



Commentary

Published 7 April 2020

By International Crisis Group

## Virus Fears Spread at Camps for ISIS Families in Syria's North East

*Disease has long been a daily concern at al-Hol, a detention camp in north-eastern Syria for families of ISIS militants, but now each death raises anxiety about COVID-19. With repatriations on hold, the UN and other international bodies must step up medical and humanitarian aid.*

When someone dies at al-Hol, a detention camp in north-eastern Syria that holds mostly women and children related to ISIS militants, the blame turns rapidly to COVID-19. Fears are mounting about the illness, even though there are no confirmed cases, and even though untimely death is already common, due to harsh living conditions and other infectious diseases that kill dozens of people on average each month.

Scary rumours started spreading in al-Hol early in March, when a three-year-old child and a seventy-five-year old woman, both Russian citizens, died. It was definitely COVID-19, some women maintained. Others said the child had died of tuberculosis and the woman of a heart attack. As camp authorities instructed residents to stay in their tents and shops in the camp's market began to shut, women started stockpiling food and water. When guards dug a perimeter trench, one frightened woman blurted out that they were readying mass graves. A deep disquiet arose as well in Roj, a smaller detention camp close to the Iraqi border. Women in both camps began calling and texting relatives

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abroad if they felt sick, frantically recounting their symptoms. “We’re having conversations about how we expect to die here”, one wrote.

Crisis Group has been unable to visit the camps under present conditions. But from telephone calls and WhatsApp/Telegram messages with camp residents and their relatives as well as with UN officials and humanitarian organisation staffers, a vivid sense of panic emerges.

As in all displacement camps in Iraq and Syria, people live without clean water, adequate food or reliable medical services – much less soap, hand sanitisers or protective gear. Al-Hol and Roj hold 66,000 and 4,000 women and children, respectively, most of them relatives of ISIS militants but some former affiliates of the group themselves. The majority are either Syrians or Iraqis, with the numbers roughly split, and around 13,500 are from other countries. Their hazy legal status as neither combatants nor civilians, and the stigma attached to them, discourages some UN aid bodies from providing any service at all. It also puts doctors and guards in the position of looking after women whom they view as unrepentant ISIS militants.

As of now, there are no confirmed cases of COVID-19 in either camp, though there are no testing kits, either. But with a key border crossing from Iraq, Faysh Khabour, closed because of the virus, cutting off aid supplies, and medical capacity in the region direly limited, the



A general view of al-Hol camp in al-Hasakeh governorate, Syria, 8 August 2019. AFP/Delil SOULEIMAN

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outlook is bleak. “They already have a hard time isolating tuberculosis cases, so forget social distancing”, Fabrizio Carboni, regional director for the Near and Middle East at the International Committee of the Red Cross, told Crisis Group. “Should this virus hit places like al-Hol, or much of north east Syria, we risk being in a position where we are just going to watch people, the most vulnerable, die”.

Since the last ISIS strongholds in Syria fell in early 2019, the Syrian Democratic Forces (SDF), a Kurdish-led militia that partnered with the U.S.-led coalition, has largely been left to deal with tens of thousands of ISIS detainees and affiliated family members. Many of the detainees’ home countries refuse to take them back. In addition to al-Hol and Roj, which mostly house women and children, the SDF struggles to guard, care for and feed thousands of men and boys crammed into makeshift prisons. It receives some U.S. funding, but its

resources are woefully lacking. The anti-ISIS coalition has been slow to deliver extra support – more training for guards and new equipment – that it promised for overseeing detainees. Humanitarian workers describe these sites as ridden with tuberculosis and perilously overcrowded, with one speaking of “dramatic mortality rates”.

On 30 March, ISIS detainees rioted and overran a prison in Hassakeh city, ripping off doors and taking control of one floor of the facility. It took nearly a day for the SDF to quell the uprising and determine that no one had escaped. The militants had been compelled to break out, SDF authorities later said, partly by fear of contracting the virus in such cramped quarters. The prospect that something similar could happen at al-Hol, where tensions flared regularly between militant women and camp guards even in pre-pandemic times, worries Western officials, as well as the Autonomous





An Iraqi refugee carries her child as she walks around in a camp in al-Hol, Syria, 13 March 2017.  
AFP/DELIL SOULEIMAN

Administration of north-eastern Syria, the political entity that governs the SDF-protected region.

The strain of guarding so many detainees is overwhelming the Autonomous Administration. Badran Çiya Kurd, one of its senior officials, told Crisis Group that it must look after not just camps like al-Hol but also a native population of over five million (a recent UN estimate cites three million), as well as a million internally displaced Syrians. Following ISIS's defeat, he said, the authorities inherited a fragile health system and destroyed infrastructure, the overhaul of which required massive international support just to meet the population's basic needs, let alone ward off a pandemic. The camps, he continued, would be hardest hit, because of overcrowding and lack of facilities and preparedness: "Any spreading of the virus will lead to unprecedented catastrophe". Much of the north east's population relies on daily jobs to get by, forcing workers to choose between self-isolation measures and survival. The area has also suffered from Turkey cutting the water supply it controls from Allouk station,

a step emanating from disputes between Ankara and the SDF over the exchange of water and electricity between regions the two respectively control. The water is now flowing again, but it has yet to reach civilians in a number of areas. The loss of the Yaroubia border crossing with Iraq earlier in the year (a January UN resolution failed to re-authorise its use), Çiya Kurd said, was now causing intense hardship, reducing the movement of humanitarian aid into the area, in a manner now compounded by the recent COVID-related closure of Faysh Khabour.

As camp managers struggled in late March to get a doctor into Roj, citing increasing demand for medics in the area, women took to selling each other goods at inflated prices as anxiety grew in both camps. Huddled on the dirt floor in her six square meters tent in with her four children, a 31-year-old French woman texted from al-Hol to her mother back home that she feared they'd had their last full meal for a while. A Syrian woman wrote that she felt ill, had no tent for shelter

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and worried about who would care for her two boys if she died. Another Syrian woman said a local NGO came to instruct women on how to wash their hands properly. But usually, she added, there isn't enough water in al-Hol for regular hand washing. “We don't understand what is going on, so people are scared”, she said. “It's hard to breathe”, another woman in Roj said by text to Alexandra Bain, director of the Canada-based Families Against Violent Extremism, “and we have heavy coughs”. In exchanges Bain showed to Crisis Group, women in the camps, using shared phones, described “never-ending coughing”, fever and successive days without access to a doctor or basic pain medications.

The messages paint a picture of an area already acutely lacking in medical personnel and supplies, where need is greatest in hospitals and camps recede in priority, and where nervous doctors reprimand women for asking about the virus. Sometimes the messages are punctuated by asides (“Ahhh, my daughter just vomited”); sometimes by desperation (“some people here want to take their own lives”); and sometimes by resignation (“if corona hits here, we are done for”).

Though the majority of these camps' inhabitants are children and women under 50, a great many may already suffer from pneumonia, chest infections and tuberculosis. These “co-morbidities”, says Will Turner, emergency operations manager at Médecins Sans Frontières, put the camp population in elevated peril from the coronavirus. The danger is highest in areas like the “foreigners' annex”, where non-Syrians and non-Iraqis are housed. Due to difficult access negotiations between aid groups and camp authorities, the annex has received no direct medical services in months. Even trying to pass COVID-19 health advice into the annex is a challenge; the camp does not officially permit women detainees to have mobile

phones and will not allow the distribution of flyers inside.

As of mid-March, at least two countries had active repatriation plans under way for the foreigners in the camps, one for a small number of detainees and the other for a significant number that – in a rare occurrence – included men. Getting to this stage typically requires ceaseless and multi-layered political wrangling – within home governments, and between those governments and north-eastern Syria's governing authorities. But for now, COVID-19 has disrupted these plans. “This definitely means a halt to repatriations”, one Western official told Crisis Group. “[No one] can commit resources to repatriation now or for the foreseeable future”.

It is likely that COVID-19 will afflict the whole of the north east, indeed all of Syria, including regions under state control and the rebel-held pocket of Idlib. The authorities in the north east cannot be expected to bear the entire burden of this escalating and enormously trying humanitarian crisis. The majority of the population in al-Hol and Roj are children, and whether they are Iraqi, Syrian or of some other nationality, their well-being and that of their caregivers needs safeguarding.

**T**he U.S. should push both the Iraqi authorities and the Autonomous Administration in the north east to agree to a regular, two-way humanitarian exemption to the temporary border closure at Faysh Khabour, so that aid groups working across the Iraqi border can maintain their activities and supply lines in both directions. To be persuasive to the Iraqi and SDF authorities alike, this request should be accompanied by delivery of humanitarian aid and COVID-19-relevant kits and equipment for the populations in Syria's north east and Iraq proper, including other displaced persons camps. International bodies, in particular the UN, should make a

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major push to provide health education and test kits. The SDF, for its part, should continue to release as many Syrians from al-Hol as possible, reducing the camp’s congestion. But one border crossing is not enough: the UN Security Council should also consider immediately re-authorising the use of Yaroubia as a humanitarian access point into the north east. Waiting for the next resolution on the logistics of aid delivery into Syria, likely this summer, would result in a damaging delay. Moscow should reverse its earlier position and refrain from opposing the reopening of Yaroubia, as Damascus has not permitted the delivery of health supplies through its territory in a way that would compensate for its closing.

At no time in recent months have prospects for the men, women and children detained in these camps looked more uncertain. While the Autonomous Administration is seeking to step

up the release of Syrian detainees at al-Hol, for Iraqis and other non-Syrians the chances of leaving do not look good. The painfully slow process of repatriation by home governments, already so fraught within states’ domestic politics, is now frozen, and it will take a monumental effort to make it a priority again anytime in the near future. Which is why women’s anxiety about the virus, together with the symptoms they are presently experiencing, merges with a more generalised panic about the future.