



International Development Committee

Oral evidence: Humanitarian situation in Gaza, HC 110

Tuesday 14 November 2023

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Members present: Sarah Champion (Chair); Theo Clarke; Mrs Pauline Latham; Chris Law; Nigel Mills; Kate Osamor; Mr Virendra Sharma.

Questions 1 - 58

Witnesses

I: Sam Rose, Director of Planning, United Nations Relief and Work Agency for Palestinian Refugees in the Near East (UNRWA); Shaina Low, Adviser, Norwegian Refugee Council.

II: Yasmine Ahmed, UK Director, Human Rights Watch; Melanie Ward, Chief Executive, Medical Aid for Palestinians.



Examination of Witnesses

Witnesses: Sam Rose and Shaina Low.

Q1 Chair: I would like to start this evidence session on the humanitarian situation in Gaza. It has now been 38 days since the atrocious, appalling terrorist attack that was carried out in Israel. On the Tuesday after that, this Committee decided to do an evidence session looking at the humanitarian situation in Gaza. I rather think that, when we agreed that, we thought that we would be looking retrospectively at what had happened and how the international community could help, on a humanitarian level, to rebuild the infrastructure in Gaza that had been destroyed. I do not think that any of us anticipated that we would be in the place that we are in now, and it feels extraordinarily challenging to watch what is going on and sit on our hands.

It is also challenging to get first-hand, verifiable information, so we are very grateful to the representatives from the four organisations that are on the ground for coming before us today to tell us their truth as they see and experience it. Thank you very much for that. Our first two panellists are coming to us virtually, from Jerusalem and Jordan. Could I ask you both to begin by introducing yourselves, your organisation and the main areas in Gaza in which you work right now.

Shaina Low: Thank you for having me. My name is Shaina Low, and I am the communication adviser for the Norwegian Refugee Council. We have a little over 100 staff working in the Occupied Palestinian Territory and 54 staff working in our Gaza office. We have been operating in Gaza for almost 15 years.

Since 7 October, our operations have been very limited because of the lack of safety that we can guarantee for our staff, but we are continuing to work as much as we can, providing cash assistance to some of Gaza's most vulnerable families so that they can continue to purchase goods that they need, so long as there is a functioning market in Gaza. We host the Shelter Cluster, which co-ordinates interagency action related to shelter, and are working to procure goods to help repair and winterise homes, as winter is fast approaching in Gaza. We lead the Gaza Protection Consortium, which is made up of four international agencies working to provide cash and additional services to help Gaza's vulnerable families meet their basic needs. We are also managing a couple of sites in Gaza that are hosting displaced persons, which are not UN-operated sites.

Sam Rose: My name is Sam Rose. I am the director of planning for UNRWA, based in our headquarters in Amman. We have very large operations in the Occupied Palestinian Territories, dating back to about 1950.

We have 14,000 staff in Gaza, about 5,000 of whom are currently working and have been since 7 October, delivering our emergency



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response, which is focused on support to displaced families and persons in shelters—refugees and non-refugees. We have about 800,000 people now in UNRWA shelters across the Gaza Strip. UNRWA is providing basic services to those families in the form of food, working with WFP to get bread. There are health services provided in the shelters. There is protection support as well in terms of monitoring the needs of particularly vulnerable groups. We continue to operate nine health centres in middle and southern Gaza seeing several thousand people each day, where people are able to get to those clinics.

We have also been playing a role on behalf of the wider humanitarian community when it comes to support for trucks of aid coming in. While fuel has not been coming into Gaza since 7 October, we have been playing a role in ensuring that fuel that has been available in Gaza is distributed to hospitals and desalination plants, and to bakeries to allow the baking of bread.

Pre 7 October, we were a real part of the firmament of Gaza. UNRWA has been there for 75 years, providing protection and assistance to a population of 1.7 million Palestine refugees and, in normal times, running schools, health centres, solid waste management and micro-loan programmes, et cetera. We have had longstanding emergency aid programmes that have increased in the current context.

We also have large operations in the West Bank, with about 4,000 staff there. In the interest of time, I will not go into those, but I am happy to provide more information over the course of the evidence session.

Q2 Chair: I describe UNRWA to people as like a local authority system; is that an accurate way to think of it? Are the staff that you have international or a mix of international and local people?

Sam Rose: We are a bit like a local government or municipality in the sense that we provide education and health services. We do not have our own means of generating revenue from the population. We rely almost entirely on voluntary contributions from the United Nations and some from the private sector. The only bit of assessed contributions and regular funding that we get from the UN is, indeed, for our international staff.

UNRWA is quite unique among UN agencies in the sense that it delivers services directly. Right now, we have 14,000 personnel inside Gaza. All but about 20 of those personnel are Palestinians. They are refugees, predominantly drawn from the communities that they are serving and assisting.

If I may just pay tribute to those staff and the losses that they have experienced in the past 35 days or so, 102 of our staff have been killed, which is close to 1% of UNRWA staff. It is a tragedy of immeasurable proportions. Everyone has lost someone. Everyone has lost a family member, an extended family member, homes, property and livelihoods.



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Everything has just been wrenched away from them. We are an organisation that is delivering but also one that is grieving.

Chair: UNRWA is providing MPs with an update each day, and I look in horror as that number is going up and up, so thank you for your tribute and thank you to all of the amazing UNRWA staff, as well as to the charities and NGOs that are working out there in just the most extraordinary situations.

Q3 Nigel Mills: Can you just let us know how bleak you think the situation is? I am assuming that this is the worst that it has probably ever been in Gaza. How close are we to this becoming a really disastrous situation?

Shaina Low: I am in touch with members of our staff daily. They have lived through multiple escalations in Gaza and have said, day after day, that it is the worst day of their lives. Each day gets worse and worse, and nothing compares to previous escalations.

We are hearing about hours-long bread lines, when there is even bread to be found. Yesterday, my colleague Yousef told me that they have run out of yeast and that they are having to find alternative sources of fuel in order to bake homemade bread. Shops in the south and centre of Gaza are quickly running out of supplies that have not been replenished.

The amount of assistance that is going in is nowhere near what is needed to meet people's basic needs. We still have hundreds of thousands of Palestinians estimated to be in northern Gaza and Gaza City, as they continue to flow from north to south. We hear that there just are not facilities to accommodate these people. Shelters are bursting at the seams. For the first time ever, Gaza has a homelessness population, because there simply are not enough places for people to stay.

My colleague Yousef told me last week that 25 members of his family came from Jabalia and Al-Shifa hospital down to Khan Yunis, where he has been staying for a month. He had to sleep in a car, because there simply was no space. They are eating only a small breakfast and a late lunch in order to help their food supplies last longer.

In terms of the response that we have been able to provide, it has been so limited, in part because our staff are focused simply on taking care of their own basic needs and making sure that they and their families are okay. Like staff at UNRWA, we have lost members of our staff's families, including one of our colleagues, Amel, who lost her only child, a seven-year-old boy, who was killed in an air strike on Rafah three weeks ago.

We are hearing that people are terrified and that they have no safe place to go. While we are hearing about the bombardments in the north, there are bombardments ongoing in the south, which was where Palestinians were ordered to go a month ago, ostensibly because it would be safer. When I was on the phone with Yousef—I think it was last night—we could hear explosions happening nearby to him as the bombardments continue. There is simply no safe space.



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Day by day, as fuel and other resources run out, connectivity is increasingly becoming an issue. We have already had a number of blackouts where we have lost contact with our staff. We continue to find it difficult to remain in contact with our staff and are very concerned that, this week, as no fuel has been delivered in over a month, the telecommunication systems will completely collapse. Not only will we not be able to be in contact with our staff, but we will also not be able to coordinate any type of humanitarian response to others who are in need as well. That is very disturbing, very troubling, and something that we have grown increasingly concerned about as supplies run out.

Sam Rose: If I may just add to what Shaina said, this is on a scale that we have never seen before. Shaina referred to some of the numbers. There are 800,000 people in our shelters. That is triple what we had in 2014. I have lived and worked in Gaza for the last 20 years, and lived through the second intifada and many of the previous conflicts, and this is on a completely different scale, in terms of the level of destruction, the level of carnage, the fact that nobody in Gaza feels safe, the fact that we all wake up every day with ire and dread about what is coming next. Essentially, Gaza is being subjected to a feudal siege that. We have never seen anything like that.

There are concerns in terms of the immediate future but also what comes next. We have populations that have never been displaced before. Typically, in the past, it has been refugees in camps who have been displaced. For the first time, we are seeing large numbers of non-refugees who are now being displaced. 1.65 million people are currently displaced across the Gaza Strip, and the situation is such now that, as Shaina said, the bombing is everywhere. People are starting to move back from the south to the north, because if there is nothing in the south, they may as well move back to the north.

Finally, what we have seen that is different this time is the widescale destruction inside Gaza City in terms of the more middle-class areas that have also been flattened to a large extent. We did not see that type of damage and destruction in the past.

Q4 **Nigel Mills:** Our new Foreign Secretary, in relation to a previous blockade, described Gaza as a giant prison camp. You would say that this time that description is nowhere near enough and that it is far worse than that now.

Sam Rose: I would not even characterise Gaza as a prison camp. People go to prison when they have done something wrong. We have a situation now where our staff are telling us, "We are being killed just because we are Palestinian." I know that the analogy is out there. People are describing it as an open-air cemetery, quite frankly.

Q5 **Nigel Mills:** In terms of getting aid in, we are hearing that a bit more is getting through, but can you get it to where it is needed, or is there just not the capability now to move it around?



Sam Rose: It is multiple things. Before the crisis, before 7 October, we had about 500 trucks going into Gaza every day. Around 7% to 10% of those were humanitarian assistance. We had a large-scale humanitarian assistance programme before the conflict, where UNRWA was assisting 1.2 million people with quarterly food rations. Now, we are down to about 100 trucks a day. It started at 20. It is very restricted in terms of the items that are allowed to get in, and limited to food and medicines. Some water has been allowed in. A whole range of supposedly dual-use items are not being allowed in. Critically, no fuel is being allowed in, which means that, even if the security situation allows that aid to be distributed, there are not the assets to move it around.

The situation is improving at el-Arish in terms of that absolutely critical relationship with the Egyptian Red Crescent Society. The other point in relation to aid is that, in line with international humanitarian law, we are calling for all aid agencies to have free movement to distribute aid wherever people are. That means north of Wadi Gaza, and our ability to even assess the situation north of Wadi Gaza now is extremely limited.

In short answer to your question, there are real challenges in distributing that aid. We have been doing what we can, but, unfortunately, given the depletion of fuel, we will be running out of fuel in the coming hours, and all those operations will stop unless more fuel is allowed to come in.

Shaina Low: If I might add here, it is not just about having the fuel to reach those places; it is also about humanitarians having safe access to reach places. This is why we so desperately need a ceasefire. We need an end to the violence. It is irresponsible of us to be sending humanitarians to go and distribute aid if they cannot do so safely or if the people in need cannot access distribution points safely. We desperately need there to be a ceasefire and an end to the violence, so that aid can reach people who need it as well.

Q6 **Chair:** Shaina, do you still see your staff in Gaza as staff or are you now seeing them as victims of what is going on?

Shaina Low: Everyone in Gaza is a victim right now. There is no safe space. Incredibly, we do have staff who are still somehow doing their work, fulfilling their obligations, working to co-ordinate with partners to make sure that we are reaching and helping communities as best we can, and ensuring that when more aid is allowed in that we can distribute, we have the systems in place to effectively do that distribution.

For us, our staff are in a position where they are in need of assistance and struggling to find the things that they need, and also trying to do the best that they can to serve those in need as well, just as Sam's incredible colleagues in Gaza are. We are all struggling to find that balance of what we can be asking our staff to do versus what is realistic, given the constraints that they are trying to work under, including challenges with just even getting an internet connection or having a regular phone service.



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It is also why we need to be able to allow staff to go into Gaza to help with the distributions, but, again, we need it to be safe. We need assurances of safety and the ability for outside staff to come in and do their work without concerns that they too will become victims under the ongoing bombardments and escalation.

Q7 Theo Clarke: Shaina, what steps need to be taken to ensure that aid is being delivered directly into the hands of those people needing it the most in conflict zones?

Shaina Low: First of all, we need the aid to get in. That is the most important thing. We need aid inside of Gaza. We need a massive scaling-up of what is able to come in. We need goods not just to be coming through the Rafah crossing. We need the Kerem Shalom crossing to be reopened. There are screening capabilities there. The current screening process in Nitzana in Israel is very cumbersome, so we need international assistance for the UN to take over that screening process.

In terms of what happens once the aid gets into Gaza, we have been working in Gaza for almost 15 years; the UN has been working there for 75 years. Partner agencies have a lot of experience in terms of vetting beneficiaries and the partners that we work with and making sure that aid goes to those who are in need and who are vulnerable.

In terms of the aid that NRC is providing, none of those items is dual-use. They are all food items, or non-food items like mattresses, blankets, hygiene kits, sanitation kits and things that really are just desperately needed and basic essentials to help the civilian population survive.

Sam Rose: I agree with everything that Shaina said. In addition, fuel is absolutely critically needed, because without it nothing can happen. Without it, the desalination plants that pump water everywhere in Gaza, essentially, cannot work, the bakeries cannot bake bread, and the communications run out, et cetera, so that is needed.

In terms of the uninterrupted and regular supply of aid coming in, Shaina talked about the conditions at Rafah, which as it is was not built to bring in large quantities of aid. It was an export and passenger terminal. The checking mechanisms are happening in Nitzana now, but it is a very delayed process. In terms of opening additional crossing points for aid, Kerem Shalom has been used in the past.

We also need to somehow get away from this metric of talking about numbers of trucks and amounts of fuel, and really talk about the catastrophic situation, as we just seem right now to be in this trap of counting things. It has always been the way in Gaza that the procedures that are in place force us into that way of thinking, but it constrains our ability to describe the real needs on the ground and to present and portray this from the perspective of the real human and humanitarian impact.



We also need to insist on aid being distributed to people wherever they are and to push back categorically from this assessment of safe zones. About a third of our colleagues who have been killed were killed south of Wadi Gaza. About two-thirds of UNRWA's 300 buildings have been hit, and two-thirds of those have been damaged in the so-called safe zone, so we also need to continue pushing back in relation to that construct of a safe zone inside Gaza.

Q8 Theo Clarke: You mentioned very clearly the situation with fuel and food, but could I also ask about the impact of the conflict on providing healthcare in Gaza?

Sam Rose: I know that MAP UK will be coming in the second half of the session, and they are much more qualified than I am to talk about that. We have run primary healthcare services in Gaza as UNRWA. We have 22 clinics that are generally seeing about 4 million patient visits per year. As I said earlier, we are now down to nine clinics in the middle and southern areas. We also have dozens of health teams that are visiting the shelters that we are managing.

There are the bare bones of primary healthcare services that are continuing, but we are seeing real increases in communicable diseases as a result of the breakdown of the sanitation system and the lack of solid waste management, and an increase in diarrhoea and things of that nature. We have real concerns that that will only continue to rise and to explode as the few remaining public health services that have continued grind to a halt over the coming days.

Q9 Theo Clarke: Shaina, could you also just pick up on the impact that the conflict has had specifically on healthcare workers in addition to the people who were already in need of medical help and are now in a conflict?

Shaina Low: We do not work in the healthcare sector at NRC, and so you are better off asking the representative from MAP in the next panel.

Theo Clarke: We will do that. Thank you very much.

Q10 Chair: Sam, you said that we should not be obsessed with counting things. What should we be obsessed with?

Sam Rose: We need to care about that, but we need to be looking more at the real issues and the humanitarian impacts on the people on the ground and the 2.2 million civilians inside Gaza. We have fallen into this trap many times in the past, during previous rounds of conflict in Gaza, with the way in which the system is designed in terms of how aid gets in with these Byzantine checks of aid. It just risks us falling into a trap where we think that we are doing a good job and getting what we need to get, but 100 or 200 trucks, or whatever it might be, are not enough. It is the siege that needs to be lifted. I understand why we are doing it, but the risk is that we fall into looking at the wrong metrics, and the metrics are the humans, not how many mattresses fit in a truck.



Q11 **Chair:** You also said that two-thirds of the UNRWA buildings that had been damaged were in the safe zone. Did you get notification of the bombings that caused that?

Sam Rose: No. Two-thirds of the UNRWA installations that have been impacted are south of the Wadi Gaza line. The majority were impacted by collateral damage; a few sustained direct hits. I am just looking at the numbers now. Four have sustained what we know of as direct hits. Our read on the situation in northern Gaza now is extremely limited or non-existent. I am not aware of warnings that were received, certainly in relation to the collateral damage, which are the majority of cases. The reality of the built-up area inside Gaza means that, as soon as you embark on a military operation like this, the type of damage and the mass loss of human life that we are seeing is simply inevitable.

Q12 **Kate Osamor:** Thank you, Sam and Shaina, for the answers that you have given us thus far. I want to focus on food insecurity and access to water. It is really important that people who are watching this understand how difficult it is for Palestinians to get access to food and water. It is clear that access to sufficient food and safe water has worsened since the conflict. Can you explain to us how important bakeries are along the strip? We know that they have been bombed and that it is very difficult for people to get food. I am smiling, but I know that, in terms of culture, bread is very important to Palestinians and people in the Middle East. More importantly, how are you able to support those people who are trying to get access to food?

Sam Rose: You are right. The Arabic word for bread is either “khubz” or “aish”. For those of you who do not speak Arabic, “aish” is, essentially, the word for “life”, so it does have this symbolic resonance in the Palestinian community and generally across the Middle East, or at least the western part of the Middle East. Before 7 October, we would normally be distributing dry rations to about 1.2 million people inside Gaza, as I said earlier, so about two-thirds of the refugee population. We had flour stocks in stock for about 500,000 people when 7 October happened, and we had other amounts of flour on the way.

Given the displacement, we set up a system working with WFP, where the flour was being provided to bakeries, and the bakeries were baking the bread. That was then being made available at a subsidised rate for families and the people of Gaza, and was also being provided to families inside UNRWA shelters. These are bakeries with which WFP had previous agreements.

I just got off a call with WFP, and they were announcing that, as of about three o'clock today, the last of the 24 bakeries that they were working with through contracts with them in Gaza had stopped functioning. My guess is that it stopped functioning for a couple of reasons. One is the lack of clean water to bake the bread, but it is also the lack of fuel and the liquid petroleum gas that the bakeries need to bake that bread.



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It has a real symbolic value, as I have said, among the population of Gaza, but what we are hearing from staff in the past few days is that it is not bread that people are talking about. They are talking about water. People are walking around with jerrycans, desperate to find water, so it is really getting down to the bare minimums of life.

Shaina Low: If I might add a bit about what we are hearing from our staff on the ground, aid is being distributed to the shelters where people who have been displaced have congregated. Many people are being hosted by families in the south, and those people do not have access to the same level of humanitarian assistance and are relying on the local markets. What we are hearing from our staff is that there is no cooking oil, rice or flour available in markets, or that they are very difficult to find. There is a gap there where these people who are being hosted or who are hosting cannot find things that might be found in some of the more formalised shelters that are hosting internally displaced people.

Q13 **Kate Osamor:** Sam, how could access to water be improved in the short term?

Sam Rose: Access to water in the short term needs a resumption of fuel supplies. 97% of Gaza's water is not fit for drinking, so the water in Gaza pre-conflict was being provided through three pipes from Israel. I do not have the latest status of those pipes. I know that, for long periods, none was on, or one or two were on, et cetera. In short answer to your question, it is the fuel that is absolutely essential to get those desalination plants running, so that the water wells can be replenished, the bakeries can start functioning and the solid waste management services can resume.

Q14 **Kate Osamor:** Shaina, in regard to families who are hosting families and not getting any of the aid, how can the message get out so that they get support and are able to access the aid if it does get through?

Shaina Low: First of all, we need to have access and safety for our staff and those from other humanitarian agencies to go and do assessments. Right now, even in the site that NRC is working in, it is very difficult for us to be able to gather information to understand what people's needs are. Once that information is gathered, we can do a better job of figuring out how to distribute that assistance. Right now, the amount of assistance that is coming in is not enough to reach those communities anyways.

Q15 **Kate Osamor:** Lastly, if there is no access to clean water, if the sewerage breaks down and if there is no food, what will Gaza look like? How will it affect the people who are there now?

Shaina Low: We are already hearing about reports of these communicable diseases spreading and waterborne illnesses from people drinking unclean water. Early on, two or three weeks ago, my colleague Yousef's two-year-old son had diarrhoea and was vomiting due to what they described as intestinal influenza from drinking unclean water. We



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had days where our staff were telling us that they were drinking Coke, because that was all that they could find because there were no water sources.

What we are hearing from the north is that there are worries already about malnutrition and people not having enough. We are seeing people slowly start to starve, and we have grave concerns about food insecurity and what will happen to our staff and to the people who we are trying to serve.

Q16 **Kate Osamor:** Are there any cases of someone passing away due to starvation at this point?

Shaina Low: I am not the right person to be asking that question to, but the speaker from MAP might be able to address some of the concerns around malnutrition.

Q17 **Chair:** Shaina, you said at the beginning that you were still making direct payments in some cases, so that implies that there are still markets where you can buy food. Is that correct? How is that food getting in? Is it locally produced?

Shaina Low: Some of that is food that was already in stock and is being put on shelves. My understanding is that, in the south, in Khan Yunis and Rafah, there still is produce that is available and coming to market, which is locally produced. We know that there is only a short window in which the cash assistance that we are providing will be effective, because, once supplies run out, there is no replenishment. Even the small number of trucks that are coming in—on average, about 40 trucks per day since 21 October—carry only humanitarian assistance. Nothing is going on the commercial market, and so we desperately need not only a scaling-up of aid but also the allowance of goods that will be sold on the open market, because that also will keep Gaza's economy functioning to a limited extent.

Q18 **Mr Sharma:** Sam, what impact has the conflict since 7 October had on access to energy in Gaza?

Sam Rose: In simple terms, it has been cut off as part of the siege that has been effected on the Gaza Strip. I cannot remember exactly when the electricity supply was cut off, but it was within two or three days of the conflict. The fuel supplies were also cut off immediately. The fuel that was available inside Gaza on 7 October was under strict instructions not to go and support the Gaza power plants.

We have also seen repeated communication breakdowns, when communication lines have been cut, which makes life impossible in an already impossible situation for us, as aid agencies concerned with the welfare of our staff and operations, but, more importantly, the sick, the wounded, and those needing to get to the few hospitals that are still functioning, who are simply unable to get there. The energy system has



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really collapsed with the blockade and with the siege that has been imposed.

Q19 **Mr Sharma:** Sam, you have already partially answered my next question, but how has this affected critical infrastructure in Gaza?

Sam Rose: It has affected it desperately. In terms of the percentage of homes destroyed or reduced to rubble, I do not have the precise figures in front of me now, just because the numbers have become so large and fluid, and we are constrained by the lack of access in the north. We are seeing whole city blocks, refugee camp blocks and multistorey buildings completely flattened.

It was touched on a bit earlier, but one challenge that we have with distributing aid is that the roads are impacted. The lack of electricity means that there is no street lighting as well. We are seeing major damage to homes, public infrastructure, sewage plants and critical infrastructure in terms of schools and health centres, et cetera, as well as to agricultural land and other stuff that will need to resume as well. The human, physical, psychological and physical infrastructure impacts are massive and on a scale that we have never seen before.

Shaina Low: In terms of the buildings that have been damaged or destroyed, the Shelter Cluster reported last week that an estimated 40,000 housing units have been destroyed or rendered uninhabitable, and 220,000 additional units have been damaged. Those figures are from a week ago and, of course, the bombardment has continued. This is about 50% of the housing stock in Gaza. It is just unimaginable to think that, when there was already a shortage in housing and a substandard housing crisis in Gaza, 50% of the housing is now damaged or destroyed.

Q20 **Mr Sharma:** How could access to electricity be restored in the short term?

Sam Rose: It is the issue of the fuel coming back in. Much of Gaza relies on generators. In the long term, it needs a resumption of fuel to the power plant, but, in the immediate term, any kind of resumption of fuel to get the machinery running again.

Shaina Low: Prior to 7 October, Israel was supplying Gaza with some of that electricity. Israel has a responsibility as the occupying power controlling Gaza to provide for the basic humanitarian needs and needs for survival of the protected Palestinian population. They should be restoring the electricity. If they are unwilling or unable to allow humanitarian assistance in, they need to allow for others—humanitarian and UN agencies—to get that assistance in. It is important for us to be continuing to call on Israel to end the total siege, to restore electricity and water, and to allow for the unencumbered access of humanitarian assistance into Gaza.

Q21 **Mr Sharma:** Sam, another side during the conflict is access to the internet and other forms of communications in Gaza. In what way has



that had an impact?

Sam Rose: There are a few things. The lack of electricity means that people are using their communications very sparingly. What we are getting are very short messages from people over WhatsApp or whatever, when they have had an opportunity to charge their phone. As I mentioned earlier, in terms of security and operations, that really has life-saving impacts on people who are unable to reach hospitals or call ambulances, et cetera, or to get accurate information about the situation.

We have also seen an overnight outage of the internet on three occasions, which coincided with major ground operations or major overall operations by the Israeli forces. That brings additional fear and terror to people.

The final thing is that there are three mobile phone providers in Gaza—Paltel, Jawwal and Ooredoo—and they have all reported that, as of Thursday, they will shut down operations because of a lack of fuel. Some of our staff in our operations have satellite phones. Some people close to the Egyptian border have Egyptian SIM cards and have some form of communications. For the overall understanding of the situation and the ability of the population to move and do the very little that they can do, a lack of communications will be absolutely catastrophic.

Q22 **Mr Sharma:** What impact is the level of access to the internet having on the wider humanitarian situation?

Shaina Low: For the Norwegian Refugee Council, it is about the basics—just communicating with our staff and being able to account for our staff. Our daily headcount sometimes takes more than one day to complete. In terms of being able to reach communities that we are not able to access on foot and get an assessment of what the needs are and how we might be able to provide assistance or co-ordinate with local partners to provide assistance, it is increasingly difficult.

Yesterday, one of my colleagues told me that it took another colleague 100 tries for them to connect over the phone, because connectivity is so difficult, not just over the internet but also regular phone-to-phone communications. For humanitarians, co-ordination is what we need to be able to do. The Office for the Coordination of Humanitarian Affairs has the motto, “Co-ordination saves lives”. Without the internet or connectivity, we are unable to co-ordinate and provide the life-saving support that we so desperately want to in order to help the people in Gaza.

Sam Rose: It constrains our ability to get the stories and the testimonies out of what people are going through on the ground. We have almost no sight of what is happening north of Wadi Gaza. We have the witness statements of our staff and people who have come down, but we have almost no visibility on what is happening there. It really impacts our ability to describe and portray the human impacts, as well as what Shaina



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already described very well in terms of humanitarian operations, planning, reporting and monitoring, et cetera.

Shaina Low: We do not have satellite phones in the way that a handful of UNRWA staff have. As Sam mentioned, we expect this communications blackout to occur on Thursday. Not only will we have no way of communicating with our staff, but, without any fuel, we have no means to even go and physically check on them and do any type of co-ordination in person.

Q23 **Mr Sharma:** What impact is it having on the ability to provide humanitarian support?

Sam Rose: The biggest challenge that we are facing in relation to providing humanitarian support is just the lack of fuel, the lack of materials and the lack of security. It does create obstacles and constraints, particularly for people with particular vulnerabilities and those with constrained access. Gaza's population is 50% children, as we know, but there are the elderly and levels of disability that we see anywhere in the world. There are unaccompanied minors and unaccompanied elderly people.

If you were to put yourselves in a situation as you would be in the UK without your phone and how lost you would feel, and if you were to try to put yourselves, as difficult as it may be, in the shoes of someone in a war situation and what that means, it adds to the layer of fear, dread and disconnect. People hear what is going on, they see what is going on and they feel what is going on, but they do not have communications about what is happening.

For us, it is more the links between our headquarters staff and our field. It makes it much more difficult to co-ordinate the distribution of aid, because everything in Gaza has to be co-ordinated with the parties to the conflict right now. The minute that there is a breakdown in that communication, it becomes much more difficult. It is the fundamentals around fuel and around the paucity of materials that are coming in that mean that it is difficult to look at the lack of communications in isolation. We certainly reduced services on those nights and days when communications were down, but there are other issues as well, as I said.

Q24 **Mrs Latham:** Shaina, since the conflict started on 7 October, what impact has it had on the children of Gaza?

Shaina Low: Children in Gaza have gone through so many of these escalations. This is the third escalation in two years. Each time that they happen, children are by far some of the greatest victims, because they have no say in any of this and are experiencing all of this trauma.

For more than 10 years, NRC has been providing its Better Learning programme to help children who have experienced trauma cope with that trauma and work to reach their academic potential. Right now, every child in Gaza is suffering. When I speak to my colleagues who have



children, they talk about how difficult it is. Even my colleague Yousef's two-year-old son was saying, "I am scared. I am scared," when the bombardments were happening. No two-year-old child should know what a war sounds like or looks like. For them, at the beginning of this, they were able to convince two-year-old Ahmad, "It is just fireworks outside", or a thunderstorm. Their five-year-old daughter, Iliah, already understood what was going on.

On top of the horror of hearing the bombardments and seeing all of the killing and the destruction, you also have children who are seeing their parents be completely helpless and unable to help them in any way. They cannot protect them from the bombardments and are struggling even to find basic necessities. For children, it is not just about hearing the loud noises or seeing scary things. Many children no longer have homes to be in, and those who do have do not feel safe or protected in them. They have lost all of that innocence that every child should be entitled to. They should have that protection from experiencing war.

Q25 Mrs Latham: What humanitarian aid is getting to the children? Is it sufficient?

Shaina Low: The mental health and psychosocial support that children can receive is limited to what can be provided in shelters. If there are humanitarian agencies that have mental health or psychosocial support facilitators in those shelters, they are able to provide some degree of support for children, but the limitations on what is getting in are really down to basics in terms of food, water and medicine. We are working just to meet people's basic food and water and medical needs, and there has not been enough of an ability to do mental health and psychosocial support for any of the population.

When you compound the fact that it is very difficult, some of these services might be able to be done virtually but for the fact that connectivity is such a challenge right now. Even if people cannot meet in person, it is very difficult to provide those types of services remotely when we cannot even consistently get in touch with our own staff just to co-ordinate distribution of food or non-food items.

Sam Rose: In 2021, the UN Secretary-General described Gaza as the worst place on earth to be a child. Save the Children brought out a report last year, saying that already 80% of children in Gaza were living with depression, grief and fear. It is such an abnormal environment in Gaza that people have been growing up in.

If you are a 17-year-old or 18-year-old in Gaza, you have lived through four or five conflicts. You might be going to an UNRWA school that is already set up to turn into a designated emergency shelter in the event of a conflict or in the event that you will be displaced. That means that there are solar panels and desalination facilities. There are dividers that allow men and women to live in separate quarters and for privacy to be respected, et cetera.



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The situation pre 7 October for children in Gaza was already catastrophic, with very few prospects and the highest levels of unemployment anywhere in the world throughout the 21st century, particularly among young people. They were already growing up in a difficult environment, and what they are facing now is unimaginable.

Just to add to what Shaina said, in terms of providing psychosocial support in a situation where, first, people are scrambling to stay alive and have much more basic and immediate needs to tend to, the only counsellors who are available are themselves traumatised and, in large part, in fear of their lives. The physical as well as the mental health burden that we will be faced with, once this comes to an end, will be on an extremely large scale.

Q26 **Chair:** Sam, did you say that, before 7 October, 80% of children in Gaza were suffering from depression, grief and fear?

Sam Rose: Yes. Save the Children brought out a report in June 2022. I can quote you the first line: "15 years of life under blockade has left four out of five children in the Gaza Strip reporting that they live with depression, grief and fear".

Chair: That is just extraordinary.

Q27 **Chris Law:** Thank you, Shaina and Sam, for your harrowing testimony so far. I wanted to turn your attention to refugee camps. Many people here have already visited refugee camps in different parts of the world. We think of them as places of safety and places of refuge, and yet Maghazi, Bureij and Jabalia—if I have that correct—have seen over 200 deaths. Can you tell us what the situation is in those refugee camps? Is there any safety whatsoever under the current circumstances?

Sam Rose: You are right. Jabalia is the name of the camp, but you can be excused. These are not refugee camps in the traditional sense that you would think of. They were refugee camps with tents in the 1950s, when the Nakba took place after 1948, but they have been turned into large concrete cities and towns, in many ways. Jabalia had a population of about 90,000 people, and yet we have seen large-scale operations in many of the refugee camps. You mentioned Jabalia, Bureij and Maghazi, and we have seen strikes on Khan Yunis and on Beach camp.

Like other places, nowhere in Gaza is safe right now. We have seen operations inside camps in the past, given that about a quarter of the population of Gaza lives in these refugee camps, and some of the objectives of the operations have been focused on some of those. Many people are not in their homes. There are about 800,000 people in UNRWA shelters and about a million overall in UNRWA and other shelters. Many of those camps have been vacated, just as many other areas of the Gaza Strip have.

We have not had any detailed readouts of the situation in the camps north of Wadi Gaza—Jabalia and Beach camp—since the evacuation order



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was issued overnight on 12 October, so we are seeing the same visuals that you are seeing from the TV, and maybe the same satellite imagery as well.

If I may briefly touch on the situation in the West Bank, we are also seeing large-scale military incursions and operations into a number of refugee camps and into a number of non-refugee areas inside the West Bank that are proceeding and are somewhat below the radar, given the scale and the gravity of what is happening in Gaza. The closure in the West Bank is also extremely worrying and on levels that have not been seen since the worst days of the second intifada.

Q28 Chris Law: How do you prioritise humanitarian aid, given the sheer scale of refugees now? Maybe it was a little more quantifiable or easier before this current crisis, but how do you even go about finding and supporting those refugees, and what are the issues that you face?

Sam Rose: A lot of the assistance now is focused on the shelters, and people inside those shelters are one element of it. As I said, there are almost 800,000 people—refugees and non-refugees—currently in shelters, and that is the focus of where much of the aid is being provided, rather than the regular distributions that we would do beforehand. We run several distribution centres around Gaza, where people would come to and collect their quarterly rations. That halted immediately, so a lot of the focus is on the shelters.

A second thing to say is that nine health centres are still operating south of Wadi Gaza. If people are able to get to those, services are provided. We initially tried telemedicine services, which we started up during the Covid days, but it just was not possible to sustain those.

The other piece is the support and the work that we have been doing with bakeries, at least until they started shutting down, in terms of pushing the flour out that we have inside our warehouses to the bakeries to allow them sell the bread at extremely subsidised rates.

You are right that providing assistance right now to families in their homes is very difficult.

Q29 Chris Law: My second question is really about context. Many people see this as happening since 7 October. I was just looking back at a UN report from three years ago, back in July 2020, by a special rapporteur who declared that it was collective punishment. Is it your position that what you see now is an escalation based on what happened on 7 October rather than standalone circumstances? What are your thoughts on the UK's response so far and how effective that has been?

Sam Rose: As the UN Secretary-General said, we all condemn the atrocities of 7 October, but this did not happen outside of context. There is a context of over 50 years of occupation since 1967, and closure and blockade on the Gaza Strip dating back to 2007. Even before that, a vast



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majority of the population were dependent on aid, not because of dependency but because of the fact that there were no alternatives.

This is much more than an escalation. Others have described it as this violent equilibrium whereby the situation was being managed by quantities of aid and funding that was coming in. The conflict was being managed rather than dealt with. The situation that we are facing now is that people really do not know what tomorrow brings. It is an escalation, but it is also qualitatively different in terms of what people are going through.

On your second question, I will hand over to Shaina, because I cannot remember what your question was.

Q30 Chris Law: It was just about how effective—or, indeed, ineffective—the UK’s response is. To add to that, what more do you need to see the UK doing in terms of humanitarian response and also some political leadership? What more would you like to see happen?

Shaina Low: The first thing that we need in order to do any type of larger scale response is a ceasefire, because we cannot be working under risk of bombardment and ongoing bombardment. We need there to be a ceasefire. It cannot be short pauses. It cannot be in isolated areas. We need a complete ceasefire throughout all of Gaza, so that we can go and deliver aid and assistance to those who are in need. On a political level, that is what we need from the UK and from all world leaders.

In terms of the first part of your question about looking back and the context, we cannot return to the way things were prior to 7 October after all of this is over. The siege that the people of Gaza have been living under for over 16 years cannot be sustained. We cannot have 2.3 million people living in such conditions, trapped inside Gaza with little economic opportunity and no political horizons. We need to continue pushing for resolution and to address the root causes of this conflict. Sam spoke about the 50-plus years of occupation. We need to be addressing that as well.

First, we need a ceasefire. We need, rather than a military escalation, an escalation in the amount of aid that is going into Gaza. Then we need to really address the underlying issues and end the 16-year siege that the people of Gaza have been living under all those years prior to 7 October.

Sam Rose: I would add just a couple of things to that. In terms of not just the UK but much of the world, the eye was taken off the ball in relation to the Israeli-Palestinian conflict, and it was seen as lying dormant. I am not sure if there will be or if there has been a Middle East Minister appointed in the latest round of reshuffles, but there is a sense that it was being managed and a sense of abandonment that Palestinians have felt in relation to their issues.



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It was a factor not just in western Europe but in other parts of the world as well. They are now feeling that the values that we espouse as western Governments do not apply to Palestinians. That is what we are hearing from people on the ground in terms of the call for double standards and the inability for people to understand why what is morally indefensible is not being called out for just that.

There is a real sense of abandonment by the West, and that has concerns in terms of Governments that are not standing within the international community, as well as what that means in terms of the reputation of these Governments in the years to come, in Gaza and the wider Middle East. There are real concerns. They are concerns that we have seen in previous rounds of conflict, whether it was 2014 in Gaza or 2006 in Lebanon, et cetera. We are not seeing this for the first time, but, given the scale of this, that will be something that Governments will have to come to terms with when this is all over.

Q31 **Chair:** Sam, I understand that sense of abandonment. Shaina, the Norwegian Refugee Council is calling for a ceasefire. The Norwegian Government are calling for a ceasefire. Much of the international community is also joining that call, but the UK Government seem very reluctant to do that. Their concern is that Hamas would not honour that position. What do you have to say to that? Is it possible to do anything to save lives without a ceasefire?

Shaina Low: We are already seeing, in unimaginable circumstances, humanitarians, doctors and UNRWA staff working under incredibly difficult conditions. I do not want to say that we cannot do anything without a ceasefire, because we are seeing that people are still performing, to some degree, in unimaginable conditions, but it is not sustainable. Despite the fact that people are continuing to work, we are not having the necessary impact to relieve civilian suffering, and we desperately need a ceasefire in order to be able to safely do our work.

We need not hours but days to be able to organise and facilitate a response, and so I do not see any other alternative for humanitarian agencies to be able to operate unless there is an end to the violence for at least a period of days, which would, hopefully, lead to a longer-term truce as well.

Q32 **Chair:** The other phrase that is being used is a “humanitarian pause”. Is that what you are talking about?

Shaina Low: We should not get too bogged down in the terminology of what it is. Sam spoke about how we should not be so focused on numbers. We need to be focused on what is going to be needed in order to deliver humanitarian assistance. From talking to our staff and with other agencies, we know that the only way that a truly meaningful response can happen is if we have a period of days at least where there is a ceasefire, so that we can reach all communities in need, including those in northern Gaza and Gaza City.



Q33 **Chair:** What happens if that does not happen?

Shaina Low: We are already seeing the collapse of the medical system and the spread of diseases. Things are already at catastrophic levels in Gaza. I have run out of the vocabulary to describe how much worse it could get, and so we desperately need it. I do not think that there is an alternative, if we, as humanitarians, as well as the international community, are serious about wanting to save civilian lives and preventing undue harm.

Chair: Thank you. I share that position with you. Thank you both so much. Could you please relay to your colleagues how incredibly grateful and respectful we are towards them and the work that they are trying to do under the most extreme circumstances that one can possibly imagine? Thank you so much for making the time to be with us today. We really do appreciate it and we will try to amplify your calls for more humanitarian support that gets to the people who need it most. Thank you both very much for your time.

Examination of Witnesses

Witnesses: Yasmine Ahmed and Melanie Ward.

Q34 **Chair:** I would now like to turn to our second panel, who are in the room. Yasmine and Melanie, would you introduce yourselves, please. Melanie, I think you want to make a statement as well. Yasmine, please introduce yourself and Human Rights Watch and your connection to Gaza.

Yasmine Ahmed: Thank you very much for inviting me to give evidence. I am the UK director for Human Rights Watch. My name is Yasmine Ahmed, as you know. Human Rights Watch is an organisation that documents and then advocates for human rights and human rights change. We work in over 100 countries across the world, and we have been working for over three decades in Israel and Palestine. We have worked and done numerous reports on the West Bank, in Israel and in Gaza, and we have looked at both the commission of international humanitarian law as well as human rights violations by Israel, as well as by Hamas and other Palestinian groups.

We currently have staff who are on the ground. We are talking to them on a continual basis. We have published a number of reports since 7 October. Today, we published a report on the attacks on healthcare facilities and healthcare professionals, which is obviously very relevant in light of what is happening in northern Gaza, particularly the decimation of the healthcare system, which Melanie will speak more to.

We have also published reports since 7 October in relation to the impact of these hostilities on persons with disabilities, elderly people and children. We have done analysis of apparent unlawful attacks on medical



facilities as well, so that is the breadth. I look forward to discussing this further.

One thing I would like to note before we start here is that we have been talking about a humanitarian crisis. There is no way to describe this other than as a humanitarian crisis that is getting worse and worse by the minute, by the hour and by the second. There are no more adjectives, as others have said, to describe what is happening. It is important to say that this is a manmade humanitarian catastrophe. It is one that is as a direct result of the Israeli Government imposing an absolute siege, other than a trickle going into Gaza, and the relentless attack that we have seen on civilian infrastructure and civilians more generally.

Q35 **Chair:** One could also argue that it is a direct response to what happened on 7 October.

Yasmine Ahmed: Yes, absolutely. We do not take a position on the legality of Israel's acts in self-defence. As Human Rights Watch, we say that, certainly, what Hamas did were war crimes. There is no question about that, and we are looking at the war crimes that have been committed by Hamas. There is no question that the indiscriminate rockets that continue to go into Israel are war crimes, but international humanitarian law is very clear. The act or commission of a violation or a war crime does not give the other party permissibility to commit war crimes and violations themselves. We are very clear in saying that what we have seen so far is collective punishment of the entire Palestinian population in Gaza for the unlawful acts of Hamas, and that collective punishment is a war crime.

Q36 **Chair:** Can you, from a legal perspective, describe what collective punishment is? What does that definition mean?

Yasmine Ahmed: From a legal perspective, it essentially means punishing a civilian population, and we can see what that punishment looks like in this context. We have seen the fact that, other than a trickle, they have no access to food, fuel, electricity or clean water. We have seen statements from the Israeli Government suggesting that it is not just about attacking military objectives; it is about attacking or having an impact on the entire civilian population.

Q37 **Chair:** If they were here, they would probably argue against that. I know people get frustrated with the determination of genocide because it requires a legal ruling on that. Is it the same for collective punishment?

Yasmine Ahmed: No. Collective punishment is a war crime. It is either intentional or reckless, but what we have documented very clearly is that the blockade is collective punishment, because it is punishing through the fact that it is depriving absolutely essential humanitarian supplies to the Palestinian people in Gaza, and so essentially it is punishing the entire population in Gaza, preventing them from having those humanitarian supplies that they should have access to.



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It should also be noted that, in relation to this, the Israelis are also an occupying power. In addition to the fact that they obviously should not be committing war crimes or violations of international humanitarian law, they also have positive obligations under international humanitarian law, in relation to those whose territory they occupy, to ensure that the essential humanitarian supplies are provided to those individuals.

Human Rights Watch is very clear that what Hamas did and the attacking of civilians is a war crime. There is no question. The indiscriminate attacks are a war crime, but you cannot collectively punish them. That is what we are seeing. That is what this blockade and this absolute siege—other than a trickle—is.

Q38 **Chris Law:** I have an observation and a question. I had a little look myself to look at what international humanitarian law and collective punishment meant. It is a right to life, movement, health, shelter and various other things as well. Am I right to say that these four elements are clearly correct under law? This is what is being prevented for the people of Gaza.

Yasmine Ahmed: Yes.

Q39 **Chris Law:** The curious question for me is about why there is such impotence from the UK Government and the official Opposition not to call it out for what it is.

Yasmine Ahmed: That is a question that you will probably have to ask them, not me. It is certainly a very serious concern for us that, while the Government are quite right in holding Hamas and other Palestinian militant groups that were associated and involved in these attacks accountable, and calling them out for the crimes that they have committed, the fact that there has not been the same calling out of the crimes that Israel has committed and continues to commit is very concerning.

Those double standards not only impact what is happening on the ground now, because obviously one could argue that the international community's silence equals a green light for Israel, but it also has a very significant impact on international rule of law more generally, because how do the UK Government call out Russia and Putin, rightly, for the crimes that he and the Russian Government and military are committing, when they fail to do so in this circumstance? It is important to ensure that you are calling it out.

We have seen, not just in the context of these current hostilities but on an ongoing basis, that the UK Government have failed to call for Israel to be accountable before the International Criminal Court and before bodies that are set up by the Human Rights Council. They have, in fact, as we have seen on a consistent basis, tried to block that accountability from happening.



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The prosecutor of the ICC has made it clear that he has jurisdiction over this. He will be looking at the crimes that have been committed by Hamas and Palestinian armed groups that are involved, but he will also be looking at the crimes that have been committed by Israel in the context of these hostilities and other hostilities that date back to 2014.

Q40 **Chair:** Yasmine, while the ICC has jurisdiction in this area, this Committee does not, so I will bring us back to the humanitarian situation. Melanie, you wanted to start with a statement. Could you introduce yourself first, please?

Melanie Ward: I am Melanie Ward. I am the chief executive of Medical Aid for Palestinians. We are a UK-based charity that has existed for 40 years now, working with Palestinians in Gaza, the West Bank and Lebanon towards the realisation of their rights to health and dignity.

MAP was the first organisation to respond to the current crisis in Gaza, beginning with the release of \$570,000 worth of pre-positioned medical stocks in our warehouses on 7 October, and we are one of the last still operating on the ground in Gaza, thanks to our brilliant local team and to the incredible support that we have been receiving from around the world.

MAP's Gaza team comprises 20 people, all of whom are Palestinian. Our director, Fikr, was outside Gaza on 7 October and remains in Egypt, where she set up operations so that we can import medical aid, as soon as we are able to, through the Rafah crossing. Among the 19 colleagues who are still in Gaza, almost all of them have been displaced, and many have lost family members. All are struggling to find food and clean water for themselves and their families.

They include my colleagues Nawras, whose son, Majd, was killed while trying to evacuate people to safety from an area under bombardment; Wasim, who spent hours digging through the rubble of his friend's home to help him find the bodies of his wife and children; Mahmoud, who remains in the north where there is no food or water and has been desperately trying to access healthcare for his elderly mum. We are now unable to contact him; and Muhammad, whose home was destroyed in an airstrike that killed his 13-year-old niece, Farah, and who is in Gaza City now, looking after wounded family members.

Amid deep personal grief and fear, they continue to distribute whatever aid they can find and still procure locally—blankets, hygiene kits, food, hot meals—in devoted service to their communities and the welfare of their fellow human beings. However, our Gaza staff WhatsApp group now also includes the exchange of information about how to try to keep themselves and their own families alive, where to try to find safety, where they can find food, who has water, and what sort of wood is best to burn because you have run out of cooking gas.



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Let me emphasise as well that MAP is a humanitarian organisation, and international humanitarian law underlines every aspect of our work. In that vein, I want to make clear that the targeting of civilians, Israelis and Palestinians, and the taking of hostages is never acceptable. MAP proudly works with a number of Israeli partners.

For the last five and a half weeks, day after day and week after week, we have been warning of catastrophic circumstances if world leaders fail to act to protect civilian life in Gaza. The situation on the ground today is far beyond our bleakest predictions and worst nightmares.

The sheer scale of Israel's bombardment is almost beyond comprehension. In just five weeks, the Israeli assault has killed more than 11,000 people, 4,506 of whom are children and 2,700 of whom are women. More than two-thirds of those killed are women and children. More Palestinians in Gaza have been killed in the last five weeks than in the 1995 Srebrenica massacre or the 1999 assault on Freetown in Sierra Leone. Over 27,000 people have been injured. Almost half of all homes have been destroyed.

These are the numbers that we know of, but we must recognise that the true numbers will be much higher. At least 1,500 children are missing, believed to be dead or dying under the rubble. Our partners, the Palestine Red Crescent Society, report hundreds of calls from Gaza City urgently requesting ambulances for the wounded, evacuation for trapped families and assistance for those under the rubble, but the majority of these calls can no longer be answered.

Israel's assault and total siege has systematically dismantled Gaza's health system in just over a month, hospital by hospital and clinic by clinic. Nearly two-thirds of all hospitals and two-thirds of clinics have now shut down. 198 health workers have been killed, either on duty or at home.

Shifa Hospital, once the beating heart of healthcare in Gaza, has collapsed. Power at the hospital ran out four days ago, leaving medical staff having to ventilate critically injured patients by hand. The intensive care unit has been bombed and shut down. The cardiovascular unit and maternity units have also been bombed. Solar panels, water tanks and oxygen generators have been destroyed. Staff seeking to move outside have been shot dead. As the morgue has shut down, dozens of bodies are piled up in the hospital forecourt, decomposing and being eaten by wild dogs, and nobody can move them for burial. Staff are now trying to bury them in mass graves. People have been left dead and dying in the streets around the hospital, as no health worker can safely reach them.

Chair: Melanie, I am going to have to ask you to be brief now.

Melanie Ward: Let me talk about some warnings then. Five weeks ago, we warned of the potential for mass forcible displacement of Gaza's population southwards. Now, 1.6 million people are displaced from their



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homes. Three weeks ago, we warned that the lives of premature babies in Gaza's neonatal intensive care units were at risk. Now, three babies have died and the lives of 36 others hang in the balance because there is no fuel to keep their incubators and oxygen running. Last week, we warned about the imminent threat of full-scale military assaults against hospitals in Gaza, and that is what we have seen.

Now, unless we see fuel aid and medical experts allowed access, we will see massive outbreaks of infectious diseases. Unless food is distributed rapidly, we will see mass starvation, starting with children. Unless the dismantling of the health system is ceased, thousands will die from treatable wounds and illnesses, and unless crossings besides Rafah are opened, aid will not be able to enter at the scale that is needed.

Allow me to say two more things. We fear deeply for what lies ahead in Gaza for the 2 million or so people in the south, and the potential for the mass forceable transfer of the Palestinian population out of Gaza, and we fear what is beginning to happen in the West Bank and where this may end. Things could still get so much worse.

Chair: Thank you. There was one very specific point you said. You said that the Israeli forces have been systematically dismantling the healthcare. That would imply intent. If you have evidence to back that up, I would like to see that, please, as I am sure the rest of the Committee members would, because I have not seen evidence to substantiate that at this point.

Q41 **Theo Clarke:** Can I just pick up on this point about healthcare in Gaza? You mentioned that your director is now in Egypt and waiting to import medical aid through the Rafah crossing. Can I just ask for an update on that specifically? What impact has the conflict had both on healthcare workers but also, secondly, on the people who were already in need of medical help and are now in a conflict zone?

Melanie Ward: Since 7 October and since the total siege was imposed by Israel a few days after that, the international community has been scrambling to set up a system and a mechanism for delivering aid through Egypt. That is pretty complicated. It has not gone as quickly as we would like it to go. It took a long time for standard operating procedures to be in place about how exactly to do that.

For those of us who have funds, we have the means to be able to get aid into Gaza. In fact, MAP is one of the partners of OCHA. We are one of those relied upon by the hospital system to get life-saving drugs into hospitals in Gaza, particularly in emergency situations, so we need this mechanism to work.

There is still a lot of confusion around the air bridge that is being set up, how exactly that is supposed to work and how different NGOs can access it. If you look at the numbers and owners of the trucks and the different kinds of aid that are in them, there is still only one international NGO that



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has managed to get any aid in so far. We are hoping to be the second soon, but the scale of what we are able to get in is not nearly enough.

To your question about healthcare workers, again, international law is very clear that health facilities and healthcare workers should be protected in conflict situations. I said that 198 healthcare workers have been killed and are trying to work in the most horrific conditions. Some of them have had to flee and leave their patients. We fear greatly for the lives of those who have remained.

If we take the example of Shifa Hospital, we know right now that there are about 600 patients still there. There are several hundred healthcare workers and about 1,500 displaced people who stay there in that hospital, even though it is no longer able to function properly. There is now only one remaining hospital functioning in the north of Gaza.

You make an important point about all the people who have been affected because they were already sick and in need of ongoing health treatment. If we think about people who have cancer, more than 2,000 patients a year are diagnosed with cancer. Even in normal times, radiotherapy is not allowed in Gaza, and so people have to be referred out of Gaza to the West Bank or Jerusalem to receive proper treatment for cancer. That has obviously ceased to function.

There are about 1,100 people in Gaza in need of kidney dialysis. Obviously, as supplies have been run down, and as fuel runs out and hospitals can no longer keep their generators on, the ability of hospitals to provide kidney dialysis has reduced massively, and so many people are dying needlessly.

Finally, there is the example of pregnant women. In the last month, we expect that around 5,500 babies have been born in Gaza. Usually, when a woman has a pregnancy that is expected to be particularly difficult and the birth is likely to be complex, she is referred out of Gaza, also to the West Bank or to East Jerusalem, to give birth. That has not been able to happen. We have had reports from Al-Awda Hospital as well of doctors having to conduct caesarean sections without anaesthetic.

Q42 **Chris Law:** You have mentioned Al-Shifa. We have heard personal testimonies, almost all the time online, from doctors and surgeons working there, about the terrible conditions they are under. At the same time, Israeli authorities justify Al-Shifa as not necessarily a direct target, but they keep saying that central command of Hamas is underneath Al-Shifa. Do you know of any evidence of this being true or not?

Melanie Ward: In a conflict like this, there is a lot of disinformation that comes from different parties to the conflict. I am a humanitarian. I run a humanitarian organisation, and we work really hard to stick only to the facts that we can be absolutely sure of about any given situation.



If you take the case of Shifa, I just gave the numbers. What do we know for sure? We know for sure that there are 600 critically injured people, including 36 premature babies there. We know there are hundreds of medical staff who are there as well, and 1,500 displaced people. They are all civilians and they have the right to be protected under international law. I am sure that Yasmine could say more about what law says about how those people in hospitals and healthcare facilities should be protected.

Yasmine Ahmed: Yes. Just to build on what Melanie said, as you said, under international humanitarian law, healthcare facilities and healthcare workers have a protected status, so they cannot be the subject of attack. In fact, they have to be actively protected in the context of a conflict, given the life-saving work that they are doing.

Yes, if a medical facility is being used to carry out attacks and hostilities, it loses its protected status, but that is not the end of the story because, first of all, if it loses its protected status, it is still a requirement for the attacking party to notify and try to evacuate those individuals from there. What we know in the context of Al-Shifa is that that is not possible. We know that all roads out of Al-Shifa are blocked for one reason or another. There are also reports, not yet verified by Human Rights Watch, that people have been attacked by Israeli snipers and others as they have tried to leave. As I said, Human Rights Watch has not verified that, but we have verified the fact that there is no way for people to leave.

Then let us just imagine that there are people who cannot leave. There are children. There are babies in incubators. There are people on life support. There are people who are about to go into life-saving operations. They cannot leave, and those medical staff who are looking after them cannot leave either. That leaves you with a situation in which any order of evacuation must be able to be fulfilled; in circumstances where it cannot, the evacuation order is ineffective.

Secondly, the principles, very importantly, of distinction and proportionality under international humanitarian law continue to apply. In fact, the proportionality test is enhanced in the context of a hospital, because it is obviously not only those patients who are being treated in that context, but that medical facility has a purpose beyond just those patients. It obviously will be able to treat and be a facility to treat other patients that come in.

Finally, it is very important to note that it is upon the attacking party—in this context, Israel—to provide evidence to say that in fact it is being used for that purpose. It is clear from international humanitarian law that Israel cannot be attacking medical facilities and medical professionals without considering all of that under international humanitarian law. We are very concerned about the potentially unlawful attacks.

Q43 **Kate Osamor:** The Palestinian fatality toll, as we speak, is in the region of over 11,000 people, and of course there will be many more who have



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not been found and are under rubble. Can you tell us how this is impacting children? We know that over 4,000 children have lost their lives. What about the children who are left behind, or the brothers and sisters who are trying to cope with such a difficult situation?

Melanie Ward: The impact on children is utterly horrifying. It is hard to describe, and you are right to say that, in addition to the numbers of children who we know have been killed so far, there will be many more who we do not yet have the data for.

One of the most horrifying things that has happened so far in this dreadful conflict is that parents in Gaza have started to write the names of their children on their children's limbs so that, when the whole family is bombed in their home and killed together, people who will hopefully come at some point to bury them will know who the children and parents are, and they can all be buried together.

My colleague described the conversation that he had with his wife, where they started to discuss whether it was better to write the names of their children on the children's backs or hands. These are the conversations that parents, aid workers and civilians in Gaza are having right now because, as the UN Secretary General has said, Gaza is becoming a graveyard for children.

As well as the physical impact, the killings and the maiming of children, I know you spoke previously to the other witnesses about the mental health impact, which is going to be indescribable. That is something that it is very difficult to help the children who survive this to recover from, if they ever can and if it is ever possible at all.

Also, thinking about the babies, we talked about babies in incubators. About three weeks ago, we warned that there were 130 babies in incubators whose incubators and oxygen systems will fail without fuel. That has now happened in Shifa. Three of those babies have died. We understand that there is fuel at the southern border of Gaza. It is ready to come in and could be taken by the UN to those hospitals to keep those babies alive, and Israel is not allowing the fuel in. The lives of these babies can be saved in a very clear way. It could happen tonight; it could happen tomorrow if there was the will to do it.

The deaths of these children are not just a tragic accident. They are something that could be stopped and prevented, and the international community has a responsibility to protect civilians. The United Kingdom Government are the penholder on protection of civilians at the UN Security Council, and they have a particular duty to act to make sure that this happens, but we are not seeing action. We are seeing a lot of talk about the need to uphold international law and very little action to make sure that international law is actually upheld.

Q44 **Kate Osamor:** What humanitarian aid is getting in that is helping these children, if any?



Melanie Ward: There have been around 1,000 trucks of aid that have got into Gaza in the last month. That is usually what would be needed in two days of a normal situation in Gaza, and now we are in the middle of a horrific war. The UN has confirmed that, as of tonight or tomorrow, no further aid will be able to get into Gaza, because they have run out of fuel. The UN no longer has the fuel available for vehicles to collect that aid and distribute it. We are talking about the complete cessation of any aid getting into Gaza unless access to fuel is urgently restored.

Q45 **Kate Osamor:** I just wanted to also ask about women. Of course, with that number of 11,000 people who have died, a large number of those were women. How is the conflict affecting women? They are trying to look after themselves and their families, and there will be an issue, sadly, where they have lost their husbands and will be vulnerable alone. Are they able to get to food? Are they in the camps? What is happening to women and children at this point?

Melanie Ward: The impact of conflict is always particularly severe on women anywhere in the world, because of the particular impacts it has on pregnant women, women who are going to give birth, and lactating mothers who cannot access food to keep their milk supplies going. We know that incidences of gender-based violence always increase in conflict as well. All civilians in Gaza are in a similar state right now. Everybody is just trying to survive.

I would particularly point you, though, to those in the north of Gaza. Since the Israeli tanks came in just over a week ago, no food and no water has been allowed into the north of Gaza to anybody who is there. While many of those have fled, there remain hundreds of thousands of civilians in the north of Gaza who need to be able to access food and water. Many of those remain there either because they refuse to flee, which is their right, and they still should be protected as civilians, or because they are unable to because they are the elderly, the sick, or mothers with babies. Those people deserve to be protected too.

Finally, in normal times, MAP is proud to work with a number of partner organisations across Gaza who run women's health centres and have developed specialist services for women and different kinds of support there. We hope one day to be able to resume massively scaled-up partnerships with those organisations, hopefully one day to help women in Gaza to recover from what they are going through, but, as I said earlier, we are a long way from the end of this conflict, and things could still get much worse.

Q46 **Kate Osamor:** Are those women's organisations still intact or have the staff had to move on and get out?

Melanie Ward: They are run by Palestinians, so they are in the same position as everybody else. As you heard from witnesses earlier, communication is very difficult, including with our own staff, so to be



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honest, we do not know from one day to the next whether everybody is continuing to survive.

Q47 **Theo Clarke:** We heard earlier from our witnesses about the challenges with the communications blackout and the lack of internet. How has access to energy been impacted in Gaza, specifically on critical infrastructure? What do you think needs to be done to ensure that electricity is being restored in the short term?

Melanie Ward: This is another one where electricity could be restored tonight or tomorrow, because Israel supplies a significant amount of the electricity that gets into Gaza. Similarly with fuel, if fuel were allowed in, then desalination plants and clean water could begin to be provided again, generators could go back on, and the bakeries that have not been bombed could continue to function again. The lack of fuel is one of the particular problems that we have here.

You asked about communications as well. You heard from witnesses earlier about how we need to be able to speak to each other in order to co-ordinate and organise aid distributions. We cannot do a humanitarian response if we cannot communicate with each other, just as we cannot do a humanitarian response under constant bombardment, which is what continues in the south of Gaza, as well as in the north.

To your question about energy, it is worth drawing particular attention to the fact that solar panels appear to have been targeted in bombings in recent days, including some of those in hospitals, such as Shifa and other places. There are a lot of reports that the targeting of solar panels, bakeries and other critical infrastructure is happening in a widespread way, which means that it is impossible to do any kind of meaningful humanitarian response.

Yasmine Ahmed: To add to that, I just got an update from a colleague at Human Rights Watch who said that the telecommunications companies in Palestine say that, because of the fuel shortage, there will be another communications blackout as soon as this Thursday 16 November, lasting until fuel deliveries resume. We have seen two previous blackouts happening.

As Melanie has noted and other witnesses have said, it means that people within Gaza are unable to communicate with each other. They cannot get access to speak to emergency services, ambulances and other critical care needs. People do not have access to speak to their families, causing significant distress. As a human rights organisation, we are also very concerned that, as has been noted, this provides a veil for abuses to happen that we cannot document or know about.

Fuel is absolutely critical, as we were saying, for clean water and ability of hospitals to continue to operate, but also for there to be able to be telecommunications and communication within Gaza for critical services,



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as well as us knowing, as the world community, what is actually happening.

Q48 **Nigel Mills:** I will just follow on from what Kate was asking about the impact on different groups. I want to ask about the positioning of the elderly and disabled in Gaza. I imagine that they are particularly badly affected as well.

Yasmine Ahmed: I can speak to that. We published a report in late October. We spoke to a number of disabled individuals who are in Gaza. The first thing to note is that the situation of disabled people in Gaza was extremely difficult prior to 7 October. The access to essential care facilities and the equipment that they need was really lacking, given the fact that there was still a blockade, and so it was a very difficult situation. Since then, with the Israeli attacks that have happened, it has been extremely difficult for people with disabilities.

I will just give you some examples to give a flavour of what we are talking about. There is a person by the name of Samih Al Masri. He lost both of his legs in the hostilities in 2008, so he is an amputee. There was an air strike on his home on 17 October. He could not move; he could not flee. He survived, but he says there has never been anything more terrifying in his life that has happened, and he has already been the subject of an attack.

You have people with disabilities who are unable to leave their homes or escape. In a number of instances, we know that there have not been adequate warnings—or any warnings in some instances—so people with disabilities are unable to leave and evacuate. Some of the things that we have heard from persons with disabilities is that some of them have had no warning; some may have had a few minutes of warning. Now, for someone in a wheelchair or who is severely disabled, that is just not sufficient. We know that lifts are not operating in these multistorey buildings, so how do people with disabilities actually get out?

When they get out, how do they move among the rubble if they are in a wheelchair? There is a woman called Iman, which is my daughter's name as well. She is 33 years old. We spoke to her. Her 24-year-old sister has cerebral palsy. She spends her days and nights in fear because, in 2019, her sister was small enough that she could hold and carry her out of the building when there were attacks, but she is too big now to do that, and they do not have a wheelchair that is big enough for her to even leave the building. She said to Human Rights Watch, "I don't know what will happen."

Iman, who is 19, has a hearing disability and is now in a shelter. She has no access to assistive devices because she had to leave her home. She has no batteries. She has no way of knowing what's happening. She says she spends every single moment in fear because she does not hear the warnings or the bombs that everybody else hears.



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We have many stories like that. We have stories that speak to the fact that persons with disabilities lack access not only to the infrastructure and devices that they need, but also to critical medicine. We know that there have been no medical supplies, other than a trickle, that have been allowed in. People have left their homes with a few bits of medicine, but not enough to sustain them, so people with cerebral palsy, epilepsy and other such things will be having seizures.

As we have said in relation to others, we also know about the sanitary conditions that people are now in in some of the places that they are sheltering, whether it is the UNRWA facilities or others. This particularly affects people with disabilities. There are hundreds of people who are sharing one toilet. There is no access to food. If you are a person with a disability, how do you go to a hole toilet? How do you access these basic things that you need?

We have seen that persons with disabilities in this current context are severely impacted. They have been previously too, but they are very severely impacted in this current context.

Melanie Ward: If I could add one thing, you will be aware that the Israeli army has been telling people in the north of Gaza to leave and move to the south. To do that requires you to walk up to 10 kilometres. You are not allowed to take a car.

Again, I would say that people are not obligated to leave their homes. There is no requirement for them to do that because they have been told to do so by an occupying army. However, even if they wanted to, if you are an old or disabled person and you are unable to walk all those kilometres, you are stuck and there is nowhere that you can go. When we think about those remaining in the north of Gaza, how those civilians are going to be protected and who they are is something that we have to bear in mind.

Yasmine Ahmed: What is really important, as Melanie noted, is that for an evacuation order to be effective under international law, it needs to be able to be carried out. There is nowhere safe in Gaza at the moment.

Then, those who decide that they will not leave, either because they do not want to leave or be displaced, or those who cannot leave because they are disabled or elderly, retain their civilian protection. The laws of war still protect them regardless. The idea that, because they left, they are now somehow able to be attacked is completely inconsistent with international humanitarian law.

Q49 **Chair:** One of the arguments being put forward, particularly around hospitals, is that there would be a Hamas cell in the basement and that they are hiding there. There is overwhelming international concern for the hostages and getting them out. Are they under there? Could you talk a little bit about the interplay of Israel's right to protect its own people and to react to the terrorist attack, particularly around the civilian protections



in healthcare facilities?

Yasmine Ahmed: First of all, the holding of hostages is a war crime and a violation of international law. Both Israel and Hamas, and any Palestinian militant groups that are operating and carrying out attacks, are required to comply with international humanitarian law. As we said, the primary driver of international humanitarian law is the protection of civilians. The whole architecture of it is to say that there are rules and limitations put on both sides to ensure that civilians are protected, but as you note in the context of hospitals, it is not always clear-cut, in the sense that military operations may be undertaken, for whatever reason, in the vicinity of or within the context of a place where protected civilians and protected infrastructure are.

The first point to make clear is that civilians and civilian infrastructure cannot be targeted and the subject of attack. It is absolutely unlawful for Hamas to be operating in the context of civilian infrastructure. It is putting those civilians at risk and it is unlawful, but, as has been noted before, say in the context of Al-Shifa Hospital, first of all, there needs to be evidence that proves that there are those military operations happening. That needs to be very clear. If it is the case, as I said, it is unlawful, but that does not give carte blanche ability for a party to the conflict to attack those facilities.

That means that, as noted before, there needs to be a time and an ability for people to evacuate. There needs to be an understanding that there will be people who cannot evacuate. First of all, we have seen in the context of Al-Shifa that you cannot evacuate Al-Shifa at the moment. There is nowhere for people to get out. There will be people—babies and others on life support—who cannot leave. Those people retain their civilian protection. In that context, I would say that the heavy lifting in international humanitarian law comes with the principle of proportionality, which, as I have noted, is accentuated in the context of civilian infrastructure such as hospitals, which play such a critical part in protecting the lives of civilians.

In that context, if the Israeli military has evidence that Hamas is operating within that vicinity, it still needs to make an assessment and do all the relevant procedures with respect to evacuation, and facilitate evacuation. We have seen no adequate facilitation of evacuation of babies who are in incubators and other people. There has been evidence of cancer patients who have passed because they did not get the care that they needed.

Q50 **Chair:** With due respect, if the Israeli military is giving notice and facilitating babies in incubators to get out of the situation, that has rather tipped off the Hamas terrorists who might be in the basement. Is there an argument that, in terms of proportionality and evidence that they believe that they have, they could legitimately bomb that target?



Yasmine Ahmed: Under international humanitarian law, it is very clear that that notification and that ability to evacuate has to happen. It has to happen, so it is not enough for Israel to say Hamas is operating there without them giving the opportunity for people to evacuate and for their people to be able to evacuate a hospital. That is very clear.

Q51 **Chair:** Melanie, one of the concerns raised in the previous panel was around waterborne illnesses and the conditions that people are living in. Are we seeing things like cholera starting to take hold?

Melanie Ward: Yes, and before I come to that, just to your previous question, you suggested that there has been facilitation of babies in incubators being evacuated. That is not the case. Also, transferring critically ill, premature babies who are in incubators is a specialist thing to do. You cannot just pack them up, put them in an armoured vehicle and move them to who knows where, because there is nowhere safe and hospitals are being attacked everywhere. I just want to be clear about that. That has not happened. The reason those babies are at risk is because the hospital is not safe and fuel is not able to get to it.

On your question about infectious diseases and cholera, several days ago we were starting to see the early signs of cholera, such as acute watery diarrhoea and so on. We are starting to see signs of scabies and other skin infections. We expect typhoid to become a problem soon.

The true answer to your question, though, is that nobody really knows because we are unable to deliver the kind of humanitarian response that would allow us to gather data and information about the kinds of conditions that people have and the way in which infectious diseases are beginning to manifest and spread, which would then allow us to relieve them and to deal with the symptoms. That is because of the nature of the conflict, the indiscriminate bombing, the lack of communication and the fact that humanitarian workers cannot properly access the north.

The answer is that we absolutely expect that disease is beginning to spread, but we do not really know. We do expect that it is something that will kill thousands of people in the days ahead, unless we get proper access for aid for humanitarian workers and a ceasefire.

Q52 **Chair:** Does the same answer go for dehydration and starvation?

Melanie Ward: Yes, absolutely. I could give you anecdotal examples of where we have begun to hear about these things. We know that starvation is real for our own staff. I have said already that we are particularly concerned about people in the north who have not been allowed any food or water in at least the last week. We expect that this is beginning to happen, but we just do not have the data that we would expect to have, even in a conflict situation or in any other kind of humanitarian response.

Yasmine Ahmed: The wilful impeding of relief supplies is unlawful under international law, as is starvation as a weapon of war, which is a war



crime. What is very important to note here is that the trickle that has been allowed in, as Melanie said, is enough for two days in Gaza. We also know that yes, Israel is able to and has the right to subject any humanitarian convoys and any provision to inspection, and it has a right to monitor that, as it has done for decades, but what it does not have a right to do is block that aid, which it is doing now. It is unlawful under international law and the implication of it, which is potentially starvation, is a war crime.

Melanie Ward: You will be aware that the British Government are hosting a food security summit here in London next week. I would hope that questions will be asked about what consideration is being given to the fact that starvation is likely being used as a weapon of war in some parts of Gaza. How are they going to account for that during the conference? What kinds of action are they going to take on that, similar to the way that they have taken action on food insecurity issues in other conflicts?

Q53 **Chris Law:** Yasmine and Melanie, you have given really powerful testimonies. It is hard to quantify some of the things you have discussed, but I want to know, in your own words, how effective or ineffective the UK's response has been so far, and not just politically, but also in delivering humanitarian aid. What needs to change?

Melanie Ward: There are many parts of an answer to that question. First, it would be interesting to ask about the humanitarian assistance that the UK itself has provided. We know that some of the bilateral assistance provided by different Governments around the world has got into Gaza.

We do not know what has happened to the aid provided by the UK. We know that some of what they were providing were solar lamps, and we have heard anecdotal evidence that solar lamps are being prevented and that the Israeli authorities are not allowing those into Gaza. It would be interesting to understand the answer to that. Solar lamps are an absolutely normal part of a humanitarian response to displaced people in every part of the world, so we are concerned if that is the case.

I mentioned earlier that the UK is the penholder on protection of civilians at the UN Security Council. It has always seen itself traditionally as being a leader in the humanitarian space. That is why the head of OCHA is always a Brit. We have a particular imperative here and a history of seeing ourselves as humanitarian leaders. I am not sure that this country is living up to that at this particular moment.

It is clear that a massive effort is needed on proper humanitarian diplomacy, and by that I mean decoupled from the politics of the conflict. A real effort to get aid to those in need is required, because there is an imperative and a legal expectation that those civilians will get the aid that they need.



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There is more that could be done from a perspective of humanitarian diplomacy, and you can see that when you talk about the fuel issue again. Sometimes you see British Government representatives starting to talk about whether one party to the conflict has fuel here or there, which means somehow that fuel should not be allowed in by the United Nations to hospitals and to other people in need. The humanitarian imperative is clear. Assistance exists that could help these civilians in need, and we have to try to help get it to them, regardless of the politics that are going on elsewhere. A massive scale-up is needed in terms of humanitarian diplomacy.

There are two final things. First, it is very clear that a ceasefire is absolutely needed. We cannot deliver humanitarian assistance as things are, as you have heard. The fact that two-thirds of people killed so far are women and children tells you a lot about the nature of the conduct of hostilities.

Finally, we would hope that the UK would treat the situation in Gaza and across the Occupied Palestinian Territory with the same seriousness and urgency, in humanitarian terms, as it does the conflict in Ukraine. I am not sure that we are seeing that at the moment.

Yasmine Ahmed: To add on to what was a wonderful response from Melanie, first and foremost, humanitarian aid and the humanitarian provision that the UK Government do should be depoliticised. We need to be prioritising it in that sense, but it must be seen within the context of what is happening.

As I said at the beginning, this is a manmade humanitarian catastrophe. The first and foremost thing that needs to happen for the UK Government is to call on Israel to lift the blockade and absolute siege, other than the trickle. That absolutely has to happen. They need to be making clear that doing so is a violation of international humanitarian law and, in fact, a war crime, and they need to be calling Israel out and saying it is unlawful, and that any attacks on civilian infrastructure that facilitate or are otherwise related to the provision of humanitarian assistance should not be subject to attack, and that to do so would potentially be in violation of international humanitarian law.

Also, from the UK Government's perspective, we have seen a significant reduction in the amount of aid more generally, but particularly in relation to the Occupied Palestinian Territories. The UK cut aid to UNRWA. Since 2018, for example, the total funding to UNRWA from the UK has decreased by about 60% from approximately £70.3 million in 2018 to £28.6 million in 2021. The UK has cut its core grant to UNRWA by more than 50% from £42.5 million in 2020 to £20.8 million in 2021.

While it is very good to see that the UK Government have pledged money in recent days and upped their development and humanitarian assistance, this is not sufficient overall. It is not sufficient for now, but what is very important is to think about the reconstruction effort that is



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going to be required once, hopefully, we see the end of the current hostilities, the freeing of the hostages and the end of what we are seeing currently. There will be a massive need.

We have seen that there has been a conference in France around reconstruction. I would hope that the UK Government, as they have in the context of Ukraine, are at the forefront of thinking about how to redevelop in a sustainable way. People have said that we cannot go back to the status quo either. I would hope that the UK Government would be thinking about what development and humanitarian assistance look like, so that we are not going back to the status quo and so that we can see a new future.

In light of that, I would say that, while there are many negatives that have happened as a result of the merger of FCDO and DFID, a positive is that, hopefully, one can see that human rights and the broader structures of civic space and civil society are critical to any development agenda. Any rebuilding we are going to see after the end of these hostilities also needs to look more broadly, not just at Gaza, but the West Bank, East Jerusalem, what it looks like for civic space, and what it looks like in terms of Palestinian civil society being able to build. Our development funding will be very important in that regard as well.

Melanie Ward: Could I add two things? The Minister of State, Andrew Mitchell, has made comments that are important and need to be listened to. He stated unequivocally in the House of Commons a couple of weeks ago that bombing a hospital is a war crime. He is right about that, and it is important that that is heard.

Secondly, he has given warnings about so-called safe zones and the efforts to force civilians into small areas. He has warned about the examples from history, including in Srebrenica, where that has happened. He is right about both of those things.

Q54 **Mr Sharma:** You will be happy to hear that this is the last question.

Yasmine Ahmed: We would be happy for many more, but I am sure you are happy that it is the last question.

Mr Sharma: I know that you touched on the question earlier, but there is a further contribution to make when the question of development comes. When it comes to the issue of development, there have been a number of changes in Government in the last 18 months. In your view, what impact have these changes had on the UK's ability to provide humanitarian assistance to the communities in need?

Melanie Ward: Are you talking about the fact that DFID no longer exists?

Mr Sharma: Yes.



Melanie Ward: Yasmine made a number of really important points about the cuts to the aid budget as well. There is no doubt at all that the UK's ability to mount a significant response to this particular crisis has been hit by those cuts, alongside crises in many other parts of the world.

I mentioned humanitarian diplomacy earlier and the fact that the UK could do more there. In the past, when DFID existed, you did see that there was a Department and a Secretary of State charged with focusing very clearly on humanitarian and development issues, like the issues that I have described. How do we get life-saving aid to desperate people who are in need, particularly when there is a way and a means to do so, perhaps with that becoming less tangled up in the particular politics of the day?

My view is that we perhaps miss that now. You can see that in some of the statements that Government representatives make in relation to this particular situation.

Q55 **Chair:** A very senior Conservative former Minister came to me after the conflict broke and said the failed merger and the cuts in aid have now weakened our credibility as a negotiator or peacebuilder in the Middle East. Would you agree with that?

Melanie Ward: There are definitely issues with the approach that has been taken to this particular conflict and the historic role that the UK has traditionally played in terms of diplomacy, including humanitarian diplomacy, and the way in which we work with partners in the Middle East. It is hard to say that we are playing as full and effective a role in doing that as we have traditionally done in the past.

Yasmine Ahmed: I would agree. I do not have anything further to add. There has been and there is a very significant concern about how effective our development and humanitarian assistance and programmes are when they sit within the Foreign Office. There are questions about the extent to which the development and humanitarian agenda are prioritised, and to what extent they are influenced by the political.

There were and there are opportunities. I have not seen those come to fruition yet in terms of the ability to be able to, one would hope, imbue even further—I am not saying it was not there—the development agenda with a broader human rights, civic space and civil society lens. It is of significant concern, particularly in this current context. Melanie is much better placed, but we do not seem to have a sense of a clear-cut approach to how we are doing development assistance and aid in this context.

Melanie Ward: In the past, we have definitely seen Prime Ministers take a really strong, world-leading and sometimes world-convening role in humanitarian responses, humanitarian initiatives and development initiatives. It is definitely the case that that is not happening in relation to this conflict.



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Chair: Let me say that I am very optimistic that the former Prime Minister, now Foreign Secretary, was a very key player in this and prioritised this sort of work. I know that the Development Minister has always been very square in the need for humanitarian assistance and development in negotiations, so I am optimistic.

Q56 **Nigel Mills:** Are you surprised that we do not have a Disasters Emergency Committee appeal for this one yet?

Melanie Ward: I am having many conversations every day about the need for a Disasters Emergency Committee appeal, and I am very hopeful that we will see one in the days ahead. There is no doubt that one is needed.

My understanding is that the reason we have not seen one yet is because more aid needs to be able to flow into Gaza. As soon as we start to see that, I hope that an appeal will be launched, because the scale of this is enormous. The amount of funds that are going to be needed is huge.

Q57 **Nigel Mills:** If we get a short-term pause in the fighting that we cannot call a ceasefire, do you not need the money and the aid ready to roll if you get a four-day pause, rather than launching an appeal when you know you have one?

Melanie Ward: I do not disagree with you. Like I say, I am having conversations very regularly with a number of key people involved in the Disasters Emergency Committee. You will be aware that there are also many external players to them that determine when an appeal is launched. You are absolutely right, of course, that we need funds immediately, now, to be able to launch the kind of response that is required. Critically, we need the fighting to cease so that we can get the aid to the people who need it.

Q58 **Nigel Mills:** Is your appeal going well? Are there lots of people wanting to give money to this? That is one of the criteria. They have to think that there is public support.

Melanie Ward: We have never had such a generous and overwhelming response to any situation that we have worked on before. It is really striking. We have had donations from 130 countries around the world. We do not even advertise in many countries. That speaks to the fact that regular people in this country and around the world know that what they are seeing playing out on their TV screens is not okay. They know that this is unacceptable and they want to do something to help. It feels to me like politicians are somewhat behind the public on this, including in this country, and I hope that they catch up very soon.

Chair: Thank you. That is a good point to end on. It gives us hope. Thank you very much for taking the time to come in and speak to us. Thank you very much, Committee members, for your time as well. We just hope that we are going to get a resolution as quickly as we possibly can.



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