number 39136.
- 9 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 ETH SHCC Health Care Data. Incident number 38478.
- 10 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 ETH SHCC Health Care Data. Incident number 38757.
- 11 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 ETH SHCC Health Care Data. Incident number 42168.
- 12 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 ETH SHCC Health Care Data. Incident numbers 39618; 44618; 44617.
- 13 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 ETH SHCC Health Care Data. Incident numbers 36184; 36185.
- 14 Key Informant Interview (28th March 2024).
- 15 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 ETH SHCC Health Care Data. Incident number 44615.
- 16 Key Informant Interview (28 March 2024).
- 17 Key Informant Interview (28 March 2024).

SAFEGUARDING HEALTH IN CONFLICT

The Safeguarding Health in Conflict Coalition is a group of more than 40 organizations working to protect health workers and services threatened by war or civil unrest. We have raised awareness of global attacks on health and pressed United Nations agencies for greater global action to protect the security of health care. We monitor attacks, strengthen universal norms of respect for the right to health, and demand accountability for perpetrators.

www.safeguardinghealth.org

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