i. BACKGROUND ON HCiD STRATEGY

The HCiD Strategy 2020-2022 is based on a Theory of Change (ToC) embracing four objectives:

1: Weapon bearers are respectful of health care services and enable their safe delivery
2: States have adopted and implemented legislation for protection of health care from violence
3: Health care providers are better prepared to prevent, mitigate and cope with the impact of violence
4: General population in countries affected by conflict and other emergencies has increased its respect for health care

ii. REGIONAL MEETINGS

The current strategy emphasizes the practical implementation and operationalization of concrete measures at the local and national level. In alignment with the strategic orientations, the Health care in Danger Initiative has transitioned from holding annual meetings of global stakeholders to biannual regional ones. The regional focus (of which for the ICRC there are five) provides a forum that allows stakeholders to share experiences on approaches and develop and reinforce local, national and regional partnerships to prevent and address violence against health care. Partnership with the Community of Concern and the International Red Cross and Red Crescent Movement is a central pillar of advancing this common agenda and the format of co-organization is being employed to foster regional ownership and engagement.

The first Regional Health Care in Danger meeting took place in 2019 in the Asia-Pacific Region in Manila in a three day in person format as was another Near and Middle East Regional meeting held in Beirut in the same year. One unique element from the Manila meeting was the signing of the Manila Declaration by a number of organizations. The overall approach suited the time and participant feedback noted an appreciation of the opportunity to share experiences, dynamics and cultural issues with stakeholders from neighboring countries. Due to COVID-19 related restrictions the face-to-face meeting planned for the Africa Region was transformed into a virtual meeting in June 2020 as was the Eurasia Regional Meeting in February 2021.

iii. THE 2nd ASIA PACIFIC REGIONAL HCID MEETING

The Health Care in Danger Initiative is focused on reducing violence and mitigating the effects of violence in zones of conflict and other emergencies. The ICRC prioritizes the implementation of concrete measures to safeguard health care in conflictual contexts in the Asia-Pacific in line with its mandate. Many partners both within and outside the Movement are contributing to the protection of health care through a range of measures including by supporting the resilience of health care workers, leading awareness raising campaigns, advancing policy measures and carrying out humanitarian diplomacy. The ICRC is operationally present in some contexts, but the field of action is much wider, and the Asia-Pacific region has further potential for broader engagement, sharing and upscaling good practices and reinforcing regional linkages.

The protection of health care against violence is universally relevant, and the ICRC seeks through these meetings to advance a common agenda and reinforce regional and global partnerships including two-way collaboration and exchanges of experiences. Tools and approaches developed to reduce violence and mitigate in one context can be inspiration and facilitate learning and adaptation in another.
This is the second Asia Pacific Regional HCiD Meeting, the first one was generously hosted two years ago by the ICRC Philippines delegation and the Philippine Red Cross. The meeting established this event as a critical forum for exchange and the Manila Declaration was made as a statement of ambition for sustained action. The second meeting will seek to build on the important foundation established during the first meeting while being reflective of the times.

The COVID-19 pandemic has further demonstrated the durability and importance of the central tenet of Health Care in Danger - the inviolability of health care - and the cascading negative consequences of its non-respect. There is scope and, in light of the novel situation, a need to exchange on recent experiences working to protect health care from violence, including during the pandemic to review promising practices.

As a result of the COVID-19 pandemic, meetings are being held adapted as they are being held virtually and with a more abridged format. Given the range of time zones involved, it is proposed for this meeting to hold one substantive session per day over a four-day period with an opening on the first day and a closing on the last. Participants will be made up in large part of invited stakeholders, but the sessions will also encourage a wider engagement with stakeholders and the public who can join by registering to take advantage of the online format. The report and panelist presentations will be publicly available.

iv. MEETING OBJECTIVES

• Overview the activities carried out since the 1st Asia-Pacific Regional meeting in 2019 by signatories of the Manila Declaration on the protection of health care, including the ICRC and determine whether a renewal of the declaration is needed

• Facilitating the sharing of experiences, good practices and recommendations through presentations and interactions

• Raising the profile of and generating new interest in the protection of health care as a critical field of work and a shared concern

• Forge and deepen partnerships, make geographical linkages and strengthen commitments to promote practical action, research, influencing and resource mobilization for the protection of health care

v. PROPOSED FORMAT AND AGENDA

PROPOSED FORMAT

The agenda and format: one session per day running between 90 minutes in duration with an additional 30-minute opening session on the first day and a 30-minute closing session on the last. The format will consist of online panel presentations and discussions. The event or specific sessions could be co-organized by partners within or outside the Movement, along with collaboration between the Health Care in Danger Initiative in Geneva and the co-organizing regional delegation(s).

Day 1 | Sessions 0 and 1 | 21 June | 13:30-15:30 (Bangkok time GMT +7)

Day 2 | Session 2 | 22 June | 14:00-15:30

Day 3 | Session 3 | 23 June | 14:00-15:30
The opening session will be used to frame the meeting, review activities coming out of the Manila declaration and outline its objectives and the format. Each of the four substantive sessions will be presided over by a moderator and then feature three panel presentations (15 minutes each) followed by a question and answer period. The closing session will summarize recommendations, assess whether a further declaration is required and formally close. HCID Unit is open to new and innovative approaches to facilitate greater interaction and participation.

PROPOSED AGENDA

Session 0: OPENING REMARKS  Day 1 13:30-14:00
- One sets of opening remarks
- Follow up on the Manila Declaration and the activities carried out by signatories since 2019
- Update from the ICRC on HCID implementation
- Explanation of the objectives and approach to the meeting

Session 1: STAKEHOLDER EXPERIENCES IN REDUCING VIOLENCE, MITIGATING ITS IMPACTS AND COPING  Day 1 14:00-15:30
Objectives and session titles will need to be revised based upon themes and panelists

Session 1 objectives:
- Sharing experiences about current types of violence affecting healthcare
- Highlighting recent best practices from the region to reduce violence against healthcare and mitigate its effects
- Highlighting the role of mental health and psychosocial support in addressing the well-being of healthcare staff as a holistic concept

Session 2: POLICY AND LEGAL MEASURES TO PROTECT HEALTH CARE  Day 2 14:00-15:30
Objectives and session titles will need to be revised based upon themes and panelists

Session 2 objectives:
- Highlighting examples of concrete policy and legal measures that are protecting health care workers, facilities and transport, including challenges to implementation
- Underscoring the importance of developing local data collection mechanisms and contextual analysis to guide policies and strengthen legal frameworks

Session 3: PROMOTING RESPECT FROM WEAPON BEARERS OF HEALTH CARE SERVICES AND ENSURING THEIR SAFE DELIVERY  Day 3 14:00-15:30
Objectives and session titles will need to be revised based upon themes and panelists

Session 3 objectives:
- Elaborating steps and measures that arms bearers can take to reinforce the protection of health care, both through practice and training, policy and military instruction and promoting and advocating for such steps to be taken
- Providing practical examples of the integration of IHL obligations into military practice
Looking at how health systems are impacted by hostilities and the role that community leaders can play to influence the conduct of arms bearers to prevent violence and attacks against health care and decrease violence

**Session 4: CREATING A CLIMATE OF RESPECT AND FREE OF VIOLENCE FOR HEALTH CARE WORKERS**  
Day 4 14:00-15:30

*Objectives and session titles will need to be revised based upon themes and panelists*

**Session 4 objectives:**

- To highlight the role that religious and community leaders can play to reinforce to create a climate of acceptance and free of violence, harassment and stigma towards health services and patients
- To illustrate some of the challenges with respect to stigma and violence that health providers are facing, the role that misinformation and disinformation is playing and how they are overcoming these challenges as religious and community leaders and medical practitioners
- To illustrate examples of communication campaigns with communities aimed at fostering behavior change in order to reinforce respect for health care workers, facilities and ambulances and patients seeking care

**Session 5: FOLLOW UP RECOMMENDATIONS AND CLOSING REMARKS**  
Day 4 15:30-16:00

- Initial recommendations and follow up
- Reviewing the Manila Declaration and the next steps
- Closing remarks from two representatives to formally end the meeting