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Human rights situations that require the Council's attention

Written statement* submitted by Physicians for Human Rights, a non-governmental organization in special consultative status

The Secretary-General has received the following written statement which is circulated in accordance with Economic and Social Council resolution 1996/31.

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* Issued as received, in the language(s) of submission only.



Physicians for Human Rights: Sudan’s attacks on peaceful Protesters and Physicians, and the need for accountability

Summary

Since Sudanese protesters took to the streets in December 2018 to demonstrate against government corruption, economic mismanagement, and brutal repression, Sudanese forces have carried out massive violations of human rights. Peaceful protesters have been attacked by government security forces using disproportionate, unnecessary, and sometimes lethal force.¹ Protesters were arrested and detained without charges and denied access to their families or medical care. Government security forces and police prevented medical personnel from attending to the wounded and, in many cases, arrested and detained these personnel, conducted incursions and attacks inside medical facilities, and targeted, injured, and even killed health workers while they carried out their medical duties or participated in the protest movement.²

Since then, all medical professionals have been released, President Omar al-Bashir has stepped down, and negotiations continue between a Transitional Military Council and Forces of the Declaration of Freedom and Change. But with the negotiations stalled and an upcoming African Union deadline for the creation of a transitional government, there is fear that the military will attempt to solidify their rule and clear the ongoing sit-in in front of the military headquarters.

PHR’s Methodology

Physicians for Human Rights (PHR) sought to triangulate eyewitness accounts of attacks on civilians with reports from other witnesses, news reports and video footage, legal records, medical documentation, and other sources to produce sufficient data to make assessments about human rights violations. Data was compiled from direct communications with Sudanese medical organizations and their members as well as open-source videos and images. Direct communications with Sudanese physicians as well as expatriate Sudanese physicians living in North America included interviews of physicians who had participated in protests or cared for injured activists. In cases where physicians were injured or abused by government officials, PHR researchers attempted to obtain and analyze any available medical records to corroborate their reports.

Given that this data was primarily collected through secondary sources on an urgent basis in a volatile context, there were limitations in duration, scope, and access. The study covered events between December 19, 2018 and March 17, 2019. The scope of the investigation focuses on human rights violations of protesters and medical personnel. PHR’s analysis was based on data that was safely obtainable from Sudanese health professional colleagues and from open sources. The forced closure of newspapers, shutdown of social media channels, and limitation of access to information have significantly affected the availability of information on the protests, living conditions, and arrest details of the detained. Virtual private networks, however, have allowed citizens to share information. Notwithstanding these limitations, the evidence available and the trends noted have produced sufficient data to make informed conclusions and recommendations about alleged reports of human rights violations during the recent protests in Sudan.

¹ J. Henry, “Sudan’s Game of Catch and Release,” Human Rights Watch, February 1, 2019.

² “‘Why Sudan is shooting medics,’” BBC News, January 18, 2019.

PHR's Key Findings

Disproportionate and/or Unnecessary use of force in Protests

There were multiple reports of unnecessary, disproportionate, and improper use of force during the recent protests against peaceful and unarmed Sudanese protesters. It is important to note that tear gas, rubber bullets, and other crowd-control weapons pose particular health risks to those with underlying medical conditions and may cause death in some cases^{3, 4, 5, 6}. Live ammunition can cause severe injuries to all body systems, in addition to death. PHR's findings also noted the use of shotguns with solid metal pellets that project in an array. These weapons are particularly dangerous when used against crowds, where many people, including unintended targets and bystanders, can be hit simultaneously. Most international regulations ban⁷ the use of live ammunition, shotguns, and metal-composition projectiles in these contexts. PHR's previous research into crowd-control weapons and their health impacts⁸ illustrates that, far from being benign, these weapons impose heavy short- and long-term burdens on patients, health workers, and the health system as a whole.

Attacks on medical facilities

PHR collected data on attacks on medical facilities during and after protests based on reports from Sudanese medical colleagues and corroborated with open-source data. Attacks on medical facilities impose critical health risks in both the short- and long-term. Tear gas and other chemicals can contaminate the hospital environment, especially injuring those with existing illnesses and injuries. Exposure to tear gas in closed indoor environments extends exposure time and dose, exacerbating their effects, particularly on people who are not able to walk and/or escape. These chemicals also pose longer-term health risks for patients and medical personnel who work or are being cared for in these contaminated spaces. In the long term, attacks on facilities can erode trust in the health system and intimidate people from accessing necessary health services. PHR identified at least seven incidents that support allegations of multiple intentional attacks on Sudanese medical facilities.

Violations against medical personnel

PHR communicated with colleagues in Sudan and elsewhere to compile accounts of the targeting of medical personnel and to detail incidents of their arrests and/or detentions since the beginning of the protests. Some, but not all, of these medical professionals were noted to have been involved in the care of protesters, to have made statements supporting the protest movement, or simply to have participated in protests along with other professionals and community members. Based on communication with local sources, at least 136 physicians were arrested and detained. Doctors were arrested while participating in protests, while working in hospitals or clinics, and in their homes.

Torture and other abuses

Little is known of the detention conditions of doctors, especially those who were arrested in the current crisis. However, years of human rights reporting by PHR in Sudan has revealed the extensive use of torture and other human rights violations in Sudan's prisons and

³ R. J. Haar and V. Iacopino, "Lethal in Disguise: The Health Consequences of Crowd-Control Weapons," Physicians for Human Rights, March 1, 2016.

⁴ International Network of Civil Liberties Organizations, "Unhealed Wounds," 2019.

⁵ R. J. Haar, V. Iacopino, N. Ranadive, S. D. Weiser, and M. Dandu, "Health impacts of chemical irritants used for crowd control: a systematic review of the injuries and deaths caused by tear gas and pepper spray," *BMC Public Health*, vol. 17, no. 1, p. 831, Dec. 2017.

⁶ B. Ballantyne, "Medical Management of the Traumatic Consequences of Civil Unrest Incidents," *Toxicological Reviews*, September 2006.

⁷ OHCHR, *Basic Principles on the Use of Force and Firearms*, 1990.

⁸ R. J. Haar and V. Iacopino, "Lethal in Disguise: The Health Consequences of Crowd-Control Weapons," Physicians for Human Rights, March 1, 2016.

detention centers^{9, 10, 11, 12, 13, 14, 15}. PHR's witnesses confirmed that physicians were being targeted in this manner. One reported, "We have heard details from our colleagues who were released. There is solitary detention and psychological and physical abuse. Doctors are kept in a very dark room where they don't know the time. Or they are kept in a very cold room with AC on all the time and there is nothing to keep warm. Or one advertisement is played on the channel over and over again without the detainee knowing the time. It is physical and mental torture."

Conclusion and recommendations

The findings in PHR's report indicate that the government of Sudan violated human rights on a massive scale. National Intelligence and Security Services personnel and their adjuncts used unnecessary and disproportionate force against citizens, targeting medical personnel and facilities and torturing protesters and medical personnel in detention. Together, these actions violate both national and international laws as well as basic norms of medical ethics and care for the sick and wounded. Despite methodological limitations, these findings provide compelling evidence of recent violations and point to concerns about ongoing abuses in Sudan. It is critical now that perpetrators of human rights violations are held accountable, including those currently in the Transitional Military Council, and that the UN and its member states remain engaged to prevent a violent crackdown to end the ongoing protests.

As such, and given the current circumstances, PHR calls on the UN and its member states to introduce a resolution at the United Nations Human Rights Council addressing the current situation in Sudan related to the response to protests and subsequent human rights violations. PHR also calls on the UN member states to urge Sudan to extend an open invitation to relevant Special Procedures to visit the country.

⁹ "Sudan: Reform National Security Law," *Human Rights Watch*, November 6, 2009.
¹⁰ L. Oette and M. A. Babiker, *Constitution-Making and Human Rights in the Sudans*. Routledge, 2018.
¹¹ L. Oette, *Criminal law reform and transitional justice : human rights perspectives for Sudan*, Ashgate, 2011.
¹² A. Elzobier, "Op-ed: Will Sudan end torture?," *Amnesty International*, April 3, 2018.
¹³ "Sudan: Agents of Fear: The National Security Service in Sudan," *Amnesty International*, July 19, 2010.
¹⁴ "SUDAN," REDRESS, 2019.
¹⁵ Q. D. Young and E. Stover, "Physicians and Human Rights," *JAMA J. Am. Med. Assoc.*, vol. 264, no. 24, p. 3127, Dec. 1990.