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### Human rights situation in Palestine and other occupied Arab territories

## **Written statement\* submitted by Medical Aid for Palestinians (MAP), a non-governmental organization in special consultative status**

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

[01 February 2021]

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

## **The right to health in the occupied Palestinian territory amid the COVID-19 pandemic**

### Overview and legal framework

Medical Aid for Palestinians (MAP) is a humanitarian and development organisation operating in the occupied Palestinian territory (oPt) and Lebanon. Our key areas of work are women and children's health; disability; mental health and psychosocial support; and emergency response, including the provision of essential equipment, medicines, training and other resources to support Palestinian health services to respond to the COVID-19 pandemic. We wish to express deep concern regarding ongoing violations of Palestinians' right to health across the oPt amid the COVID-19 pandemic.

International humanitarian law stipulates that, as the occupying power, Israel is responsible for ensuring access to healthcare and essential health resources for the Palestinian population under its control and to adopt and apply "prophylactic and preventive measures necessary to combat the spread of contagious diseases and epidemics."<sup>(1)</sup> As a State Party to the International Covenant on Economic, Social and Cultural Rights, Israel has also committed to take steps to achieve the full realisation of the right to the highest attainable standard of physical and mental health.

The Palestinian Authority and de facto authorities in Gaza also hold obligations to respect, protect and fulfil the right to health of Palestinians, insofar as they are able within the constraints placed on them by Israel's occupation.<sup>(2)</sup>

### Impact of COVID-19 in the occupied Palestinian territory

By the end of January there had been 178,919 confirmed coronavirus cases in the oPt and 2,012 deaths. As many as 8,000 Palestinian medics have reportedly been infected.<sup>(3)</sup> A spike in coronavirus cases in December pushed Gaza's health service close to collapse, and there continues to be a serious risk that the system will become overwhelmed if there are further surges in the future.<sup>(4)</sup>

Health facilities in Gaza face chronic shortages to adequate infrastructure; human resources; essential equipment; oxygen generation capacity for patients needing respiratory support; electricity and fuel; and other supplies needed to manage widespread outbreaks of the virus.<sup>(5)</sup> 45% all essential drugs and 33% of essential medical consumables are at 'zero stock' – meaning less than a month's supply available or completely depleted – at Gaza's Central Drug Store, including those needed to treat coronavirus.

The diversion of resources and hospital capacity has serious knock-on implications for non-COVID healthcare services such as cancer treatment. In Gaza, around 3,500 elective surgeries are being postponed per month, with the waiting list having now reached 11,400, including hundreds still needing complex limb reconstruction treatment as a result of injuries incurred from Israel's use of live ammunition against protesters in the 2018-19 'Great March of Return' protests.<sup>(6)</sup> In the West Bank, hospital outpatient admissions have reduced by 50%.<sup>(7)</sup>

### Secondary impacts on poverty, food insecurity and mental health

Lockdowns and other public health measures have exacerbated unemployment, economic distress, and food insecurity for Palestinian families. Across the oPt, 40% of households reduced food expenditure during the first three months (March-May) of the COVID-19 crisis.<sup>(8)</sup> The rate of demolitions of Palestinian homes and other structures by Israeli authorities reached a four year high in 2020, disproportionately impacting Bedouin communities in Area C, affecting livelihoods and increasing exposure to food insecurity and aid dependency.<sup>(9)</sup>

Many families in Gaza required to undergo home isolation because of coronavirus infections, sometimes for two weeks or more, have experienced increased hardships. Gaza is one of the most densely populated areas in the world, challenging necessary social distancing measures. 50% of these families lack a separate bedroom or bathroom for members who tested positive, 30% lack protective masks or gloves, and 60% report at least one family member showing signs of psychological distress.<sup>(10)</sup> Access to education is also impacted, with 42% of children reporting difficulties participating in distance learning due to daily electricity cuts, a lack of necessary devices, or inadequate internet connection.

#### Discrimination in COVID-19 vaccine access

The impact of perpetual military occupation and blockade mean that the local Palestinian health system does not have the financial or material resources needed to sustain COVID-19 response long-term. With the pandemic set to become a multi-year crisis, only a programme of mass vaccination can sustainably avoid a worsening humanitarian crisis.

By late January, Israel had provided at least one dose of vaccination to more than a quarter of its population, giving it the highest per capita vaccination rate in the world.<sup>(11)</sup> Only citizens of Israel, including Israeli settlers in the West Bank, and Palestinian residents of East Jerusalem are included in the Government of Israel's vaccine allocation policy.

The almost five million Palestinians living under Israel's 53-year military occupation in the West Bank and Gaza are excluded from Israel's vaccination programme. At the end of January, no Palestinians in these areas had reportedly been vaccinated. Media reports have indicated that Israel may offer small numbers of vaccines to the Palestinian Authority (PA) as a "humanitarian gesture",<sup>(12)</sup> however, Israel has not publicly offered supplies or assistance sufficient to ensure a comprehensive programme of immunisation is accessible to Palestinians.

The PA has applied to the global COVAX facility, though any such support will only cover up to 20% of its population and may take months to be fully delivered. The Palestinian Ministry of Health has issued an interim national vaccination plan detailing how it intends to roll-out support from COVAX, though with further supplies yet to be agreed it remains unclear how a rapid and comprehensive programme of vaccination can be realistically implemented across the oPt. The chronic financial crisis and resource and infrastructure limitations of the Palestinian Authority and de facto authorities in Gaza, caused in large part by decades of occupation and blockade, severely hamper their ability to purchase and administer vaccines for the population.

#### Conclusion

The current unequal situation with regards to vaccine access is indicative of the decades of structural discrimination against Palestinians and the systematic neglect of their rights to health and dignity that has characterised the policies and practices of Israel's occupation.

A situation in which most Israelis are vaccinated but not their Palestinian neighbours would inevitably lead to deepening existing health inequalities; greater restrictions to Palestinians' freedom of movement and access to work, healthcare, and livelihoods; and a spiralling humanitarian crisis in the oPt.

Persistent shortages of essential healthcare resources;<sup>(13)</sup> ongoing restrictions on the freedom of movement of patients and healthcare personnel;<sup>(14)</sup> and continuing attacks on Palestinian health facilities during the COVID-19 pandemic<sup>(15)</sup> reinforce the 2018 finding of the UN Special Rapporteur that Israel is in "profound breach" of its international obligations with regards the right to health of Palestinians, despite the vastly increased needs resulting from the pandemic.<sup>(16)</sup> This reflects a persistent failure on the part of the international community to "ensure respect" for Geneva Convention IV in the oPt, and to hold Israel to account for its violations of Palestinians' right to health.

Palestinians must be afforded comprehensive, rapid and equitable access to COVID-19 vaccines and other essential healthcare resources without delay, in line with the duties and obligations established in international law. Once a vaccine is made available, Palestinian authorities must work to implement a comprehensive and equitable immunisation programme across the West Bank and Gaza, with priority access for the elderly, healthcare workers, people with pre-existing clinical vulnerabilities, and those with learning disabilities.

#### Recommendations

In light of the above, we call on all Member States of the Human Rights Council to:(17)

1. Urgently take all necessary measures to guarantee that Israel respects its duty as an occupying power to ensure Palestinians in the occupied Palestinian territory have fair, rapid and equitable access to coronavirus vaccines and other essential healthcare resources to the extent that local supplies are inadequate;
2. Publicly monitor Israel's compliance with its obligations under international humanitarian and human rights law in this regard and support international initiatives to promote accountability where these are not met;
3. Urge the Palestinian Authority to take all feasible steps, insofar as it is able within the constraints and financial limitations created by the occupation, to enable all people across the West Bank and Gaza to access coronavirus vaccines and healthcare; and
4. Support the Palestinian Ministry of Health to implement a fair, rapid and comprehensive vaccination programme, respond to humanitarian needs created by COVID-19, and build back better after the pandemic.

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(1) Geneva Convention IV Arts, 55 & 56

(2) MAP (2017) <https://www.map.org.uk/downloads/health-under-occupation---map-report-2017.pdf>

(3) The Independent (January 2021) <https://www.independent.co.uk/news/world/middle-east/israel-palestine-coronavirus-vaccine-b1784474.html>

(4) World Health Organization (January 2021), <https://who18.createsend.com/campaigns/reports/viewCampaign.aspx?d=j&c=99FA4938D049E3A8&ID=CA0BEADB0FCE93CB2540EF23F30FEDED&temp=False&tx=0&source=Report>

(5) MAP (December 2020) <https://www.map.org.uk/news/archive/post/1181-covid-19-emergency-update-map-calls-on-uk-to-help-gaza-breathe-as-oxygen-supplies-dwindle>

(6) MAP (February 2020) [https://www.map.org.uk/downloads/map-written-statement-to-unhrc43-\(1\).pdf](https://www.map.org.uk/downloads/map-written-statement-to-unhrc43-(1).pdf)

(7) UN OCHA (December 2020), [https://www.ochaopt.org/sites/default/files/hno\\_2021.pdf](https://www.ochaopt.org/sites/default/files/hno_2021.pdf)

(8) UN OCHA (December 2020), [https://www.ochaopt.org/sites/default/files/hno\\_2021.pdf](https://www.ochaopt.org/sites/default/files/hno_2021.pdf)

(9) UN OCHA (January 2021) <https://www.ochaopt.org/content/west-bank-demolitions-and-displacement-december-2020>

(10) UN OCHA (January 2021) <https://www.ochaopt.org/content/home-quarantine-compounds-hardship-thousands-families-gaza>

(11) BBC (January 2021) <https://www.bbc.co.uk/news/world-middle-east-55788922>

(12) Times of Israel (January 2021) <https://www.timesofisrael.com/israel-to-give-palestinians-vaccines-for-1000-medical-workers-report>

(13) See: MAP (December 2020) <https://www.map.org.uk/news/archive/post/1181-covid-19-emergency-update-map-calls-on-uk-to-help-gaza-breathe-as-oxygen-supplies-dwindle>;

MAP (November 2020) <https://www.map.org.uk/news/archive/post/1176-experts-warn-of-gazaas-imminent-health-system-collapse-as-covid-19-continues-to-spread>

(14) Prof. Michael Lynk (March 2020)

<https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25728&LangID=E>

(15) See: Al Haq (January 2021) <https://www.alhaq.org/advocacy/17779.html>; MAP, Al Haq & JLAC (July 2020) <https://www.map.org.uk/downloads/covid-19-and-the-systematic-neglect-of-palestinians-in-east-jerusalem.pdf>

(16) See: Prof Michael Lynk (March 2018)

<https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=22854&LangID=E>; Prof Michael Lynk (March 2020)

<https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25728&LangID=E>

(17) Further details on these recommendations can be found at

<https://www.map.org.uk/CV19vaccines>