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Terrorism - a health sector response

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Abstract

Terrorism and war are and always have been public health issues. Health professionals are in a unique position to act on this, being able to take a public health perspective on such issues.

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Terrorism and war are and always have been public health issues. Health professionals are in a unique position to act on this, being able to take a public health perspective on such issues.

An open letter signed by the presidents of six of the Royal Colleges - 'health professions on the aftermath of terrorism' - was published in the key health press. It expressed concern 'that all responses should take account of the magnitude and complexity of the problem of combatting terrorism of all kinds and its causes. By virtue of their skills and experience, health professionals should take part in formulating appropriate responses to humanitarian needs in this crisis taking into account lessons learned from the past. In the longer term, building local capacity in the health care systems of affected populations will be an important contribution.'

They ended by urging that, in the longer term 'in formulating foreign policy, governments should assess the effects of their proposed actions on the health and human rights of their own people and those likely to be affected in the wider world.'

The plight of the citizens of Afghanistan, who face a humanitarian crisis of major proportions, has drawn much attention. Prior to the recent military action after three years of severe drought, 5.5 million people were partially or fully dependent on food aid for survival. As winter drew on and lawlessness increased after the departure of the Taliban, the provision of food aid and medicines became ever more urgent. The health system of Afghanistan had virtually collapsed. About 40 percent of immediate needs for medical supplies were being met by aid agencies. The UN predicted dire consequences for health, expecting outbreaks of dysentery, cholera, measles epidemics and increased maternal and perinatal deaths. As ever, women, children and the elderly were particularly vulnerable. The WHO had also warned of a large scale mental health crisis in Afghanistan which was as urgent as physical health problems.

For decades the health status of the Afghan population has been known to be one of the poorest in the world with amongst the highest maternal, infant and under-five mortality globally. The optimistic view would be that the recent conflict will have restored some sort of stability, enabling a concerted effort to reconstruct the country and its institutions. One of the key priorities must be to rebuild a health system capable of meeting the health needs of Afghanistan and its people. The people of course will take the lead in determining what kind of health system will best fulfil those needs. External assistance in terms of funds, expertise, and possibly temporary personnel will be available to support this process.

Health professionals can be involved in a number of ways. These include:

- Looking closely at the causes of terrorism - the ongoing cycle of violence caused by infringement of human rights in the areas of health, education, land and housing. Fundamental problems of injustice and inequality beset many of the poor countries of the world. Availability of resources to relieve poverty and sustain the environment are essential.
- Acknowledging that we live in an interdependent world. Reconnect with the international community in strengthening the UN and maintaining and promoting treaties which increase international confidence and prevent the spread of weapons of mass destruction.

Full information on Medact's work on all these issues can be found on our website www.medact.org or by contacting Medact at 601 Holloway Road, London N19 4DJ, telephone 020 7272 2020, email info@medact.org.