

Health Care and Ongoing Conflict

Dr Ayman S Jundi, MD MSc DipIMC FRCEM *Consultant in Emergency Medicine, Lancashire Teaching Hospitals NHS Foundation Trust; Clinical Senior Lecturer in Disaster Medicine, University of Central Lancashire; Chairman of the Board of Trustees, Syria Relief*

Introduction

The Syrian crisis will soon be entering its tenth year, and its adverse impact on the delivery of health care to civilian populations shows no sign of diminishing. The conflict has seen health care infrastructure being reduced to rubble, and health care staff driven out, detained, or killed. Contributions of medical relief organisations have been pivotal in maintaining some semblance of a health care system in the war-torn country.

Health care under attack

One of the striking and deeply disturbing hallmarks of the ongoing crisis in Syria has been the deliberate and concerted assault on health care facilities by the Syrian Regime and its Russian backers (1,2). These abhorrent attacks started at the very early days of the conflict, in brazen disregard of International Humanitarian Laws, and continue, with complete impunity, to this day - nearly nine years on (3). And while attacks on health care facilities and infrastructure are not new or unique to the Syrian crisis (2,4), the extent and intensity of these attacks in this conflict have reached levels that vastly exceed anything recorded in any other conflict, previous or current (2).

Early response - Managing war injuries

In the early stages of the conflict, medical relief efforts focused almost entirely on providing immediate response to injuries resulting from military action, such as bullet and shrapnel wounds, blast injuries, crush injuries, burns, and similar conflict-related conditions. A number of Syria-focused relief organisations, like Syria Relief (www.syriarelief.org.uk) and UOSSM (www.uossm.org), as well as several other organisations in and outside the UK, tried desperately to set up, fund, and supply emergency response centres, forward medical points, and trauma centres, and made concerted and impactful efforts to provide training and professional support for medical staff who had little or no previous exposure to war injuries. Both above-mentioned organisations relied heavily on the Syrian health care professionals working in the UK, through

professional links with the Syrian British Medical Society (SBMS), in delivering training, professional support, and funding for their fledgling medical relief efforts on the ground.

Widening focus

As the conflict dragged on, and as the systematic degradation of the health care infrastructure continued and escalated, the demand for trauma care continued and, indeed, intensified. At the same time, there was a growing recognition that some resources need to be allocated for the management of chronic conditions and other “normal” illnesses that are not related to the conflict, as facilities providing care for those conditions became increasingly dysfunctional and extremely hard to access.

Relief organisations involved in the delivery of health care on the ground became increasingly aware of the serious shortages of provisions of primary health care, public health, peri-natal care, family planning and chronic illnesses to civilian populations and displaced communities. Organisations like Syria Relief and UOSSM actively sought to address these shortages, by setting up Primary Health Care centres, which acted like large “polyclinics”, providing primary and managing long-term chronic illnesses, from diabetes to chronic respiratory and cardiovascular conditions. Funding was secured by canvassing large international NGOs who have been raising funds for Syria. These international NGOs found in such projects, which were implemented by the aforementioned Syrian relief organisations, a useful and legitimate means to utilise the significant sums that they have raised, but were unable to use directly for projects inside the war-torn Country.

Public health concerns

In addition, numerous important programmes were launched, including several mass vaccination programmes to ensure that civilians, especially children, in displaced communities build the necessary immunity to protect these communities from the dangers of rampant outbreaks

of infectious diseases. The crucial importance of such programmes became all too clear with the outbreaks of serious diseases that have not been seen in Syria for decades, including polio, measles, and TB. Importantly, the impact of these high-quality, professionally organised and run programmes was manifestly clear, as they brought those outbreaks under control, thus saving hundreds of thousands of civilians from serious illness or even death.

Mother and baby

The availability of proper and accessible peri-natal care is essential for a healthy pregnancy, healthy delivery, and healthy development of the new-born baby. With the destruction of the health care infrastructure, viable alternatives were in high demand, and the medical relief organisations had to step up their actions. Consequently, utilisation of existing expertise of local midwives, based in newly set-up Primary Health Care centres, were the natural response to the crisis. Subsequently, resources were directed to setting up specialist maternity hospitals, incorporating Special Baby Care Units with incubators, along with the specialist expertise of local obstetricians, paediatricians, midwives and paediatric nurses.

Caring for Body and Mind

It is not difficult to imagine the distressing impact of the ongoing conflict on mental health in affected communities, especially amongst vulnerable sections of these communities, such as children and the elderly.

Efforts to address this immensely important problem started at the very early stages of the conflict, and have continued and developed ever since, with the immense dedication, commitment and sacrifices made by a group of psychiatrists and psychotherapists, through the main relief organisations working on the ground.

Knowledge transfer and capacity building

Effective management of war injuries requires specialist expertise and highly refined skills, and such precious resources were not readily available amongst the relatively inexperienced staff on the ground. Syria Relief, UOSSM, and the SBMS joined forces to organise specialist training courses for health care staff, and sought help from world-renowned experts in the field. Among many other essential topics, these courses covered immediate management of traumatic injuries, long-term management of spinal injuries, management of chemical attacks, emergency obstetric management, and Surgical Treatment in the Hostile Environment, which is a highly-acclaimed course run in co operation with the David Nott Foundation.

The Syrian conflict created a significant and comprehensive challenge in terms of the delivery of health care to mass casualties, civilian populations and displaced communities.

Maintaining and advancing delivery of health care in these circumstances is fundamentally important, and it requires uncompromising commitment to the humanitarian spirit and a desire to do one's best to help fellow human beings. It also provides an unparalleled opportunity for health care professionals to be part of something amazing!

References

1. Medical Personnel Are Targeted in Syria
<https://phr.org/our-work/resources/medical-personnel-are-targeted-in-syria/>
2. Review of attacks on health care facilities in six conflicts of the past three decades
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5930682/>
3. UN — 60+ Medical Facilities Bombed by Russia-Regime In 6 Months
https://eaworldview.com/2019/11/syria-daily-un-60-medical-facilities-bombed-by-russia-regime-in-6-months/?fbclid=IwAR3WTtwM1kPcFnKGfRnFj7JFNWCNtbEifq_NEGKNSWzkG2SsoQA32h0_44
4. Bosnia: The War Against Public Health
<https://www.ipnw.org/pdf/mgs/1-3-mann.pdf>