



Declaration on human rights and health in war, armed conflict, forced displacement, occupation, and violence: statement of solidarity with the peoples of Ukraine and around the globe

Drafting team: Wael Al-Delaimy, Katy Bell, Daniel Bromberg, William Eger, James Gaudino, Kathryn Gwiazdon, Camille Raynes-Greenow, Robin Taylor Wilson

Coordinating author: [K. Gwiazdon](#)

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The [International Network for Epidemiology in Policy \(INEP\)](#) is an international organization that promotes the use of epidemiology to develop evidence-based policies to improve equity, health, and wellbeing for the global population. With this Declaration, INEP joins other health organizations in condemning the Russian military aggression against Ukraine and the destructive violence it continues to bring upon civilians and combatants. And we join the many other organizations who condemn the use of military aggression and violence generally, as they result in destruction, devastation, and disaster to peoples around the world.

The associated destruction, devastation, and disaster impact negatively on health, public and individual, through the damage of necessary civilian infrastructure, displacement of populations, the tearing apart of families and orphaning of children, physical and mental trauma, disease, and death. We acknowledge that such impacts have long-term consequences, often across generations. This war in Ukraine has again revealed the realities of violence and its impact to humankind and what sustains life on Earth. As global citizens, these harms have entered our hearts and minds, as we bear witness through the real-time dissemination of information by traditional and social media, as well as live video streams.

We raise our concern that similar suffering is happening and has been happening in other countries, with less adamant, or even absent, the condemnation or compassion now expressed with the current Ukrainian conflict. We acknowledge that all human life is precious. In epidemiology, we investigate factors influencing human health through study design, data gathering and analyses, and interpretation of the findings; we count every person experiencing physical and psychological trauma, disease, or death equally. Similarly, health care providers have the ethical duty of care to treat everyone, combatants and non-combatants.

INEP stands for global justice, equity, ethics, transparency, and most importantly, the interest of health everywhere, over and above any other interest. On behalf of our 24-member organizations, we extend our support to all Ukrainians and all peoples worldwide suffering from imposed violence, including our fellow epidemiologists and other health scientists, noting that the disruption of their voice in this work adds to the long-term negative health impact of military aggression and violence.

DECLARATION

The International Network for Epidemiology in Policy

Guided by our mission as “an international non-profit organization that brings together national and international volunteer societies and associations of epidemiologists” that “promote integrity, equity, and evidence in policies impacting health to inform rational policy development by governments and non-governmental organizations” in order to “better protect the health of the whole community of life”;

Moved to action by the recent acts of military aggression by the Russian Federation in Ukraine, and in solidarity with other organizations of public health and epidemiology;

Understanding that the acts of aggression by the Russian Federation in Ukraine is one example of the violations of human rights and humanitarian law around the world, by state and non-state actors, including but not limited to the current human rights situations (as noted in UN Human Rights Council Resolutions) in Afghanistan, Yemen, Syria, Ethiopia, Myanmar, China, and the occupied Palestinian territories;

Noting that just as all harms are not inflicted equally upon human populations, there is discrimination regarding the attention and compassion shown towards people of different race, sex, class, age, and ethnicity, from different cultural and religious communities, non-Indigenous and Indigenous communities, and from high-income countries, middle-income, and low-income countries;

Noting the duty of all in the field of public health to advocate for the highest attainable standard of health for all, without discriminating factors; and, that the health of all peoples is fundamental to the attainment of peace and security and is dependent on the fullest co-operation of individuals and states;

Understanding that acts of war, armed conflict, forced displacement, occupation, and violence raise similar human rights and health concerns, only recently highlighted by the specific acts occurring in Ukraine;

Recognizing that public health falls under the rubric of international human rights law as a state responsibility to promote and protect during times of peace, as well as during and after times of war, armed conflict, forced displacement, occupation, and violence;

Recognizing that public health falls under international humanitarian law as a state responsibility to avoid harm to civilians during and after times of war, armed conflict, forced displacement, occupation, and violence;

Recognizing that public health approaches and responses include the ongoing, rapid response to impacts on health and wellbeing during and after times of war, armed conflict, forced displacement, occupation, and violence and that disaster epidemiology fits within operational response activities, such as the use of incident command structures;

And so, guided by the Universal Declaration on Human Rights; the Hague Regulations and the Geneva Conventions; the Convention on the Prohibition of the Development, Production, Stockpiling and Use of Chemical Weapons and on their Destruction; the Treaty on the Non-Proliferation of Nuclear Weapons; the Convention on the Elimination of All Forms of Discrimination against Women; the Convention on the Rights of the Child; the International Convention on the Elimination of All Forms of Racial Discrimination; and other relevant international and regional human rights and international humanitarian law treaties and principles;

Recognizing the right of all people to be free from harm and the threat of harm, and their rights to life, liberty, opportunity, and human development, as well as their right to a healthy environment;

Recognizing the primary importance of states to promote and protect human rights, as a function of their duty to promote and protect public health and human development;

Recognizing the fundamental duty of the state to promote and protect public health that allows for the people under their care or, in the case of occupation, control, the ability to fully realize their human rights to life, liberty, opportunity, and human development, as well as their right to a healthy environment;

Recognizing that in times of war, armed conflict, forced displacement, occupation, and violence, states have a particular duty to protect civilians from harm and fleeing from harm;

Understanding that in times of war, armed conflict, forced displacement, occupation, and violence, there is particular and targeted harm to already vulnerable populations, including but not limited to minority populations, women, children, the elderly, the disabled, and the infirmed;

Recognizing that in times of war, armed conflict, forced displacement, occupation, and violence, states are prohibited from targeting civilians or from using weaponry that causes indiscriminate harm to civilians, including humanitarian organizations and institutions, including but not limited to hospitals, aid workers, shelters, and transportation and humanitarian corridors that allow civilians to flee from harm;

Noting UNGA Res A/ES-11/L.1 (1 March 2022), Aggression against Ukraine, “Expressing grave concern at reports of attacks on civilian facilities such as residences, schools and hospitals, and of civilian casualties, including women, older persons, persons with disabilities, and children,” and “Condemning the decision of the Russian Federation to increase the readiness of its nuclear forces,” and “Expressing grave concern at the deteriorating humanitarian situation in and around Ukraine, with an increasing number of internally displaced persons and refugees in need of humanitarian assistance”;

Noting the 24 February 2022 WHO/Europe statement on Ukraine, expressing concern for a “humanitarian catastrophe in Europe, including a significant toll in terms of casualties as well as further damage to already-fragile health systems,” and concern for the “ongoing poliomyelitis outbreak and the long-running COVID-19 response”;

Recognizing that the intentional targeting of civilians or the indiscriminate use of weapons are considered war crimes under international law, designated as such because of the gross violation of human rights that is of universal concern to all states and all humanity;

Expressing grave concern on the evidence of the targeted and indiscriminate harm to the civilian population and infrastructure in Ukraine by Russian forces, upon which human rights and public health rely;

Noting particularly the evidence of the targeted and indiscriminate harm to humanitarian and transportation corridors, hospitals, schools, and shelters;

Noting particularly the evidence of rape and sexual abuse of women, children, and the elderly;

Concerned of the reports of discrimination occurring at the borders towards refugees of African and Asian descent; and

Concerned of the existence of pathogen laboratories in Ukraine, as well as nuclear energy facilities, including Chernobyl, and the particular harm to the human population that could occur if targeted or damaged,

Stand in solidarity with the people of Ukraine and with all populations that face harms and threats of harm to the peaceful enjoyment of their human rights.

Therefore, we call upon all states, regional authorities, political movements, global security and peace entities, humanitarian and health organizations, civil society, and their leaders to take meaningful, on-going actions to prevent, mitigate, and stop military aggression, war and associated violence worldwide, and to rapidly and meaningfully respond to the immediate, short-term, and ongoing long-term security, public health, and wellbeing needs of all people impacted, including but not limited to:

1. The ongoing, systematic documentation of the magnitude of impacts, and implementation and evaluation of effective interventions that account for and address:
 - 1.1. The human casualties, injuries, disabilities, displacements, and other impacts on the wellbeing experiences of civilians and armed forces, non-combatants and combatants;
 - 1.2. The physical and mental impact of the harms and threat of harms on all people for present and future generations;
 - 1.3. The effects on all vulnerable populations, including but not limited to children, institutionalized adults, and low-income populations;
 - 1.4. The intersectional and intergenerational effects on families and family separation, destruction of lives, homes, ways of life and future stability and viability of impacted sub-populations;
 - 1.5. The effects on healthcare institutions, workers, and patients;
 - 1.6. The effects on food security and agriculture and capacity to sustain human and other life;
 - 1.7. The effects on air, water, and soil integrity and capacity to sustain human and other life;
 - 1.8. The effect on sanitation;
 - 1.9. The mass migrations of people through secure humanitarian corridors;
 - 1.10. The responsibility of nations to protect and receive refugees and allow for asylum, without discrimination;
 - 1.11. The spread of COVID-19 and other infectious diseases amid war, conflict, or occupation;
 - 1.12. Environmental exposure to known and suspected carcinogens due to destruction of infrastructure leading to increased exposures in air, water and contaminated food;
 - 1.13. The protection of pathogen laboratories;
 - 1.14. The protection of nuclear facilities;
 - 1.15. The use of torture, imprisonment, starvation, rape, murder, and other acts of aggression by belligerent troops; and
2. Prior to and during times of war, armed conflict, displacement and occupation; evidence-informed, equitably-delivered public health laws, policies, principles, and well-organized on-the-ground actions should include the observance of human rights and humanitarian law that protects human populations and promotes public health.

INEP MEMBER SOCIETY ENDORSEMENTS (on-going – updated 24 June 2022)

American College of Epidemiology

American Public Health Association – Epidemiology Section

Associação Brasileira de Saúde Coletiva

Australasian Epidemiology Association

Collegium Ramazzini

European Society for Environmental and Occupational Medicine