

# SYRIA

## Violence Against Health Care in Conflict 2023



# Letter from the Chair



The year 2023 was a grim one for violence inflicted on health care. In 2022, the Safeguarding Health in Conflict Coalition identified the highest number of incidents since we began reporting. Yet in 2023 the number was 25% greater, exceeding 2,500.

The intensity of conflicts characterized by pervasive attacks on health care in recent years declined somewhat in 2023, including in Syria, Yemen, and the Tigray region of Ethiopia. As a result, it might also have been expected that the global trend of violence against health care would turn downward. Instead, from the first days of two new and catastrophic wars, one in Sudan and the other between Israel and Hamas, health care came under ferocious assault. In both conflicts warring parties killed health workers, attacked facilities, and destroyed health care systems. Meanwhile, attacks on health care in Myanmar and Ukraine continued at a relentless pace, in each case exceeding 1,000 since the start of the conflicts in 2021 and 2022, respectively. In many chronic conflicts, fighting forces continued to kidnap and kill health workers and loot health facilities.

At the same time, new and disturbing trends emerged. In Burkina Faso, Ethiopia, Gaza, Lebanon, Myanmar, Sudan, Syria, Ukraine, and Yemen combatants employed drones to attack health clinics, hospitals, and ambulances. In many conflicts, combatants violently entered hospitals or occupied them as sites from which to conduct military operations, leading to injuries to and the deaths of patients and staff. In many conflicts, the conduct of combatants revealed open contempt for their duty to protect civilians and health care under international humanitarian law (IHL). Israel, while purporting to abide by IHL, promoted a view of its obligations that, if accepted, would undermine the fundamental protections that IHL puts in place for civilians and health care in war.

The one consistent feature of the attacks was continued impunity for these crimes. For more than a decade, despite their repeated commitments, governments have failed to follow through on these commitments and reform their military practices, cease arms transfers to perpetrators, and bring those responsible for crimes to justice.

We need a new approach, starting with stronger leadership from UN agencies and governments willing to join with civil society and the health care community to take far more assertive action to end the scourge of violence against health care. Among other steps, they can press prosecutors domestically and internationally to bring cases of war crimes and crimes against humanity committed against health care, to develop political support for special tribunals to circumvent UN Security Council members' vetoes of referrals to the International Criminal Court, and restrict the sale of arms to forces that commit crimes.

There are some sources of hope. After years of lassitude, the World Health Organization has spoken forcefully against vicious assaults on health facilities and health workers. Civil society groups are exerting pressure to stop arms transfers to perpetrators of violence, while some militaries have launched initiatives to reduce civilian casualties in war. Leaders must build on these initiatives. Ending the suffering of millions of people depends on their doing so.

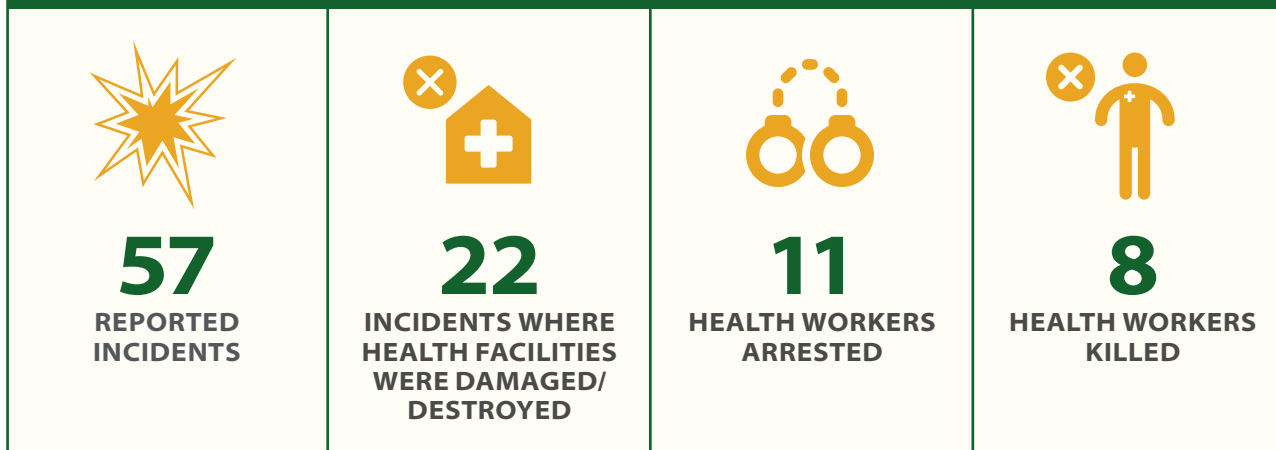
A handwritten signature in black ink, appearing to read "Len Rubenstein". The signature is fluid and cursive.

Len Rubenstein  
*Chair, Safeguarding Health in Conflict Coalition*

[↓](#) [Executive Summary](#) | [Full Report](#) | [Recommendations](#) | [Methodology](#) | [Data](#)



## REPORTED INCIDENTS AND MOST COMMONLY REPORTED CONCERNS



↓ Source: 2023 SYR SHCC Health Care Data

## OVERVIEW

The Safeguarding Health in Conflict Coalition (SHCC) identified 57 incidents of violence against or obstruction of health care in Syria in 2023, compared to 45 in 2022. In these incidents, health facilities were damaged or destroyed 22 times, 11 health workers were arrested, and eight others were killed. This factsheet is based on the dataset [2023 SYR SHCC Health Care Data](#), which is available for download on the [Humanitarian Data Exchange \(HDX\)](#).

## THE CONTEXT

The protracted crisis in Syria has been ongoing for 13 years, during which health infrastructure has consistently come under attack, devastating the health care system. In both the northwest and northeast of the country, health facilities remained heavily damaged by the ongoing conflict, while many lacked medical supplies or qualified staff.

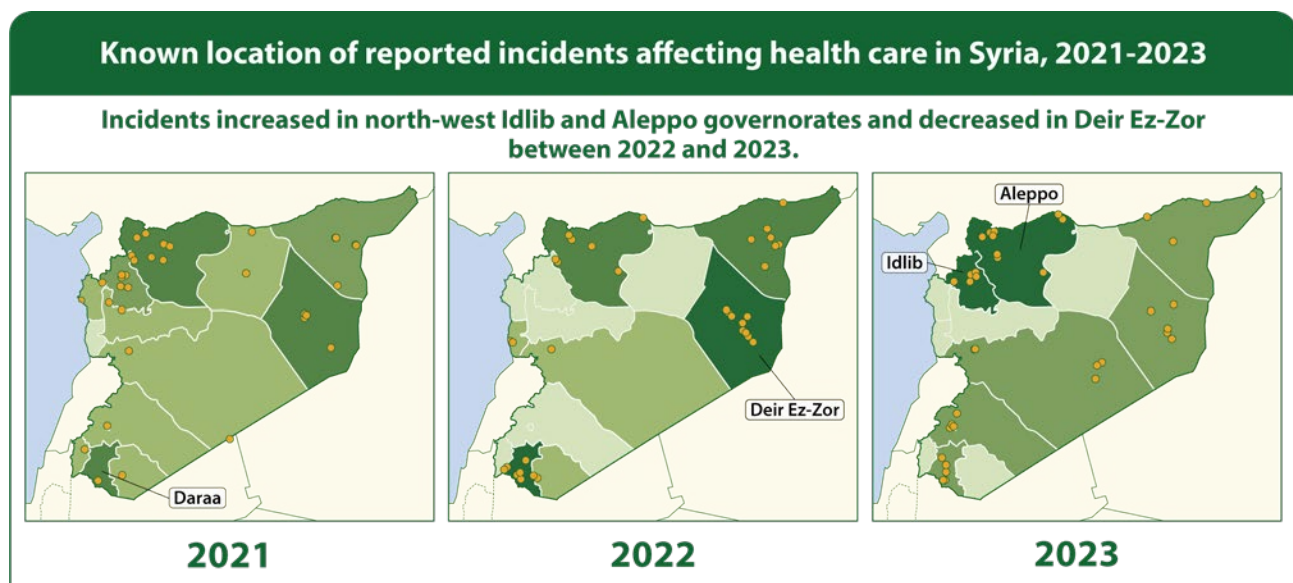
According to the [Armed Conflict Location & Event Data Project](#),<sup>1</sup> although there was a small decrease in political violence in 2023 compared to 2022, attacks on health care continued across the country. In early October, the [Turkish Armed Forces \(TAF\)](#) carried out extensive bombing campaigns in Al-Hasakah and Aleppo governorates, while the [Syrian Armed Forces \(SAF\)](#) carried out air strikes in Idlib governorate. These bombing campaigns damaged and destroyed both health infrastructure and other civilian infrastructure, killing civilians, including health workers.

Humanitarian needs across the country were substantial, with an estimated 15.3 million people requiring humanitarian assistance in 2023, while a changing geopolitical context further exacerbated the difficulties faced by humanitarian operations.



## VIOLENCE AGAINST OR OBSTRUCTION OF HEALTH CARE IN 2023

Contrary to the overall decrease in reported violence in Syria, incidents of violence against or obstruction of health care increased in 2023. This was primarily due to increased explosive weapons use during October. Cases were reported in eight governorates in 2023, compared to six the previous year. Reports rose sharply in northwest Idlib and Aleppo governorates and decreased in Deir ez-Zor. Reports were also recorded in the government-controlled Damascus and Rif Dimashq governorates. Nearly two-thirds of incidents took place at health facilities.



Cases of damage to or the destruction of health facilities nearly doubled in 2023 compared to the previous year, and all but one involved the use of explosive weapons. A similar number of health workers were killed, kidnapped, and arrested in 2023 as in 2022. As in previous years, the majority of incidents affected health care providers working in national health structures in 2023. NGOs were directly affected in eight incidents and a private health provider once.

Most incidents of violence against or obstruction of health care were attributed to the SAF and TAF using explosive weapons in Aleppo, Idlib, and Al-Hasakah. Syrian Public Security Police, the SAF, Turkish police forces, and the Turkish National Intelligence Organization arrested health workers in northwest Syria. Two incidents in which one doctor was arrested in his home and another doctor was assaulted at a private hospital were attributed to the Syrian National Army (SNA), a Turkish-backed non-governmental armed group, and the Al-Hamza Division (which forms part of the SNA) in Afrin district, Aleppo governorate.<sup>2</sup> In northeast Deir ez-Zor, Syria Democratic Forces (SDF), the Kurdish-led armed group, stormed a hospital, forcibly removed health workers, and closed the hospital.<sup>3</sup> Fighters on motorbikes from the non-state group Islamic State attacked the home of a doctor with firearms.<sup>4</sup> In other attacks, attackers remained unidentified.

### Explosive weapons use

Incidents involving explosive weapons use affecting health care doubled in 2023 compared to 2022. Most were reported in October, reflecting a marked escalation in the observed patterns of continued violence

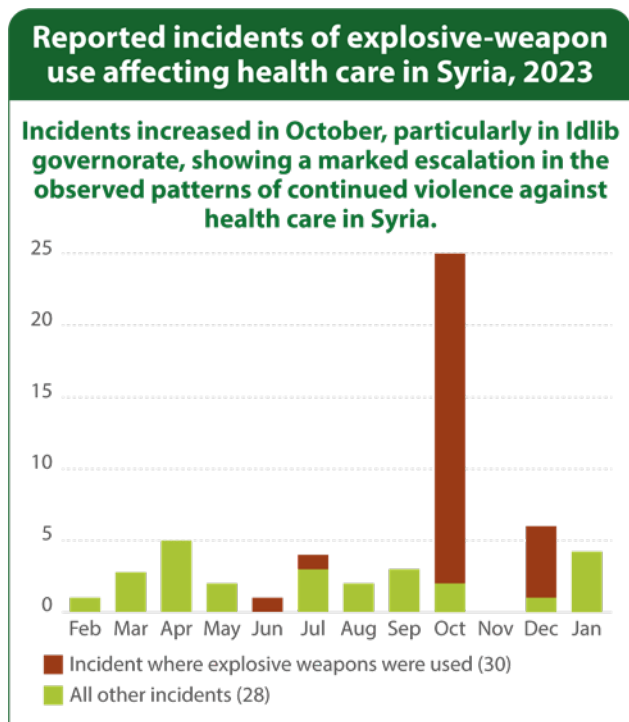


against health care in Syria. At least three health facilities were completely destroyed and 19 damaged, and ten ambulances were damaged or destroyed. In addition, four health workers, including a nurse, a paramedic, a doctor, and an LNGO volunteer, were killed.

Ten incidents were attributed to Turkish forces in Al-Hasakah and Aleppo. Most involved air-launched explosive weapons use in October and December with one involving artillery shelling damaging a hospital and injuring four civilians in Tel Refaat city (Aleppo) in June.<sup>5</sup> Turkish forces used drones armed with explosives destroying and damaging health facilities, including Meshtanour Medical Centre and a pharmacy, and killing a doctor. Turkish forces airstrikes damaged a COVID-19 hospital in Ain Al-Arab/Kobani (Aleppo).<sup>6</sup>

Twenty incidents involving explosive weapons use affecting health care were attributed to SAF artillery shelling, missiles, or unspecified explosives. Most were recorded in the northeastern towns of Idlib and Ariha in Idlib governorate, with two in Aleppo.<sup>7</sup> In these incidents, 13 health facilities, including Al-Thawra Health Center, a dialysis hospital, Idlib National Hospital, and Idlib University Hospital, were damaged and three health workers were killed, including an LNGO health volunteer killed by an SAF double-tap air strike in Aleppo.<sup>8</sup> As a result of this escalation in violence, 19 hospitals in Idlib governorate suspended services after SAF ground forces fired over 150 artillery shells and missiles into the area.

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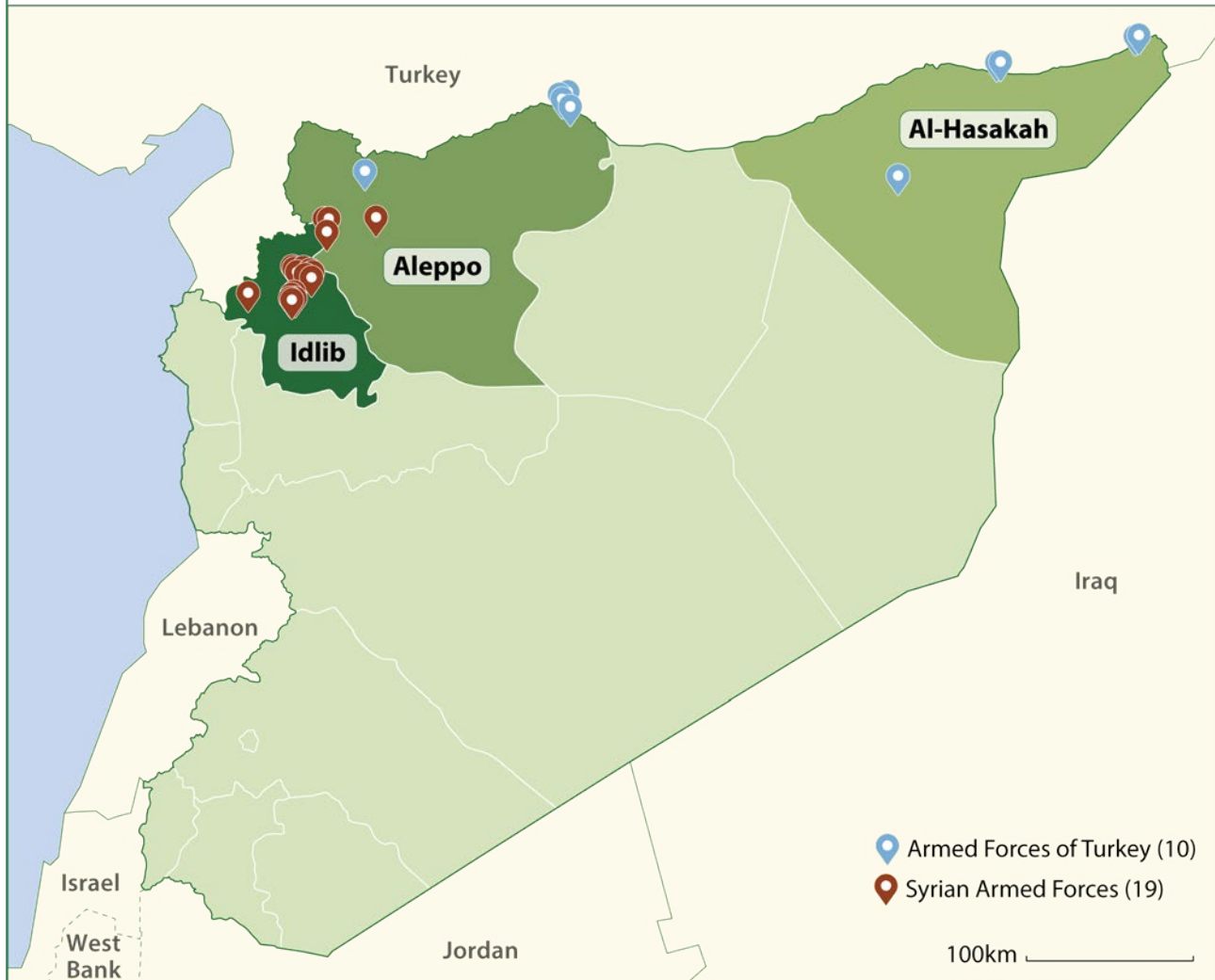
## Health workers kidnapped, killed, and arrested

At least 11 health workers, including doctors, nurses, pharmacists, hospital staff, and security guards, were arrested or detained in eight incidents in 2023, compared to 20 in nine incidents in 2022. Seven were arrested by the SNA, the SAF, Turkish National Intelligence forces, and Turkish police forces in Aleppo governorate, and four health workers were arrested by Turkish police forces and the SAF in Al-Hasakah and Deir ez-Zor governorates. Four arrests took place inside health facilities. Three doctors were arrested at their homes in Aleppo governorate and a pharmacist was arrested at a government-controlled checkpoint in Aleppo governorate while on his way to purchase medicines for his pharmacy from government-controlled areas.<sup>11</sup> In Aleppo and Al-Hasakah, three health workers were arrested on allegations of collaborating or affiliating with armed groups. In other cases, the reasons for the arrests were unclear. The fates of all the arrested victims were not recorded.



## Reported incidents of explosive weapons use affecting health care in Syria, 2023

Missiles, rockets and shelling by Syrian forces damaged health facilities 12 times in Idlib. Airstrikes by Turkish armed forces damaged eight health facilities in northeastern Syria.



Eight health workers were killed in eight incidents in 2023, the same number as in 2022. Along with the previously mentioned four health care staff killed by explosive weapons use, a dentist, doctor, and medical laboratory technician were shot and killed by unnamed perpetrators in Daraa and Damascus, and a doctor was killed during clashes between the SAF-affiliated Fayez al-Radi group and Syrian military forces in Daraa.<sup>12</sup>

Five health workers were kidnapped by unnamed perpetrators in five incidents in 2023, the same as in 2022. Health worker kidnappings were spread over four governorates and took place at health facilities, including Al Razi Hospital in Homs city, during road travel, and from their homes. Two of the five kidnapped staff were released after their families paid ransoms and another was released after being held for two days.<sup>13</sup> The fates of the remaining staff members were not recorded.



## IMPACT ON HEALTH SYSTEMS AND ACCESS TO HEALTH CARE

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A [recently published study](#) by Abbara et al. illustrates the impact of the ongoing attacks on health workers in northern Syria. Analysis of qualitative interviews with 40 health workers who had been exposed to violence against health care identified the following issues:

- Health workers reported significant psychological harms, including concerns related to the risk of injury or death for them and their families, along with the onset of burnout, exhaustion, and symptoms of stress. “Actually, psychological wounds are more difficult than physical injuries” (participant 7, a physician).
- The nature of the attacks, including double-tap and repeated attacks on single facilities, resulted in “anticipatory stress” among health workers: these tactics appeared to increase the fear and distress that health workers experienced in the aftermath of an attack on a health facility, who are worrying about additional attacks while they are caring for the victims of the first.
- In addition, health workers were also impacted by the many issues that accompanied conflict in their communities, including food and fuel shortages, unstable pay, attacks on civilians, and their own health issues.
- The research notes possible gendered impacts of attacks on the health workforce: female health workers reported greater concern from their families over their personal security at their workplaces and “face additional pressures as a minority in the workforce, despite a high demand for services such as nursing and gynecology.”
- Health workers reported using several personal coping mechanisms to deal with the compounding impacts of the violence, including behavioral, cognitive, emotional, and religious coping. A strong sense of “solidarity” was reported among the interviewed participants, and workers noted the importance of “bonding or talking with colleagues as a means of providing emotional and social support.”
- The study notes health workers’ needs for psychosocial and mental health support being largely unmet, due to the stigma related to admitting the need for psychological support and the lack of available services.

A [forthcoming study](#) by Burbach et al., based on a quantitative analysis of the impact of attacks on 18 health facilities in northwest Syria, finds that, on average, the number of out-patient visits to the facilities dropped by half the day after an attack. A reduction in such visits continued for more than five weeks. The number of births at the hospital decreased by almost 25% in the days after the attack, illustrating the additional barriers preventing pregnant women from accessing the care they need to safely give birth.

A [study](#) published by the International Rescue Committee, Physicians for Human Rights, the Syrian American Medical Society, and Syria Relief & Development showed that, among other services, sexual and reproductive health (SRH) care has been limited by the fact that many health care facilities have been built in or relocated to geographic areas far from the front lines, limiting access to SRH services for communities close to conflict zones. The study also showed that in areas where SRH services are largely unavailable, affected populations adopted harmful coping practices, including postponing essential SRH visits and forgoing medication.



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- 1 Armed Conflict Location & Event Data Project (ACLED) database attribution policy, accessed April 3, 2024.
  - 2 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 SYR SHCC Health Care Data. Incident numbers 44846; 44843.
  - 3 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 SYR SHCC Health Care Data. Incident number 44845.
  - 4 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 SYR SHCC Health Care Data. Incident number 45029.
  - 5 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 SYR SHCC Health Care Data. Incident number 45010.
  - 6 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 SYR SHCC Health Care Data. Incident number 41349.
  - 7 The location of one incident was not recorded.
  - 8 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 SYR SHCC Health Care Data. Incident number 40036.
  - 9 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 SYR SHCC Health Care Data. Incident number 45010.
  - 10 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 SYR SHCC Health Care Data. Incident number 41349.
  - 11 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 SYR SHCC Health Care Data. Incident number 40343.
  - 12 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 SYR SHCC Health Care Data. Incident number 41792.
  - 13 Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2023 SYR SHCC Health Care Data. Incident numbers 41781, 38253; 37170.

# SAFEGUARDING HEALTH IN CONFLICT

The Safeguarding Health in Conflict Coalition is a group of more than 40 organizations working to protect health workers and services threatened by war or civil unrest. We have raised awareness of global attacks on health and pressed United Nations agencies for greater global action to protect the security of health care. We monitor attacks, strengthen universal norms of respect for the right to health, and demand accountability for perpetrators.

[www.safeguardinghealth.org](http://www.safeguardinghealth.org)

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