

Humanitarian Bulletin

occupied Palestinian territory

NOVEMBER 2015



HIGHLIGHTS

- Hebron city: intensified movement restrictions amidst raising violence undermine access to basic services and livelihoods.
- Punitive demolitions continue: over 100 family members and neighbors of suspected perpetrators forcibly displaced.
- Sharp increase in medical referrals out of Gaza alongside decline in the rate of approval for exit permits.



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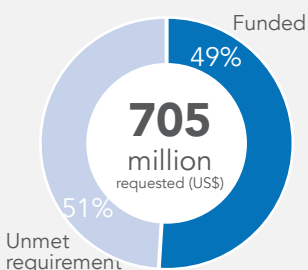
NOVEMBER FIGURES

Palestinian killed (direct conflict)	33
Palestinian injured (direct conflict)	3,841
Israelis killed (direct conflict)	9
Israelis injured (direct conflict)	50
Structures demolished in the West Bank	47
People displaced in the West Bank	118

FUNDING

705 million requested (US\$)

49% funded



Overview

During November, the epicentre of the escalation of violence that began in October moved from East Jerusalem to Hebron City and governorate. Protection-related concerns remain the same: the targeting of Israeli civilians by individual, non-affiliated Palestinians, and the excessive use of force by Israeli forces against perpetrators, alleged perpetrators and protestors. There was an alarming increase in attacks and alleged attacks (mostly stabbings) by Palestinian boys and girls, as young as 11, of whom 15 were killed since October, in some cases raising concerns about extra-judicial executions.¹ While clashes along Gaza’s border areas with Israel continued, their frequency and intensity declined. In the two months since the current escalation began, 103 Palestinians and 17 Israelis have been killed, and 11,299 and 182 Palestinians and Israelis injured across the oPt and Israel.²

In Hebron city, the Israeli authorities responded with intensified restrictions on Palestinian movement into and within the city, further undermining access by residents to basic services and livelihoods. International organizations providing a protective presence have been denied access to the areas of the city most affected and their staff repeatedly harassed by Israeli forces and settlers. Of particular concern is the impact of the violence and restrictions on 4,200 children in Hebron city who must cross at least one military checkpoint and undergo inspections and searches to reach their schools.

In East Jerusalem, over the course of November, some 60 per cent of the checkpoints and roadblocks erected the previous month were gradually removed, returning the situation to normal in three out of nine neighbourhoods. However, some of the locations where closure obstacles remain, such as Issawiya and Ras Al Amud, are still severely affected.

Common to both Hebron and East Jerusalem is the Israeli policy of establishing and expanding illegal settlements in the heart of the urban fabric. This policy generates tensions and restrictive measures on Palestinian residents. In East Jerusalem, following a lull for about a year, this month the Israeli authorities announced the issuance of tenders for the construction of hundreds of new housing units in Ramat Shlomo settlement.



Punitive demolitions targeting the family homes of Palestinians suspected of attacks against Israelis in 2014 and 2015 continued following its resumption last month. As a result, more than 100 Palestinians, half of them children, have been displaced and rendered homeless since early October. About one quarter of those displaced were not related to a suspected perpetrator but lived in adjacent homes, which were severely damaged. The Humanitarian Coordinator for the oPt, Robert Piper, called for an end to punitive demolitions, which cause unnecessary suffering and are illegal under international law.

This month also witnessed increasing pressure on vulnerable Bedouin and herding communities in Area C, including the destruction or threat of destruction of homes and livelihoods built without a permit, and repeated military training requiring temporary displacement. In one herding community (al Hadidiya), the Israeli authorities confiscated emergency tents provided by humanitarian agencies to families whose homes were demolished.

In his briefing to the Security Council, the UN Special Coordinator for the Middle East Peace Process, Nickolay Mladenov, stressed the urgency of measures by leaders from both sides to de-escalate violence, including a halt to incitement, the lifting of some of the aforementioned restrictions and the avoidance of excessive use of force. He also added, “the reality in which a settler state is emerging in the occupied West Bank must be reversed if hope is to be reignited.”

In the meantime, humanitarian and protection interventions can alleviate suffering for those most affected. As the occupying power, Israel must refrain from interfering with such interventions and should facilitate them.³

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Hebron: Access restrictions amidst increased violence further undermine living conditions

Since the beginning of the current escalation of violence, Hebron city has had the highest number of Palestinian casualties in a single locality, followed by East Jerusalem. In response to the unrest, the Israeli authorities have intensified restrictions on Palestinian movement to, from and within the city, and have renewed the practice of punitive demolitions. This has impacted access to services and livelihoods and raised concerns about the potential forcible displacement of residents. Human rights organizations have expressed concern that the sweeping nature of the access restrictions constitutes a form of collective punishment, prohibited under international law.⁴

Violence and clashes

During October and November, a total of 18 Palestinians, including four children, were killed in Hebron city by Israeli forces and settlers. Another 811, including 321 children, were injured. These figures account for 23 percent of total deaths and eight per cent of total injuries recorded during this period in the entire West Bank.

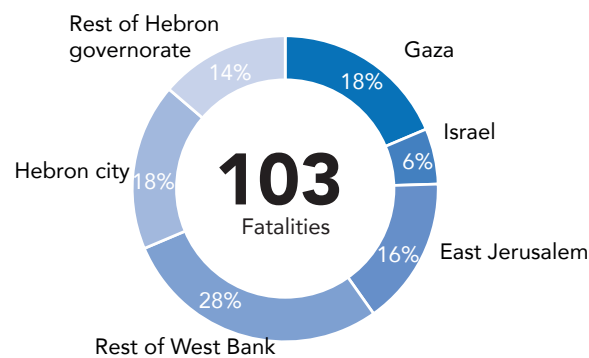
Fifteen (15) of those killed were perpetrators or alleged perpetrators of attacks against Israeli forces and settlers in the city (mostly stabbing or stabbing attempts), which resulted in one Israeli fatality and six injuries. The circumstances surrounding most of these incidents remain disputed, and there are concerns about excessive use of force and unlawful killing in cases where it is not evident that the individual shot presented an imminent threat to life at the time.⁵

The majority of Palestinian injuries were recorded during protests and related clashes between Hebron residents and Israeli forces: 27 per cent of injuries were from live ammunition.

Settler violence increased markedly in Hebron city and governorate during October and November 2015, with at least 61 attacks resulting in Palestinian injuries or property damage. Several of these attacks reportedly took place in the presence of Israeli soldiers, who refrained from intervening.

This period also saw growing pressure on volunteers and staff of international organizations providing a protective presence in Hebron city. (See section below on Protection Cluster response)

PALESTINIAN FATALITIES OCT-NOV 2015



Source: OCHA's Protection of Civilians database

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Movement restrictions

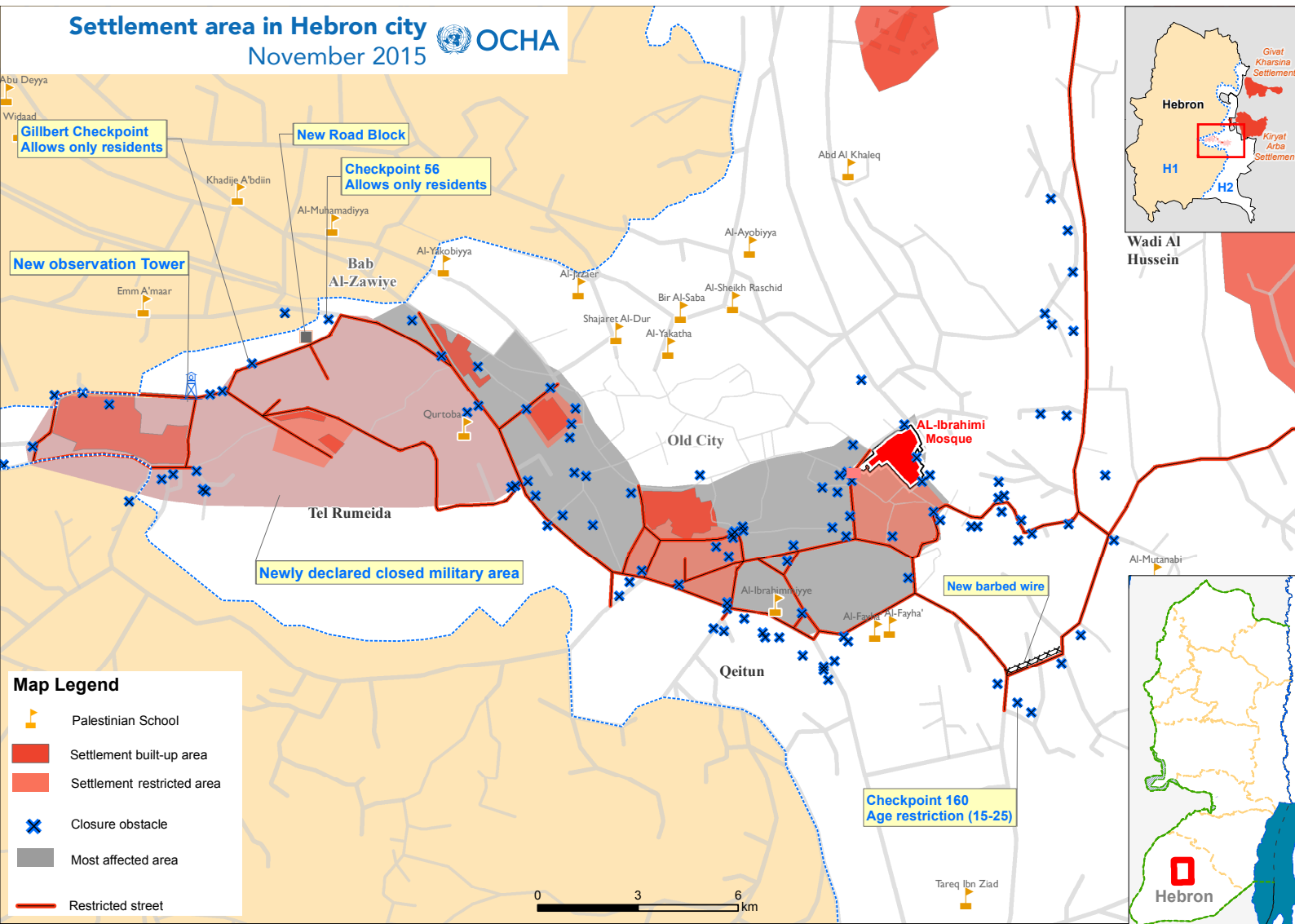
Since early November 2015, Israeli forces have intermittently blocked three of the main access roads leading into Hebron city. Access through some of these routes, when open, has been controlled by military checkpoints. Documentation is checked and vehicles are searched, resulting in long queues and delays. These restrictions have forced residents of Hebron and dozens of adjacent towns and villages to use long detours to access their homes, services and places of work within the city.

There are five Israeli settlements established within the city itself, in an area directly controlled by the Israeli military (H2). The settlement area has been segregated from the rest of the city for the past 15 years by approximately 95 physical obstacles, including 19 permanently staffed checkpoints. The area includes the bulk of Hebron’s Old City and is home to over 6,000 Palestinians living alongside several hundreds Israeli settlers.⁶

Since mid-October 2015, the settlement area has been further isolated from the rest of the city by new razor wire and concrete blocks to channel Palestinian pedestrian movement through one of the staffed checkpoints (see map attached). Inspection and body searches at the latter have become significantly more intensive.

Two of these checkpoints control access into the Tel Rumeida neighbourhood, home to some 100 Palestinian families, and is only accessible to Palestinian residents who register in advance with the Israeli authorities. Another checkpoint prohibits access to Palestinian

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males between 15 and 25 years of age who are not residents of the restricted area. Initial reports indicate that these restrictions have forced a number of families in the worst affected locations to leave their homes and relocate elsewhere.

Impact on schools

The impact of the violence and access restrictions on schools is of particular concern. According to the Palestinian Ministry of Education, there are 4,200 children (2,481 boys and 1,719 girls) studying in 15 schools across the city who must cross at least one checkpoint and undergo inspection and searches in order to reach school. One of those most affected is Qurduba school; 130 children and 20 school staff members have to pass two checkpoints (Gilbert and checkpoint 56) to get to the school. These are among the most restrictive checkpoints and have been the scene of six stabbing incidents (carried out or attempted) against Israeli forces deployed at these sites, all of which ended in the killing of the perpetrators.

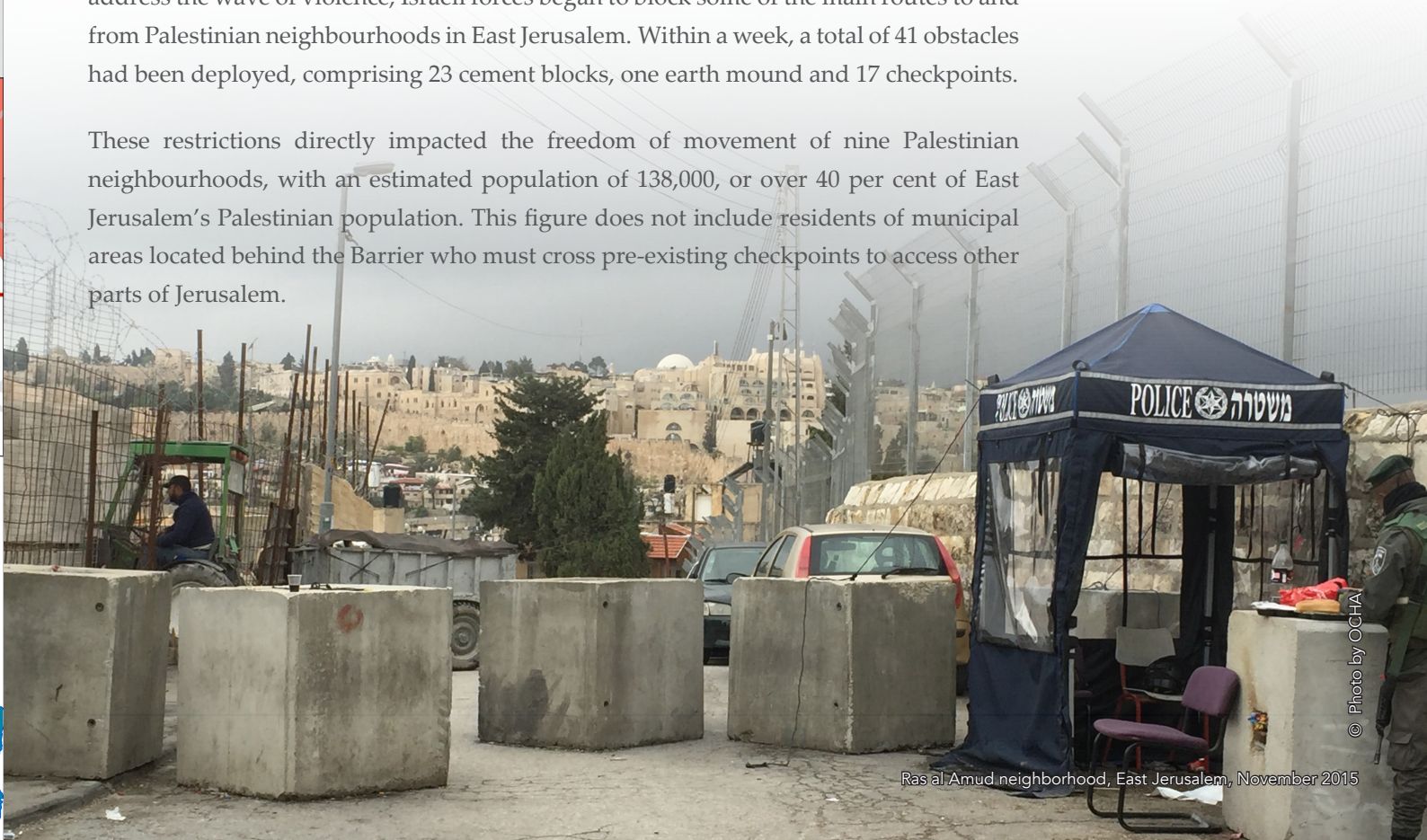
The functioning of each of these 15 schools has been disrupted to varying degrees since the beginning of October, primarily due to delays and the psychological impact on students and staff. Classes at some schools have been also disrupted due to the frequent clashes taking place in their vicinity, which resulted in the infiltration of tear gas into school buildings. On four occasions during October, Israeli forces raided schools and detained a number of children accused of stone throwing, according to the Ministry of Education.

Movement obstacles in East Jerusalem disrupt access to services, despite recent easing

Following a decision adopted on 14 October 2015 by the Israeli Security Cabinet to address the wave of violence, Israeli forces began to block some of the main routes to and from Palestinian neighbourhoods in East Jerusalem. Within a week, a total of 41 obstacles had been deployed, comprising 23 cement blocks, one earth mound and 17 checkpoints.

These restrictions directly impacted the freedom of movement of nine Palestinian neighbourhoods, with an estimated population of 138,000, or over 40 per cent of East Jerusalem's Palestinian population. This figure does not include residents of municipal areas located behind the Barrier who must cross pre-existing checkpoints to access other parts of Jerusalem.

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Search and checking procedures at the newly deployed checkpoints, mostly staffed by the Israeli border police, have resulted in long queues that have delayed and disrupted the access of people to services, including educational and health facilities, places of work and holy sites.

During November the Israeli authorities gradually began the removal of most of the obstacles. Currently a total of 14 obstacles remain, including six checkpoints, seven roadblocks, and an earth mound, directly affecting some 76,000 people residing in six neighbourhoods.⁷

Ras al Amud and Issawiya

Despite the overall easing during November, in some neighbourhoods most closure obstacles have remained in place, severely disrupting the daily life of the entire population.

In Ras al Amud, where some 25,000 Palestinians live, three of four obstacles (including two checkpoints and one roadblock) continue impeding access to schools and basic services.⁸ Around 5,000 kindergarten and school students and their parents cross these obstacles on a daily basis: according to community sources, these people have to queue for long periods of time, and are subject to physical, vehicle and school bags searches. Six schools in Ras Al 'Amud have been particularly impacted by police raids and tear gas canisters, sound grenades and skunk water falling in their yards. Ad-hoc closures of the new checkpoints have repeatedly obstructed access and created serious traffic jams. The elderly, sick and disabled have been disproportionately affected.

In Al Issawiya, home to approximately 15,000 people, all seven routes connecting this neighbourhood with the rest of the city and to adjacent agricultural land were blocked, and all traffic to and from this area directed to a single road controlled by a checkpoint.

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Taha Al Ju'beh, eight-year-old, from Al Issawiya, suffers from muscle atrophy and depends on an electric wheelchair and a respirator; the latter is powered by a battery that lasts for slightly more than an hour. As a result of the closures, the travel time to the school in West Jerusalem, where he receives treatment on a daily basis, nearly doubled: from one to two hours. This has required him to rely on an extra-battery to be changed during the journey.



Particularly affected have been chronic patients and urgent medical cases, as travel time to the adjacent Hadassa hospital increased from 5-10 minutes to up to an hour. On 19 October, a 65-year-old woman died on her way to hospital, after suffering from tear gas inhalation during clashes taking place in the neighbourhood; she was delayed for about 25 minutes at the newly established checkpoint. Also impacted are over 2,000 children and youths attending schools and universities outside the neighborhood.

Augusta Victoria Hospital

The erection of a military checkpoint next to Augusta Victoria Hospital between 9 October and 1 November entailed extensive physical searches and caused long delays. It had a negative impact on the functioning of the hospital by delaying access to staff and patients, including medical referrals to and from Makassed hospital nearby.

During this period, the hospital recorded a 30-40 per cent drop in visits to its outpatient clinics, which provides services unavailable at other hospitals, including pediatric dialysis, radiation therapy and chemotherapy. Some of the 30 patients from Gaza receiving radiation and chemotherapy, accommodated in a nearby facility, reported being turned back from this checkpoint.

Additionally, the Israeli company contracted to collect medical waste suspended its operations citing security concerns. The resulting accumulation of medical waste in the hospital posed a health and environmental hazard for the entire neighbourhood.⁹

Protection Cluster partners respond to needs resulting from escalation in violence

The escalation in violence since 1 October across the oPt triggered a range of interventions by members of the Protection Cluster (PC). These interventions fall within four broad categories: monitoring and documentation; legal aid; psychosocial support; and a protective presence.

Several incidents during this period heightened concerns about the safety of humanitarian workers and human rights defenders, and the undermining of their ability to provide a protective presence where it is most needed.

Monitoring and documentation

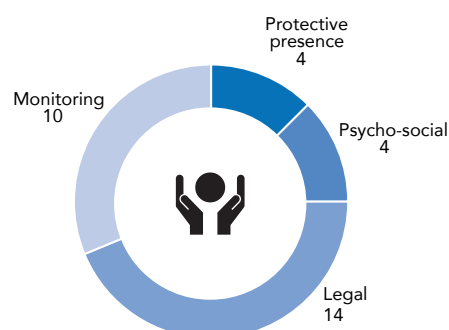
The documentation of events and monitoring of related violations of international humanitarian and human rights law is ongoing by ten different PC members. Work focuses on casualties, arrests and detention, violations of children's rights, restrictions

Several incidents heightened concerns about the safety of humanitarian workers and human rights defenders, and the undermining of their ability to provide a protective presence where it is most needed.



This section was contributed by the Office of the High Commissioner for Human Rights (OHCHR)

PC IMPLEMENTING ORGANIZATIONS BY AREA OF WORK



Source: Protection Cluster

on movement, and collective penalties related to punitive demolitions and the revocation of residency status. Partners engaged in these activities sometimes face difficulties in reaching the scenes of killings, or speaking with witnesses and the families of those deceased, injured or detained for fear of reprisals and punitive measures by the Israeli authorities, especially in East Jerusalem and Hebron. The UNICEF-led monitoring and reporting mechanism technical working group on children and armed conflict (MRM CAAC) is documenting the effects on children of the escalation of violence.

Legal interventions

The Legal Task Force, a sub-working group chaired by the Norwegian Refugee Council (NRC), is coordinating legal responses by 14 Palestinian, Israeli and international NGOs.¹⁰ These include the channeling of relevant cases and questioning the legality of measures adopted in response to violence through various legal procedures: supporting individuals to file complaints with the relevant authorities; providing legal representation; and sharing of information with international human rights mechanisms on issues of concern.

The legal interventions have sought to address accountability for killings and excessive use of force; arrests and detention of both children and adults; settler violence; punitive demolitions and residency-related issues; access restrictions in East Jerusalem; and the retrieval of the bodies of perpetrators or alleged perpetrators.

Psychosocial interventions

Three Palestinian organizations¹¹ and UNRWA provide a psychosocial response through the Mental Health and Psychosocial Working Group in East Jerusalem. UNRWA also provides psychosocial responses in refugee camps in the rest of the West Bank. This response has focused on children who are prosecuted for security offences and released, and support to families affected by the killing or serious injury of one of their members.

A number of additional interventions have been conducted in schools, where mental health and psychosocial support teams address children impacted by violence, such as the death of a class mate, raids on their school, and searches at checkpoints or settler violence while en route to school.

Partners have provided guidance materials for parents and teachers on how to communicate with children about the current situation and respond to signs of distress. Gaps have been identified regarding community-based referral pathways for those in need of individual support.

Protective presence

Currently there are four PC members dedicated to providing a protective presence at checkpoints or accompanying children to and from schools. This is inadequate to meet the increased need resulting from the escalation in violence, in particular in East Jerusalem, in some refugee camps and in the Israeli-controlled part of Hebron city (H2).

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Staff and volunteers in Hebron city have experienced intimidation and physical assaults from Israeli settlers. They have also faced arrests and raids on offices by Israeli forces, and access restrictions and denial of entry visas. On 3 November, the Israeli authorities banned the entry of international staff to a main road in the H2 area linking the Tel Rumeida and Beit Hadassa settlements, which has been the scene of a number of deadly incidents.

During October, 15 different PC organizations (Israeli, Palestinian and international) provided a coordinated protective presence in 64 hotspots vulnerable to settler violence during the olive harvest.

Punitive house demolitions resume

Practice targets families of perpetrators in contravention of international law

From mid-October through the end of November 2015, the Israeli authorities demolished or sealed 11 Palestinian-owned homes on punitive grounds, displacing 80 people, including 42 children (see table). Another four adjacent housing units were severely damaged by the explosions, temporarily displacing another 26 people.

The punitive demolitions were in response to Palestinian attacks targeting Israelis that occurred in 2014 and 2015.

The Israeli authorities also issued demolition orders against, or carried out preliminary surveys of, an additional 25 homes in connection to Palestinian attacks. As of end November, petitions by the families affected to the Israeli High Court of Justice were rejected, with one exception.

According to B'Tselem, from October 2001 to September 2004, during the second Intifada, Israel destroyed 628 housing units in punitive demolitions, displacing close to 4,000

	Directly targeted homes	Total Displaced	Children Displaced
Hebron city	1	3	2
Ath Thuri (East Jerusalem)	1	1	0
Jabal al Mukabbir (East Jerusalem)	2	29	20
Qalandiya Camp (Jerusalem governorate)	2	15	8
Nablus city	4	30	12
Silwad (Ramallah)	1	2	0
Grand Total	11	80	42

Israel justifies punitive demolitions as a deterrent to others from perpetrating attacks against Israelis. This practice was discontinued in 2005 following the recommendation of an Israeli military committee that found it ineffective.

Source: OCHA's demolitions database

Psychological impact

House demolitions almost always have a psychological impact on those directly affected, and sometimes even on the larger family and community. People who have been violently uprooted often express intense feelings of anger, sadness, hopelessness and helplessness. Some children and adolescents experience developmental regression, including bedwetting, as well as behavioural changes and concentration problems. The most common disorders observed in the weeks following the demolition are anxiety, depression and post-traumatic stress disorder.

Information provided by *Médecins Sans Frontières (MSF)*

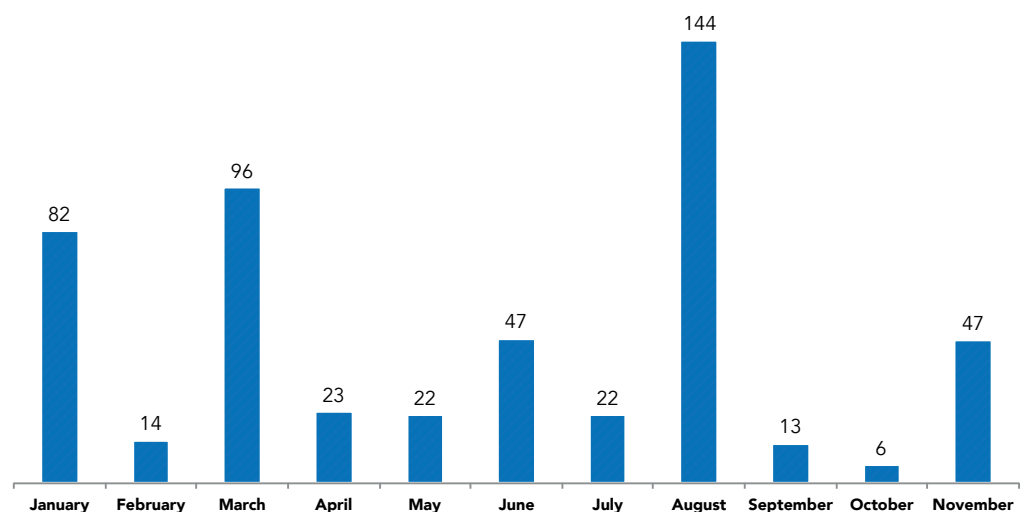
The destruction of private or public property in an occupied territory is prohibited under international humanitarian law (IHL) unless "such destruction is rendered absolutely necessary by military operations."

persons, Nearly half of these homes (295 units) were adjacent to those directly targeted, and their residents were not related to a suspected perpetrator.¹²

The Israeli authorities justify punitive demolitions as a deterrent to others from perpetrating attacks against Israelis. The practice was discontinued in 2005 following the recommendation of an Israeli military committee that found it ineffective.¹³ The Israeli authorities resumed this practice in mid-2014 after a number of Palestinian attacks and the Israeli Security Cabinet reinstated it on 14 October 2015. Since then, 16 residences have been demolished or sealed for punitive reasons in the governorates of Jerusalem (seven), Nablus (four), Hebron (four) and Ramallah (one). In total, these demolitions have displaced 117 Palestinians, including 59 children.

The destruction of private or public property in an occupied territory is prohibited under international humanitarian law (IHL) unless "such destruction is rendered absolutely necessary by military operations."¹⁴ Punitive demolitions do not fall within this exception.

PALESTINIAN STRUCTURES DEMOLISHED OR SEALED BY ISRAELI AUTHOROTIES JAN-NOV 2015



Source: OCHA's demolitions database

Punitive demolitions are also a form of collective penalty prohibited under IHL as they target the families of a perpetrator, or alleged perpetrator, who are not involved in the alleged act.¹⁵ Additionally, depending on the specific circumstances, this practice runs counter to a range of rights and protections embodied in various international legal instruments that are legally binding on Israel. As noted by the Humanitarian Coordinator for the oPt, Robert Piper: “The law enforcement response must be consistent with international law. Punitive demolitions are inherently unjust, punishing innocent people for the acts of others.”¹⁶

Additionally, in October and November the Israeli authorities demolished 21 Palestinian structures in Area C and East Jerusalem on the grounds of the lack of a building permit, displacing 49 people, including 23 children. The total number of structures destroyed since the start of 2015 is 496 compared with 564 in the equivalent period of 2014.

Rise in medical referrals out of Gaza, but decline in approval of exit permits

Closure of the border with Egypt compounds problems in accessing medical care

Ministry of Health (MoH) referrals of Gaza patients to non-MoH medical facilities have risen significantly in 2015: referrals from January-October are 17 per cent higher than the equivalent figure for 2014. By the end of 2015, the number of referrals out of Gaza is expected to exceed the historic high of 2014. However, actual access for these patients to the facilities to which they were referred has become more difficult due to lower approval rates for exit permits.

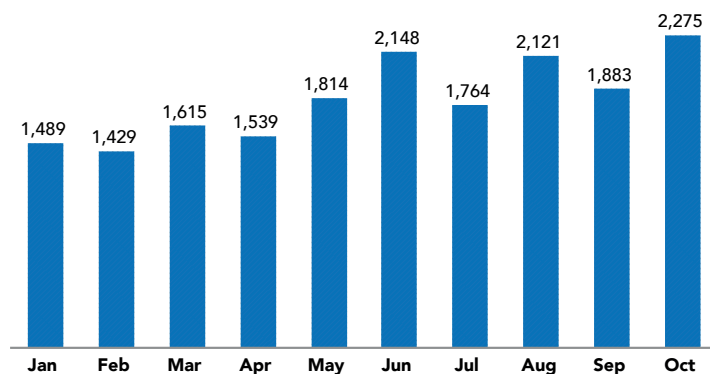
Patients are referred to non-MoH health facilities within the oPt, including East Jerusalem, and to a lesser extent to hospitals in Israel, Egypt and Jordan, when MoH facilities in Gaza cannot provide the necessary care. Dependence on referrals has risen in recent years as the public health system has weakened due to shortages of drugs, medical disposables



This section was contributed by the World Health Organization (WHO)

Dependence on referrals has risen in recent years as the public health system has weakened due to a range of factors.

TOTAL NUMBER OF PATIENT PERMIT APPLICATIONS PER MONTH, (JAN-OCT, 2015)



Source: MoH Referral Abroad Department, Gaza.

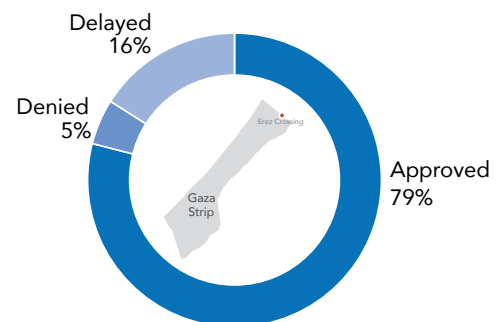
Challenges to imports of medical equipment

Although Israel's list of restricted "dual use" items that could be used for military purposes does not include medical equipment, other Israeli restrictions on imports of medical equipment into the Gaza Strip remain a challenge. For example, on 14 July 2015, the World Health Organization (WHO) applied for the entry into Gaza of two computerized radiology machines procured by two healthcare facilities. WHO received confirmation on 4 August that the equipment would be allowed to enter. However, when WHO sought to coordinate their entry, it learned that the IT component of the machines required special approval from the Israeli Ministry of Communications, which took another three months to obtain. The machines finally entered Gaza on 9 November.

By October 2015, over 25,000 people with urgent needs, including almost 500 patients referred to Egyptian hospitals, were registered and waiting to leave Gaza via the Rafah crossing.

and equipment; insufficient number of specialized health professionals; non-payment of salaries for employees recruited since 2007 by the de facto authorities; and insufficient electrical power and fuel. Almost nine in ten referrals are now to facilities outside of Gaza and rely on the Israeli and Egyptian authorities allowing access through the Erez and Rafah crossings.

PERMIT APPLICATIONS FOR PATIENTS VIA EREZ BY STATUS, JANUARY-OCTOBER 2015



Source: Palestinian District Coordination office, MoH -Gaza.

Access to facilities in Egypt accounts for approximately seven per cent of referrals in 2015, but has become highly unreliable since July 2013, when Egypt limited the opening of the Rafah crossing. Since 24 October 2014, following an attack on Egyptian soldiers in the Sinai, the crossing opened partially on just 37 days, or about 10 per cent of the period, and has remained unopened for over the past 100 days. According to the Gaza authorities, as of the end of October 2015, over 25,000 people with urgent needs, including almost 500 patients referred to Egyptian hospitals, were registered and waiting to cross Rafah.

Patients referred to facilities in the West Bank (including East Jerusalem), Israel or Jordan must apply for permits from the Israeli authorities to exit via the Erez crossing. The largest monthly total of permit applications (2,275) since the imposition of the blockade in 2007 was recorded in October 2015. However, approval rates have declined significantly since August 2015, and dipped in October to less than 70 per cent of requests, the lowest since September 2009. Nevertheless, due to the increase in the number of applications, the absolute number of approvals during October also increased compared with previous months.

Eleven per cent of applications were rejected in October and 19 per cent were delayed, meaning that the patient had received no response by the date of their appointment, forcing them to seek a new appointment and resubmit their application. Of the 686 applications rejected or delayed during October, 416 were submitted on behalf of males (of which 81 were children) and 270 on behalf of females (of which 62 were children).

Endnotes

1. See joint statement by the United Nations Special Rapporteurs on the situation of human rights in the OPT, and on summary executions: <http://www.ohchr.org/en/NewsEvents/Pages/DisplayNews.aspx?NewsID=16759&LangID=E>. See also B'Tselem letter to Israel's Prime Minister, at: http://www.btselem.org/download/20151125_letter_to_pm_on_extrajudicial_killings_eng.pdf
2. OCHA protection of civilians data includes incidents that occurred outside of the oPt only if they involved residents of the oPt as either victims or perpetrators. Palestinian injuries counted in this report only include people who received medical treatment by paramedic teams on the ground, in local clinics or in hospitals. Figures on Israeli injuries are based on media reports.
3. See for example Article 55 of the Geneva Convention Relative to the Protection of Civilians in Times of War.
4. See for example, Al Haq, Special Focus on Hebron: A Microcosm of the Israeli Occupation at: <http://www.alhaq.org/documentation/field-updates-2015/993-special-focus-on-hebron-a-microcosm-of-the-israeli-occupation>.
5. See joint statement by the United Nations Special Rapporteurs on the situation of human rights in the OPT, and on summary executions: <http://www.ohchr.org/en/NewsEvents/Pages/DisplayNews.aspx?NewsID=16759&LangID=E>.
6. See OCHA, The Humanitarian Impact of Israeli Settlements in Hebron City, November 2013.
7. The East Jerusalem neighbourhoods are Issawiya, Sur Baher, Ras al Amud, Silwan, Jabal al Mukabbar, and Um Tuba.
8. Population figures are as of end of 2013, Jerusalem Institute for Israel Studies. One of the roadblocks was installed in June 2015, prior to the start of the current escalation.
9. On 26 October, Augusta Victoria Hospital made an arrangement with the company to have the chemical waste transferred from hospital trucks to the company's trucks near Hadassah hospital in Mount Scopus in East Jerusalem (back-to-back transport), a one-time arrangement which allowed the hospital to dispose of the medical waste that had piled up for two weeks between 10 and 26 October.
10. Legal aid actors who have coordinated responses to the current situation: ACRI, Adalah, Adameer, al Haq, B'Tselem, CAC, DCIP, Hamoked, IR AMIM, JLAC, NRC, Rabbis for Human Rights, St Yves and Yesh Din.
11. PCC, PRCS and YMCA
12. B'tSelem, Through no fault of their own: Punitive House Demolitions during the al-Aqsa Intifada, November 2004, p. 9.
13. Haaretz, IDF Panel Recommends Ending Punitive House Demolitions for Terrorists' Families, Feb 17, 2005
<http://www.haaretz.com/print-edition/news/idf-panel-recommends-ending-punitive-house-demolitions-for-terrorists-families-1.150620>
14. Article 53, Fourth Geneva Convention of 1949.
15. Ibid, Article 33.
16. Statement from 16 November 2015.