

Revival of basic health services in Syria

Waleed Al-Faisal and colleagues (July, 2015)¹ call for an end to sanctions in Syria. Sanctions do have unintended consequences for innocent citizens, but those imposed on Syria have been mostly on weapons and items of dual use, many of which were imposed years before the onset of the present conflict,² including the period of the positive achievements in health care mentioned by Al-Faisal and colleagues. Furthermore, humanitarian items and drugs were exempted from the sanctions.

We believe that the reasons behind the present health-care crisis in Syria are much more complex. Since the beginning of the crisis, there were systematic attacks on health-care professionals and targeting of health-care facilities by the Syrian Government and to lesser extent some armed groups, as a tactic of warfare. According to the most recent report of Physicians for Human Rights,³ 633 health-care workers have been killed and 271 health-care facilities attacked since the beginning of the conflict. Of these, 611 and 243, respectively, were by Syrian Government forces.

Another factor is the improper distribution of available resources. For example, immunisation coverage for poliomyelitis in 2013 was 100% in Tartous Province but only 36% in Deir Azzor province, which is where the first case of the recent epidemic occurred.⁴ Aid agencies are essentially prohibited from sending materials to opposition-controlled areas, the assumption being that they could be used to treat rebel fighters.⁵

Furthermore, civilians' access to health care in certain areas that are under complete siege is almost impossible. The UN's April, 2015, report⁶ on the implementation of Security Council resolutions 2139, 2165, and 2191 cited that 440 000 Syrians live in areas besieged

by government forces, non-state armed groups, and ISIS. The UN was able to reach a mere 0.3% with health assistance.

Improving health care for all Syrians and abiding by principles of medical neutrality should be a priority for humanitarian organisations and the UN, but lifting sanctions alone without providing measures for fair distribution of resources and protection of health-care workers and facilities would be futile and might have its own unintended consequences.

We declare no competing interests.

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