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Restoring medical services in Kosovo will be a massive task

Tessa Richards, *BMJ*

Re-establishing medical services in Kosovo is going to be extremely difficult, Bruce Laurence, medical director of Medical Emergency Relief International (MERLIN), warned last week. "The scale of destruction has been large and has been made worse by the retreating Serbian forces. We are also concerned that the medical facilities in Kosovo may have been particularly badly affected. The experience of aid agencies working in Nicaragua and Mozambique is that medical services and health-care professionals tend to be prime targets in ethnic conflicts."

Over 830 000 ethnic Albanians have fled Kosovo since the end of March 1999. Of these, over half are in Albania. Most of the refugees are women and children but there are also many elderly people. Although their desire to return home as soon as possible is evident, the United Nations High Commission for Refugees is recommending that they do not go back immediately.

"Aid agencies need time to secure water supplies (and there have been unconfirmed rumours about some of these being poisoned), adequate sanitation facilities and food sup-



Kosovo medical services: huge aid input is needed for the returning refugees

plies," said Dr Laurence. "To do this the agencies are going to need further support from the international community. The response has been massive but continuing to provide humanitarian aid presents a considerable challenge. Furthermore, it is not only in the Balkans that support is needed; comparable atrocities have been committed in Sierra Leone and Angola."

The medical aid that agencies are providing to the refugees, said Dr Laurence, is different from that which they are used to providing in developing countries. "There, the main medical problems among refugees are malnutrition and infectious diseases, and mortality is high. In the current crisis, there has been little change in crude mortality, and we are mostly dealing with simple acute primary care illnesses and poorly controlled

chronic diseases, such as diabetes, hypertension, asthma, and heart failure in a population that until recently has had relatively high standards of medical care. A key issue for aid agencies, therefore, has been to determine what level of services to provide."

In the past few weeks attention has been drawn repeatedly to the psychological effects on refugees of their traumatic experiences, including reports of systematic rape of Kosovar women by Serbian troops.

"We are undoubtedly seeing some people who have been severely traumatised by recent events," said Dr Laurence. "These people need help. But I do not believe that flying in teams of psychiatrists and counsellors is a priority. We need to continue to meet the refugees' immediate needs first, which are not

primarily for medical services."

"Meanwhile, we think the most effective way of alleviating stress is to keep them fully informed, involve them fully in decisions about how the camps and collective centres are run, and provide social support to vulnerable groups and education and activities for the children."

In most conflicts in developing countries a lot of basic assessment and treatment is provided by nurses. In the Kosovo crisis, by contrast, medical care has been very much in the hands of doctors.

"Albania has overproduced doctors for some time and over the past few weeks has seen an influx of international medical staff," said Dr Laurence. "There has been a similar influx of aid agencies. Some 200 are operating in Albania at the moment and the challenge has been to coordinate the response, promote collaboration, and avoid undue competition. In the first few weeks it was chaotic as agencies scrambled to establish a role for themselves."

MERLIN has two main programmes running in Albania: one in Fier, where it is setting up medical services for a US built refugee camp, and another in Korçë, near the Albanian border. □

The email address for MERLIN is hq@merlin.org.uk. Websites useful for following the crisis in the Balkans, and the international response to it, are www.who.ch/eha and www.reliefweb.int.