

# *Civil-Military Collaboration for health emergency preparedness*

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The role of military assistance in responding to natural disasters including accidental or deliberate incidents related to biological and chemical has been long established. While the military has historically not been involved in as a potential partner in responding in natural outbreaks, the engagement of militaries in the response against the covid-19 pandemic at national and international levels illustrate clearly the advantages of the implementation of a civil-military health collaboration system against pandemics.

## **The comprehensive approach**

The scale and the complexity of nowadays emergency situations such as biological threats, chemical deliberate or accidental incidents, hybrid attacks and natural disasters following climate change have shown the urgent need for building and strengthening partnership between the public health sector and non-traditional health stakeholders such as the military institution in a framework of an intersectoral and a multi-institutional approach and based on a comprehensive approach.

The comprehensive approach (CA) is a way to achieve a common understanding and approach among all (interested) actors at

national level, it requires actors to work together with a shared sense of responsibility and openness, considering and respecting each other's strengths, mandates, roles, and decision-making autonomy [1]. In other words, the Comprehensive Approach is not hierarchical but rather a collaborative effort among equals.

From a pure military perspective, the North Atlantic Treaty Organization (NATO) is very different in this regard. It views civil-military cooperation as essentially about achieving military goals [2]. CIMIC activities, however, serve the military mission, follow military priorities, and focus on reaching political goals, thereby deviating from humanitarian principles of humanity, impartiality, neutrality, and independence. Over time, NATO has adopted the belief that military operations sometimes must be integrated with civilian and political elements to achieve lasting peace and stability in fragile regions. This comprehensive approach (CA) sees military operations as Joint and comprehensive enterprises. Still, the achievement of military interests remains key in this approach [3].

## The Need for a Military- Civil partnership

The civil-military collaboration (CIMIC) must be established earlier before emergency situations occur through a joint capacity building in the framework of a national response plan against health emergencies and at each phase of it, joint vulnerability assessment and prevention, preparation plans, joint response action and a national resilience global approach.

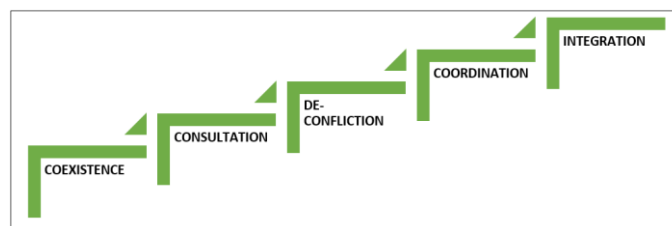
But why is there a need for CIMIC? Several military strength points must be highlighted:

- Terrain deployment expertise and experience
- Medical logistics: Equipment and capabilities more available
- Nuclear, Radiological, biological and chemical (CBRN) expertise
- Well trained personnel on disaster and on situations of exception
- Rapidity of deployment and means to access hostile environment

## Levels of Interaction

Levels of interaction between civil and military stakeholders can go from coexistence (the lower level of collaboration) with no interaction at all to integration (highest level of collaboration) defined as the process of operating together to achieve a unified end state. Integration represents the maximum level of interaction between two actors, which involves working to plan and execute mutual actions within a common engagement space [3]. For example, civil and military authorities form an integrated staff to plan and synchronize military and non-military

activities to plan a military operation and mitigate the impact on civil society.



**Figure 1:** Levels of Civil-military cooperation

## Areas of collaboration

The WHO National civil–military health collaboration framework for strengthening health emergency preparedness- 2021 outlines key aspects and linkages to related technical areas that countries need to take into consideration preceding civil–military health collaboration for capacity development at the national and subnational levels [3]. Six key aspects were identified:

1. Historical, political, social and legal context
2. Health emergency versus national state of emergency
3. National disaster management
4. Public health emergency operations centre (PHEOC)
5. Emergency medical teams (EMTs)
6. Chemical, biological, radiological and nuclear (CBRN) emergencies

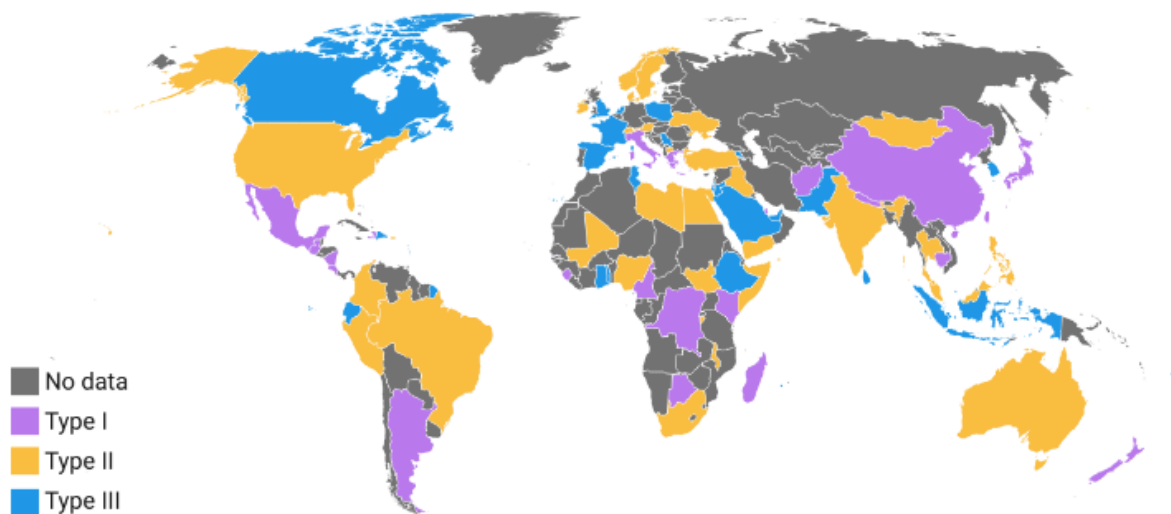
## Civil-Military cooperation in Tunisia: Level of collaboration

Analysis of two main features of civil military collaboration:

- Integrated trauma system
- Covid 19 pandemic collaboration

## Global Landscape of Civilian-Military Trauma System Integration

5 key domains were measured: patient care, education/training, formal partnerships, global health engagement, and communication. Countries were classified into three tertiles based on survey response scoring, ranging from Type I (least integration) to Type III (robust integration).



Map: Lisa Charlotte Rost • Source: GeoNames (areas) & UNData, 2016 (population) • Created with Datawrapper

**Figure 2:** Global landscape of civil-military Trauma system integration [6]

### Integrated trauma system related to terrorist attacks

Civil-military collaboration within the framework of the terrorist attacks in Tunisia was manifest through the integration of the civilian hospitals in the roles of medical care system. In several cases, military medical teams worked jointly with civilian colleagues within Regional public health hospitals, the equivalent of field hospital Role 2 (NATO terminology for combat surgical hospital). The integration of university military hospitals and prehospital emergency medical system (EMS) to the national public health system allowed military ambulances to participate and evacuate casualties to military hospitals during terrorist attacks in town. The Integrated Military Partnerships and Civilian

Trauma Systems (IMPACT) Study [6] aimed to understand the function and capabilities of military trauma systems, and the level of integration that may exist with civilian trauma systems. Tunisian civil military collaboration in Tunisia was categorized level 3 (robust integration). The study measured 5 key domains: patient care, education/training, formal partnerships, global health engagement, and communication. Countries were classified into three tertiles based on survey response scoring, ranging from Type I (least integration) to Type III (robust integration) Figure 2.

### Civil military collaboration within the covid-19 pandemic

The efficiency of the Tunisian National response against the covid 19 pandemic was in a huge part possible thanks to the tight and strong

collaboration between civil and military medical sectors. This collaboration was made possible because of a long collaboration history between the two institutions.

CIMIC experiences and analysis included areas such as political framework, strategy, structure, nature of civil-military interaction and concrete mission reports [5]. Themes covered a broad spectrum of pandemic disaster management subjects such as capacity and surge capacity building, medical and pharmaceutical logistics, patient care under austere circumstances, SARS-CoV-2 testing support, intelligent and innovative information management, vaccination support, and disaster communication. In Tunisia, several cimic features are to be cited:

- The joint steering committees at strategic level
- Daily sharing of information, data and reports
- Effective communication channels
- Deployment of field military hospitals for civil patients
- Activation of the Tunisian taskforce against biothreats and decontamination teams to repatriate Tunisian to homeland during quarantine periods and global shut down
- Deployment of the mobile laboratory of microbiology for covid19 tracing tracking and testing
- Joint vaccination campaigns
- Logistics Management of equipment sets and capabilities, oxygen and personal protective equipment through joint committees
- Joint training and workshops

- Joint participation for validation of national response plans against pandemics

## **CONCLUSIONS**

Since 2018 the WHO has urged states and governments for a strong Civil-military collaboration to establish an integrated health system against emergencies. Tunisia has achieved huge step towards integration level of CIMIC thanks to a long history of joint work and the establishment of CIMIC integration tools. Further studies are needed to assess vulnerabilities and shortfalls, and additional steps are needed to convince all stakeholders, decision and policy makers to prioritize the CIMIC integrated health system.

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