

## SARS' financial impact on hospitals still being tallied

This spring, Jeff Lozon received a crash course in how to cope with the outbreak of a potentially deadly illness.

Lozon is president and CEO at Toronto's St. Michael's Hospital, which — along with all other hospitals in the Greater Toronto Area — received orders from the province Mar. 27 to restrict entry in response to the spread of severe acute respiratory syndrome (SARS).

The restrictions, which included screening of all visitors and the temporary suspension of surgery, effectively closed down the busy hospital. "Everything in our system has changed," Lozon said Apr. 15. He said all elements of daily operations, from admissions to food

preparation to flower delivery, had to be evaluated. "We've basically been recreating processes from the ground up."

Part of this recreation involved vigorous enforcement of new security rules among 5000 staff members: their access was limited to a single door, and staff from departments that had closed were reallocated to screening duty. The measures even extended to staff at a franchised coffee shop, and flowers being delivered for patients were turned away.

"For the first 10 days or so if you were up on the units at all, even if you were delivering meals, you would have to take full precautions," Lozon explained. "Now we've backed away from that a bit and

we're little more selective, but we haven't restored anything back to normal."

By mid-April, with 34 people isolated as possible SARS patients and some staff members in quarantine, Lozon said the need for containment was far from over.

He thinks screening procedures will continue for months, and this possibility is causing financial concern. "This whole thing will lead to a permanent increase in costs," Lozon said. "Over and above the extraordinary costs that are occurring now, there's going to be a permanent increase in costs for the administration of screening activities.

"This has all kinds of ramifications." — *Brad Mackay, Toronto*

## For Iraqi women, more war means more uncertainty

Dr. Shier Gharib remembers women coming to her home in Kifri, Iraq, begging for an abortion because they knew their unborn child would eventually starve or die of a preventable childhood disease. She remembers women dousing themselves with kerosene and lighting a match because of society's tacit approval of the spousal abuse they faced.

Gharib, a general practitioner who left Iraq in 1997 and now lives in Winnipeg, could not remain idle. In 1992, she and 7 others founded the Independent Women's Organization (IWO) to defend women's rights and their struggle for equality. The organization was born the year after Iraq brutally suppressed rebellions in Kurdistan and President Saddam Hussein changed the law to allow honour killings — the murder of women who bring "shame" to their family. The IWO has since saved about 250 women from honour killings.

At its height, between 1994 to 1999, the IWO had about 2000 members. There are fewer members today and its women's shelter has closed, but those at risk in Kurdistan are still being hidden. Women living elsewhere are not as fortunate. "In the centre and south of Iraq, the dictatorship [was] so strong that we [were] unable to function," says Yanar Mohammed, an architect who founded IWO's Canadian committee in 1998.

Some say the situation facing women

was even grimmer in the south, but there is scant information. Amnesty International says dozens of women accused of prostitution — including obstetrician Najat Mohammad Haydar — were beheaded without judicial process in October 2000.

Gharib says Iraqi women are second-class citizens. A man can kill a woman who commits adultery, widows must wait 7 years before remarrying, and 2 women equal 1 male witness in court. "[The laws] are just an excuse to control women," says Gharib.

Economic sanctions imposed following the first Gulf War have also taken a toll. The cost of an IUD — the preferred method of birth control among rural women — increased sharply.

Without birth control, the number of unwanted pregnancies increased, but abortion is prohibited. "I had patients — hundreds — crying in my clinic for an abortion." Some nurses and midwives performed illegal abortions, while other women relied on folk remedies and wound up in hospital.

In 1996, when Gharib worked with Save the Children on the border of Iraq and Iran, she treated up to 4 victims of land mines every day. "They were young people with no hands, no legs."

What fresh horror will the latest war bring? "Right now I'm more scared about the postwar situation than the war," says Gharib, 33. "We are used to



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### Yanar Mohammed dreams of rebuilding her country

being bombarded, but afterward, it will be a terrible, unstable situation."

She fears that tribalism will take hold in Kurdistan, while Mohammed predicts that Islamic fundamentalism will sweep through the south.

Iraq was once a symbol of modernity in the Arab world, Gharib and Mohammed recall fondly. The 1960s and 1970s were a "golden age," when education and medical care were free, women accounted for 40% of public sector workers, and the literacy rate surpassing 80%. Mohammed, 42, says wars and economic sanctions have destroyed most of those gains.

Gharib has spent years working at odd jobs, such as cleaning rugs and houses, as her husband seeks to become eligible to practise in Canada. In April, she was studying for her own entrance exam, caring for her 7-year-old son and watching the war on CNN. "I'm still suffering here," she says, "but in a different way." — *Barbara Sibbald, CMAJ*