



# A CHILDREN'S CRISIS



Save the Children

Update on Al Hol camp and COVID-19 concerns

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Every child has the right to a future. Save the Children works around the world to give children a healthy start in life, and the chance to learn and to be safe. We do whatever it takes to get children the things they need – every day and in times of crisis.

## Acknowledgements

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In order to protect children and the families who agreed to be interviewed by Save the Children, names in this report have been changed and exact locations omitted. All testimonies are based on children's experiences while living in Syria.

**Cover photo:** Kareem, an Iraqi father from Mosul, sits with his children in their tent in Al Hol camp in Al Hasakah Governorate, Syria. Kareem arrived in Al Hol camp with his wife and five children three days earlier after fleeing the violence in Mosul. Only two of his children, Ahmad and Salim, are featured on the cover.

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SECTION ONE

# AL HOL POPULATION

Al Hol Camp in North East Syria experienced a ‘shock’ surge in population over a five-month period from December 2018 to May 2019, jumping from housing 10,000 people to more than 73,000 people – a 680% increase in population.

This steep increase in people — the vast majority of whom are women and children — entirely reliant on humanitarian aid to survive left the infrastructure of the camp struggling to cope. A year later, critical gaps continue to exist across all sectors, especially water, sanitation and hygiene (WASH), health, nutrition, education child protection and protection.

Humanitarian actors are committed to improving services, with plans to expand in all sectors, including mother-baby nutrition areas, new medical and education facilities, as well as improved WASH facilities.

Humanitarian actors are working on community messaging to ensure that all camp residents are informed as to how to access available services.

Continued donor commitment is needed to ensure adequate resources are provided to meet the needs in the camps.

Around **65 THOUSAND PEOPLE**

Estimated to currently live in Al Hol camp, compared to 10 thousand at the beginning of 2019



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More than **70%** are children under the age of **18**



## SECTION TWO

# COVID-19 & CHILDREN

A COVID-19 crisis in Al Hol would be a children's crisis. Children in the camp, many with already weakened immune systems or underlying health conditions as a result of living in desperate conditions during their formative years, may struggle to cope with this deadly virus.

Suitable health services aren't in place to adequately respond to an outbreak, as already limited health services would easily become overwhelmed, further reducing children's access to the care they need.

Children are at risk of losing parents and caregivers to the virus, potentially leaving them at risk of neglect, abuse and exploitation. In the medium term, children are also vulnerable to recruitment and sexual exploitation due to groups and individuals taking advantage of the situation. Reductions in child protection services and the limited ability of child protection staff to support children and caregivers due to COVID-19 related restrictions could also increase the vulnerability of the children in Al Hol.

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Policies that are required to minimise contagion, unless suitably adapted, run the risk of limiting children's access to education, healthcare, and child protection services, all of which are vital to their care and protection. If food supplies to the camp are negatively affected by coronavirus containment measures, the rates and severity of malnutrition among children may increase.

Access to accurate and age appropriate information in the camp is limited, reducing children's ability to understand the threat they face and how to respond to it safely.

# 43 THOUSAND CHILDREN

**Continue to need education, child protection and psychosocial support in Al Hol camp and we cannot fail to adapt quickly in response to the necessary control measures. Some of the areas we look at are:**



Child protection, as COVID-19 **disrupts the environment** in which children grow.

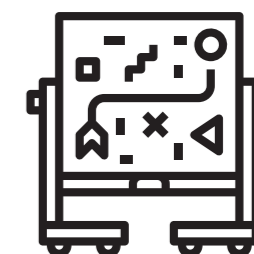


Education, as COVID-19 control measures result in an increase in the number of **out-of-school** children.



The reduced **quality of access to health** care and adequate nutrition for children.

COVID-19 forces us to **be creative**, to find new ways to reach the children in Al Hol



## SECTION THREE

# CHILD PROTECTION RISKS

Some of the child protection risks below were observed in previous infectious disease outbreaks\* and a large majority of them are applicable to the current situation faced by children in Al Hol camp and in North East Syria.

Risks presented by COVID-19 and related control measures

### PHYSICAL AND EMOTIONAL MALTREATMENT

Reduced supervision and neglect of children \* Increase in child abuse \* Increase in domestic violence \* Increase in interpersonal violence \* Poisoning and other danger and risk of injuries \* Pressure on or lack of access to child protection services

### SOCIAL EXCLUSION

Social stigmatisation of infected individuals or individuals/groups suspected to be infected \* Increased risk/limited support for children living/working on the street and other children already at risk \* Increased risk/limited support to children in conflict with the law, including those in detention

### MENTAL HEALTH AND PSYCHOSOCIAL DISTRESS

Distress of children due to the death, illness, or separation of a loved one or fear of disease \* Worsening of pre-existing mental health conditions \* Pressure on or lack of access to MHPSS services

### GENDER BASED VIOLENCE

Increased risk of sexual exploitation of children \* Sex for assistance \* Commercial sexual exploitation \* Forced early marriage \* Pressure on or lack of access to child protection \* Pressure on or lack of access GBV services

### UNACCOMPANIED AND SEPARATED CHILDREN

Separation \* Becoming unaccompanied \* Becoming a child head of household \* Being placed in institutions

### CHILD LABOUR

Increased engagement of children in hazardous and exploitative labour

## Causes of risks

- Childcare/school closures, continued work requirements for caregivers, illness, quarantine/isolation of caregivers
- Increased psychosocial distress among caregivers and community members
- Availability and misuse of toxic disinfectants and alcohol
- Increased stress levels due to isolation in treatment units or home-based quarantine
- Children and parents/caregivers with pre-existing mental health conditions may not be able to access usual supports or treatments
- Quarantine measures can create fear and panic in the community, especially in children, if they do not understand what is happening
- Girls' gender-imposed household responsibilities such as caring for family members or doing chores
- Social and racial discrimination of individuals/groups suspected to be infected
- Closure/inaccessibility of basic services for vulnerable children and/or families
- Disruption to birth registration processes due to quarantine
- Loss or reduction in household income
- Opportunity or expectation to work due to school closure
- Increased obstacles to reporting incidents
- Reduced family protection of children
- Reduced household income and/or reliance on outsiders to transport goods and services to the community
- Increased obstacles to reporting incidents and seeking medical treatment or other supports
- Loss of parents/caregivers due to disease
- Isolation/quarantine of caregiver(s) apart from child(ren)
- Children sent away by parents to stay with other family in non-affected areas
- Disproportionate impact on more disadvantaged and marginalized groups

\* The Alliance for Child Protection in Humanitarian Action, Technical Note: Protection of Children during the Coronavirus Pandemic, Version 1, March 2020

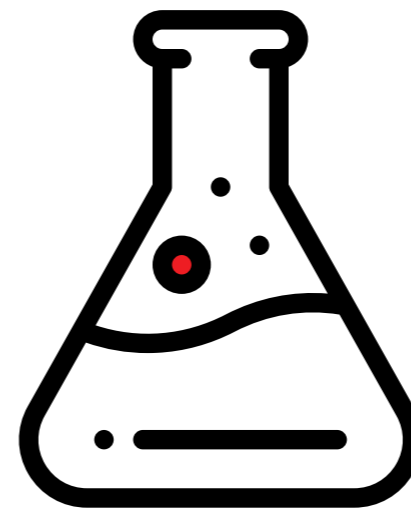
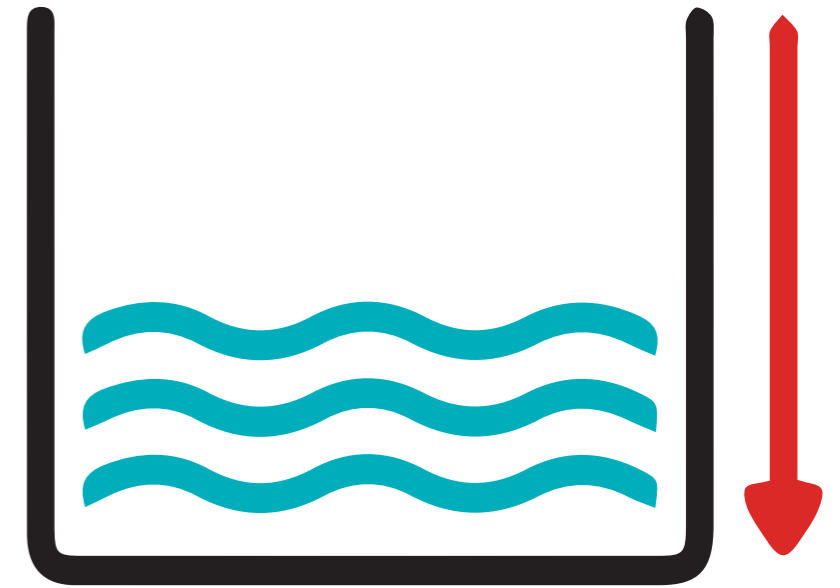
**SECTION FOUR**

**RISKS OF COVID-19 IN AL HOL**

With shortages in water supply across the area and regular cuts from the central water station, it is difficult for people to implement the necessary level of hygiene practices to contain the virus. Furthermore, with the high population density within the camp, and with people living in tents without a personal water supply, there are major challenges to implementing social distancing, or if needed, isolation in the event of illness.

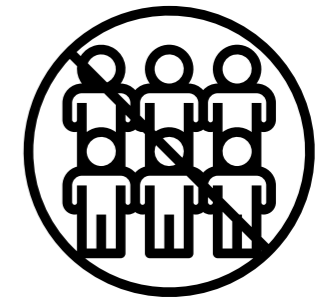
Approximately  
**600<sup>3</sup>**

**metres of water**  
a day is the minimum water supply required to minimise the risk of camp residents contracting COVID-19 in Al Hol.\*



There is **limited testing** capacity in North East Syria at present

Crowded camps make **social distancing difficult**



**INTERRUPTIONS TO SUPPLY CHAIN**

increased challenges **purchasing** a number of items from vendors, including health items and nutrition supplies

\* United Nations estimated figures

## SECTION FIVE

# FOREIGN NATIONALS

Children of foreign nationalities trapped in Syria are innocent victims of the conflict and victims of child right abuses and must be treated as such. Like millions of Syrian children, these children have lived through conflict, bombardment and acute deprivation. They, and many children in Syria, need specialised help to recover from their experiences and return to normality, which is impossible in overwhelmed displacement camps in a volatile warzone. While some states have taken responsibility for their citizens, many countries have yet to take steps to ensure the safety of these children and their families. Given the life-threatening dangers these children and their families face in Syria, dangers which are currently compounded by the global pandemic, this failure is unconscionable.

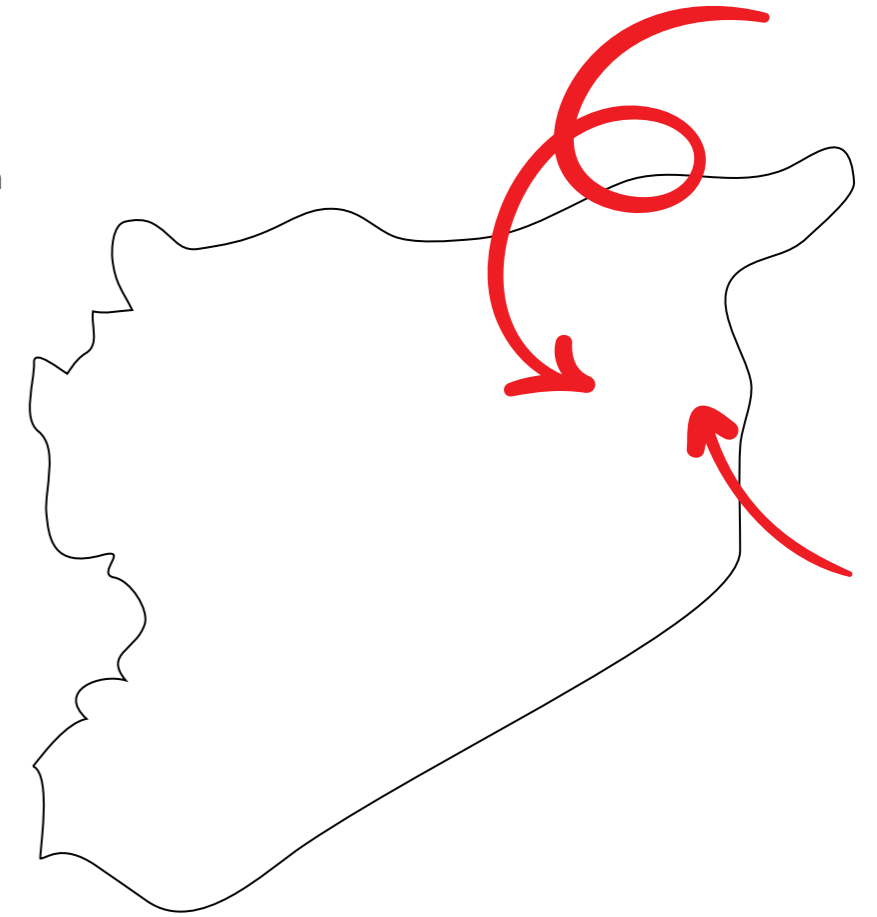
In Roj camp, the other camp hosting foreign nationals, there are currently 943 children and 420 women from third countries. Some of the residents of the camp have been there since 2017, highlighting longstanding inaction by their governments.

Publicly available sources have confirmed that there are children present in NES from the following countries: Afghanistan, Albania, Algeria, Australia, Austria, Azerbaijan, Bangladesh, Belgium, Bosnia & Herzegovina, Canada, China, Denmark, Egypt, France, Georgia, Germany, Indonesia, Iraq, Ireland, Italy, Jordan, Kazakhstan, Kosovo, Kuwait, Kyrgyzstan, Lebanon, Libya, Macedonia, Malaysia, Morocco, Netherlands, Norway, Pakistan, Portugal, Russia, Saudi Arabia, the Republic of Seychelles, Somalia, South Africa, Spain, Sudan, Sweden, Switzerland, Syria, Tajikistan, Trinidad and Tobago, Tunisia, Turkey, Turkmenistan, Ukraine, the United Kingdom, United States, Uzbekistan and Yemen.

11,000 foreign nationals from

**66**  
Different  
nationalities

From all regions of the world are currently in North East Syria's Al Hol camp.



**750** People have been repatriated to date

Around 750 repatriations\*, in 33 instances of repatriation to 22 countries, had taken place as of the end of 2019. Approximately half of those repatriations were to European countries.

Unaccompanied and separated children experience the greatest challenges, lacking both documentation and caregivers. In some instances, the name and nationality of an unaccompanied child may only be registered based on testimonials of former neighbours or persons claiming to have known the child's family, making it hard to verify.

**77**  
Children are unaccompanied in Al Hol camp, living in three interim care centres managed by humanitarian agencies\*

\*The numbers in this page are sourced from media reports and other publicly available information in NGO and UN reports and are not comprehensive to the best of our knowledge by December 2019. The actual numbers could be higher.

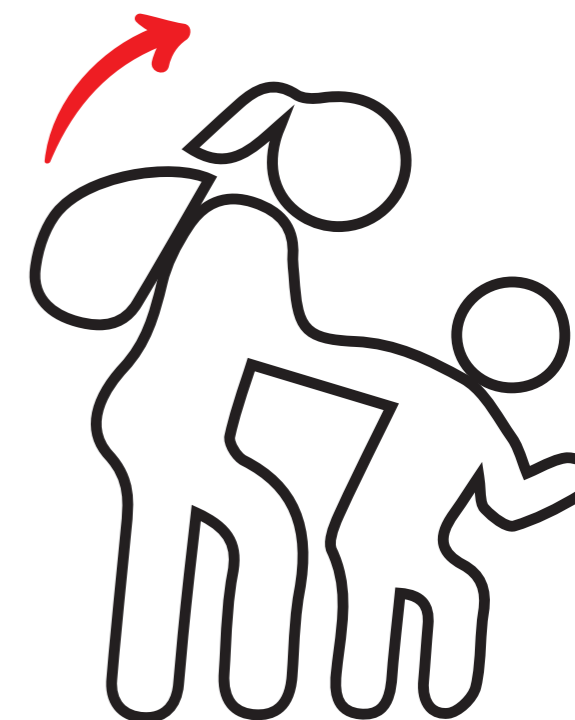
## SECTION SIX

# FOREIGN NATIONALS REPATRIATIONS

Save the Children is calling on countries of origin to safely repatriate these children and their families, in line with their obligations set out in the United Nations Convention on the Rights of the Child. Agreed international standards have established that access to support for rehabilitation is key to the recovery of these children and their families, access which is not currently available in displacement camps inside Syria. States should do everything possible to maintain family unity, and to provide the specialised protection, health, and other rehabilitative support that these children and their families will need upon their return. While air travel services may be limited at these times, diplomatic missions have demonstrated the ability to repatriate their citizens from different countries under special measures.

## REPATRIATION, rehabilitation and reintegration

rehabilitation and reintegration of the foreign population living in Al Hol and across North East Syria remains crucial. There are many services that are needed in the short term, outlined below, but repatriation continues to be the only **viable long-term solution**.



### In the meantime



**Education.** Children do not have sustained access to education facilities (especially secondary school), safe play areas or specialised protection services. This will have a serious impact on their ability to regain a sense of normality, return to education or socialise adequately for their development.



**Lack of Documentation.** Many children who lived under ISIS control, including the children of foreign fighters, lack the civil documentation that is necessary for them to access services in both the immediate and long-term.



**Mental Health and Psycho-Social Needs.** All children who have lived under ISIS control have experienced horrific events – they are likely to have witnessed frequent acts of extreme violence, have lived in deprivation and under bombardment for weeks or months during siege and military offensive, and nearly all have lost loved ones. Children and their caregivers should be provided with tailored, gender-sensitive and age-appropriate MHPSS services, including those with pre-existing mental health and psychosocial problems and those experiencing distress and fear regarding COVID-19



**Inadequate conditions.** The conditions in many locations where populations are being hosted or detained are not conducive to a standard of living adequate for their development. Children who are deprived of their liberty during the pandemic should be provided with access to services necessary to enable their continued health and wellbeing, including health care to address COVID-19 related needs, without discrimination.



**Family Reunification.** Children with real or perceived links to ISIS, including those of foreign ISIS fighters, may face additional barriers to family reunification where one or both parents may be deceased, detained, or in different countries.



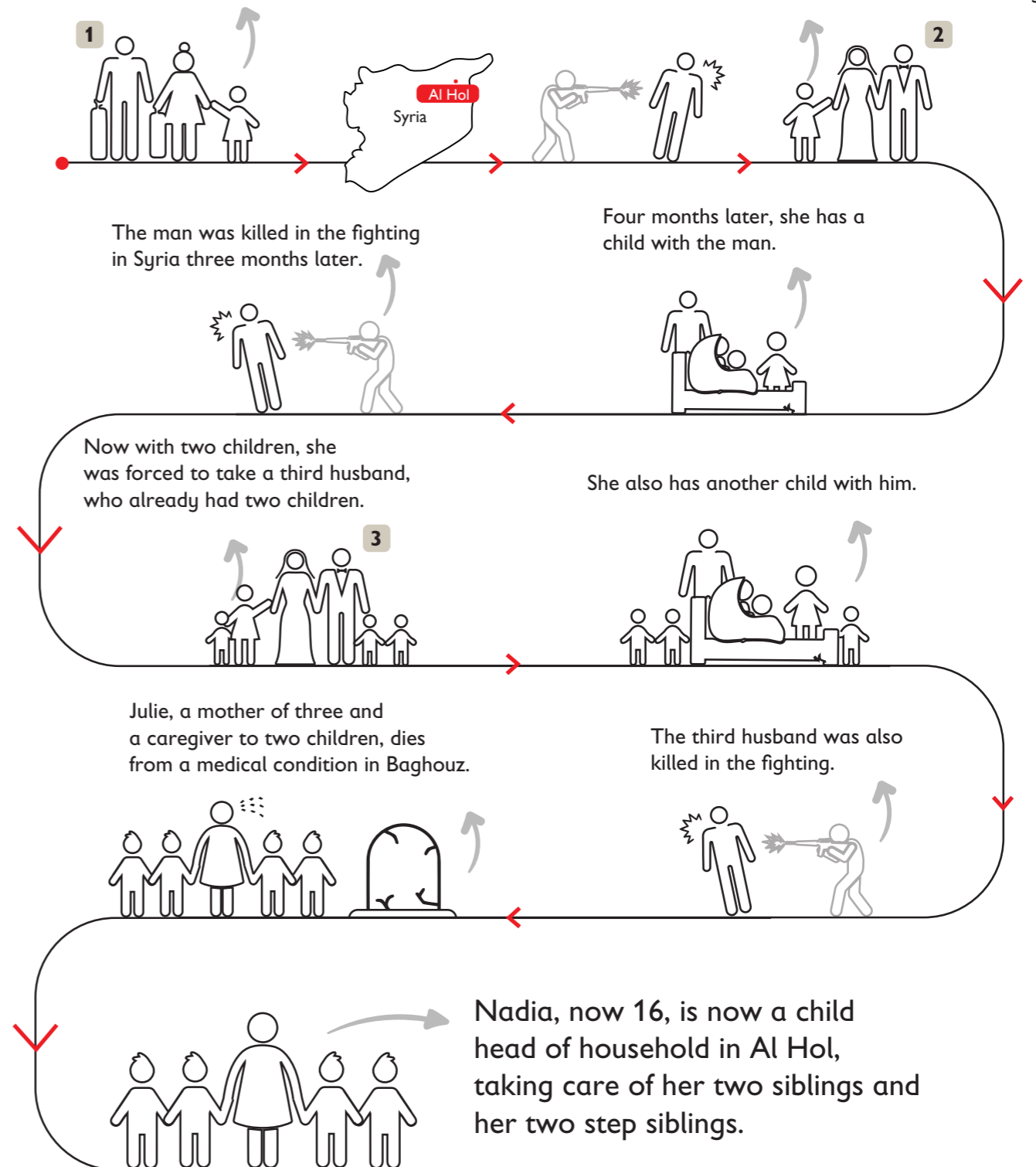
SECTION SEVEN

# NADIA'S STORY

When we met Nadia in Al Hol, she was very proud to have the responsibility of looking after her siblings. She had set up a 'school' for them at the gravelly side of their tent, and gave them regular classes in math, science and languages, as she wanted to build on the basic education they were receiving from humanitarian actors, and wanted to make sure they do not fall behind their peers outside the camps. All she saw under ISIS was unjust and cruel behaviour, towards her and her mother, she said. "My mom had to fight hard for me to stay unmarried". She said all she wanted was to meet her grandmother and: "She makes the best strawberry jam in the world."

**Nadia, 13, and her mother, Julie, a 34 year old woman from an unknown nationality moved to Syria in early 2014.**

After her husband died, Julie married a man of a German nationality.



## SECTION EIGHT

# RECOMMENDATIONS

### COVID-19 IN NORTH EAST SYRIA

- All parties to the conflict should immediately cease all hostilities in order to allow mitigation, containment, and treatment measures to be implemented unhindered, in line with calls from the UN for a global ceasefire.
- Authorities in Syria should implement the necessary mitigation measures within their communities, in line with WHO guidance, to slow the spread of the virus to provide some relief to the already fragile health care systems which will be responding to any outbreak.
- Authorities in Syria, as well as those controlling Syria's border crossings, should ensure that these mitigation and containment measures allow critical humanitarian activities to continue and that NGO permissions and staff movement are facilitated in an expedited fashion, in line with those measures;
- The UN Security Council should renew UNSC Resolution 2504 as is, prior to the July 10, 2020 deadline, for a period of twelve months to ensure that the UN cross-border response continue. This will remove uncertainty surrounding the design and planning of principled humanitarian assistance at this time of increased vulnerabilities. The UNSC should also urgently reauthorize UN cross border assistance through Yarubiyah crossing into northeast Syria, as it is the only viable way to ensure that vital medical and other supplies are available to humanitarian actors;
- Donor governments should review sanctions and counter terrorism measures to ensure that they are not impeding the delivery of the humanitarian response, in particular if they are affecting financial transfers to Syria or the supply of drugs and medical equipment;
- Donors should continue to provide funding to support the ongoing humanitarian response, in addition to scaling up the COVID-19 response. They should continue to show flexibility, including providing program extensions and support to essential staffing costs if/when organizations need to suspend non-essential activities.

### We call on authorities in Syria to:

- Approve registration for NGOs in a position to scale up and support the COVID-19 response in government-controlled areas, and increase flexibility for registered NGOs to broaden the range of their interventions.
- Work with humanitarian actors to ensure that necessary movements, including the ability to medically evacuate staff, are available while still respecting the need to mitigate the transnational spread of the virus.
- Provide exemptions to banking closures and financial service providers' movement to facilitate critical cash flow to enable essential humanitarian activities.
- Ensure that the shipment of humanitarian supplies, and particularly those for COVID-19 preparedness and response, are not interrupted.

### AL HOL RESPONSE

- Children of foreign nationalities trapped in Syria are innocent victims of the conflict and must be treated as such. Like millions of Syrian children, these children have lived through conflict, bombardment and acute deprivation. They need specialised help to recover from their experiences and return to normality, which is impossible in overwhelmed displacement camps in a volatile warzone.
- While some states have taken responsibility for their citizens, many countries have yet to take steps to ensure the safety of these children and their families. Given the life-threatening dangers these children and their families face in Syria, this is unconscionable.
- Save the Children is calling on countries of origin to safely repatriate these children and their families, in line with their obligations set out in the United Nations Convention on the Rights of the Child. This is even more urgent in light of the increased risk of COVID-19 related illness for children deprived of their liberty, and in accordance with global calls to release children from detention where it is safe to do so and in consideration of the best interests of the child. Agreed international standards have established that access to support for rehabilitation is key to the recovery of these children and their families, access which is not currently available in displacement camps inside Syria. States should do everything possible to maintain family unity, and to provide the specialised protection, health, and other rehabilitative support that these children and their families will need upon their return.
- Humanitarian actors should be granted unfettered access to this vulnerable population in order to deliver life-saving services in a timely manner. Currently, foreign families are being detained in two displacement camps (Al Hol and Roj) with inadequate access humanitarian assistance.
- Many children, who lived under ISIS control, including the children of foreign fighters, lack the civil documentation that is necessary for them to access services in both the immediate and longer-term. For some children, who were born in Syria under ISIS occupation, their births may not have been officially registered. For others, who were given birth documents, they may find their documentation is not internationally recognized. The lack of civil documentation, birth certificates, and/or other identity documents place them at greater risk of statelessness and denial of their basic rights and services.

# A CHILDREN'S CRISIS



**Save the Children**