

Terrorist Attack in ShahCheragh, Iran: Planning for the Future

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Abbreviation:

START: Simple Triage and Rapid Treatment

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Dear Editor,

Terrorism is the illegal and legal use of power and forces against people to browbeat or coerce governments to implement the terrorists' political or social targets.¹ Shadowed by the coronavirus disease 2019/COVID-19 outbreak, terrorist attacks have not been considered a priority in the field of disaster management. The increasing number of terrorist attacks across the world, especially in the Middle East in recent years, however, has changed to a matter of great importance in disaster management.^{2,3} Mortality in wars is traditionally classified as "killed in action and killed of wounds;" in terms of terrorist attacks, 50% of total deaths are "killed in action," of which 30% are related to early death and 20% are related to late death occurring days or weeks after the damage.⁴ Different assessments have shown that novel and specific approaches in managing terrorist attacks have been adopted in both developed and developing countries where preparedness for terrorist attacks is considered necessary to reduce the rate of related mortality.^{2,3,5}

On Wednesday October 26, 2022 at 17:45PM, there happened a terrorist attack at ShahCheragh shrine (a religious place in Shiraz, Fars, Iran). The attacker entered one of the main doors of the shrine and started to shoot people with a Kalashnikov gun, which resulted in 13 death cases and 20 injured cases. The terrorist was arrested by the police force and the terrorist group Islamic State of Iraq and Syria (ISIS) accepted the responsibility for this murder. This study aimed to investigate the weak and strong points of this terrorist attack in 2022.

The strength of incident management include: (1) closing the door and restricting the attacker's access to other parts of the shrine; (2) using the closed-circuit camera system in the shrine and its surrounding area; (3) the timely and immediate performance of medical emergency staff and police force and fast transfer of the injured people to the hospital; (4) using bus ambulances to rapidly transport the mass casualties; and (5) the rapid performance of the strike team of police in 1.5 minutes after the attack and arrest of the attacker.

The weaknesses of incident management include: (1) inappropriate design of security gates and the lack of multi-layered security check; (2) absence of any plan or program for an emergency evacuation of the shrine; (3) shortage of an integrated communication system between responding team involved, including police, medical emergency, and Red Crescent staff; (4) failure to use precise electronic gadgets and sensors to detect metals or dangerous materials; (5) lack of adopting personal safety equipment, especially bulletproof jackets for physical security staff; (6) lack of smart safe doors with high safety index like remote-controlled doors; (7) lack of provision of danger and warning alarm systems in different parts of the shrine; (8) inexperienced and untrained security and service staff in terms of terrorist attacks; (9) lack of planning a standard protocol to respond to terrorist attacks in the medical emergency system, fire department, and Red Crescent; and (10) lack of sufficient training and preparation related to responding to terrorist attacks.

Findings from this terrorist attack from a proactive approach and in three phases of pre-incident, during the incident, and post-incident with emphasis on weak and strong points were also assessed in this study as follows:

Pre-Incident: (1) preparation of a national response plan for terrorist attacks; (2) providing and revising the prehospital and hospital protocols for terrorist attacks; (3) adopting appropriate warning and communicating systems; (4) promoting the knowledge management and response to terrorist attack incidents using regular educational programs; (5) holding various programs in the form of seminars, table top exercises, or

full-scale exercises; and (6) designing programs for emergency evacuation in public and religious places.

During the Incident: (1) applying rapid triage in the location of attack based on triage systems of Simple Triage and Rapid Treatment (START) and JUMP START (pediatric START); (2) making quick attempts to stop and control bleeding and trauma care based on Prehospital Trauma Life Support (PHTLS) guidelines; (3) considering the safety of responding to relief forces in terrorist attacks; (4) taking out and transferring seriously injured people to the hospitals providing Advanced Trauma Life Support (ATLS) care; (5) activation of a response plan and implementing formulated protocols and standard operating procedures; and (6) setting up the command system of attack and unified command.

Post-Incident: (1) compilation of after-reaction reports and improvement plan to detect the deficits; (2) appropriate risk

communication and provision of information to control rumors; and (3) follow-up and assessment of the mental status of the personnel involved in the operation, as well as other survivors of terrorist attacks.

Conclusion

The occurrence of terrorist attacks in the world, especially in the Middle East, is on the rise, so the promotion of preparedness to respond to terrorist attacks will have a considerable impact on their effective management. In this regard, preparedness is expected to be achieved through training. The most important aspect of responding to terrorist attacks is compilation of protocols and synchronization of inter- and intra-organization sectors, which can be of great help in reducing the mortality rate in terrorist attacks.

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