Humanitarian Crises Framework

Approved by RCN Council 27 September 2022

1 Purpose

1.1 This framework aims to provide the Royal College of Nursing (RCN) and its members with guidance to inform determinations and decision making regarding appropriate, ethical and timely response to global humanitarian crises.

1.2 It sets parameters for when and how the RCN engages in humanitarian crises. It should be used to ensure consistency in how the RCN, as the voice of nursing, engages on complex issues in the UK and globally, under the principle of 'do no harm.'

2 Why this is required

2.1 The RCN is one of the world's leading member-driven health and care organisations. Advocating the highest standards of care and dignity for people needing nursing care is at the heart of our work. As the largest nursing trade union and professional membership nursing organisation in the world, the RCN is in a powerful position to advocate and respond to global humanitarian crises.

2.2 Nursing within the United Kingdom is highly respected across the world, and the RCN's members are safety critical and caring professionals, who hail from every corner of the world. They hold a reasonable expectation that the RCN will, when a humanitarian crisis occurs, consider whether and how the RCN can best support members and global nursing colleagues in ways which capitalise on the power of its professional nursing voice. Determining what to respond should be on the basis of equitability, humanitarian need, RCN member voice, public interest and reputational profile.

2.3 Additionally, and crucially, in the context of any humanitarian crises or issues anywhere in the world, nursing is at the forefront of any response, whether this is through leadership, first line response, commissioning, providing and coordinating services, information, advice, education and support[i].

2.4 The RCN as an independent organisation, and as a member of international nursing alliances, has a role to play, in bringing attention to humanitarian crises and issues, which are increasing in frequency and intensity, including with record numbers of people displaced by conflict and climate change.

3 Definitions

3.1 Humanitarian crisis

3.1.1 A humanitarian crisis is a singular event or a series of events that are threatening in terms of health, safety or well-being of a community or large group of people. It may be an internal or external conflict[ii] and usually occurs throughout a large land area.

3.1.2 There are three types of humanitarian crises, which are:

3.1.2.1 Natural disasters, which includes:

- geophysical (e.g., earthquakes, tsunamis and volcanic eruptions);
- hydrological (e.g., floods, avalanches);
- climatological (e.g., droughts); and
- meteorological (e.g., storms, cyclones).

3.1.2.2 **Biological**, which includes epidemics and pandemics.

3.1.2.3 **Man-made**, which includes conflicts/war.

3.1.2.4 Hybrid disasters are common, for example, when a natural disaster or a man-made crisis leads to the collapse of a country's social and health infrastructure with biological consequences.

3.2 Humanitarian action

3.2.1 In a humanitarian crisis caring individuals/organisations/governments are eager to act. There are two main types of humanitarian action, which are:

3.2.2 **Humanitarian interventions** are military actions led by states and/or alliances, undertaken with the aim of reducing human suffering and preventing atrocities, and/or stopping a gross violation of human rights in a state, where such state is either incapable or unwilling to protect its own people, or is actively persecuting them.

3.2.3 **Humanitarian aid** is used to help people affected by crises and is delivered by neutral and impartial organisations directly to people affected. It does not require international legal backing and is often done in cooperation with national governments. Humanitarian aid is deployed when large numbers of people are in need of assistance, regardless of the international political context.

4 RCN humanitarian aid

4.1 When a humanitarian crisis occurs and humanitarian aid is needed, the RCN as a trade union and professional body representing diverse caring members, who recognise the critical role nursing plays in health and care system safety, will rapidly consider what aid, assistance or support they should or could offer.

4.2 The RCN believes that for effective prevention and response a combination of official and voluntary action is crucial, and that where national capacity of any international state is, for a range of reasons, insufficient, that the role of the wider international community must also be fulfilled[iii].

4.3 The RCN believes that the first priority of nurses, nursing support workers and their teams, is care of the populations they serve. Referring to international human rights agreements, both in policy, practice and communications, can help patients, the populations that they serve and the nursing colleagues who care for them.[iv]

4.4 Any RCN action must be guided by the four humanitarian principles[v], which are:

4.4.1 ***Humanity:*** human suffering must be addressed wherever it is found, with particular attention to the most vulnerable.

4.4.2 ***Neutrality*****:** humanitarian aid must not favour any side in an armed conflict or other dispute[vi].

4.4.2 ***Impartiality:*** humanitarian aid must be provided solely on the basis of need, without discrimination. This includes the underpinning positions that:

- Impartiality is a fundamental ethical principle for health care professionals. Nursing impartiality means nurses *'shall not discriminate or refuse care to anyone injured or sick during times of conflict and civil unrest[vii]'*.

- All health professionals have a right to safely practice without fear of reprisal or attack and must be able to provide treatment to those in need, irrespective of their political affiliation.

4.4.3 *Independence:* the autonomy of humanitarian objectives from political, economic, military or other objectives.

5 Breach(es) of the Geneva Convention

5.1 The Geneva Convention, the core of international humanitarian law that regulates armed conflict, outlines the protection of medical personnel (which includes nurses and midwives), in times of war[viii]. It sets out that medical neutrality must be recognised and is violated when health care professionals, facilities or patients come under attack or when medical professionals are not allowed to provide treatment. It states that:

- 'No obstacle to the humanitarian activities which… impartial humanitarian organisation… undertake for the protection of civilian persons and for their relief'; [ix]
- 'Wounded or sick… shall be respected and protected in all circumstances'; [x]
- 'Medical units (i.e., hospitals and mobile medical facilities) may in no circumstance be attacked'; [xi] and
- 'Medical personnel exclusively engaged in the search for or the collection, transport or treatment of the wounded or sick… shall be respected and protected in all circumstances.'[xii]

6 Guiding principles for response and action

6.1 Human rights are key to health and the effective delivery of nursing and complement the Objects of the RCN Royal Charter[xiii],[xiv].

6.2 Before responding to a specific humanitarian crises or issues, case or incident evidence must be verified through reputable sources.[xv] Any response from the RCN will be grounded in the principles set out in relevant national legislation and international conventions regarding human rights (see Appendix A).

6.3 While recognising that no group is homogenous in experience, views or positioning, the RCN, working with its members, will, wherever possible, work with nursing diaspora groups in the UK, and national nursing associations, to understand if there have been humanitarian crises, and to ascertain RCN actions that would best support in-country nursing.

6.4 The RCN will aim to respond to global humanitarian crises, issues and incidents when nurses and nursing support workers are involved, for example where:

6.4.1 Nurses, nursing support workers and health workers are targeted with violence, have faced human rights violations, and where there have been breaches of key human rights conventions;

6.4.2 Nurses, nursing support workers and health workers' rights at work are seriously compromised;

6.4.3 Health and public policy issues have had a significant impact on the nursing profession;

6.4.4 Cases where nurses, nursing support workers and other health workers have been prevented from delivering care, and in cases where patients are prevented from accessing adequate health care in an impartial and non-discriminatory manner;

6.4.5 There is a violation of medical neutrality – *'the principle of non-interference with medical services in times of armed conflict and civil unrest*[xvi]*';*

6.4.6 Governments act in ways which contravene their commitments to protect and promote human rights as enshrined in international agreements;

6.4.7 UK registered nurses find themselves in a situation where to "…treat people as individuals and uphold their dignity…" and to "…respect and uphold people's human rights…" they unavoidably breach the principles outlined in the UK Nursing and Midwifery Council Code; and

6.4.8 The RCN is statutorily bound to neutrality, which refers, but is not exclusive to, non-partisan and/or non-party political positioning[xvii].

7 Possible RCN actions

7.1 **Remain informed regarding key international developments, including regarding countries where** current conflict is occurring, and/or humanitarian aid may be required[xviii]

7.2 **Deliver an RCN public statement of support** *(Measurable occurrence)* which appears on the RCN's external website, is released to the media and is shared with in-country national nursing organisations where conflict and/or humanitarian aid is occurring. The RCN will comment as appropriate as the situation develops, after having sought, where possible, understanding of what any national nursing association in-country is doing and/or experiencing.

7.3 **Signpost RCN members to relevant and meaningful information** including how to support their own wellbeing and that of their colleagues; how to support their patients; what action the RCN is taking and how to personally donate.

7.4 **Act as signatory on a shared statement with other organisations** *(Measurable occurrence)* such as the International Council of Nurses (ICN), the European Public Services Union (EPSU), the European Federation of Nurses (EFN), European Forum of National **Nursing** and Midwifery Associations (EFNMA), Commonwealth Nurses and Midwives Federation (CNMF), Royal College of Midwives (RCM), members of the Academy of Medical Royal Colleges (AoMRC), WHO and other external humanitarian aid organisations.

7.5 **Undertake equitable and cross-party political lobbying** within the UK and support global nursing by seizing opportunities to engage in informing and influencing domestic and international decision-makers when considering humanitarian aid for nursing *(Measurable occurrence)* such as drafting letters for RCN members to send to elected officials, placing questions within UK Parliament and devolved administrations, participating in UK Parliament All-Party Parliamentary Groups, etc.

7.6 **Providing direct RCN support to in-country nursing associations** through known contacts or facilitated by partner organisations, and under certain circumstances, with the agreement of RCN Council, the RCN will fund and facilitate through bona fide aid organisations, the provision of direct humanitarian aid to global nursing and health service colleagues e.g., medical equipment, supplies *(Measurable occurrence)*

7.7 **Identify and offer aid, guidance and support to RCN members diaspora** potentially traumatised by crisis in their country of origin *(Measurable occurrence)*

7.8 **Identify RCN members, including within the diaspora, who, if the RCN is approached by a humanitarian aid provider, may be willing to support or directly engage in delivering humanitarian aid;** including gaining permission from the members for them to be approached by the aid provider[xix] (*Measurable occurrence)*

7.9 **Support RCN members who are engaging in humanitarian aid work**[xx] *(Measurable occurrence)*

7.10 **Identify and support nurses, nursing support workers and health workers' seeking refuge / fleeing crisis areas**, including facilitating RCN member support *(Measurable occurrence)*

7.11 **Support RCN members to facilitate access to NHS healthcare in the UK** by any individual seeking asylum and/or holding refugee status.

Appendix A: National legislation and international agreements underpinning this framework

The below sets out key international agreements that will be used to guide the RCN in use of this framework.

1. Universal Declaration of Human Rights (UDHR)[xxi] - The UDHR was the first international agreement which outlined the fundamental principles of human rights. It provided the foundations for over 80 international conventions and treaties in addition to regional and domestic laws[xxii]. The UDHR sets out the inherent dignity and the equal and inalienable rights of all human beings. Fundamental principles outlaid in the UDHR is the prohibition of slavery, freedom from torture and arbitrary detention, and promotes the rights of all to equal protection under the law.
2. The Geneva Convention[xxiii] - The Convention sets out the principle of 'neutrality'- that is the principle of non-interference with medical services during conflict. This is a right guaranteed in the Geneva Convention and their Additional Protocols and sets out protections for those who do not take part in fighting such as medics, civilians, and aid workers. The Convention sets the neutrality (inviolability) of medical personnel and medical establishments and units. It also guarantees relief to the wounded without any distinction as to nationality,
3. International Covenant on Economic, Social and Cultural Rights (ICESR)[xxiv] - The ICESR ensures the enjoyment of individuals economic, social and cultural rights, in accordance with the Universal Declaration of Human Rights. Included within these rights are the rights to the highest attainable standard of medical and physical health; the right to form and join a trade union; and the right to just and favourable working conditions.
4. International Covenant on Civil and Political Rights (ICCPR)[xxv] - The ICCPR prohibits cruel, inhumane or degrading treatment or punishment, in particular no one should be subjected to medical or scientific experimentation without their explicit consent. The Covenant prohibits arbitrary detention and arrest, promotes the right to freedom of expression and association (including the right to form and join a trade union), as well as the right to peaceful assembly.
5. The 1951 Refugee Convention and its 1967 Protocol[xxvi] - The 1951 Refugee Convention and its 1967 protocol sets out the rights of refugees and obligations of states with regards to the treatment of refugees (for example access to family unification, education and documentation). The core principle and protection that is granted to refugees under the Convention is the principle *of non-refoulement*- this prohibits a refugee from being expelled to a country where they face threat to their freedom and life. The Convention sets out that its rights should be applied to refugees without discrimination, and that refugees should not be penalised for illegal entry or stay in a country.
6. Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment[xxvii] - The Convention binds states to take measures to prevent torture within their own territories – it also prohibits states from expelling a person to another state where they would be subjected to torture. To fulfil obligations under the Convention states must ensure that information regarding the prohibition of torture is included in the training of law enforcement, military, public officials – and medics.

7. Human Rights Act - In the UK human rights are protected by the Human Rights Act 1998[xxviii]. Public Authorities – including NHS bodies – must respect, protect and act in a way that is compatible with human rights. The Act protects everyone in the UK, regardless of nationality or immigration status. The Ministry of Justice is currently consulting on proposals to replace the Human Rights Act with a Modern Bill of Rights 'in order to restore a proper balance between the rights of individuals, personal responsibility and the wider public interest'[xxix].

   Human Rights in Northern Ireland –As part of the Belfast Agreement/ Good Friday Agreement[xxx], it was agreed that Northern Ireland would have a Bill of Rights, led by a Northern Ireland Human Rights Commission (NIHRC). The NIHRC submitted their advice to the Secretary of State of Northern Ireland on a Bill of Rights for Northern Ireland in 2008.[xxxi] An Ad Hoc Committee on a Bill of Rights was established in 2020 and published a report in February 2022.[xxxii]

8. The European Convention on Human Rights[xxxiii] – Protects the human rights of people in the 47 member states of the Council of Europe, of which the UK is a member. The Convention guarantees several rights and freedoms including the right to life, freedom from torture, freedom of expression and assembly, and the right to family life.

9. The World Medical Association International Code of Medical Ethics - Sets out ethical principles for physicians. This includes the duty to respect the rights of their patients, act in the best interest of the patient and give emergency care as a humanitarian duty[xxxiv].

10. 2030 Agenda for Sustainable Development- The 2030 Agenda[xxxv] was adopted by all member states of the United Nations, at the heart of the Agenda are the 17 Sustainable Development Goals (SDG). The SDGs address the global challenges including poverty, inequality, climate change, environmental degradation, peace and justice.[xxxvi]

11. The World Health Organisation (WHO) Constitution- Recognises that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction and that the health of all peoples is fundamental to the attainment of peace and security.[xxxvii]

---

[i] Core Competencies in Disaster Nursing Version 2.0 (2019)
[ii] In the context of credible data including, but not limited to, the Uppsala Conflict Data Programme
[iii] The Humanitarian Charter (2018)
[iv] Royal College of Nursing: Human rights and nursing position statement (2012)
[v] This is drawn from the United Nations (UN) Secretary of the Office for the Co-ordination of Humanitarian Affairs: UNOCHA.org
[vi] European Consensus on Humanitarian Aid (2017)
[vii] This is drawn from the International Code of Medical Ethics: World Medical Association: International Code of Medical Ethics (1949)
[viii] The Geneva Convention: (IV) Article 24 (1949)
[ix] The Geneva Convention: (I) Article 9 (1949)
[x] The Geneva Convention: (II) Article 12 (1949)
[xi] The Geneva Convention: (III) Article 19 (1949)
[xii] The Geneva Convention: (IV) Article 24 (1949)
[xiii] Royal College of Nursing: Royal Charter (2012)
[xiv] Royal College of Nursing: Human rights and nursing position statement (2012)

[xv] For example, through credible and respected organisations (such as United Nations agencies, Amnesty International or Human Rights Watch).
[xvi] Physicians for Human Rights: Medical Impartiality
[xvii] In line with the Trade Union Act, trade unions must hold a separate political fund to take part in political activities: Trade Union Act (2016)
[xviii] Such as the Uppsala Conflict Data Programme
[xix] Only in alignment with General Data Protection Regulation (GDPR) requirements. Also, see Working Internationally: A guide to humanitarian and development work (2017)
[xx] Only in alignment with General Data Protection Regulation (GDPR) requirements. Also, see Working Internationally: A guide to humanitarian and development work (2017)
[xxi] United Nations: Universal Declaration of Human Rights (1948)
[xxii] Equality and Human Rights Commission: What is the Universal Declaration of Human Rights?
[xxiii] The Geneva Convention (1949)
[xxiv] United Nations: International Covenant on Economic, Social and Cultural Rights (1966)
[xxv] United Nations: International Covenant on Civil and Political Rights (1966)
[xxvi] United Nations: Convention and Protocol Relating to the Status of Refugees (1951, 1967)
[xxvii] United Nations: Convention against Torture (1984)
[xxviii] UK Human Rights Act (1998)
[xxix] Ministry of Justice: Human Rights Act Reform: a Modern Bill of Rights (2021)
[xxx] The Belfast Agreement (1998)
[xxxi] Northern Ireland Human Rights Commission: A Bill of Rights for Northern Ireland (2008)
[xxxii] Northern Ireland Assembly: Report of the Ad Hoc Committee on a Bill of Rights (2022)
[xxxiii] European Convention on Human Rights (1950)
[xxxiv] World Medical Association: International Code of Medical Ethics (1949)
[xxxv] United Nations: The 2030 Agenda for Sustainable Development (2015-2030)
[xxxvi] United Nations: Sustainable Development Goals (2015-2030)
[xxxvii] World Health Organisation: Constitution (1948)