The humanitarian situation in the Gaza Strip continues to deteriorate. Gaza has been tense since 30 March, with Palestinians holding weekly demonstrations along Israel’s perimeter fence as part of the ‘Great March of Return’. As of 31 May, Israeli forces had killed 128 Palestinians, the vast majority during the demonstrations, and injured over 13,000, including more than 3,600 by live ammunition, raising serious concerns about excessive use of force.

The enormous volume of injuries already exceeds the number of injuries during the 2014 hostilities. On 23 May, following a visit to health facilities in Gaza, the UNRWA Commissioner-General Pierre Krähenbühl declared: “I truly believe that much of the world completely underestimates the extent of the disaster in human terms that occurred in the Gaza Strip since the marches began on 30 March […] I was also struck not only by the number of injured but also by the nature of the injuries […] The pattern of small entry wounds and large exit wounds, indicates ammunition used caused severe damage to internal organs, muscle tissue and bones.”

The main article in this month’s bulletin concerns the difficulties that Gaza’s health sector has been experiencing in coping with these injuries. Medical supplies are significantly depleted and access to healthcare for non-trauma patients is being compromised, with non-surgical wards converted to surgical wards to cope with the huge influx of trauma patients. Ministry of Health (MoH) hospitals have needed to suspend all outpatient clinics during the demonstrations and cancel all elective surgery procedures, to deal with the massive influx of wounded. These developments have exacerbated the already fragile situation of the health system in Gaza as a result of over 10 years of blockade, the deepening intra-Palestinian political divide, a deteriorating energy crisis, and inconsistent payment of public sector medical personnel.

The situation was exacerbated by a temporary escalation between 28 and 30 May, the most serious since 30 March, 2014 hostilities. Palestinian armed groups in Gaza fired over 200 rockets and mortars at Israel, most of which were intercepted in the air or fell in open areas, resulting in a few Israeli injuries and limited damage, including to a kindergarten. Israeli forces fired tank shells and...
carried out airstrikes on 65 targets in Gaza, killing four members of armed groups and damaging numerous military sites. Although the current round of violence appears to be over, the flare-up is “a warning to all how close to the brink of war we are every day”, as noted by Special Coordinator Mladenov in his briefing to the Security Council on 30 May.

The rise in violence and casualties is taking place against the backdrop of dire living conditions in Gaza. Another of this Bulletin’s articles highlights a recent survey by the Palestinian Central Bureau of Statistics (PCBS) which reveals that poverty rates in Gaza have increased from 38.8 per cent in 2011 to 53 per cent by the end of 2017, affecting one million people, including over 400,000 children. Poor people are defined as those living on less than US$4.6 per day, which PCBS estimates is the minimum to cover basic household needs, including food, which accounts for almost 35 per cent of household consumption in Gaza.

The United Nations, through UNRWA and World Food Programme (WFP), has significantly increased its food assistance caseload in recent years: UNRWA currently provides food assistance to almost one million refugees in Gaza, and a further 245,000 severely food-insecure non-refugees are targeted by WFP. However, both agencies report severe funding shortfalls: of the $224.8 million requested in the 2018 Humanitarian Response Plan to cover food security needs in the Gaza Strip, only $37.7 million, or 16.7 per cent of the requirement, has been received so far, jeopardizing the continuity of the programmes during the second half of the year.

In the West Bank, two Bulletin items address issues of longstanding concern: Israeli settler violence against Palestinians, which has been on the rise since 2017, and the humanitarian impact of the continuing efforts of Israeli settler organizations to take control of properties within Palestinian neighbourhoods in East Jerusalem.

On the latter issue, a case study addresses the current hardships of the Qirresh family who were evicted from their home in the Old City of Jerusalem in September 2016, following a court ruling. Two families in the Sheikh Jarrah neighbourhood are currently at imminent risk of eviction in the same context.

Also of concern, on 24 May, the Israeli High Court of Justice issued a final ruling on the longstanding case of the Palestinian Bedouin community of Khan Al Ahmar, which paved the way for the demolition of the entire community, including a donor-funded school also serving other Bedouin communities in the area, on grounds of lack of building permits, and the forcible transfer of its residents. This is one of 18 communities located in or next to an area slated in part for the strategic E1 settlement plan. On 30 May, the Israeli authorities approved a planning scheme providing for the construction of 92 new housing units in the Kfar Adumim settlement, immediately adjacent to Khan al Ahmar, which has also petitioned the High Court for the implementation of the outstanding demolition orders against the community.
**Additional 6,180 were treated in field medical trauma stabilization points.**

* This figure includes 17 Palestinians (two of them children) killed in unclear circumstances during the 14 May demonstrations, as well as 16 Palestinians (including one child) killed since 30 March in contexts other than demonstrations; among the latter are five people whose bodies are being reportedly withheld by the Israeli authorities.

Source of casualty data: Palestinian Ministry of Health in Gaza
Data as of 31 May 2018
GAZA’S HEALTH SECTOR STRUGGLES TO COPE WITH MASSIVE INFLUX OF CASUALTIES AMID PERVERSIVE SHORTAGES

In the wake of the ‘Great March of Return’ demonstrations since 30 March, Gaza’s already overstretched health sector has been struggling to cope with the mass influx of casualties. This burden has exacerbated the long-term shortage of medicines and limited capacities of health facilities, driven by the huge electricity deficit and the ongoing salary crisis affecting government employees, among other reasons.

Health cluster partners have responded to meet the increased health needs arising from injuries during the demonstrations. On each Friday since 30 March, the MoH, along with the Palestinian Red Crescent Society (PRCS), have established ten medical trauma stabilization points (TSP) next to the five tent camps, to stabilize injuries before referring them to nearby hospitals. Also, more than 260 ambulances and 650 paramedics and first responders have been on standby, in addition to the deployment of further trauma and surgical teams, with at least 20 international health staff deployed since the onset of the demonstrations, and the provision of essential and much needed medicines and medical equipment.

Many of the injured suffered extensive bone and tissue damage from gunshot wounds, requiring very complex surgeries. Medecins Sans Frontieres (MSF) reports: “apart from regular nursing care, patients will often need additional surgery, and a very long treatment program of physiotherapy and rehabilitation. Many patients will have functional deficiencies for the rest of their life. Some patients may yet need amputation if not provided with sufficient care in Gaza, or if they are unable to obtain the necessary authorization to be treated outside of the strip.”

According to data from the Palestinian Ministry of Health (MoH) and the Salama Society in Gaza, between 30 March and 23 May there have been 34 amputation cases, including 27 lower limbs and six upper limbs amputations.

Due to the number and gravity of the injuries, the stocks of medical supplies have significantly depleted and access to healthcare for non-trauma patients is being compromised. The occupancy rate for surgical wards at the European Gaza Hospital, for example, was approximately two and half times the number of surgical patients it ordinarily has the capacity to accommodate, as of 16 May.

This situation is replicated across Gaza, where non-surgical wards have been converted to surgical wards to cope with the influx of trauma patients. In Ministry of Health (MoH) hospitals, all appointments at outpatient clinics (over 2,000 patients per day), as well as...
all elective surgical procedures (over 100 patients per day), have been cancelled. The average waiting time for an ear-nose-throat surgery at Shifa, Gaza’s largest hospital, for example, is currently estimated at more than a year.

Furthermore, according to Gaza’s Central Drug Store, 40 per cent of essential medicines were totally depleted by end of April and another 10 per cent of medicines and 29 per cent of disposables had less than a month’s supply remaining.4

Since the start of the current events, as of 27 May, 71 truckloads carrying medical supplies have entered Gaza, including three through the Egyptian-controlled crossing of Rafah, donated by the Egyptian Red Crescent, and 68 through the Israeli-controlled crossing of Kerem Shalom, supplied by ICRC, UNICEF, MoH, UNRWA and the private sector. In addition, Israel contributed two truckloads of medicines and medical supplies, which were turned back by the Hamas authorities.

### Funding

At the start of the demonstrations, the Health Cluster appealed for $4.5 million to cover the immediate needs for drugs and disposables, of which $1.8 million were provided by the oPt Humanitarian Fund, and $1.26 million by the UN Central Emergency Relief Fund (CERF), leaving a $1.44 million gap. Subsequently, and following the continuation of the demonstrations beyond the initially expected period, as well as the volume and gravity of injuries, the Health Cluster indicated that an additional $19.2 million is urgently needed to cover the needs of the MoH and NGOs in managing trauma and providing essential healthcare until end September 2018. As of end May, $6.3 million have been provided or pledged by various donors, leaving a gap of $12.9 million.

### Impact on health staff and facilities

Between 30 March and 31 May, Israeli forces shot and killed one health worker (by a live bullet wound to the upper body), and injured another 245; 40 ambulances sustained damage. Of the total injured health workers, 16 were hit by bullets. In a single day on 14 May, 15 health personnel working with the Palestinian Civil Defence and PRCS field medical teams were injured by bullets or shrapnel. Health workers deployed near the fence in Gaza are normally wearing vests identifying them as such.

Following the killing of the health worker, WHO reiterated its calls for the protection of...
all health workers and health facilities, and stated that “in the immediate aftermath of a health attack, patients are deprived of potentially life-saving care at the frontline. In the longer term, the cumulative effect of attacks can lead to reduced availability of health care for the population, as well as affecting the longer-term health, including the mental health, of staff”.5

In a statement released on 13 May, the Humanitarian Coordinator, Mr. Jamie MacGoldrick, said that “It is inconceivable that first responders lack protective gear and must risk their own lives in order to provide first aid to the injured. Health workers must be protected at all times and the right to health respected.”

**UNIFORMED PARAMEDIC SHOT WHILE TRYING TO ASSIST INJURED**

Thirty-three-year-old paramedic and father of two, Yousef Abu Muamer, has been working with the PRCS since he was 23 years old. On 5 May, he was shot by Israeli forces, while in his PRCS uniform, during an attempt to assist an injured person. It is now unclear if he will fully recover, and how he will support his family in the meantime.

Abu Muamer was tasked with responding to medical needs in the middle area near the perimeter fence with Israel. At midday on 5 May, he received a call from the PRCS operations room requesting him to respond to an injury reported east of Deir El-Balah.

”With a colleague, I went to the location 300 meters from the perimeter fence. No one was there except us and the man who was shot in his foot with live ammunition. We provided him with first aid and lifted him onto the stretcher. As we picked up the stretcher and were about to move, I was shot by an Israeli sniper in my right knee. The shots at us continued as I dragged myself towards the ambulance. All I could think about was what my two kids’ lives would be like if I died. When we got behind the ambulance, my colleague gave me first aid, and then called in for support.

My knee nerve is badly torn. The bullet did not exit and I still have shrapnel in my leg. Now I can’t bend my leg or walk without crutches.

I really don’t know how this all happened. It was midday, the PRCS logo on the ambulance is clear, and both my colleague and I were wearing the highly visible PRCS uniform. It was clear that we are medics, yet this didn’t save us from being targeted.”

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“*It is inconceivable that first responders lack protective gear and must risk their own lives in order to provide first aid to the injured*”.

The Humanitarian Coordinator, Mr. Jamie McGoldrick
Access for the injured to healthcare outside Gaza

Patients referred for medical treatment outside Gaza, especially those injured in the latest demonstrations, face major access constraints. To reach hospitals in the West Bank, including East Jerusalem, Israel or Jordan, patients must leave Gaza through the Erez Crossing with Israel, which requires them to obtain an exit permit from the Israeli authorities. As of 20 May, 40 patients injured in the demonstrations have applied for such permits, of whom one-third (13 patients) had their applications approved, over half (21 patients) were rejected, and the rest were still pending, compared to a 60 per cent approval rate for the first quarter of 2018. One of the patients denied exit subsequently died of his wounds at the Gaza European hospital.

Access to hospitals in Egypt has been also highly constrained due to the limited and erratic opening of the Rafah crossing for the past three years. However, the Egyptian authorities announced the continuous opening of the crossing for the whole month of Ramadan, which started on 17 May, the longest such opening since 2014. From 30 March to 26 May, a total of nine Palestinians injured during demonstrations exited via Rafah.

NO SAFE SPACE: IMPACT OF REPEATED AND SIGNIFICANT EXPOSURE TO TEAR GAS

Tear gas inhalation requiring medical intervention has been the most frequent type of injury in clashes between Palestinians and Israeli forces in recent years. Since the start of the mass demonstrations in Gaza and up to 19 May, a total of 5,572 people were treated for tear gas inhalation, of whom over 1,300 were hospitalized. Although the least lethal of all crowd control means used by Israeli forces, prolonged repeated exposure to tear gas could result in significant health and psychosocial impact.

Concerned over repeated and large amounts of tear gas used by Israeli forces in several West Bank refugee camps, UNRWA commissioned medical experts from the University of California, Berkeley, to carry out a preliminary assessment of the health impact of such exposure in Aida and Dheisheh camps in Bethlehem. The report that followed was entitled "No Safe Space" and was published in December 2017.

In a household survey of Aida camp, 100 per cent of refugees reported that they had been exposed to tear gas in the past year; 84 per cent had been exposed in their homes in the camp; 55 per cent had been exposed between three and 10 times in the month preceding the survey, both indoors and outdoors (homes, schools, offices). Overall, camp residents described their inability to prevent and/or mitigate their exposure to tear gas or its health effects. For them there were no safe places in the camps.

Significant acute health impacts linked to tear gas exposure were reported: Over 75 per cent of respondents had symptoms lasting longer than 24 hours, including eye-related complaints, respiratory problems, skin irritation and pain. More than 20 per cent of the respondents had ongoing symptoms: headaches, eye irritation, sweating and difficulty breathing.

The repeated and continuous exposure to tear gas was also linked to very high levels of psychological distress in the camps. The frequency, unpredictability, and seemingly random nature of the raids created a perpetual state of hyper-arousal, fear and worry. This "learned-helplessness" can result in the development of chronic health conditions and overall poor health.
to Egypt, and ten injured during the demonstrations were turned back at the border crossing. Jordan coordinated the direct evacuation of an additional 30 injured patients through Israel to Jordan, as of 23 May: Seven were evacuated on 20 May and the rest on 23 May.

**53 PER CENT OF PALESTINIANS IN GAZA LIVE IN POVERTY, DESPITE HUMANITARIAN ASSISTANCE**

A 14 percentage point increase since 2011

The findings of a Household Expenditure and Consumption Survey, released by the Palestinian Central Bureau of Statistics (PCBS) in May, show a significant increase in poverty rates in the Gaza Strip: from 38.8 per cent in 2011 (the previous time poverty was measured) to 53 per cent by the end of 2017, which is the equivalent to around 1.01 million people, including over 400,000 children. This means that poverty increased by more than 14 percentage points in a period of six years.

Poor people are defined as those living on less than US$4.6 per day, including social assistance and transfers, which is estimated by PCBS as the minimum to cover basic household needs (shelter, clothing and food), in addition to basic healthcare, education and transportation. Moreover, nearly two thirds of the poor, or about 656,000 people, are considered to be living in “deep poverty”, which means on less than US$3.6 per day, the minimum to cover only shelter, clothing and food needs.

More than half (53.6 per cent) of those who reported that their main source of income is social assistance and transfers were found to be poor (after taking into account that income), compared to 29 per cent of those who rely on private sector salaries and 26 per cent of those relying on public sector salaries. According to the findings, without social assistance and transfers, by 2017 the poverty rate in Gaza would have reached nearly 60 per cent, and deep poverty more than 42 per cent.

The high dependency on social assistance is of particular concern, as the Ministry of Finance in Ramallah has recently stopped the transferring of funds for this purpose to the Ministry of Social Development in Gaza. The last transfer payment was delivered in January 2018, covering the December 2017 allocations.

Another finding confirming the fragility of the situation is the share of food in the total household consumption, which in the Gaza Strip reached almost 35 per cent. The higher this share is, the lower the standard of living, as fewer resources are available for other needs.

The increase in poverty in Gaza, as reflected in PCBS data, has been driven by the

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Over one million people in Gaza are living on less than $4.6 per person per day, including social assistance and transfers.

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<th>Levels of Poverty and Deep Poverty in Gaza</th>
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<td>Poverty rate</td>
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<td>Deep poverty rate</td>
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Source: PCBS
extreme volatility of its economy, characterized by short periods of growth followed by prolonged and deep recessions. This has resulted in some of the highest unemployment rates in the world: in the first quarter of 2018 it reached 49.1 per cent. Key factors affecting these dynamics include the longstanding Israeli blockade, exacerbated by the internal Palestinian divide, recurrent outbreaks of hostilities, and the chronic energy crisis.

**Food insecurity**

As confirmed by the PCBS survey, food insecurity in Gaza is primarily caused by a lack of economic access to food, i.e. poverty, rather than by the unavailability of food in the marketplace. As a result, the United Nations, through UNRWA and WFP, has increased its food assistance caseload. However, the continuation of this assistance is being currently at risk due to a severe funding shortage.

UNRWA currently provides food assistance to more than 996,000 Palestinian refugees in Gaza, who do not have the financial means to cover their basic food needs, through its Emergency Food Assistance program and its Social Safety Net program.

The percentage of individuals receiving UNRWA food assistance has increased from less than 10 per cent of the refugee population in Gaza in 2000, to approximately 70 per cent in 2017 (see chart below). UNRWA provides eligible refugee families, on a quarterly basis, a food basket which covers the bulk of the daily caloric needs of beneficiaries.\(^8\)

Moreover, UNRWA internal records have revealed a significant increase in the number of refugees in Gaza whose status has been downgraded from absolute to abject poverty: 46 per cent of those originally assessed as absolute poor are now classified as abject poor.\(^9\) Only 11 per cent of the originally assessed abject poor families have been reclassified as absolute poor due to an improvement in their situation.

A further 245,000 food-insecure non-refugees, all falling below the deep poverty line, are targeted by WFP with food and cash-based transfers. WFP’s monitoring in April showed an increase in people’s negative strategies in trying to cope with a deteriorating
situation. Debt is spiraling at a faster rate than ever given the decline in people’s income and purchasing power. All WFP beneficiaries surveyed since the beginning of the year live with less than a dollar per day and 70 per cent are heavily indebted, with an average debt of $4,500: $2,900 for electricity and water, $260 for groceries, and $1,340 worth of credit from friends and relatives.

The 2018 Humanitarian Response Plan appealed for $224.8 million to cover needs in food security sector in the Gaza Strip. As of the end of May 2018, partners have received $37.7 million, or 16.7 per cent of the requirement. Despite the significant funding shortfall, UNRWA continues to prioritize food assistance to vulnerable refugees and to date timely contributions from various donors have made it possible to ensure continuity. Efforts are underway at various levels to mobilize funding from various donors to ensure that food needs are covered until the end of the year. While WFP has so far maintained its food assistance programme, if no additional funding is received in the coming weeks it will be forced to suspend it as early as of July.

**Partners in the Food Security Sector have received less than 17 per cent of their funding requirements for 2018. WFP indicated that if no additional funding is received in the coming weeks it will be forced to suspend its food assistance programme as early as of July.**
STRUGGLING TO FEED THE FAMILY: SANUORA’S STORY

Sanuora, aged 35, is a divorced single mother, living in very poor conditions at her parents’ house in Beit Lahiya, North Gaza, and struggling to provide for her six children. She is a beneficiary of WFP’s food assistance program.

For Sanuora, finding a job is virtually impossible due to her lack of education and formal work experience in an area with one of the highest unemployment rates in the world. She was forced to drop out of school at 11. As a divorced mother, she tries to make ends meet with the help of friends and relatives, and by depending on external assistance. She has enlisted in multiple national social assistance programs. She receives food, cash and medical support and relies on a share of the small income her brother makes as a casual labourer in construction. With the constant deterioration of the already dire living conditions in Gaza, Sanuora can no longer rely on the generosity of friends and relatives.

“I have accumulated too many debts that I need to repay each month. We had to borrow 5,000 New Israeli Shekels (NIS) (1,500 dollars) from relatives to build an extra room to accommodate me and my children. I have 3,000 NIS (850 dollars) of food debts to a few shop-keepers and owe countless shekels to the local electricity and water supply company”.

The lack of electricity has also forced Sanuora to focus on purchasing dry goods instead of dairy products, as she can no longer store food in her refrigerator nor use her makeshift oven. She has resorted to cooking over a fire as gas has become too expensive.

“Every day is worse than the previous one. My brother stopped working and my friends and family can no longer afford to support me. I had no choice but to take on additional loans to avoid my children sleeping on an empty stomach.”

Each month, she uses the cash assistance she receives from the national social transfer scheme to repay her longstanding dues. WFP’s food assistance has been of paramount importance for Sanuora to feed her household and buy other essentials, like clothes and soap.

“Every day is worse than the previous one. I have no choice but to take on additional loans to avoid my children sleeping on an empty stomach.”
HUMANITARIAN IMPACT OF SETTLEMENTS IN PALESTINIAN NEIGHBOURHOODS IN EAST JERUSALEM: EVICTIONS AND DISPLACEMENTS

In recent decades, Israeli settler organizations, with the support of the Israeli authorities, have taken control of properties within Palestinian neighbourhoods in East Jerusalem, and established a number of settlement compounds there. The majority of cases have been challenged unsuccessfully in Israeli courts. Settlements are illegal under international law.

Settlements in Palestinian areas in East Jerusalem are concentrated in the so-called ‘Holy Basin’ area: the Muslim and Christian quarters of the Old City, Silwan, Sheikh Jarrah, At-Tur (Mount of Olives), Wadi Joz, Ras al-‘Amud, and Jabal Al Mukabbir. According to Israeli statistics, it is estimated that some 3,500 Israelis currently live in these settlements.10

Palestinian houses have been transferred to settler organizations by various means. In some cases, settlers have pursued court cases to evict the Palestinian residents, on the grounds that the land was owned by Jewish individuals or associations in East Jerusalem prior to 1948.11 In other cases, the Absentee Property Law of 1950 was applied: this law, which was devised to formalize the expropriation of the land and property of Palestinians who were expelled or fled during the 1948 Arab-Israeli war, has been applied to East Jerusalem since 1967.12 Settler organizations have also had some success at purchasing land and property directly from Palestinian owners, due to the economically depressed situation in many of the affected neighbourhoods.

In the most severe cases, in the Old City, Silwan and Sheikh Jarrah, settler expropriation of Palestinian property has resulted in the loss of property and the eviction of the long-term Palestinian residents. Such evictions have grave physical, social, economic and emotional impact on the Palestinian families concerned. In addition to depriving the family of a home – its main asset and source of physical and economic security – evictions frequently result in disruption in livelihoods, increased poverty and a reduced standard of living.13

The high legal fees families incur when defending their case in court further strain their already meagre financial resources. The impact on children is particularly devastating, including post-traumatic stress disorder, depression, anxiety and diminished academic achievement.
MAZEN QIRRESH: “THE OLD CITY OF JERUSALEM IS STILL MY HOME.”

In September 2016, following a protracted legal battle, eventually ruled against them, the Israeli police forcibly evicted the Qirresh family from their home in the Old City of Jerusalem, which they had been renting since the 1930s. Two households, comprising eight people including two children, were displaced. The property was then transferred to the Ateret Cohanim settler organization that reportedly purchased it in the late 1980s. The home is part of a larger residential complex comprising nine apartments, eight of which were occupied by Israeli settlers in July 2010, causing the displacement of seven Palestinian households. Following their eviction the Qirresh family moved to Al ‘Isawiya town in East Jerusalem.

“When people ask ‘where’s the house of Mazen Qirresh?’, no one knows. I don’t know anyone here in Al ‘Isawiya and I feel like a foreigner. My social life has collapsed. We were forced to move out of our home in the Old City in September 2016. We tried to find an apartment there, even with only one room and a kitchen, but couldn’t. We found this apartment in Al Isawiya, which we could afford as a family of eight people. It’s in a new building, but it’s much cheaper than other parts of the city, where rents can reach US$1,000 a month. It doesn’t have a building permit, but that’s the norm in East Jerusalem. A building nearby was demolished by the Jerusalem Municipality around three months ago for lack of a building permit.

Life is expensive here and it is hard to make ends meet. We now pay for rent and utilities and need public transportation. In the Old City, everything was at hand and there were always young people along the way who would offer to carry my shopping bags home. It used to take me five minutes to go and pray in Al Aqsa mosque or to reach shops or the clinic near Herod’s Gate. Now, I need more than two hours to reach the Old City and come back and I have to go up three flights of stairs to reach my apartment. When I go to pray in Al Aqsa on Fridays, I leave in the morning and only get back in the afternoon. To reach the clinic, it takes me at least one hour and a half now. We still go there as our family doctor for more than 30 years is there. I’ve also linked our landline number in the Old City to my cell phone. I didn’t want to lose that.

The settlers offered us more than one million shekels to buy us out, but we refused because you can’t put a value on your home. Home is more than a house; it’s your community, where you grew up, where you have memories good and bad, and where people know you and respect you. My family rented our home in the Old City in the 1930s and I was born there. Around 70 years later, the settlers occupied most of our house and, for seven years, life was full of friction, anxiety, and harassment. But I was content because I was still living in our house. I never imagined that the day would come when I would have to leave the house I was born in. Each tile in our home is dear to my heart. My father passed away there at the age of 75. I have memories spanning 58 years and I still remember playing in the yard with my siblings when we were children.

I believed that as long as I didn’t accept money from Israeli settlers, I would never be forced to leave. When Israeli forces came to evict us it felt unreal. It was as if my whole life collapsed and I was watching the nightmare with total paralysis. We couldn’t sleep for months afterwards.

I’ve gone to the Old City a dozen times since then. I’m not allowed to sit in front of our house, or what was our house, by police order, so I sit in front of the nearby laundry. I greet people passing by and they greet me. During Ramadan, this experience becomes even more special. Every time I go to the Old City, I feel I can breathe again. I feel the sun, and my soul feels complete.
The total number of cases since 1967 is unknown. A survey carried out by OCHA in 2016 indicated that there were 180 Palestinian households in East Jerusalem that had eviction cases filed against them, the majority initiated by settler organizations. As a result, 818 Palestinians, including 372 children, were at risk of displacement. Since then, four of these households, comprising 30 people, had been evicted from their homes.

**INCREASE IN SETTLER VIOLENCE DURING THE FIRST FOUR MONTHS OF 2018**

Israeli settler violence against Palestinians has been on the rise since the beginning of 2017. Between January and April 2018, OCHA documented 84 incidents attributed to Israeli settlers resulting in Palestinian casualties (27 incidents) or in damage to Palestinian property (57 incidents). On a monthly average, this is the highest level of incidents recorded since the end of 2014 and represents a 50 and 162 per cent increase compared with 2017 and 2016, respectively (see chart). Israeli security officials have expressed concern over this trend and reportedly increased their presence in ‘friction areas’, particularly near the settlement of Yitzhar, in the northern West Bank.

As in previous years, the Nablus governorate accounted for the highest number of incidents, 35 in total, of which 20 took place in six Palestinian communities surrounding the settlement of Yitzhar and its adjacent outposts. These communities (Burin, Madama, Asira al Qibliya, Urif, Einabous and Huwara), home to over 21,000 people, have been affected for years by settler intimidation and violence, which have undermined their safety and livelihoods. Another significant hotspot was the area surrounding the Havat Ma‘on settlement outpost in the Hebron governorate (see case study).

The most frequent types of settler incident during this period involved stone-throwing at Palestinian homes and vehicles (21 incidents); physical assault (18 incidents); vandalizing of trees and other agricultural property (18 incidents); and vandalizing of vehicles and painting of graffiti (13 incidents). On 13 April, Israeli settlers set fire to a mosque in...
Aqraba village (Nablus), damaging the structure. Overall, incidents during this period led to one Palestinian fatality (killed after reportedly attempting to stab the shooter), 40 Palestinian injuries, including at least ten children, and extensive damage to property, including nearly 900 trees and more than 200 vehicles.

**Clashes with Israeli forces**

These figures exclude incidents entailing settler raids and other entries into Palestinian communities or private property, which did not result in casualties or damage by the settlers themselves. However, many of these incidents led to the intervention of Israeli forces, which in turn led to clashes with local residents and ended in additional Palestinian casualties.

Between January and April 2018, there have been 28 such settler raids/entries triggering clashes with Israeli forces, which resulted in one Palestinian killed and 277 injured (see chart). All but one of these clashes occurred in communities in the Nablus governorate. On a monthly average, the number of clashes with Israeli forces following settler raids/entries this year increased significantly compared to previous years.

**Palestinian attacks on Israeli settlers and other Israeli groups**

Since the start of 2018, OCHA (based on Israeli media reports) has recorded a total of 61 Palestinian attacks against Israeli settlers and other Israeli groups in the West Bank, resulting in casualties or damage. On a monthly average, this represents a 57 per cent decrease compared to the same period in 2017 (35 incidents per month). As a result of these attacks, three Israeli settlers were killed, at least 13 were injured, and 41 vehicles were damaged.

A significant percentage of the settler attacks recorded in the northern West Bank were reportedly carried out in retaliation for two of these killings: a shooting attack on 9 January near Yitzhar settlement, and a stabbing on 5 February next to a bus station near Ariel settlement (Salfit). Moreover, according to media reports, the burning of the
mosque in Aqraba village was in retaliation for the third killing, perpetrated on 18 March in East Jerusalem by a resident of this village.\(^{18}\)

Other settler incidents during this period, primarily those involving car vandalizing accompanied by the spraying of offensive graffiti, have been attributed by some media reports to a practice known as “price tag”, aimed at exacting a price from Palestinians for the removal, by the Israeli authorities, of structures in settlement outposts. Since the beginning of 2018, a number of such removals and evictions were reported in small settlement outposts associated with radicalized settler youths in the Nablus governorate.\(^{19}\)

**Prevention and accountability**

As the occupying power, Israel has the obligation to protect Palestinian civilians from all acts or threats of violence, including by Israeli settlers, and ensure that attacks are investigated effectively and perpetrators held accountable. The existence of gaps in this regard has been a longstanding concern of the humanitarian community in the oPt.

In a report issued in June 2017, the Israeli Ministry of Justice (MoJ) outlined a series of measures adopted by the Israeli authorities in recent years that have contributed to a reduction in settler violence and higher levels of accountability. These measures include the establishment of the Nationalistic Motivated Crimes Unit within the Judea and Samaria police district in 2013; the use of “restraining orders” against settlers suspected of planning attacks, that prohibit entry to the West Bank or entail detention under administrative orders; and the implementation of special security arrangements in “areas of friction” during the olive harvest season. In addition, according to the MoJ, there has been a gradual increase in the percentage of cases of settler violence leading to the prosecution of suspected perpetrators: from 19 per cent of cases investigated in 2013 to nearly 30 per cent in 2015.\(^{20}\)

A recent report by the Israeli human rights organization Yesh Din appears to confirm, albeit to a much smaller extent, the increasing rate of indictment of suspected perpetrators.\(^{21}\) Of the 185 investigation files monitored by the organization, which were opened between 2014 and 2017 and reached a final stage, 21, or 11.4 per cent, led to the prosecution of offenders, while the other 164 files were closed without indictment. The equivalent rate of indictment for the period 2005-2013 stood at 7.5 per cent (73 out of 978 investigations).

Yesh Din also noted an increase in the percentage of cases of settler violence documented by the organization, where the Palestinian victims choose not to file a complaint with the Israel Police, from 30 per cent in 2013-2015 to 42 per cent in 2016. Most of these victims cited mistrust of the Israeli authorities, while others cited fear of negative repercussions for themselves or to their families.
INCREASE IN SETTLER VIOLENCE IN THE SOUTHERN HEBRON AREA.

Ma'on settlement (pop. 539 in 2016), was established in 1981 in the southern Hebron area. A settlement outpost, Havat Ma'on, was established in 1997 within the boundaries of Firing Zone 918, demolished by the Israeli authorities in 1999 and relocated to its current site, outside of the firing zone. Additional outposts were set up in subsequent years.22

Over the years, Ma'on settlement and the nearby outposts have been a source of friction and violence with local Palestinian communities, (particularly At Tuwani, Tuba, Khallet Athaba' and Umm Fagarah), resulting in injuries and damage to property. Following repeated attacks by settlers on farmers, the Israeli authorities established a coordination mechanism to regulate Palestinian access to their land. Settlers have also attacked or harassed local Palestinian children while they were en route to school in At Tuwani, which has resulted in the children being escorted by international organizations, and by the Israeli military since November 2004.23

Jum’a Ar Raba’ai, a 48-year-old father of eight from At Tuwani, has been particularly affected by settler violence. In 2014, following a series of violent incidents, he petitioned the Israeli Supreme Court, requesting it to oblige the state to enforce the law on the violent settlers, to ensure him safe access to his land, and to remove the Havat Ma’on outpost. In response, the authorities implemented a series of measures, which led a significant reduction in settler attacks and intimidation in this area for the following years.

However, recently, settler violence emanating from Ma’on and its outposts has been on the increase again, with ten incidents recorded in between March and April 2018.

“Through legal aid, we managed to access the land continuously, with no need for prior coordination. In the past four years the land produced more due to our hard work; the more you invest in the land the more it gives back in return. Our persistence had prevented the settlers form attacking us; the most they would do was to let their flocks graze on our land and then leave. I always managed to document this with my camera, but the Israeli police didn’t consider these acts as something that needed to be investigated.”

However, during March this year a number of settler attacks resulted in damage to Jum’a’s property, with 18 of the family’s olive trees near Havat Ma’on outpost cut down on 10 March 2018. On 25 March, the following incident occurred as he worked on his land.

“I woke up in the early morning and walked to my land to harvest barley and to feed my 15 sheep. Before leaving I asked my son Ra’afat, who is 18, to follow me. While I was looking for some wood to light a fire, I saw four settlers coming from Havat Ma’on who started throwing rocks at me. I tried to flee, but I was prevented by a fifth settler. I was hit by a rock on the leg and fell to the ground from the pain. Right then, Ra’afat arrived and started shouting and screaming when he saw me lying on the ground being stoned and beaten. The settlers’ fled after one of them hit me on the head with the butt of his pistol, leaving me bleeding from the head.

Ra’afat called for help but it was an hour and a half before a Palestinian Red Crescent ambulance arrived. I was transferred to hospital and operated on for complex fractures in my left leg. I’m am still unable to walk and have to use a wheelchair to move around.

I still haven’t heard anything from the Israeli police. We thought that violence here had ended for good. But we were wrong.”

With no means of earning an income now, the family’s assets are depleting and they had to sell four of their 15 sheep to cover their basic needs and cut down on food items to cope. According to his wife, Jum’a has stopped taking his medication, because of the expense and because he can put up with the pain.
ENDNOTES

1. Agencies with ambulances/paramedics and first responders – PRCS; MOH; Civil Defence; Military Medical Services; Palestinian Medical Relief Society (PMRS); Union of Health Work Committees.

2. MSF, Press release 19 April 2018.


4. The Central Drug Store in Gaza is responsible for supplies to all MoH hospitals, which account for approximately two-thirds of hospital capacity in Gaza.


7. This income level applies for a household of two adults and three children living with less than NIS 2,470 per month, which are considered poor, or with less than NIS 1,974 per month, which are considered deep poor.

8. Eligibility for emergency food assistance is determined based on the results of a Poverty Assessment Survey (PAS) which UNRWA social workers conduct on a biannual basis through home visits. This system captures essential household characteristics such as age, gender, housing conditions, household composition, asset ownership and employment status. It also takes into account vulnerabilities, for example, cases of refugees who are unable to access emergency food assistance through regular channels: wives in polygamous marriages, divorced women, and separated or abandoned women. Eligible individuals receive food baskets containing flour, rice, sugar, sunflower oil, whole milk, chickpeas, lentils and canned sardines (In 2017, UNRWA distributed 6,538,850 MT of these items).

9. UNRWA defines abject poor refugees as those living below the abject-poverty line of US$ 1.74 per person per day. While it defines absolute poor refugees as those living between the abject-poverty line and the absolute poverty line of US$ 3.87 per person per day.


11. Under Israeli law, Israelis may pursue claims to land and property allegedly owned by Jews in East Jerusalem prior to the establishment of the State of Israel. However, it denies Palestinians the right to reclaim land and property in what is now Israel.

12. In 1967, Attorney General Meir Shamgar decided against applying the law in East Jerusalem, although it was used sporadically in the 1980s to expropriate properties in Silwan and the Muslim Quarter of the Old City from Palestinian owners.

13. See also: Norwegian Refugee Council, The Economic Impact of Displacement, April 2015.


17. The incident occurred on 8 April near Ma’ale Adumim settlement, and is the only incident of this kind in the list of 84 incidents during January-April 2018 referred to in this article.


19. The affected outposts were Ma’oz Ester, Havat Ma’on, Geulat Zion and Rosh Yosef. See Elisha Ben Kimon, “Increasing tensions between Israeli security agency and hilltop youth”, Ynet, 17 April 2018 (in Hebrew); Yotam Berger, “Five right wing activists arrested”, Ha’aretz, 31 January 2018.

20. MoJ’s figures appear to merge settler attacks against Palestinians and those against Israeli forces, thereby hindering analysis of trends regarding accountability in cases of Palestinian victims.

