

When sanctuaries of humanity turn into corridors of horror: The destruction of healthcare in Gaza

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Nelson Mandela said, 'The histories of our two peoples, Palestinian and South African, correspond in such painful and poignant ways.'^[1] In South Africa (SA), *Apartheid* was enforced through laws mandating 'separateness', based on race. This extended to limiting the movement of people of colour, prohibiting interracial marriage, restricting social and residential integration between racial groups,^[2] and divisions within educational facilities and healthcare systems. That Israel's practices in occupied Palestinian territories mirror the gross discriminatory practices of the past apartheid regime in SA is no hidden secret. South Africans who have researched, reflected on and experienced issues in occupied Palestine draw a close comparison between the two regimes.^[1] In addition, several independent reports and international human rights organisations have highlighted stark similarities between the two systems.^[3-6] The Gaza Strip is often labeled as 'the world's largest open-air prison' and a 'laboratory' for Israel to test and refine techniques of control and management.^[7] Since 7 October 2023, following the Hamas-led attack on Israel within the context of decades-long occupation, Gaza has witnessed the worst form of human suffering and collapse of infrastructure, including in healthcare. The ongoing violence in the region disproportionately affects the most vulnerable in Gaza: the sick, pregnant women, children and the elderly.^[8]

This paper explores the historical barriers to accessing healthcare in occupied Palestinian territories, and the current and ongoing collapse of healthcare infrastructure due to the war taking place in Gaza, which continues to deny healthcare workers protection, and patients and vulnerable groups, access to healthcare services.

Healthcare in the occupied Palestinian territories

Barhoush and Amon reveal through evidence-based assessments and reviews, the systematic violation of Palestinians' right to health in occupied Palestine by Israel since the occupation began in 1967. This has resulted in a form of 'medical *apartheid*' where Palestinians continue to encounter major barriers to realising their fundamental right to health.^[9] The people of Gaza endure physical trauma, psychological distress and social wounds directly linked to the combination of military occupation and the closure of its border, essentially forcing and trapping them in despair. The destruction of healthcare infrastructure in particular, has methodically added strain on an already dire situation in Gaza, severely affecting the availability and accessibility of essential healthcare services for the population, and further perpetuating the cycle of suffering.^[7]

In early 2023, the World Health Organisation launched two reports – the *Right to Health 2019 to 2021* and *Palestinian Voices 2022 to 2023* – which explicitly draw connections between the fragmentation of the Palestinian people, permit regime, physical obstacles to movement and protection gaps; and health inequities, barriers to healthcare provision and access to health in occupied Palestine.^[10-11] The *Right to Health* report provides an analysis of data collected through monitoring, to support evidence-based advocacy to strengthen respect, protection, and fulfilment of the right to health in the occupied Palestinian territories.^[12] The report which focusses on health access, attacks on health care and health services availability, specifically analyses the data on barriers to the right to health for Palestinians in the West Bank, including east Jerusalem, and the Gaza Strip between 2019 and 2021, with additional retrospective analyses to demonstrate long-term trends and structural limitations. According to the report, the blockade of the Gaza Strip since 2007 has severely affected the movement of people, as well as goods and services. To reach the rest of occupied Palestine (West Bank, including east Jerusalem), Israel, or Jordan, Palestinians in the Gaza Strip are required to apply for permits to cross a checkpoint at Erez (Beit Hanoun). Since 2017, Israel has more than doubled the required time for submission of non-urgent patient applications, prior to hospital appointments, from 10 to 23 working days. Despite the severity of their conditions, patients applying for permits to exit Gaza are vulnerable; with only 65% of patient permits between 2019 and 2021 being approved in time to reach the patient's hospital appointment. In most instances, no explanation for the delay or denial of permits is provided, highlighting the arbitrariness of the process and lack of procedure and transparency.

Companion accompaniment of patients is particularly critical for children, incapacitated patients, and those with disabilities, which may affect medical consent, emotional support needs, and capacity for self-care. However, between 2019 and 2021, only 46% of companion permits were approved in time for the patient's hospital appointment. Ambulances transporting patients across Erez (Beit Hanoun) checkpoint frequently faced long delays, with ambulances transferring patients out of Gaza waiting 68 minutes on average during 2019 and 2021, with the highest wait time of 80 minutes recorded in 2020.^[12] The report further raises grave concerns over the criminalisation and securitisation of healthcare. It documented 385 interrogations of patients and/or companions needing access out of the Gaza Strip, and the arrest and detention of 35 patients, companions, or healthcare workers by Israel at Erez (Beit Hanoun) checkpoint. In 2021, a healthcare organisation was

deemed illegal by Israel, and charges of supporting terrorism were brought against staff working for the organisation. The decision was issued in the context of Israel's designation of six other NGOs as 'terrorist organisations'. The report outlined the considerable barriers to the right to health, affecting the sustainable provision of healthcare, health access, and the protection of healthcare in occupied Palestinian from 2019 to 2021. *Palestinian voices 2022 - 2023* highlights some of the cases concerning the impact of barriers in accessing healthcare on the Palestinian people in Gaza and the West Bank, including attacks on healthcare. For example, a 19-month-old girl, Fatma Al-Masri, from Khan Younis in the Gaza Strip, died on 25 March 2022 owing to delayed access to lifesaving cardiac surgery by almost three months. However, no report could have predicted the horrors that would befall the Gaza strip in 2023.

November 2023

As at 16 November 2023, the Palestinian rising death toll reached 11 360, including mostly civilians, thousands of whom were children, with the UN stating that there can be 'no winners in a war where thousands of children are killed'.^[13] The WHO defines an attack on healthcare as 'any act of verbal or physical violence or obstruction or threat of violence that interferes with the availability, access, and delivery of curative and/or preventive health services during emergencies'.^[14] More recently, we have heard about the attacks on and around Al-Shifa Hospital, Al-Rantisi Naser Paediatric Hospital, Al-Quds Hospital and others in Gaza city and northern Gaza. In just over one month, the WHO recorded at least 250 attacks on healthcare in Gaza, including the deaths and injuries of many patients and healthcare workers.¹⁵ The WHO has reiterated warnings that the siege of Gaza will provoke a health crisis of immense dimensions. This in turn, will lead to trans-generational consequences.^[16]

According to SA President Ramaphosa: 'What is happening in Gaza has now turned it into a concentration camp where genocide is taking place... we are opposed to the operation that is ongoing as it is now targeting hospitals, where babies, women, and the injured are dying like flies and where care of life is something that is completely ignored and put aside'.^[17]

Yet, the violence and attacks continue, with flagrant disregard of the Geneva and Hague conventions, the Rome Statute, occupational law, and international and humanitarian law.^[18] An open letter signed by over 3 000 global health professionals, highlighted statements from the WHO, UN Experts, Doctors without Borders (MSF), The International Federation of Red Cross and Red Crescent Societies (IFRC), The International Committee of the Red Cross (ICRC) and others that unequivocally condemn acts of violence against civilians in occupied Palestine. In particular, these statements condemned 'the cut off of food, water, electricity and life-saving supplies to the Gaza region, attacks on health facilities and personnel, as well as the lack of civilian safe zones and a humanitarian corridor'.^[8] The open letter outlines immediate humanitarian priorities as well as long-term objectives. Immediate humanitarian priorities include, but are not limited to, recognising the human rights of all people which includes the right to health, access to water and food, and immediate action to uphold these rights; safeguarding the health and welfare of children, pregnant women, and the elderly, disabled and wounded, as vulnerable persons in conflict; and the immediate flow of essential supplies and other humanitarian

support into Gaza.^[8] The open letter continues with the immediate call for the explicit protection of health services and those receiving or providing healthcare. This comprises protection against the destruction of critical infrastructure and objects indispensable to the survival of the civilian population, including hospitals and other centres delivering healthcare services, roads, clean water, uninterrupted electricity, and other necessary tools and supplies.^[8] International solidarity to support those displaced by the violence (including humanitarian or financial support, asylum, or by whatever means necessary to grant displaced persons dignity, autonomy, recovery, and the right to return) is cited as a long-term objective.

Conclusion

As we witness the flattening of Gaza and the mass killing of innocent civilians, with frequent and extensive violations of international law, we also see hospitals, traditionally regarded as sanctuaries of humanity transform into corridors of horror. The world continues to watch as the attacks and human suffering escalate at the hands of an aggressor who acts with impunity – devoid of compassion. To date, all but one of the hospitals in Gaza City and Northern Gaza are reportedly out of service due to the cut-off of power, and/or lack of medical supplies, oxygen, food and water, compounded by the bombardments and attacks.^[19] While there are many uncertainties in this ongoing crisis, a few things are clear:

1. Regardless of borders or identity, the call of the global healthcare movement underscores how critical it is to act for humanity.
2. Hospitals, medical personnel, patients, children and innocent civilians are specifically protected under international humanitarian law. Their continued and brutal killing has no justification.
3. World leaders need to be reminded about the sanctity of upholding basic human rights, which is in itself, outrageous. Nevertheless, there is a test for commitment by world leaders to uphold human rights and democracy.
4. All transgressors of crimes against humanity must be prosecuted by the International Criminal Court.

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