

Physical Rehabilitation Needs and Services for Persons with Injuries and Disabilities

The result of seven years of conflict is an alarming prevalence of injuries and disabilities. The **provision of Physical Rehabilitation** services for persons with injuries and disabilities is inadequate in Syria.

In addition to services, capacity building and training of professionals are also required. Physical Rehabilitation should be given a high priority intervention. Physical rehabilitation is a **continuum of care**: starting in the immediate aftermath of an injury or surgery, it continues through to full social and economic integration into society, including education, work opportunities and freedom from discrimination.

To address this need, **greater knowledge is needed on the profiles and number of persons with injuries or disabilities in Syria, whether they are war-related or otherwise.**

Urgent Concerns

Health system crisis and physical rehabilitation

- Before the crisis, **Syria's health system was inadequate to address injury and disability-related needs.**
- **Prosthetics and orthotics (P&O) services** were lacking in Syria prior to the conflict.
- The protracted conflict has further eroded and overburdened the health system and **large gaps remain in the provision of post-operative rehabilitation care** required by those injured in the conflict. The health needs for war-wounded, including amputations and mental health care, is massive. As a consequence of the conflict, across the country access to healthcare is severely limited, and **less than half of health facilities are operational.**
- Although humanitarian actors have stepped in to respond, **the health sector remains underfunded in the Syrian humanitarian response and the needs outstrip the capacity** and ability of humanitarian actors to access vulnerable populations.
- At country-level, **reliable data is insufficient** to understand the exact scope of the needs and prepare better for this response.

Facts & Figures

- Estimates are that 2.9 million people inside Syria are living with a permanent disability and 30,000 new conflict-related trauma cases per month are leading to thousands of permanent disabilities that will require long-term physical rehabilitation care.⁽¹⁾
- Despite these estimates, reliable data on injuries and disabilities at the whole of Syria level is still unavailable.
- Starting in April 2018, the Whole of Syria Physical Rehabilitation and Disability Working Group, co-chaired by HI, will conduct an assessment across all areas of control to determine the profile and number of persons living in Syria with injuries and disabilities. This assessment will contribute to the Humanitarian Needs Overview for 2019 with accurate data currently missing.

1. Humanitarian Needs Overview (2018), Syrian Arab Republic. Available at: <https://hno-syria.org/>

Physical Rehabilitation services' needs

- In addition to the consequence of **war-related injuries, gaps in non-emergency care, and lack of treatment**, result in a growing number of long-term disabilities, such as when untreated diabetes results in an amputation or complications at birth lead to cerebral palsy.
- Despite anecdotal evidence of such situations, these cases have been difficult to track due to the **collapse of the health care system in Syria and the constant displacement of people due to the conflict.**

Humanitarian workers filling the gap

- Confronted with the rapidly increasing needs for physical rehabilitation services, today in Syria, **too few health actors have the technical capacity to support such work.**
- Pre-crisis, **the number of physical rehabilitation professionals in Syria was already inadequate** to meet existing needs. This **situation has worsened** as many health providers have fled.

Causes of injuries among patients in Syria who received physical rehabilitation and physiotherapy treatment:

Based on HI data collected in 2017 from people in Syria who received physical rehabilitation and physiotherapy treatment, the causes of their injuries were:

- 40% of the beneficiaries were treated because of conflict related (armed violence) injuries,⁽¹⁾
- When the causes and the nature of the conflict-related injuries were known:⁽²⁾
 - 49% were caused by explosive weapons;
 - 11% caused by mines, booby traps and IEDs;

- 46% of conflict-related victims will live with a long-term disability caused by either an amputation, a PNI – peripheral nerve injury – or a spinal cord injury – (a minimum estimate because it does not take into account cases of fractures with complications);⁽³⁾⁽⁴⁾
- 12% of victims are children under 18.⁽³⁾

1. Data obtained from a total of 22,529 beneficiaries people in Syria who received physical rehabilitation and physiotherapy treatment with the support of HI and its partners, between Jan 1 and December 31 2017 [2017 total caseload].

2. Data based on HI 15,559 individual assessments examined from the total list of 2017 beneficiaries.

3. Data based on the information collected from 4,848 assessments which identified the causes and the nature of the injuries.

4. Note: total % superior to 100% as possibility of cumulated types of injuries.

■ After years of protracted crisis, the nature of the **work of physiotherapists has also changed**: they frequently see patients without a doctor's referral or diagnosis, and often are required to treat complex cases, including poly-trauma, for which their training has not prepared them.

■ Filling in for missing qualified and trained physical rehabilitation professionals, other workers have acquired or developed unique technical skills essential to the delivery of physical rehabilitation services. If, in the evolving Syrian context, these workers are unable to continue to perform this role as areas of control change, this will result in a new gap which will negatively impact services to all Syrians.

■ When circumstances change, these professionals must be allowed to continue their work in all its forms, if this is their choice. With their continued presence, and protection, populations in need can be assured that essential services will be maintained.*

■ Due to the circumstances in Syria, the large cadre of paraprofessionals rehabilitation workers who have received informal or ad-hoc training and provide services, have rarely been exposed to the level of teaching required. Additional training opportunities for them are also needed.

Understanding the needs

■ In order to address these urgent needs, it is imperative to understand both the needs and the gaps within the health care system. Integrating rehabilitation services into the health service is an important consideration to factor in at this stage of the crisis. This is necessary for the future Syrian health care system to have the necessary rehabilitation services, staffed by well-trained professionals who are already incorporated into its structures.

■ To address this need, the Whole of Syria Physical Rehabilitation and Disability Working Group, co-chaired by HI is in the process of preparing an assessment across all areas of control to determine the profile and number of persons living in Syria with injuries and disabilities. It will contribute towards the Humanitarian Needs Overview 2019, to allow relevant stakeholders and actors to know the level of needs in Syria and to respond appropriately with targeted interventions.

Immediate recommendations

Donors should:

- Support the capacity and resources needed to conduct a Whole of Syria assessment on the profiles of injuries and disabilities in order to have a more accurate understanding of disability-related needs in Syria.
- Ensure that rehabilitation services are an integral component of the response and encourage non-

specialised actors to develop their technical capacity and maintain standards of quality in relation to physical rehabilitation.

- Prioritise the protection of civilians, including humanitarian actors and the continuity of the services they are delivering, such as physical rehabilitation services, as an essential component of humanitarian access.*

* See also HI (2018), *Issue Brief Syria, Humanitarian Access, Continuity of Service, and Protection of Humanitarian Workers*.