

INDIA (MANIPUR STATE ONLY)

Violence Against Health Care in Conflict

2023



**SAFEGUARDING
HEALTH
IN CONFLICT**



**Insecurity
Insight**
Data on People in Danger

Letter from the Chair



The year 2023 was a grim one for violence inflicted on health care. In 2022, the Safeguarding Health in Conflict Coalition identified the highest number of incidents since we began reporting. Yet in 2023 the number was 25% greater, exceeding 2,500.

The intensity of conflicts characterized by pervasive attacks on health care in recent years declined somewhat in 2023, including in Syria, Yemen, and the Tigray region of Ethiopia. As a result, it might also have been expected that the global trend of violence against health care would turn downward. Instead, from the first days of two new and catastrophic wars, one in Sudan and the other between Israel and Hamas, health care came under ferocious assault. In both conflicts warring parties killed health workers, attacked facilities, and destroyed health care systems. Meanwhile, attacks on health care in Myanmar and Ukraine continued at a relentless pace, in each case exceeding 1,000 since the start of the conflicts in 2021 and 2022, respectively. In many chronic conflicts, fighting forces continued to kidnap and kill health workers and loot health facilities.

At the same time, new and disturbing trends emerged. In Burkina Faso, Ethiopia, Gaza, Lebanon, Myanmar, Sudan, Syria, Ukraine, and Yemen combatants employed drones to attack health clinics, hospitals, and ambulances. In many conflicts, combatants violently entered hospitals or occupied them as sites from which to conduct military operations, leading to injuries to and the deaths of patients and staff. In many conflicts, the conduct of combatants revealed open contempt for their duty to protect civilians and health care under international humanitarian law (IHL). Israel, while purporting to abide by IHL, promoted a view of its obligations that, if accepted, would undermine the fundamental protections that IHL puts in place for civilians and health care in war.

The one consistent feature of the attacks was continued impunity for these crimes. For more than a decade, despite their repeated commitments, governments have failed to follow through on these commitments and reform their military practices, cease arms transfers to perpetrators, and bring those responsible for crimes to justice.

We need a new approach, starting with stronger leadership from UN agencies and governments willing to join with civil society and the health care community to take far more assertive action to end the scourge of violence against health care. Among other steps, they can press prosecutors domestically and internationally to bring cases of war crimes and crimes against humanity committed against health care, to develop political support for special tribunals to circumvent UN Security Council members' vetoes of referrals to the International Criminal Court, and restrict the sale of arms to forces that commit crimes.

There are some sources of hope. After years of lassitude, the World Health Organization has spoken forcefully against vicious assaults on health facilities and health workers. Civil society groups are exerting pressure to stop arms transfers to perpetrators of violence, while some militaries have launched initiatives to reduce civilian casualties in war. Leaders must build on these initiatives. Ending the suffering of millions of people depends on their doing so.

A handwritten signature in black ink, appearing to read "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

 24 REPORTED INCIDENTS	 7 INCIDENTS WHERE HEALTH SUPPLIES WERE LOOTED	 6 INCIDENTS WHERE HEALTH FACILITIES WERE DAMAGED/ DESTROYED
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↓ Source: 2023 IND SHCC Health Care Data

OVERVIEW

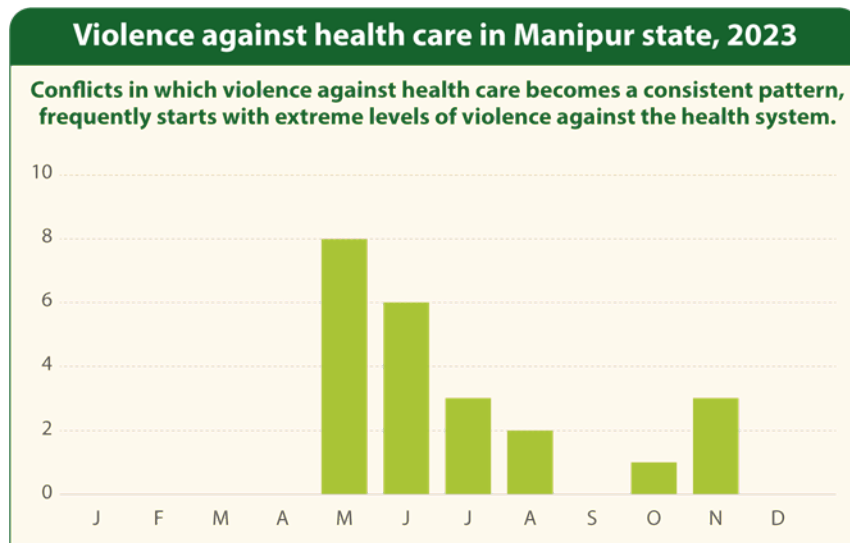
The Safeguarding Health in Conflict Coalition (SHCC) identified 24 incidents of violence against or obstruction of health care in India's Manipur state in 2023. In these incidents, health supplies were looted at least seven times and health facilities damaged or destroyed on six occasions. This factsheet is based on the dataset [2023 IND SHCC Health Care Data](#), which is available for download on the [Humanitarian Data Exchange \(HDX\)](#).

THE CONTEXT

On May 3, 2023 violence broke out between the Meitei and Kuki-Zomi ethnic groups in Churachandpur town in northeast India's [Manipur state](#). Around 219 people were [killed](#), [thousands injured](#), and more than 60,000 displaced and living in relief camps. Incidents of [sexual violence](#) were also reported. The state government was unable to curb the violence and as a result "[Manipur is now divided into ethnic zones](#)" by human-made borders, with the Meiteis in Imphal valley and the Kuki-Zomis in the hills. Divisions between these ethnic groups have become [deep-rooted](#) and ethnic armed groups have been [revitalized](#).

VIOLENCE AGAINST OR OBSTRUCTION OF HEALTH CARE IN 2023

At least 24 incidents of violence against or obstruction of health care were reported between May and November 2023. Nearly a third of incidents were recorded in May, after violence erupted between the Meitei and Kuki-Zomi ethnic groups. Half of the incidents were attributed to individuals from the Meitei ethnic group. Other named perpetrators included individuals from the Kuki-Zomi ethnic group, Meira Paibis (a women's social movement) and police. In other attacks, the attackers remained unidentified.



Health supplies looted

Vital medical supplies were looted on at least seven occasions. Most lootings took place at health facilities, with one involving a health vehicle transporting immunization vaccines for children under ten years of age being looted by a Meitei and Meira Paibi mob in August.¹ Four lootings took place on May 4, during which a gynecology clinic was looted by a Meitei mob who were protected by the Manipur police, a diagnostic center was looted and destroyed by a Meira Paibi mob, a hospital was ransacked and looted by a Meitei mob, and a clinic was looted and destroyed by a Kuki-Zomi mob.²

Health facilities destroyed

Six incidents recorded health facilities being damaged or destroyed. Most damage occurred during lootings. One of the only facilities for the rehabilitation of women drug addicts in Churachandpur town was burned down by a Meitei mob.³

Health workers killed, kidnapped, assaulted, and threatened

At least one health worker was killed in Manipur state in 2023. A male NGO ambulance driver was beaten and hacked to death by a Meitei mob while transporting around seven passengers from Imphal to Lamka on May 3.⁴ The incident took place in front of Moirang police station, but police reportedly did not intervene in the brutal attack. The next day, a nursing student was beaten until she lost consciousness by a female-led Meitei mob inside the campus of Nightingale Nursing Institute.⁵ According to witnesses, the perpetrators shouted “rape her, kill her, burn her” during the brutal attack. A female nurse was briefly kidnapped on her way to work at Nongpok Sekmai Primary Health Center in the morning of July 16.⁶ She was rescued on the same day by police.

Obstruction to health care

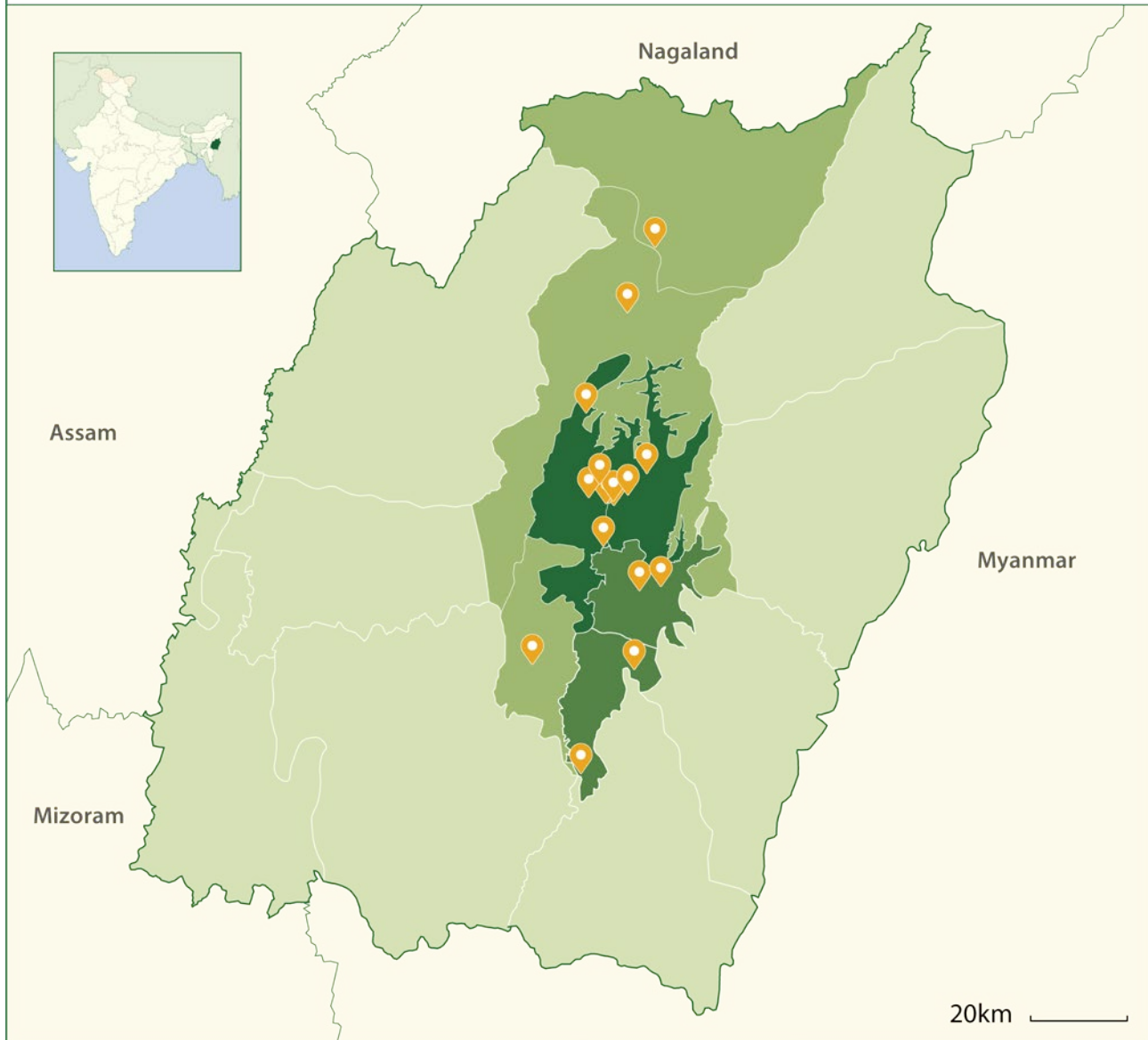
At least six incidents involved obstructions to health care. Five were attributed to a Meitei mob blocking highways and preventing vital medicine from reaching people in need between June and July. The Committee on Tribal Unity reimposed a blockade on the crucial Dimapur-Imphal National Highway 2 in protest against the national government’s alleged failure to ensure the availability of essentials in the hills and to protect the Kuki-Zomi community following the killing of three Kuki villagers.⁷

India (Manipur state only)



Reported incidents affecting health care in Manipur State, 2023

Ethnic violence included attacks on a gynecological center and a health vehicle transporting immunization vaccines for children.



THE IMPACT OF ATTACKS ON HEALTH CARE

The human-made borders separating the two communities, which are patrolled by the Indian Armed Forces, the Border Security Force, the Assam Rifles, the Central Reserve Police Force, and armed volunteers from both sides, have made it impossible for either community to cross into the other's area. This has impacted communities' ability to access health care, particularly since tertiary government hospitals and top private hospitals in the state are located in Imphal city, which is inaccessible to the Kuki-Zomis. As a result, Kuki-Zomi civilians who had been receiving treatment in Imphal no longer had access to such treatment.

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In Churachandpur town (which is Kuki-Zomi majority) there was only one district hospital, and the remaining private hospitals did not have an intensive care unit or specialized doctors, placing a greater burden on the district hospital. Patients needing specialized care were required to travel to neighboring states, with some journeys taking over 12 hours. However, not all patients were able to afford to travel for such treatment, with some patients foregoing treatment since it was not financially viable. The district hospital in Churachandpur also faced a shortage of resources, particularly since supply chains, including the transportation of medicines from Imphal to the Manipur hills, were impeded due to fighting and insecurity. A doctor working in the district hospital's surgery department reported that as a result of a shortages of medicine and equipment, elective surgeries were suspended.

Doctors and health care workers were also impacted by the violence. In Churachandpur town at least 13 Meitei doctors were moved to other locations where their community was predominant. As a result, the hospital was understaffed.

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- 1 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 IND SHCC Health Care Data. Incident number 45897.
 - 2 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 IND SHCC Health Care Data. Incident numbers 45753; 45754; 45755; 45752.
 - 3 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 IND SHCC Health Care Data. Incident number 45782.
 - 4 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 IND SHCC Health Care Data. Incident number 45749.
 - 5 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 IND SHCC Health Care Data. Incident number 45751.
 - 6 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 IND SHCC Health Care Data. Incident number 45896.
 - 7 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 IND SHCC Health Care Data. Incident number 45831.

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.

www.safeguardinghealth.org

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