**Medical Aid for Palestinians input to the Report of the Special Rapporteur on the human rights of internally displaced persons**

***Protection of Internally Displaced Persons with Disabilities***

**15 February 2020**

**Medical Aid for Palestinians**

Medical Aid for Palestinians (MAP) is a humanitarian and development organisation, operating in the occupied Palestinian territory (oPt) and Lebanon since the 1980s. Our key areas of work are women and children’s health; disability; mental health and psychosocial support; and emergency response and emerging needs.

**Internally Displaced Persons in the occupied Palestinian territory**

Some 26% of Palestinians in the West Bank and 67% in Gaza are refugees following the 1947-49 Nakba in Mandate Palestine/pre-state Israel.[[1]](#endnote-1) According to the BADIL Resource Center for Palestinian Residency and Refugee Rights, there are an estimated 344,599 Palestinians internally displaced in the occupied Palestinian territory (oPt).[[2]](#endnote-2) Badil reports that since 1967, Palestinians have been internally displaced through the destruction of three Palestinian villages, the demolition of Palestinian homes in the West Bank by Israeli forces, the destruction of Palestinian homes in Gaza during three large scale military offensives, the revocation of Palestinians’ residency rights in East Jerusalem and the construction of the Separation Wall in the West Bank, which began in 2002.[[3]](#endnote-3)

Despite their high number, there is little available data on the demographic indicators of Palestinian IDPs in the oPt, including the number registered with a disability.[[4]](#endnote-4) UN OCHA has noted that “major gaps in registration and profiling” of Palestinian IDPs has limited the ability of humanitarian organisations to respond to their needs in the oPt, with limited knowledge on the location, living conditions and vulnerabilities of IDPs.[[5]](#endnote-5) Badil suggests however, that the socio-economic characteristics of Palestinian IDPs are likely to be similar to the general population in the oPt.

Below we have outlined the relevant legal frameworks for protecting the rights of Palestinians with disabilities in the oPt and the barriers that Palestinians with disabilities face. The issues discussed have been directly raised by Palestinians with disabilities involved in MAP-supported projects. We also outline how Palestinians’ mental health is negatively affected by occupation and closure.

**Legal framework for disability rights in the occupied Palestinian territory**

As the occupying power, Israel is bound by its obligations under international humanitarian law and international human rights law toward local population in the oPt, including Palestinians with disabilities.

Israel ratified the UN Convention on the Rights of Persons with Disabilities (CRPD) in 2012. It is therefore obligated to ensure and promote the rights of all persons with disabilities within its jurisdiction, including those under its effective control as the occupying power in the West Bank, including East Jerusalem, and Gaza.

The State of Palestine also ratified the CRPD in 2014. The main legislation outlining the rights of people with disabilities in the oPt is the 1999 Law Nº4 on the Rights of Persons with Disabilities. This legislation has not been updated since the ratification of the CRPD so does not comply with international legal frameworks on disability rights. The Ministry of Social Development, with support from UNICEF, is currently reviewing the law.[[6]](#endnote-6) Israel’s continuing status as an occupying power limits the State of Palestine’s effective control over its own territory and its possibilities to ensure the rights of persons with disabilities.

**Barriers to disability rights in the occupied Palestinian territory**

According to the Palestinian Central Bureau of Statistics, 255,224 Palestinians have a disability in the oPt, comprising 6.8% of the population in Gaza and 5% in the West Bank.[[7]](#endnote-7) One fifth of Palestinians with disabilities are children.[[8]](#endnote-8)

UN OCHA has stressed that displacement exacerbates the vulnerability of people with disabilities.[[9]](#endnote-9)

In the oPt, children with disabilities are less likely to go to school compared to other children. In 2017, only half of Palestinian children with disabilities aged 6-17 years were enrolled in education. [[10]](#endnote-10) These figures varied between West Bank (51%) and Gaza (31%). The families of those with disabilities state that this is due to lack of support, transportation difficulties, physical barriers, and stigma or discrimination towards those with disabilities.[[11]](#endnote-11) As a result, more than one third of people with disabilities (10 years and over) are illiterate, with higher rates among females (46%) compared to males (20%).[[12]](#endnote-12)

In the oPt disability continues to be stigmatised, with degrading terminology and attitudes common. Speaking to MAP, a Palestinian from Gaza described the impact of such stigmatisation: “*Due to our harsh society, we are unable to be employed, or get married or have a chance to participate in recreational activities. We are sentenced to imprisonment in our houses. The society perceives us, women with disabilities, as disqualified from being wives, mothers or colleagues.”*

Another participant in a MAP-supported project emphasised the abuse and violence that Palestinian women with disabilities face: “*Women in my society face all types of violence, including sexual abuse. Imagine the situation of a woman with disability; we face twice the violence and abuse.”* A third of women with disabilities who are married or have been married have experienced violence from their husbands.[[13]](#endnote-13) This varies considerably between the West Bank and Gaza, affecting 42% of women with disabilities in Gaza, compared to 30% in the West Bank.[[14]](#endnote-14) More than a quarter of people with disabilities aged 18-64 years who have not been married have also experienced violence.[[15]](#endnote-15) Again, this is reported to be higher in Gaza (35%) compared to the West Bank (19%).

In Gaza people with disabilities are disproportionately affected by the poor socio-economic conditions, largely caused by the illegal and intensified closure imposed by Israel since 2007.[[16]](#endnote-16) UN OCHA has stated that people with disabilities in Gaza *“are among the most vulnerable groups in a society already in crisis.”[[17]](#endnote-17)* The closure is a primary driver of humanitarian needs and economic near-collapse in Gaza. MAP’s assessment is that the UN’s warning since 2012 that Gaza would be unliveable by 2020 has indeed come true.[[18]](#endnote-18) Some 96% of aquifer water is undrinkable.[[19]](#endnote-19) Almost half of the population (46%) lives below poverty line and many residents struggle to afford nutritious food, with 62% of households food insecure.[[20]](#endnote-20) Unemployment reached 47% in 2019, with unemployment amongst people disabilities recorded as high as 90%.[[21]](#endnote-21)

Limited electricity supply and frequent power cuts impede the rights of Palestinians with disability in Gaza, for instance preventing those with physical disabilities from using lifts to exit their homes and charging electrical wheelchairs. Those with hearing impairments also find it difficult to charge their hearing aids, limiting their ability to communicate with family and friends.

During the 2014 offensive on Gaza, Palestinians with disabilities - including those with mobility restrictions, hearing and visual impairments - had severe difficulty evacuating civilian buildings under attack, increasing their risk of injury and death. When preliminary warnings were given by Israel, these were not effective or advanced enough for individuals with disabilities to evacuate safely. In some circumstances people with disabilities had to be left in their homes, as family members were unable to evacuate them. One of MAP’s beneficiaries, a 17-year-old girl with a physical disability, died from smoke inhalation after being unable to be safely evacuated from her family house during an Israeli military attack on Gaza’s Middle Area on 13 August 2014. She died in hospital four days after the attack.

According to the Disability Representative Bodies Network, during the 2014 military offensive on Gaza, Israeli forces killed 23 people with disabilities and injured approximately 50, 2,204 Palestinians with disabilities were forcibly displaced and five centres for people with disabilities were attacked, leaving them partially or completely destroyed.[[22]](#endnote-22) The Mebarret Al Rahma Centre for People with Disabilities was one of scores of health sector buildings destroyed during the 2014 offensive. The attack occurred on 12 July 2014; two women with disabilities were killed and three residents with disabilities and a care support worker were severely injured. One of the women killed, Suha Abu Saada, had lost a leg when as a child her room had been hit by Israeli shelling.[[23]](#endnote-23)

Research indicates that the number of Palestinians in Gaza with a disability, whether physical or/and mental, has increased as a result of Israeli military offensives as well as the imposition of the closure policy which has generated higher levels of poverty. During the 2014 offensive on Gaza, 11,000 Palestinians were injured, 10% of whom were physically disabled.[[24]](#endnote-24) The Israeli force’s use of force against demonstrators at the ‘Great March of Return’ demonstrations in Gaza has also caused high numbers of disabling injuries. Between March 2018 and August 2019, 6,590 Palestinians had limb gunshot injuries, 149 amputations were carried out (a figure the WHO warns could drastically rise), 24 demonstrators were paralysed due to spinal cord injuries and 15 people suffered permanent loss of vision as a result of injuries caused during the demonstrations.[[25]](#endnote-25) An estimated 1,700 Palestinians still require extensive limb reconstruction treatment.[[26]](#endnote-26) None of these individuals will ever recover to full functionality. Only in the longer term will we be able to say how many will endure significant loss of function. The UN Commission of Inquiry into the Gaza protests *“found reasonable grounds to believe that Israeli snipers shot at journalists, health workers, children and persons with disabilities, knowing they were clearly recognizable as such.”[[27]](#endnote-27)*

**Mental health in the occupied Palestinian territory**

Common mental health disorders such as depression and anxiety, the severity of which for some sufferers constitutes a disability, have been found to be twice as prevalent among people living in poverty compared to higher income groups in international studies.[[28]](#endnote-28) In Gaza, where approximately 80% of people are dependent on some form of aid, and nearly half live below the poverty line, depressive and anxiety disorders are respectively the second and seventh highest causes of disability in the oPt.[[29]](#endnote-29)

The restriction on the movement of people and goods, deteriorating socio-economic situation, instability, protracted hostilities and ‘Great March of Return’ events have all increased the need for mental health and psychosocial support for patients, their families and other vulnerable groups in Gaza. This has become a major priority, particularly for children and adolescents, with significant gaps in terms of infrastructure, essential drugs and the availability of suitably qualified and experienced mental health professionals.

Fikr Shalltoot, MAP’s Director of Programmes in Gaza, explained: “*They [children in Gaza] will have never experienced a full day of electricity in their lives, and they are unlikely to have ever left the 40km by 12km Strip. They are now growing up in a place where the economy, healthcare, education, water and sanitation infrastructure are all de-developing. Unemployment among youth is 60%. They will see the daily suffering and struggles of their parents, including how serious health conditions deteriorate while Israel does not give them permits to travel to East Jerusalem for treatment. Last year [2017] 46 cancer patients died after this. Imagine watching that happen to your mother.”[[30]](#endnote-30)*

By 2017, the UN estimated that 25% of children in Gaza (290,000 children) still needed continuous psychosocial support.[[31]](#endnote-31) This estimation precedes large-scale violence and casualties sustained during the ‘Great March of Return’ demonstrations and are expected to have drastically risen.

The WHO outlined key challenges to mental health in the oPt in their 2019 report to World Health Assembly: *“The mental health of Palestinians is affected by the exposure to violence and the context of chronic occupation, with mental ill health representing one of the most significant public health challenges. In the Gaza Strip, over half of conflict-affected children may be affected by post-traumatic stress disorder. Furthermore, an estimated 210 000, or over one in 10, people suffer from severe or moderate mental health disorders in the Gaza Strip. Overall, the occupied Palestinian territory has one of the highest burdens of adolescent mental disorders in the Eastern Mediterranean Region. About 54% of Palestinian boys and 47% of Palestinian girls aged six to 12 years reportedly have emotional and/or behavioural disorders, and the overall disease burden for mental illness is estimated to account for about 3% of disability-adjusted life years.”[[32]](#endnote-32)*

According to the Norwegian Refugee Council, 68% of schoolchildren in areas close to the perimeter fence in Gaza have clear indications of psychosocial distress. *“The violence children witness daily, including the loss of loved ones, in the context of Israel’s crippling siege, which perpetuates and exacerbates Gaza’s humanitarian crisis, has left an entire generation emotionally damaged.”[[33]](#endnote-33)*

Speaking to MAP, Dr Yasser Abu Jamei, Director of the Gaza Community Mental Health Programme (GCMHP), underlined the burden placed on the mental health of Gaza’s population: *“The population in Gaza feels suffocated, beyond suffocation the mental health situation in Gaza is one that can be described as heavy with despair, feelings of frustration, and loss of hope.”*

Dr Abu Jamei reports that GCMHP have *“observed some children we have been working with that have had PTSD … are currently relapsing because the external environment does not aid their healing and treatment. Since these children remain in the same environment, exposed to these same levels of trauma triggers, then they will surely relapse.”[[34]](#endnote-34)* Frequent exposure to violence, means that there is no ‘post’ to Post Traumatic Stress Disorder in Gaza.

1. Palestinian Central Bureau of Statistics (2016), Palestinians at the End of 2016. <http://www.pcbs.gov.ps/post.aspx?lang=en&ItemID=1823> [↑](#endnote-ref-1)
2. Badil (2019), <http://www.badil.org/phocadownloadpap/badil-new/publications/survay/survey2016-2018-eng.pdf>, pp.48-49. Please notes Badil’s *“estimates include 1948 Palestinian refugees who have subsequently undergone internal displacement in the oPt, as no reliable data exists to indicate the percentage of 1967 IDPs who were also 1948 refugees.”* [↑](#endnote-ref-2)
3. Badil (2019), <http://www.badil.org/phocadownloadpap/badil-new/publications/survay/survey2016-2018-eng.pdf>, pp.48-49 [↑](#endnote-ref-3)
4. Badil (2019), <http://www.badil.org/phocadownloadpap/badil-new/publications/survay/survey2016-2018-eng.pdf>, pp.37 [↑](#endnote-ref-4)
5. UN OCHA (2016), <https://www.ochaopt.org/sites/default/files/idps_report_april_2016_english_1.pdf>, p.13 [↑](#endnote-ref-5)
6. UK Aid (2019), <https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/818130/query-12-Gaza-mapping.pdf> [↑](#endnote-ref-6)
7. PCBS (2018), <http://www.pcbs.gov.ps/portals/_pcbs/PressRelease/Press_En_Preliminary_Results_Report-en-with-tables.pdf> [↑](#endnote-ref-7)
8. PCBS (2018), <http://www.pcbs.gov.ps/portals/_pcbs/PressRelease/Press_En_Preliminary_Results_Report-en-with-tables.pdf> [↑](#endnote-ref-8)
9. UN OCHA (2016), <https://www.ochaopt.org/sites/default/files/idps_report_april_2016_english_1.pdf>, p.4 [↑](#endnote-ref-9)
10. PCBS (2019), <http://pcbs.gov.ps/portals/_pcbs/PressRelease/Press_En_3-12-2019-dis-en.pdf> [↑](#endnote-ref-10)
11. OCHA (2017), <https://www.ochaopt.org/content/gaza-people-disabilities-disproportionately-affected-energy-and-salary-crisis> [↑](#endnote-ref-11)
12. PCBS (2019), <http://pcbs.gov.ps/portals/_pcbs/PressRelease/Press_En_3-12-2019-dis-en.pdf> [↑](#endnote-ref-12)
13. PCBS (2019), <http://pcbs.gov.ps/portals/_pcbs/PressRelease/Press_En_3-12-2019-dis-en.pdf> [↑](#endnote-ref-13)
14. PCBS (2019), <http://pcbs.gov.ps/portals/_pcbs/PressRelease/Press_En_3-12-2019-dis-en.pdf> [↑](#endnote-ref-14)
15. PCBS (2019), <http://pcbs.gov.ps/portals/_pcbs/PressRelease/Press_En_3-12-2019-dis-en.pdf> [↑](#endnote-ref-15)
16. ICRC (2010), <https://www.icrc.org/en/doc/resources/documents/update/palestine-update-140610.htm> [↑](#endnote-ref-16)
17. OCHA (2017), <https://www.ochaopt.org/content/gaza-people-disabilities-disproportionately-affected-energy-and-salary-crisis> [↑](#endnote-ref-17)
18. UNCT (2012), <https://www.unrwa.org/userfiles/file/publications/gaza/Gaza%20in%202020.pdf> [↑](#endnote-ref-18)
19. Gisha (2020), <https://gisha.org/en-blog/2020/01/01/the-un-predicted-gaza-would-be-unlivable-by-2020-they-were-right/> [↑](#endnote-ref-19)
20. OCHA (January 2020), <https://www.ochaopt.org/sites/default/files/hrp_2020.pdf> [↑](#endnote-ref-20)
21. UK Aid (2019), <https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/818130/query-12-Gaza-mapping.pdf>. UNRWA also cited in 2016 that in Gaza, only 3,127 (11%) people with disabilities over 18 years of age were in the labour force, <https://www.unrwa.org/resources/about-unrwa/supporting-persons-disabilities> [↑](#endnote-ref-21)
22. Disability Representative Bodies Network (2015), The Suffering of Persons with Disabilities From The Violations Of Israeli Occupation Forces During the Operation Protective Edge (pdf of report attached with submission) [↑](#endnote-ref-22)
23. MAP (2015), [https://www.map.org.uk/downloads/no-more-impunity--gazas-health-sector-under-attack.pdf p15](https://www.map.org.uk/downloads/no-more-impunity--gazas-health-sector-under-attack.pdf%20p15) [↑](#endnote-ref-23)
24. OHCHR (2015), <http://www.ohchr.org/Documents/HRBodies/HRCouncil/CoIGaza/A-HRC-29-52_en.doc> [↑](#endnote-ref-24)
25. WHO (2019), <http://www.emro.who.int/images/stories/palestine/documents/SitRep_Aug_2019_v0_SH_rev_GRO.pdf?ua=1> [↑](#endnote-ref-25)
26. MAP (2019), <https://www.map.org.uk/news/archive/post/1058-mapas-largest-limb-reconstruction-mission-to-gaza-yet> [↑](#endnote-ref-26)
27. <https://www.ohchr.org/EN/HRBodies/HRC/Pages/NewsDetail.aspx?NewsID=24226&LangID=E> [↑](#endnote-ref-27)
28. Patel and Kleinman (2003), <http://www.who.int/bulletin/volumes/81/8/Patel0803.pdf> [↑](#endnote-ref-28)
29. Institute for Health Metrics and Evaluation (2015),<http://www.healthdata.org/palestine> [↑](#endnote-ref-29)
30. <https://www.map.org.uk/news/archive/post/915-mapas-director-of-programmes-in-gaza-speaks-at-labour-party-conference> [↑](#endnote-ref-30)
31. UNOCHA (2017), <https://www.ochaopt.org/sites/default/files/hno_20_12_2017_final.pdf> [↑](#endnote-ref-31)
32. WHO (2019), <https://apps.who.int/gb/ebwha/pdf_files/WHA72/A72_33-en.pdf> [↑](#endnote-ref-32)
33. NRC (2019) <https://www.nrc.no/news/2019/march/gaza-childrens-mental-health-rapidly-deteriorating/>  [↑](#endnote-ref-33)
34. MAP (2018), <https://www.map.org.uk/news/archive/post/831-map-raises-concerns-over-mental-health-impact-of-violence-against-gaza-protesters> [↑](#endnote-ref-34)