

ETHIOPIA

Violence Against Health Care in Conflict 2024



**SAFEGUARDING
HEALTH
IN CONFLICT**



**Insecurity
Insight**
Data on People in Danger

Letter from the Chair



Assaults on health care in conflicts around the world reached new levels of horror in 2024, exceeding 3,600 incidents, 15% more than in 2023. They consisted of air, missile, and drone strikes; shelling; tank fire; shootings; arson; the looting and takeover of health facilities; and the arrest and detention of health workers. As the descriptions in this report show, each incident brings terror, trauma, and - in too many cases - injury, untreated illness, destruction and death.

By far the largest number of attacks on health care – more than 1,300 – took place in Gaza and the West Bank, far more than we have ever reported in one conflict in one year, including more than double the number of health workers killed. Gaza properly drew global attention for the ferocity and relentlessness of assaults on health care. But we must also reckon with the more than 2,300 attacks in other conflicts, including the hundreds in each of Ukraine, Lebanon, Myanmar and Sudan. The cumulative number of attacks over the course of wars that began in the past three years include more than 1,500 in Myanmar since the military coup in 2021; close to 2,000 in Ukraine since the Russian invasion of Ukraine in 2022, and more than 500 since the outbreak of war in Sudan in 2023.

This onslaught of violence has been accompanied by attempts by perpetrators to limit legal protections for health care and civilians in war, driven, as the International Committee of the Red Cross (ICRC) puts it, by a desire to have more “leeway to kill and detain.” Israel has sought to dilute legal requirements of precaution and proportionality during conflict. The new U.S. secretary of defense has called for “a law of war for winners.” Simultaneously, campaigns to delegitimize the International Criminal Court (ICC) are underway. The newly inaugurated U.S. president Donald Trump imposed sanctions on ICC staff and even their families for having charged Israelis with war crimes. In 2023, Russia’s Duma passed legislation criminalizing cooperation with the ICC or any foreign court or ad hoc tribunal that seeks to hold Russians to account. Hungary announced its plan to withdraw from the ICC, falsely alleging political bias.

These terrible developments threaten to make a mockery of the 10th anniversary of Security Council Resolution 2286 in 2026 and the 50th anniversary of the Additional Protocols of the Geneva Conventions (the law protecting health workers and civilians during armed conflict) in 2027. If this resolution and law are to be more than words, the current approach to protection, amounting to mere admonitions, must be replaced by centering accountability, accompanied by the political will to drive it.

That is the approach long taken by the Coalition, and recently taken by a report *In the Line of Fire*, issued in November 2024 by the World Health Organization and the World Innovation Summit for Health. It called for a new alliance of member states, UN agencies, and NGOs. It recognized that the renewal of long-ignored commitments could not possibly suffice. Instead, UN agencies, international organizations, NGOs, and civil society organizations must rally together to take tough action, including outreach to the International Criminal Court, to impose consequences on the perpetrators of violence. Actions must include states cutting off arms transfers to perpetrators of attacks and employing the power of universal jurisdiction to prosecute. If the laws of humanity are to be upheld and the carnage is to end, governments and all concerned citizens everywhere must find the political courage and will to act.




A handwritten signature in black ink that reads "Len Rubenstein". The signature is fluid and cursive.

Len Rubenstein
Chair, Safeguarding Health in Conflict Coalition

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REPORTED INCIDENTS AND MOST COMMONLY REPORTED CONCERNS


 REPORTED INCIDENTS	 INCIDENTS WHERE HEALTH FACILITIES WERE DAMAGED/ DESTROYED	 HEALTH WORKERS KILLED
2024		
59	26	24
2023		
15	4	4
2022		
13	5	3


↓ Source: 2022-2024 ETH SHCC Health Care Data

OVERVIEW

The Safeguarding Health in Conflict Coalition (SHCC) identified 59 incidents of violence against or obstruction of health care in Ethiopia in 2024, compared to 15 in 2023 and 13 in 2022. In these incidents, health facilities were damaged or destroyed on 26 occasions and 24 health workers were killed.

 Ethiopia's Amhara region faced escalating violence and a humanitarian crisis amid an extended state of emergency, leaving the health care system on the verge of collapse.

 Health worker killings in Amhara and the damaging or destruction of health care facilities in Oromia increased amid the escalating conflict.

 In Tigray region, blockades have led to critical shortages of oxygen, antibiotics and other life-saving resources.

Information on incidents of violence against health care in Ethiopia is compiled from open sources, information projects and private sources. See [Methodology](#) for further information.



THE CONTEXT

Ethiopia's conflicts have continued since November 2020, with Amhara region remaining one of the most volatile areas. Following the November 2022 Ethiopia–Tigray peace agreement (the Pretoria Agreement) between the Ethiopian government and the Tigrayan People's Liberation Front (TPLF), the Tigray war formally ended. Nonetheless, peace has not been re-established in the country, with conflicts continuing to escalate in Amhara and Oromia involving the Ethiopian National Defense Force (ENDF), Fano militia, the Oromo Liberation Front–Oromo Liberation Army (OLF-OLA), and OLF-Shene. The situation is further compounded by the continued presence of Amhara armed groups, including Fano militia, and Eritrean troops in parts of the country's north.

The consequences of these conflicts have been profound, particularly in Amhara and Tigray, where displacement and economic collapse have worsened the humanitarian crisis. Over a million Tigrayans live in IDP camps, where outbreaks of cholera, measles and malaria have been reported due to the lack of health care services, while much of northern Ethiopia faces severe food insecurity. According to the UN, nearly 30 million people – about a quarter of the population – are in need of emergency food assistance.

In early 2024, Ethiopia's parliament extended the state of emergency in Amhara, while administrative disruptions combined with sustained violence have undermined access to basic services, leaving the region's health care system on the verge of collapse.

VIOLENCE AGAINST OR OBSTRUCTION OF HEALTH CARE IN 2024

Incidents of reported violence against or obstruction of health care more than tripled between 2023 and 2024, reflecting continued and growing conflict in many parts of Ethiopia over this period. Amhara and Oromia were the most-affected regions, where cases more than doubled between 2023 and 2024, coinciding with high levels of conflict-related violence during this period.

Damage to health facilities escalated in Oromia, while health worker killings intensified in Amhara. Incidents were reported in Tigray for the first time since October 2022, before the Pretoria Agreement. In South Ethiopia Regional State, a hospital was looted and medical equipment stolen during a three-day attack on the area by unidentified attackers.¹

Violence affecting health care attributed to OLF fighters armed with guns increased sharply in 2024, making up over a third of reported incidents. The ENDF continued to be implicated in incidents, along with Fano militia and the Tigray Defense Forces (TDF), all of which resumed violent activities that impacted health care in 2024. In other attacks, the attackers remained unidentified. The ENDF's use of drones armed with explosives that impacted health care rose from one incident in 2023 to six in 2024.

Most cases affected health care providers working for national health structures. Red Cross societies were directly affected on five occasions and an INGO once.



Known locations of reported incidents affecting health care in Ethiopia, 2022-2024

Incidents more than doubled in Amhara and Oromia in 2024, amid rising conflict, while reports resurfaced in Tigray for the first time since the 2022 Pretoria Agreement.



Source: Safeguarding Health in Conflict Coalition

Oromia region

In 2024, at least 23 incidents were reported in Oromia region, up from seven in 2023 and two in 2022. These incidents, mainly in rural areas and towns, often targeted health workers in transit or health facilities serving vulnerable populations. Health workers were shot, particularly while transporting patients, and health centers, supplies and equipment were damaged. Several ambulances were ambushed or shot at, leaving drivers and passengers injured.

Most cases were attributed to the OLF-OLA, which vandalized four health stations and 13 health posts in Gelana woreda (district) in early 2024, causing health services to be suspended in nine areas.² OLF-OLA militants kidnapped a driver and other health workers from an ambulance in March, only releasing them in late August.³ OLF-Shene militants attacked health workers traveling as part of a measles vaccination campaign, killing two, including a deputy head of the woreda health office, and injuring a health worker.⁴ Fano militia members were named in the fatal shooting of two health workers and the deliberate setting fire to health care vehicles.⁵

Amhara region

At least 31 incidents were reported in Amhara region in 2024, compared to eight in 2023 and two in 2022. Incidents often occurred in East Gojjam, West Gojjam, North Wollo, and South Gondar zones and Bahir Dar city, often involving health workers being shot and killed by unidentified gunmen while transporting patients during road travel. Health workers were also arrested and detained by government forces on accusations of having links to Fano.

ENDF drone strikes in Amhara's North Wollo, East Gojjam, and West Gojjam zones killed five health workers, injured two others, and damaged four medical centers, often during broader attacks on civilians. Maternal health care services in Amhara were impacted by ENDF drone strikes. For example, a health center in North Gojjam was hit by an ENDF drone strike that damaged the maternity department, killed five pregnant women and two other patients, and injured three female health workers.⁶ Health facilities were deliberately set on fire by ENDF soldiers, destroying medical supplies and equipment and depriving communities of



essential care.⁷ Health workers were forced to participate in ENDF demonstrations, including being pulled from hospitals in Dessie town to attend a staged protest.⁸

Fano militia seized two Red Cross vehicles, while Kebele communal militia members were named in an incident involving a stray bullet killing a doctor.⁹

Tigray region

In January and February 2024, three attacks reportedly affected Ethiopian Red Cross Society vehicles and personnel in Tigray region. On February 17, suspected TDF fighters reportedly fired at a Red Cross vehicle and a public bus in Ofla woreda, injuring a passenger and damaging both vehicles.¹⁰ In Korem town on the same day, an unidentified armed group reportedly attacked another Red Cross vehicle with gunfire and a grenade while a staff member was inside, shattering its mirrors and windshield.¹¹ Earlier, on January 12, Tigray state police mistakenly fired at an ambulance transporting a patient, killing the driver.¹²

↓ This factsheet is based on 2022-2024 ETH SHCC Health Care Data. Download the data [here](#) or on the [Humanitarian Data Exchange \(HDX\)](#).



THE IMPACT OF ATTACKS ON HEALTH CARE

The ongoing conflict in Ethiopia's Amhara region has inflicted severe and widespread damage on the health care system. Both government forces and non-state armed groups have repeatedly targeted health workers, facilities, and patients. Additionally, according to [Human Rights Watch](#), health workers and patients reported an atmosphere of fear and distrust often caused by the frequent raids conducted to search for patients with gunshot and fragment wounds. These actions have created this atmosphere of fear and distrust, further compromising the ability of medical professionals to deliver effective care.



In Tigray region, medical supply chains have been severely impacted, with roadblocks and movement restrictions forcing aid agencies to rely on costly air transport to deliver even small quantities of health care goods. These disruptions have led to critical shortages of oxygen, antibiotics, and other life-saving resources, exacerbating disease outbreaks such as cholera, measles, and malaria.

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Health workers have faced harassment, threats and violence, further undermining the health care system. Ambulances have been seized or fired on, making it dangerous for medical personnel to transport patients or supplies.

The lack of basic resources has reached crisis levels. Hospitals report blood transfusion shortages that leave patients waiting weeks for critical care. According to the ICRC, essential services such as surgeries are delayed or canceled due to the unavailability of surgical gloves, oxygen and other necessities.

- 1 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 ETH SHCC Health Care Data. Incident number 79441.
- 2 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 ETH SHCC Health Care Data. Incident numbers 46177; 46168; 46169; 46170; 46171; 46172; 46173; 46174; 46175; 46176; 46178; 46179; 46180; 46181; 46182; 46183; 46184.
- 3 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 ETH SHCC Health Care Data. Incident number 84434.
- 4 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 ETH SHCC Health Care Data. Incident number 84784.
- 5 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 ETH SHCC Health Care Data. Incident numbers 70492; 88698.
- 6 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 ETH SHCC Health Care Data. Incident number 86133.
- 7 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 ETH SHCC Health Care Data. Incident numbers 87618; 87613.
- 8 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 ETH SHCC Health Care Data. Incident number 88045.
- 9 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 ETH SHCC Health Care Data. Incident numbers 46771; 46525.
- 10 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 ETH SHCC Health Care Data. Incident number 46529.
- 11 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 ETH SHCC Health Care Data. Incident number 46527.
- 12 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 ETH SHCC Health Care Data. Incident numbers 46529; 46527; 43868.

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.

<https://safeguarding-health.com>

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