Our context

The ongoing armed conflict in the Middle East has created a unique situation for Magen David Adom (MDA), Israel's National Society, which has obliged us to create special procedures to ensure the safety of our staff and volunteers.

MDA is Israel's national emergency medical service, which has 900 ambulances, 1,600 staff members and 10,000 volunteers working in the front line of the response to major incidents (such as indiscriminate acts of violence) in normal times and as an auxiliary to Israel's civil defence mechanism (the Home Front Command) and the armed forces' medical service during wartime.

Since the Israeli armed forces are in charge of the response to attacks during an armed conflict, our National Society is required to coordinate closely with the Home Front Command. Maintaining our required and perceived independence in such situations is a challenge.

Another challenge for us is the indiscriminate targeting of civilians in armed conflict, which is contrary to the provisions of international humanitarian law and affects both civilians and our personnel responding to their needs.

How our acceptance, security and access are affected

As demonstrated during the war with Lebanon in 2006 and the ongoing conflict in the surroundings of the Gaza Strip, the civilian population is the target of mortar shells, rockets and missile attacks. These low-precision weapons affect civilians in the very places where they live. MDA facilities, staff and volunteers are also exposed to the shelling; for example, our station in Sefad was hit by a rocket in the summer of 2006. When responding to emergency calls, our personnel expose their lives to any subsequent attacks.

Another scenario in which our personnel are especially at risk is one involving indiscriminate acts of violence or terror, particularly suicide bombings. Such attacks are often not isolated, with a second (or third) attack deliberately targeting the people coming to the rescue of the victims of the initial attack.

Two ethical issues come into play when responding to a terrorist attack. The first issue is that the perpetrator (or the second perpetrator) might be a casualty, who deserves the same level of care as any other casualty on the scene, of course only from the moment when he or she ceases to present any risk to the team members. This is a real test in real life of the Movement’s Fundamental Principles and our ability to apply them.
The second issue is the level of acceptable risk to be taken by responders. A scene following an explosion deliberately targeting civilians poses great risks to the responders – from the risk of a secondary attack to the risk of unexploded ordnance on the scene, which might be triggered by someone accidentally stepping on one of them. This ethical dilemma equally exists during “wartime” scenarios, when our personnel respond to scenes of missile attacks, where unexploded ordnance is a typical feature of the scene and there remains the risk of a subsequent missile attack.

**What we did and learned**

In the light of the difficulties and dangers encountered in carrying out our work, MDA has taken a number of specific actions and measures in line with those proposed in the Safer Access Framework. They include:

**Identification**
- Addressing the issue of its actual and perceived independence, MDA makes sure that the uniforms and personal protective equipment used by our personnel are clearly distinct from those of, say, the Home Front Command and the army medical service.

**External communication and coordination/Acceptance of the organization**
- Educating the relevant authorities with regard to the role of MDA and its need to apply the Fundamental Principles that guide its activities and ensuring that the public is aware of the impartiality and non-discriminatory nature of its activities are other key aspects of its work.

**Acceptance of the individual**
- The need to care for the emotional well-being of our volunteers and staff is a key responsibility of the organization’s management. This is addressed on a daily basis, in the light of the difficult situations faced by our responders. Such situations include attending to the victims of violence, the deaths of children, emergency situations and mass casualty incidents such as major transportation accidents and structural fires, indiscriminate acts of violence or terror and armed conflict scenarios, where scenes of horror predominate.

**Operational security risk management**
- We have invested large sums of money in building shelters at all our facilities, including sheltered operations centres, with the capacity to work even during an attack by weapons of mass destruction. We also provide all our staff and volunteers with personal protective equipment, designed to protect them from both blasts and chemical agents. They are stored in our ambulances at all times.
- In the event of an indiscriminate act of violence, we have developed special procedures with regard to the amount of resources to be deployed to the scene, the distances our responding personnel maintain from each other, and the time spent on the scene. The reality of these incidents does not allow waiting for the situation to be safe before responding since by that time, casualties may have died. These procedures comprise part of the normal training curriculum and continuous education programme of the responders, and are also tested and reinforced in simulation exercises.
- With regard to the previously mentioned ethical issues, the stand adopted by the MDA is that in order to save others’ lives, our staff and volunteers will take the risk of entering the site of an explosion in order to rescue victims (according to parameters set with bomb disposal experts), even when the site has not yet been declared “safe.” These parameters are set in advance, and our National Society staff and volunteers act accordingly before the bomb disposal experts arrive at the scene. If necessary, the bomb disposal experts will adopt additional measures that they consider appropriate to the situation on site. We have adopted this approach because the lengthy time it takes to declare a large site of an explosion “safe” may mean the loss of lives that could have been saved if they had been evacuated sooner. This ethical decision is being put into practice with every single incident involving indiscriminate acts of violence or terror to which we respond.
- Working under fire and responding to major incidents of violence entails looking after not only the physical well-being of the staff and volunteers but also their emotional well-being. This is done through specific exercises incorporated into overall training programmes, as well as systematic debriefing and follow-up after an incident.