



In this issue

Agencies urgently require \$21 million to respond to casualties in the Gaza Strip.....3

Temporary tightening of the Gaza Strip blockade worsens dire humanitarian situation9

Infestation expected to affect olive harvest in the West Bank 12

HIGHLIGHTS

- Israeli authorities lift recent restrictions on Kerem Shalom but additional restrictions imposed at Erez Crossing
- UN emergency fuel programme for essential health and WASH services in Gaza about to run out
- Pest that infects olive trees expected to significantly reduce this year's harvest in West Bank

OVERVIEW

This month's Bulletin is again devoted to the deteriorating humanitarian situation in Gaza, except for one article dealing with the upcoming olive harvest in the West Bank. Between 9 July and 15 August, the Israeli authorities tightened the blockade on Gaza, severely restricting the movement of goods through the Kerem Shalom crossing between Gaza and Israel, and reducing the permissible fishing area by sea to three nautical miles. According to the Israeli authorities, the tightened restrictions were adopted in response to security incidents along the fence and the launching of incendiary kites and balloons from Gaza, which have resulted in extensive property damage in Israel. Only food, medical supplies and animal fodder were allowed to enter into Gaza, while the exit of goods was entirely banned. The restrictions further undermined the already devastated economy, which in the second quarter of 2018 recorded the highest unemployment rate ever recorded in the Gaza Strip: 53.7 per cent.

On 15 August, the restrictions were lifted, a decision welcomed by the UN Secretary-General António Guterres, as a contribution to de-escalating the tensions which, in recent months, had brought Israel and Hamas to the brink of a new round of full-scale hostilities. Since 19 August, citing continued violent incidents at the fence, Israel has intermittently imposed additional restrictions at Erez Crossing, the only passenger crossing between Gaza and the West Bank, which is already off limits to most Palestinians.

Another article in the Bulletin examines the response to the significant increase in Palestinian casualties in Gaza since 30 March, mainly in the context of the mass demonstrations near the perimeter fence with Israel, which continue, albeit at a reduced scale. Up to 30 August, 179 Palestinians have been killed

AUGUST FIGURES

Palestinians killed (direct conflict)	15
Palestinians injured (direct conflict)	176
Israelis killed (direct conflict)	0
Israelis injured (direct conflict)	16
Structures demolished in the West Bank	23
People displaced in the West Bank	14

HUMANITARIAN RESPONSE PLAN 2018

540 million (US\$)
Requested

29.1% funded



during the demonstrations and other incidents, and over 18,000 others injured by Israeli forces, including over 4,600 by live ammunition. Health personnel have also been among the casualties: on 19 August, World Humanitarian Day, the Humanitarian Coordinator for the oPt, Jamie McGoldrick, paid tribute to the health workers of Gaza, who “have exerted heroic efforts to treat people injured during demonstrations.”

To respond to this crisis, humanitarian agencies have appealed for US\$ 43.8 million through the end of 2018 for emergency interventions; as of end August, almost 52 per cent of this request has been provided, leaving a gap of \$21.1 million. The bulk of the funding is needed for trauma management and emergency healthcare, including support to over-stressed public hospitals having to manage complex inpatient surgical care or post-operative rehabilitation, placing an intolerable burden on the already fragile health system.

Another long term problem affecting critical health centres, as well as sanitation facilities, in Gaza is the lack of a steady supply of electricity and the dependency on the delivery of UN-procured emergency fuel, mainly to power back-up generators, with electricity cuts of up to 20 hours per day. Funds donated for the emergency fuel programme thus far in 2018 have been depleted by the end of August and hospitals in Gaza currently only have enough fuel to support service provision until mid-September, with some facilities at greater risk. On 5 September, the Humanitarian Coordinator, appealed to the donor community to provide the \$4.5 million urgently needed to ensure the provision of life-saving services in the Gaza Strip through the end of the year.

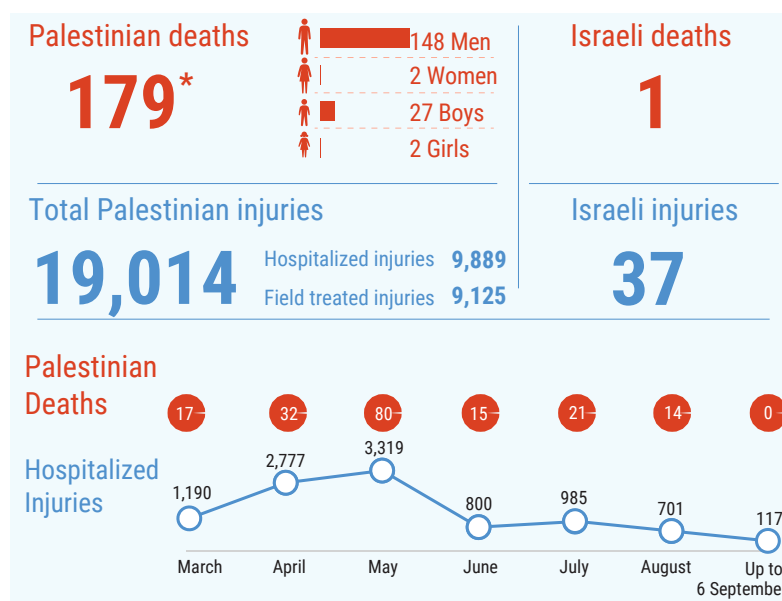
These funding gaps are part of a broader funding shortfall for humanitarian agencies across the oPt, mainly driven by the decline in funding for UNRWA, following the decision by the US, the Agency’s largest donor, to substantially reduce financial support, forcing UNRWA to discontinue or scale back its activities in Gaza and the West Bank. Assistance from other donors enabled UNRWA to reopen its schools in Gaza and the West Bank at the end of August. However, on 31 August, the US announced that it would no longer be providing any funding to UNRWA. UNRWA Commissioner-General Pierre Krähenbühl expressed his deep regret and disappointment at the US decision, alongside his determination that the Agency’s operations would continue, while appealing for over \$200 million “to survive this year’s crisis ... and to sustain the collective mobilization to succeed in this crucial endeavour.”

Hospitals in Gaza only have enough fuel until mid-September, with some facilities at greater risk of closing down sooner.

AGENCIES URGENTLY REQUIRE \$21 MILLION TO RESPOND TO CASUALTIES IN THE GAZA STRIP

Since 30 March 2018, Palestinian casualties in the Gaza Strip have increased significantly due to the mass demonstrations taking place along the perimeter fence with Israel and, to a lesser extent, hostilities and other incidents.

To respond to this crisis, humanitarian agencies have prioritized three areas of intervention: emergency healthcare; protection monitoring; and mental health and psychosocial support (MHPSS). The total funding required for these interventions from 30 March until the end of 2018 is US\$43.8 million, of which \$22.7 million has been contributed to date, leaving a shortfall of \$21.1 million.¹



At 29 per cent, the HRP for the oPt is one of the most poorly funded in the world.

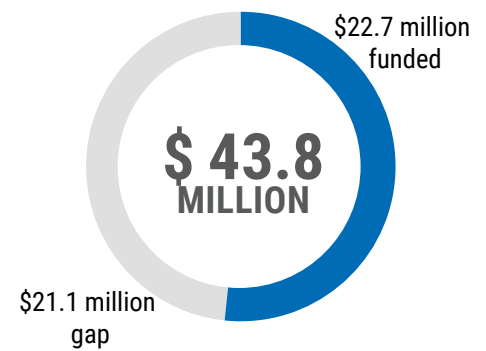
Of the 28 projects in the proposed response, 11 are part of the broader 2018 oPt Humanitarian Response Plan (HRP). However, the HRP for the oPt is one of the most poorly funded in the world and is only 29 per cent funded at present.² The shortfall exacerbates already overburdened institutional service delivery systems and threatens the continuity of minimum operational capacities in Gaza.

From the start of the 'Great March of Return' demonstrations on 30 March up to the end of August, a total of 179 Palestinians, including 29 children, have been killed by Israeli forces: 130 during the demonstrations and 49 in other circumstances; over 18,700 others have been injured, including 1,642 children.³ One Israeli soldier was killed by Palestinians and another 37 Israelis were injured.

Around 52 per cent of the Palestinians injured required hospitalization. The large number of casualties among unarmed demonstrators who did not pose an imminent threat of life or deadly injury to Israeli soldiers, including a high percentage of demonstrators hit by live ammunition, has raised concerns about the excessive use of force.

The current surge in humanitarian needs takes place against a backdrop of an already precarious humanitarian situation in the Gaza Strip; the health system is on the verge of collapse and there is widespread despair as conditions deteriorate and hope for a sustainable solution fades.⁴ Gaza's health sector is collapsing in the wake of the now 11-year blockade, the deepening intra-Palestinian political divide, the energy crisis, inconsistent and reduced payment of public sector staff, and growing shortages in medicines and disposables.

FUNDING REQUIRED FOR PRIORITY INTERVENTIONS IN GAZA



Emergency healthcare

Emergency trauma management is most important during the first hours in which an injury is sustained. During demonstrations health providers and humanitarian partners have deployed to field locations to provide first aid and reduce the need for hospitalization. Acute inpatient surgical care at the hospital level is essential to avoid loss of life and prevent disabilities. This includes complex reconstructive wound and orthopaedic care, complex pediatric and adult anaesthesia, intensive care, blood transfusion and rehabilitation services.

Public hospitals in Gaza currently have extremely limited capacity to manage complex inpatient surgical care or post-operative rehabilitation. Dealing with a high caseload of trauma patients is beyond the capacity of even advanced and

Hospitals in Gaza have extremely limited capacity to manage complex inpatient surgical care or post-operative rehabilitation.



fully equipped hospitals. In Gaza, where the health sector is already suffering from electricity cuts and severe shortages of drugs, medical supplies and staffing, hospitals are unequipped to handle such a caseload. As a result, by 27 August, 270 patients injured in demonstrations had been referred for medical treatment in the West Bank, Israel or Jordan, and had applied for exit permits via the Erez Crossing: only 63 applications (23 per cent) were approved and the remaining were either denied (37 per cent) or are pending (40 per cent).⁵

Rehabilitation and post-operative care is limited, leading to increased infections and further potential complications. A recent analysis by the Health Cluster estimated that by the end of 2018, over 1,200 patients with limb injuries would require complex and timely limb reconstructive surgery; these are highly complex injuries that, if not treated, may heighten the risk of secondary amputations. From 30 March until 6 August, there were 72 amputations: 14 of them on children and one female patient. Of this total, 64 were lower limb amputations and eight were upper limb amputations. To manage the influx of trauma patients, the trauma pathway across pre-hospital, hospital and post-hospital and rehabilitative care services in Gaza urgently needs to be scaled up.

Non-trauma patients suffer because treatment and healthcare for urgent medical conditions is interrupted as the wider health system responds to the casualties from the demonstrations. Some 8,000 pre-scheduled surgeries (some of them critical cases for which a delay can affect prognosis) have been postponed. In June, the waiting time for elective surgery at the largest hospital in Gaza (Shifa) was 64 weeks, well beyond the Ministry of Health (MoH) threshold of 24 weeks.⁶ Delays to surgical interventions may prolong suffering and ill-health, and may have a negative impact on the psychological and social life of the patient. In some cases, delays can lead to further medical complications.

In June, the waiting time for elective surgery at Shifa Hospital in Gaza was 64 weeks, well beyond the Ministry of Health threshold of 24 weeks.

EMERGENCY FUEL ABOUT TO RUN OUT

Lifesaving services in the Gaza Strip are currently dependent on the delivery of UN-procured emergency fuel, mainly to power back-up generators that operate during Gaza's daily power outages. Gaza's energy crisis leaves its two million Palestinian residents, over half of whom are children, with only four to five hours of electricity from the grid per day. A sum of \$4.5 million is urgently needed to ensure sufficient supplies of emergency fuel to power essential services until the end of 2018. If funding is not secured immediately, the emergency fuel will run out completely in September. Gaza's most vulnerable people, who rely on public services and have limited income sources, will be the hardest hit.

Key services in the 14 public hospitals such as elective surgery, sterilization and diagnostic services continue at reduced capacity. More than 4,800 patients daily in Gaza require access to lifesaving or life-sustaining healthcare with a constant supply of electricity. At least 300 of these patients are connected to lifesaving medical equipment such as ventilators, dialysis machines, incubators and anaesthetic equipment. Any disruption or electricity cut puts patients at immediate risk of brain damage or death. There is also an increased risk of waterborne disease across the Gaza Strip if supplies of emergency fuel are not renewed.

Until end August, health partners had received approximately \$21.5 million in new funding for trauma management and emergency healthcare. This has enabled a range of critical interventions to be introduced, including the deployment of 14 international emergency medical teams; some 21,000 outpatient consultations; more than 9,000 post-operative wound management consultations; provision of assistive devices to over 6,600 patients; and the delivery of 15,600 lifesaving drug items and 315 disposable items. The World Health Organization (WHO) has established the Gaza Trauma Working Group to ensure a coordinated and quality emergency response from the point of injury to rehabilitation. Additionally, on 9 August, the International Committee of the Red Cross (ICRC) opened a temporary post-operative ward in a pre-existing building at Shifa Hospital, which includes 20 beds. To continue covering needs across the trauma pathway until the end of 2018, health sector partners require an additional \$20 million.

Protection monitoring

During the first weeks of protests at the perimeter fence in Gaza, the high number of casualties and violations gave rise to the need to expand monitoring, data collection, verification and reporting, alongside timely analysis, to inform the humanitarian response. The capacities of protection partners to monitor events effectively as the casualty figures grew were clearly limited, not least due to pre-existing funding gaps.

Of particular concern, health personnel and facilities have been exposed to violence. Up to 27 August, three health staff have been killed, 404 injured, 59 ambulances and five other health vehicles damaged, and two health facilities damaged, reportedly by Israeli gunfire.⁷ Attacks on health staff and damage to health facilities and assets are not only detrimental to staffing and facilities, but also to patients requiring emergency health services.

Additional capacity is particularly required for documentation and monitoring of child casualties and any encouragement given to children to engage in protests that pose potential harm. As Israel/State of Palestine is a “Situation of Concern” on the agenda of the Security Council, protection partners are required to submit inputs to the annual report of the Secretary-General on Children and Armed Conflict. As such, independent sources are required for the emergency monitoring of incidents of Children and Armed Conflict (CAAC) or grave violations of children’s rights.

Up to end August, responding partners in the Protection Cluster had received some \$284,000. This has funded the recruitment of 10 additional field workers to verify and document possible violations; to provide analysis for other programmatic responses; the enhancement of coordination mechanisms; legal counselling to 137 individuals; and legal aid, including one petition to the Israeli High Court of Justice on behalf of individuals requiring travel permits for urgent treatment outside Gaza. Partners require an additional \$476,000 to scale-up and maintain these responses until the end of 2018.

Up to 27 August, three health staff have been killed and over 400 injured.

Mental health and psychosocial support (MHPSS)

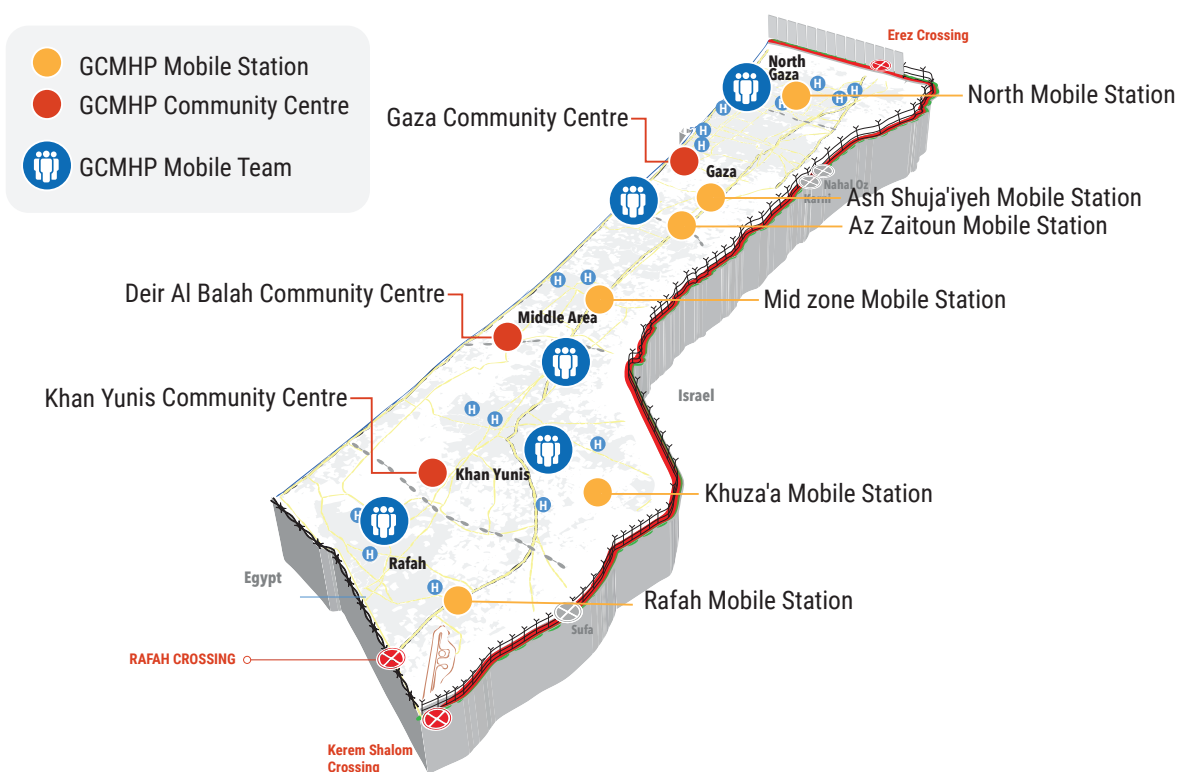
WHO projections of mental disorders in populations affected by emergencies show that up to five per cent of the population may display a severe mental disorder in the 12 months following an emergency. A further 20 percent may display a mild or moderate mental disorder. As a result of the current crisis in Gaza, it is estimated that approximately 10,400 people will have severe mental health problems and 41,700 will have mild to moderate problems requiring MHPSS, including 26,000 children. These numbers are expected to increase as mental health incidents tend to be manifested at a later stage after the events.

Prior to the recent events at the perimeter fence, demand for services already exceeded existing institutional service delivery capacities due to chronic underfunding and the government salary crisis. In late 2017, the Child Protection Working Group (CPWG) of the Protection Cluster estimated that over 295,000 children needed structured psychosocial support and child protection services, with at least 11,000 children in Gaza estimated to require case management in 2018.⁸

As part of the emergency preparedness mechanism in Gaza, Governorate Protection Focal Points have been visiting injured children to assess their situation and provide psychological first aid (PFA), although they have not received funding and staff have not been paid since March 2018. Following these primary field assessments, children are referred for case management and psychosocial support services. Existing funding allows family centres to operate at a minimal capacity but they cannot meet an increase in demand. Significant resources are required to expand

According to WHO, up to five per cent of the population may display a severe mental disorder in the 12 months following an emergency.

GAZA COMMUNITY MENTAL HEALTH PROGRAM (GCMHP) CENTRES, MOBILE STATIONS AND PFA MOBILE TEAMS





Contributed by the Office of
the High Commissioner for
Human Rights

The air strike damaged a building belonging to “Palestine Avenir for Childhood Foundation” (PACF), which provides specialized rehabilitation services for around 3,000 cerebral palsy patients.

SERVICES TO PEOPLE WITH CEREBRAL PALSY DISRUPTED FOLLOWING ISRAELI AIR STRIKE

On 14 July, following an escalation between Israel and Palestinian armed groups in the Gaza Strip, the Israeli air force targeted and partially destroyed a building in Gaza City which, according to the Israeli military, was used by a Palestinian armed group for “militant training and exercises”. Two 14-year-old children who were sitting on the roof of the building at the time of the attack were killed and another 31 people, including five children, were injured.

Several adjacent buildings were also damaged as a result of the airstrike, including the “Palestine Avenir for Childhood Foundation” (PACF), an institution that provides specialized rehabilitation services for around 3,000 children and adults suffering from cerebral palsy,⁹ including physiotherapy, occupational therapy and speech therapy. The PACF centre also accommodates a primary school for 140 children from first to third grade and a kindergarten (16 classrooms in total), and helps with adult learning and the reintegration of children with disabilities into mainstream education.

As the PACF building was empty at the time, the airstrike did not result in casualties but there was considerable damage to doors, windows, ceilings, rehabilitation equipment and furniture with costs estimated at \$180,000. Most services had to be halted except for a few activities that continued in the less damaged rooms. Subsequently, PACF resumed services at alternative temporary locations until repairs to the damaged building are completed.

Since July 2018, PACF has extended its response to community outreach and assessment of the needs of more than 120 demonstrators injured in demonstrations. It also provides multi-disciplinary services, including medical and PSS support, and rehabilitation.

The Israeli attack that damaged the PACF premises has raised concerns about international humanitarian law (IHL) provisions relevant to the conduct of hostilities. Under IHL, as a rule, only combatants and military objectives can be targeted; any military attack, even when directed at a legitimate military target, must comply with the IHL requirements of necessity, precaution and proportionality.



© Photo credit: PACF

outreach and the response of family centres to provide critical services. The reality is that unless under-resourced child protection services are invested in, children in need will be at significant risk of developing serious mental health issues.

By end August, three MHPSS partners had received \$967,000 through the oPt Humanitarian Fund. This funded 10 mental health professionals to provide PFA to 4,000 adults and 500 children through hospital and home visits; counselling and specialized therapeutic mental health services to 400 people at six mobile stations established for this purpose across the Gaza Strip, combined with free telephone counselling to 300 people; and raised community awareness of the psychological and social impact of trauma on the Gaza Strip population, the risk of engaging in protests and information on available services. To scale-up and maintain these responses until the end of 2018, partners in the MHPSS sector require an additional \$660,000.

TEMPORARY TIGHTENING OF THE GAZA STRIP BLOCKADE WORSENS DIRE HUMANITARIAN SITUATION

Between 9 July and 15 August, the Israeli authorities severely tightened restrictions on the movement of goods through the Kerem Shalom crossing between Gaza and Israel, and further reduced the area permitted for fishing at sea from six/nine to three nautical miles. According to the Israeli authorities, these measures were in response to the launching of incendiary kites and balloons from Gaza into Israel that have resulted in extensive property damage. In May, over the course of the demonstrations, the crossing was set on fire and damaged twice by demonstrators, and closed for a few days on each occasion.

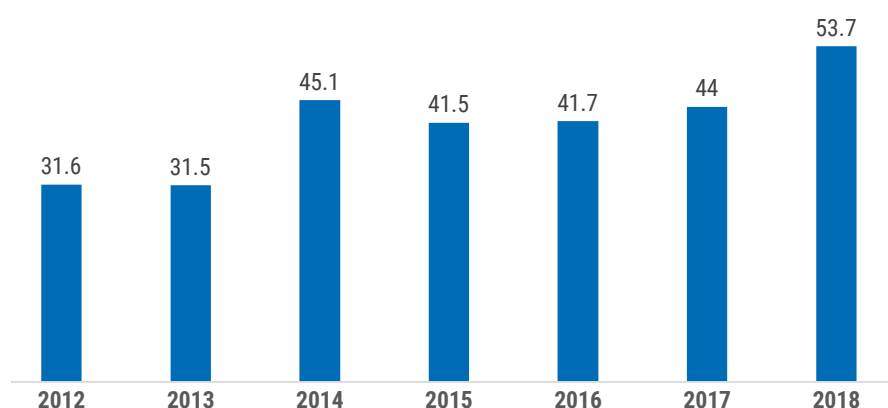
The exit of goods was banned entirely and only food, medical supplies and animal fodder were allowed to enter Gaza via Kerem Shalom without quantity restrictions. Imports of all other items, including building materials, furniture, wood, electronics and fabric were halted during this period, while the entry of fuel and cooking gas was stopped intermittently. As a result, the number of truckloads entering Gaza each day during this period was only one-third of the daily average during the first half of 2018: 149 vs. 450 truckloads.



This section was contributed
by FAO

Between 9 July and 15 August, the Israeli authorities tightened restrictions on the Kerem Shalom crossing and reduced the fishing area to three nautical miles.

GAZA UNEMPLOYMENT RATE IN APRIL - JUNE (Q2)



To a very limited degree, this was compensated by an increase in the entry of goods from Egypt via the Salah ad Din gate (near the Rafah crossing), which operated on 18 days. A total of 1,137 truckloads entered during this period, including, for the first time, 250 truckloads carrying cooking gas.

The construction sector is one of those most severely affected by the shortage of imported materials, particularly aggregates (gravel), which is essential for all construction activities. Prior to the restrictions, an average of 186 truckloads of aggregates entered Gaza every day. At the end of July, the Palestinian Federation of Industries in Gaza indicated that over 4,000 workers in the construction sector had been temporarily laid off, primarily due to the lack of materials. As detailed below, the ban on the exit of goods has also had a negative impact on the agricultural sector.

The tightening of the Israeli blockade has aggravated the already dire humanitarian situation in Gaza, alongside the dramatic rise in casualties, the longstanding energy crisis and the unresolved internal Palestinian divide. The Palestinian Central Bureau of Statistics (PCBS) recorded unemployment in the second quarter of 2018 (April -June) at 53.7 per cent, the highest ever recorded in the Gaza Strip. Moreover, of the approximately 244,000 people recorded as “employed”, about 62,000 are public employees on the Palestinian Authority’s payroll whose salaries have been cut since May 2017. Another 22,000 are employees recruited by the Hamas authorities who receive part of their salaries on an irregular basis. In addition, the sharp decline in the international assistance to the people of Gaza has further impacted the purchasing power, as staff were laid off and food or livelihood assistance significantly reduced.

Unemployment in the second quarter of 2018 (April -June) was 53.7 per cent, the highest ever recorded in the Gaza Strip.

Agriculture livelihoods undermined

The ban on the exit of agricultural produce from Gaza has had an adverse effect on farmers by reducing revenues from sales and adding to storage expenses. The closure also undermines the reputation of Gaza farmers and traders as reliable suppliers, and may affect their access to credit and potential decisions on planting and trading. According to PCBS, some 14,000 people were employed in Gaza’s agricultural sector in the second quarter of 2018.

Revenue from Gaza’s agricultural exports to markets outside the oPt (i.e. including Israel but excluding the West Bank) peaked in 2000 at almost \$46



million, but fell dramatically from 2008 following the imposition of the blockade (see chart). The blockade was enforced following the Hamas takeover of the Gaza Strip citing security concerns. While pre-blockade data on agricultural sales from Gaza to the West Bank are unavailable, these sales were banned entirely under the blockade. This ban was lifted in November 2014 following the ceasefire agreement, triggering an increase in revenues from transfers to the West Bank from \$3.6 million in 2015 to \$17 million in 2017.¹⁰



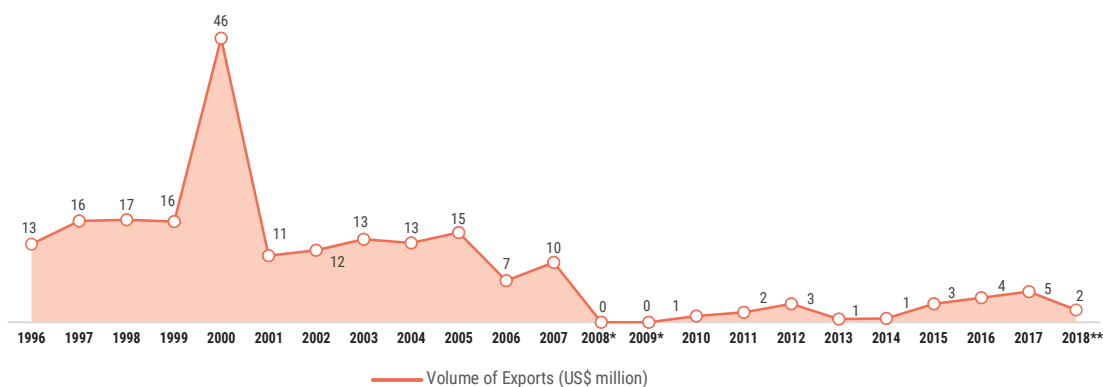
Due to the overall deterioration of the situation in Gaza, revenue from agricultural exports and sales in the first half of 2018 declined by about 17 percent versus the same period in 2017. Based on these data, it is possible to estimate that the recent ban on the exit of agricultural produce resulted in a loss of revenue of approximately \$250,000, or the equivalent of nearly 42,000 daily wages in the agricultural sector.¹¹

This estimate excludes other losses such as increased storage costs. For example, traders have been forced to store over 6,000 tons of potatoes in cold storage at a cost of \$22 per ton per month for the first three months, increasing to \$27 per ton per month during August and significantly cutting anticipated returns. Despite the easing of the blockade in 2014, the Israeli authorities' ban on the marketing of Gaza potatoes in the West Bank and Israel has remained in place, citing public health concerns: all the 2017 potato production was sold in Jordan. To capitalize on estimated demand, Gaza farmers planted 1,000 dunums of potatoes in 2018, and had expected to export thousands of tons between August and December to Jordan and additional markets such as Saudi Arabia and Iraq.

Uncertainty from recent restrictions has also affected farmers in the strawberry sector, one of Gaza's most valuable export items.

The uncertainty generated by the recent ban has also affected farmers in the strawberry sector, one of the most valuable export items. Given the increased risk of non-repayment, traders no longer provide inputs to farmers in the form of credit to be discounted from sales. This has forced farmers to shoulder the entire cost of

GAZA AGRICULTURAL EXPORTS AND SALES



Source: PCBS foreign trade data series and FAO trade database.

* A total of 33 and 21 truckloads of carnations were exported in 2008 and 2009 consecutively to Europe, the value of which is not available

**The figures for 2018 include exports up until 10 July.

planting. There is also rising anxiety among farmers about the potential impact of future import restrictions on the availability and price of essential inputs such as fertilizers and seedlings.

Gaza's strawberry season is from November to March, with land preparation starting in August and the planting season in September. During the 2017-2018 season, 1,265 tons of strawberries were marketed outside Gaza: 93 per cent traded to the West Bank, six per cent to Gulf countries, and one per cent to Russia and Jordan.

Despite this uncertainty and in the absence of alternative options, most farmers have taken the risk of planting strawberries in the hope that the crossing will remain open. The MoA expects that 1,200 dunums will be planted for the upcoming strawberry season, an increase of over 30 per cent from the previous season; therefore huge losses may occur if the crossing is closed again.

INFESTATION EXPECTED TO AFFECT OLIVE HARVEST IN THE WEST BANK

The 2018 olive harvest season will last approximately from mid-September to mid-November. However, a pest that infects olive trees, particularly in the northern West Bank, is expected to significantly reduce this year's yield compared with 2017 (see box). In recent years, the olive harvest has also been affected negatively by Israeli settlers stealing or damaging olive trees, and by restrictions on access by Palestinian farmers to olive groves behind the Barrier and near Israeli settlements.

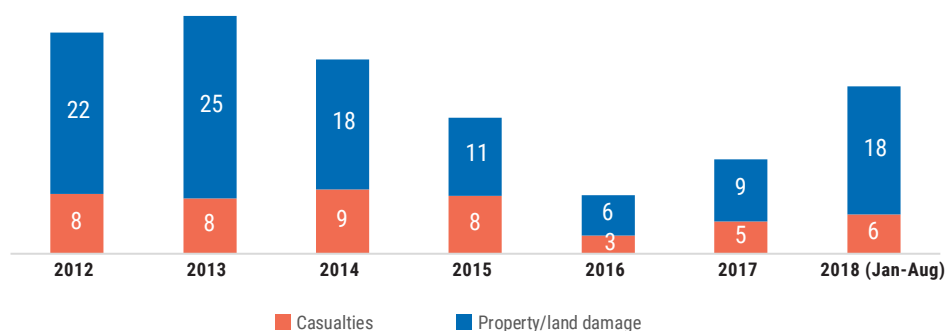
The annual olive harvest is a key economic, social and cultural event for Palestinians. More than 10 million olive trees are cultivated on approximately 86,000 hectares of land, representing 47 per cent of the total cultivated agricultural area. Olive and olive oil production is concentrated in the north and northwest of the West Bank. Between 80,000 and 100,000 families are said to rely on olives and olive oil for primary or secondary sources of income, and the sector employs

The forthcoming olive harvest may be seriously affected with 80 per cent of production at risk.

OLIVE PRODUCTION AT RISK

According to the Ministry of Agriculture (MoA), olive trees have been infected by an insect, the olive leaf gall midge, particularly in Tulkarem and Qalqiliya governorates in the northern West Bank. Based on initial estimates, the forthcoming olive harvest may be seriously affected with 80 per cent of production at risk. The MoA has requested NIS two million for surveillance and the study of the biology, behaviour, population density and infestation of the insect in close coordination with Palestinian universities and scientific research agencies. This money will also be used to distribute traps to prevent the uncontrolled spread of the insects. The MoA's main objective is to prevent the insect from spreading to other areas of the West Bank through a rapid plan of action that does not include the use of pesticides due to the negative effects on the environment and to the insect's natural enemies.

MONTHLY AVERAGE OF ISRAELI-SETTLER RELATED INCIDENTS RESULTING IN PALESTINIAN CASUALTIES OR PROPERTY DAMAGE



large numbers of unskilled labourers and more than 15 per cent of working women. The entire olive sub-sector, including olive oil, table olives, pickles and soap, is worth between \$160 and \$191 million in good years.¹²

The 2017 yield was projected to be 19,000-20,000 MT (metric tons) of oil – higher than the 16,000 MT in 2016 but lower than the 21,000 MT in 2015 and the 24,000 MT in 2014 – and worth between \$114 million and \$120 million.

Settler violence and vandalism

Olive-based livelihoods in many areas of the West Bank are undermined by Israeli settlers who uproot and vandalize olive trees, and by intimidation and the physical assaults on farmers during the harvest itself. After a decline in recent years, settler violence has risen again. In 2018, by the end of August, there had been 186 incidents that resulted in Palestinian casualties or damage to Palestinian property compared with 157 and 98 in all of 2017 and 2016, respectively.

Concerns persist about holding violent settlers to account. The Israeli organization Yesh Din has monitored over 1,200 investigations opened by Israeli police into ideologically motivated crimes against Palestinians in the West Bank between 2005 and the end of 2017 following complaints filed by Palestinian victims. Only eight per cent of these investigations have led to indictments and only three per cent have resulted in a conviction.¹³

To address these and other protection concerns, the Protection Cluster, chaired by the Office of the High Commissioner for Human Rights, has coordinated the deployment of a protective presence to support Palestinian farmers and their families during the olive harvest over the past six years. Last year, PC members identified 70 locations across the West Bank most affected or at risk of settler violence and coordinated coverage of these locations by 19 organizations.

Olive-based livelihoods in many areas of the West Bank are undermined by Israeli settlers who uproot and vandalize olive trees.

Restrictions on access to Palestinian land near settlements

The presence of settlements restricts access to Palestinian land for cultivation purposes. Approximately 90 Palestinian communities own land within or in the vicinity of 56 Israeli settlements and settlement outposts. In many cases, farmers can only access their land by means of ‘prior coordination’ with the Israeli authorities whereby access is generally permitted for a limited number of days during the harvest and ploughing seasons. As in previous years, many Palestinian farmers noted that the period of time allocated for the 2017 harvest was insufficient, that the Israeli army did not arrive at the designated time, or that part of their harvest or trees had been damaged by Israeli settlers during the period when farmers’ access to their own land was prohibited.

Permit requirements

Palestinian farmers require special permits or prior coordination to access farming land designated as ‘closed’ between the Barrier and the Green Line. If granted approval, farmers have to cross designated Barrier gates or checkpoints to reach the closed area. As documented by OCHA during the 2017 olive harvest, 76 gates were designated for agricultural access.¹⁴ Of these, 54 only opened during the few weeks of the olive harvest, and only for a limited period of time on those days, and remained closed the rest of the year. An additional 10 gates are considered ‘weekly’ in that they open for some day(s) of the week throughout the year in addition to the olive season. Only 12 gates along the completed 465 kilometres of the Barrier open daily. Of the 76 gates, 56 require access permits and 20 operate via prior coordination.

Only 12 gates along the completed 465 kilometres of the Barrier open daily.

To apply or renew a permit, the applicant must satisfy the security considerations necessary for all Israeli-issued permits. Many farmers are rejected on those grounds without further explanation. Applicants must also prove a connection to the land in the closed area by submitting valid ownership or land taxation documents. Some applicants are rejected on the grounds of ‘no connection to the land’ or ‘not having enough land.’ In the West Bank, the majority of land is not formally registered and ownership is passed over generations by traditional methods that do not require formal inheritance documentation. The land still constitutes a major source of income for successive generations.

OCHA monitors permit applications, particularly during the annual olive harvest when, according to the Israeli authorities, “recognizing the uniqueness and significance of the olive harvest season, agricultural employment permits beyond the set quota can be requested for members of the farmer’s family.”¹⁵ In the northern West Bank (Jenin, Tulkarm, Qalqiliya and Salfit governorates) where the majority of Barrier gates (47) and the only crossings which open on a daily basis are located, the approval rate for permit applications declined slightly from 58 per cent in 2016 to 55 per cent for the 2017 olive harvest,

in which a total of 12,582 permits were granted. Over 10,700 applications by farmers had been rejected or were still pending by the end of the olive harvest.

Impact of access restrictions on olive productivity

Access restrictions to land behind the Barrier and in the vicinity of settlements impede essential year-round agricultural activities such as ploughing, pruning, fertilizing, and pest and weed management. As a result, there is an adverse impact on olive productivity and value. Data collected by OCHA over the last four years in the northern West Bank show that the yield of olive trees in the area between the Barrier and the Green Line has reduced by approximately 55-65 per cent in comparison with equivalent trees in areas accessible all year round.

ENDNOTES

1. The initial appeal was launched on April 2018 for a period of two months but has been updated twice since then to reflect the increased needs up to the end of the year due to the demonstrations continuing beyond the initial timeframe and the outbreak of limited hostilities.
2. Figures as on 16 August 2018, Financial Tracking Service (<https://fts.unocha.org>).
3. The source for injury figures is the Palestinian MoH in Gaza. For further details on casualties see OCHA oPt snapshot (<https://www.ochaopt.org/content/humanitarian-snapshot-casualties-context-demonstrations-and-hostilities-gaza-30-march-9>).
4. Please refer to the 2018 Humanitarian Needs Overview and 2018-2020 Humanitarian Response Strategy documents for a detailed analysis. Both documents can be downloaded from the OCHA oPt webpage at: <https://www.ochaopt.org/page/humanitarian-response-strategy-2018-2020>.
5. WHO Situation Report, available at: healthclusteropt.org/admin/file_manager/uploads/files/shares/Documents/5b8cccc1b1383.pdf
6. Source: WHO monthly monitoring system.
7. WHO Situation Report, available at: healthclusteropt.org/admin/file_manager/uploads/files/shares/Documents/5b8cccc1b1383.pdf
8. Based on analysis conducted by the CPWG for the 2018 HNO.
9. Cerebral palsy is a group of permanent movement disorders that appear in early childhood.
10. FAO Gaza trade database.
11. The average daily wage in Gaza's agriculture, fishing and quarrying sectors is NIS 21.8 or nearly \$6.
12. PALTRADE, The State of Palestine National Export Strategy: Olive Oil, Sector Export Strategy 2014-2018, pp. 5-9. In a typical year, approximately 75 per cent of olive oil is absorbed by the domestic market, 14 per cent is exported to Arab markets and eight per cent is exported to Israel. <https://www.paltrade.org/upload/multimedia/admin/2014/10/5448e7bfb7b6d.pdf>
13. Yesh Din data sheet: Law enforcement on Israeli civilians in the West Bank, December 2017. <https://www.yesh-din.org/en/data-sheet-december-2017-law-enforcement-israeli-civilians-west-bank/>
14. This figure excludes Barrier checkpoints not used to access agricultural land but by residents of the "Seam Zone" to reach workplaces and essential services in the rest of the West Bank.
15. Unofficial translation from fifth edition of the 'Standing Orders' published by the Israeli authorities, which detail the regulations governing access to areas behind the Barrier.