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HIGHLIGHTS

- The oPt Humanitarian Fund launched an \$8.3 million allocation for the implementation of some critical but unfunded HRP projects, the majority in the Gaza Strip.
- Less than 60 per cent of applications for exit permit by patients seeking treatment outside Gaza were approved by the Israeli authorities in the first half of 2018.
- The continuous opening of the Egyptian-controlled Rafah crossing has been impaired by factors, including the reduced number of passengers allowed through and the obscure criteria used for selecting travelers.
- OCHA recorded 705 permanent checkpoints and roadblocks restricting or controlling Palestinian vehicular or pedestrian, movement across the West Bank.

OVERVIEW

Participants in the 27 September meeting of the Ad Hoc Liaison Committee (AHLC), the minister-level gathering of oPt donors, in New York, were unanimous regarding the disastrous humanitarian situation in the Gaza Strip. Among other remarks, The World Bank warned that the Gaza economy “is in free fall registering minus 6 percent growth in the first quarter of 2018, and an unemployment rate of 53 percent (over 70 percent for youth) ... Given that every second person in Gaza lived below the poverty line before these latest developments, the deterioration is alarming.”¹

The deterioration during 2017 and 2018 has been driven, according to the World Bank, by a sharp decline in the transfers of money to Gaza, the territory’s almost exclusive source of income following the depletion of the productive sector as a result of over a decade of blockade, imposed by Israel citing security concerns. The decline in ‘transfers’ included, primarily, a reduction of the Palestinian Authority’s budget allocated to Gaza, in the context of the internal divide; a limited disbursement of international donor pledges for reconstruction; a cut in development aid by the United States government; and a decline in the funding of humanitarian assistance.

The first of this Humanitarian Bulletin’s articles provides an overview of humanitarian funding so far in 2018, which, indeed, is at an all-time low and one of the worst funded operations globally, with only 29 per cent of the \$539.7 million appealed for in 2018 raised by end September, compared to 47 and 50 per cent by the end of 2017 and 2016 respectively. While the funding gaps are mainly driven by the decline in contributions for UNRWA, whose projects constitute over half of the 2018 Humanitarian Response Plan (HRP), nearly all agencies are more poorly-funded than in previous years. To meet immediate humanitarian needs, on 22 September, the Humanitarian Coordinator (HC) for the oPt launched an \$8.3 million allocation by the oPt Humanitarian Fund, to allow the implementation of some critical HRP projects.² On a positive note, on 27 September, UNRWA received multiple additional pledges from various member states for a total of \$122 million, which, once disbursed, will reduce the Agency’s deficit for 2018 in all of its areas of operation in the Middle East to \$64 million.

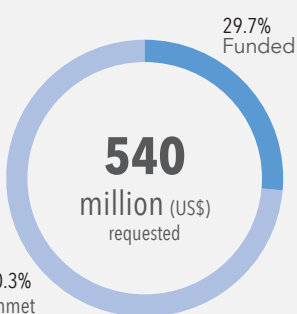
SEPTEMBER FIGURES

Palestinians killed (direct conflict)	26
Palestinians injured (direct conflict)	1,428
Israelis killed (direct conflict)	1
Israelis injured (direct conflict)	5
Structures demolished in the West Bank	29
People displaced in the West Bank	51

HUMANITARIAN RESPONSE PLAN 2018

540 million (US\$)
Requested

29.7% funded



An important dimension of the hardship experienced by Gaza's residents, addressed in another of this Bulletin's articles, is their isolation from the rest of the oPt and the external world. Only a tiny portion of residents are eligible for exit permits to leave the enclave via the Israeli-controlled Erez crossing, including patients referred for medical treatment unavailable in Gaza. In the first half of 2018, less than 60 per cent of permit applications by patients were approved, with the majority of those denied or delayed being given no specific reasons. On the other hand, the Egyptian-controlled Rafah crossing has been almost continuously open since May 2018, partially restoring a potential gateway for the broader population. However, this development has been impaired by the reduced number of passengers allowed through every day (about 350), the obscure criteria used for selecting passengers, the long waiting times at the crossing, and the multiple security checks and difficulties incurred by passengers on the road to Cairo and back to Gaza.

As highlighted in previous Bulletins, the massive rise in casualties in the context of the 'Great March of Return' demonstration has overwhelmed Gaza's already fragile health sector and generated additional needs. During September, in the context of growing hardship and hopelessness, the scope of demonstrations increased and are now taking place almost daily, including night gatherings near the fence, attempts to break the naval blockade, and demonstrations near the Erez passenger crossing. Along with more frequent throwing of explosive devices at Israeli forces and attempts to breach the fence by some demonstrators, these developments have resulted in the killing of 23 Palestinians, including 8 children, and the injury of another 1,240 during the month. Following the killing of seven demonstrators, including two children on 28 September, the HC called on "Israel, Hamas and all other actors with the ability to influence the situation, to take action now to prevent further deterioration and loss of life."

To alleviate the humanitarian catastrophe unfolding in Gaza, at the AHLC, the UN presented a package of urgent infrastructure projects to improve the provision of water, electricity and health, while generating income and employment in a manner that would have quick impact on the ground within a 6-12-month time-frame. While all these projects are planned and agreed, they are awaiting the necessary funding to be implemented, and in any case would not replace immediate humanitarian aid urgently needed.

Only a tiny portion of Palestinian residents of Gaza are eligible for exit permits to leave via the Israeli-controlled Erez crossing



CRITICAL FUNDING SHORTFALLS AS HUMANITARIAN SITUATION IN THE GAZA STRIP DETERIORATES

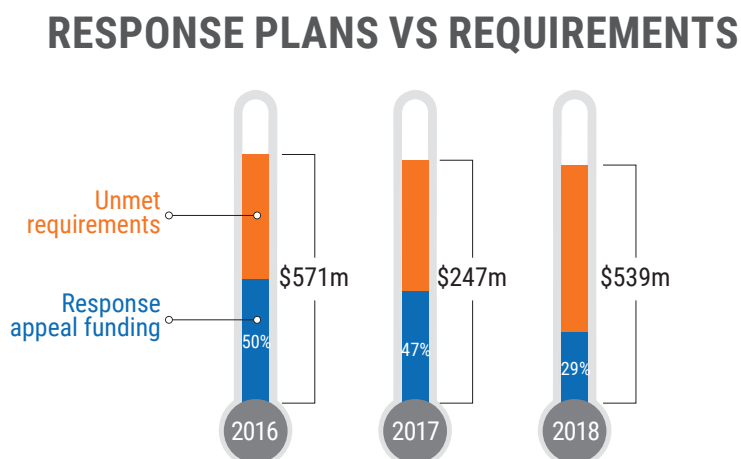
Funding for humanitarian activities in the occupied Palestinian territory (oPt) is at an all-time low. At the end of September, only \$159 million had been secured of a requested \$539.7 million for the 2018 Humanitarian Response Plan (HRP), the multi-agency strategy and funding appeal for the humanitarian community in the oPt. Funding for the oPt HRP is at only 30 per cent, significantly lower than the current global average of 42 per cent.

Funding gaps are primarily the result of the decline in contributions for UNRWA, whose projects constitute 53 per cent of the overall requirements for the 2018 HRP. This follows the decision by the United States, the Agency's largest donor, to substantially reduce financial support, forcing UNRWA to discontinue or scale back its activities in Gaza and the West Bank (see below). The US has substantially reduced all its funding to the oPt, including deciding not to disburse more than \$200 million from USAID's approved budget for the 2017 fiscal year in the West Bank and Gaza, a further \$25 million for the East Jerusalem hospital network, and, most recently, \$10 million for Israeli and Palestinian co-existence groups.³

In parallel to the unprecedented financial crisis faced by UNRWA, nearly all agencies requesting through the HRP have received less funding in 2018 than in previous years. This leaves humanitarian partners ill-positioned to meet emerging needs or respond to the deterioration of the humanitarian situation in Gaza, where the enormous rise in casualties from the 'Great March of Return' demonstration has placed additional strain on Gaza's overburdened health system.

To respond to this recent crisis, humanitarian agencies have appealed for \$43.8 million through the end of 2018 for emergency interventions, particularly for trauma management and emergency healthcare. At the end of September, approximately 52 per cent of this request had been provided, leaving a gap of \$21.1 million.⁴

Nearly all agencies requesting through the HRP have received less funding in 2018 than in previous years



The oPt Humanitarian Fund

In the context of poor HRP funding, the oPt Humanitarian Fund (HF)⁵ has become even more vital as a tool to meet urgent needs, as well as an important resource for NGO partners. The oPt HF is an emergency pooled fund supported by some of the major donors to the oPt and managed by UN OCHA on behalf of the Humanitarian Coordinator.⁶ It is designed to allocate funds quickly for unexpected emergencies or unforeseen events, in addition to delivering strategic responses which have been included in the HRP but remain unfunded. The HF is unable to compensate for the huge shortfall in the HRP but has succeeded in alleviating some of the more critical humanitarian needs.

On 17 September, the Humanitarian Coordinator, Jamie McGoldrick, announced the release of one million dollars from the HF for the UN-assisted Emergency Fuel Programme.⁷ Since 2013, the UN has coordinated the delivery of emergency fuel to run back-up generators to some 250 critical health, water and sanitation facilities in Gaza. This ensures a minimal level of lifesaving health, water and sanitation services despite the chronic electricity deficit. Targeted facilities include surgery and emergency care units, sewage pumping stations and water extraction wells. Funds donated for emergency fuel in 2018 are exhausted, with the UN delivering its final stocks on 5 September, and at least \$2 million in additional support is needed to cover the operation of skeleton services through the end of 2018.

The Humanitarian Coordinator released one million dollars from the HF for emergency fuel for some 250 critical health, water and sanitation facilities in Gaza

This latest allocation brings the total amount of oPt HF support to Gaza in 2018 to \$10.5 million.⁸ The HF still has a balance of \$10.3 million. Given the deteriorating conditions in the oPt, particularly in Gaza, and the shortfall in funding, on 22 September the Humanitarian Coordinator launched an additional 8.3\$ million as part of the standard allocation. This included \$6.3 million for health, food security and WASH HRP projects in Gaza, and \$2 million for food security and livelihood, shelter, child protection and education HRP projects in the West Bank. The remaining \$2 million will be kept in reserve for unforeseen emergencies.

UNRWA funding crisis

The decline in funding this year for UNRWA, the single largest humanitarian actor in the oPt, accounts for a significant proportion of the overall drop in humanitarian funding for the oPt in 2018. UNRWA's funding is almost entirely dependent on voluntary contributions from UN member states, especially for its Programme Budget which covers most of the salaries and activities for core services such as education, health, camp improvement and social services across its five fields of operation.⁹ Donor funding is also essential for its Emergency Appeals, most of which are part of the HRP and address the needs of those impacted by ongoing crises, including in the West Bank and Gaza.

The Agency began 2018 with a Programme Budget shortfall of \$146 million for all its areas of operation in the Middle East following a decision by the US in mid-January to withhold \$300 million of an expected contribution of over \$360 million. This decision precipitated the most serious financial crisis in UNRWA's history and threatens the Agency's operations. Gaza, where UNRWA operates 375 schools and employs 13,000 local employees, was hit particularly badly by the cuts to the Agency's core budget. In addition, the US, which provided \$90 million in 2017 for emergency activities in the OPT, has not made any commitment for the Emergency Appeals in 2018.

The US announcement left the Agency with an end-of-year cash shortfall of \$446 million in all of its five areas of operation in the Middle East. More than 20 UNRWA donors advanced their contributions for 2018 to ease cash flow during the first months of 2018. As a result of additional and intensive resource mobilization efforts during the first half of the year, including an allocation and loan of some \$30 million by the UN Central Emergency Response Fund (CERF), the Agency was able to reduce the funding gap up to the end of the year to \$217 million. Despite this remarkable achievement, the remaining shortfall has forced UNRWA to discontinue a number of activities in the West Bank, including cash for work, community mental health and mobile health clinic programmes, and to adjust key interventions in Gaza, including food and cash assistance to over one million refugees. Most significantly, UNRWA was able to reopen its schools in Gaza and the West Bank at the end of August.

In a ministerial meeting in New York on 27 September, UNRWA succeeded in raising an additional \$122 million to reduce its overall deficit to \$64 million. In a press statement following the meeting, UNRWA indicated that: "UN Member States reaffirmed the fundamental rights of Palestine refugees under international law and obligations of the international community. Participants expressed strong political support for UNRWA, its mandate and staff, and its critical services to Palestine refugees. Additionally, they applauded UNRWA for its remarkable achievements, especially this last year, in funding diversification and improved efficiency of its programming."

The shortfall has forced UNRWA to discontinue a number of activities in the West Bank and to adjust key interventions in Gaza



RECENT TRENDS IN PALESTINIAN ACCESS FROM GAZA: EREZ AND RAFAH CROSSINGS

Palestinians in Gaza who wish to exit the enclave can only do so through the Israeli-controlled Erez crossing or the Rafah crossing, which is controlled by Egypt. The Erez crossing is vitally important as it controls the movement of people between Gaza and the West Bank via Israel. Since the early 1990s, Palestinian residents of Gaza have required an exit permit to leave through Erez. Under a policy implemented since the beginning of the second Intifada in September 2000 - and tightened after June 2007, citing security concerns, following the takeover of Gaza by Hamas - only people belonging to specific Israeli-defined categories are eligible for an exit permit, subject to a security check.

The vast majority are not eligible to apply for an exit permit. In recent years, those eligible have included patients referred for medical treatment outside Gaza and their companions; traders; staff of international organizations; and exceptional humanitarian cases. This policy has exacerbated the isolation of Gaza from the remainder of the oPt and the outside world, further limiting access to medical treatment unavailable in Gaza, to higher education, to family and social life, and to employment and economic opportunities. The realization of a range of human rights is thus impeded.

The average number of Palestinians allowed to exit Gaza through Erez per month so far in 2018 (January-August) has risen compared with 2017 (9,376 versus 6,900) but is still below the monthly average for 2016 (13,187) and 2015 (15,027). Prior to the start of the second Intifada in 2000, there were over half a million exits per month from Gaza, primarily for work in Israel; this was totally halted in 2006. Since 19 August, citing continued violent incidents at the perimeter fence, Israel has intermittently imposed additional restrictions on the movement of Palestinians at Erez crossing.

Due to longstanding restrictions associated with the blockade at Erez crossing, Rafah crossing became the primary exit point to the outside world. Political uncertainty and military operations in northern Sinai led Egypt to impose severe restrictions on the crossing from October 2014 through to mid-May 2018. Since then, there has been a significant improvement and Rafah crossing has been open almost continuously.

Gaza patients continue to face barriers to access through Erez

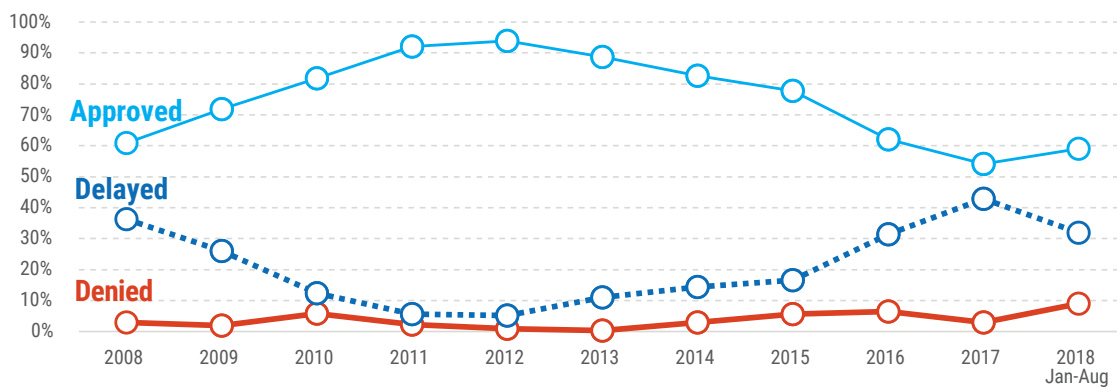
On 26 August 2018, the Israeli Supreme Court unanimously accepted a petition from Israeli and Palestinian human rights organizations, submitted on behalf of seven patients needing to use Erez crossing through Israel to access healthcare unavailable in Gaza. The court ruled that the decision by the Israeli Security Cabinet in 2017 to deny Gaza patients access to medical treatment as a means of leverage over Hamas, and solely on the basis of the patients' relationships to Hamas members, was ineffective, counters the values of the State of Israel and is illegal.¹⁰

Only Palestinians in Gaza belonging to specific Israeli-defined categories are eligible for an exit permit, subject to a security check



*This article was contributed by
World Health Organization*

ISRAELI RESPONSES TO GAZA PATIENT PERMIT APPLICATIONS



The seven patients were all women who had applied for permits to access healthcare in East Jerusalem. Four of the women needed treatment for cancer, specifically for radiotherapy and chemotherapy not available in Gaza. The other three patients had applied for access to complex neurosurgical treatment with surgical expertise and equipment unavailable in Gaza hospitals.

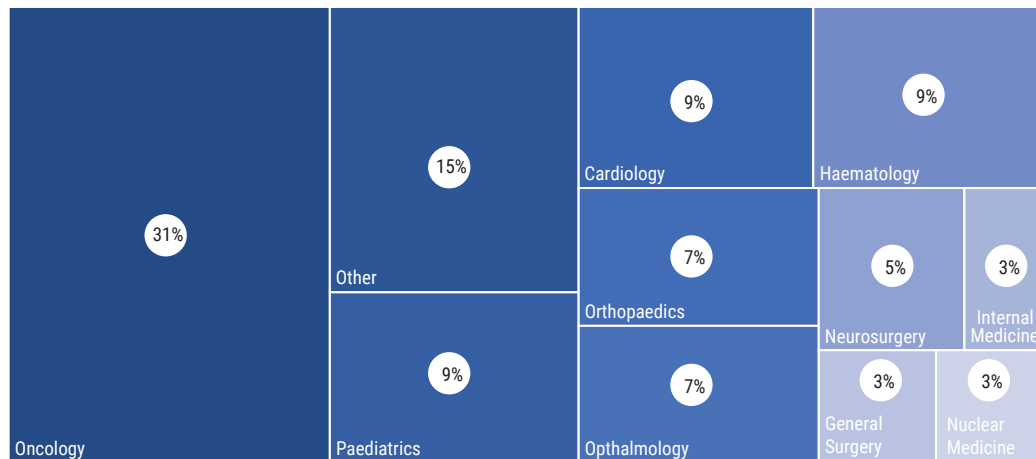
Patients needing medical treatment, surgical procedures or diagnostic procedures outside Gaza have faced significant barriers to accessing healthcare since Israel introduced its patient permit system in 2004. Since 2012 the approval rate for patient permit applications has fallen significantly from 93 per cent in 2012 to 54 per cent in 2017 (see Chart 1). In the first half of 2018, the approval rate improved slightly and 59 per cent of applications were approved. One in 10 applications (nine per cent) were denied and almost a third (32 per cent) were delayed, with patients receiving no definitive response to their applications by the date of their scheduled hospital appointment.

The majority of patient referrals from Gaza are to hospitals in the West Bank, principally to the major referral centres in East Jerusalem that provide specialized health services unavailable elsewhere in the oPt. These include Augusta Victoria Hospital, the main cancer referral centre, and Makassed Hospital, a major destination for surgical and paediatric referrals. In addition to access barriers, recent reductions in funding to the East Jerusalem hospital network risk the sustainability of critical specialist health services for Palestinian patients. Cancer is the single largest reason for referral, accounting for nearly a third (31 per cent), with paediatrics (health treatment for children), haematology (blood disorders) and cardiology each representing a further nine per cent of all referrals.

Men generally face more restrictions than women, with men aged 18 to 60 experiencing the lowest approval rates. The highest approval rate by gender and age is for women aged over 60 at 79 per cent in 2017. Men aged 18 to 40 had the lowest approval rate of only 30 per cent of applications in 2017.

The majority of patient referrals from Gaza are principally to the major referral centres in East Jerusalem that provide specialized health services unavailable elsewhere in the oPt

DISTRIBUTION OF REFERRALS BY SPECIALITY



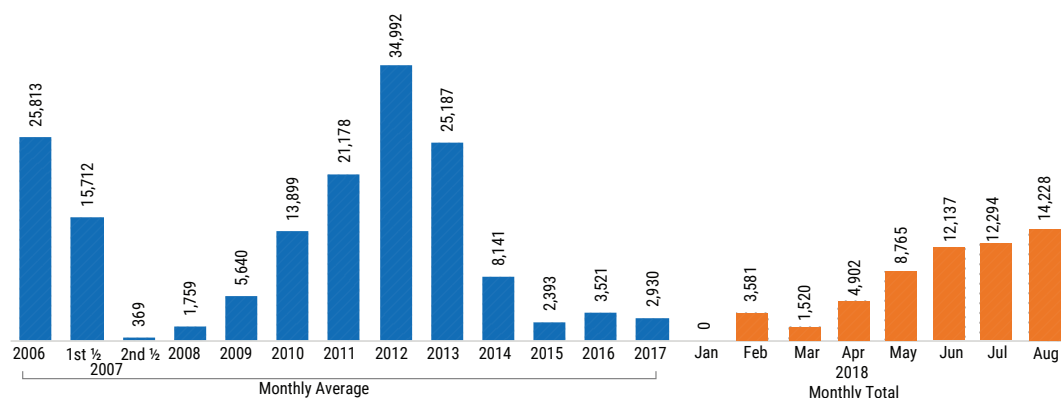
Patients who require permits to access health treatment outside Gaza must navigate an opaque and often unpredictable application process. The majority of patients who are denied permits or delayed access to treatment and diagnosis are given no specific reason for their refusal. Patients requiring longer courses of treatment can be separated from their friends and family for months, with the costs of travel to access care an additional burden on families. Patients and their companions are called for security interrogation as a prerequisite to the Israeli authorities processing their permit applications. In the first half of 2018, 111 patients (78 male; 33 female) and 35 companions (27 male; 8 female) were summoned for security interrogation.

The Egyptian-controlled Rafah crossing has been open continuously since May 2018, the longest period of continuous opening since September 2014

Rafah: an unpredictable gateway

The Egyptian-controlled Rafah crossing, the only crossing for passengers between the Gaza Strip and Egypt, has been open continuously since May 2018, except for holidays and special occasions. This is the longest period of continuous opening since September 2014 when the crossing was closed. Prior to May 2018, the crossing opened for only a few days a year, reportedly due to concerns about security in the Sinai. Despite the improved access since May 2018, over 23,000 people are still registered on a waiting list (that numbered approximately 30,000 previously) according to the Ministry of Interior (MoI) in Gaza.

RAFAH: CROSSINGS IN BOTH DIRECTIONS



CASE STUDY: "I JUST WANTED TO BE RID OF THE PAIN"

Hanan is 42 and lives in Deir-al-Balah refugee camp. She is a mother of seven children and was diagnosed with a pituitary tumour in November 2017 after suffering from headaches and blurred vision. Her doctors in Gaza referred her for neurosurgery outside Gaza because of the lack of adequate equipment and skills to perform this kind of specialized surgery locally.



"I applied for a permit to go to Makassed Hospital in East Jerusalem six or seven times but I was denied each time and lost my appointments. I was getting worse during this time and I couldn't function properly or take care of my children. The last denial came a few days before the Eid feast and I cried because I just wanted to be rid of the pain and the torture. We appealed through al-Mezan Center for Human Rights and they took the case to the Israeli High Court. I can't describe how I felt when I learned that the petition had succeeded."

When Hanan reached Makassed Hospital, the doctors discovered that the surgery would be more complicated than expected because the tumour had grown:

"My doctor said there was a high risk that the surgery might damage my vision, but I had no other choice but to go ahead. I was alone at Makassed Hospital for eight days, although people in the same room as me helped me when I needed to eat or drink. I stayed a total of 10 days there and in the last two days my sister-in-law finally received a permit to come and help me."

Hanan is now back in Gaza recovering from her operation but has not yet seen any marked improvement in her condition.

"I lost the vision completely in my right eye and I can hardly see with my left eye. It's hard for me to recognize people at the moment, but my children are helping me a lot."

The procedures regulating the exit of people via Rafah are confusing and obscure

Registration lists

The procedures regulating the exit of people via Rafah are confusing and obscure. According to an official in the Palestinian Authority Border and Crossings Authority, there are two lists for permitted travelers: the first issued by the Hamas-affiliated MoI as part of the electronic pre-registration process, and the other a list coordinated by the Egyptian authorities. This has raised allegations of the payment of bribes in Gaza and in Egypt to ensure travel and a faster response. This would seem to be the case since May 2018 as some people who have been registered for up to eight months have not yet been approved to travel while others who registered only one month before have already travelled.

During the sporadic openings of the Rafah crossing prior to May 2018, an average of some 650 people per day were allowed to exit, but in recent months the daily average has fallen to 343.

Travelling pathway

According to the Palestinian Border and Crossings Authority, once passengers traveling from Gaza to Egypt finish all the procedures on the Palestinian side of the crossing, they move to the Egyptian side where lists of names are sent to the Egyptian authorities for approval. The approval response takes between one to eight hours. Some passengers do not receive an answer and have to keep waiting or return to Gaza. The waiting period for these procedures applies to all passengers, even patients.

The buses arrive outside the Egyptian side of the terminal, where passengers need to wait for up to three hours for security checks. Under normal conditions the journey to Cairo should take 5-7 hours (around 450 km) but it currently takes over 12 hours due to the many checkpoints deployed on the road to the ferry in Port Said, which links the east and west banks of Egypt. The night curfew imposed by the Egyptian authorities in Sinai prolongs the journey and frequently forces people to spend the night at the Rafah crossing.

The return

At the ferry checkpoint to cross the Suez canal, a long line of vehicles waits but the ferry only moves when it is full. Even when the ferry is full, people may have to wait for security reasons. To get on the ferry, a reservation should be made for a vehicle but some drivers reportedly pay bribes to secure a place in the front line. On the ferry, passengers undergo a very strict search process that lasts several hours.

After crossing to the canal, the passengers need to cross through several checkpoints. At each checkpoint, the luggage is carefully searched. When travellers returning to Gaza arrive at the Egyptian side of the Rafah crossing, the same checks are resumed.

Under normal conditions the journey to Cairo should take 5-7 hours (around 450 km) but it currently takes over 12 hours due to the many checkpoints

A FOUR-DAY JOURNEY FROM CAIRO TO GAZA

Forty-three-year-old Rana from Rafah travelled to Amman to visit her family whom she had not seen for five years. She spent two months in Amman and returned to the Gaza Strip on 6 September via Rafah crossing.

“The way back was extremely exhausting and involved sleep deprivation and hunger. I was travelling for four days; I slept one night at the ferry and one night in the Egyptian hall at Rafah. The ferry is unsuitable for sleeping; you cannot even find a bathroom and you are constantly mistreated by the Egyptian officers. We were stopped at dozens of checkpoints on the way back and at every one, our luggage was unpacked and searched.

“When we arrived at Rafah, the crossing hall was closed. We begged the Egyptian officers to open so we could sit and go to the bathroom. They only allowed us in after four hours. The hall was full of rubbish. We slept on the ground and on the very hard chairs. Everything is expensive at the crossing but I was lucky that I was not stuck in Egypt as that would have been much more expensive. Overall, we spent 21 hours at the crossing.”

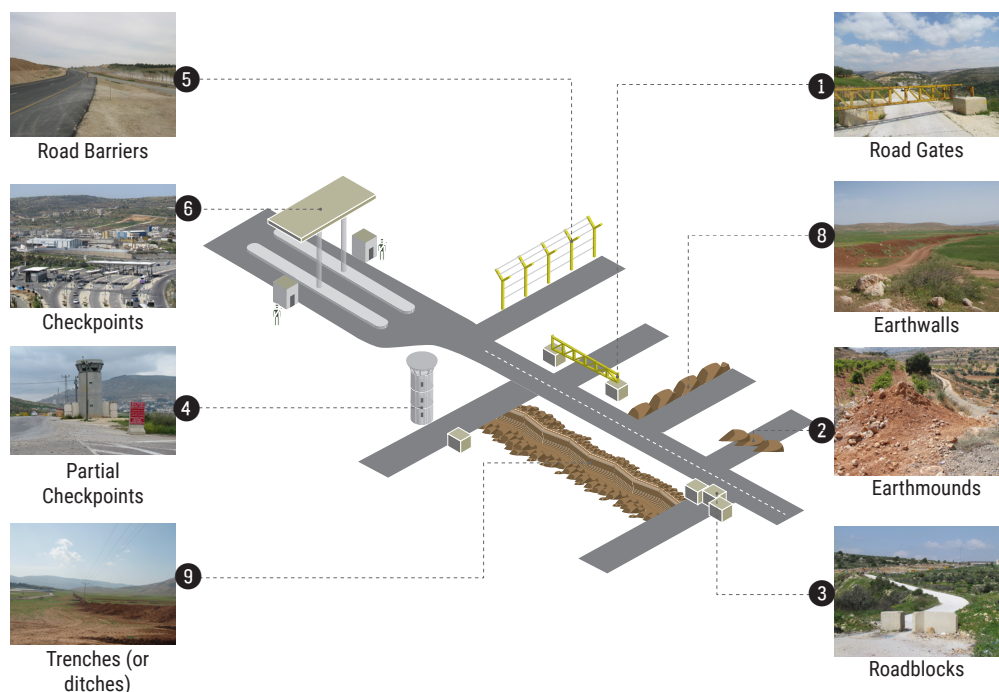
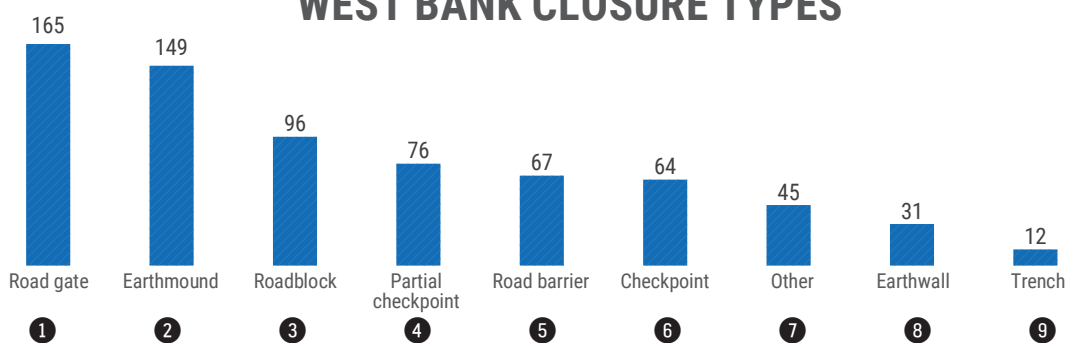
OVER 700 ROAD OBSTACLES CONTROL PALESTINIAN MOVEMENT WITHIN THE WEST BANK

In July 2018, OCHA completed a comprehensive ‘closure survey’ that recorded 705 permanent obstacles across the West Bank restricting or controlling Palestinian vehicular, and in some cases pedestrian, movement. This figure is three per cent higher than in December 2016, the date of the previous survey. These obstacles are deployed by Israeli forces citing security concerns. The deployment of obstacles has become more flexible and, combined with the relatively low level of violence since the completion of the previous survey, has a less disruptive impact on the daily life of Palestinians travelling between Palestinian localities (excluding East Jerusalem and the H2 area of Hebron city) than previously.

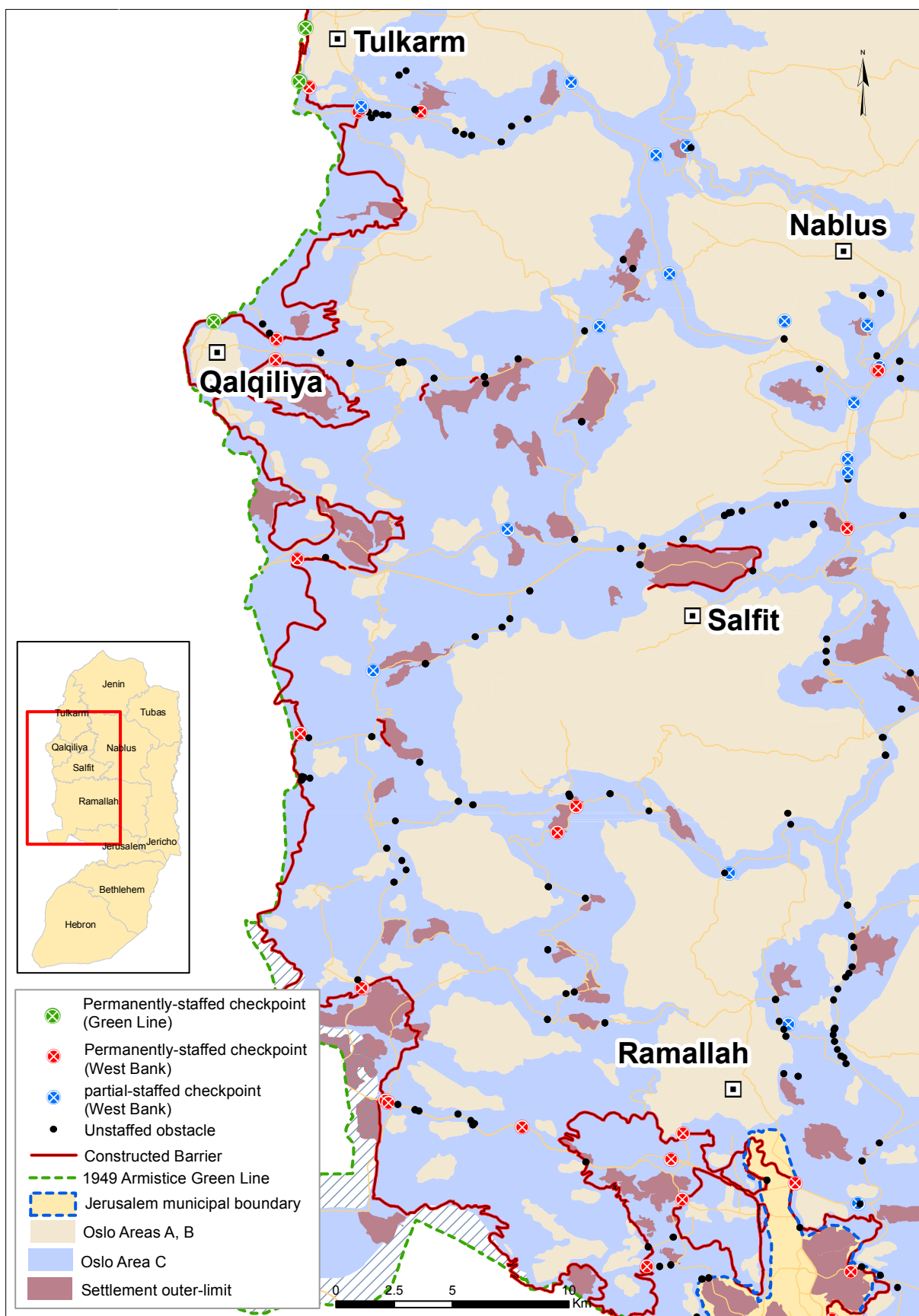
Obstacles include 140 fully or occasionally-staffed checkpoints, 165 unstaffed road gates (of which nearly half are normally closed), 149 earth mounds and 251 other unstaffed obstacles (roadblocks, trenches, earth walls, etc). The most significant difference observed since the last survey in terms of the category of obstacle are the addition of 36 road gates and the removal of 31 earth mounds. The largest net increase was recorded in Ramallah governorate with a total of 15 additional obstacles.

705 permanent obstacles across the West Bank restrict or control Palestinian vehicular or pedestrian movement

WEST BANK CLOSURE TYPES



WEST BANK OBSTACLES CENTRAL-NORTHERN AREAS



All the 140 checkpoints include permanent infrastructure but only 64 of them are permanently staffed with security forces, including 32 located along the Barrier or on roads leading to Israel, 20 in the Israeli-controlled area of Hebron city (H2), and the other 12 elsewhere in the West Bank. The other 76 (partial) checkpoints are either occasionally staffed or have security personnel located in a tower rather than on the ground. Excluded from these figures are eight checkpoints located on the Green (1949 Armistice) Line.

Between January 2017 and the end of July 2018, Israeli forces employed an additional 4,924 ad-hoc “flying” checkpoints, or nearly 60 a week. These involve the deployment of Israeli forces for several hours on a given road for the purpose of stopping and checking Palestinian drivers and vehicles, but without any permanent physical infrastructure on the ground.

An adaptable system of control

In recent years, the system of road obstacles has increasingly allowed Israeli forces to quickly close or open any given area depending on the level of tension. The majority of obstacles (some 80 per cent) are not staffed and are used to funnel Palestinian traffic towards a restricted number of junctions controlled by checkpoints. During times of calm, these checkpoints are mostly unstaffed or security personnel carry out occasional checks on vehicles. By contrast, when tensions arise, checkpoints are mostly staffed and vehicles are stopped more frequently, generating delays. This occurred on a wide scale during the last quarter of 2015 following an escalation in Palestinian attacks and mass demonstrations, and had a significant humanitarian and economic impact, particularly across Hebron governorate.¹¹

The majority of obstacles are not staffed and are used to funnel Palestinian traffic towards a restricted number of junctions controlled by checkpoints

At checkpoints located along the Barrier or on roads leading to occupied East Jerusalem or Israel, strict checks are carried out at all times and only Palestinian pedestrians holding special permits are allowed to pass. These checkpoints prohibit the vast majority of the Palestinian population from accessing areas behind the Barrier (the “Seam Zone”) and East Jerusalem, while controlling access by those holding special permits to these areas or to workplaces in Israel.

Expansion of the more flexible system can be seen in the higher number of road gates, which can be opened and closed depending on the circumstances, versus a decline in fixed earth mounds. Given the relatively calm conditions prevailing during the reporting period, more than half of road gates were classified as “mostly open”. This trend is also consistent with the frequent deployment of flying checkpoints, which are the most mobile type of obstacle.

Closure of entrances to villages

In recent years, the Israeli military has blocked vehicle access to the main entrances of Palestinian localities from which stones have been thrown at Israeli vehicles or where the homes are located of the perpetrators or suspected perpetrators of attacks against Israelis. Since January 2017, OCHA has documented 93 such incidents affecting a total of 30 communities.¹²

In a 2017 report to the Human Rights Council, the UN Secretary General stated that measures such as the closure of Palestinian towns and villages following attacks against Israelis “may amount to collective punishment”.¹³

In most cases, Israeli military officers communicate to the Palestinian District Coordination Offices or heads of village councils that the closures are connected to incidents like those described above. In most cases, the closure does not directly prevent Palestinian youths from reaching main roads on foot to throw stones at Israeli vehicles. Similarly, closures following stabbing or shooting attacks are implemented in the home town of perpetrators, irrespective of the actual location where the attack took place.

During 2017, 341 access restriction incidents at West Bank checkpoints were reported by UN and INGOs, a significant increase from the previous year (131 cases)

The closures vary in their severity (from total closure to strict checks on vehicles) and may last for a few days to a number of weeks. Residents are forced to cross a roadblock or checkpoint on foot to reach public transportation on the other side, or to resort to longer detours. This disrupts access to services and livelihoods, with a disproportionate impact on children, the elderly and disabled people.

Impact on humanitarian agencies

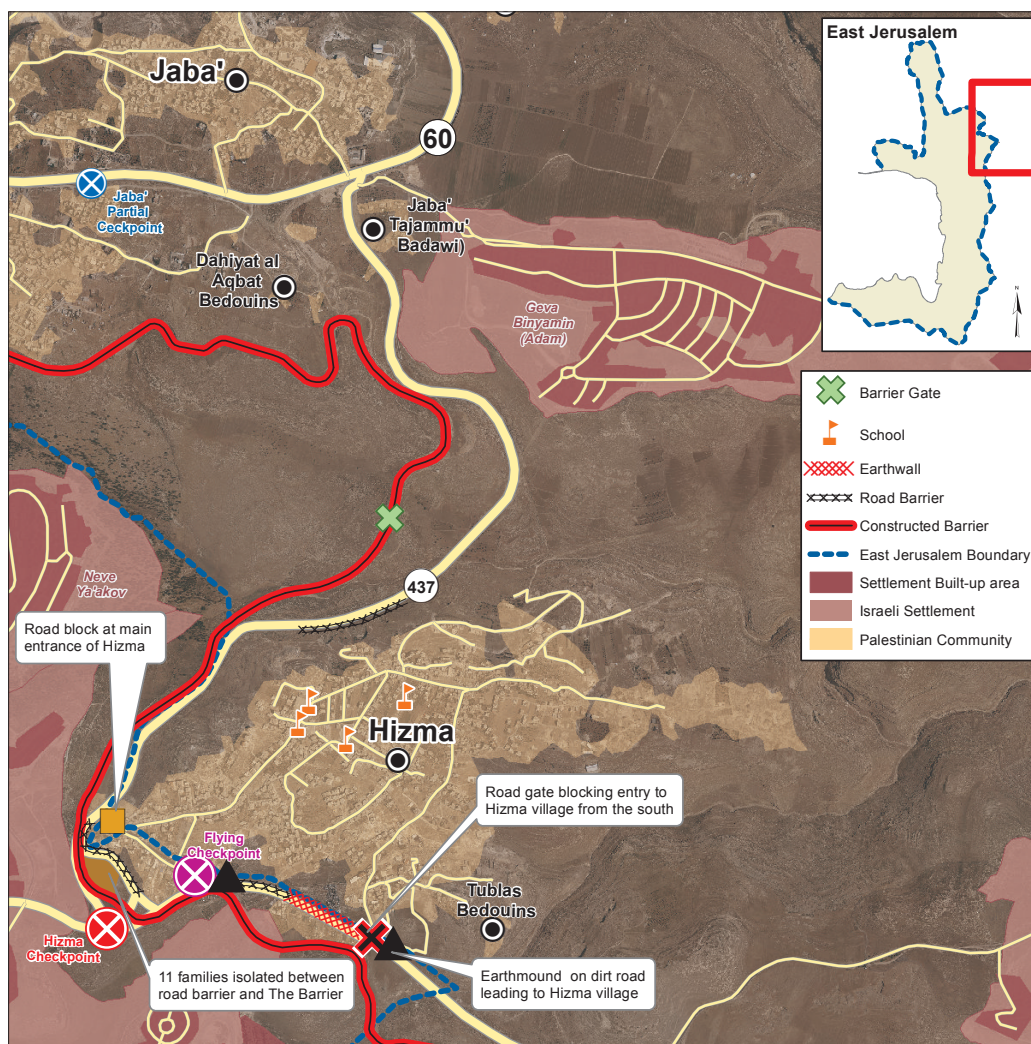
Checkpoints deployed across the West Bank, particularly those controlling access into East Jerusalem, Israel and the “Seam Zone”, also have a disruptive impact on the operations of humanitarian organizations. Staff at eleven checkpoints operated by private security companies systematically demand to search INGO vehicles, including those of UN agencies in violation of the UN’s privileges and immunity. As a result, UN staff are forced to avoid these checkpoints and take long detours. Access by national staff through another five checkpoints staffed by Israeli forces requires both ‘prior-coordination’ and a special permit.

During 2017, 341 access restriction incidents at West Bank checkpoints were reported by UN and INGOs, a significant increase from the previous year (131 cases). The number of working hours lost in relation to these incidents soared from 1,262 in 2016 to 10,473 in 2017. The majority of incidents involved demands to search UN buses and for staff to exit the buses during these searches. The largest number of incidents in 2017, 37 per cent, was recorded at al Walaja checkpoint, located on the Green Line, which controls access between the southern West Bank and Jerusalem. The number of such incidents has declined since the start of

THE CASE OF HIZMA VILLAGE

Hizma is a Palestinian village of over 7,000 residents in Jerusalem governorate. The bulk of its built-up area is in Area B but small parts of the village lie in Area C or within the municipal boundaries of Jerusalem, although it is separated from the rest of the city by the Barrier. Between 28 January and the end of March 2018, the three access roads into the village were either totally or partially closed to Palestinian traffic. The Israeli army hung posters on village shops stating that the army “will continue its work so long as you [residents] continue to be disruptive”. Other posters showed broken windshields. Following communications with the Israeli military, the head of the village council reported that the posters justified the closures as a response to stone throwing by Palestinian youths at vehicles with Israeli number plates. In 2017 and the first two months of 2018, OCHA recorded 11 incidents of Palestinians throwing stones at Israeli vehicles near Hizma that resulted in Israeli injuries or damage to vehicles.

The closures disrupted access by Hizma’s residents to services and livelihoods. Traffic between the north and south of the West Bank that passed through the village was diverted, undermining the commercial life of the village. Service providers, including a third of the teachers in village schools who commute on a daily basis, faced delays reaching the village. Over 50 shops/businesses that are the main source of income for 150 households were affected by the diversion of Palestinian traffic away from the village. Family life was also affected by the unpredictable nature of the closures.



2018 following instructions by the Israeli authorities to allow UN staff to remain on buses, and to conduct vehicle searches only if checkpoint personnel have a specific suspicion.

A broader system of access restrictions

Road obstacles are an integral component of a broader system of access restrictions, citing security reasons, that impedes the movement of Palestinians within the West Bank and contributes to geographical fragmentation. This system includes the Barrier, 85 per cent of which lies inside the West Bank. Palestinians must obtain special permits or engage in 'prior coordination' to reach their land or homes between the Barrier and the Green Line. The permit requirement applies to West Bank ID holders for entry into East Jerusalem (except for men aged over 55 and women over 50). There are prohibitions or restrictions on the use of 400 kilometres of roads serving Israeli settlers almost exclusively; access is closed to some 20 per cent of West Bank land on the grounds that these areas are designated as 'firing zones' for military training or a border buffer zone'; and the prohibition extends to over 10 per cent of West Bank land located within the municipal boundaries of Israeli settlements.

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Under international law, Israel has an obligation to facilitate the free movement of Palestinians across the occupied Palestinian territory, including East Jerusalem. Exceptions to this obligation are recognized only for imperative reasons of security and only in response to specific security threats. In its 2004 Advisory Opinion, the International Court of Justice (ICJ) established that the sections of the Barrier which run inside the West Bank, including East Jerusalem, together with the associated gate and permit regime, violate Israel's obligations under international law.



ENDNOTES

1. World Bank, Economic Monitoring Report to the Ad Hoc Liaison Committee, 27 September 2018, para. 1.
2. The Humanitarian Fund is a pooled fund managed by OCHA on behalf of the Humanitarian Coordinator. For further details, see: <https://www.ochaopt.org/page/opt-humanitarian-fund>
3. On a positive note, the World Bank has increased its allocation from \$55 million to \$90 million for the West Bank and Gaza over the next year, part of which will be used to create some 4,400 short-term employment opportunities. UNDP has also accelerated its emergency economic assistance programme aimed at creating over 2,500 immediate and short-term job opportunities in Gaza over a 12-month period, particularly for youth and women.
4. For further details on this appeal see: OCHA, The Humanitarian Bulletin, August 2018.
5. <https://www.ochaopt.org/page/opt-humanitarian-fund>
6. In 2017 and 2018 these donors included Australia, Belgium, Germany, Iceland, Ireland, Italy, Malta, Norway, Spain, Sweden, Switzerland and Turkey.
7. <https://www.ochaopt.org/content/opt-humanitarian-fund-releases-us1-million-funds-avoid-collapse-services-gaza-strip>
8. The UN's global emergency response fund, the UN Central Emergency Response Fund (CERF), has also allocated \$1.26 million to the oPt since the beginning of the year.
9. In addition to the West Bank and Gaza Strip, UNRWA also operates in Jordan, Lebanon and Syria.
10. <http://www.mezan.org/en/post/23196/Victory+for+human+rights+organizations+in+Israeli+Supreme+Court>
11. See, OCHA, Humanitarian Bulletin, January 2016. Available at: <https://www.ochaopt.org/content/movement-restrictions-west-bank-roads-tightened>
12. The affected communities are: Ya'abad (Jenin); Osarin, Madama, al Lubban ash Sharqiya, Huwwara, Tell and Beita (Nablus); Azzun and Izbat at Tabib (Qalqiliya); Kafr ad Dik (Salfit); Husan, Beit Ta'mir and Jannatah (Bethlehem); Al Fawwar Camp and Marah Rabah (Hebron); Hizma, the Old City, Biddu, Beit Ikhsa, and Beit Surik (Jerusalem); Deir Abu Mash'al, Ein Yabrud, Kobar, Beitillu, al Jalazun camp, al Bireh, Deir Nidham, al Mughayyir and Sinjil (Ramallah).
13. Report by the Secretary General, Human rights situation in the Occupied Palestinian Territory, including East Jerusalem, A/HRC/34/38, April 2017, para. 32-33,