857 Medical Personnel Killed and 3,353 Others Arrested and Disappeared Since March 2011, Nearly 85% by the Syrian Regime

862 Medical Facilities Targeted, 88% of These by the Syrian Regime and Its Russian and Iranian Allies Since March 2011, Exacerbating Citizens’ Suffering in Light of the COVID-19 Pandemic

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The Syrian Network for Human Rights (SNHR), founded in June 2011, is a non-governmental, independent group that is considered a primary source for the OHCHR on all death toll-related analyses in Syria.
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I. Targeting Medical Personnel and Facilities Via Killing, Arrest/ Disappearance and Destruction Aims to Terrorize and Displace Citizens Demanding Political Change

In our work in Syria over a period of nearly nine years to date, we have noted the Syrian regime’s deliberate and systematic targeting of the medical sector since the first days of the uprising for freedom, with the clearest evidence of its deliberate nature being the status of the dozens of medical personnel arrested routinely since the first months of the popular uprising whose fate is still unknown to date. Other evidence of this policy includes the Syrian regime’s methodical harassment and persecution of medical sector workers and volunteers in every possible way in the areas under its control. Meanwhile, the Syrian regime has used state and private medical centers to serve its military or security forces, whose treatment is prioritized above that of all ordinary Syrian citizens; whilst there was a clear strategy of Alawite sectarian domination within the Syrian regime’s forces, this resulted in double discrimination, firstly in favor of regime forces and secondly on the basis of sect. The Syrian regime also threatened private medical centers in retaliation for providing any form of treatment to injured or wounded protestors, forcing protesters to resort to establishing basic field hospitals inside rooms in homes for medical treatment, with all these practices by the regime being flagrant violations of the most basic principles of international human rights law.

The medical facilities in areas outside the control of the Syrian regime were not spared from being targeted by Syrian regime helicopters and fixed-wing warplanes, as well as being repeatedly and deliberately bombed by Syrian Regime ground forces and later by the air forces of the regime’s Russian allies following Russia’s military intervention in favor of the Syrian regime in September 2015.

Although the other parties to the conflict have also perpetrated multiple violations against the medical sector, the Syrian regime and its Russian and Iranian allies are responsible for the largest proportion of all these violations, with the Syrian regime bearing primary responsibility as the totalitarian entity that controls the Syrian state. Even according to the regime’s own constitution updated in 2012, one of its responsibilities is that: “The state shall protect the health of citizens and provide them with the means of prevention, treatment and medication.” International humanitarian law is also clear in prohibiting all acts or threats of violence whose primary purpose is to spread terror among the civilian population (Additional Protocol I, Article 51 (2), and Additional Protocol II, Article 13 (2).

Despite this, however, we have documented that the ruling regime has not only failed to protect the Syrian citizens, but has been and remains the greatest threat to them in a massive violation of the Syrian constitution and of a large number of rules and principles of international law, targeting those calling for political change mainly on the basis of their political affiliation, and solely for their political opposition to the ruling regime since 1971.
We would like to emphasize an issue that rarely receives any attention compared to the larger and more serious violations, but which provides an additional indication of the Syrian regime’s dangerous indifference to Syrian citizens, specifically that despite all the serious violations perpetrated against medical personnel, the ruling regime has failed to conduct even a single investigation into the killing of any Syrian medical personnel or into the disappearance of thousands of these vital workers, although Syrian society and the state are in dire need of their skills, more especially in light of the outbreak of the COVID-19 pandemic. Showing its usual chilling indifference, the regime has failed to launch any investigation, even a formal, non-independent one which would pose no risk to it. Instead, it has ignored the issue, failing to show even a superficial pretense of caring about accountability, demonstrating that the subject is of no concern to the leadership.

By monitoring the strategy used by the Syrian regime and its Russian ally of bombing areas outside the Syrian regime’s control, we noted a clear targeting of vital facilities, with medical facilities coming at the forefront of the targets selected for attack, sending a clear deadly message that there is no choice for civilians but to surrender or leave (that is, given the lack of an option for any international intervention to protect civilians in Syria).

Targeting the medical sector and its workers is a fundamental component in terrorizing society and pushing citizens towards displacement. We have noted that medical facilities have always been at the forefront of the targets chosen for bombardment by the Syrian regime and its Russian ally, and the Syrian regime has not released any significant number of the medical personnel whom it has detained or forcibly disappeared since March 2011 despite the outbreak of the COVID-19 pandemic, underlining that it does not care about the lives, care and wellbeing of Syrian citizens.

Fadel Abdul Ghany
Chairman of the Syrian Network for Human Rights

II. Methodology of the Report

Over the past nine years, the Syrian Network for Human Rights (SNHR) has been particularly attentive in documenting violations against medical personnel (according to the SNHR’s methodology, this term applies to all workers in the medical field, including doctors, nurses, paramedics, pharmacists and laboratory technicians, as well as to administrative staff and those working in the operation and transport of medical supplies) and the targeting of medical facilities, detailing these violations in periodic monthly reports, special reports, and a report on the targeting of vital facilities, as well as in a human rights situation report, accumulating an extensive database on this subject.
In this report we summarize the record of the most notable violations against the medical sector at the hands of the parties to the conflict and the controlling forces since March 2011 until September 2020, which includes, according to the SNHR’s database:

First: The death toll of medical personnel at the hands of the main parties to the conflict.

Second: The record of detainees and forcibly disappeared persons among medical personnel at the hands of the parties to the conflict and the controlling forces.

Third: Bombings that targeted medical facilities with no military installations or equipment nearby, and bombings that targeted medical facilities whose work had been suspended due to previous attacks which didn’t completely destroy them (Medical facilities that have been subjected to more than one attack, with SNHR documenting each attack as a separate violation.)

Under international humanitarian law, civilian objects are classed as being protected from military attacks unless they are used for military purposes, with this protection suspended when they are used for military purposes and for the duration of such use; once the civilian object is no longer being used for any military purpose and returns to its former civilian status, military attacks are once again prohibited and the object’s protected status is resumed.

In general, this report draws upon the ongoing daily monitoring of news and developments by SNHR’s team, and on our extensive network of various credible sources that have been built up over the course of our work since 2011. When we receive information or learn some news about violations via the internet or media outlets, our team works to follow up these reports and attempts to verify information and to collect evidence and data. In some cases, researchers are able to visit the incident location promptly, although this is a rarity in light of the incredibly high security risks involved, and given the frequency of daily incidents and the scarcity of human and material resources to carry out this work. Therefore, the opportunities available to access evidence vary between one case and another, and consequently the level of certainty in classification of each incident also varies. SNHR’s customary policy in such cases is to rely on accounts from survivors who experienced the violation firsthand, as we try to reach them promptly; in a second degree, those who witnessed or photographed this violation, in addition to analyzing available materials from open sources such as the Internet and media outlets; third, by talking with medical personnel who treated the individuals injured in these incidents, examined the deceased victims’ bodies, and identified the cause of death.

SNHR also analyzed videos and photographs that were posted online, or submitted by local activists via e-mail, Skype, or social media platforms. Videos posted by activists show, amongst other things, sites of attacks and the extent of the destruction inflicted on medical vital facilities as a result of attacks by Syrian-Russian alliance forces.
Furthermore, we retain copies of all the videos and photographs included in this report in a confidential electronic database, as well as keeping hard disk backup copies. We do not claim, however, that we have documented all cases, given the severe prohibitions, restrictions and persecution by the Syrian Regime forces and some other armed groups. Readers are welcome to find out more about SNHR's methodology.

This report contains eight first-hand accounts that we’ve collected through speaking directly with eyewitnesses or with individuals concerned with the work of these facilities, none of which are cited from any open sources. We explained the purpose of these interviews beforehand to the eyewitnesses, who gave us permission to use the information they provided without us offering or providing them with any incentives. Also, SNHR endeavors always to spare the eyewitnesses the agony of remembering the violations as much as possible, as well as providing assurances that we will conceal the identity of any witness who prefers to use an alias.

This report only represents the bare minimum of the actual severity and magnitude of the violations that occurred which we have been able to document, and doesn’t include any analysis of the profound social, economic, and psychological ramifications of these events.

III. The Most Notable Violations against the Medical Sector, According to the SNHR’s database

Infographic shows the most notable violations against the medical sector in Syria:
Between March 2011 and September 2020
The Record of the Most Notable Violations against the Medical Sector at the Hands of the Parties to the

857 deaths of medical personnel, including 87 due to torture

At least 3,353 medical personnel are still detained or forcibly disappeared

At least 862 attacks on medical facilities
A: The death toll of medical personnel between March 2011 and September 2020:
The SNHR documented the deaths of 857 medical personnel, including 87 who died due to torture, at the hands of the parties to the conflict and the controlling forces in Syria between March 2011 and September 2020, distributed as follows:

- **Syrian Regime forces (army, security, local militias, and Shiite foreign militias):** 652 civilians, including 84 who died due to torture.
- **Russian forces:** 69.
- **ISIS (the self-proclaimed ‘Islamic State’):** 36.
- **Hay’at Tahrir al Sham (an alliance composed of Fateh al Sham Front and a number of factions of the Armed Opposition):** Two.
- **The Armed Opposition/ The Syrian National Army:** 29, including two who died due to torture.
- **Kurdish-led Syrian Democratic Forces (the Democratic Union Party):** Six, including one who died due to torture.
- **US-led coalition:** 13.
- **Other parties:** 50.

The SNHR’s records indicate that among the medical personnel victims who were killed due to torture at the hands of Syrian Regime forces, three were included in the Caesar photos, while nine were registered as dead by the Syrian regime at the Civil Registry.

The death toll of medical personnel was distributed by year, and according to the parties to the conflict and the controlling forces as follows:
Below, we outline the most notable cases among the medical personnel victims whose deaths at the hands of the parties to the conflict and the controlling forces SNHR was able to document:

Ali Ghassab al Mahameed, a cardiologist from Daraa city, was shot dead by Syrian Regime forces on Wednesday, March 23, 2011 near al Omari Mosque in the Daraa al Balad area of Daraa city, while he was in an ambulance providing medical treatment for a man injured in a previous attack by the same forces against worshipers who were in the mosque. The SNHR notes that Ali was the first doctor to be killed following the outbreak of the popular uprising in Syria in March 2011.

Bashar Zuhair Jumah al Yousef, a volunteer paramedic with the Syrian Red Crescent’s Deir Ez-Zour Branch, from al Hamidiya neighborhood in Deir Ez-Zour city, born on October 5, 1988, was a student at the College of Business Administration / Euphrates University in Deir Ez-Zour at the time of his death. He was shot dead by a Syrian regime sniper on Friday, June 22, 2012, while he was aiding injured people in al Rashdiya neighborhood in Deir Ez-Zour city.

The SNHR spoke with Mr. Muhammad al Dahmoush1, Bashar’s friend, who told us the details of the incident, according to paramedics who were at the scene with Bashar: “On that day, the neighborhoods of Deir Ez-Zour city in general were being shelled by Syrian Regime forces stationed in the security branches in the city. Bashar and several paramedics headed from the Red Crescent Center to al Rashdiya neighborhood, in response to distress calls they received about injuries there, taking a car belonging to the center. At about six o’clock in the evening, upon their arrival and disembarkation from the car to evacuate the injured, they were shot at by regime personnel stationed on the roof of the Military Police building; as a result, Bashar was hit in the head and died immediately, while the car driver was slightly injured.

Hasan Mustafa Izz al Din, a pharmacist, from al Zouf village in the western suburbs of Idlib governorate and a resident of Tishreen neighborhood in Damascus city, was shot dead by a Syrian regime sniper on Wednesday, January 23, 2013, while he was at work distributing medicines to pharmacies in the Jobar neighborhood, east of Damascus city.

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1 Via Telegram App on June 22, 2020
Dr. Walid Kamal Shbat al Nmairi and his colleagues Loay Muhammad al Jabawi, Hani al Heshma, and Shadi Zaher al Mez’el, all members of the medical staff of al Radwan Field Hospital in Jasem city in the western suburbs of Daraa governorate, were killed on Thursday, May 15, 2014, in missile bombardment of the al Radwan Field Hospital by fixed-wing Syrian regime warplanes.

Thirty-two-year-old Dr. Walid Kamal Shbat al Nmairi, a doctor specializing in orthopedic surgery, from Namar village in the northwestern suburbs of Daraa governorate, was married.

Loay Muhammad al Jabawi, a radiologist, from Jasem city, aged 25, was married.

Hani al Heshma, a laboratory technician, from al Aliya village in the western suburbs of Daraa governorate, aged 35, was married.

Shadi Zaher al Mez’el, a nurse, from Nabea al Sakhr village in the southeastern suburbs of Quneitra (al Awsat), was 28 years old.

Two nurses, Muhammad Hasan Ajaj and Izz al Din Fateh Enayeh, and the hospital administrative director, Abdul Rahman al Rayhani, from the medical staff of ‘Al Sill’ Tuberculosis Hospital in Kafr Batna town in the Eastern Ghouta, east of Damascus Suburbs governorate, all from Kafr Batna town, were killed on Wednesday, September 28, 2015, as a result of fixed-wing Syrian regime warplanes firing a missile at the hospital, which hit the hospital’s administrative office.

On Monday, February 15, 2016, nine medical personnel, including a doctor, from the field hospital in al Hamidiya village in the southern suburbs of Idlib governorate, which is supported by Doctors Without Borders, were killed, as a result of fixed-wing warplanes, which we believe were Russian, launching four missile strikes at the hospital. The medical personnel were:

Dr. Emad al Din Muhammad al Neser, a delegate of Doctors Without Borders, was from Khan Sheikhoun city in the southern suburbs of Idlib governorate.

Ammar Ahmad Hallaq, the head of the hospital’s nursing department, from Kafranbel city in the southern suburbs of Idlib governorate, was born in 1975.

Nurse Muhammad Mahmoud al Shawwaf, from Ma’aret al Numan city in the southern suburbs of Idlib governorate, was born in 1990.

Yahya Abdul Karim Qetaz, a laboratory technician, from Ma’aret al Numan city, was born in 1969.

Nurse Asmaa Dashash, head of the operations department at the field hospital, from Farwan village in the suburbs of Idlib governorate, was 30 years old.
Enas Hamra, a trainee nurse, from Ma’ryan village in the southern suburbs of Idlib governorate, was 18 years old.

Kawthar al Sawwas, aged 40, who worked in the physical therapy department, came from Ma’aret al Numan city.

Nurse Lamiaa Fialouni was born in 1985.

Muhammad Askour, a hospital employee, came from Sahl al Ghab area in Hama governorate.

The SNHR notes that the Russian air attack on the hospital that day resulted in the deaths of 25 civilians in all, including the nine medical personnel, in addition to the complete destruction of the hospital building.

Nabil al Da’as, a gynecologist, from Douma city in the Eastern Ghouta in Damascus Suburbs governorate, one of the teaching staff at the ‘Free’ Aleppo University’s Faculty of Medicine and a member of the Unified Medical Office in Douma, was married with three children. He died on Wednesday, May 11, 2016, of wounds sustained on Tuesday, May 3, 2016, due to random gunfire that hit his house in Douma city, as a result of clashes between Jaish al Islam and two other Armed Opposition factions, namely Failaq al Rahman and Jaish al Fustat.

Nurses Muhammad Ahmad al Yousef, Muhammad Abdul Mu’in Abdullah and Muhammad al Khalaf, and ambulance drivers Ahmad Abdullah Haj Ahmad and Bashar Wahid al Saeed, worked with the ambulance system of the Union of Medical Care and Relief Organizations (UOSSM) in Aleppo suburbs. They were killed on Wednesday, September 21, 2016, as a result of fixed-wing warplanes, which we believe were Russian, bombing Khan Touman village in the northwestern suburbs of Aleppo governorate with missiles, while they were aiding those injured in earlier bombing of the village.

Muhammad Khair al Khlaif, a pharmacist, from Tal Allo al Bailoniya village in the northern suburbs of Hasaka governorate, born in 1980 and married with three children, was arrested by Syrian Democratic Forces from his workplace in al Qameshli city in December 2012. He died due to torture in an SDF detention center and his body was handed over to his family on Sunday, February 19, 2017.

Ali Ahmad al Darwish, an orthopedist, from Kafr Zita city in the northern suburbs of Hama governorate, born on April 10, 1977, worked at al Latamena Surgical Hospital. Ali, who held a medical degree from the University of Aleppo, was married with three children. He was killed on Saturday, March 25, 2017, as a result of the Syrian regime’s helicopters dropping a barrel bomb loaded with toxic gas on al Latamena Surgical Hospital in al Latamena town in the northwestern suburbs of Hama governorate. It should be noted that, in its first report issued on August 8, 2020, the OPCW’s Investigation and Identification Team (IIT) decisively confirmed that the Syrian regime used chlorine gas in its attack on al Latamena Hospital on March 25.
The SNHR contacted media activist Muhammad Rajeh al Abdullah2, from Kafr Zita, a media worker for the Kafr Zita Specialist Hospital, who told us that at about 2 pm on March 25, 2017, he saw a number of injured persons being taken to Kafr Zita Specialist Hospital while he was passing by the hospital. He added: “When I entered the hospital, I saw dozens of injured people who I discovered had been brought from al Latamena Surgical Hospital, which was targeted with barrel bombs containing toxic chlorine. Among the injured were the hospital’s staff, including Dr. Ali al Darwish, who was admitted to the intensive care room at Kafr Zita Hospital, and given oxygen therapy, with first aid being provided to him; I took two photos of him and kept them to document his injury, after which his condition improved a little so that he had a chest x-ray which showed him inhaling a lot of gas.” Muhammad explained to us that the doctor’s condition had subsequently worsened, saying: “At about four pm, he was transported by ambulance to the hospitals in the north to complete his treatment at the request of the hospital’s director. At five o’clock, I received news of his death near Taftanaz town before his arrival at the hospital. The ambulance brought him back to Kafr Zita Hospital, and he was buried at around 8 pm.”

Qais Fareed al Sayed Ahmad, a gynecologist, from Raqqa city, born in 1951, worked at the National Hospital in Raqqa city. Qais, who was married with children, was killed on Sunday, August 6, 2017, as a result of US-led coalition warplanes firing missiles at his home in Jam’iyet al Atteba area near the Schoolbooks Administration office in Raqqa city.

Suzan Fatoom, a pediatric dentist, aged 29, held a BA from the Faculty of Dentistry at Tishreen University in Latakia city. She was killed on Tuesday, January 16, 2018, as a result of ISIS personnel using a missile launcher to shell al Sa’en town, which is administratively a part of al Salamiya city in the eastern suburbs of Hama governorate.

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2 Via WhatsApp on June 16, 2020
Mahmoud al Mustafa, Saer Muhammad Bahloul and Abdul Qader Nahtan, from the Violet Organization's Violet Ambulance team, were killed on Thursday, June 20, 2019, when Syrian regime fixed-wing warplanes fired a missile which landed near their ambulance in al Janoubi neighborhood in Ma’aret al Numan city in the southern suburbs of Idlib governorate, while they were aiding those injured in earlier bombardment of the city by the same forces’ warplanes.

Violet Organization published a tribute to the three paramedics on its official website.

Mahmoud al Mustafa, from Kafr Uwied village in Idlib governorate southern suburbs Saer Bahloul, from Ma’aret al Numan city, was married with a young daughter.

Abdul Qader Nahtan, from Ma’aret al Numan city

Zakwan Tamama, from Ariha city in the southern suburbs of Idlib governorate, was an anesthesia technician and the administrative director at al Shami Hospital known as Ariha Surgical Hospital, north of Ariha city. Zakwan, who was born on June 15, 1977, died on Saturday, February 1, 2020, of wounds sustained on Wednesday, January 29, 2020, in the blasts from three airstrikes launched by fixed-wing warplanes, which we believe were Russian, when they used missiles to target al Shami Hospital and the surrounding area in Ariha city.

The SNHR contacted Taysir Muhammad³, a media activist from Idlib city who visited the site of the incident. He told us about the three raids launched by Russian warplanes on al Shami Hospital and the surrounding area in al Midan neighborhood in Ariha city, saying, “The raids were successive on the city. I was able to locate the bombing site from the second raid on

³ Via WhatsApp on June 17, 2020
the same place, and shortly before my arrival, the warplane carried out its third raid. I managed, with a colleague of mine, to enter the hospital and we wandered around its floors. The medical staff and others were in the basement waiting for ambulance teams to arrive to evacuate the injured, which were delayed due to the continuation of warplanes flying over the area.” Taysir added that he entered one of the hospital rooms where he found three injured people, before finding a fourth injured person in an adjacent room, who was covered in dust and blood, with medical staff trying to revive him. He added, “It turned out later that this injured person was Dr. Zakwan Tammaa, the director of the hospital, who died of his injuries three days later in a Turkish hospital to which he was transferred.” Taysir told us that this attack also caused the deaths of another 10 civilians and injured 20 more, in addition to causing severe material damage to the hospital and extensive destruction to the buildings surrounding it.

B: The record of medical personnel who are still arbitrarily arrested/ detained or forcibly disappeared between March 2011 and September 2020:
The SNHR’s database indicates that at least 3,353 medical personnel are still arrested/ detained or forcibly disappeared, distributed according to the parties to the conflict and the controlling forces as follows:

- **Syrian Regime forces**: 3,327, including 282 women.
- **ISIS**: Five, including two women.
- **Hay’at Tahrir al Sham**: Four.
- **The Armed Opposition/The Syrian National Army**: Four.
- **Syrian Democratic Forces**: 13.

The record of detained or forcibly disappeared medical personnel was distributed by year, and according to the parties to the conflict and the controlling forces as follows:
Below, we outline the most notable cases of enforced disappearance of medical personnel which SNHR was able to document at the hands of the parties to the conflict and the controlling forces.

Loay Khattab, an otologist, from Taybet al Imam city in the northern suburbs of Hama governorate, was arrested by Syrian Regime forces on Sunday, March 4, 2012, at Tishreen Military Hospital in Damascus city. His fate remains unknown to date.

Abdul Aziz al Hayes, a dentist from Deir Ez-Zour city, born in 1962, was arrested by Syrian Regime forces on Tuesday, February 12, 2013, at his workplace in Jaramana city in Damascus Suburbs governorate. His fate remains unknown.

Ismail al Hamed, a general surgeon from Fateira village in the southern suburbs of Idlib governorate, born in 1964, was arrested by gunmen affiliated with ISIS on Saturday, November 2, 2013, in Raqqa city. His fate remains unknown since then.
Majd Kamalmaz, a Syrian-American psychotherapist originally from Damascus city, lived in Arlington County, Virginia, USA. Majd, who was 61 years old when he was arrested, had been helping Syrian refugees in Lebanon and providing them with humanitarian assistance and psychological treatment. On February 14, 2017, Majd traveled to Damascus to offer condolences on the death of his father-in-law. The day after his arrival, on Wednesday, February 15, 2017, Syrian Regime forces arrested him, while he was passing through one of the regime’s checkpoints in Damascus city, and took him to an undisclosed location.

Ammar Abdul Salam al Siba’i, a radiologist from Homs city, born in 1987, was arrested by Syrian Regime forces in 2017 at Dar al Shefaa Hospital in Homs city, and taken to an undisclosed location.

Shareef Naser al Masri, a nurse, from Ataman town north of Daraa governorate, was arrested by Syrian Regime forces on Thursday, September 6, 2018, in Ataman town, and taken to an undisclosed location.

Samer al Ali, a doctor, from Raqqa city, was arrested by the Kurdish-led Syrian Democratic Forces on Tuesday, March 5, 2019, in a raid on his home on al Mansour Street in Raqqa city. His fate remains unknown.

C: The record of incidents of attack on medical facilities between March 2011 and September 2020:
The SNHR documented at least 862 attacks on medical facilities at the hands of the parties to the conflict and the controlling forces in Syria between March 2011 and September 2020, distributed as follows:

- Syrian Regime forces: 543.
- Russian Forces: 208.
- ISIS: 19.
- Hay’at Tahrir al Sham: Two.
- Turkistan Islamic Party: One.
- The Armed Opposition/ The Syrian National Army: 15.
- Syrian Democratic Forces: Four.
- Other parties: 54.
The record of attacks on medical facilities was distributed by year, and according to the parties to the conflict and the controlling forces as follows:

As the SNHR’s team has observed over the past nine years and up to the present moment, the targeting of medical facilities in Syria is carried out calculatingly and deliberately, with regime intelligence services first conducting surveillance operations to locate field hospitals, private hospitals or even mobile medical units with the aim of bombing them. On many occasions, we have noted the bombardment of buildings or streets around hospitals in attempts to hit the hospitals directly. We also documented the repeated targeting of the same medical facilities on a number of occasions, with the parties either using the double-tap strike tactic, or one or both parties bombing the same facility with a time difference of days or months between the attacks, in addition to bombing operations that affected relocated medical facilities after they had been forced by bombing of their original location to transfer their operations, equipment and personnel to other facilities, which is evidence of the regime’s and its allies’ obsessive vengeful wish to annihilate all medical facilities.

Our database of attacks on medical sector facilities clearly shows that Syrian-Russian-Iranian alliance forces are the primary perpetrators of these violations, mainly because of their use of air power, which has led to the partial or total destruction of numerous medical centers and field hospitals, medical equipment, and stores of medicines and generators supplying these facilities, leading to the facilities’ permanent or temporary closure, as well as adversely affecting hundreds of already traumatized wounded, sick or injured people.

4 A tactic used by the Syrian-Russian alliance, which is based on the principle of re-bombing the same targeted site with a time difference sufficient for concerned local people and paramedics to gather at the location, in order to inflict the greatest possible human and material losses.
Below, we outline the most notable incidents of attack which SNHR was able to document at the hands of the parties to the conflict and the controlling forces:

On Monday, November 18, 2013, Syrian Regime forces fired a surface-to-surface missile at al Walid Hospital in al Wa’er neighborhood in Homs city, resulting in a massacre, with the victims including four nurses from the hospital’s staff, in addition to causing massive destruction to the hospital’s building and equipment. The neighborhood was under the control of factions of the Armed Opposition at the time of the incident. The SNHR issued a detailed report on the incident.

On Tuesday, December 16, 2014, fixed-wing Syrian regime warplanes fired missiles at the Modern Medicine Hospital in al Bol’oom neighborhood in al Mayadeen city in the eastern suburbs of Deir Ez-Zour governorate, resulting in a massacre, with the victims including three medical personnel (namely physical therapist Idris Aber al Fadil, paramedic Muhammad Hussein Saleh al Sardah, and administrator Muhammad Ali al Taha), in addition to causing massive destruction to the hospital building and equipment, putting it out of service. The city was under the control of ISIS at the time of the incident.

The SNHR contacted the media activist Abdou al Ma’mou5, who is from Buqrus Fouqani village, which is adjacent to al Mayadeen city. He told us that on the day of the incident he was in his family’s house in Buqrus Foqani village - about 10 km from the Modern Medicine Hospital – and had noted the Syrian regime’s warplanes flying over the area. He added, “At about 10:30 a.m., I heard the sound of an explosion coming from the side of al Bol’oom neighborhood. I went with a friend of mine directly to the site on a motorbike, and we arrived about half an hour later, while the dust was still rising from the hospital building; its front façade was completely destroyed, but we could not enter the building due to the barriers that ISIS had set up in the vicinity of the building. Some of the residents gathered there told us that they saw dozens of injured and martyrs who were evacuated to the field hospitals in al Mayadeen city, and I noticed traces of blood spread near the hospital gate.” Abdou confirmed for us that the hospital was closed and put out of service due to the massive material damage inflicted by the bombing.

On Thursday, October 29, 2015, fixed-wing warplanes, which we believe were Russian, fired missiles at the field hospital in Douma city in the Eastern Ghouta, east of Damascus Suburbs governorate, resulting in the deaths of 16 civilians, and injuring two medical personnel, in addition to causing severe material damage to the hospital building and equipment, putting it out of service. On Thursday, March 31, 2016, Syrian Regime forces used a missile launcher to bomb the Martyr Osama Ablaq field hospital in al Limadiya village in Jabal al Turkman in the suburbs of Latakia governorate, leaving holes in the root of the upper floor, and causing destruction to the pharmacy building and to the equipment and supplies of the physical treatment department on the hospital’s upper floor. The hospital administration evacuated the hospital and moved it to another area. The village was under the control of factions of the Armed Opposition at the time of the incident.

5 Via Facebook on July 1, 2020
At noon on Friday September 9, 2016, locally-manufactured rocket-shells fell near the Gynecology & Pediatrics Hospital in al Muhafatha neighborhood in Aleppo city; we believe the source of these was artillery forces located in Aleppo’s old neighborhoods, which were under the control of factions of the Armed Opposition. The bombardment caused severe material damage to the hospital first floor’s cladding and furniture. Al Muhafatha neighborhood was under the control of Syrian Regime forces at the time of the incident.

On Tuesday, October 18, 2016, fixed-wing warplanes, which we believe were Russian, fired a missile at al Eman Hospital, the only hospital in Sarja town in Jabal al Zaweya in the southern suburbs of Idlib governorate, injuring five of the hospital's medical staff. The bombing also caused severe destruction to the hospital building, as well as inflicting significant material damage to its equipment, putting it out of service. Sarja town was under the joint control of Armed Opposition factions and Fateh al Sham Front (now known as Hay’at Tahrir al Sham) at the time of the incident. The SNHR notes that the hospital was providing medical services to around 80,000 people living in Jabal al Zaweya area in Idlib suburbs. We also issued a statement on the incident.
On Monday, December 5, 2016, at around 17:00, Syrian regime helicopters dropped four barrel bombs near the only medical point in Madaya town, northwest Damascus Suburbs governorate, causing massive destruction to the medical point building, and inflicted severe material damage on its equipment and cladding, putting it out of service. The town was under the control of factions of the Armed Opposition at the time of the incident. The SNHR notes that this medical point was providing medical services for around 40,000 individuals in the town. We also issued a detailed report on the incident.

On Saturday, April 22, 2017, at around 14:30, fixed-wing warplanes, which we believe were Russian, fired two missiles at the Central Hospital of Hama governorate (known as al Maghara Hospital, built within a fortified underground cave) run by the Hama Health Directorate, located on the road to al Rakaya village, east of Abdin village in the southern suburbs of Idlib governorate, injuring a number of civilians, including a number of the hospital’s medical staff, in addition to causing the partial destruction of the hospital building, as well as inflicting severe material damage on its supplies and equipment, putting it out of service. The SNHR notes that at around 17:20 on the same day, Syrian Regime forces, stationed at Hama Military Airbase, used a missile launcher to fire a surface-to-surface missile loaded with cluster munitions, which fell in the vicinity of the hospital while Civil Defense teams were aiding the injured, killing one civilian, and injured others who were near the hospital. On Wednesday, April 26, 2017, despite the hospital’s being out of service, the Syrian regime helicopters dropped barrel bombs which landed in its vicinity, about 150 meters away from it. Abdin village was under the joint control of Armed Opposition factions and Hay’at Tahrir al Sham at the time of the incident.

On Friday, June 23, 2017, fixed-wing US-led coalition warplanes fired missiles at the National Hospital in Ma’dan city in the eastern suburbs of Raqqa governorate, causing severe destruction to the hospital building, putting it out of service. Ma’dan city was under the control of ISIS at the time of the incident.
On Friday, January 19, 2018, at around 01:00, Syrian Democratic Forces, stationed in Afrin city, used artillery to fire a mortar shell at the Mental Health Hospital in Izaz city in the northern suburbs of Aleppo governorate, resulting in casualties, in addition to causing the partial destruction of the hospital building, and inflicting moderate material damage on its cladding and furniture. The SNHR notes that the hospital houses about 200 people with mental and psychological illnesses. Izaz city was under the control of factions of the Armed Opposition at the time of the incident. Muhammad Hanzal⁶, a media activist from the northern suburbs of Aleppo, told us that he received a call from a friend telling him that the Mental Health Hospital in Izaz was bombed, so he went immediately to the site of the bombing. He said, “When I arrived, the situation was tragic, with clouds of smoke covering the place. The women’s dormitory in the hospital was destroyed along with part of the hospital’s roof and furniture,” Muhammad added, “I could count 12 injured, all of them women. I knew that one of them died the next day in a Turkish hospital. It was clear how the shells penetrated the roof of the women’s dormitory and fell inside it.”

On Thursday, November 29, 2018, fixed-wing US-led coalition warplanes fired missiles at al Yarmouk Women’s Hospital in the ‘24’ neighborhood in al Sh’afa city in the eastern suburbs of Deir Ez-Zour governorate, resulting in a massacre, in addition to causing almost complete destruction of the hospital building, putting it out of service. The city was under the control of ISIS at the time of the incident.

On Saturday, August 31, 2019, at around 00:31, a fixed-wing warplane, which we believe was Russian, took off from Hmeimim airbase in the suburbs of Latakia governorate flying towards the southeast; at around 00:56, it fired at least six missiles in the vicinity of al Eman Children’s and Women’s Hospital, a facility supported by Human Appeal for relief and development, located to the west of Urm al Kubra village in the western suburbs of Aleppo governorate. The attack injured six children, in addition to causing the partial destruction of the hospital building, as well as inflicting severe material damage to the hospital equipment and an ambulance belonging to it. Following the shelling of the hospital, patients were evacuated to other medical facilities and its work was suspended. SNHR notes that a ceasefire in the area declared by the Russian regime came into effect after the attack.

⁶ Via WhatsApp on January 24, 2018
at 06:00 on the same day. Urm al Kubra village was under the joint control of factions of the Armed Opposition and Hay’at Tahrir al Sham at the time of the incident.

The SNHR contacted Dr. Mustafa Barakat⁷, the director of al Eman Hospital in Urm al Kubra town, who told us that at around 01:00 on Saturday, August 31, 2019, the area around the hospital was exposed to six consecutive raids, with each coming around five minutes after the preceding one. He added: “When the warplane launched the raid, I was in my house, which is about one kilometer from the hospital, and I heard the sound of a light explosion, as a result of which one of the alternate nurses told me that the hospital is being bombed and that the observatories had circulated reports that the aggressor warplane is a Russian one, and that it was still in the air and would repeat the bombing. So, I directed the hospital’s personnel to go to lower levels and rushed to get to the place; however, the Civil Defense members and I were unable to get close, and the medical staff and patients were unable to leave the hospital because of the continued shelling.” Dr. Mustafa added that he learned from the medical staff upon his arrival that a Russian warplane had carried out two initial raids, with one being three meters from the west side of the hospital and the other raid six meters from the north side, followed by two more raids on its east side. He said: “The raids caused great damage to the hospital equipment and damaged several incubators in the children’s department. Also, part of the hospital’s sur-

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⁷ Via WhatsApp on September 9, 2019
rounding wall was demolished, and some of the windows, doors, fuel tanks, generators and vehicles belonging to the doctors were destroyed. The missiles also caused five craters in the vicinity of the hospital, about five to six meters deep, with a radius of about seven meters. The hospital was completely put out of service.” Dr. Mustafa stressed that the area where the hospital is located is free of any military headquarters or presence.

On Tuesday, November 5, 2019, at around 23:55, fixed-wing warplanes, which we believe were Russian, launched an air raid, firing two missiles that landed near al Ikhlas Children’s and Women’s Hospital, southeast of Shnan village in Jabal al Zaweya area in the southern suburbs of Idlib governorate; the warplanes subsequently launched a second air raid using two missiles shortly afterwards at around 00:20 on November 6, targeting the hospital directly, injuring two medical staff, in addition to severely destroying the hospital building, igniting fire in a part of the hospital, and inflicting significant material damage to its equipment, furniture and an ambulance belonging to the Syrian American Medical Association (SAMS), putting the hospital out of service. Shnan village was under the control of factions of the Armed Opposition at the time of the incident.

Visual guide showing the site of an air attack, which we believe was Russian, on al Ikhlas Hospital in Shnan village, Idlib:
Adham Hamrin, a nurse from Me’rata village, who was working in the ambulance department of al Ikhlas Hospital in Shnan village, was suffocated by the fire that broke out in the hospital as a result of the attack. Adham⁸ told us: “I woke up a few minutes before midnight on November 6 to the sound of a huge explosion that rocked the area. I later learned that it was the explosion of two missiles, one of which fell 50 meters to the east of the hospital, while the other fell a little further away than the first one. The bombing injured a number of the hospital’s reviewers. We gave them first aid, then we immediately started evacuating the nursing mothers, infants in the incubators, and staff from the hospital,” Adham said that he returned with one of his colleagues to the hospital to make sure that it was empty: “After we arrived, the aircraft returned to carry out a raid with two missiles that hit the hospital building directly, causing its destruction and igniting fire in it; we were able to get out only after the arrival of the Civil Defense members and the people who extinguished the fire got us out,” Adham added: “The hospital was severely destroyed in most of its departments, generators and equipment, and an ambulance was damaged. It is currently out of service.”

On Wednesday, November 20, 2019, between 19:45 and 20:00, Syrian Regime forces and Iranian militias, which we believe were stationed in Jabal Azan area in the southern suburbs of Aleppo, used a missile platform to fire a Tochka 9M79 missile loaded with 9n24 cluster submunitions that fell on Qahh IDP Camp, resulting in the deaths of 16 civilians, including 11 children and three women (adult female), and injuring at least 50 others. The area was under the joint control of factions of the Armed Opposition and Hay’at Tahrir al Sham at the time of the incident. Most of the submunitions spread in an area where a group of tents were located, with the explosions damaging at least 10 of the tents, as well as inflicting moderate material damage on the Maternity Hospital building and equipment, with the hospital being supported by the Syrian American Medical Society (SAMS), as well as injuring three of the medical staff. The notes published by the Syrian American Medical Society (SAMS) in a statement about the incident posted on its official website indicated that the hospital is listed among the health facilities included in the UN humanitarian deconfliction mechanism, and that the medical staff were the same personnel who had previously worked at the Taramla Women’s and Children’s Hospital, which was subjected to an air attack by the Syrian-Russian alliance forces in May 2019. We also issued a detailed report on the incident in December 2019.

⁸ Via WhatsApp on November 13, 2019
24 Medical Personnel Killed and 3,353 Others Arrested and Disappeared Since March 2011, Nearly 85% by the Syrian Regime

Visual guide showing the site of the Maternity Hospital from the camp, in addition to six locations in the camp that were subject to varying damages as a result of the attack:

The SNHR spoke with Mr. Muhammad Sukkar⁹, the hospital’s Administrative Director, who said: “I was in the hospital at the moment of the attack. I heard a very powerful explosion in an area close to the hospital, followed by successive explosions for about 30 seconds, and the sound was dreadful. The hospital suffered material damage due to the explosion of cluster submunitions, with the doors and windows destroyed by the pressure of the explosion that resulted in three injuries among the hospital staff, including a laboratory technician, a nurse and a pediatrician, but the situation in the camp was the most difficult. The bombardment caused severe injuries to civilians. I examined dozens of serious injuries, and recorded the death of at least one civilian.”

⁹ Via WhatsApp on November 24, 2019
On Monday, February 17, 2020, fixed-wing warplanes, which we believe were Russian, fired missiles at al Kenanah Hospital in the south of Darat Ezza city in western suburbs of Aleppo governorate, partially destroying the hospital building, and causing significant material damage to its furniture and equipment. The attack also targeted the neighboring al Fardous Hospital – which is supported by the Syria Relief and Development Organization – located adjacent to al Kenanah Hospital, injuring the hospital guard, in addition to partially destroying the hospital building, and causing significant material damage to its equipment and furniture. Darat Ezza city was under the joint control of factions of the Armed Opposition and Hay’at Tahrir al Sham at the time of the incident.

IV. The Russian Regime Quits the Humanitarian De-Confliction Mechanism after the UN Investigation That Found the Syrian Regime Responsible for Targeting Four Medical Facilities

On June 24, 2020, the United Nations contacted humanitarian organizations operating in northern Syria to notify them that the Russian regime had informed the UN the previous day that it would not participate in the de-confliction mechanism\(^{10}\), which the United Nations and its humanitarian partners use to exchange information with parties to the conflict. We believe that this move came after the United Nations Internal Board of Inquiry\(^{11}\) submitted its report issued on April 6, 2020, which confirmed that there had been four attacks on medical facilities in the Idlib region since the start of the military campaign on April 26, 2019, with the Syrian regime being involved in these. The Russian regime fears that the mandate of this Board will be renewed or a new board of inquiry will be established and will investigate incidents of targeting medical facilities in which Russian forces are involved, given that this report did not talk about the responsibility of Russian forces in the attacks on medical facilities.

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\(^{10}\) A system established by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) in September 2014 in an attempt to protect health facilities in Syria at the time from attacks by the US-led coalition forces, as the mechanism provides the US-led coalition forces, Russia, Turkey and the chairs of the International Syria Support Group with data on static humanitarian facilities’ locations, or on humanitarian mission movements to mitigate, insofar as possible, the risks of their being targeted / hit by an air strike.


\(^{11}\) Established by the UN Secretary-General, António Guterres, on August 1, 2019, to investigate attacks that occurred in northwest Syria.

We can confirm that we have documented the Russian forces’ targeting of several medical facilities, as attested by the SNHR database’s records, even though these facilities were participating in the humanitarian de-confliction mechanism, which failed to prevent the Russian forces from bombing them.

The SNHR documented that 11 medical centers participating in this mechanism were bombed 20 times by Syrian-Russian alliance forces, and we believe that this is the bare minimum number of attacks that took place since we were unable to ascertain which medical facilities participated with the mechanism. We talked about this issue in detail in a previous report.

In addition, the Syrian-Russian-Iranian alliance not only targeted medical facilities participating in the de-confliction mechanism, but wholly deliberately bombed dozens of private medical facilities included in the hospital directory listed with the Syrian regime’s Ministry of Health, such as al Zarzour Hospital in Aleppo, al Salam Hospital and the Adnan Kiwan Hospital in Idlib, noting that these facilities are licensed by the Ministry of Health, with the ministry being fully aware of the coordinates of their locations, demonstrating that the Syrian regime clearly knows exactly what facility it is bombing.
V. The Reflection of All These Violations against the Medical Sector and the Impact of This on Society in Light of the Spread of the COVID-19 Pandemic with the Syrian Regime’s Neglect to Take the Simplest Precautionary Measures

The terrible disintegration afflicting the medical sector in Syria as a result of the widespread violations that occurred against it has been even more starkly evident since the earliest days of the COVID-19 pandemic, and we have talked about this issue in an extensive report and through several news and monthly reports. In this context, we’d like to emphasize that there is a real and grave danger to the Syrian people, in particular those in areas under the Syrian regime’s control, not only because of the devastation inflicted on the medical sector, but also because of the regime’s catastrophic indifference and failure to take serious steps to limit the spread of the virus; we have noted overcrowding in schools and governmental institutions, with no penalties being imposed for not wearing masks or observing precautionary physical distancing measures. This is because the Syrian regime harnesses most of the state’s capabilities to pay the salaries of the security services, targeting areas outside its control, launching more arrest campaigns and continuing to operate its industrial-scale torture apparatus, with all these violations requiring enormous numbers of personnel, consistent management, and vast quantities of logistical equipment over all these years.

VI. The Responsibility to Protect Civilians in Syria

For nine years, the Syrian regime has committed heinous crimes and violations against Syrian civilians on a daily basis. It has also consistently failed to comply with any of the demands of the International Commission of Inquiry on the Syrian Arab Republic, or those of the High Commission for Human Rights, or even Security Council resolutions. The Security Council, which is supposed to take collective measures and action under Article 41 and 42 of the Charter of the United Nations, has also failed because of the immunity granted by Russia to the Syrian regime, with Russia routinely using its veto in the case of the Syrian regime, which has not only failed to abide by its responsibility to protect civilians, but committed the most egregious violations against them, reaching the level of crimes against humanity.

In a report issued in December 2001, the International Commission on Intervention and State Sovereignty stressed that: “The Security Council should take into account in all its deliberations that, if it fails to discharge its responsibility to protect in conscience-shocking situations crying out for action, concerned states may not rule out other means to meet the gravity and urgency of that situation.” Such conscience-shocking situations are exactly what have happened continuously in Syria, to such a degree that they have become routine, not only in the form of one massacre or one violation but in industrial-scale killings and torture, sexual violence, enforced disappearances, the use of chemical weapons and barrel bombs, and sieges against civilians. The list of crimes against humanity perpetrated by the Syrian regime and its allies is near-endless. The Security Council has
signally failed to assume its responsibilities in the Syrian case, despite the Syrian Network for Human Rights, international organizations and UN commissions of inquiry crying out for action by the Security Council many thousands of times. In this context, the International Commission on Intervention and State Sovereignty also affirmed in the aforementioned report: “it would be impossible to find consensus, in the Commission’s view, around any set of proposals for military intervention which acknowledged the validity of any intervention not authorized by the Security Council or General Assembly. But that may still leave circumstances when the Security Council fails to discharge what this Commission would regard as its responsibility to protect, in a conscience-shocking situation crying out for action. It is a real question in these circumstances where lies the most harm: in the damage to international order if the Security Council is bypassed or in the damage to that order if human beings are slaughtered while the Security Council stands by.”

At the 2005 Summit, states unanimously agreed that each country had a responsibility to protect its population from crimes against humanity and war crimes. This responsibility entails the prevention of such crimes, the prevention of incitement to commit them by all possible means, and when the state clearly fails to protect its population from egregious crimes, or itself is committing such crimes as in the case of the Syrian regime, it is the responsibility of the international community to intervene to take protective measures in a collective, decisive and timely manner.

**VII. Conclusions and Recommendations**

- Article 3, common to the four Geneva Conventions of 1949, and binding on all parties to the non-international armed conflict in Syria, requires that the wounded and sick be collected and cared for. Customary international humanitarian law also affords special protection to hospitals, medical units and healthcare personnel. Syria’s constitution, adopted in 2012, stipulates that “The state shall protect the health of citizens and provide them with the means of prevention, treatment and medication.” International Human Rights Law prohibits the arbitrary deprivation of life. The right to health, enshrined in the International Covenant on Economic, Social and Cultural Rights, to which Syria is party, contains a non-derogable core obligation to ensure the right of access to health facilities, goods and services on a non-discriminatory basis, especially for vulnerable or marginalized groups, as set out in General Comment No. 14. Intentionally directing attacks against hospitals and places containing the sick and the wounded and against medical units using the Red Cross or Red Crescent emblem is a war crime in non-international armed conflict.
- The Syrian regime and the other parties to the conflict have flagrantly violated the right to life, non-enforced disappearance, non-torture, the right to health, and a large number of rules of customary humanitarian law and Common Article 3 of the four Geneva Conventions of 1949.
- A number of violations committed by the Syrian regime against the medical sector, such as killings, enforced disappearances and torture, constitute a pattern of widespread attack and
amount to crimes against humanity, in accordance with Article VII of the Rome Statute, and the deliberate or indiscriminate bombing of medical facilities without respect for the rules of customary humanitarian law constitutes war crimes.

- A number of violations committed by other parties to the conflict, such as killing, torture and shelling, also amount to war crimes.
- The widespread violations affecting the medical sector in Syria have affected the response to the COVID-19 pandemic, with the Syrian regime and its allies being responsible for nearly 85% of all violations.
- The incidents that we recorded in the SNHR database, a part of which was included in this report, constitute a violation of Security Council Resolution No. 2286, which stipulates the cessation of violations and abuses committed in armed conflicts against medical personnel and humanitarian aid workers who perform specifically medical duties, as well as against their means of transport and equipment, and against hospitals and other medical facilities.
- We stress that most of the bombing incidents that targeted medical facilities targeted unarmed civilian individuals, and therefore the aggressor forces violated the provisions of international human rights law that protect the right to life. In addition to being committed in the context of a non-international armed conflict, this amounts to and possesses all the constituent elements of a war crime.
- The attacks included in the report are considered a violation of customary international humanitarian law, as the shells were fired at facilities and vehicles used to provide medical services rather than being directed at achieving any specific military objective.

**Recommendations:**

**UN Security Council:**

- The Security Council should take further action after resolutions 2139 and 2254, having failed to impose any obligation to stop indiscriminate shelling which must be adhered to by all parties to the conflict, as well as to abide by the rules of international humanitarian law.
- Put pressure on the Syrian regime to immediately release 3,327 medical personnel, as Syrian society is in dire need of them.
- The Syrian issue must be referred to the International Criminal Court and all those involved in perpetrating crimes should be held accountable, including the Russian regime, after having been proven to be involved in committing war crimes.
- Impose sanctions on the Syrian, Iranian and Russian regimes that are directly involved in committing war crimes and crimes against humanity against the Syrian people.
- Issue a resolution allowing military intervention in order to protect civilians in Syria, especially medical facilities, from barbaric bombing, as society is in dire need of them in light of the outbreak of the COVID-19 pandemic.
International Community:
- In light of the split within the Security Council and its utter inability to take any effective action, action should be taken at the national and regional levels to form alliances to support the Syrian people by protecting them from daily killing, and to lift sieges, as well as increasing support for relief efforts. Additionally, the principle of universal jurisdiction should be enacted in local courts regarding these crimes in order to ensure that fair trials are held for all those who were involved.
- SNHR has repeatedly called for the implementation of the ‘Responsibility to Protect’ doctrine in dozens of studies and reports and as a member of the International Coalition for the Responsibility to Protect (ICRtoP) after all political channels through the Arab League’s plan and then Mr. Kofi Annan’s plan have proved fruitless, along with the Cessation of Hostilities statements and Astana agreements that followed. Therefore, steps should be taken under Chapter VII of the Charter of the United Nations, while the norm of the ‘Responsibility to Protect’, which was established by the United Nations General Assembly, should be implemented. The Security Council is still hindering the protection of civilians in Syria.
- Renew pressure on the Security Council to refer the case in Syria to the International Criminal Court.
- Work on fulfilling justice and achieving accountability in Syria through the United Nations General Assembly and the Human Rights Council and to activate the principle of universal jurisdiction.
- In the event that all this fails, as it has failed for nine years, work to find a method, whatever it may be, to stop crimes against humanity in Syria.

OHCHR
- The OHCHR should submit a report to the Human Rights Council and other organs of the United Nations concerning the violations against the medical sector and the suffering of the Syrian society as a result.

Independent International Commission of Inquiry (COI)
- Launch investigations into the incidents included in this report and previous reports. SNHR is willing to cooperate and provide further evidence and data.

International, Impartial and Independent Mechanism (IIIM):
- The IIIM should study the incidents detailed in this report and those detailed in previous reports, with the Syrian Network for Human Rights being ready to cooperate and provide further evidence and details.
European Union and the United States of America:
- Support the International Impartial Mechanism established by General Assembly resolution 71/248 of December 21, 2016, open the courts of local states which have the principle of universal jurisdiction, and prosecute war crimes committed in Syria.

The Syrian Regime:
- Stop treating the Syrian state as the private property of the ruling family.
- Stop terrorizing Syrian society by killing personnel providing the public with medical, ambulance, and rescue services.
- Cease shelling of hospitals, protected objects and civilian areas, and respect customary humanitarian law.
- Bear all legal and material consequences, and compensate the victims and their families from the resources of the Syrian state.
- Launch independent investigations into the crimes of killing, disappearing, or torturing medical personnel, as they are Syrian citizens, and the Syrian people have the right to know who killed them through an independent investigation carried out by the state by an independent judicial body.

The Russian Regime:
- Launch investigations into the incidents detailed in this report, inform the Syrian community of their results, and hold those involved accountable.
- Compensate, rebuild and reequip all damaged centers and facilities, and compensate the wounded and the bereaved families of those killed by the current Russian regime.
- Ensure the complete cessation of bombardment of hospitals, protected objects and respect customary humanitarian law.

Acknowledgment and Condolences
We wish to extend our sincere thanks to all the medical personnel and local activists whose contributions have enriched this report, and our condolences to the victims and their families.