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The struggle for professing while fighting for live is not enough to express the difficulty of the refugee doctors under conditions of war. If a doctor is a refugee, she/he is not counted as a doctor in hosting country. In an environment where survival struggle outweighs and under conditions that other refugees are suffering from the lack of health support, it is really difficult not being able to perform one's profession. Turkey and Europe which are the destinations rushed into by refugees to a great extend are faced with a tough task.

Apparently, doctors who have fled from the war in Syria have chosen to go "underground" as they could not join medical system in Turkey. As reported, Syria was known once for having one of the best health systems in Middle East. Syrian doctors cannot work in Turkey because of bureaucratic barriers and have to take illegal ways. News on the press tell that around 100 clinics have been opened in Turkey. Doctors work in private hospitals informally in order to cover their living cost and create low-cost labor for private hospitals.

One of reasons of opening these illegal clinics is the excessive demand from patients. It is reported as follows: "Especially, due to their lack of native language, Syrians increasingly apply for such underground clinics. Government does not deal with the illegal clinics because they relieve the burden on health system. Since they only treat Syrians, the situation is ignored. So, refugees treat refugees."

Considering the situation of refugee doctors who have fled from war, the requirement of diploma equivalency for Syrian doctors will be revoked according to the new blueprint for action of the Ministry of Health. Accordingly, Syrians will become exempt from the requirement for "having approved the equivalency of their diploma or

expertise certificate” and “not having a legal obstacle for professing”. The approval of work for these people will be provided by a board that will be established by the Ministry of Health. For all, Syrian healthcare workers are planned to be employed in camps and refugee healthcare centers.

The greatest inconvenience in this proposal is the competence and proficiency problem. Both diplomas and qualifications of Syrian doctors put a question mark over minds. Increasingly more and more news on fake doctors found out during controls carried out in these centers are seen lately in press. The existence of such problems could be readily expected due to the interruption in medical education experienced in Syria for nearly 6 years.

It is obvious, that Turkey has been affected most by the war in Syria; and the problem becomes even more complicated along with this new proposal, because the practices imposed by the constructive decision of Ministry of Health fail to meet the expenses of Syrians. When we remember that this social initiative has costed Turkey 4.5 billion dollars till now and that the support provided by the United Nations for Turkey is around 189 million dollars; the gap might be tried to be covered by such practices as explained above.

On the other hand, as a more positive example, the cooperation between Gaziantep University located in the region and WHO provides training to Syrian doctors on adaptation. It is planned to employ Syrian doctors working voluntarily for their own citizens in coming periods by paying them wages.

In conclusion, refugee doctor diploma equivalency, competence and proficiency problem waited European solution. Under current circumstances of war, a process for mutual solution has to be initiated to enable Syrian doctors who have fled from war to work, without allowing European Union and related health organizations to bend economical and sociopolitical requirements.

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