



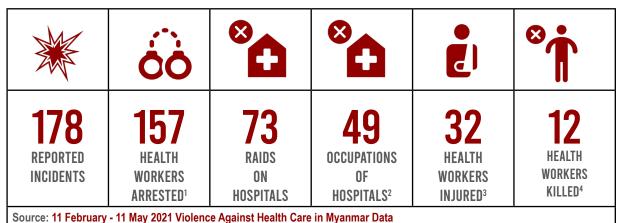
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On February 1, 2021, the Myanmar armed forces (known as the Tatmadaw) seized control of the country, following a general election that the National League for Democracy party won by a landslide. The military have since declared a state of emergency to last for at least a year, and numerous countries have condemned the takeover and subsequent violent crackdown on protestors. Over the past three months, from February to May 2021, hundreds of people, including children, have been killed and many injured during the protests.

The military-run State Administrative Council has targeted doctors and other health workers for taking a leading role in the nationwide Civil Disobedience Movement (CDM). Doctors and nurses have been served with warrants and arrests, health workers have been injured while providing care to protestors, ambulances have been destroyed, and health facilities have been raided.

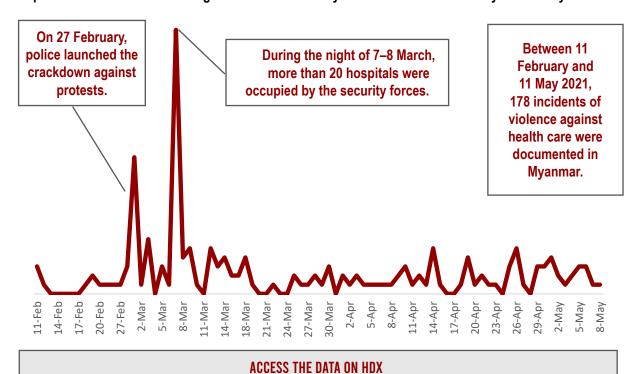
This document is the result of collaboration between **Insecurity Insight**, **Physicians for Human Rights** (PHR), and **Johns Hopkins Center for Public Health and Human Rights** (CPHHR) as part of the **Safeguarding Health in Conflict Coalition** (SHCC). It highlights reported incidents of violence against health workers, facilities, and transport in Myanmar between 11 February and 11 May 2021. It does not include information on violence against patients.

The incidents referred to are based on the dataset **11 February - 11 May 2021 Violence Against Health Care in Myanmar Data**, which is available on the **Humanitarian Data Exchange** (HDX).



REPORTED INCIDENTS AND MOST COMMONLY REPORTED CONCERNS

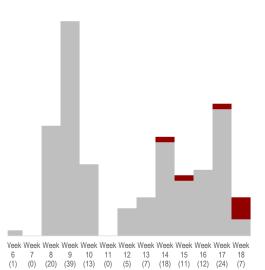
Reported incidents of violence against health care in Myanmar between 11 February and 11 May 2021



RECENT DEVELOPMENTS SINCE LAST REPORT

Health worker arrests

- Arrests, under section 505-A, continue of health workers on suspicion of their participating in the Civil Disobedience Movement (CDM).
- State-owned media announced that the Myanmar armed forces will cancel the passports of doctors suspected of participating in the CDM and blacklist them from future practice in the health sector.
- Between 30 April and 7 May, arrest warrants were issued for 400 doctors for their alleged participation in the CDM movement.
- While doctors were previously the primary target of arrests, reports of nurses being arrested are emerging. Between 8 and 11 May, warrants were issued for the arrests of 40 nurses on suspicion of participating in the CDM movement.



Health workers arrested between 11 February and

11 May 2021

• Health workers have also been arrested for their refusal to return to work at governmentrun health facilities in protest against the violent crackdown on dissent.



Health facilities

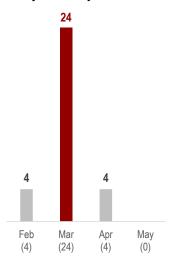
- The Myanmar armed forces continue to raid and occupy hospitals.
- Reliable sources report the use of explosive weapons against health facilities:
 - On 10 April, military airstrikes destroyed a hospital, homes, and a high school in Mutraw district, Karen state.⁵
 - On 4 May, two home-made bombs were discovered outside the entrance of the private Moe Kaung Treasure Maternal and Child Hospital in Yankin township, Yangon. Both bombs were safely detonated by military security forces and no injuries or damage to the hospital were reported. The motive and perpetrators behind this attack remain unclear. The private hospital – recently inaugurated on 2 May – is owned by junta leader Snr. General Min Aung Hlaing.
 - Also on 4 May, a home-made bomb exploded in front of the Bhamo General Hospital, Kachin state, causing minor damage to the hospital entrance, but no injuries. This follows a suspicious death of the superintendent of the hospital, who had been intimidated by the military for his participation in CDM. However, the motive and perpetrators behind this attack also remains unclear.
- On 21 April, two private hospitals in Bhamo, Kachin state had their licences to treat patients revoked. This came after the 13 April announcement by the Myanmar armed forces that they would revoke the licences of any health facility that employs health workers who participate in the CDM and prosecute those that provide assistance to health workers.

Health worker injuries

 The number of incidents of health workers being injured by Myanmar armed forces while trying to retrieve or treat injured civilians at protests was at its highest in March 2021. The reduction since then is in direct relation to the decline in protests over the past month resulting from the military's brutal response to and targeting of protestors. Consequently, there are fewer health workers on the street, and thus fewer health workers injured.

DATA COLLECTION

 This document is prepared from information compiled by Insecurity Insight, Physicians for Human Rights, and the Center for Public Health and Human Rights, Johns Hopkins Bloomberg School of Public Health that is available in local, national, and international news outlets, online databases, and social media reports. Health workers injured between 11 February and 11 May 2021



- The incidents reported are neither a complete nor a representative list of all incidents. Most incidents have not been independently verified and have not undergone verification by Insecurity Insight, Physicians for Human Rights, or the Center for Public Health and Human Rights, Johns Hopkins Bloomberg School of Public Health. All decisions made on the basis of or in light of such information remain the responsibility of the organisations making such decisions. Data collection is ongoing and data may change as more information is made available.
- Our **global map** is currently being updated. To share further incidents or report additional information or corrections, please contact **info@insecurityinsight.org**.

PROTECTION AND IMPARTIALITY OF HEALTH CARE

The wounded and sick are protected under **international human rights law** (IHRL) from attempts upon their lives or violence against their person. States have an obligation to protect the wounded and sick from ill-treatment; they must also protect the right to health of the wounded and sick. In certain circumstances, the denial of medical treatment may constitute cruel, inhuman, and degrading treatment, or even torture, if the necessary criteria are met.

Under the right to health, States have the obligation to ensure the right of access to health facilities, goods, and services. The right to health also requires that States take all necessary measures to safeguard people within their jurisdiction from infringements of the right to health by third parties.

The right to health must be exercised with impartiality and without discrimination. Discrimination in health care refers to the practice of treating a person or group of people differently from other people or groups of people. Impartial health care requires following a professional medical code of conduct, where treatment is based on medical needs without consideration of the patient's political or personal affiliations. Health workers should never discriminate in providing treatment, even if patients are associated with military or government actors whose values the health workers may not share or whose actions they may condemn.

⁵ Information on this incident was collected after the previous report was published.







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² The WHO SSA documented 33 incidents of the militarisation of health facilities (accessed 2 May 2021).

³ Eleven health worker injuries were documented by the WHO SSA (accessed 2 May 2021).

 ⁴ Six health worker deaths were documented by the WHO SSA (accessed 12 May 2021).