TIM HOFF: Welcome to another episode of the Author Interview series from the American Medical Association Journal of Ethics. I’m your host, Tim Hoff. This series provides an alternative format for accessing the interesting and important work being done by Journal contributors each month. Joining me on this episode is Professor Martin Bricknell, a Professor of Conflict, Health and Military Medicine in the Conflict and Health Research Group at King’s College London and a former Surgeon General of the United Kingdom Armed Forces. He’s here to discuss his article coauthored with Drs David Whetham, Richard Sullivan, and Peter Mahoney, *How Should Access To Military Health Facilities Be Controlled In Conflict?*, in the June 2022 issue of The Journal, *Health Care In Conflict Zones*. Professor Bricknell, thank you so much for being on the podcast today. [music fades out]

DR MARTIN BRICKNELL: Thank you very much for the opportunity to discuss our paper.

HOFF: To begin with, what’s the main ethics point that you and your coauthors are making in this article?

BRICKNELL: So, under the Geneva Conventions, military medical services are obliged to treat patients purely on the basis of the severity of their illness or injury without recognition of any other factors that would determine their entitlement to treatment. However, this can present challenges, particularly when military medical units are involved in supporting military operations, and so need to have empty beds for potential casualties arriving in the future. This topic has been an important point of debate over the academic literature in the last 20 years as people have reflected on their experiences in the management of casualties in the wars in Iraq and Afghanistan.

HOFF: And what do you see as the most important thing for health professions students and trainees to take from this article?

BRICKNELL: The first is that military medical personnel are protected persons under the Geneva Conventions, which provides rights and responsibilities of which the principal responsibility is that they are there to care for the casualties of conflict independent of their origin. And their right is that they are entitled to protection under the Geneva Convention from violence from warring parties.

HOFF: And finally, if you could add a point to your article that you didn’t have the time or space to fully explore, what would that be?

BRICKNELL: This topic has become even more relevant since we drafted the article. The ICRC is continuing to publish important guidance documents under the Health Care In Danger Project. And unfortunately, I think that as we find out more about the realities of
the war in Ukraine, particularly the behavior of Russian forces, we will find that these principles contained in the Geneva Conventions are really important to be reaffirmed by the international community. [theme music returns]

HOFF: Professor Bricknell, thank you so much for your time today and for being on the podcast.

BRICKNELL: Thank you.

HOFF: To read the full article, as well as the rest of the June 2022 issue for free, visit our site, JournalofEthics.org. We'll be back soon with more Ethics Talk from the American Medical Association Journal of Ethics.