



Briefing from The White Helmets to The Standing Committee on Foreign Affairs and International Development about

**“Vulnerabilities Created and Exacerbated by the
COVID-19 Pandemic”**



Table of Contents

Introduction	3
About The White Helmets	3
The current situation with COVID-19	4
Recommendations	8
References	10



Introduction:

About The White Helmets:

The White Helmets is a Syria based organization of community-based first responders and volunteers, that helps enhance community resilience and recovery through providing humanitarian services such as search and rescue, critical evacuation, and medical services. These humanitarian volunteers have saved almost 120,000 lives since 2014. In response to the COVID-19 pandemic, the White Helmets in collaboration with other civil society organizations, are providing emergency response, raising awareness, medical screening services, and healthcare supplies. The White Helmets has a unique perspective of survivors with relevant expertise based on knowledge of Creating a strong sense of Survivorship locally, state-wide, and globally. The White Helmets team is a -safety valve- as first responders and essential player to stabilizing Syria by helping local people to regain and rebuild their lives during ongoing and post-conflict.



The current situation with COVID-19:

Northwest Syria is an opposition-held region where several local groups and de facto authorities dispute power and control. At least four main rival military factions with many other smaller armed groups control this region. In such a complex situation, it is almost impossible to establish a well-coordinated central response. Since 3 March 2020, the World Health Organization¹ (WHO)-led health cluster has established a COVID-19 task force that consists of local and international NGOs. The task force has developed basic emergency planning for potential scenarios alongside technical guidelines. However, WHO has limited capacity to engage in such a large-scale complex conflict environment as it does not have any physical presence inside Syria and has been facing enormous geopolitical challenges for its cross-border response from Turkey. The Idleb Health Directorate (IHD) throughout its 7 years of existence has maintained its position as the technical health authority in the region. To navigate through this environment, IHD has created a grassroots governance system that enabled its legitimacy to be derived from all

¹ (Disease 2019, 2020)



medical doctors in the area. Legitimacy and trust are important factors in getting the population to follow IHD proposed guidelines about COVID-19 response².

The vulnerable communities in northwest Syria continue to be affected by hostilities despite the 5 March ceasefire agreement, with continued shelling largely concentrated in areas south of Idlib. Additionally, the safety of civilians undermined by the enduring prevalence of explosive hazards. Especially, the improvised explosive device (IED)

attacks continue to threaten the lives of civilians. These incidents are grave reminders of the persistent danger to life in these areas. On the other hand, the number of COVID-19 cases in north-west Syria increased substantially. To date, 17,322 cases of COVID-19 have been identified only in northwest Syria, while the number of relevant fatalities totaled 42 so far.

Precautions against a potential spread of the virus have been scaled up in response to the identified cases, including restrictions on movements, gatherings, commercial activities, and in-person education services. These measures are crucial to containing transmissions of COVID-19, though they may intensify humanitarian need by complicating humanitarian response and through their impacts on local markets, income-generating opportunities, and vital services.

As the COVID-19 pandemic advances, millions of Syrians, including healthcare professionals and humanitarian workers continue to live at risk without the necessary personal protective equipment (PPE) needed to adequately respond and treat those infected with the disease. More than nine years into the Syrian conflict, millions of vulnerable citizens continue to endure immense suffering, while the COVID-19 pandemic exacerbates existing and ongoing humanitarian needs.

² (Abdulkarim Ekzayez, 2020)



To help over 4 million people in North West Syria, the Syrian White Helmets, offer the necessary response to the lack of PPE by locally manufacturing personal protective equipment for healthcare workers and citizens. The White Helmets has been awarded \$1.6 million from a Humanitarian Grand Challenge in Canada and will be the first organization to manufacture PPE locally for COVID-19 response in Syria.

The country's protracted conflict and humanitarian crisis have destroyed homes, hospitals, and healthcare settings, leaving over 4 million people in North West Syria living in precarious conditions that do not allow for proper distancing, isolation, or hygiene measures - ideal conditions for the virus to spread.



Table 1 Key COVID-19 preventative measures in northwest Syria³

Measure	What have been done so far
Control of borders and crossing points	All official crossing points with the Government of Syria and the AANES areas have been closed from mid-March 2020. The Bab Al Hawa border with Turkey has been restricted from the Turkish side with very minimum cross-border activities for trade and humanitarian supplies.
Social distancing	All health actors have been asking people to stay at home, where possible, and reduce social gatherings and events. All schools were closed. However, this measure has been challenging considering the high poverty rate, high population and household density, some social and cultural practices that involve high number of people such as funerals and congregational prayer. Engaging with various local actors including the local councils, community and religious leaders was key to overcome some of these challenges.
Public awareness campaigns	Health and local NGOs have engaged in various public awareness activities including distribution of more than a million educational materials—such as leaflets and brochures, household visits in camps and radio messaging.
Disinfection campaigns	These campaigns targeted mainly the residential collective centres, camps, public buildings such as schools and health facilities. The White Helmets played a key role in conducting these campaigns with disinfecting >5000 sites on regular basis.
Quarantine and isolation	IHD has started a project to establish 17 community-based isolation centres with a capacity of 1400 beds that are expected to be ready in the first week of May.

³ Ibid



Recommendations:

I. Support Syrian-led organization

- The capacity of the current health system in northwest Syria is alarming with only 1.4 medical doctor per 10 000 people, 0.625 hospital beds per 1000 people. Therefore, Bottom-up local governance and non-state entities, such as Idleb Health Directorate, the White Helmets, and other local health organizations, play a key leadership role in the response. Provide adequate support for them will save thousands of lives.

II. Protection of health workers

- Protection of health workers should be a core principle for the COVID-19 response in northwest Syria from the two major risks, first the attack of military offensive campaigns, and second, from the virus and the lack of equipment. Any loss for any medical human resources is irreversible.
- Protecting health workers by meet their needs which include: personal protective equipment (PPE), funding for new health facilities and infrastructure, oxygen supplies, ventilators, and running and core costs for local and Syrian- led organizations.

III. The conflict and the ceases-fire

- North West is now on the vertical part of the slope upwards in terms of daily cases. Without an immediate cease-fire, it will be impossible to care for patients and internally displaced people. we demand that regional and international



powers heed the call of the UN Secretary-General to cease fire and give health systems a chance to fight the pandemic.

IV. Special Economic Measures (Syria)

- Even when funding was available, the sanctions regulations and special measures applied by GAC on Syria affected the capacity to respond in a timely manner to the COVID-19 pandemic. We have faced challenges in fund transfer to Syria which caused delays in our COVID-19 emergency response. However, we kindly urge the Canadian government to enable an expedited process to grant special permits for the Canadian humanitarian organizations in working in the health sector at least during the time of the pandemic. For example, our previous exemption permit took around 6 months to be issued by GAC, taking into account the high cost of legal consultation to apply.

V. Vaccination

- Urging the international community to provision COVID-19 vaccines and treatments free of charge for civilians and displaced people in Syria, especially in the areas out of government control. Access needs to be prioritized first for health workers and front-line personnel, then, the most vulnerable people (IDPs and elders).
- Support PCR and Rapid testing capacity for the civilians of NW and the health workers.



References

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