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Office for the Coordination of Humanitarian Affairs

**UNDER-SECRETARY-GENERAL FOR HUMANITARIAN AFFAIRS AND
EMERGENCY RELIEF COORDINATOR, MARK LOWCOCK**

Briefing to the Security Council on the humanitarian situation in Syria

New York, 16 September 2020

As delivered

Thank you, Mr. President.

I will start by paying tribute to three humanitarian colleagues killed in northern Aleppo on Monday. A staff member of the Turkish Red Crescent was killed when his vehicle, which was reportedly clearly marked, was attacked north of Al Bab town. On Monday evening, a doctor working for the Syrian organization Hand in Hand for Aid and Development was killed, along with a staff member of a local relief organization and at least 11 other civilians, when a car bomb detonated in Afrin city.

Humanitarian workers across Syria are taking personal risks to deliver aid every day. They must be protected.

Mr. President, I will focus today on five areas:

First, the COVID-19 outbreak.

Second, the humanitarian impact of the economic downturn.

Third, protection of civilians.

Fourth, humanitarian access.

And fifth, the assistance humanitarian agencies are delivering across Syria.

Mr. President, reports from inside Syria continue to point to a much broader spread of **COVID-19** than the number of confirmed cases – currently at 3,618 – conveys. We will not be able to grasp the extent of the outbreak until laboratory testing is increased across the country.

We do know that community transmission is widespread, as almost 90 per cent of newly confirmed cases cannot be traced to a known source.

Infection rates among health workers have also been rising.

Syria lacked the health workers it needed even before the pandemic. Supply shortages and temporary shutdowns add even more pressure to the decimated health system.

Analysis by my office has shown that, in low-income countries, disruptions in healthcare caused by the pandemic could result in more – otherwise preventable – deaths than the pandemic itself.

On 27 August, the first confirmed cases of COVID-19 were reported among residents at the Al Hol and Areesha IDP camps in the north-east. Five healthcare workers at one of the field hospitals in Al Hol had tested positive in the previous weeks.

My Deputy briefed you last month on plans for a WHO-led inter-agency mission to Al Hol, following the deaths of eight children under five in less than a week in early August. This mission has since taken place. It aimed to strengthen capacities for managing critical and urgent medical cases. The UN and other humanitarian organisations continue to provide a range of critical assistance in Al Hol, including emergency, primary and reproductive health care.

The Humanitarian Coordinator, Imran Riza, made his third visit to Al Hol last week. He was again struck by the number of children living in incredibly difficult conditions there. Let us recall Mr. President that two thirds of the 65,000 residents in Al Hol are children, and that they come from more than 60 different countries.

Their situation must be addressed in a much more serious way than it has been hitherto, and in a manner that treats them first and foremost as children who are victims.

I again echo High Commissioner Bachelet and others in urging States to immediately assume responsibility for all of their nationals, in accordance with their obligations under international law. Many in Al Hol, including orphans and unaccompanied children, have experienced severe psychological distress and trauma, in addition to physical harm. It is cruel and inhumane simply to leave them detained in their current bad conditions.

My second Mr. President point is the humanitarian impact of the **economic downturn**.

The value of the Syrian pound has remained relatively stable in recent weeks, trading in informal markets at around 2,100 Syrian pounds to the dollar. But food prices remain at the highest level

ever recorded – monitoring by the World Food Programme shows the price of a standard reference food basket increased by over 250 per cent on last year.

Recent data also show the impact of COVID-19 on businesses, with 45 per cent temporarily shut down; 25 per cent operating at reduced levels; and 15 per cent permanently closed.

In the north-west, where an estimated 45 per cent of households draw their income from day labor, more than 70 per cent of households say their income does not cover their needs – that’s an increase of 10 per cent since January.

Mr. President, my next point is on the **protection** of civilians and the critical infrastructure they rely on.

In the north-west, while the situation remains relatively stable, we do continue to receive reports of ceasefire violations, with shelling close to frontlines in the Idleb area and in areas south of the M4 highway. In August, the Office of the High Commissioner for Human Rights recorded at least four civilian deaths and nine civilian injuries as a result of shelling in the so-called de-escalation area.

In southern Syria, reports of kidnappings and targeted attacks continue on an almost daily basis. At least 26 civilians, including four children, were killed, and five civilians, including a child were injured in such incidents in Dara between 1 August and 13 September.

Explosive hazards also continue to claim lives across the country. At least 27 civilians were killed, 13 of them children, by explosive remnants across the country between 1 August and 13 September.

We are monitoring also with concern the humanitarian impact of the increase in ISIL activities in recent months. ISIL attacks displaced 200 households in eastern Hama during July and August.

Mr. President, let me now turn to the supply of water essential for civilians’ survival and the protection of critical water infrastructure in north-eastern Syria.

We have seen disruptions at the Alouk water station for almost a year now. Every time operations stop, the water supply is cut off for at least 460,000 people in Al-Hasakeh city, Tal Tamer and surrounding areas, including at Al Hol and Aresha camps.

The health consequences are serious. During the most recent disruption, which lasted two weeks, over a thousand cases of diarrhea were reported in health centers in the area, as many families were forced to use water from alternative and unsafe sources.

Following the constructive and welcome engagement of a number of member states, water from Alouk reached several neighborhoods of Al Hasakeh City in the evening of 27 August. I hope this reflects a shared recognition that it is in everyone’s interests, ultimately, to keep the water flowing.

Mr. President, also on the issue of **humanitarian access**, the UN is adjusting its cross-border operations into north-west Syria to meet the needs of millions who rely on these operations for lifesaving assistance.

All UN humanitarian deliveries into the north-west, including to northern Aleppo, are now dispatched via the Bab al-Hawa border crossing in line with Security Council resolution 2533.

We have expanded the UN loading facility at Bab al-Hawa border crossing, and we believe that sufficient capacity can be established to manage increased traffic at the border crossing, while still maintaining COVID-19 safety measures.

The initial humanitarian convoys from Bab-al-Hawa to those areas previously covered from Bab-al-Salaam faced significant challenges on the Syrian side of the border. Some were substantially delayed, and one had to turn back completely. Since then, agreements have been reached with parties for simplified bureaucratic procedures to support unimpeded passage of humanitarian deliveries across lines of control.

Mr. President, the UN, working with others, also continues to engage with relevant parties to move forward with plans for cross-line assistance to the north-west. Unfortunately, agreement has not yet been reached on the operational details of the first mission. I call on all parties to redouble their efforts to find a solution to allow this mission to go forward.

Turning to the north-east, in addition to the existing constraints in delivering cross-line assistance, in recent weeks several cross-line humanitarian deliveries dispatched to Qamishli were delayed at Al Tabqa crossing point as a result of new bureaucratic procedures imposed by local authorities. These procedures affected more than 100 aid trucks in total. However, the trucks were able to cross at Al Tabqa this morning.

It is crucial that all parties facilitate the passage of humanitarian supplies into the north-east – in particular as we continue to work to narrow the gap in medical assistance coverage since the removal of Al Yaroubiya as an authorized crossing point for UN cross-border assistance.

Dozens of primary health centres and mobile medical units that are key to the frontline health response have yet to receive cross-line supplies. Local supply chains for pharmaceuticals and medical supplies have also been disrupted by the economic situation. Key medicines, like insulin for example, have been in short supply for months as a result. One NGO partner that supports 38 health facilities has reported a complete stock-out of insulin, as well as shortages of critical medicines for non-communicable diseases.

The distribution of medical supplies from the last WHO overland shipment to reach the north-east in July is still ongoing. Recipient facilities so far include 17 hospitals, of which 12 were previously supported by the UN through cross-border operations. We hope that the ongoing distribution will further expand the previous reach of such cross-line deliveries.

Turning now Mr. President to Rukban; it has been a year since the humanitarian operation accessed the camp. The situation for the 12,000 remaining civilians is deteriorating and unsustainable. I reiterate my call for humanitarian actors to be granted access to Rukban to deliver life-saving assistance to the civilians remaining there.

Mr. President, allow me to close with a few words on the **assistance** humanitarian agencies continue to provide across Syria.

The majority of assistance continues to be provided from within Syria, reaching over 4 million people every month. In July, humanitarian operations from within Syria reached 4.6 million people. That includes food assistance delivered to 3.8 million people, and more than 900,000 medical procedures and over a million treatment courses for people needing drugs.

All efforts are being made also to continue routine immunizations, which have been disrupted in Syria – as indeed in some other parts of the world – as a result of the pandemic. Over a five-day campaign in August, a UNICEF supported program administered polio vaccines to 23,000 children under five years old in Rural Damascus. But the need for much larger campaigns is increasingly acute, and in their absence the number of avoidable infant and child deaths will grow.

Thank you, Mr. President.