COVID-19 IN GOVERNMENT OF SYRIA - CONTROLLED AREAS

SITUATION REPORT

28 APRIL 2020



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KEY POINTS

- The Government of Syria has implemented COVID-19 precautionary measures while failing to properly address secondary side effects.
- Government of Syria security agencies are allegedly taking advantage of the curfew restrictions to conduct raids and arrests on targeted individuals.
- COVID-19 has led to a decrease in Syrian citizens' purchasing power and a deterioration in the standard of living.
- The Government of Syria has increased restrictions on medical staff in order to prevent any reports contradicting the Ministry of Health's COVID-19 statements from surfacing.
- The Government of Syria appears to be using WHO-recommended mitigation measures against COVID-19 politically, calling for US and EU sanctions to be lifted in order to aid in crisis management.

INTRODUCTION

The first confirmed case of COVID-19 in areas under Government of Syria control was announced on 22 March. Forty-three cases have since been confirmed, with three deaths and fourteen recoveries¹, and while infection rates are slowly increasing these numbers are noticeably small in comparison to World Health Organization (WHO) projections. Reasons for this point to the initial reaction by the Ministry of Health of denial of reports indicating a more advanced spreading of the virus, with the alleged arrest and prosecution of medical professionals attempting to highlight this. The WHO has also issued a statement that a lack of viral detection capability means COVID-19 cases are not being officially recorded.

Since the classification of COVID-19 as a global pandemic, the Government of Syria has been implementing <u>precautionary measures</u>, including the prohibition of inter-governorate travel, restriction of international travel, suspension of conscription, the closure of shops and businesses except for those producing or selling food items, cleaning supplies, and medical supplies, and most recently the implementation of a partial curfew.

This report demonstrates the security, economic, healthcare, and political level challenges imposed on the average Syrian citizen in Government of Syria controlled areas following the implementation of these precautionary measures. Research was carried out using primary and secondary sources, including information from UN agencies, international and local organizations, government sources and field researchers.



SECURITY CHALLENGES

Since the implementation of a curfew on 25 March², local sources indicate a significant increase in raid and arrest campaigns carried out by Government of Syria (GoS) forces in reconciled areas. The arrest campaigns were carried out by different security branches, including air and military intelligence. They appeared to target individuals with a history of infractions with the GoS, including reconciled opposition figures, media activists, former opposition-affiliated medical staff, and men between the age of 18 and 42 wanted for military conscription (despite the current official cessation of military conscription³). Local media sources documented the arrest of 62 individuals in Duma, Madamiyet Elsham, Darayya, Deir Qanun and Ein Elfijeh subdistricts in Rural Damascus; 64 individuals in Deir-ez-Zor city and Al Mayadin town in Deir-ez-Zor; and 8 individuals in Aleppo city, including a 17 year-old male.

The arrest campaigns come amidst increased concerns of potential spread of COVID-19 among detainees in government detention centers. In Adra prison, Damascus, local media sources have reported, apparently from leaked information provided by GoS security officials, 816 individual cases of COVID-19, with 204 deaths and 63 in a critical condition. While it is difficult to determine the accuracy of these reports, the chief lawyer for Damascus has subsequently made the decision to prevent detainees from Adra central and Damascus women's prison attending their judicial sessions in Damascus court.

ECONOMIC CHALLENGES

The confirmation of COVID-19 cases in Government of Syria-held territories has resulted in a significant increase in the cost of food, health, and cleaning products. The closure of non-essential shops and businesses⁴ and the implementation of a partial curfew spread panic among locals leading to fast acceleration in market consumption. In addition, the changes in demand coincided with continued devaluation of the Syrian Pound, which reached a record -setting 1,360 SYP per USD in late March 26. As of 18 April the Syrian Pound has devalued by 22% since the announcement of the first confirmed case of COVID-19 in GoS areas.

The closure of non-essential businesses and other COVID-19 prevention measures have meant many daily wage earners, seasonal and low-income workers have either temporarily or permanently lost their jobs.

(1) As of 27 April 2020

(2) On 25 March the GoS announced a curfew from 18:00 to 06:00. This was extended on April 2, from 12:00 to 06:00 on Fridays and Saturdays.
(3) On 20 March, Government of Syria the Syrian Arab Army leadership announced the suspension of military conscription until 22 April.



Coupled with higher market prices and accelerated devaluation of the Syrian Pound, the ability for individuals to purchase basic commodities is now severely impacted. The Ministry of Social Affairs confirmed that it had received 128,000 assistance applications from unemployed individuals but has not declared a response plan to provide financial assistance.

| Product | Unit | January 14, 2020 | March 29, 2020 | % Change February to March | April 15, 2020 | % Change March to April |
|---------------------|-------|---------------------|-------------------|-------------------------------|-------------------|-------------------------|
| Spanish rice | 1 kg | 1,100 SYP | 1,850 SYP | 68% | 2,000 SYP | 8% |
| Basmati rice | 1 kg | 1,500 SYP | 2,600 SYP | 73% | 2,850 SYP | 10% |
| Egyptian rice | 1 kg | 750 SYP | 1,250 SYP | 67% | 1,450 SYP | 16% |
| Rough groat | 1 kg | 600 SYP | 1,000 SYP | 67% | 1,175 SYP | 18% |
| Grounded lentils | 1 kg | 650 SYP | 1,500 SYP | 131% | 1,550 SYP | 3% |
| Freekeh | 1 kg | 1,550 SYP | 2,250 SYP | 45% | 2,500 SYP | 11% |
| Macaroni | 250 g | 750 SYP | 1,250 SYP | 67% | 1,400 SYP | 12% |
| Теа | 450 g | 4,200 SYP | 7,000 SYP | 67% | 8,000 SYP | 14% |
| Sunflower Oil | 1 L | 1,400 SYP | 1,850 SYP | 32% | 2,000 SYP | 8% |
| Vegetable ghee | 1 kg | 2,800 SYP | 4,750 SYP | 70% | 5,150 SYP | 8% |
| Olive oil | 1 L | 2,200 SYP | 2,500 SYP | 14% | 4,000 SYP | 60% |
| Goat ghee | 1 kg | 7,000 SYP | 9,700 SYP | 39% | 10,500 | 8% |
| Sugar | 1 kg | 700 SYP | 1,100 SYP | 57% | 1,200 SYP | 9% |
| Tissue | 1 box | 650 SYP | 800 SYP | 23% | 950 SYP | 19% |

Table 1: Food Item Price Changes in GoS-held Areas

The price of medical and cleaning products, particularly face masks and sanitizer, also witnessed sharp increases, which negatively impacted local resident's capability to procure essential medical and health supplies. However, the prices of some medical/cleaning items, particularly chlorine, cleaning detergent, sanizitizers, and face masks, decreased in April for two reasons. Firstly, an increase in the local production of detergents, sanitizers, and chlorine provided an increase in supply, in addition to the introduction of affordable tailor-made face masks into the market. Secondly, there was a decrease in demand due to citizens' prioritization of purchasing food items over cleaning supplies.

(4) i.e: playgrounds, sports facilities, theaters, opera houses, cinemas, textile shops, fabric shops, clothing shops, shoe shops, stationary shops, furniture shops, electronics shops, computer shops, cell phone shops, repair shops, car washes, restaurants (only open for takeaway), coffee shops, game lounges.

(5) Observatory for Economic Complexity (OEC), Syria Profile, April 2020



Table 2: Medical and Cleaning Items Price Changes in GoS-held Areas

| Product | Brand/Type | Unit | February 7, 2020 | March 1, 2020 | % Change February to March | April 17, 2020 | % Change March to April |
|----------------------------|-------------------------|-----------|---------------------|------------------|-------------------------------|-------------------|----------------------------|
| Cleaning Detergent | (نور۱) Nora | 2 Kg | 2,000 SYP | 2,600 SYP | 30% | 2,500 SYP | -4% |
| | Madar (مدار) | 2 Kg | 2,200 SYP | 2,400 SYP | 9% | 2,800 SYP | 17% |
| | Kan (کان | 2 Kg | 2,300 SYP | 2,900 SYP | 26% | 2,850 SYP | -2% |
| | (برسیل) Persil | 2 Kg | 2,300 SYP | 2,900 SYP | 26% | 2,850 SYP | -2% |
| Dishwashing Liquid | (نور۱) Nora | 900 ml | 450 SYP | 500 SYP | 11% | 500 SYP | 0% |
| | ليتس) Lits | 900 ml | 650 SYP | 1,100 SYP | 69% | 1,100 SYP | 0% |
| | Mor (مور) | 900 ml | 600 SYP | 750 SYP | 25% | 750 SYP | 0% |
| | (نور۱) Nora | 900 ml | 450 SYP | 500 SYP | 75% | 500 SYP | -32% |
| Chlorine | Mor (مور) | 1 L | 400 SYP | 700 SYP | 71% | 475 SYP | -25% |
| | فلت) Filt | 1 L | 350 SYP | 600 SYP | 73% | 450 SYP | -38% |
| Sterilizer | (فيتول) Vitol | 1 L | 375 SYP | 650 SYP | 86% | 400 SYP | -38% |
| | Kankos (کانوکس) | 1 L | 350 SYP | 650 SYP | 65% | 400 SYP | -36% |
| Flash | Madar (مدار) | 1 L | 425 SYP | 700 SYP | 36% | 450 SYP | 0% |
| Ground- sterilizing gel | Jet (جت) | 450 g | 550 SYP | 750 SYP | 39% | 750 SYP | 0% |
| | (عملاق) Amlaq | 450 g | 575 SYP | 800 SYP | 150% | 800 SYP | 0% |
| Soap | (بوفالو) Buffalo | 1 unit | 200 SYP | 500 SYP | 100% | 500 SYP | 0% |
| | (فا) Fa | 1 unit | 250 SYP | 500 SYP | 1500% | 500 SYP | -13% |
| Face masks | Medical | 1 unit | 50 SYP | 800 SYP | | 700 SYP | -30% |
| | Locally tailor- made | 1 unit | N/A | 500 SYP | 500% | 350 SYP | -7% |
| | Carbon Filter | 1 unit | 500 SYP | 3,000 SYP | 367% | 2,800 SYP | 9% |
| | N95 | 1 unit | 750 SYP | 3,500 SYP | 27% | 3,800 SYP | 14% |
| Tissues | issues Malika (الملكة) | | 550 SYP | 700 SYP | 130% | 800 SYP | 13% |
| Medicinal Alcohol | 95% | 250 ml | 500 SYP | 1,150 SYP | 111% | 1,300 SYP | 5% |
| | 95% | 1 L | 1,800 SYP | 3,800 SYP | | 4,000 SYP | |
| | | | | | | | |

(6) On 10 March, the Jordanian government banned air travel to and from Syria and 13 March the Lebanese government closed its land border with Syria.

(7) On 18 April, after HTS announced its intention to open a commercial crossing with GoS controlled areas between Saraqab and Sarmin, there was mass protest from civilians, activists local councils and civil actors who refused to allow the opening.

(8) On 23 February, commercial and smuggling points between the GoS and the KSA were suspended

(9) Countryeconomy.com 'Syria - country remittance', April 2020



COVID-19 precautionary measures have disrupted commercial trade with GoS-held areas. The governments of Jordan and Lebanon have banned air and land travel to and from Syria, which previously contributed approximately \$197.3 million in export revenue for the country⁵. Commercial crossings with the Kurdish self-administration (KSA)-controlled territories in northeast Syria were also closed, reportedly with the exception of licensed oil transportation tankers. In opposition-controlled northwest Syria, local protests prevented the armed group Hay'at Tahrir al-Sham (HTS) reopening commercial crossing with GoS areas due to fear of COVID-19 spreading into the area.^{6,7,8}

COVID-19 has also led to severe lockdowns in the four highest remittance-generating countries for the Syrian economy, namely Saudi Arabia, Lebanon, Jordan and Turkey⁹. This has made it more difficult for Syrian expats living in the aforementioned countries and around the world to send money to their families. Lebanon, from which an estimated \$272.4 million worth of remittances go to the GoS territories, further decreased the ability for payments after declaring bankruptcy and preventing USD withdrawals as a COVID-19 precautionary measure.^{10,11}

HEALTHCARE CHALLENGES

The humanitarian situation continues to deteriorate in the Government of Syria (GoS)-held areas as locals fear the spread of COVID-19 and precautionary measures. Local sources reported that citizens exhibiting COVID-19 symptoms are avoiding official diagnosis or treatment due to increased reports of the authorities inhumane methods of handling these cases. Pictures which have been circulated of quarantine centers with poor hygiene conditions lacking basic medical equipment, without the facilities to communicate externally have also added to general distrust of official prevention measures.¹²

Local sources reported that the government owned hospitals and medical authorities in Government of Syria areas are charging 50,000 SYP (\$45) per test for COVID-19, while private hospitals are charging a much higher number, reportedly reaching 300,000 SYP (\$270) per test, which limits the possibility of early detection due to financial barriers.

⁽¹²⁾ Pictures of the original al-Duwair quarantine center emerged showing poor hygiene conditions and a lack of basic medical equipment. In response to protests on social media, the Rural Damascus health directorate pledged to close existing facilities and create four new fit-for-purpose centers in Damascus and Rural Damascus. New photos have been published of the showing improvement of the facilities' hygiene conditions.



⁽¹⁰⁾ DW, <u>'Lebanon to default on debt amid financial unrest</u>', April 2020

⁽¹¹⁾ Al Jazeera, <u>'In coronavirus lockdown, Lebanese banks turn off dollar tap</u>', April 2020

Medical staff are facing an additional set of challenges in GoS-held areas. Local media sources report strict measures have been imposed to prevent doctors, nurses, and health administrators from reporting actual COVID-19 cases. One of the first of these cases was the arrest in early March of the director of Al Mujahid Hospital in Damascus, Dr. Samer Al-Kadir, following a recorded call of him talking about confirmed COVID-19 cases in the hospital. Kadir was allegedly forced to publicly deny the claims following his arrest. An unidentified doctor from the same hospital stated that the GoS security forces are conducting regular inspection visits to the hospital urging doctors and nursing staff not to wear masks in order not to draw attention to themselves and reduce panic amongst patients and citizens.¹³

A doctor in the coastal region stated to an international media outlet that GoS security forces continue to visit their hospital threatening the lives of doctors and medical workers if they speak to media outlets about the number of COVID-19 cases. These reports coincided with other reports indicating the death of one doctor in Elqerdaha hospital in Latakia governorate after information regarding COVID-19 was leaked to local media outlets.¹⁴

Unconfirmed reports indicate that the GoS has imposed a form of house arrest on doctors and medical staff to prevent the leak of information, and to make it easier to monitor their communications. Reportedly, medical staff working in hospitals receiving COVID-19 cases, such as Al Mujahid hospital, Al-Assad Hospital, Al-Mowasah Hospital, and Al-Atfal Hospital, have been accommodated in one hotel, next to Al-Assad Hospital in Damascus city.

POLITICAL-RELATED CHALLENGES

The Government of Syria (GoS) has taken full advantage of the exceptional circumstances caused by COVID-19 to score political points locally and internationally by promoting two contradictory media messages. The first, directed to locals in GoS areas, emphasizes the readiness of the Syrian Health System to confront the epidemic and the efforts which the government is making. GoS-run and -affiliated news agencies launched a media campaign boasting the exceptional government efforts to confront the epidemic. The media campaign went as far as stating that the WHO Coordination Committee declared Syria a country which survived the COVID-19 pandemic. This statement has been denied by WHO official social media, which clarified that "a WHO 'Coordination Committee' does not exist" in Syria.

(13) According to Nida Al-Watan

(14) According to Brocar Press

(15) Le Monde, 'La Syrie, trou noir de l'épidémie de coronavirus [Translation: Syria, black hole of the coronavirus epidemic'] March 2020

(16) Arsharq Al-Awsat, 'Exclusive - China, Russia Lead Campaign to Avoid Politicization of Coronavirus in Syria' March 2020



The second, directed at the international community, aims to win sympathy in order to break Syria's isolation by talking about the increasingly negative effects of <u>US</u> and <u>EU</u> sanctions amidst the global pandemic. GoS officials have cited UN representatives, such as resident representative of the WHO in Damascus, Na'ma Saeed, in a statement calling for the exclusion of the health sector from sanctions, thereby improving the ability to procure medical equipment and medicine. Such statements should not necessarily be taken at face value however; Le Monde, the French newspaper, quoted a Western diplomat working on Syria saying "[translation from French] WHO representative in Damascus knows full well that at the slightest statement contradicting the government's position, he is put on a plane."

In addition to referencing UN statements, GoS allies including Russia, China, North Korea, Cuba, and Venezuela have sent a letter to Antonio Guterres, secretary-general of the United Nations, calling for the lifting of US and EU sanctions imposed on the GoS in order to aid in combating the COVID-19 pandemic.¹⁶

The international maneuvering in this regard encouraged some Arab governments to renew their attempts to normalize their relations with the GoS. Crown Prince of Abu Dhabi, Mohammed bin Zayed, called Syrian President Bashar al-Assad under the pretext of humanitarian considerations, prioritizing them over political considerations. Any attempt to normalize relations by any government, particularly by Arab countries, provides the GoS with legitimacy and helps break sanctions imposed on it. It is likely to encourage more governments to take similar steps, thereby removing the state of isolation imposed on the GoS.



CONTACT

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The Humanitarian Access Team (HAT) was established in Beirut in March 2015 in response to the collective challenges facing the remote humanitarian response in Syria. Successful humanitarian and development interventions require а nuanced and objective understanding of the human ecosystems in which these interventions occur. To this end, the HAT's most important function is to collect, triangulate, synthesize, analyze and operationalize disparate data and information. Since 2015, HAT analysis has provided a forward-looking template for international interventions in Syria, and facilitated an increasingly nimble, adaptive, integrated, and ultimately impactful international response to the Syrian conflict.



