

ResearchReport

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Covid-19: Tool of Conflict or Opportunity for Local Peace in Northwest Syria?



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This report is illustrated by young Syrian artists who live in northwest Syria and collaborated with the author to offer powerful insights into the daily life of Syrian people during the pandemic in 2021. Their artworks show the compounded difficulties of coping with Covid-19 while living in a country at war, but also the resilience and hopes of the Syrian people. More information about the collaboration and the work of the artists can be found on the website of PSRP at the University of Edinburgh: <https://www.politicalsettlements.org/2021/04/22/young-artists-illustrate-life-in-syrian-opposition-held-areas/>.

ACRONYMS

Civil Society Organisations (CSOs)
Civil Society Support Room (CSSR)
Civil Society Platform for Statebuilding and Peacebuilding (CSPPS)
Center for Operational Analysis and Research (COAR)
Democratic Union Party (PYD)
Hayat Tahrir al-Sham (HTS)
Idlib Health Directorate (IHD)
International Committee of the Red Cross (ICRC)
Internally Displaced Person (IDP)
International Non-Governmental Organisations (INGOs)
International Organisations (IOs)
International Rescue Committee (IRC)
Islamic State (IS)
National Coalition for Syrian Revolution and Opposition Forces (SNC)
People's Protection Units (YPG)
Political Settlements Research Programme (PSRP)
Syrian American Medical Society (SAMS)
Syrian Arab Red Crescent (SARC)
Syrian Democratic Forces (SDF)
Syrian Expatriates Medical Association (SEMA)
Syria Justice and Accountability Centre (SJAC)
United Nations (UN)
United Nations Human Rights Council (UNHRC)
United Nations Office for the Coordination of Humanitarian Affairs (OCHA)
United Nations Security Council (UNSC)
United Nations World Food Programme (WFP)
World Health Organization (WHO)

KEY FINDINGS

- **Despite early mitigation measures and a proactive stance, opposition governance institutions used the Covid-19 crisis as a political tool at the expense of relief.**

The opposition Syrian Interim government in northern Aleppo and Salvation government in Idlib governorate competed to manage the Covid-file in opposition-held areas in an attempt to secure international recognition and gain legitimacy. The two opposition government bodies lobbied key partners of the international community in northwest Syria, such as the Idlib Health Directorate and the Syrian American Medical Society, to promote their own agenda. The Syrian Interim government played on its strong ties with Turkey to claim political legitimacy, access to medical supplies and distribution capacity. The Salvation government used a humanitarian argument, namely the high number of vulnerable communities hosted in Idlib governorate, most of them inside internally displaced persons (IDP) camps.

- **Opposition governments are not trusted as key actors capable of handling Covid-19.**

Strained state-society relations and mistrust pre-existed the Covid-19 pandemic in northwest Syria. Indeed, governmental actors across Syria and their military arms are also key conflict actors, and their reputation was recurrently and generally damaged by their lack of governmental capabilities, latent corruption, and involvement in violent policies. More than half of the respondents interviewed put little to no trust in the Syrian Interim and Salvation governments.

- **Local civil society assumed a central role during Covid-19.**

Local civil society was endorsed by the international community as an alternative to political bodies and a neutral actor to provide relief and protect grassroots civil communities in northwest Syria. As a direct consequence, local civil society gained legitimacy and confidence both inside and outside Syria. The pandemic also affected the nature of local society's missions. In addition to distributing aid, it became a key transmission channel to fight misinformation and raise public awareness about the virus and mitigating measures via door-to-door and mobile campaigns. Deprived of independent state structure and support, more than 90% of people interviewed trusted and relied on local civil society and their own close social circles to provide protection and mitigate the impact of Covid-19.

- **The pandemic did not aggravate tensions between host and displaced communities.**

Although this might have been expected, Covid-19 generally did not have a strong impact – positive or negative – on social cohesion in northwest Syria, with some level of local specificity. Sporadic tensions linked to the prioritisation of displaced communities for the distribution of health kits and aid were mitigated by solidarity initiatives and awareness campaigns, and by the efforts of local civil society.

- **The international community was less trusted than local civil society during Covid-19.**

The international community was trusted on average three times less than local civil society, and its role – notably that of the World Health Organization – in northern Syria was generally perceived as weak and/or politicised during the pandemic.

- **Covid-19 fostered community-engagement activities and bottom-up governance.**

Confronted with the lack of capacity and resources to mitigate the impact of Covid-19, local governance entities mobilised local capital. Civic actors and administrative local councils coordinated the provision of medical services and community awareness. In April 2020, the Idlib Health Directorate and the Syrian Civil Defense launched the Initiative of Volunteers Against Corona, an inter-sectoral operation room composed of around 50 local organisations and 600 volunteers. More initiatives were launched by academic institutions, such as the Free University of Aleppo, and civilian volunteers.



The crucial role of medical staff during the Covid-19 pandemic. © Sham Qadouni

RECOMMENDATIONS

This research suggests the following general recommendations to the international community, humanitarian workers, and governmental institutions inside Syrian opposition-held areas:

- Communicate about future health crises through a coherent and consistent discourse to be delivered by the actors and institutions that enjoy the greatest amount of trust and legitimacy in grassroots communities. In opposition-held areas, such actors and institutions include local civil society and local councils.
- Coordinate the official response to health crises with non-governmental local actors who can build a bridge between policy-makers and grassroots communities. Such coordination can foster communication around official policies and mitigating measures, and their implementation at the local level.
- The involvement of military and police forces in the management of health crises must be coordinated with governmental institutions. Such involvement, if it is peaceful and well-managed, could increase the social value of forces that are mostly perceived as conflict actors and drivers of further instability.
- Civilians can play a key role in the mitigation of health crises as illustrated by the Initiative of Volunteers Against Corona in northwest Syria. Such initiatives proved to be inclusive and gave a purpose to youth populations at a time where schools and universities were closed to limit the transmission of the virus.
- Address the longer-term repercussions of Covid-19, which is likely to have a disastrous impact on the local economy and education. Both sectors already suffered greatly from a decade of conflict and the pandemic will reinforce the vulnerability of grassroots communities to violence in general.
- Local civil society must be given a central role in crisis mitigation that reflects its full potential, knowledge of local specificities, and access to most vulnerable populations. External funding should reflect the need assessment on the ground, rather than orient towards the nature and missions of relief programmes.
- Train local civil society on crisis communication and conflict management to help mitigate social tensions due to aid delivery during a health crisis that does not discriminate between people.
- The establishment of an umbrella organisation to represent local civil society and support cooperation and knowledge exchange across Syria – regardless of the system of governance – is important and must be encouraged.

INTRODUCTION

In March 2021, Syria entered its tenth year of conflict since young boys painted anti-Bashar al-Assad graffiti on the walls of their schools in Daraa, in the south of the country, and their detentions triggered a wave of popular protests violently repressed by the Syrian regime. The Syrian conflict has become one of the most protracted conflicts in the world and resulted in the worst humanitarian crisis since World War II. Besides the material destruction and the human toll of the war, Syria has been plunged into chaos resulting in latent mistrust, social disintegration, and institutional fragmentation.

On 11 March 2020, the World Health Organization (WHO) officially declared Covid-19 a pandemic. The pandemic first hit Syria on 22 March 2020, presaging the worst for the country and its most vulnerable people. A day after the first Syrian case was identified, the International Rescue Committee (IRC) warned that Covid-19 in Syria could become one of the most severe outbreaks in the world as a result of the collapse of the country's health system (IRC, 2020). Nearly a decade of violent conflict had put a strain on the country's capacity and resources to mitigate the impact of Covid-19 on the 13.4 million Syrian people in need of humanitarian assistance. This was especially the case in opposition-held areas in the northwest of the country, which was home to over four million civilians and about 2.8 million internally displaced persons when the pandemic reached Syria. At that time, the population stranded in northwest Syria relied on only 166 doctors and 64 health facilities operating with mostly minimum capacity infrastructures (WHO, 2020). Moreover, none of the IDP camps in these areas had sanitation systems and all lacked the minimum essentials of hygiene, which increased fear of the rapid spread of Covid-19.

In addition to the constant infighting and a looming military offensive from the Syrian regime and Russian forces (The Arab News, 2020), the absence of a recognised government, and the lack of services and access to primary healthcare, underscored the precarious situation of Syrian civil populations living in these areas. While Covid-19 was spreading across the world in the early months of 2020, Syrian President Bashar al-Assad was moving towards his goal to recapture 'every inch' of the Syrian territory (Sanger and Gladstone, 2016). The strategy resulted in escalating military offensive from the regime, supported by Russia and Iranian-backed militias, against the last bastion of opposition forces in Idlib governorate in December 2019. But the pursuit for full military victory was (temporarily) halted on 5 March 2020 when Russian President Vladimir Putin and his Turkish counterpart Recep Tayyip Erdogan struck a ceasefire deal for Idlib province (Hamidi, 2020). While the Syrian regime and its Russian ally allegedly violated the ceasefire hundreds of times (Daily Sabah, 2020), starting ten minutes after the deal was struck, Syria entered a year of a relative lull in fighting and bloodshed. Indeed, 2020 proved to be the least violent year in Syria since March 2011.

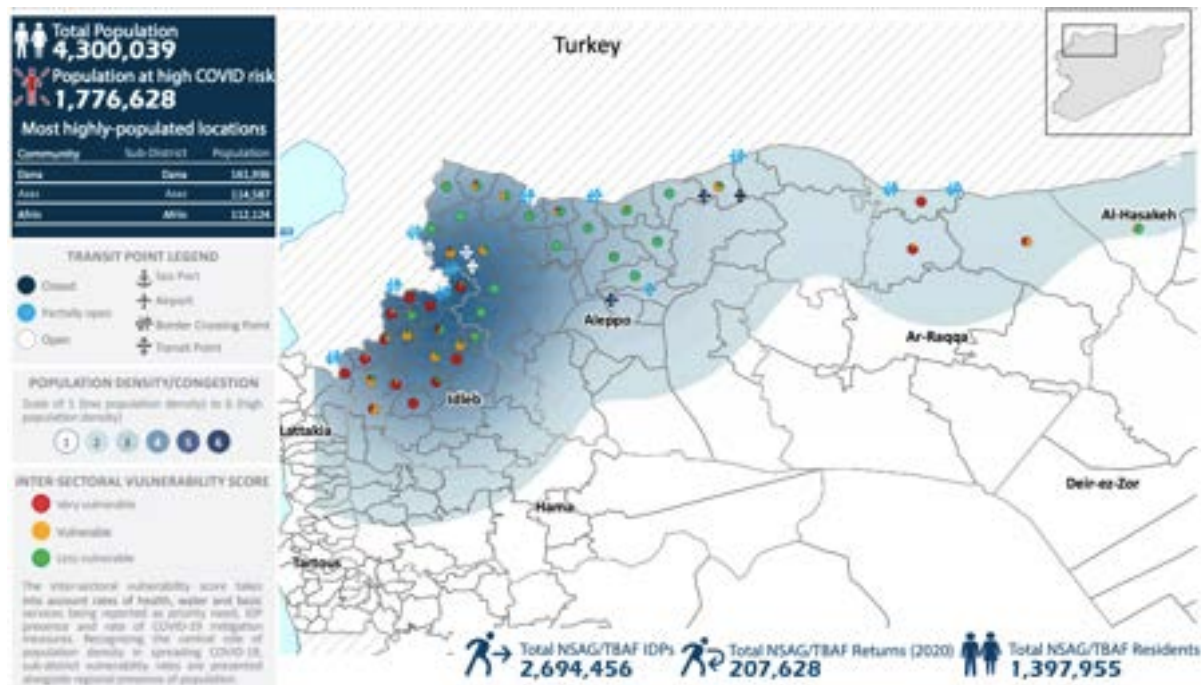
The truce for Idlib occurred days before UN Secretary-General António Guterres issued an appeal for a global ceasefire on 23 March 2020, urging warring parties all around the world to silent their guns to focus on the fight against Covid-19. In Syria, like in other conflict-affected countries, the Covid-19 pandemic added another layer of vulnerability and uncertainty. Several reports pointed to Covid-19 as a threat multiplier (Mercy Corps, 2020), exacerbating existing fragilities and grievances, and posing long-lasting challenges to durable peace (CSPPS, 2020; Half of Syria, 2020).

While the economic and humanitarian toll of the pandemic in Syria has attracted much attention, fewer studies have looked into the impact of Covid-19 on peace dynamics, especially at the local level. This raises the question: *How did the Covid-19 pandemic interplay with conflict factors and dynamics in Syria, notably in the opposition-held areas that carry the burden of ten years of protracted conflict and displacement?*

This report contributes to this discussion. It is the fruit of a long-term research project led by Dr. Juline Beaujouan in opposition-held areas in northwest Syria between June 2020 and April 2021. The study investigated the impact of the Covid-19 pandemic on local practices of peace in northwest Syria. It developed analysis of how issues of political trust and social cohesion, and the role of civil society have been reshaped by pandemic-related dynamics. Opposition-held areas were considered highly vulnerable to Covid-19 due to the countless destruction of infrastructure by the Syrian regime, combined with the local population density (Map 1). These two elements also render the areas particularly vulnerable to local conflicts at a time of pandemic when medical supplies are scarce, governmental institutions weak, and international development programmes halted.

This report highlights the key findings of this research, to inform policymakers, funders, and peacebuilders of innovative opportunities to support local peace in Syrian opposition-held areas and other complex conflicts around the world.

Map 1: Regional Vulnerability Covid-19 Map (July 2020)



Source: Humanitarian Needs Assessment Programme (HNAP)

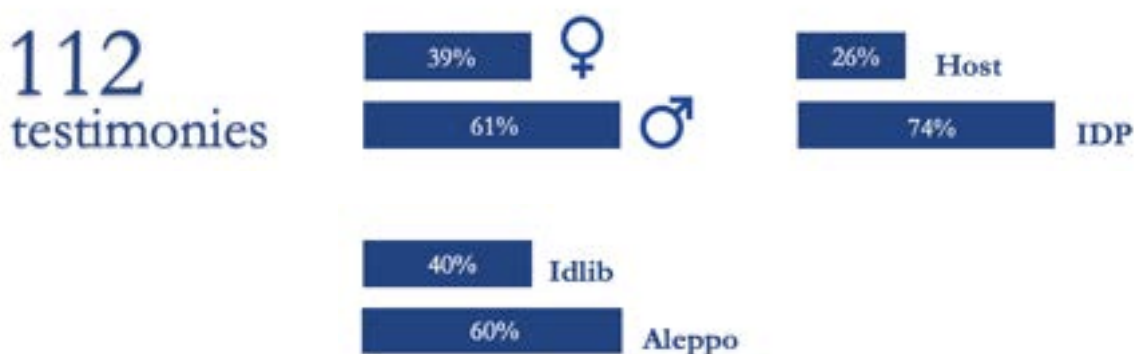
METHODOLOGY

The data presented in this report were collected between June 2020 and April 2021 in northern Aleppo and Idlib governorates. The author was assisted by colleagues working inside Syria as well as in Jordan and Turkey. Researchers conducted 62 in-depth interviews with members of local civil society, local political representatives, military personnel, and grassroots communities. Most of these interviews were conducted via telephone to lessen the risks associated with Covid-19. Some participants were met in person when the de-facto governments loosened Covid-19 restrictions in early 2021 and the study could be conducted safely in this way. The main aim of the study was to identify local conflict factors and dynamics in opposition-held areas resulting from ten years of violent conflict, and how these dynamics were affected by the pandemic. Researchers focused on issues of political trust, social cohesion, relations between displaced and host communities, and the role of local civil society during Covid-19.

50 additional testimonies were collected via an online survey specifically designed to collect people's perceptions of political trust and social cohesion during the Covid-19 pandemic. This method guaranteed a higher level of anonymity and safety to grassroots communities participating in the research. These testimonies were collected through KoBo Toolbox, a tried and tested encrypted survey mechanism. This is a highly trusted Harvard-designed dedicated tool that has been designed for particular use by humanitarian organisations and related researchers, for the complexity of information gathering in conflict-affected countries, or with high security risks. It is endorsed by and used by the United Nations (UN), United Nations Office for the Coordination of Humanitarian Affairs (OCHA) and most major humanitarian organisations, and was subject to ethical approval from Edinburgh Law School as part of this research project.

SOCIO-DEMOGRAPHIC DATA

Besides gathering data on local conflict dynamics, the researchers also collected socio-demographic indicators to ensure the representativeness of the sampled populations and the inclusion of women and internally displaced people in northwest Syria. Researchers collected a total of 112 testimonies in opposition-held areas, including 39% from women respondents, and 74% from Syrians whom had been forcibly displaced by the conflict to Idlib and northern Aleppo governorate.



FRAGMENTED GOVERNANCE SYSTEM AND FRAGILE PEACE

Until 2017, the Syrian theatre was very diverse in terms of groups involved in peacemaking and local initiatives for conflict management, and there was space for negotiations in the framework of the conflict. This approach was institutionalised in UN Security Council (UNSC) Resolution 2254, which endorsed a road map for the peace process in Syria, stating that ‘The Syrian people will decide the future of Syria’ (UNSC, 2015).

This inclusive stance was shattered during the Astana talks, launched in December 2016, that enshrined the central role of external powers in Syria. The first round of negotiations led to an agreement between Iran, Russia, and Turkey to form a joint monitoring body to work to enforce Resolution 2254 (Wintour, 2017). During the same period, the Turkish army gained and consolidated control over the north of Syria through three major military operations against both Islamic State (IS) and the Kurdish forces People’s Protection Units (YPG): ‘Euphrates Shield’ (2016–2017); ‘Olive Branch’ (2018); and ‘Peace Spring’ (October 2019). In December 2018, United States (US) President Trump abruptly decided to withdraw American troops from the Syrian field, leaving space for Russian forces to gain control over buffer zones between opposition-held areas and regime-controlled territories.

This political and military influence of Russia and Turkey, along with Iran to a lesser extent in the northwest of the country, shaped the Syrian conflict and the peace-making process, including at the local level. Syria became a mirror of the relationship between regional rivals: 2020 witnessed several economic and political deals between Russia and Turkey in Libya and the Caucasus, and the launch of the TurkStream natural gas pipeline. That same year, Moscow and Astana reached a ceasefire deal in the contested Idlib province, and 2020 became the least deadly and violent year of the conflict since it began in March 2011.

When the pandemic struck Syria, the country was divided into four main spheres of influence and governmental control. At time of publication, these remain in place (Map 2). The Syrian regime regained much territory; it controlled all of Syria but the north of the country and a pocket of territories in the south close to al-Tanf border crossing with Jordan. The northeast of Syria, which corresponds to the historical home of Kurdish populations – Rojava in Kurdish, literally ‘where the sun sets’ – was controlled by the Kurdish Democratic Union Party (PYD)-affiliated Autonomous Administration of North and East Syria, and its military arm, YPG. The Autonomous Administration also retained control over the Kurdish enclave of Sheikh Maqsood in Aleppo. Finally, opposition-held areas were divided into two spheres of influence even though they all fell under the military protectorate of Turkish forces following the Idlib ceasefire. Idlib governorate and the western countryside of Aleppo were controlled and administered by the Salvation government, which is unofficially affiliated to Hayat Tahrir al-Sham (HTS), a coalition of Salafi-jihadi groups that include the former branch of al-Qaeda in Syria, the al-Nusra Front. Finally, the Turkish-affiliated Syrian Interim government and the National Army – a coalition of the Free Syrian Army (FSA) and Salafi-jihadi factions – held tightly to the northern countryside of Aleppo governorate and parts of Rojava at the Turkish border.

Map 2: Territorial Fragmentation and Spheres of Influence (February 2020)



Source: Liveumap

The fragmentation of the Syrian territories and governance system had a direct consequence on the response to the Covid-19 pandemic. The pandemic was dealt with by different policies enacted at the sub-national level with little or no collaboration between governmental bodies. For instance, the response of the Syrian regime and the authorities in the northeast has been described in terms of centralisation (overcentralisation in the case of the Syrian government), while the opposition government in Idlib governorate relied on strongly decentralised management of the crisis (COAR, 2021: 3-4).

Covid-19 was also itself a potential tool of conflict, as each of Syria’s health governance system competed for external humanitarian assistance and legitimacy and to be the main interlocutor of the international community. By way of an example, the Syrian government sought to securitise the national response to the pandemic by undermining the ability of other governmental bodies to mitigate the impact of Covid-19. In the northeast, the Syrian regime limited health cooperation and data-sharing which forced the Autonomous Administration in Rojava to rely on its cross-border ties with the Kurdistan Region of Iraq (Ibid). The Syrian government’s policy was even more restrictive towards opposition-held areas, which is discussed later in this report.

CONFLICT MITIGATION IN SYRIA DURING COVID-19

At the national level, the call of the UN Secretary-General for a global ceasefire did not find much of an echo in Syria. Only the Syrian Democratic Forces (SDF) in Rojava announced a humanitarian truce on 24 March 2020 in an attempt to focus on their response to Covid-19 (See ‘Ceasefires in a Time of Covid’, <https://pax.peaceagreements.org/static/covid19ceasefires/>, The General Command of the SDF, 2020). While neither the Syrian regime nor de facto opposition governments joined the pledge for peace, the pandemic and the worsening economic crisis (Browne, 2021) pushed President al-Assad to engage in several agreements with opposition groups in northwest Syria. The core of these deals provided for the exchange of prisoners and the opening of trade routes between the opposition zones and the areas under the control of the Syrian regime.¹

In March and April 2020, the Syrian regime brokered three top-secret agreements with opposition groups in Idlib governorate to exchange a total of 18 prisoners. The first exchange took place around the city of Darat Azaa, in the western countryside of Aleppo, on 16 May 2020. HTS released a Colonel and a soldier of the Syrian regime forces in exchange for three fighters. Two days later, around the town of Tal Hiyah, in the northeast of Idlib, three soldiers of the Legion of the Levant, a faction of the National Liberation Front, were traded for a fighter and a female intelligence officer of the Syrian regime, in addition to two bodies of Shi’a fighters (including one Lebanese national) (al-Mohrar Media, 2020). On 22 May, Haradh al-Mu’minin operation room – a jihadi coalition affiliated to al-Qaeda – released three ‘militia members’ in exchange for two women and their children. One of the women was the wife of a leader of HTS and had been captured two years before. She reportedly divorced her husband upon her return and left the jihadi group.

Given the Covid-19 pandemic, the three exchanges were subjected to particular hygiene guarantees. The opposition factions were reportedly anxious about the potential infection of the prisoners released by the Syrian regime. According to private sources, they had stipulated in the negotiations that they would cancel the exchange if any prisoners tested positive for the virus or if their health was not carefully checked beforehand. The Head of the Free Doctor Union in Idlib reported that the prisoners released by the Syrian regime were evacuated to an area where Idlib Directorate of Health operates around Ma’ara, to be disinfected and quarantined for two weeks. Once their health condition was checked, they were allowed to go back to their families.

As is often the case in Syria, the three exchanges were supported logistically by the Syrian Arab Red Crescent (SARC), which was also the main organisation to facilitate the response to Covid-19 in the areas controlled by the Syrian government. Several activists interviewed in Idlib governorate pointed to the ambiguous status of SARC. The latter is the (only) official government partner through which all UN and international agencies must work in Bashar al-Assad’s Syria (Sparrow, 2018). Formally affiliated with the International Committee of the Red Cross (ICRC), it is perceived to be affiliated with the Syrian regime and under the tight control of the air force intelligence (SJAC, 2019).

¹ This section builds on a story published by Open Democracy and PSRP under the title ‘Syria: local agreements, regional rivalry and a global pandemic’ on 19 June 2020.

While practices of conflict management have been reshaped by the Covid-19 pandemic, they also show the constant and unchanged influence of external power in Syria. Interviews conducted with doctors, civil defence soldiers and human rights activists during the first wave of Covid-19 confirmed Russia and Turkey held the upper hand on military and political affairs in Syria. Even the most mundane local agreements, such as the exchange of a few prisoners, are approved, mediated, and sometimes supervised by these two powerful international players. In the words of a high-ranked officer who took part in several high-level negotiations in Syria, ‘when a Russian [military man] is in the room, nobody dares to open his mouth. The Russians are in control of everything in the regime-held areas and everyone listens to them’. Besides, it seems that the Russian military was able to gain the relative trust of all warring groups in Syria, including in the camp of the rebels. As the anonymous officer also testified, ‘we know that the words of the Russians are always followed by actions, whether we like it or not’.

Covid-19 did not have any strong impact on national conflict dynamics, which remain characterised by fragmentation, the freeze of military lines since March 2020, and regular but secret negotiations led by the guarantor states. In addition, the work of the Constitutional Committee which aims at reconciling the Syrian regime and opposition groups was halted for several months, which only slowed down the little progress made towards a political settlement.



Opposition-held areas have become a prison for Syrian civilians caught in the middle of the fighting and tense diplomatic negotiations. @Sana Aboud

THE POLITICISATION OF COVID-19

Humanitarian Space in a Fragmented Governance System

Syria is fragmented between four systems of governance and their respective affiliated health systems. In the northwest of the country, opposition-held areas slipped away from the control of the Syrian regime shortly after the beginning of the civil war, and despite intense fighting between multiple armed groups and conflict actors, remains under the authority of two de facto governments. In September 2013, the National Coalition for Syrian Revolution and Opposition Forces (SNC), which aims to replace the government of Bashar al-Assad, established a Syrian Interim government for Syria (Anadolu Agency, 2013). This was designed as a representative body in charge of project implementation with the international community and service provision in areas under the control of the Syrian opposition. The Syrian Interim government was initially established in Istanbul and operated in exile for a few years. During this period, it worked as a civilian authority focusing on delivering services through its network of administrative local councils. The Syrian Interim government was particularly involved in providing health and education services, establishing a number of universities and hospitals in the northwest of Syria with the financial support of the US, Saudi Arabia, and Qatar.

Between 2016 and 2019, Turkey launched a series of military offensives in northern Syria and gained great influence over the Syrian Interim government, which it designated as the political institution of reference. The opposition government became more rooted in the northwest of the country and established its headquarters in Azaz in the northern countryside of Aleppo. Despite its efforts to create a sub-national state structure, the Syrian Interim government largely failed its purpose due to political and military fragmentation and competition, lack of representativeness and funding, and the regional conflict between Saudi Arabia and Qatar (Darwish, 2016).

The Syrian Interim government was quickly challenged as the single governmental actor in opposition-held areas. In late 2015, the victory of a coalition of opposition armed groups in Idlib governorate prompted a rapprochement between the governor of Idlib and radical Islamist groups, such the al-Qaeda-linked al-Nusra Front (to be merged in HTS). Although it was disengaged from governmental activities and its immediate goal was not the establishment of an Islamic state in Syria, in September 2017, HTS and other opposition groups created the Salvation government as a second de-facto alternative government in opposition-held areas (Middle East Monitor, 2017). In doing so, they rejected the authority of the Syrian Interim government and created a form of dual power in the northwest of the country.

HTS also started a campaign to disband several local councils cooperating with the Syrian Interim government, replacing them with appointed councils linked with the Salvation government and transferring a number of roles and powers of local councils to the Salvation Government's technical directorates. On the other hand, HTS removed local political representatives and military commanders affiliated with radical Islamists groups in Idlib governorate. The growing influence and control of HTS over Idlib governorate resulted in a series of armed clashes throughout 2017 and in fierce competition between the Syrian Interim and Salvation governments (Enab Baladi, 2017).

Beyond offering an alternative authority to that of Bashar al-Assad's Syrian government and providing services to displaced and host communities in northwest Syria, the two opposition governmental bodies were established as channels to attract funds and gain international recognition. In a detailed report on the impact of the Syrian regime's policies on aid and reconstruction, Human Rights Watch deplored that 'the [Syrian] government's regular restrictions on the access of humanitarian organi[z]ations to communities in need or receipt of aid, selective approval of humanitarian projects and its requirement to partner with security-vetted local actors, while seemingly benign, ensure that the humanitarian response is siphoned centrally through and for the benefit of the abusive state apparatus, at the cost of preventing aid from reaching the population unimpeded' (Human Rights Watch, 2019).

The weaponisation of humanitarian aid in Syria (Berti, 2016), the difficult access to local communities, and the protracted nature of the conflict have left International Organisations (IOs) and International Non-Governmental Organisations (INGOs) limited options: either to operate remotely across the Turkish, Jordanian, Lebanese and Iraqi borders through local partnerships or to operate from Damascus, thus complying with the restrictions on humanitarian work imposed by the Syrian government (Duclos et al., 2019). Hence, the role of local actors and opposition government institutions has become crucial in order to reach communities in need of humanitarian assistance, and navigate around the Syrian regime's aid embargo. Yet, both the Syrian Interim government and Salvation government have failed to emerge as reliable service providers or to stand out as legitimate representatives of Syrian communities living in opposition-held areas. As a result, the international community has chosen to coordinate with decentralised institutions and civic actors – mostly local councils and local civil society – in order to reach grassroots communities and implement humanitarian and development programmes in the war-torn country.

Before the outbreak of the Covid-19 pandemic, the health sector in opposition-held areas was almost fully managed by civic actors, especially in Idlib governorate where Idlib Health Directorate (IHD) is a key partner of the international community. It was initially established in May 2013 to fill the gap in the medical sector after Syrian governmental medical institutions stopped providing medical services and prevented aid workers entering opposition-held areas. IHD gained nominal political independence from the Syrian Interim and Salvation governments to carry out its mission and has since worked in collaboration with main international donors – including during the Covid-19 pandemic. In northern Aleppo governorate, Hama, Latakia and Aleppo health directorates have also striven to implement the plan to confront Covid-19 under the supervision of the Ministry of Health in the Syrian Interim government. Besides, the health sector is managed by diaspora networks that established medical NGOs such as the Syrian American Medical Society (SAMS) and the Syrian Expatriates Medical Association (SEMA). These large NGOs and local civic actors have key roles in the management of hospitals and medical centres, and the provision of medical services. When the Covid-19 pandemic hit Syrian opposition-held areas, they were 'both the first responders and the main interlocutors with international organi[z]ations' (al-Achi, 2020).

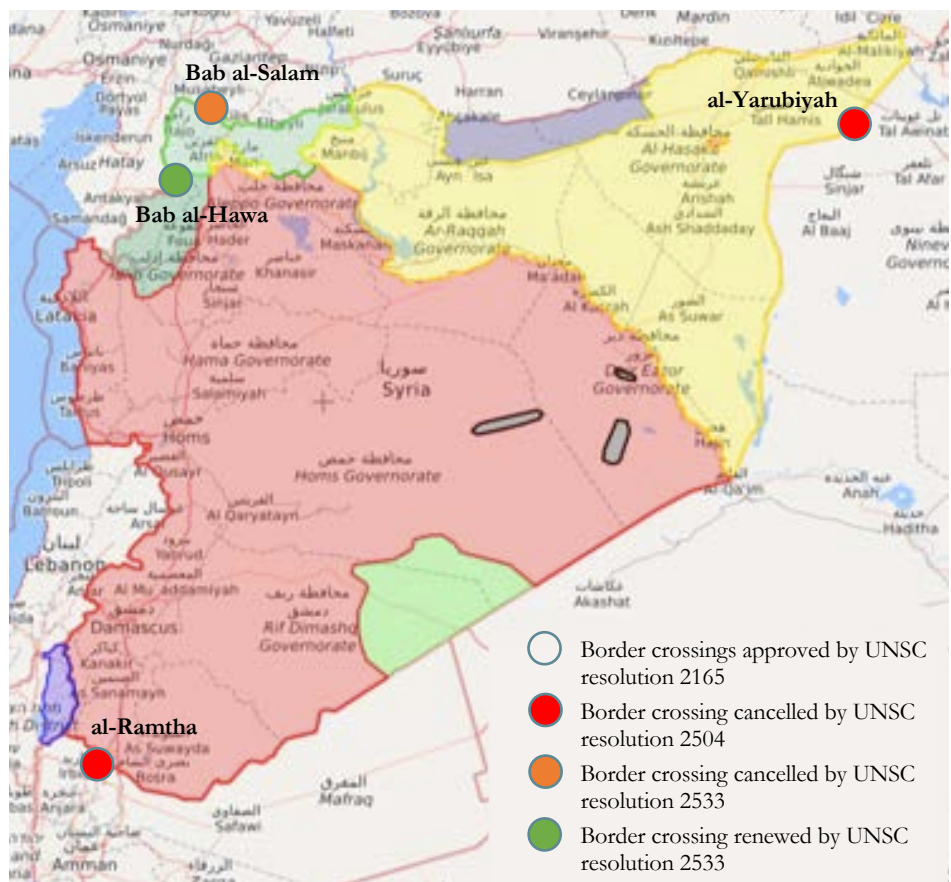
The Politics of Humanitarian Access

Covid-19 officially reached opposition-held areas on 9 July 2020 and immediately became a political issue. The two opposition governments questioned the neutrality and jurisdiction of IHD

over their respective areas of influence. The Syrian Interim government argued that, opposed to the IHD, it benefitted from medical supplies, distribution capacity, and political legitimacy through its links with Turkey. Similarly, the Salvation government argued that the areas under its control in Idlib governorate were home to highly vulnerable populations, including a large number of IDPs, and should therefore receive priority support. In addition, both governments approached key health NGOs to promote their own agenda and become the key partner of the international community in an attempt to secure international recognition and gain legitimacy.

Political competition over the Covid-19 file transcended the borders of Syrian opposition-held areas. In line with his official stance, President Bashar al-Assad claimed sovereignty and monopoly over the Covid-19 response across the whole country, including in areas which were effectively not under the control of his government. This narrative implied that the Syrian government must manage all border crossings, the only points of entry for humanitarian aid to Syria. In July 2014, the UNSC adopted Resolution 2165 that authorised UN agencies and their partners to use routes across conflict lines and four border crossings – two in Turkey, one in Iraq, and one in Jordan – to deliver humanitarian assistance to Syrian civilians living in areas not under the control of the Syrian government (Map 3). In doing so, the Security Council reiterated its demand that ‘all parties demilitarize medical facilities, schools and other civilian facilities’ (UNSC, 2014). The resolution has been renewed every year since.

Map 3: Border Crossings with Syria for the Entry of Humanitarian Aid



Source: Liveumap

In December 2019, Russia submitted a text to fellow members of the UNSC to close border crossings with Turkey, Iraq, and Jordan, thereby preventing aid from being delivered to opposition-held areas. Moscow insisted on coordinating all humanitarian operations with Damascus (UNSC, 2019). While the proposal was rejected, Russia used its veto as a permanent member of the UNSC to counter the renewal of the UN right over the use of border crossings to bring life-saving humanitarian aid into Syria (UNSC, 2020a). In January 2020, the Security Council therefore ended the entry of humanitarian deliveries from the al-Yarubiyah crossing with Iraq and al-Ramtha crossing with Jordan under resolution 2504. Aid continued to be provided without prior permission from Damascus through Turkey via the Bab al-Salam and Bab al-Hawa crossings. The closure of a humanitarian corridor between Iraq and Syria allegedly resulted in a 40% decline of UN medical aid in northeast Syria, later resulting in shortage of drug and Covid-19 testing kits (Nashed, 2021).

The story repeated itself in July 2020 when Russia, backed by China, wielded its veto to prevent the renewal of the two border crossings between Turkey and Syrian opposition-held areas. Eventually, and after a lobbying campaign led by Germany, Great Britain, and France, only Bab al-Hawa border crossing remained opened as the UN's last remaining entry point for transporting assistance into northwest Syria and the 4 million Syrians who depend on external aid (UNSC, 2020b). But the decision came with logistical challenges: Bab al-Hawa is smaller than Bab al-Salam and does not allow many convoys to go through, resulting in queues at the border and delays in the delivery of aid. It is thought that aid reaches the opposition-held areas in northern Aleppo governorate only once every two months, compared to every couple of weeks when the Bab al-Salam crossing was still operating (Nashed, 2021). While the survival of millions of Syrians is paramount to the opening of the al-Bab border crossing, the latter was re-authorized on 10 July 2021. The failure to renew the mandate in the future would mean that 50% of humanitarian aid in northwest Syria, that is currently provided by UN agencies, would disappear (Lund, 2021) and that these agencies will have to reroute all their operations through Damascus.



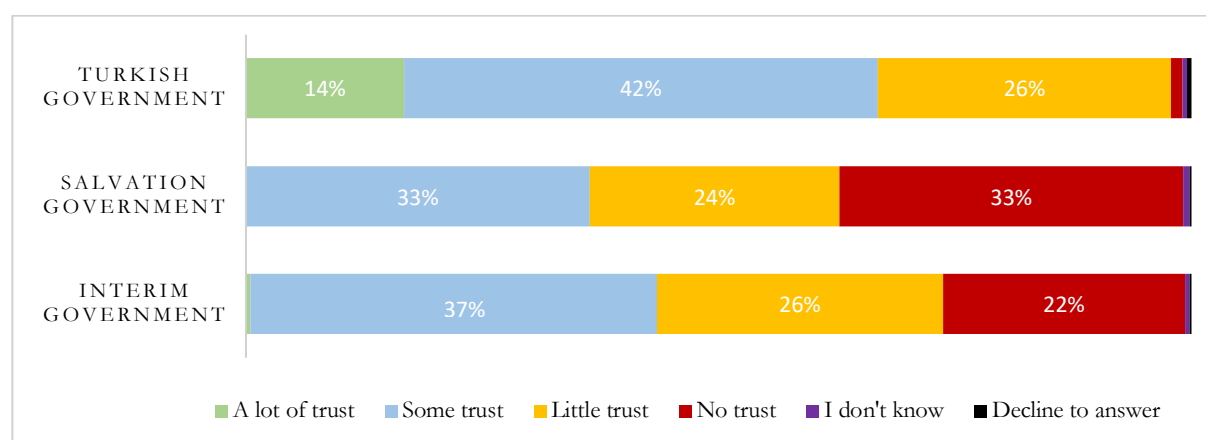
All conflicts can be transformed. © Bushra al-Bakhri

POLITICAL TRUST

Political trust and the legitimacy of official institutions are key factors in convincing grassroots populations to embrace and implement the policy aimed at mitigating the impact of a health crisis, as shown during the polio outbreak in Syria in 2013 (al-Moujahed et al, 2017). The Covid-19 pandemic and its official response were commonly seen by the Syrian government and the two de facto governments in the opposition-held areas as an opportunity to reinforce their authority and legitimacy. Despite their apparent interest in managing the pandemic, the lack of engagement of these governmental actors to effectively protect their citizens further damaged their images inside Syria. In Idlib governorate mainly, the Salvation government could not endorse the role of a unified authority capable of issuing and enforcing decisions across the governorate. This lack of monopoly, coupled with the mistrust of Syrian people, and the influence of rival factions over various localities, were strong barriers to a unified and efficient official response to Covid-19 (COAR, 2021: 22).

Strained state-society relations and mistrust pre-existed the Covid-19 pandemic. Indeed, governmental actors across Syria are also key conflict actors, and their reputations have been recurrently and generally damaged by lack of governmental capability, latent corruption, and involvement in violent policies. During the pandemic, the role of governance bodies was eclipsed by the civil society and health directorates operating with various levels of independence, and several Turkish health directorates operating across the border in areas under the control of the Syrian Interim government. The perception of Syrians we interviewed who were living in opposition-held areas reflected this lack of trust towards governmental bodies (Graphic 1). In northern Aleppo governorate, 48% of Syrians interviewed put little to no trust in the Interim government, while the number reached 57% in the case of the Salvation government in Idlib governorate. Barely any respondent put a lot of trust in any of the two de facto governments to protect Syrians against the virus.

Graphic 1: To what extent do you trust the response of the following actors to the Covid-19 pandemic in northwest Syria?



* n=50 (January-March 2021)

One member of the Azaz Media Office attempted to explain the lack of trust of the public in the northwest of the country: ‘At the local level, governmental authorities have been unable to truly deal with the pandemic, but they also failed to provide transparent updates on the evolution of the virus. For instance, health authorities affiliated with the de-facto governments have been accused of falsifying the number of positive cases and death linked to Covid-19’. Twenty seven-year old Hiba,² who was displaced to Azaz in the northwest of Aleppo added: ‘I absolutely lack confidence in the Syrian Interim government. Its ministries have no access to the local community and all the services and administrative support we receive are delivered by local councils with no clear cooperation with the Interim government’. In Afrin, 37-year old Amir, who worked on awareness campaigns during the pandemic, offered a different view: ‘The Syrian Interim government is officially ineffective, but it is a useful channel for the Turkish health directorates that have been very active in the response to the Covid-19 pandemic’.

Like Amir, respondents offered more nuanced perceptions on the role of the Turkish government, which gathered 56% of some to a lot of trust, often based on pragmatic reasons. Mustafa, a 38-year-old displaced man residing in the northern countryside of Aleppo, explained that the Turkish government was the only source of aid during the pandemic and that it cooperated with local councils and health directorates to implement specific policies to protect the public. Even in Idlib governorate, where Ankara does not exert strong political influence, perceptions are rather positive as illustrated by 34-year old Mahmud, who was displaced from the countryside of Damascus during the conflict: ‘I am very confident that the aid, analysis materials and other tools to fight Covid-19 are coming through Turkey, which is the only entry point to our region in Syria’. Twenty two-year old Dunia added that the Turkish government had a good reputation in Idlib, where people had heard about strong mitigating measures being implemented in Aleppo governorate. She also said that the Idlib Health Directorate, which assumed a central role in the response to the Covid-19 pandemic in Idlib, was assisted by the Turkish authorities.

Despite its violent past military offensives, including against elements of IS and the Syrian branch of Kurdistan Workers’ Party (PKK) in northern Syria from 2016 to 2019, Ankara played an essential role during the pandemic. Through its health directorates and its cooperation with Syrian local councils in areas under the control of the Syrian Interim government, neighbouring Turkey largely controlled the Covid-19 response and imposed a series of mitigation measures (COAR, 2021: 23). Before Covid-19 became a source of concern around the world, Turkey equipped most hospitals and medical centres affiliated with the Turkish Health Ministry, and it provided medical services in more isolated, rural areas (Darwish, Masri and Malass, 2020). While this positive role was offset by the marginalisation of I/NGOs under heavy Turkish supervision and slow bureaucracy, this response accounts for the relative trust placed in Ankara compared to other governmental actors in Syrian opposition-held areas. Moreover, Turkey remained the only point of entry for UN agencies and essential medical supplies to Syrian opposition-held areas through the Bab al-Hawa border crossing, in the northwest of the country, after the UN failed to renew its mandate on other crossings in July 2020 due to the Russian veto (UNSC, 2020a).

² All names have been modified to ensure the anonymity and safety of respondents.

Conspiracy Theories and Misinformation

Beyond a clear lack of trust from the general public, the politicisation and political competition over the Covid-19 file by opposition governmental actors in Syria has resulted in the multiplication of discourses on the pandemic and levels of inconsistency. Also, the lack of independent media and pressure on alternative voices in northwest Syria has reinforced mistrust in official information in general and on Covid-19 in particular. In opposition-held areas, which remain the beating heart of the revolution, the de facto governments have failed to support the creation of a new media landscape and foster freedom of the press. External media in support of the protests against the Syrian regime dominate media coverage, while local media remains deeply politicised and affiliated to conflict actors. The local media also lacks financial independence and logistic capabilities. In this environment, ‘neutral’ media face the most pressures and challenges, while journalists are confronted with multiple threats, as reminded by the assassination of Hussein Khattab in December 2020 (The Syrian Observer, 2020). The prominent media activist was assassinated by ‘unknown gunmen’ while preparing a photo report on Covid-19 in al-Bab, 45 kilometres to the northeast of Aleppo. The assassination triggered a wave of public outrage in northern Syria (Odeh, 2020) and abroad (Syrian Center for Media and Freedom of Expression, 2020).

A member of the Azaz Media Office in Aleppo governorate reflected on the main challenges the nominally independent office encounters, despite its efforts to participate in awareness campaigns about the virus: ‘The lack of funding prevented us from supporting awareness campaigns, that lost their power to convince people. If we tell people to wear masks but we don’t distribute them and people cannot afford to buy them, the campaign is pointless’. He added: ‘We lack the equipment to report local news and raise awareness about the virus. For instance, we do not have enough cameras which leads us to produce mainly photo material for the awareness campaign instead of videos. Unfortunately, this type of format weakens the impact of the campaign because it excludes people who cannot read the text that comes with the picture’.

As a result of competing or inaccessible discourses, the great majority of Syrians we talked to as part of this research relied mostly on social media – considered the only truly independent media source – and their close social circles to keep informed and updated about Covid-19. Over-reliance on these non-expert sources of information accelerated the spread of rumours and inaccurate news. This phenomenon was perhaps more present in Idlib governorate, where the Salvation government is unofficially affiliated to the Salafi-jihadi group HTS. The response to Covid-19 thus featured a religious element (Elin, 2020). The government adopted pragmatic policies by closing koranic schools, mosques and forbidding Friday prayers. It also engaged religious clerics and preachers to educate their congregants on the virus and to echo the official discourse. The Salvation government created a weekly YouTube show called ‘Corona and Sharia’ and distributed Zakat (the compulsory contribution to charity) to the most vulnerable residents. Yet again, the shadow of HTS and the mistrust in the Salvation government, in addition to the latter’s lack of capacity and effective control over all Idlib governorate, prevented the official religious discourse from reaching grassroots populations. This gave a platform to other, independent religious voices, not just in Idlib but also in Aleppo governorate. General confusion about the Covid-19 pandemic therefore grew, especially when some religious clerics not affiliated with any government suggested that the virus was a lie and a conspiracy against Islam used to forbid prayers and pilgrimage. Similar

theories spread across the world through social media when clerics stressed that Muslims were immune to the virus and that the vaccine would turn Muslims into unbelievers (Keskin, 2020).

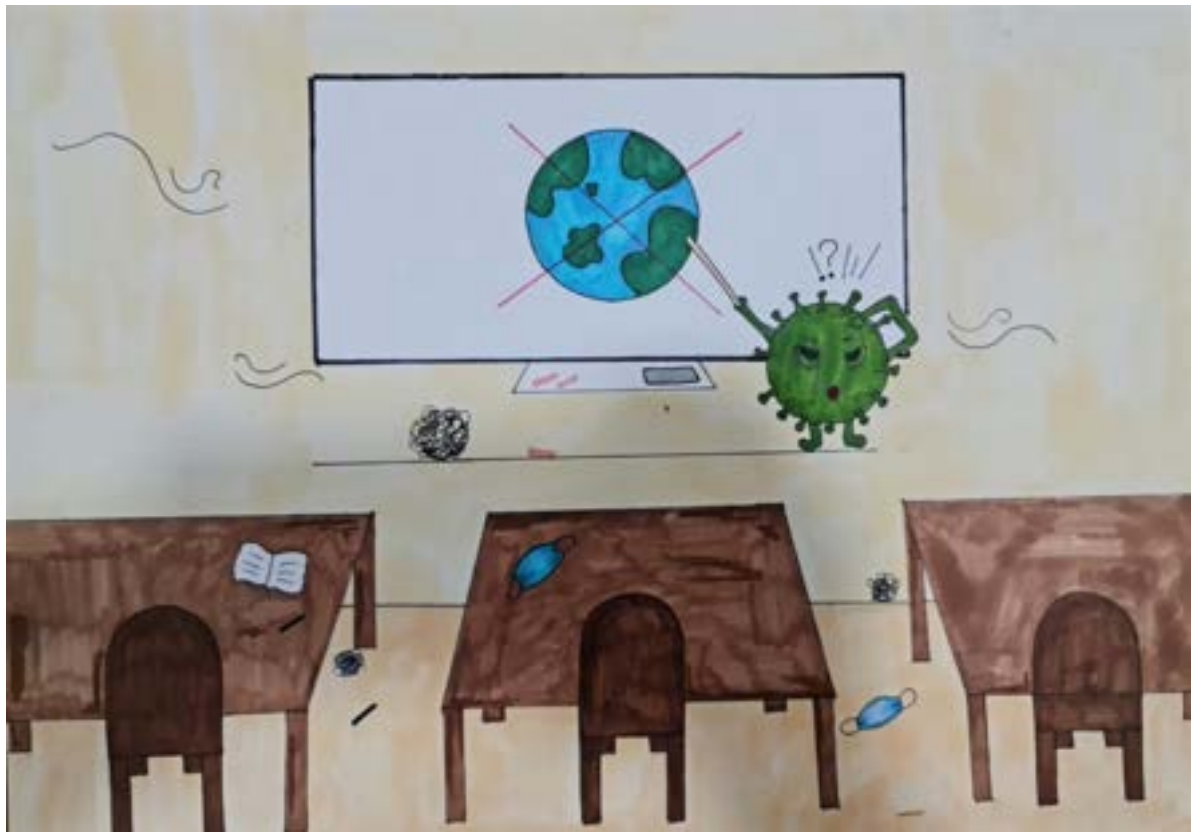
Locally, rumours continued to spread alongside Covid-19. The early pattern of transmission meant that the virus reached Syria but not initially opposition-held areas, so it was believed that anyone found to be infected in the prisons of the Syrian regime would be sent to the last bastion of the opposition in northwest Syria. The strategy was seen as a way for the Syrian regime to put a final nail in the coffin of the insurgency, without attracting international visibility at a time when the UNSG had urged warring parties around the world to cease hostilities in face of the pandemic. There is no formal evidence to back these claims, even though social media pages affiliated and supporting the Syrian regime published threats to introduce the virus into opposition-held areas (they have since deleted these posts). Yet, these rumours account for the fear and the deep mistrust of the Syrian population towards the Syrian president, who became particularly infamous after launching chemical attacks against civilians during the conflict.

Uncontrolled Population Movements Between Syrian Governorates

Another source of concern for the public in northwest Syria has been the daily smuggling of people and goods from areas under the control of the SDF in the northeast and the Syrian regime, to the opposition-held zones which are a bridge to Turkey and Europe. In the early months of 2020, smuggling intensified due to the closing of all borders between Syria, Jordan, and Turkey, and international airways suspending flights. As a result, illegal routes became the only options to avoid conscription or a prison sentence, or simply to escape harsh living conditions. Yet, none of the military groups in charge of those routes were willing to regulate the flow of population movement, nor to control general health conditions to prevent the propagation of Covid-19.

In April 2020, the Syrian Interim government closed all crossings with the areas held by the Syrian regime, which may have contributed to delay the arrival of the virus to the northwest by four months. But the decision also created challenges for local trade and the economic sector, including the availability of goods in local markets (Hammou, 2020). Moreover, on 25 July 2020, the Salvation government was forced to impose a quarantine on a whole village, Sarmin, after a female teacher coming from the area controlled by the Syrian regime through Aleppo governorate was found to be infected by the virus. Several activists vehemently criticised opposition authorities for poor medical checks at the crossings leading to regime-held areas, and their inability to ensure the safety of their citizens. It was later confirmed that the woman had entered illegally through one of the smuggling crossings in the northern countryside of Aleppo before mixing with local population and medical staff in Sarmin (Enab Baladi, 2020f).

All in all, mistrust, misinformation and the multiplication of sometimes contradictory discourses on the Covid-19 pandemic had an adverse impact on the way grassroots communities responded to the virus. The great majority of the population in opposition-held areas adopted reckless behaviours, negligence, and refusal to take mitigating measures seriously. As explained by one of the residents we interviewed: 'A decade of war did not kill us; we are stronger than the people outside Syria so why should we be afraid of the virus?'



Where is the world? © Sana Aboud



Covid-19 is only another crisis for Syrians © Ola Handawi

SOCIAL COHESION

It could have been expected that Covid-19 would have a negative impact on strained society relations in northwest Syria, which had become home to the greatest population of displaced people in the world. The process of forced displacement began years before the virus hit the world, and the arrival of millions of Syrians in opposition-held areas became a great challenge to local peace and stability before Covid-19.

Local Peace Agreements and Forced Displacement as a Weapon of War

The military intervention of Russia alongside President Bashar al-Assad in Syria in September 2015 was a game-changer in the Syrian conflict. In addition to changing the predicament on the ground in favour of the Syrian regime that was now able to regain control over most national territory, the Russian presence in Syria altered the nature of peacemaking in areas recaptured from opposition forces. For instance, the destructive battle for Eastern Ghouta – largely won by the Syrian regime at the price of some 13,000 civilian lives – prompted opposition forces to negotiate their exit from cities and villages around Damascus after five years of siege (April 2013-April 2018) and war crimes allegations (Middle East Eye, 2018; SNHR, 2018; UN Human Rights Councils, 2018). Negotiations were led exclusively by the Russian military and offered a simple choice to opposition groups and affiliated local populations: leave or die (PSRP, 2017b). And so began a process of forced displacement from areas recaptured by the Syrian regime – with the support of its Russian and Iranian allies – to the northwest of Syria (Amnesty International, 2017).

Similar deals were struck across Syria in 2017 until the summer of 2018, mainly in Homs and its countryside (PSRP, 2017a), Damascus and its countryside (PSRP, 2017c), Quneitra (al-Arabiya News, 2018) and Daraa (al-Quds al-Arabi, 2018). The texts of some of these ‘peace deals’ are available on the PA-X Peace Agreements Database hosted by the Political Settlements Research Programme (PSRP) at the University of Edinburgh (<https://www.peaceagreements.org/search>). These deals coincided with the first rounds of Astana talks launched in early 2017, that granted Russia, Turkey, and Iran the status of guarantor states with the task of implementing UN Resolution 2254 that called for a ceasefire and political settlement in Syria (UNSC, 2015). The move reinforced the influence of external powers on mechanisms of conflict resolution within the Syrian conflict.

More civilian displacement followed ceasefires and so-called ‘peace deals’ when the returning Syrian regime launched a series of arrests and imposed conscription in the Syrian army. Displaced Syrians fled to opposition-held areas in Idlib and northern Aleppo governorates in the northwest of the country. As of March 2020, these areas were home to four million people, one million of whom were displaced following the violent ‘Dawn of Idlib’ offensive of the Syrian regime and Russian forces between December 2019 and March 2020. Beyond the humanitarian tragedy triggered by the repeated attacks, regional health infrastructures were targeted and destroyed. Between February 2019 and February 2020, at least 67 medical facilities were subjected to approximately 88 attacks in the northwest, which greatly hindered the ability of regional institutions to respond to the Covid-19 a few months later (SNHR, 2020).

When the virus hit opposition-held areas, more than half of the population was displaced and 2.8 million were in need of humanitarian assistance (OCHA, 2020b). This demographic shift put a strain on services and resources, but also on local social cohesion. As a result, while ‘peace’ settlements contributed to inactivating the violent conflict between the Syrian regime and opposition groups, these settlements also displaced the conflict to the northwest of the country and caused more intra-Syrian tensions.

Accommodating Syrian Diversity – Challenges for Social Cohesion

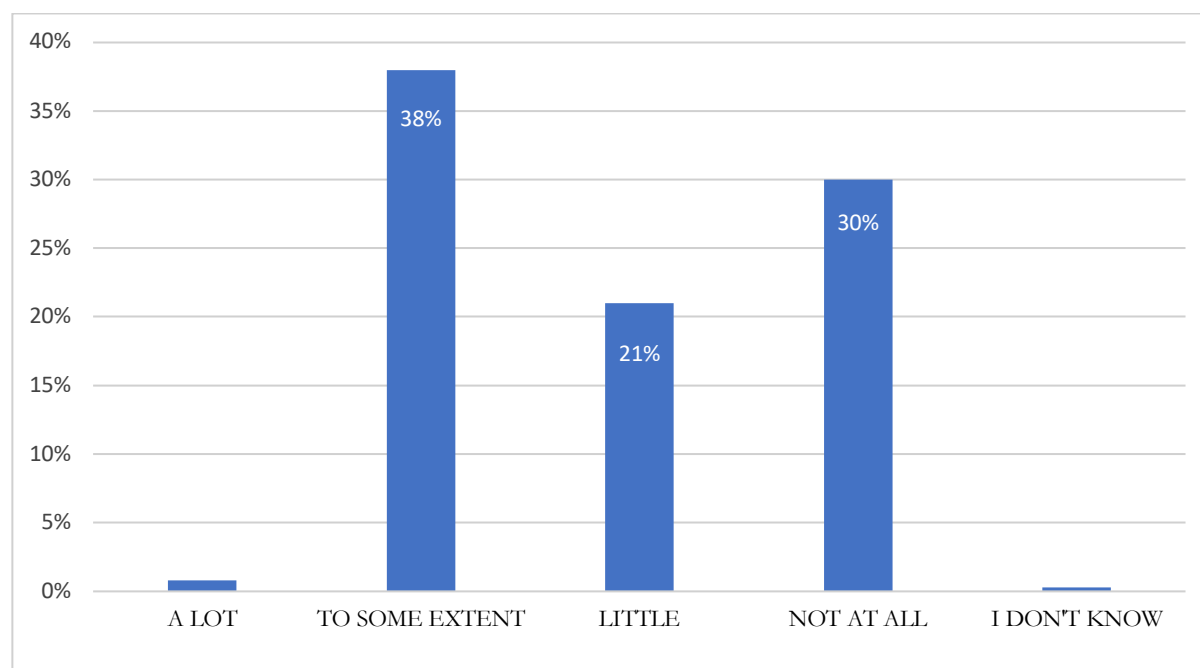
Cities in northwest Syria are particularly vulnerable to social tensions because they accommodate different communities that bring their own socio-cultural norms as they migrate and escape violence. This diversity, in return, generates social tensions that may jeopardise peacebuilding and development efforts at the local level. For instance, such tensions erupted in two villages located in the countryside of Aleppo, Sujo and Bab al-Salammah. The two villages are originally home to 3,000 residents spread over kilometres of rural areas. The local population is poorly educated and notorious for joining the ranks of several radical groups since the outbreak of the Syrian conflict. When thousands of displaced, very well educated and socially respected Syrians from Tal Refat relocated to Sujo and Bab al-Salammah, they asked for schools and education structures to be established. When the projects were implemented by humanitarian and development agencies, IDPs relied on their qualifications and successfully applied for education jobs. Local villagers, who lacked education, were unable to compete and did not benefit from the same job opportunities. As a result, clashes erupted resulting in the death of three young men. The dispute remains unsolved despite mediation attempts from Turkish figures, tribal leaders, and NGOs.

And yet, the research suggests that Covid-19 generally did not have any strong impact – both in positive and negative terms – on social cohesion in northwest Syria, although there were some local variations based on local specificity. For most of the Syrians interviewed, the pandemic only had a positive effect on social cohesion and solidarity between Syrian communities to a certain extent (Graphic 2). On the one hand, solidarity was mostly expressed in terms of awareness campaigns and distribution of food baskets and sanitation kits by local civil society and other volunteers. Beyond these initiatives, solidarity was restricted at the family level where close relatives supported each other financially and psychologically during the pandemic. Riba, a young woman from Idlib explained: ‘The pandemic increased trust and cohesion among same communities, even though we showed solidarity with the families of those who were tested positive to the virus’. Nala also lives in Idlib and she saw the positive impact of Covid-19 on communication within her family, as relatives started checking on each other more regularly but also updated each other on the evolution of the situation.

While cohesion increased within communities, the pandemic may have reinforced the lack of interactions between them. According to Musa who lives in Afrin, which hosts both Arab and Kurdish communities, mitigating measures had a positive impact wherein they reduced local social tensions: ‘tensions between communities pre-existed the pandemic in Afrin but the immobility imposed on us with stay-at-home policies emptied the squares and reduced interactions between communities’. Inhabitants of al-Bab, a city located in the northeast of Aleppo and that welcomed

close to 65,000 displaced for a host population of less than 18,000 people, witnessed similar dynamics as the existing lack of integration and tensions decreased during the pandemic.

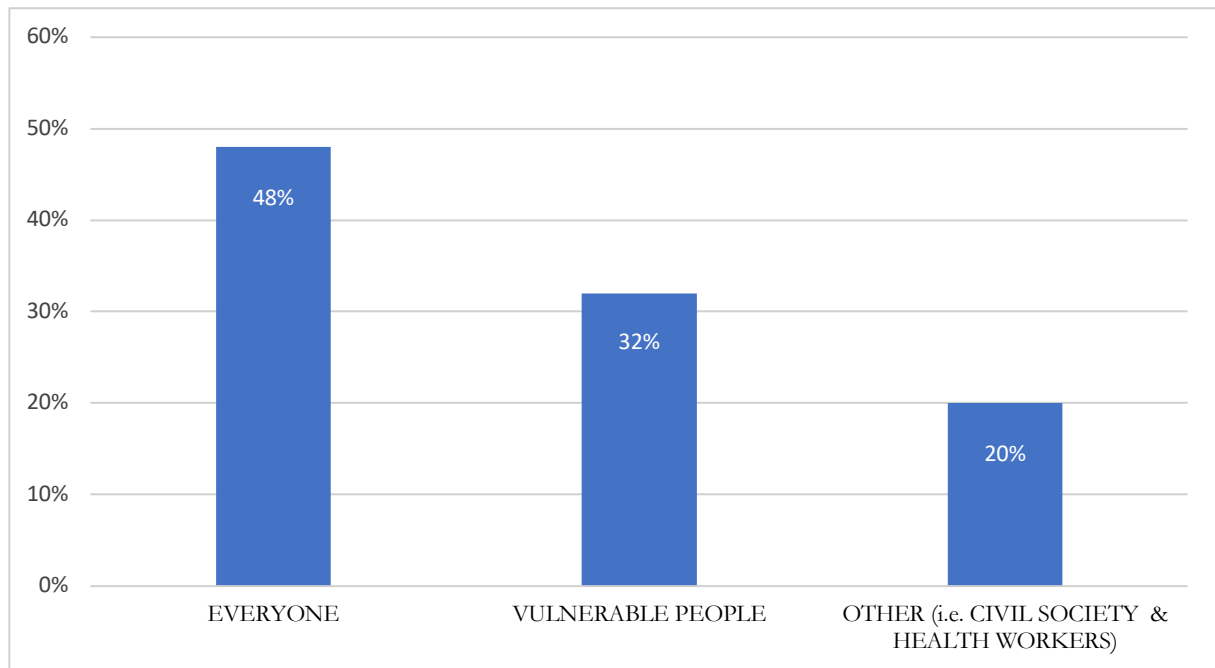
Graphic 2: Did Covid-19 foster solidarity and cohesion between communities in your area?



* n=63 (January-March 2021)

Most respondents who believed that Covid-19 did not create more solidarity among Syrian communities were living in Idlib at the time of the research. It seems that networks of solidarity were more numerous and successful in northern Aleppo governorate, excluding in Afrin where Mohammad lives and told the author: ‘Only health workers have the capacity to work with all communities without discrimination. Otherwise, solidarity is limited to families’.

Sporadic tensions arose after the prioritisation of displaced communities for the distribution of health kits and aid. Certain mitigating measures against the virus, such as social distancing, could not be implemented in IDP camps in northwest Syria, especially in Idlib governorate, and therefore displaced Syrians became particularly vulnerable. As a consequence, most NGOs chose to focus their actions on IDPs. But the rationale failed to convince host communities that argued that the virus did not discriminate, and that aid should reach all Syrian residents in the opposition-held areas (Graphic 3). While local civil society tried to mitigate tensions between displaced and host communities by explaining the prioritisation of the first group, the success of their mediation relied mostly on individuals’ communication skills and the goodwill of local communities to understand the vulnerability of IDPs in the face of the virus. But according to several activists and staff of local councils in northern Aleppo and Idlib governorate, quantities of aid, notably food baskets, provided by donors were simply too small to create deep social tensions.

Graphic 3: Who should receive priority support in face of the Covid-19 pandemic?

* n=63 (January-March 2021)

The low impact of the pandemic on relations between host and displaced communities took on a large degree of local specificity and greatly depended on the level of integration of IDPs before Covid-19. Al-Janudiyah – located in the far western countryside of Idlib on the borders with Latakia governorate – and Azaz – often referred to as ‘a miniaturised Syria’ in reference to the arrival of around 200,000 displaced Syrians from all over the country – showed examples of solidarity and generosity towards more vulnerable people during the pandemic. Maya, a student who was displaced twice by the conflict, narrated how she became more integrated during the pandemic by participating in voluntary campaigns in Azaz. The young woman distributed masks to fellow students, and decorated the streets and public spaces of the city among other activities.

The pandemic also shed light on the socioeconomic discrepancy between Syrians living in the northwest and the increasing awareness of belonging to a certain social class. A resident of Azaz, the centre of the opposition authority in northern Aleppo governorate, observed:

‘Poorer Syrians realised that they could not overcome the epidemic in the event of its spread; they simply could not bear its cost, including buying masks and hand sanitiser but also the absence of salary should they quarantine themselves. On the opposite, rich families had the option to travel to Turkey where medical aid was more accessible and they could refer to a doctor and get medical treatment in the event of an infection’.

The pandemic deepened the gap between the poorest and richest Syrians, with prices of Covid-19-related non-food items increasing by 300 to more than 430% in the first six months of the pandemic (World Food Programme, 2020: 6). The economic impact of Covid-19 only aggravated the rampant inflation that saw the Syrian pounds falling to a record low on the black market, where US\$1 equalled more than SYP 3,000 in June 2020.

Finally, it must be noted that armed groups and military personnel were not heavily involved in the mitigation of the Covid-19 pandemic and implementation of related policies such as the medical control of Syrians at crossings. According to the Syrians we interviewed, Covid-19 did not change the nature of respondents' relations and perceptions towards the military, and 63% of respondents put 'no trust at all' in armed groups. Despite the lack of interactions and confidence, the pandemic did not aggravate tensions except in rare exceptions like the case of al-Bab. Even before the virus entered opposition-held areas, the Syrian Interim government took preventive measures to protect the public from an 'invisible threat'. It was assisted by police forces and the National Army to empty the streets of main cities and close all markets among other measures. In al-Bab, clashes escalated between the police and the army who had not coordinated their actions. This resulted in a shooting and the killing of several members of each side (Enab Baladi, April 1, 2020). Hence, while the pandemic could have been seized as an opportunity to increase the social value of armed forces in northwest Syria, poor coordination with governmental institutions and among the armed forces themselves reinforced their status of conflict actors and drivers of instability.



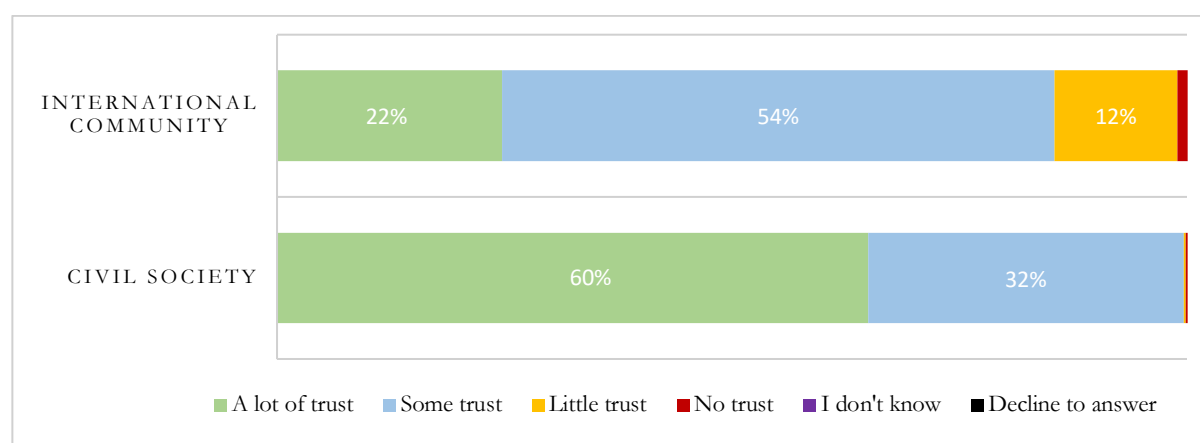
Syrian solidarity © Rujin Utman

THE ROLE OF CIVIL SOCIETY

The official response to Covid-19 in Syrian opposition-held areas was weak and lacked coordination in both Idlib and northern Aleppo governorates. As a result, it was quickly supplemented and eclipsed by the intervention of the international community – mainly the WHO-led Health Cluster cross-border operation in cooperation with other UN agencies and I/NGOs for development and emergency planning – alongside local civil society. Despite the official concern of the international community for the situation of the four million Syrians trapped in the northwest of the country, the WHO felt conspicuously absent from the ground as illustrated by the delay in the distribution of aid and testing kits that arrived in opposition-held areas one month later than regime-held areas. Through the voice of its spokesman, Hedinn Hallsorsson, the WHO justified the delay in the arrival of Covid-19 equipment by the unofficial status of the opposition-held areas which are not a country, and thus affects access to medical aid.

In an interview given to *SyriaDirect* in April 2020, the Minister of Health of the Syrian Interim government, Dr. Maram al-Sheikh, regretted the WHO's 'policy of bias and inequality' towards Syrians (Hammou, 2020). In April 2020, according to official sources, the WHO mission in Gaziantep had only provided 5,000 Covid-19 tests through the Syrian NGO Assistance Coordination Unit, for a population of over four million (Ibid). The feeling of injustice by Syrians only increased when Syria and its internationally-recognised government was elected to the WHO Executive Board in May 2021, a decision that sparked protests and outrage among activists. The perceived lack of involvement of the international community and its biased policy towards northwest Syria probably account for the relative low trust respondents put in the international community compared to the local civil society (Graphic 4).

Graphic 4: To what extent do the trust the response of the following actors to the Covid-19 pandemic in northwest Syria?



* n=50 (January-March 2021)

‘Inheriting’ the Covid-19 File

Local civil society was at the forefront of the Covid-19 pandemic in northwest Syria. One could say that it inherited the Covid-19 file after the international community refused to deal with opposition governments and let internal politics interfere with the Covid-19 response – despite its own reluctance to operate beyond regime-controlled territories. According to several activists and humanitarian workers whom we spoke to inside Syria, the choice of the international community carried an important message: political bodies were discredited in Syria, both inside and outside opposition-held areas. The move could also be interpreted as the recognition that local civil society in northwest Syrian is not a mere de facto substitute to governmental authorities’ failures to deliver services and meet the needs of local populations. Local civil society was endorsed as a competent and neutral actor to provide relief and protect grassroots communities.

As a direct consequence, local civil society gained legitimacy and confidence both inside and outside Syria. While the Syrian government securitised its response to the pandemic and curtailed the role of NGOs and the private sector (COAR, 2021: 3), local civil society flourished in opposition-held areas and enjoyed a lack of political and military interference in its activities. It played a key role in the support of I/NGOs and the region’s main health directorates. Civil society was maybe more involved in the management of the pandemic in northern Aleppo governorate, where several INGOs saw their role curtailed by heavy Turkish supervision and bureaucracy (Ibid: 23). This intervention broadly included community engagement activities and awareness campaigns, but also the exchange of financial and human resources and the delivery of goods, and finally access to healthcare staff and facilities for those who had tested positive.

The new responsibility of local civil society to mitigate the impact of Covid-19 came with great challenges. The classification of Syria as a ‘very high-risk country’ by the WHO in March 2020 and the UN call for a global ceasefire pushed INGOs and donors to shift their priorities and funding, thereby directly affecting the nature and missions of local civil society. The Covid-19 pandemic did not only affect the working environment and practicality of the programmes carried out by local NGOs and other Civil Society Organisations (CSOs). In addition to adapting their work to social distancing measures and virtual activities, they saw the scope of their development-oriented projects redirected to emergency plans including the distribution of medical kits, as well as Covid awareness and sterilisation campaigns. While the virus had not yet reached opposition-held areas, funding was then cut, frozen or simply could not reach Syria through the usual channels in Turkey, Jordan, Lebanon, or Europe, which were all strictly quarantined. As explained by a member of the White Helmets: ‘We started fighting something that did not exist for us, but local populations were still lacking access to primary healthcare and other services’. In addition to the 5,000 children who were not able to attend school in Idlib and the prohibitive cost of the internet in the governorate, the closing of Bab al-Salam border crossings and the interruption of the distribution of food baskets greatly impacted the local economy.

These factors left local civil society working from a reactive paradigm, or what the inhabitants of the Levant call ‘*Nidham al-faza*’, literally ‘the dread system’. The expression characterises the work made in ‘happening’ environments where programmes fail to rely on an informed assessment of the situation, strategic planning, capacity, and training. In this regard, several local activists and

staff of NGOs and CSOs surveyed in northwest Syria regretted that civil society was only an ‘implementer’ of the policies and priorities of the international community and donors. In other words, while it enjoyed a good level of political independence, local civil society lacked freedom of action and remained mostly dependent on external funding.

But the Covid-19 pandemic might yet offer an opportunity for a more balanced relationship. Facing the emergency and confronted with the lack of access to opposition-held areas in Syria, civil society became a key partner in the creation of an emergency response plan. Moreover, the pandemic also triggered the creation of creative and coordinated initiatives. On 19 April 2020, Idlib Health Directorate and the Syrian Civil Defense – commonly known as White Helmets – launched the Initiative of Volunteers Against Corona, an inter-sectoral operation room composed of around 50 local organisations and 600 volunteers (Enab Baladi, 2020d). The local initiative was the first of its kind since the beginning of the Syrian conflict in March 2011. It aims to institutionalise civil society to coordinate and facilitate the response to the virus and the protection of civilians.

Under the leadership of the White Helmets, the initiative established several confinement centres for patients infected by the virus, conducted campaigns of sterilisation of schools, mosques and public spaces, provided hundreds of awareness sessions within weeks, and distributed guidance brochures including information on mitigation measures such as hygiene and social distancing (Half of Syria, 2020). While it proved successful in the context of Covid-19, the new unified front might use this momentum to project its influence beyond the arena of humanitarian relief and development in Syria. It also provides a starting point to mitigate the deficiency of the official response to humanitarian emergencies, mainly due to the lack of a central coordinating authority which led the majority of I/NGOs to operate autonomously and without guidance or cooperation with governmental institutions.

Increased Cooperation and Leverage

The Covid-19 pandemic created an impulse for collaboration and coordination among CSOs, a practice that was absent before the arrival of the virus. In an illustrative instance from this research, consider an organisation which had received funding to distribute face masks. Staff from the organisation confirmed that, before Covid-19, they would have gone to the local market to sell the stock they had received. Instead, they cooperated with another organisation that implemented vocational training for women in a sewing factory. Together, they used the first stock of masks as patterns and asked women to produce more as part of their training. They also received health and security feedback from the Syrian Civil Defense and IHD for quality control of the products and their distribution. Through their coordinated action, these two local organisations not only increased the number of available masks in the area, but they also reinforced women’s financial independence and sense of purpose during the pandemic. In the words of several volunteers and activists in northwest Syria, before the Covid-19 crisis, Syrian CSOs were ‘forced’ to cooperate by donors, but the practice became natural during the pandemic.

Local civil society also tried to foster social cohesion and solidarity between grassroots communities. Most importantly, the activities implemented by local CSOs did not discriminate between ethnic and religious groups, gender or age – even though vulnerable people such as IDPs

inside camps were often prioritized for aid delivery. A local initiative prepared and distributed food baskets to front line health workers and their families. Also, local CSOs created a special uniform for street cleaners to protect them and allow them to go out easily during the confinement, without fearing military or police control. Last but not least, local civil society put unprecedented efforts into raising awareness about the virus and mitigating measures, but also the need to target the most vulnerable people in order to ease tensions between communities, notably between displaced and host communities. As such, and in addition to distributing aid, local civil society became a key transmission channel to fight misinformation and raise public awareness about the virus and protecting measures via door-to-door and mobile campaigns (CSPPS, 2020).

Medical services are free for all in opposition-held areas, but people must be willing to visit hospitals and medical centres. Crucially, local people must trust the institutions and staff delivering these medical services. Building knowledge and trust was a key mission of local civil society during the pandemic. These campaigns were also used to break isolation and provide educational and psychological support to civilians.

The health crisis in northwest Syria showed the relevance of local civil society as a key asset of crisis mitigation and a bridge between decision-makers and officials on the one side, and grassroots communities on the other. A humanitarian officer working in Azaz reflected on this new leverage: 'In addition to institutionalising the process of crisis mitigation during the pandemic, we showed our ability to pressure the Syrian Interim government in the liberated areas to protect the people while following international standards of humanitarian work'.

The Spectre of the Syrian Conflict

The flexibility of local civil society and its unique access to local populations make it a crucial partner of humanitarian and development work in opposition-held areas. But, on the ground, there is a growing consensus that local civil society should play a greater role in the negotiation of the political settlement of the Syrian conflict and in the talks on the future of the country. This raises the question of how to remain neutral and impartial in terms of military and political affiliations, in a conflict that is characterised by a high level of fragmentation.

Syrian civil society has not been spared from infighting and is divided between NGOs and CSOs that are supportive of the Syrian regime, and those who operate in opposition-held areas. In an attempt to unify Syrian civil society, in September 2016, the Civil Society Support Room (CSSR) convened a meeting in Geneva of about 20 representatives of NGOs and CSOs (Amman, 2018). As part of this research, the authors met about 20 people who had attended the meeting, who all confirmed that discussions were infused with political objectives and the irreconcilable opposition between 'the loyalists' and 'the terrorists'. Eventually, the talks failed to achieve consensus around the key humanitarian principles of neutrality and impartiality. Further rounds of discussions took place in the margins of political and diplomatic meetings in Geneva, but these representatives remained excluded from the 'important' talks between key conflict actors.

The politicisation of humanitarian aid in Syria is not the monopoly of state actors involved in the conflict (Marks, 2019). At the local level, being branded as a member of civil society is a guarantee to attract funding and publicity, and to achieve personal political goals. As a result, lives of civil

society actors in opposition-held areas are punctuated by a rapidly-changing landscape where corruption allegations and reports of links with armed groups are used as tools to discredit competing NGOs/CSOs and blacklist them in donors' networks.

Overcoming these challenges to the inclusive and meaningful participation of Syrian civil society in the political settlement of the conflict will depend on two main factors: (1) When and how to intervene. The unification and empowerment of civil society are sine qua non requisite to such participation. Yet, its inclusion cannot substitute for a peace process in disarray (Zahar and Hellmüller, 2019). (2) That the involvement of local civil society depends on the willingness of key warring actors to find a peaceful solution to their dispute. It is thus likely to occur in a later stage of the process when key decisions have already been made. This raises the question of the place of the civil society in Syria's future and of its partnership with (sometimes external) state political and military actors.



Civil society and medical personnel are Syria's new fighters © Muradh al-Sheikh Ahmed (left) and Saja al-Khatib (right)

CONCLUSION

The Covid-19 pandemic did not bring any drastic change to national conflict dynamics between the Syrian government and opposition groups. In fact, the pandemic arrived in a period of relative respite in violence and successful negotiations between guarantor states in the context of the Astana peace talks. While conflict parties used Covid-19 as a political tool, relations between the opposition-held areas in northwest Syria and the areas under the control of the Syrian regime remained rather stable throughout the pandemic, despite repetitive breaches of the Idlib ceasefire by the Syrian regime and the Russian military.

Beyond the conflict at the national level, over the past ten years Syria has also witnessed local, yet underlying, conflict dynamics that were directly or indirectly caused by national turmoil. This report focused on investigating the impact of Covid-19 on these local dynamics inside opposition-held areas, where the scars of the conflict might be the deepest. As a result, in the northwest of Syria, the pandemic interacted with pre-existing grievances and the frustrations of over four million Syrians living under the administration of two opposition governments.

Despite the qualification of Covid-19 as a pandemic by WHO in early 2020, the virus was only another challenge for Syrians stranded in the northwest of the country. Grassroots communities that have lived through a decade of violence, displacement, and numerous traumas were understandably reluctant to assess the full impact of the health crisis on their lives. Their lack of awareness was compelled by the weak official response of governmental institutions both in northern Aleppo and Idlib governorates. Conversely, the international community, whose aid remains vital for residents of Syrian opposition-held areas, reoriented peacebuilding efforts towards immediate redress, and protection of the most vulnerable communities in the face of Covid-19.

Covid-19 did not have the disastrous impact several analysts feared in northwest Syria. According to official figures released by the Syrian Interim government, as of 3 June 2021, 23,862 cases were confirmed and a total of 672 Covid-19 associated deaths were reported in northern Aleppo and Idlib governorates, with an overall fatality rate of 2.8% (Syrian Interim Government Ministry of Health, 2021).

Rather than reinforcing existing tensions and conflict dynamics, the pandemic seems to have highlighted several structural challenges to durable peace in opposition-held areas, especially in terms of trust and social cohesion. As such, the long-term implications of Covid-19 on these dynamics, but also the local economy and education sector, stress the need to integrate peacebuilding efforts towards sustainable peace into all emergency Covid-19 responses. These responses must include local civil society that has proved its relevance as a key actor for conflict mitigation during the pandemic, especially in urban centres that accommodate a large number of Syrians with diverse socio-cultural backgrounds.

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The programme is addressing three broad research questions relating to political settlements:

1. How do different types of political settlements emerge, and what are the actors, institutions, resources, and practices that shape them?
2. How can political settlements be improved by internally-driven initiatives, including the impact of gender-inclusive processes and the rule of law institutions?
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For further questions on the study, please contact Dr. Juline Beaujouan at J.Beaujouan-Marliere@ed.ac.uk



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