

FACTSHEET April 2024

# Escalation of violence and impacts on persons with disabilities and persons with injuries in the West Bank

## Escalation of violence in West Bank

Within the context of the West Bank, Palestinians are constantly exposed to violence, which results in new injuries, long-term impairments and disabilities, and mental health challenges related to adverse experiences.

Since the 7<sup>th</sup> of October, the alarming rise of violence in the occupied Palestinian territory (oPt) is confirmed by the number of Palestinians killed during Israeli Forces search-and-arrest operations, punitive demolitions, demonstrations, displacements, and settler violence. Since October 7, 2023, OCHA has documented 774 Israeli settler attacks against Palestinians, resulting in 78 incidents of Palestinian casualties, 608 incidents of damage to Palestinian-owned property, and 88 incidents involving both casualties and damage to property<sup>1</sup>. Since October 7, these incidents have escalated to an average of 7 per day, representing the highest daily average of settler-related incidents impacting Palestinians since 2006, when the UN began recording such data<sup>2</sup>. On 12 April 2024, a settler attack in Al Al Mughayyir village, in Ramallah governorate, has caused the displacement of 86 Palestinians when 21 houses were fully burnt by Israeli settlers, and damage to about 32 vehicles and several livelihood, agricultural and WASH structures<sup>3</sup>. Since 7 October, around 1,700 Palestinians have been displaced in the West Bank, including East Jerusalem by home demolitions, for lacking building permits, or during operations by Israeli forces<sup>4</sup>. Moreover, between 7 October 2023 and 3 April, at least 206 Palestinian households comprising restrictions.<sup>5</sup>

<sup>1</sup> Hostilities in the Gaza Strip and Israel | Flash Update #154 | United Nations Office for the Coordination of Humanitarian Affairs - occupied Palestinian territory (ochaopt.org)

<sup>2</sup> Supporting Palestinian communities affected by settler violence in the West Bank - occupied Palestinian territory | ReliefWeb

<sup>3</sup> Hostilities in the Gaza Strip and Israel | Flash Update #154 | United Nations Office for the Coordination of Humanitarian Affairs - occupied Palestinian territory (ochaopt.org)

<sup>4</sup> Hostilities in the Gaza Strip and Israel | Flash Update #154 | United Nations Office for the Coordination of Humanitarian Affairs - occupied Palestinian territory (ochaopt.org)

<sup>5</sup> <https://www.ochaopt.org/content/hostilities-gaza-strip-and-israel-flash-update-149>

Since 7 October and as of 17 April, 451 Palestinians, including 112 children, have been killed by Israeli forces across the West Bank, including East Jerusalem, of whom 435 were killed by Israeli forces, ten by Israeli settlers and six by either Israeli forces or settlers. Four additional Palestinians from the West Bank have been killed while perpetrating attacks in Israel. During the same period, some 4,890 Palestinians have been injured<sup>6</sup>

Israeli authorities have heavily restricted the movement of Palestinians in the West Bank, including East Jerusalem. They have blocked most entrances to Palestinian villages and towns, preventing vehicles from entering. Additionally, they have isolated Palestinian cities and towns from main roads by using road gates, earth mounds, concrete roadblocks, and flying checkpoints at major road junctions. These measures, coupled with the large presence of Israeli forces and armed settlers on roads, have severely limited Palestinians' ability to move around and access services. In many parts of the occupied West Bank, shops are shut, streets are deserted, and communities are cut off, closing businesses and starving parts of the region of economic activity<sup>7</sup>.

Loss of homes and livelihoods can lead to increased poverty and vulnerability, making it difficult for individuals to access health and physical rehabilitation services and rebuild their lives. The psychological impact of losing a home and community can also be profound, leaving a long-term impact on mental health and well-being.

“Before the 7th of October, we were already grappling with constant incursions into the city, but the situation escalated dramatically afterward. The civilian infrastructure has been destroyed, and local authorities are unable to repair it due to the ongoing incursions. Even if some infrastructure is repaired, the constant raids damage the roads again. The area where our centre is, which has been under incursion five or six times, has seen its infrastructure destroyed, making it inaccessible for the injured and persons with disabilities. While local authorities have tried to open substitute primitive roads, persons with disabilities still struggle on these paths.” – **Dr. Hisham, Member of the Board of Directors at Al-Jaleel Society for Care and Rehabilitation**

<sup>6</sup> Hostilities in the Gaza Strip and Israel | Flash Update #154 | United Nations Office for the Coordination of Humanitarian Affairs - occupied Palestinian territory (ochaopt.org)

<sup>7</sup> [2023-12-27-Flash-Report.pdf \(ohchr.org\)](#)



The road leading to Al-Jaleel Society for Care and Rehabilitation has been damaged by the Israeli army during its repeated incursions, Jenin, West Bank © HI

## Impacts on health and health services

The protracted protection crisis in the oPt contributes to the vulnerability of healthcare to attacks, where incidence of health attacks has correlated with peaks in occupation-related Palestinian casualties and fatalities. Healthcare attacks have long been a persistent issue, with incidents documented before October 7, 2023. Between 2019 and 2021, 563 attacks on healthcare were recorded in the oPt<sup>8</sup>. Increased military operations and continued attacks on healthcare hinder service delivery. Frequent closures, delays at checkpoints, and a volatile security situation in multiple governorates significantly limit access to health services and contribute to a deteriorating humanitarian situation. Additionally, funding shortages and financial constraints continue to impact healthcare access significantly.<sup>9</sup>

From October 7 to March 12, 2024, there have been 403 attacks on healthcare across the West Bank, resulting in the killing of 11 people and injuring 69 others. Additionally, 48 health facilities

<sup>8</sup> <https://www.un.org/unispa/document/right-to-health-barriers-to-health-and-attacks-on-health-care-in-the-opt-2019-to-2021-who-report/>

<sup>9</sup> WHO EMRO | Right to Health: Barriers to health and attacks on health care in the occupied Palestinian territory | Information resources | Palestine site

and 16 mobile clinics have been affected, along with 275 ambulances. In Tulkarem alone, there were 80 healthcare-related incidents, including 59 instances of access obstruction, 42 cases of use of force, 15 detentions, and 18 militarized searches. Similarly, Jenin reported 75 healthcare-related incidents, with 56 cases of access obstruction, 43 instances of force, 19 detentions, and 21 militarized searches. Nablus documented 79 incidents, Bethlehem 49, Hebron 43, and Ramallah 31 healthcare incidents.<sup>10</sup>

Obstruction of healthcare has become a common practice. During each incursion, various hospitals, including the public ones, were surrounded by Israeli forces. Destruction of roads and water infrastructure, such as water pipes and sewage systems, has also been alarming. Increasing regularity of Israeli-imposed closures on Palestinian governorates and certain localities in the West Bank not only hindered patients' access to hospitals, but also that of health workers to their workplaces. Checkpoints and restricted areas affect numerous communities, with 21 communities reporting non-functional clinics as of February 17<sup>th</sup>. This escalation of violence, including high number of casualties, displacement, roadblocks and closures, destruction of homes and communities, and settlers burning houses and other properties, damaging livelihood structures and throwing stones at vehicles has significant implications for rehabilitation efforts in the affected areas. The resulting physical and psychological impact of the conflict can hinder recovery and rehabilitation process for individuals and communities.

Displacement also presents challenges for physical rehabilitation, as it disrupts continuity of care and can lead to losing access to essential services. Displaced individuals may also face barriers in accessing physical rehabilitation services, including Mental Health and Psychological support (MHPSS) in their new locations, further complicating their recovery process.

Access to health care services, including MHPSS services, was already difficult for persons with disabilities due to many barriers, such as physical barriers, stigma, and discrimination, and these additional restrictions have exacerbated the situation, leading to increased anxiety and uncertainty about the future. For those who have been injured, access to adequate healthcare and rehabilitation services is crucial for their recovery and prevention of long-term impairments. This includes access to medical treatment, surgeries, rehabilitation, mental health and psychosocial support, as well as other health services to help regain function and mobility.

“Deterioration in people's mental health goes beyond those directly affected by the violence of the occupation- according to a recent publication by Médecins Sans Frontières (MSF)- <sup>11</sup>even infants and young children show signs of anxiety, including bedwetting, nightmares and isolation.”

In addition, financial limitations in the healthcare sector have resulted in reduced salaries for healthcare workers, decreasing their presence at clinics. The health sector is also facing significant shortages of medicines, including psychotropics for people with existing severe mental health conditions, worsened by rising prices for essential medications.

Limitation or complete deprivation of access to services for persons with injuries and persons with disabilities is a violation of international humanitarian law and International Human Rights Law. As the UN Convention on the Rights of Persons with Disabilities (CRPD) is being ratified by both the State of Israel and the Palestinian Authority, states parties to the CRPD are obligated to take

<sup>10</sup> Impact of health attacks in the West Bank (7 October 2023 until 12 March 2024, 18:00) (who.int)

<sup>11</sup> <https://www.doctorswithoutborders.ca/palestinians-in-hebron-west-bank-live-in-constant-fear-as-violence-surges/>

measures to ensure that persons with disabilities can access health services, facilities, and information without discrimination. This may involve making reasonable accommodations to ensure equal access.

These challenges can be indeed solved only with an end to violent acts against civilians and civilian premises and the lifting of movement barriers across the West Bank. In addition, these challenges require ensuring accessibility of healthcare facilities, providing training to healthcare providers on disability-inclusive care, providing psychological support for the healthcare providers, combating stigma and discrimination, and allocating sufficient resources to support health services, including rehabilitation services and MHPSS services for persons with injuries and persons with disabilities in the West Bank. The recognition and protection of the right to access health services by both international humanitarian law and International Human Rights Law are crucial in addressing the ongoing health challenges faced by the Palestinians.

*“The vivid description of the devastating experiences emphasizes how conflicts deeply affect people’s mental health. The traumatic events bravely shared here do not just leave physical scars; they cause lasting emotional pain. Persons going through these challenges cannot be left alone to navigate the darkness on their own but instead show solidarity and continued support to make their rehabilitation process possible. Mental health and psychosocial support are crucial for Palestinians during these difficult times more than ever.”*

*Bahar Alen, Humanity & Inclusion Global MHPSS Specialist*





Elya, 13 years old from Jenin Refugee Camp. © Al Jaleel Society

*“I come from a family of six sisters and one brother. Currently in the 8th grade, I experienced a traumatic event on the 3rd of July 2023.*

*It was around 2 am when Israeli soldiers invaded our house and stayed until the next morning, spending about 10 hours in our two-store home. The soldiers began bombing the house while we were still inside, providing no warning for us to evacuate. To make matters worse, they brought a security dog into our home. Despite my pleas, the soldiers took no action to restrain the dog. Many people, both young and elderly, in the house, were yelling, but our pleas fell on deaf ears.*

*Following this incident, our house was bombed, and we had to relocate. Since then, I've developed a fear of dogs and anxiety about loud sounds, including the noise of bulldozers. The entire incident has left me scared of almost everything. The bombing not only changed our home but also disrupted my routine, making it harder for me to go to school or the rehabilitation centre with my wheelchair. Many roads are destroyed, affecting my mobility when I want to go to a specific place.*

*It was a traumatic event that instilled constant fear in me. I hope for a larger wheelchair to enhance my mobility. When I grow up, my dream is to become a doctor and help others in need.”*  
– Elya, 13 years old from Jenin Refugee Camp

# Conclusions and Recommendations

## To States:

- Ensure respect for Article 1 of the Geneva Convention, taking all possible steps to ensure that the rules are respected by all, and in particular by parties to conflict.
- Ensure adherence to the Convention on the Rights of Persons with Disabilities and international humanitarian law, addressing the detrimental health impact of the protracted occupation, hostilities, violence, and insecurity on persons with injuries and persons with disabilities and ensuring their access to health services and their mobility to access those services.
- Make every effort to advocate for Israeli authorities to stop their violent acts against civilians and civilian premises and lift access restrictions imposed on Palestinian residents in the West Bank. These restrictions often hinder the ability of individuals to access essential healthcare services, including Physical and Functional Rehabilitation and MHPSS services.

## To Donors and UN Agencies:

- Advocate for a human rights-based approach to disability and respect for the dignity, autonomy, and requirements of persons with disabilities, ensuring that persons with disabilities have their rights fulfilled.
- Ensure increased attention and funding for rehabilitation and MHPSS as essential healthcare services for Palestinians. Donors and UN agencies should make every effort to advocate for Israeli authorities to stop violent incursions into civilian premises and lift access restrictions imposed on Palestinian residents in the West Bank.

## To Humanitarian Actors:

- Coordinate with other actors, government agencies, and local organizations to ensure a comprehensive and integrated physical rehabilitation and MHPSS response that avoids duplication of efforts and maximizes impact.
- Build capacities of local organizations (organisations of persons with disabilities (OPDs), community-based organisations (CBOs), rehabilitation centres) and community leaders to deliver physical rehabilitation and MHPSS services and support long-term sustainability and resilience within the community.
- Engage with affected communities to identify their needs and preferences regarding MHPSS services, ensuring that interventions are culturally sensitive, responsive to local contexts, and accessible to all.

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