



Aleppo's Reality: Daily Life under Barrel Bombs

Voices from Eastern Aleppo

A Compilation of Testimonies Illustrating the Hardships of Daily Life Caused by Repeated Barrel Bombings and Other Hardships in Eastern Aleppo

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“Life for us has become unbearable, but we cannot afford to leave as I am fortunate to still have a job in Aleppo. Those who can afford it have left to Turkey. Others are stuck in camps on the Syrian side or are finding wherever they can just to get out of Aleppo.

Daily life is full of fear: you don't know who to trust, who you can talk to. Family life breaks down and couples fight. Few children go to school and they have become restless and scared. Crime and looting have soared in Aleppo, which used to be a calm and safe place. The security situation is unpredictable and bombardments can happen at any moment. Life is unbearable.”

Mahmoud, resident of Al-Salame, Aleppo¹

¹ Names have been changed in order to protect identity of those who provided testimonies to MSF.

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Executive Summary

“You could be sleeping. You could be walking to the shop. At any time a bomb can happen,” says an MSF health worker in one of the hospitals the organization runs in northern Syria. This report aims to depict the dreadful humanitarian situation in and around the city of Aleppo, particularly after December 2013, when Syrian government forces ramped up its aerial bombing campaign in this strategic area of the country.

Employing barrel bombs as its weapons of choice, the Syrian military has killed and wounded thousands of people and devastated the city’s infrastructure and homes. These bombs are intentionally dropped in densely populated areas, indiscriminately claiming everything as a target and creating a pervasive climate of terror.

Many have been maimed for life. Many have lost limbs. The wounds are made even worse by enforced shortages of medical equipment and poor levels of post-operative care in the area. In many cases, doctors must carry out amputations that could have been avoided under better circumstances.

Beyond that, the lack of supplies and qualified medical staff have almost completely undercut access to health care of any kind for Aleppo residents, at great cost. At the beginning of Syria’s conflict, there were an estimated 2,500 doctors working in Aleppo. There are now fewer than one hundred working in the medical structures still operating in the city. The rest have fled, been kidnapped, or been killed.

Whole neighborhoods have emptied. Those who remain behind, with their houses destroyed and electricity lines severed by bombings, have been forced to use open stoves and other home-made combustible devices for heating, leading to domestic accidents and burns, particularly among children. Again, treatment options are limited given the lack of supplies and expertise.

MSF teams have also observed an increase of obstetrical complications due to the exposure of pregnant women to stress, as well as the lack of antenatal care for prevention and treatment of complications such as preeclampsia. This in turn increases the risks of preterm deliveries, miscarriages, and low birth weights for newborns. Neo-natal care for premature babies is extremely difficult to find as well. Vaccination campaigns have likewise been interrupted, and diseases once unheard of in the area are now afflicting the city’s children.

Aleppo is hardly the only city in Syria that’s been ravaged by the conflict, but its status as the country’s formerly vibrant economic hub gives its current state an added resonance. Now almost completely deserted and destroyed, its remaining residents battered physically and psychologically, it embodies both the descent into chaos the country as a whole has experienced, as well as the huge gulf that exists between the assistance that people need and the assistance the world has been able to provide.

1. Background

Doctors Without Borders/Médecins Sans Frontières (MSF) has been working to support individuals and communities affected by the Syrian conflict since 2011. What started as a series of local uprisings has grown into a highly complex, extremely deadly war that has killed more than 220,000 and displaced more than 10 million. A humanitarian catastrophe on a massive scale, the conflict continues to outpace the ability of any state, organization, or community to meet the basic needs of the affected populations and communities.

Since early 2012, MSF has focused its efforts on northern Syria, where levels of violence have remained constant (efforts to establish programs in regime-held areas have thus far been rebuffed by Damascus). MSF continues to operate six medical structures in the country and has provided support to more than 100 medical facilities inside government and non-government controlled areas. These networks allow dedicated Syrian medical staff to provide a minimum level of health care to populations trapped by the conflict, often in extremely hazardous conditions.

This support, while valuable, is only possible in limited locations and falls far short of meeting the massive needs that medical teams inside Syria face. But by supporting local field hospitals, MSF has been able to provide or help enable essential primary health care and some secondary health care—surgery for men, women, and children, wounded in bombings, for instance—for many communities that have been unable to access the few hospitals that are still operational in the region. MSF has also been able to conduct specialized programs such as measles vaccinations for children, water and sanitation services, and distributions of non-food items to internally displaced Syrians from Aleppo governorate.

Aleppo itself is today a city divided in two, with the Bustan al-Qasr crossing point dividing east from west. Moving from one side to the other is very dangerous because snipers regularly fire at those attempting to do so. Only the Syrian Red Crescent can at times move unimpeded, but even they can only cross for specially recognized humanitarian reasons

Many residents had already fled Aleppo when, in December 2013, government forces began bombarding the city with barrel bombs—which are just what they sound like, barrels filled with explosives, metal, nails, chemicals, and other destructive materials designed explicitly to cause the most damage to whatever is in their blast radius. An already miserable situation became more dangerous and more unpredictable, the toll on the population mounting each and every day.

MSF runs two health facilities in Aleppo governorate. One hospital, located near the Turkish border, has 28 beds and conducts around 50 consultations per day. Services offered include an emergency room and maternity and outpatient care. Another MSF hospital on the outskirts of Aleppo city carried out roughly 16,000 consultations and admitted 410 patients last year. MSF also supports ten field hospitals, nine first aid points, and three health centers in the province.

MSF's presence in this northern part of Syria has allowed it to gain a rare insight into the daily challenges faced by people in Aleppo, particularly across the eastern part of the city. They've communicated their struggles, their fears, and their thoughts to staff and members of the medical network MSF supports (in Syria and in Turkey).

This report is designed to give a snapshot of daily life in eastern Aleppo after months of intense barrel bombings, as seen by residents and health workers in Aleppo who have lived through it. It also highlights the plight of the medical staff working to provide health care in such a challenging environment, and the immense courage and professionalism they demonstrate in doing so.

2. Life under Barrel Bombings: a Climate of Fear

There are few signs today of the ancient, wondrous Aleppo that once served as a crucial waystation along the famous Silk Road. The eastern part of the city, ravaged by relentless aerial bombardments, often appears as a series of rubble piles around which people walk fearfully, never sure when the next bombing will come, but certain that it will come at some point.

Homes and infrastructure have been battered. Markets, bus stations, even schools are avoided because they might be targeted. Municipal services have long since ceased to function. In the east, the "free" civil administration aspires to provide some, but it has little capacity, and individuals and communities must try to fill the vacuum by themselves.

Electricity is only rarely available, perhaps for an hour every day, leaving families to shiver in the dark during the winter months, when temperatures plummet. Many neighborhoods have now been abandoned completely, leaving behind an eerie feeling of neglect. Empty homes line the streets, and thieves and looters are rife, pillaging houses and stealing personal or valuable items that families have left behind.

"Aleppo never used to be like this. We didn't have theft. We didn't have looting. Now all we have is uncertainty. We don't know who to trust and who we can speak to. We are scared to voice opinions or say anything to anyone in case there will suddenly be a violent retribution."

Ra'ed, hospital worker in al-Salameh, Aleppo

Barrel bombings in eastern Aleppo are so unpredictable and widespread that they have sown fear throughout the city. It is extremely difficult for someone to take measures to protect their families and improve their safety, which contributes to higher levels of psychological stress.

“You never know when a bomb can happen! This is the problem. You could be at home having dinner. You could be sleeping. You could be walking to the shop. At any time it might happen. Especially coming to Turkey, for those who have to go to Turkey for work or to unite family members, it is a very scary route as you don’t know who you might meet and what might happen. You don’t know if you will return home alive or see your family again.”

Tareq, health worker in al-Salameh, Aleppo

The constant threat of bombardment has forced families to maintain a constant state of readiness, or, to put it another way, to accept the reality that any given moment could be their last. Syrian refugees in Turkey talked about how this uncertainty affected their lives before they fled:

“The funny thing is, we all had our bags packed... all the time! Just in case. Our suitcase was ready by the door at any moment with our most valued or sentimental possessions, in case we had to suddenly flee.

This constantly reminded us of the situation, like we were in a time capsule, not living the real world. All the women of Aleppo started to sleep completely covered, with the Hijab, in case the barrel bombs would hit in the night and they would be caught, dead, in their pajamas! It sounds strange but these are things that people were really worried about.”

Miriam, Syrian refugee in Kilis, Turkey

The weather is a frequent topic of conversation in eastern Aleppo. The reason for this, say residents, is that barrel bombings happen only when skies are blue. “In Aleppo we now celebrate when it is a dark and cloudy day”, said one refugee in Turkey. “Then we know we will have some hours of respite before the next bombings start.”

3. Medical and Health Consequences of Prolonged Bombardment

3.1. Casualties of barrel bombs

3.1.1. Losing family members

The war in Aleppo, and in particular the barrel-bombing campaign in the east, has killed and wounded a great many people. For much of January 2015, there were up to three bombing attacks every day. It’s unlikely that there’s a family left in the city that has not lost a family

member or friend to the onslaught. And the hospitals still operating in the city are frequently overrun by new victims.

“One day when we were working at the hospital [in eastern Aleppo], it was a day of a high number of barrel bombings. It was like the city was in chaos and lots of people were being brought to us, dead and alive.

I remember when two bodies were brought in, an old man and his small grandson; they both had the same name. They must have been together when the bomb hit. The family was searching for them in all the hospitals of Aleppo but couldn't find them. Their neighbors had also been bombed so there was no one to ask about the whereabouts of these two. Finally they came and the bodies were identified. It was just one instance, but still. We all felt so sad.”

Hospital staff member in eastern Aleppo

Barrel bombings destroy people just as they destroy homes, shredding limbs and tearing bodies apart. Surviving families and neighbors dig through rubble to retrieve whatever remains they can find, then put them in bags to preserve them for burial, according to Islamic custom.

The trauma extends beyond death, beyond individual victims. Syrian refugees described to MSF staff members how a kind of hysteria takes hold in the aftermath of a bombing, a mix of the desperation that accompanies the search for some remaining piece of a person, the fear that another bombing could be imminent, and the accumulated weight of so many similar incidents. Understandably, many find it overwhelming.

It's not always possible to bury the dead, however. Thousands remain unaccounted for, gone without a trace. Everyone seems to be searching for someone, without knowing if the person they seek has been killed, has fled, or has been arrested. They are just gone. Many hospitals in Syria also have bodies in their morgues that lie unidentified until they finally have to be buried in mass graves to make space for more bodies.

3.1.2. Losing a limb

Another serious consequence of barrel bombs is their capacity to permanently maim victims, robbing them of arms or legs, an outcome that can be as psychologically damaging as it is physically traumatic.

In some cases, this is an immediate outcome of the explosion. In others, it happens because of the prevailing conditions in the area, which force hospitals to operate with only a fraction of the materials they really need. Due to shortages in medical equipment and poor levels of post-operative care, doctors have at times had to carry out amputations for people whose limbs could have been saved in better circumstances.

For the injured, life becomes even more difficult, particularly if they have lost a limb. It is almost impossible to obtain a wheelchair in Aleppo, and even those who do somehow procure one struggle mightily to move it through damaged neighborhoods and ruined houses. Prosthetic limbs and rehabilitative care are likewise in very short supply. Not only must victims try to adapt to a new, far less mobile reality, they also lose the ability to run for cover when they hear planes or helicopters approaching. Medical staff have been handed limbs that have been blown off arriving patients, the hope being that they can somehow reattach them. In these conditions, that is all but impossible.

One amputee victim of a barrel bomb spoke to MSF while recuperating in a hospital in Kilis, Turkey:

“I left my work around 1PM and was walking near the Haluania roundabout in Aleppo when suddenly a tank bomb hit the middle of the road. I was hit badly, and immediately after the explosion, I could not feel my leg. A group of people carried me to a car and took me to Al Daqaq hospital, which was only 5 minutes away. By the time I had reached the hospital I had lost consciousness. The hospital staff tried to contact my family, but could not reach anyone at that time.

I was taken to the operating theater and when I woke up after 4 hours of surgery, my right leg was amputated. The left leg was full of rods and plates in order to keep it rigid. For three days I was recovering and then I was sent to the hospital in Al-Salameh. The doctors there were very good with me and cleaned my wounds regularly to prevent infection. When the doctor told me each day that I was healing and getting better it helped to lift my mood. I spent one-and-a-half months in the hospital until the day when we were forced to evacuate to Kilis, Turkey.

Now I am here continuing to recover. I will get a wheelchair and prosthesis to support me. Yesterday my father brought me a meal that had been prepared by my wife in Aleppo. I look forward to going home and seeing her and our 3-month-old son again.”

Khaled, 29, Kilis hospital, Turkey

A psychologist working in a mental health program supported by MSF in Kilis described the case of a 15-year-old boy named Mahmoud:

“I met Mahmoud only recently, in Kilis hospital, and was completely overwhelmed [by his story]. He is a boy of 15 who was playing football with his brother near their house in Aleppo when a rocket fell right where they were playing. Mahmoud lost consciousness and was brought to a hospital. When he woke up he realized that both his legs had been amputated, and that his life would, from that day on, never be the same. I met Mahmoud one

month after the incident, and he came up to me smiling and doing tricks in his wheelchair. He was looking forward to recuperating so that he could get prosthetic limbs put on and could walk again.”

Psychologist, mental health project, Kilis, Turkey

3.2. Everyday Health Problems in Eastern Aleppo

Prior to the conflict, Aleppo had a functional health care system that offered quality primary, secondary, and tertiary health care, along with disease prevention and vaccination. Doctors treated tuberculosis, cancer, and many other chronic diseases. This care continued through the early phases of the Syrian war as well.

Once the barrel bombing campaign was unleashed, however, care began to falter as facilities and medical staff were targeted and supplies dwindled. Even essential care is now impossible to access for many people, and once-minor problems have become potentially life-threatening. As one health center after another closed down, patients in need of services such as dialysis or diabetes treatment either had to risk crossing over to the western side of the city or go without.

As a matter of course, medical staff in eastern Aleppo see people die from conditions that could be treated.

Other kinds of medical problems have emerged as a consequence of the bombings. Without electricity, people living in damaged homes have had to find other ways to stay warm, particularly during the winter. The increasingly widespread use of low-quality, home-made combustibles has led to a sharp increase in domestic accidents, such as burn cases among children. Treating burns is a complex process in the best of times. In Aleppo today, it's often extremely painful for patients and comes with no guarantees of success.

Regular procedures in eastern Aleppo have become complicated. The respiratory infections that are features of Syrian winters have grown far more prominent in current circumstances. But the ability to treat them has decreased dramatically, as health staff often have to prioritize more serious conditions and more acute medical needs. Respiratory infections and other common illnesses have thus become a factor in rising mortality rates, particularly for children under the age of five. The massive decrease in vaccination rates is having a similar impact when it comes to preventing disease outbreaks or stopping them from spreading once they occur.²

This is yet another sign that there is no more “normal” in eastern Aleppo—not with so many bombs falling; so many people fleeing or having fled; so much destruction of homes, schools, public spaces, and medical facilities.

² In spite of huge efforts by MSF and a number of volunteers from local organizations, the measles vaccination campaign in eastern part of Aleppo city in April–May 2013 achieved a very low coverage.

3.3. Born into a War Zone: Deliveries

MSF's teams have also observed an increase of obstetrical complications due to exposure of pregnant women to stress and the lack of antenatal care for prevention and treatment of complications such as preeclampsia. This in turn increases risks of preterm deliveries, miscarriages, and low birth weights among newborns.

There is also very little in the way of antenatal care for expecting mothers or neo-natal care available for premature babies. Even very basic support is limited, and many families must make the arduous and often dangerous journey to neighboring countries to access the care mothers and children need—care that used to be readily available in Aleppo.

Logistical problems such as electric power outages and the lack of spare parts to fix electric generators can also cause problems. Three premature babies died in one hospital for these very reasons. What's more, shortages of food (including affordable formula for babies), decent shelter, and diagnostics increase the vulnerability of babies and infants significantly, particularly in a setting where outbreaks of communicable diseases such as leishmaniasis, measles, and scabies have become more common.

3.4. The Plight of Aleppo's Medical Doctors

With far fewer medical services available for residents of eastern Aleppo, it has gotten much harder to address even basic medical needs, to say nothing of the acute emergency needs described above. Where there were once an estimated 2,500 doctors treating all kinds of illnesses and conditions in Aleppo, there are now fewer than 100 (97, in fact, in the hospitals still operating in the city). The rest have fled or been kidnapped or killed. There is not a single neurosurgeon or intensive care doctor in all of eastern Aleppo.

Hospitals in the Sakhour, Sha'ar, and Shukari neighborhoods have been hit repeatedly by barrel bombs. First aid points have been affected by shelling as well, with many closing or moving to other districts. The pediatric hospital that was in Masaken Hanano has also closed as a result of the bombing. These issues, coupled with the low number of incubators and regular and ICU beds available, make it impossible to respond to the current needs of the population.

For fear of being targeted, people will not drive at night with their lights on, either, and many will not drive at night at all. That means anyone who needs hospital care at night usually has to wait until the following morning, regardless of their condition. At the same time, though, people try to avoid staying in hospitals for any length of time, knowing, as all in Aleppo do now, that hospitals themselves are often targets. On many occasions, staff have seen patients leave well before they should be discharged and found it impossible to provide follow up care in any significant manner.

Not surprisingly, patients needing care frequently travel to Turkey. Those who can't make it out of the city learn all too quickly that formerly treatable complications can be life-threatening.

Doctors in MSF-supported hospitals and other medical centers are working around the clock to deal with the effects of Aleppo's barrel bombings and to provide regular medical care to sick patients. A number of volunteers without any medical background have stepped up to help fill the gap as well,³ but qualified staff and additional resources are desperately needed. One doctor in a hospital supported by MSF 5 kilometers [3 miles] northwest of Aleppo recently wrote to MSF explaining their situation:

“Our situation is increasingly difficult these days because of the bombings. Most doctors and nurses have left now and we are working under great stress. We currently have a skeleton staff that never sleeps. We just [this moment] came out of the theaters. We are absolutely exhausted, after having performed 100 operations and treated 650 injuries in two months.

It is hard but we persevere, with all the help we can get. We appreciate the work MSF is doing and it helps close a huge gap we have, especially in pain relief and anesthetics, which allow us to do all the operations we do.”

Doctor in local field hospital, Aleppo

Doctors and medical and paramedical workers in eastern Aleppo have to live through the same stressful situations as the rest of the population. They work in precarious and dangerous conditions, in underground or makeshift field hospitals that are themselves targets of bombings, with far fewer resources than they require to meet the needs they see every day. Many are working as surgeons despite not having the proper training for conducting surgery or for responding to mass casualty incidents.

Some teams find themselves performing operations for 24 consecutive hours, or more, without any sleep. They spend long periods away from their families, time during which they're wondering if their families are safe and their families are similarly concerned about them. Medical staff in Syria has been directly and explicitly targeted throughout the war, in a blatant violation of international humanitarian law, which obligates parties to the conflict to protect the medical mission.

“We had a case recently that was devastating. After a period of severe bombardment, an influx of patients arrived to the hospital. An entire family was brought in. They had been attempting to flee to safety in Turkey. Two of the children were immediately killed in the bombing. Out of the rest of the children, one son, Nadim, a boy of 12 years, had his leg amputated. His nine-month-old baby brother Amjad had both of his feet amputated. The mother had a broken leg.

³ As an example, a number of non-medical volunteers participated in the measles vaccination campaign in Aleppo city held by MSF in April–May 2013, without whom it could not have been completed.

But the worst of all was when the other brother, four years old, waved goodbye to his mother as he was taken into the operating theater to amputate the lower half of his body.

These are awful stories to witness, but it is made much harder when you feel you cannot treat them properly because you lack equipment and doctors.”

Doctor in al-Salameh hospital, Aleppo

Ambulances have started carrying two or three patients at a time, which was previously inconceivable but is now imperative due to circumstances. Ambulances, however, have been also destroyed in the war, which makes many patients afraid to take them. As a result, inconspicuous mini-vans or normal cars are used to transport patients—sometimes across dangerous checkpoints—despite not being equipped with the required medical equipment.

Maintaining adequate supplies of drugs is yet another great challenge for doctors. There have been many instances when they have had to proceed with complicated surgeries on patients without anesthetic or accompanying antibiotics, because there were none to be found.

4. The Effect on Children

All wars have a profound impact on children. Children under five years old are particularly vulnerable to illnesses stemming from the deterioration of basic living conditions, especially if they are not receiving the vaccinations they need. Food shortages, and shortages of foods with nutritional value, can affect growth patterns. The lack of obstetric care means many babies are coming into the world in the most extreme circumstances. And living under constant threat of death, in an environment of such carnage—where the carnage is visible day after day—impacts the mind and psyche in many ways, for many years.

Yet parents in Aleppo have little recourse on any of these matters. One of the most powerful symbols of this is the re-emergence of deadly childhood communicable diseases in a country that had been free of them. The newfound threat of polio and measles is a distressing example of how war can kill not only with bullets but also by destroying the health system.

Syria reported relatively good vaccination coverage prior to the war,⁴ but since it began, rates have plummeted. There are not enough supplies or staff to carry out vaccination campaigns on any kind of scale, and the security situation makes it nearly impossible to do so even if the materials can be found. This has led, in certain areas, to very low levels of coverage where just one case can prompt a much larger outbreak. Where and when possible, MSF has run measles and polio vaccination campaigns for children in northern Syria, but the reach of these is very limited.

⁴ Source: WHO

In rural Aleppo, many children are still able to attend school, albeit in sometimes rudimentary conditions. Many qualified teachers have fled, and as a result schooling is often carried out by local volunteers. Most school buildings have been taken over for use by displaced persons, military bases, or hospitals, and so this informal teaching is conducted in whatever small and safe spaces can be found. As for urban areas, in many areas of eastern Aleppo city, the children are no longer going to school. Many schools have long been closed due to the insecurity for both teaching staff and children, lack of funds, and high numbers of displacement from Aleppo.

“Most schools have closed because insecurity is too high and people are too scared to send their children to school, not knowing what might happen to them. But despite the whole education system being on hold, peoples’ resilience comes out. You see instances where people invent ways to keep the children occupied, local community councils have been established to provide ad hoc services, and the ‘free council’ of Aleppo also organizes some activities. There are attempts here and there... however, overall education has been pretty much halted.”

Staff member, eastern Aleppo hospital

In Aleppo and in displacement camps, medical workers have observed that children are becoming more aggressive and getting into more fights. A psychologist working with Syrian refugee children in Turkey spoke of the effects that the bombing of Aleppo and the war as a whole have had on its children:

“We see all types of children. Some are more balanced than others, but it is obvious the war has affected them all in some way or other.

Those children who stayed in Syria much longer before becoming refugees witnessed a lot and managed to develop some coping mechanisms to deal with the trauma. But they saw a lot of death and destruction, and seemed to ‘normalize it,’ which is not especially healthy either. Seeing body parts became a regular occurrence. They were bored and traumatized all at once.

Here in Kilis, we still see many effects on children. Kids up to 15 years are wetting the bed. They have nightmares and cannot sleep. Many feel a lot of anxiety and feel insecure. Their schooling has been interrupted and they have lost touch with their friends and communities. Those children who had one of their parents killed in the bombings tend to display violent and angry behavioral patterns more than others.”

Abu Omar, a psychologist in a mental health program supported by MSF in Kilis

Children are also of course at risk of being caught in the bombardments if they go out of the house. During heavy periods of bombardment, they are forced to stay indoors and get very little chance to play outside.

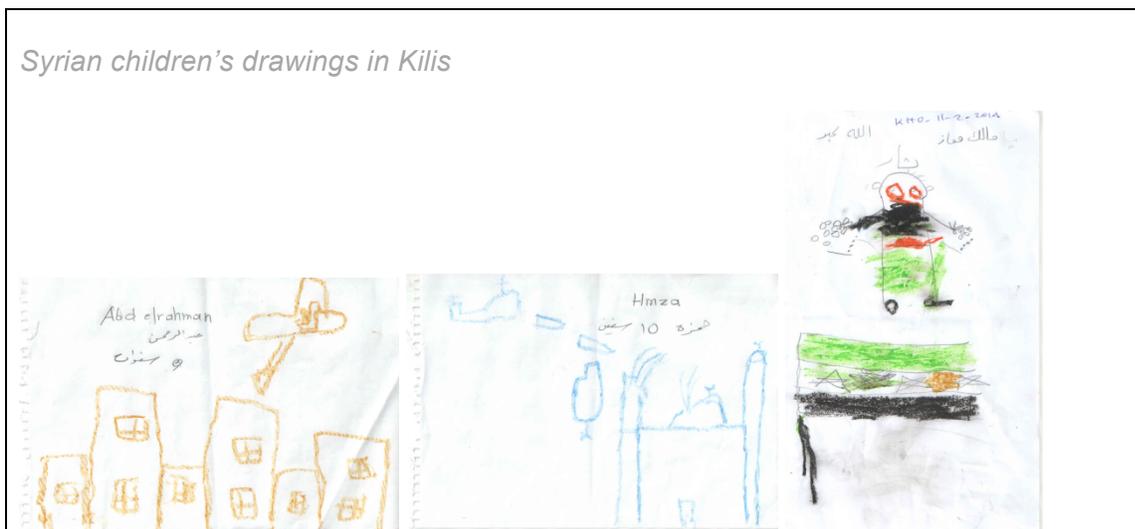
The precaution is understandable, though, because many children have been killed or wounded by barrel bombs. And those who have survived have been deeply impacted in many ways. In Kilis, psychologists and community health workers in a mental health program supported by MSF visit children who have been injured. The children can be distracted with games and toys, but their conversation often returns to the war. Some of them attend classes but are quite despondent and listless. When psychologists ask them to draw pictures of their families, they draw barrel bombs landing on houses (see below). They play games related to the war and talk of fighting. Their families talk incessantly of the war, too. Even in another country, they cannot escape it.

“One child we have been working with, Muhammed, is six years old. One night he was woken by the sound of explosions nearby, and his family decided that they could no longer live in this insecure situation: they had to flee. They took their most urgent belongings and made their way to Kilis in Turkey.

Muhammed, however, still has not recovered from the events he experienced in Syria, often thinking and talking of planes, of bombs, of attacks on mosques, of the dead. He has frequent nightmares and is constantly thinking about the war. He often feels scared and the smallest sounds frighten him. He feels angry at the people who fight, which made him leave his home and school. He is only six and he has had to deal with so much.”

Community health worker, Kilis

Syrian children’s drawings in Kilis



5. Family tensions and the weakening social fabric

One dynamic stemming from the war that's rarely remarked upon is the stress that's been placed on social and family relations. The physical toll is reflected by the concurrent and related psychological and emotional tolls as well. The cumulative impact has significant consequences, and many bonds have been torn asunder. Relationships in Aleppo have been tested and severed due to political differences, economic tensions, changing behavioral patterns, general anxiety, and, of course, displacement and death.

All of this is exacerbated by carry-on affects of the war. Aleppo residents complain that living costs have increased, for example, a result of the general scarcity of resources. Most products, even basic staples such as bread, for example, have been scarce at times.

“Things were especially difficult in western Aleppo when it was besieged by the opposition and most roads were closed. There was only one way to get in and out and it was quite dangerous [because of snipers]. But 1 kilo [2.2 pounds] of tomatoes for 100 SP [Syrian Pounds] in the rebel area would cost 400 SP in the government area! A gas cylinder costing 3,000 SP in the rebel area would cost us 7,000 in the government area! Same for bread since no flour could be brought in.

So as you can imagine, a whole economy grew around sending people to the other side to get cheaper goods. But sending someone was dangerous and of course cost money, too, so in the end you paid practically the same expensive price!”

Psychologist in mental health program, Kilis, Turkey

After people flee, they've had their homes looted or taken over by others. They rent apartments elsewhere in Syria or in Turkey, which adds an additional financial burden. As commerce in Aleppo collapsed, many people lost their jobs and have struggled to generate any new income. Some people work transporting goods to and from the Turkish border, a stressful, insecure undertaking that is one of the few remaining options for them. Those who cross into Turkey can usually find menial labor, but their opportunities are very limited because they don't speak Turkish and they are often severely underpaid (5 to 15 Turkish Lira a day, or about \$7).

All these issues, coupled with increasingly frustrated children who don't go to school, deaths in the family, the constant bombardments, and more add a huge weight to family life.

“I don’t know how to fix my family. I feel it is broken. I work all day for my family and return home to find my wife has lost her temper again with our children and is being violent with them. If I try and talk to her she doesn’t listen. I don’t have much control any more, and as the father of the family I feel I am not living up to my responsibilities.”

Staff member in al-Salameh hospital, Aleppo

Psychologists working with Syrian refugees in Turkey note similar strains. Relationships between married couples falter as they try to proceed with their fractured lives. Family members often stop talking to each other or, worse, fight each other because they are on opposite ends of the political spectrum. Parents find it increasingly difficult to control children who are increasingly anxious and aggressive. And fathers feel frustrated that they cannot provide for their families. Domestic violence has been increasing, it’s been reported, as has violence against children.

6. Forced Displacement

As the barrel bombing campaign has continued, MSF staff has seen more and more families leaving the city. Those who stay do so mostly because they do not have the financial means to move or to protect their homes from looters. But many more have fled from the insecurity and the daily struggles that now punctuate life in Aleppo.

It appears that neighborhoods that have been bombed more heavily (Hanano and Haydariya, for example) are emptying at a faster rate, with the majority of residents having left. In other neighborhoods (Sakhour, al Fardous), a substantial number of residents have also left. Neighborhoods such as Maysar, Jazmati, al-Marjeh and Masaraniyeh, and al-Ashrafiyya are practically deserted, too, with shops closed and the streets empty. The areas of Bastan al-Basha, the old Aleppo citadel, and the “7 Bahrat” neighborhood are like ghost towns. The most important ancient marketplace of Aleppo has been destroyed.

A resident in Aleppo described one such neighborhood, Jazmati:

“Jazmati is in the southeastern part of Aleppo, near the airport. In late January 2014, the security situation there started to deteriorate and there was an indescribable terror unleashed upon its residents. It was an incessant bombardment by helicopters and barrel bombs. Every day was unbearable and terrifying.

This continued until mid-February. During that period, a population of 2,000 families dropped to just 60 families, and people have been too scared to return. The possibility of the area being stormed by troops from the east is too high, especially as they are using heavy weapons. The strange thing is, when you go there, that when it starts to get dark you don’t

see any human beings any more in the streets. Only cats and dogs and rats wandering in and out of the ruins. At that time of day even the armed combatants disappear.”

Resident of Aleppo’s Jazmati neighborhood

Some residents have been fleeing to western Aleppo or other areas of rural Aleppo, places where the shelling is less severe. They stay with friends or family or rent out empty houses. Larger numbers have been heading up to the border, staying at makeshift transit camps for internally displaced people such as Maaber el-Salame and Tlel el-Sham, where the situation is relatively stable. Some would carry on to Turkey but they do not have identity documents and thus cannot cross the border.

The greatest percentage of people who have fled, however, is composed of people who left the country entirely, going to Turkey to stay in the refugee camps, along with the hordes of other Syrian refugees. Out of 97,000 Syrian refugees in Turkey’s border town of Kilis, 20 percent of them (19,400) have arrived over the past six months. However, they are not entitled to stay in camps. They stay outside camps, like an estimated 40,600 other unregistered refugees who already living there.

Concluding Remarks

Aleppo today is less than a shell of its former charming self. It’s a shattered version of its former self, its ancient citadel and *souq* abandoned, its infrastructure destroyed, its people spread out across the entire region, its future looking as bleak as its present.

Everyday life in Aleppo is a trial, something to endure. There are shortages of everything. Opportunities to work, to play, to live, are rare. Prices have gone up. Looting is increasingly common as people ravage houses whose residents have fled to scavenge whatever they can.

The campaign of barrel bombings on eastern Aleppo that began in late 2013 has devastated the population and the city’s infrastructure. Too many people have lost family members or friends and death has become a constant companion. The wounded are everywhere, many missing arms and legs. Many of the victims are women and children.

Among the casualties have been the health system and the medical structures that once sustained this population. Victims of barrel bombs, patients seeking regular health care or routine treatment for chronic diseases, parents seeking to get their children vaccinated, mothers expecting babies—all are finding it increasingly difficult to access health facilities and receive care. There are too few doctors left in Aleppo and not enough medical equipment and drugs coming in. Medical workers who remain work under difficult, stressful, precarious conditions, sharing the danger and anxiety of their patients. The doctors in Aleppo supported by MSF work extremely hard, with great dedication, but they themselves are extremely tired and desperately need reinforcement.

There is no respite, however, from the barrel bombs. These bombs are designed to cause maximum destruction in urban areas, their targets chosen both intentionally and indiscriminately. People can no longer feel safe even when they are inside, even when they are underground. Instead, many move to the countryside, to camps in the north of Syria, or to Turkey, if they have the means.

The people of Aleppo are desperately in need of medical and humanitarian assistance. Wherever it can, MSF supports medical structures that provide care to the communities of Aleppo, despite the challenging environment. But so many more people need help, far more than are being reached at present. Their plight, and the overall humanitarian catastrophe unfolding in Aleppo, needs much more—and much more urgent—attention. Civilians and medical workers alike must be given protection and allowed freedom of movement. A humanitarian space in which people can access care and assistance is crucial.

Remarkably, there are still people living in eastern Aleppo, but their future is anything but assured if the bombs keep falling and present circumstances persist.