

Preface

Parallel with their spectacular and life-saving advances in biotechnology, the health sciences have been increasingly strengthening their responsibility and humanitarian action. Current inequalities, conflicts, and stresses, however, continue to disadvantage the health and well being of an unacceptably large proportion of the world's population, whether in developing countries, in industrially insalubrious environments, in disaster situations, in chronic poverty, or in sick opulence. Several intergovernmental and non-governmental institutions, in particular the World Health Organization and the medical profession, address these issues boldly, yet the problem continues and in many aspects is becoming worse. In the face of this situation, a group of concerned professionals from many disciplines established the International Association for Humanitarian Medicine Brock Chisholm, based on the principles of the United Nations, the Red Cross, the World Health Organization, the WHO Collaborating Centre, and WHO's founding father, Dr G. Brock Chisholm.

The beginnings of the Association go back to 1984, to the Brock Chisholm Memorial Trust, now incorporated as the International Association for Humanitarian Medicine Brock Chisholm (IAHM), with an expanded mission.

This is not a question of repeating a Red Cross, or Médecins Sans Frontières, or Save the Children, nor, of course, of duplicating any of the specialized functions of the World Health Organization or of Amnesty International. It is not a question of rushing to an epidemic focus, disaster site, refugee camp, or torture prison. Many, many are doing these, and are doing them well. Certainly basic, essential care must be made available, and there are those who make them available. Yet Health for All remains far from being within the reach of all. We would like to be in a position of helping that dream come true. It is every human being's right to have access to such essential care, the human right to health.

Besides such basic health care, many working in developing countries and disaster situations have noted with dismay that any patient needing a slightly advanced, let alone specialized, treatment usually falls by the wayside. Without in any way encroaching upon programmes of primary health care or disaster relief, IAHM would like to and can fill this niche, can respond to these situations and provide the kind of specialized health care that is not available in poor country x or disaster site y, all within a humanitarian philosophy. To this end, IAHM has an open-ended network of hospitals on the one hand, and of health providers and specialists on the other, who, in many countries, have formally agreed to look after such patients,

without charge, on an entirely humanitarian basis. It has been christened World Open Hospital (WOH), and any hospital or any physician can join it any time. Therefore:

In conceptual yet tangible ways IAHM aims at:

- promoting the precept of health as a human right;
- strengthening the contribution of health as a bridge to peace;
- advancing humanitarian principles in the practice of medicine;
- facilitating the availability of Health for All.

In practical terms the Association will additionally:

- provide specialized medical and surgical treatment, free of charge, in or from countries where such treatment is not possible;
- mobilize hospitals in developed countries to receive, and doctors to treat, such patients entirely on a humanitarian basis;
- provide similar services in disaster situations;
- collaborate with institutions pursuing similar objectives.

Our definition of humanitarian medicine should facilitate understanding the spirit and mission of the International Association for Humanitarian Medicine Brock Chisholm:

While all medical intervention to reduce a person's sickness and suffering is in essence humanitarian, Humanitarian Medicine goes beyond the usual therapeutic act and promotes, provides, teaches, supports, and delivers people's health as a human right, in conformity with the ethics of Hippocratic teaching, the principles of the World Health Organization, the Charter of the United Nations, the Universal Declaration of Human Rights, the Red Cross Conventions and other covenants and practices that ensure the most humane and best possible level of care, without any discrimination or consideration of material gain.

In 2005, the International Association for humanitarian Medicine published the first book entirely dedicated to humanitarian medicine. This is a sequel to that volume, expanding the basic concepts and adding 14 chapters. Like its predecessor, this new edition is respectfully offered to the global and humanitarian health community.

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