



Foreign, Commonwealth
& Development Office

**The Rt Hon Lord Cameron of Chipping
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Dear Sarah,

Thank you for your letter of 17 January regarding the healthcare situation in Gaza. I echo your assessment of the deteriorating situation and I remain deeply concerned by it.

I also pay tribute to the brave health workers operating under almost insurmountable challenges – the accounts I am hearing are horrific. I am hosting a meeting in early February, which will include NGOs and a number of UK-based medical professionals that have recently returned from Gaza. I will hear first-hand their assessment of the situation on the ground and ideas on what more the UK could do to help. My focus is very much on identifying practical solutions that will help ensure aid reaches the people who so desperately need it.

The evidence you shared from UNRWA, MAP and PRCS is shocking and heartbreaking. That is why we need to see an end to the fighting in Gaza as soon as possible.

Last week I travelled to Israel and the West Bank and wider region, working with partners to help build a plan to move from an immediate pause to get aid in and hostages out, then progress towards a sustainable, permanent ceasefire, without a return to destruction, fighting and loss of life. For this to happen, we have identified five vital steps:

- A political horizon which provides a credible and irreversible pathway towards a two-state solution;
- The formation of a new Palestinian Government for the West Bank and Gaza, accompanied by an international support package;
- Removing Hamas's capacity to launch attacks against Israel;
- The release of all Israeli hostages, and;
- Hamas no longer in charge of Gaza.

I also pressed the Israelis to do more to get more aid into Gaza and worked with regional partners towards making progress towards a further humanitarian pause.

In December I announced the appointment of my Representative for Humanitarian Affairs in the Occupied Palestinian Territories, Mark Bryson-Richardson. Mark is based in the region and is working intensively to address the blockages preventing more aid being delivered to and throughout Gaza, including with regional partners, the UN and other humanitarian agencies.

Lastly, I am sure that you have seen the very serious allegations about UNRWA publicised last week. We have temporarily paused any future funding for UNRWA while we review these allegations. We welcome the swift action UNRWA have taken to terminate contracts while it launches an immediate investigation. We recognise UNRWA is critical in delivering humanitarian assistance into Gaza and across the region and we remain committed to getting humanitarian aid to the people in Gaza who desperately need it.

On your specific questions:

Steps the UK Government is taking to advocate for the protection of healthcare facilities and workers in Gaza: Reports of attacks against healthcare facilities and health workers in Gaza are extremely troubling and must stop. The Prime Minister and I have repeatedly raised with Israel, the importance of all parties to the conflict adhering to International Humanitarian Law. We played a leading role in securing the passage of Security Council Resolution 2720, which set out the urgent demand for expanded humanitarian access. The resolution stressed the obligation of all parties to the conflict to respect and protect humanitarian relief and medical personnel. Three specific areas I am pressing Israel on are: i) for the IDF Central Command to participate in and respect the UN Humanitarian Notification System for deconfliction of static locations and movement of humanitarian staff and goods; ii) for the UN and partners to be provided with deconflicted routes from the South to the North of Gaza, to enable the movement of convoys on different routes; and iii) that all precautions are taken to protect, medical facilities, civilian infrastructure, aid workers and protected sites.

Steps the UK Government is taking to ensure that necessary long-term support for those in Gaza, such as psycho-social care is not lost amongst the need for immediate medical provision: Long-term needs for the civilian population will be immense. We assess that even once the conflict has ended, most people will remain displaced from their homes, in poor physical health and facing widespread diseases, malnourished, with a significant number on the edge of famine and – in the case of babies and infants – facing the risk of cognitive damage due to sustained malnutrition. As you point out, many people will be in need of psycho-social care due to severe trauma. We are not waiting for the ‘Day After’ to start responding to these needs. We are already supporting NGO partners to mobilize and deploy Mental Health and Psychosocial Support (MHPSS) teams and volunteers across the Gaza Strip and the West Bank. We are also supporting UNICEF to help children, adolescents and caregivers affected by conflict related violence with emergency and child protection services including MHPSS, and UNRWA to provide psychosocial first aid and other specialized protection services.

The amount of aid provided for by UK Government funding that has entered Gaza since 7 October: The UK has delivered 161 tonnes of life saving aid and equipment to Egypt for the Gaza response. This comprised 74 tonnes on board four RAF flights and 87 tonnes on board RFA Lyme Bay, including five tonnes of Cypriot medical supplies. A number of items have been denied entry by Israel (see below). The 161 tonnes also included equipment specifically requested by UK partners in the region, including by the Egyptian Red Crescent Society (ERCS), to increase the capacity of agencies to manage and deliver significant quantities of aid to Gaza via the Rafah border crossing, such as forklift trucks, conveyor belts and lighting towers. Additionally, we are funding a number of trusted partners through their large-scale appeals to procure and deliver aid to Gaza, including WFP, who have delivered over 2100 tonnes of food via a UK-supported Jordan land corridor. However, the support to large scale appeals prevents us from directly attributing UK funding to specific items.

The amount of aid provided for by UK Government funding that has been turned back at the Gaza border and the reasons for it: Lord Ahmad and I visited Al-Arish in December, where we saw first-hand, the impact of lifesaving UK aid to the people of Gaza and discussed with the ERCS, the challenges to the cross-border aid operation. Due to Israel's dual use policy, some items within the 161 tonnes delivered directly to Egypt by the UK, have been returned to ERCS warehouses in Al-Arish until they are able to enter Gaza. This includes 2,560 solar lanterns and 1,350 water filters. The lanterns have been denied on the grounds that they could be used by Hamas to light tunnels. We do not have an explanation for the water filters but continue to press Israel for greater flexibility and visibility on goods allowed into Gaza. In relation to multi-donor appeals, we are unable to attribute individual items turned back at the Gaza border to UK funding.

Whether aid funded by the UK Government has been distributed fully and by whom: UK funded aid to Gaza is being delivered by a number of trusted UN, NGO and Red Crescent Society partners. Given the complexity of the operation, it is not possible at this stage to track the distribution of UK funded aid. However, I can confirm that all items on board RFA Lyme Bay have been delivered and distributed in Gaza.

The steps the UK Government is taking to ensure that aid it has provided for is distributed in accordance with humanitarian principles: The UK is working with humanitarian partners such as UNRWA, UNICEF, OCHA, ICRC and the Egyptian Red Crescent Society and supports those partners in working according to the humanitarian principles of humanity, neutrality, independence and impartiality. The principle of impartiality - that "humanitarian action must be carried out on the basis of need alone, giving priority to the most urgent cases of distress and making no distinctions" - is particularly relevant in Gaza, where the levels of need are enormous. Humanitarian needs greatly outweigh the capacity of humanitarian agencies to meet them, and therefore, any assistance provided is vital. Those who have been displaced, children, women, the elderly, the injured, the traumatised are assisted as best as agencies can, but until the crossings are fully opened, there will not be enough supplies available to meet needs.

Thank you for highlighting your letter and I look forward to our continues engagement on these issues.

Yas,
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