



## Health Status of Syrian Refugees

Canada has committed to accepting 25,000 refugees who have been displaced as a result of ongoing civil war in Syria. As refugees begin to arrive, the Government of Canada will begin a responsible and orderly immigrant medical screening and resettlement program that will finally offer these people the first true sense of safety, security, health and hope that many of them have experienced in years.

Given the sustained hardships that many Syrian refugees have endured, it should come as no surprise that their overall health and well-being has suffered and deteriorated. Canada is ready to meet these challenges with a plan that will both address and restore the health of refugees and protect and maintain the continuing good health of Canadians.

Prior to the onset of civil unrest and war in Syria, the country's citizens were considered to be relatively healthy overall. Before 2011, Syria was a lower middle income country with a young population (median age, 22) of approximately 21 million. The majority of the population (over 90%) had access to clean water and sanitation. Vaccination coverage had reached an estimated 90% and the rate of infectious diseases such as Tuberculosis (17 cases/100,000 population)<sup>1</sup> was considered relatively low compared to high burden countries (between 200-800 cases/100,000)<sup>2</sup>.

Since 2011, the country's health system has become overstretched, with only 42% of hospitals reported as fully functioning. Conflict has become the top cause of death, about half the country no longer has regular access to clean water and vaccination rates have dropped below 50% in some areas of the country.

More than 7.6 million Syrians have now been displaced, increasing their vulnerability to infectious disease outbreaks. Many refugees are forced to endure unsanitary and overcrowded living conditions, with limited access to adequate food and water, as well as limited protection from heat, cold and rain in the external environment, resulting in numerous negative health impacts. Common illnesses such as acute respiratory infections, diarrhea, head lice and skin infestations such as scabies are to be expected.

Although the health of many Syrian refugees has deteriorated somewhat from the relative good health they may have enjoyed prior to beginning of the civil war, the arrival of these refugees does not pose a health risk to Canadians. Other countries that have already accepted refugees have reported no significant outbreaks or increased transmission rates of any infectious diseases of concern. For example, although cases of Tuberculosis among refugees are expected, only a few cases have been reported to date from European countries that have a large population of refugees.

---

<sup>1</sup> WHO, [https://extranet.who.int/sree/Reports?op=Replet&name=/WHO\\_HQ\\_Reports/G2/PROD/EXT/TBCountryProfile&ISO2=SY&LAN=EN&outtype=html](https://extranet.who.int/sree/Reports?op=Replet&name=/WHO_HQ_Reports/G2/PROD/EXT/TBCountryProfile&ISO2=SY&LAN=EN&outtype=html)

<sup>2</sup> WHO, [http://apps.who.int/iris/bitstream/10665/191102/1/9789241565059\\_eng.pdf?ua=1](http://apps.who.int/iris/bitstream/10665/191102/1/9789241565059_eng.pdf?ua=1)



All 25,000 identified refugees to be resettled in Canada will receive full medical exams overseas prior to arrival. Once they land in Canada, refugees will be screened for symptoms and signs of infectious disease in compliance with the *Quarantine Act*. Should any arriving passenger be identified as ill, he or she will receive prompt and immediate medical attention and care. Further screening for communicable diseases (such as Tuberculosis) will also occur, according to the usual process for all travellers to Canada.

Despite the scale of this humanitarian effort, it is important to recognize that the arriving refugees will be subject to the same rigorous screening procedures as any immigrant or new arrival to Canada as set by Immigration, Refugees, and Citizenship Canada (IRCC).

Beyond these immediate health screenings, we will also be placing a focus on immunization. The Government of Canada will procure and make available to provinces and territories seasonal influenza vaccines as well as the vaccines recommended for infants and children in Canada. Provinces and territories will administer the vaccines according to their existing processes.

With health and security screenings being conducted overseas, the majority of refugees will be arriving as permanent residents and will be resettled in their new host communities upon arrival. In some cases, it may be necessary for the federal government to make interim housing available while refugees wait for more permanent lodging to be ready. In these situations, the government will take a lead role in providing all appropriate and necessary health services.

Many of the health issues faced by incoming refugees will be reflective of the hardships they have endured. There will be systems in place to address health issues over time including physical trauma, such as wound care, malnutrition, psychosocial trauma and dental health issues.

We will also be prepared to provide treatment for chronic diseases such as cardiovascular diseases, hypertension and diabetes, as for some refugees the interruption of healthcare in their country of origin and limited access to healthcare services during their journey may have resulted in the interruption of treatments often required for the control of these conditions.

In caring for the most immediate and pressing physical health concerns of these refugees, we must also keep in mind their mental health. Once they have recovered physically and they integrate into Canadian society, it is very possible that the focus of care and support will need to shift to the lasting psychological effects of their experiences. The federal government will continue to work with its health partners in the provinces and territories, and the private sector to provide ongoing health services as refugees begin their life and participation in Canada.