

# Review of: "Demographic and Clinical Characteristics of Refugee Children Utilizing Healthcare Services of Türkiye (2021-2022): A Single-Centre Study"

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I would like to congratulate the authors and the Turkish authorities for their description of the support they provide to refugee children in Istanbul and indeed throughout Turkey. This article was an eye-opener for me, and should be for many other Western Europeans. Turkey accommodates and supports nearly 4 million displaced people, mostly Syrians, and 0.75 million Syrians have been born in Turkey since 2011. It puts into context the shallow and selfish concerns expressed by the politicians and peoples of several western countries who claim that they do not have the resources to support even a fraction of these numbers.

I thought the paper was well conceived, thoroughly researched, and appropriately structured. It deals effectively with the health care requirements and provisions for refugee children in a representative district of Istanbul. The Methods and Results are both detailed and thorough, and the Discussion addressed the medical conditions in considerable detail.

One sentence in the Discussion would benefit from some clarification: 'In addition, only 2.1% of ED visitors in Istanbul were hospitalized, often for less than 12 months'. The mean duration of hospitalisation was under 5 days, not 12 months, so I wonder if the authors intended to say: 'In addition, only 2.1% of ED visitors in Istanbul were hospitalized, and many of these were less than 12 months old'?

My main questions relate to the cost of providing this care: how is it funded, and is it sustainable? What are the implications for the State and the taxpayer, and what are the projections for the future? How many more refugees are predicted to arrive, and is there a realistic prospect of repatriation for any?

Admittedly, these questions are outside the scope of this paper, and the answers may well be unknown. But a short section towards the end to address 'future challenges' or 'sustainability' would be useful to persuade the reader to at least consider these issues.

Having supported Syrian refugees in Iraq, witnessing first-hand the squalid conditions in which they were forced to live, I am not surprised that infectious disease is so rife. If there is data to compare refugee profiles for ER/admission/outpatient diagnoses with a matched sample of indigenous Turkish children, this point might be usefully emphasised?

I'd like to conclude by reiterating my admiration for the way that the Turkish people and their health service have supported and sustained so many vulnerable Syrians and their children.

