HUMANITARIANISM AND COVID-19: STRUCTURAL DILEMMAS, FAULT LINES, AND NEW PERSPECTIVES

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The Covid-19 Pandemic and Alternative Governance Systems in Idlib

Juline Beaujouan

Abstract As Covid-19 hit Syria after a decade of protracted conflict, the fragmentation of the territory and governance system prevented the adoption of a national strategy to mitigate the impact of the pandemic. In Idlib Governorate, the Covid-19 pandemic highlighted the inability of the Syrian Salvation government to offer an effective alternative to the Syrian regime. While it failed to provide health care and social services and to corner the international aid market, international aid routes were blocked by al-Assad’s regime in an attempt to squeeze the opposition further. In this context, local civil society in northwest Syria emerged as another non-state agent of governance.

Keywords Covid-19, Syria, civil society, rebel governance, Idlib, humanitarian access.

1 Introduction
Covid-19 officially hit Syria on 22 March 2020, 11 days after it was declared a pandemic by the World Health Organization (WHO). Observers feared the humanitarian emergency might reach a new level in view of the 13.4 million Syrian people in need of humanitarian assistance. For instance, the International Rescue Committee 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). In addition to the lack of capacity and resources of governmental actors, the fragmentation of the territory and governance system prevented the adoption of a unified national strategy to mitigate the impact of the pandemic.

Fears about the rapid spread of the virus particularly mounted in Idlib Governorate in northwest Syria, which is home to over four million civilians, including about 1.5 million internally displaced persons (IDPs) living in 871 self-settled and planned...
camps that do not provide a sanitation system and lack the minimum essentials of hygiene (CCCM Cluster Syria 2020). As for the residents of urban centres, concerns were no less. These ‘opposition areas’, that slipped away from the administrative and military control of al-Assad’s government, suffered constant infighting between local armed groups and a series of military offensives from the Syrian regime forces and their Russian allies ever since April 2019, despite the efforts of international mediation to demilitarise the northwest of the country (SOHR 2019). The attacks greatly underscored the access of civilians to primary health care, leaving them dependent on 166 doctors, 133 primary health-care facilities, and 54 functioning hospitals operating with mostly minimum capacity infrastructures (WHO 2020).

Amid a volatile situation, the UN Secretary-General António Guterres issued an appeal for a global ceasefire on 23 March 2020, urging warring parties around the world to silence their guns to focus on the fight against the Covid-19 pandemic. But the powerful players on the Syrian chessboard did not wait for the global call to act upon hopes for peace. Al-Assad’s pursuit for full military victory was (temporarily) halted on 5 March 2020 when Russian President Vladimir Putin and his Turkish counterpart Recep Tayyip Erdoğan struck a ceasefire deal for Idlib Governorate. While members of the Syrian Civil Defence (commonly known as the White Helmets) told the author that the Syrian and Russian forces violated the ceasefire more than 100 times in a year, the lull in the fighting gave opposition institutions in northwest Syria the space to try to mitigate the impact of the Covid-19 pandemic. Against all odds, the year 2020 offered Syrians some respite and the country witnessed its least violent year since March 2011. The relative stability was the opportunity for the author and Syrian colleagues to investigate the impact of the pandemic on non-state governance in Idlib Governorate, which is under the control of the Syrian Salvation government (SSG), unofficially affiliated with the Salafi-jihadi coalition Hayat Tahrir al-Sham (HTS).

This article demonstrates that, while Covid-19 showed the inability of SSG to provide an effective alternative to the Syrian regime, the pandemic set the stage for the emergence of local civil society as another non-state actor of governance – with a focus on providing health care and social services – in Idlib. While SSG is commonly branded as the ‘opposition’ or ‘rebel’ government, local civil society seems to provide a more legitimate inclusive and grounded system of governance. This article adopts Kawakibi and Sawah’s (2013: 11) definition of Syrian civil society, which refers to ‘the active and voluntary participation of citizens in organisations (outside their families, friends and workplace) where they support their interests, views and ideologies’. It includes community-based organisations as well as non-governmental organisations (NGOs), established locally but also by diaspora networks.
The findings presented in this article are based on 73 in-depth interviews conducted between June 2020 and August 2021 across Idlib Governorate with members of the local civil society, community leaders (tribal and religious representatives), representatives of governmental institutions at the central (i.e. ministry) and local level (local council) and grass-roots communities. Efforts were made to provide a representative sample of the Syrian population in Idlib Governorate; for instance, the research included 37 per cent of women and 70 per cent of IDPs. Interviews were conducted by the author and two local researchers, mostly over the phone to lessen the risk of Covid-19 transmission. More interviews were conducted face-to-face when health restrictions were eased in early 2021.

After introducing the fragmented governance system in Syria (Section 2), this article discusses how the efforts of SSG to mitigate the impact of the pandemic in Idlib Governorate (Section 3) were further impeded by the politicisation of Covid-19 and humanitarian access in the country (Section 4). These conditions provided an opportune environment for the emergence of local civil society as another actor of governance in Idlib Governorate (Section 5), a role that comes with opportunities (Section 6) but also many challenges (Section 7).

2 A fragmented governance system

In Syria, the shortcomings of the governance system in mitigating emergencies predate the Covid-19 pandemic. The country is effectively divided between political and military spheres of influence and corresponding institutions and affiliated health systems. While the Syrian regime has regained much territory, it has lost much legitimacy and popular support and is not the only source of authority across the country. For instance, the northwest has effectively been under the authority of two de facto governments since September 2013 – the Syrian Interim Government (SIG) and SSG – even though these areas fell under the military protectorate of Turkish forces following the Idlib ceasefire in March 2020.

The Turkish-affiliated SIG and the National Army – a coalition of the Free Syrian Army (FSA) and Salafi-jihadi factions – hold tight to the northern countryside of Aleppo Governorate and parts of Rojava at the Turkish border. SIG was established in September 2013 by the National Coalition for Syrian Revolutionary and Opposition Forces (SNC), sitting in Turkey, and aims at replacing the government of Bashar al-Assad. The rest of the opposition-held areas, namely Idlib Governorate and the western countryside of Aleppo, are controlled and administered by SSG, which is unofficially affiliated to HTS, including the former branch of al-Qaeda in Syria, Jabhat Fatah al-Sham (JFS).

SSG emerged as a second de facto alternative government in northwest Syria following the victory of a coalition of opposition
armed groups in Idlib Governorate in late 2015. The move enshrined the rejection of SIG’s authority and the creation of a dual power in the northwest of the country. In an attempt to reinforce the power of SSG, HTS launched a campaign to disband several local councils cooperating with SIG, replacing them with appointed councils linked with SSG and transferring a number of roles and powers of local councils to the SSG’s technical directorates, including health. The growing influence and control of HTS over Idlib Governorate resulted in a series of armed clashes throughout 2017 and fierce competition between the two *de facto* governments (Enab Baladi 2017).

In Syria, SSG is thus a typical example of rebel governance as ‘the development of institutions and practices of rule to regulate the social and political life of civilians by an armed group’ (Mampilly 2013: 45). Analyses of its establishment and attempts to perform the state have recently added to the scholarship on rebel governance (Al Dassouky 2017; Martínez and Eng 2018; Furlan 2020; Zelin 2020). Because of the fragmented nature of the Syrian opposition, SSG not only offers an alternative to the Syrian regime but also to SIG inside opposition-held territory. In this competition for legitimacy and grass-roots support, the Covid-19 pandemic provided SSG with ‘an opportunity to project [itself as] more reliable [provider] of governance’ to ‘score additional points in the battle for credibility, support, and legitimacy against the [Syrian] government’ (Furlan 2020: 16). As such, one could expect that SSG saw the Covid-19 situation as a ‘single-actor play on stage’ (Kövér 2021: 3). Yet, our research in northwest Syria suggests that, while SSG offered a more rapid and efficient response than the Syrian regime, it tried to corner the international aid market and relied mainly on local civic initiatives.

SSG’s unprecedented mitigating efforts... doomed to failure
SSG showed remarkable seriousness in facing the health emergency and started taking preventive measures as soon as 14 March; that is, more than a week before the Syrian government officially recognised that Covid-19 had reached Syria (Zelin 2020) and three months before the virus hit Idlib. Our research shows that SSG’s Health and Education ministries were the most active governmental institutions. Both issued preventive measures and conducted (online and face-to-face) awareness and sterilisation cleaning campaigns across Idlib. SSG also created an emergency response committee to coordinate the government action across its ministries and local councils.

More interestingly, SSG distanced itself from HTS and adopted pragmatic policies by closing Koranic schools and mosques and forbidding Friday prayers in early April 2021, which caused a rift between Salafis (al-Modon 2020). Doing so, in the early stages of the pandemic, SSG portrayed itself as the main player in charge, disseminating its actions through an intense use of social media and other online platforms (Jihadology n.d.). Moreover, a
series of comparative interviews conducted in areas controlled by the Syrian regime in Daraa Governorate during the research clearly establish that SSG provided relatively indiscriminate services across its territories. Conversely, the Syrian regime instrumentalised the pandemic and used it as an opportunity to further securitise areas that had previously escaped its control, such as Eastern Ghouta (al-Ra’i 2020).

Despite its will to provide a reliable and efficient answer to the pandemic, in the long term, SSG did not manage to endorse the role of a unified authority capable of issuing and enforcing decisions across Idlib Governorate. Its lack of monopoly, coupled with the mistrust of the Syrian people, and the influence of rival factions over various localities were strong barriers to a unified and efficient official response to the Covid-19 pandemic (COAR 2021: 22). Another impediment was the destruction of the health sector following intense bombing campaigns by the Syrian and Russian air forces that targeted health facilities across Idlib (Wille and Weir 2020). One final challenge to the action of SSG to confront the pandemic was its failure to corner international aid markets and Assad’s instrumentalisation of international aid to further squeeze the opposition (Berti 2016).

4 The politics of humanitarian access during the Covid-19 pandemic

Beyond offering an alternative authority to that of Bashar al-Assad’s government in Idlib, SSG was established as a channel to gain international recognition and circumvent the embargo on humanitarian aid in northwest Syria imposed by the Syrian regime (Kayyali 2019; Duclos et al. 2019). The weaponisation of humanitarian aid reached a new level with the arrival of Covid-19 in opposition-held areas on 9 July 2020. The Syrian regime demanded control over all border crossings for humanitarian aid between Syria and its neighbours. Doing so, it directly called into question the validity of Resolution 2165 adopted by the United Nations Security Council (UNSC) in July 2014, and which 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 beyond the control of the Syrian government.

In July 2020, just weeks after Covid-19 hit in Idlib Governorate, Russia, backed by China, wielded its veto to prevent the renewal of the two border crossings between Turkey and northwest Syria. The move was countered by the UK, France, and Germany, which managed to keep the Bab al-Hawa border crossing with Turkey open as the UN’s last remaining entry point for transporting assistance into northwest Syria and to the four million Syrians depending on external aid (UNSC 2020). UNSC’s decision resulted in enormous delays in the delivery of relief, especially to northern Aleppo that saw the arrival of aid convoys decreasing from one
every couple of weeks to one every two months according to local sources (Nashed 2021).

Faced with insurmountable obstacles to its action, SSG tried to convince the international community and funders that it should be given the tools and legitimacy to handle the pandemic (Beaujouan 2021). Its policies were quickly supplemented by the intervention of the WHO-led Health Cluster cross-border operation in cooperation with other UN agencies and international NGOs (INGOs), supported by local civil society. Yet, the WHO’s action felt conspicuously weak and far from being politically neutral (Hammou 2020). The unofficial status of Idlib Governorate, which is not recognised as a country or an independent entity, justified a one-month delay in the distribution of aid and testing kits compared to regime-held areas. The impact of the lack of involvement of the international community and its biased policy towards northwest Syria were recorded by the author and her colleagues through a small-scale online survey. Among 50 participants randomly selected across Idlib Governorate, only 22 per cent put a lot of trust in the international community compared to 60 per cent in local civil society, while 13 per cent of them had little or no trust that support would come from across the borders.

5 Local civil society front of stage for Covid-19 mitigation
The limited ability of SSG to provide health care and social services predates the Covid-19 pandemic, and the health sector in Idlib Governorate has been partly managed by civic actors for years. Most notably, Idlib Health Directorate (IHD) emerged in May 2013 as a health governance system to fill in the governance gap in opposition-held areas. Unlike SSG, IHD gained nominal political independence and the trust of grass-roots communities and international donors alike. Moreover, relief organisations gained experience during the 2013 polio outbreaks (Ekzayez et al. 2020) and the seasonal spread of communicable diseases such as leishmaniasis.

This local network in northwest Syria is greatly supported by a Syrian diaspora network that established medical NGOs, such as the Syrian American Medical Society (SAMS) and the Syrian Expatriates Medical Association (SEMA) and collaborates with local civil actors directly rather than rebel governance institutions. As such, and despite the real efforts of SSG to step in as the key mitigating actor of the pandemic, when Covid-19 hit Idlib in June 2020, local civil society networks were ‘both the first responders and the main interlocutors with international organi[z]ations’ (al-Achi 2020).

Local civil society was not a mere de facto substitute to rebel governmental authorities’ failure to deliver services and meet the needs of local populations. One could say that civil society ‘inherited’ the Covid-19 file, complementing the response of SSG
in Idlib Governorate. While al-Assad’s government securitised its response to the pandemic and curtailed the role of NGOs and the private sector (COAR 2021: 3), local civil society in Idlib enjoyed the relative lack of political and military interference in its activities – which is nuanced later in this article. For instance, the Ministry of Development and Camp Management within SSG coordinated with military groups to facilitate the access of volunteer teams in IDP camps to control the process of food and services delivery. The cooperation of military groups in this regard was unanimously appreciated by the people we interviewed.

The unprecedented threat posed by the Covid-19 pandemic, coupled with the inefficiency of the action of rebel governance and the international community, uniquely mobilised local civil society and triggered the emergence of creative and coordinated grass-roots initiatives in northwest Syria. The most striking example is the launch of the ‘Initiative of Volunteers Against Corona’, on 19 April 2020 by IHD and the White Helmets. The initiative is an intersectoral operation room initially composed of around 50 local organisations and 600 volunteers (Enab Baladi 2020), and was the first of its kind despite the constant humanitarian emergency in opposition-held areas since they gained nominal independence from the Syrian regime in 2013. It aimed to institutionalise civil society to coordinate and facilitate the response to the Covid-19 pandemic and the protection of civilians. Under the leadership of the White Helmets, the initiative directly coordinated with SSG to: establish several confinement centres for patients infected with the virus; conduct campaigns of cleaning sterilisations of schools, mosques, and public spaces; provide hundreds of awareness sessions within weeks; and distribute brochures giving guidance and including information on mitigation measures.

6 Local civil society: a new governance actor?
In a series of reports on the public governance response to the Covid-19 pandemic around the world, the Organisation for Economic Co-operation and Development (OECD) emphasised the critical role of good governance in the mitigation and recovery of the health crisis. Based on its analysis, OECD developed evidence-based policy responses to help governments tackle the crisis and plan for a sustainable recovery (OECD n.d.). In Idlib, several of these public governance policy responses were developed and implemented by local civil society, action that exceeded mere crisis management through infrastructure resilience and service delivery.

Crisis communication: 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 social tensions, notably between displaced and host communities. Public communication in northwest Syria was crucial given the lack of independent media, the existence of
several discourses by competing governmental institutions, and also the spread of rumours about Covid-19 (Beaujouan 2021). Local civil society became a key transmission channel to fight misinformation and raise public awareness, both in-person and via online campaigns. As well as this, social media became a crucial platform for in-need communities to ask for support, as the inhabitant of an IDP camp did on the Facebook page of the Initiative Against Corona on 16 September 2021: ‘We are about 115 families in a camp near Idlib Governorate. We need a team to raise awareness and sterilise the camp mosque, anyone can contact me... there are [Covid-19] cases in the camp’.

**Public trust:** Medical (public) services are free for all in Idlib, but Syrians are often reluctant to visit hospitals and medical centres. Importantly, citizens must trust the institutions and people delivering medical services. Building knowledge and trust was a key mission of local civil society during the pandemic through awareness campaigns about the virus, while mobile campaigns (i.e. clinic and classroom buses) were also the occasion to break isolation and provide educational and psychological support to civilians. The mission of civil society was facilitated by the relation of trust and reliance built over years by key civil society organisations (CSOs) such as the White Helmets and IHD. For instance, the White Helmets posted several videos of its staff receiving the vaccine to push the grass-roots community to follow their example (White Helmets 2021).

**Diversity and inclusion:** Through its action, local civil society tried to foster social cohesion and solidarity between grass-roots communities. Most importantly, the activities it implemented did not discriminate between ethnic and religious groups, gender, or age – even though vulnerable people such as IDPs inside camps were often prioritised for aid delivery. Specific activities targeted frontline workers such as medical staff but also poor students who could not afford distance learning, and street cleaners. Because grass-roots initiatives greatly relied on volunteers, they did not require previous experience or an intense recruitment process. As a result, local civil society initiatives during the pandemic proved to be more inclusive than external humanitarian programmes and governmental actors in terms of gender, ethno-sectarian identity, age, and political views.

**Policy coherence and coordination:** The pandemic created an impulse for collaboration and coordination among civil society and other grass-roots initiatives, a practice that was absent before the arrival of the virus. From the admission of several humanitarian workers and activists in Idlib, before the Covid-19 crisis, CSOs were ‘forced’ by donors to cooperate through information exchange or common activities. The practice became natural during the pandemic. Besides, the health crisis showed the relevance of local civil society as a bridge between decision makers and officials on the one side and grass-roots communities on the other.
7 **Challenges to the emergence of an independent bottom-up governance system**

In Idlib Governorate, the Covid-19 situation translated into a strengthening of civic activism and voluntarism and a more coordinated and proactive local civil society. Yet, the new role of civil society as a non-state service provider comes with great challenges that might hinder the sustainability of grass-roots responses and the transformation of the local humanitarian space into a key driver of bottom-up governance in the future.

First, the question of the relationship between civil society and SSG must be clarified. During our research, 96 per cent of grass-roots respondents considered the action of civil society and that of the opposition government as complementary, suggesting the absence of competition between the two governance actors in Idlib Governorate. Similarly, representatives of governmental institutions insisted on cooperation with civil society under the umbrella of SSG and local councils. According to them, SSG’s action to mitigate the impact of the pandemic was rooted in a clear collaborative action that included, and indeed mostly relied on, local civil society.

Yet, civil society and local activists recorded different dynamics. While SSG did not enact restrictive policies against CSOs or directly attempt to thwart their efforts since Covid-19 reached Syria, it endeavoured to become the only channel for international funding and to limit the autonomous aspirations of civil society. The extent of the cooperation between the two governance actors is also subject to debate. Several members of local civil society expressed that cooperation with governmental central and local institutions was limited in scope and time, and that the action of local initiatives was confined to providing awareness sessions and advising on emergency plans. They regretted the absence of civil society members in decision-making: ‘The government takes [the] decision and we provide [the] services’.2

Moreover, for several CSOs operating in Idlib Governorate, the branding of SSG as a rebel government indirectly but infamously affiliated with HTS means that independence and cooperation with governmental institutions are mutually exclusive. For instance, several CSOs refused to sign a Memorandum of Understanding (MoU) with SSG in a bid to retain their independence and attract more international funding. Data collected in Idlib show that when an MoU is in place, a common practice of governmental institutions is to determine the location and the type of response to an emergency, and in rarer cases, suggest names of beneficiaries. In the absence of a law to regulate the roles and relations between CSOs and SSG, the absence of an MoU is often an insurmountable obstacle to the development of CSOs’ activities. In the near future, this situation might lead to increased competition between SSG and local civil society to attract...
funding and provide reliable services to grass-roots communities. More research is needed to elucidate the interactions between the two non-state agents of governance in northwest Syria. The main question to be answered is whether they will compete over the provision of services or, conversely, cooperate and complement their actions to offer a more representative and effective hybrid governance system in Idlib.

Second, local civil society remains largely dependent on international donors. When asked about the lessons learned from the Covid-19 pandemic in Idlib, several research participants emphasised the importance of gaining self-reliance. During the pandemic, in addition to adapting their working environment and the practicality of the programmes, local NGOs and other CSOs saw the scope of their development-oriented projects redirected to emergency plans that they were not equipped or trained to implement. Besides, funding targeted at fighting the pandemic only started flooding in when the virus effectively reached Idlib in June 2020, jeopardising the efficiency of preventive policies.

As a result, between March and September 2020, when the number of cases increased in northwest Syria, local civil society was left working from a reactive paradigm, or what the inhabitants of the Levant commonly call *Nidam al-faza*, literally ‘the dreadful system’. The expression describes the work done in ‘happening’ environments where programmes fail to rely on an informed assessment of the local situation and needs, strategic planning, capacity, and training. In this regard, one of the greatest challenges of local civil society in Idlib is to move from the position of mere ‘implementer’ of the policies and priorities of the international community, and for that matter, SSG.

The challenge is even greater since local civil society in Idlib has not been spared by the Syrian conflict and its situation is 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. A striking example of such practices is the campaign of delegitimisation launched by the Russian media against the White Helmets several years ago, which accuses the volunteering force of links with terrorist groups in Syria (Solon 2017).

8 Conclusion

In Idlib, the Covid-19 pandemic has exposed the Syrian opposition’s (SSG) lack of capability to provide a reliable governance alternative to the Syrian regime, and the challenges of the international community to stand up as a key relief actor in northwest Syria. On the other hand, grass-roots communities that have lived through a decade of violence, displacement, and trauma were, understandably, reluctant to assess the full impact of the health crisis on their lives. While the virus constituted yet another fundamental shock to the system of governance across
the country, in Idlib, it led to the emergence of a new form of a more legitimate, inclusive, and grounded system of governance: local civil society. As such, Idlib is a textbook example of how the Covid-19 pandemic exposed the tensions in the humanitarian space between restrictions – in the case of the international community – and transformation – namely, that of local civil society.

While the pandemic strengthened civic activism and voluntarism, local civil society remains dependent on support from the international community to foster locally owned governance. In addition, more efforts will be needed to study the response of SSG to the rise of a new non-state governance actor in Idlib Governorate. Finally, a resurgence of the national conflict may be witnessed in the near future that will jeopardise the efforts of local civil society to reinforce its role as a service provider. As a result, non-state governance in northwest Syria is likely to experience more challenges and transformations; thereby testing the adaptability and sustainability of local civil society as a driving force for the future of Syrian opposition-held areas.

Notes
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1 Juline Beaujouan, Post-Doctoral Research Fellow, University of Edinburgh, UK.

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