

Aid Security and COVID-19

Latest available information on COVID-19 developments impacting the security of aid work and operations. Access the [COVID-19 Aid Security Overview Data on HDX](#) to see the events referred to in this bulletin.

Bulletin 6
22 May 2020

The Use of Explosive Weapons in Populated Areas

The effect of airstrikes, shelling and IEDs on health care and the COVID-19 health response in March and April 2020.

On 23 March 2020, [UN Secretary General António Guterres](#) called for a global ceasefire amid the COVID-19 pandemic. Reminding the world that in war-ravaged countries health systems have often collapsed and that health professionals have been targeted, he called on warring parties to cease hostilities, silence guns, stop the artillery, and end airstrikes on civilians.

[Turkey and Russia](#) had already agreed to a ceasefire in Syria's Idlib province on 05 March after violence escalated that left scores of Turkish and Syrian soldier's dead. The [Houthi rebels, Yemeni government, and Saudi Arabia](#), which leads the military campaign in support of the Yemeni government. initially responded positively to the UN appeal for a ceasefire. In [Libya](#), the main protagonists in the conflict also initially welcomed the UN call for a ceasefire.

However, [Insecurity Insight's](#) monitoring of events affecting health care in [March](#) and [April](#) 2020 reveal that the use of explosive weapons against health care facilities and personnel continued in Libya and Yemen throughout this period, with potentially devastating consequences for an effective COVID-19 response. Only in Syria, by contrast, has the ceasefire had the effect of reducing bombings of hospitals and attacks on health responders.

Damage from airstrikes forced the closure of health facilities. At least one of them was treating COVID-19 patients. Three COVID-19 quarantine centres were reportedly hit by airstrikes. Loss of trained health workers and destruction of vital health equipment during a pandemic weakens the ability to respond effectively. These reverberating effects of explosive weapons use continue beyond the day the damage occurred. The full impact of the consequences of the use of explosive weapons in during the pandemic will only become apparent with time.

This bulletin from the Aid Security and COVID-19 series highlights the use of explosive weapons in populated areas in Syria, Yemen, and Libya during March and April 2020.

It is based on publicly available reports of incidents that injured or killed workers, damaged health facilities or health transport at the time of the COVID-19 response.

Event descriptions have not been independently verified. The reported events in this bulletin are unlikely to be a complete record of all events that affected health care.

Visit our [Aid Agency and COVID-19 website](#) for more security related information..

Join our [Aid Agency and COVID-19](#) mailing list

Follow us on [Twitter](#) and [Facebook](#)



Libya

Warring parties swiftly resumed hostilities and violence affected health care:

- **27 March 2020**: In Abugrein area, Misrata district, Libyan National Army (LNA) shelling wounded two paramedics and destroyed an ambulance.

Between 03 and 29 April, fighting damaged at least seven hospitals, killed a neurosurgeon in his home in Tripoli, and led to the closure of approximately 30 health facilities. Most of the damage is suspected to have been caused by LNA artillery use:

- **03 April 2020**: In Tripoli city and district, Tripolitania region, LNA shells landed near Tripoli University Hospital, injuring two civilians.
- **06 April 2020**: In Tripoli city and district, Tripolitania region, LNA shells hit the Al Khadra General Hospital, injuring at least one health worker, and damaging the facility.
- **07 April 2020**: In Tripoli city and district, Tripolitania region, rockets allegedly fired by the LNA hit Khadra Hospital, resulting in the injury of one civilian.
- **13 April 2020**: In the Shurfat Al Malaha neighbourhood, Tripoli city and district, Tripolitania region, unidentified airstrikes hit a medical dispensary, resulting in casualties.
- **16 April 2020**: In Ain Zara town, Tripoli district, Tripolitania region, suspected LNA shells landed on the home of a male neurosurgeon, killing him.
- **17 April 2020**: In Ain Zara town, Tripoli district, Tripolitania region, shelling severely damaged the Royal Private Hospital. No injuries were reported.
- **20-21 April 2020**: In Wadi al Rabie settlement, Tripoli district, Tripolitania region, LNA grad rockets struck two Field Medicine and Support Center (FMSC)-operated field hospitals, causing damage to both facilities, and injuring five paramedics.
- **28 April 2020**: In Tripoli city and district, Tripolitania region, LNA artillery reportedly targeted the Royal Clinic, reportedly destroying it.
- **29 April 2020**: At Mitiga Airport, Tripoli city and district, Tripolitania region, LNA airstrikes allegedly struck the Military Medical Authority headquarters, resulting in casualties.
- **29 April 2020**: In Tajoura municipality, Tripoli district, Tripolitania region, the Weryemma Polyclinic was hit by shelling from an unidentified source.

Reported closure of health facilities in the context of explosive weapons use and impact on COVID-19 patients:

- **13 April 2020**: Health services at the Al-Aylat Hospital, the Oncology Hospital, the Sabratha Teaching Hospital, and the Sorman Hospital and 26 other primary health centres in the Tripoli area were reportedly suspended.
- **17 April 2020**: Health services at the Royal Private Hospital was reportedly suspended.
- **28 April 2020**: The Royal Clinic was reportedly destroyed.
- **29 April 2020**: The maternal and newborn services at the Weryemma Polyclinic were suspended after a direct hit from shelling.
- According to reports, the Al Khadra hospital, hit by airstrikes on 06 and 07 April, was treating COVID-19 patients. Current evidence suggests that a range of treatments only available in hospitals can save the lives of COVID-19 patients. Closure of hospitals will increase the COVID-19 death toll, as well as deaths from other causes.

Destruction of ambulances and planes carrying medical equipment:

Reported use of explosive weapons in Tarhuna, Tininai, and Jabal al Gharbi district affecting health care in April 2020. These events were attributed to forces of the Government of National Accord (GNA) and Turkey:

- **05 April 2020:** The Government of National Accord (GNA) Air Force targeted an LNA airplane in the area of Tarhuna (Almagreb). The LNA spokesman said the airplane was carrying medical assistance against coronavirus for several western Libyan cities.
- **11 or 12 April 2020:** An Alleged Turkish or GNA drone strike hit an ambulance killing at least one paramedic near Tininai town, Misrata district.
- **29 April 2020:** In Abu Al Ghurab area, Jabal al Gharbi district, Tripolitania region, GNA or Turkish airstrikes allegedly destroyed two ambulances, killing two people.

Reported destruction of COVID-19 equipment

Equipment needed for the COVID-19 response was reportedly affected by the **violence**. Specialised equipment, as well as personal protective equipment are vital for an effective COVID-19 response and the lack of such equipment will increase the death toll and put health workers at risk from infection.

Yemen

The Houthis inside Yemen did not accept the Saudi-led coalition's previous ceasefire announcement. Violence has continued in several provinces, despite the **unilateral extension** of the ceasefire by the **coalition**. According to **ACLED**, during Week 5 of the Yemen ceasefire, 'at least 49 air raids with up to 183 individual airstrikes' were recorded.

Explosive weapons use from airstrikes or artillery damaged at least four hospitals/medical centres and three COVID-19 quarantine centres in four governorates (Al Hudaydah (3 events), Al Bayda, Ma'rib and Taiz city 1 each). An IED damaged an ambulance in Abyan governorate:

- **07 March 2020:** In Lawdar town and district, Abyan governorate, an ambulance drove over an IED, injuring seven civilians on board.
- **13 March 2020:** In Taiz city and governorate, artillery shells of unidentified origin hit the Aththaorah Hospital.
- **20 March 2020:** In Al Hali district, Al Hudaydah governorate, artillery shells of unidentified origin hit the May 22 Hospital.
- **30 March 2020:** In As Salif district, Al Hudaydah governorate, airstrikes of unidentified origin hit a COVID-19 quarantine centre.
- **05 April 2020:** In Al Hawak district, Al Hudaydah governorate, artillery shells of unidentified origin hit an unnamed medical.
- **08 April 2020:** In Al Malagim district, Al Bayda governorate, airstrikes from an unidentified source hit two medical quarantine centres.
- **21 April 2020:** In Majzar district, Ma'rib governorate, artillery shells of unidentified origin hit an unnamed hospital.

Impact of airstrikes on COVID-19 quarantine centres

The airstrikes that affected quarantine centres will affect people's willingness to remain in quarantine centres and compromise quarantine measures designed to stop the spread of COVID-19.

Syria

Observers are optimistic that the ceasefire in Idlib may be holding. Airstrikes immediately prior to the start of the ceasefire directly affected health care:

- **02 March 2020:** In Binnesh city, Idlib governorate, Russian warplanes fired missiles near the Islamic Medical Complex Hospital, damaging it. They later fired at a Syrian Civil Defense (SCD) ambulance travelling to the site of a previous bombing by the pro-Syrian government alliance, damaging the vehicle.

As of the end of April 2020, there are no further reports of airstrikes against or shelling of Syrian medical facilities:

- **Airwars** reported that from March 7th onwards, both sides largely maintained the ceasefire. Airwars researchers reported no civilian harm allegations attributed to Russian airstrikes after March 5th, but did report a rise in incidents of civilian harm, allegedly caused by shelling by Turkish elements in the month of March, as well as an increase in civilian harm due to Kurdish counterfire. The **US and Israel** also continued to carry out airstrikes against Iranian-backed groups, but these actions did not appear to affect health care.
- The Syrian American Medical Association (SAMS) reported shelling near the ceasefire lines. While several incidents injured and killed civilians, the reports do not indicate a direct effect on health care.

Recommendations for Research

- Monitoring of the effects of explosive weapons use on health infrastructure needs to be strengthened.
- Better information on the reverberating effects of such damage and destruction on all health outcomes are needed.
- The impact of explosive weapons use on the COVID-19 pandemic response needs to be better understood and acted upon.

Campaign Action

The use of explosive weapons in populated areas (EWIPA) frequently leads to the destruction of health infrastructure which has impacts on the health outcomes for the populations living in the affected areas. The use of EWIPA has been discussed at the UN Security Council's Protection of Civilians and its Children and Armed Conflict debates, as well as at the UN General Assembly First Committee, the Convention on Certain Conventional Weapons, and other forums. Over 100 states, several multilateral organisations, and consecutive UN Secretary-Generals and other high-level UN officials, have **expressed concern** about the humanitarian harm caused by the use of EWIPA. The **ICRC** has provided several reports and policy advice. The International Network on Explosive Weapons (**INEW**) calls for action to prevent human suffering from the use of explosive weapons in populated areas (EWIPA), including through the development of a political declaration and other policy and operational measures. The third informal consultation in Geneva towards the development of a political declaration to address the humanitarian harm arising from the use of explosive weapons in populated areas, has been postponed due the global pandemic of COVID-19.

This document is published by Insecurity Insight. This document is funded by the H2H Fund, which is supported by UK aid from the UK government. The H2H Network, which stands for 'humanitarian-to-humanitarian' network, consists of approximately 50 organisations that provide high-quality and integrated services to support other humanitarian responders. The network supports members as they apply cutting edge expertise, techniques and innovation to improve programming and outcomes. The H2H Fund is a network service that supports members to quickly provide their services in specific emergencies. Suggested citation: Insecurity Insight. 2020. Bulletin 6: Aid Security and COVID-19. May 2020. Switzerland: Insecurity Insight.

