

ASSAD'S ABHORRENT CHEMICAL WEAPONS ATTACKS

HEARING BEFORE THE COMMITTEE ON FOREIGN AFFAIRS HOUSE OF REPRESENTATIVES ONE HUNDRED FOURTEENTH CONGRESS FIRST SESSION

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ASSAD'S ABHORRENT CHEMICAL WEAPONS ATTACKS

WEDNESDAY, JUNE 17, 2015

HOUSE OF REPRESENTATIVES,
COMMITTEE ON FOREIGN AFFAIRS,
Washington, DC.

The committee met, pursuant to notice, at 10 o'clock a.m., in room 2172 Rayburn House Office Building, Hon. Edward Royce (chairman of the committee) presiding.

Chairman ROYCE. This hearing will come to order. This morning we consider the continued use of Bashar al-Assad's chemical weapons strategy, his use of those chemical weapons on his own people.

Two years ago, the world was stunned when Assad used sarin in the suburbs of Damascus—in that attack on that day 1,500 people were killed. In response, President Obama threatened military action, and the Assad regime agreed to a hastily brokered deal to remove and destroy what was to be “all” of Syria's substantial stockpile. A year later, President Obama declared success. In February, Secretary Kerry testified that “we got . . . all the chemical weapons out of Syria.”

Well, that would be news to two of our witnesses here today because they've been on the front lines struggling to save the lives of those targeted by the regime's barrel bombs that are filled with weaponized chlorine. Dr. Tennari serves in the field hospital in Idlib Province and Mr. Farouq Habib works with the Syrian Civilian Defense—a group of volunteer first responders who dig through the rubble to treat victims.

As the Assad regime loses more territory, the regime has stepped up its chemical attacks on the civilian population in opposition controlled areas. What first appeared to be random and irregular attacks has become a steady, unending series of chemical attacks with the aim of decimating the middle class in these civilian populations. And, meanwhile, that same Syrian middle class tries to hold off ISIS on the ground as ISIS tries to overrun their position, so they face a one-two punch of ISIS on their border and Assad's barrel bombs with chlorine coming down on the population.

Over 8 weeks this spring, Idlib saw 29 chlorine attacks. Most began just 10 days after the U.N. Security Council passed a resolution which threatened the use of force against anyone found to have used chlorine as a weapon. In almost cases, the chlorine was delivered by barrel bomb from a helicopter. Assad has seen the world's complacency and decided that he can literally get away with mass murder of civilians.

Anyone can be a target. The regime will even drop one bomb. It will then wait for the first responders, and then drop another one. Many chlorine attacks take place at night when families have taken cover. A heavy gas, a chlorine gas seeps down into makeshift bomb shelters. As we'll hear, this toxic gas has a horrific impact on the human body: Foaming at the mouth, gasping for breath, and dying slow, agonizing deaths as the chlorine gas turns to hydrochloric acid in the lungs of the victims, many of these victims children.

Unfortunately, the administration continues its slow response. Last month, the President still spoke of needing further confirmation that it was the Assad regime that is responsible for the chemical attacks. Let's be clear: Only Assad's forces have helicopters, only Assad's forces have those helicopters take off from Assad's bases and routinely drop barrel bombs on the civilian middle class in areas like Aleppo. Yesterday, Ambassador Power told the committee here that those responsible for these attacks must be held accountable. Yes, they must, but when? When will they be held accountable?

U.S. policy has to change. Last month, Ranking Member Engel and I offered a successful amendment to the defense policy bill directing the Pentagon to closely examine a no-fly zone over Syria, denying Assad ownership of the skies. Syrians would no longer be forced to choose between staying above ground where they could be killed by the shrapnel Assad packs inside the barrel bombs, or going below ground where they are more vulnerable to suffocating from chlorine gas. The daily decision to go to the market, or to go to the school, or to go to sleep at night would no longer be a life or death decision.

Of course, the United States can't do this on its own. It would need strong support and participation from our regional partners. Many of them have been asking and offering their support.

The administration should also be looking at other more immediate, non-military methods that might save lives. Radar systems for opposition held area could serve as early warning systems. Air raid sirens could sound the alarm. Sensors could detect chemical weapons and allow first responders to be prepared as they rush to aid victims.

This can't just keep going on and on. If nothing is done, the human tragedy in Syria and the region will reach depths the world hasn't seen in generations-taking a human toll, harming our security, and sending a powerful and frightening message that chemical attacks are tolerated.

I now yield to Ranking Member Engel, an early and intense critic of the Assad regime and someone who has long worked to shape Syrian policy toward humanitarian end ever since he first called to our attention the people in Damascus walking through the streets saying, "Peaceful, peaceful," in their effort to reform, and the fact that the Assad regime opened up on the civilian population with automatic weapons and slaughtered the population in the streets.

He has long been focused on finding ways to end the civil war in Syria, and help the suffering of the Syrian people, and I appreciate his leadership on these issues. Mr. Engel.

Mr. ENGEL. Thank you, Mr. Chairman. Thank you for calling this hearing. Thank you for your leadership and working so closely with me to help the Syrian people.

My heart grieves for the Syrian people. I only wish that we had made some different policy choices in Washington 3 years ago when the Free Syria Army was begging us to aid and equip them. And I said then put in legislation that we should have equipped them, and perhaps things would be different today in Syria. I know we're still trying to find our way, but when we didn't equip them, we had the terrorist group, ISIS, move into the void, and it's just been a disaster. But we still have to pay attention, and still have to right the wrongs, and still have to let the Syrian people know that we stand with them, that we're not forgetting about them, and that we're not going to stop until these atrocities stop.

Over the last 4 years, the civil war in Syria has cost hundreds of thousands of lives, left millions displaced and created a lost generation of Syrian orphans. As their nation has been torn apart, the Syrian people have faced a stark choice, flee their country as refugees or live every day under the threat of Assad's barrel bombs.

Perhaps the worst chapter in this conflict came in August 2013 when the Assad regime used sarin gas to wipe out hundreds of people in the Damascus suburb of Ghouta. Before this massacre, only the second time sarin had been used since World War II, President Obama said that a chemical weapons attack would be a red line.

As Congress and the administration contemplated military action, Assad backed down at that point. He agreed to give us his entire chemical weapons stockpile, and signed the Chemical Weapons Convention. Last June, the Joint Mission of the Organization of the Prohibition of Chemical Weapons, the OPCW, and the United Nations announced that all of these weapons had been removed from Syria. But now, true to form, Assad is testing the international community again.

In September, the OPCW concluded, and I quote, "with a high level, a high degree of confidence, that chlorine was used," and this is a quote again, "systematically and repeatedly," in attacks in Northern Syria. Since then, more chlorine attacks have been reported. Though not as deadly as sarin, the use of weaponized chlorine is still a violation of the Chemical Weapons Convention.

Dropping from the sky in Assad's barrel bombs, these chlorine attacks have killed or wounded hundreds. Innocent civilians have lived in terror knowing what to expect when helicopters appeared on the horizon. No one should have to live with that kind of fear. That's why Chairman Royce and I offered a measure which passed the House last month to direct the Pentagon to take a hard look at the possibility of a no-fly zone.

In recent months, Assad has appeared increasingly vulnerable. Sadly, that has only made his tactics more desperate and violent. Assad remains a magnet for extremists, and as long as he remains in power, Syria will not find peace. He holds absolutely no place in Syria's future.

Today's testimony will help us shape U.S. policy toward the Assad regime at a critical point in the Syrian conflict. I look forward to hearing from our distinguished panel. I'm glad to see Ambassador Ford here again, who has been to this committee a num-

ber of times. And, Ambassador, we are always praising your good work, the good work that you have done in the past, and the good work that you continue to do. And I look forward to our other witnesses, as well.

Thank you, Mr. Chairman. I yield back.

Chairman ROYCE. Thank you, Mr. Engel.

Ambassador Ford, welcome. Ambassador Ford served as the United States Ambassador to Algeria from 2006 to 2008, and as the U.S. Ambassador to Syria from 2010 to 2014. Prior to that, the Ambassador was stationed with the U.S. Foreign Service throughout the Middle East and North Africa. He is currently a senior fellow at the Middle East Institute.

Dr. Mohamed Tennari works as the Syrian American Medical Society's medical coordinator in Idlib, Syria. He performs emergency medicine in local field hospitals. Dr. Tennari recently spoke before the United Nations Security Council about his experiences treating chlorine attack victims in Syria. Over the years, we've had the opportunity tragically to see the photographs that he has taken of children that he's treated who perished under the gas attacks.

Mr. Farouq Habib is a program manager at Mayday Rescue which is a nonprofit organization that provides support to Syria's Civil Defense. Mr. Habib is a leading activist in Syria, and in 2012 was invited to speak on humanitarian confidence-building measures at the U.N. General Assembly.

Dr. Annie Sparrow is currently deputy director of the human rights program in the Department of Global Health at the Icahn School of Medicine at Mount Sinai in New York. Dr. Sparrow has been documenting health crisis on the Syrian borders since 2012.

And without objection, all of your statements will be made part of the record, and our members here will have 5 calendar days to submit any statements to you, or any questions, or any extraneous material that they might want to submit in the record.

So, we will begin with Ambassador Ford, and we'll ask each of you to summarize in 5 minutes for your opening statement. Ambassador Ford.

**STATEMENT OF THE HONORABLE ROBERT FORD, SENIOR
FELLOW, THE MIDDLE EAST INSTITUTE**

Ambassador FORD. Mr. Chairman, Ranking Member Engel, and other distinguished members of the committee, thank you for the invitation today, and it's a real honor to be on this panel with the other members. I'm looking forward very much to seeing what they present.

I would like to thank you very much for having this hearing. As you noted, it's an important gesture to Syria and Syrian civilians, and it is the right and decent thing to do, but it's also really important for our national security because the Islamic State in its recruiting efforts, its propaganda highlights that western countries like the United States don't care about Syrian civilian casualties, and western countries don't care that Assad is dropping chemical weapons on civilians. So, this hearing is an important step in deflecting that Islamic State recruitment propaganda.

I'd like to just make a couple of quick points. First, in the very bitter war of attrition in Syria, the military situation is slowly but

very steadily turning against President Assad and his regime. His forces are running out of manpower, and as that dynamic goes forward, the Syrian regime will more and more want to use chemical weapons to make up for manpower shortages. They are using them more now than they did 2 years ago, and they are not deterred from using them. Let me say that again. They are not deterred from using them.

Now, after the horrors of World War I, the second point I want to make is that there has long been an international consensus not to use chemical weapons, including chlorine gas. The Syrian Government is using chlorine gas with impunity, and other states like North Korea are observing that impunity. We need to understand that an international consensus forged after World War I is steadily eroding.

The third point I'd like to make: Ambassador Power and her team at the United Nations State Department are admirably trying to forge a new international consensus to stop this use of chlorine gas. The United Nations Security Council, even Russia and China, approved Resolution 2209 in March. That resolution warned the parties in the Syrian conflict that the international community would act under Chapter 7 of the U.N. Charter against any party in the Syrian conflict that is using chemical weapons. And as you mentioned, the Organization to Prohibit Chemical Weapons has already stated that they are being used in Syria. The problem is the OPCW investigative team had no mandate to determine which side in the conflict is using chemical weapons. So, Ambassador Power with other members of the Security Council now are trying to forge a mandate to determine how an investigative committee, an investigative team would determine that responsibility.

Countries like Russia and Iran, both of whose armies in wars past have suffered horrible chemical weapons attacks, have an interest in working with us to stop this violation of a longstanding international norm.

Finally, if the United Nations Security Council cannot act, and we have seen Russian vetoes before, then the United States needs to be ready to act within a smaller coalition. We could help Syrians identify and interdict chemical weapons attacks. We could also act with regional states to impose a no-fly zone, if necessary, to stop chemical weapons attacks. A no-fly zone would both save lives, and if properly negotiated and properly implemented, would actually facilitate getting to national political negotiations.

It's important to keep our eyes focused on priorities now in the short term to stop attacks that violate longstanding international norms, and in the long term to use any applications of force, direct or indirect, to move toward a political settlement in Syria. Ultimately, only a political settlement will really protect Syrian civilians.

Thank you very much, Mr. Chairman.

[The prepared statement of Ambassador Ford follows:]

House of Representatives Foreign Affairs Committee

Hearing of June 17, 2015

The Use of Chemical Weapons in Syria

Testimony by Ambassador (ret) Robert Ford, Senior Fellow at the Middle East Institute

Mr. Chairman, Ranking Member Engel, distinguished members of the Committee,

It is an honor and a privilege to be with you today. I would like to express my appreciation for the Committee holding this hearing about the use of chemical weapons in Syria.

This hearing can help build consensus in the United States about the need to deter use of chemical weapons around the world.

And this hearing can help show Syrians, who so often feel abandoned by the United States and the larger world community, that many people do care and want the atrocities to stop.

If we want to help cut recruitment by the awful Islamic State, we have to show Syrians there are ways to stop the Syrian government's atrocities without their joining extremist movements.

I won't repeat what the Organization to Prohibit Chemical Weapons has said, in addition to detailed reports from credible organizations such as Human Rights Watch and Amnesty International, about the Syrian government's use of chemical weapons.

I instead would like to address the question of the Syrian government's credibility, the problem of deterrence and what the United States, acting in partnership with regional states and key members of the international community, can do.

The Syrian government of course long denied it had any chemical weapons program in the years leading up to the attack in the eastern suburbs of Damascus in 2013. It blocked entry of any investigative teams and answered no questions.

Its egregious chemical weapon attack in August 2013 in the eastern suburbs of Damascus, part of a tactical operation to recapture a neighborhood that had long held out against government assault, changed the dynamic due to the high number of casualties. I would note here that some people claim the opposition carried out this August 2013 attack, but the totality of information available to us in the US Government made very clear that the Syrian government carried out the attack. The armed opposition in Syria has committed many atrocities, but it did not carry out this attack.

The Syrian government only acknowledged its secret CW program after Russia intervened to stop a possible US military strike and instead played a helpful role in convincing the Syrian government finally to accede in September 2013 to the Chemical Weapons Convention and agree to the destruction of chemical weapons stocks and CW-related facilities.

It is a matter of record that the Syrian government did not make a full disclosure of its facilities as required by UN Security Council Resolution 2118 of October 2013. The OPCW told the UN Security Council in September 2014 that it had determined there were at least four additional facilities, three for research and development and one for production, involved in the Syrian government's CW program.

And in recent months, Syrian President Bashar al-Asad has repeatedly claimed that his forces do not use barrel bombs despite overwhelming eyewitness testimony and even repeated, often high-quality videos of such attacks from Syrian helicopters.

In short, the Syrian government has no credibility when it denies complicity in chemical weapons attacks.

It has paid little price for its egregious behavior. As the tide of the horrible war of attrition has slowly, steadily turned against it, the Syrian government has increased its use of chemical weapons, sometimes as a tactical military weapon, sometimes to terrorize local civilian populations. It is committing war crimes without major punishment. It is not deterred. Let me

repeat this: it is not deterred. It will continue deploying chemical weapons because the worsening military situation spurs it to do so.

And other countries that also have chemical weapons and other weapons of mass destruction, such as North Korea, must be watching and absorbing the example of Syrian impunity as they consider their strategies. The international consensus against CW use forged after the horrors of World War One is being eroded with each new chemical attack in Syria. This is a risk to our own soldiers' safety and our broader national security.

In thinking about the American response, we should commend the efforts of Ambassador Power in New York who is trying to restore that international consensus and hold the Syrian regime accountable. She and her team helped pass UN Security Council Resolution 2209 in March of this year with Russian support. That resolution, which warns plainly of Chapter VII action if chemical weapons attacks continue, was a step forward.

Now Ambassador Power and her team are trying to craft a way for an investigative team to go to Syria and determine who is using chemical weapons so that the UN Security Council can finally act. The OPCW's technical expertise is very helpful, but the UN Security Council needs a solid determination of responsibility, and so far the OPCW's mandate has not required it determine responsibility. The OPCW thus has carefully avoided any direct statement in that regard.

The Russians so far have gone along with an effort to determine responsibility, and this is a rare example of our two countries working together on a Syria issue. I sincerely hope this continues. If the Syrian government is officially determined responsible for chlorine gas attacks, Russian suspension of helicopter and aircraft parts would be very painful to the Assad government and demonstrate the cost of using chemical weapons.

If Iran, whose soldiers suffered terribly from Iraqi chemical weapons attacks in the bitter Iran-Iraq war, could also press the Assad government to stop using these weapons, that would perhaps be useful. I have met Iranians who have told me of their terrible experience during Iraqi CW attacks, and the Iranians understand far better than most the evil of these weapons.

I worry that the international community will not be able to achieve that deterrence. We need to think about what to do if it cannot.

Some want a no-fly zone to stop the attacks. This might be useful, but a no-fly zone is a major new American commitment in the Syrian civil war. We had a no-fly zone over parts of Iraq for 12 years. We don't know how long a no-fly zone over Syria would last. If we decide to pursue a no-fly zone with the laudable goal of protecting Syrian civilians, we ought to negotiate with Turkey, Saudi Arabia, Qatar and Jordan, and the Syrian armed opposition, the terms of the no-fly zone so that such a military operation is used as a tool to help reach the larger national political negotiation that Syria so desperately needs.

Since we and Syrian armed opposition commanders often know which Syrian government air units conduct chemical attacks, there should be ways without providing surface-to-air missiles for us and our regional allies to help Syrian rebels hit with rockets or mortars from a distance the Syrian government airfields where the aircraft are based.

In this regard that if the Washington Post report is true that the House Select Committee on Intelligence reduced funding to Syrian armed groups this is not helpful. I recognize this issue is not within the purview of this Committee. That said, I hope members of the Foreign Affairs Committee will agree that the Congress can't condemn the administration's strategy in Syria and then cut funding to one key component, especially one that was successfully increasing pressure on the Syrian government.

It would be regrettable if the international community represented at the UN Security Council couldn't agree on firm steps to compel the Syrian regime to stop using chemical weapons. The most important goal in this should be to reestablish deterrence. Deterrence requires that the Syrian government suffer material setbacks; mere moral shaming will have no impact. This Committee, the broader Congress and the Administration need to focus on how to penalize the Syrian government, hopefully with international community support, and reestablish deterrence.

Thank you again for the invitation to appear before the Committee, and I look forward to any questions you may wish to raise.

Chairman ROYCE. Thank you, Ambassador.
Dr. Tennari.

**STATEMENT OF MOHAMED TENNARI, M.D., IDLIB
COORDINATOR, SYRIAN-AMERICAN MEDICAL SOCIETY**

[The following testimony was delivered through an interpreter.]

Dr. TENNARI. Chairman Royce, Ranking Member Engel, and honorable members of the committee on the House Foreign Affairs Committee, on behalf of the Syrian-American Medical Society and on behalf of Syrian medical professionals, and on behalf of the Syrian people, I thank you for the opportunity to speak in front of you today.

I have traveled here today from my Province of Idlib in order to witness in front of you about the experiences of the chemical weapons use that I witnessed in Syria.

Four years ago, I helped establish a field hospital in Sarmin, in Idlib Province. This is our fourth building after the first two were destroyed by Assad bombing. The Syrian Government systematically targets hospitals and ambulances in all non-government controlled areas. Even our field hospital that we operate in today has been subject to the bombing of the Assad regime 17 times, not to mention the systematic targeting of physicians in Syria on a regular basis only for being out there and treating people.

I, myself, was arrested at the beginning of the revolution twice in 2011. My other medical colleagues have not been as lucky as I, and more of my friends are dead than those that are left alive.

Over the last 4 years we have seen horrific violence against the civilians in Syria. That was in the form of barrel bombs, missile attacks, and regular shelling. In the past 3 months we have experienced a new type of terror, and that is in the form of barrel bombs that contain chemical weapons. Since March 16th of this year, we have documented 31 attacks using poisonous gas in Idlib Province, where more than 380 Syrian civilians were injured by it. Ten of them died of suffocation. The last attack was yesterday in Allepo in a small town.

I remember well the night of March 16th when the first attack of poisonous gas was used. I heard helicopters over my house around 8:45 p.m., and I heard on my walkie-talkie the reports that there was another chemical attack that had just happened. I left my house immediately to head to the field hospital, and as soon as I left the house, I could smell chlorine bleach in the air. As soon as I arrived at the hospital there were many victims that had beaten me there, and all of them had symptoms of being subjected to suffocating, poisonous gas.

Dozens of people experienced difficulty breathing, and their eyes and throats were burning. They were also secreting saliva and foam from their mouth. We were laying bodies on the floor because all of our beds were completely full, and our small hospital turned into a place of chaos and screaming. We started treating them by giving them oxygen gas and inhalers, as well as using different antidotes like Atropine and Intropine.

As soon as we finished treating this first wave of people, we received another wave of people that came from another attack that hit Sarmin. From those who came in with that second wave, I saw

my own friend, Mr. Waref Taleb. He, his wife, his mother, and three of his children under the age of three all came in with injuries. The three kids were all suffering from symptoms of being exposed to poisonous gas as they arrived. And this is a video from that night.

[Video played.]

Dr. TENNARI. This is the Town of Sarmin. This is the children that have been exposed to poisonous gas tonight. The reason they're on top of each other is because the hospital had no room for any more victims.

Everything that we did for them was not enough to save their lives. The barrel bomb had fallen through the ventilation shaft in their house and has turned their house and their basement into a gas chamber.

I wish that this event was something that is unique or a one-time thing, but this is a regular event that goes on. On April 16th, only—very soon after this—1 month after this attack, I testified in front of the United Nations Security Council. Less than 2 hours after I finished my testimony I got another call saying that there was another chlorine attack, another poison gas attack that happened in Idlib Province. And as I sit here in front of you, I fear again that I may get a call in a couple of hours that tells me there was another chemical attack that has happened in my town.

These chlorine-filled bombs are falling regularly over civilian areas, and this is what we call collective punishment by the Assad regime against the opposition. And although these attacks are not causing a huge amount of death, it has caused a lot of terror within the populations forcing people to become internally displaced and refugees. And this is what I consider the goal of the Assad regime in these attacks: To help displace the populations.

In reaction to these chemical attacks by the regime, the international community gave us some medicines, including Atropine. And this is incredibly disappointing. That means the international community knows that the Assad regime will be using chemical weapons attacks against us, and will do nothing to prevent it. What we need is not Atropine, what we need is urgent help to stop these aerial attacks.

I can tell you as a doctor that the number one cause of death of people in Syria are the explosive barrel bombs. And our number one and our main ask is for the international community to help protect us from these aerial attacks. And if it means using a no-fly zone, that would so be it. I ask you to please work closely and urgently with the White House to figure out a plan to help stop these aerial attacks that are regularly bombarding us.

I want to thank the committee for its leadership in addressing this important topic of ongoing chemical attacks in Syria. I hope bearing witness in front of you today can help show the dire need for immediate aid to help the civilians in Syria, and I hope that you move to take urgent action to end the barrel bombs and the chemical attacks in Syria. Thank you.

[The prepared statement of Dr. Tennari follows:]

Testimony of Mohamed Tennari, MD

**Idlib Coordinator
Syrian American Medical Society
House Committee on Foreign Affairs
The Continued Use of Chemical Weapons by the Assad Regime
June 17, 2015**

*Translators used to help prepare written statement: Kathleen Fallon and Jihad Alharash
Translator at hearing: Mouaz Moustafa*

Chairman Royce, Ranking Member Engel, and members of the House Committee on Foreign Affairs: on behalf of the Syrian American Medical Society and the people of Syria, thank you for organizing this important hearing. I have traveled from the province of Idlib in northern Syria in order to testify before you about the chemical attacks I have witnessed in my community.

I am the medical director of a field hospital in my hometown of Sarmin, Idlib. I am also the Idlib Coordinator for the Syrian American Medical Society (SAMS). SAMS is a nonpolitical, medical relief organization that supports Syrian doctors, sponsors hospitals, and provides medical and humanitarian assistance inside of Syria. Last year alone, SAMS reached over 1.4 million Syrians through its medical work and operated 95 medical facilities in Syria, including my hospital in Sarmin. I am a radiologist by training, but since the conflict in Syria began, I have been working in general emergency medicine to help trauma victims affected by the daily bombings and attacks.

I helped to establish the field hospital in Sarmin four years ago, after the conflict in Syria began. We are currently using the fourth building to house the field hospital – the first two were flattened to the ground. The government in Syria systematically targets hospitals and ambulances in non-government controlled areas; our field hospital, which operates under the principle of medical neutrality, has been hit by government air attacks 17 times. Physicians are actively targeted in Syria simply for saving civilian lives; I myself was arrested by the Syrian government and held for two months at the beginning of the crisis in 2011. Not all of my medical colleagues are lucky enough to be alive – according to the organization Physicians for Human Rights, over 624 health workers have been killed since the beginning of the crisis. I have more friends who have been killed than I have who are alive.

Over the last four years, we have seen horrific and indiscriminate violence against civilians, in the form of barrel bombs, missile strikes, shelling, and more. However, three months ago, my province of Idlib began experiencing a new type of attack: chlorine-filled barrel bombs. I remember hearing helicopters from my home on the night of Monday, March 16 as I watched a movie on TV. It was around 8:45pm, and as I heard the sound of helicopter wings, an announcement blared through my walkie-talkie and through mosque speakers of Sarmin that explosive barrel bombs had been dropped. They said that the barrels were filled with poisonous gas – it was a chemical attack.

I immediately left my house and drove to the field hospital. Sarmin had never before experienced a chemical attack. As soon as I left my house, I could smell bleach-like odor. When I arrived at the hospital, a wave of people had already begun to arrive. They were all experiencing symptoms of exposure to a choking agent like chlorine gas. Everyone was decontaminated with water before coming into the hospital, and their clothes were taken off of them. Dozens of people experienced difficulty breathing, with their eyes and throats burning, and many began secreting from the mouth. We lay people on the floor as the beds filled up. Our small field hospital became chaotic. We tried our best to give people oxygen and hydrocortisone nebulizers to stabilize their breathing. Moderate cases were injected with hydrocortisone, and the severe cases required Atropine injections. The first wave of 50 people came from the Qaminas village where the barrel was dropped, less than 10 minutes away from Sarmin. We saw 20 additional people from the western neighborhood of Sarmin – the wind had blown the chemical agent in that direction.

I continued to hear the loud wings of helicopters over the chaotic sounds of my hospital. As we were finishing treating these victims, another wave of patients arrived at our hospital. Two more barrel bombs had been dropped, this time on the southeastern neighborhood of Sarmin itself, along the main cornice. Thirty more people spilled into my field hospital, and there would have been many more had the radio not alarmed our town to the attacks.

Among the people who entered, I saw my friend Waref Taleb. He ran an electronics repair shop in town, and recently helped to fix my phone. He, his wife, his mother, and his three young children – all under the age of three – were a sickly pale color when they arrived, a sign of severe lack of oxygen and chemical exposure. In the most severe cases of chlorine exposure, your lungs fill with fluid and you suffocate. We immediately intubated Waref and gave him CPR and rinsed off his wife and gave her Atropine. His mother was already dead when she arrived. We worked quickly to treat three-year-old Aisha, two-year-old Sara, and one-year-old Mohammad, giving them oxygen and injecting them with Atropine. Mohammad was foaming at the mouth. We were forced to treat Sara and Aisha on the body of their dead grandmother because we had no free

beds. As quickly as we worked, we could not save them. In a short period of time, Waref and his wife's symptoms progressed rapidly, and they too died.



A picture I took of deceased Aisha, Sara, and Mohammad Taleb on March 16

We learned from civil defenders who rushed the Taleb family to the hospital that the barrel bombs filled with chlorine had hit their house as they hid in the basement. In our daily barrel bomb attacks, it is safest to go to the basements of houses, but for a chemical attack like this, basements are the worst place you can be. Chlorine is heavier than air. One of the barrel bombs fell through a shaft in their home, filling the ventilation with chlorine as it broke open.

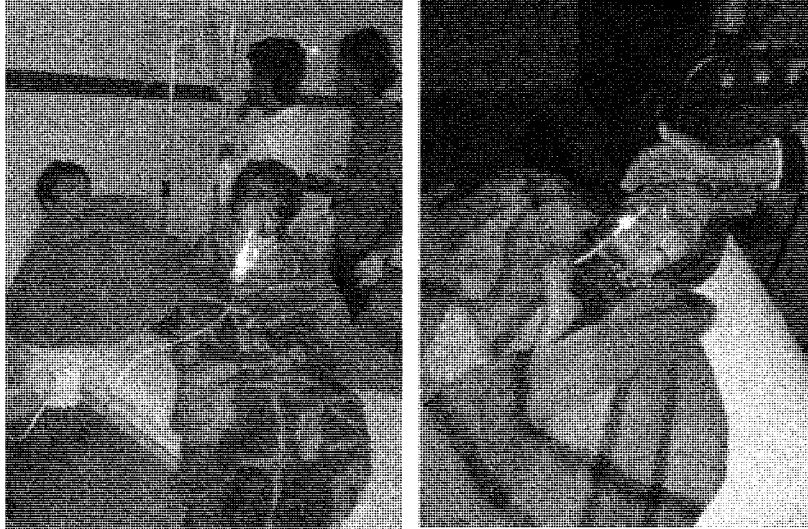
Their basement became a makeshift gas chamber.



The basement of the Taleb family's house after being hit by chlorine-filled barrel bomb, taken the day after the attack

Altogether that night, my hospital saw 120 people. There were only five physicians, including myself, and about 15 nurses working at the hospital. Many civil defenders and medical staff, including me, experienced symptoms of chemical exposure from such close contact with the patients. As I worked, my chest became tighter and tighter, my throat burned, and I had a hard time breathing. The young nurse who took care of baby Mohammed had symptoms of a critical level. The entire hospital smelled like bleach that night.

I wish that I could say that this night was unique, but it was not. Since March 16, SAMS has documented 31 chlorine attacks in the Idlib governorate, with over 580 Syrians affected by exposure, and 10 deaths from suffocation. My hospital has seen victims from 11 of these attacks so far. On April 16, one month after the attack that killed the Taleb family, I testified about my experiences in front of the United Nations Security Council in a meeting hosted by Ambassador Samantha Power. Less than two hours after the Security Council meeting, I got word from my hospital that they were receiving victims from yet another chemical attack in Idlib city.



Victims from the chlorine attack on Al Kastan on June 9

There is a consistent pattern to the chlorine attacks and their effects. The majority of the attacks happen in the middle of the night or early morning, when the temperature is low enough to prevent quick evaporation of the toxic gas. For each attack, eyewitnesses have described hearing the sound of helicopters before the barrels were dropped, and there are many eyewitnesses who have seen the barrels falling from helicopters. For every attack, people described hearing the sound of barrels hitting the ground without explosion – normal barrel bomb attacks typically cause a large and loud explosion. After attacks, victims described smelling a bleach-like odor. Patients of all ages experienced similar symptoms, consistent with exposure to a choking agent, including redness and burning of the eyes, shortness of breath, coughing, and for severe cases, frothing at the mouth. When choking agents are inhaled, fluid ultimately fills the lungs and the victims suffocate.

As with “conventional” barrel bomb attacks, the chlorine-filled barrel bombs are dropped on civilian areas, and have hit houses, town centers, and residential areas. This is a form of collective punishment by the government. Though the chlorine-filled barrels have killed far less than barrel bombs filled with explosives and shrapnel, they have added a new type of psychological torture to the people of Idlib. The fear and confusion

caused by chemical attacks has driven new waves of mass displacement throughout Idlib. Each day, we worry about what the next day will bring. This is no way to live.

In response to chemical attacks in Syria, the international community sends us more Atropine. This is disappointing. This means that the world knows that the Assad government will use chemical weapons against us again and does nothing to prevent it. What we need is not Atropine- what we urgently need is protection from the bombs. What we need is to prevent another family from slowly suffocating together after being gassed in their home. With this in mind, I call on the House Committee on Foreign Affairs for the following:

- **Protection from and prevention of aerial attacks.**

Every chlorine attack that has occurred in Idlib since March 16 – 31 attacks so far – has been by Syrian government helicopters dropping chlorine-filled barrel bombs on civilian areas. Aside from chlorine, we also continue to see “conventional” barrel bombs being used systematically by the government. Over the last two months, these attacks, which particularly target medical facilities, have escalated in Idlib, Aleppo, and Hama provinces. On March 26, my field hospital in Sarmin saw five victims from a chlorine attack. One of the victims was seven-year-old Manal Qaq, who was suffering from chlorine exposure. We treated her with oxygen, washed her off, gave her Atropine, and she was lucky enough to survive. However, the next day, her entire family of 12, including her young brothers, was killed in a barrel bomb attack.

As a physician, I can tell you that the number one cause of trauma injuries in Syria is barrel bombs, and our number one need is international protection from these aerial attacks, with a no-fly zone if necessary. Congress must work closely with the administration to prioritize civilian protection from aerial attacks, particularly from the barrel bombs dropped by helicopters.

- **Action to enforce the Chemical Weapons Convention, of which weaponized chlorine is a violation.**

In September 2014, the Organization for the Prohibition of Chemical Weapons (OPCW) confirmed that chlorine gas was used “systematically and repeatedly” in Syria. The OPCW has begun another fact-finding investigation to look into these recent attacks in Idlib; I met with the OPCW to give my first-hand accounts in May, and there is no doubt in my mind

that they will once again confirm what I know to be true: chlorine continues to be used systematically as a weapon in Syria. The U.S. State Department has said that the Syrian government's use of chlorine with the intent to kill or harm would violate the Chemical Weapons Convention. It is an ironic and twisted fact that the government of Syria was allowed to join the Chemical Weapons Convention in October of 2013, yet since then has time and time again violated the rules of the convention by deliberately using chlorine against its own civilians, and faces no consequences. Congress must push the administration to revisit the U.S.-Russia deal of September 2013 with the intention of adding further measures to prevent the use of weaponized chlorine and show that these flagrant and deadly violations have consequences.

- **An increase in effective assistance designed to protect hospitals and medical facilities.**

Hospitals and medical staff are critical in providing life-saving treatment to chemical exposure and trauma victims. Safe medical facilities and available health workers mean the difference between life and death for dozens of Syrians every day, and the Syrian government is aggressively targeting hospitals, ambulances, and doctors. Out of necessity, we have found creative ways to reinforce and protect our facilities to minimize the damage of aerial attacks - namely, we have begun rebuilding our field hospitals underground and in caves. The U.S. government should prioritize the funding and resourcing of NGOs that are most effective at assisting and supporting these local protection-oriented programs. Syrian-led and Syrian diaspora-led NGOs in particular have a strong understanding of local needs, connections with local civil society, and ability to efficiently and effectively provide assistance. In addition to assistance allocated to reinforcing and rebuilding secure underground hospitals, Syrian medical facilities are particularly in need of CT scans, MRIs, ventilators, and high quality gas masks.

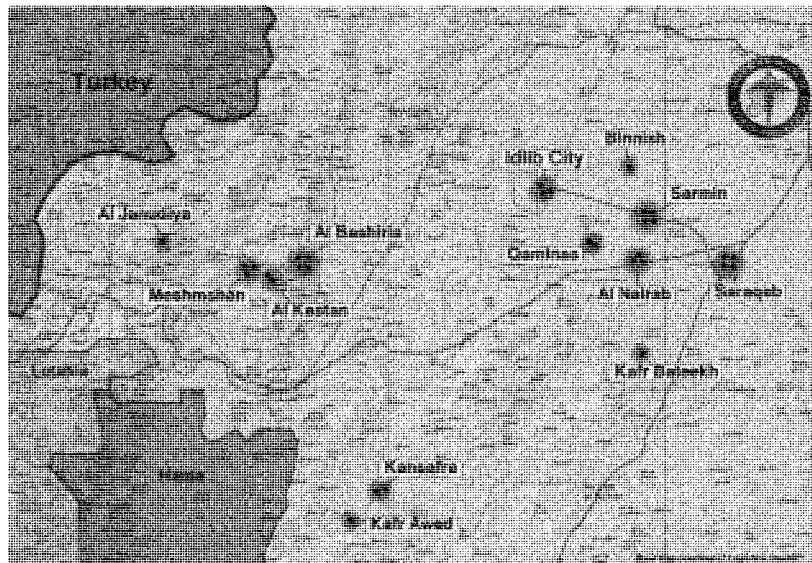
On behalf of SAMS and the Syrian people, I want to thank the Committee for its leadership in addressing the important topic of ongoing chemical attacks in Syria. I hope that my accounts show the dire need for immediate civilian protection in Syria – and I hope that you are moved to take urgent action to end the barrel bombs and chemical attacks in Syria.

**Table of SAMS-Reported Chlorine Attacks on Idlib Governorate
Between March 16, 2015 – June 9, 2015**

Date	Village	Approx. Time of Attack	Affected by Exposure	Fatalities	Notes
3/16/2015	Qaminas	8:45pm	70	0	18 critical cases; wind carried gas to Sarmin
3/16/2015	Sarmin	10:50pm	50	6	Barrel bomb hit house; 19 civil defense treated for chemical exposure. Six members of Taleb family were killed.
3/23/2015	Sarmin	2:00am	3	0	Mild to moderate cases
3/24/2015	Binnish	8:30pm	30	0	Most victims women, children, and elderly
3/24/2015	Qaminas	9:00pm	8	0	Mild to moderate cases
3/26/2015	Sarmin	1:45am	5	0	Fewer people affected because precautions taken
3/29/2015	Idlib City	2:30pm	~47	0	
4/16/2015	Idlib City	11:00pm	~40	0	Barrel bomb hit center of Idlib City- Pullman Garage
4/25/2015	Al Nairab	2:50am	0	0	Barrel bomb hit tall building
4/26/2015	Kafr Awed	11:00pm	51	0	
4/27/2015	Al Nairab	12:15am	4	0	All cases were mild
4/29/2015	Saraqeb	3:00pm	12	0	One barrel bomb fell in eastern area near hospital; the other in south of city
5/2/2015	Al Nairab	1:20am	12	2	A 6-month-old baby died. Five days after the attack, the father of the baby died.
5/2/2015	Saraqeb	3:00am	~55	0	Mild to moderate cases, with most severe symptoms frothing at mouth
5/3/2015	Kansafra	1:25pm	25	0	
5/6/2015	Al Bashiria	2:25am	0	0	One barrel bomb dropped on edge of town
5/7/2015	Al Janudiya	12:20pm	50	0	Majority of victims were women and children
5/7/2015	Kafr Bateekh	2:20am	25	0	
5/7/2015	Kansafra	11:30am	4	0	
5/10/2015	Al Bashiria	7:00am	0	0	No injuries because of displacement in town
5/15/2015	Meshmshan	7:30am	20	0	Majority of victims were

					children
5/16/2015	Sarmin	3:45am	5	0	One barrel bomb hit city center of Sarmin
5/17/2015	Meshmshan	3:00am	3	0	
5/17/2015	Al Kastan	3:00am	9	0	
5/19/2015	Al Bashiria	5:30am	7	0	
5/19/2015	Meshmshan	4:30am	30	2	Two severe victims transferred to Turkey and later died from chlorine exposure
5/19/2015	Idlib City	2:00am	4	0	Moderate cases
6/7/2015	Al Kastan	3:50am	8	0	3 victims were slipping in and out of consciousness
6/8/2015	Saraqeb	4:15pm	2	0	
6/9/2015	Saraqeb	3:15pm	0	0	
6/9/2015	Al Bashiria	4:00am	3	0	

**Map of SAMS-Reported Chlorine Attacks on Idlib Governorate
Between March 16, 2015 – June 9, 2015**



Chairman ROYCE. Thank you, Dr. Tennari.
We go now to Mr. Habib.

**STATEMENT OF MR. FAROUQ HABIB, SYRIA PROGRAM
MANAGER, MAYDAY RESCUE**

Mr. HABIB. Chairman Royce, Ranking Member Engel, and distinguished members of the committee, allow me first to thank you for giving me this opportunity to testify about the ongoing tragedy that the Syrian people are living through, particularly those who are the victims of the attacks of the chemical weapons, despite multiple international resolutions that prohibit using these horrific weapons.

My name is Farouq Habib. When the Syrian revolution began, I was working as a banker in a private Syrian bank. My belief that my people have the right to live with dignity and freedom obliged me to join the peaceful movement to defend the human rights in Syria. Currently, I'm working for Mayday Rescue, managing the training and equipping program for rescue teams in Syria known as the White Helmets.

Through my years of activism inside Syria since the beginning of the revolution, I personally witnessed deliberate attacks by the regime forces against civilians, hospitals, and rescue teams that were initially working spontaneously.

Later, Syrians, particularly those in liberated areas, had to establish civil defense groups with only the tools available to them in order to respond to the intense and indiscriminate attacks. I now work with this organization to assist in responding to these attacks. Through my job, I constantly work with field search and rescue teams to determine their needs and find solutions for the challenges they face. Therefore, I closely monitor the attacks, particularly those carried out by unconventional weapons, as they pose the greatest challenge.

These teams have faced an exceptional challenge with the regime's use of barrel bombs as a horrific tool to impose collective punishment against communities out of the regime's control. These TNT-filled weapons which eject nails, metal scrap, and other random cheap and harmful shrapnel take dozens of innocent lives every day, but for many Syrians have become merely traditional weapons compared to the more advanced bombs the regime developed by adding chlorine gas, which is inexpensive and readily available. This primitive, cheap, and indiscriminate weapon has become a source of constant panic among Syrian civilians due to the fear it spreads when people hear the news of its use in nearby areas.

This dirty chemical weapon causes physical injuries that show through symptoms like suffocating and fainting, and can lead to death if the injured are not attended to in due course. These weapons are most dangerous if inhaled by people stranded in small spaces, and that is what happens to those stranded under the rubble of buildings that collapse on top of their residence due to the force of barrel bombs.

Starting from the 16th of March this year, the regime resumed its chemical attacks against the opposition areas. Only 10 days after the U.N. Security Council Resolution 2209, which reaffirmed

the prohibition and use of chlorine gas as a weapon and classified it as chemical warfare. The resolution also warned of taking action under Chapter 7 in the event it's used again in Syria. This resolution is related to a previous resolution, 2113, which was released in 2015, and that called for destroying Syria's chemical weapons, and also for taking action under Chapter 7 in the event the chemical weapons are used. Resolution 2209 is also related to the 2014 Resolution 2139 which prohibits using conventional barrel bombs as weapons in Syria due to their indiscriminate nature.

Unfortunately, during the 3 months that followed Resolution 2209, the number of chlorine attacks was more than double those in the entire previous year. Yes, I repeat again. The number of chlorine attacks was more than double those in the entire previous year just after the Security Council resolution.

Between March 16th and June 9th in 2015, Syria's Civil Defense Teams responded to 23 air raids, during which 46 barrel bombs containing chlorine gas were dropped. And, of course, the actual number of the chemical attacks was even higher.

I don't think that anyone among this audience here today has the slightest degree of uncertainty about the identity of the perpetrator. There are hundreds of pieces of evidence including photographs, videos, and testimonies like the ones I attach here proving that this gas spreads from the aerially dropped barrel bombs, usually delivered by helicopters. As everyone knows, and as Ambassador Samantha Power has repeatedly noted, the Assad regime is the only one using helicopters in Syria excluding, of course, the coalition forces.

Ladies and gentlemen, when I was struggling in Homs for democracy, I and my colleagues believed that there were nations around the world that supported the spread of democracy. I believed, and I organized others to rise up and challenge the dictatorship of Bashar al Assad, and have been waiting for 4 years for my faith in the values on which this great country was founded to be demonstrated.

The dictator of Syria claims that he is fighting the Islamic State, but only last week both he and the Islamic State were attacking together the armed opposition in Northern Aleppo. And just a few hours ago, the regime used chemical weapons again in Aleppo City, itself.

The legitimacy of the international community crumbles when it becomes merely ink on paper, forgotten in drawers of bureaucracy to become fatal.

As the greatest power in today's world, the United States, along with other international powers that chant human rights slogans and spread the values of justice and democracy, should move immediately to stop the killing machine operated by the Assad regime against the Syrian people. This can be done through imposing a no-fly zone that would prevent the regime's aircraft from continuing to drop chemical barrel bombs. A no-fly zone would also help to create a safe haven for civilians. No one can no longer use as an excuse the Security Council's inability to impose its resolutions because in reality, for oppressed people everywhere, it has become the Insecurity Council due to its blatant failure to protect them. Thank you.

[The prepared statement of Mr. Habib follows:]



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15th June 2015

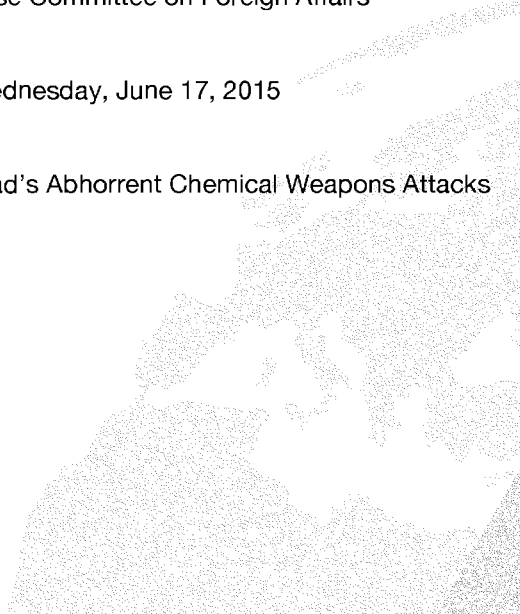
Testimony on Chemical Attacks in Syria

Witness: Farouq AL Habib
Syria Program Manager at Mayday Rescue

Submitted to: House Committee on Foreign Affairs

Date of hearing: Wednesday, June 17, 2015

Subject: Assad's Abhorrent Chemical Weapons Attacks



Ladies and Gentlemen:

Allow me first to thank you for giving me this opportunity to testify about the ongoing tragedy that the Syrian people are living through, particularly those who are the victims of attacks by chemical weapons. This tragedy continues without intervention by anyone to protect civilians from these horrific weapons and all the other methods used by the Assad regime to kill Syrians and commit crimes that rise to the level of genocide. All this continues despite multiple international resolutions that prohibit using these horrific weapons.

My name is Farouq Habib. When the Syrian Revolution began, I was working as a banker in a private Syrian bank. My belief that my people have the right to live with dignity and freedom obliged me to join the peaceful movement to defend human rights in Syria. Currently, I am working for Mayday Rescue managing the training and equipping program for rescue teams in Syria known as the White Helmets.

Through my years of activism inside Syria since the beginning of the Revolution, I personally witnessed deliberate attacks by the regime forces against civilians, hospitals and rescue teams that were initially working spontaneously. Later, Syrians, particularly those in liberated areas had to establish civil defense groups with only the tools available to them in order to respond to the intense indiscriminate attacks. I now work with this organization to assist in responding to these attacks. Through my job, I constantly work with field search and rescue teams to determine their needs, be it equipment or training, and finding solutions for the challenges they face. We also work on assisting them in documenting their work and ensuring the world is aware of what they do. Therefore, I closely monitor the attacks, particularly those carried out by unconventional weapons, as they pose the greatest challenge.

These teams have faced an exceptional challenge with the regime's use of barrel bombs as a horrific tool to impose mass punishment against communities out of the regime's control. These TNT-filled weapons, which eject nails, metal scrap, and other random cheap and harmful shrapnel, take dozens of innocent lives everyday; but for many Syrians have become merely traditional weapons compared to the more advanced ones the regime developed by adding chlorine gas, which is inexpensive, readily available, and legally pursuing its user is difficult. This primitive, cheap and indiscriminate weapon has become a source of constant panic among Syrian civilians due to the fear it spreads when people hear news of its using in nearby areas, regardless of how limited the effects of its spread are.

This dirty chemical weapon causes physical injuries that show through symptoms like suffocation and fainting, and can lead to death if the injured are not attended to in due course. These weapons are most dangerous if inhaled by people stranded in small spaces, and that is what happens to those stranded under the rubble of buildings that collapse on top of their residents due to the force of barrel bombs.

In the past, rescue teams directed civilians to lower levels of buildings to stay safe when sirens would sound warning of imminent shelling. Wafiq Taleb followed those instructions when Assad regime planes raided his village, Sarmin, on March 16. He took his ill mother, Ayoush, his wife, Alaa, and his three children, Aisha, Sara, and Muhammad down to the basement of the building where they lived, seeking safety. However, that was the cause of their demise, all of them, as a result of the barrel bomb containing chlorine gas, which sinks in air. As the family huddled together in the basement, the chlorine became lethally concentrated around them, killing the entire family.

On that same horrific day, twenty of the White Helmets' volunteers were injured while they were trying to rescue and evacuate injured people. Those volunteers' injuries were the result of not being equipped with protective masks or any other gear to protect against chemical weapons.

That attack took place only ten days after UN Security Council resolution 2209, which reaffirmed the prohibition on the use of chlorine gas as a weapon and classified it as chemical warfare. The resolution also warned of taking action under Chapter VII in the event it is used again in Syria. This resolution is related to a previous resolution, 2113, which was released in 2013 and that called for destroying Syria's chemical weapons and also for taking action under Chapter VII in the event the chemical weapons are used. Resolution 2209 is also related to 2014's resolution 2139, which prohibits using conventional barrel bombs as weapons in Syria due to their indiscriminate nature, making most of its victims innocent civilians.

Unfortunately, during the three months that followed resolution 2209, the number of chlorine attacks was more than double those in the entire previous year. Between March 16 and June 9, 2015, Syrian Civil Defense teams responded to 23 air raids, during which 46 barrel bombs containing chlorine gas were dropped.

I do not think that any among this audience here today has the slightest degree of uncertainty about the identity of the perpetrator. There are hundreds of pieces of evidence including photographs, videos, and testimonies like the ones I attach herewith, proving that this gas spreads from the aeri-ally-dropped barrel bombs, usually delivered by helicopters. As everyone knows, and as Ambassador Samantha Power has repeatedly noted that, the Assad regime is the only one using helicopters in the Syrian conflict, excluding the coalition forces of course.

Ladies and Gentlemen:

The legitimacy of the United Nations, the UN Security Council and the credibility of the United States have diminished among Syrians who are suffering. No one can blame the Syrian youth when they lose faith in a political solution and resort to other ways to defend themselves, as they perceive the world to have abandoned them.

When I was struggling in Homs for democracy I and my colleagues believed that there were nations around the world that supported the spread of democracy. I believed and I organized others to rise up and challenge the dictatorship of Bashar al Assad and have been waiting for four years for my faith in the values on which this great country was founded to be demonstrated. There is a ruthless dictator in Syria who is using every means at his disposal, including chemical weapons, to destroy his people. He claims that he is fighting the Islamic State but only last week, both he and the IS were attacking together the armed opposition in northern Aleppo.

The legitimacy of the international community crumbles when it becomes merely ink on paper, forgotten in drawers of bureaucracy to become fatal.

As the greatest power in today's world, the United States, along with other international powers that chant human rights slogans and spread the values of justice and democracy, should move immediately to stop the killing machine operated by the Assad regime against the Syrian people. This can be done through imposing a no-fly zone that would prevent the regime's aircraft from continuing to drop chemical barrel bombs. A no-fly zone would also help to create a safe haven for civilians. No one can no longer use as an excuse the Security Council's inability to impose its resolutions as an excuse, because in reality, for oppressed people everywhere, it has become the Insecurity Council due to its blatant failure to protect them.

Annexes: List of chlorine attacks which the White Helmets responded to, between 16th of March and 9th of June 2015, maps, photos and videos of incidents and casualties.

Sincerely,

Farouq Habib
Syria Program Manager, Mayday Rescue NGO

Chairman ROYCE. Doctor.

**STATEMENT OF ANNIE SPARROW, M.B.B.S., DEPUTY DIRECTOR
HUMAN RIGHTS PROGRAM, ASSISTANT PROFESSOR OF
GLOBAL HEALTH, ICAHN SCHOOL OF MEDICINE AT MOUNT
SINAI**

Dr. SPARROW. Chairman Royce, Ranking Member Engel, distinguished members of the committee, thank you for inviting me to speak today.

For 2 years now, I've been traveling to the Syrian border where I do three things. As a critical care pediatrician, I train doctors inside Syria. As a doctor experienced in wars, many wars, I track and document the violations of medical neutrality and other human rights violations. And as a global health specialist, I track the devastating public health consequences which are, indeed, a consequence of the way Assad has chosen to fight this war by targeting civilians, by attacking doctors, by destroying hospitals and other civilian infrastructure that is vital to health. And it's no accident that since March the 16th when the chlorine attacks renewed that the assaults on hospitals was likewise escalated.

We know that after the chemical massacre August 2013, Assad was forced to give up his stockpiles of sarin but, unfortunately, that doesn't work for chlorine, because unlike sarin, chlorine has legitimate and deeply important uses, the most important of which is its ability to decontaminate our drinking water. Syrians need it, just as America does. In fact, the way Assad has even withheld chlorine from opposition territory has fueled epidemics of disease, such as the polio outbreak of 2013 which then spread to Iraq. This in itself is an indirect method of biological warfare.

And on top of that, chlorine is easy to manufacture. It's even cheaply made from readily available industrial ingredients. Many of these bombs we know are made domestically, so forcing Assad to give up stockpiles just doesn't work here. We have to stop Assad using it as a chemical weapon. And let me be quite clear here, using chlorine to kill and terrorize people makes it into a chemical weapon, a violation of the Chemical Weapons Convention, and Obama's redline even when the substance also has legitimate uses.

As you've heard, these bombs are delivered simply by rolling them out of helicopters, which is the same way the barrel bombs, a far more effective way of killing people, are delivered. But together, the barrel bombs and the chlorine bombs create maximum trauma and terror. And the way he is using both currently to target civilians and hospitals is spectacularly effective in driving the exodus of millions of refugees and compounding this public health crisis, which has regional and global repercussions.

Germs don't need passports. We've seen that very clearly with polio and Ebola. Assad's denial of chlorine and his use of it as a chemical weapon puts us all in danger.

We know that U.N. Security Council isn't working because of the Russian veto, so here's where the U.S. working with its willing partners can come up with its own response. We've talked a little today about a no-fly zone. I believe at this stage the most practical approach is a highly specific no-fly zone.

Assad may have valid uses for transporting troops to fight ISIS, but neither the barrel bombs nor chemical weapons are used to fight ISIS. They're not used to fight any combatants. Some of you will have seen on the maps that these attacks are nowhere near ISIS, or even front lines, and so they can be stopped without impeding Assad's or our own ability to fight ISIS.

First of all, establishing a limited no bombing civilian zone is enforceable because the bombs are rolled out of these slow-moving helicopters over Northwestern Syria predominantly, easily accessible from the coast, well within reach of U.S. boats.

Secondly, it's pragmatic because we know Assad is responsive to the credible threat of force. We know he does. It's strategic because it undermines one of ISIS' most powerful tools of recruitment, that it alone can offer protection from Assad's atrocities. It's responsible because it mitigates the flow of refugees which gets at global security. But most importantly, creating a no bomb zone would stop the most important tools that are being used to slaughter and terrorize Syrian civilians, especially the children who are the most vulnerable, as you've seen, to these toxic gases, and whose small bodies are literally ripped apart by the hideous shrapnel filling these explosive barrel bombs.

I'm a doctor, and I'm very familiar with death, but I have never seen a more obscene way to kill children. I've never watched so many suffer in such an obscene manner. Syrian children and Syrian civilians deserve protection, and the United States can provide it.

I really hope this committee today will prevail upon the Obama administration to act to do so. Thank you.

[The prepared statement of Dr. Sparrow follows:]

Testimony of Dr. Annie Sparrow

Assistant Professor of Global Health, Icahn School of Medicine at Mount Sinai, New York

House Foreign Affairs Committee

Assad's Abhorrent Chemical Weapons Attacks

June 17, 2015

Chairman Royce, Ranking Member Engel, distinguished members of the committee, thank you for inviting me to speak about the Syrian military's indiscriminate attacks including its use of chlorine as a chemical weapon. I am an intensive-care pediatrician and a global public-health specialist. My testimony today is based on the extensive periods that I have spent over the past two years along the Turkish-Syrian border, training doctors who work inside Syria and tracking the devastating public-health consequences of the way the Assad regime has chosen to fight this war by attacking civilians and civilian infrastructure, such as the chlorine bomb attacks on populated neighborhoods and the systematic assaults on doctors and hospitals in besieged and opposition-held areas. Since March 2015, these conventional and chemical attacks have escalated.

The Syrian government's use of chlorine as a chemical weapon is emblematic of its war-crime strategy of waging war by attacking civilians. The September 2013 agreement in which the Syrian regime vowed to relinquish its chemical weapons did not extend to chlorine because chlorine is a dual-use chemical, with vital positive uses for water purification, sanitation, and the manufacture of modern medicines. Indeed, chlorine is so important for public health that the Syrian government has withheld and blocked its delivery to opposition-held areas, thus contributing to epidemics of polio, typhoid, hepatitis, and other contagious diseases in those parts of Syria. This systematic withholding of the primary means to disinfect water can be considered an indirect weapon of mass destruction – a form of biological warfare – because of its devastating public health consequences. However, although minute quantities of chlorine are lifesaving, if inhaled in undiluted form it can cause death in less than thirty minutes. The Syrian government is using this deadly quality of chlorine as a chemical weapon against civilians. The Assad regime has transformed a principal element of public health into a tool of disease and terror.

The Good: Chlorine for Public Health and Private Well-Being

In the United States, we take a constant supply of safe water for granted, and chlorine has been our principal agent of water purification for well over a century. Pasteurization, sanitation, vaccination, and antibiotics—the practical application of germ theory—form the basis of modern medicine. Cholera and typhoid—two bacterial diseases that in the past killed more people than all wars put together—were brought under control in the developed world only by the widespread use of water chlorination. In 1900, typhoid killed more than 25,000 people in the United States; by 1960, that number had dropped to 21. Today, 90 percent of water sources in the United States and Europe rely on chlorine for safe water—still chlorine's most important use. Only chlorine safely decontaminates our sewage and ensures water's purity all the way to the kitchen tap.

We also use chlorine to whiten whites in our laundry, sanitize our kitchens, and disinfect our toilets. In hospitals, it is the industrial killing machine of microbes in operating rooms and wards to protect patients from post-op infections and post-partum sepsis. Chlorine compounds form the building blocks for 90 percent of modern drugs: antibiotics and antimalarials, asthma drugs and antihistamines, chemotherapy and cholesterol-lowering agents, anesthetics, common pain-relieving agents like Tylenol, and anxiolytics such as Xanax. PVC (polyvinyl chloride) is used in the manufacture of 85 percent of medical devices: not just sterile gloves, dialysis tubing, urinary catheters and bags for intravenous fluids, but also X-ray films, prosthetics, prescription glasses, and Ebola protection suits. Chlorine is vital in the fight against global threats such as polio, Ebola, and HIV. In Haiti, it is assisting to contain the cholera epidemic; in South Korea, it is helping to contain MERS. Chlorine is thus a key tool for public health and private well-being, assisting in the prevention and treatment of the major causes of disease and death across the developed and developing world.

The Bad: The Denial of Chlorine as an Indirect Weapon of Biological Warfare

In those parts of the world where chlorine is not routinely used for sanitation, safe-water disinfection, and sterilization of hospital equipment, water-borne diseases like cholera, typhoid, and hepatitis A remain major concerns, along with other infectious diseases readily killed by chlorine such as HIV and hepatitis B. That is the situation now plaguing opposition-held parts of Syria. Though barely recognizable after four years of the worst armed conflict since World War II, Syria used to be a middle-income country. For decades, chlorine was routinely used for sanitation and to ensure safe water. The Syrian pharmaceutical industry manufactured sufficient medicines for domestic consumption and export.

For several years before the beginning of the popular uprising in March 2011, and in part contributing to it, the Syrian government denied many public-health measures to politically unsympathetic areas of the country, selectively withholding chlorine for treatment of water as well as routine childhood vaccinations. That deprivation continues today, with widespread denial of chlorine to Hama, Deir Ezzor, Raqqa, Dara'a, and other areas outside government control. A few drops of bleach would be sufficient to disinfect water and hands, but it is simply unattainable.

The consequences of this deprivation are magnified by mass displacement, with some ten million civilians having been forced to flee their homes. Often three or four families live together in households of appalling and unhygienic conditions. About 425,000 Syrians live under government siege in even worse conditions. Half a million civilians in Eastern Ghouta, a few miles northeast of Damascus, have not had safe drinking water for over three years. In Deir Ezzor, untreated tap water comes directly from the Euphrates River, two hundred yards downstream from a sewage pipe.

As one example, in 2014 there were more than 30,000 cases of hepatitis A across Syria, with many deaths of young children. This disease is rarely seen in the United States, and hardly ever in fatal form. Other diseases, from the annoying to the sinister—lice, scabies, parasites, maggot infestations, post-operative wound infections, and pregnancy-related sepsis—are all now commonplace. The destruction of the pharmaceutical industry in Aleppo in 2012—as part of the government's systematic assault on health care in opposition-held areas—means it is no longer possible to produce antibiotics like Cefactor, commonly used for chest and ear infections, or antiseptics like chlorhexidine, a routine scrub for surgery.

On February 24 of this year, the World Health Organization (WHO) issued an alert on the risk of cholera in Syria, a concern heightened by the sudden outbreak in Hama in mid-March 2015 of more than 500 cases of acute watery diarrhea. There are no longer any laboratories in opposition-held areas to test for cholera. The constant attacks make adequate surveillance of highly contagious disease like polio and cholera impossible. Previous cover-ups by the Syrian Ministry of Health—of cholera in 2005 and 2009, and of polio's reappearance in 2013, 18 years after it had been eliminated—underscore WHO's concern. Polio, the most devastating disease of childhood, might never have reemerged in Syria if chlorine had still been available for water treatment; poliovirus is extremely hard to kill, and chlorine is one of the few agents capable of destroying it. The Syrian Ministry of Health blamed it on the conflict, but polio did not reappear in neighboring Iraq despite eight years of war (2003-2011). In Syria, however, the withholding of polio vaccination was compounded by the denial of chlorine and deliberate neglect of water-treatment plants. This horrific disease reappeared after less than two years of war, and spread to Iraq in 2014.

The Ugly: Chlorine as a Chemical Weapon of Mass Terror and Destruction

Having made civilians in opposition-held areas suffer from the lack of chlorine for public health, the Syrian government is now, in a cruel irony, making them suffer from too much chlorine—as a chemical weapon. Chlorine's ability to disinfect water derives from its potent oxidizing properties; it rapidly reacts with and inactivates the proteins that hold cells together. If chlorine is not heavily diluted, inhaling it causes choking and can be fatal. In sufficient concentration, it is poisonous to all species of life.

After the August 2013 sarin massacre in eastern Ghouta, Washington and Moscow forced the Syrian government, under threat of military retaliation, to give up a sizable part of its chemical arsenal, including 581 tons of the precursors of sarin and 20 tons of ready-to-use sulfur mustard, both much deadlier than chlorine, neither with any legitimate use. But because chlorine has legitimate uses, the government was not required to eliminate its chlorine stockpiles. Since then, Assad has periodically used chlorine as a weapon—even though such use violates the Convention on Chemical Weapons, which Syria has ratified. The convention prohibits any use of a toxic chemical for military attacks, even if it has parallel positive uses. The Organization for the Prohibition of Chemical Weapons (OPCW) is precluded by its mandate from

identifying the perpetrator of a chemical attack, and Russia is so far resisting UN efforts to create a separate mechanism to do so. But only Syrian government forces have the helicopters that have been carrying out these attacks.

Last year, Assad turned canisters of imported chlorine liquid into ready-made bombs. In April 2014, there were ten attacks in which chlorine was dropped on civilians in villages in northern Syria, killing eight and affecting almost nine hundred. All but one of the attacks occurred at night and involved the aerial dropping of canisters of compressed chlorine liquid, which vaporized into gas upon hitting their target. My own colleagues in Syria, whom I train in critical care, gave me first-hand evidence of these attacks, later reported by the UN Human Rights Council's Commission of Inquiry for Syria and verified by the OPCW report of September 10, 2014.

This year, by contrast, according to the extensive evidence from the ground collected by my colleagues, the chemical bombs are being made locally. Second-hand refrigerant cylinders and air-conditioning tanks appear to be recycled into improvised explosive devices, filled with readily available chemicals routinely used in industry. Chlorine is exceptionally easy to manufacture; common reagents include hydrochloric acid and potassium permanganate. In addition, there is evidence consistent with the use of other chlorine-based toxic gases being produced such as phosgene, first used in WWI.

On March 6, 2015, the UN Security Council (Resolution 2209) condemned the use of chlorine as a chemical weapon, although at Russia's insistence the council did not name the Syrian government as the perpetrator or impose any sanctions. On March 10, coincident with the escalation of the ground-fighting between government forces and opposition militia in the fight for Idlib city, Turkey closed its borders. On March 16, I received phone calls in real time and watched videos sent by my Syrian colleagues showing dying and newly dead children, unbearably vulnerable to the chlorine gas that had just been dropped that night. As it did in WWI trenches, the dense gas sinks to the lowest point—the ground and the basements where people were sheltering, so unlike explosive bombs, there is nowhere to hide from this poisonous gas.

Victims of chemical attacks must be washed, decontaminated, and ventilated, and this should be done in the open where the water can be drained and the gas dispersed. Yet because of the Syrian government's systemic attacks on doctors and hospitals in opposition-held areas, most of the remaining functioning hospitals are now literally underground. That makes the dispersal of gas and the drainage of water slow and difficult, thus endangering medical staff. Many first responders and doctors have been seriously affected.

My Syrian colleagues are used to the density of bloodshed, the trauma and mutilation of even young children. But the fear and suffering of these chlorine attacks have been unbearable, even for them. Gas is silent, and there is nowhere safe from it. Moreover, it is foremost the children who die.

Assad repeatedly denies using chlorine, citing the absence of forensic samples that can be delivered for analysis in laboratories. But his military's destruction of functioning laboratories in opposition-held areas makes such domestic verification impossible. This defense echoes the government's cover-up of the reemergence of polio by saying that it had not been proven in a lab. The closed border with Turkey makes it difficult for Syrian doctors to bring out patients, let alone samples to prove that chlorine attacks are taking place, and impossible for the OPCW to adhere to its own investigative rules.

Even without laboratory proof, the distinctive smell and characteristic effects of chlorine and similar toxic gases leave no question that these were chemical attacks. Further evidence of chlorine used on the March 16 attack on Sarmin was provided to the UN Security Council's April 16 Arria-formula hearing. Since March 16, including during my recent time on the Syrian border, there have been at least two dozen additional chemical attacks consistent with either pure chlorine or a chlorine cocktail, with hundreds of women and children affected, and ten deaths.

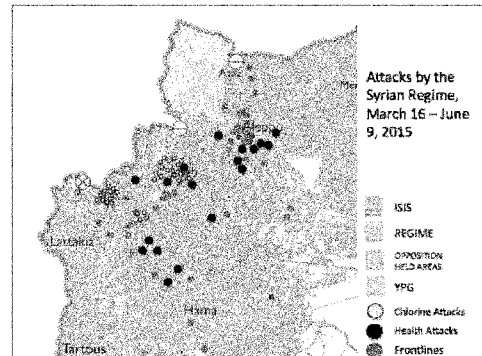
Meanwhile, the most the international community has done is to send atropine (a drug commonly used for emergency resuscitation of victims of chemical agents and other poisons) and chemical decontamination kits. In the eyes of many doctors, that response verges on the obscene. The implicit message is, "We know your government is going to kill your children in the most depraved way possible—and we are not going to stop it, but at least we will be able to say we responded."

Responding to these chemical attacks has been made more difficult by the parallel attacks on healthcare facilities. Compounding the chlorine attacks, in the past two months there have been 36 documented attacks targeting hospitals, health facilities, and aid convoys, 35 perpetrated by the Syrian government forces: 34 these by government airstrikes – mainly barrel bombs (described below) and missiles, but on June 8, Kansafrah Hospital in Idlib was hit by a chlorine bomb shortly after airstrikes on a nearby civilian market killing ten civilians and injuring hundreds more. The government attack on Dara'a hospital was delivered by a car bomb, the single attack by opposition forces on an ambulance was with ground fire. As stressed, only the government has this air capacity. Medical staff, hospital workers, and patients have been killed in these strikes. Government airstrikes also hit 12 ambulances, a Syrian Red Crescent convoy (causing the death of a young women driving one of its trucks), and a Syrian Civil Defense building, and these attacks have blocked access routes to hospitals.

Meanwhile, the attrition of doctors and health workers continues. A few days ago, the only cardiologist in eastern Ghouta fled, exhausted and despairing after a 900-day shift. Another doctor is leaving this week. There are now 55 doctors left in Ghouta to serve a population of 500,000. To put that in context, within the city limits of Washington, DC, which has a roughly similar population (659,000), there are more than 6,000 doctors. Similarly, there are now only 60 doctors left to serve civilians living in opposition-held Aleppo and 122 left in Homs city. Deir Ezzor city no longer has any doctors, just one unspecialized resident.

Responding to These Attacks

Regarding the use of chlorine as a chemical weapon, it needs more than general condemnation without consequences by a UN Security Council in paralysis. The bombs being used today are old coolant tanks or refrigerator cans, not even the imported liquid chlorine used in 2014. These are not sophisticated bombs using imported ingredients but manufactured locally. No handover of stockpiles can work for chlorine because it is so easy to manufacture more. The industrial reagents used to make chlorine bombs are widely available. Plus, as noted, chlorine is still used for public health and to make legitimate consumer products in various government-controlled parts of the country, so ridding the country of all chlorine is not an option. All the chlorine bombs documented in Idlib and Hama in the last two years have been dropped by helicopters. As the map below the bombs are not targeting ISIS, or even the frontlines, but civilians living in opposition-held areas.



The helicopters delivering chemical bombs are the same that deliver the weapons killing the greatest number of Syrian civilians today:

Assad's barrel bombs—the oil drums or similar canisters filled with explosives and shrapnel, rolled from high-flying helicopters to fall indiscriminately into civilian neighborhoods held by the opposition. A few of these barrel bombs are the improvised devices loaded with chlorine and other chemicals, making them chemical weapons, but most often they contain large quantities of ordinary explosives, causing massive death and destruction wherever they land.

Compared with massive physical trauma and destruction caused by the barrel bombs, chlorine bombs cause relatively few deaths.

Unlike the Syrian military's August 2013 use of sarin against the people of eastern Ghouta, which killed some 1,400 civilians in a single night, chlorine as a chemical weapon is known to have killed "only" ten people this year. But the relatively small number in no way reflects its capacity as a weapon of terror and permanent psychological damage. Chlorine is extremely cheap and easy to make, and does not require the sophisticated missiles needed to deliver sarin. Hence chlorine cost-effective as a weapon designed to generate maximum fear and terror. There is nothing merciful about watching your child painfully suffocating to death, whether due to sarin, which paralyzes the respiratory muscles, or chlorine, which turns into hydrochloric acid as it is inhaled, drowning kids in the dissolution of their own lungs. I have never seen children die in a more obscene manner. The use of chemical agents leaves a profound and perhaps a

permanent psychological residue rendering the mere threat of using it a powerful weapon. The anthrax attacks in 2001 in the United States killed only three people, but created widespread fear. In wars of attrition such as Syria, where the government's instillation of fear in civilians has long been deliberately used to erode civilian support for insurgents, chemical weapons make perfect, if illegal, sense as a strategy of war.

As noted, this use of chlorine as a weapon violates the Chemical Weapons Convention, and it clearly crosses President Obama's "red line" against the use of chemical weapons. Together, the barrel bombs and chemical attacks create maximum physical damage and psychological suffering. The delivery of these airborne agents of trauma and terror are military helicopters. So the issue is stopping the helicopters.

There has been much talk of no-fly zone established over at least parts of opposition-held Syria. A rigid no-fly zone would be overbroad because the Assad regime does have legitimate reasons to use aircraft, to transport or resupply troops. Given the threat of ISIS, there has been an understandable reluctance to impede Assad's ability to carry out legitimate forms of combat (that is, combatants shooting combatants rather than aircraft bombing civilians), even though the Syrian military has done little to fight ISIS and devoted most of its firepower to other parts of the armed opposition.

I favor establishing a zone in which any bombing of civilian areas is prohibited. The US government should send the clear message: any aircraft that bombs civilians, whether with chlorine or explosives, risks being shot down. Particularly now that a US-led coalition is bombing ISIS, there is no doubt that the Pentagon has a clear view of any Syrian aircraft operating in the region. Moreover, the slow-moving helicopters used to deliver barrel and chlorine bombs could be attacked by missiles launched by the US Navy in the Mediterranean, without the need to deploy US jets and hence to neutralize anti-aircraft systems.

The Syrian government has been extraordinarily sensitive to threats of military force. Beyond relinquishing its chemical-weapon arsenal under such threat, it also has periodically stopped using barrel bombs when it thought they might trigger an international military response. For ten days immediately following the sarin massacre, there were no airstrikes of any kind, nor on the first day of the international coalition airstrikes against ISIS. There is strong reason to believe that Assad's barrel bombing of civilians would quickly stop if a credible threat of military retaliation were made, and certainly, if any bombing continued, by an illustrative retaliatory attack or two. Establishing such a no-bombing zone is not militarily complicated; it is a matter of political will.

So why has the US government not taken this obvious life-saving step, even as it has now engaged militarily in bombing ISIS in Syria and Iraq? Russia will never permit the Security Council to authorize military action in Syria, but Russia's indefinite tolerance for Assad's atrocities should not define America's response. A big reason for US inaction is a misunderstanding of the nature of the barrel bomb. The US government understandably does not want to cripple the Assad regime if that were to mean an ISIS victory, but barrel bombs, whether filled with chlorine or explosives, are not fighting weapons. They are so indiscriminate that the Syrian military does not dare drop them near the front lines for fear of hitting its own troops. Barrel bombs are anti-civilian weapons, excellent for destroying civilian infrastructure — not just hospitals but also schools, shops, farms and factories. Barrel bombs have even been dumped on displaced-persons camps in Idlib, but are not used to fight ISIS.

Syria today is a humanitarian crisis and a public-health catastrophe, with regional and global repercussions. There is yet more life than death in Syria—eight hundred babies are born each month in Ghouta alone. Young children suffer the worst of war, succumbing readily to the disease and chemical gases, and the worst psychological impact. They deserve protection from an inhumane regime that has delivered diseases from the Dark Ages and repeatedly targeted civilians with deadly weapons without any meaningful international response. The international community is now preoccupied by the threat of ISIS, but the people of opposition-held Syria will not provide their essential support to anti-ISIS efforts if we ignore the greater slaughter, disease, and deprivation caused by the Syrian government. The United States could stop the barrel bombs and protect Syrian children and their families without impeding the effort to fight ISIS. And showing that finally the West is willing to stand up to Assad's slaughter of civilians would deprive ISIS of one of its most effective recruiting tools. I hope this committee can prevail upon the Obama administration at long last to act. Thank you.

Chairman ROYCE. Thank you, Annie. I appreciate that, Dr. Sparrow. Thank you very much for your very concise arguments that you laid out. I thank all the witnesses for all that they've tried to do in this humanitarian crisis over the years.

One of the questions I was going to ask you is that I know that the Turkish Government raised the issue of a no-fly zone when asked to help. Their point was there's a humanitarian crisis in terms of the number of refugees from the cities coming over our border. It looks to me is that what primarily drives that, one of the issues that really drives it is the dropping of these barrel bombs from these MI-17 Helicopters.

It seems to me, as you laid out that argument, Annie, that there is a very effective way that Turkish, Jordanian, UAE, U.S., French, Canadian, and British air power in the region can simply check or chase out of the skies these helicopters, these Russian-made helicopters that, you know, are cumbersome and slow to move, but they're effective at one thing, just as those old Antonov planes that dropped barrel bombs are effective at doing. They're not effective using against military forces, particularly, but they can be enormously effective in use against civilian populations in dropping things like barrel bombs on cities. And because we have a circumstance now where the blowback is such that those who are fighting ISIS in places like Aleppo have to have this two-front war of battling ISIS on the ground, while looking up over their shoulder up to the skies to see when the Assad regime is going to again hit them, because his preoccupation is carrying out his effort which slowly drives the Syrian people, you know, over the border into Turkey, or into Jordan. And it would seem as though the logical thing to do would be to ground those helicopters and those Antonov planes when they do things like this; just chase them out of the sky and put an end to this. But for that to happen it takes a decisive decision to act, a decisive decision to say no, you won't drop chemical weapons any longer.

Anyway, your thoughts on that, Dr. Sparrow.

Dr. SPARROW. Thank you, Chairman Royce. Indeed, this is the main driver of the flow of refugees. If you can put a map up, it's easy to see that these are civilian areas, and our preoccupation with ISIS is distracting us from these systematic assaults on civilian homes, and neighborhoods, and hospitals, and schools.

In the last month alone, there have been 35 attacks by the government on hospitals by air strikes. No one else has this air capacity. So the civilians are being driven out, the children are dying, they have to seek healthcare, and the doctors are dying in the hospitals. There are so many ways to die in Syria. So many of my colleagues have been forced to leave, and our best bet at mitigating this in so many ways, as I said, we can do it from the sea. We can just chase them out of the skies.

After the sarin attack, Assad didn't bomb anyone for 10 days because of the credible threat of use of force. That's really significant. To chase them out of the skies means the creation of a humanitarian space enabling us the safe passage of humanitarian aid or medicines. We allow children and people to stay inside Syria, and this is important because no one wants to be a refugee. Turkey has 2 million refugees already, of the 4 million refugees, at least. We

don't need more refugees, and they don't want to be refugees. We can enable them to stay safely in their own country, and curb these obscene breaches of humanity that are such effective tools of terror and destruction so easily in a way that unites us all, and a very practical consensus that doesn't involve shooting down or fixed wing aircraft. It's just stopping those helicopters, as you described, which push those barrels out, just as they did in Darfur with the genocide of civilians. There's nowhere to hide.

Chairman ROYCE. Thank you, Dr. Sparrow. Dr. Tennari, your thoughts on what could be done in order to stop the helicopter attacks that drop the barrel bombs?

Dr. TENNARI. The air strikes are focused mostly on hitting civilians. We haven't seen, for example, these air strikes used in such focus against militant groups on the ground, or training camps, and so on. What we need to end these attacks is to establish a no-fly zone.

Some may argue, including in yesterday's testimony of Ambassador Power, that implementing a no-fly zone may aid extremism. Although I have great respect for Ambassador Power, I do not agree with her on this. I live in Syria, and I never see these helicopters and airplanes used against extremists or against training camps, and so on. All we see is these planes and helicopters being used against hospitals, against schools, and against general civilian populations. And I don't know how saving the lives of these civilians and ending this can in any way help extremists.

Chairman ROYCE. Thank you. I think my time has expired. I'll go to Mr. Engel.

Mr. ENGEL. Well, I want to thank all of our witnesses. Each of you really gave outstanding testimony, and I'm not usually speechless, but after watching those pictures of the children dying, I'm speechless. I just don't know what to say. We had an earlier hearing in this committee probably about less than a year ago where we had a photographer who smuggled his pictures out of Syria, and we saw something very similar: Bodies after bodies, hundreds, and hundreds, and hundreds, and hundreds of dead bodies obviously killed by gas and other horrific things. And it just really disgusts me that, you know, the United Nations—I'm from New York. The United Nations, they sit and they spin their wheels, and this type of murder of civilians keeps going on, and the world is silent.

Ambassador Ford, let me ask you. Obviously, the use of chlorine gas is a violation, a serious allegation under the Chemical Weapons Convention. What should be the consequences of this violation in your opinion?

Ambassador FORD. Ideally, what we would like, Congressman Engel, is for the persons responsible in the Syrian military chain of command to be held accountable. To do that, we need two things. We need, one, an investigation with a mandate to determine responsibility. You know, there are people up in New York, you were just talking about the United Nations. There are still countries in New York that are arguing that the Syrian opposition is responsible for chemical weapons attacks, not the Syrian Government, so it's important that some kind of an investigative team have a mandate to go do that. I know Ambassador Power is trying to work that now.

Second thing in order to hold people accountable is, we need to get, finally, to some kind of a settlement in Syria where officers responsible for these attacks are ultimately produced for justice. That will have to be part of a larger settlement.

Mr. ENGEL. You know, last September the Organization for the Prohibition of Chemical Weapons concluded, as I said in my statement, "with a high degree of confidence," that's their words, that "chlorine was used systematically and repeatedly," that's their words, in attacks in Northern Syria. But what puzzles me is that the OPCW did not attribute responsibility to the Assad regime. It just boggles my mind. I'd like your comment on that.

Ambassador FORD. Exactly, Congressman. They did not have a mandate to determine responsibility; although, if you read between the lines of their report where they mentioned that the eyewitness accounts consistently spoke of the chemical weapons being delivered by helicopters. That, in a sense, points the finger squarely at the regime, even if the Organization's report did not specifically say the Syrian Government did the attacks, or carried them out.

But I think in order to get some kind of Chapter 7 action out of the Security Council we will actually need a very blatant statement that says it is, in fact, the Syrian Government that is doing this. Were we able to get that statement, I think it would be much more difficult for any country in the Security Council to use a veto.

Mr. ENGEL. You know, President Obama was set to launch military strikes in 2013 in August. I remember that really well, against Syria if the regime were to use chemical weapons. Obviously, when they announced plans to dispose of its weapons, the administration backed away from its threats to strike.

You know, when there is inaction on the part of the United States and other countries of the free world, I think that dictators and despots use that as a *carte blanche* to continue to do what they have done, and I'm afraid that we're seeing more and more of that.

Dr. Sparrow, do you want to add anything to your testimony? I thank you for your good work, and pleased that we have you as a witness.

Dr. SPARROW. Thank you. I believe we still have an opportunity to act, and every day there are more barrel bombs. Yesterday, 21 kids were killed with their moms at summer camp. We get tired almost of talking about these attacks because there are so many, and the brutality goes on.

We now have an opportunity to do something that is very practical, doesn't involve boots on the ground, and actually enables a consensus to mitigate this crisis in so many ways. And even to focus on Northwestern Syria as a starting point, it does send a clear message that we don't want to tolerate this brutal breach of humanity any longer. And it is a radicalizing factor toward ISIS, so we can be strategic here in so many ways, and be clear that a sea-based no-fly zone doesn't curb any efforts, Assad's, our own, the coalition's ability to fight ISIS; rather, it stops the radicalization, but most importantly, it does protect the civilians. This means Muslim kids, Christian kids, Alawites, Druze, all those children are still in Syria and they all deserve protection, too.

The permanent psychological fallout of these chemical weapons doesn't go away. An awful thing about bombing with gas is that

you can't hear the explosion, you can only find out about it when it comes with the smell. It sinks, that's why it's done at night. If you bomb a hospital, a lot of the hospitals are actually in basements, so you're actually contaminating the hospital. There's nowhere to hide, and you don't know.

Last year, he bought canisters from China, so it was easy just to roll canisters of liquid chlorine which vaporized under pressure, but this year we see this domestic production, these improvised chlorine bombs made out of easy ingredients like hydrochloric acid, potassium permanganate, so it's so easy to make. We have to do something that actually stops the aerial onslaught, because that is the key here to really mitigating the worst humanitarian crisis.

Mr. ENGEL. Well, thank you. You know, people who say that ISIS is our real enemy and somehow we should look the other way with Assad because he's the one standing up to ISIS should watch this hearing, and hopefully they change their minds.

Chairman ROYCE. Would the gentleman yield?

Mr. ENGEL. Yes, Mr. Chairman.

Chairman ROYCE. Mr. Engel, from what I've seen in watching the aerial campaign over Aleppo, it is, in fact, the Assad regime. I think you might agree that in dropping the barrel bombs on the Free Syrian Army and on the civilian population in Aleppo, while at the same time ISIS is attacking Aleppo on the outskirts of the city he, in fact, is working hand in glove with ISIS, because his goal, seemingly, is to drive the civilian population out of all of these areas using ISIS on the ground to do it, since ISIS doesn't attack his forces or rarely does, and carries out their objection or their focus, seemingly, on the civilian population, which is his target, as well. It seems to me that the Syrian people have two enemies in this. One is Assad, and the other is ISIS.

Mr. ENGEL. Well, that's a very astute observation which I concur. And let me conclude by thanking Dr. Tennari and Mr. Habib for your courage in coming here, and for letting the world know what's really going on in Syria. We really appreciate it and, hopefully, with a better future for the Syrian people, both of you will be regarded as heroes in the future for bringing your message to the rest of the world. We stand with you, and we hope that the Syrian people will soon be free of this scourge from Assad. Thank you.

Chairman ROYCE. Ileana Ros-Lehtinen is the chairwoman of the Subcommittee on the Middle East and North Africa.

Ms. ROS-LEHTINEN. Thank you so much, Mr. Chairman.

There should be no doubt that Assad is, in fact, the one responsible for the horrific humanitarian crisis, the violence, the killing in Syria. I think those who still say it's the opposition, they're looking for an excuse to be a non-actor, and a person who is enabling Assad to continue with these atrocities like the use of chemical weapons and barrel bombs against innocent civilians.

I see no urgency, however, from the Obama administration aimed at pressuring Assad to go. We could be destroying and neutralizing Assad's air capabilities, sanctioning Assad, his military officials, or any other entity, including the Russians and the Iranians, that are supporting him, and we could be focusing our efforts here in Congress to passing a substantive authorization of the use of military force in AUMF that not only authorizes military

force against ISIL, but also against Assad, al-Nusra, and any other terrorist entity operating in Syria.

Our Train and Equip Program in Syria may not be enough. According to the latest reports, only 2,000 fighters have been identified, 400 have been vetted, only 90 have begun training, and DOD says that the program is not aimed at attacking Assad. We've got to change our strategy in Syria because attempting to degrade and defeat ISIL while forcing the very ones we are training and equipping to promise, they have to promise to not attack Assad, makes little, if any, sense.

In the meantime, the Assad regime has been responsible for 30 chlorine bomb attacks from March to June, just in that time span. While the first chemical weapons attacks in Syria were reportedly with sarin gas, subsequent attacks, as we know, have all been with chlorine. So, I wanted to ask the panelists, first, is there any evidence of other chemical weapons being used in Syria today other than chlorine? And, also, in his latest book, former Israeli Ambassador Michael Oren has said that the Russian plan to remove chemical weapons from Syria originated with an Israeli minister. Ambassador Ford, I wanted to know how you would characterize the Obama administration's handling of the whole situation from the red line, if you cross it, we're not going to forget about that. We're going to take action, and then nothing happens, to the plan to remove chemical weapons. And what role might Israel have played in all of this? And, lastly, it's well known that Russia continues to prop up the Assad regime. What leverage do we have in the U.S. over Russia to persuade it to change its calculus on Assad, and assist in removing him from power? And what about the other countries in the region, what could they do, as well? Ambassador?

Ambassador FORD. Thank you, Congresswoman. With respect to Ambassador Oren's comments about the Israeli role, from where I sat inside the State Department in the autumn of 2013, I did not see a visible Israeli role, and so I just can't comment on what he wrote in his book. It wasn't visible to us at the upper working level, shall I say.

With respect to what happened in 2013, in retrospect, obviously, laying out a red line and then not enforcing it has hurt our credibility not only inside Syria, but it certainly has not acted to deter Assad, and it's probably hurt us regionally and internationally. It's just a matter of record.

I would also add that I came up to this committee with Secretary Kerry, and it was a hard sell here on Capitol Hill at the time, Congresswoman, so—

Ms. ROS-LEHTINEN. Some of us were there trying to help out—

Ambassador FORD. It's not to excuse—

Ms. ROS-LEHTINEN [continuing]. But the team sort of left the field.

Ambassador FORD. It's not to excuse policy decisions, it is simply to say that policy decisions are hard.

I think going forward, as I said in my opening statement, it's really important to figure out how to deter Assad. I don't think that he can be deterred without some kind of indirect or direct military action. The totality of my Syrian contacts for years have

described his regime as really paying attention only to military, whether it be American or other, to military actions. Thank you.

Ms. ROS-LEHTINEN. Just quickly comment on how you evaluate the Training and Equip Program that we have going in Syria now.

Ambassador FORD. I think you're referring to the one that's using the Department of Defense Program monies. And I have two comments on it. Number one, the scale of it is not enough, even to really affect the Islamic State which deploys in Syria somewhere between 15-, 20-, 25,000 fighters. For us to inject 2-, 3-, 4-, or 5,000 I don't think is going to make a huge difference. And I'm not even talking about the logistical problems that force would have.

But more broadly speaking, Congresswoman, I do not think we will be successful convincing many Syrian experienced and capable fighters to pledge only to fight the Islamic State and not to fight the Assad regime. I don't excuse the Syrians in that, but I think it's important for Americans to understand that the Assad regime is responsible for the deaths of maybe 150,000 to 200,000 people in Syria. The Islamic State is horrible, it's brutal, it's awful, it's killed maybe 4,000 to 5,000 Syrians. So, if you're sitting where a Syrian sits, the Assad regime's brutality is worse even than that of the Islamic State, as horrible as it is.

Ms. ROS-LEHTINEN. Thank you.

Chairman ROYCE. We'll go now to Mr. Brad Sherman.

Mr. SHERMAN. The moral dilemma that America faces in this circumstance is far more complex than we face almost anywhere else. The path of righteousness is far from clear. It would help our moral dilemma if ISIS and Assad were secret allies, and they were acting as such last year, but this year the ISIS forces have engaged Assad and taken territory.

It would be easier for us from a moral dilemma standpoint if Assad was killing people mostly with gas, but as Dr. Tennari points out, it is the explosive bombs that are killing most of the civilians, and causing terrible death, dismemberment. Dropping explosive bombs is the number one tactic of the United States in military actions this century. Dropping bombs with explosives is entirely legal if you're aiming at legitimate military targets, not only at other combatants, but also at legitimate strategic targets like refineries.

So then for these explosive bombs, the issue is whether Assad is deliberately striking civilians, and the evidence is overwhelming that he is. But the fact this his explosive bombs are shaped like barrels is not legally or morally significant. The fact that he is using the explosives dropped from airplanes is not illegal. The fact that he is targeting civilians is.

It's, I think, wrong to say that the United States has done nothing to help the Syrian people. Through our actions, perhaps not carefully scripted, Assad has been deprived of his sarin gas, his mustard gas, his nerve agents. If he still had these and was willing to use them, he would have killed hundreds of—100 times and more, more people than had been killed by the chlorine gas.

Providing Atropine is, I think, not to be dismissed; though, of course, it is not enough to stop the death. Although, a no-fly zone would not stop the chlorine death, and the chlorine can be deliv-

ered on the ground, as well. So, the issue is a no-fly zone, and how we might tailor that.

I would point out that the AUMF that we're operating under, and which we should be revising in this committee, authorizes virtually any action against Sunni extremists, and does not authorize any action against the extreme Shiites, including Assad who, as the Ambassador points out, has killed well more than 150,000 people.

As to us dealing with hitting Assad, and thereby depriving ISIS of a recruiting tool, they've got many recruiting tools, and if they're able to seize more territory from Assad and put their flag up in this or that Syrian town, that will also be a recruiting tool. But I think the Shiite extremists are more dangerous to America, and as Ambassador Ford points out, have killed far more Middle East civilians than has ISIS, and that the question is how do we craft a no-fly zone.

Is there—but, first, Ambassador Ford, we've heard that the strategic reason Assad is using these tactics against civilians is to force them to leave. What military advantage is he trying to get? Where is he trying to get them to leave from? Where is he trying to get civilians to go to, and how does that help him?

Ambassador FORD. Congressman, the reason the Assad regime is targeting civilians the way it is, is it's literally trying to drain the sea that supports the Armed Opposition. So, they have been quite unsuccessful in defeating the Armed Opposition fighters, and they have turned with ever greater ferocity on the civilians that support them. And that's why they're trying to depopulate Eastern Aleppo, for example, because that is where the Armed Opposition has one of its strongholds.

Mr. SHERMAN. So, they're aiming to depopulate all Sunni areas of Syria, or only particular neighborhoods where they think there's strong support for the Opposition?

Ambassador FORD. They're, obviously, not trying to depopulate urban areas under regime control. But where the regime is not in control, Congressman, the Opposition is, it's a national opposition, it's national in size, national in scope, and so they will target almost any place from the south to the north, to the east and the west.

Mr. SHERMAN. So, wherever there are civilians under Opposition control, Assad assumes those civilians want to be under Opposition control, support the Opposition, and is trying to turn them into residents of camps in Turkey and elsewhere.

Ambassador FORD. Correct. If civilians in a particular area do not themselves fight against the Armed Opposition, then they are for the regime fair targets.

Mr. SHERMAN. Good. I want to try to sneak in one more question with Dr. Sparrow.

Would our no-fly zone efforts in order to prevent the use of chemical weapons need to be only against helicopters, or would we also need to shoot down his fixed wing aircraft?

Dr. SPARROW. As you pointed out, Congressman, this chlorine is being delivered overwhelmingly from the air. It's not like sarin which required sophisticated ground missiles to deliver it. It's coming from the air, it's being rolled out, whether in canisters or home-

made bombs. And as I said, it's very easy, so it is not requiring fixed wing aircraft. It's the——

Mr. SHERMAN. No, no. I'm asking, if Assad's helicopters were grounded, would that solve the problem, or would his fixed wing aircraft also deliver these barrel bombs filled with chlorine gas?

Dr. SPARROW. Fixed aircraft will keep on killing, but these are civilian targets. And I say that because chemical weapons never kill as many as conventional weapons. In World War I, they killed 100,000 of the 10 million dead, but they are so effective at scattering people, driving them out. In wars of attrition, they're a beautiful tool, a very strategic tool, and they are consistent with their strategy. So, a fixed wing aircraft can keep on attacking ISIS in Deir ez-Zor, or Kobani, but this strategy will protect civilians.

Mr. SHERMAN. So, you're proposing just an anti-helicopter strategy?

Dr. SPARROW. Yes.

Mr. SHERMAN. Thank you.

Chairman ROYCE. Let's see. Next in the queue, Mr. Ted Poe of Texas.

Mr. POE. Thank you, Mr. Chairman. Thank you all for being here. I'm a little out of breath.

Ambassador FORD, my questions are directed primarily to you. If we have time, we'll have all of the witnesses weigh in on it.

What is the U.S. policy regarding Assad?

Ambassador FORD. In brief, Congressman.

Mr. POE. Yes, in brief.

Ambassador FORD. The United States views him, I think in his official policy, the President has stated it many times that he has no legitimacy, and he should step aside in favor of a new national unity transition government. The problem, very frankly, is that's a nice strategy, but there are no tactics for making that happen.

Mr. POE. Let me ask you about the tactics. Going all the way back to Gerald Ford, reiterated by Jimmy Carter, Ronald Reagan, President Bush, all issued statements or Executive Orders regarding the fact that the United States does not assassinate heads of state. Is that generally our policy?

Ambassador FORD. Yes, sir, it is.

Mr. POE. Now, in 2011, NATO bombed the house where Gaddafi was staying but missed him, and then later in October he was killed. I'm not sure we know who actually was responsible for that, but—so, why doesn't the United States, if Assad is so bad, he's killed 200,000 of his own people, and put that in perspective. Americans lost 400,000 in World War II killed, military, so that's a lot of folks, 200,000. Why don't we just assassinate him? And then we get rid of him; he's gone, he's the bad guy, he's gone. But why don't we do that?

Ambassador FORD. As you said, Congressman, it's not our policy to assassinate people. With respect to Libya, there was a United Nations Security Council resolution which authorized Chapter 7 action. We don't have that in Syria.

Mr. POE. Okay.

Ambassador FORD. Which has been a factor in the administration's considerations. I think going forward, while I don't advocate assassinating President——

Mr. POE. And I'm not saying we should, either. I'm just asking the question.

Ambassador FORD. Yes. But I think in going forward, to the extent that the United States remains committed only to operating under Chapter 7 approved by the Security Council, the United States will almost certainly not be able to influence events on the ground in Syria. And that, in turn, poses risks to our own national security.

Mr. POE. Okay. Why hasn't OPCW said who's responsible for the chemical attacks? Why haven't they done that?

Ambassador FORD. Their mandate was only to (a) oversee the dismantling of the declared Syrian chemical weapons program, and (2) to investigate in an intrusive manner where other sites that were not declared but might be potential chemical weapons facilities. And, in fact, they discovered four, but they never had a mandate. They never—let me say that again. They never had a mandate to determine who was responsible for using chemical weapons.

Mr. POE. All right. Let me reclaim my time. Do they have the ability to say who is responsible right now? Could they say who is responsible, or would they say we don't know?

Ambassador FORD. If they were here today, Congressman, they would say they don't know.

Mr. POE. They don't.

Ambassador FORD. Because they have no mandate to label anyone responsible.

Mr. POE. So, if we gave them a mandate to say who is responsible, and they said Assad was responsible, then technically the U.N. could weigh in on this?

Ambassador FORD. Correct.

Mr. POE. Okay.

Ambassador FORD. And it may be that, ultimately, it'll be impossible to get the OPCW that mandate, Congressman, and so I think this is one of the things being discussed in New York is, is there another way to get an investigative team with that mandate.

Mr. POE. All right. Thank you, Ambassador. Reclaiming my time.

Let's go back to Assad; removing Assad. I'm not saying we ought to assassinate him. Just the U.S. policy is not to get rid of him. But let's say he is gone tomorrow, he's out of town, he's gone. Would that result in chaos, turmoil, or tranquility in Syria, or pick a different word?

Ambassador FORD. It could be either one. It is possible that his departure would facilitate getting to the national political negotiation that I talked about, because he has refused, he has refused to negotiate, and his instructions to his delegation in Geneva 15 months ago was not to negotiate. However, that will require some pressure from us on the Armed Opposition—

Ms. ROS-LEHTINEN. Thank you so much, Ambassador.

Ambassador FORD [continuing]. Be willing to negotiate.

Ms. ROS-LEHTINEN. Thank you, Judge Poe.

Mr. POE. I'd like to ask one question.

Ms. ROS-LEHTINEN. Absolutely.

Mr. POE. Isn't ISIS just as bad as Assad if they were in control?

Ambassador FORD. In some ways the Islamic State is even worse, but they will not be in control of Syria, even if Assad does fall.

Mr. POE. Thank you.

Ambassador FORD. They will not—

Mr. POE. Thank you, Madam Chair. I yield back.

Ms. ROS-LEHTINEN. Thank you. We'll turn to Mr. Sires of New Jersey.

Mr. SIRES. Thank you, Madam Chair. Thank you for being here today. This is a very moving hearing but, you know, I'm so conflicted with some of these decisions that we have to make in the Congress.

First of all, you know, the conflict in Syria has left us with three main groups, Assad's brutal force, ISIL, a fractured group consisting of some modern militia, some al-Qaeda affiliates. You know, I don't know where we could turn and not make the situation worse.

I really don't think that there is a military solution to this. And I understand that instituting a no-fly zone may help, but I don't know if us getting involved would make it better. I mean, I think we screwed up Iraq. I mean, look at the situation in Iraq. And every time I go to these veterans' events and I see our young men missing a limb, missing legs, I mean, I really don't know I could ever vote to send troops in some of these places, because the rest of the Arab world is just sitting by and watching this go on. Where's the rest of the world? Why must we send our young people into this battle, spend our money, and at the end they hate us for it? So, where's the rest of the world? I mean, where is the rest of the Arab world?

They are their children. I mean, the Turks just look around and see people getting killed. They don't care. They don't even let people in through their border. So, can anybody tell me how we're going to make this better without a political solution to this?

Ambassador, you want to start? I mean, you could try.

Ambassador FORD. I'd be delighted to. I'd be delighted to, Congressman.

I agree with you, there is no military solution. There has to be a national political negotiation; otherwise, Syria will fragment into something like Somalia. But how do you get to the political solution? How do you get there?

The only way is to put more military pressure on the side that won't negotiate, which is Assad. Just like Richard Holbrooke in the Balkans used limited judicious amounts of NATO air strikes to get Milosevic to go to the table at Dayton; something like that has to be done with Assad.

Mr. SIRES. But I think the situation is a little more complicated.

Ambassador FORD. The Balkans were pretty complicated, too, Congressman. So, if I may continue, a no-fly zone, for example, it's not the only thing that would help with this, but a no-fly zone, for example, if properly negotiated out with regional countries and used as part of an effort, as part of an effort to get to the political negotiation could be very effective. It would both help save civilian lives, but it could be used as leverage to get Assad to the table, and to get the Armed Opposition to negotiate and engage seriously when they go to the table.

Mr. SIRES. Mr. Habib, you want to just—I know you—

Mr. HABIB. Thank you, sir.

Well, first of all, I just want to say that the Syrian people did not ever ask for boots on the ground from the United States or from other countries. What we asked for does not put any of the American soldiers at risk; just provide protection for the Syrian people.

Inaction from the international community will lead to more complexity, and it will cause more threats on the international security, in general. If Iran wins this war, this will not be in the interest of the United States or the international community. And if ISIS wins, or any radical group wins, of course, that will threaten the international security.

What we ask for is to give a chance for the moderate opposition to be able to provide an alternative for the people inside Syria, and for the public in general.

Mr. SIREs. Okay, Dr. Tennari.

Dr. TENNARI. The biggest producer and biggest magnet of terrorism in Syria is Bashar al-Assad.

Mr. SIREs. Oh, I don't question—

Dr. TENNARI. Bashar al-Assad has also brought to Syria the gains of Hezbollah, the gains of Irani and Shiite extremist militias, and others that have come into our country from terrorist groups. And this is what also helped cause other groups that also came out, terrorist organizations that also came out in Syria.

Mr. SIREs. Thank you.

Ms. ROS-LEHTINEN. We'll let him finish and then move on.

Mr. SIREs. Thank you, Madam Chair.

Ms. ROS-LEHTINEN. No, go ahead.

Mr. SIREs. Thank you.

Ms. ROS-LEHTINEN. He had something else to say.

Dr. TENNARI. The cost of any intervention for the United States back in 2011–2012 is obviously much less costly for the United States then. The current situation, the chaos that's there is only going to spread and become worse, and that's going to force the United States at some point to intervene at a much more—even more complex situation.

Ms. ROS-LEHTINEN. Thank you, very much. Thank you, Mr. Sires.

Mr. SIREs. Thank you.

Ms. ROS-LEHTINEN. We will now go to Mr. Issa of California.

Mr. ISSA. Thank you, Madam Chair.

Ambassador, let me couch this question without trying to seem overly glib. Looking at Syria right now, Bashar Assad is a failed leader, failed his people before the civil war, continues to fail to even respect human rights. We can all agree that that's the best you can say. But with about 28 million Syrians, plus or minus, and about half of them already displaced either in the country or outside the country, correct, and then of the remaining call it 18 million or less that are theoretically still in their homes, a big chunk, let's call it 25 percent either support Bashar Assad, or at least docile in any opposition.

Then you have another chunk of the country, more than half by some estimates, are in the hands of ISIS where the vast majority either are docile and just want to continue their lives or, in fact, support ISIS.

In that environment, when we are both against Assad and against ISIS, what are our numbers? How many numbers can we actually say are people who are ready to engage in an active effort sufficient to displace both of these despicable groups?

Ambassador FORD. It's important to understand here, Congressman, that this effort to unseat Assad has been going on 4 years now, and is actually getting stronger, not weaker. So, you just look at the situation on the ground, and that the regime has lost a second Provincial capital.

Mr. ISSA. But they've lost it to ISIS.

Ambassador FORD. No, they did not. They lost it to a group called Jaysh al Fateh, and to other sector armed groups fighting from the north and the south.

Mr. ISSA. Who coordinate—

Ambassador FORD. They did not lose it to the Islamic State.

Mr. ISSA. But they coordinate their opposition by regions, the same as Hezbollah. Today, the Lebanese armed forces fights in one zone, Hezbollah fights in another zone, they deconflict their zones to the extent that they are keeping Lebanon outside of the direct war.

The question I have for you is, what is our path to displace both of them, or are we really having this hearing to talk about the current use of chemical weapons, and atrocities by Assad while, in fact, the effort to displace him is really in name only. And the reality is, is that we are fighting against ISIS while claiming that we want regime change, and knowing full well that regime change today, if Assad were to fall, ISIS would dominate the political scene more in Syria than Hezbollah ever has in Lebanon.

Ambassador FORD. Two comments on that, Congressman. Number one, the administration's priority clearly is Iraq, not Syria. And, clearly, even in Iraq it is to fight the Islamic State. To the extent the administration is engaged much on Syria right now, it's with our air campaign against the Islamic State, an air campaign which, as best I can tell, the criteria for victory are not clear, and the duration of the mission is very unclear. That's my first comment.

Second, I disagree vehemently that were Assad to go, the Islamic State would dominate Syria. The total number of people who are fighting the Islamic State right now both in the regime and among moderates in the Free Syrian Army outnumber the Islamic State. And it is important to note, Congressman, that although the Islamic State has been on attack for months up around Aleppo, it is actually being pushed back. It is not advancing. Let me say that again. It is being pushed back. And those are not people who are getting any help from the United States. And the Islamic State has also suffered losses at the hands of Syrian Kurds, so I do not think the Islamic State would dominate Syria.

Mr. ISSA. Ambassador, my time is just about expired. I appreciate your opinion. The reality is, Hezbollah doesn't control the majority of Lebanon either, but they dominate the politics of Lebanon, undoubtedly.

Do any of you see a political solution in Syria since the military solution seems to be a multi group, essentially becoming a civil war with multiple groups fighting multiple groups?

Ambassador FORD. That's an excellent question.

Mr. ISSA. And that is for anyone on the panel. Do any of you see a political solution?

Ms. ROS-LEHTINEN. Just one to answer. His time is up. One.

Mr. ISSA. I'll take that as no. Thank you.

Ms. ROS-LEHTINEN. Thank you very much. And now we turn to Mr. Deutch, the ranking member on the Subcommittee on Middle East and North Africa.

Mr. DEUTCH. Thank you, Madam Chairman. To our witnesses here today, thanks for your tireless humanitarian work, and for being here today to share some of the horrors that you've witnessed firsthand.

The medical personnel and the humanitarian workers who are the first responders risk their lives in Syria every day running toward explosions instead of away from them, and they deserve our gratitude and support.

Ambassador Ford, welcome back. Thank you for your years of service to this country.

As we have heard already today, the Assad regime has continued its horrific use of chemical weapons in direct violation of the OPCW agreement; yet, the international community remains paralyzed with inaction. The fact that whether or not chlorine gas is a chemical weapon is even part of this conversation is baffling to me.

When chlorine gas is put in a barrel bomb and dropped from the sky on civilians, then dropped again when rescue workers have reached the scene, it is a weapon of mass destruction. And the fact that the international bodies do not assign blame for these attacks by the Assad regime is a failure of the system.

The regime is the only entity with air power, the only one capable of dropping barrel bombs, and at this point continued inaction by the international community is unacceptable.

Just this morning there were reports of elephant rockets being dropped on civilians. These are bombs, if I understand it correctly, with rocket motors attached to them to cause greater destruction, despite making them far more inaccurate. And while I'm glad that Secretary Kerry acknowledged yesterday that these attacks by Assad cannot continue, I'm just not sure that simply asking the Russians to relay this message is enough.

Russia can't continue to block action against the barbaric use of chemical weapons at the Security Council. This is horrid at this point, and we've been talking about it for a long time, but today's hearing is about the use of chemical weapons, and we have to be prepared to stand up and acknowledge it, and respond to it.

Now, Dr. Tennari, chlorine gas is notorious for the psychological terror that its deployment, or threat of deployment, inflicts upon populations. And the Assad regime also possesses and uses weapons which are significantly more efficient at killing on a massive scale. Dr. Sparrow, you talked about this. Why do you think that the regime continues to use chlorine as a weapon in violation of law, and what affect does that have on the communities that are under siege?

Dr. SPARROW. As I said—thank you.

Mr. DEUTCH. Dr. Sparrow, can we have just Dr. Tennari answer first, and then I'll turn to you.

Dr. SPARROW. Sorry.

Mr. DEUTCH. That's okay. No, thank you.

Dr. TENNARI. The Assad regime uses chlorine gas specifically to displace people from their areas, specifically against the areas that are under Opposition control, so to help strike at the popular support of the Opposition. Assad's troops and his strategy, even whenever they come into a specific area, they always write down on the walls, "Either Assad or no one else—either Assad or we burn down the whole country." And this is the strategy behind using chlorine barrel bombs, is that it's either be under Assad control or no one is there, and so he uses that to displace populations.

Mr. DEUTCH. Dr. Sparrow. Thank you, Dr. Tennari.

Dr. SPARROW. Together the barrel bombs and the chlorine are completely consistent with this very deliberate strategy of targeting civilians and hospitals. It is a classic strategy of war, as described.

March 16th, the chlorine attacks recommenced; 28th of March, Idlib fell from the Government, the City of Idlib was taken by coordinated action by the Opposition. I was there. The very next day, the government retaliates by taking out the National Hospital in Idlib and the Red Crescent Hospital, including the children's ward in the National Hospital.

It's a very swift retaliation. It drives people quickly as Tennari described, forces them to move, so attacking them together with destroying the infrastructure and creating the panic and the fear really puts people out of action very effectively. And this is a war of attrition. Two years ago Eastern Ghouta had a population of 1 million and several hundred doctors. Today, Ghouta has $\frac{1}{5}$ million and it has 50 doctors left. In DC, you have about 600,000, and almost 7,000 doctors. This is why it's not a political solution, but it is a mitigation of this misery and helps stop the escalation.

Mr. DEUTCH. Dr. Sparrow, thank you. Madam Chairman, if our sensibilities are shocked by what we've heard today and what we've seen in these videos, then there is just no question that there is an obligation to respond in some way. And I appreciate very much the opportunity to have this hearing today to discuss this further, and I yield back my time.

Ms. ROS-LEHTINEN. Thank you so much, Mr. Deutch. And now we turn to Mr. Donovan of New York.

Mr. DONOVAN. Thank you, Madam Chair. I just have a couple of quick questions.

First, Doctor, is air drops the only method that's effective for the use of this chlorine gas?

Dr. SPARROW. Yes. Last year canisters of liquid gas just vaporized, this year improvised chlorine bombs, and it's much more effective. It's very difficult to deliver chlorine in this way from the ground.

Mr. DONOVAN. Okay.

Dr. SPARROW. It's not like sarin. So, yes, we are only seeing it in air drops.

MR. DONOVAN. Ambassador, do the Syrians have the capability to manufacture helicopters themselves, or are outside forces supplying them with these vehicles to drop the chlorine?

Ambassador FORD. The helicopters that the Syrian Government uses are Russian, and the spare parts are all Russian, too.

Mr. DONOVAN. Okay. And my final question, if a no-fly zone was imposed, Ambassador, would we have to be the enforcer, the United States, or are there other countries in the region that would enforce the no-fly zone?

Ambassador FORD. Countries in the region, Congressman, have been asking us to do a no-fly zone for a long time. They're already participating with us in air operations in Syria against the Islamic State, and I have no doubt that a number of those same countries would join us if we were to expand the mission to be a no-fly zone over specific designated areas in Syria. We would certainly have other countries join us.

Mr. DONOVAN. Thank you, sir. Thank you, Madam Chair.

Ms. ROS-LEHTINEN. Thank you, Mr. Donovan. Mr. Cicilline of Rhode Island.

Mr. CICILLINE. Thank you, Madam Chairman. Thank you to our witnesses for being here, and thank you to the chairman and Ranking Member for convening this hearing.

For a regime and a dictator prepared to engage in this kind of horrific and depraved slaughter of its own people, and particularly of children, and the destruction of hospitals and health care facilities, the significance of removing the other chemical weapons, mustard gas and sarin, I think is significant. One can only begin to imagine what Assad or the regime would be capable of if they had access to those weapons.

But with respect to our response to these chemical weapons, it seems as if, Ambassador Ford, you're suggesting that some military action will create some conditions for a political solution, that military solution is not—and I think Dr. Sparrow makes the same recommendation. And in your written testimony you speak about the cruel irony of the denial of chlorine and what it has caused in neighborhoods in Syria, and really serious, grave consequences of hepatitis, typhoid, polio outbreaks, and very, very serious diseases. And now chlorine is being used and dispensed in the cruelest way, and the most devastating way. And the cruel irony of this is almost hard to imagine.

But I want to just press you on the solution. Dr. Sparrow says a no-fly zone in civilian areas that would protect, obviously, or prevent the bombing, use of barrel bombs that dispenses chlorine. And she also concludes in her written testimony that there is strong reason to believe that Assad's barrel bombing of civilians would quickly stop if a credible threat of military retaliation were made. And that this kind of a no-fly zone in this limited way is not militarily complicated, but a matter of political will. So, I'd like, Ambassador Ford, for you to comment on that. Do you agree with that assessment that it should be a no-fly zone, it should be narrowly construed, and that it's not militarily complicated, it's a matter of political will, and that it will likely cause Assad and the Assad regime to stop the use of chemical weapons? Because it was very persuasive to me, I should say.

Ambassador FORD. Congressman, first of all, I'd just like to say I spent 5 years in Iraq trying to help stand up an Iraqi Government so we could get our forces out, so I don't take lightly asking for the deployment of American forces or an expansion of an exist-

ing mission that we already have in Syria. But militarily, it's doable.

I think a different question is how long would it go on? It went on 12 years in Iraq. We had a no-fly zone over Iraq for 12 years. So, the answer to that is, I can't give you a specific time mission, and that makes me uncomfortable. But I can only say that it will help if done properly, and if negotiated properly with the regional states, and the Syrian Opposition, it could help get us over the hump and to a negotiating table where we can get, finally, a national political settlement. Right now, we are going nowhere, nowhere toward a national political settlement. In fact, the opposite, the country is fragmenting, and that will enable the Islamic State and the al-Qaeda affiliate al-Nusra to have areas they control out into the medium and long term, Congressman.

Mr. CICILLINE. Ambassador, you sounded as if you were trying to make another point, and there wasn't enough time when one of my colleagues was questioning you. You said some pressure from us to negotiate, and ISIS will not be in charge of Syria. Would you speak a little more about that?

Ambassador FORD. Certainly. The Islamic State is not the majority of the Syrian Opposition. It is one element fighting Assad, and sometimes it even cooperates with Assad in a very byzantine way. Let's not forget that before Islam, the Byzantines controlled Syria, so they carried over some of the tricky politics.

Were Assad to go tomorrow or the next day, there would be a competition for power in Damascus and in all parts of Syria, and nowhere has the Islamic State ever prevailed over the more moderate elements of the Opposition, not in Aleppo, not with the Syrian Kurds, if you've been reading the news about the gains that the Syrian Kurds have made, and down in the south, as well. In all of those places, the Islamic State's attacks have been blunted.

The real progress the Islamic State has made to the extent it's made progress in Syria, is in places where it was fighting the regime, like Palmyra.

Mr. CICILLINE. Thank you. I thank you again, Madam Chair, and I associate myself with the comments of the gentleman from Florida, Congressman Deutch, that in the face of this evidence, that we have a responsibility to do something, and the world is watching. And I thank, again, the witnesses for being here to share their testimony. With that, I yield back.

Ms. ROS-LEHTINEN. Thank you very much. Mr. Duncan of South Carolina.

Mr. DUNCAN. Thank you, Madam Chair. And I thought the gentleman from Florida, Mr. Deutch's comments were apropos, too.

They say that a picture is worth a thousand words, a video is worth a billion words, in my opinion. That video that you showed this morning was very, very compelling. It was moving to me emotionally. It needs to be shown all across America.

Delving into this no-fly zone idea, which I am apt to support based on testimony today, and the comments from my colleagues, and the questions they asked. But delving into it, I realized that from 1992 to 1999, that DOD estimated that the U.S. and its allies flew over 200,000 sorties in Iraq. They were operating under what they believed to be a U.N. Security Council Resolution 688, but

Secretary General Ghali said that the no-fly zone was illegal under 688. So, I ask, Ambassador, is there a Security Council resolution now for Syria that would cover a no-fly zone?

Ambassador FORD. I think that's one of the difficulties, Congressman. I do not believe there is a Security Council resolution.

Mr. DUNCAN. Would you agree with me that Russia would probably, being the benefactor of Assad, probably veto any Security Council resolution for a no-fly zone?

Ambassador FORD. They have indicated that consistently.

Mr. DUNCAN. Yes, that's speculation, and so I think they would, as well. So, how do we operate a no-fly zone legally in international law getting the participation of the U.N. Security Council?

Ambassador FORD. The argument is going to have to be made, Congressman, that this falls under the acknowledged responsibility to protect, which as a principle has been acknowledged by the United Nations, but has not been applied in this way. The irony of this is that the international law strictly interpreted actually gives Assad full reign to kill like this; even though he's committing war crimes in the process.

Mr. DUNCAN. That's amazing.

Ambassador FORD. Yes, it is. I must say, I was surprised when I understood this myself.

Mr. DUNCAN. Thanks for sharing that. We've operated in defiance of international or U.N. Security Council resolutions in the past, and so what are the practical implications for creating a no-fly zone in your opinion?

Ambassador FORD. I think it has to be understood, not just as a way to protect Syrian civilians, as laudable and as important as that is, but because it's a major commitment, and—

Mr. DUNCAN. From regional allies, I guess, is what you're saying?

Ambassador FORD. That it has to be used also as a tool to get to a political settlement in Syria so that it doesn't last 12 years like the one in Iraq did. And so we will have to negotiate the terms of it with regional states that are also supporting the Opposition so that they back a political settlement, and with the Syrian Opposition so that it, too, will negotiate seriously. And then we have to turn to the Russians and say this is not to overthrow Assad, this is to get to the negotiating table, and to stop the murder of civilians.

Mr. DUNCAN. You know, in Iraq with the no-fly zones, we were basically stopping the Saddam Hussein regime from flying in two regions. The dynamics in Syria are much greater because we do have the Assad regime attacking its own citizens. There's no doubt in my mind about who's responsible, but we also have ISIS, and we have a lot of other factions that are in-fighting, but also fighting Assad, so the dynamics are completely different.

I guess most of us would be concerned that a no-fly zone would possibly lead to an escalation of U.S. involvement in Syria because of the different factions. You know, you have ISIS take a manpad acquired from Lybia, and shoot down an American F-18. That's an escalation. And the rules of engagement currently against ISIS and Iraq keeps—there are many sorties flown every day that not a single bomb is loose because of the rules of engagement and waiting for clearance from some intelligence organization and up the chain

of command, and so I'm really concerned about how this whole no-fly zone would actually operate. I think there's a lot of unanswered questions. But don't let that concern give you any doubt about my commitment to try to make this work for a no-fly zone, because I do see how it would help the Syrian people. Yes, sir?

Ambassador FORD. One comment, Congressman. Having worked with our military in Iraq for almost 5 years, I have huge respect for what they do, and the risks that they take. They're already at risk of a surface-to-air missile hitting one of our pilots in an operation against the Islamic State. That risk already exists, and in fact it's been going on now for 9 months.

Mr. DUNCAN. In Western Iraq or in Syria?

Ambassador FORD. No, in Syria.

Mr. DUNCAN. Okay.

Ambassador FORD. We are bombing in Syria regularly. What concerns me is that what we have now does not protect civilians, and it's a military mission of unlimited duration. Nobody can tell us when it's going to end. It does not help get to a settlement of the Syria crisis. It's just out there hitting the Islamic State, but it doesn't lead to anything to resolve the fundamental conflict that is helping Islamic State recruit.

Ms. ROS-LEHTINEN. Thank you.

Mr. DUNCAN. Thank you, Ambassador. Thank you, Madam Chair.

Ms. ROS-LEHTINEN. Thank you, Mr. Duncan. Mr. Keating of Massachusetts.

Mr. KEATING. Thank you, Madam Chairman.

I'd suggest in response to that question, perhaps there's other reasons we're targeting in Syria for other groups working there, as well, so there's a reason. But I'm going to ask you to do something difficult. I'm going to ask you to try and get in the head of President Putin for a second, because to me, the way I view the situation, short term certainly we've discussed what he's done in the Security Council and things, but in the long term, Assad being there is not in Russia's self-interest. They've had a natural relationship with Syria, and his continuation, you know, as a leader there will hurt them, you know, in the short run because it will endanger the ability to go on with the administration after he leaves. And I do think he's in a more precarious situation than he was before. I do think he—one way or another, he'll be leaving there before long.

What can Russia do in that instance, even behind the scenes, to assist in his removal? What are their options should they choose to do so, because I think they have self-interest at stake here in removing him, or having him go? Ambassador, I guess you're the best person in this regard.

Ambassador FORD. Well, I think the Russian President views Syria as an ally, and so they obviously have interests and we have to understand that. I think in any kind of action where we increase assistance to the Syrian Armed Opposition to help stop these air attacks, or we undertake ourselves as part of a coalition direct military action, I think it will be important to reach out to the Russians. I think it would be very useful in terms of getting to the political negotiation I was talking about, Congressman, to have some kind of a regional contact group, and have that formalized so that

we're in a room talking with the Russians, and also with Turkey, and Saudi Arabia. And I'm going to say it, and Iran, because all of those countries are going to have to work together to help resolve the Syrian crisis. They all have their clients in this conflict. So, the things that Russia could do, Congressman, would be at the simplest level to stop sending spare parts to these helicopters and these aircraft. That would be the simplest thing, and they can do that quietly. They don't need to make any announcements. They need not lose face in doing that. It's simply a way of putting pressure on the regime to stop using these attacks against civilians.

They could limit financing. They could limit other arms shipments. They send a lot of arms into Syria. The Syrian Army is basically equipped by the Russians, and they can also quietly behind the scenes press the regime to go to the negotiating table, which also is important.

Mr. KEATING. Well, do you agree with the premise that, at least the way I view it, that Assad is definitely—his presence there is not in Russia's long term interest in the region there? And any one of the other witnesses that might want to comment on that, I'd welcome that testimony.

Dr. SPARROW. May I just quickly say that Russia and Putin also recognize that chemical weapons used against civilians plumb the depths, plumb new depths of inhumanity, and it's actually easier to get Russia to agree to a no-fly zone that protects civilians, as it also is with the Iraqi Prime Minister, with whom I've also had this conversation. We can get consensus around stopping the civilian slaughter which then helps those who are currently even supporting the Assad regime to achieve consensus around this no-fly zone and lead toward a political solution. It's helpful for everybody.

Mr. KEATING. Okay. Any of the other witnesses wish to comment on Russia's self-interest here in having Assad gone?

Dr. TENNARI. The long term interest of Russia would be in having a decent relationship with the Syrian people, and the Syrian people have made the decision that they no longer want to be ruled by Bashar al-Assad.

The presence of Assad in power has caused enormous chaos, and this chaos is added, and it's expanded on a daily basis. Getting Assad away from the front will open the road to a political solution. It will open the door for the Syrians to sit at the negotiation table and find a political solution to this crisis.

Mr. KEATING. Thank you. I yield back.

Ms. ROS-LEHTINEN. Thank you very much, Mr. Keating. Dr. Yoho of Florida.

Mr. YOHO. Thank you, Madam Chair. I appreciate everybody being here today.

I would like to just mention that we are introducing a resolution condemning the use of toxic chemicals as weapons in the Syrian Arab Republic, including chlorine substances along with a strong recommendation to the international community requesting no-fly zones, including helicopters. This has gone on way too long. It's something that needs to stop, and I'm kind of outraged that the world community and the U.N. Security Council has not acted on this sooner. I mean, how many times do we have to repeat history

with atrocity, after atrocity, after atrocity. This is the 21st century. We need to tighten up as a population or people.

Ambassador Ford, I want to direct—I've just got a comment or a question. Back in March, the end of March 2011, you stated that Assad is no Gaddafi. There is little likelihood of mass atrocities. The Syrian regime will answer challenges aggressively, but will try to minimize the use of lethal force. How did we miss that so wrongly?

Ambassador FORD. At the time, Congressman, in my discussions with the Syrian officials, including at the Presidency, including top advisors to Assad, they were telling me that they wanted a dialogue, and they made a few tentative steps toward a dialogue. They did release several prominent political prisoners, including Haitham al-Malah, and Riad Seif who had been imprisoned for years. It was my mistake of judgment, but I want you to understand that context.

Mr. YOHO. All right. We were talking of Libya at the time going in, doing a no-fly zone. And I hear a lot of no-fly zones, you know, we should do a no-fly zone. I just want to remind everybody a no-fly zone, number one, if we do that, is an act of war. We're attacking a sovereign nation that has not attacked us. They are not a direct threat to the United States of America. It is an act of war. A no-fly zone does not prevent helicopters from flying. A no-fly zone didn't prevent Saddam Hussein from slaughtering his own people when we had a no-fly zone there. A no-fly zone is not a solution, it's a military operation. Yes, it can be used to put more pressure on the Assad regime, but it is not an answer to the problem.

We did that in Libya, and Senator Cornyn out of Texas said the mission in Libya was unclear, and it was an international no-fly zone. And I think there was around 18 to 20 countries, and when it came time to participate, half of those countries didn't show up. The Americans had to do most of the lifting. We had 19 warships in there, 18,000 troops committed. The first 11 days cost \$550 million, and then \$40 million a month after that. And money is not the issue here. We're talking about human life, and the dignity of life, and stability in that area. But NATO was unable to finish the job on its own, and there was no plan post-Gaddafi. And now Libya is becoming the hotbed for ISIS. It's becoming the home base for ISIS.

What are we doing to prevent a repeat of that? If we were to do this and Assad falls, what is going to be replaced there, and is it going to be worse, because we saw al-Qaeda fall. We saw it, you know, almost beat down, and then out of that came ISIS. It's al-Qaeda Part 2. I'm not ready for Part 3. Ambassador Ford, if you'd comment on that.

Ambassador FORD. You raise valid questions. My response to that is that after Gaddafi fell, there was not a strong plan in place for the transition government in Libya to establish a monopoly of force. The militias were not disarmed.

Whatever is negotiated for Syria, and I emphasize the word "negotiation," I do not think it is possible to have a military solution in Syria, certainly not any time soon. Those negotiations between the government and the Syrian Opposition must include negotiations about how security will be handled, and how the government,

ultimately, will have the monopoly of force, because that government will have to fight the extremists of al-Qaeda and the Islamic State. And that will have to be one of the things that comes out of the negotiation.

Mr. YOHO. Well, I would hope before we go into a no-fly zone we have a clear, concise strategy of what happens post-Assad? What happens? Who's going to be there? Who's going to be standing up protecting the Syrian people, who in Syria is going to do that, and where is that support going to come from on an international basis? And you talked about Russia, you know, they could stop sending parts. My experience and what I found out especially with the meeting today is Russia will not support Assad, because Assad is suppressing his people. And Putin's number one fear is for an uprising in a zone area with people, and you could see that happening in Ukraine with the beginning of the uprising there. And Putin is deathly afraid of that, so if he's supporting Assad, his people in Russia are saying you know what, we don't want to go against this guy. And until the world community comes together, until America leads, and we have lost our way when we draw red lines and we back off, when we ask for regime change and we back off, and we need to say what we mean, and mean what we say, and we need to back that up with action. And we need to have the courage, and we need to have the big stick; but, more importantly, people need to know we're going to use that. And I hope in the future we progress down those avenues. Madam Chair, I yield back.

Ms. ROS-LEHTINEN. Thank you so much. Thank you, Dr. Yoho. Mr. Perry of Pennsylvania.

Mr. PERRY. Thank you, Madam Chair, and thank the witnesses and the other folks for being here.

I just want to start out with a statement regarding one of my colleagues from the other side that said that we screwed up Iraq. It is this member's opinion that there are a few folks in this town that screwed up Iraq, but it certainly wasn't the military, and it wasn't the Congress, either. Iraq was a stable place not too long ago, and that's at the feet of a couple of individuals in this town, in my opinion.

With that having been said, Ambassador Ford, you stated earlier today that the events in Syria are a national security issue, and I tend to agree with you, but we don't have this Chapter 7 situation resolved. And so, I think you're advocating for it, so I just want to be clear and have your remarks clarified, that in spite of a lack of Chapter 7 authority, that we should—the United States should take some action. Is that—some action. Right?

Ambassador FORD. Yes. I don't think we have to have a no-fly zone. I certainly see advantages to a no-fly zone, but if that's just too big a stretch, if that's just too difficult in Washington to do, then at least I would like to see us help the Syrian Armed Opposition deter and interdict these attacks. And whether that be by giving them standoff mortars and rockets so they can hit the airfields from which the helicopters take off, whether that be radar so they can detect—

Mr. PERRY. So, you're not wed to the no-fly zone.

Ambassador FORD. No.

Mr. PERRY. But that is a—

Ambassador FORD. I see advantages to it, but I know there's a lot of opposition in Washington.

Mr. PERRY. Let me ask you this. The Syrian Government has not been officially determined responsible for the chlorine gas attacks, and that's kind of the impetus for much of this discussion, right, the weapons of mass destruction, the chemical weapons, weaponized chlorine.

What are we doing? What's the administration, what's the United States doing about pursuing a unilateral strategy to determine official responsibility? Are we doing anything? Should we be doing anything? Because we can't get it through the U.N., right? Russia is going to stand in the way. So, if that's the case, and we're left with arming some faction in Syria, or a no-fly zone, would it be smart and would it be possible to pursue a way to degrade Assad's use of his air force via lack of parts and maintenance provisions from Russia? But, you know, we've got to get to that. And it seems to me in this morass of very difficult circumstances, that that is something that should and could be pursued, and it gets us to where we want to be without putting lives in peril of the United States, and everything else, and jeopardy that goes with that.

Ambassador FORD. If I understand the administration's policy, Congressman, they are trying to work this now in New York and trying to get Russian buy-in for an investigative team of some kind to go and determine responsibility. I think the negotiations with the Russians would be somewhat easier if the Russians understood that failing U.N. Security Council agreement, the United States is prepared to work with a coalition of like-minded countries to act itself; whether that be in terms of a no-fly zone, or if that's too much heavy lifting, then at least to provide people, Syrians on the ground the ability to interdict those air strikes.

Mr. PERRY. Do you know how long that process has been going on? I think if I'm Russia, if I'm Putin, I want to play out the clock. I want Assad to stay there as long as he can. If he's imperiled a little bit or a lot, so what? I keep my Navy base there, and everybody's happy. Right?

Ambassador FORD. I think this has been in play for at least 2 months now, and I think it goes faster if the Russians understand that we ourselves are prepared to operate with a small coalition of like-minded countries—

Mr. PERRY. Can you tell me who the small coalition of the like-minded would be?

Ambassador FORD. Oh, it would include Turkey, Jordan, Saudi Arabia, Qatar, France, probably the British, at least those, and I would think—

Mr. PERRY. That would be willing to work in a no-fly zone capacity?

Ambassador FORD. Yes.

Mr. PERRY. Those—who would run such a thing?

Ambassador FORD. Oh, I would think everyone would look to the United States to do that. Our military command and control capabilities far exceed those of any of the countries I mentioned.

Mr. PERRY. What do we do about the Russian anti-aircraft weapons that were shipped to Syria?

Ambassador FORD. Well, we already have that problem, because we're already flying combat missions over Syria regularly. So, I think what we want to do is tell the Russians—if we're going to do this kind of military action, we want to tell the Russians that the point is both to stop the attacks, and to get to the negotiating table, and to re-energize the Russians to help us get there.

Mr. PERRY. Thank you.

Ms. ROS-LEHTINEN. Thank you very much, and I want to thank all of the panelists for excellent testimony on this crucial humanitarian crisis that engulfs us everyday. We hope we take action soon.

And with that, the committee is adjourned.

[Whereupon, at 12:11 p.m., the committee was adjourned.]

APPENDIX

MATERIAL SUBMITTED FOR THE RECORD

**FULL COMMITTEE HEARING NOTICE
COMMITTEE ON FOREIGN AFFAIRS
U.S. HOUSE OF REPRESENTATIVES
WASHINGTON, DC 20515-6128**

Edward R. Royce (R-CA), Chairman

June 17, 2015

TO: MEMBERS OF THE COMMITTEE ON FOREIGN AFFAIRS

You are respectfully requested to attend an OPEN hearing of the Committee on Foreign Affairs, to be held in Room 2172 of the Rayburn House Office Building (and available live on the Committee website at <http://www.ForeignAffairs.house.gov>):

DATE: Wednesday, June 17, 2015

TIME: 10:00 a.m.

SUBJECT: Assad's Abhorrent Chemical Weapons Attacks

WITNESSES: The Honorable Robert Ford
Senior Fellow
The Middle East Institute

Mohamed Tennari, M.D.
Idlib Coordinator
Syrian-American Medical Society

Mr. Farouq Habib
Syria Program Manager
Mayday Rescue

Annic Sparrow, M.B.B.S.
Deputy Director Human Rights Program
Assistant Professor of Global Health
Icahn School of Medicine at Mount Sinai

By Direction of the Chairman

The Committee on Foreign Affairs seeks to make its facilities accessible to persons with disabilities. If you are in need of special accommodations, please call 202-225-5021 at least four business days in advance of the event, whenever practicable. Questions with regard to special accommodations in general (including availability of Committee materials in alternative formats and assistive listening devices) may be directed to the Committee.



COMMITTEE ON FOREIGN AFFAIRS
MINUTES OF FULL COMMITTEE HEARING

Day Wednesday Date 6/17/2015 Room RHOB 2172

Starting Time 10:06 Ending Time 12:11

Recesses 0 (___ to ___) (___ to ___) (___ to ___) (___ to ___) (___ to ___) (___ to ___)

Presiding Member(s)

Chairman Edward R. Royce, Rep. Heama Ros-Lehtinen

Check all of the following that apply:

Open Session

Electronically Recorded (taped)

Executive (closed) Session

Stenographic Record

Televised

TITLE OF HEARING:

Assad's Abhorrent Chemical Weapons Attacks

COMMITTEE MEMBERS PRESENT:

See attached.

NON-COMMITTEE MEMBERS PRESENT:

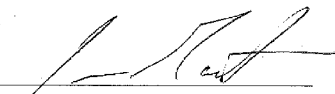
None.

HEARING WITNESSES: Same as meeting notice attached? Yes No
(If "no", please list below and include title, agency, department, or organization.)

STATEMENTS FOR THE RECORD: *(List any statements submitted for the record.)*

- IFR - Mohamed Tennari, M.D.*
- IFR - Mr. Farouq Habib*
- IFR - Annie Sparrow, M.B.B.S.*
- IFR - Annie Sparrow, M.B.B.S.*
- SFR - Rep. Gerald Connolly*

TIME SCHEDULED TO RECONVENE _____
or
TIME ADJOURNED 12:11



Jean Marter, Director of Committee Operations

HOUSE COMMITTEE ON FOREIGN AFFAIRS
FULL COMMITTEE HEARING


<i>PRESENT</i>	<i>MEMBER</i>
X	Edward R. Royce, CA
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X	Ileana Ros-Lehtinen, FL
X	Dana Rohrabacher, CA
X	Steve Chabot, OH
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MATERIAL SUBMITTED FOR THE RECORD BY MOHAMED TENNARI, M.D., IDLIB
COORDINATOR, SYRIAN-AMERICAN MEDICAL SOCIETY

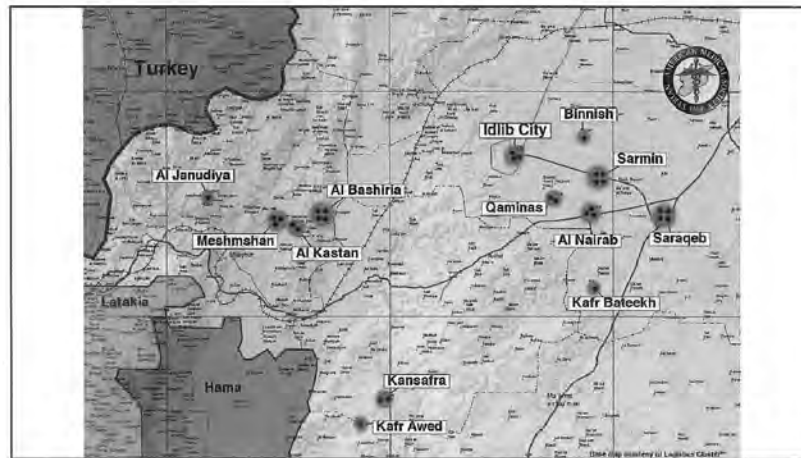


المشفى الميداني في سرمين
Field Hospital in the city of Sarmin



Dr. Mohamed Tennari

The Continued Use of Chemical Weapons by the Assad Regime
House Committee on Foreign Affairs







March:

March 24, Binnish: 30 affected by chemical exposure.



April:

April 16, Idlib City: 40 affected by chemical exposure.



May:

May 3, Kansafr: 25 affected by chemical exposure.



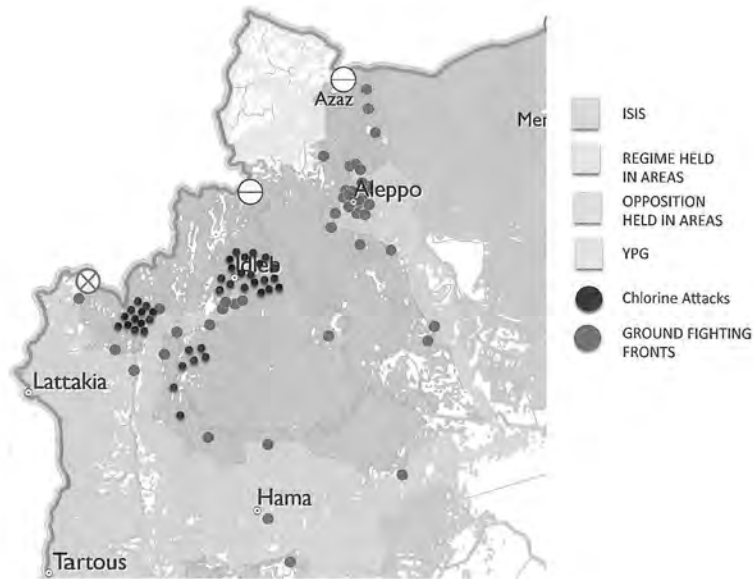
June:

June 7, Al Kastan: 8 affected by chemical exposure.

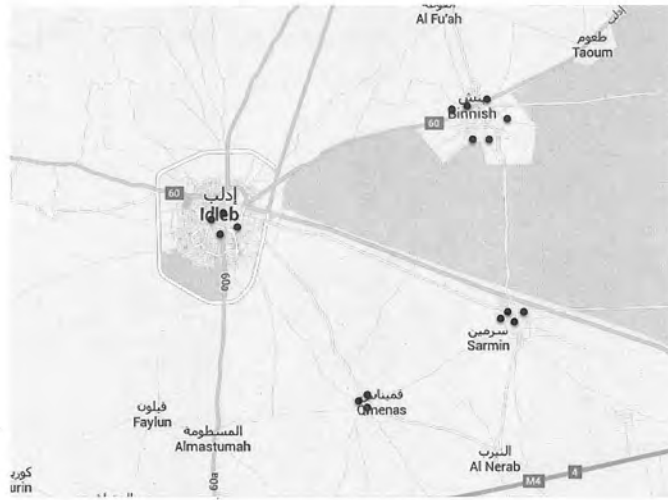


MATERIAL SUBMITTED FOR THE RECORD BY MR. FAROUQ HABIB, SYRIA PROGRAM
MANAGER, MAYDAY RESCUE

Chlorine Attacks by the Syrian Regime Since March 16, 2015



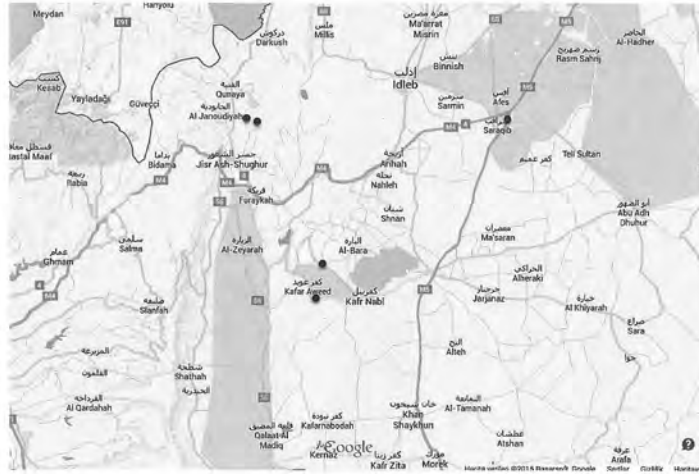
March Attacks



April Attacks – Idlib

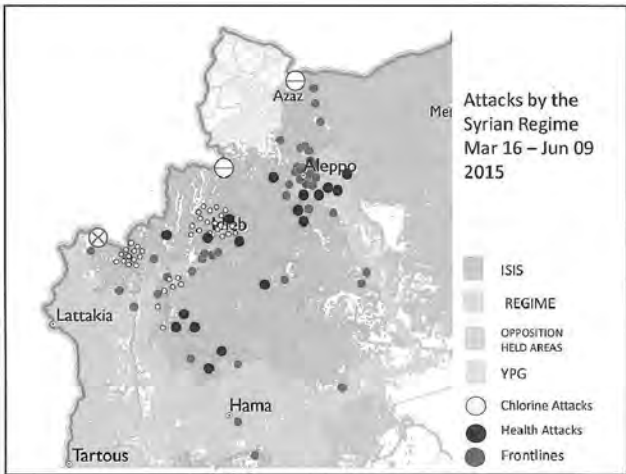


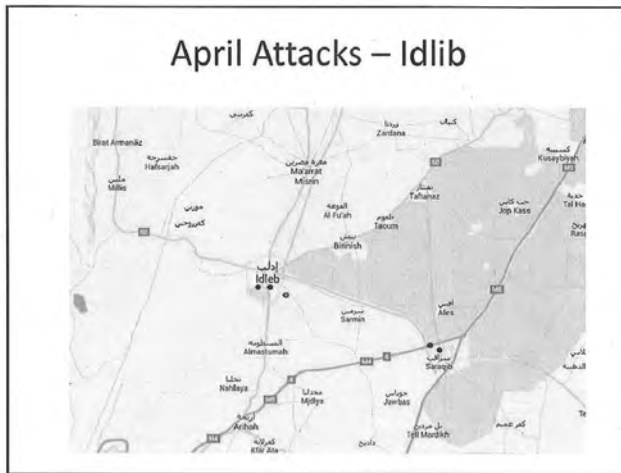
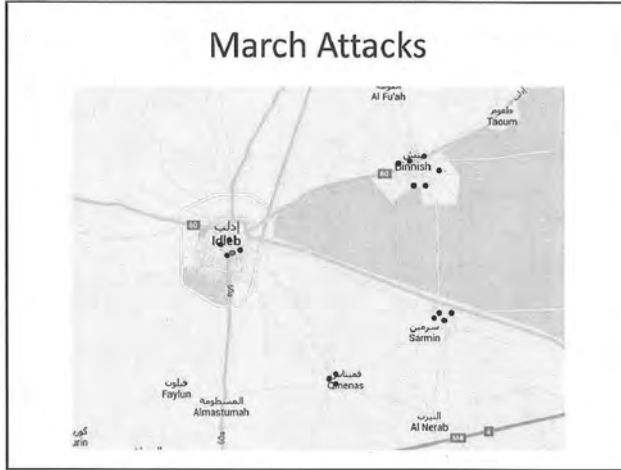
June Attacks

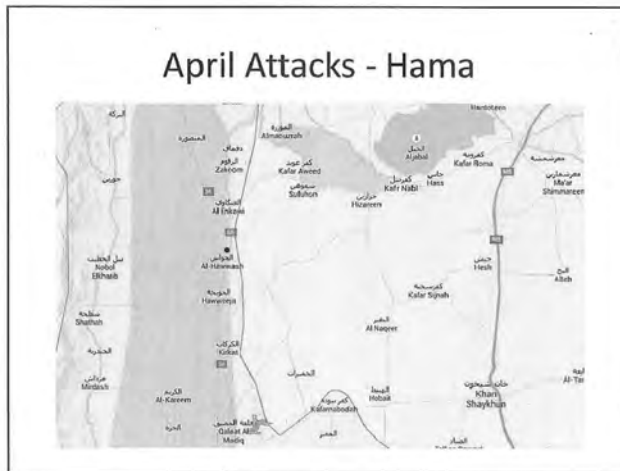


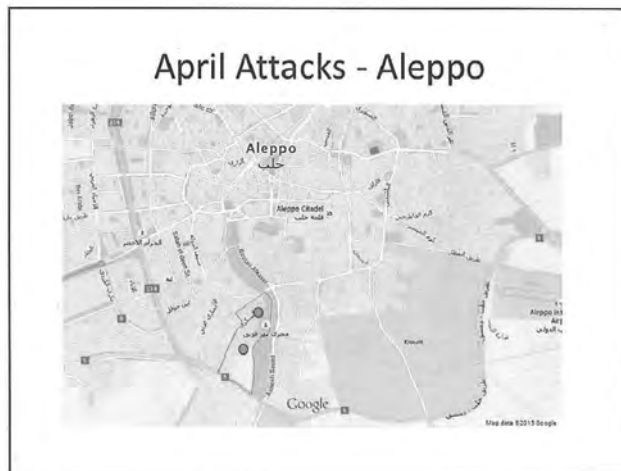
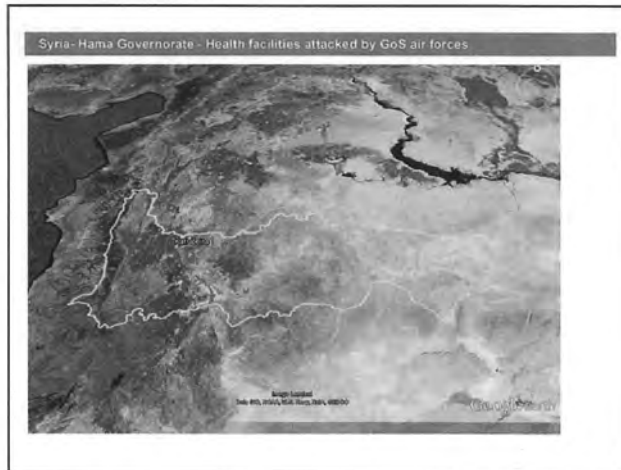
MATERIAL SUBMITTED FOR THE RECORD BY ANNIE SPARROW, M.B.B.S., DEPUTY DIRECTOR HUMAN RIGHTS PROGRAM, ASSISTANT PROFESSOR OF GLOBAL HEALTH, ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI

Health Facilities Attacks by the Syrian Regime Since March 16, 2015

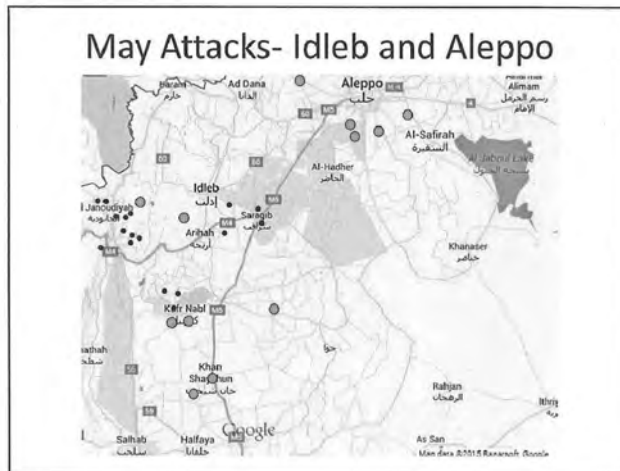








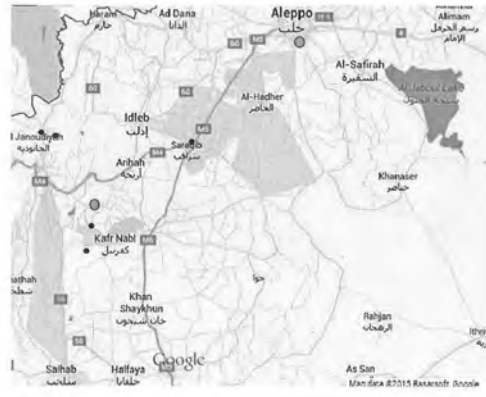




May Attacks – Deir Ez-Zor



June Attacks- Idlib and Aleppo



June Attacks – Duma



DATE	Government of Syria Forces					Opposition Groups			ISIS			Unknown	
	Attack	Blocked Access	Amb	Death	Other	Attack	Blocked Access	Amb	Attack	Blocked Access	Amb		
29-Mar-15	1												Mar 29 (Government of Syria): National hospital and RC Hospital in Idlib city, also destroyed Children's ward in National Hospital
3-Apr-15									1				April 3 (ISIS): ISIS was able to have control of all equipments inside the hospital Alba' in Deir Ezzor city
14-Apr-15	1												April 14 (Government of Syria): Attack on ambulance station in Idlib
28-Apr-15	1												April 28 (Government of Syria): One of two attacks on a field hospital in Aleppo (see immediately below on consecutive days)
29-Apr-15	1												April 29 (Government of Syria): Same field hospital as immediately above in Aleppo
2-May-15	1												May 2 (Government of Syria): Near Taqwa hospital in the city of Deir Azor
	1												May 2 (Government of Syria): Orient Surgical Hospital in the city of Maarat al-Roman in Idlib
3-May-15	1		1										May 3 (Government of Syria): Forensic Medical Office in the neighborhood of Al-Sukkari in Aleppo (also damaged an ambulance)
	1												May 3 (Government of Syria): A car full of explosives has exploded in front of the field hospital in Tal Shihab in Dar'aa, and caused physical damages to the building of the hospital.
			1										May 3 (Government of Syria): near an ambulance belonging to the Hospital of the Martyr Daama Ablag in the city of Jar Al-Shughour in Idlib, which caused moderate damages.
4-May-15									1				May 4 (ISIS): ISIS transported all equipment from the hospital in the town of Al-Harba in countryside of Deir Azor to the General Hospital in the city of Ma'adin in countryside of Al-Raqqa
	1												May 4 (Government of Syria): Darkeesh Field Hospital in Idlib (also destroyed) (see immediately below on consecutive days)
6-May-15	1			1									May 6 (Government of Syria): Darkeesh Field Hospital in Idlib (also destroyed) (see immediately below on consecutive days)
7-May-15	1												May 7 (Government of Syria): Central Surgical Hospital of Hama in the village of Jazreen in Idlib
8-May-15	1												May 8 (Government of Syria): Medical clinic in the village of Al-Boleel in the countryside of Deir Azor
	1												May 8 (Government of Syria): Near Bogros Field Hospital in the village of Bogros Tahtani in the countryside of Deir Azor
9-May-15	1		2										May 9 (Government of Syria): Near Al-Ashhabiyya Hospital in the countryside of Damascus (also damaged two ambulances belonging to the hospital, one which became out of service)
12-May-15	1		2										May 12 (Government of Syria): Ambulance center in the neighborhood of Jab Al-Qobba in Aleppo (also caused major damages to two ambulances belonging to the center)
14-May-15	1		3										May 14 (Government of Syria): Medical Center of the Martyr Abdel Haq Fares in the neighborhood of Al-Salheen in Aleppo (also caused partial damages to one ambulance belonging to the clinic.)
	1		3										May 14 (Government of Syria): Civil Defense Center in the city of Khan Sheikhoun in Idlib, and caused material damages to three ambulances belonging to the center.
15-May-15						1		1					May 15 (Armed Opposition Groups): An ambulance for the Syrian Arab Red Crescent was attacked with fire in an area under armed opposition
	1												May 15 (Government of Syria): Modern Medicine Hospital in the city of Mayadeen in Deir Azor
		1											May 15 (Government of Syria): Government forces blocked the transport of injured civilians to the national hospital in city of Tadmur (Palmyra) in Homs
16-May-15	1												May 16 (Government of Syria): National Hospital in the city of Abukamal in Deir Azor 4 missiles, killed a girl and a woman, put hospital out of service.
	1												May 16 (Govt of Syria) - General hospital in the city of Ma'adin in eastern Al-Raqqa (missile)
	1												May 16 (Government of Syria): Central Hospital of Hama in the village of Jazreen in Idlib
23-May-15	1												May 23 (Government of Syria): Forensic Medical Office in the neighborhood of Al-Sukkari in Aleppo, and caused huge destruction to the building, thus it became out of service. Barrel bomb
24-May-15				2									May 24 (Government of Syria): Specialized hospital in Kafar Zeta in Hama greatly destroyed and out of service. 2 staff killed. Anesthetic technician and administrator killed. Barrel bomb.
	1												May 24 (Government of Syria): 3 hospitals attacked in Idlib (Kawan Hospital in Kafrta, Orient Hospital in Gubayra, Almagh Hospital

DATE	Government of Syria Forces					Opposition Groups			ISIS			Unknown	
	1	2	12	3	4	5	6	7	8	9	10		
	1												May 24 (Government of Syria): Field hospital in Al-Rasheyya, IDB Missile
25-May-15	1												May 25 (Government of Syria): Near Alhuda Hospital in the town of Hoor in the countryside of Aleppo, which killed one person and caused material damage to the building, 2 thermal missiles.
26-May-15	1												May 26 (Government of Syria): Alhuda Hospital in the town of Hoor in the countryside of Aleppo, which caused a partial destruction in the highest floor of the building, and major damage to other floors of the building, 1 missile.
31-May-15	1												May 31 (Government of Syria): Omar Ibn Abdel Azeez Hospital in the neighborhood of Alma'ady in Aleppo (caused major material damage to the building, out of service), Barrel bomb
									1				May 31 (IS): ISIS closed closed Alhena's specialized hospital for surgery and birthing/deliveries in the city of Albolamal in Deir Azzor
									1				May 31 (IS): ISIS closed the main medical clinic in the city of Albolamal in Deir Azzor
9-Jun-15	1												June 8 (Government of Syria): Chlorine attack on hospital in Karsafra in Idlib
11-Jun-15	1												June 11 (Government of Syria): Barrel bomb on Al Kahr hospital in Aleppo
15-Jun-15	1												June 14 (Government of Syria): Damascus Rural Hospital (National hospital of Douma)
	35	1	2	12	3	2	0	1	0	4	0	0	
Total	35					1				4			1
	40	88%				3%				10%			3%

Statement for the Record*Submitted by Mr. Connolly of Virginia*

In September 2013, President Bashar al-Assad's military carried out a chemical weapons attack on civilians living in the suburbs of Damascus. Images of the sarin gas attack were horrifying and laid bare the nature of brutality President Assad deploys against his own people.

The attack violated a redline for U.S. military intervention previously set by President Obama, and the President sought an Authorization for the Use of Military Force (AUMF) from Congress. However, Congress demurred. For an institution that constantly laments its subjugation at the hands of the Executive Branch, the retreat from its own prerogative was stunning. What could have been a demonstration of international resolve to punish the use of chemical weapons became yet another instance of Congress abrogating its constitutional duty.

The subsequent international intervention touted the promise of eradicating Assad's chemical weapons program and a cessation of chemical weapons attacks in Syria. The Organization for the Prohibition of Chemical Weapons-United Nations (OPCW-UN) joint mission launched an operation that has destroyed chemical weapons facilities and 98% of Assad's declared Category 1 and Category 2 chemical stockpiles.

However, time and continued hostilities have proven the agreement to be a hollow victory. In direct violation of the agreement, Assad has deployed chlorine as a chemical weapon. Assad's forces drop chlorine barrel bombs on civilian populations, and, in some instances, attack the Syrian civil defense volunteers who serve as the first responders in the wake of a bombing.

Unfortunately, this Committee can no longer be shocked by the extent of Assad's brutality. In July 2014, the Committee heard testimony from a regime defector who documented the systematic torture and murder of 11,000 Syrians. The inability of the international community to act in concert to remove Assad from power will be felt through generations. With nine million Syrians displaced from their homes, the refugee crisis already stands to remake the demographics of the region and is destabilizing neighboring countries.

Despite the seemingly hopeless situation in Syria, there are opportunities for constructive action. Russia cannot continue to excuse Assad's violations of the Chemical Weapons Convention (CWC), which Syria signed as part of the 2013 agreement. The U.S. must broadcast the depravity of Assad and, by connection, those who enable his regime. If one accepts that the Islamic State of Iraq and the Levant (ISIL) is a threat to regional security that must be eliminated, it is hard to draw a distinction with the nature of the threat posed by Assad.

