



The Killing, Detention and Torture of Healthcare Workers in Gaza



Healthcare Workers Watch

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Healthcare Workers Watch Report

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1. INTRODUCTION

Healthcare Workers Watch (HWW) is a non-governmental organisation, set up in October 2023 to document Israel's mounting attacks against Palestinian healthcare workers. Founded and led by Dr. Muath Alser, a Palestinian doctor, the aim of the organisation is to compile detailed, accurate information regarding attacks on healthcare workers and healthcare facilities. The organisation also has an advocacy role, raising awareness of the violations of international humanitarian law that it documents and advocating for the protection of healthcare workers in areas of conflict.

Despite being a young organisation, HWW benefits from the support of various technical experts from around the world who collectively provide extensive experience of documenting healthcare violations, in-depth knowledge of the health system of Gaza, and both qualitative and quantitative research skills. For this report, Dr Rebecca Inglis and Dr Tanya Haj-Hassan (medical doctors who have supported medical education in Gaza for years) and Ms Ana Elisa Barbar (an expert on protection of healthcare) provided independent technical support to the data analysis and discussion. All were working in an independent capacity.

The quality of the work produced by HWW was underlined by Human Rights Watch choosing to collaborate on a recently published investigation into the torture of healthcare workers in Israeli detention.

2. METHODOLOGY

HWW collects data on the killing and detention of Palestinian healthcare workers through direct contact with medical peers and their families, and by monitoring verified social media accounts of Palestinian healthcare workers. Content posted in Arabic and in English is reviewed. In the event of a healthcare worker being killed or detained, the initial report is cross-checked and verified by contacting relatives, friends and colleagues of the victim directly, or via their social media accounts. HWW also cross-checks reports from the Palestinian Ministry of Health, hospitals' social media platforms, healthcare worker associations websites, and local media agencies.

HWW obtains regular updates from families of detained healthcare workers, and, when possible, takes testimonies from the healthcare workers themselves once they are released from detention, upon consent to document and store such testimonies for advocacy and accountability purposes. Testimonies are collected in Arabic or in English, usually in the form of an audio-recorded interview via telephone or in person. In one instance the interviewee preferred to provide a written account of what happened; in another instance, testimony was provided in a series of voice messages sent from a doctor inside a hospital as it was being raided. Where necessary, all testimonies are translated into English by a native speaker of Palestinian Arabic prior to analysis. The consent process either involves audio-recorded verbal consent or written consent, with each interviewee able to specify how they wish their information to be used.

3. PURPOSE OF THE REPORT

The purpose of this report is to demonstrate, through the rigorous evidence collected as primary data by HWW, the specific ways in which Israel's policies and military conduct are inflicting intentional and cruel harm on healthcare workers in Gaza. This report will also demonstrate how these attacks on healthcare workers are obstructing the provision of life-saving, preventive and curative medical care to the Palestinian people, with devastating consequences to their health and to the maintenance of their well-being as a distinct ethnic group trapped in the besieged territory of Gaza.

4. SUMMARY OF THE KEY FACTS ARISING FROM THE DATA COLLECTED BY HEALTHCARE WORKERS WATCH

The data collected by HWW demonstrates patterns of conduct by the Israeli authorities and Israeli military that are clearly consistent with the crime of genocide. These patterns of conduct will be described in three main sections:

- The killing of hundreds of healthcare workers in Gaza, resulting in the significant depletion of the healthcare workforce, which might take years to reestablish, given the length of medical training and the destruction of all universities in the territory.
- The detention of healthcare workers – that we suggest to be oftentimes intentional – and the systemic torture of Palestinian detainees. The torture includes the routine use of actions known to impair future fertility, thus also constituting a measure to prevent Palestinian births.
- Targeted attacks on the healthcare infrastructure in Gaza, including the besiegement, invasion, and destruction of hospitals and essential medical equipment.

All three aspects are contributing to the wholesale destruction of the health system of Gaza and are intentionally preventing the Palestinian people from accessing safe and effective healthcare, with clear consequences in the short- and long-term. In turn, this is leading to the large number of excess deaths, which have been estimated to be four times larger than the reported numbers of violent deaths¹, unsafe births, and unnecessary suffering of a population who had, prior to October 7, a functioning health system, resisting decades of occupation and years of siege.

4.1 Healthcare workers killed by the Israeli military:

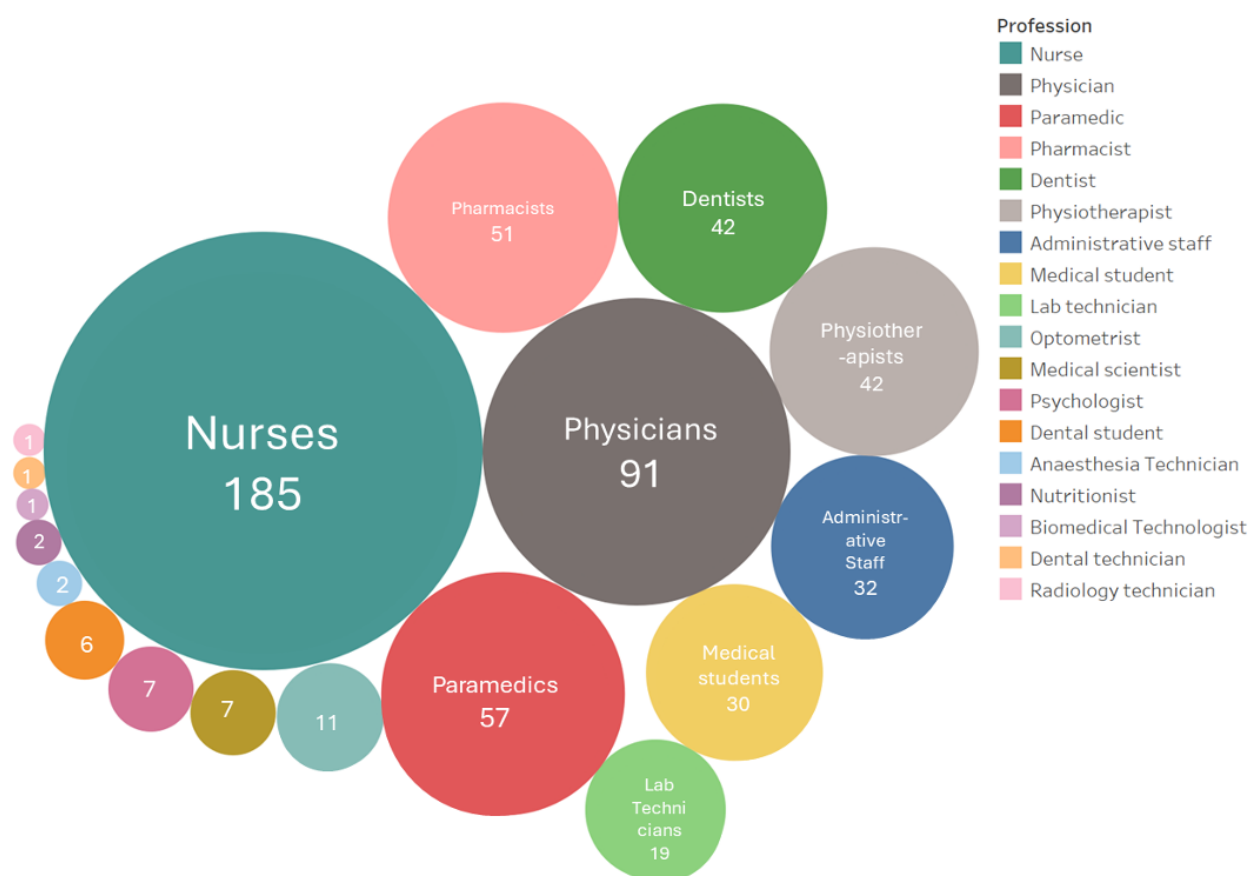
4.1.1 Killing of healthcare workers - demographics

HWW has confirmed the killing of a total of 587 healthcare workers in Gaza since October 7th, 2023, and are in the process of verifying the killing of a further 420 healthcare workers. One third of those confirmed killed are women (194).

Figure A shows a breakdown of the professions of the confirmed 587 killed healthcare workers in Gaza:

¹ Khatib, Rasha et al. Counting the dead in Gaza: difficult but essential. The Lancet, Volume 404, Issue 10449, 237 - 238

Figure A: A bubble chart showing the by-profession distribution of healthcare workers killed by Israeli forces in Gaza Strip since October 7, 2023.



4.1.2 Killing of healthcare workers - sequelae for the healthcare workforce

The healthcare workers who were killed by Israel include numerous senior and leading experts in their fields. Those killed include one of the founders of paediatric medicine and the founder of paediatric surgery in the Gaza Strip. In Al Shifa Hospital alone, Israeli forces killed the heads of the internal medicine department, the obstetrics and gynaecology department, the emergency department, the pathology department, the radiology department, and the orthopaedic department. Adding to this, during the invasion of the hospital, they detained the general director, the acting head of the emergency department, the two acting heads of the orthopaedics department, and the head of the anaesthesia and ICU departments. Combined with the forced displacement of most healthcare workers from the northern hospitals, the northern parts of the Gaza Strip have been left without specialised healthcare. For example, the only functioning hospital in Gaza City at present (Al-Ahli Arab Hospital) is mainly run by junior doctors and medical students as a first aid point without enough specialists to provide advanced care.

Some specialities have been affected more severely than others by the killings. For example, before October 7th, 2023, there were only five pathologists in Gaza. Two had retired and three were working. Two of the pathologists who were still working were killed – Dr Mohammed Dabour and Dr Husam Hamada – the latter bled to death after being shot by an Israeli sniper. This has left only one working pathologist, Dr Aziza Alkinn, to serve 2.2 million Gazans. Dr Alkinn is a Syrian pathologist at the European Gaza Hospital in Khan Younis and at present is single-handedly responsible for analysing biopsies from patients in the Middle Area, Khan Younis and Rafah. Gaza City and North Gaza have been left with no pathology services at all because of the killing of its pathologists and destruction the pathology lab at Al-Shifa Hospital.

Israeli killings of other specialist doctors have had a similarly devastating effect on service provision in certain other specialities. Nephrology, radiology and plastic surgery are all small specialities with no training programs inside Gaza so they rely only on a very few consultants who were trained outside. The killing or detention of senior doctors in these specialities have severely impacted the whole speciality.

For example, the killing of three senior plastic surgeons has severely diminished plastic surgery provision in Gaza, rendering the Gazan healthcare system unable to provide sufficient specialist wound care to patients with violent injuries and burns at a time of immense need. The doctors who were killed were Dr Medhat Saidam, Dr Ahmed Al-Maqadma and Dr Hasan Hamdan. Another plastic surgeon, Dr. Bassan Al-Masri is still missing following the latest invasion of Al Shifa Hospital.

When combined with the healthcare workers who have been detained, the detrimental impact of these killings on the healthcare workforce is compounded. HWW data shows that 105 senior physicians were killed or detained by the Israeli military since October 7, 2023, constituting 23% of Gaza's most experienced physicians. This includes 39 killed consultants, 41 detained consultants, 19 killed specialists and 6 detained specialists. Gazan doctors complete 6 years of medical school before doing an obligatory internship year, followed by 5-6 years of speciality training to become board-certified specialists. This is usually followed by a further 5 years of subspeciality experience including training fellowships before becoming consultants. Attaining this highest title in the Gazan hierarchy of physicians could take over 17 years of training. Replacing the loss of such experienced physicians will take generations.

To illustrate the direct targeting and killing of healthcare workers, the first case study presented here details the suffering of a Palestinian nurse who was shot while at work in the hospital and arrested while in need of care. This case serves as an in-depth exploration of how the Israeli military

and Israeli authorities have absolutely disregarded the need to protect healthcare workers while also disregarding the rights of wounded people to receive timely and adequate care whenever needed.

Case study 1 - A targeted attack on a nurse in Nasser Hospital

This case study includes examples of the following:

- **The attempted killing of a healthcare worker while at work inside a hospital building**
- **The direct endangering of the nurse's life by imprisoning him while he had a chest drain inserted in his thoracic cavity**
- **Wilful destruction of the collection chamber of his chest drain, an act that could have proved fatal**
- **Repeated violent beatings of the injured nurse**
- **Dousing with cold water**
- **Torture with handcuffs**
- **Failure to provide appropriate medical care to an individual with potentially life-threatening injuries and a high-risk medical device inserted in his chest, amounting to gross medical negligence**
- **Repeated beating of a wounded patient, as witnessed by Nurse G**

All of the following quotes from Nurse G were taken from a written account provided to HWW following his release from Israeli detention. Supplementary details were provided by two surgeons who were present when he was injured. HWW has also reviewed various videos of the period immediately after Nurse G was shot. Nurse G was shot at a time when the hospital where he was working was besieged by the Israeli military².

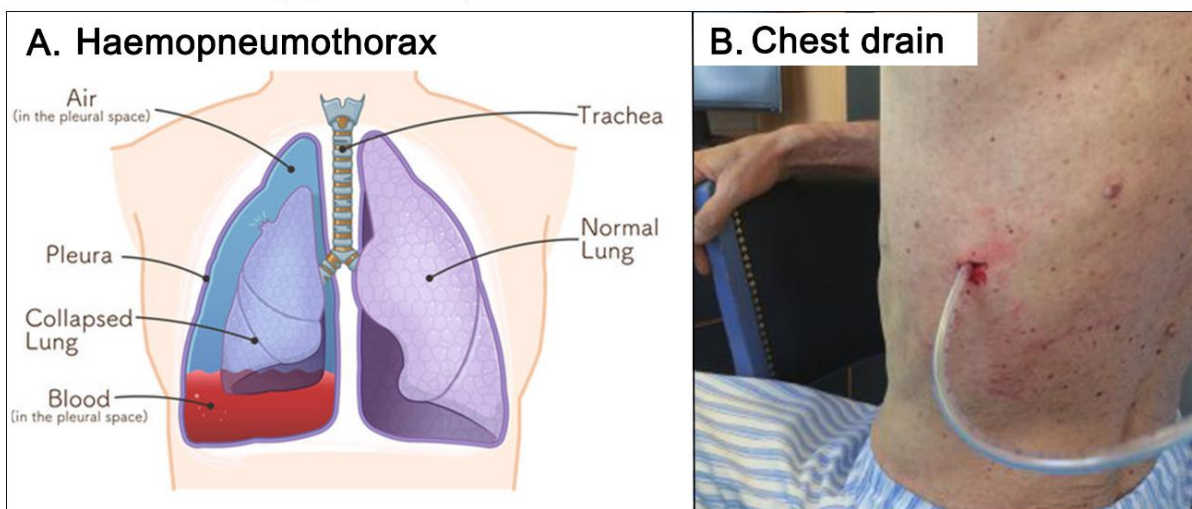
“I am a surgical assistant in the Central Operations Department at Al-Yasin Complex in Nasser Medical Complex. On a calm morning, on February 8th, 2024, while I was standing there, thinking about preparing for incoming injured cases, I suddenly felt excruciating pain and numbness in my right

² <https://www.ochaopt.org/content/hostilities-gaza-strip-and-israel-flash-update-114>

shoulder. [...] At that moment, I realised that I had been injured. There was no one around when I was hurt, so I ran and shouted: 'Injury, injury!'. Everyone gathered, and I was placed on the operating table and a chest tube was inserted in my chest to suction blood and air accumulated in the chest."

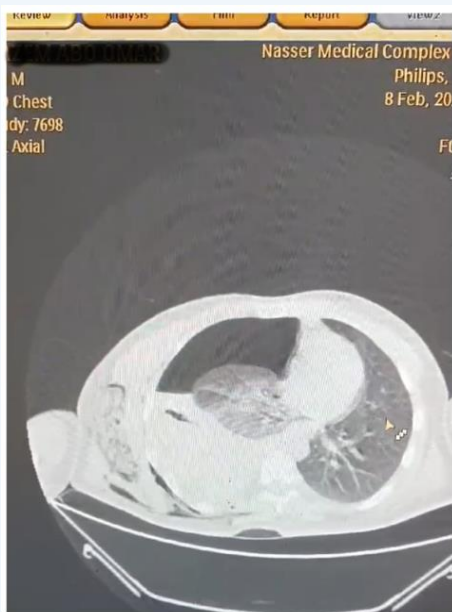
The incident took place in the surgery building of Nasser Medical Complex. One surgeon present felt it was most likely to be a sniper, while the other was uncertain if the injury was caused by a sniper or a quadcopter; however, both are high-precision weapons and demonstrate clear targeting.

Figure B. Nurse G sustained a serious penetrating chest injury which led to a large haemopneumothorax, the medical term for blood and air around a collapsed lung.



A. A diagram to illustrate the type of chest injury sustained by nurse G, showing a collapsed lung with blood and air in the chest (Adobe Stock Images).

B. A photo showing a chest drain inserted in another patient. It is crucial that this medical device is carefully looked after and kept attached to a one way valve and a collecting chamber (from Kuhajda et al., 2014. Tube thoracostomy; chest tube implantation and follow up. Journal of thoracic disease. 6. S470-9. 10.3978/j.issn.2072-1439.2014.09.23.)



An image taken from Nurse G's CT scan of his chest, showing a large haemopneumothorax and a collapsed right lung.

To treat the injury, Nurse G required a large tube to be inserted into his chest to drain the blood and air, as shown in figure B. He lost over 900ml of blood from his injury within the first 24 hours. The chest drain tube was in direct communication with his thoracic cavity and if mismanaged could lead to life-threatening complications. Patients who have this device in their chest need to be cared for in a closely monitored hospital environment by healthcare professionals with specific training.

Nurse G was able to receive the specialist care that he needed for his chest injury and his chest drain in the first few days after his injury, but on the 16th of February 2024 the Israeli military invaded the hospital.

He explained what happened next:

“A week after my injury, the Israeli army stormed Nasser Medical Complex. They demanded that all patients, medical staff, families of medical staff, and remaining displaced persons be transferred to the old Nasser building and then transferred to the Obstetrics Building (Mubarak). The walking patients, women, children, and medical staff were moved first. Only those unable to move remained.

They gathered all the medical staff in the northern courtyard, in front of the administration building, and asked everyone to strip down their clothes except their underwear. Then, they moved us naked to the maternity building and covered our eyes while handcuffing our hands behind our backs. They marked us with an unknown sign on our necks, and after several hours, we were moved to another room inside the Mubarak building. The torment began from there.

The chest tube I had was not appropriately removed; it broke while I was carrying it with my hands tied behind my back, enduring severe torture. We spent long hours on our knees. Our heads were not allowed to be raised, and

our eyes were covered. We were hearing everyone's groans. One person couldn't lower his head due to a neck disc problem; when he complained, he was beaten and told to shut up. Several times, they called and beat us. Another person couldn't sit on his knees and was also beaten. A wounded patient was beaten countless times. As for me, I was supposed to be higher than the device in my chest so that fluids could drain, but they didn't care about my injury.”

What Nurse G describes here is a failure to abide by a key principle of chest drain management, keeping the drain below the chest. If the collection chamber of the chest drain is incorrectly placed higher than the insertion point of the tube in the chest, then blood and fluid will flow back into the chest. This poses a significant infection risk to the patient³ and risks the reaccumulation of the fluid the chest drain was placed to drain.

Nurse G continued:

“After hours of sitting on my knees, one of the doctors from the Nasser complex came and told them that I should sit on a chair. Time passed with no distinction between day and night due to the blindfold. I believe during the night; they made us run by grabbing my neck and bending my head until I reached a kneeling position in prayer. Then, I was thrown into a cart, not knowing what it was. They stacked us on top of each other and beat us with water bottles, pouring water on us. It was freezing.

After the cart moved for a considerable distance, we learned that we had left the Gaza neighbourhood when one of the soldiers said, "Welcome to Israel, welcome to hell." They then took us off the cart, of course, in a dragging manner. While unloading us, the soldiers hit me, breaking the collection box and spilling the blood that was inside it onto me, leaving it hanging from my chest. Then, they made us sit on rocks for over an hour.”

Breaking the ‘collection box’ of Nurse G’s chest drain in the manner he describes put his life at immediate risk. Without the collection box, the tube can suck air into his chest with every breath,

³ Filosso PL, Guerrera F, Sandri A, et al. Errors and Complications in Chest Tube Placement. *Thorac Surg Clin*. 2017;27(1):57-67. doi:10.1016/j.thorsurg.2016.08.009

potentially causing a ‘tension pneumothorax’ where a build-up of pressure in the chest will ultimately stop the heart from beating. Other major risks of breaking the collection box include infection being introduced into the area around the lung, further injury to the lung itself, and a complete collapse of the lung⁴. It would have been very clear to anyone who saw Nurse G’s chest drain that it was an important medical device and that smashing it would pose him significant risk.

“Another transport vehicle arrived, taking everything, we had, including our clothes and belongings. They put us in another car belonging to the Mossad, as one officer told us. They threw us on chairs after the vehicle moved and then proceeded to beat us one by one with their legs, hands, and whips on our faces, necks, backs, and chests. During the journey, the soldiers demanded that we sing a song for [...] Beitar Jerusalem Football Club, saying, "Yalla Yalla Ya Beitar!" The soldiers beat us while telling us to sing, mixing our voices with the singing "Yalla Yalla Ya Beitar" with the groaning, humiliation, and despair we were enduring.

The journey lasted more than 3 hours; our hands were tired from beating, and our patience was exhausted from singing. Next to me was one of the doctors who spoke to them in English about how my hands would be amputated due to the tight handcuffs; each time he said, he was beaten and told to shut up. After much beating, they expanded the handcuffs.

Then they took us off the vehicle, again dragging us, and made us sit on our knees. As soon as I sat on my knees, a soldier came and hit me several times on the right side, where I was injured, without any reason. They then wholly stripped us and made us wear similar clothes. They took us to a place where they took our personal information along with an eye scan, asking whether we were ill and what medications we were taking.”

When Nurse G was asked about his medical condition, this should have prompted an immediate transfer to an appropriate medical facility. He would also have been in severe pain both from his

⁴ Filosso PL, Guerrera F, Sandri A, et al. Errors and Complications in Chest Tube Placement. *Thorac Surg Clin*. 2017;27(1):57-67. doi:10.1016/j.thorsurg.2016.08.009

original injury and from having the chest drain in and should have been receiving regular, strong, pain-relieving medication. Instead, soldiers targeted the site of his injury for further beating, making him even more unwell:

“For the first three days, I couldn't figure out how to sit properly due to the dizziness from the beating I endured.”

Nurse G was unable to confirm if the person taking his medical details was medically trained or not: if they were, then the failure to act at this point was clearly negligent and if they were not, then the information should have been immediately transferred to someone with medical training who should have taken immediate action. Instead, Nurse G was not given any medical attention until days later. When it eventually happened, the medical attention Nurse G received was wholly inadequate:

“I don't remember which day it was; they called my name, and I stood up, and they handcuffed my feet. While running, my head hit a wall or something, and I heard their laughter. Then they threw me into a cart, and we drove a short distance; they made me get off, put me in a room and made me sit on a chair. The soldier called through a translator named Abu Ubaida and asked me about my injury and where the device was installed in my chest. He examined me, changed the dressing on the wound, and said I'm fine and don't need anything; don't sit on your knees too much. Then I left, and I was standing at the door with a soldier. Another soldier from afar told me to sit on my knees. I told the soldier that the doctor told me not to sit on my knees too much, but he shouted and said to sit, and of course, I had to sit against my will.”

For anyone reviewing a patient with recent, significant chest trauma of this nature, the bare minimum medical care that should have been provided during this review is to arrange a chest x-ray, blood tests including a full blood count and other infection markers; and treatment including provision of appropriate pain relief.

Nurse G was released from Israeli detention after a week without any charges made against him. Reflecting on his ordeal he said:

“There, they don't see us as doctors and scholars; they don't recognize that they took us from a safe place like a hospital; they treat us in a dehumanizing manner. Sometimes, they see us as less than human, like animals; may God

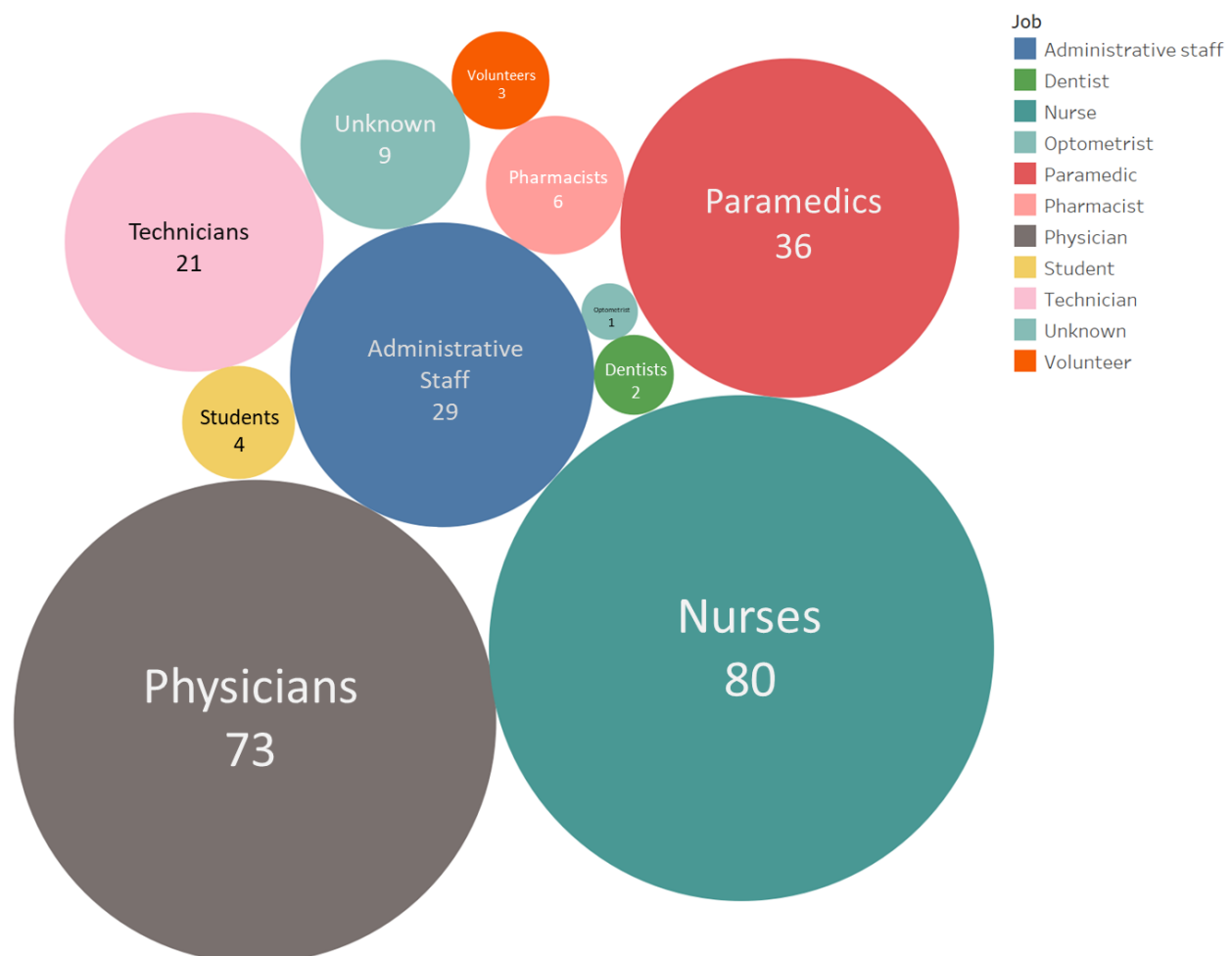
protect us. [...] They didn't consider that I was injured, didn't consider that I'm a medic taken from my workplace, didn't consider that they took me from a protected place under the Geneva Convention.”

4.2 Healthcare workers detained by the Israeli military

4.2.1 Detained healthcare workers - demographics

As of September 20, 2024, HWW documented 264 cases of unlawful detention of Palestinian healthcare workers in the Gaza Strip by Israeli Occupation Forces since October 7, 2023. These include 73 physicians, 2 dentists, 80 nurses, 36 paramedics, 6 pharmacists, 1 optometrist, 21 technicians, 29 healthcare administrative staff, 4 healthcare students, 3 volunteers, and 9 others.

Figure C. A bubble chart showing the by-profession distribution of Gazan healthcare workers unlawfully detained by Israeli forces since October 7, 2023.



Four of those detained were killed while in detention, 127 remain in detention currently, 23 are missing, and 110 were released (three of them were detained twice then released). Fifty-five were from North Gaza, 91 from Gaza City, 1 from the Middle Area, 115 from Khan Younis, and two from Rafah.

After being detained in Gaza, the healthcare workers we interviewed were forcibly transferred to detention facilities in Israel, including the Sde Teiman military base in the Negev desert, the Anatot military base near East Jerusalem, the Ofer detention facility in the occupied West Bank and Al Naqab prison in southern Israel.

4.2.2 Analysis of testimonies of healthcare workers detained by Israel in relation to the military operation in Gaza

To date, HWW has collected full testimonies from 11 healthcare workers following their release from Israeli detention. Further testimonies were collected from a healthcare worker who was held for questioning inside Gaza and then released, and two doctors who were inside Shifa Hospital and Nasser Hospital when they were raided by Israeli forces. None of the released healthcare workers interviewed have been charged with any crime, yet they have experienced deprivation of basic rights, severe ill-treatment and torture, as described in this section.

From these testimonies, HWW has identified patterns of conduct by the Israeli military and Israeli prison service that are consistent with acts of genocide. These patterns of conduct include:

- **The systemic torture and abuse of Palestinian detainees** in a manner that is causing them serious bodily and mental harm, and in some instances has included the killing of Palestinians while in detention.
- The testimonies also contain evidence that Israeli soldiers and prison guards are **inflicting violent injuries on male detainees' external genitalia** in a targeted manner that is likely to impair their future fertility, thereby preventing future Palestinian births.
- **Medical neglect, medical negligence and connivance of Israeli healthcare workers** in the ill-treatment of Palestinian detainees.
- The final pattern of conduct that is evident from the testimonies is that **healthcare workers are being specifically targeted for detention** in a manner that is leading to

death and disablement of the Palestinian population by depriving them of healthcare. The targeted detention of healthcare workers has also led other healthcare workers to fear detention if they continue working in healthcare facilities and has caused some to stop working, thereby compounding staff shortages. This pattern of conduct amounts to the deliberate infliction of conditions of life calculated to bring about the physical destruction of the Palestinian population of Gaza by undermining the healthcare system.

The evidence for each of these patterns of behaviour is presented below.

4.2.3 Evidence of systemic torture and abuse of Palestinians in Israeli detention

Every healthcare worker who was interviewed by HWW following their release from detention in Israel described being subjected to severe pain and suffering while detained, in acts that amounted to inhumane treatment and torture. From the ubiquity of these accounts, the fact that they occurred throughout every stage of the detention system and the regularity with which each individual experienced them, we conclude that the use of torture is a systemic feature of Israel's treatment of Palestinian detainees. Torture and abuse were reported as occurring in all the Israeli prisons and detention centres where interviewees were held.

The various methods that were used to inflict pain and suffering are summarised in table 1, alongside illustrative quotes.

Table 1. The various forms of torture and abuse described by interviewees

Form of torture / abuse	Illustrative quote
Abuse in transit	“[Someone] took us on the van for transfer. After 2-3 hours, it became nighttime, we stayed in the van a long time. Then he held my hands – that were cuffed to the back – and pushed me out. He counted the stairs for me and then said stop and the last step was higher than the ground, he pushed me, and I fell on my face. My hands were cuffed, I couldn’t protect my face or body, I started to crawl, not knowing where to. They did this to many behind me, so we stacked above each other like sheep. They also kicked me with the back of the rifle. At 11 or 12 pm the van moved. I can’t say how many we were, not less than 50-60. There were many trips, we weren’t the first van. [...] I don’t know where the van went. Every 100-50 metres the soldier driving the van would intentionally stop the van suddenly so people in the front suddenly ‘flew’ to the back and those in the back ‘flew’ to the front. For two hours he did this and hit the brakes suddenly, we were all cuffed with our hands to the back and blindfolded. We couldn’t sit back, it was suffocating. I assume we were at one of the border areas, maybe Erez. We sat in the bus for two hours without moving, there was loud music, Hebrew songs, and dancing and singing. We started calling them to get us out, and soldiers came to say shut up and not a word and then they left. We stayed like this until midnight. Very loud music while we were on the van, for hours, we yelled and screamed, calling them to let us out. Then they took us down as I said – a soldier comes to say there’s stairs, in total maybe 7 - 8 stairs, but they only told me about 3 and I fell on my face, and he let go of me.” Doctor B
Anal rape with an object	“In Naqab, one guy was bleeding from his private area behind, and he told me what they did to him [...] he told me three soldiers put an M16 in my private areas, I heard this directly from him, he was terrified. [...] First thing they put the M16 and then the three took turns raping him. I saw him bleeding with my own eyes from his bottom. [...] His mental health was terrible [...] I don’t think he told anyone. He started talking to himself in prison, Naqab. No one knew about him, but he spoke to me as a paramedic.” Paramedic A
Beating	“[An Israeli soldier] started kicking me in the face with his combat boots until blood gushed from my nose and under my eyes. He kept beating me in my chest and stomach. All the soldiers around joined him and struck me with the butts of their rifles in my head, stomach, and chest. They beat me with their knees on my flanks until I was short of breath. He pulled my hair and covered my face with sand and made me eat from it.” Nurse H

Deafening, loud music	“Then the soldier took me to another place with insanely loud music, you can’t hear anything else but the music. He gave me half a piece of bread and half a bell pepper to eat and said have breakfast. I ate the bread, and was about to eat the bell pepper, when someone kicked my hand with his leg and threw the pepper, and said lay on the ground, and kept me on the ground, cuffed with hands and feet and blindfolded. I have no idea how long I was laying down, I lost track of time, they had very loud music on. A soldier came to me and said open your mouth, he shoved me with his leg and said open your mouth, and he threw water in my mouth a bit but the rest all over my body. They called my number [...] but with the loud music I could barely hear [...] The place with the music there were many fans, maybe 3, it was freezing cold.” Doctor C
Dogs	“They brought in military dogs, that was very terrifying because I was still blind-folded. I screamed and yelled, that was the worst moment in my life, not seeing the dogs where they’re coming from and being cuffed.” Doctor A
Electrocution	“He hung me in the warehouse and electrocuted me. I had iron cuffs on my hands, and they hung me from the warehouse ceiling where chains were coming down. My feet were above the ground, I was literally hanging from the warehouse ceiling. They put me in an overall that had electricity wires around it and put like a headband with wires on my head. [...] I have signs on my hands and feet from being electrocuted. I swear, it was so degrading, it was unbelievable. I was helping people as a paramedic, I never expected something like this. I still have muscle spasm in my hand.” Paramedic A
Exposure to cold temperatures	“We were then transferred to a place they referred to as a ‘dormitory’, but it was nothing more than a 10 x 6 metre room with four large loudspeakers and an air conditioner blasting extremely cold air, along with large fans. The floor was covered with mattresses that were no thicker than half a centimetre, and beneath them were sharp-edged rocks. They pushed us towards these mattresses while we were still in restraints. They gave us blankets that were only 85 cm long, and they were torn and inadequate to cover our bodies. We were so cold and in so much pain that we couldn't stop moaning, but every time we made a sound, the soldiers would beat us.” Nurse K
Forced nudity and humiliation	“They took me to interrogation, two masked soldiers took me while they continued to hit me to a tent, there was gravel on the ground. They told me to take off my clothes, I was completely naked. They made me wear pampers and told me to go to interrogation.” Doctor A
Hits / kicks to genitals	“...A soldier came and ordered me to spread my legs so he could kick me in the sensitive area with his shoe. I started calling out and pleading, "Officer, officer," until another soldier came and pulled him away from me...”

	Nurse K
Humiliation	“He continued to beat me severely. He pulled me off the chair and ordered me to squat with my hands behind my back and lift my fingertips off the ground. He was sitting on a chair with his feet stretched out on another chair at the end of the room, and he ordered me to walk in that position for about 8 metres until I touched his shoe with my head. If I didn't touch his shoe with my head, the soldiers would beat me. The position he made me stand and walk in was extremely painful, and I began to groan. He said to me, "This is the sound your mother makes when we rape her, and the sound your sister makes when we rape her!" He used vulgar language that I can't repeat. I was so exhausted that I fell to the ground. They beat me and ordered me to get up!” Nurse K
Inhumane living conditions	“The food was horrible. The water was limited, bathroom with permission after a lot of pushing. The food was as if there was no food, I lost 22kg. No sugar, nothing with sugar, apples, oranges, or anything at all. We asked why, they said prison regulations. As if humiliating you with food. They gave me one minute to shower, I refused. I didn't shower at all for 40 days. No change of clothes, no underwear. We only had winter training suits, no underwear, nothing at all, it was very cold, very cold. They used to call us for count, and they would come at night. From 6 in the morning till 10 at night, we were cuffed with hands and feet and sitting on our knees. It was forbidden to even speak to the one next to you. The barracks bathroom wasn't even fit for animals; I swear animals wouldn't go into it. It was all humiliation, bullying, and medical neglect. I had a terrible headache, I told them I needed medicine, and they refused to give me. I had a written number on me, 099954. From what I knew, there were maybe no less than 4000 detainees. Over the next hour, new people came in. I stayed for 24 days in Naqab barracks, then I was transferred to a cell room in Naqab, and that was catastrophic. Maybe 2.5-meters x 3-meter cell with around 17 people. They turned on the water for the bathroom and drinking for one hour. In the cell room, I wasn't blindfolded. After calling for count in the morning at 6 am, they would come with dogs. It was forbidden to sleep on the bed, just on the floor. It was December and extremely cold, we waited from 6 am till 6 pm to sleep on the mattress. Repeated repression and raiding the cell at 12 at night, to hit and beat us. One time they took plastic spoons from us that they had provided. We were 15 maybe in the cell, they would always change and transfer us, and throughout this constant beating and humiliation. [...] The cell rooms were terrible, the smell of the toilet was disgusting, no flushing the toilet, because there wasn't running water. They gave us a bag for the garbage, we used it to fill water and drink from it later. It smelled horrible but we had no choice. It was humiliating 24/7. At 2 am, soldiers came and banged on the doors and windows and spit on us, they went from one cell room to another.” Doctor A
Noxious spray in the eyes	“A soldier sprayed something like a pepper gas on my right eye, it started burning like crazy. I couldn't see what he sprayed but it smelt like peppers, like gas, I don't know.” Nurse J

Penile torture	"He tied my hands behind my back and then to a chain hanging from the ceiling. He started lifting me up using an electric machine while I was hanging by my hands, placing a short chair without a backrest under me that was no more than 15 cm high. He lifted me so that only the tips of my toes touched this short chair. He hit me in sensitive areas and on my face and back, then brought a certain tool, which I didn't recognize, and struck my back with it. The beating continued for 3-4 hours without asking any questions, stopping only because he got tired. I heard the sound of his breathing, saw him sweating, and he removed his clothes due to how much he was sweating while continuing to curse. Then he brought another metal tool that looked like a pen. He completely removed my clothes and inserted this tool into my genital area. I started screaming like crazy. This went on for about an hour, and then I began to involuntarily urinate blood. He then inserted the tool again, more forcefully, and left it inside while I was bleeding. He resumed beating me while the tool was still inside my genital area until I fainted. I endured this torture for about 19 hours. When I woke up, I found myself in a place that looked like a clinic, but I wasn't sure if it was really a clinic or not. I didn't know if I had been given a blood transfusion or not. Then, they returned me to the same room, but the second time was worse." Nurse K
Pharmacological torture / forced administration of a medication prior to interrogation	"Medical neglect: first thing in Sde Teiman, heavy breathing, they put me in a room and told me sit here a bit, I fainted and gave me pills, as if I'm high. Ergunal? Soldiers gave us the pills. This was for interrogation, every 3 days they gave it to me, before interrogation, I don't know what it is, they gave it to me before interrogation. It's like my internal conscious was speaking, not me. When I took the pill, I was awake, and they asked about the hostages. The pill made me feel weird, first time I felt like this, as if my inner mind was speaking what was in my heart I would say. I felt like I'm flying like an airplane and playing with the clouds. I saw visual hallucinations. Maybe the pill was like Ergot Alkaloids." Paramedic A
Prevention of religious practice	"They did not allow us to pray, perform ablution, or call to prayer. We had no freedom to practice our religious rituals." Nurse K
Rape threats	"Then he asked me: 'So do you want to admit that you are Hamas or should I let the young men put an electric baton in your ass and cut off your dick?' [...] One soldier punched me in my stomach to kneel, and then he pulled my hair raising my head up and then he slapped me on the face several times. The soldier told me 'do you know who will come now, Captain Yousef, you know Captain Yousef what's his speciality? He loves to fuck men, he will work with you one by one.' I felt so much humiliation and it was very degrading, I felt devastation and a lump inside of me." Nurse H
Sexual humiliation	"I was slapped on the face two by soldiers, they kept asking if you're gay, when you're stripped, they look and verbally harass you. [...] they took us, without our clothes and took us from the south area through maternity, 2 kilometres,

	alone, without clothes...” Doctor E
Sharp gravel	“We were taken to an area full of sand, thorns, and very sharp rocks. All the detainees are still suffering from the effects of bruises and wounds on our hands and backs. We were wearing only our underwear, and the weather was very cold.” Nurse K
Simulated execution	“He took me to an open field, I had to lie on my stomach with my head in the sand. Soldiers would step on my head with their boots and shove my head in the sand. The soldiers made a circle around me and kept saying we will execute you; we’re praying for you because we will execute you. They kept screaming at me and scaring me. One soldier put the tip of his weapon on my head, he brought gas and said we will burn you while screaming at me in Hebrew ‘Hai Israel Hai.’ He kept telling me ‘Say you’re Hamas’, when he put the gas on me. All around me were soldiers. He threatened me with a lighter to burn me. Then, a soldier got in a jeep and drove quickly towards me like they wanted to drive over my head, all this to scare me, they were saying we will drive the jeep over you.” Paramedic A
Sleep deprivation with continuous exposure to bright lights	“We begged them to allow us to sleep, they kept strong flashlights turned on so we couldn’t sleep.” Paramedic A
Sustained stress position	“There was a clear system of sleep deprivation and stress positions, 18 hours sitting on the knees, everything else prohibited. Soldiers roaming around us. They punished some detainees by forcing them to stand on the side. A picture from a report maybe Haaretz is an exact replica of where I was. Many had arthritis in their knees, many had chronic illnesses. I had an injury in my leg and back, it was impossible for me to sit like this. I spoke to them in English, they kept saying I don’t care, even if you have a spinal fracture, shut up. Before becoming Shawish. I was punished like the one in the picture, a female soldier cuffed my hands high on the fence, for an hour.” Doctor B
Suspension from chains	“They made me wear pampers and told me we will hang you like this. They removed the blindfold, and I saw who the screaming was coming from. I saw people were all hanged and wearing pampers, and he said welcome to Sdei Teman. I was tired and done. It was like judgement day, chains coming down from the ceiling, square metal cuffs and all the detained had their heads down while they were hanging by their hands. There were more than 10 more than 20, the whole warehouse had people hanged, everywhere I looked on the right on the left, in front, in the back, it was an overwhelming number. From the screams it indicated dozens. He wanted me to see the torture and pain, he said this was only the first phase” Paramedic A

Stealing possessions	“I asked the soldiers about my belongings, one soldier said, ‘you’ll find them in Gaza, yalla go.’ I said to myself I’ll never get my belongings back, they’re gone. I found Gaza workers at the crossing, who had their money taken from them, even their phones; they got nothing back from their belongings.” Nurse H
Threats against family	“The commander replied, ‘I know how to make you confess, where’s your mom?’ I told him she’s at the checkpoint and he said, ‘I will bring your mom and strip her completely naked in front of everyone in the open field.’ Honestly, when I heard this, I was psychologically broken, I felt humiliated...” Nurse H
Use of handcuffs with intention of inflicting pain and injury	“My wrists hurt so much, they felt paralyzed and numb, both my hands, but my right hand more. I cried so much; I couldn’t take the pain from my hands. I called on a soldier to ask him to loosen the cuffs, but he didn’t, he just kicked me on my head repeatedly. I told him ‘kick me, I can’t take it anymore, kill me already.’ The soldier asked me ‘where does it hurt,’ he looked at my hands and saw my wrists turning black, that time he called a doctor, who loosened the cuff on my right hand but made it tighter on the left hand. I kept screaming, calling for a doctor because I couldn’t take the pain in my hands anymore. The doctor threw me on gravel and told me to raise my hands up to lessen the pain, to be honest I felt less pain. But then a soldier came to me and slapped me in the face when I asked again to loosen the cuffs. He said it’s psychological that the pain is in my head.” Nurse H
Use of pliers	“Because of the severe beating, I told him, ‘I’m going to faint!’ and indeed, I fainted. I regained consciousness, and he was holding my little finger with pliers. I said ‘Ouch,’ and the mark from the pliers remains to this day.” Nurse K

Efforts to conceal the abuses from the media

Several interviewees described efforts to cover up the evidence of the torture for the media, although permitting the media to have access to film them without consent during detention is an abuse in itself.

“They gave us clothes; my clothes were bloody and very dirty. They brought us new clothes to change, for the media so people didn’t see how we were.”

[Doctor C]

“Some with me knew Hebrew, and an Israeli news agency came to talk about us and record. One detainee next to me translated that they were saying we’re Nukhbeh⁵ members arrested and now are held here. This was in the [...] Sde Tieman while sitting on our knees and hands cuffed behind. The next day, they brought us food, but without us eating, just for photographs, they didn’t let us eat it, they just put it there and then they removed it, I didn’t eat, they just put it in front of us. They took pictures of us, soldiers told us whoever puts it in their mouth food and eats it, we will kill you. We begged them to give us the food. It was all a movie. They called us Nukhbeh and they’re liars.”

[Paramedic A]

Absolute failure to comply with international standards on detention practices:

The arrests carried out by the Israeli forces that HWW has documented fail to comply with the very basic international standards on detention practices, such as confirming upon request the location of the arrested person and presenting a justification for the arrest.

During their detention, several of the healthcare workers interviewed reported being forced to sign legal documents in Hebrew without knowing what they contained.

“He made me sign something – it was all in Hebrew. [...] I was forced to sign it, I didn’t have a choice, they did whatever they wanted. [...] When he gave me the pen to sign, I asked him what’s this, and he said, ‘your words, what you said,’ I told him this is Hebrew, he said, ‘yes sign, you’re not alone, all the men said what they said and signed, so just do it.’”

[Doctor C]

“I found myself in an office, someone with a computer screen, it was 3:30 am. I heard the call for prayers, Tuesday, November 21. Name ID... here he asked

⁵ “Nukhba Force or just (Al-)Nukhba are a special forces unit of the Izz ad-Din al-Qassam Brigades, the military wing of Hamas. According to Wikipedia, the word "Nukhba" is used by Israelis to refer to Hamas militants. In 2024 the usage of the word in Israel roughly corresponds to "Hamas militant" or "Hamas commando" (From Wikipedia: https://en.wikipedia.org/wiki/Nukhba_forces)

me ‘know where you are’? He said Shabak interrogation in Ofer [...] he told me just sign here, I signed, I couldn’t not sign, I was forced, he then said, this paper now I will throw in the garbage, you’re a prisoner of war and it’s emergency laws now here. Then he called the prison guard and took me back to the isolation cell.”

[Doctor D]

The withholding of information confirming a person’s arrest goes against basic international legal standards on detention practices⁶. Other questionable practices identified during a review of the testimonies include the failure to provide justification for the arrest and the denial of legal counsel.

Family members of detained medical staff interviewed by HWW have been unable to find out any information from Israeli officials, including if their relatives are still alive.

Preventing communication with family members and denying visits from mandated organisations, such as the International Committee of the Red Cross, are condemned practices that also show disregard by Israeli authorities towards international law and standards⁷.

4.2.4 Medical neglect, medical negligence, and the connivance of Israeli healthcare workers in the ill-treatment of Palestinian detainees

Since all of the healthcare workers interviewed by HWW have medical expertise, their testimony regarding the medical neglect they suffered personally or witnessed perpetrated against others is particularly valuable. In the absence of external scrutiny of the Israeli detention system, these medically-trained eyewitness accounts form the most robust assessment of the dangerous lack of healthcare provision for Palestinian detainees currently available.

The abuses they describe range from withholding necessary medical treatment or provision of substandard or inadequate medical care to what appears to be medical complicity in abuse.

⁶<https://www.ohchr.org/sites/default/files/Documents/Publications/training9chapter8en.pdf>

⁷<https://www.icrc.org/en/document/debunking-harmful-narratives-about-our-work-israel-and-palestinian-occupied-territories>

Withholding treatment or provision of inadequate care for chronic medical conditions:

While most interviewees recalled being asked about their medical conditions, none described receiving appropriate treatment for them. Several interviewees described witnessing the failure of the soldiers or prison guards to provide appropriate care to people with chronic medical conditions, including those with diabetes. On one occasion a nurse witnessed the deterioration and death of an elderly gentleman with dementia and peptic ulcers without any medical intervention:

“An elderly man suffering from Alzheimer's and ulcers died in the detention camp... We immediately called for help, asking them to treat him and take pictures to spread the story as a sign of your mercy! The officer asked us if he was breathing. We said yes, and he told us, ‘When he stops breathing, let me know!’ He did pass away; his name was [name]. Not to mention the patients who were neglected and forced to stand and walk. We had a [doctor] from northern Gaza named [name] who suffers from COPD [Chronic Obstructive Pulmonary Disease] and cannot sleep on his back. The officer refused to give him a pillow, so we had to sleep sideways, and [name] slept on our feet.”

[Nurse K]

Many detainees had chronic illnesses which compounded the pain and suffering caused by the appalling detention conditions. The routine underfeeding and lack of regular access to water posed particular challenges for diabetic detainees. The stress positions that detainees were frequently forced to assume were particularly agonising for those with impaired mobility. One doctor recalled being told to shut up when he highlighted his medical problems:

“Many had arthritis in their knees, many had chronic illnesses. I had an injury in my leg and back, it was impossible for me to sit like this. I spoke to them in English... they kept saying ‘I don’t care, even if you have a spinal fracture, shut up’. Before becoming Shawish. I was punished like the one in the picture [referring to the leaked photo below, published in various media outlets], a female soldier cuffed my hands high on the fence, for an hour.”

[Doctor B]

Withholding treatment or provision of inadequate care for injuries inflicted while in detention or new medical conditions:

The frequent beatings and other forms of torture that detainees were subjected to meant that they often sustained new injuries. The lack of sanitation and poor levels of hygiene also heightened the risks of detainees acquiring infections. The limit of care for newly acquired medical conditions in most circumstances while in Israeli detention appeared to be the occasional provision of paracetamol, which falls far short of an acceptable standard of medical care.

“In the warehouse, there were at least 70 detainees and a maximum of 120 detainees. [...] Between 10-20 detainees had medical conditions, one of them was throwing up with fever with a severe respiratory infection, he needed immediate medical care, and they simply didn’t care. They kept referencing their limited ability for medical intervention. Another detainee had a severe infection in his hand from the cuffs, he had cellulitis... I asked them to change his cuffs, they didn’t. I told him he needed surgery on his hand, they opened it and brought him back. I asked their permission to allow some detainees to sleep on their back instead of sitting on their knees, some detainees were diabetic. I was terrified some would die. I kept telling them about those who need medical attention. A detainee, [detainee’s name] from north Gaza, his face was pale, they kicked him in his chest and stomach. The worst thing is that they threw this responsibility at me, but I told them without equipment and proper facilities, I can’t do much. In my opinion, there was deliberate medical neglect, it was intentional to die, no conscience, no mercy. I heard from Shawish before me that three detainees died.”

[Doctor B]

Several interviewees sustained new injuries or infections that needed urgent medical attention, but never received it despite requesting it.

“We had to be in a kneeling position, with our heads to the ground. During the evening count, while we were in that position, a guard came in and started hitting our heads with his iron boot because he heard us praying that day and saying, ‘Allahu Akbar.’ He told us not to say ‘Allahu Akbar.’ I felt dizzy but didn’t lose consciousness, and my ear started bleeding. Throughout my time in prison, I asked to see a doctor, but I never saw one!”

[Nurse K]

“I had an infection in my left leg. [...] For four days I had an infection up to the ankle, I couldn't walk on it, I had fever, and no [medical] attention.”

[Doctor D]

One doctor explained how the lack of medical care he witnessed constituted clear medical neglect:

“I think if wild animals were put in this place, they would have been treated better. I told them I see people who need medical care, and they say in English ‘I don’t care if he dies’. Dr. Adnan what happened to him, happened to many, but he died. There’s clear medical neglect.”

[Doctor B]

While interviewees described how the majority of medical problems were ignored, Doctor D described one occasion when a fellow detainee’s hand turned black and prompted transfer to a civil hospital. This case is a clear example of a medical problem that has been neglected; if there was an appropriate level of healthcare provided to detainees, the problem would have been detected and treated long before it reached this stage. When the blood supply to someone’s hand is compromised, for example by handcuffs that are too tight, turning black is a very late sign. The ‘black’ area is dead tissue that is no longer salvageable. However, the blackness is likely to develop over a number of days, during which time the patient will have severe pain and other signs that point to the problem. Intervening before the limb turns black is key – once it has turned black irretrievable damage has been done.

Detention of children and other vulnerable groups:

Many interviewees were able to recall encountering children in detention – one interviewee mentioned a child of 12 years old being detained. They also described adults with learning disabilities, including people who were unable to speak, people with mental health problems being held without their medication and people with dementia.

“There was an elderly man with us from the [name withheld] family who had Alzheimer’s. The soldiers called him several times, but he didn’t respond. When he finally realised, he responded by saying, ‘It’s me, it’s me, it’s me.’ They beat him severely. I counted the number of hits he received; I

counted up to 150 hits before I lowered my head and averted my eyes from the count. The elderly man just kept screaming and saying, 'It's me, it's me' not even knowing how to express his pain!"

[Nurse K]

Targeted exploitation of medical vulnerabilities:

A number of released healthcare workers have mentioned that information gathered during the medical screening interview was then used to target abuse. For example, one nurse described being hit in the stomach immediately after revealing that he suffered from stomach ulcers in the presence of the doctor who elicited this information.

"This doctor should have been understanding of our situation, knowing that we were medical staff, but unfortunately, he showed no understanding at all. He asked me if I had any chronic diseases. I spoke to him in English, telling him I suffered from a stomach ulcer. Then he asked me in Arabic, "What do you do?" I told him I was a nurse. He showed great surprise and said, "Oh, even the medical staff were stopped by the army." I thought he might offer us some support, so I asked him to tell the officers that we were medical staff and had nothing to do with any hostile actions. He responded to me, "shut up, shut up. The army decides and verifies your background." His attitude changed drastically—from someone who seemed normal to a person full of prejudice. I was very surprised by this change. A soldier standing beside me, upon hearing that I had stomach problems, hit me in the stomach. Others who had back problems, for example, were hit on their backs, and so on."

[Nurse K]

The same thing happened on a second occasion:

"They then took me to the doctor's room, and he asked if I had any chronic diseases. I told him I had an ulcer, so he hit me in the stomach, just like before! When I think about it now, when I'm alone, I'm really scared, honestly."

[Nurse K]

Presence of medical staff during abuse of detainees:

According to the Declaration of Tokyo⁸ physicians must not “countenance, condone or participate in the practice of torture or other forms of cruel, inhuman or degrading procedures.” They also have an “ethical obligation to report abuses”. Nevertheless, there were several occasions when medical staff were reported to be present during or after abuse.

“A soldier brought a doctor and the doctor confirmed that the detainee was dead.”

[Paramedic A]

“My wrists hurt so much, they felt paralyzed and numb, both my hands, but my right hand more. I cried so much; I couldn’t take the pain from my hands. I called on a soldier to ask him to loosen the cuffs, but he didn’t, he just kicked me on my head repeatedly. I told him ‘Kick me, I can’t take it anymore, kill me already.’ The soldier asked me ‘where does it hurt,’ he looked at my hands and saw my wrists turning black, that time he called a doctor, who loosened the cuff on my right hand but made it tighter on the left hand. I kept screaming, calling for a doctor because I couldn’t take the pain in my hands anymore. The doctor threw me on gravel and told me to raise my hands up to lessen the pain, to be honest I felt less pain. But then a soldier came to me and slapped me in the face when I asked again to loosen the cuffs. He said it’s psychological that the pain is in my head.”

[Nurse H]

Pharmacological torture and forcible drugging:

HWW has collected evidence that Palestinian detainees are being forced to take medication while in Israeli detention. There is evidence to suggest that medications are being used both as a form of chemical restraint and to facilitate interrogation, a form of pharmacological torture. Even

⁸<https://www.wma.net/policies-post/wma-declaration-of-tokyo-guidelines-for-physicians-concerning-torture-and-other-cruel-inhuman-or-degrading-treatment-or-punishment-in-relation-to-detention-and-imprisonment/>

though the pills were handed out by soldiers, these findings imply that Israeli health professionals are directly involved in violating detainees' human rights in a grievous breach of medical ethics.

“Medical neglect: first thing in Sde Teiman, heavy breathing, they put me in a room and told me sit here a bit, I fainted and gave me pills, as if I’m high. Ergunal? Soldiers gave us the pills. This was for interrogation, every 3 days they gave it to me, before interrogation, I don’t know what it is, they gave it to me before interrogation. It’s like my internal conscious was speaking, not me. When I took the pill, I was awake, and they asked about the hostages. The pill made me feel weird, first time I felt like this, as if my inner mind was speaking what was in my heart I would say. I felt like I’m flying like an airplane and playing with the clouds. I saw visual hallucinations. Maybe the pill was like Ergot Alkaloids.”

[Paramedic A]

Killing of detainees:

“I swear I saw one detainee dying, he went into cardiac arrest, and he died. The soldier told me to leave him and it’s not my business. A soldier brought a doctor and the doctor confirmed that the detainee was dead. The person who tortured me was an Arab, he spoke Arabic very well without an accent. When we heard them saying he’s dead, we said Allahu Akbar and started yelling, so the soldiers raided the warehouse and collectively punished us. With my own eyes, I witnessed three detainees killed due to torture, I confirm this to you with my bare eyes. I tried to give one of them CPR and first aid. From cold and cuffs, one detainee had his leg amputated; from the cold his body was like wood, very hard. The third detainee was brought to the warehouse already dead; we don’t know what they did to him.”

[Paramedic A]

4.2.5 Targeted violence including penile and testicular trauma known to impair future fertility

A sizable proportion of the assaults that interviewees described involved violence targeting men's external genitalia. Inflicting injuries to the genitalia in this manner has the potential to compromise future fertility, whether by leading to testicular damage or erectile dysfunction⁹. The link between testicular trauma and impaired or abolished fertility is well established¹⁰. This occurs both due to the disruption of sperm production and decreased testosterone production. Urology guidance also emphasises the importance of prompt medical investigation and treatment to prevent the development of permanent fertility problems. Detainees who have sustained violent injuries to their genitalia while in Israeli detention are being provided with neither.

While Doctor A described being targeted in his 'sensitive areas', nurse K in particular endured multiple examples of violence targeted to his external genitalia:

“They beat me severely, focusing on sensitive areas.”

[Nurse K]

“My name was called, and the whole way, they kept my head bent downwards and continued hitting me in sensitive areas”

[Nurse K]

“During the transport, we endured severe torture, including beatings, humiliation, and punches to sensitive areas.”

[Nurse K]

“However, the interrogator heard me and took it personally. He began to beat me with deadly blows, not just severe ones. The soldiers went outside, and he locked the door from the inside. He started hitting me in the face and in sensitive areas, while I called for the other officers!”

[Nurse K]

⁹ <https://pubmed.ncbi.nlm.nih.gov/29635819/>

¹⁰ <https://pubmed.ncbi.nlm.nih.gov/29635819/>

“...A soldier came and ordered me to spread my legs so he could kick me in the sensitive area with his shoe. I started calling out and pleading, "Officer, officer," until another soldier came and pulled him away from me...”

[Nurse K]

He also described the forcible insertion of a pen-like instrument into his penis which led to severe pain and bleeding. There are a wealth of potential fertility complications arising from this, including the development of urethral strictures¹¹.

Beyond the torture and abuse targeted to genitalia, sexual dysfunction is common among male torture survivors more generally. The mechanisms may include “decreased sexual interest, inability to trust a sexual partner, fear of or aversion to sexual activity, disturbance in arousal and erectile dysfunction”¹².

4.2.6 Evidence that healthcare workers are targeted due to their profession

Interviewees were able to provide a range of evidence that healthcare workers are being targeted for detention based on their profession, as summarised below.

Targeted for wearing medical uniform:

Interviewer:

“Why do you think they treated you differently and detained you for a long time?”

Interviewee:

“Because I was wearing medical uniform!”

[Nurse L]

¹¹ <https://pubmed.ncbi.nlm.nih.gov/23228290/>

¹² <https://doi.org/10.1016/j.rhm.2015.11.019>

“They stopped us by calling out, ‘the person wearing scrubs, come here.’ [...] Most of those arrested that day were medical staff, especially those wearing medical uniforms. [...] They were all arrested because they were wearing medical uniforms while passing through what is called the safe passage! Even the medical staff who weren’t wearing medical uniforms were not arrested.”

[Nurse K]

Targeted while wearing clear medical emblems:

“They pointed their weapons at me. I was wearing the official paramedic uniform with the PMRS logo.”

[Paramedic A]

Targeted in known medical convoys:

“On Wednesday, the hospital administration told us they will coordinate our evacuation to Awda Hospital in Nuseirat, middle Gaza. The evacuation was arranged by the Red Cross and MSF, they took car licences and IDs and everything. The hospital shared our names, and they were agreed upon and approved. On Thursday, November 23, two days after my injury, we went to the ambulance heading south. We reached the Kuwaiti roundabout. In the ambulance, there were 15 people, including patients, their companions, and medical staff. There was a military base at the roundabout, soldiers told us to get off the ambulance, and they called one by one. I was the 3rd or 4th person. I was wearing the hospital scrubs. The soldier asked for my ID and name and where I live. He told me to go wait where the green flags were, I told him I didn’t see them, so he yelled at me and said just walk there. I went up a hill and there were snipers on the sides. There were children and women sitting in the open area. I asked the soldiers what’s happening, and I told them I’m a peaceful man, I don’t engage in politics or affiliation.”

[Nurse J]

Detained while at work:

Doctor B and Nurse G were detained directly from the hospitals where they were working when Israeli forces raided, while Doctor A, Doctor D, Nurse J and Nurse L were detained during forced evacuations from their hospitals. Paramedic A was also detained while at work, driving his ambulance to retrieve injured patients.

Receiving abuse related to medical profession:

“I told him I work with PMRS and I’m here for humanitarian reasons, regardless of who is injured, I help them, this is what I learned as a paramedic. They continued to harass and assault me. There was a wall in the area where I was being interrogated. They drew an ambulance on the wall and told me to go and get Sinwar. I couldn’t take it anymore, he made me make the sound of ambulance, ‘we we we’; every now and then he would tell me to make sounds. The soldiers kicked me with their boots that have metal on them in the front.”

[Paramedic A]

“Because I was part of the medical staff, my interrogation lasted five full days. A civilian, arrested in his medical uniform, undergoing such lengthy interrogation just because he's part of the medical staff—this is what the intelligence officer told me.”

[Nurse K]

“Even civilians on the medical staff were being treated as terrorists. I don’t know by what standard they considered the medical staff to be terrorists.”

[Nurse K]

“The commander asked my name and job, and after I told him, he started cursing and mocking me. I told him I’m part of the medical staff. He told a soldier to come take me and the soldier shoved me to the ground and cuffed my hands to the back and covered my eyes. And the torture journey started from this moment.”

[Doctor B]

Being targeted for helping the injured:

“I told them I’m a doctor, but they didn’t care, they made fun of me saying, ‘you treat terrorists.’”

[Doctor A]

“The soldier also told me ‘You came to help people we kill, so you’re going to Sde Tieman.’ [...] When he told me this, he took me to an open field, I had to lie on my stomach with my head in the sand. Soldiers would step on my head with their boots and shoved my head in the sand. The soldiers made a circle around me and kept saying we will execute you; we’re praying for you because we will execute you. They kept screaming at me and scaring me. One soldier put the tip of his weapon on my head, he brought gas and said we will burn you while screaming at me in Hebrew ‘Hai Israel Hai.’ He kept telling me ‘Say you’re Hamas’, when he put the gas on me. All around me were soldiers. He threatened me with a lighter to burn me. Then, a soldier got in a jeep and drove quickly towards me like they wanted to drive over my head, all this to scare me, they were saying we will drive the jeep over you. They kept threatening me with detention, saying I’ll never leave there. I asked them what did I do to be treated like this and one soldier said “you came to an area you shouldn’t have come to; we want to kill people when we shoot at them.”

[Paramedic A]

Healthcare workers singled out for punishment:

“I was shocked to see they were doctors I work with, Dr [name], Dr Adnan Al-Bursh, Dr [name] and Dr [name], from Al-Ahli hospital. They were in severe terror. Dr [name] is [x] years old from Indonesian Hospital, Dr. Adnan 50 years old. They were in a state of terror. When they were brought in, soldiers were holding them and pushing their heads down; they were all cuffed to each other, walking like a train, with one hand on the shoulder of the person in front. Dr. Adnan was in pain from the beatings. Hearing from Dr [name] and Adnan, it seemed to me that there was more severity in the violence towards healthcare workers, they were treated aggressively.”

[Doctor B]

Although there are no exact figures available regarding the number of Palestinians from Gaza being held in Israeli detention, it is clear that healthcare workers are disproportionately represented among the detainees compared to their proportion in the population of Gaza as a whole.

4.2.7 Killing of healthcare workers while in Israeli detention

To date, four healthcare workers are known to have been killed while in Israeli detention. These include two doctors, one paramedic and one nurse.

- **Dr Adnan Al Bursh** (explained in the case study below)
- **Dr Iyad Al-Rantisi:**

A renowned consultant obstetrician and gynaecologist, and Head of Obstetrics and Gynaecology Hospital at Kamal Adwan Hospital, North Gaza. Following a series of Israeli-forced evacuations of hospitals of North Gaza and then Gaza City, he had to evacuate to the south through Israel's designated "safe route" on 10th November 2023, where he was detained at the Netzarim Military Checkpoint. On 18th June 2024, the Israeli newspaper Haaretz announced Dr Al-Rantisi "died" on 17th November 2023 at Shikma prison¹³. Dr Al-Rantisi's body is still in Israeli detention.

- **Paramedic Hamdan Ennaba**

A senior paramedic at Nasser Medical Complex in Khan Younis City was detained by Israeli forces on the 2nd December 2023, along with 4 other paramedics. They were transferring patients in an approved convoy from Al-Shifa Hospital to the southern hospitals through the so-called Israeli-designated "safe route". Ten months after he was detained, on September 9, 2024, the family of Hamdan was informed that he had been killed in Israeli detention without further details. His body is still in Israeli detention.

- **Nurse Ziad Al-Dalou**

A chief nurse working in the Internal Medicine Department of Al-Shifa Hospital in Gaza City was detained by Israeli forces on the March 19, 2024 along with at least 55 healthcare workers and tens of patients and displaced civilians following the invasion of the hospital. After 182 days of his detention, on September 17, 2024, the family of Dr Ziad was informed that he was killed in an Israeli detention facility just three days after his detention. His body is still in Israeli detention.

¹³ <https://www.haaretz.com/israel-news/2024-06-18/ty-article/.premium/israel-arrested-a-senior-doctor-in-gaza-six-days-later-he-died-in-a-shin-bet-facility/00000190-27eb-d14b-a999-27eb9aea0000>

Case study 2 - The torture and killing of Dr. Al Bursh while in Israeli detention:

This case study includes examples of the following acts:

- The detention of a healthcare worker from a hospital
- Torture while in detention
- Killing while in detention



Dr Adnan Al-Bursh was a renowned consultant orthopaedic surgeon and Head of the Orthopaedic Department at Al-Shifa Hospital in Gaza. When Al-Shifa was invaded by Israeli forces in November '23, he was forced to relocate to the Indonesian Hospital to continue his life- and limb-saving work.

While treating patients in the Indonesian hospital he was injured himself when the hospital was hit in an Israeli attack. He was forced to relocate once again after Israeli forces invaded the Indonesian Hospital, this time moving to Al-Awda hospital so he could continue operating.

On December 17, 2023, Israeli forces invaded Al-Awda hospital and abducted a number of hospital staff, including Dr Al-Bursh. He was initially taken to the Sde Tieman facility where Doctor B briefly shared the same cell with him, before being transferred to another prison several days later.

“Dr. Adnan came 5 days after I reached the warehouse [...] the female soldier called me and said that people are coming, and she’ll bring mattresses and blankets to prepare for them until they come. I didn’t know who was coming, this was a routine, every day maybe 10 people came. When they came, I whispered in their ear my name to comfort them a bit. I was shocked to see they were doctors I work with, Dr [name], Dr Adnan al-Bursh, Dr [name] and Dr [name], from al-Ahli hospital. They were in severe terror. Dr [name] is [x] years old from Indonesian hospital, Dr Adnan 50 years old.

They were in a state of terror. When they were brought in, soldiers were holding them and pushing their heads down; they were all cuffed to each other, walking like a train, with one hand on the shoulder of the person in front.

Dr Adnan was in pain from the beatings. Hearing from Dr [name] and Adnan, it seemed to me that there was more severity in violence towards healthcare workers, they were treated aggressively. Dr Adnan was also punished. I asked them to allow him to sit. I had extra paracetamol hidden to give to those in need; I didn't want to risk them cutting medicine from detainees, so I kept extra hidden. So, when the doctors came in pain, I gave them painkillers. Dr. Adnan, and all of them, were taken for interrogation one time during their detention here and then transferred to another place. Maybe 3 days before they were transferred, they were interrogated. Dr. Adnan had visible blunt trauma, he had trouble breathing.”

On the 2nd May 2024, The Commission of Detainees’ Affairs and the Palestinian Society Prisoner’s Club announced the death of two detainees at Ofer Prison, one of whom was Dr Adnan Al-Bursh. His killing was reported to have occurred on the 19th April 2024. The Israeli Authorities have not released his body.

4.2.8 What is the impact of Israel's detention of healthcare workers?

The unjustified, violent and intentionally-harming detention conditions described in this section most certainly have long-lasting consequences and deep scars to the physical and mental health of those detained. Released tortured healthcare workers described significant weight loss, loss of appetite, severe insomnia, physical pain and persistent symptoms (including urinating blood for weeks in one case), handicaps, symptoms of depression, and anxiety.

Many tortured health workers sustained injuries and conditions that may not be easily treated or recovered from. Moreover, the severe impact that torture and ill-treatment may have on one's psychosocial well-being is extensively described in pertinent scientific literature and by those who work closely with survivors of torture. Beyond the individual consequences, the impact on family and community dynamics of the return of survivors of torture is to be noted, as their reintegration doesn't go without a painful process of recovery and the need for social reconnection. In addition to the tortured individual, there are secondary and tertiary victims, as family and community members may share the fear, the pain and the chronic distress caused by testimonies of torture and ill-treatment.

All of these elements are compounding to the fact that, with fewer health workers available, these persons are not, themselves, able to access proper healthcare to recover. In a dark cycle of intentional undermining of the well-being of Palestinians, the torture carried out by the Israeli military has a cascading effect on Gaza.

Physical sequelae:

“Until now, I have broken ribs and tailbone. I’m not able to get back to my weight. I’m in Rafah now, I’m seriously depressed.”

[Doctor A]

“I still feel pain in my hands, my hands are weak, no energy to pull or carry anything. Also, there’s still pain from my shoulders all the way to my fingertips. I have severe neck pain from the pressure on my head when they kept pushing our heads down. I don’t have a medical report unfortunately. When I was released, I just wanted to hug my daughter and see my family. I don’t want to experience heartbreak again; I want to stay with my family.”

[Nurse H]

“I was 67 kilos when I was detained and when I was released, I was 51 kilos.”

[Doctor D]

Psychological sequelae:

“Recently, I've become afraid to sleep, fearing these memories will haunt me. Many times, I wake up in a panic, shouting, ‘Don't hit me, don't hit me’.”

[Nurse K]

4.3 Threatened at the workplace - detention and killing inside health facilities

Direct attacks and killing of injured people

Health workers interviewed by HWW recall how the hospitals became unsafe spaces as attacks and siege from the Israeli military became a frequent reality in Gaza¹⁴. The testimonies, while directed at the experience of detention, include sections in which health workers mention the reality of working under airstrikes, siege and sniper hits.

“In November, when the military ground invasion started, things got worse. The Indonesian hospital is considered a border hospital, so all the “fire belts”¹⁵ were around it. It was like a waterfall of airstrikes, the hospital walls started to break, parts of the ceiling fell on patients. There were “fire belts” all

¹⁴Insecurity Insight’s monitoring points to over 1500 incidents of attacks against healthcare in Palestine, since October 7 2024: Source: <https://insecurityinsight.org/>

¹⁵ By “fire belts”, the witness means carpet bombing; a type of illegal bombardment of large areas in a progressive manner aiming to cause massive indiscriminate damage to the entire area.

around the hour. It was extremely terrifying, with patients screaming. The hospital was full of IDPs, this made it difficult to work, and to handle the spread of contagious diseases which added to the load on doctors. How do we treat all this. Honestly, it was very difficult.”

[Doctor A]

“I was in the ambulance heading to get the injured, but I saw the four being executed in cold blood. I saw it with my own eyes, I was three meters away from them. When they were shot, I hid under the ambulance. [...] A sniper killed the four injured. [...] They shot them in the head. I saw them shooting them in the head. I was heading to the headquarters. This was morning time. In front of Barcelona Garden, 20 metres from Ministry of Labor, Mughrabi.”

[Paramedic A]

The final case study of this report is an analysis of the raid of Nasser Medical Complex, which gives a more detailed picture of the type of destructive military action that is being carried out by Israeli forces in the very sites where health workers are struggling to save lives and to protect themselves. It charts the attempts of a committed group of healthcare workers to keep providing care to their patients in the face of targeted attacks and indiscriminate detention, echoing the patterns of abuse and torture described in the previous sections.

Case study 4 - The raid of Nasser Medical Complex

This case study includes examples of the following:

- A targeted attacks on healthcare workers on hospital property
- An attack on a hospital ward which killed one patient and injured six patients
- Detention of healthcare workers while caring for patients
- Patients dying as a result of the hospital invasion
- The hospital being forced out of service

The following voice messages were sent by Dr. Khaled Al Serr from inside Nasser Medical Complex as it was invaded by the Israeli military in February. His messages provide a detailed, contemporaneous account of the events as they occurred. They reveal the devastating impact that Israel's targeting of Gaza's second-largest hospital had on the delivery of care to the hospital's existing patients, including multiple deaths. They document a succession of assaults on hospital staff, including the detention of multiple healthcare workers, and show how people trying to access the hospital were attacked and even killed. Dr Al Serr was subsequently imprisoned in Israel and released a few days ago. He gave permission for these messages to be shared.

Background:

The voice messages document what happened to Nasser Hospital between the 13th - 20th of February 2023 as the hospital was invaded by Israeli forces. In the days leading up to these messages, the hospital was besieged by Israeli troops and surrounded by heavy fighting¹⁶. The British Broadcasting Corporation (BBC) has verified a series of videos that show some of the events described in this case study¹⁷ and produced an article that focused on the abduction and abuse of the Nasser Hospital medical staff during this period of time¹⁸.

The following voice messages are transcribed in the order they were received. Some messages have been omitted for reasons of confidentiality or edited for length.

¹⁶ <https://www.ochaopt.org/content/hostilities-gaza-strip-and-israel-flash-update-116>

¹⁷ <https://www.bbc.co.uk/news/av/world-middle-east-68310550>

¹⁸ <https://www.bbc.co.uk/news/world-middle-east-68513408>

13/02/2024 -

“Today, Israel army has announced to all people inside the hospital to evacuate immediately or they will bomb the hospital within half an hour. They shout on people by speakers on a drone and also they send like messengers people who have been imprisoned before. They send them to hospital administration to convey a message that they have to leave the hospital immediately within half an hour.”

“Shooting and bombings continue since three days in the hospital zone surrounding streets and buildings of the hospital. And today, they have bombed a warehouse inside the hospital, which is a storage building. And most of the medical supplies has been burned today.”

“Although they announced to people to evacuate the hospital through a specific way – they call it a ‘secure way’ for evacuation – they shot three people, three civilians, in front of the gates of the hospital. One of them has a bullet inside his abdomen – inlet/ exit – he needs laparotomy – and two other persons shot in their upper arm.”

14/02/2024 -

“Today is the 14th of February. Israeli army forced all the patients and all refugees inside Nasser Hospital – and now they are forcing medical staff in Nasser Medical Hospital – to evacuate immediately from the hospital. And actually most of the refugees have evacuated the hospital one hour ago. And now the drone's speakers, they announcing for all doctors inside the hospital to move outside the hospital.”

“Israeli soldiers and tanks, uh, surrounding the hospital from all sides. Shootings and bombings still continue.”

“I will try to get some rest and sleep a little bit here. Because, uh, there was another calling from an Israeli officer to the administration of the hospital, uh, who threatened the administration of the hospital to evacuate all the refugees and all the people inside the hospital by tomorrow.”

15/02/2024 -

“Since yesterday, there’s a lot of updates about what's happening here in Nasser Hospital. There was direct bombing to the hospital. They forced people inside the hospital, including patients, relatives [BOMBS GO OFF] Oh, ya Allah! Patients, relatives, and healthcare workers to evacuate immediately. And you can hear in the background the continuous bombing in the hospital.”

“First of all, I'm sorry I didn't get any internet access yesterday. Every minute and every hour we have a new update. Just one hour ago now, the time here is 3 AM, after midnight at 2 a.m., Israeli army bombed the hospital directly with a rocket which hit directly into the patient wards.”

“Six patients were injured again, and one of the patients died in his bed. The Israeli army is trying to communicate with the people inside the hospital every time; to warn them and threaten them to evacuate immediately, even if it is after midnight, the speakers on the drone shouting at people that they have to get out of the hospital immediately, or they will bomb the hospital. And unfortunately, they have committed to their warning and bombed the hospital directly just one hour ago.”

“The situation here is getting worse every time and every minute. Yesterday I tried to evacuate my parents from the hospital because I have them here with me inside the hospital. But through a secure passage, as they [Israel] claim that it's a secure passage for people and refugees to be evacuated through in front of tanks and snipers and soldiers. The bulldozer and tank tried to approach

people and they were afraid so they came back to the hospital here as did a lot of the refugees.”

“Actually, the situation here in the hospital at this moment is in chaos. All of the patients, all the relatives, refugees, and also the medical staff are afraid because of what happened. We could imagine that at any time the Israeli army will bomb the hospital directly and they will kill patients and medical personnel directly by bombing the hospital building.”

“Yesterday also, Israeli snipers and Israeli quadcopter, which is a drone that carries on it an AR with a sniper. They shot all over the building and they shot my colleague, [name of colleague]. He has a shrapnel inside his head. I can upload for you a CT for him, so you can see. Alhamdulillah, it was superficial. Nothing serious, but a lot of bullets inside their bedroom and the restroom.”

“The situation here is very sad after bombing the hospital. The patients, previously, we had about 400 patients and, the same number, about 400 or 300 healthcare workers inside the hospital. And after the bombing this night, and the threatening, continuous threatening by the Israeli army to evacuate the hospital, most of the patients, including injured patients who cannot even walk, and children, women, and all patients, all of them had to go outside the hospital in the middle of the night in front of tanks, snipers, and soldiers, to walk through what is called a security passage or a safe passage for evacuation. Through that passage, the Israeli army makes a security check on every person, but they arrest some of the patients and some of relatives and some care workers also.”

“To give you an update about what's happening here at Nasser Hospital, the situation is still the same. All of the medical staff and patients are still trapped

in the medical department inside the North Hospital, the old building inside the Nasser medical complex and wards and corridors still flooded with bits.”

“Most of the patients do not have the chance to get the medicine and the health care needed for them, including dressing, and we cannot make rounds on patients. We cannot move between beds. Unfortunately, most of the medical supplies was burned yesterday. As I mentioned earlier, in the previous recording, the storage building was burned due to a bombing by the Israeli army. Also the medical supplies and also food supplies are in the surgical building, which we are displaced from.”

16/02/2024

“This ICU patient have (sic) just died, because they cut all the electricity at Nasser Medical Hospital, and another 6 patient (sic) is (sic) awaiting the same faith (sic).”

20/02/2024 - Evening, Gaza time

“All of the health care workers who stayed – and insisted to stay – at Nasser Hospital to continue providing care to our patients – in spite of all the threatening before – were humiliated and beaten. The doctors and nurses who were abducted by the Israeli army were taken naked in buses, and they have been sent away. We don't know what happened to them ‘til now.”

“The hospital has been shifted to a military barracks. We can see, tanks, soldiers and jeeps, all the time. They have destructed all the facilities surrounding our building. We still hear bombing in the nearby neighbourhoods and also in the refugee camps near the Nasser Hospital every day. And while I'm speaking here, right now I can see from the window tanks and jeeps and soldiers also, moving around the building. We are forbidden to go outside this building or even to look through windows. Even we have medical supplies in

other facilities – we are forbidden to go outside this building to get them to our patients.”

“If I want to talk about what happened on the first day of the invasion Israeli army, all of the doctors, and nurses, and healthcare workers were taken outside the building, away from their patients. And we were forced to get naked in the front of the building and all the soldiers surrounding us, pointing their guns against us. Some of our colleagues were beaten and threatened to be shot. And most of our colleagues here, were kept naked for more than eight hours. And the soldiers surrounding us, laughing at us, humiliating us and beating anyone trying to move his hand or trying to look outside. After that they put only about five doctors for more than 130 patients in one building. And all of these patients are bedridden, some of them are quadriplegic and some of them are old age. And also we have here kids, children with no parents.”

“Hello, everybody. This is Khaled again. I'm sorry I could not send you any message before because I could not get an access to internet. Even using eSIM before. Now I'm talking to you from inside Nasser Complex, Nasser Medical. I stayed here, along with my some of my colleagues, among our patients.

And the situation here is getting worse all the time, because we still don't have a, electricity. We don't have tap water, and we have a shortage of drinking water. In spite of all of that, we, continue to do our job, to take care of our patients. And in addition to all of that, but we also, try to provide some food to the patient, cleaning the floors.

All of this is upon our shoulders. Doctors, nurses... our total number now is ten healthcare workers with almost 100 patients. Most of them are bedridden, and most of them are injured patients who need, in addition to medication and dressing, also personal issues like, mobilization out of bed and taking care of, like, diapers, cleaning, bedding.

So, in addition to our job as doctors and nurses, we also distribute food, water to the patients and cleaning the floors, gathering garbage in front of patients and between patients. We have here old age patients with no relative. And we have kids with no parents because the Israeli army separated all the relatives, all of the parents, all the children from their patients.”

This was the final message sent by Dr. Al Serr from inside Nasser Medical Complex. A statement from the WHO¹⁹ published later that day said:

“As the raid continues, any further damage to Nasser Medical Complex will mean even more delays in restoring functionality. The hospital’s large medical warehouse, along with supplies provided by WHO and partners, has burnt down, and the warehouse for day-to-day medical supplies is partly damaged. The WHO-supported limb reconstruction centre, housed within the hospital, is no longer operational. These are tragic developments that will further limit access to health care in a context where needs continue to soar.”

On the 25th of February, the Israeli military announced its withdrawal from the hospital. When aid organisations were eventually able to re-enter the hospital complex, there was evidence of widespread damage to the hospital interior, including to important pieces of medical equipment.

¹⁹ <https://www.who.int/news/item/20-02-2024-who-transfers-critical-patients-out-of-nasser-medical-complex--fears-for-safety-of-remaining-patients>

At the level of the health system in Gaza, each health worker detained, for the shortest of periods, means a significant gap in delivery of care in a system where resources are extremely limited and controlled externally by the perpetrator of violence, the Israeli authorities. Moreover, considering the impact that individuals bear from these harrowing experiences, there should be no expectation of a normal return-to-work, especially if working means facing the dire sanitary conditions and horrifying injuries caused by Israeli aggression, often related to their occupation, or initiated at their working site during invasions of hospitals.

As the number of health workers reduces by killing, severe injury and detention, so does the hope of sustaining the capacity of delivering quality and timely healthcare to the Palestinian population. The immediate effect of reduced capacity of care is exactly that of preventing Palestinians from fulfilling their right to health, that is, it delays curative care - leaving behind chronic and if not life-long consequences to the bodies of those who did not receive timely care. It blocks preventive care, by denying adequate, timely and fully resourced preventive activities from being delivered. This was demonstrated clearly by the re-emergence of polio.

Finally, it harms and reduces the dignity of the Palestinian population who might be suffering from easily treatable diseases, undergoing pregnancies or age-related decline, and who are all uncovered by Israel's intentional and insistent undermining of the Palestinian's health system.

5. CONCLUSION

This report catalogues patterns of conduct by the Israeli authorities and Israeli military that are clearly consistent with intentional acts to inflict upon a specific population – the Palestinians living in Gaza – serious bodily and mental harm, consistent with the intent of genocide. These patterns of conduct include the targeted killing, targeted injuring, targeted detention and systemic torture of healthcare workers in a manner that is leading to death and disablement of the Palestinian population by depriving them of healthcare, both in the short and long term. This report also provides evidence of a wider pattern of genocidal conduct that has led to the wholesale destruction of the healthcare system of Gaza, including the besiegement, invasion, and wanton destruction of hospitals and medical equipment, forcing hospitals out of service, in some cases permanently.

These acts have directly led to the present situation where Palestinians are dying wholly preventable deaths – in their tens of thousands^{20,21} – due to a lack of access to adequate healthcare. It has also rendered maternity care impossible, thereby preventing safe births and increasing neonatal mortality.

6. ACKNOWLEDGMENTS

We would like to sincerely thank the witnesses for sharing their experiences with us despite the trauma that could be reignited by recalling those incidents and despite the danger it poses to themselves and their families.

Also, we would like to thank the volunteers of Healthcare Workers Watch who supported this work and preferred to remain anonymous for their safety.

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²⁰ Zeina Jamaluddine, Zhixi Chen, Hanan Abukmail, Sarah Aly, Shatha Elnakib, Gregory Barnsley et al. (2024). Crisis in Gaza: Scenario-based health impact projections. Report One: 7 February to 6 August 2024. London, Baltimore: London School of Hygiene and Tropical Medicine, Johns Hopkins University.

²¹ Khatib, Rasha et al. Counting the dead in Gaza: difficult but essential. The Lancet, Volume 404, Issue 10449, 237 - 238

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