Sanctions on Syria

Hamid Yahiya Hussain and Kasturi Sen[1] (September, 2020) present a biased perspective on the impact of EU and US sanction legislation in Syria. Western sanctions were introduced to promote accountability for war crimes and crimes against humanity during the Syrian conflict, the vast majority of which have been perpetrated by the Syrian Government and its allies against civilian populations.[2] The implication that sanctions (including exemptions for humanitarian aid) have prevented the Syrian Government from responding to the COVID-19 pandemic is erroneous and does not reflect the widespread politicisation of humanitarian aid, nor the economic and humanitarian context.

Evidence suggests that the Syrian Government has developed a political and legal framework that has allowed it to co-opt billions of dollars of aid and reconstruction funding in Syria.[3,4] In practice, the Syrian Government restricts the access of humanitarian organisations to communities in need, withholds medical supplies, provides selective approval for humanitarian projects, and mandates partnership with its own selection of security-vetted local partners; as such, it uses humanitarian aid as a weapon of war.[4] Financing the Syrian Government's activities supports a system that diverts aid from civilians who are perceived to be disloyal to it, including in retaken areas.

Syria's health system is indeed fragmented and politicised. However, it is misleading to describe these fractures as solely due to sanctions. Health care in Syria has been weaponised since 2011 with deliberate attacks on health care; more than 90% of such attacks have been by the Syrian Government.[5] These actions have directly affected COVID-19 preparedness across the country, particularly in areas outside of the Syrian Government's control. Though training and resources have been provided to the Ministry of Health, these have predominantly supported areas under government control. Vulnerable areas outside of Syrian Government control include the northeast and northwest of Syria, which first reported cases on April 22 and July 9, 2020, respectively.

Key issues related to the COVID-19 response in Syria are as follows: first, the Syrian Government's response to this pandemic (and previous epidemics—eg, polio) have been characterised by numerous shortfallings and have not provided for the whole population. Second, there have been reports of threats to, and forced disappearances of, health-care workers who had reported suspected COVID-19 cases, subsequently impeding COVID-19 response and violating international humanitarian law. Lastly, closure of the border crossing for humanitarian access to northeast Syria in January, 2020, and further border closures affecting the northwest agreed in July, 2020, has a greater potential to harm civilians than the sanctions placed on the Syrian Government.

We declare no competing interests.

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