

# LOCKED OUT OF HEALTH

## HOW ISRAELI MILITARY BARRIERS IMPOSE A STRANGLEHOLD ON PALESTINIAN VILLAGE ACCESS TO HEALTHCARE

CASE STUDY – AL WALAJA – MAY 2024





# ACKNOWLEDGMENTS

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## SPECIAL THANKS

This Case Study was carried out by Médecins du Monde (MdM). It is based on the analysis of testimonies from health workers and regular visits to the Al Walaja clinic from January to April 2024.

It also builds on MdM’s experience of humanitarian services provision and access restrictions to Al Walaja clinic and inhabitants. Médecins du Monde is conveying its deepest thanks and appreciation to the professionals and residents of Al Walaja who agreed to share their testimonies for the data collection of this Case Study.

All photos by Ahmad Al-Bazz (NRC) and Médecins du Monde Switzerland.

Cover picture: The village of Al Walaja, fully encircled by the Israeli military wall since it was built in the early 2000s. West Bank, occupied Palestinian territory. (Ahmad Al Bazz / NRC, 2021)

MdM has been working in Al Walaja since 2018. MdM is working closely with the Al Walaja clinic and its health professionals, supporting the integration of mental health in primary healthcare through the funding and development of a Mental Health and Psychosocial Services (MHPSS) unit in the clinic. MdM is also providing emergency MHPSS services to Al Walaja inhabitants affected by occupation-related incidents such as home demolitions and settler violence.



On the right side of the picture is Al Walaja clinic, with the Israeli wall and the Har Gilo illegal Israeli settlement on the other side of the road, equipped with cameras facing the health center. The Israeli military roadblock is just a few meters away. (Médecins du Monde Switzerland, 2024)

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# SUMMARY

Al Walaja is a small Palestinian village between Jerusalem and Bethlehem in the West Bank, in the occupied Palestinian territory (oPt). Encircled by the illegal wall built by Israel in the early 2000s<sup>1</sup> and regularly cut off from the outside world by Israeli roadblocks, the community of 3,500 inhabitants is locked in an externally imposed enclave deprived of basic public services, including essential healthcare.

As the population of the village ages, a large proportion of the inhabitants have fragile health conditions, with numerous cases of diabetes, hypertension, psychiatric issues or heart disease. Opened in 2017, the only health center in Al Walaja is not equipped with the range of services needed as the Israeli authorities are preventing its development through a discriminatory urban planning regime that obstructs Palestinian construction and development in Area C of the West Bank.



<sup>1</sup> On 9 July 2004, the International Court of Justice (ICJ) issued an Advisory Opinion concluding that the construction of the wall by the Israeli army inside the West Bank, including in and around East Jerusalem, violates international human rights and humanitarian law. The ICJ stated that Israel must cease the works to construct the wall and dismantle the parts of the structure located in the oPt. ICJ, [Legal Consequences of the Construction of a Wall in the Occupied Palestinian Territory](https://www.icj-cij.org/en/press/2004/07/040101.html) (icj-cij.org)

Severe restrictions on the movement of Palestinians in the West Bank have been a long-term policy of the Israeli authorities<sup>2</sup>, with military checkpoints, roadblocks and other obstacles being imposed throughout the whole territory.

<sup>2</sup> B'Tselem, [Ground to a Halt: Denial of Palestinians' Freedom of Movement in the West Bank](https://www.btselem.org/press/2007/08/070101.html), August 2007; United Nations Office for the Coordination of Humanitarian Affairs (OCHA), [Movement and Access in the West Bank](https://www.ocha.org/en/2017/12/170101.html), 21 December 2017; OCHA, [Movement and Access in the West Bank](https://www.ocha.org/en/2011/09/110101.html), September 2011; OCHA, [West Bank: Closures count and analysis, occupied Palestinian territory](https://www.ocha.org/en/2006/09/060101.html), September 2006.



The wall built by Israel in the early 2000s, separating Al Walaja village from its immediate surroundings. It has both concrete and barbed-wired portions, with a military road running around its perimeter for the movement of the Israeli army. (Ahmad Al Bazz / NRC, 2021)





Al Walaja clinic, with construction materials still present on the second floor as Israeli authorities prevent their removal following the issuance of the military stop work order. (Médecins du Monde Switzerland, 2024)

Israeli military forces have significantly reinforced this policy since 7 October 2023, breaking the geographical connection between cities, villages and communities<sup>3</sup> and effectively disrupting public health services, educational institutions, livelihoods, social relations and humanitarian access.

Since 7 October, the Israeli army has persistently blocked the Al Walaja community's sole exit road with military obstacles, effectively confining its inhabitants to the village. To reach essential health services on the other side, Palestinians must travel on foot to cross the Israeli gate and risk being mistreated and denied access by the Israeli soldiers.

<sup>3</sup> Since 7 October 2023, Israeli forces have imposed 49 new access and movement restrictions in the West Bank and changed the status of 100 of the 645 pre-existing obstacles, impeding or severely impacting the access and movement of the Palestinian population in the West Bank. OCHA, West Bank Access and Movement Since 7 October, 14 December 2023: [West Bank access and movement since 7 October \(14 December 2023\)](https://www.unocha.org/west-bank/files/2023/12/West-Bank-access-and-movement-since-7-October-14-December-2023.pdf) | OCHA ([unocha.org](https://www.unocha.org)).

## AL WALAJA: A VILLAGE IN A SHRINKING ENCLAVE WITH RESTRICTED ACCESS TO THE OUTSIDE WORLD

Throughout the history of the village of Al Walaja, its inhabitants have been progressively cornered into an ever-shrinking area where the Israeli authorities significantly limit human development.

Forcibly displaced from the adjacent hill in 1948, the Palestinian inhabitants of Al Walaja suffered further land confiscations when the Israeli military occupation of the West Bank began in 1967. The Israeli authorities annexed the northern part of the village lands when they unilaterally redrew the boundaries of Jerusalem.<sup>4</sup>

<sup>4</sup> Ahmad Al-Bazz, Al Walaja, A Palestinian Village Facing Demolitions, Norwegian Refugee Council (NRC), 20 December 2021: [Al-Walaja - a Palestinian village facing demolitions \(nrc.no\) alwalajah.pdf \(poica.org\)](https://www.nrc.no/alwalajah.pdf).

Nowadays, as the Jerusalem boundaries virtually cut Al Walaja in two, the inhabitants of the same village do not all have the same status: some are Jerusalem residents, while others are Palestinian ID-holders who are forbidden from entering Jerusalem without Israeli permits.

The overwhelming majority of the village **(97.4%)<sup>5</sup> was classified as Area C by the Interim Agreement Oslo II in 1995.** Area C, which makes up about 60% of the West Bank, is fully controlled by the Israeli authorities, with the land and infrastructure necessary for the development of public services closely supervised.

Area C is subject to a discriminatory Israeli urban planning regime which effectively prevents any kind of urban and demographic expansion and denies construction permits for both housing and basic infrastructure<sup>6</sup>.

Therefore, the inhabitants of Al Walaja are essentially forbidden to build, plan and develop their village, with many families suffering from the demolition of their homes ordered by the Israeli authorities on the grounds of a lack of building permits.

<sup>5</sup> Nasser Al Qadi, Al Walaja: the Reality of Geopolitical Isolation, The Applied Research Institute – Jerusalem (ARIJ), 2018: <http://poica.org/wp-content/uploads/2018/02/alwalajah.pdf>.

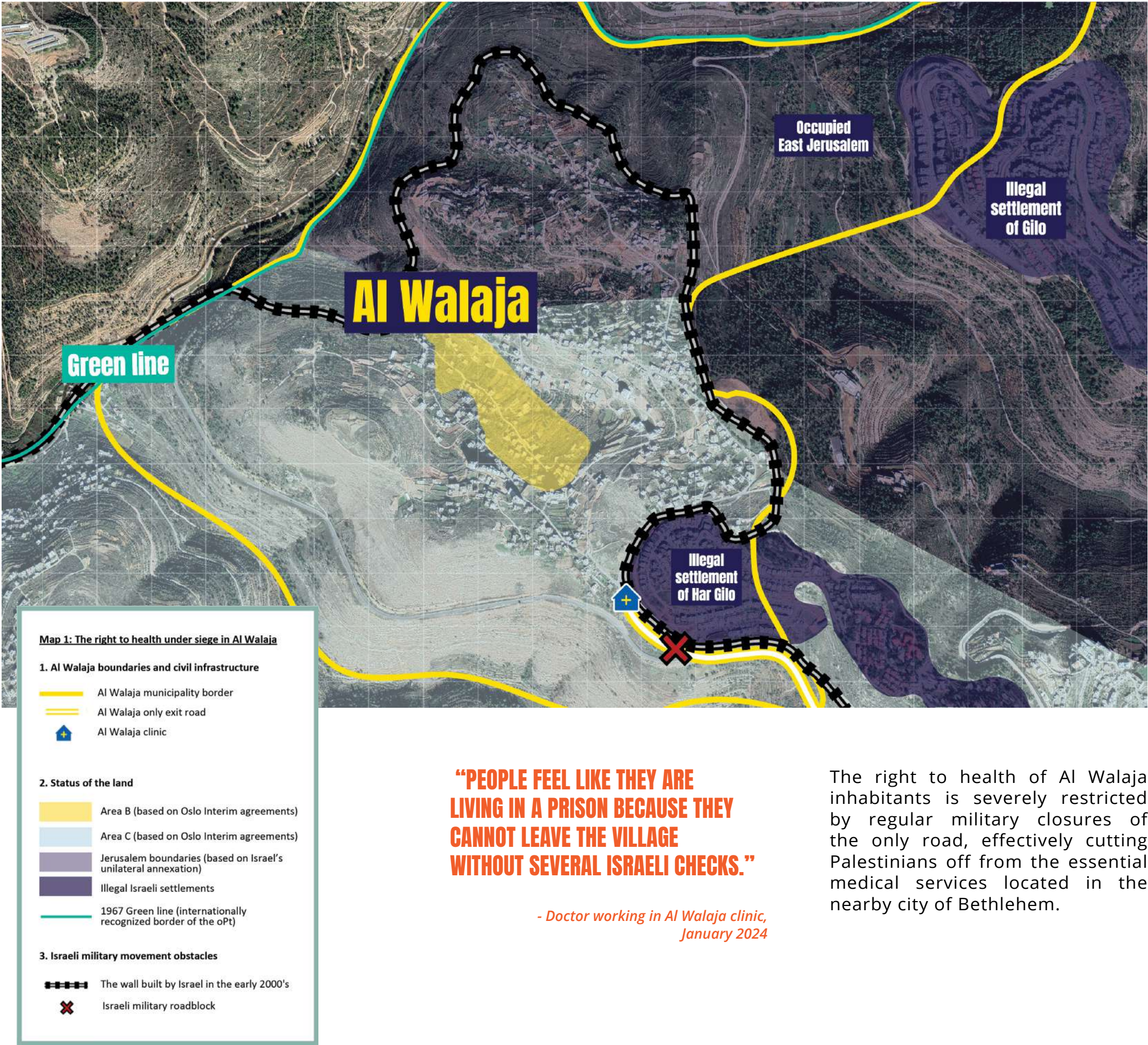
<sup>6</sup> Norwegian Refugee Council (NRC), [Area C is everything](https://www.nrc.no/area-c-is-everything), 11 September 2023.



Located in the southern periphery of Jerusalem, Al Walaja is surrounded by the wall on its east, north and west sides, effectively cutting it off from its immediate surroundings, including part of the village agricultural lands and the city of Jerusalem.

The establishment of the illegal Israeli settlements of Gilo and Har Gilo has led to additional land confiscations and further isolated the village. The only access point to the outside world for Al Walaja inhabitants is a road controlled by the Israeli army, which connects the village with the rest of the West Bank.

While this road has regularly been shut by Israeli forces in the past, the dramatic increase in Israeli-imposed movement restrictions after 7 October 2023 has particularly affected Al Walaja, as the Israeli army established a military roadblock on the only route to and from the village, effectively impeding the inhabitants’ access to basic services, including much needed healthcare.



**“PEOPLE FEEL LIKE THEY ARE  
LIVING IN A PRISON BECAUSE THEY  
CANNOT LEAVE THE VILLAGE  
WITHOUT SEVERAL ISRAELI CHECKS.”**

*- Doctor working in Al Walaja clinic,  
January 2024*

The right to health of Al Walaja inhabitants is severely restricted by regular military closures of the only road, effectively cutting Palestinians off from the essential medical services located in the nearby city of Bethlehem.



# ISRAELI OCCUPATION'S ACCESS RESTRICTIONS: THE RIGHT TO HEALTH UNDER SIEGE IN AL WALAJA

The Al Walaja clinic, established in 2017 as part of a USAID-funded project to improve access to healthcare, is the only source of health services easily accessible to the village's 3,500 inhabitants.

The clinic has been seriously hampered in its development by the Israeli authorities (see page 12) and can provide only primary health services. To access any other health service,

Al Walaja inhabitants have no choice but to try to cross the military roadblock on the only exit road from the village.

Before 7 October 2023, Al Walaja was already facing significant movement restrictions imposed by the Israeli army. According to inhabitants, military closures were denying entry and exit at least two or three times per month.

As almost all the village land has been designated as Area C, there are no emergency Palestinian public services in the little enclave: no police station, fire station, emergency unit or ambulance center. Palestinians living in Al Walaja know that in the event of a critical health emergency where their lives hang in the balance, life or death might depend on the decision of the Israeli soldiers to let them pass at the only exit point.

**“ONE WOMAN CAME TO THE CLINIC, SHE WAS CRYING AND SHOUTING:**

**‘I HAVEN’T BEEN ABLE TO FIND A DOCTOR FOR THE LAST TWO NIGHTS, MY CHILD WAS SICK, I HAD TO GO TO BETHLEHEM ON FOOT TO REACH THE HOSPITAL’.”**

*- DOCTOR WORKING IN AL WALAJA CLINIC,  
FEBRUARY 2024*

After 7 October 2023, the blockade of the village by a road gate and roadblocks regularly manned by Israeli forces has become the daily reality for Al Walaja inhabitants.

In October 2023, the only exit road was completely closed by Israeli forces for an entire month, effectively cutting Al Walaja off from nearby hospitals and other essential services.

When villagers could exit, they had to do so on foot as cars were prevented from crossing.

Many elderly people living in Al Walaja cannot walk long distances. Additionally, not all inhabitants have the financial means to afford taxi rides to destinations beyond the Israeli military roadblock.

As a humanitarian actor providing MHPSS emergency response and supporting the village clinic, MDM has also had its access to Al Walaja heavily constrained since 7 October.

**“WHEN THE GATE IS CLOSED, THE ONLY WAY FOR US TO REACH AL WALAJA IS TO LEAVE THE CAR, JUMP THE ISRAELI GATE AND ASK PEOPLE FROM THE VILLAGE TO COME AND PICK US UP ON THE OTHER SIDE. IF SOLDIERS ARE THERE, THEN NOBODY APPROACHES THE GATE.”**

*- MDM SWITZERLAND FIELD WORKER  
JANUARY 2024*

Access to the outside world is also impeded by the nearby settlers of Har Gilo. This illegal Israeli settlement has been built next to the only exit road, where settlers regularly harass and attack Palestinian commuters with stones. Health professionals report that the village finds itself paralyzed out of fear of the settlers who sometimes enter Al Walaja at night accompanied by soldiers, shouting, throwing tear gas and threatening the inhabitants.

As all the doctors working in the clinic reside outside the village, the health center had no doctor's visit for a month, **creating a prolonged health gap for the 3,500 inhabitants of the village.** A doctor employed by the Ministry of Health (MoH) has reported that, while he should visit Al Walaja weekly, he has only been able to attend the clinic twice since 7 October 2023 due to regular closures imposed by the Israeli forces.

Since November 2023, the only exit from the village has continued to face severe military restrictions, with the villagers reporting in January 2024 that the road was open only one day per week. Many inhabitants need regular medical checkups, laboratory tests and provision of adequate medicine. The restrictions on access to basic health services outside Al Walaja result in people having no choice but to resort to negative coping mechanisms involving delaying access to essential medical care (see page 15-16).

Moreover, this situation of confinement is taking a heavy toll on the mental health of the inhabitants. MDM field workers particularly emphasize the impact on children living in Al Walaja (see page 9-10).



**“The Al Walaja school is only until 5th grade: after that, students have to go to study in the secondary school in Beit Jala, on the other side of the military roadblock. Both children and parents worry about their future as they had to switch to fully online education after 7 October 2023.**

**Many families are not equipped with adequate technological tools, leading to a psychological and financial strain on parents who feel inadequate in what they can provide for their children, especially given the limited job opportunities and income.**

**Now, Al Walaja students have class three days a week remotely and two days in person because of the access issues.**

**Many kids have to cross on foot: imagine being 12 years old and being cut off from the school environment most of the time, and worrying about using a road manned by soldiers and surrounded by violent settlers the rest of the time. Children don’t have access to secure education.”**

*- Mdm SWITZERLAND FIELD SOCIAL WORKER  
APRIL 2024*

**Legend: The road leading to Al Walaja from Bethlehem. The Israeli wall runs down the Israeli illegal settlement of Har Gilo. The Israeli military roadblock is located right after the roundabout, next to the entrance of the illegal settlement (no image of the roadblock could be captured due to security reasons, as the entrance of Har Gilo is constantly manned with settler guards). (Médecins du Monde Switzerland, 2024)**





On the right side of the picture is Al Walaja clinic, with the Israeli wall and the Har Gilo illegal Israeli settlement on the other side of the road, equipped with cameras facing the health center. The Israeli military roadblock is just a few meters away. (Médecins du Monde Switzerland, 2024)

The psychosocial environment of Al Walaja inhabitants is shaped by these tough movement restrictions imposed by the military and their dire impacts on access to basic services, in particular healthcare. Al Walaja inhabitants report living in a state of siege and suffering daily due to the encirclement and isolation created by the Israeli wall and military roadblocks. This situation is compounded by the regular destruction of people's homes by the Israeli army or civil administration<sup>7</sup> as well as by settler attacks and harassment.

<sup>7</sup> The Israeli policy of home demolitions is particularly widespread in Al Walaja. See [Ahmad Al-Bazz, Al Walaja, A Palestinian Village Facing Demolitions, Norwegian Refugee Council \(NRC\), 20 December 2021.](#)

These elements actively contribute to the entrenchment of a coercive environment that can lead to forcible transfer<sup>8</sup>.

In 2023 alone, **12 persons were displaced from Al Walaja due to the policy of home demolitions<sup>9</sup>**. The displacement of Palestinians as a result of a diverse range of coercive environment factors is not systematically recorded, however.

**“I KNOW MANY PEOPLE FROM AL WALAJA WHO MOVED TO BETHLEHEM TO ESCAPE THIS SITUATION - THE SETTLEMENT, THE MILITARY ROADBLOCK, THE IMPOSSIBILITY OF BUILDING - AND TO BE CLOSE TO THE SERVICES.”**

**- DOCTOR WORKING IN AL WALAJA CLINIC, APRIL 2024**

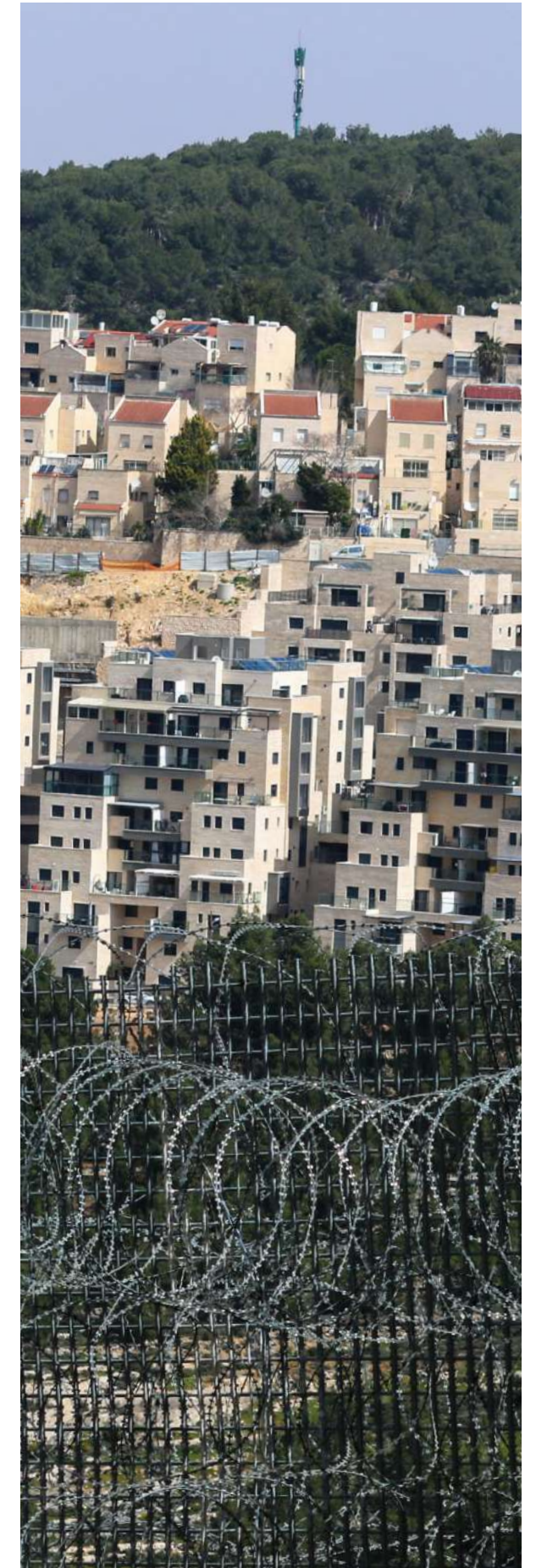
Therefore, the violations of the inhabitants' right to health due to restrictions on access imposed by the Israeli army is one factor among many leading to the progressive forcible transfer of Palestinians from Al Walaja.

<sup>8</sup> “Forcible transfer does not necessarily require the use of physical force by the authorities but may be triggered by specific circumstances that leave individuals or communities with no choice but to leave. The existence of such circumstances constitutes what is known as a coercive environment. Any transfer that occurs without the genuine and fully informed consent of those affected is considered forcible. However, genuine consent to a transfer cannot be presumed in an environment marked by the use or threat of physical force, coercion, fear of violence or duress.” [Report of the Secretary General, Human rights situation in the Occupied Palestinian Territory, including East Jerusalem, A/HRC/34/38, 13 April 2017, para 28.](#)

<sup>9</sup> [OCHA, Displacement update: about 4,000 Palestinians displaced in the West Bank in 2023, February 2024.](#)

## ISRAELI POLICIES AND PRACTICES HALTING THE DEVELOPMENT OF THE ONLY ACCESSIBLE HEALTH CENTER

Since the Al Walaja clinic was established in 2017, the construction of a second floor has been planned to expand the range of essential health services provided inside the village. The development of a second floor was intended to add more clinic units such as internal medicine, infection control, pediatric care and a laboratory. Construction started in 2020.



View of the Israeli illegal settlement of Gilo from inside Al Walaja, with the Israeli military wall in between. (Ahmad Al Bazz / NRC, 2021)



However, as soon as the building activities began, the Israeli army prevented its progress by confiscating the materials and equipment intended for the improvement of the clinic infrastructure.

Al Walaja health professionals reported that Israeli soldiers threatened the construction workers, telling them that they risked arrest or hefty fines if they continued their work. Shortly after, in 2020, the village council of Al Walaja received a stop work order for the second floor of the clinic from the Israeli authorities on the grounds of a lack of building permits.

Health professionals working in the Al Walaja clinic have reported several instances where Israeli soldiers have raided the clinic, threatening to close the health center if they found anyone working on the construction of the second floor.

The health center personnel underline the fact that the Israeli army has forbidden the removal of the construction materials from the roof.

As a result, the structure of the whole building is negatively impacted: part of the roof is leaking, damaging most of the wall surface and the electricity system. Health professionals report that even the necessary repairs to the damage caused by construction being halted are heavily monitored by the Israeli soldiers and settlers.



Al Walaja clinic, with construction materials still present on the second floor as Israeli authorities prevent their removal following the issuance of the military stop work order. (Médecins du Monde Switzerland, 2024)

Since its establishment, the Al Walaja clinic and its health professionals have been regularly harassed and threatened by Israeli soldiers and settlers. Built on the exit road from the village, the clinic is located near the Israeli forces' roadblock.

An extension of the Har Gilo settlement, established at the beginning of the 2010s, directly faces the clinic on the other side of the road. Shortly after the clinic was set up in 2017, sewage water from the settlement started to be dumped in the field right next to the health center, creating an environmental threat to the public health of the inhabitants.

Al Walaja health professionals reported that they "know for a fact that Israeli settlers are monitoring any development around the Palestinian clinic", as surveillance cameras were installed by the settlement in front of the health center.

They have reported many instances where settlers have called the Israeli army or police to intervene to hamper maintenance activities around the clinic.

**“ONE OF THE SETTLERS CALLED THE POLICE WHO CAME AND STARTED TO ASK WHAT WE WERE DOING. WE EXPLAINED THAT WE WERE JUST CLEANING AROUND, REMOVING WOOD AND RUBBISH, IN ORDER TO BE SURE THAT THE SURROUNDINGS OF THE CLINIC WERE SAFE.**

**THEY TOLD US THAT IT WAS FORBIDDEN FOR US TO REMOVE ANY-THING BECAUSE WE WERE DISTURBING THE SETTLERS.”**

*-MOH DOCTOR WORKING IN AL WALAJA CLINIC*

As the construction of the clinic's second floor is currently blocked by Israeli forces, health professionals serving in Al Walaja are urging improvement of the already existing first-floor infrastructure in order to increase the number of health services available to inhabitants.

Local medical professionals stress the urgent need for an easily accessible emergency room at the clinic in Al Walaja.

This is vital to ensure direct access to life-saving healthcare services for residents and to mitigate the risk of fatalities or medical complications in the event of military closures during health emergencies.

Given the number of people suffering from chronic diseases in the village, the Al Walaja clinic also desperately needs to be equipped with a laboratory. At least 28 inhabitants of Al Walaja are affected by hypertension, diabetes, thyroid or ischemic health diseases. Most of them require tests to be conducted every 3 to 6 months to tailor their medication and treatment appropriately.





The wall built by Israel in the early 2000s, separating Al Walaja village from its immediate surroundings. It has both concrete and barbed-wired portions, with a military road running around its perimeter for the movement of the Israeli army. (Ahmad Al-Bazz / NRC, 2021).

In January alone, 12 patients were referred for external lab consultations by the Al Walaja clinic and had to undertake the dangerous journey to Bethlehem to access this service. Many cannot complete their medical tests regularly, especially since the repeated closures imposed on the village since 7 October.

**Health professionals report that they sometimes have to prescribe medication based on tests done 7 or 8 months before.**

The Al Walaja health center is also left with no capacity for maternity and gynecological care, as this requires a dedicated room with the appropriate equipment, instruments and laboratory tests.

Therefore, pregnant women cannot receive their full medical checkups at the clinic and must cross the Israeli military roadblock to access essential care. This situation becomes seriously concerning towards the end of their pregnancy, as women are aware that any military closure of the exit road would endanger their swift transfer to Bethlehem hospitals when entering labor.

**“I KNOW WOMEN FROM AL WALAJA WHO LEFT THE VILLAGE TOWARDS THE END OF THEIR PREGNANCY AND STAYED WITH RELATIVES IN BETHLEHEM UNTIL THEY GAVE BIRTH, JUST TO ENSURE THAT THEY WOULDN’T FACE ANY MILITARY CLOSURE ON THE DAY OF DELIVERY.”**

*- NURSE WORKING AT AL WALAJA CLINIC,  
APRIL 2024*

The clinic also needs to increase its pharmacy capacity and repair the damage to the electricity system caused by the Israeli forces halting construction. As electricity is cut off regularly, health professionals cannot store medicines for long in the health center’s fridge.

Immunization services can be provided only one day per month as it is not possible to keep the vaccines for a long time in the center. Furthermore, medicines must be temporarily stored in consultation rooms due to a lack of space.

As there are several cases of psychiatric illnesses in Al Walaja, doctors also highlight the need for a psychiatric unit inside the clinic. Psychiatric medications are controlled substances that must be securely stored in a safe space, which Al Walaja clinic is not equipped with.

As a result, health professionals can provide only psychiatric medication that is not subject to the authorities’ oversight, meeting the needs of only four of their psychiatric patients, while the others have to attempt the crossing to Bethlehem to access their medication.

Healthcare professionals in Al Walaja have observed that many patients manage to reach Bethlehem only once every four or five months to get their medicine, while the medication supplied is intended to last for just one month. The rest of the time, psychiatric patients refrain from taking any medication, as noted by healthcare professionals in Al Walaja.

They stress that the military blockade, combined with the steep cost of psychiatric drugs, encourages patients to resort to these negative coping mechanisms.



# CONCLUSIONS AND RECOMMENDATIONS

The case of Al Walaja highlights a growing issue of public health disruption in the West Bank. Access to essential healthcare services for the aging population of the village has long been impeded by the Israeli policies that preclude Palestinian development in Area C and restrict movement. However, since 7 October 2023, the village has faced systematic closure by Israeli soldiers that disrupts the provision of healthcare to its 3,500 inhabitants.

Al Walaja is one of many communities which have been disconnected from cities, villages and main roads by the intensified closure of the West Bank by Israeli authorities since 7 October 2023.

The restrictions on access to basic services are yet another driver of forcible transfer, coercing Palestinians in need of medical care to leave their communities for urban centers where much needed healthcare services are available<sup>10</sup>.

<sup>10</sup> Médecins Sans Frontières (MSF), The unbearable life, The health impacts of the Israeli measures to forcibly evict the residents of Masafer Yatta, March 2023: [the-unbearable-life-the-health-impacts-of-the-israeli-measures-to-forcibly-evict-the-residents-of-masafer-yatta.pdf](#).

As the Israeli-imposed coercive environment has intensified and disrupted access to essential services for many Palestinian communities, especially in Area C, there is an urgent need on the one hand to pressure the Israeli authorities to lift all the coercive measures and restrictions inflicted on the Palestinian communities in the West Bank.

On the other hand, the extensive closure of the West Bank by Israeli authorities since 7 October 2023 and its dire impact on Palestinian communities must lead the Palestinian Ministry of Health to prioritize the local development of essential services, in particular healthcare, within the communities affected by Israeli restrictions on access and/or the discriminatory urban planning regime imposed in Area C.

**“IF THEY CLOSE THE ENTRANCE IN SUCH A WAY, WE HAVE TO BE ABLE TO MANAGE HEALTHCARE FROM INSIDE.”**

- NURSE FROM AL WALAJA

## THIRD STATES MUST URGENTLY DO ALL THEY CAN TO PRESSURE ISRAEL TO ABIDE BY ITS OBLIGATIONS UNDER IHL AS AN OCCUPYING POWER AND TO:

- **Lift all restrictions on access to Al Walaja village and other villages in Area C**, in particular the additional restrictions that have been in place since October 2023.
- **Immediately prevent and cease all settlement construction and expansion** as well as the unlawful transfer of its population to the occupied territory, in accordance with its obligations under Article 49 of the Fourth Geneva Convention.
- **Immediately halt the forcible transfer of Palestinians** from their lands due to the imposition of intolerable living conditions (home demolitions, deprivation of basic services, movement restrictions, etc.).
- **Immediately cease its unlawful policies of demolition and forbidding the construction of basic services infrastructure**, in particular schools and health facilities.
- **Transfer planning authority over the occupied territory to the local Palestinian population**, allowing them to develop master and local plans for the entire West Bank, including East Jerusalem.
- **Immediately lift all coercive measures and restrictions imposed on Palestinian freedom of movement** throughout the Occupied West Bank, particularly its military infrastructure designed to restrict access and including checkpoints, military gates and roadblocks, as these systematically disrupt the access of the Palestinian population to livelihoods, water, land, roads and essential services, including healthcare, and prevent safe and unimpeded humanitarian access.
- **Dismantle the parts of the illegal wall** built by the Israeli authorities in the early 2000s that are located inside the oPt, in accordance with the ICJ Advisory Opinion conclusions, in order to restore the Palestinians' right to free movement.



## **THE PALESTINIAN AUTHORITY MUST ADDRESS THE NEED FOR IMMEDIATE SUPPORT TO PALESTINIAN COMMUNITIES AFFECTED BY THE INCREASING DEPRIVATION OF PUBLIC SERVICES BY:**

- **Urgently ensuring the space currently available in the Al Walaja clinic is renovated** and providing the necessary financial and logistical resources to expand the range of health services available inside the village, in close coordination with Al Walaja health professionals and inhabitants.
- **Revising and adapting policies that potentially place a constraint on these communities whose access to healthcare is impeded by Israeli military closures**, such as increasing the options to prescribe and deliver medicines for 6 months or more to prevent shortages and disruption of treatment.
- Devising and implementing a **comprehensive plan that supports Palestinian living conditions in Area C**, facilitating the development of essential services inside these communities whose access to education, healthcare, water and energy is heavily impacted by the Israeli movement restriction policies and by the discriminatory urban planning regime.

## **DONOR COUNTRIES**

- **Need to ensure that their financial donations**, funded facilities and programs are not deliberately destroyed, damaged or prevented from being used.
- Need to engage in diplomacy to protect humanitarian access to Palestinian communities in need.

## **INTERNATIONAL NON-GOVERNMENTAL ORGANIZATIONS**

must prioritize support and documentation for communities whose access to essential services, including healthcare, is seriously affected by the coercive environment imposed by the Israeli military occupation.



