



SYRIAN AMERICAN MEDICAL SOCIETY

Annual Report 2016







CONTENTS

Message from the President	2
Message from the Foundation Chair	3
About SAMS	5
2016 Year in Review	6
SAMS Medical Relief Work	9
Syria Programs	10
Jordan Programs	18
Lebanon Programs	22
Turkey Programs	27
Greece Programs	29
Attacks on Healthcare	30
The Siege of Madaya & SAMS's Response	32
Crisis in Aleppo & SAMS's Response	34
SAMS Global Response	36
SAMS Funding	38
U.S. Work	40
Advocacy	45
Media	48
Awards & Recognition	50
Testimonials from SAMS Volunteers	51
Boards	54

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MESSAGE FROM THE PRESIDENT

Dear SAMS family,

This year, SAMS provided 3 million medical services and contributed to the medical education of 1,000 healthcare professionals, doubling its impact in less than 2 years.

Four months before he was killed in an airstrike, Dr. Hasan Al-A'raj and I traveled to Geneva to advocate for the protection of patients and healthcare workers. The innovative cave hospital model was his dream coming true. Later, and only a few yards out of the hospital he helped build, a missile struck his car. His humanitarian legacy continues to inspire us. In 2016, we lost one health care professional every two weeks. Despite the horror, the stress, and the destruction, most of our heroic medics would greet you with a smile, a smile that represents their resilience despite the besiegement, chemical weapons attacks, and the systematic targeting of healthcare.

In January, while Madaya was being starved to death, and after we reviewed the updates from our field hospital in

“SAMS HAS BECOME ONE OF THE MOST EFFECTIVE AND TRUSTED HUMANITARIAN ORGANIZATIONS.”

the besieged town, SAMS's nurse there told me that he had not eaten for a day and a half.

In the aftermath of each chemical attack we've endured, our team from the field has always taken on enormous risks. With limited personal protection equipment, they expose themselves to danger in order to serve their communities and their values.

Our doctors from Aleppo endured bombing, chlorine gas attacks, siege, and forced displacement; however, they chose to remain in the besieged city to ensure that their communities could access lifesaving care.

These are the true heroes who will rebuild the future of Syria.

Our driving goal for the future is ensuring a stable and prosperous community for the people of Syria.

In 2016, SAMS expanded its academic programs to reach out to more than 1,000 healthcare professionals. We developed weekly virtual rounds, tele-education, online courses, academic scholarships in Europe, and hands-on training for new physicians seeking further training in the United States as well as besieged medical professionals who are delivering quality medical care under difficult conditions. As we look towards the future, we are expanding our academic platform and launching joint projects with world class academic institutions in the United States, Europe, and Middle East. SAMS is now part of the The Lancet-American University of Beirut Commission on Syria that was established to analyze past experiences and plan a better future.

Last year, we took on another major challenge of strongly positioning SAMS in an international arena. We forged strategic partnerships with international agencies and policy makers in Europe, Asia, and North America. We discussed the current challenges, lessons learned, and our hopes and plans for the healthcare system in Syria. Over the last year alone, SAMS held its session at the World Humanitarian Summit that was attended by the UN Secretary General. We testified at two hearing sessions in Congress, and two hearing sessions at the UN. In the hopes of making meaningful change for the people of Syria, we challenged the status quo.

Our mission of building an **international, inspiring, and impactful** team of dedicated humanitarians and medical relief workers is paying off. SAMS has



become one of the most effective and trusted humanitarian organizations. Its membership tripled to more than 1,000 members in 2 years. More than 800 volunteers joined our medical missions in the last year alone. We also grew the number of our medical staff to more than 1,700 health care professionals. This growth and capacity building allowed us to triple our donor base and to double our impact in 2016 to provide three million medical services across five countries.

Now, we are setting our vision on the **SAMS2020** strategic plan for the next few years. Together, we can expand our teams, our goals, and our reach. Together we will continue to serve our values and build a brighter future. Together we can make history.

It has been a tremendous honor to be a part of the SAMS family. Your passion, support, and sacrifice continues to inspire us. SAMS will always serve the people of Syria and elevate their voices.

For me, the public service is a trust, given in faith and accepted in honor.

Thank you for placing your trust in us as we strive to be a leading humanitarian organization.

Ahmad Tarakji, MD
SAMS President

MESSAGE FROM THE FOUNDATION CHAIR

Dear volunteers, supporters, staff, and donors,

When we set out to budget for the year 2016, we had little idea of the enormity of the challenges the coming year had in store for us. We had an ambitious goal of nearly 30 million dollars and a solid plan to expand our operations in multiple locations throughout Syria, Lebanon, Jordan, Turkey and Greece. Our main objective was to derive two thirds of our budget from grants and one third from private donations. Our objectives were tested by what would be most challenging year we have experienced over the past six years of the Syrian conflict. We faced hurdles including issues with capacity building, local regulations, and the devastating loss of healthcare workers, medical centers and grants.

Despite the grim realities of 2016, our leadership looked to post-crisis recovery and building resilience, in addition to providing humanitarian medical relief to those in need. We held our first conference on post-crisis recovery in Qatar in March in collaboration with the World Health Organization, Johns Hopkins University and the Qatar Red Crescent (QRC). This meeting became the nucleus for further ongoing collaboration between our organizations.

As the crisis entered its sixth year in 2016, we, among other organizations, realized that the humanitarian burden was more than what any organization could tackle alone. Therefore, we established multiple avenues of collaboration with many international and Syrian NGOs. These collaborations led to building a solid platform for many educational and humanitarian projects in Syria and neighboring countries.

In April, the SAMS Foundation launched SAMS Global Response to address the pressing humanitarian needs of refugees and asylum seekers in Greece and beyond. The program initially focused on refugees arriving to Lesbos and the Greek/Macedonian border and was a tremendous success. We



were able to finance it without affecting any funds going to the displaced in Syria and neighboring countries. SAMS was trusted by the UNHCR to operate clinics in four different camps in Thessaloniki, Greece. We were grateful for the support from all of our volunteers who joined weekly medical missions to Greece and contributed to the establishment of a solid primary health care network that was honorably summarized in *The Lancet's* November 12, 2016 issue.

Unfortunately, amongst our incredible successes and accomplishments, we were devastated by the loss of our dear friend and colleague, Dr. Hasan Al-Araj, who lost his life in an airstrike that targeted his car as he was leaving the fortified hospital that he helped us build in Hama, Syria. Dr. Al-Araj was an esteemed cardiologist and humanitarian who was instrumental in building a robust medical network in Hama province. He was among eight healthcare workers we lost last year.

We faced our most significant challenge in eastern Aleppo, when the city became besieged in August of 2016.

"WE WERE LUCKY THAT MANY OF OUR HEALTHCARE WORKERS SURVIVED, AND SEVERAL REMAINED TO CONTINUE TREATING PATIENTS OF EASTERN ALEPPO."

Despite all of our preparations, the ferocity of the aerial bombardment campaign over the city during the siege was unprecedented. Due to unrelenting attacks, several of our healthcare workers lost their lives, and a number of our medical centers were bombed out of service. Nevertheless, we were lucky that many of our healthcare workers survived, and several remained to continue treating patients of eastern Aleppo. We were also able to help in the evacuation process that occurred in December.

Our medical missions have undoubtedly been a highlight of our relief efforts

in a difficult year. We embarked on 13 medical relief missions to Jordan, Lebanon, Greece, and Turkey in addition to four training missions in Turkey. Our medical missions provide basic primary care services in addition to specialty procedures such as reconstructive surgery, orthopedic surgery, urology, and eye surgery. The SAMS Foundation specialized in healing hearts last year; for the first time in January, our volunteer physicians successfully performed cardiac catheterization during our medical mission to Jordan. In July of 2016, we performed open heart surgery in hospitals of Amman for the first time during a medical mission. The impact of such procedures are multilayered: by touching the life of even one refugee, we can touch the lives of many members of his or her family.

Last year, we improved the lives and health outcomes of over 3 million Syrians by supporting more than 2,400 healthcare workers in 192 facilities across the country. We did this with the average of \$7.97 per life saved. We introduced many programs such as endoscopy in Syria and Turkey, a mid-



“WE WERE ABLE TO OVERCOME OBSTACLES AS A COHESIVE TEAM THANKS TO YOUR GENEROSITY AND CONTINUOUS SUPPORT.”

wifery school in Aleppo, a laboratory and anesthesia school in East Ghouta, cardiac catheterization and open heart surgery in Jordan, and four new programs in Lebanon. Our budget, as well as our number of beneficiaries, have both doubled in less than two years.

Throughout 2016, we received donations from many private foundations and United Nations relief agencies. However, we were challenged by holds on many grants due to security challenges experienced by our international NGO partners. These challenges fueled our determination to become a prime

recipient of grants from government agencies, and we are continuing to build capacity toward that goal.

As the greatest humanitarian tragedy of our generation enters its seventh year, we are forging ahead with the SAMS 2020 strategic plan set forth by our SAMS Board of Directors. We are updating our bylaws, policies and procedures, and continuing to build a solid monitoring and information unit in headquarters and all our offices. We are also in the process of rolling out our Health Information Data System to all our offices. We are focusing on medical education among the displaced Syrians. In addition, we continue to extend open arms to organizations seeking to partner with us while maintaining the basic principles of humanity, neutrality, impartiality and independence.

Last October, the SAMS Foundation Board of Directors voted to establish the position of Executive Director. We are currently in the process of recruitment for this position. We also welcomed to the SAMS Foundation team Anthony Kronfli, Director of Operations, alongside Dr. Randa Loutfi, Director of Programs, and Safaa Aladham, Director of Finance.

Words fail to fully express our immense gratitude for your support. We were able to overcome obstacles as a cohesive team thanks to your generosity and continuous support. When we asked you to donate, you offered support without hesitation. We ended the year with half of our budget from private donations instead of the one third we had originally planned. We had the strongest end-of-year campaign in our history as an organization. Because of you, we were able to sustain and expand our programs to serve those in need. While we are saddened by the loss of many of our hospitals in eastern Aleppo and our courageous colleagues and healthcare workers in Syria, we are deeply thankful for your heartfelt support throughout the year. On behalf of the SAMS Foundation Board of Directors, and with the utmost gratitude, I say THANK YOU! You have shown the people of Syria that they are not forgotten.

Majd Isreb, MD, FACP, FASN
SAMS Foundation Chairman

ABOUT SAMS

The Syrian American Medical Society (SAMS) is a nonprofit organization that represents health care professionals across the US and beyond. It was established in 1998 to provide networking, educational, cultural, and professional services to its members. SAMS also provides a way to keep members connected to Syria through medical missions, conferences, and fundraising activities. SAMS conducts national and international conferences annually to provide a platform for networking, exchange of ideas regarding best practices, recognition of leaders in humanitarian and medical relief, as well as presentation of scientific research and updates regarding medical work. SAMS takes special interest in Syrian medical graduates and helps them start their training in the US through workshops, clerkship opportunities, and no-interest loans. SAMS is governed by an elected board of directors and has over 1,000 grassroots members who help lead 25 chapters nationwide.

The SAMS Foundation, established in 2007, is the charitable and medical

OUR MISSION

is to save lives, alleviate suffering, advocate for medical neutrality, and ensure a healthier future for Syrians inside Syria, in neighboring countries, and Greece through medical relief and healthcare development.

OUR VISION

is to be a leading humanitarian organization, harnessing the talents of Syrian-American health-care professionals, and channeling them toward medical relief for the people of Syria and the United States.



relief arm of SAMS. Its programs and projects are designed and supervised by dedicated staff members and volunteer professionals in five countries and funded by grants and private donations. The SAMS Foundation implements an integrated model of essential services that emphasizes priority needs, and includes the delivery of medical education, training and financial support to physicians and other healthcare workers. The SAMS Foundation supports hospitals, intensive care units, dental and primary care clinics, birth and newborn care facilities, mobile medical units and dialysis centers. It also provides these facilities with the necessary medications, medical equipment and instruments through procurement and distribution of in-kind donations. The SAMS Foundation operates in seven governorates inside Syria, including besieged and hard-to-reach areas, and serves Syrian refugees in four countries.

Additionally, the SAMS Foundation organizes and facilitates medical missions to Lebanon, Jordan and Turkey,

where licensed volunteer health care providers from the U.S. and abroad can participate in providing training, primary and specialized medical care to refugees in collaboration with local health care facilities and SAMS regional staff. SAMS Global Response (SGR), a new initiative launched in 2016, aims at extending the outreach of SAMS medical missions to countries in Europe that are dealing with an influx of refugees, and other countries around the world where civilians are suffering from conflicts and natural disasters. SRG currently operates in Greece and has led missions to Pakistan and Haiti.

SAMS Medical Relief Program strives to maintain high standards of service delivery, neutrality and due diligence by having appropriate systems, policies and processes in place to manage the funds and resources, and to monitor how they are allocated and used. SAMS staff on the ground continuously prepare for adequate response to emergencies, timely needs assessment, and quick impact projects.

2016 YEAR IN REVIEW



Released the report "Madaya: Starvation Under Siege" to bring media attention to the siege conditions and humanitarian crisis in the town.

Opened the first midwifery school in Idlib, Syria to provide training enabling staff to safely deliver infants under challenging and dangerous circumstances.

Released a new report, "A New Normal: Ongoing Chemical Weapons Attacks in Syria," documenting 161 chemical attacks from the beginning of the conflict through 2015.

Launched our second polio vaccination campaign in southern Syria to provide immunization against polio to children under the age of five who lack access to lifesaving vaccinations. A total of 234,089 Syrian children in Dara'a and Qunaitera received vaccination.

SAMS's Dr. Hasan Al-A'raj, Health Director of Hama, was killed in an airstrike when his car was attacked after leaving the fortified hospital he helped build. Dr. Al-A'raj is survived by his wife and five children.

Launched "Our Fallen Heroes Fund" to bring some comfort and hope in the face of profound loss, aiming to support the families of our fallen heroes who are left behind.

JAN

FEB

MAR

APR

Opened a new rehabilitation center for Syrian refugees living in Beka'a Valley, Lebanon who were affected by the conflict in Syria.

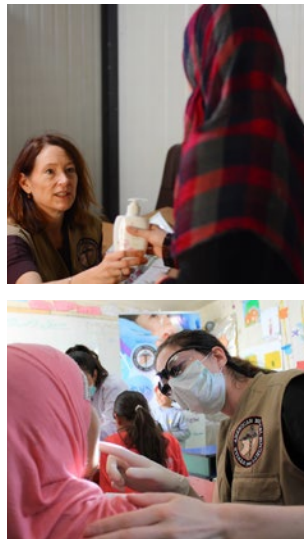
Opened a new GI Endoscopy Center in Reyhanli, Turkey in partnership with Emel Hospital, serving Syrian refugees.

Launched SAMS Global Response to provide medical relief to vulnerable populations and refugees around the world.



Hosted our first international meeting in Doha, Qatar, "Transitioning from Medical Relief to Resilience and Recovery in the Syrian Crisis."

Organized the largest medical mission to date, bringing together 85 volunteers from diverse backgrounds to camps and medical centers throughout Jordan to care for the health needs of both Syrian refugees and Jordanian citizens who have limited access to quality healthcare. SAMS volunteers treated over 6,000 patients and performed 73 major surgeries.



Systematic targeting of healthcare intensified. More than 40 medical facilities and personnel were attacked in Syria in July, or at least 1 attack per day. SAMS-supported facilities were targeted 14 times, with 5 attacks taking place in Aleppo, 4 in Idlib, 3 in Homs, 1 in Hama, and 1 in Dara'a.

Two SAMS doctors, alongside CNN's Clarissa Ward, gave their firsthand and expert accounts of the medical and humanitarian crises in Aleppo in front of the UN Security Council at an Arria-formula meeting.

Three SAMS doctors, Dr. Zaher Sahloul, Dr. Samer Attar, and Dr. John Kahler traveled to Aleppo to provide care to patients and stand in solidarity with their peers in Syria.

Launched "Brave Little Hearts" campaign to symbolize and commemorate the young lives who pay the highest price for conflict. Many children have known nothing but bombing, killing, and destruction. Many, like conjoined twins Moaz and Nawras who passed away in August, never have the chance to grow up.

UN Secretary-General Ban Ki-moon attended a side event organized by SAMS and four other local Syrian NGOs at the World Humanitarian Summit in Istanbul.

In Homs, Syria, SAMS medical personnel delivered healthy quadruplets: two boys and two girls. Each weighed around 3.2kg (7.1lbs).

Organized medical missions to Jordan, Lebanon, and Turkey to provide dignified and quality healthcare to Syrian refugees.

MAY

JUN

JUL

AUG

Launched "Miles for Smiles" mission to Lebanon to provide dental care for 1,053 children across five refugee camps.

Launched our first GI Endoscopy Mission to Turkey.

Released a report, "Madaya: A Portrait of a Syrian Town Under Siege," co-authored by Physicians for Human Rights, illustrating the impact of the siege in Madaya. At the time of the report, two dental students and one veterinarian were the main health professionals left to provide healthcare to the town's 40,000 residents. Dozens of lives were lost due to starvation and lack access to healthcare.

Partnered with the Qatar Red Crescent, Multi Aid Programs, and the International Diabetes Federation for a Diabetes Project for Syrian Refugees. The project covered 2,000 patients each month with free consultation, medication, follow-up appointments, and lab testing. The project reached refugees in Akkar, Tripoli, Sida, middle Beka'a, Rashia, Arsal, and Beirut.

Performed open heart surgeries for Syrian refugees living in Jordan for the first time during a SAMS Medical Mission.





SAMS-supported largest trauma hospital, M10, in besieged eastern Aleppo City was attacked and forced to temporarily close its doors.

On October 3, 2016, SAMS's M10 was bombed out of service, killing three maintenance workers and injuring a nurse and an ambulance driver.

SAMS VP, Dr. Basel Termanini, traveled to Idlib, Syria where he witnessed the aftermath of airstrikes on three schools and a marketplace. Dr. Termanini visited our hospital there, which was overflowing with the wounded and injured.

Organized a pediatric orthopedic surgical mission in Lebanon, providing 57 children with consultations and surgical treatments.

Sponsored six Syrian medical students to attend the Sarajevo School of Science and Technology (SSST) for the 2016-2017 academic year.

Organized a medical mission to Jordan that brought 42 physicians to provide free medical care for refugees in multiple clinics and medical facilities across the country. The team performed more than 21 general and plastic surgery procedures.

Launched a redesigned website in order to showcase our impact, increase our reach, highlight the heroic work of our medics on the ground, and improve our user experience.



Two SAMS doctors joined the People's Convoy, which travels from London to Syria to build a new children's hospital.

Jillian Michaels, celebrity fitness expert, renowned life coach, & author endorsed SAMS.

SEP

SAMS President, Dr. Ahmad Tarakji testified before members of Congress during a Tom Lantos Human Rights Commission hearing on the humanitarian crisis in Syria.



OCT

Organized a cranio-facial medical mission for Syrian refugees living in Reyhanli, Turkey. Volunteers conducted 29 neck and face reconstructive surgeries for patients ages 3 to 73.

Organized the second "Miles for Smiles" mission that brought together 180 volunteers, including 140 dentists, treating 1,200 Syrian refugee children in the Beka'a Valley. This mission was made possible in partnership with Multi-Aid Programs (MAPS), the Kuwait Dental Association, several universities, and other partners.

NOV

In an effort to provide psychosocial support for survivors of gender-based violence, SAMS initiated a project to train staff on Clinical Management of Rape (CMR) and conducted community sessions to raise awareness on GBV.

Organized our first medical mission to Haiti. During the five day mission, our volunteers, led by SAMS's Dr. John Kahler volunteered in four clinics in which they saw over 500 patients, and were able to help 40 new admissions at the Cholera Rehydration Clinic.

DEC

In the face of developments in eastern Aleppo City, SAMS responded immediately to provide medical care to the evacuated patients and bring comfort to their families. SAMS deployed two mobile clinics to the Turkey-Syria border to treat patients, supported five hospitals in Idlib, and sent additional supplies, medication, and personnel to prepare for the influx of patients.

SAMS MEDICAL RELIEF WORK

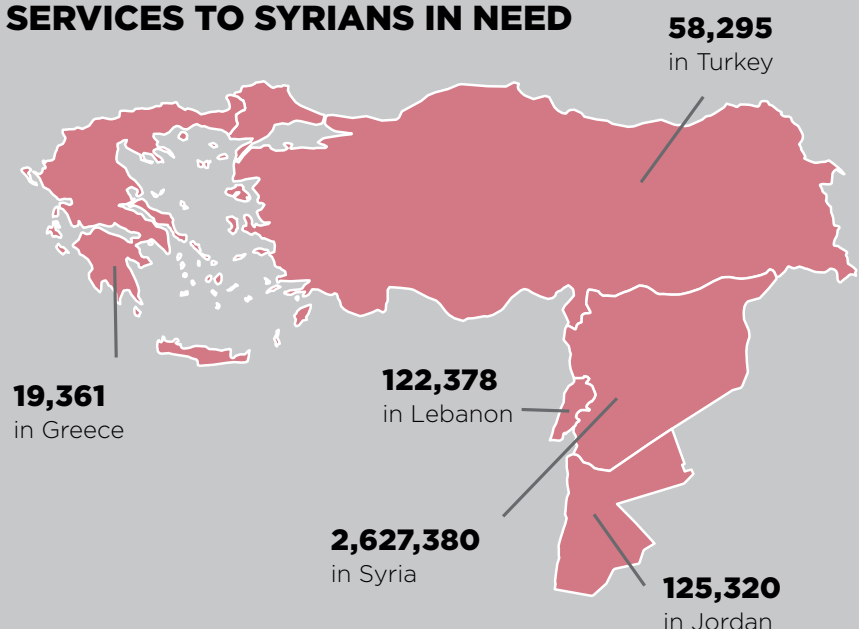
SAMS is one of the most trusted and active humanitarian organizations working on the ground in Syria. **In 2016, SAMS provided more than 3 million medical care services to those in need inside Syria, in neighboring countries, and in Greece.**



In 2016, SAMS expanded its capacity and operations on the ground significantly to meet the growing needs and challenges of the medical crisis in Syria, in neighboring countries, and in Greece. Since the eruption of the Syrian humanitarian crisis in 2011, SAMS has supported healthcare throughout Syria, sponsored field hospitals and ambulances, trained and paid the salaries of Syrian medical personnel risking their lives to save others, organized medical missions throughout the year, and sent lifesaving humanitarian aid and medical equipment to where it is needed most. SAMS also provides dignified medical care to Syrian refugees in neighboring countries and Greece with critical psychosocial support, medical care, and physical therapy programs.

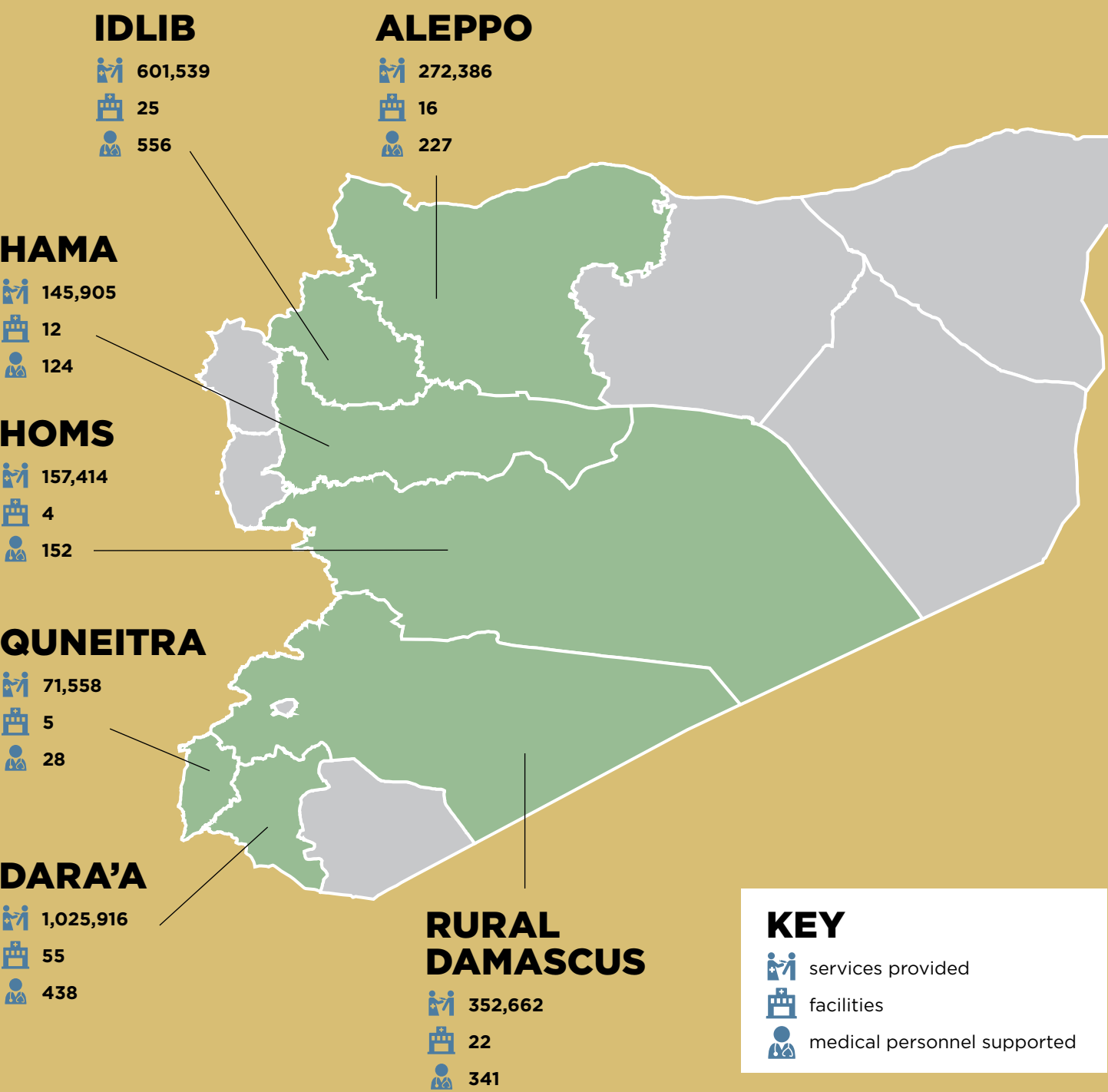
SAMS operates in Syria, Jordan, Lebanon, Turkey, and Greece, providing more than 3 million medical services for Syrians in need.

IN 2016, SAMS PROVIDED MORE THAN 3 MILLION MEDICAL SERVICES TO SYRIANS IN NEED



SYRIA PROGRAMS

In 2016, SAMS supported **139 medical facilities** throughout Syria that delivered essential need-based specialized and general medical care to the sick and injured. In 2016, SAMS provided **2,627,380 medical services** in **7 governorates** across Syria.





AID AND EQUIPMENT DELIVERY

In 2016, SAMS delivered 127 medical trucks—including 21 containers shipped from the U.S. to Turkey—across the Turkish borders to 139 medical facilities inside Syria. In order to keep facilities stocked, well-equipped, and ready to respond to emergencies and provide rapid, life-saving medical care, SAMS supports its facilities and mobile clinics through the delivery of medical supplies, fuel, medications, winterization kits, and medical equipment regularly. SAMS manages a network of warehouses in Syria and the region that facilitates maintaining this support year-round.

- **Fuel:** In 2016, SAMS provided fuel to 94 medical facilities inside Syria. As the aerial bombardment campaign intensified and the siege worsened, medical facilities experienced severe shortages of fuel and electricity. SAMS responded to the crisis by providing its facilities with diesel fuel in order to continue their operations across the country. Without diesel

fuel, operating rooms, ventilators, dialysis units, x-rays, labs, and refrigerators cannot function.

- **Ambulances:** In 2016, SAMS supported 46 ambulances in northern Syria. SAMS ambulances transported the wounded and the sick to receive the lifesaving treatment they need. In December, during Aleppo's evacuations, SAMS deployed seven additional ambulances to receive patients who required additional treatment at different collection points and transport them to designated SAMS-supported hospitals in Idlib with ICU and emergency treatment capabilities.
- **Winterization kits:** During the winter, SAMS provides critical winter survival kits for children and adults living in camps for the internally displaced populations. These kits include high-thermal blankets, plastic sheeting, winter clothes, shoes, sleeping

IN 2016, SAMS PROVIDED WINTERIZATION KITS TO 5,656 SYRIAN CHILDREN, AGES 6-15.

mats, jerry cans, and hygiene supplies. In 2016, SAMS provided winterization kits to 5,656 Syrian children, ages 6-15.

- **Medical supplies and equipment:** In order to ensure that SAMS-supported facilities across Syria are well-equipped to provide quality healthcare and respond immediately to emergencies, SAMS staff on the ground conduct needs assessments on a regular basis. In 2016, SAMS supported 173 medical facilities with medications, blood bags, surgical sets, dialysis supplies and equipment, incubators, X-ray machines, and CAT Scans.

PRIMARY HEALTH CARE (PHC)

In 2016, SAMS provided 1,314,268 PHC services. SAMS has continued to support primary healthcare services that provide basic healthcare for local populations including treatment for communicable and non-communicable diseases. SAMS supports 60 primary care facilities in seven governorates across Syria.

In besieged East Ghouta, SAMS supports six PHC facilities, providing services to 135,246 beneficiaries, including 60,337 children. In Dara'a, 17 PHC

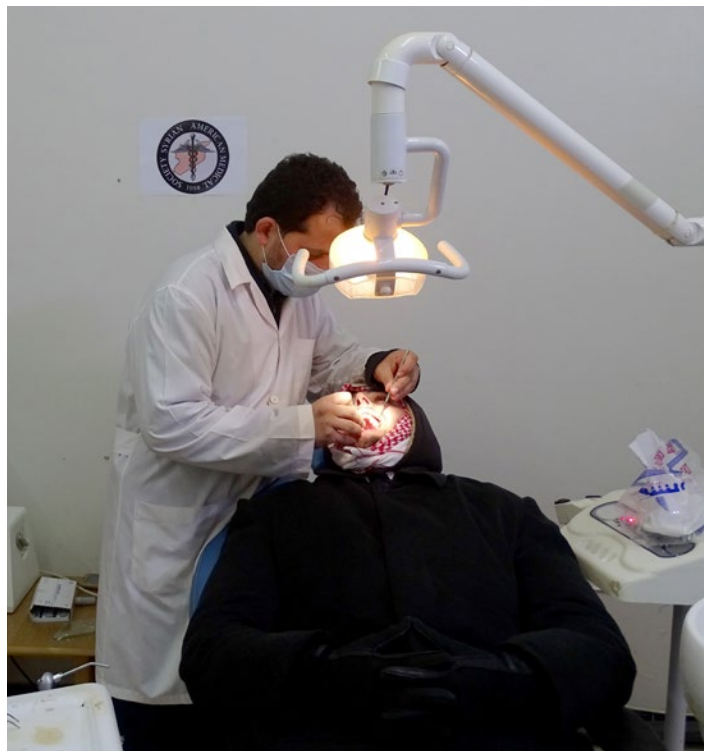
facilities provided services to 281,083 beneficiaries (143,055 females, 137,983 males, and 358,220 children). Services provided included internal medicine, pediatric, ENT, dermatology, urology, ophthalmology, dental, orthopedic, maternity and physiotherapy.

In Quneitra, SAMS supported two PHC facilities, providing services to 27,426 beneficiaries (12,934 females, 14,492 males, and 10,401 children). Services provided included internal medicine, pediatric, ENT, dermatology, urology, dental and maternity.

In Idlib, SAMS supports an ophthalmology clinic that provided 5,201 eye exams and 254 surgeries in 2016. Most common surgeries performed at the clinic were cataract surgery-strabismus surgery and ocular trauma surgery.



PHC SERVICES



DENTAL CLINICS

Access to quality and critical dental care can be difficult in a conflict setting. However, in 2016, SAMS proudly supported 25 dental clinics across Syria, including dental clinics in refugee camps at the borders, providing 70,963 dental care services for children and adults.

DIALYSIS CENTERS

The situation for dialysis patients across besieged areas in Syria is worsening. It has become extremely difficult for thousands of renal failure patients to get the needed lifesaving dialysis treatment because of the sharp decrease in the number of dialysis centers, lack of supplies, and the sieges. Despite all of these challenges, SAMS has continued to support its seven dialysis centers, including the one in besieged East Ghouta, providing 9,628 dialysis treatments in 2016.

DIALYSIS SERVICES



MOBILE CLINICS

In order to be able to provide quality medical care for hard-to-reach populations and those with limited mobility, SAMS has deployed specialized mobile clinics throughout Syria. These mobile clinics are staffed with a pharmacist, a nurse, a midwife, and a general physician. SAMS supports nine mobile clinics, including one dermatology mobile clinic in northern Syria. SAMS mobile clinics provided 110,214 medical services in 2016.

MOBILE CLINICS



STORY FROM THE FIELD

FIRST SET OF QUADRUPLETS IN A BESIEGED CITY

In December 2016, a SAMS-supported OBGYN facility in besieged East Ghouta welcomed its first set of quadruplets. Their parents had fled violence in their hometown of Douma only a few months prior. Sadly, one of their four newborns did not survive because his heart was too weak. Additionally, our medical personnel provided clothes, baby formula, and diapers for the newborns.



REPRODUCTIVE HEALTH CENTERS

Due to the lack of healthcare options available and siege conditions, pregnancy and childbirth in Syria have particular added challenges. In 2016, SAMS supported 66 reproductive

health centers, including 22 centers in northern Syria and 42 in the southern region of the country. These centers offer multilayered treatments including prenatal and postnatal care, neonatal

care, pediatric care, and general gynecological services. In 2016, the staff in these centers delivered 39,327 babies and provided 277,521 reproductive health care services.

INTENSIVE CARE UNITS AND TRAUMA CARE

In 2016, the bloodiest and most dangerous year since the beginning of the conflict, SAMS-supported trauma hospitals provided 920,620 ICU services to critically sick and injured individuals. Twelve ICUs and 43 trauma facilities were overflowing with severely injured civilians, including children and women. One of these facilities was the largest trauma hospital in eastern Aleppo. These centers were able to provide emergency care, utilizing critical machinery such as ventilators, monitors, defibrillators, IV pumps, and other essential consumables. SAMS Intensive Care Units (ICUs) in Syria operate according to standardized protocols, provide patients with access to postoperative and long-term care for comprehensive recovery process.

INTENSIVE CARE



SPECIALTY CARE TREATMENT

In 2016, SAMS supported 2 ophthalmology clinics, 1 orthopedic clinic, 2 physical rehabilitation centers in Rural Damascus and Idlib, and 1 GI Endoscopy center in Idlib.

In besieged East Ghouta, SAMS supports six PHC facilities, providing services to 135,246 beneficiaries, including 60,337 children, in 2016. These services provided included internal medicine, pediatric, ENT, dermatology, urology,

ophthalmology consultations, dental treatments, orthopedic, maternal care and physiotherapy.

In 2016, the GI Endoscopy center in Idlib performed 700 procedures, including 150 Endoscopic Retrograde Cholangio-Pancreatography (ERCP) procedures, and 170 esophageal balloon dilation procedures.

The Termanin Rehabilitation Center in Idlib saw 12,586, including 3,552 children.



STORY FROM THE FIELD RECOVERING FROM AIRSTRIKES

A 35-year-old male patient came to a SAMS-supported hospital in Idlib suffering from multiple shrapnel injuries in his right ulnar bone sustained a few months back in an airstrike that hit his neighborhood in Syria. SAMS medical staff performed the surgery. Three months later, the patient came back to the hospital for a follow-up and was happy to learn that he fully recovered.

PSYCHOSOCIAL AND MENTAL HEALTH PROGRAMS

The Syrian crisis has taken an unimaginable psychological toll on the people of Syria. In 2016, SAMS realized the importance of addressing the psychosocial needs of those affected by the conflict, and expanded its psychosocial programming inside Syria, providing 35,616 psychosocial care services such as screening, group sessions, individual counseling and psychiatric care with medication management. SAMS supports psychosocial centers in Dara'a and besieged East Ghouta, and a telepsychiatry center in Idlib.



PSYCHOSOCIAL CARE



STORY FROM THE FIELD REBUILDING LOST CHILDHOOD

Firas had a normal childhood in Dara'a, Syria until a missile destroyed his house, severely injuring his father and forcing his family to flee. He began feeling depressed because at age 12 he had to drop out of school to sell cotton candy to support his family. He began attending SAMS's psychosocial clinic in Dara'a to help improve his emotional wellbeing. He is a happier child and is even participating in a chess competition. In 2016, 450 children graduated from the SAMS psychosocial program, "Yes, I Can!" in Dara'a, Syria. The program aimed at providing therapeutic mental healing and wellbeing through art.

STORY FROM THE FIELD SEARCHING FOR SAFETY & COPING WITH FEAR

After 5 years of witnessing traumatizing violence, 7-year-old Mohammad was terrified of the dark. Concerned about her son, Mohammad's mother brought him to SAMS's psychosocial center in Dara'a. SAMS's team worked with Mohammad's mother to develop healing therapeutic solutions to help Mohammad cope with his fears and feel safe, even in the dark. Medical specialists followed up with weekly interviews and check-ins with Mohammad and his mother. Two months after therapy, Mohammad was able to sleep in the dark without fear or anxiety. The psychosocial care also had an impact on his family: Mohammad's mother was so relieved and happy to see his improvement.



IMAGING SERVICES, LABS, & BLOOD BANKS

SAMS strives to support the medical staff in its facilities with all means to provide the best care to the beneficiaries. Laboratory and imaging tests are available at different levels depending on the type of the facility and the referrals it receives. SAMS also has agreements with centers in the vicinity that can provide these services if they are not present in SAMS's facilities. By supporting two blood banks across Syria, SAMS ensures that safe and clean blood is readily available for patients in need. In 2016, SAMS provided 293,559 related services inside Syria, including lab tests, blood transfusions, etc.



TELEMEDICINE

When SAMS members cannot be physically in the field to help their Syrian colleagues save lives, they are sharing their expertise while they are thousands of miles away. In 2014, SAMS launched its telemedicine program, an innovative program leveraging technology to provide 24/7 support to the staff on the ground given the limited resources available and the severe shortage of medical personnel and

specialties in light of the continuous and systematic targeting of healthcare. In 2016, SAMS provided 7,930 medical services for Syrians through its telemedicine program covering critical care, radiology image interpretation, guidance for complicated surgical cases, psychiatric evaluation and medication management, and designing the best protocols in dialysis and infection control services.

TELEMEDICINE

5,282
Male



2,648
Female



RECONSTRUCTION AND UNDERGROUND FACILITIES

In order to mitigate risk to providers and patients, SAMS has identified proper locations of facilities to minimize the distance people have to travel to receive healthcare, invested in new fully equipped facilities built underground, while older facilities moved into basements and lower floors, and fortified these floors with additional walls and sandbags. In 2016, SAMS supported 34 underground hospitals in seven governorates. SAMS is currently in the process of rebuilding two more underground hospitals in western Aleppo.



POLIO VACCINATION

In 2016, SAMS launched its second polio vaccination campaign in southern Syria to provide immunization against polio to children under the age of five who had no access to lifesaving vaccinations. In partnership with WHO and UNICEF, SAMS provided polio vaccinations to 234,089 Syrian children, including 208,183 in Dara'a and 25,866 in Qunaitera. Thanks to the success of this campaign, SAMS partnered with UNICEF

VACCINATIONS



and WHO in the Extended Program for Immunization (EPI) which provided vaccines for six childhood diseases.

SUPPORT FOR MEDICAL PROFESSIONALS

In 2016, SAMS supported 1,866 health-care workers inside Syria. SAMS supports its medical personnel and health-care workers, including 272 physicians with monthly salaries to continue their lifesaving mission and support their families.

In addition to financial support, SAMS has established ongoing educational programs for its medical staff on the ground to address the gaps in healthcare provision due to the severe shortages of medical workers and ensure that the staff are up-to-date



with the latest innovations in the field of medicine. In February 2016, SAMS opened the first midwifery school in Idlib to provide training enabling staff to safely deliver infants under challenging and dangerous circumstances. In 2016, SAMS trained 1,093 health care providers who work inside Syria, by conducting training missions in southern Turkey, online courses, custom designed lectures, and case evaluation and discussions via Skype.

PROVIDERS SUPPORTED



SYRIA PROGRAMS IMPACT AT A GLANCE



Medical services provided: **2,627,380**



Medical workers supported: **1,866**



Medical facilities supported: **139**



Convoys sent to Syria: **21**



Primary care: **1,314,268**



Dialysis centers: **9,628**



OBGYN clinics: **277,521**



Dental clinics: **70,963**



Major surgeries performed: **75,996**



Intensive and trauma care: **920,620**



Imaging services, labs and blood banks: **293,559**



Psychosocial programs: **35,616**



Fortified and underground facilities: **34**



Medical workers trained: **1,093**



Telemedicine: **7,930**



Polio vaccinations: **234,089**



Mobile clinics: **110,214**

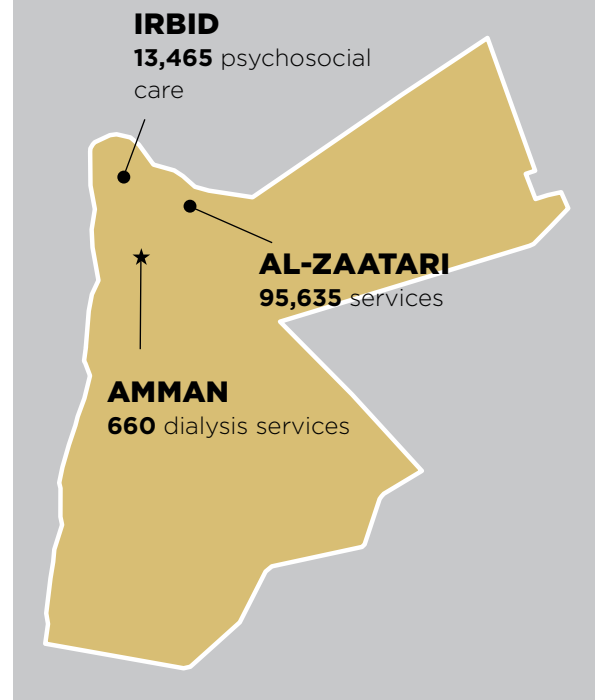
JORDAN PROGRAMS

SAMS operates several medical relief programs in Jordan, providing free medical services to Syrian refugees living in Al-Zaatari camp and urban areas throughout Amman and Irbid. **In 2016, through its Jordan programs, SAMS provided 125,320 medical care services.**

SAMS's regional office in Amman is a hub for its medical relief work in Jordan and in southern Syria.



IN 2016, SAMS PROVIDED 125,325 MEDICAL SERVICES TO SYRIAN REFUGEES LIVING IN JORDAN

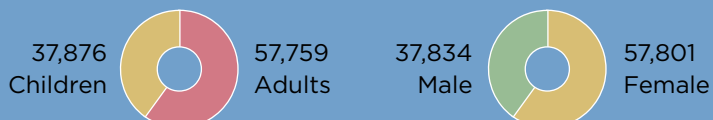


AL-ZAATARI REFUGEE CAMP CLINIC

In Al-Zaatari Refugee Camp, the largest refugee camp for Syrians in the region, SAMS supports the main multi-specialty clinic that provides medical care to an average of 500 patients per day. In 2016, this facility provided 95,635 medical care services to Syrian refugees living in the camp.

The multi-specialty clinic in Al-Zaatari offers internal medicine, pediatric care, general and orthopedic surgery consults, OB/GYN services, dermatology, ear/nose/throat services, ophthalmology, dental care, emergency care and physiotherapy. The Zaatari clinic was also selected by the Jordanian Health Ministry to provide vaccinations for the pediatric population of the camp. Additionally, medical staff travel outside of the clinic to visit patients residing in the camp to ensure that rehabilitation care reaches all those in need.

AL-ZAATARI PATIENTS





PSYCHOLOGICAL AND MENTAL HEALTHCARE

In 2012, SAMS launched its psychosocial program in Amman to address the psychosocial needs for children and adults who had been affected by the conflict in Syria. Since then, SAMS has expanded its psychosocial care to

reach Syrian refugees living in urban areas who have limited access to quality medical programs, in particular psychological and mental care services. In 2016, SAMS provided 13,465 psychosocial care services for Syrian refugees living

in Irbid. SAMS-supported psychosocial programs for children uses art and play therapy such as photography, painting, and creative workshops to help individuals heal and cope with the effects of trauma.

STORY FROM THE FIELD

FINDING PEACE IN DISPLACEMENT

A 36-year-old widow, living in Jordan with her three children, was suffering from acute anxiety and depression. Three years ago, after her husband was killed in an airstrike in Syria, she had to leave for Jordan. She hoped for a safer, peaceful life for her and her three young children. However, the reality was far from what she'd hoped. As a single parent, she had a hard time coping with the situation of raising her children by herself in the camp's extremely dire circumstances. She was psychologically wounded, and struggled to regulate her emotions or have healthy relationships. One day, SAMS psychosocial team in Jordan visited her tent. After speaking with her and learning about her struggles and anxiety, our team suggested that she should join our psychosocial program, "I Want to Live" that was designed specifically to help individuals like her to heal from the effects of trauma and find a way to overcome such hardships. Day after day, the program gave her the tools she needed to cope with her anxiety and depression. She has strengthened her once difficult relationship with her children. Her new behavior has also created a positive change in her children's attitudes. They also participated at a SAMS psychosocial program, "Smart Little Hearts." "As long as I live, I will always be grateful to SAMS for saving my life and my children's life. I am not giving up on life," she told SAMS at the end of the program.

DIALYSIS CARE

In 2014, SAMS established a dialysis program in Irbid to provide Syrian refugees suffering from chronic illnesses and kidney diseases access to lifesaving treatment. In 2016, this program treated five patients, including a 12-year-old Syrian refugee boy. The total number of dialysis sessions provided was 660 in 2016.

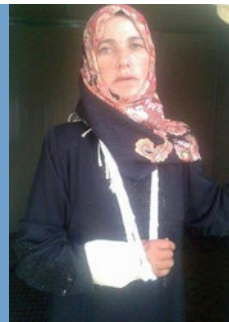
In July of 2016, SAMS started a program to support kidney transplant

patients by providing them with anti-rejection medications. These medications are the lifeline for these patients and prevent the loss of their transplanted kidneys, which will mean going back to the expensive dialysis and even death. This program provided drug level monitoring and periodic evaluation of the patient's kidney function. Thus far, 39 patients benefited from this program.



STORY FROM THE FIELD A LIFESAVING DIAGNOSIS

Tabarak, a mother of six, was diagnosed with cancer in her wrist while living in Syria. The escalating violence in Syria forced Tabarek and her family to flee to Jordan. With limited access to medical care in Al-Zaatari refugee camp, the tumor began to form again. A local physician informed Tabarak that her hand would have to be amputated. However, after conferring with specialists, Dr. Majd Isreb, SAMS Foundation Chair, learned that an amputation was not necessary. Thanks to the work of SAMS medical mission volunteers, Tabarak avoided an unnecessary amputation, and was able to receive the surgery she needed at no cost.



STORY FROM THE FIELD SAVING A FAILING HEART



Ahmad, a 30-year-old Syrian refugee living in Jordan with a failing heart, needed an emergency surgery to save his life. After visiting a number of hospitals, he was told that he needed two heart valves to be replaced. During SAMS's cardiology mission to Jordan in July 2016, SAMS volunteers diagnosed him with endocarditis and insisted on operating on him right away in order to save his life. The surgery was successful. Dr. Tabry, the surgeon who operated on him, visited him a couple of weeks after the surgery for follow-up exams, and was happy to find that the patient was in good condition!



JORDAN PROGRAMS IMPACT AT A GLANCE



Medical services
provided: **109,765**



Medical workers
supported: **37**



Medical facilities
supported: **3**



Primary care: **86,143**



Reproductive care: **9,492**



Dental clinics: **10,576**



Psychosocial
programs: **13,465**



Medical missions
beneficiaries: **15,560**

MEDICAL MISSIONS

Jordan has been the destination for some of SAMS's largest medical missions that attracted volunteers from across the globe with diverse skills in medical, dental, surgical and other health care needs. SAMS organizes and facilitates frequent medical missions to Jordan to provide dignified medical care to Syrian refugees living in camps and across the country. Medical missions are an opportunity for doctors, nurses, members, students and volunteers to provide care to Syrian refugees with limited resources and access.

In 2016, 282 SAMS volunteers participated in eight medical missions to Jordan, including one surgical mission, two cardiology missions, four general missions and one dental mission, treating 15,560 Syrians in need. In April, SAMS organized the largest medical mission to date, bringing together 85 volunteers and treating over 6,000 patients. In July, SAMS volunteers performed open heart surgeries for Syrian refugees for the first time during a SAMS Medical Mission. Medtronics donated the necessary stents for these missions and LDS charities supported the July cardiology mission.



MISSION TYPE	VOLUNTEERS	BENEFICIARIES
General (4)	256	14,459
Surgical	3	45
Cardiology (2)	13	197
Dental	13	859



STORY FROM THE FIELD HEALING HEARTS IN JORDAN

Fatema Mohamad Al Hindi, 76, from Homs, left Syria to Jordan in 2013 after her house was destroyed by an airstrike. In 2015, Fatema started to feel sharp pains in her heart and had trouble walking. While in Jordan, Fatema saw several doctors and was referred to a specialist who recommended a diagnostic catheterization. With no insurance and limited resources, she couldn't afford the treatment.

One of the doctors she saw referred Fatema to SAMS and informed us that she needed an urgent diagnostic catheterization. During our medical mission to Jordan in July of 2016, our volunteers completed her diagnostic cardiac catheterization. During her treatment, it appeared that she needed open heart surgery. Immediately, SAMS's Dr. Omar Latouf prepared her for the surgery, and completed the bypass surgery for Fatema.

LEBANON PROGRAMS



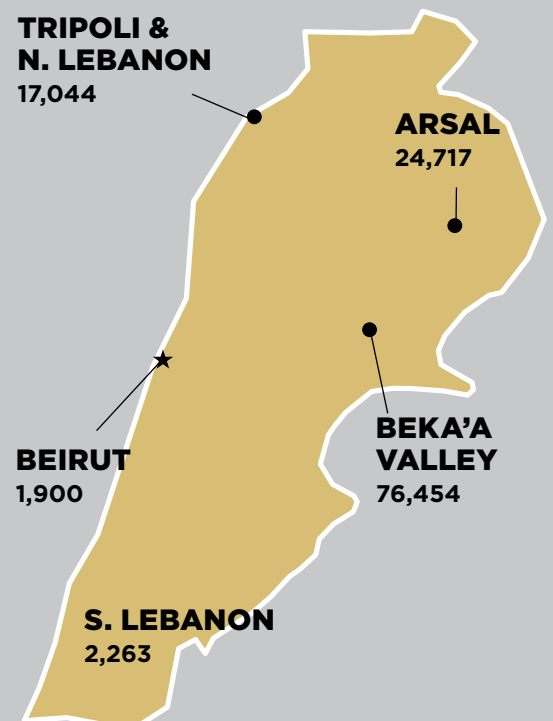
In a recent UNHCR, UNICEF and WFP report on vulnerability assessment of Syrian refugees in Lebanon, 50% of households were found to have at least one member with a temporary or chronic medical need, 41% of children were sick in the two weeks prior to the survey and 25% of those who needed medical care were not able to get it. **In 2016, SAMS's Lebanon programs provided 122,378 healthcare services.**

SAMS responded to the extreme needs by sponsoring multiple medical relief programs throughout Lebanon to support Syrian refugees who have limited access to quality healthcare.

SAMS supports 16 medical facilities financially and with gifts in-kind. These facilities provide primary and multi-specialty health care, including physiotherapy, dental care, internal medicine, reproductive health care, pediatrics, imaging services, ophthalmology, dialysis, psychosocial, and urology and basic lab work. SAMS also operates a surgical center in Tripoli that is open 24 hours a day. This facility provides surgeries in the fields of orthopedics, general, reconstructive, urology, ENT, ophthalmology and gynecology.

In August, SAMS launched "Diabetes Project for Syrian Refugees," in partnership with the Qatar Red Crescent, Multi Aid Programs, and the International Diabetes Federation. The project provided 2,000 patients each month with free consultations, medication, follow-up appointments, and lab testing. The project reached refugees in Akkar, Tripoli, Sida, middle Beka'a, Rashia, Arsal, and Beirut. Additionally, the project has been providing treatment to 943 diabetes patients.

IN 2016, SAMS PROVIDED 122,378 MEDICAL SERVICES TO SYRIAN REFUGEES LIVING IN LEBANON





DENTAL CARE

SAMS provides dental care to Syrian refugees living in camps throughout Lebanon. In 2016, SAMS provided 12,783 dental care services.

In May, SAMS launched the “Miles for Smiles” mission to Lebanon, providing dental care for 1,053 children across five refugee camps. In October, SAMS organized a

second round of “Miles for Smiles” mission that brought together 180 volunteers, including 140 dentists, treating 1,200 Syrian refugee children living in the Beka’a Valley. This mission was made possible in partnership with Multi-Aid Programs (MAPS), the Kuwait Dental Association, several universities, and other partners.



FACES OF SAMS

IMTITHAL, SAMS NURSE IN LEBANON

Imtithal Al-Hosain, 28, is a nurse at the ER in Ghiras Al-Khair medical center. After graduating from nursing school in her hometown of Homs, Syria, Imtithal worked in many hospitals, moving from one department to another. In 2013, she lost her husband to the conflict in Syria, and was forced to leave her home in Al-Qusair. She fled to Lebanon along with her two children, the oldest of whom was six. She first fled to Aarsal, and from there to Lebanon. In Lebanon, Imtithal needed to find work to support herself and her family. Initially, she worked in agriculture, and as time passed, she managed to establish a simple nursing clinic inside her apartment, providing nursing services for a small fee. Today, Imtithal is considered one of the most skilled and hard-working employees in Ghiras Al-Khair medical center supported by SAMS. She admits that her work as a nurse is the reason she is able to hold on and weather the challenges of displacement and loss.

PRIMARY HEALTH CARE

PHC SERVICES



In Lebanon, SAMS supports two primary healthcare facilities. In 2016, SAMS provided 59,568 primary healthcare services for Syrian refugees living in camps throughout the country.



PSYCHOSOCIAL CARE

SAMS is committed to support Syria's next generation, including those who have been displaced in neighboring countries. In order to treat anxiety, regression behavior, and speech disorders in children and address the psychological wounds experienced at a very

early age, SAMS proudly designed and is implementing a community based psychosocial program for children, women, and victims of violence and detainment. In 2016, SAMS provided 2,517 psychosocial care services.

SAMS conducts frequent needs assessments throughout Lebanon to ensure that Syrian refugees receive needed psychosocial treatment.

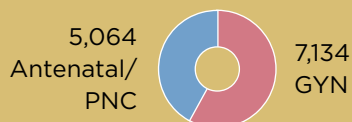
PSYCHOSOCIAL CARE



REPRODUCTIVE HEALTH CARE

In 2016, SAMS provided 12,198 reproductive health care services for Syrian refugee women living in Lebanon through two clinics in Beka'a Valley and Arsal. The services provided included antenatal care, PNC, and treatments for gynecological diseases.

REPRODUCTIVE CARE

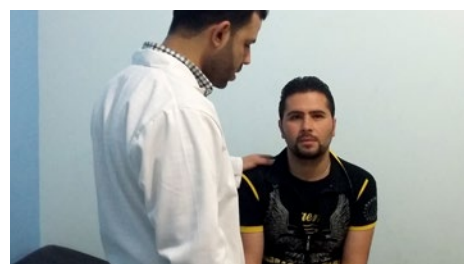


PHYSICAL REHAB



PHYSICAL REHABILITATION

In 2016, SAMS provided physical rehabilitation services to 13,343 Syrian refugees living in Lebanon who had been affected by the conflict in Syria. Services included receiving extensive physical therapy, getting accustomed to new prosthetic limbs, and providing psychosocial support to resume a normal life. In 2016, SAMS supported three physiotherapy centers in the Beka'a Valley and in Tripoli, and introduced a mobile physical therapy project to reach more Syrians who were unable to commute.



STORY FROM THE FIELD

ZAHER'S JOURNEY TO FIND CARE

Zaher, 22, hails from the suburbs of Damascus, but he has been a refugee in Lebanon for two years. When Zaher first arrived to Lebanon, he suffered from severe dyspnea, low grade fever, and dry cough. After visiting many physicians for three months, Zaher still found no relief. Zaher finally visited the SAMS-supported polyclinic in the Beka'a Valley and received a chest X-ray, HRCT, and bronchoscopy and BAL with the help of SAMS medical mission volunteers. SAMS medical personnel diagnosed Zaher with BOOP (Bronchiolitis Obliterans Organizing Pneumonia). Two months after he began his treatment, Zaher's health has greatly improved!



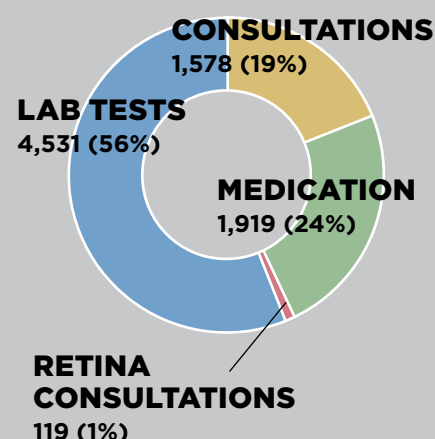
DIABETES HEALTH CARE

Among the over one million Syrian refugees registered in Lebanon, the World Health Organization (WHO) and the International Diabetes Federation (IDF) estimated that up to 100,000 suffer from diabetes.

In September 2016, SAMS, in partnership with the Qatari Red Crescent, launched a new project to treat refugees with diabetes in nine locations

throughout Lebanon. The project provides medical support at every stage of the disease, beginning with consultations, full pharmacological treatment including all types of insulin, diagnosis and follow-up laboratory tests, and consultations in case there are any further complications. SAMS provided lifesaving treatment to 943 diabetes patients.

DIABETES CARE



386
Male



557
Female

STORY FROM THE FIELD EMERGING FROM COMA

In 2015, 13 year old Samer fled from Damascus to Lebanon. He couldn't attend school because he needed to work to provide for his family. Later that year, while he was delivering bread, he got into a serious car accident. The accident put him in a coma for two months, which he spent in the ICU on a respirator, tracheostomy, and gastrostomy. He was eventually discharged to his home in a semi-coma. The SAMS physiotherapy team worked with him for seven months through our physiotherapy center and mobile physiotherapy clinic in Beka'a Valley. Now, Samer can talk, breathe and eat normally, and has even started walking with only one crutch. His physiotherapist, Dr. Taleb, is from sub-Damascus, has 20 years of experience in Syria, and has been working with SAMS in Lebanon since 2013.



MEDICAL TRAINING

SAMS provides training opportunities for its medical staff in Lebanon through SAMS volunteers from the U.S., and in partnership with many international, local organizations, and institutions, including American University of Beirut (AUB), International Committee of Red Cross (ICRC), and International Diabetes Federation (IDF). In 2016, SAMS provided training to 87 Syrian physicians and nurses in Lebanon.



MEDICAL MISSIONS

SAMS organizes and facilitates frequent medical missions to Lebanon to provide dignified medical care to Syrian refugees living in camps across the country. In 2016, 279 SAMS volunteers participated in seven medical missions to

Lebanon, including two dental missions, one pediatric and orthopedic mission, two general missions, one cardiology missions, and one gastrointestinal mission, treating 3,023 Syrians in need, including 1,080 children.

MISSION TYPE	VOLUNTEERS	BENEFICIARIES
General (2)	38	1,339
Pediatric/ Orthopedic	2	57
Cardiology	3	122
Dental (2)	234	2,184
GI Endoscopy	2	96
Total	279	3,798

FACES OF SAMS

DR. JOHN KAHLER, MEDICAL MISSIONS VOLUNTEER

Dr. John Kahler, a 70-year-old pediatrician from Chicago, traveled with SAMS on a number of medical missions, including a trip to Aleppo in July 2016. In July, he also traveled to Lebanon on a medical mission. During the five-day mission, he treated 425 Syrian refugee children and discovered a worm outbreak in one of the refugee camps in Akkar, which affected all the refugees living in this camp.



CONTAINERS AND MEDICINE GRANTS

SAMS has received in-kind donation of two containers of consumables, medical equipment, and medications for its medical centers across Lebanon based on needs, benefitting 27,646 Syrians in need.

LEBANON PROGRAMS IMPACT AT A GLANCE



Medical services provided: **122,378**



Medical workers supported: **82**



Medical facilities supported: **16**



Primary care: **59,568**



Reproductive healthcare: **12,198**



Dental clinics: **12,783**



Psychosocial programs: **2,517**



Physical rehabilitation: **13,343**



Major surgeries performed: **2,544**



Medical mission: **3,798**



Medical workers trained: **87**



Medical containers: **27,676**

TURKEY PROGRAMS

SAMS is one of the co-leads of the Turkey-based Health Cluster for the Whole of Syria response. SAMS Turkey office staff plan, monitor, and evaluate multiple medical relief programs in Turkey and northwestern Syria to support internally displaced Syrians, their host communities and refugees who have limited access to quality healthcare. In 2016, SAMS Turkey programs provided 58,295 healthcare services inside Turkey.

These programs also support Syria-based medical personnel through workshops and trainings in Gaziantep and Reyhanli. Additionally, SAMS Turkey office provides cross-border operational support and facilitates specialty medical missions, including dental and gastrointestinal missions.

In October, SAMS organized its first cranio-facial medical mission to Turkey for Syrian refugees living in Reyhanli, Turkey. Four volunteers conducted 29 neck and face reconstructive surgeries for patients ages 3 to 73. Some of the beneficiaries came from inside Syria to get the treatment they needed.

Additionally, SAMS volunteers continued to travel to Emel Hospital in Rayhanli to deliver care to neurology and urology cases.

IN 2016, SAMS PROVIDED 58,295 MEDICAL SERVICES TO SYRIAN REFUGEES LIVING IN TURKEY



DENTAL CLINICS

In 2016, SAMS supported seven dental clinics in Gaziantep, Reyhanli, Kilis, Yayladagi, Kirikhan, the Islahiye and Kahramanmaras refugee camps, and Istanbul. Additionally, SAMS supports a dental clinic for children in the Al Salam school in Reyhanli, "Deah Barakat Dental Clinic." This clinic honors the memory of Deah Barakat and his wife Yusor Abu-Salha, former SAMS volunteers

and students from University of North Carolina Chapel Hill's School of Dentistry, who were killed in February 2015. The clinic at Al Salam school was the location for major dental missions in summer 2015 and 2016.

In 2016, SAMS provided 52,897 dental services for Syrian refugees living in Turkey who had no access to vital dental care.



STORY FROM THE FIELD

"GOD SENT US THIS CLINIC AS HIS MERCY"

"I will never forget when a Syrian refugee woman and her children came to a SAMS-supported clinic on the fifth day of Ramadan, and said to me, 'Do you know, doctor that God has sent us this clinic as his mercy. Since the beginning of this holy month, we have only eaten bread and zaatar. I don't have money to buy food. Whatever little we had was going to go to treat my teeth and my children's teeth. Now, thanks to this free clinic, I can use this money I saved to buy food for my children.'" —Dr. Abdulaziz Barich, SAMS Staff



GI ENDOSCOPY CENTER

In March, SAMS opened a new GI Endoscopy Center in Reyhanli, Turkey in partnership with Emel Hospital, serving Syrian refugees in need. In 2016, the center conducted 195 procedures, including 5 ERCP procedures and 10 esophageal balloon dilations.

SAMS launched its first GI Endoscopy mission in May 2016, treating 133 Syrians.



MEDICAL TRAINING PROGRAM

SAMS organizes frequent medical training workshops and seminars in Turkey for Syria-based doctors and nurses to ensure that they are able to stay up-to-date on medical skills and techniques needed to save lives under difficult circumstances and limited resources. Medical workers receive training in areas such as trauma care, gender-based

violence recognition, psychosocial care, and specialty care.

In 2016, SAMS conducted four training courses and workshops led by 19 medical professionals from the United States, training 148 Syrian healthcare workers. Additional providers benefited from these courses when the planning team started livestreaming them. To date, this program has trained more than 770 physicians, nurses, and medical technicians.

IN JULY 2016, 23 SAMS VOLUNTEERS PERFORMED MORE THAN 1,200 DENTAL PROCEDURES.

MEDICAL MISSIONS

In July, 23 volunteers from the U.S. and Syria traveled to Turkey on a dental medical mission, performing more than 1,200 dental procedures and serving close to 300 patients, most of them children.


In addition to its frequent dental missions to Turkey, SAMS conducts specialty care missions to support overwhelmed hospitals at the Turkish borders. In 2016, SAMS conducted two medical missions: a GI Endoscopy medical mission and a cranio-facial medical mission to Turkey for Syrian refugees living in Reyhanli, Turkey, treating 166 patients.



CROSS-BORDER SUPPORT


In 2016, SAMS sent 127 trucks to northern Syria to support 90 SAMS-supported medical facilities. These trucks were filled with medical supplies and equipment to address the needs of the civilian population in Syria.


TURKEY PROGRAMS IMPACT AT A GLANCE

 Medical services provided: **58,295**


 Medical workers supported: **5**


 Medical facilities supported: **1**

 Specialty care: **5,398**

 Dental clinics: **52,897**

 Medical mission volunteers: **177**

 Medical workers trained: **148**

 Medical containers shipped to Northern Syria: **127**

GREECE PROGRAMS

In response to the mass influx of refugees on the shores of Europe, SAMS launched SAMS Global Response (SGR) in April 2016 with the aim of providing medical relief to vulnerable persons and refugees in Greece and beyond. In 2016, SGR provided 19,361 medical services for refugees living in camps in Greece.



SGR's first medical mission took place in northern Greece. Teams consisting of volunteers from across the world traveled to Greece on a weekly basis to provide quality medical care for the refugees and migrants trapped along the borders and in

both official and unofficial camps. SGR established four clinics in four official camps in northern Greece, including Karamanlis, Frakapor, Iliades, and Katerini, and provided primary healthcare for up to 3,600 refugees living in those camps.

IN 2016, SGR PROVIDED 19,361 MEDICAL SERVICES FOR REFUGEES LIVING IN CAMPS IN GREECE



STORY FROM THE FIELD

A GLIMPSE OF HOPE IN A GREEK CAMP

The parents of 6-year-old Alyaman Daar fled from Syria when they could not access health care or medication for his muscular dystrophy due to the ongoing crisis. When they arrived to Greece, they also faced obstacles to accessing care in a Greek refugee camp. SAMS's Dr. Zaher Sahloul and Dr. Hanne Lossius visited the family on a medical mission to Greece, and cared for Alyaman. SAMS invited CNN to cover the story to raise awareness of the family's predicament. Thanks to the CNN report, hospitals contacted the camp for his transfer and treatment for free. He was granted emergency medical travel to Switzerland.



GREECE PROGRAMS IMPACT AT A GLANCE



Medical services provided: **19,361**



Medical facilities supported: **4**



Medical mission volunteers: **262**

ATTACKS ON HEALTHCARE

In August 2016, attacks on facilities occurred every 17 hours, making August the deadliest month since the beginning of the conflict.

Targeted attacks on healthcare facilities and workers across Syria have unfortunately become characteristic of a conflict now entering its seventh year. In 2016, systematic attacks on healthcare have escalated in frequency and intensity, particularly in the last six months of the year. Until now, 2015 was the most dangerous year in healthcare for Syria—2016 surpassed this unfortunate milestone.

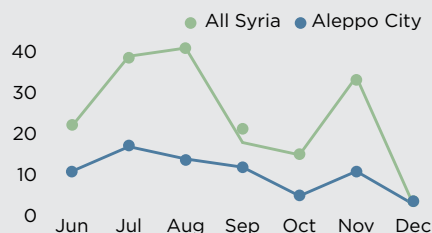
In the last six months of the year, 73 attacks occurred in besieged Aleppo—43 percent of the total attacks documented in the reporting period, including 40 attacks in July 2016.

From January 2016 to December 2016, 248 attacks on healthcare facilities occurred in Syria, with 78% of attacks (195) occurring after May 3, when the

UN Security Council released Resolution 2286, condemning attacks against medical facilities and personnel in conflict situations. Following the adoption of Resolution 2286, the rate of attacks on healthcare increased by 89%, attaining the level of one attack every 29 hours. Throughout 2016, 44 health workers were killed, 100 were injured. Seven of those killed were SAMS staff, and 34 injured were SAMS staff.

In April of 2016, SAMS mourned the loss of Dr. Hasan Al-A'raj, Health Director of Hama. Dr. Al-A'raj was killed in an airstrike when his car was targeted after leaving the fortified hospital he helped build. He is survived by his wife and five children, ages 1 to 17 years old. SAMS subsequently launched “Our Fallen

All attacks in Syria vs. attacks in Aleppo City from June through December, 2016



Heroes Fund” to bring some comfort and hope in the face of profound loss, aiming to support the families of our fallen heroes who are left behind.

Attacks on medical facilities and civilian infrastructure continue in Syria with impunity. In an effort to mitigate the risks faced by patients and medical staff, SAMS has undertaken measures to reinforce structures and create new ones that can stand the destructive power of these attacks, including new underground facilities with reinforcements above fortification of existing buildings, special basement preparation and lower level protections, and the building of cave hospitals.

“WE ARE STILL IN SHOCK FROM THE IMAGES WE SAW TODAY. EVEN THOUGH I HAVE BEEN A SURGEON WORKING AT THE KAFR ZITA HOSPITAL FOR FIVE YEARS AND HAVE SEEN MANY CASES AND CONDUCTED MANY SURGERIES ON PATIENTS FROM WAR, WHAT I SAW TODAY IS BEYOND EVERYTHING I’VE EVER SEEN. BODIES WERE COMPLETELY BURNED BEYOND RECOGNITION,”
—DR. ABDULLAH DARWISH



REMEMBERING DR. HASAN AL-A'RAJ, A LEADING HUMANITARIAN (1970-2016)

Dr. Hasan Al-A'raj, Health Director of Hama, was instrumental in establishing a SAMS-supported cave hospital built into the side of a mountain to protect patients and providers. Born in Hama in 1970, Dr. Al-A'raj completed his medical training in cardiology in 2001. Dr. Al-A'raj was the only cardiologist left in the province of Hama. At the time of his death, he was on his way to conduct interviews with potential paramedics and drivers to operate the newly established SAMS emergency response system in Hama. When asked what he wanted most from the international community, Dr. Al-A'raj said: “The way that people are looking at the conflict is from a political perspective, not from the humanitarian side. The thing I would ask for right now is that the world acts in order to protect patients, like with underground hospitals. We need protection.”



**FROM JANUARY
2016 TO DECEMBER
2016, 248 ATTACKS
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MAY 3.**

THE SIEGE OF MADAYA & SAMS'S RESPONSE

In late spring 2016, 12-year-old Ola died in Madaya from starvation. Since July 2015, the town has been besieged by the Syrian government and its allies—trapping more than 40,000 residents inside without access to basic supplies, food, or services outside the town, in violation of international humanitarian law.

Ola was one of the 86 people who died in the town during the siege that lasted from July 2015 to May 2016. 65 of these 86 deaths were due to malnutrition and starvation, 14 from landmines, six from snipers, and one from a chronic health condition. Madaya's residents continue to be surrounded by 12,000

landmines, confined to just a 12 square kilometer area. Civilians were forced to resort to eating plants, insects, and even cats to survive.

After a year under siege, the citizens of Madaya received only five U.N. Aid deliveries. The aid deliveries did not contain sufficient supplies to address the enormous magnitude of starvation and need in Madaya. The quantity and quality of food aid, coupled with the excruciating delays of delivery, led to preventable deaths. On repeated occasions, crucial medical supplies were extracted from UN aid deliveries. In February 2016, government authorities did not allow the inclusion of UNICEF inpatient stabilization kits to treat 200 children with severe acute malnutrition, resulting in the deaths of two children in subsequent weeks. In March 2016, UN OCHA further reported that Syrian government authorities removed surgical items, medicine, and medical supplies from the March convoy.

In addition, the medical infrastructure in the besieged town is not equipped to address the extreme needs of its residents. Madaya has only one field hospital, staffed by two dentistry

students and one veterinarian. They lack access to even some of the most basic medications, such as aspirin, antihistamines, and antibiotics. Physicians in the besieged town continue to perform procedures far beyond the scope of their training or education. In a report authored by SAMS and Physicians for Human Rights, "Madaya: Portrait of a Syrian Town Under Siege," dentist Dr. Mohamed Darwish recounts how he and his fellow physicians, were forced to perform a cesarean section when the government and its allies refused to evacuate a patient who could not deliver naturally.

The refusal to evacuate residents in need of urgent medical attention has led to preventable deaths as well. On March 29, 2016, Ali, Wassim and Josef, three young Madaya residents, were walking home from school, and started playing with a landmine that they mistakenly thought to be a toy. It seemed that Ali would survive, but his only chance of survival was shattered when he was denied medical evacuation to Damascus. He succumbed to his injuries on March 30.

"WHAT DO WE EXPECT TWO DENTISTRY STUDENTS, A VETERINARIAN, AND A FIELD HOSPITAL TO DO FOR THESE CASES, EACH ONE IN NEED OF SPECIALIZED CARE? WE ARE IN AN IMPOSSIBLE SITUATION." —DR. MUHAMMAD DARWISH, A DENTISTRY STUDENT AND ONE OF MADAYA'S FEW REMAINING HEALTH CARE PROVIDERS

SAMS EMERGENCY RESPONSE

SAMS adopted a multi-faceted approach to ease the suffering of the people of Madaya, and to advocate for their protection. SAMS campaigned to bring emergency humanitarian assistance to the besieged area, while building the local capacity of physicians on the ground to treat patients in an extremely resource-limited setting. By partnering with other organizations, such as Physicians for Human Rights, on reports and advocacy, SAMS has

urgently raised public awareness of the deplorable situation faced by the residents of Madaya, and aimed to create public momentum to increase aid deliveries.

In January 2016, SAMS released a report, "Madaya: Starvation Under Siege," which underscored the horrors that civilians are experiencing in besieged Madaya, and the need for consistent and sustained humanitarian access to the town. The report

documented the deaths of 31 civilians in Madaya during December 2015 from starvation, landmine injuries, and sniper injuries, and gave an overview of the one medical clinic in Madaya, which continues to suffer from severe shortage of medication and supplies.

To support health workers in besieged Madaya, SAMS established a WhatsApp group in January 2016 to connect them with specialists in the United States. This group has diagnosed



patients and guided health workers through specialized treatments over messages. Because security forces at checkpoints did not allow cameras or medical equipment such as x-rays into the town, the WhatsApp correspondence represents the most advanced version of telemedicine that the Madaya physicians were able to implement.

In July 2016, SAMS partnered with Physicians for Human Rights to release a report titled “Madaya: Portrait of a Syrian Town Under Siege.” In this report, PHR and SAMS brought to light the horrifying impact of the siege and the inadequacy of the international response.

Together, the organizations called for an immediate end to sieges across Syria and demand free, unconditional access for aid convoys.

In October 2016, SAMS continued to advocate for the delivery of supplies to besieged Madaya. On October 13, SAMS leadership met with different U.N. missions, Ambassador Power, Secretary-general-elect Antonio Guterres, and the chef de cabinet to the Secretary General to discuss the humanitarian crisis in Syria, advocate for increased humanitarian access, an end to attacks on civilians and medical personnel, and requested the delivery of kidney dialysis

supplies to besieged Madaya.

Up until the end of 2016, the residents of Madaya continued to face the same appalling conditions with scant attention from the international community. On March 14, 2017, residents of Madaya received aid for the first time since November of 2016. The only aid convoy prior was in September 2016. Since November of 2016, the town is still surrounded by checkpoints, but there are more snipers encircling the town, and more mortars are used every day. Malnutrition cases have increased. Over a million Syrians currently live under siege.

DR. MOHAMED DARWISH, MADAYA'S SYMBOL OF COURAGE AND RESILIENCE

Dr. Mohamed Darwish is a 26-year-old leading humanitarian and a dentist from the besieged town of Madaya. While many medical personnel in Syria have fled violence, sieges, and systematic attacks on healthcare, Dr. Darwish has chosen to come back to Madaya. In 2013, when the town fell into a dire humanitarian crisis, Dr. Darwish packed his bags and left Damascus, where he was finishing his last year of dental school at Damascus Medical School. He couldn't stay in Damascus while his hometown was under attack and the people were being killed and

starving to death. He is one of the three remaining doctors left in the besieged town of Madaya to serve a population of more than 40,000 people. Despite the threats to his life, Dr. Darwish persisted. He braved bombardment and starvation. He was always the first one to volunteer to go into the most dangerous conflict areas to save as many lives as he could, no matter the danger. He lived in the hospital for months. In January 2016, by meticulously documenting the conditions of patients, many of them children, he brought international attention to the conditions in



Madaya. Dr. Darwish is one of the bravest, selfless, and most committed doctors in Syria that SAMS has had the privilege to work with. What he has done for the people of Madaya is above and beyond his call of duty.

CRISIS IN ALEPPO & SAMS'S RESPONSE

In early April 2016, a large-scale aerial bombardment campaign intensified over eastern Aleppo City. Schools, markets, and hospitals continued to be targeted. The humanitarian crisis in Aleppo reached a tipping point.

As of October 2016, only five hospitals remained operational in the besieged city to care for an estimated population of 300,000 civilians, including more than 85,000 children. And there were only 29 doctors to treat the overwhelming number of wounded. Since the collapse of the ceasefire in September 2016, over 1,700 airstrikes killed more than 550 people and

wounded over 1,500, many of them children.

SAMS operated two major hospitals, M2 hospital, which included an OBGYN and pediatric clinic, and M10, which operates underground and is the largest trauma and ICU center in eastern Aleppo City. Since July 2016, both of these hospitals were attacked at least 14 times and as of October, both of these

hospitals were bombed out of service. The systematic targeting of hospitals and medical personnel in Syria continued with impunity.

Physicians for Human Rights has documented 382 attacks on medical facilities that have killed 757 medical personnel since the start of the conflict in 2011.

"Nurses out of desperation tried to operate M2 hospital again. They went into one of the remaining basements and started two ICU beds and a small procedure room. They consulted me about two patients. One had minor injuries and the other one was critically injured. I asked them to prematurely give up on the latter one and I felt bad to tell them it is luxury now to care for patients with this high level of injury with limited resources. However, our medics didn't give up on him until their location was discovered and attacked by barrel and cluster bombs," said Dr. Anas

"WE ARE EXHAUSTED, AND THERE ARE NOT MANY OF US LEFT, BUT WE CONTINUE OUR 20-HOUR SHIFTS. WHAT IS MOST HEARTBREAKING IS WHEN WE HAVE TO CHOOSE WHICH PATIENTS TO SAVE BECAUSE THERE AREN'T ENOUGH DOCTORS TO TREAT EVERYONE. OUR HOSPITALS, THOUGH THEY ARE THE TARGETS OF BOMBS, STILL OVERFLOW WITH THE SICK AND INJURED." —DR. ABO EL EZZ, SAMS ALEPPO COORDINATOR



Moughrabieh, SAMS Telemedicine Chair.

In December, after over 140 days of siege, more than 9,500 residents of eastern Aleppo were forced to evacuate from the city, including 194 people who needed immediate medical attention.

SAMS responded immediately to the emergency situation in eastern Aleppo to provide medical care to the evacuated patients and bring comfort to these families. SAMS deployed two mobile clinics to the border to treat patients as they are evacuated, supported five hospitals in Idlib chosen to treat evacuees, and sent additional supplies, medication, and personnel to prepare for the influx of patients. Additionally, SAMS covered one month's salary for our 150 medical personnel who were forced to leave Aleppo as they recovered from the tireless work and horrific conditions they experienced while under siege; provided winterization kits, as well as fuel to ensure that critical facilities, pediatric and OBGYN centers

**“THE ONLY NEUROSURGEON LEFT IN ALEPPO PERFORMED A BRAIN SURGERY ON A PATIENT TO STOP THE BLEEDING AND THE PRESSURE. HE OPENED THE MAN’S SKULL ON THE FLOOR WITHOUT ANESTHETICS,”
—SAMS’S ABU RAJAB, RADIOLOGIST**

in particular, were able to treat patients in need, in partnership with Rahma Relief Foundation; supported two primary healthcare clinics in the camps that are being built to receive the overwhelming number of IDPs from eastern Aleppo City, and provided Provide employment for medical staff who were evacuated from eastern Aleppo City.

Currently, SAMS is in the process of building two fortified underground facilities in western Aleppo, and a third one in another location. These hospitals will open in 2017.

STORY FROM THE FIELD

THE IMAGE THAT SHOCKED THE WORLD

“I would like to tell you that Omran is a very lucky child because he found somebody to help him.” —Dr. Osama Abo Ezz, General Surgeon and SAMS Aleppo Coordinator.

In the summer of 2016, the image of a dazed, bloodied five-year-old boy sitting in an ambulance shocked the world. After an airstrike hit his home, Omran was treated at a SAMS-supported underground hospital in eastern Aleppo City that came to be known as M10. He survived, but, his older brother, Ali, was not so fortunate. Even after he was discharged, SAMS medical personnel continued to check on Omran to provide psychosocial care. Omran was only one of many children who had suffered in this conflict.



STORY FROM THE FIELD

THE RESILIENT CHILDREN OF SYRIA

In July of 2016, an eight-month-old baby girl in Aleppo with convulsions was admitted to a SAMS-supported hospital in Aleppo. It had been five days since shrapnel had penetrated her head. Her condition was very critical. SAMS's Dr. Amr, the only remaining neurosurgeon in eastern Aleppo City, successfully performed surgery and saved this infant's life. A couple of days after the surgery, this brave baby girl had regained her energy, was able to move her arms and legs, and drink milk.



STORY FROM THE FIELD

TRAUMATIC INJURY IN THE MIDST OF EVACUATION

Fatima, a five-month-old girl from Aleppo, lost her family and her right leg in the attack on civilians fleeing besieged eastern Aleppo in December 2016. Her mother and siblings were killed, and her father was found in critical condition. Our dedicated medical personnel and volunteers on-the-ground provided her with the necessary treatment and looked after her. Thanks to their tireless efforts, Fatima's condition improved and she was able to cope with the traumatic injury.



SAMS GLOBAL RESPONSE

Conflicts around the world have pushed steadily increasing numbers of refugees to flee for safety. Natural and man-made conditions have exacerbated the lack of access to health care for vulnerable people in places such as Greece, Pakistan, Haiti, Palestine, and beyond. In 2016, SGR performed over 19,361 medical services in Greece.

The SAMS Global Response Committee was launched as an effort to address the multifaceted health needs faced by vulnerable populations worldwide. SGR is a global platform that seeks to provide quality healthcare to refugees and affected populations by utilising its extensive network of medical professionals, and expertise in leading and organizing medical missions in challenging settings.

The concept of SAMS Global Response began in early 2016, when Dr Zaher Sahloul (Chair of SGR) and others from the committee worked in Lesbos and other Greek islands assisting arriving refugees. The need to provide culturally appropriate care to vulnerable refugees, and to advocate for their needs, was immediately clear. Since 2015, over one million people have entered Greece, the vast majority of

whom arrive through a dangerous sea passage from Turkey. Due to the lack of safe passage, many face countless risks throughout this journey, with little reprieve from risk upon arrival. Although Greece was once considered a stopover for refugees travelling to other countries in Europe, border closures in March of 2016 have led to over 60,000 refugees being trapped within Greece's borders.

SGR's first medical mission took place in Idomeni, Greece from April 17–22, and on a weekly basis afterwards. SAMS's international medical volunteer base provided care to refugees stranded at Greece's northern border with The Former Yugoslav Republic of Macedonia.

SGR began work in the unofficial camps of Northern Greece, then transitioned into formal camps operated by the Greek authorities as these camps gradually became established from May

2016. SGR operates in partnership with the Greek authorities in official camps providing medical care daily, with consistent clinic hours established based on the clinical need within each community. From May 2016, these camps included tented communities inside repurposed warehouses (Karamanli, Frakapor, and Iliadis), each housing 500 to 700 refugees. In late August 2016, SGR began working in a fourth camp which was located near Katerini and sheltered approximately 1500 refugees from a remote Yazidi community in tents exposed to the elements.

As winter established in Greece, SGR strongly advocated for the rehousing of refugees to more appropriate shelter. As such, all four camps were gradually closed and communities were rehoused into hotels or apartments in Greece, in conjunction with renewed efforts to expedite the asylum process for





“TODAY, THE WORLD IS WITNESSING THE WORST REFUGEE CRISIS SINCE WORLD WAR II. IT IS OUR DUTY TO ADDRESS THEIR MEDICAL NEEDS AND GALVANIZE THE INTERNATIONAL COMMUNITY TO ACT NOW AND PUT AN END TO THIS TRAGEDY.”
—DR. ZAHER SAHLOUL

relocation into the rest of Europe from December 2016 to March 2017. SGR then continued to provide continuity of healthcare provision for these communities and others in hotel and other emergency accommodation as well as for relocated communities in terms of health education and advocacy.

SGR in Greece is built on SAMS's model of using an international medical volunteer base, coupled with medical missions and an on-going medical presence that focuses on General Practice, Paediatrics, Obstetrics, Mental Health and Community Health Education. All care provided continues to be free at the point of use. From that base, SGR has developed a consistency of service provision and quality

control with integration into both the national Greek health system and the coordinated NGO health response. The health response in Greece continues to develop in response to the needs of the refugee community it serves including both mental health and comprehensive medical services.

In addition to clinic services, a Community Health Education Partnership has been developed to foster and enhance the first aid skills and knowledge of keen volunteers from within the camps. In partnership with the Children and War Foundation, SGR participates in the Teaching Recovery Techniques program, training volunteers from within the camp to teach techniques to children over a six-week period to reduce their current and future risk of psychological morbidity.

SGR also worked collaboratively with future and past volunteers in their fields of expertise to create standardised protocols for clinical management that are both evidence based and appropriate for the setting. They have also performed a multi-centre and time staggered nutritional assessment of children under five years of age which will form the basis of a partnership with an NGO dedicated to micronutrient supplementation. SGR has also been completing chronic and complex disease mapping within each community to tailor clinical services appropriately. In the monitoring

and evaluation of clinical services, regular audits of referral into the national health system, antibiotic usage and utilisation of mental health services have also been conducted.

SGR also provided care beyond the Greek borders in 2016, in Haiti, Lebanon and Pakistan. In October of 2016, SGR participated in a trip to Jeremie, a city in southwest Haiti, to provide medical care for victims of Hurricane Matthew. On October 3rd, a category 4 hurricane made landfall over southwest Haiti ravaging the arrondissement of Grand Anse with four days of torrential rains and 150+ mph wind. SGR Committee member and SAMS veteran volunteer Dr. Kahler visited the area with Dr. Willy LaFortune, one of three family practitioners from Jeremie, as the first medical responders to this community. On day 31, their arrival, there was still no electricity, debris remained on the streets, the rainy season had begun, and there was a significant cholera outbreak. In six days, they saw 800 patients.

In 2017, SGR looks forward to strengthening and expanding its operations in Greece, continuing ongoing care in camps, creating needs assessment to respond to gaps in multi-agency service provision, and opening new clinics. Beyond the borders of Greece, SAMS Global Response hopes to address healthcare challenges for displaced and vulnerable populations across the world.

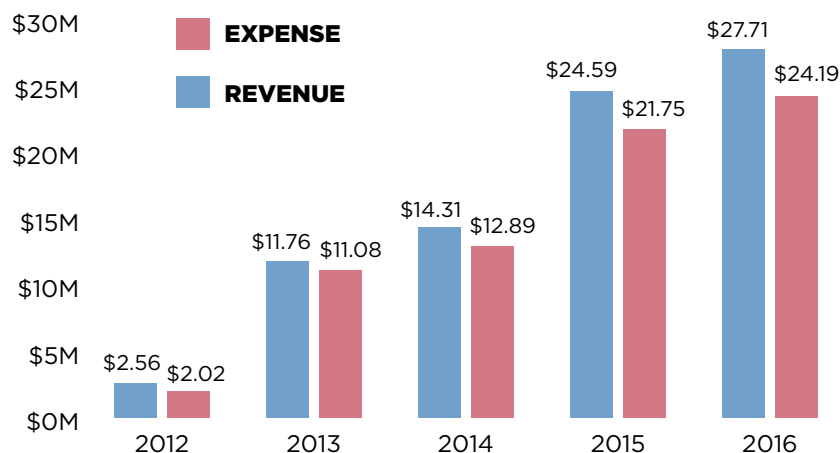
SAMS FUNDING

The following is Syrian American Medical Society's Statement of Activities for years ended December 31, 2015 and 2016.*

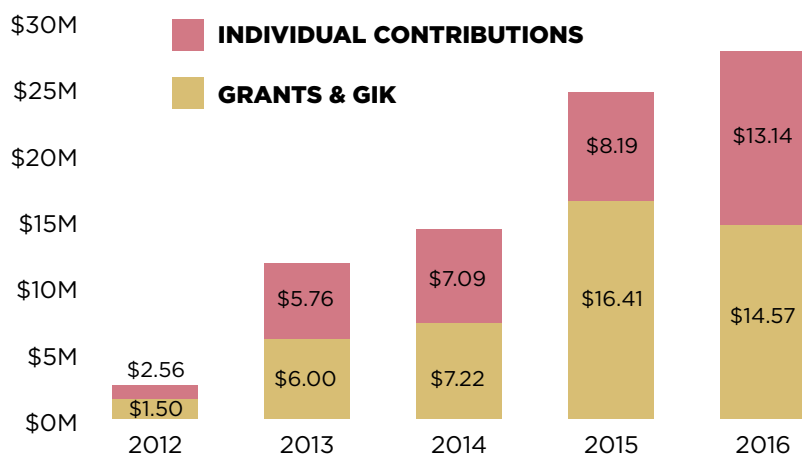
STATEMENT OF ACTIVITIES		
UNRESTRICTED NET ASSETS	2015	2016
Support and other contributions		
Contributions	\$8,185,317	\$13,138,585
Grants	\$14,063,580	\$13,566,970
Gifts in kind	\$2,346,282	\$1,007,213
Total support and other contributions	\$24,595,179	\$27,712,768
EXPENSES		
Program services		
Turkey Regional Office/Northern, Midwest, and Coastal Regions of Syria	\$11,550,901	\$12,629,450
Jordan Regional Office/Southern Syria, Damascus Suburbs, and Refugees in Jordan	\$7,923,206	\$7,752,985
Lebanon Regional Office and Refugees in Lebanon	\$874,100	\$945,187
SGR	—	\$322,634
United States	\$601,646	\$1,008,900
Total program services	\$20,949,853	\$22,659,156
Supporting Services		
Fundraising	\$471,147	\$741,138
Administrative and general	\$332,747	\$796,471
Total expenses	\$21,753,747	\$24,196,765
Increase in Unrestricted Net Assets	\$2,841,432	\$3,516,003
NET ASSETS		
Beginning of Year	\$2,745,454	\$5,586,886
End of Year	\$5,586,886	\$3,516,003

*2016 financial information is unaudited, preliminary and subject to adjustments and modifications

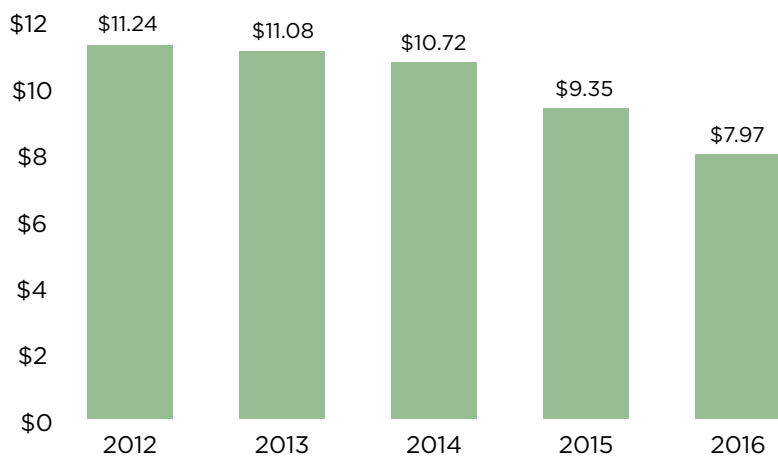
FINANCIALS OVER 5 YEARS (MILLIONS OF DOLLARS)



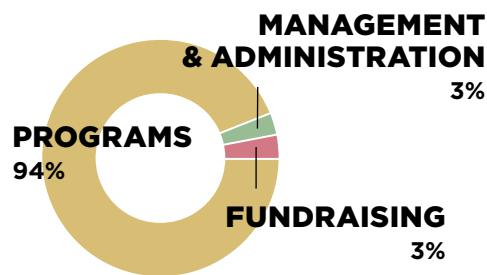
SOURCES OF FINANCIAL SUPPORT (MILLIONS OF DOLLARS)



AVERAGE COST PER PATIENT (DOLLARS)



2016 DISTRIBUTION OF EXPENSES



STORY FROM THE FIELD

AUTOIMMUNE TREATMENT IN IDLIB

Hanin Said, 5, was diagnosed in September 2016 with alopecia areata, an autoimmune skin disease. She was diagnosed by our doctors at the SAMS-supported dermatology mobile clinic in Idlib, Syria. Her condition was severe and urgent. Immediately, our doctors provided her with the necessary treatment. A month later, our medical staff visited her for a follow-up exam, and they were happy to find that her condition had significantly improved. SAMS supports four primary care mobile clinics in Idlib and Hama, and one mobile dermatology clinic in Idlib.



SAMS EDUCATION COMMITTEE

Through its network across the United States and beyond, SAMS Education Committee spearheads collaborative educational programs in order to support Syrian medical professional by providing opportunities to expand their knowledge and experiences.

SAMS Education Committee coordinates the following programs:

MATCH Program. In 2016, SAMS Education Committee conducted a series of webinars and workshops to help applicants who were applying for residency programs for this academic year. Webinars included:

- USMLE Step 1 webinar
- USMLE Step 2 CS workshops
- How to Apply to Residency webinar

- Applying to Residency webinars covered in detail applying to positions in:

- Internal Medicine
- General Surgery
- Neurosurgery
- ENT
- Pathology
- Pediatrics
- Medical Genetics
- Radiology
- Obstetrics/Gynecology
- Interview Skills Workshops
- The Mentorship Program
- The Scholarship Program

Additionally, the MATCH Hosting Program is a program designed to host MATCH applicants for free by other members when they are invited to interviews in different cities across the U.S.

Online Discussion. In addition to the regular workshops, webinars, and online courses, the committee launched two new projects this year in Arabic, The Journal Club and the SAMS Morning Report:

- *The Journal Club:* The Journal Club seeks to teach medical students and doctors how to discuss and evaluate research papers. Interested doctors and students are invited to participate in the discussion sessions which take place the first Saturday of each month. The session takes place online and is attended usually by 25–30 students and doctors. The Journal Club features different speakers each month. All sessions are recorded and uploaded online.

- **SAMS Morning Report:** This project offers a unique opportunity for medical practitioners and students to participate in a discussion about interesting clinical cases. For each session, the team identifies the best treatment options for a particular case. Cases are presented and briefly discussed in a video. Participants will use the provided information to discuss the best ways to diagnose, manage or treat patients.

Research Mentorship Program. The Research Mentorship Program was launched in 2016 to help physicians and medical students who are interested in conducting research or publishing scientific papers related to the healthcare system in Syria.

Scholarship Program in the U.S. SAMS Scholarship Program supports Syrian medical residency applicants through the provision of interest-free loans, between \$1K and \$4K to help them cover the expenses related to the MATCH season and the interviews. The total amount of loans distributed this year was \$54,000 to 20 applicants. All applicants were selected and money distributed based on strict criteria: scores, number of residency interviews, CV, personal interview.

Additionally, in 2016, SAMS partnered with Johns Hopkins Bloomberg School of Public Health on a scholarship program to support up to two individuals who have been displaced as a result of the conflict in Syria. Applicants must have been displaced by the conflict in Syria, and currently residing in Egypt, Lebanon, Jordan or Turkey, or residing under Temporary Protected Status in the US. Students will begin their studies in July 2017.

Mentorship Program. The program recruited mentor volunteers who were in their second year of residency or beyond. Mentors helped applicants, or “mentees,” filling their ERAS applications, selecting programs, preparing for interviews and handling other MATCH season issues. In 2016, this program provided support to 60 applicants.

Avicenna Journal. SAMS has been a proud sponsor of Avicenna since 2012. It is a quarterly, open-access, peer-reviewed, and PubMed indexed journal. Avicenna Journal is the first and only Syrian medical journal cited in PubMed. The journal promotes excellence in medicine and covers all aspects of comprehensive healthcare including preventative, curative, and rehabilitative. The journal focuses on promoting research and editorial skills among Syrian researchers.

Online Courses. The first course of its kind for Syrian healthcare professionals in Arabic. For six weeks, expert Syrian physicians in research in the U.S. gave 12 sessions related to writing and editing. 167 participants attended the course and received a certificate. Those who participated actively were offered the opportunity to be monitored by experts to publish a paper in a peer-reviewed journal.

Additionally, a team of volunteers created an Evidence Based Medicine (EBM) curriculum that included 18 online interactive sessions in Arabic. On average 50 students and doctors attended each session. Attendees who completed 70% of the course received a certificate. The top five students were offered the opportunity to co-author and publish a systematic review.

Case Report Project. This project aims at helping medical students and recent graduates to hone their writing and publishing skills for a case report in a peer-reviewed journal. Cases are usually provided by physicians in the U.S. who volunteer to help and monitor applicants.

Interview Skills Workshops. In 2016, the Education Committee conducted a series of interview workshops in three major cities: Chicago, Detroit and Cleveland. These workshops featured online lectures and mock-interviews. About 50 applicants participated in these workshops. Each applicant was interviewed by at least two doctors and provided with instant feedback for his or her performance.

SAMS MEMBERSHIP PROGRAM

SAMS Membership Program is designed to provide its members, including physicians, nurses, pharmacists, and medical students, with educational opportunities to enhance their medical knowledge and provide hands-on experiences.

SAMS remains dedicated to providing its members through opportunities, broad reaching networks, and benefits. SAMS also supports Syrian medical residency applicants, and seeks to assimilate international medical graduates to American practices, and sponsors a peer-reviewed medical journal. In 2016, more than 1,000 members joined SAMS growing network in an effort to support the healthcare system in Syria.

SAMS Membership Program offers a number of benefits to its members including continuing medical education (CME) credits and discounted services with our partners.



SCHOLARSHIPS FOR SYRIAN MEDICAL STUDENTS

For many students in Syria, the hopes of finishing their education may seem increasingly out of reach. Since the beginning of the crisis, more than 4,200 schools have been damaged, destroyed, militarized, or used as shelters, according to UNICEF.

In 2016, SAMS supported continuing education for 17 Syrian students whose education was interrupted by the Syrian crisis. SAMS supported an initial group of 12 displaced Syrian students in Turkey, covering their expenses and helping them to study English, Turkish, as well as specialized courses at Turkish insti-

“WITHOUT THE SUPPORT FROM SAMS, I WOULD HAVE NEVER BEEN ABLE TO BE HERE AT A MEDICAL SCHOOL IN ANKARA,” —OLA ABU BAKER, SAMS-SPONSORED STUDENT AT ANKARA UNIVERSITY

tutions. SAMS supported six students to continue their education at the Sarajevo School of Science and Technology (SSST) in Bosnia and Herzegovina, where they received a full scholarship to support their medical studies. SAMS also registered six of the students in Turkish universities, providing financial and managerial support. As siege, aerial strikes and evacuation presented additional barriers to education, SAMS supported additional students who were prevented from completing their education in Syria.

The Sarajevo School of Science and Technology, in collaboration with the University of Buckingham, provides the highest quality of modern competitive education and cutting-edge technology, where these students will be able to continue their education, expand their horizons, and build a bright future for themselves. The six selected students have backgrounds in humanitarian relief



inside Syria or in refugee camps. Candidates were selected based on academic accomplishments, merit and needs. The candidates were selected and screened from a group of high school certified students that have completed between one and two years of medical school. On November 22, 2016, the students arrived in Bosnia, warmly welcomed by both faculty and students of the medical school.

Additionally, in 2016, SAMS sponsored eight medical students who are

FROM A REFUGEE CAMP IN LEBANON TO A MEDICAL SCHOOL IN BOSNIA

One student (whose name was omitted for personal reasons) moved to Lebanon in 2012 at the age of 15 after extensive shelling in his hometown of Homs forced his family to flee. After moving to Lebanon, he remained out of school for 18 months and worked as a laborer along with his father for \$12 a day to help provide for his family. In 2013, his family moved to Tripoli and he was finally able to return to school, but soon thereafter his mother became sick with appendicitis, cholecystitis and hepatic hydatid cysts. At the same time, his grandfather had a stroke and passed away. This student scored 96% on high school exam. SSST offered him a scholarship, and he traveled to Sarajevo to finish his studies.

currently attending Arzrum University and other universities in Turkey. Two of these aspiring students worked as part-time nurses in Aleppo's SAMS-supported MIO for two weeks.

Throughout the year, SAMS also guided and supported the students preparation to increase their chances of acceptance, like sponsoring and arranging intensive Turkish and English languages courses, taking entrance exams required by the selected schools, and facilitating interviews in person or through the use of skype.

SAMS is proud to help these aspiring students who have overcome great personal challenges to continue their education.

"I am very touched to see SAMS efforts in making sure the students are well taken care of. It is our absolute pleasure to have them here at SSST and contribute in making their dreams of becoming doctors come true. So far they have been nothing but kind, grateful, polite and visibly motivated to study therefore they deserve all of our help," said Naida Krupalija, Assistant to the Rector at SSST.

SAMS CHAPTERS

SAMS has more than 1,000 grassroots members across the United States, who play an instrumental role in leading 26 chapters nationwide. SAMS's network of doctors are connected in order to create new programming, raise awareness and support, and help give strategic direction to work on the ground to best serve Syrians in need.



SAMS CONFERENCES

SAMS hosts three major conference throughout the year to provide its members with a unique platform for the exchange of ideas and best practices, recognition of leaders in humanitarian and medical work, and trainings and updates on cutting edge medical relief. Additionally, these conferences are an opportunity to acquire CME credits.

SAMS 5th National Conference, "Hope Through Innovation: Current Challenges in Medicine and Medical Relief"

SAMS hosted its fifth Annual National Conference, "*Hope Through Innovation: Current Challenges in Medicine and Medical Relief*" in Orlando, FL on February 12-14, 2016. The conference focused on innovations in the fields of medicine and surgery, and how these procedures translate into better care for patients in times of crisis. The conference brought together renowned medical professionals, humanitarians, and thought leaders, including Donna McKay, Executive Director of PHR, and John Lawrence, Vice-President of Doctors Without Borders (MSF). During the gala dinner, SAMS honored the memory of Kayla Mueller, the heroic aid worker who was captured and killed while trying to help Syrians.



“MY PARTICIPATION IN SAMS NATIONAL CONFERENCE BROUGHT TO ME HONOR AND PRIDE OF THE ACCOMPLISHMENT OF ALL THOSE WHO WORKS RESTLESSLY TO PROVIDE MEDICAL RELIEF TO THE BEST OF THEIR ABILITY DESPITE ALL THE LIMITED RESOURCES AND DIFFICULTIES... IT IS MY DUTY AS A HUMAN BEING ON THIS EARTH TO GIVE BACK TO THOSE IN NEED. I AM COMMITTED TO SERVING AND SUPPORTING SAMS IN ITS MEDICAL MISSIONS IN JORDAN AND AROUND THE WORLD,”
—DR. WAEL AL-HUSAMI, SAMS VOLUNTEER

SAMS 16th International Conference, “Post Crisis Healing and Rebuilding”

SAMS hosted its 16th Annual International Conference, “Post Crisis Healing and Rebuilding,” in Sarajevo, Bosnia and Herzegovina from July 22-24. The conference drew parallels from the lessons learned from the Bosnian conflict by leading presentations from 26 renowned speakers from multiple specialties on critical issues and obstacles to healthcare systems in Syria and in post crisis settings.

SAMS 3rd Annual Symposium, “Beyond Medical Relief: Education, Research and Advocacy in Focus”

SAMS hosted its third Annual Symposium, “Beyond Medical Relief: Education, Research and Advocacy in Focus,” in Boston, MA on October 7-9, 2016. This year, the symposium brought more than 100 physicians, students, and allied health professionals. Guest speakers included Dr. John Foley, father of the late James Foley, Barbara Adbdeni Massaad, award-winning author of *Soup for Syria*,



and Dr. Conrad Fischer, award-winning medical educator. Additionally, Ruemon and Mehul Bhattacharya, the two brothers who have begun self-publishing children’s books for charity, attended the conference to raise funds for SAMS through their book sales. Over the past two years, these young authors have published four books, donating all proceeds from the books.

ADVOCACY

SAMS is committed to effective advocacy on the local, national, and global levels. We work to amplify the voices of our colleagues on the ground who continue to risk their safety to save lives and alleviate suffering. SAMS continues to advocate for an end to the targeting of healthcare and access to humanitarian aid for all Syrians.

HIGH LEVEL ENGAGEMENT

SAMS members and staff meet regularly with Congressional leaders and high level policymakers at the White House, Department of State, Department of Homeland Security, Department of Treasury, the UN Secretary General's office, and UN missions.

In 2016, SAMS met with numerous senior officials and offices, including United States Ambassador to the United Nations Samantha Power, UK Ambassador Matthew Rycroft, Turkish Ambassador Feridun Sinirlioglu, Papal Nuncio to the US Archbishop Christophe Pierre, Archbishop of Washington

Cardinal Donald Wuerl, UN Special Envoy for Syria Staffan de Mistura, former President of the European Council Herman Van Rompuy, Deputy Special Envoy for Syria Mr. Ramzy Ramzy, Deputy National Security Advisor Avril Haines, National Security Council Senior Director Rob Malley, Special Advisor to the Special Envoy for Syria Jan Egeland, Special Rapporteur on the Right to Health Dr. Dainius Puras, Managing Director of the European External Action Service Nick Westcott, and member states of the Humanitarian Liaison Group.

**“MEDICAL PERSONNEL
HAVE BEEN ASKING
FOR TWO THINGS
SINCE THE BEGINNING
OF THE CRISIS.
PROTECTION AND
ACCESS. THEY HAVE
NEITHER.”
—DR. ZAHER SAHLOUL**

UN ADVOCACY

SAMS members and staff have strong working relationships with key UN missions, holding regular meetings and maintaining contact with member states.

On August 8, 2016, SAMS participated in an “Arria-formula” meeting on the medical and humanitarian crises in Aleppo. There, Abdullah Nawlu, the Head of Aleppo City sector at the Syrian Civil Defense, shared a video statement. SAMS’s Dr. Zaher Sahloul and Dr. Samer Attar spoke alongside Clarissa Ward, CNN senior international correspondent, to highlight the human impact of the siege and aerial bombardment of Aleppo. Dr. Sahloul and Dr. Attar shared stories and photos from their time working at medical facilities in besieged eastern Aleppo City providing trauma care to the besieged population alongside local health workers. The Arria session drew international attention to the siege of Aleppo, and reinvigorated a commitment to action.



Ambassador Power concluded the session with a call to action, saying: “I really credit your testimony for changing something palpable inside the council. The council had been so blocked on Syria, something was required to

puncture us out of a paralysis. I hope that something similar happens today.”

For the past two years, SAMS has been the co-lead of the Turkey-based health cluster. Through this role SAMS improved the role of the national NGOs



WORLD HUMANITARIAN SUMMIT

On May 24, 2016, SAMS partnered with the Syrian Relief Network, Syria Relief and Development, Union of Medical Care and Relief Organizations, and Sawa for Development and Aid to organize a side event entitled “Syrian Humanitarians from the Ground: Challenges and Lessons of Local Leadership.” This side event, attended by UN Secretary-General Ban Ki-moon, brought together over 150 stakeholders to hear from six Syrian humanitarian leaders and two UN coordinators of the Whole of Syria Response.

EUROPEAN ADVOCACY

In 2016, SAMS began developing relationships with the European Union as well as European governments and development agencies. The Advocacy department met with European Commission leadership in Brussels on multiple occasions, as well as with senior officials in France, Germany, UK, Switzerland, Denmark, Sweden, Finland, Belgium, and the Netherlands. SAMS continues to push a humanitarian message, while also seeking support for programs and initiatives.

PRESS CONFERENCE ON ALEPPO CRISIS

On July 22, SAMS joined the Muslim Public Affairs Council, American Relief Coalition for Syria, faith-based, and Syrian American organizations in a press conference in front of the White House. These groups urged the U.S. government to take immediate action to address the humanitarian crisis in Aleppo.

in building the health system in Syria. This position improved the representation of Syrian NGOs in the humanitarian coordination system and the partnership with UN agencies, and INGOs.

In September, SAMS members and staff traveled to Geneva for a week of intensive advocacy efforts highlighting attacks on and access to healthcare in Syria. In partnership with the Office of the UN High Commissioner for Human Rights (OHCHR) and Physicians for Human Rights (PHR), SAMS held

meetings with the OHCHR Special Rapporteur on the right to health, the UN Deputy High Commissioner for Human Rights, member states of the Humanitarian Liaison Group, the Deputy Special Envoy for Syria, the coordinator of the Independent International Commission of Inquiry on Syria, among others. SAMS held a press conference on attacks on healthcare, briefed the OHCHR Committee on the Rights of the Child, and participated in a side event on the prevention of child mortality.

In 2016, SAMS, along with 72 other Syrian NGOs, contributed to launching a discussion with UNOCHA and INGOs to enhance the humanitarian coordination mechanisms and the representation of NGOs in the humanitarian leadership by releasing a public letter expressing concern over the lack of concrete action by UN agencies based in Damascus to respond to ongoing human rights violations in Syria.

SAMS has regular meetings to coordinate with Syrian and International NGOs to present unified messages lobbying for the needs of humanitarian field.

“SAMS, WHEN YOU SPEAK YOU ARE RESPECTED, WHEN YOU ARE SILENT YOU ARE HEARD, AND WHEN YOU ACT YOU ARE BOLD AND COURAGEOUS,”
—MICHAEL RATNEY,
U.S. SPECIAL ENVOY
FOR SYRIA



QATAR CONFERENCE

In partnership with Qatar Ministry of Foreign Affairs, Qatar Red Crescent (QRC), Syrian Expatriate Medical Association (SEMA), Physicians Across the Continent (PAC), Sham Relief, and Siraj, SAMS hosted its first international meeting under the theme: "Transitioning from Medical Relief to Resilience and Recovery in the Syrian Crisis" in Doha, Qatar on March 23–25. The first meeting focused on building a consensus among the different local, regional, and international stakeholders engaged in the medical relief and recovery in and around war-torn Syria.



CONGRESSIONAL ADVOCACY

SAMS staff and members regularly meet with Members of Congress in their districts in and in Washington, D.C. SAMS has held many briefings and hearings with key members and committees in the House and Senate, including:

- March 11, 2016: Senate Foreign Relations Committee panel, *Syria: Hope after 5 Years—Justice, Humanitarian Aid and Looking to Syria's Future*
- March 31, 2016: Tom Lantos Human Rights Commission Briefing, *Five Years of War in Syria: Healthcare Under Attack*
- September 23, 2016: Tom Lantos Human Rights Commission Hearing, *Syria's Humanitarian Crisis: What More Can We Do?*

PARTNERS & COALITIONS

SAMS is a member of numerous coalitions and working groups that collaborate on advocacy and operational planning.

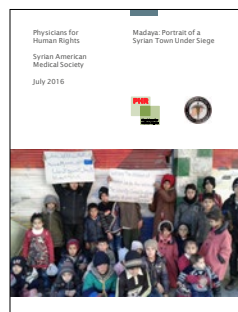
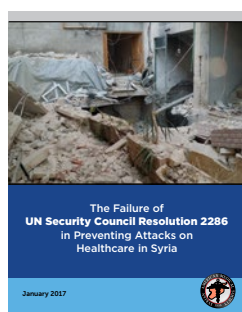
U.S. Based Coalitions:

- American Relief Coalition for Syria (ARCS)
- #WithSyria Coalition
- InterAction
- Safeguarding Health in Conflict

Field Based Coalitions:

- Turkey NGO Forum
- Syria INGO Regional Forum (SIRF)
- Syrian NGO Alliance (SNA)

REPORTS



- The Failure of UN Security Council Resolution 2286 in Preventing Attacks on Healthcare in Syria
- Madaya: Portrait of a Syrian Town Under Siege
- A New Normal: Ongoing Chemical Weapons Attacks in Syria
- Madaya: Starvation Under Siege

MEDIA

In 2016, SAMS established itself as one of the most trusted and active organizations working inside Syria, in neighboring countries, and in Greece to address the humanitarian crisis that reached a tipping point last year. Additionally, SAMS has become the number one source of reliable information thanks to its network of medical personnel who strived

“SYRIAN DOCTORS ARE SOME OF THE GREATEST HEROES I HAVE EVER MET. EVERY DAY THEY BRAVE THE BOMBARDMENT TO CARE FOR THE SICK AND TO TRY TO REBUILD THEIR BATTERED COUNTRY. THEY ARE AN INSPIRATION AND AN EXAMPLE TO ALL OF US,” —CLARISSA WARD, CNN’S SENIOR FOREIGN CORRESPONDENT

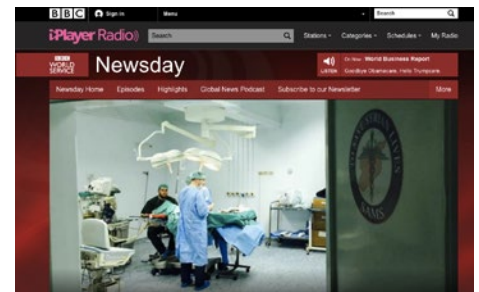
“SAMS IS DOING AN INCREDIBLE WORK,” —JILLIAN MICHAELS, CELEBRITY FITNESS EXPERT AND AUTHOR

“HEROIC PHYSICIANS FROM AMERICA AND OTHER COUNTRIES ARE TRAVELING SECRETLY TO AREAS OF SYRIA TO TREAT THE WOUNDED IN UNDERGROUND HOSPITALS AND CALL ATTENTION TO THE CARNAGE. THEY WORK THROUGH THE SYRIAN AMERICAN MEDICAL SOCIETY (SAMS), WHICH SUPPORTS MORE THAN 100 MEDICAL FACILITIES IN SYRIA,” —NICHOLAS KRISTOF, *THE NEW YORK TIMES*

to tell the world about the horrors of the conflict in Syria while continuing their lifesaving mission. **SAMS was featured in 729 top-tier national and international media outlets—compared to 296 news mentions in 2015—including CNN, NBC News, *The Guardian*, *The New York Times*, *The Washington Post*, *The Daily Mail*, and many more!** The coverage included exclusive TV interviews, op-eds written by SAMS healthcare workers in Syria, interviews, and direct quotes and references to SAMS work on the ground.

SAMS and its lifesaving work has been recognized by some of the most renowned and top-tier news agencies and personalities, including *The New York Times*, CNN, *Huffington Post*, Upworthy, Jillian Michaels, *The Guardian*, NPI, Syria Deeply, and many more!

“SUPPORT THE SYRIAN AMERICAN MEDICAL SOCIETY. THE GROUP RUNS DOZENS OF MEDICAL OPERATIONS IN SYRIA AND THE COUNTRIES THAT HAVE TAKEN IN THE LARGEST SHARE OF REFUGEES FROM THE WAR, TREATING NEARLY 3 MILLION SYRIANS IN 2015.” —UPWORTHY



SAMS LAUNCHES NEW WEBSITE

In order to showcase its impact, increase its reach, highlight the heroic work of its medics on the ground, and improve its users' experience, SAMS launched a new website with the following features:

- An interactive map that provides timely updates on beneficiary numbers from our programs in Syria, Jordan, Turkey, Lebanon, and Greece;
- A membership platform for its members;
- An event calendar to keep its members and followers updated on upcoming events, medical missions, medical trainings, and conferences.



Go to Syrian American Medical Society

WHO WE ARE OUR PROGRAMS OUR ADVOCACY OUR CAMPAIGNS GET INVOLVED NEWSROOM DONATE

JOIN OUR MISSION TO SAVE SYRIAN LIVES

Donate Today

Photo by Sam Doh. Used with permission.

The Syrian American Medical Society (SAMS) is a nonpolitical, nonprofit medical relief organization that is working on the front lines of crisis relief in Syria and neighboring countries to alleviate suffering and save lives. SAMS proudly provides medical care and treatment to every patient in need.

OUR IMPACT IN SYRIA

Syria - 2016 Impact

Total Medical Services Provided	2,627,380
Health Care Workers Supported	2,328
Medical Facilities Supported	192
Ambulances Supported	46
Dental Services Provided	70,963
Primary Health Care Services Provided	1,158,409
Dialysis Beneficiaries	8,968
Mobile Clinics Services Provided	110,214
Psychosocial Care Services Provided	35,616
Polio Vaccinations	234,089
Services Provided Through Telemedicine	7,930
Reproductive Health Services Provided	302,423
Number of Babies Delivered	39,327

STORY FROM THE FIELD

SURGERY AT THREE DAYS OLD

A three-day-old infant was admitted to a SAMS-supported pediatric ICU in Dara'a, Syria in May of 2016. She arrived at the hospital with a tracheoesophageal fistula, an abnormal connection between the esophagus and the trachea. She needed an immediate corrective surgery. Our dedicated medical personnel performed the surgery, and the infant was monitored for 15 days to ensure that there were no complications. On day 14, this beautiful baby girl began breastfeeding normally.



STORY FROM THE FIELD

FROM BENEATH THE RUBBLE

"Today, I treated the youngest patient since 2012," said SAMS's Dr. Hamza.

Wafa, a one-hour-old baby girl, was pulled from underneath the rubble following an aerial attack on a residential neighborhood in besieged East Ghouta. Wafa was put in an incubator and her condition stabilized. Wafa was one of the 13 wounded civilians who were brought to a SAMS-supported hospital in East Ghouta after the attack.

AWARDS & RECOGNITION

SAMS REACHED GOLD LEVEL ON GUIDESTAR, REPRESENTING THE TOP 0.5% OF ALL NONPROFIT ORGANIZATIONS ON THE WEBSITE. GUIDESTAR IS THE MOST RENOWN SOURCE OF INFORMATION ABOUT AND RANKINGS OF NON-PROFIT ORGANIZATIONS.

CHICAGOANS OF THE YEAR

Three SAMS doctors, Dr. Zaher Sahloul, Dr. John Kahler, and Dr. Samer Attar were selected as Chicago magazine's 2016 Chicagoans of the Year for their humanitarian work in Syria. These three brave doctors traveled to Aleppo in July 2016 to stand with their peers as the aerial bombardment campaign over the besieged city intensified. SAMS is proud to work with such amazing doctors.



“THE THREE DOCTORS VIEW THEIR EFFORTS AS A SMALL WAY TO STAND UP AGAINST THE WORLD’S INACTION IN THE CIVIL WAR. THEY ALSO WANTED TO HELP THE SYRIAN DOCTORS AND NURSES WHO EXEMPLIFY WHY THEY PRACTICE MEDICINE IN THE FIRST PLACE: TO HELP PEOPLE WHERE AND WHEN THE NEED IS GREATEST,” —CHICAGO MAGAZINE, OCTOBER 2016



PHYSICIAN OF THE YEAR: DR. WAEL HAKMEH

SAMS's Dr. Wael Hakmeh was announced LocumTenens.com's Physician of the Year. Dr. Hakmeh has traveled to Syria twice and to Turkey seven times over the past two years to volunteer with SAMS and train Syrian health-care workers on trauma care. In 2014, Dr. Hakmeh worked in the Emergency Room at the M10 hospital in Aleppo when a nearby building was bombed, aside from the 22 times that the hospital was directly targeted. Additionally, he is one of the founding members of SAMS Global Response.

“DR. HAKMEH POSSESSES ALL THE TRAITS WE CONSIDERED WHEN WE CREATED THE MEDICALMISSIONS.ORG PHYSICIAN OF THE YEAR AWARD. DR. HAKMEH PLACES HIMSELF IN DANGER TO IMPROVE LIVES IN WAR-RAVAGED SYRIA.” —CHRIS FRANKLIN, LOCUMTENENS.COM PRESIDENT

TESTIMONIALS FROM SAMS VOLUNTEERS

ROSANNE SYMONS

She was the last patient in the waiting room at Mafraq clinic, and it had been a long day—both for her and for me. Sleep had been scarce since leaving South Africa for Amman, and I was also feeling mentally exhausted from my (somewhat overeager) attempts at practicing to speak the Arabic I have been studying for the past couple of years.

Maryam sat down slowly and heavily, and started telling me about her generalized body pains, her lethargy, and the deafness she has suffered since the bombings in her town. Feeling helpless at the knowledge that I had no medicine that would make any meaningful difference to her ills, I tried to form the words to explain that all I had to offer her were multivitamins and analgesics. I looked directly into her eyes and before I said a word, she suddenly started crying.

I got down onto my knees in front of her, and asked her to tell me what was going on. With deep sobs, and much soul pain, she tried to explain something of the horrors she had fled in Syria. She talked about her two sons and their families, trapped inside besieged Eastern Ghouta. One of her grandchildren had recently been killed in an aerial attack, and another had been injured and subsequently paralyzed from the waist down. She feared for their lives, but knew that with the borders being closed and the town under siege, there was little she (or anyone else) could do. The relentless daily bombings left her terrified that it was only a matter of time before she would receive more bad news.

I felt overwhelmed—with sadness, compassion, and helplessness. The reason I volunteered for a SAMS mission was so that I could come in person and let the people of Syria know that their lives are significant and precious, worth mourning for, and worth sacrificing for. Their stories are not forgotten, their suffering is not unnoticed by the world, and their struggle is not in vain. Being a



casualty doctor I was obviously happy to help medically in any way I could, but I primarily wanted Syrians to know that I knew about, and felt something of what they had been (and were still going) through, and that their pain matters—to me, to other people and most importantly, to God.

The only thing I could think of doing in that moment was to ask the interpreter to ask Maryam if she would mind if I prayed for her, being cognizant of our different religious beliefs. She grabbed both of my hands and we bowed our heads. From the depths of my being I asked the Lord to supernaturally protect her family inside Syria, to please enable her grandchild to get the medical help she needed, and to comfort Maryam's heart like only He can. I pleaded with Him to show us how to end this complicated war, and that the beautiful, suffering Syrians would soon experience peace in their land, and know the deep healing love

“THE REASON I VOLUNTEERED FOR A SAMS MISSION WAS SO THAT I COULD COME IN PERSON AND LET THE PEOPLE OF SYRIA KNOW THAT THEIR LIVES ARE SIGNIFICANT AND PRECIOUS, WORTH MOURNING FOR, AND WORTH SACRIFICING FOR.”

of God in their hearts. As I was ending the prayer, she bent down, grabbed me around the neck and gave me the longest, tightest hug. Feeling her hot tears running down my neck, and with mine running down her neck, I sensed that she was one of the reasons I had come to Jordan.

DR. LATA CHERATH

It was completely serendipity that led me to SAMS. The iconic image of little Aylan Kurdi—washed up on Turkish shores stirred me like nothing had previously done in the past. I had been aware of the ongoing crisis in Syria; I prayed for those affected by the crisis and hoped that it would resolve and the world powers would do something. This image, however, moved me into action—and I felt I could not ask world leaders to do something about it if I was not willing to do my bit. I looked around for an organization that I could work with, and I came across SAMS (Syrian American Medical Society).

It is not often in life that one has an opportunity to meet a group of inspiring people in a short time that open up a whole different world to them. I had that opportunity when I went to Jordan with SAMS in November 2015.

In the six days that we (a group of 47 medical personnel) were in Jordan, we treated more than 5,000 patients, in Zaatari camp and in other urban clinics. An overwhelming majority of the refugees in Zaatari were children (more than 50%). I remember the first-time mothers being very young (14-16 years old). They didn't have "well baby checks" or preventive visits. Malnutrition and dental caries were extremely prevalent. I occasionally felt that the



SAMS, we had an opportunity to assure these people that the world still cares about and they were not and would not be forgotten.

Six months later, in July 2016—I went on a second mission—this time to Greece through SGR (SAMS Global Relief). SAMS-SGR committee was formed in April 2016 in response to the evolving refugee crisis in Europe.

SAMS entered the scene by establishing an informal mobile clinic (based on the individual volunteer numbers each week) in Idomeni, a camp on the border with the Former Yugoslav Republic of Macedonia (FYROM). This camp was closed and the people were moved into two smaller informal refugee camps also close to the border, EKO and HARA. In EKO camp in particular, SAMS partnered with MSF.

All the informal camps were closed in mid-June 2016 and three (now four) formal camps were set up in Thessaloniki in an industrial region, previously sparsely populated. SAMS was allocated by the Ministry of Health and the Ministry of the Interior, to be the sole medical provider. The setting up of the clinics was in its nascent stage when I went to volunteer in Thessaloniki.

The population was approximately 3,000 and primary healthcare is the main focus. It was a privilege to work

with SAMS and the group of volunteers. It was hard work coordinating with the local hospitals, arranging for referrals, working with the local NGOs for services that were outside our realm (MSF for psychology; Save the Children for nutrition for pregnant mothers and so on). We saw approximately 2,000 patients per month. SAMS staff also started several innovative outreach programs like community education to bridge the gap between the perceived and actual access to basic care for wounds/fever/pain. Weekly sessions were delivered by doctors and nurses in the different camps to provide an opportunity for discussions with the refugees about health service delivery and progress informally. It was so heartening to engage in these outreach programs and to be able to work alongside SAMS and its many volunteers.

My medical missions changed me forever. Along with the lump in the throat that I feel and the silent tears that I shed, I am also grateful. I have been asking myself, what is it that I am grateful for? Was it just the fact that I had an opportunity to help people by doctoring? I think not! It was and is bigger than that. I feel blessed that I had this opportunity that awakened me, allowed me to meet kindred souls and restored my faith in humanity!

"IT WAS SO HEARTENING TO ENGAGE IN THESE OUTREACH PROGRAMS AND TO BE ABLE TO WORK ALONGSIDE SAMS AND ITS MANY VOLUNTEERS."

mothers brought their children to us just so a doctor would look at them, check their height and weight and assure the mother that the child is growing well. They just wanted to see a doctor. All they were seeking was a validation of their existence! Through

MOHAMMAD JAMAL DEEN

Refugees are amongst the most misunderstood of people in the world. Why?

It is because we label them as just that: "Refugees." This mark typecasts and strips away the humanity of these individuals, and it does so because it crafts a one-dimensional perception of them.

What many of us lose sight of is that they were often highly-educated professionals who thrived in their societies. Many are doctors, nurses, teachers, and lawyers. Doting fathers and mothers.

I believe that this is what some of us fail to see in the west. Consequently, we create assumptions that these people are not capable of integrating into other societies, and especially our own. In reality, they are not only more than capable of adapting into our worlds, they can also further develop and advance them.

These assertions come from my own experiences living amongst them for three months in Northern Greece in the summer of 2016, and providing them with medical services as a healthcare professional in Lebanon on a ten-day medical mission earlier this year.

I spent many nights as the sole healthcare provider in "Eko Camp" in Greece. During my first three-month stint, I met many beautiful souls. I never went hungry, because they ensured I was fed. I never went cold, because they ensured I was clothed and sheltered. I never felt alone, because they accompanied me. Never had I felt safer than in their company during my time in the refugee camps.

My work kept me busy at night. Roughly 3,000 people were in my care. Some nights ran smoothly on my end, and other nights were a little tougher to get through. I remember a frantic father running towards my direction yelling, "Mohammad! My daughter is in a lot of pain! Please come to my tent!" I rushed over to the tent to find his 17-year-old girl wincing in pain with her hands on her flank (lower back) area. I asked what had happened, and in full English, she proceeded to give me the most thoroughly detailed medical history I had ever received in my eight years of being in healthcare. Dumbfounded, I asked her



how was she able to describe her history so meticulously.

"I was a second-year medical student back in Syria" she said.

"At 17?" I responded in shock.

"Yes. And I hope to continue school as soon as I can when I get out of Greece" she replied.

It got me thinking how we are shutting our doors on people like her. To those who were in favor of the travel ban, a.k.a the "Muslim ban," my question to them is, does this 17-year-old girl help or harm us? Is she really going to "terrorize" people or help save their lives?

This was just one story amongst many others. Encounters of a similar nature happened all too often in Greece and Lebanon. I met many doctors, nurses, paramedics, teachers, carpenters, artists and many other skilled professionals, who also happened to be "refugees."

Why is it that we don't see these people heading the news? Why didn't we hear about the Syrian cook who fed

"WHY DIDN'T WE HEAR ABOUT THE SYRIAN COOK WHO FED THE HOMELESS IN GERMANY AT CHRISTMAS?"

the homeless in Germany at Christmas? Why not the two Syrian emergency room doctors who are working as paramedics in Australia?

What is needed is to give humanity, identity and integrity back to those who have had these stripped away from them. We must remind ourselves, as well as others, that these incredible individuals are beyond their fleeting statuses as "refugees." Moreover, we should be re-evaluating the definition of "refugee" with its temporary nature in mind, rather than treating it as a sweeping term to be thrown around to stereotype and generalize truly remarkable and unique persons.

BOARDS

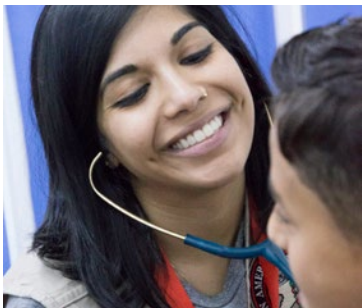
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