

CERTI

Crisis and Transition Tool Kit

How Can Health Serve as a Bridge for Peace?

Executive Summary

Dr. Rosalia Rodriguez-Garcia
Mr. James Macinko
Dr. F. Xavier Solórzano
Ms. Marita Schlessler
The George Washington University School of Public Health and Health Services



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Executive Summary

This document was prepared under contract with the USAID Bureau for Africa, Complex Emergency Response and Transition Initiative (CERTI). The CERTI project is composed of a large network of organizations seeking to establish broad-based consensus on best practices for providing public health services in advance of, during, and following complex humanitarian emergencies, with the aim of strengthening response capabilities of organizations involved in public health interventions during these critical periods. The purpose of this technical report is to examine the concept and practice of "Health as a Bridge for Peace" and how it is translated into an approach to providing health inputs before, during, or after crises.

In order to analyze Health as a Bridge for Peace (HBP) experiences retrospectively, four main methodologies have been utilized. First, we have attempted to analyze and synthesize available reports, books, studies, and proceedings from HBP meetings held over the past 15 years. Second, a review and comparative analysis of published and unpublished cases of specific HBP interventions was conducted. Third, individual semi-structured and unstructured interviews were conducted with key informants in order to verify findings from international meetings and case studies, identify gaps in knowledge, and determine practitioner and policy-makers' views on the utility of the HBP approach in contemporary Sub-Saharan Africa. Finally, intermediate and final drafts of this document have been peer-reviewed by a multidisciplinary team of health, conflict, and development experts.

Experiences to date have included successful, as well as unsuccessful HBP operations. The findings from research on HBP activities suggest that the presence of certain critical elements in any given conflict situation may increase the chances of a successful HBP operation. These elements include 1) political will of national governments; 2) support and facilitation of an international health organization, such as WHO; 3) investment of resources, including financial, material, and human; health personnel properly training in skills such as

conflict analysis, negotiation, and diplomacy; and 4) the implementation of HBP activities tailored to the specific contextual situation.

Health personnel are in the unique position to be able to leverage something universally important, irrespective of the details of any given conflict: the promise of good health. This makes the international health community a potentially powerful force in peace efforts throughout the world, and one that should be tapped further through expanded HBP initiatives and continued research, evaluation, and training activities.

Accordingly, the following strategies, skills, and tools as related to future HBP work in the context of contemporary Sub-Saharan Africa are recommended:

- Training programs for health personnel in skills relevant to peace building.
- Further evaluative research of HBP initiatives to date. Such continued research efforts should support further development of the theory behind Health as a Bridge for Peace.
- Commitment to health as a bridge for peace on the part of national governments, civil societies, international organizations, and the global health community.

Recommendations for next steps for the Health as a Bridge for Peace component of the CERTI project include: 1) Develop evaluation indicators and criteria, and 2) Capacity building and tools development. In the development of evaluation indicators and criteria, a situation analysis of 2 – 3 countries where health was used as a bridge for peace will be conducted in conjunction with USAID representatives. From this analysis protocols and indicators will be conceptualized.

This will lead to the second phase of activities, that of capacity building and tools development. This component will initially involve the conceptualization of a HBP Toolbox succinctly outlining options for training and tools development. This toolbox will consist of one-page fact sheets detailing impact evaluation indicators and criteria and outlining tools and capacity building programs. Fact sheets describing tools and capacity building options will

cover topics such as early warning systems, negotiation, conflict management, forecasting skills, risk communication, conflict communication, working with stakeholders, working with the media, problem resolution, institutional reconstruction, and crisis assessment. Fact sheets detailing training programs designed specifically for clinical personnel will include topics such as emergency preparedness, assessing and managing disaster/risk relief, managing for reduced loss, and conflict impact reduction.

Once the toolbox has been developed, we will craft an information-sharing strategy, which will allow the toolbox to serve as a stimulus in the cooperative development with local partners of in-depth training programs and tools tailored specifically to African populations. We believe that for training programs and tools to be relevant to the people of Sub-Saharan Africa, African input into their content and design is crucial on an on-going basis. The toolbox will also serve as an informational tool with which to elicit input from USAID Missions, NGOs, and civil societies. This will allow all partners the opportunity to analyze and provide feedback on the relevance and importance of each component within their community and/or country context. To facilitate this, information-sharing seminars will be organized in Washington along with one field trip to the region. Once this valuable input has been received, the development of training programs and tools may proceed in a way consistent with the real needs of the African nations served.