



SYRIAN AMERICAN MEDICAL SOCIETY



ANNUAL REPORT 2017




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SYRIAN AMERICAN MEDICAL SOCIETY

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MESSAGE FROM THE PRESIDENT

Dear SAMS members and supporters,

Another year has passed, and I am very proud of what we have accomplished in the face of unimaginable challenges. In 2017, thanks to your unwavering support, we served vulnerable individuals in nine countries across the globe, including here at home, established a strong consortium of leading academic institutions focusing on advancing the future medical education in Syria, and provided more than 3.5 million medical services, reaching more than 2 million of those affected by the greatest humanitarian crisis since World War II.

SAMS has established a reputation as one of the most impactful, independent, and prosperous humanitarian organizations working inside Syria and its surrounding countries.

In 2017, the indiscriminate and systematic targeting of healthcare facilities continued. However, our tireless and courageous colleagues continued their life-saving work. Tragically, some of them paid the highest price for their bravery; we mourned the death of six of our colleagues who were killed as a result of heinous aerial attacks. We are immensely grateful for their courage and services throughout the years, and are honored to be their voice. SAMS is committed to protecting doctors, nurses, and patients affected by the conflict.

SAMS is also committed to building a healthier future for our patients. Thanks to the dedication and generosity of our members and supporters, we expanded our operations further in 2017, responding to growing medical needs around the world, including the humanitarian crisis in Bangladesh, and natural disasters here in the United States. We are proud to report that two thirds of our programs inside Syria and beyond are focused on women and children's health.

These accomplishments would have not been possible without the commitment of our staff in the U.S. and the region, and our members around the world. More than 800 SAMS healthcare professionals from around the world joined our medical missions to the region and beyond.

Last year, our advocacy was more important than ever. We continue to be a leading voice in calling for the protection of civilians and medical workers, re-establishing humanitarian standards, and advocating for access to besieged communities inside Syria. We have forged robust relationships with key policymakers at the United Nations, UN Security Council members, and international aid agencies. Additionally, last year, we designed a medical evacuation plan for critically-ill patients to be taken out of East Ghouta. This was the first group that was granted access to medical evacuation since the beginning of the conflict.

Finally, we are proud to share that our membership base has tripled in just one year, and our SAMS student programs continue to expand.

On behalf of everyone at SAMS, we thank you for your steadfast support, dedication, and generosity throughout the



“SAMS HAS ESTABLISHED A REPUTATION AS ONE OF THE MOST IMPACTFUL, INDEPENDENT, AND PROSPEROUS HUMANITARIAN ORGANIZATIONS WORKING INSIDE SYRIA AND ITS SURROUNDING COUNTRIES.”

years. We are proud to say that SAMS is a reflection of the collective humanitarian principles that we seek to protect.

Together, we will continue to keep hope alive in the face of the greatest humanitarian crisis of our time.

Warmly,

Ahmad Tarakji, MD

President, Syrian American Medical Society

MESSAGE FROM THE FOUNDATION CHAIR

Dear SAMS supporters, donors, staff and volunteers,

Thank you for all of your tireless work in contributing to our many achievements this past year. Despite numerous challenges—some of which brought us to our knees—we accomplished so, so much. As we entered 2017, I cannot fully express how the evacuations from Aleppo and the impact on our facilities affected all of us. But this painful moment also turned into a rallying point. Despite the heartbreak, we did not give up—we could not give up. We rallied to raise more funds, to advocate harder, to procure more supplies, and to continue providing lifesaving operations despite the obstacles, risks, and cost.

Soon after we woke up from Aleppo, we were faced with a massacre and war crimes in Khan Sheikhoun. Together with other effective NGOs on the ground, we stood in solidarity with the victims of chemical attack, asked for protection of civilians, and provided emergency care to victims. We also mobilized resources to train and equip staff and facilities to deal with large numbers of victims from potential attacks, and advocated for refusing the use chemical weapons as new norm.

The challenges did not cease, as mass numbers of internally displaced populations had to be served. We opened more medical centers, and expanded existing ones. We expanded our services to provide pregnant women with high quality birth centers, to treat children and adults suffering from acute and chronic illnesses, and to train Syrian youths to become healthcare providers and fill the gaps of qualified nurses, midwives and many other specialties.

Throughout the year, together we moved from one milestone to another. In November, we opened the largest medical center in Zaatari, equipped to provide over 10,000 services per month, ranging from primary care to specialty care. We added needed diagnostics and therapeutic services to the health infrastructure already available in the camp.

Our passion to serve humanity drove us beyond Syria. In response to the Rohingya crisis on the border of Bangladesh and Myanmar, we established SAMS program in Cox's Bazar, Bangladesh. We also responded to natural disasters in Houston and Puerto Rico, mobilizing teams of SAMS volunteers to address the immediate medical needs of victims.

Our advocacy team highlighted the obstacles to providing impartial, ongoing assistance, and has, in many cases, succeeded in winning hearts, minds, and implementing lasting changes to policy. Just as we campaigned for Aleppo one year ago, we provided our unwavering assistance and commitment to the people and medical staff of besieged East Ghouta, advocating for medical evacuations, humanitarian relief, and the cessation of hostilities taking the lives of civilians. We met with key stakeholders and we shared the impact on civilians using social media campaigns, interviews with the



“OUR ACHIEVEMENTS MOTIVATE US TO DO MORE, AND CONTINUE STRIVING TO ENSURE THAT VULNERABLE PEOPLE CAN ACCESS THE MEDICAL CARE THAT THEY NEED.”

media, and even celebrity endorsements to raise awareness and ensure that the world does not forget what is happening in Syria. We have left no stone unturned in raising funds to support our lifesaving efforts.

Our achievements motivate us to do more, and continue striving to ensure that vulnerable people can access the medical care that they need. Last year our medical staff of more than 3,000 provided over 3.5 million medical services to those in need at a cost of less than \$10 per service. We were able to achieve this because helping others is more than a business or a job-- it is a lifelong commitment. We are a large team of dedicated individuals who decided that as coordinated, passionate group, we can work together to do more. Thank you for being on this team.

Amjad Rass, MD
SAMS Foundation Chairman



ABOUT SAMS



The Syrian American Medical Society (SAMS) is a global medical relief organization that is working on the front lines of crisis relief in Syria, neighboring countries, and beyond to alleviate suffering and save lives. SAMS is one of the most active and trusted international NGOs on the ground in Syria. **In 2017, SAMS provided more than 3.5 million medical services, including 3.2 million inside Syria.**

SAMS was founded in 1998 as a professional society, working to provide physicians of Syrian descent with networking, educational, cultural, and professional services. SAMS facilitates opportunities for its members to stay connected to Syria through medical missions, conferences, and charitable activities. **SAMS currently has over 1,500 grassroots members in the United States, who lead 26 chapters nationwide.**

When the conflict in Syria began in 2011, SAMS expanded its capacity

significantly to meet the growing needs and challenges of the medical crisis.

SAMS has since supported healthcare throughout Syria, sponsoring hospitals and ambulances, training and paying the salaries of Syrian medical personnel who are risking their lives to save others, and sending life saving humanitarian aid and medical equipment to where it is needed most. SAMS also supports Syrian refugees in neighboring countries and Greece with critical psychosocial support, medical and dental care, art therapy programs, and more.

In 2017, SAMS responded to local natural disasters in the United States, having deployed a team of medical mission volunteers to Houston, Texas in the wake of Hurricane Harvey, and to Puerto Rico in the wake of Hurricane Maria. SAMS has also extended its reach even further to Bangladesh, where we are providing medical care to Rohingya refugees in Cox's Bazar fleeing from violence and persecution in Myanmar (Burma).

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 beyond through medical relief and healthcare development.

OUR VISION

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

HUMANITARIAN CRISIS IN NUMBERS (2011-2017)

500,000+

approximate number
killed since 2011¹

5.1 million

Syrian refugees²

6.1 million

internally displaced Syrians²

13.1 million

people inside Syria require
humanitarian assistance

3 million

people in need trapped
in besieged and
hard-to-reach areas³

540,000

people living in
besieged areas⁴


400,000

besieged in East Ghouta in 2017

Numbers current through the end of 2017

1. The Syrian Network For Human Rights (SNHR). 2. UN High Commissioner for Refugees 3. UNOCHA. 4. UN

**KAFR ZITA SPECIALTY
HOSPITAL IN HAMA WAS
BOMBED FIVE TIMES IN 2017.**
(SAMS)



IN SEPTEMBER, 2011, THE FIRST INTENTIONAL ATTACK ON A CLEARLY-MARKED AMBULANCE OCCURRED IN HOMS, SYRIA.

IN 2017, SAMS DOCUMENTED THE DEATH OF 25 MEDICAL PERSONNEL IN ATTACKS ON HEALTHCARE, AS WELL AS 4 ADMINISTRATIVE PERSONNEL WORKING IN MEDICAL FACILITIES.

198

chemical weapons attacks from 2011-2017

14

chemical attacks in 2017

1,300

killed in August 2013 Sarin gas attack in East Ghouta

103

killed in April 2017 Sarin gas attack in Khan Sheikhoun

847

medical personnel killed from March 2011-December 2017⁴

25

medical personnel killed in 2017⁵

36

SAMS staff killed from 2015 through March 2018

19

civilians killed in attacks on healthcare in 2017, including seven children⁵

428

attacks on healthcare from 2015-2017⁵

120

attacks on healthcare in 2017⁵

41

facilities closed in 2017 (temporary & permanent)

4. Physicians for Human Rights (PHR).

5. Recorded by SAMS.



Denying access to health care as a tool of war is illegal according to international law, yet it has become a hallmark of the Syrian crisis. In 2017, the people of Syria faced continued attacks on healthcare and civilian infrastructure, leading to loss of life, loss of access to healthcare, and attrition of skilled health care workers.

Medical workers in Syria continue to risk their lives to save others, and have faced tremendous loss. In 2017, SAMS witnessed sustained periods of attacks on facilities, including in April, when SAMS recorded an escalated rate of 24 attacks on healthcare throughout the month.

SAMS also documented the permanent or temporary closure of 41 health

facilities in 2017—ranging from reproductive and pediatric health centers to hospitals and medical points—due to damage wrought by weapons including airstrikes, chemical attacks, artillery shelling, barrel bombs, and air-to-surface missiles.

The illegal use of chemical weapons also continued in 2017, with 29 chemical attacks recorded by SAMS in 2016 and 2017 (14 attacks in 2017). On April 4, 2017, Syrians experienced the deadliest chemical attack since the 2013 sarin gas attack on East Ghouta, when Khan Sheikhoun was attacked with sarin gas, killing at least 103 people.

2017 drew to a close amidst an alarming escalation of hostilities in the

THE ONGOING CONFLICT IN SYRIA, COUPLED WITH THE SYSTEMATIC TARGETING OF HEALTHCARE, HAVE LEFT MILLIONS OF SYRIANS WITH LITTLE TO NO ACCESS TO HUMANITARIAN AID.

besieged area of East Ghouta, and the province of Idlib. East Ghouta was subject to a stifling blockade for more than five years.



IDLIB PROVINCE

Throughout 2017, civilians and health workers in Idlib faced an alarming escalation of aerial attacks, coupled with a lack of access to humanitarian aid in hard-to-reach places. Idlib province is now home to over 1.1 million of Syria's 6.3 million internally displaced people (IDPs). Like East Ghouta, Idlib was designated as part of the “de-escalation” zones brokered by Russia, Turkey, and Iran. Unfortunately, this has not spared Idlib from attacks on civilian and medical infrastructure.

From September 19 to September 27, 2017, SAMS staff reported 10 attacks on health care in Idlib and Hama. These attacks impacted hospitals, ambulance systems, and a mobile clinic, many of which were forced to temporarily or permanently shut their doors. On September 19th alone, four aerial attacks in southern Idlib and northern Hama targeted health care facilities, leaving three hospitals, three ambulance centers, and three Syrian Civil Defense centers out of commission.



EAST GHOUTA

In 2017, the humanitarian situation in besieged East Ghouta deteriorated even further, with nearly 400,000 residents, including 130,000 children, subject to escalating airstrikes, and a lack of humanitarian supplies, basic necessities, and medical care due to the stifling siege.

While surviving under siege, the residents of East Ghouta were subjected to a fierce, ongoing aerial and ground campaign. These strikes increased in 2017, despite the “de-escalation” zone agreement covering the area. Hospitals, marketplaces, schools, and other civilian

areas were targeted with impunity.

Due to the five-year blockade, residents of East Ghouta struggled with rampant and severe malnutrition, and a lack of treatment for both acute and chronic disease. By the end of 2017, the rate of malnutrition in the area reached 12 percent, the highest seen in the Syrian crisis.

The medical situation in the besieged enclave was dire through 2017, with approximately 100 doctors left to treat the population. By the end of the year, over 700 people required medical evacuation to receive the

necessary treatment to survive. However, throughout 2017 only 31 people were evacuated, including only 37 people in December 2017. Only 10 aid convoys were allowed to enter East Ghouta in the year, and crucially needed items (such as burn kits and surgical items) were systematically removed from these convoys.

From mid-May until the end of 2017, health facilities in East Ghouta were targeted 18 times, including a physical rehabilitation center, which was destroyed after a targeted attack in September 2017.



SAMS 2017 HIGHLIGHTS

In 2017, SAMS provided high quality care to those in need inside Syria, in neighboring countries, and beyond. Thanks to the generosity of our donors and the dedication of our medical personnel, volunteers, and staff, SAMS was able to expand its operations further to respond to growing medical needs around the world, including launching new programs inside Syria, opening a multi-specialty medical center in Al-Zaatari Refugee Camp in Jordan, and responding to the Rohingya refugee crisis in Bangladesh.



1. In January, **SAMS opened a new dental clinic in al-Karam Refugee Camp in northern Syria**, home to more than 100,000 internally displaced persons (IDPs) who were forced to evacuate eastern Aleppo in December 2016.
2. Due to the high cost of dialysis treatment for refugees living in Lebanon, more than 50 patients lost access to critical care. **SAMS immediately responded by launching new dialysis programs in Beka'a and Tripoli, providing 1,800 dialysis sessions in 2017.**
3. In the wake of the chemical attack on Khan Sheikhoun in April that killed at least 103 people, **SAMS responded immediately by shipping nerve gas antidotes to our facilities that received victims of the Khan Sheikhoun attack.** SAMS treated 201 victims of the chemical attack.



4. **In April, SAMS partnered with Karam Foundation to provide milk and running costs for milk distribution centers in Idlib province.** Thanks to SAMS's contribution, the "Milk4Syria" project reached 2,607 children, with 19,242 boxes of milk formula from April to October 2017.
5. **In June, SAMS teamed up with WWE Superstar Sami Zayn to launch a new mobile clinic in southern Syria,** providing primary health care and psychosocial care to vulnerable individuals who otherwise have no access to dignified care. Within three months, the "Sami For Syria" Mobile Clinic was providing medical care.
6. In 2017, almost half a million Rohingya refugees fled from Myanmar to Bangladesh, seeking a safe haven from persecution and violence. **SAMS responded immediately by providing care to displaced Rohingya refugees.** In September, SAMS partnered with a local medical organization, and opened two health clinics in camps in Cox's Bazar, providing primary care, OB/GYN, and psychosocial care to 200 to 400 Rohingya refugees per day.
7. In the wake of Hurricane Harvey and Hurricane Maria, **SAMS urgently deployed teams of medical mission volunteers to Houston and to Puerto Rico** to respond to the medical needs of victims of these natural disasters.

8. **In November, SAMS partnered with the French government to support medical care in southern Syria.** Thanks to this partnership, SAMS opened a primary care center, a mobile care unit, and a psychosocial center in the region of Dara'a, as well as a rehabilitation center for spinal cord injuries in Douma, East Ghouta.
9. **In partnership with Cairo's Ain Shams University, SAMS launched its first medical mission to Egypt in November.** During the mission, SAMS medical volunteers provided interventional cardiology procedures to 51 patients, using the university's fully equipped catheterization lab.
10. **In November, SAMS opened its new multi-specialty medical center in al-Zaatari Refugee Camp in Jordan,** under the auspices of Her Royal Highness Princess Muna al-Hussein. The medical center, now the largest in the camp, provides 7,700 consultations per month, treats up to 350 patients on a daily basis, in various areas of specialty care, including cardiology, neurology, pediatrics, gynecology, dental, and orthopedics, as well as primary and preventative care.
11. **In November, SAMS was featured on "60 Minutes."** The episode highlights the lifesaving mission of SAMS and the selfless and courageous work of our medical volunteers and personnel inside Syria who continue to risk their lives to save others.



SAMS MEDICAL RELIEF WORK

SAMS is the most trusted and active medical relief organization working on the ground in Syria and beyond. **In 2017, SAMS provided over 3.5 million medical care services to vulnerable individuals**, including more than 3.2 million in Syria. SAMS is proud to provide high quality, dignified, and specialized care to those in need free of charge.

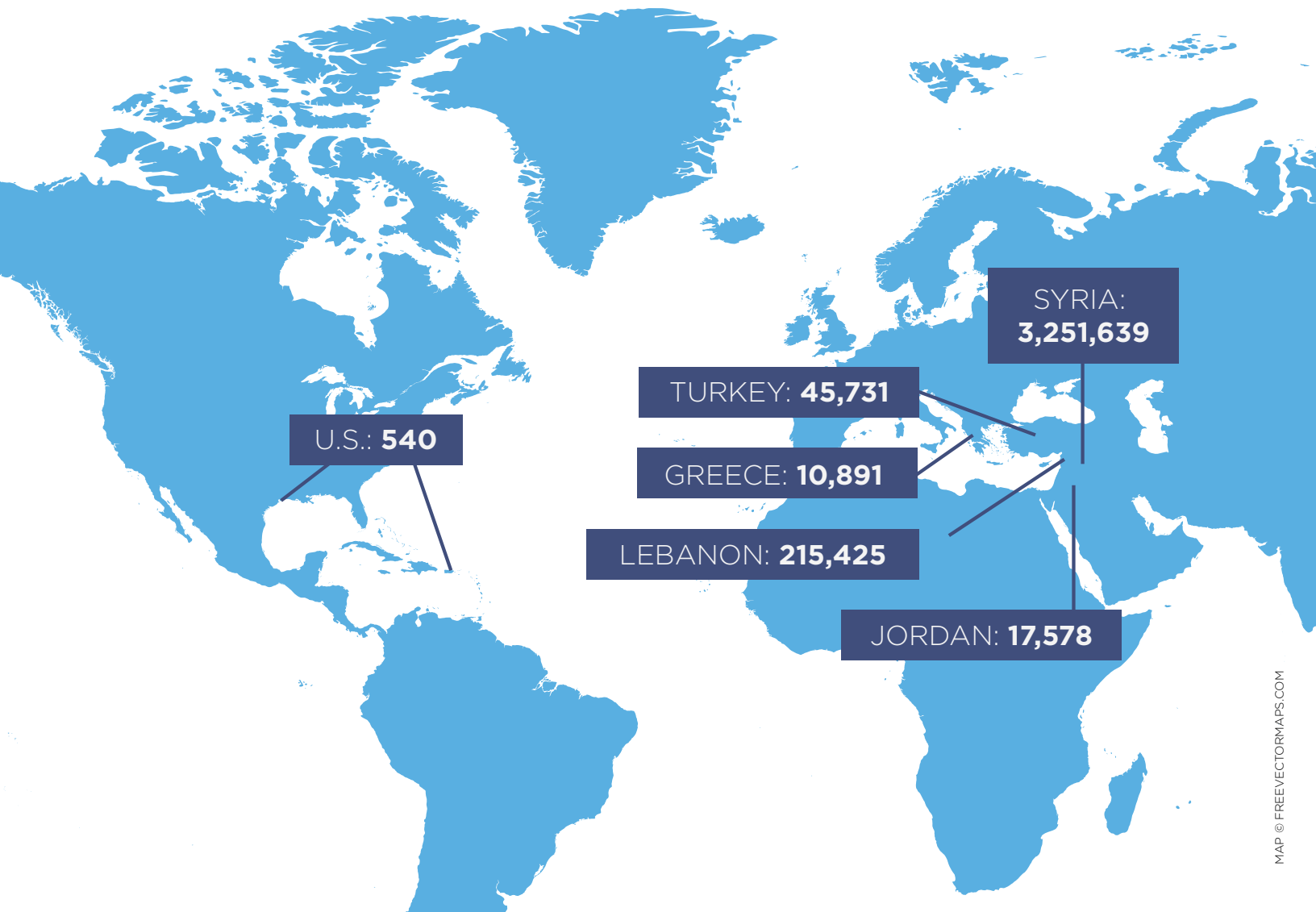
In 2017, SAMS has expanded its operations inside Syria and in the neighboring countries to meet the growing medical needs of those affected by the greatest humanitarian crisis of our time. Additionally, in 2017, SAMS widened its

reach by responding to the Rohingya crisis in Bangladesh and deploying medical volunteers to Houston and Puerto Rico in the wake of Hurricane Harvey and Hurricane Maria.

Since the beginning of the humanitarian crisis in Syria in 2011, SAMS has supported healthcare throughout Syria, sponsoring field hospitals and ambulances, training and paying the salaries of Syrian medical personnel, organizing medical missions throughout the year, and sending lifesaving humanitarian aid and medical equipment to where it is needed most.

IN 2017, THE AVERAGE COST PER PATIENT WAS LESS THAN \$10

SAMS operates in Syria, Jordan, Lebanon, Turkey, Greece, and Bangladesh. In addition to our operations on the ground in these countries, **SAMS organized 27 medical missions to the region and beyond in 2017, treating 22,457 beneficiaries.**



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SAMS 2017 IMPACT

-  **141** medical facilities supported
-  **9** mobile clinics supported
-  **2,527** healthcare workers supported
-  **949** non-medical workers supported
-  **266,352** health services provided for refugees
-  **1,553,523** primary and specialty care services provided
-  **469,598** reproductive services provided
-  **640,908** trauma services provided
-  **43,538** babies delivered
-  **36,661** physical rehab services provided
-  **11,195** dialysis services provided
-  **213,357** dental services provided
-  **118,371** major/minor surgeries performed
-  **10,908** ICU services provided
-  **13,363** vaccination services provided
-  **35,894** psychosocial services provided
-  **2,934** telemedicine services provided
-  **217,836** patients served by mobile clinics
-  **553,319** lab and imaging services provided

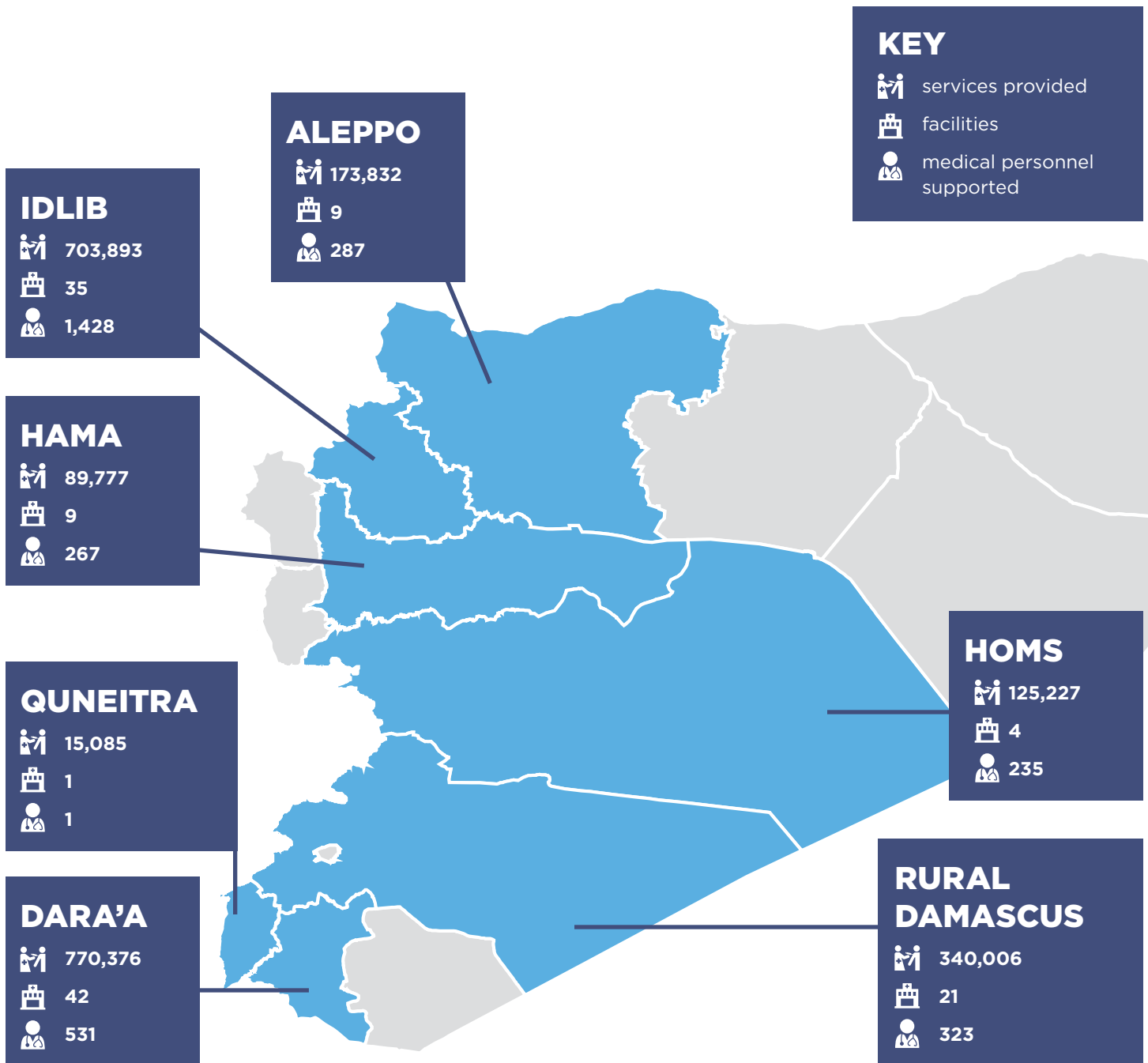


BANGLADESH: 2,333

SYRIA PROGRAMS

Despite the challenges inside Syria, specifically the systematic and ongoing attacks on healthcare facilities, SAMS is committed to continuing its medical and humanitarian work in the face of crisis.

In Syria, **SAMS operates in seven governorates across Syria**, providing primary and specialized care. **In 2017, SAMS provided 3,251,639 medical services, treated 2,074,460 beneficiaries, sponsored 119 medical facilities, and supported 3,072 medical and non medical workers.**



SERVICES PROVIDED IN SYRIA

Inside Syria, SAMS provides primary and specialized medical care, including trauma, psychosocial, dental, OBGYN, dialysis, and more. As new developments unfold and the situation on the ground is rapidly changing, SAMS has developed a robust mechanism to promptly and effectively respond to crises and ensure that our patients continue to have access to the dignified care they need and deserve.



PRIMARY HEALTH CARE (PHC)

SAMS operates 50 primary health care facilities, including eight mobile clinics, across Syria, providing care for communicable and non-communicable diseases for local populations, internally displaced persons (IDPs), and those living in hard-to-reach and remote areas. Services provided include internal medicine, pediatrics, ENT, dermatology, urology, ophthalmology, orthopedic, dental, OB/GYN, and physiology. **In 2017, SAMS provided 1,421,794 primary health care services in Syria to 1,276,464 beneficiaries.**

SAMS also conducted malnutrition screenings as an essential part of the PHC services provided in Syria, especially in besieged areas such as East Ghouta where SAMS witnessed acute malnutrition cases amongst children.

Working with Health Cluster partners in Gaziantep, Turkey, SAMS participated in developing Essential Health Service Package (XEHSP) for the Primary Health Care for northern Syria to overcome service fragmentation that has become pervasive due to the ongoing conflict.



IN 2017, SAMS DELIVERED 43,538 BABIES IN SYRIA.

2017 IMPACT AT A GLANCE IN SYRIA



1,421,794 primary and specialty care services provided



450,934 reproductive services provided



640,908 trauma services provided



17,997 physical rehab services provided



9,395 dialysis services provided



161,457 dental services provided



113,078 major/minor surgeries performed



10,908 ICU services provided



28,945 psychosocial services provided



2,934 telemedicine services provided



217,836 patients served by mobile clinics



550,354 lab and imaging services provided

REPRODUCTIVE HEALTH (RH)

In 2017, SAMS supported 37 health facilities to provide reproductive health (RH) services across Syria. In order to respond to the needs, SAMS supported new RH services in three facilities in Hama and Idlib province. SAMS continued its support of neonatal intensive care in East Ghouta and Dara'a, and expanded neonatal and pediatric critical care services to north west Syria after its success in East Ghouta and Dara'a in 2016. **In 2017, SAMS provided 457,043 RH services inside Syria.**

SAMS RH projects provided a wide range of services including prenatal and postnatal care, pediatric care, and general gynecological services. Additionally, SAMS offered family planning, antenatal and postnatal care, sexual transmitted disease (STD) management and prevention, gender-based violence (GBV) programming, in-patient care, natural births and cesarean deliveries, neonatal care, as well as neonatal intensive care units (NICU).

VACCINATION

In 2017, SAMS provided routine immunization services to five facilities in northern Syria—55,719 vaccines were given to children under the age of five and 848 vaccines were given to pregnant women. **In 2017, SAMS provided vaccinations to 13,009 vulnerable individuals.**

DENTAL CARE

SAMS continues to provide dental care through its 25 dental clinics across Syria. **In 2017, SAMS provided 161,457 dental services to Syrians, including those living in refugee camps.**

SPECIALTY CARE

In Syria, SAMS supports multiple facilities and programs that are designed to provide specialized care in areas where access to quality, specialized care is limited, specifically in besieged and hard-to-reach areas. Specialty services include gastrointestinal endoscopy, ophthalmology, hemodialysis and more. In 2017, SAMS supported a Spinal Cord Center in besieged East Ghouta.

HEMODIALYSIS

Access to dialysis treatment is critical for patients suffering from chronic illnesses such as kidney failure. In conflict settings, access to dialysis treatment can be limited—especially in besieged areas where there are acute shortages of medical supplies and equipment. **In 2017, SAMS supported five dialysis centers inside Syria, providing 9,396 dialysis sessions to at least 200 patients.**

PHYSICAL REHABILITATION

In Syria, SAMS supports six physical rehabilitation facilities, including five in northern Syria. In 2017, these centers provided 17,997 consultations. Additionally, SAMS supports a seventh rehabilitation and physiotherapy center in Termanin that provided 9,780 services.

INTENSIVE CARE UNITS (ICU) AND TRAUMA CARE

As the conflict in Syria rages on and attacks on civilian infrastructure intensify, SAMS continues to expand its intensive care units (ICU) and trauma programs to critically-ill and wounded patients. **In 2017, SAMS provided 651,816 ICU services, including 640,908 trauma surgeries and supported seven ICUs.** Additionally, SAMS opened two new neonatal ICUs in Idlib province in 2017. These services treated 4,349 beneficiaries and achieved 1,743 Tele-ICU servings.

IN 2017, SAMS TREATED 11,646 ICU PATIENTS IN SYRIA



STORY FROM THE FIELD

Dia, 6, was one of our young patients in East Ghouta. Dia was injured in an airstrike attack on his home in the besieged area. Sadly, his mother was killed in the attack, and his sister was badly wounded. Dia suffered a spinal cord injury that paralyzed his lower limbs. He underwent physiotherapy at a specialized SAMS-supported facility in East Ghouta. Despite the dire situation in East Ghouta, Dia's resilience and determination to get better was inspiring. Thanks to SAMS medical workers at our physical rehabilitation center in East Ghouta, Dia received the care he needed, and our staff saw a significant improvement in his mobility.

STORY FROM THE FIELD

For children, art can offer a way to interpret and represent reality. In northern Homs, the Volunteer Happiness Team for Psychosocial Support hosted an art exhibition in July 2017. Children showcased their drawings that highlighted a glimpse of the daily reality for Syrian children, a reality shaped by ongoing violence, loss, and displacement. Yet, many of these powerful images reflect their hopes for peace and display their resilience and strength.



PSYCHOSOCIAL CARE

The conflict in Syria has taken an unimaginable toll on Syrians. At least 3 million Syrian children under the age of six have known nothing but war, violence, and displacement for more than seven years. In order to address the psychosocial needs of those affected by the ongoing crisis, SAMS has supported psychosocial programming inside Syria since 2012. **In 2017, SAMS supported six psychosocial centers in Idlib, Dara'a, and besieged East Ghouta, providing 35,894 mental health and psychosocial services.**

SAMS psychosocial programming in Syria provides a number of psychosocial activities such as art and play therapy, one-on-one consultations, and group sessions to help individuals cope with the effects of trauma and overcome fear, depression, and social isolation. Additionally, SAMS supports a tele-psychiatry center in Idlib.



MOBILE CLINICS

In 2017, SAMS operated eight mobile clinics in Syria to ensure individuals living in remote areas and refugee camps, as well as elderly with limited mobility, have access to primary health care. These mobile clinics are staffed with a physician, a pharmacist, a nurse, and a midwife. **In 2017, SAMS provided 217,836 medical services through its mobile clinics.**

Mobile clinics are a cost-effective and sustainable method of bringing medical care right to people's doorsteps. In July 2017, SAMS partnered with WWE Superstar Sami Zayn on "Sami for Syria" campaign to launch a new mobile clinic in Dara'a, serving vulnerable individuals in the area who had no access to crucial care. SAMS also operates a mobile clinic for visions screening for children, providing eyeglass fittings.





IMAGING SERVICES, LABS AND BLOOD BANKS

Across Syria, SAMS provides laboratory and imaging services to ensure beneficiaries receive the needed treatment. **In 2017, SAMS facilities provided 334,930 laboratory services—including blood tests, urine tests, immunity screening, and more— and 209,000 radiology services.**

SAMS also supports two blood banks in northern Syria, one in Saraqeb and Marat al-Numaan. **The blood banks served 9,389 beneficiaries in 2017.** Additionally, 20,141 blood components were distributed to beneficiaries and 43,938 tests were conducted for screening for communicable diseases such as HbsAg, HCV, and HIV.

TELEMEDICINE

To lend their expertise to colleagues on the ground in Syria, SAMS members across the U.S. rely on telemedicine. Given the limited resources and ongoing challenges our staff in Syria face, SAMS launched a telemedicine program in 2014. SAMS Telemedicine Committee members are on call 24/7, responding to calls and WhatsApp messages. Due to limited resources and shortages of medical personnel, SAMS expanded its telemedicine programming, adding tele-radiology and tele-psychiatry. In 2017, SAMS also expanded its telemedicine support to north west Syria after its success in East Ghouta and Daraa in 2016. In 2017, SAMS also expanded its telemedicine support to north west Syria after its success in East Ghouta and Daraa in 2016.

In 2017, SAMS provided nearly 3,000 medical services through its telemedicine program, covering trauma cases, medical consultations, complicated surgical procedures, radiology and psychiatry consultations, and medication management.

MEDICAL TRAINING AND EDUCATION

In addition to supporting its medical personnel with monthly salaries, SAMS provides education and training courses for our courageous healthcare workers to address the gaps in healthcare provisions and ensure that the staff are up-to-date with the latest developments and innovations in the field of medicine.

In 2017, SAMS conducted the following trainings:

- Dialysis machine troubleshooting: procedures and techniques
- Surgical trauma and IC management training
- Mental health and psychosocial training
- Microbiology training course: updates on microbiology concepts and techniques
- Gender based violence and clinical management of rape (CMR)
- Reproductive health for community health workers
- Neonatal medicine course

SAMS is committed to supporting medical education for Syrian medical workers. In response to the attrition of skilled healthcare providers, SAMS has established six medical institutions inside Syria, including two midwifery and nursing schools in Idlib. **In 2017, SAMS provided continuing medical education to 1,138 students.** Eleven midwives graduated in 2017 from the SAMS-supported Midwifery Institute. Additionally, SAMS supports the only medical institute in East Ghouta. Nearly 280 medical students were enrolled at the school.

STORY FROM THE FIELD

Abdul Kader, a young patient from Idlib, was born two months early. According to Dr. Omar, the stress of conflict, fear of flight, constant displacement and difficult living conditions can often lead to premature birth. Abdul Kader was taken to a SAMS-supported hospital immediately after his birth. Doctors there performed a pulmonary resuscitation and oxygenation, which saved the child's life. However, the hospital lacked essential equipment to sustain Abdul Kader, and he was transferred to a specialized maternity hospital, where he was placed in an incubator and supervised. He was subsequently transferred to a Turkish hospital. For many mothers in Syria, the risk of premature birth is compounded by the conflict.



**IN 2017, SAMS
SUPPORTED 2,193
MEDICAL WORKERS
INSIDE SYRIA**

TURKEY PROGRAMS

In Turkey, SAMS is one of the co-leads of the Turkey-based Health Cluster for the Whole of Syria (WoS) response. In addition to our medical relief operations in Turkey, the SAMS Turkey staff manage and oversee SAMS's operations in four governorates in northern Syria, including Idlib, Aleppo, Homs, and Hama.

In 2017, SAMS provided 45,731 medical services to refugees and vulnerable individuals living in Turkey.

CROSS-BORDER SUPPORT

SAMS strives to keep its facilities well-equipped, stocked, and ready to respond effectively to crises throughout the year. SAMS Turkey office plays an instrumental role in managing and implementing our cross-border operations to deliver medical supplies and equipment to our facilities in northern Syria, serving a population of nearly 1.5 million. Additionally, SAMS Turkey office manages a network of warehouses in northern Syria.

SAMS supports its medical facilities with fuel, medications, blood bags, surgical sets, dialysis supplies and equipment, incubators, X-ray machines, and CT scans.

In the wake of the chemical attack on Khan Sheikhoun in April 2017 that killed at least 103 people, SAMS responded immediately by shipping nerve gas antidotes to our facilities in northern Syria that received victims of the sarin gas attack. Thanks to its immediate response, SAMS treated 201 victims of the chemical attack.

EL-EMEL HOSPITAL

Since September 2017, SAMS has supported El-Emel Hospital in Reyhanli, Turkey. It is the only hospital run mainly by Syrian NGOs and Syrian doctors with prior approval from the Turkish authorities. The hospital provides primary health and specialized care—including GI endoscopy, ENT, trauma, specialized surgeries, and more—for free to Syrian refugee patients.

From September–December 2017, SAMS supported 19 medical workers, and the hospital provided 11,151 medical services, including 1,500 minor surgeries, 444 major surgeries, and 6,236 PHC services.

Additionally, SAMS organized and facilitated five medical missions to El-Emel Hospital in 2017, bringing highly-skilled medical professionals and surgeons from the U.S. and abroad to treat complicated surgical cases. These missions benefitted 141 Syrian refugees who underwent surgeries.

DENTAL CARE

The SAMS dental relief program in Turkey started in September 2012 consisted of only one portable dental unit and two suitcases of dental tools and supplies brought from the



IN 2017, SAMS SHIPPED 172 CONTAINERS ACROSS THE TURKISH BORDER, EQUIVALENT TO MORE THAN \$13 MILLION IN AID VALUE.



TO DATE, SAMS MEDICAL TRAINING PROGRAM IN TURKEY HAS TRAINED NEARLY 850 SAMS MEDICAL STAFF WORKING INSIDE SYRIA.





“IT’S A PLEASURE TO BE HERE IN REYHANLI TO BRING HELP TO THE SYRIAN PEOPLE THAT LIVE HERE AND SOME SYRIAN PEOPLE THAT HAVE BEEN AFFECTED BY THE CONFLICT WHO HAVE CROSSED OVER FROM THE BORDER.” —DR. SAMI ALMOBAIED, SAMS VOLUNTEER.

United States to establish our first dental clinic in Turkey for Syrian refugees. Since then, SAMS has expanded its dental services in Turkey. Currently, SAMS operates six dental clinics inside and outside refugee camps located in Istanbul, Gaziantep, Reyhanli, and Kilis.

In 2017, these clinics provided 35,480 vital dental care services for Syrian refugees living in Turkey.

MEDICAL MISSIONS

In 2017, SAMS organized and facilitated 11 specialized medical missions to Turkey that brought together 21 medical professionals and surgeons from the U.S. and abroad and treated 182 beneficiaries.

In 2017, SAMS volunteers conducted the following specialized missions to Turkey:

- Plastic/facial reconstructive surgery
- Neonatology
- Trauma surgery
- Infectious disease
- Orthopedic surgery
- Gastroenterology
- Urology
- Nephrology

In April 2017, and in partnership with El-Emel Hospital, SAMS organized a gastrointestinal medical mission led by Dr. Saud Suleiman Atassi. In just three days, SAMS provided 50 consultations, as well as 19 endoscopy procedures.

In August 2018, SAMS conducted a reconstructive mission to El-Emel Hospital led by Dr. Haitham Al-Shetawi and Dr. Sami Almobaied. During the mission, volunteers treated 90 patients and performed 30 reconstructive surgeries. According to SAMS volunteers, many of the patients they treated suffered from war injuries and burn injuries as well as a need for secondary reconstructions. Many of the patients were Syrians who fled to Turkey, or Syrians who crossed the border in search of specialized care.

MEDICAL TRAINING

As a part of its ongoing efforts to strengthen and develop the skills of our Syrian medical staff, SAMS organizes medical trainings in Gaziantep, Turkey throughout the year. **In 2017, SAMS conducted six training courses and workshops in Turkey for 56 Syrian doctors, nurses, and technicians.** These trainings were led by 14 SAMS medical professionals from the United States. These trainings were also live streamed to benefit medical personnel based in Syria who were not able to attend in-person trainings.

The following training and workshop topics were conducted in Turkey in 2017:

- Delivery room management
- Neonatal resuscitation
- Apnea of prematurity & newborn respiratory distress,
- Mechanical ventilation management
- Helping Babies Breathe (HBB) Program
- CPAP management

JORDAN PROGRAMS



Over 1 million Syrian refugees now reside in Jordan, the sixth highest refugee-hosting country in the world. SAMS operates medical relief programs in Jordan, providing free medical services to Syrian refugees in Al-Zaatari Camp and in areas throughout Amman and Irbid. **In November 2017, SAMS opened its own, multi-specialty medical center in Al-Zaatari Camp, with the goal of providing consistent, high quality care to Syrians residing in the camp, the largest camp for Syrians in the world.** The medical center was inaugurated under the auspices of Her Royal Highness Princess Muna al-Husseini, who was a guest on a SAMS Medical Mission. The medical center provides a range of services, including cardiology, neurology, paediatrics, gynaecology, dental and orthopedics, as well as those pertaining to primary and preventative care.

In addition to SAMS's extensive work on-the-ground in Jordan, SAMS's regional office in Amman is a hub for its medical relief work in rural Damascus and southern Syria. **In 2017, SAMS provided 17,578 medical services in Jordan.**

MULTI-SPECIALTY MEDICAL CENTER IN AL-ZAATARI REFUGEE CAMP

In Al-Zaatari Camp, the health needs of the 80,000 residents are vast and complex. To expand SAMS's impact and

access to care in Al-Zaatari, in 2017, SAMS built and opened its own medical facility in the camp to provide both primary healthcare and specialized care to refugees. The 1,000 meter squared facility was inaugurated in November 2017. Sub-specialties offered include orthopedic, neurology, pediatric, internal medicine, cardiology, dental, pharmacy, radiology, laboratory, and general practice.

On average, the center provides over 7,500 services per month, serving over 6,000 beneficiaries. In addition to offering consistent and free care for chronic conditions, as well as early interventions for acute conditions, the center offers developmental support to children, allowing for the monitoring of growth, development and nutritional status.

From November to December 2017, 8,999 Syrian refugees received 10,652 medical services at SAMS's Multi-Specialty Medical Center.

MENTAL & PSYCHOSOCIAL SUPPORT

One of SAMS's most crucial programs in Jordan is its Mental Health and Psychosocial Support Program (MHPSS) based in Irbid, providing different means of interactive therapy for individuals struggling with trauma, anxiety and depression. During 2017, SAMS continued its support and operated a PSS center that provided psychosocial services and mental health

STORY FROM THE FIELD

During SAMS Medical Mission to Jordan in July, volunteers met many exceptional individuals who struggled with the lingering physical effects of the crisis in Syria. Hadeel was one of these individuals. Hadeel is 12 years old and lives in Al-Zaatari Camp, where she met Vickey Patel, physical therapist, and Lydia Palmer, occupational therapist. Hadeel was in her home in Syria when an airstrike caused the building to collapse and crumble on top of her. She survived four hours buried under the rubble, but had a traumatic brain injury, spinal cord injury, and was in a coma for nearly a month. Patel and Palmer worked with her, with Patel focusing on her legs and brain stem, and Palmer focusing on her arms, hands, and brain stem. They also worked alongside volunteer translators, Bana Hadid. Hopefully this was only the beginning of Hadeel's recovery.



treatment to Syrian refugees, vulnerable Jordanians and other refugee populations.

In Jordan, SAMS has four different programs to target mental health symptoms, including a clinical program (individual therapy and medication management), group therapy, and outreach/in-home assessments. Further, SAMS has a community outreach in which SAMS staff travel to community centers and schools, partnering with various organizations to discuss various topics related to mental health. The aim is to reduce the stigma associated with seeking help for mental health issues.

In 2017, the MHPSS program expanded, structuring teams into outreach, group therapy, and clinic-therapy teams. The group programs and workshops were enhanced, resulting in five group therapy programs in Jordan, and three workshops. In Jordan, four doctors provided medication management to patients, under the supervision of the Mental Health Committee. In addition, the MHPSS program conducted training for medical providers from southern Syria in Amman.



STORY FROM THE FIELD

After fleeing from Syria, Hamza*, 43, struggled with post-traumatic stress as a refugee in Jordan. He felt isolated, lethargic, stopped communicating with others, overslept, and lost weight.

Hamza struggled with these symptoms for seven months before getting help from a SAMS clinic. The clinicians learned of the tragic events he had witnessed, including the deaths of two sons and the arrest of another.

During his individual therapy sessions, a treatment plan was created that included cognitive behavioral therapy techniques and medication management services. Throughout treatment, he struggled with feelings of guilt. After five months of therapy, clinicians noticed an improvement, observing that Hamza was committed to fighting his depression and caring for his remaining family.

**Name changed for patient confidentiality.*

Throughout 2017, the MHPSS program treated 6,928 beneficiaries, including 361 patients receiving individual treatment, 642 patients attending the Adult Support Group, 706 children benefiting from the Children Support Group, 204 adolescents benefitting from the Adolescent Support Group, and over 5,000 families benefiting from the in-home assessment.

MEDICAL MISSIONS

SAMS facilitates frequent medical missions to Jordan throughout the year to allow doctors, members, students and volunteers to participate in specialized and surgical missions to serve Syrian refugees and vulnerable Jordanians. **During 2017, SAMS led four medical missions to Jordan that served 15,255 beneficiaries.** Missions offered a range of services, including primary and secondary health care, surgeries and other medical services. In January 2017, SAMS medical volunteers provided OBGYN care for the first time on a medical mission to Jordan.

In 2017, SAMS medical missions to Jordan provided 233 cardiology and open-heart surgeries, 21 dental surgeries,

78 ophthalmic surgeries, 22 neurosurgeries, 30 orthopedic surgeries, 35 general surgeries, 37 OBGYN surgeries and 19 urology surgeries.

DIALYSIS CARE

For many refugees, support for chronic diseases can be difficult to access. In November 2017, SAMS supported 118 kidney failure patients in urgent need of dialysis care for two weeks.



STORY FROM THE FIELD

KMZ, 35, is a mother of six children, and living as a refugee in Jordan. She had noticed that her lymph nodes had enlarged, and received a consultation during a November 2016, SAMS medical mission. During this mission, she was diagnosed, and in January of 2017, the same doctor performed a biopsy on her. Unfortunately, the biopsy revealed that she had a malignant mass. On January 29, KMZ started her treatment journey at the King Hussein Cancer Center where she received chemotherapy and radiation. In July 2017, her primary care doctor gave her the good news that she was fully recovered, and the early diagnosis played a vital role in her recovery.

STORY FROM THE FIELD

Cardiologist Dr. Waseem Akhter joined SAMS on a medical mission to Jordan in July 2017. On his first day at Gardens Hospital, where he and the cardiology team provided 63 cardiac catheterizations throughout the six-day mission, he met a patient from Dara'a, Syria, who lost his wife, son, his business, his health and his livelihood. In Jordan, as an unregistered refugee, he did everything he could to provide for his family, even foregoing his medication to save money for food. Dr. Akhter provided heart surgery to this patient for free, saving his life and allowing him to continue providing for his family.



**DURING 2017, SAMS
LED FOUR MEDICAL
MISSIONS TO JORDAN
THAT SERVED 15,255
BENEFICIARIES.**



LEBANON PROGRAMS

Over 1 million Syrian refugees are currently registered in Lebanon. SAMS leads a number of medical relief programs, ranging from primary care and reproductive health to mental health and dialysis. SAMS Lebanon operates in the Beka'a Valley, Tripoli, Beirut, Akkar, and Aرسال. **In 2017, SAMS Lebanon programs and facilities provided 215,425 medical services to Syrians in need.**

PRIMARY HEALTH CARE

In Lebanon, SAMS supports three medical centers, including the specialist Ghiras Alkhair medical center and network of primary health care centers in Aرسال and Beka'a.

Throughout the year, 100,419 primary health care services were provided to refugees, including 55,724 for females and 44,695 for males.

SPECIALIZED SURGICAL CARE

SAMS supports a 24/7 surgical care in Lebanon. The center provides a range of surgical care, including urology, general, ENT, ophthalmology and gynecology. At 300 surgeries per month, with just two operating rooms, the staff is busy meeting the needs of Syrian refugee patients from Tripoli, Akkar,

STORY FROM THE FIELD

Ghazi was born a refugee in Lebanon after his family fled from Syria. His family had lost their house in Syria, and his father lost his livelihood. Ghazi was born suffering from club foot, and his father was not able to obtain adequate treatment from a local hospital. The father heard about an affordable, multi-specialty SAMS supported clinic in the Beka'a Valley. There, Ghazi was able to access treatment, and was fitted with a weekly cast. He wore seven casts throughout his healing process, underwent a small surgery on his Achilles tendon, and then used a two-month cast. We're happy to report that Ghazi's feet are now healed, restored to their optimal functions.

and the Beka'a Valley. Over 250,000 Syrian refugees reside in northern Lebanon, where the center is located. Surgery can be prohibitively expensive for refugees, reaching up to 50,000 USD in Lebanon. The 24/7 Center offers low-cost surgery, waiving fees for the most vulnerable patients. The staff includes a physical therapist who helps to rehabilitate





patients after surgery—in 2014, one of the center’s patients underwent 15 surgeries due to a severe burn, and he spent seven months at the center receiving rehabilitation. The tireless surgeons are on call 24/7 for emergency cases, and treat cold surgery cases 6 days a week. **In 2017, 3,349 surgeries performed at the 24/7 Surgical Center.**

In 2017, SAMS also established laparoscopic surgery services in Lebanon. This minimally invasive, alternative form of surgery requires less post-operative time in the hospital, less need for post-surgery pain medications, and enables patients to resume daily activity faster than traditional surgery.

DENTAL CARE

In 2017, SAMS increased its efforts to provide high quality dental care for Syrian refugees. Through a collaboration with the SAMS Lebanon Committee, a mobile unit providing dental care was established in the field, staffed by a highly qualified

dentist. **This initiative significantly contributed to the 16,799 dental services provided throughout Lebanon in 2017.**

In addition to the mobile unit, two medical missions offered dental care to refugees in the Beka’a Valley. In 2017, two Miles for Smiles Missions were completed in collaboration with non-profit organization Multi-Aid Programs (MAPS), Buffalo University, Henry Schein, Inc, and Saint Joseph University. Saint Joseph University, based in Lebanon, provided dental students to assist the missions with translation and treatments.

During two SAMS dental missions to Lebanon in 2017, 29 volunteers, dentists, and members of staff, worked with 189 dental students to provide a total of 1,372 dental services to children in the informal settlements of the Beka’a Valley.

MENTAL HEALTH & PSYCHOSOCIAL SUPPORT PROJECT (MHPSS)

The psychological toll of displacement and conflict has impacted entire generations of Syrians. However, Syrian refugees face barriers in accessing mental health care in their host countries. In an effort to address psychological trauma among Syrian refugees living in Lebanon, SAMS established two new psychosocial centers in Beka’a and Arsal, and an outreach team in Akkar in 2017. Programs and services offered include screening and evaluation, psychotherapy, psychiatric treatment, psychoeducation, psychosocial support group programs, and school-based programs.

Through 2017, the MHPSS program provided 6,735 services, including 4,460 services for female and 2,275 for males.

The MHPSS project was launched in Beka’a, Lebanon on January 1, 2017, expanding to Arsal in February, and subsequently to Akkar in March. In April 2017, SAMS established a community mental health center in Arsal, and in November 2017, a second one was established in the Beka’a valley. The MHPSS teams provide psychosocial support, psychotherapy, outreach, and psychosocial needs assessment in healthcare facilities, schools, and camps.

Many patients struggle to access psychosocial care due to mobility issues, disability, or due to child care, thus disrupting the continuity of care. As a result, the SAMS team provided care in safe places that were convenient for these patients.

STORY FROM THE FIELD

Nour*, 16, was living with her mother and siblings in Akkar, Lebanon, when she first met our psychosocial team. Originally from Syria, she struggled with the grief of losing her father, sister and brother. She also suffered from symptoms such as fainting spells and nightmares. Her family’s financial situation also caused significant depression, and led her to feel like an outcast at school. These factors took a toll on her academic performance, and social relationships with friends, family members, and teachers. The SAMS psychosocial team created a treatment plan for her, including cognitive behavioral therapy (CBT), relaxation exercises, and psychoeducation. After six months, Nour’s performance improved at school, as did her relationships with her family. She is also determined to achieve her goal: becoming a teacher. She remains in touch with the SAMS mental health specialist.

**Name changed for patient confidentiality.*

Another significant obstacle for those seeking mental health care is the stigma surrounding it. SAMS MHPSS teams were able to drastically diminish this stigma in communities through outreach. They reached populations that had not received any psychosocial care since they fled to Lebanon, visiting extremely underserved settlements in dire conditions. Through partnerships with local NGOs and community points, such as schools and health centers, the team established vital referral pathways.

DIABETES CARE

At the end of 2016, SAMS launched its efforts to provide diabetes care to refugees in Lebanon. Throughout 2017, SAMS continued to support diabetes care, strengthened by a collaboration with the Qatari Red Crescent, International Diabetes Federation and MAPS.

Through these partnerships, SAMS provided medical consultations, laboratory tests, ophthalmological follow-ups, and provided medication. At the end of 2017, SAMS was still supporting 2,682 patients with diabetes care, including 1,100 males and 1,582 females.

In 2017, SAMS provided 35,721 services for diabetics, including 6,240 consultations, 569 ophthalmologic consultations, 15,093 lab tests and 13,819 units of medication.

PHYSICAL REHABILITATION

In 2017, SAMS expanded the reach and impact of its physical rehabilitation services by establishing a physical therapy mobile unit, in conjunction with our pre-existing physical rehabilitation centers in Beka'a, Aarsal and Tripoli.

SAMS provided 18,664 rehabilitation services to Syrian refugees and members of the Lebanese host community, including 7,540 for female beneficiaries, and 11,124 for male beneficiaries.

SAMS effectively built the capacity of the program by providing multiple new devices, a successful training by LDS Charities on wheelchair usage, and continuing to provide wheelchairs to refugees throughout the physical rehabilitation centers.

DIALYSIS CARE

In 2017, SAMS identified 50 Syrian refugees in Lebanon who lacked the financial means to pay for their dialysis sessions, and faced the possibility of death without this critical care. SAMS immediately intervened, providing these sessions to refugees for free.

In 2017, SAMS provided 1,800 dialysis sessions to patients in Beka'a, Beirut and Tripoli, including 650 sessions for females and 1,150 for males.

MEDICAL TRAINING

In Lebanon, SAMS partnered with non-profit organizations including International Diabetes Federation (IDF), LDS Charities, and SAMS medical mission volunteers, to provide trainings for 45 local medical staff throughout the year.



CONTAINERS AND MEDICINE GRANTS

In 2017, SAMS in Lebanon received seven shipments as gift-in-kind donations, including consumables, medical equipment, and medications for its medical centers across Lebanon based on a needs assessment. **These containers benefit 19,846 Syrians in need.**

STORY FROM THE FIELD

Isra'a, 17, has suffered from Type 1 Diabetes since the age of two. She hails from Dara'a, Syria. In Syria, she had consistent access to the insulin she needed. In 2013, she was forced to flee to Lebanon with her family. There, her family could not sustain the high cost of her diabetes treatment. Over the past four years, she has only seldom accessed the insulin she needs, and when she does, she does not have a refrigerator to store the insulin. As she lost access to insulin, her eyesight deteriorated. In the past two years, she lost 80% of her vision, and was unable to read and write. She was unable to go to school, help her mother, read, watch television, or use a computer—she had lost her ability to live a normal life. SAMS undertook Isra'a's case through the Diabetes Project, providing continuous management through free consultations, medications, lab tests, and ophthalmology consultations. She is now able to access regular insulin doses. Through this program, SAMS also addresses diabetes complications. Isra'a now needs "vitrectomy" surgery to improve her eyesight, and SAMS is currently helping her access this surgery so that she can finally have her life back.



STORY FROM THE FIELD

In Syria, when Abir was 10 months pregnant, a medical error led to her kidney disease. She was able to access dialysis sessions for free, or low cost. However, when she fled from Aleppo she no longer had access to dialysis. In 2011, she settled in a settlement in the Beka'a Valley with her husband and four children. In Lebanon, she could not get dialysis due to the high cost of treatment. In addition to dialysis, she needed monthly medication, as well as a specific diet. Her health condition also affected her family relationships. Abir was introduced to the dialysis project implemented by SAMS in Lebanon during a hospital stay in the Beka'a Valley. In April 2017, Abir started receiving monthly dialysis sessions provided by SAMS for free.

MEDICAL MISSIONS

In 2017, SAMS continued to organize medical missions to Lebanon, during which 315 volunteers helped SAMS to provide various medical services to the refugees. Through the missions, volunteers provided free medical procedures that would otherwise be inaccessible, and continued to raise awareness and advocate for refugees even after the conclusion of their mission. In February 2017, SAMS launched its first Women's Health Mission to Lebanon manned by obstetricians, gynecologists and midwives and focusing on the management of women's specific medical and surgical conditions and screening services. Mission specialties included dental, pediatrics, general medicine, orthopedics, obstetrics and gynecology, and more.

Throughout the year, SAMS conducted six medical missions to Lebanon, providing 5,987 services.

Mission Type	Volunteers	Beneficiaries
Dental (2)	218	1,378
Pediatrics and general medicine	7	853
Orthopedic mission	3	103
OBGYN/ Women's health	24	583
Multispecialty mission	63	3,070
Total	315	5,987

GREECE PROGRAMS



Approximately 60,000 refugees and migrants remain trapped within Greece's borders, while asylum seekers continue to arrive on the islands by sea from Turkey.

Health care needs on the Greek islands remain vast—there is a lack of health care services, and refugees grapple with often unsanitary or unsafe accommodations. Vulnerabilities (such as pregnancy or behavioral health disorders) all-too-often fall through the cracks.

Throughout 2017, SAMS provided primary health care, chronic disease management and referrals to secondary health care for refugees in various locations across Greece, providing a total of 9,775 patient consultations

(4,814 on the Greek mainland, and 4,961 on the Greek islands).

SAMS operated primary health care clinics in nine refugee camps and in nine hotel accommodations for refugees, and expanded health care services to three camps on three Greek islands in 2017.

At the end of September 2017, SAMS partnered with the Greek Ministry of Health and KEELPNO (Greek Center for Disease Control) to bolster the Greek government medical response, and to address these health needs by providing primary health care services on three Greek islands, Kos, Chios and Leors.

STORY FROM THE FIELD

SAMS Volunteer midwife Michel Beres met Fereshta, a 23-year-old woman from Afghanistan on a camp in the island of Chios. She was 13 weeks pregnant, she was in a poor state, vomiting constantly and barely able to stand up. She was very pale, almost grey, her pulse was very high, and her urine test suggested that she was clearly dehydrated. Michel gave her IV fluids, anti-vomiting medication and sent her to her tent.

Fereshta came back several times to visit our midwife, and still struggled with the same symptoms—vomiting, dehydration. Her husband reported that she was depressed and cried frequently. One evening, she fainted and was taken to the hospital, where a thyroid test revealed that she had hyperthyroidism, which was causing all of her symptoms.

After consulting with the SAMS doctor on site, Michel decided it was safe to give Fereshta the medication to treat her thyroid gland problem. Gradually, her health improved, she no longer had a fever, and was able to walk by herself again. The team was able to wean her off the medicine, and by the time Michel left, Fereshta was herself again.



In 2017, SAMS continued to provide healthcare to refugees on the mainland of Greece. Through an agreement with Médecins du Monde Greece (MdM Greece), SAMS is supporting a polyclinic in Thessaloniki by providing funds and volunteers. **With the support of SAMS, MdM Greece had a total of 7,056 patient consultations in the Thessaloniki Polyclinic between October and December 2017.**

PRIMARY HEALTH CARE

In 2017, SAMS in Greece worked with a total of 111 physicians, 31 nurses, 7 midwives, 13 interpreters and 5 non-medical volunteers, dedicated to providing primary health care to refugees living in camps. **In addition, SAMS Hellas had mobile teams supporting nine different hotel accommodations and had women's health clinics in three different camps.**

WELL-CHILD CHECKS

Well-child checks play a vital role in the assessment and monitoring of the growth and development of children. In 2017, SAMS in Greece implemented the Pediatric Nutritional Assessment and Well-Child Program. SAMS Hellas' Well-child checks reviewed the medical, developmental, and psychological status of the children, through a detailed history obtained with the assistance of a translator, followed by a complete physical examination. Based on the results SAMS Hellas provided an analytical list to KEELPNO to follow up on the children who had not received vaccinations. **SAMS Hellas conducted a total of 218 Well-Child checks in 2017.**

WOMEN'S HEALTH CLINICS

In 2017, SAMS established women's health clinics in Nea Kavala Camp in northern Greece, Volos Camp in central Greece, and Vial Camp on Chios island, led by midwife and gynecologist volunteers. The women's health service had an overwhelmingly positive response from the communities. In addition to prenatal and gynecological consultations, the women's health team encountered many women seeking preconceptual counseling to expand their families. Despite continuing struggles to obtain routine prenatal laboratory

tests and anatomy scan ultrasounds, SAMS care providers have monitored pregnancies to improve health outcomes.

In addition to the clinic, SAMS women's health team in Greece worked on developing community health education sessions on sexual and reproductive health.

HEALTH SCREENINGS ON KOS

When SAMS arrived on the island of Kos to provide care, there were over 500 medical screenings pending due to a chronic lack of doctors working in the camp. A medical screening is key to an individual's asylum claim, as it assesses medical history and possible vulnerabilities.

To address this gap, SAMS Hellas brought on board an extra physician for a brief period to address the problem of health screenings. In just over a week, SAMS Hellas' physicians managed to complete approximately 200 health screenings, allowing asylum interviews to carry on, and allowing the most vulnerable residents of the camp to move to safer accommodations.

VACCINATION CAMPAIGNS

In partnership with KEELPNO, SAMS physicians in Greece carried out vaccinations during two separate campaigns on the island of Kos. The first vaccination campaign in September 2017 vaccinated a total of 186 children for pneumococcus, MMR and hexavalent. The second vaccination campaign in November vaccinated a total of 168 children under 18 years old with the assistance of KEELPNO nurses.

FIRST AID TRAININGS

In 2017, SAMS provided First Aid training to 88 refugees living in different locations to empower community members to address their medical needs throughout the night, then report to the SAMS clinic in the morning to hand over any outstanding issues. Refugees were able to respond to emergency cases by triaging them, or calling ambulances if necessary. Each person who finished the training received access to a first aid box with wound care supplies, pain relief, and rehydration solution.

BANGLADESH PROGRAMS

Over half a million Rohingya refugees have fled persecution and violence in Myanmar, seeking refuge in Cox's Bazar, Bangladesh. August 2017 marked the most recent exodus of the Rohingya population from Myanmar. In order to respond to the growing need for medical care in Bangladesh, SAMS Global Response (SGR) team traveled to Bangladesh to conduct a needs assessment in September 2017.

During the needs assessment trip, our team identified some of the most pressing needs that needed immediate attention:

- Lack of skilled medical staff such as midwives and specialists due to the remote location of the Rohingya refugee camps. In September 2017, the Ministry of Health reported that among the population of concern, more than 70,000 females are pregnant, while access to trained birth attendants and specialized OBGYN support was non-existent.
- Lack of patient referral within the camps due to the limited number of specialized hospitals. Refugees cannot afford to seek treatment at referral facilities.
- Lack of electricity and running water, leading to challenges in using and sterilizing medical equipment.
- Lack of access to safe drinking water, sanitation, and latrines.
- Inadequate housing for refugees, made of flimsy materials that cannot provide sufficient protection from monsoon rains.
- Immediate general food assistance and therapeutic feeding to address large scale malnourishment.

In order to respond to the Rohingya crisis in Bangladesh, and based on the above observations by the SGR team, SAMS established two health facilities in refugee camps in Cox's Bazar, developed a robust patient referral system, conducted an Emergency Obstetric Training course for Bangladeshi medical workers, and organized monthly medical missions, bringing highly skilled medical professionals from the U.S. and abroad.

STORY FROM THE FIELD

Usma Banu, 55, came to the SAMS clinic with severe pain from a foot ulcer. The ulcer was examined by our volunteer surgeon. Usma underwent wound debridement and dressing, and was prescribed the appropriate analgesics. When our team did a thorough screening, Usma was diagnosed with diabetes. Since then, she has been treated for diabetes, and her wound was regularly dressed at the clinic to expedite healing. If remained untreated, her wound would have spread to her leg and could have potentially resulted in an amputation.

“I DO FEEL WE HAVE MADE A DIFFERENCE IN SO MANY LIVES SINCE THE CLINICS STARTED. WE BEGAN WITH JUST TWO PHYSICIANS IN A TENT AND NOW WE HAVE A COMPLETE HEALTH CARE DELIVERY SYSTEM. PATIENTS ARE NOW DIAGNOSED WITH CHRONIC ILLNESSES AS WELL AS TREATED FOR ACUTE CASES.” —DR. SABA AL-SALEM, SAMS BANGLADESH COORDINATOR.

In partnership with a local medical organization, Gonoshaathata Kendra (GK), SAMS health clinics were established in two refugee camps in Cox's Bazar: Lambasia, Kutupalong and Moynergon, Balukhali. Each of the two facilities is staffed with two doctors, two nurses, a pharmacist, interpreters, and local and international medical volunteers. They provide primary health care, psychosocial care, infectious disease control precautions and procedures, and maternal and child health care services for the Rohingya community residing in Cox's Bazar. These health facilities are equipped to provide medical care that targets not only the primary treatment of a disease but also the prevention, control, and spread of communicable diseases.

These health facilities include waiting rooms, a breastfeeding section, a pharmacy, an exam room, a paramedic emergency room, and inpatient therapy and psychosocial unit. Each clinic receives about 50 to 100 patients per day.

From September to December 2017, SAMS provided 2,333 medical services to Rohingya refugees living in Cox's Bazar.

STORY FROM THE FIELD

Yasin, an 11-month-old baby boy, had trouble breathing for several months. Prior to coming to the SAMS clinic, he was prescribed some medication to help with his breathing problem. However, Yasin did not respond to the treatment at all. When he was brought to SAMS clinic, our team informed his parent that Yasin needed an inhaler to help him breathe better. Our doctors created a spacer device out of a plastic bottle of water to ensure directed delivery of the medicine to the baby's airway. Yasin is now breathing much better and his lungs are clear.



EGYPT PROGRAMS



FARIS KNIGHT (CC 3.0)

In 2017, SAMS provided medical care in Egypt for the first time on a medical mission. In November 2017, SAMS partnered with Ain Shams University in Cairo to provide interventional cardiology procedures, using the university's fully equipped catheterization lab. The five volunteers used stents generously donated by Medtronic. The mission also signified the first time that SAMS has performed electrophysiology and inserted pacemakers on a medical mission.

Every day, the five volunteer doctors provided interventional services for up to eight patients, and treated three

electrophysiology patients a day. **Throughout the mission, 51 patients received care, including 38 patients who underwent percutaneous coronary interventions, and 10 patients who underwent EP procedures. 65 stents were placed and three diagnostic catheterizations were performed.**

SAMS was proud to partner with an Egyptian institution to provide crucial care to underserved Egyptians. In 2018, SAMS will expand its programs in Egypt to reach a greater number of vulnerable individuals in need of lifesaving care.



DOMESTIC RELIEF EMERGENCY RESPONSE



HURRICANE HARVEY, TEXAS

In August and September 2017, Hurricane Harvey unleashed devastating flooding in Houston, endangering and harming residents, displacing communities, and damaging homes.

As the impact of Hurricane Harvey was still unfolding, SAMS provided immediate support to victims, deploying a team of emergency responders, primary care physicians and nurses to join relief efforts in Houston. SAMS launched mobile medical care in the area, targeting marginalized communities. Staffed with volunteers, the unit delivered the necessary aid to victims who could not access medical care. Throughout the mission, SAMS volunteers offered specialties including; pediatrics, general/internal medicine, cardiology, psychosocial care, and emergency medicine. **By the end of the mission, 36 SAMS volunteers had treated 312 patients in five locations across the greater Houston area.**

SAMS PROVIDED IMMEDIATE SUPPORT TO VICTIMS, DEPLOYING A TEAM OF EMERGENCY RESPONDERS, PRIMARY CARE PHYSICIANS AND NURSES.

HURRICANE MARIA, PUERTO RICO

In October, 2017, Puerto Rico faced its worst natural disaster on record. Referred to as the most intense tropical cyclone worldwide of 2017, Hurricane Maria caused irreparable damage to housing and infrastructure in Puerto Rico, and Dominica. As of December 9, 2017, 112 people were killed by the hurricane.

In response, SAMS deployed a team for a needs assessment on-the-ground, discovering unaddressed needs for medical care, especially amongst geriatric, hospice, and critical care patients. SAMS deployed a team of 20 volunteers, who provided care starting on October 14, 2017.

SAMS partnered with the US Department of Health and Human Services, the Puerto Rican Department of Health, FEMA and Project HOPE to provide medical care to victims of Hurricane Maria. The Departments of Health's logistical staff on the ground facilitated triaging, flow of patients, as well as any additional needs. Project HOPE provided nurses to supplement SAMS medical personnel. SAMS team was stationed in Ponce, where geriatric, hospice, and critical care patients were seen and transferred to a temporary hospital in Auditorio Juan Pachín Vicéns, a sports complex.

SAMS volunteers treated 228 beneficiaries, providing pediatric, ophthalmology, OBGYN and general medicine care in six locations close to San Juan. Medical specialties included pediatrics, ophthalmology, obstetrics/gynecology and general medicine.

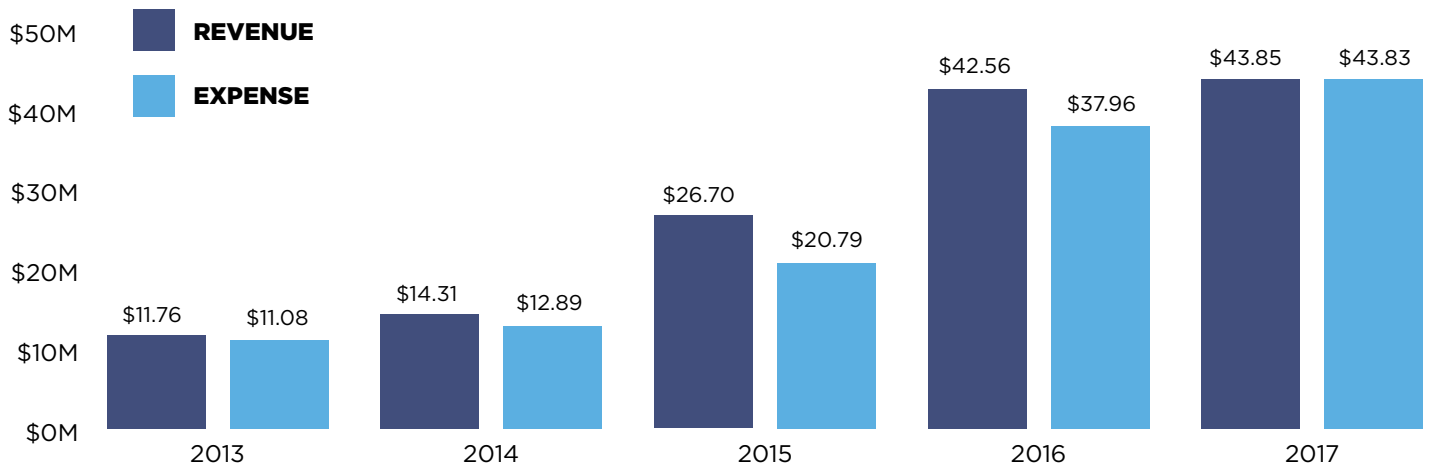
SAMS FUNDING

The following is Syrian American Medical Society's Statement of Activities for years ended December 31, 2016 and 2017.*

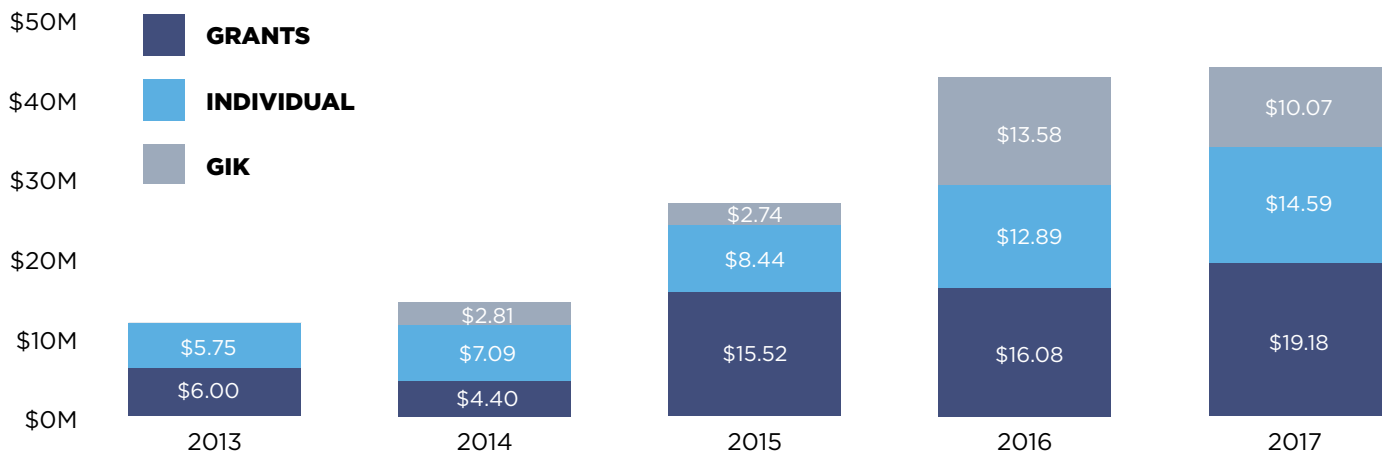
STATEMENT OF ACTIVITIES		
UNRESTRICTED NET ASSETS	2016	2017
Support and other contributions		
Contributions	\$12,894,791	\$14,595,233
Grants	\$16,080,351	\$19,178,283
Gifts in kind	\$13,587,249	\$10,070,337
Total support and other contributions	\$42,562,391	\$43,843,853
EXPENSES		
Program services (including GIK Expenses)		
Turkey Regional Office/Northern, Midwest, and Coastal Regions of Syria	\$26,301,913	\$26,844,395
Jordan Regional Office/Southern Syria, Damascus Suburbs, and Refugees in Jordan	\$7,754,887	\$9,865,170
Lebanon Regional Office and Refugees in Lebanon	\$1,032,728	\$1,840,104
Greece Regional Office and Refugees in Greece	\$322,634	\$338,667
SGR	—	\$92,212
United States	\$1,237,267	\$2,977,698
Total program services	\$36,649,429	\$41,958,246
Supporting Services		
Fundraising	\$734,591	\$1,171,511
Administrative and general	\$571,968	\$697,965
Total expenses	\$37,955,988	\$43,827,722
Increase in Unrestricted Net Assets	\$4,606,403	\$16,131
NET ASSETS		
Beginning of Year	\$3,516,003	\$4,606,403
End of Year	\$4,606,403	\$16,131

*2017 financial information is unaudited, preliminary and subject to adjustments and modifications

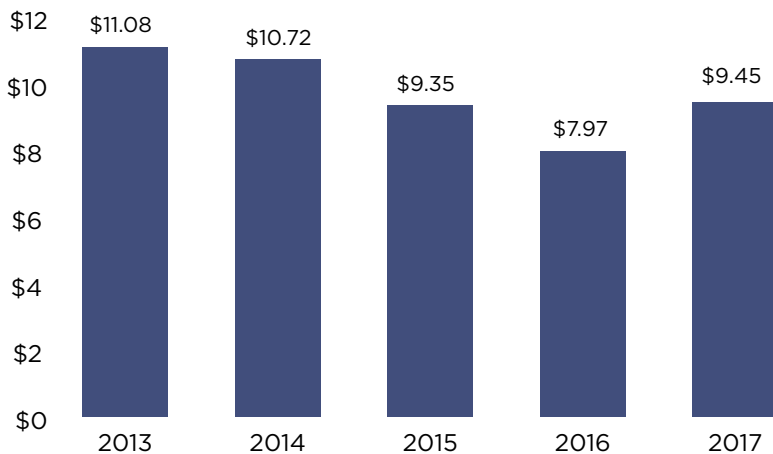
FINANCIALS OVER 5 YEARS, INCLUDING GIFTS IN KIND (MILLIONS OF DOLLARS)



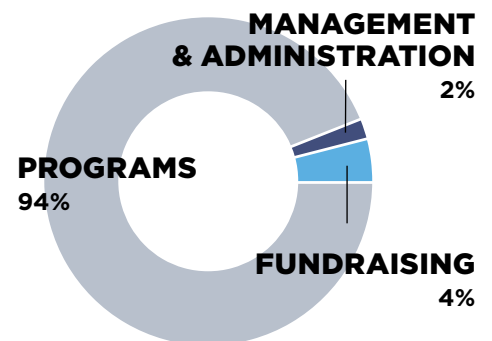
SOURCES OF FINANCIAL SUPPORT (MILLIONS OF DOLLARS)



AVERAGE COST PER PATIENT (DOLLARS)



2017 DISTRIBUTION OF EXPENSES



SOCIETY WORK

SAMS EDUCATIONAL PROGRAM

Since 1998, SAMS has designed a robust educational program through its network of medical professionals across the United States and beyond. Spearheaded by the SAMS Education Committee, SAMS provides unique educational opportunities for medical students and recent graduates to expand their knowledge and gain more experience.

SAMS Education Committee offers the following programs:

MATCH HOSTING PROGRAM

In 2017, SAMS Education Committee conducted a series of webinars and workshops to help applicants who were applying for residency programs. Webinar topics include: USMLE Step 1, USMLE Step 2 CS, interview skills, mentorship and scholarship programs, and applying for residency in internal medicine, general surgery, neurosurgery, ENT, pathology, pediatrics, medical genetics, radiology, and OB/GYN.

ONLINE DISCUSSIONS

In addition to the regular workshops, webinars, and online courses, the SAMS Education Committee oversees two projects in Arabic—the Journal Club and the SAMS Morning Report:

- **The Journal Club:** An online platform where medical students and their mentors come together to discuss and evaluate research papers and topics. Weekly, about 25 to 30 participants join the discussion online. Sessions are recorded and shared online for others to access for free.
- **SAMS Morning Report:** An online platform that brings together physicians and medical students to discuss clinical cases and best treatment options.

RESEARCH MENTORSHIP PROGRAM

The Research Mentorship Program at SAMS was launched in 2016 to support physicians and medical students who are in the process of conducting research and/or publishing their scientific papers related to the healthcare system inside Syria.

SCHOLARSHIP PROGRAM

SAMS continues to provide scholarship opportunities intended to support Syrian medical residency applicants through the provision of interest-free loans, between \$1K and \$4K to help them cover expenses related to their MATCH application.

Additionally, in 2016 SAMS partnered with Johns Hopkins Bloomberg School of Public Health to launch a scholarship program to support up to two individuals who had been



displaced as a result of the conflict in Syria. Two Syrian medical students, whose studies were interrupted because of the crisis, were admitted and started their medical program at Johns Hopkins University in July 2017. SAMS also provides a no-interest loan to help cover the costs of tuition for Syrian medical students who have transferred to finish their studies at medical schools in the Caribbean.

AVICENNA MEDICAL JOURNAL

SAMS has been a proud sponsor of *Avicenna Medical Journal* 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 preventive, curative, and rehabilitative. Additionally, the journal seeks to promote research and editorial skills among Syrian medical researchers.

SAMS MEMBERSHIP PROGRAM

In 2017, SAMS membership grew from 600 to over 1,500 members across the United States. The 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 trainings.

SAMS remains dedicated to providing its members new and unique opportunities, board reaching networks, and benefits. SAMS also supports Syrian medical residency

IN 2017, MORE THAN 900 NEW MEMBERS JOINED SAMS NETWORK IN AN EFFORT TO SUPPORT THEIR COLLEAGUES INSIDE SYRIA WHO CONTINUE TO DO A HEROIC WORK IN THE FACE OF UNIMAGINABLE CHALLENGES.

applicants, and seeks to assimilate international medical graduates to American practices and sponsors a peer-reviewed medical journal.

SAMS CONFERENCES

Throughout the year, SAMS hosts three conferences for its members to share expertise and ideas, acquire CME credits, and stay up-to-date on the crisis in Syria.

SAMS 6TH ANNUAL NATIONAL CONFERENCE

SAMS hosted its sixth National Conference, “Healthcare and Medical Relief in Evolving Domestic and Global Landscape” in Los Angeles, CA on February 17-19, 2017.

The provision of health care and medical relief is influenced as much by the people in need as by the changing landscape in which medicine is practiced. Political barriers (outright denial of the epidemic lead poisoning in Flint, targeted assassinations and bombings of hospitals in Syria, anti-refugee hysteria) and political and nongovernmental solutions (nascent humanitarian relief organizations in the US, global relief efforts in Europe and elsewhere) have shaped the healthcare realities on the ground. During the conference, SAMS members explored these issues and others while providing a broad spectrum of medical updates across various specialties.

During the gala dinner, SAMS was honored to welcome Al-Jazeera’s renowned journalist and writer, Mr. Majed Abdulhadi, and CNN’s award-winning foreign correspondent and humanitarian, Ms. Arwa Damon.



SAMS 17TH ANNUAL INTERNATIONAL CONFERENCE

On July 7-9, 2017, SAMS hosted its 17th Annual International Conference, “Dilemmas in Healthcare in Syria: Needs Assessment, Dynamics, and Ethics,” in Istanbul, Turkey. The conference brought a record number of 173 guests, including physicians, humanitarians, thought leaders, and health care practitioners from inside Syria, who shared their experiences on the front lines of providing medical care in crisis. The gala dinner brought together 420 guests. Funds were raised throughout the evening to support the families of our fallen heroes in Syria.





SAMS 4TH ANNUAL SYMPOSIUM

As the Syrian conflict continues into its seventh year, questions on the future of Syria's education, research, and medical system are incredibly pressing. On October 6-8, 2017, SAMS hosted its 4th National Symposium in New York City. The symposium focused on the theme of A Call to Action for Future Syria: A Coalition on Education and Research.

The symposium brought together renowned speakers such as Dr. Ron Waldman of Doctors of the World, Dr. Satchit Balsari of the Harvard François-Xavier Bagnoud Center for Health and Human Rights, award-winning educator and SAMS Member Dr. Conrad Fischer, Dr. Susan Kawamleh, Dr. Paul Spiegel, Dr. Helena Barroco, and many more. Discussions explored themes such as the importance of data and research during crisis, establishing electronic health records in Syria, and education programs inside Syria.

SAMS U.S. CHAPTERS

Currently, SAMS has more than 1,500 grassroots members across the United States. SAMS members play an instrumental role in leading 26 chapters nationwide. SAMS Chapters continue to expand our network of medical professionals in order to create new programmings, raise awareness and support, and help devise strategic direction to work on the ground to best serve Syrians in need.

DATA AND RESEARCH

The SAMS Data and Research Committee has been involved in many projects in order to achieve its mission of collecting accurate and timely data, in order to disseminate findings and effectively evaluate programs.

The Committee is working in collaboration with Harvard University's François-Xavier Bagnoud (FXB) Center for Health and Human Rights rights on cleaning and analyzing clinical data obtained from SAMS facilities between 2011 and 2017. This data will be utilized for various purposes, including the documentation of human rights violations, internal



management and evaluation, as well as advocacy and scientific publications.

SAMS is supporting a full-time post-doctoral fellow, Dr. Ranya Ahmed, to achieve this mission. In an effort to foster more efficient patient care and data collection, SAMS is identifying a cost effective electronic health records system that is appropriate for the ongoing humanitarian crisis and the,

CHAPTER SPOTLIGHT: SAMS NEW ENGLAND CHAPTER'S DIABETES CARE FOR SYRIA PROJECT

Spearheaded by SAMS New England Chapter and Integrated Project Management Company (IPM), the Diabetes Care for Syria Project was launched in May of 2017 to ensure that Syrians suffering from diabetes have access to the treatment they need. The project ensures a reliable, sustainable supply of insulin and other diabetes medicines, plus the necessary syringes and test kits, so that diabetes patients can focus on caring for their families and communities instead of searching for scarce diabetes supplies. In its first phase, this projects will meet the needs of approximately 2,000 diabetics who are currently receiving regular care at a SAMS clinic in Lebanon. By mid 2018, the SAMS New England Chapter will expand the project to procure sufficient supplies to meet the needs of an additional 2,500 patients who have received a diabetes diagnosis at a SAMS clinic in 2017 but are not currently receiving regular treatment.



AMPLIFY PEACE: SAVING SYRIAN LIVES CONCERT SERIES

Spearheaded by SAMS in the Fall of 2017, Amplify Peace: Saving Syrian Lives was a multi-genre, two-day musical tour in 10 cities across the U.S., featuring renowned Arab American artists, including Omar Offendum, Bassel & the Supernaturals, Kayem and Ronnie Malley & Turath Ensemble. The purpose of the tour was to increase awareness of the critical medical relief work being done in and around Syria for those impacted by crisis. Specifically, the tour highlighted SAMS psychosocial programs, helping Syrians at home and in displacement heal from trauma using creative outlets, including art and play therapy.

hopefully near, stable future. In 2017, SAMS Data and Research Committee completed a policy on the protection of medical workers and patients while research, including observational studies, is being conducted in the committee's facilities.



LIST OF PUBLICATIONS OF SAMS MEMBERS AND STAFF IN 2017

- Abbara, A., Al-Harbat, N., Karah, N., Abo-Yahya, B., El-Amin, W., Hatcher, J. and Gabbar, O., 2017. Antimicrobial Drug Resistance among Refugees from Syria, Jordan. *Emerging infectious diseases*, 23(5), p.885.
- Abbott, K.L., Woods, C.A., Halim, D.A. and Qureshi, H.A., 2017. Pediatric care during a short-term medical mission to a Syrian refugee camp in Northern Jordan. *Avicenna journal of medicine*, 7(4), p.176.
- Elamein, M., Bower, H., Valderrama, C., Zedan, D., Rihawi, H., Almilaji, K., Abdelhafeez, M., Tabbal, N., Almhawish, N., Maes, S. and AbouZeid, A., 2017. Attacks against health care in Syria, 2015–16: results from a real-time reporting tool. *The Lancet*.
- Evans, N.G. and Sekkarie, M.A., 2017. Allocating scarce medical resources during armed conflict: ethical issues. *Disaster and Military Medicine*, 3(1), p.5.
- Fouad, F.M., Sparrow, A., Tarakji, A., Alameddine, M., El-Jardali, F., Coutts, A.P., El Arnaout, N., Karroum, L.B., Jawad, M., Roborgh, S. and Abbara, A., 2017. Health workers and the weaponisation of health care in Syria: a preliminary inquiry for The Lancet–American University of Beirut Commission on Syria. *The Lancet*.
- Isreb, M.A., Kaysi, S., Rifai, A.O., Al Kukhun, H., Al-Adwan, S.A.S., Kass-Hout, T.A. and Sekkarie, M.A., 2017. The Effect of War on Syrian Refugees With End-Stage Renal Disease. *Kidney International Reports*, 2(5), pp.960-963.
- Sekkarie, M.A. and Abdel-Rahman, E.M., 2017. Cultural Challenges in the Care of Refugees with End-Stage Renal Disease: What Western Nephrologists Should Know. *Nephron*.

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.** In 2017, SAMS undertook a series of trips to Europe and the U.S. with local doctors from inside Syria, providing the doctors the opportunity to communicate their humanitarian messages directly to world leaders and key government officials. **SAMS is the first medical organization to undertake such trips during the Syrian crisis, and they resulted in several governments changing their position on certain humanitarian issues in Syria, public statements of support from key actors, more accurate needs assessments to major donors, and significant new funding opportunities for SAMS.**



ADVOCACY AT THE UNITED NATIONS

Throughout the Syrian conflict, SAMS has played a leading role in advocacy with the UN, both with its respective agencies and with member states. This year featured a significant expansion of that work.

In January, SAMS attended a conference in Helsinki sponsored by the UN and the government of Finland, entitled “Supporting Syrians and the Region: Saving Lives, Protecting and Building Resilience.”

In February 2017, SAMS met with newly-confirmed US Ambassador to the UN, Nikki Haley. In the meeting, SAMS described the many challenges faced by humanitarian workers in Syria, and presented ideas for UN reform and increased accountability for attacks on health workers.

Also in February, SAMS health workers from Aleppo testified at a public session at UN headquarters sponsored by Turkey, Qatar, and Saudi Arabia. They spoke passionately about their experiences in Aleppo, and called upon the international community to end the use of siege and allow for unimpeded humanitarian access to East Ghouta and other besieged areas.

In September, during the UN General Assembly, SAMS served as a panelist at a side event sponsored by the UK, Canada, Spain, and The Netherlands. The event, “Protecting Healthcare in Armed Conflict,” provided an opportunity to push UN member states to take further actions to enforce international law and hold perpetrators of attacks on healthcare accountable.

In October, SAMS was a speaker at a meeting hosted by the Foreign Minister of France on the protection of health workers and facilities. SAMS continues to lead on this topic, proposing concrete ideas such as international monitors, enforcement mechanisms, and deconfliction to address violations of medical neutrality.



SAMS members and staff have strong working relationships with key UN missions, holding regular meetings and maintaining contact with member states. This includes providing briefings on the humanitarian situation to Security Council members, consulting on humanitarian resolutions, and updating key member states on the latest needs assessments.

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

SAMS also serves as a civil society representative to the UN-led peace talks in Geneva, where we continue to be a strong voice for humanitarian principles, and urge adherence to international humanitarian laws throughout the negotiations.

ADVOCACY IN EUROPE

In 2017, SAMS continued to build and strengthen relationships with European governments and NGOs.

SAMS visited the UK, Germany, France, Italy, Netherlands, Belgium, Luxembourg, Switzerland, Norway, and Finland as part of efforts to secure more financial support for projects in the region, as well as public support for humanitarian principles.

SAMS particularly grew its presence in Brussels through regular engagement with EU leaders and members of the European Parliament, as well as engaging with EU member states offices in Brussels. The main focus of this engagement has been to shape the funding priorities for the humanitarian response to the Syrian crisis.



“WORK WITH US TO SAVE LIVES. IF YOU WANT TO DO ANYTHING, DO IT NOW. THERE IS NO TIME TO WAIT, AS SYRIANS CONTINUE TO DIE DAY AFTER DAY.” —DR. FARIDA, IN TESTIMONY BEFORE THE SENATE FOREIGN RELATIONS COMMITTEE, MARCH 15, 2017

SAMS has also been fortunate to meet senior leaders in Europe. **In October, SAMS leadership and several doctors from inside Syria were honored to be able to meet Pope Francis at the Vatican, where they asked for his support for pediatric health in Syria.** Also in October, SAMS was a panelist at the World Health Summit in Berlin, delivering remarks on the protection of health workers at the summit, which was hosted by Chancellor Angela Merkel.

REGIONAL ADVOCACY

SAMS has continued to build strong working relationships with the governments of countries where we work.

In Lebanon, SAMS has met with Ambassadors from key regional and western countries, Lebanon’s Minister of Health, OCHA, and UNHCR.

In Jordan, SAMS has developed a particularly strong working relationship with senior officials in the Jordanian government, and in November met with Jordanian Prime Minister, Hani Al-Mulki. In addition, SAMS meets regularly with key Ambassadors, the UN’s Regional Humanitarian Coordinator, and is an active member of the regional NGO forum, SIRF.

In Turkey, SAMS continues to work closely with the Ministry of Health and other governmental and non governmental bodies involved in the humanitarian operations inside Syria. In 2017, SAMS built and forged partnerships with Syrian and international NGOs in order to strengthen the position of SAMS as an international humanitarian organization.

US GOVERNMENT AND CONGRESSIONAL ADVOCACY

SAMS staff and members regularly meet with Members of Congress in their districts and in Washington, D.C. In addition, SAMS meets regularly with officials at the White House, State Department, and US Agency for International Development, in order to provide updates on the humanitarian situation on the ground, and to convey what our field staff report as the most important humanitarian needed.

In March, SAMS medical staff from Aleppo testified before the Senate Foreign Relations Committee in a hearing entitled “Six Years of War in Syria: The Human Toll.” In testimony alongside the CEOs of Mercy Corps and the International Rescue Committee, they described their experiences living and working under siege and bombardment in Aleppo, and their



efforts to save lives in the face of such significant challenges. They each made an impassioned call for the US government to protect and assist those Syrians still living under siege, so that none of them will have to endure the same fate as Aleppo. The doctors also met with key members of Congress, including Senators John McCain, Bob Corker, Tom Cotton, Patty Murray, Ron Johnson, and Michael Bennett. In the House, they met with Representatives Ed Royce, Adam Kinzinger, and Ted Deutch.

In June, SAMS was invited to speak at a State Department conference on the 20th anniversary of the creation of the Organization for the Prohibition of Chemical Weapons (OPCW). **SAMS was a leader in the humanitarian response to the Khan Sheikhoun chemical attack in April, and worked closely with US officials in the aftermath of the attack.** This event was an opportunity to highlight that while there had been significant progress in attempts to ban chemical weapons in the past 20 years, the events in Khan Sheikhoun proved that there was still much work to be done.

ACADEMIC ENGAGEMENT

SAMS continues to build and expand upon relationships with key academic institutions in the US and in the region.

SAMS partners closely with Johns Hopkins University School of Public Health on the issues of attacks on healthcare and international humanitarian law, and with Harvard University School of Public Health on documentation of attacks on healthcare and human rights violations.

In addition, SAMS is a commissioner of the newly-formed Lancet Commission on Syria. Based out of the American University of Beirut, this commission is composed of leading public health officials from around the world, and publishes regular papers on attacks on health, training of medical staff, protection of health workers, and more.

In October, SAMS's Dr. Farida was invited to speak at the annual TedMed medical conference in Palm Springs, CA. Dr. Farida, an OBGYN from Aleppo, spoke passionately about the challenges faced by health workers, particularly female health workers, in Syria. She also offered the audience, composed of leading academics and medical professionals from across the country, concrete ways to support health workers in Syria.

SAMS has also spoken at events at Stanford University, Georgetown University, Columbia University, Cambridge University in the UK, and Massachusetts General Hospital.

PARTNERS AND 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
- Crisis Action
- Safeguarding Health in Conflict

Field Based Coalitions:

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

REPORTS

Under Siege: The Plight of East Ghouta



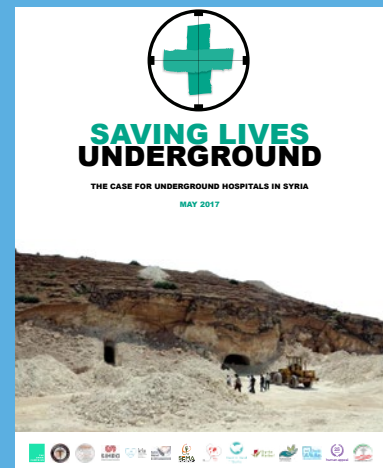
Last month marked the fourth anniversary of the August 2013 chemical attack that took the lives of more than 1,200 people in East Ghouta, one of the largest suburbs in West Damascus. Once a busy agricultural area inhabited by more than 1.2 million people, the population is currently estimated at around 800,000, one third of whom are internally displaced persons (IDPs). In October 2015, the Syrian government imposed a suffocating siege on East Ghouta after months of cutting access to basic necessities including electricity, gasoline, water, and telecommunications. As a result of the "murder of civilians" tactic that has been utilized across Syria, many people in East Ghouta, including children, have lost their lives.

From late 2014 to February 2017, smuggling tunnels that connected East Ghouta to the opposition-held neighborhoods of Daboud and Barash helped besieged residents cope with the restrictions. However, in February 2017, the Syrian government overtook Daboud and Barash, sealing these tunnels and cutting off East Ghouta's access to the outside world. Today, basic food and supplies are almost gone from the marketplace, though at very high prices, making them inaccessible to ordinary people. In a family in East Ghouta needs \$200 per month to provide only for basic needs. Many heads of households earn less than \$500 per month, making even the most common items a luxury.

While surviving under siege, the residents of East Ghouta have been subjected to a fierce, ongoing aerial and ground campaign since 2012. These attacks have continued in 2017, despite the de-escalation zone agreement.

© September 2017

Saving Lives Underground: The Case for Underground Hospitals



SAVING LIVES UNDERGROUND

THE CASE FOR UNDERGROUND HOSPITALS IN SYRIA

MAY 2017



MEDIA



As one of the most active and trusted NGO working in Syria and thanks to its network of medical personnel and humanitarians, SAMS has become the number one source of reliable information on the ground. **In 2017, SAMS was mentioned more than 750 times in top-tier national and international media outlets**, including The New York Times, The Washington Post, CNN, Al-Jazeera, NBC News, Vice News, CBS News, The Guardian, BBC News, etc.

SAMS lifesaving mission was featured on 60 Minutes, one of the most watched newsmagazine television programs broadcast on the CBS television network. In June of 2017, *60 Minutes* correspondent Scott Pelley accompanied Dr. Samer Attar on his fourth trip to Syria. Dr. Samer Attar has traveled into Syria on multiple occasions, risking death to save lives. As the siege stifled life in eastern Aleppo, Dr. Attar travelled to the besieged city to volunteer for two weeks at Aleppo's largest underground trauma hospital, SAMS-supported M10. Dr. Attar was one of the last individuals to leave eastern Aleppo before Castello Road, the only way out of the area, was completely closed.

Additionally, SAMS's work was featured on CNN's *Impact Your World*, in which SAMS President Dr. Ahmad Tarakji

talked about the critical role SAMS plays in addressing the humanitarian needs of Syrian civilians and healthcare workers bearing the brunt of the ongoing crisis.

SAMS leadership, members, and staff on the ground have written powerful op-eds and letters to the editor:

- *The New York Times*—"Should I Run for My Life or Stay With My Patients?" By Dr. Ahmad Tarakji
- Syria Deeply—"A Doctor's Duty Is Not Disrupted by War," by Dr. Ibrahim al-Masri
- Fox News—"Syria: 'Starve or Kneel' is Another Name for Mass Murder," By Dr. Ahmad Tarakji

Former NASA Astronaut Scott Kelly shared his support for SAMS's mission, and encouraged viewers to find a way to contribute: "SAMS sends doctors and other healthcare professionals to Syria and other parts of the region to help kids and adults with their medical care that they are of a desperate need of."

LEADERSHIP

FOUNDATION BOARD OF DIRECTORS

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Dr. Majd Isreb, *Past Foundation Chair*
Dr. Ahmad Tarakji, *Society President*
Dr. Mufaddal Hamadeh, *Treasurer*
Dr. Basel Termanini, *Society VP*
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Dr. Mohammad Saleh
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SOCIETY BOARD OF DIRECTORS

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Dr. Basel Termanini, *Vice President*
Dr. Maysoun Alhariri, *Secretary*
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Dr. Ihab Herraka, *Member at Large*
Lara Zakaria, *Member at Large*

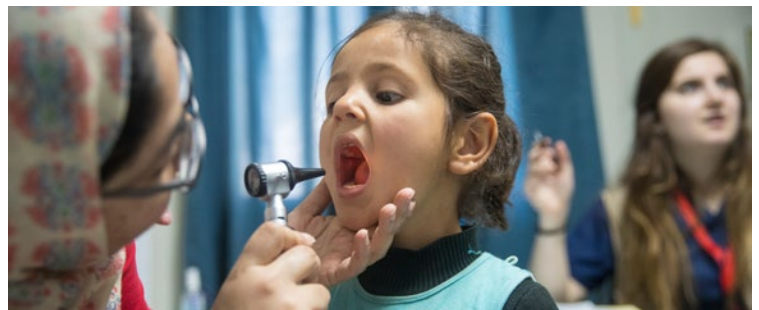
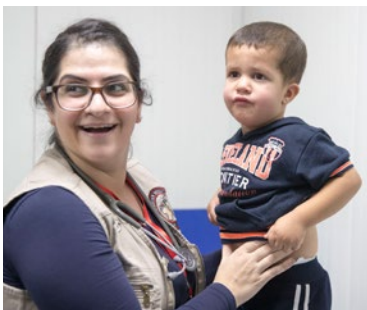
SAMS EXECUTIVE DIRECTOR

David Lillie





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