



# UPDATED BRIEFING ON SIEGES ACROSS SYRIA

## 1. INTRODUCTION

Scores of thousands of civilians across Syria, including children, have been forced to endure a life under siege, with all the hardship and privations that entails. Most of the sieges have been imposed and maintained by military and security forces loyal to the government of President Bashar al-Assad. Others have been mounted by opposition and other non-state armed groups. Both sets of sieges have been marked by the commission of war crimes and serious human rights abuses by the besieging forces and sometimes by those under siege, as at Aleppo Central Prison (see below).

Government forces, in particular, have continued to carry out indiscriminate attacks, bombarding populated civilian areas using explosive weapons with wide impact, including artillery shells and barrel bombs and other air-delivered munitions. Opposition fighters have also carried out indiscriminate attacks. As well, in imposing and maintaining the sieges, both government forces and non-state armed groups have sought to deprive the overwhelmingly civilian population within the besieged areas of the basic necessities of life, by cutting water and power supplies, denying access to food supplies, medicine and medical care, and preventing the movement of people into and from the areas under siege. On some occasions, the besieging forces have permitted humanitarian organizations, notably UN agencies and the Syrian Arab Red Crescent (SARC), to enter areas under siege to deliver critically needed humanitarian aid to the beleaguered; but such deliveries have tended to be the exception – most of the time, the besieging forces have prevented such aid deliveries.

This briefing updates Amnesty International's *Briefing note on sieges across Syria* of 16 April 2014, specifically for the period between 10 April 2014 and 5 June 2014.<sup>1</sup> It includes information on ongoing sieges imposed by government forces on Yarmouk, Moadamiya, Daraya and Eastern Ghouta in the Damascus area and ongoing concerns related to the now lifted siege on the Old City of Homs. It also includes information on two of the sieges imposed by non-state armed groups: on Aleppo Central Prison in the city of Aleppo, which government forces breached in late May 2014; and Zahraa and Nobel in the Aleppo Countryside governorate.

### 1.1 SOURCES

This briefing is based on information that Amnesty International has obtained from a wide range of sources. These include interviews and communications with current and former residents of besieged areas, medical workers, humanitarian relief personnel, human rights activists and representatives of international agencies and organizations with a presence in Syria, as well as information from a range of public information sources including media outlets, websites and other public-facing information of UN bodies and agencies, other humanitarian agencies and human rights organizations.

Amnesty International's recommendations, addressed to the parties to the conflict in Syria and to the international community at large, are contained in the last section of this briefing.



## 2. AREAS UNDER SIEGE

### 2.1 DAMASCUS AND DAMASCUS COUNTRYSIDE

#### 2.1.1 YARMOUK

Forces loyal to the government of President Bashar al-Assad maintained their siege of the Yarmouk neighbourhood of southern Damascus, in force since December 2012. They continued to deny some 20,000 civilians who remain within Yarmouk access to adequate food and medical care while also preventing them from leaving the besieged area.<sup>2</sup>

Government forces continued periodically to shell Yarmouk using mortars and artillery shells. Although the shelling was less frequent and extensive than in previous months, it resulted in the killing and injury of civilians. On 3 June, for example, three civilians were killed in the shelling of an area near a garden which a medical worker inside Yarmouk told Amnesty International is used solely by women and children in what appeared to be an indiscriminate attack. According to a medical worker in Yarmouk, one man died instantly and two men died subsequently from internal injuries for which adequate care could not be provided. He added that at least two women and a child were among those injured. Injuries were particularly bad, he told Amnesty International, as people were walking around freely and had not taken shelter. Shrapnel broke one person's jaw and several teeth and otherwise disfigured their face, caused another to lose the side of their face and required a third to have fingers amputated.

As well, government forces engaged in armed clashes with fighters belonging to non-state armed groups, particularly Jabhat al-Nusra and the Islamic State in Iraq and al-Sham (ISIS), most of whom had re-entered Yarmouk in January and February 2014.

As of 3 June 2014, according to Amnesty International's research, 271 individuals believed to be civilians had died as a direct result of the continuing siege since government forces tightened it in July 2013.<sup>3</sup> Twenty-six of these deaths were said to have occurred between 10 April and 3 June. Of these, one death was attributed to starvation and 25 deaths to the lack of adequate medical care (of which 16 cases were people who were specified as having had injuries sustained in shelling and four were people who had reportedly been shot by snipers).



A soup kitchen run by volunteers to provide food for besieged people in Yarmouk, April 2014. © Rame Alsayed

Conditions for daily life in Yarmouk continue to be extremely challenging. Although medical facilities and staff were already severely depleted, government forces did not permit the supply of any medicines or other medical equipment to assist those in need in Yarmouk.<sup>4</sup> Between 24-26 May, however, they did allow the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA)<sup>5</sup> to distribute hundreds of hygiene kits including soap, towels, toothpaste and treatments for scabies and lice.

The government forces also allowed some essential food deliveries to the besieged population – several thousand food parcels during this period – but prevented others, seemingly arbitrarily. On 1 May, UNRWA said it “remains disturbed that food

distributions to desperate civilians are subject to frequent interruptions, without apparent justification.”<sup>6</sup> Two weeks later, UNRWA said that, according to its own estimate, “it has met no more than 25% of the minimum food



needs of civilians in Yarmouk since first accessing the area in January.”<sup>7</sup> In addition to this important but inadequate aid from UNRWA, small quantities of food aid from other humanitarian organizations were permitted by the government forces. At least one individual assisting in humanitarian work inside Yarmouk was detained for several weeks during this period by government forces, apparently on account of his activities as a humanitarian aid worker.<sup>8</sup>

On 16 May, a Palestine Red Crescent Society medical worker in Yarmouk told Amnesty International that people were generally unable to access adequate and safe water. He said that water was available in most taps for less than an hour a day, following damage sustained to Yarmouk’s water pipes from frequent shelling in or about December 2013. Some areas also have water wells, but these require expensive diesel fuel to pump the water and its quality is poor – the water contains sand particles that are said to cause kidney stones and stomach ailments. As the water crisis has increased, he said, so have the number of urine infections, with around 50 new cases now being detected each week, and as people are obliged to cut back on washing they are contracting skin ailments.

Throughout this period, members of Jabhat al-Nusra and ISIS reportedly harassed medical workers in Yarmouk and on 21 May beat up at least one medical worker during an aid distribution. After that date, Amnesty International received reports from several sources in Yarmouk that the armed groups were at times blocking access to areas where distributions were carried out. The armed groups also threatened other residents with violence. Amnesty International did not receive reports, however, of armed group members seizing for themselves aid that was intended for civilians.<sup>9</sup>

The Syrian government has permitted only a trickle of medical evacuations from Yarmouk in recent weeks. However, on 18 May, amid wide publicity, the government permitted 120 schoolchildren to leave Yarmouk and remain outside the besieged area for two weeks in order to take their school exams, before returning them to their families within Yarmouk.

## 2.1.2 DARAYA

Daraya, a town about 10km south-west of Damascus, remained under the siege imposed by government forces since November 2012. Its pre-crisis population of up to 250,000 reportedly shrunk yet further, to some 7,000 individuals or fewer, according to current and previous inhabitants of the town. Of these, around 1,500 are said to be fighters affiliated to the Free Syrian Army.<sup>10</sup>

Government forces continued to subject populated civilian areas in Daraya to repeated attacks with explosive weapons with wide impact, including barrel bombs, artillery shells, and mortars, and with indiscriminate weapons such as cluster munitions. On 17 May, for example, Daraya Local Council Media Office stated that seven barrel bombs had been dropped on the night of 16/17 May, saying three of them exploded near the field hospital partially destroying its top floors.<sup>11</sup> On 29 May, local activists reported that government forces had dropped barrel bombs with conventional explosives on the area between Daraya and neighbouring Moadamiya.



One of two graveyards in Daraya used to bury those who died since the beginning of the crisis in March 2011. © Local Council of Daraya City

Government forces did not permit any food or medical aid to enter Daraya. For the most part, it seems that its inhabitants were able to survive on supplies and food that could be grown within Daraya and no deaths from starvation were reported.



Syrian government forces have not permitted any medical aid to enter besieged Daraya. Medical procedures are carried out in improvised hospitals and with minimum supplies. © Local Council of Daraya City

## 2.1.3 MOADAMIYA

Government forces maintained their siege of Moadamiya, some 16km south-west of Damascus and next to Daraya, where an estimated 20,000 civilians currently live.<sup>12</sup> The government forces imposed the siege in April 2012 and tightened it in November 2012. Although a “local truce” was said to have come into effect on 25 December 2013, government forces continued to subject the besieged area to attacks from the air, including some that hit civilian infrastructure, notably the water infrastructure.

According to local activists and media reports, the Syrian authorities permitted

only a minimal amount of food into Moadamiya and no medical supplies at all between 10 April and 5 June 2014. UN agencies made several requests to the government to allow them to provide humanitarian assistance to the civilians besieged in Moadamiya, but the government failed to respond and to allow the requested access.

On 22 May, a representative of a group of lawyers in Moadamiya told Amnesty International that those besieged were suffering dire shortages of baby milk, rice and bulgur, and that, despite the “truce”, government forces would not allow any medicine, even medicine needed for the treatment of children, to enter Moadamiya. Another informant who had managed to flee from Moadamiya told Amnesty International that government snipers continue to target residents who go out to forage for grasses and other plants to eat. Several individuals told Amnesty International that the only road by which people might at times be allowed in and out of Moadamiya had been completely closed by government forces since 17 or 18 May.

Local sources also report that government forces have hit water supply infrastructure, as video-clip links received by Amnesty International and issued publicly also appear to confirm.<sup>13</sup> If water supply facilities or other objects that are indispensable to the survival of civilians have been targeted deliberately, such attacks would constitute war crimes.

## 2.1.4 EASTERN GHOUTA

Government forces continued to besiege towns and villages in Eastern Ghouta, east of Damascus, where an estimated 150,000 people, overwhelmingly civilians, remain.<sup>14</sup> Most of Eastern Ghouta has been under siege continuously since November 2012.

Government forces generally have blocked the entry of food supplies into the areas under siege. According to local sources, some government soldiers involved in maintaining the siege occasionally allowed in small amounts of food that they have sold to local people at greatly inflated prices. Other people have sought to smuggle in food via the Wafideen Palestinian refugee camp that lies between Damascus and Eastern Ghouta, at the risk of being shot by government snipers. One resident of al-Marj, which incorporates a dozen villages, whom Amnesty International was able to contact in May, said that most people there had not eaten meat, fish or eggs for more than 12 months.



A building destroyed by bombardment by government forces in Zamalka [زملكا] in Eastern Ghouta in September 2013. © Mohammed Abdullah



Information provided to Amnesty International by local human rights activists indicates that scores of civilians have died in Eastern Ghouta as a result of the siege, due in some cases to a lack of adequate access to medical care and in others to a lack of adequate food, and that such deaths are continuing.

Besieging government forces have caused extensive damage to existing medical facilities and services within Eastern Ghouta through shelling and air strikes, including apparently targeted attacks. As well, government forces have detained medical workers and also patients undergoing or in need of treatment.<sup>15</sup>

Several individuals in different towns and villages across Eastern Ghouta told Amnesty International that there is a severe shortage of medicines and equipment, particularly painkillers, antibiotics, general anaesthetic, bandages, blood bags, syringes and medicines for chronic illnesses. A local activist in Saqba told Amnesty International on 22 April:

*“Hospitals usually work on battery lights; only in special cases do they use generators. There was one case of a caesarean birth that has to be carried out using only the light from cigarette lighters. As there is no anaesthetic, the woman was given only a local anaesthetic. Her screaming could be heard everywhere in the hospital.”*

As of 5 June 2014, the Syrian authorities had not permitted the provision of any humanitarian assistance to the areas under siege in Eastern Ghouta since the delivery of food for 5,000 people and relief items for 15,000 people that was carried out on 29 March 2014.<sup>16</sup> This was despite requests by UN agencies. Moreover, on 24 May Syrian government forces carried out what appears to have been a targeted attack on a warehouse in Duma, reported to be used by the SARC, which contained humanitarian aid. The attack was condemned by Valerie Amos, the UN Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator. She described it as a “deliberate attack on a humanitarian warehouse in Douma, Eastern Ghouta, which occurred as aid workers were preparing to distribute urgently needed supplies from an aid convoy to hundreds of families in the besieged city.”<sup>17</sup> A representative of a humanitarian agency informed Amnesty International that there was no evidence of any armed group having been in the area.

The health of Eastern Ghouta’s inhabitants was consequently greatly affected by siege conditions including the impact on medical facilities and services. A female doctor from Eastern Ghouta spoke with Amnesty International in early June about the health of people in there:

“Since the start of the siege I have noticed many signs of nutrition deficiencies and a general decline in wellbeing (more people with fatigue, dizziness etc.). There has also been the re-emergence of diseases that were almost extinct prior to 2011, for instance measles, smallpox, typhoid, Hepatitis A and dermatological problems such as scabies and lice, as well as general allergies.

“Currently there is a pandemic of stomach and intestinal inflammations and infections. Due to the lack of antibiotics and anti-diarrhea medicine, as well as the lack of serums, a lot of young patients have suffered from dehydration and acute renal failure, and this has even resulted in several deaths - mostly children.

“While working with the team we noticed a new epidemic taking over Ghouta - that is tuberculosis. This is due to the lack of nutrition and generally weakened immune systems, as well as the lack of medical treatments. I think that, if we consider the whole of Ghouta, there will probably be hundreds of cases.”

She said that there were several main categories of deaths as a result of the siege of Eastern Ghouta. Most were of infants under the age of one year, due to their mothers’ inability to produce breast milk and the accompanying scarcity of formula milk. Others died, she said, after eating food that is not meant for human consumption. Thirdly, deaths were occurring due to the general absence of adequate medical care – due to shortages of particular medicines (for instance for heart disease, diabetes, kidney failure), medical equipment (for example during amputations, that have caused fatalities from gangrene) and medical professionals.





## 2.2 HOMS AREA

### 2.2.1 OLD CITY OF HOMS

On 9 May 2014, the two-year siege by government forces of the Old City of Homs ended. In the context of an agreement with the Syrian government the remaining inhabitants, all exhausted by the siege and including many members of armed groups who were allowed to take light weapons with them, left Old Homs. With their departure, the city of Homs – with the exception of al-Wa'er district, which is encircled by government armed forces – fell under the control of Syrian government forces.

Despite the end of the siege, the Syrian government continue to detain some 200 men who were among 1,366 people, including women and children, who were evacuated from Old Homs in February 2014, while the siege was still in place. Most have been held at the al-Andalus school, which the Syrian authorities use as a “screening” centre. More than three months after they were taken into custody, those detained appear not to have had any charges brought against them. The Syrian authorities have given UN representatives and some journalists access to the al-Andalus site and allowed them to speak to detainees, although generally not in private.

Amnesty International has received reports from several activists displaced from Homs of detainees being taken away to other detention centres and then being tortured or otherwise ill-treated there, as well as being removed to unknown locations and disappearing. Information given to Amnesty International by a representative of an international organization with a presence in Homs indicates that eight individuals who had been detained at al-Andalus can no longer be accounted for. One detainee managed to speak to Amnesty International while still held at al-Andalus. He said, “They [government officials] can come and take us away whenever they want.” He named a man who, he said, had been taken from his cell at al-Andalus three days before. Individuals who have visited al-Andalus have told Amnesty International that the men detained there live in a constant state of anxiety and fear what might be done to them by the Syrian authorities. One current detainee and other individuals in contact with detainees at al-Andalus have told Amnesty International that the occasional presence of UN representatives and journalists is not visible enough and does not provide an adequate safeguard.

## 3. SIEGES BY OPPOSITION AND OTHER NON-STATE ARMED GROUPS

### 3.1 ALEPPO CENTRAL PRISON

On 22 May 2014, the Syrian army succeeded in breaking a year-long siege of Aleppo Central Prison by armed groups led by Ahrar al-Sham and Jabhat al-Nusra, relieving the government forces that had otherwise retained control of the fortified prison throughout the siege.

More than 800 prisoners were reported to have died in Aleppo Central Prison in the period between July 2012 and the end of the siege, including dozens after the siege was imposed in April 2013. Some deaths appear to have been attributable to indiscriminate bombardment by the besieging armed groups. However, a large majority of deaths are reported to have been caused by the government forces controlling the prison. They, including prison officials and guards, are alleged to have extra judicially executed some prisoners and to have caused the deaths of others under torture or other ill-treatment. Other prisoners reportedly died after they contracted illnesses, such as tuberculosis, while in prison, but were denied medical treatment. Still others are said to have starved to death.<sup>18</sup>

Satellite images commissioned by Amnesty International following reports of extrajudicial executions of prisoners within the prison in July and November 2013 analysed by Amnesty International in cooperation with satellite imaging experts from DigitalGlobe, show features that are consistent with mass burial sites and therefore appear to lend credence to reports at the time that the prison authorities disposed of the bodies by creating one or more mass graves in the prison's eastern square.

One former inmate released from the prison in October 2013 told Amnesty International that, during the siege, government forces used some political prisoners as “human shields” in an apparent effort to deter attacks by the besieging armed groups. He told Amnesty International that in May and June 2013:

“It was the FSA [Free Syrian Army] that shelled, but the [government forces] were using us as a human shield. They



were attacking the FSA from the room directly above us where they had a Doshka [type of machine-gun]. The noise of the Doshka used to shake the whole room. They also put snipers eight metres from us in the corridor outside our section.”

At least three of the political prisoners present were killed in the shelling by the armed opposition groups, he said.

The same former prisoner said that the government forces garrisoning the prison had been repeatedly provided with food and other supplies in air-drops from government helicopters, but that conditions were very harsh for the prisoners, as they received very little food and water and had virtually no access to medical treatment.

In April and May 2014, the SARC made several vital but limited deliveries of food to the besieged prison, providing some partial relief to the prisoners. At times, such as from 30 April to 5 May, fighting between the besieging armed groups and the government forces holding the prison prevented such deliveries being made.

Information received by Amnesty International from several sources – the released prisoner cited above, two human rights organizations and an online database of Aleppo “martyrs” – indicated that at least 18 prisoners died in Aleppo Central Prison between 3 March and 27 May; in nine cases, the cause of death was reported as “suspected tuberculosis” while for five deaths including of one woman the deaths were attributed to lack of adequate medical care; two cases were attributed to starvation; one was attributed to torture and other ill-treatment; and for one death the cause was reportedly due to government security forces controlling the prison using hand grenades during a raid they carried out on the wing containing political prisoners.<sup>19</sup>

Following the successful breach of the siege by government forces, several media reports indicated that most if not all prisoners, including political prisoners, had been transferred to other locations in Aleppo and there were unconfirmed reports that some 300 prisoners were released.<sup>20</sup> A representative of a Syrian human rights organization told Amnesty International that the government authorities had decided to release all of the prisoners who had already completed their prison sentences, and some 65 women and three children who were being held at the prison. By 5 June, however, Amnesty International had not been able to confirm any releases and there was concern about the fate of up to several hundred political detainees known to have been held at the prison.

### 3.2 ZAHRAA AND NOBEL IN ALEPPO COUNTRYSIDE

Some 40-45,000 people were reported to remain under at least partial siege in these towns, located north-west of Aleppo, by fighters belonging to Ahrar al-Sham, Jabhat al-Nusra and other non-state armed groups.<sup>21</sup> On 9 May, however, as part of complex and multi-party negotiations linked to government forces lifting the siege of the Old City of Homs, a joint UN and SARC convoy was able to deliver humanitarian assistance to the residents of the two towns.

## 4. SIEGES AND INTERNATIONAL HUMANITARIAN LAW

All parties to the armed conflict, including non-state armed groups, must respect the rules of international humanitarian law. The manner in which the sieges covered by this briefing have been imposed violate human IHL. Many of these violations war crimes.

IHL, also known as the laws of war or the laws of armed conflict, contains the rules and principles that seek to protect primarily those who are not participating in hostilities, notably civilians, but also certain combatants, including those who are wounded or captured. It sets out standards of humane conduct and limits the means and methods of conducting military operations. Its central purpose is to limit, to the extent feasible, human suffering in times of armed conflict.

Syria is a state party to the four Geneva Conventions of 12 August 1949 and its Additional Protocol relating to the Protection of Victims of International Armed Conflicts (Protocol I), 8 June 1977. Article 3 Common to the four Geneva Conventions applies to all parties to non-international armed conflicts. Many of the specific rules included in these and other IHL treaties – and all the rules cited in this report – form part of customary international humanitarian law and are thus binding on all parties to any conflict, including Syrian armed and security forces and



non-state armed groups.<sup>22</sup> Violations of many of these rules may amount to war crimes.

A fundamental rule of IHL is that parties to any conflict must at all times “distinguish between civilians and combatants”, especially in that “attacks may only be directed against combatants” and “must not be directed against civilians.”<sup>23</sup> A similar rule requires parties to distinguish between “civilian objects” and “military objectives”. These rules are part of the fundamental principle of “distinction”.

Intentionally directing attacks against civilians not taking direct part in hostilities, or against civilian objects (in the case of non-international conflicts, medical, religious or cultural objects in particular), is a war crime.<sup>24</sup> The corollary of the rule of distinction is that “indiscriminate attacks are prohibited”.<sup>25</sup> Indiscriminate attacks are those that are of a nature to strike military objectives and civilians or civilian objects without distinction, either because the attack is not directed at a specific military objective, or because it employs a method or means of combat that cannot be directed at a specific military objective or has effects that cannot be limited as required by international humanitarian law.<sup>26</sup> IHL prohibits the use of weapons that are inherently indiscriminate or cause superfluous injury or unnecessary suffering.<sup>27</sup> Chemical weapons are specifically prohibited by the Chemical Weapons Convention and their use is prohibited by customary IHL.<sup>28</sup>

IHL also prohibits disproportionate attacks, which are those “which may be expected to cause incidental loss of civilian life, injury to civilians, damage to civilian objects, or a combination thereof, which would be excessive in relation to the concrete and direct military advantage anticipated.”<sup>29</sup> Intentionally launching an indiscriminate attack resulting in death or injury to civilians, or a disproportionate attack (that is, knowing that the attack will cause excessive incidental civilian loss, injury or damage) constitute war crimes.<sup>30</sup> Parties are required to take all necessary precautions in attack to spare the civilian population.<sup>31</sup> They must also take precautions to protect civilians under their control from the effect of attacks, including by avoiding locating, to the extent feasible, military objectives within or near densely populated areas.<sup>32</sup> The use of “human shields” to try to render military objectives immune from attack is prohibited.<sup>33</sup>

The use of starvation of the civilian population as a method of warfare is prohibited, as is attacking or destroying objects indispensable to the survival of the civilian population. The parties to the conflict must allow and facilitate rapid and unimpeded passage of impartial humanitarian assistance to civilians in need. They must allow civilians in besieged areas to leave. And they must ensure the freedom of movement of authorised humanitarian relief personnel.<sup>34</sup> The parties must ensure that the wounded and sick are collected and cared for without adverse distinction.<sup>35</sup> Sieges that amount to collective punishment of the civilian population are prohibited.<sup>36</sup> Collective punishment and starving civilians by depriving them of objects indispensable to their survival constitute war crimes.<sup>37</sup>

## RECOMMENDATIONS TO THE GOVERNMENT OF SYRIA

- Immediately end the armed sieges of civilian areas and allow unfettered access by independent humanitarian agencies to assist the civilians suffering in those areas by providing food, water, medicines and medical aid, and by safely evacuating the sick, elderly, families with children and other civilians who lack shelter or wish to leave the area.
- Cease immediately all indiscriminate shelling or other bombardments by Syrian government forces or those assisting them, in recognition that indiscriminate attacks and direct attacks on civilians or civilian objects (such as hospitals and schools) are war crimes. In particular, end the use of unguided air-dropped bombs (including barrel bombs) and of mortars and artillery shelling in the vicinity of densely populated civilian areas; and end the use of cluster munitions in all circumstances.
- End all attacks on medical and other humanitarian workers and instruct all military and security personnel to afford them appropriate protection at all times.





- Release, immediately and unconditionally, all persons detained solely on account of their political opinions, identity or legitimate exercise of freedom of expression or other human rights, and ensure that all other detainees, including those held for “screening” in locations such as the al-Andalus school in Homs, are released without delay unless they are charged with recognizable criminal offences and brought to trial fairly and promptly and without recourse to the death penalty.
- Ensure that all persons deprived of their liberty are officially registered at the time of their arrest or detention, are held in official places of detention, and protected against enforced disappearance, torture or other ill-treatment throughout their detention and imprisonment. Maintain a central register of all detainees and make it available to their families and lawyers.
- Allow free and regular access to all places of detention by representatives of international organizations with appropriate expertise as a means of ensuring the safety of detainees, including their protection against torture and other ill-treatment in custody.
- Ensure that all deaths in detention and allegations of torture are independently investigated, thoroughly, promptly and impartially, and that all military, security and other personnel against whom there is evidence of torture or other serious abuse are removed from their positions and are brought to justice in fair trials without delay.
- Ensure that anyone suspected of ordering or committing war crimes or crimes against humanity is removed from the ranks and promptly brought to justice in proceedings that conform to international fair trial standards.
- Provide full co-operation and unimpeded access to the independent international Commission of Inquiry to investigate all alleged crimes under international law and violations and abuses of international human rights law.
- Allow international humanitarian agencies prompt and unfettered access to Syria, including across borders and conflict lines.

## RECOMMENDATIONS TO ALL NON-STATE ARMED GROUPS IN SYRIA

- End sieges of civilian areas and allow unfettered access by independent humanitarian agencies to assist the civilians in need; and facilitate the safe evacuation of the sick, elderly, families with children and other civilians who wish to leave the area.
- Respect at all times the prohibition in international humanitarian law on direct attacks on civilians, indiscriminate attacks, summary killing of captives and torture, and ensure that all detainees, including captured government soldiers, are treated humanely and all times.
- End the use of mortars and artillery shelling in the vicinity of densely populated civilian areas.
- End all attacks on humanitarian workers and instruct all fighters to afford them appropriate protection at all times.
- Remove from the ranks any individual suspected of ordering or committing serious violations of international humanitarian law.

## RECOMMENDATIONS TO THE UN SECURITY COUNCIL

- Refer without delay the situation in Syria to the Office of the Prosecutor of the International Criminal Court in order that the Court is authorized to initiate an immediate investigation into the alleged commission of war crimes and crimes against humanity by the Syrian government and by non-state armed groups.



- Act on its declared intention in Security Council resolution 2139 to take further steps in case of failure by the parties to comply with the call to immediately lift the sieges of civilian areas, among other measures, by imposing sanctions – including a travel ban and asset freeze – on persons suspected or believed to be responsible for non-compliance with the resolution.

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<sup>1</sup> Amnesty International, *Briefing note on sieges across Syria* (Index: MDE 24/018/2014), issued on 16 April 2014 <http://www.amnesty.org/en/library/asset/MDE24/018/2014/en/3ffb8d69-7e8d-4b0d-95e6-9ccb85cb7ebd/mde240182014en.pdf> (accessed 11 June 2012).

<sup>2</sup> In a 25 February 2014 email to Amnesty International an UNRWA spokesperson estimated some 18,000 Palestinian civilians and an unspecified number of Syrian civilians inside Yarmouk. A number of other estimates to Amnesty International from current and displaced residents, whether Palestinian, Syrian, or Palestinian-Syrian, and including human rights activists, largely concurred on Yarmouk's civilian population numbering some 20,000 civilians.

<sup>3</sup> This information is based on multiple communications that Amnesty International had during April, May and June with one PRCS representative and one PRCS volunteer at the Palestine Hospital in Yarmouk, as well as on information provided by Palestinian and Syrian human rights organizations with a presence in Yarmouk.

<sup>4</sup> According to multiple communications with two PRCS workers inside Yarmouk as well as current and displaced residents.

<sup>5</sup> UNWRA is the UN agency which provides protection and assistance to some 5 million Palestinian refugees across Syria, Lebanon, Jordan, the West Bank and the Gaza Strip. Prior to the onset of the current conflict in Syria, Yarmouk had the highest concentration of Palestinian refugees in Syria.

<sup>6</sup> UNRWA spokesman, on the record quote in email, 1 May 2014.

<sup>7</sup> UNRWA spokesman, on the record quote in email, 15 May 2014.

<sup>8</sup> Conversation with representative of international non-governmental organization, 29 May 2014.

<sup>9</sup> Conversations with Yarmouk residents including medical workers on 22 May who saw the individual after the alleged beating. Members of both armed groups were said to jointly responsible for the harassment and beating.

<sup>10</sup> The Reports of the [UN] Secretary-General on the implementation of Security Council resolution 2139 (2014) dated 21 March 2014, 23 April 2014 and 22 May 2014 all give estimates of 8,000 individuals in Daraya. One current resident and one displaced resident estimated to Amnesty International in communications during May 2014 that the figure was less, around 7,000.

<sup>11</sup> Skype message from Daraya Local Council Media Office received on 17 May 2014. Video clips purportedly showing the use of barrel bomb attacks on residential areas in Daraya during this period include:

<https://www.youtube.com/watch?v=uFJCH6ue5GI&feature=youtu.be> (accessed 11 June 2012);

<https://www.youtube.com/watch?v=9S9qgzjFOuI&feature=youtu.be> (accessed 11 June 2012);

<https://www.youtube.com/watch?v=633ZzpnS204&feature=youtu.be> (accessed 11 June 2012);

<https://www.youtube.com/watch?v=D56yeeU1OeM&feature=youtu.be> (accessed 11 June 2012).

A picture purportedly showing the burnt out field hospital is on the Council's Facebook page:

[https://www.facebook.com/photo.php?fbid=519629374830559&set=a.431265567000274.1073741828.431202950339869&type=1&relevant\\_count=1](https://www.facebook.com/photo.php?fbid=519629374830559&set=a.431265567000274.1073741828.431202950339869&type=1&relevant_count=1) (accessed 11 June 2012).

<sup>12</sup> The three monthly reports of the UN Secretary-General estimate that 20,000 people are besieged in Moadamiya.

<sup>13</sup> See video clip purportedly showing Moadamiya's main water tank being hit by a government missile on 15 May <https://www.youtube.com/watch?v=vEd-baoHEo> (accessed 11 June 2012).



<sup>14</sup> The UN Secretary-General reports of 23 April and 22 May 2014 estimate that 150,000 people are besieged in Eastern Ghouta.

<sup>15</sup> See Violations Documentation Centre, *A Special Report on: The Medical Situation in Eastern Ghouta*, November 2013, available at <http://www.vdc-sy.info/pdf/reports/1383565710-English.pdf>, (accessed 11 June 2012). which includes information on military attacks on nine medical facilities and also five raids by the security forces in which medical workers were arrested.

<sup>16</sup> As stated in the three UN Secretary-General monthly reports on implementation of resolution 2139 and reported to Amnesty International by residents of Eastern Ghouta during April and May 2014.

<sup>17</sup> See statement at: <http://reliefweb.int/report/syrian-arab-republic/under-secretary-general-humanitarian-affairs-and-emergency-relief-8> (accessed 11 June 2012).

<sup>18</sup> For more information, see Amnesty International, *Briefing note on sieges across Syria* (Index: MDE 24/018/2014), issued on 16 April 2014, available at <http://www.amnesty.org/en/library/info/MDE24/018/2014/en> (accessed 11 June 2012).

<sup>19</sup> The Violations Documentation Centre, the Damascus Centre for Human Rights Studies and an online database of Aleppo “martyrs” that can be seen at: <http://aleppom.com/Default.aspx#> (accessed 11 June 2012). A senior Syrian human rights activist told Amnesty International on 2 June 2014 that the website was credible.

<sup>20</sup> “New details shed light on the Aleppo prison siege”, *Al-Akhbar*, 5 June 2014, available at <http://english.al-akhbar.com/node/20052> (accessed 11 June 2012).

<sup>21</sup> Estimated population as per monthly reports of the UN Secretary-General cited above.

<sup>22</sup> Red Cross study, Customary International Humanitarian Law: Volume 1: Rules, J-M Henckaerts and L Doswald-Beck, eds, 2005 (“ICRC Customary IHL Study”).

<sup>23</sup> ICRC Customary IHL Study, Rule 1; see also Protocol I, article 48 and Protocol II, article 12(2).

<sup>24</sup> ICRC Customary IHL Study, Rule 156, pages 591, 593, 595-598. See also Rome Statute of the ICC, articles 8(2)(b)(i) and (ii) and 8(2)(e)(i)(ii)(iv) and (xii) [see also discussion in ICRC Customary IHL Study, page 27].

<sup>25</sup> ICRC Customary IHL Study, Rule 11; Protocol I, article 51(4).

<sup>26</sup> ICRC Customary IHL Study, Rule 12; Protocol I, article 51(4)(a).

<sup>27</sup> ICRC Customary IHL Study, Rules 70 and 71.

<sup>28</sup> ICRC Customary IHL Study, Rule 74.

<sup>29</sup> ICRC Customary IHL Study, Rule 14; Protocol I, articles 51(5)(b) and 57.

<sup>30</sup> ICRC Customary IHL Study, Rule 156, pages 599-601.

<sup>31</sup> ICRC Customary IHL Study, Rules 15-21.

<sup>32</sup> ICRC Customary IHL Study, Rules 22-24.

<sup>33</sup> ICRC Customary IHL Study, Rule 97.

<sup>34</sup> ICRC Customary IHL Study, Rules 53-56.

<sup>35</sup> ICRC Customary IHL Study, Rule 109-110.

<sup>36</sup> ICRC Customary IHL Study, Rule 103.

<sup>37</sup> ICRC Customary IHL Study, Rule 156, pages 599-601.