

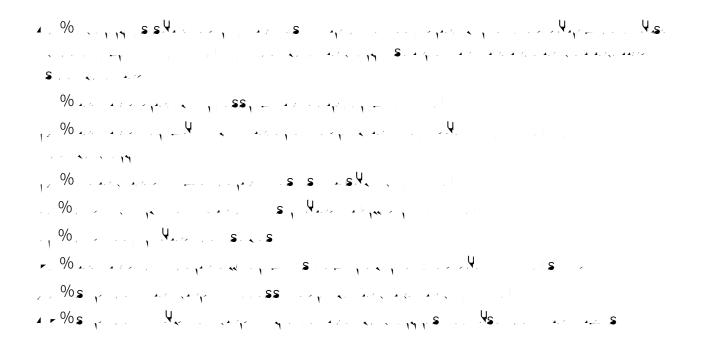
"For our people at least, for the situation to become safe, we want the hospitals to be safe."

-Basel, hospital administration worker, Idlib

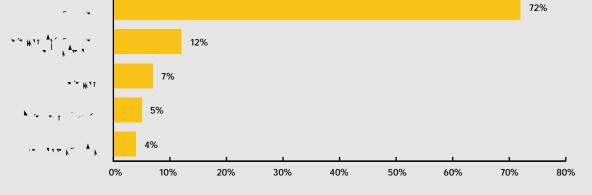
ACKNOWLEDGEMENTS

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RESPONSES FROM IRC'S ASSESSMENT OF 237 CIVILIANS AND 74 HEALTH CARE WORKERS IN NORTHWEST SYRIA







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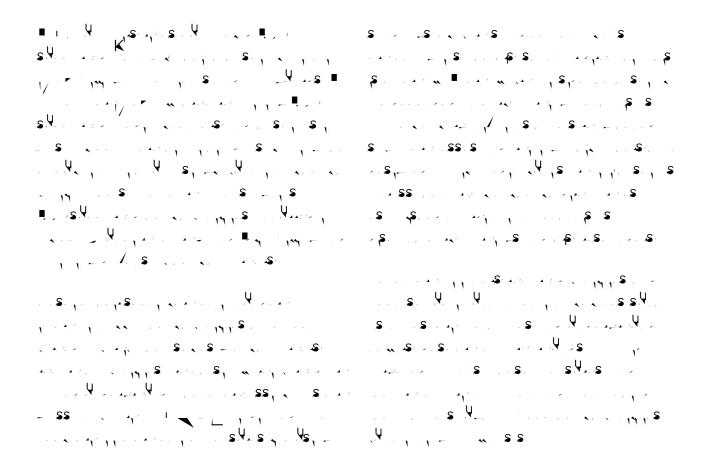
Attacks on health care: a war strategy with terrible consequences

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Kiwan Charitable Hospital is a hospital which provided free health services and was supported by the IRC's partner organization, SEMA in northwest Syria. The hospital was subjected to several attacks throughout the conflict and it continued functioning. However in 2019 it was hit by an airstrike that left the hospital so damaged that it was impossible for it to continue functioning. PHOTO: frontlineinfocus



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Covid-19 in Syria: a double emergency

The world's strongest health systems were quickly overwhelmed by Covid-19. In Syria, efforts to combat the coronavirus pandemic have been severely hamstrung by the destruction of health care facilities and restrictions on cross-border access. As Covid-19 cases climbed to an alarming 41,406 in January 2021—32 a more than five-fold increase in three monthsinsufficient testing capacity belies the true scale of the virus' spread and limits capacity for prevention and response.33 Only three testing laboratories are operational in northwest Syria, and just 162 ventilators and 234 ICU beds across 12 hospitals must provide for a population of four million residents.³⁴ With many clinics rendered out of service by attacks, Dr.

Too afraid to access health care

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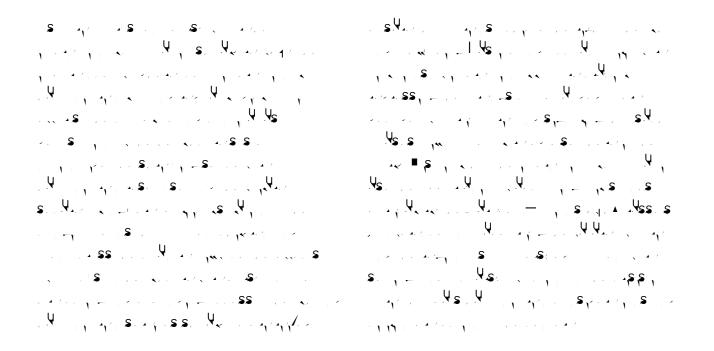
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- Dr. Sayed, general surgeon, Idlib

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Surgeons at work at Idlib Surgical Hospital, a hospital supported by the IRC and run by SEMA in northwest Syria. PHOTO: Khaled Idlbe/IRC



2. Provision of healthcare

4. Accountability

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4. Accountability Continued

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