

Geneva, Switzerland
03.06.2021

Statement by Ms. Alena Douhan

**SPECIAL RAPPORTEUR ON THE NEGATIVE IMPACT OF
UNILATERAL COERCIVE MEASURES ON THE ENJOYMENT OF
HUMAN RIGHTS**

Virtual Webinar

“The Impact of Unilateral coercive measures on national health systems of targeted countries and well-being of women, children and people in vulnerable situations”

Hosted by

The Permanent Missions of Belarus, Bolivia, China, Cuba, Iran, Nicaragua,
Russia, Syria, Venezuela and Zimbabwe
to the United Nations

Thursday, 3 June 2021

1:00 pm - 2:30 pm EST

Honourable Chair, Excellencies, Ladies and Gentlemen,

First off all I would like to extend my appreciation to the co-hosts of the event for the possibility to discuss this important issue and to thank their Government for permanent support of the mandate. It is a privilege for me to be here, to present some of my findings at the virtual seminar “The Impact of Unilateral coercive measures on national health systems of targeted countries” on issues relating to the humanitarian impact of unilateral sanctions especially as concerns the well-being of women, children and people in vulnerable situations.

Excellences, sanctioning states are traditionally highlighting “common goods” objectives in the implementation of unilateral sanctions, their legitimate purposes (to signal, deter or punish wrongdoers), their targeted character, and the absence of extraterritoriality, over-compliance and a negative humanitarian impact. Unfortunately, this all is far from reality. It has been repeatedly reported by States, humanitarian organizations and individuals that the impact of unilateral sanctions over national health systems is enormous.

Some of my previous statements as well as my report to the UN GA in October 2020 have been devoted to the humanitarian impact of unilateral sanctions in the course of the COVID-19 pandemic. Numerous cases of frozen funds, the impossibility to do bank transfers as well as other impediments to the delivery of humanitarian aid, medical supplies, protective kits, medicine and spare parts, prevention of the use of telemedicine and public medical databases, have been repeatedly cited. Current concerns focus besides that on the development, purchase and delivery of COVID-19 vaccines and reagents for their production. As a result, the right to health and correspondently the right to life have been affected a lot.

Excellencies, I would like to stress here that impact of unilateral sanctions over the national health sector of targeted states is much broader than the one existing in the course of the pandemic.

First of all, deteriorating economic situations, exacerbated by impediments to buying and delivery of equipment, spare parts and raw materials, affect the ability of target states to maintain necessary critical infrastructure. Shortages of electricity, gas and water facilitates the spread of various forms of diseases; the lack of gasoline – impedes the ability of people to get access to medical aid; hyperinflation and rising poverty – prevent people from using paid medicine services.

Economic crises resulting from or exacerbated by the application of unilateral sanctions undermine the ability of targeted governments to develop and even maintain medical infrastructure directly. They often face problems in buying medical equipment, spare parts for existing equipment, software, raw materials for production of medicine, reagents for tests, tests, medicine, protective kits and vaccines. The shortage of necessary equipment and medicine results in rising prices, corruption and the functioning of black markets. Low salaries in the public sector result in the flew of doctors and nurses, making access to medical aid even more complicated.

This results in the unavailability of medical aid for those who are in need, especially as concerns oncology, surgeries, diabetes, hepatitis, HIV and many other serious or chronic

diseases. Targeted countries report episodes of measles, polio, yellow fever and malaria because of the shortage of vaccines.

Because of the same reasons countries have to stop social support programmes, including coverage of expensive operations abroad, and family planning programmes. This results in rising rates of mortality because of severe diseases, mother and infant mortality rates, teenage pregnancies, increasing number of cases of opportunistic infections and HIV.

The impossibility to maintain essential infrastructure and the rising level of poverty are reflected in the insufficiency of food baskets, absence of proteins, and growing malnutrition rates of children and adults.

Humanitarian organizations are unanimously reporting they face problems and impediments in trying to get licenses to deliver food, medicine, vaccines and other essential goods to the countries under sanctions. The fear of secondary sanctions and de-risking programs used by banks result in growing *overcompliance*, spreading to donors and transportation companies. In Venezuela in particular, only the involvement of UN agencies (UNICEF, UNDP etc.) opened the road for humanitarian deliveries.

Besides that, women and girls are affected by the impact of unilateral sanctions the most. They are usually the first ones to lose their jobs or stop education, and salaries of those of them who are working in public sector (schools, hospitals, social services) are low; they are often involved in human trafficking, prostitution, sexual exploitation and abuse, and they are deprived of necessary nutrition, testing and medical assistance during pregnancy and while delivering babies.

Excellencies, we need to admit that unilateral sanctions are not the only reasons for problems faced by the health systems of targeted states. Some of them could have been not sufficiently developed before sanctions were imposed; some others were affected by pre-existing crises or military conflicts; some were very much dependant on foreign humanitarian aid; and some faced financial problems. However, statistics clearly show that the application of unilateral sanctions **has an enormous effect and is changing** the entire society for the worse. The health sector is among those which are affected the most. Unfortunately, the impact of unilateral sanctions on different sectors of the economy and health systems is not taken into account at the international level while assessing the situations in targeted societies.

I would remind here once again, that today the negative humanitarian effect of unilateral sanctions is more obvious and more disastrous. Targeted countries have insufficient medical personnel and face shortages of medications and medical equipment, including oxygen supplies and ventilators, protective kits, spare parts, software, fuel, electricity, drinking water and water for sanitation. This violates the **right to health, right to food and right to life** of their populations.

Ladies and Gentlemen, there is an enormous number of other points of significance which can and shall be discussed as concerns the impact of unilateral sanctions on the national health systems of targeted states.

I would use this chance **to call once again on states, international organizations as well as other actors** in a position to exercise a positive influence to review and minimize the whole scope of unilateral sanctions in full compliance with obligations arising from the UN

Charter, international humanitarian and human rights law, the law of international responsibility and other international obligations to guarantee that the rule of law is observed in the international arena; and to enable sanctioned states to ensure the effective protection of their populations.

A preliminary humanitarian assessment analogous to those which are currently done in the environmental area shall always be made before any unilateral measures are taken. Under no circumstances should trade in essential humanitarian goods and commodities, such as medicine, antivirals, medical equipment, their component parts and relevant software, and food, be subject to any form of direct or indirect unilateral economic measure or sanction.

While unilateral sanctions are still not withdrawn, the United Nations organization together with humanitarian NGOs shall establish and implement the assessment of the humanitarian impact of unilateral sanctions over targeted societies similar to the one that is done as regards the UN Security Council sanctions (vaccination, diseases, salaries, nutrition, death rates, etc.). Humanitarian concerns shall always prevail over political goals and objectives.

While unilateral sanctions remain in force, the whole mechanism of humanitarian aid and humanitarian exemptions should be amended. In particular, humanitarian exemptions shall be made clear, transparent and straightforward to allow for immediate or at least more rapid implementation.

Unilateral sanctions affect today all spheres of life and every individual in targeted societies, affecting especially women, children and people in vulnerable situations, infringing their basic rights and endangering their lives. I would thus use the chance to call on States, organizations of the UN system (in particular, UNICEF, ILO, UN High Commissioner for Refugees, UNESCO, WHO and many others) as well as humanitarian NGOs to control and assess the impact of unilateral sanctions on the situations in targeted countries within the scope of their respective mandates.

I thank you for your attention.