



Security Council

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Letter dated 1 May 2020 from the President of the Security Council addressed to the Secretary-General and the Permanent Representatives of the members of the Security Council

I have the honour to enclose herewith a copy of the briefing provided by Mr. Mark Lowcock, Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, as well as the statements delivered by the representatives of China, the Dominican Republic, France, Germany (on behalf of Belgium and Germany), Indonesia, the Niger, the Russian Federation, Saint Vincent and the Grenadines, South Africa, Tunisia, the United Kingdom of Great Britain and Northern Ireland and Viet Nam, in connection with the video-teleconference convened on Wednesday, 29 April 2020. A statement was also delivered by the representative of the Syrian Arab Republic.

In accordance with the procedure set out in the letter dated 2 April 2020 from the President of the Security Council addressed to the Permanent Representatives of the members of the Security Council (S/2020/273), which was agreed in the light of the extraordinary circumstances caused by the coronavirus disease pandemic, these briefing and statements will be issued as an official document of the Security Council.

(Signed) **Sven Jürgenson**
President of the Security Council



Annex I**Briefing by Mr. Mark Lowcock, Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator**

I will start today by joining my humanitarian colleagues in strongly condemning yesterday's horrific bombing in a crowded street in Afrin city. Early reports indicate that as many as 43 civilians, including several children, were killed in that indiscriminate, unacceptable attack. Many more were injured. I extend my profound condolences to the families of the victims.

Since I last briefed the Security Council on Syria (see S/2020/254), the number of confirmed cases of coronavirus disease (COVID-19) in the country has reached 43, including three deaths. These figures will sound very low compared to those being recorded here in New York and in many of Council members' own countries. But if this virus is behaving similarly in Syria to how it has elsewhere, which is our assumption for now, then tragedy beckons. We cannot expect a health-care system decimated by almost a decade of war to cope with a crisis that is challenging even the wealthiest nations. We cannot expect mitigation measures to succeed where millions are displaced in crowded conditions without adequate sanitation and with no assets or safety net to fall back on.

I will focus my briefing today on the following areas: first, the status of COVID-19 testing and the response across Syria; secondly, the humanitarian situation in the north-west, which remains alarming despite the ceasefire; thirdly, the issue of medical supplies in the north-east; fourthly, the situation in Rukban; and, fifthly, a summary of everything that we in the humanitarian system supported by the United Nations are delivering to relieve the suffering of people across Syria.

To date, all 43 confirmed COVID-19 cases announced by the Syrian authorities have been in Damascus and Rural Damascus governorates. A first case and fatality was confirmed in the north-east on 2 April. No cases have so far been confirmed in the north-west.

Testing capacity remains very limited. Testing is under way in Damascus and Latakia, with two additional laboratories being established in Aleppo and Homs. Efforts to establish a laboratory in Al-Hasakah governorate in the north-east continue. Testing has also commenced in Qamishli. A polymerase chain reaction (PCR) machine was delivered to Tell Rifaat, while two additional PCR machines are being delivered to Kobane and Raqqa. In the north-west, a laboratory has commenced testing in Idlib. Some samples are also being tested in Turkey.

While that modest increase in testing capacity is a positive development, it remains vastly insufficient and a major priority for humanitarian actors, alongside other prevention and mitigation measures. Areas of particular concern include camps and other crowded areas of displacement with insufficient access to water and sanitation.

In the north-west, preparedness measures, supported by cross-border humanitarian operations, are under way. Some hospitals are being modified to receive COVID-19 patients and to function as isolation case management centres. Community-based isolation centres are also being established. However, gaps in vital medical supplies and equipment, including personal protective equipment, remain.

In Al-Hol camp, in the north-east, an 80-bed isolation area is under construction and thermal screening has commenced.

We are working to assess the financial requirements for the United Nations contributions to the COVID-19 response in Syria, which will be additional to the

costs of responding to the pre-existing humanitarian needs. The requirements related to COVID-19 will be included in the forthcoming update of the Global Humanitarian Response Plan for COVID-19.

As in other countries, the impacts of measures aimed at containing the spread of the virus are likely to be greatest on the most vulnerable. Since mid-March, some areas have seen average price increases of between 40 and 50 per cent for food staples. That compounds the impact of Syria's severe economic crisis. The World Food Programme reports that, in the past year, the price of basic food items that many people have to buy has increased by more than 100 per cent.

Turning now to the north-west, there have been no air strikes since the 6 March ceasefire announced by the Russian Federation and Turkey. However, intermittent shelling has continued almost every day in some front-line areas despite the calls for a global and nationwide ceasefire.

Some displaced families are taking advantage of this limited calm to return to where they were living before having to flee the latest round of fighting. Over the past few weeks, 135,000 people have returned to towns and villages in front-line areas outside Government control, the majority going to Ariha and Al-Atarib. Many are returning to find their previous homes destroyed. Essential services have yet to be re-established.

The ceasefire may have brought a degree of respite, but the humanitarian situation in the north-west is as dismal as it has ever been. A grim indicator is the nutrition data that we are recording. Last month, I briefed the Security Council on alarming levels of stunting. We are equally alarmed at the malnutrition rates among pregnant and breastfeeding women. Twenty-one per cent are malnourished, which is four times as many as last year.

The cross-border operation into the north-west is operating at record levels to try to relieve such suffering. In March, 1,486 trucks, carrying aid for 3.7 million people, crossed the border from Turkey. So far in April, more than 1,100 trucks have been dispatched, but that is not enough.

The need to prepare for the potential arrival of COVID-19 in the north-west makes efforts to scale up all the more urgent. Items for cross-border trans-shipment, such as hygiene kits and tents for isolation units, are being prioritized accordingly.

Turkey is facilitating that scale-up, notwithstanding its own battle with the virus. Humanitarian organizations have put in place strict measures to comply with Turkish regulations and to minimize the risks of transmission of the virus at trans-shipment hubs or in other ways.

At this stage, it is simply impossible to sustain the scale and scope of assistance into the north-west without the cross-border operation. As I have briefed the Council before, there is no alternative. That fact is further illustrated by the failure to replace the former cross-border operations in the north-east with assistance delivered across lines, which I will turn to now.

Cross-line deliveries to the north-east from Damascus have not filled the gap in critical medical supplies that were, until January this year, delivered through the Al-Yarubiyah border crossing.

A World Health Organization consignment of 20 tons of medical supplies — including personal protective equipment, intensive-care-unit beds, incubators and seven ventilators — was airlifted to Qamishli on 12 April, and distribution has been completed. But medical facilities that were previously supported by the cross-border operation were, again, largely excluded.

Gaps in medical supplies in north-eastern Syria are widening. At a time when we should be urgently scaling up to prepare for COVID-19, those gaps should be narrowing. This is even more critical now that a first case has been confirmed.

The World Health Organization assesses that there has not been sufficient improvement in cross-line access since January, even when faced with the inescapable urgency of COVID-19. In his review of alternative modalities for Al-Yarubiyah border crossing he sent the Council in February (S/2020/139), the Secretary-General noted in paragraph 44 that “under current conditions, a combination of more cross-border and cross-line access is required”. That remains the case. The Secretary-General also noted that, should adequate steps not be taken to improve cross-line delivery, and in the absence of consent from the Government of the Syrian Arab Republic or neighbouring countries to use border crossings into the north-east of the country, the Security Council would need to authorize the United Nations and its implementing partners to use additional crossings. That also remains the case.

I turn now to Rukban camp, which has not been reached by a humanitarian convoy since September 2019. Informal commercial supply routes from Damascus and Dhumer were closed off in February, further disrupting the delivery of food, fuel and medical supplies into the camp. Jordanian border restrictions related to COVID-19 since 18 March have impacted medical referrals from Rukban without prior COVID-19 screening, which is unavailable in the camp.

A planned health assessment and assistance mission by the United Nations and the Syrian Arab Red Crescent did not proceed this month. It was suspended owing to lack of agreement by all parties on the modality of assistance and delivery. Access is urgently needed to provide assistance to the vulnerable Rukban population and to support voluntary departures.

Additional information on many of the things I have covered, and in response to questions previously asked by Council members, is included in the Secretary-General’s latest bimonthly humanitarian report on Syria (S/2020/327), which he sent the Council in recent days. For information on the situation in the north-west, I would refer members to paragraphs 4, 5, 11, 12 and 13 of that report. For information on the cross-border operation, I would refer members to paragraphs 20, 34 and 35, as well as figure 1 and table 2. For information on Rukban, I would refer members to paragraph 7.

Regarding access and deliveries to the north-east, I would refer members to paragraphs 32 and 33, which detail how many hospitals, how many primary health centres and how many mobile medical units were reached with consignments of medical supplies from Damascus during the reporting period.

Paragraph 31 includes a description of the onerous process of dispatching aid deliveries cross-line, explaining the multiple approvals required. Approval by the Ministry of Foreign Affairs does not mean that assistance is delivered. That is just the first of multiple steps involving other ministries, security services, local governors and other local parties in control. Unless all that is in place, nothing happens.

Finally, let me summarize some of the things that the United Nations is delivering in humanitarian support to the people in Syria and remind the Council that most of this is for people in those parts of Syria under the control of the Government.

In 2019, humanitarian agencies and partners reached on average of 6 million people across the country each month. So far this year, food assistance has been delivered to 4.6 million people across the country on average each month. In addition, 2.5 million people across the country received winter supplies such as high

thermal blankets and warm clothing. Operations from within Syria included support for 2.2 million medical procedures and mine-risk education for half a million people.

Information on the humanitarian response in various parts of Syria is also included in the Secretary-General's report in paragraphs 18 to 22.

COVID-19 and its ramifications will become a multiplier of humanitarian needs in Syria. More than ever, this demands a response that uses every possible means of reaching people in need, wherever they are located. This will require, first, a complete and immediate nationwide ceasefire; secondly, supplying critical medical items previously provided through the Al-Yarubiyah border crossing — as I said earlier, the steps required are laid out in detail in the Secretary-General's report dated February; and, thirdly, a renewal of the cross-border authorization for north-western Syria, to meet the enormous humanitarian needs that we continue to see there.

Annex II**Statement by Mr. Zhang Jun, Permanent Representative of China to the United Nations**

I thank Under-Secretary-General Lowcock for his briefing.

China is paying close attention to the humanitarian situation in Syria, in particular the impact of the coronavirus disease (COVID-19) on economic and social development in Syria. We take note of the fact that the Syrian Government has taken a series of active measures in the areas of health care, education, transportation, food production and many others to prevent and contain the spread of the virus. We appreciate those efforts.

Years of conflict have undermined Syria's capacity to cope with the pandemic, and the international community must not stand by idly. China is actively cooperating with Syria to combat the virus. The first batch of medical assistance arrived two weeks ago in Damascus. Last week, a renowned Chinese hospital held a video meeting with the Syrian Ministry of Health during which Chinese medical experts shared their first-hand experiences in combating COVID-19. We are willing to continue providing assistance within our capacity to Syria and call on other countries to do the same. We also encourage the Office for the Coordination of Humanitarian Affairs (OCHA) and other international humanitarian agencies to make greater efforts to support Syria in responding to the pandemic in various forms.

The humanitarian issue in Syria is interlinked with political, economic and security issues and must be managed in an integrated and impartial way. The role of the Syrian Government should be brought into full play. It should be acknowledged that the Syrian Government has demonstrated political will to facilitate the delivery of humanitarian assistance, and there have been positive developments in cross-line operations.

With regard to the issue of cross-border humanitarian assistance, full respect must be given to the sovereignty and territorial integrity of Syria. We call for continued coordination and cooperation between OCHA and the Syrian Government to jointly find a sustainable solution.

With regard to the board of inquiry, China has reservations and concerns over the manner of its establishment and working methods.

Unilateral sanctions undermine Syria's capacity to combat COVID-19 and destroy the livelihood of civilians. There are no grounds to justify unilateral sanctions, and we are firmly against them. China reiterates its support for the appeals made by the Secretary-General and the United Nations High Commissioner for Human Rights to lift the sanctions. We urge the relevant countries to respect the legitimate rights and lives of all the people affected by the pandemic and to immediately lift unilateral sanctions against the countries concerned.

It must be pointed out that the humanitarian issues in Syria are closely related to the political process. China calls on all parties to fully implement resolution 2254 (2015) and push forward a Syrian-led, Syrian-owned political process. We support the United Nations and the good offices of the Special Envoy in the hope that we can jointly promote peace and stability in Syria and in the region.

China is also seriously concerned over the civilian casualties caused by yesterday's tragic event and extends its deep condolences to the families of the victims. We call on the parties to respond actively to Secretary-General Guterres' appeal for a ceasefire.

Annex III**Statement by Mr. José Singer Weisinger, Special Envoy to the Security Council of the Dominican Republic**

We thank Under-Secretary-General Mark Lowcock for his briefing and take this opportunity to reiterate our deep appreciation and respect for the many humanitarian organizations and workers on the ground in the Syrian Arab Republic who, for nine long years, have saved lives and brought hope to millions of people. The devotion and resilience of these heroes and of the people they serve are a constant reminder that humanity and solidarity always prevail, no matter the circumstances.

We remain concerned over the deterioration of the situation in the north-west of the country. We are aware of the return of more than 100,000 previously displaced people but worry about their fate and means of survival in a context of increasing challenges resulting from hostilities and the coronavirus disease (COVID-19) pandemic. We applaud the efforts to scale up the cross-border assistance, which has once again proven to be life-saving for millions of people.

The economic situation and the rise in food prices in Syria is a source of great concern for the Dominican Republic. Those are issues that, without proper mitigation and attention, could have devastating consequences for the most vulnerable population, who continues to pay the highest price in this horrible and long conflict. In that regard, we reiterate our call on the Syrian Government to increase its capacity and strengthen its coordination with the United Nations and humanitarian organizations on the ground in order to ensure timely and principled assistance to the entire population — in other words, to everyone everywhere.

As in many other places around the world, the COVID-19 pandemic has brought to the fore many of the underlying root causes of conflicts and violence. In already vulnerable contexts like Syria, which has seen almost a decade of conflict, the dire conditions in which the affected people are living are bound to deteriorate further. Therefore, we must all help to alleviate the suffering and take all feasible measures to protect the people. Prevention is the only and best way forward.

A sustainable, long-lasting nationwide ceasefire is the first step in that regard. Then we must support the continuation of the broader political process. All parties to the conflict and relevant stakeholders must unite their efforts to achieve those two goals. Together, they must also support all the prevention and response efforts under way, under the leadership of the World Health Organization and in coordination with the Government of Syria, to provide assistance to the whole country, particularly areas where assistance has been disrupted in recent months, such as in the north-east of the country. In that regard, we emphasize the need for the Council to call for an increase in the flow of humanitarian assistance to the north-east through all modalities. We stand ready to work with all Council members on this our common responsibility.

To conclude, we reiterate that the COVID-19 pandemic is not a situation in which we sit and wait; rather, we have a responsibility to provide Syrians with the support and attention they need and deserve.

Annex IV**Statement by Mrs. Anne Gueguen, Deputy Permanent Representative of France to the United Nations**

[Original: English and French]

I thank Mark Lowcock for his briefing.

The risk of the spread of the coronavirus disease (COVID-19) pandemic in Syria is extremely worrying, notably in the north-west and in the north-east. An immediate and sustainable nationwide ceasefire is the only way to facilitate the response to COVID-19.

Let me express France's strong condemnation of the horrific terrorist bombing that struck a market in Afrin yesterday. Many victims were civilians, including children. It is heartbreaking. I would like to express our saddened condolences to the families and all those affected by this attack.

I want also to reiterate France's full support for the call of the Secretary-General and of his Special Envoy in this regard. It is urgent that it be implemented. We call on all parties — and especially the regime, which has not responded to the Secretary-General's appeal — to work actively in this direction. As Ambassador De Rivière said this morning, the United Nations must remain at the forefront of these efforts, in accordance with resolution 2254 (2015).

A nationwide ceasefire is all the more necessary as the implementation of the Russian-Turkish agreement on Idlib remains fragile and uncertain. All parties, in particular the Syrian regime, must ensure safe and unhindered humanitarian access to all people in need. This is more necessary than ever to facilitate the response to COVID-19.

The efforts of United Nations agencies and their partners to respond to the humanitarian needs of the population and to the COVID-19 pandemic must be supported and enhanced. France has already committed €4 million to the COVID-19 response in the north-west.

In the context of the pandemic, the cross-border mechanism has never been so relevant, both in the north-west and in the north-east. France remains determined to preserve that life-saving mechanism. In the north-west, the scale-up of the humanitarian delivery through the two crossing points must absolutely continue. In the north-east, the loss of the Al-Yarubiyah crossing point is depriving the population of the most direct and safest access to medical aid. North-eastern Syria needs cross-border assistance through a dedicated crossing point. A scaling-up of cross-border access is an absolute necessity to respond to the emergency needs, and in particular to combat the COVID-19 pandemic.

Until today, there has been no progress regarding cross-line access to the north-east. The Syrian regime takes three to four months to approve deliveries of medical supplies from Damascus. This is unacceptable. We also deeply regret that there is no agreement yet to deliver life-saving and urgently needed aid to thousands of people in the Rukban camp.

We reject any instrumentalization of humanitarian assistance. In this regard, let me recall that European sanctions are tools to combat human rights abuses and breaches of international law. These sanctions were designed precisely not to hamper humanitarian assistance to the Syrian people, whatever their affiliation, and do not hamper the response to the COVID-19 pandemic today.

Let us be clear. The Syrian regime has systematically destroyed medical infrastructure since the beginning of the conflict and continues to impede humanitarian access. There is no doubt that it bears the primary responsibility for the dire humanitarian situation, which is exacerbated by the COVID-19 pandemic today.

Finally, I would like to welcome the release of a summary of the Board of Inquiry's report. We support the full implementation of the recommendations of the Board to guarantee a deconfliction mechanism that does not put medical and humanitarian personnel and facilities at risk. We also support sharing the full report with the International, Impartial and Independent Mechanism to Assist in the Investigation and Prosecution of Those Responsible for the Most Serious Crimes under International Law Committed in the Syrian Arab Republic since March 2011 and with the Independent International Commission of Inquiry on the Syrian Arab Republic in order to further investigate the incidents and bring their perpetrators to justice.

Lastly, as indicated this morning, only a political solution will bring an end to the humanitarian tragedy in Syria.

Annex V**Statement by Mr. Christoph Heusgen, Permanent Representative of Germany to the United Nations**

I deliver this statement on the humanitarian situation in Syria on behalf of the co-penholders, namely, Germany and Belgium. We would like to thank Under-Secretary-General Lowcock for his briefing today.

As Mr. Lowcock mentioned, the Syrian city of Afrin was shaken by a devastating terrorist attack yesterday that reportedly killed dozens of civilians, including many children. We strongly condemn that crime, and our deepest sympathy goes to the families and the relatives of the victims. We wish the injured a speedy and complete recovery.

Mr. Lowcock has once more given an insider's perspective on what humanitarian work is about and how important humanitarian assistance is in places where we have to protect the most vulnerable populations, not only from conflict and hunger but now also from the coronavirus disease (COVID-19) pandemic. We bow our head to all humanitarian and medical workers throughout Syria. We need them more than ever in this humanitarian battle.

The Secretary-General's Special Envoys to the Middle East put it rightly: silence the guns, de-escalate tensions, reach out across conflict lines and facilitate humanitarian access and assistance wherever needed. Nine years of war have already taken an extreme toll. Nearly half of all health-care facilities have been severely damaged or destroyed, and there is a shortage of medical equipment and health-care professionals. The World Health Organization has counted 494 attacks on health-care workers and installations in the last three years. More than 6 million internally displaced persons, as well as detainees and abductees, are living in conditions that make them extremely vulnerable to COVID-19 and other respiratory infections.

Reading carefully the Secretary-General's bimonthly humanitarian report (S/2020/327) and listening to Mr. Lowcock's words, we can only conclude that access is crucial in order to stop the spread of the virus. But we have to face the facts: in Government-controlled areas, the United Nations was able to conduct only 25 per cent of the humanitarian missions it submitted for approval as a result of unrelenting bureaucratic hurdles and safety concerns.

In the north-west, the ceasefire between Russia and Turkey seems to be holding, fragile though it may be, thus allowing for more humanitarian assistance than ever before to cross the border, although restrictions because of the pandemic are in place. To cite the Secretary-General's report, in the north-east, only 31 per cent of the medical facilities that were previously supported by cross-border deliveries from Al-Yarubiyah were reached by recent cross-line supplies. In order to prepare for the worst, that is simply not enough.

Moreover, according to the World Health Organization, the weakened health system in north-east Syria has minimal capacity to respond to the COVID-19 pandemic, and all modalities are urgently required to prepare for and respond to the pandemic.

In the conclusions of his report, the Secretary-General underscores that three months after the removal of Al-Yarubiyah, the remaining gaps in assistance underscore the importance of using all modalities, cross-border and cross-line. In other words, three months after the closure, cross-line assistance via Damascus is falling woefully short, and COVID-19 only makes the situation more acute. The United Nations and non-governmental partners agree that the cross-line option cannot be adequately expanded and propose the reopening of a land crossing for

greater amounts of cargo. The Council and its members cannot ignore the effects of closing the Al-Yarubiyah crossing. The facts and figures are indisputable.

Hence, from a humanitarian point of view, Germany and Belgium, echoing the Secretary-General's call for more cross-line and cross-border access, think that the Council should consider urgently reopening a crossing point in the north-east of the country. The spread of the virus cannot be stopped by Council tactics, but only by test kits, protection equipment and ventilators.

Finally, we renew our call for accountability for the most serious crimes under international criminal law. In that regard, we welcome the recommendation of the Secretary-General to appoint a senior independent adviser on the findings of the board of inquiry. The results of the board of inquiry must be followed up. Impunity for those responsible for these serious violations of international law is not an option. We pledge full support once more for the work of the International, Impartial and Independent Mechanism to investigate such crimes and look forward to the results of the trial of officers of the Syrian regime accused of crimes against humanity being held in Koblenz, Germany.

In my national capacity, I would like to add that we have just provided another €22 million for the Syria Cross-border Humanitarian Fund, thus increasing our total contribution to the Fund in 2020 to €30 million. The Fund remains a key instrument to address the enormous humanitarian needs in the north-west of the Syrian Arab Republic.

Annex VI**Statement by Mr. Muhsin Syihab, Deputy Permanent Representative of the Republic of Indonesia to the United Nations**

I would like to echo others in conveying our condolences to the victims of yesterday's attack in Afrin. We thank Under-Secretary-General Mark Lowcock for his briefing and updates on the humanitarian situation in Syria.

The coronavirus disease (COVID-19) pandemic has certainly added another layer of complexity to our common goal of alleviating the suffering of the Syrian people. My delegation believes that the focus of today's video-teleconference should be on how to enhance the efforts to ensure that humanitarian assistance is properly distributed to people in need, including in the context of measures to suppress the spread of COVID-19. Accordingly, Indonesia wishes to highlight three points that are crucial in making sure that those humanitarian operations are implemented effectively.

First, all parties without exception must implement and respect an immediate nationwide ceasefire throughout Syria. We are delighted that the Russia-Turkey ceasefire agreement in the north-west is holding and appreciate the commitment from all key parties in that regard. However, a period of calm is not needed only in the north-west. A complete and immediate nationwide ceasefire is crucial and, as Special Envoy Pedersen has stated, is needed more than ever to enable an all-out effort to halt COVID-19 in Syria.

Secondly, all United Nations humanitarian operations and their implementing partners must be granted enhanced and sustained humanitarian access to all requested areas and populations in need. Safe, immediate access for the delivery of humanitarian assistance was already urgently needed before COVID-19 in order to save lives in Syria. Given the high risk currently posed by the pandemic, nobody can deny that access is one of the priorities to secure and deliver emergency supplies. Besides shelter, food, water and sanitation, it is also crucial to provide more testing kits, personal protective equipment and other key supplies. As stated in the Secretary-General's latest report (S/2020/327), it is imperative that humanitarian access to all parts of Syria be continued and authorized with various operating modalities. That includes scaling up cross-line and cross-border access. We call for enhanced cooperation and effective coordination between the United Nations and the Government of Syria, including other key parties, in order to better facilitate access for humanitarian responses in the country.

Thirdly, as many have stated, Syrians are acutely vulnerable to COVID-19; therefore, enhancing laboratory and case investigation capacity in Syria is a priority. As reported by Under-Secretary-General Lowcock, the number of cases is still low. However, the risk of an outbreak and its devastating impact on the Syrian people is very alarming. We appreciate the Syrian Government and the United Nations ongoing prevention and health preparedness plan designed to minimize the spread of the virus and urge for continued partnership between the parties.

Lastly, we note the summary of the board of inquiry report and stress the importance of preventing the same incidents from reoccurring in future. Indonesia urges all parties to the conflict to cease all attacks and uphold their obligations under international law and international humanitarian law. We appeal to all the parties to the conflict to assist the Syrian people, with the support of the international community, in showing mercy and compassion during this holy month of Ramadan.

Annex VII

Statement by Mr. Abdou Abarry, Permanent Representative of the Niger to the United Nations

We thank Under-Secretary-General Mark Lowcock for his briefing and his commitment to humanitarian work.

The Niger welcomes the report of the Secretary-General on the situation in Syria (S/2020/327) and the analysis on possible alternate entry points, which will enable the Council to assess the appropriateness of those crossing points. The report paints a detailed picture of the difficult situation of which we all are aware.

We have repeatedly been presented with the troubling humanitarian situation in Syria Arab Republic. In fact, not long ago, we adopted a resolution (resolution 2504 (2020)) to lower the number of cross-borders entry points, thus reducing access to humanitarian assistance for Syrians in need. Amid the already complex humanitarian situation in Syria, the spread of coronavirus disease (COVID-19) adds another layer, making it even more difficult to manage. The Secretary-General reported that in Syria

“[a]ll efforts to strengthen COVID-19 preparedness and response were severely constrained by the global shortage of personal protective equipment, ventilators and other vital medical supplies” (S/2020/327, para. 18).

Nevertheless, we commend the cooperation among the Syrian authorities, the World Health Organization and national organizations to prevent and curb the spread of COVID-19. Those efforts must continue, especially when it comes to providing medical products and equipment.

The 10-year conflict in Syria has significantly damaged the country’s infrastructure, including health facilities, which leaves a large number of people vulnerable to contracting the virus. With millions of displaced persons living in densely populated, overcrowded camps where social distancing is near impossible, there is a great danger of large-scale spread of the virus among refugees and internally displaced persons.

Over and over again, we have heard from Mr. Lowcock how important the cross-border operation is to humanitarian action in Syria. The Niger fully supports the cross-border mechanism, which is essential for the survival of many Syrians. We will also support any further agreements that make humanitarian access faster and more secure while respecting Syria’s sovereignty.

In conclusion, as I have stated before, the unity of the Council, especially when it comes to humanitarian issues, is critical in order to take the right decisions and make progress on the different aspects of the Syrian situation.

Annex VIII**Statement by Mr. Vassily Nebenzia, Permanent Representative of the Russian Federation to the United Nations**

Before I come to the humanitarian situation in Syria, I would like to say a couple of words about what I heard before I took the floor.

First of all, I would like to tell my colleague from the United States that there is no international consensus on isolating the Syrian regime, as she chose to call it. The international consensus on Syria is codified in resolution 2254 (2015), which states that it is the Syrians who should decide their fate and what regime they will have in future. Whatever they decide, it will be their decision, not anybody else's.

Secondly, I note that many participants referred to a nationwide ceasefire. Before they propose such a thing, they may wish to give it a little thought. In order to have a nationwide ceasefire, there must be nationwide warfare. Where is the nationwide warfare in Syria that warrants the proposal of a nationwide ceasefire? Who do they think would become signatories to such a ceasefire? That would be very interesting to know.

I now turn to the main part of my statement. We thank Under-Secretary-General Mark Lowcock for his briefing.

We have heard a lot today on the potentially disastrous impact of the coronavirus disease (COVID-19) in north-east Syria — and in Idlib for that matter — and on steps taken in that regard by the World Health Organization (WHO) and the Office for the Coordination of Humanitarian Affairs (OCHA). Despite the recent briefings by representative of WHO and OCHA, as well as the latest report of the Secretary-General, of 23 April (S/2020/327), we still have questions to which we have not yet gotten any clear answers, such as explanations on the discrepancies in humanitarian data and figures provided by United Nations entities, Headquarters and United Nations forces on the ground.

Instead, we hear only emotional statements on the deteriorating humanitarian situation in Idlib or north-east Syria. I ask a logical question — why is only that part of the country subject to the close scrutiny of our colleagues? Those areas are under the control of foreign Powers or the de facto authorities, but responsibility for the humanitarian situation is attributed to Damascus. Why is the humanitarian community so reluctant to address the epidemiological situation in the country as a whole? Does the United Nations have any comprehensive strategy to address the pandemic in Syria? When it comes to Damascus, all we hear about is the destroyed health-care system's inability to cope with the potential pandemic crisis. The Government of Syria is doing its utmost to fight the spread of COVID-19, despite cruel unilateral sanctions. As I already mentioned in this morning's meeting, our colleagues have a very rosy — and very hypocritical — picture of how their sanctions affect ordinary Syrians and how their exemptions allegedly solve the people's problems. We reiterate our call, and echo calls made by United Nations officials, to lift unilateral sanctions against Syria. We deplore the de facto collective punishment measures taken against the Syrians living in Government-controlled areas.

We want to be briefed on the steps taken by the occupying Powers in the Syrian territories known to be out of the control of the legitimate Government in order to conform to international humanitarian law. We have heard not a single word so far in that regard. In addition, we would like to ask what exactly WHO and OCHA do to help fight COVID-19 in the territories under the control of the Syrian Government.

We note that there are 43 confirmed cases of COVID-19 in the country, according to WHO. We cannot agree to the cure that our colleagues suggest — a

full reinstatement of the cross-border mechanism. We note that the cross-border mechanism was created as a temporary tool to be used on an extraordinary basis. We would like to make it clear for everyone that the closure of one of the border crossings for United Nations assistance does not mean its total closure. As we all know, non-governmental organizations (NGOs) continue their shipments, which are larger than those of the United Nations. We hear that NGOs are doing a lot of work in the north-east. We have a question: what exactly is the United Nations doing there? We hear that the assistance of the United Nations and NGOs is not duplicative. That means there is coordination between the two. We would like to learn more about it.

We also reject the contention that Damascus is not properly cooperating. Some interpret the Secretary-General's report (S/2020/327) as they see fit, stating that there was no progress in cross-line access. That is not true. Everyone can interpret the statistics as it suits them, and statistics are very easy to manipulate. The report of the Secretary-General clearly states that 1,094 missions were conducted by the United Nations and its partners from within Syria, and that they reached 14 governorates. Three convoys of medical aid were sent to the north-east — all from Damascus, two by WHO and one by UNICEF. We are told that those convoys covered only 30 per cent of medical needs. I would like to remind the Council that the Syrian authorities authorized an airlift from Erbil. It is not the fault of Damascus that it did not occur. In fact, we are astonished, to put it mildly, by WHO delays, since February, in providing the urgent supplies that we hear are now expiring. I note that before the New Year those supplies were lying idle in Iraq and then suddenly became indispensable. We reject the explanations provided to us thus far, and we have strong reasons to believe that those delays did not happen because of objective circumstances.

We strongly urge our colleagues not to waste their time on looking for a way to advocate — explicitly or implicitly — for getting Al-Yarubiyah back by claiming that it is the only solution. We ask them to focus instead on engaging humanitarian agencies in constructive dialogue with Syrian authorities. They do not have to knock on the door; the door is open. If there is a will, there is a way. I urge them to not lose time and squander this opportunity. This is the only solution. By the way, closed Al-Yarubiyah did not prevent the local administration from receiving four machines for COVID-19 tests from abroad. It seems that the equipment arrived there through the same channels as the strange humanitarian aid that consisted of anti-riot gear for Islamic State in Iraq and the Shams prisons and internally displaced persons camps. We mentioned that during the morning meeting. And by the way, why do they insist on Al-Yarubiyah and refuse to consider the Abu-Kemal crossing that the Syrian authorities were prepared to use?

In the context of the difficult humanitarian situation in the north-east, we have a question — what have the occupying Powers done there over the past six years except cut ties between Kurdish areas and other Syrian territories? Only several hospitals function there and nothing has been done to resettle refugees from the camps. A lot of problems are caused by mines. The situation in Al-Hol camp is dire. It is unclear what measures have been taken to fight the threat of COVID-19 in Rukban. We note that it was Syrian and Russian efforts that made it possible for 19,000 people in Rukban to return to their homes from March to July 2019. As I mentioned this morning, the fighters who escaped from the camp two weeks ago clearly said that the aid sent to the camp was not distributed among its inhabitants but was, instead, seized by Maghawir Al-Thawra fighters.

We are very concerned that, upon the Syrian Health Ministry's request to launch a medical laboratory in Al-Hasakah for processing COVID-19 samples in one of the State hospitals, WHO redirected the Ministry to a clinic belonging to

Médecins Sans Frontières. WHO must have realized that this would lead to problems with Damascus. In general, we would like to be briefed about what WHO is actually doing east of the Euphrates River. We would be grateful if our United Nations colleagues could shed some light on our above-mentioned concerns. How are the financial resources at OCHA's disposal actually allocated? What portion goes to Government-controlled areas? We will continue to pose those pertinent questions and expect clear and transparent answers.

Annex IX**Statement by Ms. Diani Jamesha Prince, Counsellor of the Permanent Mission of Saint Vincent and the Grenadines to the United Nations**

I thank Under-Secretary-General Lowcock for his usual comprehensive briefing. We join with others in expressing condolences to the families of the victims of yesterday's attack in Afrin.

Saint Vincent and the Grenadines reiterates the Special Envoy's call for a complete and immediate nationwide ceasefire throughout Syria. While the 5 March agreement has led to a significant cessation of hostilities in the north-west, the appeal for a nationwide ceasefire is now more pertinent than ever to enable the country to effectively combat the coronavirus disease (COVID-19) pandemic. A decade of war has crippled the country's public services, including its health system. Many Syrians are living in camps and other informal settlements that lack the means to implement the necessary protective measures. Hostilities will serve only to further the destruction of indispensable infrastructure and prevent humanitarian actors from carrying out their life-saving work.

We acknowledge Syria's efforts to suppress the virus, including the implementation of travel restrictions and curfews. However, a balance must be struck between maintaining these necessary measures and scaling up and preserving the vital humanitarian response. Timely, safe, sustained and unimpeded access throughout the country remains essential. We urge all parties to continue to engage in dialogue in this regard.

We reiterate the appeal for the lifting of unilateral coercive economic measures. It is our obligation to ensure that every country is able to have an effective and robust response to COVID-19. Every successful fight against this virus is a victory for the entire international community. It is in our collective interest to ensure that we all have the proper tools to address it.

We take note of the Secretary-General's summary of the report of the United Nations Headquarters Board of Inquiry. We await the appointment of the senior independent adviser to address the Board of Inquiry's recommendations. It is critical that these types of incidents do not recur and that the deconfliction mechanism is improved.

Saint Vincent and the Grenadines maintains that all parties must respect the fundamental principles of armed conflict. The targeting of civilian and humanitarian infrastructure is a reprehensible violation of international law. Impunity for these acts should not be tolerated.

The humanitarian situation in Syria requires urgent action, and the country's overall recovery needs the support of the entire international community. We have a responsibility to assist Syria through positive action so that it can emerge from this conflict to enjoy the peace and prosperity that it justly deserves.

Annex X**Statement by Mr. Xolisa Mabhongo, Deputy Permanent Representative of South Africa to the United Nations**

I thank Under-Secretary-General Mark Lowcock for his comprehensive briefing on the humanitarian situation in Syria.

South Africa remains deeply concerned about the humanitarian situation in Syria. Coronavirus disease (COVID-19) has added a further layer of complexity to this already catastrophic humanitarian situation. Given the multifaceted nature of the humanitarian situation in Syria, we applaud the United Nations, its implementing partners and all of their volunteers and personnel for their continued and committed efforts.

With regard to the impact of COVID-19 on the humanitarian situation in Syria, South Africa fully supports both the Secretary-General's call for an immediate and global ceasefire and Special Envoy Pedersen's call for an immediate nationwide ceasefire in Syria. In order to effectively fight the spread of the virus, we must ensure that the necessary equipment and supplies are available to all those who require it. Continued hostilities and violence will hinder and harm the effectiveness of the Syrian Government's response to the COVID-19 pandemic as well as that of the United Nations.

An important aspect of this response is to focus on preparedness and response planning to minimize the impact of COVID-19 on vulnerable populations, including people living in close proximity to each other in refugee and internally displaced person camps, who have limited access to basic services, such as water, shelter and medical care. In addition, we are concerned that, while all groups are susceptible to the virus, the elderly and people with underlying health conditions are particularly at risk, especially those in the vulnerable refugee and internally displaced person populations. Included in this response is the need for required testing and assessment capacity. We encourage the international community to assist in ensuring that the necessary equipment is available to that end.

Without safe access to the areas where testing and aid is required, however, none of these efforts will be effective. This aspect is important, given that, while sample collection among the thousands of displaced persons living in camps and informal settlements in north-east Syria will be challenging to begin with, collecting samples in areas where hostilities may be ongoing will be even more challenging, if not impossible.

South Africa calls on the relevant authorities to ensure that humanitarian workers have safe, sustained and unhindered access to all parts of Syria. It is also important that border crossings affected by COVID-19-related precautionary measures not have a negative bearing on the delivery of humanitarian assistance to the aforementioned vulnerable communities.

With regard to the general humanitarian situation throughout Syria, while we are all understandably focused on the impact of COVID-19, we cannot forget the dire humanitarian situation that remains ongoing in the country. The need for shelter, water, sanitation, food and protection remains high. The provision of these services, especially in the north-west, depends on the cross-border mechanism's ability to bring in essential assistance to all those who require it. Nevertheless, additional support is required in the north-east of the country. With the closure of the Al-Yarubiyah crossing point in January, gaps have emerged in the provision of necessary aid to this region. In this regard, we call on the parties to make every effort to authorize all available modalities, including aid deliveries from Damascus

and cross-line and cross-border assistance, to ensure that the aid is delivered to the thousands that need it.

While we welcome that the 5 March ceasefire agreement continues to hold, we must also be cognizant of the effect that the hostilities over the past decade have had on civilians and essential civilian infrastructure. The impact on the provision of such basic services as health, education and water has been severe. South Africa reiterates that all parties must adhere to their obligations under international humanitarian law, particularly with regard to the protection of civilians and civilian infrastructure.

In conclusion, South Africa reaffirms its position that, if there is no progress on the political front, the humanitarian situation will further deteriorate, with an increase in destruction and the loss of life. The only way to resolve the conflict in Syria is through negotiation and dialogue. South Africa calls on all parties to exert every effort to fully implement resolution 2254 (2015) and bring peace, security and stability to all of Syria.

Annex XI

Statement by Mr. Kais Kabtani, Permanent Representative of Tunisia to the United Nations

I thank Mark Lowcock, Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, for his briefing.

The Syrian people have suffered a particularly harsh winter of violence and terrorism, with many remaining in dire need of life-saving aid in northern Syria. The coronavirus disease (COVID-19) pandemic outbreak has the troubling potential to compound their suffering and put them at very high risk.

Tunisia considers the appeal by the Special Envoy of the Secretary-General for Syria, Geir Pedersen, for an immediate and sustainable nationwide ceasefire as a crucial guiding point for coordinated humanitarian relief efforts in Syria.

We stress the critical importance of upholding respect for the 6 March ceasefire in Idlib and of restoring calm throughout Syria to enable the principled delivery of humanitarian aid to those areas where it is most needed.

We reiterate our call on all parties to comply with their obligations under international humanitarian law and international law to protect civilians and civilian infrastructure.

We also condemn the killing of humanitarian workers by armed groups in southern Syria. We stress the imperative of ensuring the safety of humanitarian staff who are on the front line of the emergency response, including the COVID-19 health response.

A hybrid approach that combines cross-border and cross-line modalities remains vital to ensure the delivery of humanitarian assistance, especially in northern Syria. We stress the importance for that approach to be incremental in a way that respects, and ultimately restores, Syria's sovereignty, unity and territorial integrity, in line with international law and the principles of humanitarian action.

As the Secretary-General set out in his report (S/2020/327), the COVID-19 crisis has heavily impacted the ability of humanitarian workers to operate, with the closing of most land border crossings into Syria. Cross-border and cross-line humanitarian access therefore needs to be recalibrated, especially in north-eastern Syria, so as to maintain a principled delivery of humanitarian aid, including medical aid. That can be ensured, in particular, by exploring the feasibility of air, land and sea options in collaboration with the Syrian Government and based on the United Nations and its partners' assessment of needs.

It is of crucial importance that all parties set their differences aside and facilitate cooperation with the United Nations across the front lines in order to maintain timely, safe, unhindered and sustainable access, including for medical aid, to populations in need. We urge further cooperation between the Syrian Government and the United Nations, including through its country team, to remedy outstanding approvals of vital medical assistance.

Finally, let me state that, in these trying times, humanitarian considerations must prevail over political agendas to enable an effective mitigation of the COVID-19 pandemic outbreak in Syria and a focus on the true battle of saving lives.

Annex XII**Statement by Mr. Jonathan Allen, Chargé d'affaires of the United Kingdom of Great Britain and Northern Ireland to the United Nations**

I thank Mark Lowcock for his briefing today.

The United Kingdom remains deeply concerned about the potentially catastrophic impact of the coronavirus disease (COVID-19) in Syria. We have heard today that there are 43 confirmed cases, and there are likely already many more that are unknown because of the lack of testing capacity. The 6.2 million internally displaced Syrians face a particularly severe risk. Almost 940,000 of those are living in appalling conditions in the north-west.

The United Kingdom is committed to playing its part to tackle the spread and impact of the coronavirus in Syria and other vulnerable countries across the globe. So far we have pledged more than \$900 million to the international response to help end the pandemic. Of that funding, \$350 million is helping to reduce mass infections in vulnerable countries. Our money will install new hand-washing stations and isolation and treatment centres in refugee camps and increase access to clean water for those living in areas of armed conflict. As the third-largest bilateral humanitarian donor to the Syrian response, with more than \$4 billion spent since the conflict began, we are urgently working to ensure that our significant humanitarian programme across Syria, including, of course, in those areas under the regime's control, can most effectively address the direct and indirect consequences of the pandemic. We welcome the recent increase in cross-border aid into north-west Syria and the maintenance of the ceasefire agreed between Russia and Turkey on 5 March. That is helping humanitarian agencies to meet huge needs in Idlib and to focus on the threat of COVID-19. The evidence is clear that the United Nations cross-border mandate must continue past July.

The coronavirus knows no borders. It knows no front lines. It is a threat to all in Syria and beyond. Preventing it is a matter of humanity, not politics. We must ensure that no part of Syria is neglected in the effort to prevent, and prepare for, the potential spread of the virus.

That is why we are so concerned about north-east Syria. Both the Office for the Coordination of Humanitarian Affairs (OCHA) and the World Health Organization have highlighted a dangerous void. The World Health Organization has confirmed the first death from COVID-19 in that area, and we know from what we have learned everywhere else in the world that community transmission is surely ongoing. Yet there are apparently only 35 intensive care unit beds in the whole of the region.

As OCHA told us in the Security Council on 24 April, humanitarian assistance delivered by land or air has reached only 31 per cent of the health facilities previously supplied across the border via Al-Yarubiyah. That means 69 per cent of health facilities are not receiving the supplies that they need. Moreover, the urgency to address the pandemic is not reflected in the pace of approvals for cross-line assistance. As noted in the Secretary-General's report (S/2020/327), the authorities in Damascus continue to take three to four months to respond to medical delivery requests to the north-east.

With such a pressing need, we must work together. We must put aside previous political differences. We must enable the United Nations to use all modalities for the specific purpose of preventing a health disaster for as long as the coronavirus poses such a threat.

The United Kingdom is proud to stand with many others around the Council table as part of a decisive and coordinated action to tackle the spread and impact of the coronavirus in vulnerable countries across the globe. We must work together to do the same for Syria. We must give the United Nations and its humanitarian partners the best chance of being able to respond to the outbreak in all areas through all necessary modalities. Tackling this global pandemic invokes our common humanity. We should all think carefully about the actions and decisions that we can take.

Annex XIII**Statement by Mr. Pham Hai Anh, Deputy Permanent Representative of the Socialist Republic of Viet Nam to the United Nations**

I would like to thank Mr. Mark Lowcock, Under-Secretary-General for Humanitarian Affairs, for his briefing today.

We join others in expressing our condemnation of all terrorist attacks and our sympathy to the families of the victims.

We take note of the bimonthly report of the Secretary-General on the humanitarian situation in Syria (S/2020/327). We remain gravely concerned about the current circumstances. The well-being of the Syrian people continues to be severely affected by the existing socioeconomic and security challenges. Moreover, the newly emerged coronavirus disease (COVID-19) pandemic would rub salt into their wounds, targeting the most vulnerable, namely, internally displaced persons in overcrowded locations, particularly the elderly, women and children.

It is worrisome to note that the need for humanitarian assistance across Syria remains overwhelming, yet the situation shows no sign of improvement as compared to the previous reporting period. In particular, the majority of internally displaced persons still struggle with food insecurity and the shortage of shelters and other basic needs in north-western Syria. The health sector in the north-east is suffering significant gaps in terms of medical supply shortage. The COVID-19 pandemic exacerbates the suffering and hardships of the people on the ground and the already-difficult conditions for humanitarian and health workers.

We take this opportunity to commend the tireless efforts of humanitarian and health workers in conflict areas.

We would like to stress the following points.

First, full, sustained and unimpeded humanitarian access is of the utmost importance to assisting millions of people. We urge all parties in Syria to fully cooperate with United Nations and other humanitarian partners to ensure humanitarian access. We encourage the Government of Syria to further facilitate the approval process for deliveries of humanitarian aid, especially of medical supplies to the north-east. We share the view that the enhancement of the complementarity of cross-border and cross-line humanitarian operations could better respond to the major demand in all parts of Syria.

Secondly, given the interconnection between the security and humanitarian situations, we would like to reiterate our full support for the calls for a nationwide ceasefire made by the Secretary-General and the Special Envoy on several occasions, most recently in the context of the COVID-19 pandemic. We strongly urge all parties to heed those calls in order to facilitate the pandemic preparedness and response in Syria.

We welcome the current relatively calm situation in north-western Syria and call on all parties to use it to maximize humanitarian efforts and continue to respect international humanitarian law.

Last but not least, we call on the entire international community and all humanitarian partners, in working with Syria, to identify and ensure the delivery of the necessary supplies to fight the humanitarian crisis and the pandemic. That fight is crucial to the political process and the future of Syria.

Annex XIV**Statement by Mr. Bashar Ja'afari, Permanent Representative of the Syrian Arab Republic**

Some States members of the Security Council continue to seek to use this platform as a tool for their foreign policy and for the defamation and usurping of my country's Government under the pretext of pretentious care and lethal affection. These have been manifested in the large number of formal and informal, small and expansive, rhetorical and consultative meetings on the situation in my country on the political and humanitarian, as well as some chemical aspects.

A few days ago, at the initiative of France, the Permanent Representatives of the five permanent members of the Security Council met with the Under-Secretary-General for Humanitarian Affairs to discuss minor aspects related to the humanitarian situation in my country. Today, as on previous occasions, the Council is holding two meetings on Syria.

Naturally, we would have had no objection to that had we seen a reasonable degree of professionalism, objectivity and humanitarian concern in the reports and briefings of the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), and in the positions of the three permanent Western States on the Council and their allies.

Recently, at the United Nations and beyond, we have witnessed a positive movement, on the one hand, and a feverish rush and competition, on the other, to formulate a coordinated collective response to the threat posed by the coronavirus disease (COVID-19) pandemic. The efforts exerted by the international community to address this pandemic have encountered the same dilemma as the work of the United Nations in the field of humanitarian response in my country and other States, namely, politicization and the pursuit of political viewpoints and objectives by some at the expense of the principles of international law and humanitarianism.

Whereas the Secretary-General and senior staff of the Organization — including the Special Envoy to my country, the High Commissioner for Human Rights, the Special Rapporteur on the right to food, the World Health Organization and more than 40 United Nations entities and international organizations — have launched calls for the lifting of unilateral coercive measures against the approximately 2 billion people of the countries affected by these illegitimate and illegal measures so as to enable them to respond to and treat the COVID-19 pandemic, the United States and its European Union allies have sought to scrub any proposals or initiatives and the nine relevant draft resolutions of any language demanding that existing imbalances be corrected and unilateral coercive measures eliminated. Such selfish and exclusionary conduct undermines any humanitarian concerns their respective Governments have claimed.

My country, Syria, in cooperation with friendly countries affected by unilateral coercive measures, has sent numerous letters and appeals to the Secretary-General, the Presidents of the Security Council, the President of the General Assembly and the United Nations High Commissioner for Human Rights to demand the lifting of these inhumane measures, which constitute economic terrorism and a stain on those who impose them. Moreover, our demands have been accompanied by petitions signed by millions around the world to reject these measures. To date, we have not seen any sincere response from the Governments that have imposed these measures, and the United States Administration has only issued what it called a fact sheet, which contains only allegations having nothing to do with the truth and aimed only at covering up flagrant violations of international law, the Charter of the United Nations and human rights instruments.

What humanitarian situation are we talking about today? Would putting an end to the suffering caused by the coercive measures imposed on 2 billion people not be a humanitarian matter? Is lifting the coercive measures imposed against 24 million Syrians less important than the Al-Yarubiyah border crossing, which was made a vital issue by some members of this Council and the hostile Gaziantep OCHA Office? Why have neither France, Germany nor Belgium taken the initiative to call for a Security Council meeting to discuss the impact of coercive measures on Syrians? Why have they not requested that the Secretary-General issue an objective and professional report to the Security Council within 30 days on the impacts of the coercive measures on Syrian State institutions and the daily life of Syrians? It seems that the humanitarian pen held by Germany and Belgium writes only what some of their NATO allies force them to, and that the OCHA pen, which has written 66 reports and hundreds of briefings so far, does not dare to write what angers its operators.

My delegation reiterates the demand to immediately and unconditionally put an end to the unilateral coercive measures that are used by some Member States as a weapon in their sinful war against my country. These measures, among many others, are depriving Syrians of their basic livelihood requirements and preventing medical and health-care institutions from obtaining testing, diagnosis, prevention and treatment kits for this pandemic, as well as ventilators, intensive-care beds, ambulances, laboratory and quarantine-centre equipment and personal protection equipment for health-care workers. In addition, they are unable to obtain medicines for tumours or carry out procedures using medical devices such as MRIs, CT scanners, radiography, ultrasound or endoscopy machines, monitors or oxygen concentrators.

The depriving of the Syrian people and State institutions of such essential equipment, the continuation of the financial, economic and commercial embargo imposed on the Syrian State and the freezing of its foreign assets negate any humanitarian allegations claimed by some States members of the Council. In that context, I reiterate our gratitude to Russia and China for standing with Syria in these difficult times.

A few days ago, my country sent the Council an official letter (S/2020/333) regarding its position on the sixty-sixth report of the Secretary-General on the implementation of resolutions 2139 (2014), 2165 (2014), 2191 (2014), 2258 (2015), 2332 (2016), 2393 (2017), 2401 (2018), 2449 (2018) and 2504 (2020) (S/2020/327). My delegation stresses the ineffectiveness of those reports, which do not dare to clearly and truly address the practices of countries sponsoring terrorism. The reports do not mention the Turkish occupation's violations of international law or its numerous crimes against civilians. They say nothing about how the international coalition destroyed Raqqa city, killed thousands of its people, burying them under the rubble, and committed numerous war crimes and crimes against humanity. The Secretariat's reports do not mention how the Turkish regime blackmails Europe using the suffering of refugees, nor do they say anything about the fact that the Turkish Red Crescent and the terrorist groups it supports strive to prevent the Syrian Red Crescent from working in north-western Syria, while American occupation forces and their proxy terrorist militias prevent it from working in north-eastern Syria and deprive Syrians in the Government-controlled environs of Raqqa of electricity.

Again, the Secretariat does not report on how the American occupation forces and its affiliated terrorist group Maghawir Al-Thawra resist ending the suffering of displaced people in Rukban and dismantling that infamous camp. The reports do not mention how the European countries concerned refuse to repatriate their foreign-terrorist nationals. Finally, the reports say nothing about how the Turkish occupation forces destroyed the village of Al-Sharkrak after displacing its people,

nor do they mention how the Turkish regime and the American occupation loot the wealth, resources, oil and antiquities of the Syrian people.

All 66 OCHA reports are biased and lack credibility. They are flagrantly selective and overpoliticize the humanitarian situation. Therefore, they are worthless and a waste of the time, effort and resources of the United Nations.

Finally, we in Syria are not only facing COVID-19; we are also facing a more dangerous virus: terrorism. Some countries have insisted on ignoring it for too long and have manipulated the facts, falsely calling terrorists “moderate armed opposition groups” or “non-State armed elements”. This virus has many names, including Hayat Tahrir Al-Sham, Huras Addin, Sultan Murad, Kataeb Al-Zunki and Maghawir Al-Thawra, and many more. That is the virus that we have been facing for nine years.
