



**SYRIAN AMERICAN MEDICAL SOCIETY (SAMS)
EXECUTIVE DIRECTOR, DAVID LILLIE**

**BRIEFING TO THE SECURITY COUNCIL ON THE
HUMANITARIAN SITUATION IN SYRIA**

June 25, 2019

Good afternoon, Mr. President,

Thank you for the opportunity to brief the Council on the humanitarian situation in Northwest Syria. I would especially like to thank the Representative of Kuwait, as well as Germany and Belgium, for their willingness to accommodate my being here today.

We have just heard from Undersecretary-General Lowcock about the grave humanitarian situation in Northwest Syria. My organization, the Syrian American Medical Society, is currently conducting medical relief operations in Idlib, Hama, and Aleppo governorates. We operate 35 medical facilities, ranging from large hospitals to mobile clinics, and employ 2,000 staff in the field. These courageous doctors, nurses, midwives, and support staff work tirelessly to provide life-saving care for those in need. Since the start of the conflict, my organization has provided 14 million medical services. Over the years we have helped people from many different faiths and political affiliations. In our work, we seek to maintain humanitarian principles and to help all Syrians in need.

The current situation in Northwest Syria continues to deteriorate. The systematic attacks on health have been particularly severe. As the Undersecretary-General stated, there have been more than 30 attacks on health since the end of April 2019. Just days ago, three ambulance workers were killed after their ambulance was directly targeted in an air strike. These attacks have greatly reduced the capacity of the health system, at a time when it was already overwhelmed by a large civilian population with significant health needs. SAMS facilities alone have received more than 2,200 injured civilians. At the same time, the suspension of routine services, such as vaccinations, has greatly increased the risk of outbreaks of disease, including measles and meningitis. If there's one word that captures the current experience of civilians in Idlib, it's suffering. Tremendous human suffering.

We cannot discuss attacks on health without highlighting the use of the deconfliction mechanism. My organization was among those who deconflicted many of their facilities in April

2018, by working closely with OCHA and other NGOs to build trust and consensus that NGOs and their field staff would supply all needed information, while OCHA would ensure that the mechanism would be properly implemented. It is important to discuss the context here. For years, NGOs were encouraged to share their coordinates in order to reduce the risk of targeting by parties to the conflict. There was resistance from field staff, who argued that they themselves would be held responsible by the local population in the event that the facility was targeted. It was only after last year's brutal offensive in East Ghouta, which saw 13 health facilities systematically targeted in a 48 hour period- a time when we lost four colleagues- that the doctors finally agreed to share the coordinates. After this assault, they felt that their facilities would inevitably be targeted regardless of whether or not they shared their coordinates. Yet only days after those coordinates were shared, a hospital in Arbin was targeted by a bunker buster, which landed directly on a patient in the emergency room. In the current offensive in the Northwest, nine different deconflicted facilities have been targeted. In addition, one-third of the facilities targeted by airstrikes were constructed before the war, meaning their location was already public knowledge. This begs the question: where is the accountability? Have we lost our capacity for outrage?

Since April 2018, when many organizations deconflicted their facilities, not a single investigation has been completed. Rather than seeking answers and accountability, some Members of this Council have instead sought to delay, distract, and discredit the mechanism. Yet all this achieves is to further damage the credibility of this institution, and only exacerbates the suffering of the Syrian people. We have now reached a point where doctors and humanitarians on the ground no longer trust the mechanism. They have fulfilled their part of the agreement, at great risk to themselves- can this Council not meet them halfway? We should not leave them to feel alone or abandoned. There are steps which can be taken to improve both the process and the current mechanism. You should consider granting COI and IIM investigators access to the data, or authorizing a fact-finding mission to investigate these attacks.

I would also like to briefly discuss the humanitarian response on the ground. The response of donors to the recent offensive is significantly below what is needed. There have been at least 330,000 newly displaced individuals, with only 110,000 having been received at IDP sites, yet the HTF only allocated enough funds for 5,000 new units of shelter. Be assured that the civilian population feels completely abandoned by the international community. How can you blame them? Doctors can not help their patients when they don't have essential medicine such as anesthesia and surgical kits. People in remote areas cannot be reached when there aren't enough funds for mobile clinics. The international community must come together not only to seek peace in Syria and prevent the continued violation of international humanitarian law by all parties, but must also use their financial resources to help alleviate the suffering of the Syrian people. **All** Syrian people.

On the topic of HTS and extremism in NW Syria, it is absolutely a significant issue which this Council must consider. The kidnapping and torture, for ransom, of humanitarian workers by armed groups is an outrage and must be addressed, as is the targeting of civilian populations in

the city of Aleppo by armed groups. But let me be clear: the way to combat terrorism is not through the bombardment of civilian areas and the targeting of civilian infrastructure. The subsequent human suffering is what fuels terrorism. Have we not learned this over the years? The best way to combat terrorism is through supporting the civilian population, who long to live in peace and freedom, not under groups like HTS. And the best way to provide this support is through humanitarian and stabilization activities. I remember speaking with a doctor from Idlib a few months ago, right after several donors suspended their aid to the Northwest due to fears of diversion. He made an impassioned case for continuing support for humanitarian workers. He said "HTS tells people 'you are alone. The world has abandoned you. But we are here for you.' As humanitarian workers, we say this isn't true. We say that we are here for you. And our donors from around the world are here for you. We impose no ideology and no conditions. We are here to help and support you." This example perfectly illustrates the importance of supporting humanitarian workers. They are the bright lights in a very dark conflict. We must all work together to support and protect them, and ensure that they have adequate financial resources to carry out their work.

Thank you again for the opportunity to appear before you today. I hope that, together, we can work towards a peaceful future in Syria.