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Living under Siege*

The Syrian Arab Republic

February 2014

I. Introduction

This briefing on sieges is the first in a series of thematic briefings by the Office of the United Nations High Commissioner for Human Rights (OHCHR), which focuses on reported violations inside the Syrian Arab Republic (Syria). OHCHR has no access to Syria yet, but continues to gather information on violations of international human rights and humanitarian law violations from neighbouring countries. This briefing is primarily based on information collected by OHCHR between April 2013 and 20 January 2014 and does not cover developments thereafter.

In a Presidential Statement issued on 2 October 2013, the United Nations Security Council stressed that “the magnitude of the humanitarian tragedy caused by the conflict in Syria requires immediate action to facilitate safe and unhindered delivery of humanitarian assistance in the whole country, including in areas and districts where humanitarian needs are especially urgent.”¹ It condemned “all cases of denial of humanitarian access,” and recalled “that arbitrarily depriving civilians of objects indispensable to their survival, including wilfully impeding relief supply and access, can constitute a violation of international humanitarian law.”

Throughout the Syrian conflict, Government armed forces and security agencies have been laying sieges to opposition-controlled areas. Although less frequently, armed opposition groups have imposed sieges on civilian-populated areas perceived to be sympathetic to the Government. In recent months, minimal progress was made in certain besieged areas where localised truces were reached enabling limited humanitarian access and evacuation of civilians and persons protected under IHL.² Nevertheless, even in these areas, restrictions on lifesaving aid remained considerable.³ As of January 2014, at least 240,000 people were estimated to be trapped in besieged areas, facing life-threatening shortages of food, water, electricity, fuel and medical care and supplies.⁴

This briefing focuses on several of ongoing major sieges laid by Government forces, in the governorates of Homs, Rural Damascus and Damascus, which are illustrative of a broader phenomenon. The briefing also refers to sieges by armed opposition groups in northern

* Comments on this paper provided by the Permanent Mission of the Syrian Arab Republic, in a note verbale dated 19 February 2014, are available at: <http://www.ohchr.org/EN/countries/MENARegion/Pages/SYIndex.aspx>.

Aleppo. In all cases, OHCHR has documented numerous violations of international human rights law (IHRL) and international humanitarian law (IHL).

It is important to recall that the Independent International Commission of Inquiry on the Syrian Arab Republic (hereafter: the Commission), mandated by the Human Rights Council to investigate alleged violations of international law in Syria,⁵ has documented sieges imposed by Government and pro-government forces as well as by anti-government armed groups. In reports issued in the second half of 2013, the Commission concluded that sieges by parties to the conflict have been imposed in violation of their obligations under international humanitarian law.⁶ Besides Government enforced sieges on towns and villages in Homs, Damascus, Dara'a, Al-Qunaytirah and Dayr az Zawr, the Commission described sieges by multiple armed opposition groups on Nubul and Zahra in northern Aleppo, blocking food, fuel and medical supplies to residents and government forces. The Commission further cited the siege of Afrin by armed opposition groups.⁷

II. Methodology

This briefing is primarily based on information collected by OHCHR between April 2013 and 20 January 2014. While OHCHR has had no access to Syria since the beginning of the conflict, it continues to interview victims, witnesses and survivors in countries neighbouring Syria, including in camps and hospitals, where credible first-hand accounts can be obtained from a range of sources to corroborate incidents. OHCHR also conducts interviews by telephone and Skype with victims and witnesses inside Syria. Guided by the overall concern for protection of victims and witnesses, OHCHR takes all possible measures to ensure the confidentiality of these accounts. Due to the lack of access to Syria, it was particularly difficult to reach victims of violations committed by armed opposition groups.

The Government of the Syrian Arab Republic sends regular communications to OHCHR on alleged violations by armed opposition groups; however, the Government is yet to facilitate interviews with witnesses and victims of these alleged violations, despite repeated requests by OHCHR.

III. Siege situations resulting in violations of International Human Rights Law and International Humanitarian Law

A. Legal Framework

International Human Rights Law

Syria is party to the International Covenant on Civil and Political Rights (ICCPR) and the International Covenant on Economic Social and Cultural Rights (ICESCR).

Under ICCPR, the Syrian Government has the obligation to respect and protect the right to life, the right to liberty and security and freedom of movement.⁸

Under the ICESCR, Syria is bound by a minimum core obligation to ensure the satisfaction of, at the very least, minimum essential levels of each of the rights provided in the ICESCR, including: minimum essential food which is sufficient, nutritionally adequate and safe, to ensure freedom from hunger; essential primary health care, including essential medicine; essential basic shelter and housing, including sanitation; access to the minimum essential amount of water, that is sufficient and safe for personal and domestic use to prevent disease.⁹

States may in no circumstance invoke a state of emergency “as justification for acting in violation of humanitarian law or peremptory norms of international law, for instance ... by imposing collective punishments.”¹⁰

International Humanitarian Law (IHL)

Syria is party to the four Geneva Conventions of 1949 and Additional Protocol I but has not ratified Additional Protocol II. It is also party to the Hague Convention on Cultural Property of 1954. As the conflict in Syria has been identified as one of a non-international character,¹¹ both State and non-State parties to the conflict - including pro-government forces and armed opposition groups - are bound by IHL, notably Common Article 3 of the Geneva Conventions and relevant customary international law.

According to a cardinal IHL principle, a party to a conflict may direct attacks only against combatants and military objectives. Directing attacks against civilians who are not taking a direct part in hostilities, as well as indiscriminate and disproportionate attacks, are prohibited.¹² Parties must at all times distinguish between combatants and civilians. IHL also establishes that parties to a conflict shall, to the maximum extent feasible “avoid locating military objectives within or near densely populated areas.”¹³

Starvation as a method of warfare and, by extension, the imposition of sieges that endanger the lives of the civilian population by depriving it of goods essential for survival are prohibited under IHL.¹⁴ In these circumstances, starvation amounts to a war crime. IHL also prohibits attacking, destroying, removing or rendering useless objects that are indispensable to the survival of the civilian population. It imposes on parties to a conflict the duty to allow and facilitate rapid and unimpeded passage of humanitarian relief for civilians in need.¹⁵ In case of siege, essential goods that are vital for the survival of the population must be allowed in, and civilians and persons protected under IHL must be allowed to leave the besieged areas should they wish to do so. The parties to the conflict must ensure that all necessary measures and precautions are taken to protect civilians; those civilians and persons protected under IHL who choose to stay behind remain protected against attacks.

Depending on the circumstances, besieging a civilian populated area may also be tantamount to collective punishment, which is prohibited under IHL, and amounts to a war crime.¹⁶ Moreover, IHL requires parties to the conflict to apply, at a minimum and among other requirements, that the wounded and sick must be collected and cared for without discrimination. Attacks against medical facilities, medical personnel and the wounded and sick are prohibited.¹⁷

Finally, it should be noted that the obligation on parties to the conflict to respect the rules of IHL does not depend on compliance by the other parties.¹⁸

B. Specific cases of Sieges Imposed by Government Forces and Armed Opposition Groups

In the course of the Syrian conflict, civilian populations under sieges either imposed by Government forces or by some armed opposition groups have not been allowed adequate supplies and services to ensure their survival and has not been given minimum guarantees of safety enabling them to leave, except on a few occasions, when temporary and limited agreements were reached by the parties to the conflict.

Sieges imposed by the Government in the Governorates of Homs, Rural Damascus and Damascus have been ongoing since 2012 and intensified in the spring of 2013. Information gathered by OHCHR demonstrates that maintaining a siege requires a high degree of control over entry and exit points to the area in question, and is primarily enforced by installing checkpoints. A pattern appears to have emerged where sieges were initially partially imposed, with civilians and goods allowed through checkpoints. As the conflict escalated, Government forces began to prevent all entry of goods, and proceeded to shell and, in some instances, carry out aerial bombardment of the area.

On occasion, civilians have reportedly been prevented from fleeing through barricades and checkpoints manned by different Government military and security agencies. In addition, military action undertaken by Government forces has resulted in the damage or destruction of objects indispensable to the survival of civilian populations - including hospitals, water and electricity plants - leading to a severe deterioration of the humanitarian situation for thousands of persons in besieged areas, including women and children.

Testimonies and information received by OHCHR indicate that armed opposition groups have deployed and have been operating within residential districts inside the besieged areas. According to available information, some armed opposition groups have sought to reach an agreement with the Government to evacuate civilians from besieged areas, particularly in al-Muadhamiya and Old Homs.

According to information gathered by OHCHR, multiple armed opposition groups have been imposing sieges in northern Aleppo governorate since summer 2012, and have been denying humanitarian aid to the civilian populations living in these besieged areas.

1. Rural Damascus Governorate

“As a result of lack of food, religious clerics have issued edicts allowing people under siege to eat cats and dogs in order to survive” - a resident of al-Muadhamiya¹⁹

Since November 2011, Ghouta has been subjected to a number of Government sieges since fighting broke out between Government forces and armed opposition groups in that area. As of early January 2014, more than 173,000 people were believed to be trapped in the Ghouta

area of the Governorate of Rural Damascus, namely in the districts of Daraya and al-Muadhamiya, in the western part of Ghouta, and in several districts of Eastern Ghouta.

In the initial phase of the siege, older persons and merchants were allowed to cross checkpoints in areas where there were no clashes in order to purchase food supplies from Damascus. While Government-controlled checkpoints allowed some humanitarian assistance to enter the Ghouta area, there were frequent reports of confiscation and looting of aid supplies at such checkpoints at the entrances of eastern Ghouta.²⁰ Delivery of medical supplies was reportedly not permitted for fear that they may be used to treat opposition fighters.

As of March 2013, Government forces began to tighten the siege around Ghouta and intensified shelling and aerial bombardments of the densely populated area.²¹ Since then, Government forces have reportedly prevented civilians and humanitarian convoys from crossing into the besieged areas. Field hospitals, medical points, power generators and water tanks in Rural Damascus, including in the districts of Duma, Zamalka, Kafar Batna, 'Erbin, Darayya and al-Muadhamiya, were damaged or destroyed as a result of government shelling. Local sources reported, for instance, that at least 10 medical centres in Eastern Ghouta were damaged or destroyed by Government forces between October 2012 and August 2013, more than once, severely impacting the availability of and access to medical treatment.²²

In the western part of Ghouta, a tight Government siege of the districts of Darayya and al-Muadhamiya, alongside daily shelling, has caused the displacement of the majority of its civilian population. The Government has failed to respond to repeated requests by humanitarian actors to enter al-Muadhamiya and other towns under siege around Damascus. Most of the 70,000 residents of al-Muadhamiya had fled before the siege was tightened, and between 12 and 29 October 2013, over 5,000 people were evacuated.²³ Those who remain trapped live in dire humanitarian conditions.

According to medical doctors interviewed by OHCHR, in addition to those killed as a result of Government shelling, a number of civilians have died due to the deteriorating humanitarian situation. It is, however, difficult to estimate the overall number of deaths.

Based on local medical sources, OHCHR has documented the cases of four civilians who died as a result of inadequate healthcare and nutrition in the district of al-Muadhamiya. These include a child who died of malnutrition on 4 September 2013, and a woman who died of severe kidney infection ten days later due to the absence of medical supplies and equipment. A resident of al-Muadhamiya told OHCHR in December 2013, that the scarcity of food had resulted in an average of 20 kilograms of weight loss per person in that district.²⁴

On 21 August 2013, several districts in Eastern Ghouta were subjected to a chemical attack that left several hundred people dead and hundreds more injured, including women and children.²⁵ On the same day, in West Ghouta, a chemical attack on al-Muadhamiya led to the death of 64 people, including women and children. Checkpoints surrounding the districts of Eastern Ghouta and al-Muadhamiya made it impossible for the injured to access medical

treatment other than first aid received at makeshift medical points. Medical doctors working from field hospitals reported being completely overwhelmed by the sheer number of patients. Doctors in al-Muadhamiya told OHCHR that their medical facilities operated at 20 per cent capacity as many health professionals suffered from similar symptoms as the injured and were consequently unable to assist the wounded. One doctor informed OHCHR of his distress at watching an injured person dying because the medical staff, including himself, were all incapacitated by injuries and therefore unable to administer treatment.

Local sources and doctors told OHCHR that since March 2013, Government forces have been preventing civilians and humanitarian convoys from transporting food and other essential necessities into Eastern Ghouta.²⁶

On 25 December 2013, Government forces and the armed opposition groups in al-Muadhamiya reached a deal to allow humanitarian access to trapped civilians. The agreement was said to involve raising the Syrian official flag over the area for 72 hours in exchange for food supplies. In a second phase, armed opposition groups reportedly committed to hand over their heavy weaponry, while Government forces would remain outside of the area. In a third and final phase, displaced persons would be allowed to return to their homes without reprisal and the checkpoints around the area would be removed. According to interviews conducted by OHCHR, the Syrian flag was indeed raised over the town's water tank on 25 December, and elements of the armed opposition forces handed themselves over to Government forces on 29 December. On 28 December 2013, a 48-hour truce enabled small quantities of food and other humanitarian supplies, including medicine, into the area that had been under siege for over a year. While this development is a step forward, at the time of writing, the siege remained around al-Muadhamiya with ongoing restrictions on access for humanitarian relief, and therefore there is still an urgent need for additional delivery of humanitarian assistance.²⁷

2. Damascus Governorate

"I managed to leave the camp at the end of 2012, my parents are still there, and since July 2013 they have been surviving on remaining quantities of spinach, lentils and radish. Many families have also retrieved food from abandoned homes in the camp."
– an activist and a former resident of Yarmouk camp.²⁸

In the Governorate of Damascus, sieges and shelling of civilian infrastructure in opposition-controlled areas have continued since June 2012, leading to shortages of food, drinking water, electricity and fuel. The sieges have compounded the already dire situation of the wounded as field hospitals have suffered from shortages of medical supplies.

Prior to the conflict, the Yarmouk refugee camp, which is located on the southern edge of Damascus, was home to some 160,000 Palestinian refugees. In December 2012 and for some months after, at least 140,000 fled due to the escalating conflict.²⁹

In December 2012, after armed opposition groups took control over the Yarmouk Palestinian refugee camp, checkpoints strictly controlled exit from and entry into the main routes to the

camp. Since then, Government, pro-government forces and pro-government Palestinian armed factions have been strictly controlling exit from and entry into the camp. Although humanitarian organizations were denied access to Yarmouk, civilian pedestrian traffic was permitted intermittently through government checkpoints. Families were allowed to come in and out of the camp and bring small quantities of food, including for instance one bag of bread per family per day, while additional items would be confiscated, according to a resident of the camp. However, from July 2013, all access points to Yarmouk have been sealed, preventing residents from passing and making humanitarian access impossible resulting in shortages of food, water and public services. As of January 2014, the besieged population of some 18,000 people, including many women and children, remained in the camp.

According to a former resident of the camp, dozens of deaths have been reported due to various factors, including from starvation, the consumption of rotten food, the chronic shortage of medical supplies, and due to the lack of medical expertise to treat sick people and pregnant women trapped in the camp.³⁰ The situation has been compounded by the lack of electricity and severe shortage of water. Civilians also continued to be killed by ongoing fighting and sporadic aerial attacks.

Aid efforts by United Nations and non-governmental entities have been consistently thwarted. Since September 2013, convoys of food and medical aid have repeatedly been turned back from checkpoints, with the exception of a delivery of 2,000 doses of polio vaccines in December 2013. On 17 January 2014, the High Commissioner for Human Rights strongly condemned the repeated obstruction of convoys trying to bring supplies to the besieged population of the camp, and warned that “impeding humanitarian assistance to civilians in desperate need may amount to a war crime.” She called on all parties to the conflict to urgently facilitate unimpeded access to humanitarian relief to trapped civilians in Yarmouk.³¹ On 18 January 2014, the Syrian authorities granted limited access to the camp, allowing the Syrian Arab Red Crescent and the Palestinian Red Crescent, with the support of the local Palestinian Coordination Committee and UNRWA, to start delivering food and evacuating sick and elderly people. Nevertheless, local sources told OHCHR that the quantities of food assistance allowed through since 18 January 2014 are minimal, and that much more assistance is required to meet the needs of the besieged population.

3. Homs Governorate

*“I risked my life to get my ailing mother her medication today... I’m not sure if I’ll be as lucky the next time around” - A civilian in Old Homs explained to OHCHR that, in order to reach a field hospital to collect the medicine, he had to cross several streets, including one in which people he knew had been killed by government sniper fire. He had waited in vain for the shelling to get less intense, and finally decided he had no choice but to venture out towards a nearby field hospital praying that he would not lose his life.*³²

Since June 2012, the opposition-controlled Old City of Homs has been under siege by Government forces. Partial agreements reached between the Syrian authorities and various

armed opposition groups in that area allowed temporary and limited humanitarian aid to those in need.³³

Since July 2013, after Government forces intensified shelling and aerial bombardment of over a dozen neighbourhoods in Old Homs, the United Nations High Commissioner for Human Rights, Navi Pillay, and United Nations Emergency Relief Coordinator, Valerie Amos, have been urging for the immediate safe passage for civilians' evacuation and for aid workers and supplies to be allowed into the besieged area.³⁴ Nevertheless, regular shelling, armed confrontations and restrictions on humanitarian aid at Government-controlled checkpoints have continued.

Around 4,000 people were believed to be trapped in the Old City, as of January 2014. According to reports and testimonies directly collected by OHCHR, civilians in Old Homs are living in alarmingly precarious conditions, with shortages of food, clean drinking water, medicine, electricity and fuel. With food and water scarce, the besieged community has relied on canned food and other food items collected from hundreds of abandoned homes in central and Old Homs.

Destruction of civilian infrastructures - including residential buildings, field hospitals, bakeries, roads, water tanks, and power generators - have had a severe impact on the civilian population, depriving them of basic needs and further threatening their physical integrity. While it has been difficult to obtain casualty estimates, individuals interviewed in Old Homs informed OHCHR that intensive shelling led to the deaths of scores of civilians, including entire families, and wounded hundreds of others.³⁵ Reports suggest that persons protected by IHL, including wounded opposition fighters, placed *hors de combat*, have not benefitted from humanitarian evacuation, since the only exit points were through Government manned checkpoints.³⁶ Wounded fighters fear being killed, detained or forcibly disappeared if they attempt to leave via a checkpoint.

While field hospitals have been set up in Old Homs, due to the siege, they lack the necessary equipment, skills and medical supplies, which severely compromises health care, particularly for the sick and wounded. Inadequate medicine, medical supplies and basic nutrition have prolonged the ailment of patients and, in some cases, led to permanent disabilities. OHCHR has been informed that medical doctors are unable to perform basic surgeries due to the lack of medical supplies and equipment. An orthopaedic doctor in Old Homs informed OHCHR that he could not perform simple spinal-cord operations, which in some cases, caused paralysis. He added that dozens of cases of fracture and limbs-related injuries have ended up in amputations or death. According to information gathered by OHCHR, when a child was injured by shrapnel in November 2013 and required surgery, medical staff was initially unable to operate because of the lack of anaesthetics. *"In the end they had no choice but to use the expired anaesthetics in large quantities hoping they would take effect."* Civilian community leaders and medical doctors in Old Homs have issued several appeals for humanitarian assistance.³⁷

4. Aleppo Governorate

Since July 2012, multiple armed opposition groups have been imposing tight ground sieges on the villages of Nubul and Zahra in northern Aleppo governorate. These villages have been sealed off and have not been reached by humanitarian organisations since March 2013. Almost 45,000 people are estimated to be trapped in these villages.

The Government had at times flown in supplies by helicopter, but ceased to do so after armed opposition groups reportedly attacked one such helicopter in June 2013.³⁸ Armed opposition groups have prevented food, fuel and medical supplies from entering through checkpoints. Reports received by OHCHR indicate severe shortages of food, fuel, electricity and heaters. A lack of running water has reportedly forced some residents to dig wells without the necessary sanitary precautions. Vulnerable groups, including the elderly and children, are at particular risk of disease as a result of the deteriorating sanitation conditions. The lack of medical supplies and equipment, alongside shortages in electricity and running water, has rendered hospitals and clinics dysfunctional.

OHCHR received information that members of armed opposition groups in Nubul and Zahra, have stated that they would lift the sieges or allow humanitarian aid on condition that Government forces do the same in Eastern Ghouta and al-Muadhamiya. As previously noted, the obligation on parties to an armed conflict to respect the rules of international humanitarian law is not conditional on compliance by the other parties.

IV. Conclusions and recommendations

The parties to the conflict in Syria have laid sieges across the country, in some cases for protracted periods. As of January 2014, it was estimated that at least 240,000 people were living under siege.

In general, parties to the conflict have prevented the movement of people, goods and supplies through a system of barricades and checkpoints, adding to the hardship of civilians who are facing life-threatening shortages of food, water, electricity, fuel and medical supplies.

In cases of sieges laid by Government forces, shelling and aerial bombardment have generated high numbers of casualties, and damaged or destroyed objects indispensable to the survival of the civilian population. These acts constitute violations by the Government of its obligations under international human rights law to guarantee the right to life, and of its core obligation to ensure satisfaction of, at the very least minimum essential levels of food, water, health, and shelter.

The Government is also in violation of its obligations under IHL by failing to: (1) allow and facilitate rapid and unimpeded passage of humanitarian relief for civilians in need; (2) to ensure access to essential goods that are indispensable to the survival of the civilian population; (3) to allow safe passage for persons protected by IHL out of the besieged area; (4) to guarantee that the wounded and sick are collected and cared for.

Furthermore, the Government is in violation of IHL for destroying objects indispensable to the survival of the civilian population through indiscriminate bombardments and attacks at besieged areas.

Armed opposition groups are also failing their obligations under IHL by preventing access to food, water and medical supplies to populations they are besieging and by setting conditions of reciprocity to the Government for lifting the sieges or allowing humanitarian aid.

The Government and armed opposition groups in Syria should immediately:

- End the violence and ensure that goods essential to the survival of the civilian population, such as adequate levels of food, water, health care and shelter are provided and access to it is facilitated.
- Lift all sieges and facilitate rapid and unimpeded provision of humanitarian relief to besieged areas, and allow neutral, impartial humanitarian organizations to safely access all people in need.
- Allow civilians and persons protected by IHL's safe passage in and out of these areas in order to procure basic necessities, such as food for infants and children, as well as medical supplies, including medicine for chronic diseases.
- Grant immediate safe passage to allow civilians to leave besieged areas.
- Take all possible measures to protect the wounded and sick, including persons placed *hors des combat*, and allow their evacuation for medical care and attention required by their condition.
- Avoid locating military objectives within or near densely populated areas.

Additionally, the Government should urgently:

- Stop indiscriminate aerial bombardments, which have repeatedly led to heavy loss of life and destroyed or damaged objects indispensable to the survival of the civilian population.

Endnotes

¹ The United Nations Security Council, *Statement by the President of the Security Council*, S/PRST/2013/15, 2 October 2013.

² Protected persons includes, among others, “persons taking no active part in the hostilities, including members of the armed forces who have laid down their arms and those placed ‘hors de combat’ by sickness, wounds, detention or any other cause (...) without any adverse distinction founded on race, colour, religion or faith, sex, birth or wealth, or any other similar criteria” as articulated in Common Article 3 to the four Geneva Conventions of 1949. Other protected persons include, inter alia, journalists, humanitarian aid personnel, religious personnel, and medical personnel, see: ICRC, *Customary International Humanitarian Law*, Volume I, Rules 1, 6, 25, 28–31.

³ See in this regard: OCHA, “Syria: Greater work needed to improve access and protection of civilians,” 3 December 2013, available at: <http://www.unocha.org/top-stories/all-stories/syria-greater-work-needed-improve-access-and-protection-civilians>.

⁴ OCHA, *Humanitarian Bulletin: Syrian Arab Republic, 14 – 31 January 2014*, available at: <http://reliefweb.int/sites/reliefweb.int/files/resources/Syria%20Humanitarian%20Bulletin%2041.pdf>

⁵ The Commission was established on 22 August 2011 by the Human Rights Council through resolution S-17/1 adopted at its 17th special session with a mandate to investigate all alleged violations of international human rights law since March 2011 in the Syrian Arab Republic. By way of resolution, the Human Rights Council extended the mandate of the Commission several times. Currently the mandate of the Commission is until March 2014, when the Council will again decide whether to extend the mandate for a further period of time.

⁶ *Reports of the Independent International Commission of Inquiry on the Syrian Arab Republic*, A/HRC/23/58, 18 July 2013, para. 141–148, and A/HRC/24/46, 16 August 2013, para. 171–190.

⁷ *Reports of the Independent International Commission of Inquiry on the Syrian Arab Republic*, A/HRC/23/58, 18 July 2013, para. 141–148, and A/HRC/24/46, 16 August 2013, para. 171–190.

⁸ ICCPR, Articles 6, 9 12.

⁹ ICESCR, Articles 11–12.

¹⁰ UN Human Rights Committee, General Comment No. 29 on Article 4 of the ICCPR.

¹¹ ICRC, “Syria: ICRC and Syrian Arab Red Crescent maintain aid effort amid increased fighting,” *Operational Update*, 17 July 2012, available at: <http://www.icrc.org/eng/resources/documents/update/2012/syria-update-2012-07-17.htm>. See also the *Report of the Independent International Commission of Inquiry on the Syrian Arab Republic*, A/HRC/21/50, 16 August 2012.

¹² ICRC, *Customary International Humanitarian Law*, Volume I, Rules 1, 7, 11–12.

¹³ ICRC, *Customary International Humanitarian Law*, Volume I, Rule 23.

¹⁴ ICRC, *Customary International Humanitarian Law*, Volume I, Rules 53 – 56.

¹⁵ ICRC, *Customary International Humanitarian Law*, Volume I, Rules 54 – 56.

¹⁶ ICRC, *Customary International Humanitarian Law*, Volume I, Rule 103.

¹⁷ Common Article 3 to the four Geneva Conventions of 1949; ICRC, *Customary International Humanitarian Law*, Volume I, Rules 25, 28–30, 109 – 111. See also ICRC, *Customary International Humanitarian Law*, Volume I, Rules 31–32.

¹⁸ Common Article 3 to the four Geneva Conventions of 1949; ICRC, *Customary International Humanitarian Law*, Volume I, Rule 140; see for example: ICTR Statute, Article 4(b); Statute of the Special Court for Sierra Leone, Article 3(b).

¹⁹ OHCHR Skype interview with a resident of al-Muadhmiya, 15 November 2013.

²⁰ OHCHR interviews, see also EA WorldView, “Syria Spotlight: Aid Agencies Face Difficulties Getting Food to Vulnerable Communities,” 9 October 2013, available at: <http://eaworldview.com/2013/10/syria-spotlight-aid-agencies-face-difficulties-getting-food-vulnerable-communities>.

²¹ The siege on Muadhmiya has been tightened since November 2012.

²² Violations Documentation Center in Syria, *A Special Report on: The Medical Situation in Eastern Ghouta—Damascus Suburbs*, November 2013, available at: <http://www.vdc-sy.info/index.php/en/reports/1383565710#.UrAkVNIW39U>.

²³ OHCHR interviews, see also OCHA, “UN Humanitarian Chief Urges Unrestricted Humanitarian Access to Hundreds of Thousands of Trapped in Rural Damascus,” 13 September 2013, available at: <http://www.unocha.org/node/39415>; Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator Valerie Amos, *Security Council Briefing on Syria*, 25 October 2013, available at: <https://docs.unocha.org/sites/dms/Documents/25%20Oct%2013%20Valerie%20Amos%20Statement%20to%20>

Security%20Council%20on%20Syria.pdf; BBC, “Fears for Syrians 'still trapped' in Damascus suburb”, 30 October 2013 available at <http://www.bbc.co.uk/news/world-middle-east-24739208>.

²⁴ OHCHR Skype interviews, 31 December 2013.

²⁵ Information is based on interviews by OHCHR. It is also recalled that the United Nations team on chemical weapons has confirmed the use of chemical weapons in this area. See: United Nations Mission to Investigate Allegations of the Use of Chemical Weapons in the Syrian Arab Republic, *Report on the Alleged Use of Chemical Weapons in the Ghouta Area of Damascus*, 21 August 2013, available at: http://www.un.org/disarmament/content/slideshow/Secretary_General_Report_of_CW_Investigation.pdf.

²⁶ Interviews conducted by OHCHR.

²⁷ OHCHR Skype interviews; WFP, *Syria Crisis Response - Situation Update*, 10 December 2013 – 15 January 2014.

²⁸ OHCHR interview with an activist and former resident of al-Yarmouk camp, 10 January 2014

²⁹ UNRWA, “UNRWA Demands Humanitarian Access to Yarmouk,” 17 November 2013, available at: <http://www.unrwa.org/newsroom/official-statements/unrwa-demands-humanitarian-access-yarmouk>.

³⁰ OHCHR interview with an activist and former resident of al-Yarmouk camp on 10 January 2014.

³¹ OHCHR, “Impeding aid to besieged civilians in Yarmouk camp in Syria may amount to war crime,” Press Release, 17 January 2014, available at:

<http://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=14179&LangID=E>

³² OHCHR Skype interview with a civilian from Old Homs, 12 September 2013.

³³ See for example: ICRC, “Syria: assistance reaches people in Old City of Homs,” *News Release*, 12/213, 4 November 2012, available at <http://www.icrc.org/eng/resources/documents/news-release/2012/11-04-syria-homs.htm>; OCHA, *Humanitarian Bulletin: Syrian Arab Republic, Issue 40*, 17 December 2013 – 13 January 2014, available at:

<http://reliefweb.int/sites/reliefweb.int/files/resources/Syria%20Humanitarian%20Bulletin%2040%20final.pdf>

³⁴ Media statement, *UN Humanitarian and Human Rights Chiefs urge immediate safe passage for civilians and aid workers in Homs and Aleppo*, 12 July 2013, available at:

<https://docs.unocha.org/sites/dms/Documents/Joint%20statement%20on%20Syria%20by%20ERC%20Valerie%20Amos%20and%20High%20Commissioner%20Navi%20Pillay%2012Jul2013.pdf>

³⁵ OHCHR Skype interviews with residents of Old Homs between July and November 2013.

³⁶ A “person hors de combat” is: (a) anyone who is in the power of an adverse party; (b) anyone who is defenceless because of unconsciousness, shipwreck, wounds or sickness; or (c) anyone who clearly expresses an intention to surrender; provided he or she abstains from any hostile act and does not attempt to escape. See ICRC, *Customary International Humanitarian Law*, Volume I, Rule 47, available at <http://www.icrc.org/eng/assets/files/other/customary-international-humanitarian-law-i-icrc-eng.pdf>.

³⁷ OHCHR Skype interviews.

³⁸ OHCHR Skype interviews.