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Submitted by: eyeWitness to Atrocities
Insecurity Insight
Media Initiative for Human Rights
Physicians for Human Rights
Ukrainian Healthcare Center

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eyeWitness to Atrocities, initiated by the International Bar Association in 2015, seeks to bring the perpetrators of atrocities to justice by providing legal and technical expertise in building photo and video dossiers that can be authenticated for use in criminal investigations or trials.

Website: <https://www.eyewitness.global/>

Insecurity Insight is a humanitarian to humanitarian (H2H) organization that aims to elevate the voices of those affected by insecurity and to raise awareness of the impact of violence. Insecurity Insight has been monitoring violence against health care since 2008 and generates data for the Safeguarding Health in Conflict Coalition (SHCC) on attacks on health care. Its innovative data collection and analysis methods have generated insights relevant for aid workers, aid agencies, and those concerned with the protection of health workers, educators, internally displaced persons, and refugees.

Website: <https://insecurityinsight.org/>

Media Initiative for Human Rights has been advocating for Ukraine's integration into the free world since 2016. Its main areas of activity are the investigation of war crimes committed in connection with the Russian aggression in Ukraine and advocacy to support compliance with and observance of human rights and freedoms.

Website: <https://mipl.org.ua/en/>

Physicians for Human Rights is a human rights organization founded in 1986 working at the intersection of medicine, science and the law that documents and seeks accountability for violations of human rights and other international crimes. It has a particular focus on protecting health facilities and health professionals providing medical assistance and care during conflict.

Website: <https://phr.org/>

Ukrainian Healthcare Center is a think tank based in Kyiv, Ukraine, providing consultancy, analytics, and educational services since 2021. Its core competencies include health system policy and governance, health economics and financing, and health system transformation. UHC began documenting attacks on health care in February 2022, after the full-scale Russian invasion began.

Website: <https://uhc.org.ua/en/home/>

I. Summary

1. eyeWitness to Atrocities, Insecurity Insight, Media Initiative for Human Rights, Physicians for Human Rights, and the Ukrainian Healthcare Center (together, the submitting organizations) jointly submit this report to inform the examination of the Russian Federation (Russia) during its Universal Periodic Review (UPR). This submission focuses on international humanitarian and human rights law concerns relating to health care since Russia's full-scale invasion of Ukraine on February 24, 2022.

2. On February 24, 2022, Russia launched a full-scale invasion of Ukraine, violating international law and drawing widespread condemnation from the international community. The conflict has been characterized by attacks on civilians and civilian objects, including the health care system. These attacks constitute violations of applicable international humanitarian law (IHL) rules and international human rights law, including war crimes and possibly crimes against humanity. They also have had a devastating impact on the fulfillment of the human right to health of the inhabitants of Ukraine.

3. Specifically, this submission raises the following concerns:

- (1) Violations of IHL: Deliberate and indiscriminate attacks on Ukraine's health care system;
- (2) Violations of human rights in Russia-controlled territories: Torture and ill-treatment of those in captivity, including health care professionals, and deprivation of adequate medical care;
- (3) Impact of Russia's violations on Ukraine's ability to ensure the respect, protection and fulfillment of the human right to health of individuals within its territory and subject to its jurisdiction.

4. On November 13, 2023, Russia is scheduled for examination at the fourth cycle of UPR. In addition to launching an illegal war since the third cycle of the UPR in 2018, Russia has largely failed to implement prior recommendations relevant to the scope of this submission, including to: accede to the Optional Protocol to the United Nations Convention against Torture, ratify the Rome Statute of the International Criminal Court, end its illegal occupation of Crimea, cooperate fully and ensure access to Crimea and other occupied Ukrainian territory to all international human rights mechanisms, investigate and prosecute allegations of torture and inhuman treatment in custody, and release unlawfully detained Ukrainian citizens.¹

II. Relevant Legal Framework

5. **International Humanitarian Law:** As a party to the Geneva Conventions of 1949 and their Additional Protocol I of 1977, Russia is bound to comply with IHL. Many of the rules contained in these instruments also have the status of customary international law. At the heart of the IHL framework lie several interrelated principles and legal obligations – including the principles of distinction, proportionality, and precaution – which together lay the basis for the protection of civilians and civilian objects in armed conflict. Health care facilities, providers, and ambulances are further afforded special protection under IHL so as to mitigate the impact of conflicts on their work and ensure the delivery of care to the sick and injured.

6. **International Human Rights Law:** Russia is a party to most major human rights instruments. Of relevance to this submission, Russia ratified the International Covenant on Civil and Political Rights, the United Nations Convention against Torture, and the International Covenant on Economic, Social, and Cultural Rights.² While States bear the primary responsibility to respect, protect, and fulfil human rights within their territory, human rights also have an extraterritorial dimension. Extraterritorial protection

applies to those within the power or effective control of the forces of a State party acting outside its territory.³ The Maastricht Principles on Extraterritorial Obligations of States in the Area of Economic, Social, and Cultural Rights also provide that “all States have the obligation to refrain from conduct which nullifies or impairs the enjoyment and exercise of economic, social and cultural rights of persons outside their territories.”⁴

III. Violations of IHL: Deliberate and Indiscriminate Attacks on Ukraine’s Health Care System

7. In 2022, at least 2095 attacks on health care were perpetrated in conflict-affected situations globally.⁵ More than a third of these attacks were documented in Ukraine amid Russia’s full-scale invasion.

8. In February 2023, the submitting organizations launched an online, interactive map of attacks on Ukraine’s health care system since February 24, 2022.⁶ The map, regularly updated, reveals that, as of the date of submission, between February 24, 2022, and March 04, 2023, there were at least 788 documented attacks against Ukraine’s health care system, amounting to an average of two attacks every day. Among these, there were 322 attacks on hospitals and clinics, 67 attacks on ambulances, and 100 attacks on health care workers, with 83 health care workers killed and 68 injured. Many other health care professionals were threatened, imprisoned, taken hostage, and forced to work under Russian occupation. Nearly one in ten of Ukraine’s hospitals were directly damaged by these attacks, both targeted and indiscriminate, with 53 hospitals hit multiple times. A notable number of attacks (at least 53) also included power cuts resulting from attacks on Ukraine’s energy infrastructure, which have affected the ability of health care facilities, ranging from hospitals to retail pharmacies, to remain operational. While the map does not attempt to identify the potential perpetrators of these attacks, it provides a visual depiction of the scale and widespread nature of attacks on Ukraine’s health care system.

9. Along with the online, interactive map, the submitting organizations issued a report entitled “Destruction and Devastation: One Year of Russia’s Assault on Ukraine’s Health Care System” (Health Care Report).⁷ The Report documents how Russia appears to have both deliberately and indiscriminately attacked Ukraine’s health care system – including facilities, ambulances, critical infrastructure and supplies, and workers – as part of a broader attack on Ukraine’s civilian population and infrastructure. Drawing on a range of sources, including audiovisual evidence, site visits, primary source interviews with health care providers, open-source research, and public reports from several international fact-finding bodies and non-governmental organizations, the report details ten case studies of attacks on Ukraine’s health care system, overwhelmingly by the Russian military:

- Izium Central City Hospital (March 2-8, 2022) (Health Care Report, Case Study #1): The Hospital was damaged on several occasions and struck directly at least once. Part of the facility’s main building, intensive care unit, the entrance to the emergency department, and operating block were destroyed due to large conventional artillery rounds and airstrikes attributed to Russian forces. The Hospital was operational as it came under attack, and its technical building was marked with a red cross visible from the sky.
- Makariv Multiprofile Intensive Care Hospital, Primary Care Clinic and Adonis Medical Center (February-March 2022) (Health Care Report, Case Study #2): The Hospital and Clinic, located on the same campus, were shelled several times from multiple launch rocket systems, tanks, and mortars reportedly placed by Russian forces 100-300 meters from the grounds of the facilities. Some of these attacks took place prior to the facilities’ evacuation, while they were still operational. The Adonis Medical Center was also hit in a series of airstrikes reportedly launched

by Russian forces; these caused the destruction of the facility and significant damage to several other civilian objects located in the city center of Makariv, including apartment buildings and schools. Overall, these attacks led to the severe disruption of health services in the Makariv community.

- Chernihiv Regional Children's Hospital (March 17, 2022) (Health Care Report, Case Study #3): The shelling of civilian areas in the city center as Russian forces encircled the city led to significant damage to the Hospital, in addition to widespread casualties and injuries. At the time of the attack, the Hospital was operational and civilians were sheltering on its premises. Munition fragments and debris of cluster munitions, likely launched from Russian-controlled areas towards the city center of Chernihiv, were found on the Hospital's grounds and surrounding areas.
- Bashtanka Multiprofile Hospital (April 19, 2022) (Health Care Report, Case Study #4): The Hospital was struck by what appears to be a Russian precision-guided cruise missile, possibly from the Black Sea. The institution's security personnel were reportedly injured, and around 30-40 percent of the hospital's premises was destroyed. Medical personnel were in the midst of providing care to patients at the time of the attack and there was a painted red cross on the roof of the facility, clearly indicating its status as a medical facility.
- Trostianets City Hospital (March 2022) (Health Care Report, Case Study #5): The Hospital, which bore a large sign indicating it was a medical facility, was reportedly shelled in a series of attacks attributed to Russian tanks. While there was ongoing fighting in the area and Ukrainian forces may have been in the vicinity of the Hospital or on the territory of the Hospital on one occasion, the Hospital reportedly continued to operate exclusively as a medical facility, albeit at reduced capacity. As a result of attacks, there was significant damage to the facility - with the hospital's operating room being burned, the roof of the infectious disease department fully destroyed, the gynaecology, maternity, and surgical wards damaged - and hospital workers had to work without power, heating, and almost no water.
- Ambulance Attack in Lyman (April 18, 2022) (Health Care Report, Case Study #6): An ambulance was fired at with at least a dozen rounds while responding to an emergency call. Note that the Health Care Report also lists other attacks on ambulances, including at the premises of hospitals or while responding to calls, in several oblasts of Ukraine (Health Care Report, p. 36).
- Balakliia Clinical Multiprofile Intensive Care Hospital (April-September 2022) (Health Care Report, Case Study #7): After attacking the Hospital and establishing a base on its premises, Russian forces reportedly stole everything they were able to carry, including medical equipment, ambulances, electronics, appliances, and furniture. Note that the Health Care Report also lists other instances of theft and destruction of medical equipment in other several oblasts of Ukraine (Health Care Report, p. 39).
- Kherson Regional Clinical Hospital (February-July 2022) (Health Care Report, Case Study #8): A doctor recounted his experience providing health care under occupation. According to the doctor, Russian forces forced Hospital personnel to cooperate, detained the hospital's management, and demanded access to the electronic database of patients. The doctor also recounted that Russian "entrepreneurs" appropriated pharmacies.
- Mariupol Regional Intensive Care Hospital (March 2022) (Health Care Report, Case Study #9): A doctor recounted her experience providing health care under bombardment. According to the doctor, the Hospital was hit by several missiles in February and March 2022 before being occupied by Russian forces. There, health care workers and patients became hostages, threatened with death and deportation to Russia by occupiers.

- Garrison Hospital No. 555 (March-November 2022) (Health Care Report, Case Study #10): A doctor recounted his experience in captivity at two Russian-controlled correctional colonies, where he provided care to the sick and wounded in cruel, inhuman conditions.

10. The Health Care Report concludes that there is a reasonable basis to believe that attacks on Ukraine's health care system constitute war crimes and possibly crimes against humanity. While each and every incident requires further investigation by relevant domestic, regional, and international mechanisms, attacks can also constitute crimes against humanity when committed as part of a state policy on a widespread or systematic basis.

11. The Health Care Report's analysis is consistent with the findings of other international human rights investigating teams. For instance, in its report covering the first five weeks of the full-scale invasion, the Organization for Security and Co-operation in Europe's Moscow Mechanism (OSCE Moscow Mechanism) noted that "[i]t is not conceivable that ... so many civilian objects, including ... hospitals ... would have been damaged or destroyed if Russia had respected its IHL obligations in terms of distinction, proportionality and precautions in conducting hostilities in Ukraine."⁸ Had Russian forces respected these obligations "concerning specially protected objects such as hospitals, the number of civilians killed or injured would have remained much lower."⁹

12. Similarly, in its interim report, the United Nations Independent International Commission of Inquiry on Ukraine (UN CoI) found that Russian forces were responsible for the vast majority of human rights and IHL violations committed in Ukraine since February 24, 2022;¹⁰ noting that fighting and attacks affected "a significant number of hospitals."¹¹ The UN CoI also documented indiscriminate attacks with the use of cluster munitions on one of the attacked hospitals.¹² In its most recent report, of March 2023, the UN CoI reiterated its findings, concluding that attacks on civilian buildings, including medical institutions, demonstrate a failure to take precautions – "the special protected status of medical institutions should have led [Russian armed forces] to take extra care."¹³

IV. Violations of Human Rights in Areas under Russia's Control: Torture and/or Ill-Treatment and Deprivation of Adequate Medical Care

13. Between August and October 2022, the United Nations Human Rights Monitoring Mission in Ukraine documented "widespread practices of torture and ill-treatment in places of internment in the Russian Federation and in Ukrainian territory it occupies."¹⁴ The OSCE Moscow Mechanism's third report made similar findings¹⁵ and reported disruptions to access to health care in occupied territories.¹⁶

14. In the Health Care Report, the submitting organizations detail the testimony of a doctor who was held in captivity at two Russian-controlled correctional colonies – Olenivka Correctional Colony No. 120 and Kalinin Correctional Colony No. 27 – in the Donetsk oblast (Health Care Report, Case Study #10). There, doctors and other prisoners were subjected to physical violence and underwent the so-called "admission procedure" – those in captivity were forced to sit for hours in "slav squat," a position requiring them to lock their hands behind their neck and squat, heels to the ground. Those who moved were beaten with clubs and rubber batons or kicked.¹⁷ The conditions in which captives, including health care workers, were held – overcrowding, lack of beds, and inadequate access to food and water – fell short of the minimum standards of humane detention. Doctors also witnessed guards denying care to injured prisoners. People died as a result of insufficient medical supplies, lack of sanitary conditions, refusal to evacuate patients to the hospital, and extreme beatings. Wounded prisoners would be left to die "if the chief was not in the mood" to evacuate them. On another occasion, a wounded man was beaten to death at Olenivka Correctional Colony No. 120.

15. The Health Care Report also details the testimony of Dr. Oksana Kyrsanova, an anesthesiologist who worked at the Regional Intensive Care Hospital in Mariupol when it was occupied by Russian forces (Health Care Report, Case Study #9). According to her testimony, military forces without chevrons or insignia – identified as soldiers from the so-called “Donetsk People’s Republic”, Russians, and Chechens by their accent – occupied the hospital from March 12, 2022. They forced all doctors and medical personnel to face the wall; men were stripped to the waist while being searched for military symbols, gunpowder stains, and other hints that could show the use of weapons. The occupiers threatened to shoot anyone who tried to escape the hospital and to deport doctors to Russia. There too, the conditions in which they were held fell short of the minimum standards of humane detention. Additionally, the doctor recounted that there was a lack of medicines and that transporting the wounded to the hospital was impossible as vehicles approaching the building would be immediately shot by snipers.

V. Impact of Violations on Ukraine’s Ability to Ensure the Right to Health to Individuals within its Territory and Subject to its Jurisdiction

16. The Russian invasion of Ukraine has caused significant damage to the country’s health care system. As noted by the OSCE Moscow Mechanism, “[b]y causing a high level of destruction and by interfering with the provision of vital services (education, healthcare), the conflict started by the unlawful attack by Russia has made it very difficult for Ukraine to effectively respect, protect and fulfil the human rights of its inhabitants.”¹⁸ They not only severely endangered the welfare and lives of patients receiving care as well as of health care providers, but also further disrupted future medical care for those in need.

17. An illustrative example of the short- and long-term impact of attacks on hospitals can be found in the shelling of the Primary Care Clinic in Makariv, a brand-new facility which began operating in December 2020 as the first clinic dedicated to primary care in Makariv (Health Care Report, Case Study #2). The clinic offered primary care services for around 16,000 people, including 4,000 children, as well as COVID-19 vaccination services. On March 28, 2022, the Clinic was reportedly hit by a BM-21 Grad multiple launch rocket system, causing it to catch fire and fully burn down. Only the Clinic’s sign reading “Get your vaccination here!” survived the attack. As of April 2023, the reconstruction is still ongoing, and the medical care in the community is disrupted since the staff has to work remotely. Similarly, the severity of the damage sustained by the Trostianets City Hospital following repeated attacks in March 2022 means that it was no longer functional, with patients in need of medical care being treated at facilities located 45-50 kilometers away (Health Care Report, Case Study #5).

18. The invasion has indeed disrupted access to health services by damaging infrastructure, causing staff loss, security concerns, mass displacement of the population, and increased health care costs, which is further compounded by the population’s diminished capacity to pay for health care.¹⁹ The World Health Organisation (WHO) has found that it has resulted in a 12-fold increase in the number of patients treated for trauma and burns in July 2022 compared to January 2021, and a 1.6-fold increase in rehabilitation needs in July 2022 compared to January 2022.²⁰ Mental health conditions have also worsened, with varying degrees of impact across different regions in Ukraine.²¹

19. According to the Rapid Damage and Needs Assessment jointly performed by the Government of Ukraine, the World Bank, and the European Commission, the extensive damage to Ukraine’s healthcare system is estimated at USD 1.4 billion in direct damage to health infrastructure as of August 2022, although the actual level of damage is likely higher due to incomplete reports.²² The estimated further losses from attacks on health are over USD 6 billion, which includes removal of debris, loss of income of private providers, financing of non-operational facilities, and additional losses from the population’s waning health.²³ The WHO estimates that the overall needs of Ukraine’s health sector are to be USD 15.1 billion, almost three times the annual public spending on health, to cover accumulated infrastructure

damage, rapidly scale up critical health services, and expand rehabilitation and mental health services.²⁴

20. The scale of attacks underscores their broader destabilizing effects on Ukraine's population, from reduced access to essential medicine to severely restricted access to health care. In some cases, like in Mariupol, the entire city's health care infrastructure has been destroyed.²⁵ While violence against health care in conflict zones is a global phenomenon, Russia's assault on Ukraine's health system in 2022 stands out for its scale and brutality.

VI. Conclusions and Recommendations to the Government of the Russian Federation

21. For years, health care has been a target of many conflicts worldwide, but these cases are hardly ever prosecuted as the international crimes that they are, if they are prosecuted at all. From repeated attacks on health care facilities and ambulances, theft and destruction of critical infrastructure and supplies, and evidence of assaults and ill-treatment of health care workers, the devastation wrought since Russia's full-scale invasion is clear. The true scale and impact that it is having on access to health care – and on the right to health of Ukraine's people – will not be known for years to come.

22. Russia has previously resorted to the massive destruction of health care in Chechnya, Georgia, and in Syria. In Syria, Physicians for Human Rights has documented at least 601 attacks on 400 health care facilities since the Syrian conflict began in March 2011; 90 percent of which are attributable to Syria and its Russian allies.²⁶ Notably, the rate of attacks on hospitals increased by 62 percent between 2015 and 2016, following Russia's entry into the conflict.

23. Since the third cycle of the UPR in 2018, Russia has continued its illegal war by launching a full-scale invasion in Ukraine and made little progress in implementing previous relevant recommendations. These recommendations included acceding to the Optional Protocol to the United Nations Convention against Torture, ratifying the Rome Statute of the International Criminal Court, ending the illegal occupation of Crimea, ensuring full cooperation and access to occupied Ukrainian territory for all international human rights mechanisms, investigating and prosecuting allegations of torture and inhuman treatment in custody, and releasing Ukrainian citizens who have been unlawfully detained.²⁷

24. Recommendations to Russia:

- Immediately end the aggression against Ukraine and withdraw from occupied and illegally annexed territories.
- Ensure the respect of core international humanitarian principles, such as the principles of distinction, proportionality, and precaution.
- Immediately cease attacks on the health care system, including facilities, ambulances, critical infrastructure and supplies, and workers.
- Consider acceding to the Optional Protocol to the United Nations Convention against Torture and cooperate with international inquiries and missions to verify the conditions of detention of prisoners and to record violations of international humanitarian law.
- Immediately release detained health care workers held in Russia, occupied and illegally annexed territories.
- Ensure the humane treatment of all detainees in compliance with international humanitarian law.
- Make reparations for breaches of international law, including compensating the Ukrainian state and individual residents of Ukraine for devastating loss of life and injury, extensive destruction, and the enormous costs of reconstruction resulting from attacks on the health care system.

Endnotes

¹ Office of the High Commissioner for Human Rights, Universal periodic Review – Russian Federation: Matrix of Recommendations, <https://www.ohchr.org/en/hr-bodies/upr/ru-index>.

² Office of the High Commissioner for Human Rights, Ratification Status for the Russian Federation, https://tbinternet.ohchr.org/_layouts/15/TreatyBodyExternal/Treaty.aspx?CountryID=144&Lang=en.

³ Human Rights Committee, General Comment 31: The Nature of the General legal Obligation Imposed on States Parties to the Covenant, May 26, 2004 (CCPR/C/21/Rev.1/Add. 13), https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CCPR%2FC%2F21%2FRev.1%2FAdd.13&Lang=en, para. 10 (“This means that a State party must respect and ensure the rights laid down in the Covenant to anyone within the power or effective control of that State Party, even if not situated within the territory of the State Party”). See also e.g. Committee against Torture, Consideration of Reports Submitted by States Parties under Article 19 of the Convention, July 26, 2006 (CAT/C/USA/CO/2), https://tbinternet.ohchr.org/_layouts/15/TreatyBodyExternal/Download.aspx?symbolno=CAT%2FC%2FUSA%2FCO%2F2&Lang=en, paras 14-15 (reiterating that the Convention against Torture is applicable at all times, including in times and in the context of armed conflict and that its provisions apply to all persons under the effective control of the State party’s authorities, of whichever type, wherever located in the world). See also International Court of Justice, Legal Consequences of the Construction of a Wall (Advisory opinion), July 9, 2004, <https://www.icj-cij.org/public/files/case-related/131/131-20040709-ADV-01-00-EN.pdf>, paras 111-12 (concluding that both the ICCPR and ICESCR are applicable in respect of acts done by a State in the exercise of its jurisdiction outside its own territory).

⁴ Maastricht Principles on Extraterritorial obligations of States in the area of Economic, Social and Cultural Rights, Principle 20, <https://www.icj.org/wp-content/uploads/2012/12/Maastricht-ETO-Principles-ENG-booklet.pdf>.

⁵ Figures released by the Safeguarding Health in Conflict Coalition, a group of nongovernmental organizations working to protect health workers, services, and infrastructure. <https://map.insecurityinsight.org/health>.

⁶ <https://www.attacksonhealthukraine.org/>.

⁷ Destruction and Devastation: One Year of Russia’s Assault on Ukraine’s Health Care System, February 2023, <https://phr.org/our-work/resources/russias-assault-on-ukraines-health-care-system/>.

⁸ Organization for Security and Co-operation in Europe, Report on Violations of International Humanitarian and Human Rights Law, War Crimes and Crimes against Humanity Committed in Ukraine since 24 February 2022, April 22, 2022, <https://www.osce.org/files/f/documents/f/a/515868.pdf>, p. 93.

⁹ Organization for Security and Co-operation in Europe, Report on Violations of International Humanitarian and Human Rights Law, War Crimes and Crimes against Humanity Committed in Ukraine since 24 February 2022, April 22, 2022, p. i.

¹⁰ Report of the Independent International Commission of Inquiry on Ukraine, October 18, 2022 (A/77/533), <https://www.ohchr.org/en/documents/reports/a77533-independent-international-commission-inquiry-ukraine-note-secretary>, para. 109.

¹¹ Report of the Independent International Commission of Inquiry on Ukraine, October 18, 2022 (A/77/533), para. 41.

¹² Report of the Independent International Commission of Inquiry on Ukraine, October 18, 2022 (A/77/533), para. 48.

¹³ Report of the Independent International Commission of Inquiry on Ukraine, March 15, 2023 (A/HRC/52/62), https://www.ohchr.org/sites/default/files/documents/hrbodies/hrcouncil/coiukraine/A_HRC_52_62_AUV_EN.pdf, para. 33.

¹⁴ UN Human Rights Monitoring Mission in Ukraine, Update on the Human Rights Situation in Ukraine (1 August – 31 October 2022), December 2, 2022, https://www.ohchr.org/sites/default/files/documents/countries/ua/2022-12-02/HRMMU_Update_2022-12-02_EN.pdf, p. 4.

¹⁵ Organization for Security and Co-operation in Europe, Second Interim Report on Reported Violations of International Humanitarian Law and International Human Rights Law in Ukraine, December 14, 2022, <https://www.osce.org/files/f/documents/0/5/534933.pdf>, paras 159-63.

¹⁶ Organization for Security and Co-operation in Europe, Second Interim Report on Reported Violations of

International Humanitarian Law and International Human Rights Law in Ukraine, December 14, 2022, paras 80-82.

¹⁷ For more information about what “admission procedures” entailed, see Tetyana Katrychenko et al., “Crimes in Olenivka: Chronology, Testimonies and Names of Those Involved,” Media Initiative for Human Rights, December 1, 2022, <https://mipl.org.ua/en/crimes-inolenivka-chronology-testimonies-and-names-of-those-involved/>. See also Report of the Independent International Commission of Inquiry on Ukraine, October 18, 2022 (A/77/533), para. 84.

¹⁸ Organization for Security and Co-operation in Europe, Report on Violations of International Humanitarian and Human Rights Law, War Crimes and Crimes against Humanity Committed in Ukraine since 24 February 2022, April 22, 2022, <https://www.osce.org/files/f/documents/f/a/515868.pdf>, p. 87.

¹⁹ World Health Organization, Priorities for Health System Recovery in Ukraine: Joint Discussion Paper, December 28, 2022, <https://www.who.int/europe/publications/m/item/priorities-for-health-system-recovery-in-ukraine-joint-discussion-paper>, p. 2.

²⁰ World Health Organization, Priorities for Health System Recovery in Ukraine: Joint Discussion Paper, December 28, 2022, p. 2.

²¹ World Health Organization, Priorities for Health System Recovery in Ukraine: Joint Discussion Paper, December 28, 2022, p. 2.

²² World Bank, Ukraine Rapid Damage and Needs Assessment, August 2022, <https://openknowledge.worldbank.org/server/api/core/bitstreams/8d0c1f43-700e-56d5-9ba3-f3c1aa576c24/content>, p. 12.

²³ World Bank, Ukraine Rapid Damage and Needs Assessment, August 2022, p. 12.

²⁴ World Health Organization, Priorities for Health System Recovery in Ukraine: Joint Discussion Paper, December 28, 2022, p. 3.

²⁵ More about the destruction of health care in Mariupol is available in the report “How Russia Destroyed Healthcare In Mariupol: a Report by the Ukrainian Healthcare Center,” January 2022, <https://uhc.org.ua/en/2023/01/04/healthcare-in-mariupol/>.

²⁶ Physicians for Human Rights, Medical Personnel Are Targeted in Syria, accessed January 6, 2023, <https://phr.org/our-work/resources/medical-personnel-are-targeted-in-syria/>.

²⁷ Office of the High Commissioner for Human Rights, Universal periodic Review – Russian Federation: Matrix of Recommendations, <https://www.ohchr.org/en/hr-bodies/upr/ru-index>.