

Driving Dangerously to Save Lives

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The article “In the Line of Duty: A Study of Ambulance Drivers During the 2010 Conflict in Kashmir” provides critical insights into the nature of risks faced by local health care workers in conflict zones.¹ One of the most important aspects of situations of armed conflict in India is the absence of systematic research on the consequences of conflict. In the article, Dhar and colleagues have provided an important micro-level understanding of the consequences of conflict, and it is hoped that similar studies emerge from other regions in India. One of the most severe consequences is the impact of conflict on health care services, especially in the regions affected by conflict such as Jammu and Kashmir, the states in Central and East India affected by the Maoist insurgency, and the Northeastern states. The article is thus significant because it highlights the plight of local ambulance drivers, and throws light upon the manner by which they negotiate a militarized political context. Three major themes stand out.

First, in terms of the security context, ambulance drivers in the conflict-affected areas in the Kashmir Valley are vulnerable to a variety of threats that range from excesses committed by the paramilitary forces to facing stone pelting by mobs protesting against the state. The article shows that these drivers operate outside the safety of hospital complexes and directly confront these obstacles in their day-to-day functioning. Second, in many cases ambulance drivers are performing functions that go well beyond the normal task of ferrying patients who require critical care. As the authors mention, the ambulance drivers are untrained in emergency medical care and resuscitation; their primary task is to transport the patient to the hospital as quickly as possible. In insecure situations, perhaps “scoop and run” is the optimum standard of care. They are also involved in transporting doctors as well as medical supplies and equipment during curfews. A third theme that emerges from the article is the notion of “resilience,” which can be seen by the fact that despite facing such difficult working conditions, the ambulance drivers continue to go to work and perform the variety of roles assigned to them. They are the real, but unsung, heroes.

One of the defining characteristics of the three themes is the lack of normative, legal and physical protections afforded to local health workers. A potential cause for this lack of protection is the fact that international humanitarian law and its safeguards specific to health care have very weak applicability under the legal regime in the state—a legal regime that is essentially defined by the Armed Forces Special Powers Act.² Additionally, the security forces (especially the paramilitary forces) are not given rigorous training in the applicability of international humanitarian law. This has partly arisen due to the fact that the paramilitary forces were not expected to function in situations of insurgency and active armed conflict. A final contributing factor is that due to the extensive workload of the major hospitals, there have been no statewide advocacy programs driven by health care professionals that seek to create a societal acceptance of the norms of international humanitarian law through community outreach. Moreover, the polarization in the conflict precludes doctors from the region actually from engaging in dialogue with the security forces and vice versa.

References

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