# HRC 60 Side Event

# Health in a Fractured World: Safeguarding the right to health in crises

***Concept Note***

**Date & venue** **Thursday, 2nd of October 2025 – 15:00-16:00, Concordia I - *Palais des Nations***

**Registration** **Please register for this event using this INDICO link**

**Background**

Access to essential medicines, vaccines and other health products is a fundamental component of the right to the highest attainable standard of physical and mental health. Yet, an estimated 2 billion people continue to lack access to essential medicines.

To address this disparity, the Human Rights Council requested OHCHR, among others, to present a comprehensive report (A/HRC/59/29) that analyses the systemic barriers, emerging issues, and human rights-based strategies needed to ensure equitable and universal access (HRC res. 50/13).

A critical insight from this work is that access to medicines, vaccines, other health products and medical services is often most fragile in armed conflicts, when this is most urgently needed. Health care personnel, who are essential to ensuring this access, are themselves at heightened risk of attack, undermining the right to health. In recent years, deliberate and systematic attacks on physical and digital healthcare infrastructure, personnel, and services have dramatically increased. The WHO Surveillance System for Attacks on Healthcare (SSA) reported 1,623 attacks in 2024 alone. Parallel monitoring by the Safeguarding Health in Conflict Coalition (SHCC) further underscores the alarming trajectory of these attacks which surged by more than 60 percent in just two years between 2022 and 2024, including as a result of the increasing weaponization of technology.

In its resolution 59/7, the Human Rights Council expressed deep concern at the particular challenge of access to medicines, vaccines and other health products in situations of conflict, including situations of foreign occupation, and condemned the increase in attacks targeting medical facilities and personnel.

Such attacks not only violate international humanitarian law, but also the complementary and mutually reinforcing obligations of international human rights law. They exacerbate existing access challenges and create new, compounding barriers by hindering service delivery,

disrupting supply chains, driving up prices, forcing the suspension of vaccination campaigns, and pushing persons and populations that are already at risk of right to health violations populations further out of reach of essential healthcare. Attacks on health also interfere with mental health services that are often scarce in crisis contexts and fail to meet increasing demands as such settings exacerbate pre-existing mental health conditions and generate new ones. According to ICRC, data shows that 22.1% of the population in conflict zones experience mental health conditions—about 1 in 5—double the rate compared to non-conflict settings.

The long-term impacts of such attacks on the right to physical as well as mental health are profound. They undermine the stability and functioning of entire health systems by damaging critical infrastructure, incl. digital health systems and records, reducing health workforce capacity, and eroding public trust in institutions. Safeguarding the right to health in crises requires responses that are grounded in international human rights law.

Crisis often disrupt not only access to healthcare services but also the underlying determinants of the right to health—such as safe water and sanitation, adequate food, housing, education, healthy occupational conditions, and a clean, healthy and sustainable environment. Attacks or outages in digital technology and systems can also impede access to health. When these elements are compromised, the right to health itself is undermined. The effects of such disruptions are rarely contained: they cascade across communities, deepen pre-existing inequalities, and impede recovery and development. The right to health in crisis settings is thus deeply interconnected with the realization of other economic, social and cultural rights as well as civil and political rights.

The UN system has increasingly recognized the need for coordinated, data-driven, and rights-based approaches to address such challenges. This side event builds on the momentum of recent UN initiatives, including the 2025 OHCHR report on access to medicines, the renewal of the WHO-OHCHR Framework of Cooperation, and UN 2.0's data-forward agenda, as well as on findings from diverse stakeholders like the World Innovation Summit for Health and the Safeguarding Health in Conflict Coalition. It also takes place ahead of the upcoming 10-year anniversary of the Security Council Resolution 2286, reaffirming global commitments to protect health care in conflict. The event further complements the broader objectives of the Pact for the Future, the New Agenda for Peace, and the UN Agenda for Protection, which collectively call for anticipatory, protection-centred strategies to address the drivers and consequences of conflict and instability.

**Objectives**

This side event will serve as a key opportunity to discuss the impact of attacks on healthcare on the right to physical and mental health, and to foster dialogue on approaches to safeguard the right to health in crisis, including concrete solutions for advancing access to medicines, vaccines and other health products. Specifically, the event will:

- Study the long-term impacts on the right to physical health, as well as the right to mental health.
- Discuss the interlinkages between healthcare infrastructure and the realization of other economic, social and cultural rights as well as civil and political rights
- Highlight promising rights-based strategies to safeguarding the right to health in crisis including remedy and accountability pathways
- Promote collaboration among Member States, UN entities, civil society, and other stakeholders to enable coherent, coordinated, and rights-based responses to attacks on healthcare and their cascading impacts on human rights

**Format**

A 60-minute moderated panel discussion, including an interactive Q&A session

**Moderator**

**Mr. Khaled Hassine**, Economic, Social & Cultural Rights, OHCHR

**Speakers**

- **H.E. Ms. Usana Berananda**, Permanent Representative of Thailand
- **H.E. Mr. Yevhenii Tsymbaliuk**, Permanent Representative of Ukraine
- **Mr. Saman Zia-Zarifi**, Executive Director Physicians for Human Rights
- **Ms. Carrie Bowker**, Director of eyeWitness to Atrocities - International Bar Association

The Side Event is open to the participation of Member States and other relevant stakeholders, including United Nations entities, representatives of subregional and regional organisations, international human rights mechanisms, national human rights institutions, civil society organisations, health experts, and relevant stakeholders from across the world. Participants are encouraged to intervene in an interactive way, through questions, comments and sharing of experiences, promising practices and challenges as well as suggested recommendations on the way forward, with a view to stimulating a constructive debate. The Side Event is being held in English only.

**Background documents**

- Human Rights Council resolution 59/7 of 7 July 2025 entitled "Access to medicines, vaccines and other health products in the context of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health"
- Comprehensive report of the Office of the United Nations High Commissioner for Human Rights on access to medicines, vaccines and other health products in the context of the right to the highest attainable standard of physical and mental health (A/HRC/59/29)
- The Future of Health in a Fractured World (forthcoming 2025). Health: A Political Choice. John Kirton, Ilona Kickbusch (Editors)
- Human Rights Council resolution 50/13 of 7 July 2022 entitled "Access to medicines, vaccines and other health products in the context of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health"
- Security Council resolution 2286 (2016): Security Council resolution on the protection of the wounded and sick, medical personnel and humanitarian personnel in armed conflict (S/RES/2286)
- 2015 Report of the High Commissioner on the Protection of Economic, Social, and Cultural Rights in Conflict
- 2011 OHCHR Publication on International legal Protection and Human Rights in Armed Conflict (HR/PUB/11/01)
- Human Rights Council resolution 9/9 of 18 September 2008 entitled "Protection of the human rights of civilians in armed conflict"
- Safeguarding Health in Conflict Coalition 2024 Report – Epidemic of Violence: Violence Against Health Care in Conflict

- World Health Organization Publication on the WHO Surveillance System for Attacks on Healthcare (SSA) Methodology and WHO SSA Public Data Platform.
- World Innovation Summit for Health (WISH) 2024 Report: In the Line of Fire: Protecting Health in Armed Conflict (November 2024)
- Report of the High Commissioner for Human Rights on ensuring equitable, affordable, timely and universal access for all countries to vaccines in response to the coronavirus disease (COVID - 19) pandemic (A/HRC/52/56)
- Report of the High Commissioner for Human Rights on the human rights implications of the lack of affordable, timely, equitable and universal access and distribution of coronavirus disease (COVID-19) vaccines and the deepening inequalities between States (A/HRC/49/35)
- Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, Anand Grover, on access to medicines (A/HRC/23/42)
- United Nations Secretary-General's High-level Panel on Access to Medicines (web page) and the Panel's report on promoting innovation and access to health technologies (September 2016)

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