Israeli Restrictions on Travel of Gaza Patients Referred for Treatment Abroad
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The Palestinian Centre for Human Rights (PCHR) monitors and reports on Israeli restrictions on the freedom of movement of Palestinian patients from the Gaza Strip as thousands of them were denied travel for medical treatments since Israel imposed the closure policy on the Gaza Strip in 2007. This report covers 2018 and 2019 and it addresses the systematic Israeli challenges imposed on Gaza patients seeking medical treatment abroad in order to deprive them from travel and receipt of the necessary medical care.

The report explores the dangerous deterioration of health services in the Gaza Strip and addresses the two main factors contributing to its diminishing capacities: the Israeli closure, and the Palestinian political division and inadequate medical crews. The Gaza Strip’s hospitals inability to address thousands of medical cases led to the overall deterioration in the health sector and the spike in the number of patients referred for treatment abroad.

The report focuses as well the Israeli restrictions imposed on Palestinian patients, denying thousands from receiving medical aid abroad. It also sheds a light on patients’ freedom of movement and their right to access medical services from a human rights perspective, as stipulated in numerous international treaties, including international humanitarian law and international human rights law.
Additionally, the report highlights PCHR efforts in helping patients referred for treatment abroad through daily follow-up on violations of patients’ rights through its Legal Aid Unit, which has, for all the years of the closure, prioritized the right to health and provided counsel for thousands of patients and their families.

This report is based upon testimonies of specialists at MOH and its Treatment Abroad Department, the Palestinian General Authority For Civil Affairs (GACA), international non-governmental organizations (INGO) working in the health sector, as well as testimonials by Gaza patients and their families.
Summary

This report examines the roadblocks Israel systematically uses to deprive Gaza patients from accessing medical care, especially banning critically ill patients, dozens of whom have died, from travel for medical treatment under the pretext that the necessary medical care is available in Gaza or that their disease do not pose imminent threat to their lives. Israeli authorities do not uphold criteria for the systematic discrimination practiced against Gaza patients as many are denied exit permits without justification, or due to a security issue pertaining to family members. Additionally, patients and their companions are subjected to arrest and investigation at Beit Hanoun “Erez” Crossing; they are also blackmailed into doing Israeli occupation forces (IOF) services in exchange for an exit permit to receive medical treatment abroad. Furthermore, the journey towards medical treatment is controlled by IOF and is characterized with its length, disregard for patients’ appointments, stalling in replying to exit permit requests, and strict restrictions on suitable medical companions.

The Gaza Strip’s hospitals inability to address thousands of medical cases led to the overall deterioration in the health sector and the spike in the number of patients referred for treatment abroad, bearing in mind that 350 medical machines at Ministry of Health (MOH) hospitals are out of function, 48% of medicines (including 38 types of medicine required for treatment of cancer patients) and 24% of medical disposables are unavailable.

From 2008 - 2018, PCHR documented that IOF obstructed the travel of 51,056 out of 179,746 (28.4%) Palestinian patients from the Gaza Strip re-
ferred for treatment at hospitals in the West Bank, occupied East Jerusalem and Israel. The reasons supplied by IOF for refusing patient requests for exit permits were as follows:
» 7,491 for security reasons (4.1%);
» 5,570 received no reply (3.1%);
» 25,015 received delayed responses and put under study (13.9%);
» 2,138 required to change their companions (1.1%);
» 10,662 patients were delayed for various reasons including awaiting results after the security interview with Israeli intelligence, classifying a patient’s condition to concern the quality of their lives rather than being a matter of life or death, unsatisfactory application, requiring the patient to reschedule their appointment or requiring patients to submit a new application.

In 2019, IOF obstructed the travel of 8,585 Gaza patients out of 24,340 applications (35.2%) for the following reasons:
» 2,162 for security reasons (8.8%);
» 1,441 received no reply (5.9%);
» 3,808 received delayed responses and put under study (15.6%);
» 104 were required to change their companion (0.4%);
» 1,070 were delayed for different reasons (4.3%)

The report reiterates that the international humanitarian law, the Fourth Geneva Convention of 1949 and the Additional Protocol of 1977 guaranteed the right to health for civilians, particularly for the wounded and ill. Furthermore, the international human rights law has enriched the right of patients to access health services in a number of international covenants, including the Universal Declaration of Human Rights (1948), the International Covenant on Economic, Social and Cultural Rights (1966), and the International Convention on the Elimination of All Forms of Racial Discrimination (1965).
Additionally, the report highlights PCHR efforts in helping patients referred for treatment abroad through daily follow-up on violations of patients’ rights through its Legal Aid Unit, which has, for all the years of the closure, prioritized the right to health and provided counsel for thousands of patients and their families. Through 2008 – 31 December 2019, PCHR provided legal aid to 1,700 patients that were unable to travel for various reasons, including lacking financial coverage or not having a scheduled appointment at a hospital. Furthermore, PCHR assisted 6,244 patients that were denied travel by submitting complaints and objections with the Israeli Humanitarian Cases Centre, and succeeded in helping 2,642 (42.3%) travel for medical treatment abroad.

This report is based upon testimonies of specialists at MOH and its Treatment Abroad Department, the Palestinian General Authority For Civil Affairs (GACA), international non-governmental organizations (INGO) working in the health sector, as well as testimonials by Gaza patients and their families.
I. Deterioration of Health Services in the Gaza Strip and the Need for Treatment Abroad as the Only Alternative

During the past 13 years, the Gaza Strip’s need and dependency on treatment abroad spiked due to the frail public health system in Gaza, which is primarily caused by the Israeli closure, as well as the Palestinian political division which has had regrettable and catastrophic implications for the health sector, including shortage in drugs and medical disposables, reduction to MOH employees’ salaries, and the aggravating electricity crisis and its consequences on the health services provided at Gaza hospitals. Additionally, the health sector was stretched thin due to the increase in population density and natural growth of the population vis-a-vis the extremely lacking medical capacities in terms of crews, specializations, medicine and facilities that are needed for the treatment of critical illnesses.

1- Consequences of the Israeli Closure on the Health Sector

Over the past 13 years of the Israeli-imposed closure on the Gaza Strip, the health sector suffered immensely due to the Israeli ban on imports of new medical equipment or spare parts for maintain broken equipment. The crisis with medical equipment constituted a major roadblock for developing and sustaining the Gaza Strip hospitals and medical centers to meet the local needs.
According to MOH data, the number of broken medical equipment is 350 out of 6100, primarily electronic and digital boards for a large number of medical devices, blood chemical analyzers, PCRF for hepatitis C detection, blood gas analyzers used in intensive care unit\(^1\).

The Israeli ban on importing medical equipment or spare parts undermined local hospitals’ capacity to treat hundreds of illnesses and forced MOH to cancel dozens of scheduled operations, some indefinitely postponed. Eventually, MOH was forced to refer patients to alternative hospitals for the necessary medical checkups, which has led to the increase in the number of patients referred for treatment abroad.

2. Consequence of the Palestinian political division on the health sector and the shortage in specialized medical staff

The Palestinian political division has caused the deterioration of health services provided for the Gaza population in its 13 years of reign over the Palestinian situation, as the health sector reached an unprecedented lack in equipment, staff, and medicines. The health sector was stretched thin due to the increase in population density and natural growth of the population vis-a-vis the extremely lacking medical capacities especially that MOH stopped recruiting in the Gaza Strip.

The political division and disputes between the Gaza and Ramallah political axis has resulted in an extreme lack of drugs and medical disposables in the Gaza Strip hospitals and medical centers, in addition to MOH’s refusal to fund the procurement of new equipment or spare parts.

1. PCHR researcher interview with Dr. Ashraf al-Qedra, MOH Spokesperson in Gaza on 28 January 2019.
According to MOH – Gaza, the Gaza Strip hospitals and medical centers suffered a crisis in drug shortage in 2019 especially for cancer, renal and chronic diseases “diabetes and blood pressure”, as well as thalassemia, therapeutic milk “galactomin milk”, and drug doses for hemophilia patients. According to Dr. Munir al-Borsh, Director General of Pharmacies – MOH, there are 9 lists of basic drugs and medical consumables covering 13 hospitals and 54 health care centers in the Gaza Strip. He added that drugs and medical consumables crisis in the Gaza Strip is due to MOH – Ramallah’s disregard for their responsibilities to supply drugs to the Gaza Strip, noting that Gaza’s share is around 40% of the total percentage of drugs and medical consumables of the Palestinian National Authority (PNA). In 2019, MOH only supplied 3% of the annual needs (drugs supplied to the Gaza Strip estimated at 10 million USD; medical consumables estimated at 2 million USD). Al-Borsh pointed out that the categories at zero stock are: 48% for drugs, 24% for medical consumables, including primary care (65%), cancer and blood disorders (56%), immunity disorders and epidemics (72%), dialysis (55%), mental health and neurosurgery (40%), and women and child’s health (71%). He elaborated that the medicine shortage crisis in the Strip has affected many categories including 8000 cancer patients; 2000 of them take drug doses, as 38 types of cancer drugs ran out of stocks, i.e. 62% of the treatment protocols. Those categories also included 1189 kidney patients; 39 of them are children, who undergo frequent dialysis, and 125 hemophilia patients, half of them are children, as lack of factor 8 and factor 9 drug doses would subject patients’ life to serious health symptoms, including coagulation. In addition, this crisis has also affected thalassemia patients and chronic diabetes and hypertension patients.2

2. PCHR interview with Dr. Munir al-Borsh, Director General of Pharmacies – MOH, on 17 June 2019.
Dr. Abdul Nasser Sobh, World Health Organization (WHO) Health Sector Coordinator, discussed WHO supervisory role over health services, including the import of drugs, medical disposables and supplies to Gaza Strip hospitals. In his statement, Dr. Sobh asserted that the primary cause for the drugs crisis in the Gaza Strip is the Palestinian political division, which does not excuse either party of their responsibility towards patients, pointing out that WHO is currently filling in the gaps until both parties in the West Bank and the Gaza Strip reach a political solution. Dr. Sobh stated that the private health sector’s contribution towards the crisis is much greater than the government’s, as it supplied 15 million USD of the 24.5 million USD 2018 total expenses in the oPt, compared to 9 million USD from the MOH – Ramallah and 0.5 million USD by MOH – Gaza.³

The drug and medical disposables categories at zero stock at MOH warehouses over the past 8 years are as follows⁴:

Table (1): Percentages of the Stock-out Medicines and Essential Medical Disposables from 2012-2019

<table>
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</tr>
</thead>
<tbody>
<tr>
<td>Drugs</td>
<td>38%</td>
<td>35%</td>
<td>26%</td>
<td>30%</td>
<td>31%</td>
<td>30.9%</td>
<td>50%</td>
<td>48%</td>
</tr>
<tr>
<td>Medical Disposables</td>
<td>35%</td>
<td>29%</td>
<td>30%</td>
<td>22%</td>
<td>25%</td>
<td>8.8%</td>
<td>30%</td>
<td>24%</td>
</tr>
</tbody>
</table>
The drugs and medical disposables shortage crisis has reflected on the lives of patients and put them through grave mental and financial trouble, as hundred, particularly patients with cancer, immunity disorders, epidemics, dialysis, kidney transplantation, surgery and intensive care, are unable to obtain the medicines needed to treat their diseases.

The crisis has also manifested over the quality of services provided by MOH hospitals across the Gaza Strip, emergency services, surgeries, ICU and cardiology, which resulted in thousands of Gaza patients who cannot find appropriate medical treatment and hundreds of scheduled operations cancelled, which created a need for treatment abroad options.
In light of the above crises crippling the health sector in the Gaza Strip, namely the Israeli-imposed closure, the internal political division and the shortage in medical capacity versus population growth, the quality of health services deteriorated dramatically in Gaza hospitals, and MOH ought to refer hundreds of cases for medical treatment abroad due to insufficient local capacities, especially in addressing critical diseases.

According to MOH, cases of referral for treatment abroad for patients in the Gaza Strip in 2018, according to the type of disease were as follows: cancerous diseases 23.4%; blood diseases 7.7%; pediatrics 6.0%; orthopedics 8.0%; eye diseases 5.2%; atomic scanning 4.9%; MRI 1.8%; cardiac catheterization 8.3%; cardiology 4.4%; neurosurgery 3.0%; internal medicine 3.5%; urology 3.5%; general surgery 3.2%; cardiac surgery 2.9%; laboratory analysis 1.0%; vascular hematology 2.4%; ear, nose, throat 1.7%; intensive care 0.8%; kidney disease 1.7%; other diseases 6.6%.

Table (2): Distribution Percentages of Referrals Abroad According to type of Disease for 2018

<table>
<thead>
<tr>
<th>Disease</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other</td>
<td>6.6%</td>
</tr>
<tr>
<td>Renal</td>
<td>1.7%</td>
</tr>
<tr>
<td>ICU</td>
<td>0.8%</td>
</tr>
<tr>
<td>ENT</td>
<td>1.7%</td>
</tr>
<tr>
<td>Vascular</td>
<td>2.4%</td>
</tr>
<tr>
<td>Labs</td>
<td>1.0%</td>
</tr>
<tr>
<td>Cardiac surgery</td>
<td>2.9%</td>
</tr>
<tr>
<td>General surgery</td>
<td>3.2%</td>
</tr>
<tr>
<td>Urology</td>
<td>3.5%</td>
</tr>
<tr>
<td>Internal medicine</td>
<td>3.5%</td>
</tr>
<tr>
<td>Neurosurgery</td>
<td>3.0%</td>
</tr>
<tr>
<td>Cardiology</td>
<td>4.4%</td>
</tr>
<tr>
<td>Cardiac catheterization</td>
<td>8.3%</td>
</tr>
<tr>
<td>MRI</td>
<td>1.8%</td>
</tr>
<tr>
<td>Atomic scanning</td>
<td>4.9%</td>
</tr>
<tr>
<td>Eye diseases</td>
<td>5.2%</td>
</tr>
<tr>
<td>Orthopaedics</td>
<td>8.0%</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>6.0%</td>
</tr>
<tr>
<td>Blood diseases</td>
<td>7.7%</td>
</tr>
<tr>
<td>Oncology</td>
<td>23.4%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

Figure (2): Distribution Percentages of Referrals Abroad According to type of Disease for 2018
II. IOF obstructs the travel of thousands of patients referred for treatment abroad

Before imposing the closure policy on the Gaza Strip in June 2007, IOF allowed Gaza patients with medical referrals for treatment abroad at hospitals in Israel or the West Bank, including occupied East Jerusalem, to cross Beit Hanoun “Erez” Crossing; nevertheless, the process entailed humiliating and degrading treatment at the crossing. According to MOH, the number of patients who were referred for treatment abroad and allowed to travel via Beit Hanoun Crossing before 2007 was 20,000/year.

After Hamas Movement ceased control over the Gaza Strip mid-June 2007, Israel imposed a strict closure on the GAZA Strip that entailed heavy restrictions on the movement of goods and basic needs, as well as the movement of the Gaza population, including patients which decreased the number of patients allowed to cross Beit Hanoun crossing for treatment abroad. According to PCHR’s follow-up, the number of patients allowed to travel through Beit Hanoun from 2007 – 2019 is considerably less than the number of patients before 2007. The current number of cases allowed to receive treatment is totally insufficient considering the low quality of health services in Gaza and the population growth.

At the same time, those patients who are allowed to travel through Beit Hanoun crossing to receive treatment abroad go through a complicated process that is time consuming and may take several months, until a patient obtains an exit permit.
1. Obstructing the travel of 51,056 patients referred for treatment abroad between 2008 – 2018

From 2008 – 2018, IOF obstructed the travel for medical treatment of 51,056 Palestinian patients from the Gaza Strip out of 179,746 referred to hospitals in Israel or the West Bank, including occupied East Jerusalem (28.4%). The reasons supplied by IOF for refusing patient requests for exit permits were as follows:

» 7,491 for security reasons (4.1%);
» 5,570 received no reply (3.1%);
» 25,015 received delayed responses and put under study (13.9%);
» 2,138 required to change their companions (1.1%);
» 10,662 patients were delayed for various reasons including awaiting results after the security interview with Israeli intelligence, classifying a patient’s condition to concern the quality of their lives rather than being a matter of life or death, unsatisfactory application, requiring the patient to reschedule their appointment or requiring patients to submit a new application.

Below, full details of Israeli responses to requests for exit permits made by patients referred for medical treatment abroad between 2008 – 2018:
Table (3): Israeli response to patients referred for treatment abroad from 2008-2016: shows the Israeli replies on patients referred for medical treatment abroad during the years 2008-2018.

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>No Reply</td>
<td>2133</td>
<td>660</td>
<td>166</td>
<td>42</td>
<td>43</td>
<td>249</td>
<td>318</td>
<td>294</td>
<td>826</td>
<td>407</td>
<td>612</td>
<td>5750</td>
</tr>
<tr>
<td>Under consideration</td>
<td>1197</td>
<td>484</td>
<td>484</td>
<td>154</td>
<td>109</td>
<td>424</td>
<td>1303</td>
<td>2016</td>
<td>5715</td>
<td>7179</td>
<td>5950</td>
<td>25015</td>
</tr>
<tr>
<td>Approved</td>
<td>6317</td>
<td>5154</td>
<td>9113</td>
<td>9484</td>
<td>8635</td>
<td>12121</td>
<td>14965</td>
<td>16988</td>
<td>16290</td>
<td>13803</td>
<td>15820</td>
<td>128690</td>
</tr>
<tr>
<td>Denied</td>
<td>298</td>
<td>143</td>
<td>646</td>
<td>237</td>
<td>85</td>
<td>42</td>
<td>535</td>
<td>1244</td>
<td>1704</td>
<td>579</td>
<td>1978</td>
<td>7491</td>
</tr>
<tr>
<td>Change companion</td>
<td>32</td>
<td>1</td>
<td>85</td>
<td>63</td>
<td>71</td>
<td>223</td>
<td>313</td>
<td>641</td>
<td>409</td>
<td>90</td>
<td>210</td>
<td>2138</td>
</tr>
<tr>
<td>Denied for different reasons</td>
<td>397</td>
<td>728</td>
<td>635</td>
<td>315</td>
<td>252</td>
<td>608</td>
<td>667</td>
<td>690</td>
<td>1325</td>
<td>3738</td>
<td>1307</td>
<td>10662</td>
</tr>
<tr>
<td>Total</td>
<td>10374</td>
<td>7170</td>
<td>11129</td>
<td>10295</td>
<td>9195</td>
<td>13667</td>
<td>18101</td>
<td>21873</td>
<td>26269</td>
<td>25796</td>
<td>25877</td>
<td>179746</td>
</tr>
</tbody>
</table>

Figure (3): Israeli response to patients referred for treatment abroad from 2008-2018.
2. Obstructing the travel of 8,585 patients referred for treatment abroad in 2019

In 2019, the Israeli authorities have been obstructing travel of thousands of patients from the Gaza Strip after obtaining medical referrals for treatment in the hospitals of Israel and the West Bank, including occupied East Jerusalem. Patients have been obstructed for security reasons or without clarifying the reasons; not replying to the patient’s permit under the pretext of being under security check; asking the patient to change the treatment appointment or submit a new application; asking the patient for a security interview; considering patient’s application unsatisfactory; considering the patient’s case “improving quality of life “and not a “lifesaving” case according to the Israel classification.

Table (4) Israeli Replies to Travel Permits of Patients Referred for Treatment Abroad in 2019

<table>
<thead>
<tr>
<th>Approved/Denied</th>
<th>January</th>
<th>February</th>
<th>March</th>
<th>April</th>
<th>May</th>
<th>June</th>
<th>July</th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approved</td>
<td>1611</td>
<td>1181</td>
<td>1291</td>
<td>1396</td>
<td>1341</td>
<td>1444</td>
<td>1634</td>
<td>1124</td>
<td>1176</td>
<td>1021</td>
<td>1128</td>
<td>1408</td>
<td>15755</td>
</tr>
<tr>
<td>Denied for Security Reasons</td>
<td>191</td>
<td>118</td>
<td>74</td>
<td>120</td>
<td>177</td>
<td>257</td>
<td>196</td>
<td>219</td>
<td>219</td>
<td>159</td>
<td>190</td>
<td>242</td>
<td>2162</td>
</tr>
<tr>
<td>No Reply</td>
<td>14</td>
<td>14</td>
<td>20</td>
<td>25</td>
<td>200</td>
<td>48</td>
<td>88</td>
<td>95</td>
<td>144</td>
<td>212</td>
<td>326</td>
<td>255</td>
<td>1441</td>
</tr>
<tr>
<td>Under Security Check</td>
<td>417</td>
<td>259</td>
<td>533</td>
<td>514</td>
<td>410</td>
<td>238</td>
<td>271</td>
<td>192</td>
<td>309</td>
<td>229</td>
<td>191</td>
<td>245</td>
<td>3808</td>
</tr>
<tr>
<td>Changing Patient’s Com-panion</td>
<td>6</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>6</td>
<td>22</td>
<td>13</td>
<td>13</td>
<td>11</td>
<td>11</td>
<td>8</td>
<td>6</td>
<td>104</td>
</tr>
<tr>
<td>Denied for other reasons</td>
<td>161</td>
<td>62</td>
<td>81</td>
<td>103</td>
<td>72</td>
<td>118</td>
<td>93</td>
<td>89</td>
<td>57</td>
<td>129</td>
<td>62</td>
<td>43</td>
<td>1070</td>
</tr>
<tr>
<td>Total Permit applications</td>
<td>2400</td>
<td>1636</td>
<td>2002</td>
<td>2161</td>
<td>2206</td>
<td>2127</td>
<td>2295</td>
<td>1732</td>
<td>1916</td>
<td>1761</td>
<td>1905</td>
<td>2199</td>
<td>24340</td>
</tr>
</tbody>
</table>

*Source: Palestinian Liaison Department in the Palestinian Ministry of Health*
Figure (4): Israeli Replies to Travel Permits of Patients Referred for Treatment Abroad in 2019

The figures reviewed in the abovementioned table indicate that the Israeli authorities obstructed from 01 January to 30 November 2019 the travel of 7,795 patients out of 22,144 from the Gaza Strip after applying for an exit permit for treatment in the hospitals of Israel and the West Bank, including occupied East Jerusalem (i.e. 35.1% of the total applied permits). The Israeli authorities attributed denying 1,920 patients travel for security reasons (8.6%); and did not reply to 1,186 applications (5.3%). Meanwhile, they delayed reply to the travel of 3,563, claiming that the patient is under security check (16.1%) while they asked 98 patients to change their companions (0.4%) and delayed the travel of 1,027 patients for different reasons such as waiting for the response after having a security interview or that patients’ cases are only to improve quality of life and not a lifesaving case according to the Israeli classification. Further, the Israeli authorities might find that the permit application is inappropriate or ask patients to change their treatment appointments or submit a new application.
III. Israeli restrictions on travel of patients referred from the Gaza Strip for treatment abroad

During the years of the Israeli-imposed closure of the Gaza Strip, ongoing since June 2007, the Israeli authorities deliberately obstructed the travel of patients who suffer from serious diseases and deprived them from receiving medical treatment abroad. The Israeli authorities have imposed strict restrictions on the travel of patients via Beit Hanoun “Erez” crossing and their ability to access the hospitals they are referred to either in Israel or the West Bank. It should be noted that Beit Hanoun crossing is the sole outlet for the people of the Gaza Strip to travel abroad or to the rest of the occupied Palestinian territory.6

PCHR has monitored a set of obstacles that the Israeli authorities impose to deliberately deprive the Gaza Strip patients of treatment; most prominently:

» Denying patients treatment under the pretext that it is available in the Gaza Strip or by claiming that their diseases do not pose threat to their lives
» Denying patients travel without clarifying the reason
» Denying patients travel for treatment under pretext a related family member is in violation of Israeli law
» The arrest of patients or their companions at the Beit Hanoun “Erez” crossing
» Investigating and blackmailing patients or their companions for granting them exit permits for treatment
» Delaying response to patients and disregard for their treatment appointments
» Imposing severe restrictions on patients’ companions.

All these obstacles made the travel of Gaza Strip patients very complicated and exhausting.

6. The Rafah crossing point along the Palestinian-Egyptian borders is closed sporadically and travellers through it go through extreme hardship. This is manifested in subjecting the Gaza Strip travellers to long, recurrent and unjustified searches by the Egyptian authorities that prolong their normally 6-hour return trip from Cairo for days. Travellers are forced to sleep in cars and cafeterias. It has become impossible for patients to travel to receive treatment in the Egyptian hospitals and they are left with Beit Hanoun Crossing as their only outlet.
1. Denying patients treatment under the pretext that it is available in the Gaza Strip or by claiming that their diseases are not life-threatening

Over the years of the closure imposed on the Gaza Strip, the Israeli authorities have prevented thousands of patients from traveling for treatment under the pretext that their treatment is available in the Gaza hospitals or by claiming that their diseases are not life threatening, and their treatment is only to improve “quality of life”.

Categories of patients, who have been denied travel for treatment abroad, include patients with serious diseases, such as vision loss and amputation, claiming that their cases are not lifesaving but only for improving quality of life, increasing the number of patients who were denied treatment at the Hospitals they referred to.  

This policy has deprived thousands of patients of their right to receive treatment. Although the term of “lifesaving” according to Israeli classification is clear, as it only includes patients suffering from life-threatening diseases, the term of “quality of life” remains unclear as the Israeli authorities use it to deprive hundreds of patients of their right to receive treatment, including patients suffering from serious diseases; thus, their health conditions deteriorated.

Through PCHR Legal Unit’s follow-up of the patients’ cases they receive, it has been recorded that the rate of patients’ rejected permits on grounds that their treatment is available in Gaza Strip hospitals has increased since the beginning of 2018. The Israeli authorities also continue to adopt the policy of discriminating between patients, not only to cases considered by

the Israeli authorities as improving “quality of life”, but also to cases classified as “lifesaving”, where many patients suffering from cancer and heart diseases have been subjected to such policy. Moreover, the classification of the treatment of some eye and bone diseases as solely improving “quality of life”, or that treatment of these diseases is available in the Gaza Strip hospitals, has seriously worsened the patients’ health conditions.

**Samer Reda Mousa al-Nabahin denied treatment abroad under the pretext that his disease is not life-threatening**

Samer Reda Mousa al-Nabahin (37), a construction worker married in al-Zahraa’ housing project in the central Gaza Strip, said to PCHR’s fieldworker that:

“On 20 April 2016, I fell off the stairs at work and suffered from a dislocated right shoulder and laceration in the shoulder bone and herniated disc. I received treatment in Gaza hospitals for about 6 months. However, on 30 October 2017, the doctors decided that I needed a surgery to reposition my shoulder with screws, and that they were unable to perform such surgery in the Gaza Strip due to lack of this type of screws, and that no doctor has ever performed such surgery in the Gaza Strip. On 14 March 2018, I obtained a medical referral to Nasser Medical Institute in Egypt and after months of waiting, I was able to travel on 20 September 2018, but the Egyptian authorities returned me from the crossing and denied me access to Egypt without clarifying the reason. After that, I obtained a referral to al-Maqased Hospital in Jerusalem and booked an appointment on 10 November 2018. I applied for permit to the Israeli authorities to travel through the Beit Hanoun “Erez” crossing for treatment in al-Maqased Hospital. Two days before my appointment, the Israeli authorities replied that my request is still under security check. After that, I renewed the appointment 6 times on the following dates: 22/11/2018, 28/12/2018, 30/1/2019, 26/4/2019, 28/5/2019, 7/7/2019, and in every time the request was rejected by the Israeli side only one day before the appointment. I went to PCHR to help me to travel, and after the PCHR’s lawyer communicated with the Israeli side, I was informed that the reason behind rejecting my permit is that my medical condition is not life-threatening.”
Khitam ‘Azzam was denied treatment under the pretext that her treatment is available in the Gaza Strip

Khitam ‘Azzam (47), married with 7 children in al-Saftawi neighbourhood in northern Gaza, said to PCHR’s fieldworker:

“For about 3 years, I have suffered severe pain in my left eye and received treatment at St. John’s Hospital in Gaza. The attending doctor said that I have cataract and retinal detachment, so I needed treatment abroad. My case was referred to the medical committee in the Treatment Abroad department, which approved my referral for treatment at St. John’s Hospital in occupied Jerusalem. Over the past 2 years, I have submitted 4 requests to the Israeli authorities to travel via the Beit Hanoun “Erez” crossing to receive treatment at the hospital, but the Israeli authorities rejected all my permit requests for various reasons. On 14 August 2018, I submitted a new request via PCHR to the Israeli authorities, and I attached the attending doctor’s report that said I urgently need 2 surgeries; the first is to remove the cataract, and the second is a surgery for retinal detachment. The Israeli authorities responded to PCHR’s lawyer on 28 August 2018, confirming rejection of my permit by explaining my treatment is available at St. John’s Hospital in Gaza. Meanwhile, the attending doctor at St. John’s Hospital in Gaza emphasized again that the Israeli claims of the availability of my treatment in the hospital is incorrect; therefore, I still badly need the surgeries, and any delay in my treatment would lead to complete vision loss in the left eye, and would put the other eye at risk.”
2. Denying patients Treatment without clarifying the reasons

Without clarifying the reasons, the Israeli authorities rejected hundreds of patients’ permit requests, including those suffering serious diseases, so they could not travel via Beit Hanoun “Erez” Crossing to receive treatment in the hospitals of the West Bank, including occupied East Jerusalem, and Israel.

Nariman Mohammed Mustafa Qashqash was denied travel without clarifying the reason

Nariman Mohammed Mustafa Qashqash (33), married with 2 children and living in Beit Lahia, said to PCHR’s fieldworker that:

“Seven years ago, I started suffering disc herniation in the third, fourth and fifth vertebrae along with the neck. Thus, the doctors said that I have to be treated abroad and have a surgery, as it could not be done in Gaza hospitals. I got a medical referral to al-Maqased Hospital in Jerusalem, and I applied to the Israeli for a permit to travel via the Beit Hanoun “Erez” crossing; however, on 9 September 2018, the Israeli authorities rejected my request without explaining the reasons. I applied again on 31 December 2018, and then on 27 January 2019, but every time my permit requests were rejected without clarifying the reasons. In July 2019, I applied again and my request was rejected for the fourth time. Currently, I am in a very bad health condition, and I cannot take care of my children well or do the housework as I cannot move or use my left hand out of severe pain.”

Mohammed Ibrahim Mustafa al-‘Aqqad was denied travel without clarifying the reason

Mohammed Ibrahim Mustafa al-‘Aqqad, born in 1976 and married with 3
children. He is unemployed and lives in Khan Younis. He said to PCHR’s fieldworker that: “For a year, I have suffered cervical herniated disc and a rupture between the third and fourth cervical vertebrae and the fourth and fifth vertebrae. The doctors said that I need a surgery in a hospital abroad for the insufficient capacities to perform such surgeries at the Gaza Strip hospitals. On 17 March 2019, I obtained a medical referral to have a surgery in al-Maqased Hospital in occupied Jerusalem. I applied at GACA to obtain a permit from the Israeli authorities to travel via Beit Hanoun Crossing. The Israeli authorities replied that my request was still under security check, so I missed my hospital appointment. I headed to PCHR and renewed the medical referral several times; each time my request was rejected without clarifying the reasons. Delaying my permit has increased my pain and made me unable to do my work in order to support my family and meet their needs. Moreover, the doctors said that if you do not have the surgery, I will become quadriplegic”

Mahmoud ‘Omer Mahmoud Shehadah was denied travel without clarifying the reasons

Mahmoud ‘Omer Mahmoud Shehadah (27), unemployed and married with 2 children in al-Nazlah village in northern Gaza City, said to PCHR’s fieldworker that: “On 13 December 2017, IOF shot me with several bullet to my legs while I was grazing sheep near al-Shuhada’ Cemetery in eastern Jabalia, which is a border area. As a result, I sustained a fracture and laceration to the right leg bones and received treatment for 3 months and a half at the Indonesian Hospital, where I underwent around 30 surgeries. Despite all of those surgeries, my health condition did not improve. On 25 January 2018, I obtained a medical referral to al-Maqaqed Hospital in Jerusalem, but the Israeli authorities rejected my permit. Therefore, on 27 February 2018, I travelled for treatment in Naser Institute in Egypt, where I had many surgeries. After returning to Gaza, the bones implanted rotted. On 26 June 2019, I obtained a new medical referral to al-Maqaqed Hospital, but my permit was rejected by the Israeli authorities without clarifying the reasons. I now suffer severe pain and unable to move while my foot is at risk of being amputated.”
Khaled Deeb Mohammed Jaber was denied travel without clarifying the reasons
Ayman Deeb Mohammed Jaber (46) from al-Shabourah refugee camp in Rafah and the brother of Khaled Deeb Mohammed Jaber, said to PCHR’s fieldworker that:
“My brother, Khaled Deeb Mohammed Jaber (49), a father of four, has a brain tumour, and has received a medical referral to have a surgery at Al-Mizan Hospital in Hebron. He applied to the Israeli authorities to obtain a permit to travel through Beit Hanoun crossing via the GACA in Gaza. The Israeli authorities rejected his request and preventing him from traveling for treatment without giving any reasons. He applied again for the permit after obtaining three new hospital appointments in November and December 2018, but the Israeli responded that his request was still under security check. He booked another appointment in January 2019 for treatment at Al-Mizan Hospital, and on 08 January 2019, his permit was rejected again by the Israeli authorities, and his health condition is seriously deteriorating.”

Habibah ‘Abdel Haleem Saber Qudeih was denied travel without clarifying the reasons
Habibah ‘Abdel Haleem Saber Qudeih (33), married with 5 children from Khuza’ah village in Khan Younis and the mother of Habibah ‘Abdel Haleem Saber Qudeih, said to PCHR’s fieldworker about her sick daughter:
When my daughter Habibah was 6 months, I noticed she could not see with her left eye. I took her to St. John Hospital in Gaza Strip, where doctors said she suffered retinal detachment, but there is no treatment for her at the Gaza Hospitals. In 2017, we obtained a medical referral for her to be treated at “Hadasa” Hospital in occupied Jerusalem. Habibah was accompanied with her grandmother to the hospital and came back to Gaza so that she returns for revision every 3 months in the same hospital. In her first revision appointment, the Israeli authorities refused to allow her to travel via Beit Hanoun “Erez” crossing. Her permit was rejected 3 times; the last was in May 2019 without clarifying the reasons. My daughter’s health condition is seriously deteriorating and she really needs treatment in Hadasa Hospital in Jerusalem.”
Walid Khalil Mohammed Abu ‘Anzah was denied travel without clarifying the reasons

Walid Khalil Mohammed Abu ‘Anzah (43), married with 5 children and a public Servant, said to PCHR’s fieldworker that:

“Since childhood, I have suffered an eye viral infection, and my case worsened 5 years ago. After medical check-up, doctors said that I need a corneal transplantation surgery that cannot be performed in the Gaza Hospitals. In January 2018, I obtained a medical referral to An-Najah Hospital in Nablus in the West Bank. I travelled there and stayed for 30 days. They took a biopsy for matching and buying the appropriate cornea. I went back to Gaza, and the hospital doctors told me that I have to come back 6 months later for the transplantation. The doctors informed me that the cornea was now available and I could have the surgery at the hospital. I immediately applied for a permit at the Israeli side via GACA, but the Israeli authorities rejected my request without clarifying the reasons. I went to PCHR and applied many times for the permit; in each, I was told that my request is still under security check and the last was in 09 October 2019. I am now afraid of losing vision in my left eye and that it would affect the other eye.”

Tal’at Harb Suliman Qishta was banned from traveling for treatment without giving any reasons

Tal’at Harb Suliman Qishta (41), from Rafah, said to PCHR’s fieldworker that:

“I suffered from chronic gastric ulcers. A year ago, I was transferred for treatment abroad after doctors found a tumour above my stomach. An appointment was booked at al-al-Mutalaa’ Hospital in occupied East Jerusalem to remove the tumour. I headed to the Palestinian Civil Affairs Office to obtain a permit for traveling via Beit Hanoun (Erez) Crossing by the Israeli authorities. After my medical appointment passed, the Israeli authorities informed me that my application is still under security check. Thus, I renewed the appointment 7 times and each time the Israeli authorities responded that my application was under security check. On 22 October 2019, I submitted a new application, but it was rejected without giving any reasons. As a result, my health condition deteriorated and I could not renew the application at al-Mutalaa’ Hospital because the renewal of medical referral, booking an appointment in new hospital, submitting a new application to the Israeli authorities is a long and complex process, which needs too much effort”
3. Denying patients travel for treatment under pretext a related family member violates Israeli law

During the Israeli imposed-closure on the Gaza Strip, Israeli authorities deliberately deprived patients, who suffers serious diseases and their treatment is not available at Gaza’s hospitals, of receiving treatment abroad for family reasons. The Israeli authorities accused the patients’ families of resisting IOF, belonging to Palestinian factions, or illegally staying in the West Bank or Israel.

Maher Mohamed ‘Abed al-‘Aziz al-Da’alsah and his wife banned by the Israeli authorities from traveling for family reasons

Maher al-Da’alsah (45), a municipal employee from al-Nusirat Camp, said to PCHR fieldworker that: “In June 2019, I headed to al-Aqsa Hospital in Dir al-Balah to do medical examinations in order to conduct a surgery for a hiatal hernia. After conducting tests, doctors found that I had a blood cancer for about a year and a half. I got a medical referral to Egypt and received treatment on 05 August 2019. I stayed there for a month and the doctors told me that I need to receive treatment every month in addition to checks every 3 months. Also, they told me that I have to come to Egypt every month to continue the treatment. I returned to the Gaza Strip on 06 September 2019. Due to my inability to return to Egypt every month and difficulty of traveling as well as the high financial costs, I was referred for treatment to Al Mutlaa Hospital. I got an appointment for the hospital on 25 September 2019. I applied to the Israeli for a permit to reach the hospital through the Beit Hanoun (Erez) crossing, and I have not received a response yet. I knew from some of my acquaintances who enter Israel that Israeli intelligence service is asking about me, and I am banned for security reasons. My wife had a medical referral to Israel to remove the thyroid gland in 2017, and Israeli intelligence requested her to interview. After questioning her
relatives, especially her uncle who works as a consultant in the Administrative Committee of the Hamas movement, her application was rejected, and she conducted her surgery in Egypt.”

4. Arresting Patients and their Companions at Beit Hanoun (Erez) Crossing

The Israeli authorities arrested dozens of patients while passing through Beit Hanoun (Erez) crossing or while heading to an interview with the Israeli intelligence service at the crossing to determine whether they will be allowed to travel for treatment or not. Moreover, the Israeli authorities arrested dozens of Patients’ companions while passing through Beit Hanoun Crossing.

A number of patients said to PCHR’s fieldworker that they were interrogated for several hours before being arrested despite their deteriorating health conditions. A number of the patients’ companions also stated that they were arrested, and that the patients, who suffer from deteriorating health conditions, were left without companion, so the patients were forced to return to Gaza without treatment.

Arresting of Iyad Omar Ibrahim Ba’lousha who Accompanied his Father Omar Ibrahim Ba’loush

Iyad’s brother, Rami Omar Ibrahim Ba’lousha (44), from al-Sheikh Redwan neighbourhood, said to PCHR’s fieldworker that: “At approximately 09:00 on Sunday, 18 March 2018, my brother Iyad Omar Ibrahim Ba’lousha (42) headed to conduct a security interview at the Beit Hanoun crossing after the Medical Coordination Department in Gaza informed him that the Israeli authorities re-
quested to meet him on 15 March 2018. The request for the interview came to discuss the possibility of granting him a permit to accompany my father Omar Ibrahim Balousha (68), who suffers from throat cancer. My father obtained a medical referral for treatment in Hadassah ‘Ain Karem Hospital two weeks ago, noting that he previously submitted several application to get a permit, but the Israeli authorities’ response was (under security check) or (under study). After waiting for my brother to return from the crossing for several hours, we tried to call him and found his cell phone closed. At approximately 20:30 on the same day, we received a call from the Public Authority for Civil Affairs in Gaza, informing us that Israeli authorities arrested my brother Iyad and transferred him to one of its investigation centres inside Israel without explaining the reasons for his arrest”.

- **Arresting of Karam Mostafa Mohamed Tantawi who accompanied his Wife Safaa ‘Abed al-Majeed Tantawi**

Karam’s wife Safaa‘Abed al-Majeed Tantawi (47), a cancer patient from al-Qal’ah tower in Khan Yunis, said to PCHR’s fieldworker that:

“On 01 April 2019, I left the Gaza Strip with my husband Karam Mostafa Mohamed Tantawi( 51) and headed to al Mutlaa’ Hospital in occupied East Jerusalem via Beit Hanoun crossing. I was treated for 20 days. At approximately 12:00 on Tuesday, 23 April 2019, I returned to Gaza with my husband and the Israeli authorities detained him. Fifteen minutes later, IOF asked me to leave and head to Gaza alone, but I refused and waited until 18:00. I was informed by the Palestinian Liaison that I should return to the Gaza, because my husband was arrested by the Israeli authorities. The Israeli authorities prevented PCHR’s lawyer, in his capacity as legal representative of Tantawi, from visiting him in al-Majdal prison, and the Israeli court extended his detention until next Tuesday, 30 April 2019.”
Arresting of Na‘iem Mohamed Hussain Katkat who Accompanied his Son Mohamed

Na‘iem’s son Hussain Na‘iem Mohamed Katkat (19) said to PCHR’s fieldworker that:

“On Thursday morning, 15 March 2018, my father Na‘iem Mohamed Hussain Katkat (44), from Jabalia camp, headed to conduct a security interview at Beit Hanoun Crossing after the Medical Coordination Department in Gaza informed him on 14 March 2018 that the Israeli authorities requested to meet him. The request for the interview was to discuss the possibility of granting my father a permit to accompany my brother Mohammad (18), who is suffering from blood disorders, on his treatment at al-Mutlaa’ Hospital in occupied East Jerusalem, as he obtained an appointment from the hospital on 30 March 2018. We were waiting my father to return from the crossing after conducting the interview for several hours, we contacted the GACA in Gaza City and informed us at 20:00 that my father was detained by the Israeli authorities.”

5. Interrogating Patients or Companions and Blackmail in exchange for Exit Permits

Hundreds of patients, who suffer serious diseases and have permits for traveling via Beit Hanoun Crossing to receive treatment abroad (Israel, the West Bank, including occupied East Jerusalem), were interrogated despite their deteriorating health condition. Furthermore, many patients were blackmailed by IOF to force them collaborating with the Israeli authorities in exchange for granting them permits. If the patients do not respond to the Israeli investigators and provide information for them, they may not be allowed to receive treatment abroad or continue their treatment.
Ahmed Hasan Jamil Shubair was blackmailed into “collaborating with IOF to save his life”

Hasan Jamil Anees Shubair (56), a legal advisor at the Ministry of National Economy from al-Naser neighbourhood, said to PCHR’s fieldworker that:

“My son Ahmed Hassian Jamil Shubair (17) had congenital heart defects since birth. He underwent several surgeries in the West Bank and Israel in 1999, 2001, 2007, 2011, and 2015. After he received treatment for a long time, the Israeli authorities obstructed the completion of his treatment. On 22 February 2016, my son Ahmed and his mother (as an accompanying person) travelled through Beit Hanoun crossing to reach Tel Hashomer Hospital in Israel. My wife was summoned for an interview with the Israeli Intelligence Service and she was subjected to humiliating searches. The investigator asked her about our neighbours and relatives, so my wife told him that she have no information about them. The investigator blackmailed her, by telling her that if you want to save you son’s life, you should collaborate with us. Later, on 10 September 2016, an appointment was set for a heart valve transplant at Tel Hashomer Hospital. We submitted 3 requests for a permit to reach the hospital, but all requests were rejected. On 16 November 2016, we went to PCHR to help us obtain a permit. PCHR’s lawyers informed us that the Israeli authorities asked Ahmed for an interview. Ahmed and I went to the Beit Hanoun crossing to conduct the interview. Ahmed entered to conduct the interview at 07:00 and finished at 19:00. After finishing the interview, Ahmed told me that the Israeli authorities offered him to collaborate with them in exchange for allowing him to complete his treatment. He replied that he could not collaborate with them. The investigators told him: “If you do not collaborate with us, let Gaza treat you.” On 08 December 2016, we applied to the Israeli authorities to obtain a permit in order to allow Ahmed and his mother “as companion” to travel through the Beit Hanoun crossing and receive treatment at the hospital. The Israeli response came that the request is still under security check. Ahmed’s health condition deteriorated and he suffered from shortness of breath. Doctors at Shifa Hospital tried to save his life, but in vain. He died on Saturday 14 January 2017.”
Iyad Salah Suliman Abu Daheir and his companion Samar Salah Suliman Abu Daher were interrogated and detained

Iyad Salah Suliman Abu Daher (38), married and father of 3 children living in al-Qararah area in eastern Khan Younis, said to PCHR’s fieldworker that:

“On 07 October 2018, I got a medical referral to perform surgery at al-Maqassed Hospital in occupied East Jerusalem, as I have an enlarged aortic valve in the heart. Accordingly, I applied to the Israeli authorities to obtain a permit in order to allow me to travel through the Beit Hanoun crossing and receive treatment at the hospital. My sister Samar accompanied me on my treatment. A few days before my appointment, my sister received a call from the Israeli authorities, asking her for an interview at the Beit Hanoun crossing. On time, she headed to the crossing, where she was interviewed, interrogated and later released. The Israeli response came a day before my appointment that the request is still under check, so we could not travel. We renewed the hospital booking and got approval from the Israeli authorities on 05 December 2018. At 9:00 on Thursday, 06 December 2018, we went to the Beit Hanoun crossing, where two persons came and took me to an interrogation room. After that, they took me to adjoining room and left me there. I waited until 17:00, meanwhile, a person came and asked me if I want to go to the West Bank alone or return to Gaza. I asked him about my sister, he replied: she is detained in another room. I stayed in the waiting hall until 21:00. A female soldier then called me, gave me the ID card and told me to go back to Gaza. After that, my brother Sabri came, took me back to the house in Khan Younis, and told me that the Israeli authorities detained my sister.”

Kholoud al-S’aidny, a cancer patient, was blackmailed, despite her deteriorating health condition

Kholoud’s mother, Salwa ‘Abed al-‘Aziz Salam al-Sa’idny (39), married and housewife living in al-Buriej refugee camp, said to PCHR’s fieldworker that:

“My daughter, Kholoud Salama ‘Abdel Karim Al-Sa’dani, born on 15/8/1981, suffered from cancer
in the lymph nodes and received treatment in Gaza hospitals, until she received a medical referral to al-Ahli Hospital in Hebron on 05 December 2016. I applied to the Israeli authorities via the GACA to obtain a permit in order to allow her to travel through the Beit Hanoun (Erez) crossing and receive treatment at the hospital. The Israeli response came that the request is still under check. We renewed the request several times, but in vain. On 03 January 2017, Kholoud underwent a surgery to remove the tumour at al-Shifa Hospital, but doctors were unable to completely remove the tumour because it was attached to the neck veins. On 15 January 2017, we obtained a medical referral to al-Mutlaa Hospital in occupied East Jerusalem, and the Israeli response came that the request was approved. On 22 February 2017, we went to the Beit Hanoun crossing, and there my daughter, Kholoud, who was in a wheelchair, and I entered an investigation room. The intelligence officer began interrogating us and asking us about specific people. The officer threatened me and blackmailed my daughter, demanding to collaborate with them in exchange for her treatment. After that, we went out to the waiting hall and stayed there for 5 hours until an Israeli officer came and told us that we were prevented from entering Israel and must return to the Gaza Strip. On Saturday 11 March 2017, Kholoud’s health condition deteriorated, and she died at 03:00 on Sunday, 12 March 2017."

Jamalat Zaki Ahmed Zain al-Deen died after denying her travel for treatment

Hasan Hussein Mohammed Zain al-Deen (44), married and father of 7 children, lived in al-Katibah neighbourhood in Khan Younis in the southern Gaza Strip with his wife Jamalat Zaki Ahmed Zain al-Deen (41), who died from cancer due to IOF’s denying her travel for treatment. He said to PCHR’s fieldworker that:

“My wife was suffering from uterus “womb” cancer and obtained a medical referral for treatment abroad to remove the tumour at Augusta Victoria “Al Mutalaa” Hospital in occupied Jerusalem, and an appointment was booked on 02/12/2017 in the hospital. We applied to the Israeli authorities via the GACA to obtain a permit in order to allow her to travel through the Beit Hanoun (Erez) crossing and receive treatment at the hospital. The Israeli response came on 09/2/2017 that the re-
quest is still under check. My wife had received treatment in the Gaza European Hospital for about 7 months, during which we changed her appointments at al-Mutalaa’ three times, but the Israeli authorities refused to grant her a permit to travel each time. Jamalat’s health condition deteriorated and another tumour was found in the pelvis, so the doctors decided to transfer her for treatment abroad again, and an appointment was booked for her at the An-Najah National Hospital in Nablus on 12/12/2017, but the Israeli authorities rejected the permit request. In the beginning of January 2018, Physicians for Human Rights informed us that the Israeli authorities asked to interview my sick wife at the Erez crossing in order to decide whether to grant her a permit or not, and because of her bad health condition, she was unable to go to the interview. She continued to have her treatment at the Gaza European Hospital. At approximately 12:00 on Friday, 02 February 2018, the doctors announced her death without any response from the Israeli authorities.”

6. Delaying and procrastinating responses to patients and Disregard to their Hospital Appointments

The Israeli authorities have always neglected patients’ hospital appointments and delayed responses to their permits applied in sufficient time to cross Erez for treatment in the hospitals of the West Bank, including occupied East Jerusalem, and Israel. Upon the Israeli authorities’ request, patients submit their applications 23 days prior to their appointment, causing a lot of trouble to them, especially those suffering serious diseases. As a result, patients are forced to renew their medical referrals and all relevant documents and to book new appointments in hospitals.

Ghafra Hamoud Mohamed Faraj was denied access to hospital on time
Ghafra Hamoud Mohamed Faraj (66), married and housewife living in al-Nusirat Camp in Central Gaza Strip, said to PCHR’s fieldworker that:
“In October 2018, after conducting medical examinations at al-Shifa Hospital in Gaza, a malignant tumour (cancer) was found in the right breast and in the lymph nodes. I received chemotherapy at al-Rantisi Hospital in Gaza. On 20 May 2019, I underwent a surgery to remove the breast and lymph nodes in the Public Service Hospital in Gaza. After the surgery, I needed for atomic radiation treatment, which is not available at Gaza’s hospitals, so I was referred for treatment at al-Mutlaa Hospital in occupied East Jerusalem. My appointment was booked on 18 August 2019. I applied to the Israeli authorities via the GACA to obtain a permit in order to allow me to travel through the Beit Hanoun (Erez) crossing and receive treatment at the hospital. The Israeli response came on 15/2/2017 that the request is still under check. We obtained a new appointment on 22 September 2019, but on 19 September 2019, the Israeli response came that the request was rejected for the 2nd time. I am still trying to obtain a new appointment from the hospital, so that I can submit a new application to the Israeli authorities. My health condition deteriorated and I still need urgent treatment, which is not available at Gaza hospitals.”

Israa’ Ibrahim Husain Tubasi was denied travel for her scheduled treatment appointments

Ibrahim Husain Turki Tubasi (51), from Kherbet ‘Adas in Rafah, said to PCHR’s fieldworker:

“My daughter Israa’ Husain Tubasi (18) suffered a congenital heart defect since birth. She underwent heart surgery in Belgium when she was 2 years old and since then she followed-up in Wolfson Hospital in Israel for 15 years. When my daughter turned 17, she had a follow-up appointment on 17 July 2018, where we applied to the Israeli Authorities to get an exit permit to enter Israel through Beit Hanoun Crossing via GACA, but they replied with “The request is under security check”. We renewed the request several times on 05 February 2019 and 22 October 2019 but to no avail. My daughter is suffering and her health condition is deteriorating; she requires periodic check-ups on her pacemaker, which was placed in Belgium, and its batteries need to be changed urgently.”
Hafsa Salman Saleem al-‘Atar was denied travel for her scheduled treatment appointments

Hafsa Salman al-‘Atar (31), from Deir al-Balah, said to PCHR’s fieldworker:
“For the past two years, I have developed a herniated disc in the first and fifth vertebrae and suffer from erosion of cartilage in the vertebrae. I started my treatment at al-Shifa’ Hospital in the Gaza Strip until the doctors told me that I have to undergo a surgery out of Gaza due to unavailability of needed slides to place between the vertebrae. On 28 November 2018, I was referred for treatment at the Maqassed Hospital in occupied East Jerusalem. I applied to the Israeli authorities to obtain a permit in order to allow me to travel through the Beit Hanoun crossing and receive treatment at the hospital. The Israeli response came on 27 November 2018 that the request was rejected. I renewed my request 8 times, but in vain. The latest of these times was on 27 June 2019. In a new attempt, I obtained a referral for treatment on 10 October 2019, and I am still waiting for the response of the Israeli authorities. My condition is now getting worse. I take painkillers when the pain gets worse, I feel pain in my right hand, and my back starts to bend.”

Mohamed ‘Eid ‘Eyada Rmilat was denied access to hospital for treatment on the specified date

Mohamed ‘Eid ‘Eyada Rmilat (31), from al-Shawka in eastern Rafah, said to PCHR’s fieldworker that:
“During my detention in the Israeli Majdal (Ashkelon) prison, I knew that I had 80% blockage in the arteries. After my release on 12 August 2009, I conducted the necessary examinations and the doctors told me that I needed treatment abroad, because the treatment is not available in Gaza’s hospitals. On 04 April 2019, I was transferred to treatment in Egypt, but the Egyptian authorities did not allow me to enter and I was returned from the Egyptian border crossing. After that, I was referred for treatment at al-Maqassed Hospital in occupied East Jerusalem on 21 May 2019. I applied to the Israeli authorities to obtain a permit in order to allow me to travel through the Beit Hanoun crossing and receive treatment at the hospital. The Israeli response came that the request is still under check, so I was unable to travel in specific time. On 02 July 2019, I booked a new appointment and the Israeli authorities responded that my request is still under check. The appointment was renewed twice, on 18 August 2019, and on 22 September 2019, and each time the Israeli authorities
responded that the request is under security check. My health is deteriorating and I am in urgent need for treatment. Doctors advised me not to make any effort, in addition to high financial cost that I bear to survive.”

Mohamed Yousef Hussain Abu Jazar was denied Access to Hospital for treatment on the specified date
Diyaa’Abdullah Darwish Jazariyia (39), from al-Jininah neighbourhood in Rafah, said to PCHR’s fieldworker that:
“My uncle Mohamed Yousef Hussein Abu Jazar (80) suffered a fracture of the pelvis and the left joint on 28 June 2018, and he was transferred to Rafidia Hospital in Nablus on 30 July 2018. He underwent a surgery, and the left joint was removed. Doctors told him that he should come back after three months for a checkup. Accordingly, the follow up appointment was booked on 28 August 2018, as he was suffering from complications and infections. He applied to the Israeli authorities to obtain a permit in order to allow him to travel through the Beit Hanoun crossing and receive treatment at the hospital. The Israeli response came that the request is still under check. In another attempt, an appointment was booked on 12 September 2018, and the Israeli response was under security check, so he was unable to travel despite his deteriorating health condition. After that, I went to PCHR and submitted an application for my uncle to help him receiving treatment at Rafidia Hospital. On 19 February 2019, he was able to travel to the hospital in Nablus, but the doctors there were not able to conduct the surgery and transplant the joint. He returned to Gaza without treatment. A new appointment was booked at the Maqassed Hospital in occupied East Jerusalem on 26 September 2019, but the Israeli authorities did not respond to his request. In a new attempt, an urgent appointment was booked on 12 October 2019, but they were not replied too. The appointment was renewed on 14 October 2019, and the Israeli authorities did not respond. In a final attempt, another appointment was booked on 28 October 2019, and the response has not yet been received. My uncle is suffering now from severe pain and he is in urgent need of transplanting the joint.”
Ibrahim ‘Abdel ‘Aal died after denying him travel treatment
‘Aalia Shehdah Mousa ‘Abdel ‘Aal (38), married and mother of 11 children living in al-Salam neighborhood in Rafah City, is the mother of the six-month baby, Ibrahim ‘Abdel ‘Aal. She said to PCHR’s fieldworker that:
“When Ibrahim was born on 02 December 2018, I noticed that he suffered breath difficulties, so I took him to the Gaza European Hospital, where doctors said that he had a chest infection and suspected that he had a metabolic disease that needs treatment abroad. On 05 February 2-10, he obtained a medical referral for treatment abroad in order to diagnose his case at al-Maqased Hospital, and an appointment was booked for him on 29 March 2019. I applied at GACA for a permit to travel via Beit Hanoun Crossing, and the Israeli authorities replied on 28 March 2019 that the request is still under security check; thus, I could not travel to treat my son. I applied again for the permit and then went to PCHR to help me with obtaining it; however, my son’s health condition deteriorated and he died on 31 May 2019 before he could receive his treatment in al-Maqased Hospital in Jerusalem.”

Taghrid Khamis Hafez ‘Omran died after denying her treatment abroad
Fadel Salamah Hussein ‘Omran (55), a teacher married with 10 children and living in al-Sheikh Naser in Khan Younis, is the husband of Taghrid Khamis Hafez ‘Omran (46). He said to PCHR’s fieldworker that:
“My wife, Taghreed Khamis Hafez Omran (46) suffered from stomach cancer for 5 years and was receiving treatment at the Gaza European Hospital, where doctors decided to refer her to Al-Mutala’a Hospital in Jerusalem to remove part of the stomach. We travelled on 5/5/2018, but she did not have surgery for medical reasons. On 03 September 2019, my wife travelled to Jerusalem, received treatment there, underwent a CT scan, and the next day returned to Gaza. My wife applied for a new permit to travel to resume her treatment on 11 September 2019. However, she missed her appointment, as she was not given a permit. When we referred to the GACA, we were informed that the request was still under security check, and the same reply was repeated twice on 23/09/2019
and 22/10/2019. As a result, I went to PCHR after booking a new appointment on 16/10/2019, when I referred to the GACA which informed me that there was no reply from the Israeli side. However, a lawyer from PCHR informed me that they received a response that the request is still under security check. On 18 October 2019, a permit was issued to my wife, and while preparing for her travel to Al Mutala’a Hospital, she died on 20 October 2019.”

Fadiyah Hussein Salman Abu Sheiban died after denying her treatment in al-Maqased Hospital
Amin ‘Ali Mohammed Abu Sheiban (28), from al-Shokah village in eastern Rafah City and the son of Fadiyah Hussein Salman Abu Sheiban (53), said to PCHR’s fieldworker that: “My mother Fadiyah suffered from uterus cancer and obtained a medical referral for treatment in al-Maqased Hospital in occupied Jerusalem in April 2019. She applied for a permit at the Israeli authorities via GACA in order to travel through Beit Hanoun “Erez” Crossing to receive treatment in Jerusalem. On 12 May 2019, the Israeli authorities replied that her request was still under security check. While waiting for the Israeli approval on her travel, my mother’s health seriously deteriorated and was referred to the Gaza European Hospital in Khan Younis. On 14 May 2019, she went into a coma and doctors declared her death.”
7. Imposing Severe Restrictions on Patients’ Companions

In November 2015, Israel raised the minimum age threshold for people accompanying patients as only the individuals over the age of 55 are allowed to enter into Israel. This means that hundreds of patients, especially children who need special care and should be accompanied by one of their parents, who tend to be young, are denied this right. Moreover, hundreds of patients who suffer from serious diseases can barely move, and need to be accompanied by people in good health condition.

Preventing Bassma Majdi al-Aydi from accompanying her parent during her open-heart surgery

Majdi Hassan al-‘Aydi, father of Bassma Majdi al-‘Aydi, from Zaytun neighbourhood, said to PCHR’s fieldworker:

“Since her birth in 2011, my 15-year-old daughter suffers from a heart disease. Four months after her birth, she was referred to Maqassed Hospital to undergo an open-heart surgery and her mother Khitaam (40) accompanied her. In 2016, Bassma obtained a medical referral to undergo aortic valve replacement at Maqassed Hospital in Jerusalem. We applied for a permit several times to the Israeli authorities to travel via Beit Hanoun “Erez” Crossing, but all the applications remained unanswered despite Bassma’s serious health condition. On 25 January 2017, we headed to PCHR to help in getting the permit so my daughter could receive her treatment. PCHR sent an urgent letter to the COGAT explaining the seriousness of Bassma’s health condition. On 31 January 2017, PCHR received a response that the mother is banned for security reasons and cannot accompany her child, asking us to change the companion. Thus, I applied as a companion to my daughter, but he was rejected twice. Eventually, we chose
her aunt, Fatma al-‘Aydi, and was approved by the Israeli forces to accompany Bassma. On 24 September, they travelled to Jerusalem and Bassma underwent the surgery.”

The harsh Israeli measures taken against patients since the closure was imposed on the Gaza Strip in June 2007 caused the death of many patients suffering from severe and incurable diseases, due to preventing them from leaving the Strip to receive treatment abroad. According to MOH, 390 patients died after they were denied travel to receive treatment abroad for many reasons including: the slow and complicated bureaucratic procedures required to obtain an exit permit; refusing to grant them exit permits to cross through Beit Hanoun crossing to the West Bank or Israeli hospitals; obstructing patients’ travel to the hospitals in the neighbouring countries; and finally due to lack of medicines and medical equipment in the Gaza Strip hospitals.9

9. For further information on deaths due to denying patients travel for treatment abroad, visit the MOH website: http://www.moh.gov.ps/portal
IV. Patients’ Freedom of Movement and Right to Access Health Care from a Human Rights Perspective

The right to health is one of the most significant rights recognized under the international human rights conventions. Both the IHL and IHRL guarantee patient’s freedom of movement and ensure their safe access to health care in addition to their right to get the proper treatment for the diseases they suffer.

1. Patients’ Freedom of Movement and Right to Access Health Care under International Humanitarian Law:

The international humanitarian law guarantees civilians’ health rights in general in times of armed conflicts and in occupied territories and in particular a special protection for wounded persons and patients. It also ensures the free passage of medical consignments and devises.

The 1949 Fourth Geneva Convention relative to the Protection of Civilian Persons in Time of War and under occupation has adhered to provide special protection during transfers of the wounded and sick and their right to reach hospitals safely. Articles (15, 16, 17, 18, 19, 20, 21, 38 and 63) of the Convention includes the health care services and the work of hospitals and medical services. Article (16) of the convention provides that the wounded and sick, as well as the infirm, and expectant mothers, shall be the object of particular protection. Article (17) also states that the parties to the conflict shall endeavour to conclude local agreements for the removal from besieged or encircled areas, of wounded, sick, infirm, and aged persons, children and maternity
cases, and for the passage of medical personnel and medical equipment on their way to such areas. Article (21) further states that convoys of vehicles or hospital trains on land or specially provided vessels on sea, conveying wounded and sick civilians, the infirm and maternity cases, shall be respected and protected.

Article (38) states that the protected persons shall, if their state of health so requires, receive medical attention and hospital treatment to the same extent as the nationals of the State concerned. Article (55) stipulates that the Occupying Power has the duty of ensuring the food and medical supplies provided by States or neutral bodies such as the ICRC and that does not relieve the Occupying Power from its responsibilities to provide the food-stuffs, medical supplies and health services for the protected persons to the fullest extent of the means available to it.

Moreover, Articles 65 and 66 of the Fourth Geneva Convention provides that to the fullest extent of the means available to it, the Occupying Power has the duty of ensuring and maintaining, with the cooperation of national and local authorities, the medical and hospital establishments and services, public health and hygiene in the occupied territory.

The 1977 Additional Protocol to the Geneva Conventions of 12 August 1949 and relating to the Protection of Victims of International Armed Conflicts supplements the Geneva Conventions as it focused on the role of the civilian population, relief societies and other humanitarian organizations in rescuing and protecting the wounded and sick as stipulated in Articles (16, 17, 61, 63, 80 and 81) of the protocol.
2. Patients’ Freedom of Movement and Right to Access Health Services under the International Human Rights Law

The right to health is a fundamental right that is ensured in many international conventions and declarations. The International Human Rights Law has guaranteed patient’s freedom of movement and right to access health services through health rights stipulated by the international instruments relevant to the protection of the right to health: Universal Declaration of Human Rights (1948), International Convention on the Elimination of All Forms of Racial Discrimination (1965), the International Covenant on Economic, Social and Cultural Rights (1966), the Declaration on the Rights of Mentally Retarded Persons (1971), the Declaration on the Rights of Disabled Persons (1975), the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) (1979), Convention on the Rights of the Child (1989), and the Principles for the Protection of Persons with Mental Illness and the Improvement of Mental Health Care (1991).

Article (25) of the Universal Declaration of Human Rights stipulates that: “Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family”.

Article (12) of the International Covenant on Economic, Social and Cultural Rights provides that: “the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.” This Article focuses on the steps to be taken by the States Parties to the present Covenant such as the creation of conditions, which would assure to all medical service and medical attention in the event of sickness.
The right to health, in all its forms and at all levels, contains the following interrelated and essential elements, the precise application of which will depend on the conditions prevailing in a particular State party\textsuperscript{20}:

**A. Availability:** Functioning public health and health-care facilities, goods and services, as well as programs, have to be available in sufficient quantity within the State party.

**B. Accessibility:** Health facilities, goods and services have to be accessible to everyone without discrimination, within the jurisdiction of the State party. Accessibility has four overlapping dimensions:

» Non-discrimination: health facilities, goods and services must be accessible to all, especially the most vulnerable or marginalized sections of the population, in law and in fact, without discrimination on any of the prohibited grounds.

» Physical accessibility: health facilities, goods and services must be within safe physical reach for all sections of the population, especially vulnerable or marginalized groups.

» Economic accessibility (affordability): health facilities, goods and services must be affordable for all.

**C. Acceptability:** All health facilities, goods and services must be respectful of medical ethics and culturally appropriate.

**D. Quality:** As well as being culturally acceptable, health facilities, goods and services must also be scientifically and medically appropriate and of good quality.

\textsuperscript{20}\text{See the General Comment No. 14 related to Article (12) of the International Covenant on Economic, Social and Cultural Rights, “The right to health in all its forms and at all levels”, issued by the COMMITTEE ON ECONOMIC, SOCIAL AND CULTURAL RIGHTS (CESCR), twenty-two session (2000), see the website: http://hrlibrary.umn.edu/arabic/cescr-gc14.html}
V. PCHR’s Role in Protecting the Right to Health for Patients Referred for Medical Treatment Abroad

PCHR exerts all efforts to help the patients referred for treatment abroad and to monitor and document violations against them while traveling through Beit Hanoun “Erez” crossing. PCHR’s Legal Unit seeks to help these patients legally by building legal files and filing complaints, cases and sometimes appeals before the Israeli judiciary.

PCHR has adopted many legal files for patients denied travel abroad and employed all legal means to provide the right to treatment for those patients. The Legal Unit’s work comes after both the Treatment Abroad Department and the Coordination and Liaison Department in the Ministry of Civil Affairs exhaust all means and become incapable of facilitating the travel of these patients. In order to accomplish this work, the Unit’s lawyers conduct many procedures to guarantee the provision of this right for the Gaza Strip patients. These procedures lie in the following:

1. Assist Patients in Obtaining the Financial Coverage and Booking Hospital appointments

The Legal Unit offers legal services to patients as it has built and strengthened professional relationships with many healthcare organizations and human rights organizations, particularly the Treatment Abroad Department and Physicians for Human Rights, to facilitate the issuance of financial coverage. The Legal Unit also worked on booking appointments for Patients in the hospitals of the West Bank, including occupied Jerusalem, and Israel when patients were unable to do so. Since the beginning of 2008
until 31 December 2019, the Legal Unit helped 1,700 patients, who were in desperate need for medical treatment abroad and were unable to travel for many reasons such as lack of financial coverage and lack of fixed hospital appointments.

2. Legal Aid for Patients Denied Travel Permits

The Legal Unit provides services for patients whose permits were denied by the Israeli authorities to cross Beit Hanoun “Erez” crossing for medical treatment at the West Bank, including occupied East Jerusalem, and Israeli hospitals. These services assume an utmost significance to patients in light of the closure of crossing borders for persons’ movement and the serious deterioration of the health conditions in the Gaza Strip's hospitals, in addition to denying patients travel for medical treatment abroad.

The Legal Unit has been filing complaints and appeals before the Israeli COGAT office in Beit Hanoun “Erez” crossing to enable patients, who face travel obstacles, to receive medical treatment in addition to offering other patients hundreds of legal consultations.

The Legal Unit intervenes after the Coordination and Liaison Department of the Civil Affairs in Gaza exhausts all ways and becomes unable to obtain approvals on patients’ travel permits to receive the appropriate medical treatment for their serious diseases.

Table (5): Results after Dealing with Patients’ Files followed up by the Legal Unit from 2007-2018

<table>
<thead>
<tr>
<th>#</th>
<th>No. of Complaints</th>
<th>Follow-up Results</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Positive</td>
<td>Negative</td>
<td>Under follow up</td>
<td></td>
</tr>
<tr>
<td>2018</td>
<td>1191</td>
<td>459</td>
<td>304</td>
<td>428</td>
<td></td>
</tr>
<tr>
<td>2017</td>
<td>981</td>
<td>293</td>
<td>98</td>
<td>590</td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>796</td>
<td>301</td>
<td>400</td>
<td>95</td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>367</td>
<td>176</td>
<td>144</td>
<td>47</td>
<td></td>
</tr>
<tr>
<td>2014</td>
<td>174</td>
<td>71</td>
<td>57</td>
<td>46</td>
<td></td>
</tr>
<tr>
<td>2013</td>
<td>156</td>
<td>92</td>
<td>43</td>
<td>21</td>
<td></td>
</tr>
<tr>
<td>2012</td>
<td>125</td>
<td>50</td>
<td>39</td>
<td>36</td>
<td></td>
</tr>
<tr>
<td>2011</td>
<td>105</td>
<td>40</td>
<td>55</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>2010</td>
<td>438</td>
<td>115</td>
<td>309</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>2009</td>
<td>374</td>
<td>263</td>
<td>101</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>2008</td>
<td>208</td>
<td>96</td>
<td>77</td>
<td>35</td>
<td></td>
</tr>
<tr>
<td>2007</td>
<td>111</td>
<td>46</td>
<td>30</td>
<td>35</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>5026</td>
<td>2002</td>
<td>1657</td>
<td>1367</td>
<td></td>
</tr>
</tbody>
</table>
In 2019 (from 01 January 2019 – 30 November 2019), the Legal Unit followed up 974 complaints filed by patients whose permits were denied by the Israeli authorities for medical treatment. The following table shows the results of dealing with these complaints.
Table (6): 2019 Legal Aid Unit interventions on behalf of patients

<table>
<thead>
<tr>
<th>Complaint</th>
<th>Number of complaints</th>
<th>Follow-up Results</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Positive</td>
</tr>
<tr>
<td>Patients denied access to Israel for medical treatment</td>
<td>167</td>
<td>131</td>
</tr>
<tr>
<td>Patients denied access to the West Bank for medical treatment</td>
<td>305</td>
<td>157</td>
</tr>
<tr>
<td>Patients denied access to Jerusalem for medical treatment</td>
<td>655</td>
<td>292</td>
</tr>
<tr>
<td>Patients denied travel abroad</td>
<td>48</td>
<td>36</td>
</tr>
<tr>
<td>Patients’ Companions denied travel for accompanying them in their treatment</td>
<td>43</td>
<td>24</td>
</tr>
<tr>
<td></td>
<td>1218</td>
<td>640</td>
</tr>
</tbody>
</table>
Figure (6): 2019 Legal Aid Unit interventions on behalf of patients

- Patients’ Companions denied travel for accompanying them in their treatment
- Patients denied travel abroad
- Patients denied access to Jerusalem for medical treatment
- Patients denied access to the West Bank for medical treatment
- Patients denied access to Israel for medical treatment

Legend:
- No. of Complaints
- Negative
- Positive
- Under follow up
Recommendations

Israel’s policy to deny travel permits to the Gaza Strip patients, who suffer serious and incurable diseases, contradicts the IHL and IHRL as well as being a form of torture and cruel, inhuman and degrading treatment. Thus, PCHR calls upon the international community to pressurize Israel to:

1. Stop its policy of imposing strict restrictions on the Gaza Strip patients, who are referred for treatment abroad, as it deprives them of enjoying their right to travel and receive medical treatment;
2. Remove all obstacles that aim to deprive the Gaza Strip patients of travelling abroad;
3. Allow all patients, who suffer from serious diseases and whose treatment is not available in the Gaza Strip’s hospitals, to travel for medical treatment in the hospitals they are referred to immediately and without any delay;
4. Urgently stop its policy of distinguishing between the patients whose cases are “lifesaving” and cases “affecting quality of life” according to Israel’s classification;
5. Stop the closure policy in order to enable the Gaza Strip population to move freely, particularly patients whose medical treatment is not available in the Gaza Strip;
6. Open the crossings designated for the free movement of goods to supply the Gaza Strip’s healthcare facilities with their basic needs of medicines, medical equipment and devices;
7. Comply with the rules and basic principles adopted by the UN; most significantly, the right to enjoy the highest attainable standard of health;
8. PCHR demands the immediate and timely intervention of the PA to ensure that the drugs and medical disposables unavailable at the Gaza Strip hospitals are supplied; and to guarantee the right to health for every Palestinian including the highest attainable standard of physical and mental health.
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