

# Medical Mission Heroes in the Middle East War Theater

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The Obama Administration should help war and occupation's victims receive humanitarian assistance, and they should help the injured travel abroad for medical care. Moreover, the Obama Administration should help all medical professionals who travel to war torn areas, so they can care for the victims and train local doctors.

□ Recently, the Human Rights Program of the University of Chicago, Amnesty, along with Students for Justice in Palestine hosted a panel discussion of medical professionals who care for the victims of war and occupation.

□ The panel included: Dr. Ra-id Abdulla, a pediatric cardiologist from Rush Hospital in Chicago, who led several missions to Iraq and Palestine over ten years. As a volunteer, he screened hundreds of children, many who had life-saving, cardiac surgery; and he developed a formal, training program for Iraqi doctors in his speciality. Dr. Scott Eggener, a urologist and assistant professor at the University of Chicago, is an active member of IVUMed (International Volunteers in Urology). He participated in volunteer educational and surgical missions to Cuba, Honduras, Morocco, Myanmar, Rwanda, and Palestine; Dr. Imran Qureshi, an interventional radiologist at Rush-Copley Medical Center, was one of nine, American doctors who traveled to Gaza after Israel's "Operation Cast Lead;" and Steve Sosebee, President & CEO of Palestine Children Relief Fund. For nearly two decades his organization has sent over 800 children overseas for surgery and medical care.

□ "I've seen the slow deterioration of Gaza over the past, 20 years," Sosebee said. He explained that the purpose of creating the PCRf was to address the humanitarian needs of kids living under occupation and not having access to adequate health care. His full-time staff identify kids who need surgery and medical treatment relief. "We've identified 15 kids to send outside and we can't get them out...we can't get Israel or Egypt to permit them outside," he added.

□ In the recent invasion of Gaza, nearly 6,000 people were injured and over 1,300 people killed, according to the Palestinian Ministry of Health. Nearly 1,900 of the injured were children and out of the more than 1,300 killed, 410 were children.

□ Sosebee explained that many children who experienced head and neurological injuries live with permanent, brain injuries. Also, children who lost their limbs and are in need of prosthetic limbs and rehabilitative services are confined to wheelchairs now. With permanent disabilities these children have no future because there are no rehabilitative services to provide lifelong assistance for them in Gaza.

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“We’re trying to do something on a positive level,” Sosebee said. “This is a human issue...we need to use energy in a positive way...surgery, humanitarian aid is an appropriate response.”

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### **Volunteer Medical Teams and Humanitarian Aid**

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Dr. Qureshi gave a visual and qualitative, slideshow presentation of his recent visit to Gaza. He showed photos of destroyed civil and residential buildings. Overturned cement trucks and inoperable, damaged ambulances only prolongs rebuilding the Gaza Strip.

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On March 1st Human Rights Watch issued the press release: [Israel/Gaza: Donors Should Press Israel to End Blockade](#). They explained: “International donors to Gaza’s reconstruction and development should call on Israel to end its punishing blockade of the territory and to allow needed humanitarian assistance and normal commerce to resume.”

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Their findings have been released one-day ahead of the high-level conference for Gaza reconstruction, in Sharm el-Sheikh, Egypt. The organization emphasizes that the number of humanitarian and commercial truckloads needed to sustain the 1.5 M people living in Gaza are in-park at the border crossings. Therefore, the number of trucks allowed to cross over the border do not meet the peoples’ daily needs.

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Last week the media reported the US would be donating US \$900 M at tomorrow’s international donors conference, where US Secretary of State Hillary Rodham Clinton is scheduled to speak.

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### **Is it Enough? Gaza Stripped, Occupation Remains**

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Out of the 1.5 M refugees living in Gaza, an estimated 100,000 are homeless. They live in a white sea of tents, with 25 people living in each tent. After surviving the recent invasion, these people struggle in cold weather. They do not have heat, electricity, running water, and few belongings.

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The United Nations Relief and Works Agency is supporting an estimated 700,000 Palestinians living in Gaza. In their recent report, “Quick-Response Plan to Restore Critical Services to Refugees in Gaza,” UNRWA estimates their budget needs for January through September 2009 is an estimated \$346 M.

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Is it enough? Qureshi showed photos of the destroyed Palestinian Ministry of Health and Agriculture buildings. As an interventional radiologist, Qureshi’s medical specialties include: biopsies, fibroid embolization, hepatobiliary intervention, as well as vascular and interventional procedures. When he worked in Al-Shifa Hospital, the largest hospital in Gaza, the hospital has a capacity of 80-100 beds. Yet, there were over 400 patients in the hospital. He said the hospital lacked medical equipment and sterile supplies.

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“I used tape to tape up some of the equipment,” he said, showing the slide of his repairs. Then he showed a slide of modernized, medical equipment - in typical use throughout the US or Europe. The stark contrast was obvious. Without financial, logistical and training aid, Al-Shifa Hospital does not have the resources to modernize itself.

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Originally, Al Amal Orphan Society had 250 orphans. Now they have 2000 new orphans, with few funds and supplies to handle the influx of kids. A building that was under construction to be a new UN school will house the orphanage. At present, it is a bare, cement floor with pillars supporting the ceiling.

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### **Training Local Doctors**

Abdulla started going on medical missions to Iraq over ten years ago. Although there are only 42 pediatric cardiology fellowship programs in the US, he was not aware of any Arab country that had formal training for their doctors. As a result, he brought a team of Belgium cardiologists and physicians into Iraq. Together, they developed a formal training program in Iraq, along with a pediatric cardiac center. "I spent a lot of time and effort," he added.

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In 2003, the US invaded Iraq. Looters stole medical equipment from the ICUs and set fire to the hospitals. He thought all of the efforts he made over the years had gone to waste. Yet, the important training he provided the Iraqi doctors came to life. They rebuilt their centers.

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"That's when I realized the importance of the small contribution I was doing...it was the infrastructure we were able to leave behind, what we were able to teach them," Abdulla said.

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Medical professionals of diverse backgrounds have demonstrated that their volunteer surgery and medical initiatives are imperative for the people on the receiving end of war and occupation. It is up to individuals in the international community to continue making contributions that aid people in their time of need.

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Political leadership's role is to help victims rehabilitate in every way possible so they can lead normal lives.

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Our children - no matter who they are or where they are from - should not be left to fend for themselves.

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**Sonia Nettnin** is a journalist who writes about social, political, economic, and cultural issues. Her focus is the Middle East.

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