

INTERNALLY DISPLACED PERSONS AND HEALTH CHALLENGES

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"I am an internally displaced person (IDP)" a patient forgot to tell his chief complaints and instead narrated the story of his journey from Miranshah city of South Waziristan Agency to D.I.Khan, Khyber Pukhtunkhwa (KPK) province of Pakistan. Why and how these persons were displaced? are the Questions beyond the scope of medical community to answer but we have to think of and look after the physical and psychosocial impacts of displacement. How can we prevent these and how can we alleviate or reduce these?

The Guiding Principles on Internal Displacement of United Nations define internally displaced persons as "persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence, in particular as a result of or in order to avoid the effects of armed conflict, situations of generalised violence, violations of human rights or natural or human-made disasters, and who have not crossed an internationally recognized State border."¹ Displacement internally or beyond the borders is not a new story for Pakistan, the Muslim world and the whole world at large. Invasion of Afghanistan by USSR in 1979 and subsequent American response against it has brought displacements after displacements.² According to United Nations High Commission for Refugees (UNHCR), IDPs are the most vulnerable persons. They are displaced due to reasons similar to refugees but their legal position is different. They have not crossed the international border and thus remain under the protection of their own country.^{1,2}

According to WHO, there were about 26.4 million IDPs around the world in the year 2011.³ According to FATA Disaster Management Authority about a million individuals have been displaced to settled areas of Pakistan due to the recent operation in North Waziristan Agency.⁴

IDPs need transport facility, shelter, food and health care including psychological support to allevi-

ate the trauma they have got during all this process. There are certain subgroups of IDPs which are more vulnerable like children, pregnant ladies and elderly.⁵

Reliable information about the number of people displaced and their human rights is important for preparedness and planning measures to assist and protect the displaced.⁶ Pakistan is striving to deal with large-scale internal displacement at both the policy and implementation levels, but remains ill-equipped regarding enactment of any specific legislation or policies about IDPs. The cost of rehabilitation of IDPs, especially reconstruction of damaged health infra-structure shall require the help of international community, once the problem is over.⁷

In this regard, situation analyses done so far by different governmental as well as NGOs, National and International, show a glimpse of the true situation. As a result of increased pressure on existing infrastructure, IDPs suffer multiple problems; medical as well as social. Food shortage, unsafe water, insufficient healthcare, poor sanitation, poor housing and load shedding are among the most prominent ones. In short, majority of them are living under the poverty line as they do not have enough income to treat illnesses including malnutrition, respiratory & gastro-intestinal infections, scabies, parasitic infestations, malaria, etc. Besides, non-communicable diseases like high blood pressure, cardiovascular problems, diabetes, kidney diseases and mental disorders put an additional burden on their meager resources, with which they are forced to live. The lack of income-generating activities, limited access to livelihoods and insufficient humanitarian assistance prevents them from becoming self-reliant.^{8,9}

Finally, something is to be done to solve the problem which have compelled them to be displaced and their replacement to a better future. Various agencies are active for this purpose with partial success, World Health Organization and Health Ministry of KPK province definitely being on the top of the list.

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- CONFLICT OF INTEREST**
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