

John Boccacino:

Hello, and welcome back to the 'Cuse Conversations Podcast. I'm John Boccacino, senior internal communications specialist at Syracuse University.

Sana Bég:

I wanted to dig a little bit deeper, beyond what the confines of journalism gave me, and that's how I naturally fell into the work of Doctors Without Borders. What spoke to me are some of the principles, specifically on speaking out. The organization in itself was actually founded 50 years ago by a group of doctors and journalists together who felt that they had this privileged position that so many others don't when it comes to accessing people who need treatment, and what we witness when we are seeing that, there is that duty to speak out about what we see. That really spoke to me, and a lot of the work that MSF does is in line with the journalism principles as well. I saw that as a natural progression for me to dive deep and play a role in whatever way that I could in telling the stories of those that we helped that needed the most.

John Boccacino:

Our guest today on the 'Cuse Conversations Podcast is Sana Bég, who earned dual degrees in broadcast journalism from the S.I. Newhouse School of Public Communications and international relations from the Maxwell School of Citizenship and Public Affairs. She is a proud Syracuse graduate who is doing fantastic work right now with a group that you know them better as Doctors Without Borders, but their official name is Médecins Sans Frontières. I think my French might have come through a little bit okay there, did it?

Sana Bég:

You nailed it.

John Boccacino:

We all know it here as Doctors Without Borders. Sana, I'm so happy that you've taken the time to join us here on the podcast. How are you holding up these days?

Sana Bég:

Thank you for having me. I'm doing well. I'm based in the South Asia region for now, so a bit removed from some of the major conflicts that are happening, but very glued to it thanks to the nature of my work.

John Boccacino:

Your work is as director of communications for Doctors Without Borders. How did you get connected with Doctors Without Borders in the first place?

Sana Bég:

It seemed like a natural progression after decades long of experience in the journalism world. I still consider myself to be a journalist, a storyteller. What I believe that I'm doing today is just trying to tell the story of Doctors Without Borders in a compelling way that can compel people to take some action, which is what we are desperately in need of, given what we witness on a daily basis across the world.

John Boccacino:

Explain for our audience what exactly the organization Doctors Without Borders is all about.

Sana Bég:

Doctors Without borders, or Médecins Sans Frontières, we are an international medical humanitarian organization. We're commonly known by our French acronym, MSF, or Doctors Without Borders, as you've mentioned. We care for people who are affected by conflict, disease outbreaks, natural and manmade disasters, and those who are generally excluded from healthcare for one reason or the other. We are currently doing this in one form or another in about 72 countries and territories across the world. We go where many others can't or will not go, and we have been doing so now for the last 50 years.

What guides us throughout our work, regardless of the nature of it, are some core principles. We are independent, we're impartial and we're neutral. We're also guided by the highest level of medical ethics. We are transparent and accountable, and we are committed to bearing witness. What this means is that our principles of impartiality and neutrality are not synonymous with silence. We are born out of that need to speak out about what we see firsthand when we are delivering life-saving care. For all of this that I've mentioned, we were the recipient of the Noble Peace Prize in 1999.

John Boccacino:

Connect the dots for us. I mentioned during the intro that you got your dual degrees here, both in broadcast journalism and from Newhouse and international relations from Maxwell, I could see the similarities between the career paths. How exactly did you get linked up and connected with Doctors Without Borders in the first place?

Sana Bég:

Back when I was at SU, I knew that I wanted to do journalism. I knew that, given the excellent faculty at Newhouse, I would learn how to say something or how to present what I needed to say from journalism, but I decided to club that with international relations as well from the Maxwell School, because I felt broadcast would teach me how to say something and international relations would teach me what to say and give me that depth that perhaps others who would simply just take journalism would not otherwise have. That was the beginning of a very long, interesting journey for me, to delve into the politics and international affairs of contemporary Middle Eastern politics, of South Asian politics, of Eastern European politics. All of that, whether I knew it or not back then when I was at SU, that did inform my worldview and did give me a unique insight into some of the biggest crises that we see in the world today.

That led me to I was working with the NPR affiliate WAER with Chris Bolt and Scott Willis when I was there on campus and then moved into TV a few years later. I wanted to pursue a more focused degree in journalism, and I pursued a master's at Columbia University in New York city in journalism as well. With both the skills that I learned at Syracuse and at Columbia, I was selected to be part of the core team that launched Al Jazeera America in New York a couple of years ago. That gave me and my colleagues there a very interesting launchpad for us to bring the stories of the world to an American audience, an audience that often, to be critical, may be very consumed with what's going on in our own backyards, but for our audiences in the United States to also be aware of the responsibility that we have in global foreign affairs and foreign policy and how do we connect those dots and show our American

audiences what is happening around the world in a way that can make sense to them, that's translatable, palatable, to our audiences there.

I quickly recognized after being at Al Jazeera for a few years that the scarcest resource in the 21st century is human attention, and that living in a world of a news cycle where every day we needed to have a new headline making the top story, I felt I was doing a disservice, because I knew that if the headline today was the war in Syria and tomorrow, only because it was the war in Syria for a week, we needed to change up the headline, it didn't mean that the war there went away. I wanted to dig a little bit deeper, beyond what the confines of journalism gave me, and that's how I naturally fell into the work of Doctors Without Borders.

What spoke to me are some of the principles that I just highlighted for you earlier, specifically on speaking out. The organization in itself was actually founded 50 years ago by a group of doctors and journalists together who felt that they had this privileged position that so many others don't when it comes to accessing people who need treatment. What we witness when we are seeing that, there is that duty to speak out about what we see. That really spoke to me, and a lot of the work that MSF does is in line with the journalism principles as well. I saw that as a natural progression for me to dive deep and play a role in whatever way that I could in telling the stories of those that we helped that needed the most.

John Boccacino:

With what's been happening in Ukraine, I know that your organization has played a critical role in many of these civilians who have been fleeing from the conflict. How exactly can you describe what Doctors Without Borders has been doing, what services they've been providing, and what impact they made on the civilians who, again, were fleeing from this conflict in Ukraine?

Sana Bég:

Sure, and happy to start off with Ukraine. Well, we've been in Ukraine long before this recent war, we've been present there since 1999, but since the war started, the nature of our intervention has obviously changed. Very early on in this crisis we decided to suspend our usual work, which has been around HIV and tuberculosis in the country. Instead, we've shifted gears and we are focusing now on responding to the unfolding severe humanitarian crisis across the country, both in Ukraine and in the neighboring countries who've been affected by it. Across Ukraine, as we know, people remaining in cities that are under attack, including Mariupol, they face incredible hardship. They live without heating or electricity, without food or clean water or medicines. Hospitals are consistently in danger of running out of supplies, especially for surgical, trauma, emergency room and intensive care unit needs. However, other key medical items are also needed in this war, including insulin for diabetes patients or medicines for patients with chronic diseases such as asthma, hypertension, or HIV.

As Doctors Without Borders, we currently have over 140 international and more than 470 Ukrainian staff who are working in direct response to the war in Ukraine today. More staff, Ukrainian and international, join our teams every day. They work either as medical staff, meaning surgeons, doctors, nurses, psychologists, or they work in logistics and administration and management. We're not just Doctors Without Borders, there's a whole orchestra of people that we need to get the work done. We are in contact with the hospitals across the country. We provide supplies and training to them as needed. As of the last check, MSF has now donated the most amount of medical supplies we've had in the country, as additional supplies continue to arrive.

The nature of our response, Ukraine wide, like I said, we donate several hundred tons of medical supplies and relief items to the country. We also have created a unique setup for Ukraine in particular, where we're providing patient care onboard two medical trains. These are trains that we've converted into mobile medical facilities. We've developed this with the collaboration with Ukrainian Railways. These medically-equipped carriages help us evacuate patients out of hospitals that are close to active war zones and then we refer them to hospitals away from the front lines. One train that we have, out of these two, is able to provide basic levels of medical care and it can carry about 50 patients. Another train is able to carry around half of that, but is equipped to provide more intensive care aid for patients who are in serious condition. We've evacuated over 600 patients already, including a few dozen orphans as well in Kiev and surrounding areas.

In addition to this immediate work, we also have telephone hotlines that enable people with non-communicable diseases, especially the elderly and the vulnerable, to get their medication delivered at home in Kiev. A lot of the times what we don't realize with war is the knock on effect, the domino effect, on those with preexisting conditions as well. We wanted to make sure that cycle of care continues for them in some way. We also run a telephone hotline for survivors of sexual violence and domestic violence. We offer confidential consultations and delivery of medications to prevent HIV, sexually transmitted diseases and unwanted pregnancy. We provide shelter for survivors of sexual violence, we provide mental health consultations. There's a whole gamut of support that we provide, not just in Kiev, but in surrounding areas of the country as well.

John Boccacino:

What were some of the stories that you heard about those people who were fleeing and what they had to endure just to try to find a place where they could get refuge and get safety and get medical treatment?

Sana Bég:

Well, for most of the most recent stories that we've been hearing and the wounds, the injuries, that we're seeing on our patients, they show us unquestionably the shocking level of suffering and the indiscriminate violence of this war that is being inflicted specifically on civilians. The accounts that we hear from patients across the board, I wouldn't pick one, but some of the themes that have emerged and several patterns that we've seen in these stories is so many of these civilians have told us that they've been shot at while evacuating or they were attacked while trying to leave war zones, that indiscriminate bombing and shelling has killed or maimed people living and sheltering in residential areas, that elderly people have been brutalized or directly attacked, and they're particularly vulnerable status has been completely overlooked by attacking forces. Also, the types of injuries, the types of wounds that we are seeing are often extensive and horrific. They appear to affect all, indiscriminately affecting people, whether male or female, young or old. On the train, I think the youngest that we have seen has been six years old.

John Boccacino:

What you're describing directly goes against the Geneva Convention, which prohibits the deliberate or indiscriminate attack of civilians and civilian objects during times of war, but sadly, it seems like these are situations that play out in every conflict. How would you compare the atrocities that took place in Ukraine with the atrocities that took place in Syria, in Afghanistan and other conflicts that you've observed and worked with in your role with Doctors Without Borders?

Sana Bég:

Well, to start off with, on Ukraine, yes, from what we see, and we only speak about what we witness, and from what we have witnessed, over 40% of the war wounded that we've seen over a specific period of time, the last two months or so, over 40% of the war wounded on the trains that we have been treating have been elderly people and have been children with blast wounds and traumatic amputations and shrapnel and gunshot wounds. It directly points to a lack of respect for civilian protection, and yes, as you said, it is a serious violation of international humanitarian law.

Sadly, this is the same gross ignorance that we see, or gross disregard that we see, for international humanitarian law across the board, where authoritarian regimes do violate international humanitarian law. From what we witness in many of those situations, civilians are directly targeted, and not just civilians. Another thing that goes against international humanitarian law is that medical facilities, medical professionals, all of these need to be protected under international humanitarian law. To this day, in many of the contexts that we work in, including of Afghanistan, Syria, Yemen, many of our medical facilities have been bombed, have been attacked, even if we have clearly identified ourselves as being those in the field of providing medical care.

The patterns or how you can compare these to each other, it's not that one is more grave than the other. The fact is that the civilians on the ground there, death and war and instability is something no one can get used to, regardless of how many years you may be living in that situation. Think about a five-year-old child in Ukraine or a five-year-old child in of Afghanistan or Yemen. They want the same things that any five-year-old would want, a stuffed toy, a playground to play in, that consistency of a routine. What war and conflict does is it takes that away from them. It takes away that stability of mental health and a foundation that a family can provide and security that a family can provide. Sadly, that is the connecting thread across all of these conflicts.

John Boccacino:

Sticking with Ukraine just for one more question here. Your group has released findings from March 31st to June 6th of their work over in Ukraine, what they observed. You mentioned, again, the fact that 11% of the war wounded patients were younger than 18 years old, you mentioned how many patients were transferred to the hospitals. How do you hope to take the findings that Doctors Without Borders released and maybe impact some change?

Sana Bég:

We did, just yesterday, come out with a big report that's directly about what we have witnessed ourselves. Simply put, what we have seen is that there is no mercy for civilians in the Ukrainian war. The data and the patient accounts taken from our medical evacuation trains reveal constant indiscriminate attacks against civilians in the war. MSF teams in Ukraine are witnessing and hearing of the consequences of these indiscriminate attacks by civilians caught up in the war. As I mentioned earlier, over 40% of those medically evacuated have been elderly and children, and that's part of this report as well. These patients that we spoke to in the short duration of time have recounted being shot at while fleeing bombing in residential areas.

Where do we want to take this report? We want to take this to the highest level of decision making powers, because what we want is for all parties of this conflict, to respect international humanitarian law and abide by their obligations to protect civilians. What we're dealing with here is unimaginable. The stories that we're hearing from children who should be saying nursery rhymes and

bedtime stories, instead, they are recounting stories that even an adult sitting in the US would not have experienced in their lifetime.

This is inexcusable and we need these stories. What want a report as powerful and as unapologetic as the one that we've released to do is to awaken decision makers and to awaken people like you and me today who may watch this in the news, to know that this is not okay for our governments to be involved in or for our governments to not be involved in and stand by on. There is only so much an organization like ours can do. Like I said, our core aim is to provide emergency medical care to those that need it the most and then to speak out about what we see. Beyond that, we rely on a whole cohort of others to make this war stop.

Yeah, that's really what we are we are looking for. As in all conflicts, with this report, we're calling on all armed groups to respect international humanitarian law, to abide by their obligations to protect civilians and civilian infrastructure. We're also calling for humanitarian access, to be able to provide assistance to people no matter where they are. In Ukraine, what we see at a minimum is this indiscriminate attack on civilians, so our call is particularly urgent, provide us with that humanitarian access so that we and others in this space can provide that aid. Then, of course, to unabashedly call for stopping the indiscriminate violence.

John Boccacino:

Again, with there being, unfortunately, 71 other countries and territories where Doctors Without Borders are operating, it's not just the conflict in Ukraine. Where else do you want to spotlight the great work that Doctors Without Borders is doing to make an impact and really help out those citizens who are afflicted and affected by conflict around the world?

Sana Bég:

Sure, thank you for asking that. I mean, you're right, Ukraine isn't the only place where conflict is unfolding. I also wanted to highlight that what we do is not just on conflict. We do focus on war and conflict, but we focus on natural disasters, on epidemics and pandemics, refugees and internally displaced people as well.

Some of the work that we are doing today, in addition to Ukraine, there has been a recent earthquake in Afghanistan, a country that has already been ravaged by years of instability. We're working there, we're putting together a team for response to the earthquake in Afghanistan. We're working in Libya with people who have to deal with constant instability and violence there as well.

Often, that makes its ways to European borders. We actually have a ship on the Mediterranean Sea that carries out search and rescue of so many people that come from North Africa and Middle East, who are fleeing violence and instability in their countries. They get on these dingy boats, which is a whole business in itself, but they get on these overcrowded dingy boats, hoping to make their ways to European shores because of a promise of a better future there. Many of them die on the water. We have a ship that's on the Mediterranean Sea, which picks up these people, rescues them, provides emergency medical care there as well. This entire operation has, of course, criminalized humanitarian aid as well. We're often seen as aiding and abetting the refugee crisis, but we continue to hold firm to our principle of providing care to those that need it most, no matter who they are or on what side of the debate that they are.

I think that the refugee crisis is definitely one that needs attention as well. The refugee crisis in itself collectively is the world's biggest problem today. You have refugees in Bangladesh as well, stateless populations called the Rohingya people who have fled persecution in Myanmar and are in

Bangladesh and in several other countries today. They have a dual vulnerability of being not just refugees, but of also being legally recognized by the UN as stateless people, which means they do not have a particular state or a passport that they can identify with. That's a particularly vulnerable population as well.

There is a lot going on around the world and I can see how it can be overwhelming for an individual or an average middle class American sitting at home. There is a thing called psychic numbing, you see too much of this and you're like, "Well, what can I do? These issues are too big." If I can just switch gears a bit, there is always something that someone can do. There's so many ways that you could support, for example, what we do as MSF. Fundraising is one, because over 90% of our donations come from private individuals. That allows us to stay independent and neutral and impartial, because, wherever possible, we do not take any funding or any donations from any government entity. That allows us to move freely, that allows us to tell it like it is when we need to. It is because of these private donations from people like you and me that we're able to carry out our work forward.

Fundraising for MSF can be done in several creative ways. People run marathons for us, hold community events. We've even had online video game streaming events where the money has been donated to MSF. You can volunteer for us, we have an office in New York City, or you can pitch into volunteer for us in the field. Like I said, we look for people, not just medical profiles, but non-medical profiles as well. Then the easiest way that you can help is by simply allying with our cause and spreading the word. We can only do so much, but if others can also spread the word about what we're seeing, about what we are pushing for, that helps immensely.

At a student level, across the United States and several other countries, we have student chapters of MSF, called Friends of MSF. There is not one in Syracuse University at the moment, but I would encourage any students who are interested to start a chapter. We have resources available on doctorswithoutborders.org on how you could start a student chapter of MSF as well.

John Boccacino:

We haven't even touched on the other major impact that I'm sure you've seen with Doctors Without Borders making a difference and it's COVID. What role did Doctors Without Borders play in COVID-19 in trying to keep those other vulnerable citizens as safe as they can be from this once-in-a-generation pandemic?

Sana Bég:

COVID is, in many countries, still a very real disruption daily life. What we have seen is there is a disparity when it comes to vaccine acceptance and just overall vaccinations when you compare the Global South to the Global North. In countries in the Global South, where we work, the percentage of people who've been vaccinated is still in single digits. What we did in response to the COVID pandemic across the world, it varied depending on ... Well, we first started our activities in response in 2020, I believe. As COVID spread, touching virtually every country in the world, we either adapted or scaled up our activities and started new activities in many countries over the first six months, when it first peaked as well.

We maintained our essential healthcare interventions that we had in our existing programs, but also integrated COVID-related activities into our projects. In the Americas, in Bolivia, we launched a COVID intervention in 2021. We developed health promotion activities, providing information to people on health practices and preventive measures, awareness sessions. In Brazil, we were working in the North Amazonas. We prepared local health staff there in cases of new waves of cases in the area. We

supported with patient flow, rapid testing, mental health and health promotion. We basically intervened in some capacity or the other across continents on COVID.

One key element that we focus on, if I can add over here, John, is on access to medicines. That includes access to vaccines, including the COVID-19 vaccine. When we received the Nobel Peace Prize in 1999, we used that money to set up the Access Campaign. The whole premise of the Access Campaign is that we felt that a lot of our work was impossible without making medicine and vaccines and such more affordable to those that need it. There is a whole separate leg to the work that we do as MSF, which focuses primarily on equitable access to vital essential medicines for those that need it most. That is something that we have been doing under the shadows of COVID-19 as well, and we continue to do so today.

John Boccacino:

I want to shift gears a little bit to your own personal story. You gave us some background on your career advancement, how you took your degrees from Syracuse and parlayed them into this just absolutely fascinating and impactful career with Doctors Without Borders. What made you want to come to Syracuse in the first place?

Sana Bég:

Well, on a very preliminary level, I'd like to say here that we are a family of Syracuse alums. I am one of four siblings, and all four of us have graduated from Syracuse University.

John Boccacino:

I love an Orange legacy family.

Sana Bég:

Yes. By tradition, it seemed to be the natural choice. Everyone in the family was raving about the experience, so I was next. But aside from that, Syracuse really seemed like a home away from home. I've grown up in several different countries and for some reason or the other, through relatives or otherwise, hearing about the student experience at Syracuse always seemed to resonate and always seemed to be something that we wanted to be a part of and so we chose to go there.

John Boccacino:

Once you step foot on campus, give our audience some examples as to how your time on campus at Syracuse University was transformative, how it shaped and molded you into the person you are today.

Sana Bég:

Well, it may not be apparent now, but when I first joined Syracuse University, it was my first educational experience in the United States. What I realized being there was a sudden awakening in what is my identity, who am I at the end of the day as an individual. I think that the strong culture of debate, of questioning, of engaging with students, a thriving student body community, a thriving faculty community as well, allowed me that space to discover what I wanted my identity moving forward to be. In many ways it did transform me. Syracuse is where I realized that what I wanted to do was passionate storytelling, to help be a voice for the voiceless. It was the cumulative experience, not just behind closed doors in classrooms, but through engaging with other students from diverse backgrounds, that led me to that point.

John Boccacino:

You mentioned some of your work with WAER and the student radio and student journalism outlets here on campus. How did those experiences really help you gain a sense and a skill for storytelling, for learning to get in, sink your teeth in and communicate a story to an audience?

Sana Bég:

I would say the experience with WAER was excellent, because we were instantly pushed to a point where we were treated immediately as professionals. We had professional deadlines, we were not seen any different than full-time staff. I appreciated that, and I respected Chris Bolt and Scott Willis and others there at the time that gave us that freedom and that responsibility. You realize that the stakes were high and that what we are putting out is something that is going to all audiences in Syracuse, not just to the student community. That helped me, I would say, level up quicker and really gain professional experience in a way that I would not have with simply an internship or otherwise.

But I did intern as well with a nearby non-profit called Pro Literacy Worldwide, I was volunteering with Habitat For Humanity, I was one of the founding members of an interfaith council that we started at SU as well. I think, collectively, it was that immersive experience of engaging with students, faculty, and those that were not faculty, other staff as well. The dean of Hendricks Chapel was so instrumental and so warm and loving and really made Hendricks Chapel feel like a home for those of us that didn't know quite where to place ourselves if we weren't into fraternities and sororities and Hendricks Chapel seems to be it. All of that just was like a big warm embracing hug that SU gave students like me to really emerge out to be a mature, responsible adult.

John Boccacino:

Is it possible to think back to one and pinpoint the biggest lesson or the biggest way that your Syracuse education benefits you and that you carry with you today and your role with Doctors Without Borders?

Sana Bég:

It is definitely hard to pinpoint one, but I think one that has stayed with me has been to be forever curious. I have never, to this day, been at a point where I feel like I have it all figured out. I feel there's so much for me to learn, not just in terms of the stories from across the world that I hear on a daily basis, but also in terms of the tools and techniques needed to tell those stories. I currently am director of communications for MSF, responsible for the entire South Asia region. I run a big team of about 10 people, anywhere between 10 to 15 at a given time. That curiosity drives me to this day, is to not be complacent, to always have your finger on the pulse of what is the latest ways that people consume content so that we can meet them somewhere in the middle and get our message across. That came from Syracuse.

John Boccacino:

She is Sana Bég, she is a director of communications for Doctors Without Borders, or one more time, Médecins Sans Frontières. She's doing great work with Doctors Without Borders. I have to say, I know you're incredibly busy, but we really appreciate you making the time to tell your Syracuse University success story here on the podcast today.

Sana Bég:

Thank you, John. Go Orange.

John Boccacino:

Thanks for checking out the latest installment of the 'Cuse Conversations Podcast. My name is John Boccacino, signing off for the 'Cuse Conversations Podcast.