



To: Health Professional Network
From: Health and Human Rights Team
Date: 17 November 2008

Health Professional Action
Crushing the right to health – Gaza
Israel/Occupied Palestinian Territories

The impediments faced by Palestinians in Gaza in obtaining access to health care continue to be a cause for serious concern. The Israeli blockade of the Gaza Strip has caused a further deterioration in the humanitarian situation, health and sanitation problems, as well as extreme poverty and malnutrition. In recent months the already dire circumstances faced by patients in Gaza have been compounded by a strike of some health workers in Gaza, which has made a bad situation worse. Some 80 per cent of Gaza's 1.5 million inhabitants rely on international assistance, but UN aid agencies and humanitarian organizations face additional restrictions and costs, which hinder their ability to provide assistance and services to the population. With only a few exceptions, the entire population of 1.5 million people are trapped in Gaza. Students are unable to attend university studies and jobs abroad and critically ill patients in need of medical care that is unavailable in local hospitals are often prevented from leaving Gaza. Since the blockade was imposed in 2007, dozens of patients have died due to lack of access to treatment.

Medical facilities in Gaza lack the specialized staff and equipment to treat a range of conditions, including cancer and cardiovascular illnesses, and patients suffering from these and other conditions need access to hospitals outside Gaza. Patients have traditionally relied on medical facilities in other parts of the Occupied Palestinian Territories (OPT) - that is the West Bank (including East Jerusalem), which can only be reached through Israel - in Egypt, Jordan and Israel, and in some cases in other countries. However, patients' access to medical care is now severely restricted by the ongoing closure of Gaza's only gates to the outside world: the Erez crossing with Israel in the north, where Israel imposes the closure directly, and the Rafah border crossing with Egypt in the south, where the Egyptian government has so far complied with Israel's order that it be closed. Only a limited number of serious medical or humanitarian cases are granted special permits to leave Gaza through the Gaza-Israel border and through the Gaza-Egypt crossing. However, many more critically ill patients are unable to secure permits to leave Gaza for medical treatment which is not available in Gaza.

Amnesty International is calling on the Israeli authorities, the Egyptian government, the Palestinian Authority and the Hamas de-facto administration in Gaza to take urgent steps to ensure that Palestinians with serious health needs are able to access the health care they need in a timely and secure way.

Restricting or denying Gaza's residents access to necessary health care

Amnesty International has made repeated appeals in 2008 for residents of Gaza with serious health conditions to be allowed to leave Gaza to access specialist treatment elsewhere.¹ Requests for seriously ill Palestinians to leave Gaza to go to Palestinian hospitals in the West Bank (including East Jerusalem) or to hospitals in Israel, Egypt or other countries have often been denied by the Israeli authorities on unspecified "security grounds". Those patients denied access to care have seen their condition worsen, and several have died as a result. In April 2008, the World Health Organization published a report on the deaths of seriously ill Palestinians in Gaza, citing 32 cases of deaths following delays or refusal of passage out of Gaza.² More patients have died since, after having been denied passage out of Gaza.

Once a patient has been granted a referral for medical care outside Gaza, the cost of which is covered by the Palestinian Authority, the procedure for Palestinians to leave Gaza for medical treatment involves an application from the Palestinian Authority Health Ministry to the health coordination office at Erez Crossing, which is under the authority of the Israeli army. All applications are examined by the General Security Service (GSS), Israel's intelligence agency, which decides if permission for passage is to be granted or refused. Often no response is received for weeks and several patients have died while waiting for a response.

Deaths following denial of access to care "on security grounds"

Mohammed Abu Amro, a 58 year old father of six, suffered from cancer of the colon and was treated for this in the Ichilov Hospital in Tel Aviv in January 2008. When he applied to return for further chemotherapy in March 2008 his request was refused on unspecified "security grounds". Submissions on his behalf were made by Physicians for Human Rights – Israel (PHR-I), including a request for permission to leave Gaza on 26 August to have chemotherapy at the Ichilov Hospital in Israel. However, the authorities continued to refuse him permission to travel for treatment. According to PHR-I, the cancer metastasised, spreading to his liver, spine and urinary tract. The Israeli authorities finally granted him permission to return to Ichilov Hospital on 13 October 2008, eight days after his death on 5 October.



©:Muhammad Sabah/BTselem

Mahmoud Abu Taha (photo), aged 21, died on 29 October 2007 after many unsuccessful attempts to leave Gaza to receive specialist treatment. He had cancer of the small intestine and had lost a third of his body weight. Five days before he died his family told Amnesty International that he could not eat and the vitamin solution he needed had been cut to just one feed a day because it was in short supply. At first, Mahmoud Abu Taha was given a permit by the Israeli army to leave Gaza, but on 18 October 2007, after a long wait at the Erez crossing (between Gaza and Israel), the Israeli army refused to let him pass. He was eventually allowed to cross into Israel on 28 October 2007 but died the following day.

Patients are often denied passage out of Gaza on undisclosed "security grounds", but the Israeli authorities do not provide any evidence or information to substantiate their allegations that these patients or the family members accompanying the patient (notably for children who cannot travel alone) are a "security threat". This makes it impossible for the patients to challenge the allegations. Some of the patients who have been refused passage out of Gaza were in a critical condition and unable to move.

¹ See Amnesty International, *Israel / Occupied Palestinian Territories / Egypt. Denial of access to health care* (Index: MDE 15/002/2008) and further actions (Index: MDE 15/004/2008; MDE 15/006/2008; MDE 15/016/2008; MDE 15/036/2008; MDE 15/039/2008).

² World Health Organization, *Access to Health Services for Palestinian People*, Jerusalem, April 2008, at: [http://www.emro.who.int/palestine/reports/monitoring/WHO_special_monitoring/access/access%20to%20health%20services%20\(April%202008\).pdf](http://www.emro.who.int/palestine/reports/monitoring/WHO_special_monitoring/access/access%20to%20health%20services%20(April%202008).pdf)

In a recent case of six children with heart disease, the refusal of a travel permit was directed at the children's mothers (or grandmother in one case), who were to accompany the infants. The six children were due to be operated on by a team of British heart specialists at Makassed Hospital in East Jerusalem during the week beginning 4 October 2008. However, they could not leave Gaza because the Israeli authorities refused those accompanying them permission to travel. One of the children had already missed six appointments for his surgery in recent months because his mother and grandmother were repeatedly refused permits to accompany him to the hospital in Jerusalem. He and two others were finally able to travel to Makassed Hospital at the beginning of November to be operated on by a team of visiting Italian heart specialists, but five other children were unable to leave Gaza for their operations.³

Access to health care facilities in Egypt

Prior to June 2007 most Palestinians who needed medical treatment not available in Gaza travelled to Egypt to receive treatment. In June 2007 the Israeli authorities ordered the Gaza-Egypt crossing closed. The Egyptian authorities complied with Israel's decision and the border crossing was kept completely sealed until the beginning of 2008. In recent months the Egyptian authorities have partially opened the border crossing on a few occasions to allow passage for a limited number of Palestinians by special arrangement. Passage has been limited to patients and other people considered as humanitarian cases (students, pilgrims and residents abroad). However, on each occasion, only some of those who fell into these categories were allowed through the border crossing.



The deserted Rafah Crossing between Gaza and Egypt, May 2008. © Amnesty International

The criteria according to which Palestinians from Gaza are allowed to cross into Egypt are not clear. On 4 June 2008, Amnesty International wrote to the Egyptian authorities seeking clarification about the criteria, notably those determining which Palestinians in need of medical treatment not available in Gaza are permitted to enter Egypt. The Egyptian authorities have not responded to Amnesty International. The number of Gazans (patients, students and others) who have been allowed to cross from Gaza into Egypt has since increased, but the Egyptian authorities have continued to refuse passage to many patients (as well as students and others) through the border crossing on the rare occasions when it has opened.

In the meantime, the Israeli authorities insist that they will not allow the Gaza-Egypt border crossing to reopen and resume regular functioning until the Israeli soldier Gilad Shalit, who is being held in Gaza by Hamas, is released:⁴

"If Gilad Shalit is not released, Rafah crossing does not open"
Senior Israeli Defence Ministry official Amos Gilad, 19 June 2008.⁵

"regarding the Rafah crossing, the issue has not yet been resolved. The Egyptians know we have tied Rafah to other issues on the agenda."
Israel's Defence Minister Ehud Barak, 22 June 2008.⁶

³ Urgent Action (Index: MDE 15/041/08), 16 October 2008, see: <http://www.amnesty.org/en/library/asset/MDE15/041/2008/en/6088802c-9c2e-11dd-b0c5-35f205e84de0/mde150412008en.html> and Urgent Action (Index: MDE 15/046/2008), 7 November 2008, see: <http://www.amnesty.org/en/library/asset/MDE15/046/2008/en/dc251b9e-acf4-11dd-aed1-534220e6a257/mde150462008en.html>

⁴ Corporal Gilad Shalit was captured in June 2006 by Palestinian militants from an Israeli military base along the perimeter of Gaza and has been since been held in Gaza by Hamas' armed wing.

⁵ Ynet, 19 June 2008: <http://www.ynet.co.il/english/articles/0,7340,L-3557573,00.html>

⁶ Ynet, 22 June 2008: <http://www.ynet.co.il/english/articles/0,7340,L-3558853,00.html>

Amnesty International is reiterating its call on the Egyptian government to take the necessary measures to ensure that all sick Palestinians who have arrangements to receive treatment in medical facilities in Egypt are allowed to enter the country and that all patients who need to travel to receive medical care in other countries are allowed to cross through Egypt to reach their destination.

Access to health care facilities in the rest of the OPT and in Israel

Many Gazans do receive medical treatment in Israeli hospitals. Most of those who require permits to cross from Gaza into Israel for medical care, either in Israel or in the West Bank (including East Jerusalem), are allowed to cross. However, between 15 and 20 per cent are denied passage by the Israeli authorities, and are thus denied access to desperately needed medical care. It is about their fate that Amnesty International is concerned. According to the World Health Organization, Israel denied entry permits to 18.5 per cent of patients seeking to leave the Gaza Strip in 2007, almost double the figure for 2006, which was 10 per cent.⁷

Karima Abu Dalal, a 34-year-old mother of five young children, suffers from Hodgkin's lymphoma, a cancer of the lymph glands which is curable in more than 90 per cent of cases. She was denied access to the treatment she desperately needed for several months as Israel refused her a permit to travel to the hospital in Nablus, in the West Bank. Karima Abu Dalal applied to leave Gaza in November 2007 for treatment. At the time, a cancer specialist wrote in a report for the Israeli organization PHR-Israel: "*This is a young woman who will die in the absence of treatment and with treatment her chances of recovery are excellent*" (underlined in the original). The Israeli authorities refused her authorization to leave Gaza on grounds of unspecified "security reasons" and the Israeli High Court of Justice refused to intervene. Earlier this year she eventually managed to travel to Egypt as an exceptional case, but by then her condition had deteriorated irreparably. She is now terminally ill. She is too ill to undertake the journey to Egypt, but is still not allowed passage into Israel. She should now be given authorization to leave so that her medical condition can be assessed in an Israeli hospital and the best treatment to relieve her situation can be given.⁸

Before June 2007, patients from Gaza were able to receive medical treatment in Egypt or elsewhere in the OPT - that is the West Bank (including East Jerusalem) - if the treatment was unavailable in local hospitals. Since then, however, more patients from Gaza have been forced to rely on Israeli hospitals for treatment after Israel ordered the Gaza-Egypt border to be sealed and further restricted the passage of Palestinians from Gaza to the West Bank (including East Jerusalem).⁹

Although in recent months some patients have been able to leave Gaza for treatment in Egypt through the Rafah border crossing, some patients are too ill to undertake the journey. Travel from Gaza to the Egyptian capital Cairo, where the country's main medical facilities are, requires a much longer journey than travel to Israel or the West Bank (including East Jerusalem), which can be reached in an hour from the Erez crossing. In addition, many patients suffer from conditions that require specialized treatment in Israeli hospitals.

The Israeli authorities maintain that Israel bears no legal responsibility towards the inhabitants of Gaza, and their stated policy is that the passage of the sick and wounded is granted as a humanitarian gesture only and not necessarily for patients whose lives are not in imminent danger.¹⁰ Even patients whose survival depends on receiving treatment outside Gaza have been refused passage and have suffered irreparable damage to their health or died.

⁷ Haaretz, 1 April 2008: <http://www.haaretz.com/hasen/spages/970686.html>

⁸ Interview with Karima Abu Dalal and her family from June 2008 at: <http://uk.youtube.com/watch?v=HCdwTsnx95g> (interview starts at minute 3.28 of the video). She is now no longer walking as in the video.

⁹ These areas are under Israeli military occupation and can only be accessed with permits from the Israeli authorities, and from Gaza can only be reached through Israel.

¹⁰ As stated by the Israeli authorities in response to a petition to the Israeli High Court of Justice lodged by the Israeli NGOs PHR-Israel and Gisha (an NGO whose goal is to protect the freedom of movement of Palestinians). See: http://www.phr.org.il/phr/files/articlefile_1188482807578.doc

Amnesty International is calling on the Israeli authorities to allow prompt and unhindered access to patients from Gaza to the West Bank (including East Jerusalem) and Israel for medical treatment.



Alaa' Odeh, aged 25, sustained serious orthopaedic and vascular injuries in both legs in June 2007. The Israeli army refused him a permit to leave Gaza for specialized medical treatment and doctors were forced to amputate his right leg. Shortly after this photograph was taken the condition of his left leg deteriorated, but he was again denied a permit to leave Gaza and it, too, had to be amputated.

©: Muhammad Baba/PHR-Israel

The impact of the Israeli blockade on the wider humanitarian situation in Gaza

In addition to the restrictions which are specifically targeted at the movement of patients, medical personnel and equipment, the Israeli blockade of Gaza has had a negative impact on the wider humanitarian situation, which in turn further impacts on the health of Gaza's population. On 13 November 2008, the main UN aid agency in Gaza, the United Nations Relief and Work Agency Agency (UNRWA) announced that it had run out of supplies and had to halt food distribution to 750,000 needy Gazans because the Israeli authorities prevented the delivery of basic necessities including wheat, canned meat, powdered milk and cooking oil. The previous day several areas of the Gaza Strip were plunged into darkness as the only electricity-generating plant was shut down due to lack of fuel supplies. Days earlier Israel had stopped allowing the passage of fuel, paid for with European Union funds, to the plant. The Israeli authorities also denied entry to Gaza to journalists, prompting a protest by the Foreign Press Association.

Israel's decision to prevent entry into Gaza of fuel and humanitarian aid followed a breakdown of the ceasefire which had been in force between Israeli forces and Gaza-based Palestinian armed groups since 19 June 2008. The five-and-a-half-month ceasefire collapsed on 4 November, after Israeli forces killed six Palestinian militants in Gaza ground incursions and air strikes, prompting a barrage of dozens of Palestinian rockets on nearby towns and villages in the south of Israel. The Palestinian attacks caused no casualties or damage.¹¹

The strike by health professionals within Gaza

Since the end of August 2008 the already dire situation faced by patients in Gaza has been compounded by a strike by health workers there. The strike is being observed by some 25-30 per cent of them. Doctors make up the smallest percentage of the strikers, followed by nurses; administrative and other health sector workers make up the highest percentage. The strike was called by Palestinian trade unions allied to the Fatah party of Palestinian Authority President Mahmoud Abbas, which accuse the Hamas de-facto administration in Gaza of transferring or removing Fatah supporters from their posts in the health sector for political reasons. The Hamas administration for its part rejects the allegations and claims that the strike is politically motivated and carried out at the behest of the West Bank-based Palestinian Authority caretaker government of President Abbas and the Fatah party, Hamas' main political rival.

While Hamas and Fatah trade accusations, the strike is having a negative impact on the health of patients in Gaza. The level of care available in hospitals and primary health centres has been reduced. Surgical

¹¹ Amnesty International, 5 November 2008: <http://www.amnesty.org/en/news-and-updates/news/gaza-ceasefire-at-risk-20081105>

operations have decreased by more than 30 per cent, hospital admissions by some 20 per cent, outpatients visits by more than 30 per cent and primary health care consultations by some 20 per cent.¹²

Furthermore, two key Palestinian Authority bodies, the Referral Abroad Department (RAD), which approves referrals of all except urgent cases to hospitals abroad, and the Directorate of Coordination and Liaison (DCL), which submits applications for permits to the Israeli authorities on behalf of patients in Gaza, have been closed since the first day of the strike and have only processed a limited number of cases. In September, the RAD approved 233 cases, compared to a monthly average of 1,100 cases before the strike, and the DCL submitted 449 permit applications to the Israeli authorities for patients' permits to leave Gaza, compared to 874 applications in August. Of these 449 cases, the Israeli authorities rejected or delayed 101 (that is 22.5 per cent of them).

Shortage of basic drugs and hospital supplies in Gaza

The tightening of the Israeli blockade last year has been causing shortages of spare parts for hospital equipment and medical supplies. In addition, hospitals have also been affected by the shortages of non-medical materials necessary for the functioning of the facilities, such as cleaning products, light bulbs and construction material needed for repairs to the buildings.

In recent months, disagreements between the West Bank-based Palestinian Authority Ministry of Health and the Hamas de-facto administration in Gaza have resulted in shortages of drugs and hospital supplies, increasing the severity of the situation. On 15 October 2008, the World Health Organization reported that:

- no pharmaceutical supplies had been delivered by the Ministry of Health to the Central Drugs Store (CDS) in Gaza since 1 September;
- 94 essential drugs were reported to be out of stock by the CDS at the beginning of October;
- 70 patients with cystic fibrosis were at risk of complications due to not receiving the necessary drugs, which had been delivered to the CDS in Ramallah in the West Bank three weeks earlier, but had not yet been delivered to the CDS in Gaza; and
- 12 out of the 52 kidney dialysis machines in three Gaza hospitals were at risk of shutting down due to the lack of a "Bibag system".¹³

The International Committee of the Red Cross (ICRC), in a press release of 23 October 2008, expressed concern that "In recent weeks, because of a standstill in cooperation between Palestinian authorities in Ramallah and Gaza, imports of essential medical supplies have been reduced to a trickle, thus aggravating an already critical situation."¹⁴ The ICRC called on the Palestinian health authorities in both the West Bank-based Palestinian Authority and in the Hamas de-facto administration in Gaza to take urgent measures to ensure that suitable medical supplies are available in Gaza in sufficient quantity, and called on the Israeli authorities to facilitate timely deliveries of medical supplies and equipment to the Gaza Strip.

Update to Health Professional Action (Index: MDE 15/039/2008) on patients in need of urgent treatment

Only two patients mentioned in the Health Professional Action issued on 9 September 2008 have been able to leave Gaza for medical treatment:

Nufuz Husni (f), aged 44, suffers from a malignant anal tumour. She was able to leave Gaza on 24 October to receive medical treatment in Ichilov Hospital in Israel.

Shadi Hilis (m), aged 31, suffers from a malignant tumour of the tongue and is now being treated in Israel.

The condition of another patient, **As'ad al-Qarinawi** (m), aged 47, who suffered a heart attack, has improved and he no longer needs treatment outside Gaza.

¹² WHO Gaza Health Workers Update, 13 November 2008.

¹³ The "Bibag system" is a kind of hemodialysis which uses liquid bicarbonate concentrate, produced from Bibag, a powder consisting of dry bicarbonate concentrate.

¹⁴ ICRC press release, 23 October 2008: <http://icrc.org/web/eng/siteeng0.nsf/html/gaza-news-231008>

All the other patients named below, most of whom have been referred to hospitals in Egypt, have not been able to leave Gaza for medical treatment:

Bassam al-Oehidi (m), aged 28, suffers from retinal detachment; he is still in Gaza.

Rami al-Masri (m), aged 25, suffers from a tumour in the left optic nerve; he has not been able to obtain a referral due to the strike.

Sameer Taleb (m), aged 47, is in need of a repeat operation following a decompressive laminectomy; he is still in Gaza.

Rami al-Arouqi (m), aged 29, suffers from a tumour in a bone of the right leg; he is still in Gaza.

Nadira Abu Oweimar (f), aged 29, suffers from Hodgkin's lymphoma; he was referred for treatment in Jordan but has not been allowed to leave Gaza.

Muhammed al-Hurani (m), aged 33, suffers from a malignant brain tumour; there is no further update on his case.

Mahmud Odeh (m), aged 31, suffers from chronic kidney disease and needs a biopsy for diagnosis; he was referred for treatment in the West Bank but is not allowed to leave Gaza.

Naser al-Akhras (m), aged 24, is wounded in the pelvis; he is still in Gaza.

Fathi al-Ghouf (m), aged 43, needs a heart operation which cannot be carried out in Gaza; he is still in Gaza.

Radi Abu Rida (m), aged 50, suffers from advanced kidney stones that are threatening kidney failure; he is still in Gaza.

Ayman al-Lidawi (m), aged 35, suffers from ischaemic heart disease and needs a special procedure; he is still in Gaza.

Ahmad al-Baghdadi (m), aged 27, suffers from cancer of the pancreas; there is no further update on his case.

Suleiman Abu Shawish (m), aged 59, needs an eye operation due to detachment of the retina; he was able to travel to Egypt for treatment.

Jamal Dughmush (m), aged 62, suffered a heart attack and needs a pacemaker; he is still in Gaza.

Lack of medical staff and medical schools in Gaza and restrictions on medical exchanges

As well as a lack of advanced medical facilities, there remains a shortage of medical expertise in Gaza. Residents of Gaza cannot train as doctors in Gaza as there is no medical school and students who want to study outside of Gaza are often not able to leave. Among the students who have places to study medicine in universities abroad but remain trapped in Gaza are Diana al-Saadi (UK), Muhammad al-Muqadmeh (Germany), Muhammed Khdeer (China), Ayman al-Hams (China), Iyad Abu Jazar (Egypt) and Ghassan al-Bozom (Russia).

The possibilities for health workers in Gaza to interact with their peers from other countries are greatly restricted because they cannot leave Gaza and outsiders are often not allowed into Gaza.

The only point of entry into Gaza for foreign humanitarian workers and others is via Israel,¹⁵ and entry is subject to obtaining authorization from the Israeli authorities. In October 2008, the Israeli authorities rejected a request by the World Health Organization on behalf of 80 mental health professionals, health care professionals and academics from several countries for entry permits into Gaza to attend a conference organized by the Gaza Community Mental Health Programme in cooperation with the World Health Organization. The conference, entitled "Siege and Mental Health, Walls vs. Bridges", was scheduled for 27-28 October 2008. The Israeli army's spokesman, Major Peter Lerner, explained the refusal in the following terms:

*"...we have had a policy of allowing entrance to Gaza from Israel only for humanitarian treatment there, but not for conventions or assemblies. This event is not humanitarian but populist and for propaganda, as one can see from the titles of the events, such as Gaza Palestinians being 'civilian victims of a siege'... everything in Gaza is influenced by fact that an IDF soldier, Gilat Schalit, has been held in Gaza for over two years..."*¹⁶

¹⁵ According to the Agreement on Movement and Access, reached in 2005 by Israel, the Palestinian Authority, the US and the EU, the Gaza-Egypt border crossing is only for Gazans and foreigners must continue to enter and leave Gaza via Israel.

¹⁶ *The Jerusalem Post*, 25 October 2008:

<http://www.jpost.com/servlet/Satellite?cid=1222017624178&pagename=JPost%2FJPArticle%2FShowFull>

On rare occasions the Israeli authorities have allowed Israeli Arab doctors to enter Gaza to perform surgery on some patients. However, on 8 October 2008 the Israeli authorities refused entry to Gaza to an Israeli medical team, who were to carry out operations and medical consultations and provide training on trauma and post-traumatic treatment over three days.

The role of the High Court of Justice... human rights denied

Since June 2007, PHR-Israel and other NGOs have submitted a number of petitions to the Israeli High Court of Justice (HCJ) in support of Palestinian patients seeking the right to obtain health care outside Gaza. In each case the patients had been refused permits to leave Gaza on unspecified “security grounds”. The court has consistently responded that it sees no reason to intervene in the decision of the army to deny the patients passage out of Gaza. Some of the patients concerned have died or have suffered irreparable damage. Petitions to the HCJ include:

26 November 2007: Urgent petition submitted by PHR-Israel and 11 patients (HCJ 9522/07)

This petition demanded immediate redress for 11 patients with life-threatening conditions, a policy solution to ensure access of patients to medical care, and immediate cessation of General Security Service coercion of patients at the Erez crossing.

27 December 2007: Petition submitted by PHR-Israel and 15 patients (HCJ 11105/07)

PHR-Israel returned to the court with an almost identical petition on behalf of 15 patients with life-threatening conditions, mostly with cancer. In its ruling (given on 8 January 2008), the HCJ rejected the collective petition and suggested each patient should submit an individual petition. The HCJ judges said that there were “no grounds for our intervention” in the decision of the State to deny access to eight patients on security grounds.

22 January 2008: Petition submitted by PHR-Israel and one patient (HCJ 559/08)

This petition was submitted on behalf of leukaemia patient Amin Fayyad, but was rejected outright. The petition brought two expert statements by oncologists asserting that Amin Fayyad, who had chronic myeloid leukaemia in an acute phase, needed treatment urgently. The HCJ stated that it saw “no grounds to intervene” to lift the travel ban. Amin Fayyad was eventually able to leave Gaza to Egypt in March 2008 but was unable to obtain the necessary treatment there. He needed a bone marrow transplant but no matching donor had been able to travel with him to Egypt and it was impossible to leave Gaza again with a matching donor due to the border closures. Furthermore he did not have financial cover from the Palestinian Authority for the operation. He died in Gaza on 9 November 2008, aged 28.

26 May 2008: Petition submitted by PHR-Israel and 13 patients

This petition was submitted on behalf of 13 patients who had been denied passage out of Gaza by the General Security Service. The HCJ decided not to change the decision, stating that it was satisfied that patients could be transferred to Jordan and Egypt by means of an Israeli-operated “shuttle” service, even though this mechanism was unreliable, had not been operational for months, and could not constitute a solution for cancer patients in need of prompt and reliable access to treatment.

On the morning of the hearing, the State Attorney informed PHR-Israel that exit permits had been authorized for three of the patients; a fourth, a 60-year-old patient suffering from a brain tumour, had been summoned for interrogation by the General Security Service as a condition for being considered for an exit permit; and the authorities had promised to allow two Israeli Arab cardiologists to enter Gaza in order to perform catheterization on two cardiac patients. The cases of the other seven patients were not addressed.

7 July 2008: HCJ hearing regarding Gaza patients’ travel

At the hearing, the State Attorney officially informed the HCJ that “shuttles” would no longer be used to take patients out of Gaza, due to the reluctance of the Jordanian government to comply with the necessary arrangements. The “shuttle” option, elusive from the start, has been implemented a mere three times between January and July 2008. However, it has been one of the reasons – or excuses – given by the HCJ for its decision not to uphold the request of patients to leave Gaza. PHR-Israel eagerly awaits the ruling of the HCJ on the matter of these patients, some of whom have life-threatening conditions.

A few dozen patients who want to return to their homes in Gaza are still stuck in Jordan after completing their medical treatment. These are patients who took the “shuttle” to receive medical treatment in Jordan in March 2008 and have been there ever since. Israel demands they return in the same way they left, via the “shuttle” back to Gaza (PHR-Israel press release, 7 July 2008).

14 and 15 September 2008: Petition submitted by PHR-Israel and 13 patients

This petition was submitted to the HCJ for its urgent attention on behalf of 13 patients in Gaza. As of 11 November 2008, there had not yet been a hearing on these cases.

Recommended action

a) Please write to the **Israeli authorities** below:

explaining that you are a health professional concerned about human rights and mentioning if you have previously written about this concern;

calling on the authorities to ensure that all patients in need of medical treatment are allowed to leave Gaza immediately to access hospitals in the West Bank (including East Jerusalem) or Israel, or other countries and that their passage out of Gaza is not dependent on collaborating with the General Security Service;

specifically urging the authorities to expedite as a matter of urgency access to medical care for Bassam al-Oehidi, Rami al-Masri, Sameer Taleb, Rami al-Arouqi, Nadira Abu Oweimar, Muhammed al-Hurani, Mahmud Odeh, Naser al-Akhras, Fathi al-Ghouf, Radi Abu Rida, Ayman al-Lidawi, Ahmad al-Baghdadi, Suleiman Abu Shawish, Jamal Dughmush and Karima Abu Dalal;

calling on the authorities to ensure that children are not denied passage out of Gaza due to unspecified security concerns regarding their mothers or others accompanying them, referring in particular to Ahmed Nahid Mohsin (aged 1 year 5 months), Hamza Hassan Abu Habel (aged 1 year 2 months), Yousef Rami Abu Latifa (aged 3 years 5 months), Nour Mohammed al-Jarou (aged 5 months) and Mohammed Odeh Thabet (aged 17 years), all of whom suffer from congenital heart defects and are waiting to be allowed to travel to Makassed Hospital in East Jerusalem for surgery;

urging the authorities to ensure that Palestinian students are allowed to leave Gaza to pursue medical studies abroad and that no impediments are placed in the way of developing more effective medical training in Gaza;

reminding the Israeli authorities that according to international law, Israel, as the occupying power in the Gaza Strip, must ensure that the residents of Gaza have access to the necessary medical care, as well as to medical care to the same extent as nationals of the State of Israel.

b) Please write to the **Egyptian authorities** below:

explaining that you are a health professional concerned about human rights;

expressing concern at the fact that many Palestinians from the Gaza Strip who are critically ill and in need of medical care which is not available in Gaza have not been allowed entry into Egypt, including patients who waited for hours at the Rafah border crossing on the occasions when it was recently opened;

calling on the authorities to work urgently to ensure prompt passage via the Rafah crossing for all patients in Gaza who urgently need medical treatment in Egypt;

asking the authorities to clarify the criteria used to decide whether and when patients from Gaza are given access to treatment in Egypt via the Rafah border crossing.

c) Please write to the **Palestinian Authority caretaker government in the West Bank** and the **Hamas de-facto administration in Gaza** (see details of officials below):

explaining that you are a health professional concerned about human rights;

calling on them to refrain from taking any action that could worsen the already dire situation of the health sector in Gaza, including pressures of any kind against health workers, non-delivery or delayed delivery of necessary drugs and medical supplies to medical facilities in Gaza, and delays in the referral of patients who need medical care which is not available in Gaza;

calling on them to reverse any measures taken which have caused a further deterioration of the already difficult situation facing patients in Gaza.

Addresses

a) Israeli authorities:

Tzipi Livni (f)

Vice Prime Minister and Minister of Foreign Affairs

Ministry of Foreign Affairs, 9 Yitzhak Rabin Boulevard, Kiryat Ben-Gurion, Jerusalem 91035, Israel

Fax: +972 2 530 3367

Email / website: sar@mfa.gov.il / www.mfa.gov.il

Salutation: Dear Minister

Major General Yoav Galant

GOC Southern Command

Military Post 02392, Beer Sheva, IDF

Fax: +972 8 990 2655

Salutation: Dear Major General

Yacov Ben Yizri

Minister of Health

Ministry of Health, 2 Ben Tabai Street, PO Box 1176, Jerusalem 91010, Israel

Fax: +972 2 678 7662 / +972 2 623 3026

Email / website: sar@matat.health.gov.il / pniot@moh.health.gov.il / www.health.gov.il

Salutation: Dear Minister

Copies to:

Dr Yoram Blachar

Chair of the Israel Medical Association

PO Box 3566, Ramat-Gan 52136, Israel

Email: malke@ima.org.il

b) Egyptian authorities:

Habib Ibrahim El Adly

Minister of the Interior

Ministry of the Interior, 25 Al-Sheikh Rihan Street, Bab al-Louk, Cairo, Egypt

Fax: +20 22 794 5529

Email: moi@idsc.gov.eg / center@iscmi.gov.eg

Salutation: Dear Minister

Hatem Al-Gabali

Minister of Health

Ministry of Health, 3 Magles El Shaab Street, Cairo 11467 Egypt

Fax: + 202-7953966 / 7959422

Salutation: Dear Minister

Copies to:

Dr Hamdi Al Sayed

Director of the Egyptian Medical Syndicate
Dar El Hekmah, 42 Kasr El-Eini Street, Cairo, Egypt
Email: alsayed@ems.org.eg, H_nakeeb@yahoo.com and info@ems.org.eg

c) Palestinian caretaker government in West Bank:

Fathi Abu Maghli

Minister of Health
Ministry of Health, Ramallah, West Bank
Fax: +972 2 2408979 and +972 9 2384772
Email: info@moh.ps

Hamas de-facto administration in Gaza:

Basem Na'im

Ministry of Health, Gaza Strip
Fax: +972 8 282 6325 and +972 8 282 6295
Email: health@moh.gov.ps

Copies to:

Shaher Sa'ad

General Secretary
Palestinian General Federation of Trade Unions (PGFTU)
Fax: +972 9 2384374
Email: pgftu@pgftu.org and Shaher@pgftu.org

Please also send copies to diplomatic representatives of Israel, Egypt and the Palestinian Authority accredited to your country.

If you receive no reply within six weeks of sending your letter, please send a follow-up letter seeking a response. Please send copies of any letters you receive to the International Secretariat, attention of Health and Human Rights Team, 1 Easton Street, London WC1X 0DW or e-mail: health@amnesty.org