Submission on the situation of persons with disabilities in the Occupied Palestinian Territory by the Palestinian Disability Coalition and the Collective for Breaking the Silence on Palestinians with Disabilities for the Special Rapporteur's forthcoming report for GA79

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Introduction

The present submission is made by the Palestinian Disability Coalition and the Collective for Breaking the Silence on Palestinians with Disabilities. It addresses the situation of persons with disabilities in the occupied Palestinian territories in the current conflict, and the broader context of Israeli settler-colonialism. Besides the growing number of people becoming disabled due to targeted disablement and other attacks by Israeli occupation forces, people who had disabilities pre-October 2023 are experiencing human rights violations which target and potentially exacerbate their disability.

The experience of disablement has given rise to human rights violations related to rights to freedom from violence, torture and ill-treatment, to life and health, as well as specific humanitarian aid needs. It also creates the conditions for lifelong human rights violations

well beyond the disabling event, because people with disability are at higher risks of human rights violations across their lives. Disablement of individuals and debilitation of the population can reduce their capacity to physically resist occupation, and in turn to assert their human rights.^{1,2}

Persons with disabilities are an integral part of every society and the struggles, violations and disproportionate and targeted attacks experienced by Palestinians with disabilities serve to shed more light on the all-encompassing nature of the genocidal war. Quotes from testimonies of persons with disabilities in Gaza and the West Bank are also presented below and are cited from a webinar held recently with members of the Palestinian Disability Coalition and other activists.³

1. Main violations of international law that have occurred in the 1967 occupied Palestinian territory in the relevant period.

Violations of right to life, bodily and mental harm

Since October 7, more than 37,396 Palestinians have been reported killed, at least 5,000 out of the 79,562 people injured were persons with disabilities and they are estimated to constitute more than 15% of the displaced population.^{4,5} This is likely an underestimated representation of the actual prevalence. The evidence of disablement, through bodily and mental harm, also extends to Palestinian children, with more than 1,000 children having acquired a disability since October, with 10 to 12 children undergoing amputations daily, many without anesthesia.^{3,6} A 2020 study showed that 53,5% of Gazan children had PTSD even before this conflict period. Relentless bombardment and displacement and the loss of family members predispose children to anxiety, depression, post-traumatic stress disorder (PTSD), and other adverse mental health.^{7,8}

There are no inclusive evacuation actions during Israeli military attacks such as in the north or Jenin Camp, where several persons with disability have nowhere to go while operations take place right around their homes. Further, the destruction of infrastructure makes it impossible for residents with disabilities to move. According to multiple testimonies

¹ Obermaier, L. (2024). Disabling Palestine: the case of Gaza's Great March of Return. Race & Class, 65(3), 27-46. https://doi.org/10.1177/03063968231203485

² PUAR, J. K. (2017). The Right to Maim: Debility, Capacity, Disability. Duke University Press. <u>https://doi.org/10.2307/j.ctv11314kc</u>

³ Bearing Witness: Palestinians with disabilities in Gaza & all occupied Palestine webinar, 10/06/2024, <u>https://www.youtube.com/watch?v=ui9uBJyuaLc&t=1284s</u>

⁴ <u>UN OHCHR, Press release 27/05/2024, 'Palestinians with disabilities subject to unbearable consequences of the ongoing hostilities and violence in the OPT';</u>

⁵ UN OCHA, <u>https://www.ochaopt.org/</u>

⁶ Save The Children, 07/01/2024, 'Gaza: More Than 10 Children A Day Lose a Limb In Three Months Of Brutal Conflict'.

⁷ Taha, A. M., Sabet, C., Nada, S. A., Abuzerr, S., & Nguyen, D. (2024). Addressing the mental health crisis among children in Gaza. The lancet. Psychiatry, 11(4), 249–250. <u>https://doi.org/10.1016/S2215-0366(24)00036-1</u>

⁸ Save The Children, 12/03/202, "Complete psychological destruction - Children in Gaza have suffered relentless mental harm during five months of war".

collected, the violence and forced displacement in Gaza have had devastating effects on people with disabilities. Deaf and hard of hearing individuals were unable to hear warnings and were killed in targeted shelling. People with diverse disabilities also struggled to follow evacuation instructions from Israeli forces, which were not accessible, leading to many being killed during forced displacements. Additionally, individuals with disabilities faced arrests and severe mistreatment at checkpoints, with reports of torture, especially among those who are deaf or hard of hearing.

Testimonies:

Anji Malak on deaf and hard of hearing people in Gaza³: *"There are some friends who were killed in cold blood because they were in a place that was targeted and shelled. They could not hear the sounds. They could not hear the missiles. Israel is exercising violence in cold blood without any feelings towards these people."*

Dr. Mohammed al Arabi, Zarif al-Gore, and Jehad Arafat, on Palestinians with disabilities killed in situations of forced displacement in Gaza³: "We received messages to exit the city of Gaza in the northern part of the Gaza strip to the south which was designated as a safe area as claimed by the occupation forces. These messages did not consider the needs of persons with physical, mental, hearing, motor, visual or other impairments. Many people with hearing impairments were killed by snipers because they could not hear the instructions and the Israeli occupation forces thought that they were ignoring them. A number of persons with mental disabilities who could not understand the instructions were also killed in cold blood. Visually impaired people did not have any guidance about where to go either, during shelling and missile strikes. Everybody starts to flee around them, and they don't know where to go because they don't see the directions. They hear loud sounds and get confused. Similarly, persons with motor disabilities cannot reach their wheelchairs and leave the house after they receive a shelling threat. Everybody flees for survival, many children that could not leave the threatened houses have been left behind and lost their lives in these houses."

Dr. Mohammed Al-Arabi, on arrests and ill-treatment of persons with disabilities during displacement³: *"I personally was displaced nine times since October 7: from my location in the north to Gaza, then to the mid areas, then Khan Younis, then to Rafah, and then we returned to Khan Younis and then we returned to the mid areas once again. We had only the clothes on us. During the displacement, many people with hearing disabilities, mental disabilities, and motor disabilities, were detained at checkpoints between Gaza City and the southern areas. Around 300 persons were arrested. Some were released, but others are still under detention. Many of them reported severe torture after being released, especially those with hearing disabilities. They could not speak, and the occupation forces thought that they were mocking them in sign language so they were severely tortured. Recent statistics reveal around 200 persons with disabilities who were targeted directly or indirectly. All of their* names are in a list that we have. We know many persons with disabilities who were killed in their homes. They were killed with their families, spouses, children."

Zarif al-Gore, on the disproportionate impact on persons with disabilities³: *"Killing became like drinking water, it is every second. At any minute you may die. Your house, your hospital, your school could be shelled, and there is no safe place in the Gaza Strip. If a person goes to a school they would be shelled, in a mosque they would be shelled, in a hospital they would be shelled. There is no safe place. Persons with disabilities are easy prey. Under shelling, we lose our support. Everybody runs away, trying to save themselves and persons with disabilities are left behind."*

Displacement, access to healthcare, disability services and humanitarian aid

Over 60% of housing units in the Gaza Strip have been damaged by the Israeli forces, with 70,000 housing units destroyed, and the average number of people in shelters reached 2.5 times their capacity, leading to the forced displacement of persons with disabilities to areas without accessibility, for example to shelters or tents without any accessible toilets, with only option of squat toilets, inaccessible to people with mobility difficulties.^{4,9} Many persons with disabilities cannot comply with evacuation orders and are left behind.⁹

Testimonies indicate persons with learning, developmental, communicational, and intellectual difficulties living in disturbing and scary conditions in shelters across Gaza, which are overcrowded and don't have appropriate nor accessible information explaining the current conditions and the ongoing genocidal war. This brings about behaviors and reactions, including screaming or aggression, that are difficult to alleviate. Consequently, they become unwelcome in the shelter centers, where everybody is already facing intolerable circumstances, and face greater risks being exposed outside.

Information on evacuation orders, the location of so-called "safe areas", and where or how to access humanitarian aid are not accessible, and internet disruptions make it even harder to find any kind of guidance in accessible forms. Informational, communicational, and physical barriers impede access to aid distribution points for food, safe water, and other essential assistance.^{9,10} Many people with disabilities lost their caregivers or supporters, and/or became the sole responsible for getting aid for their families. Even if they can find out where to receive essential humanitarian aid and overcome the physical and communicational barriers, there have been reports of attacks targeting humanitarian

⁹ Human Rights Watch, 01/11/2023, Gaza: Israeli Attacks, Blockade Devastating for People with Disabilities.

¹⁰ ACAPS report, 14/02/2024: Palestine - Impact of the conflict on people with disabilities in the Gaza Strip.

convoys and civilians seeking aid such as the 'Flour Massacre' in February 2024, where persons with disabilities were not able to escape.¹¹

Persons with disabilities generally have more healthcare needs than others, often essential to prevent impairment or exacerbating conditions. However, evidence indicate that access to disability and healthcare support in Gaza is now impossible. Out of the 36 hospitals in Gaza, only 4 were not damaged, raided by Israeli forces, or had gone out of service.¹² There has been forced evacuation and bombing of hospitals leading to critically ill individuals, newborns, pregnant women, and many more, having health complications or dying.¹³ Disability organizations and services are not able to operate in the context of Israel's military campaign, and many have been targeted, including specialized facilities for persons with disabilities such as Sheikh Hamad Hospital for Rehabilitation, the Assistive Devices Center of the Palestinian Medical Relief Society, among others.¹⁴ Rehabilitative and educational services have been disrupted due to closures, and the destruction of several institutions including ones that belong to the UNRWA, such as the case in Toulkarem, Jenin, and some of the villages surrounding Bethlehem.

There is little or no access to medical care and life-saving medication, such as for diabetes, nutritional supplements, cardiovascular conditions, or anti-epileptics.⁹ Anesthesia is also absent or low, leading to people, including children, undergoing surgical procedures such as amputations without it.^{14,15} This has been made even more difficult due to the Israeli blockade of essential humanitarian aid, such as fuel, food, water, medicine, and others.

Besides essential general items, people with disabilities also require assistive devices, such as wheelchairs, walkers, crutches, hearing aids, and batteries, for daily living, evacuation, and survival. These devices were already difficult to find due to Israeli restrictions on the movement of people and goods prior to October 7. Since then, the Israeli forces not allowing these and other essential assistive devices to enter Gaza through humanitarian aid exacerbated the difficulties for persons with disabilities to survive and protect themselves. Some had their medical or assistive devices destroyed during Israeli strikes or had to leave them behind during the evacuation.^{9,10,14} Some assistive equipment is powered by electricity, so electricity outages made it impossible to use devices such as food-grinding equipment, mobility scooters, or even elevators.¹⁰

Testimonies:

¹¹ <u>Defense for Children International - Palestine, 05/06/2024, Israeli genocide targets disabled Palestinian children's futures.</u>

¹² The Washington Post, 21/05/2024, Mapping the damage to Gaza's hospitals: Battered, abandoned and raided.

¹³ World Health Organisation, 14/10/2023, "Evacuation orders by Israel to hospitals in northern Gaza are a death sentence for the sick and injured".

¹⁴ Qader Foundation, 04/2024, "The impact of the Israeli aggression on the Gaza strip on the rights of persons with disabilities".

¹⁵ The Washington Post, 20/01/2024, "A kitchen table amputation without anesthetic in Gaza is one of many".

Zarif al-Gore, on the lack of disability support³: "There is no life. Everything that surrounds persons with disabilities does not exist. When we speak of services, there are no services in Gaza, there is no government, there are no institutions, and the occupation prevented any institutional acts. All the UN organizations, Red Cross, and all other humanitarian organizations were prevented from working in Gaza. The occupation forces also shelled the civil society organizations and prevented them from offering services. So, persons with disabilities are prey to the occupation that is killing, injuring, and total absence of any kind of support service. If we need a cane or a wheelchair or a pill to take, we don't find it. Any person with a hearing disability, for example, cannot change the batteries of their hearing device. This doubles the suffering. If we need to go to the toilet or anything, we don't get any help at all. There is no organization that can provide adaptive services to persons with disabilities."

Dr. Mohammed al Arabi on the targeting of healthcare and disability facilities and

assistive devices³: "Hospitals, and clinics were destroyed in Gaza, starting with the largest hospital to the smallest clinic. They were all targeted. So, persons with disabilities cannot get treatment. During the period in which hospitals still operated, there were other priorities. Persons with special needs were not a priority, there were more critical cases and doctors and nurses could not keep up. People with ulcers, for instance, would aggravate because of lack of medication and lack of medical follow-up."

"The occupation also prohibited the entry of any assistive devices in aid convoys that entered Gaza. They prevented wheelchairs or the visual or hearing aids, they were all prevented through the Rafah or other border crossings. 72 institutions working with persons with disabilities were destroyed. Not one building has remained. I worked with the motor disability association that runs a clinic, a school for children and a playground. They were fully destroyed. We worked with HI, and it was the first rest house for persons with motor disability in Palestine. We have videos of the destruction, it was horrific. They left no institution. The teams were displaced from the north, or even from the south. No institution can operate because their buildings were demolished and the staff and the employees are not being paid."

Jehad Arafat (OPT, OHCHR) on starvation, destruction of hospitals, and vital

infrastructure³: *"Food security is forcing extreme coping strategies, such as eating grass and animal feed. Severe starvation and dehydration are common for persons with disabilities. The crisis disproportionately affects them. The destruction of assistive devices and lack of psychotropic medication, the bombardment of the only psychiatric hospital in Gaza, and constant air strikes have severely impacted emotional wellbeing, mental health and psychosocial needs. Access to clean water is also a significant issue. People with disabilities face long and arduous journeys to fetch water. Toilets and shelters are often inaccessible forcing some to reduce food and beverage intake. The scale of protection needs is*

unprecedented. Attacks on civilians, forced displacement, denial of essential service and high concentration of displaced persons create complex protection needs. Local organizations of persons with disabilities are themselves affected by injuries, displacement and trauma."

Palestinian prisoners

While international law sets out the protection and safety of prisoners of war, there have been reports of arbitrary arrest and detention, and horrifying conditions of detention of Palestinians, including of people with disabilities and children. Prisoners face starvation, denial of medical care, sexual violence, exposure to the elements, hygiene deprivation, overpopulated cells, and long delays in having their location disclosed to legal teams/humanitarian organizations or their families.¹⁶ According to several public and civil society organizations working on Palestinian political prisoners' affairs and news agencies, through releases disseminated on 17 April 2024 (the Palestinian Prisoners Day)^{14,17}:

- the number of Palestinian prisoners in Israeli detention centers and jails is around 9500, which does not include many Palestinians who disappeared in Gaza;
- At least 16 Palestinian prisoners died or were killed from torture, which also does not include Gazans of whom the Israeli Occupation Forces hide their identities.
- 27 bodies of Palestinian prisoners have been reserved, (not given to the families);
- 80 Palestinian women are in Israeli jails, excluding Gazans. Since the 7th of October, 3660 Palestinian prisoners have been on so-called administrative detention, which is considered an unprecedented number in the history of the Palestinian prisoners' movement. Many of those are previously detained Palestinians, in addition to other groups such as lawyers, journalists, physicians, students, and other groups.
- the number of sick prisoners has increased since the October 7, due to methodic revenge policies and procedures including but not limited to medical crimes and torture. In this regard, it is worth mentioning that public and civil society organizations would rarely offer disability disaggregated data on Palestinian political prisoners, and this stat is usually confused with prisoners who are sick.
- As we gathered from Palestinians active in the disability movement, several Palestinians with disability have been arrested in Gaza since October 7, and only one of them seems to have been involved with the Palestinian resistance movement. There is no information made available about him or all the others.

Testimonies:

Zarif al-Gore on murder, arbitrary detentions and torture of persons with disabilities³: *I recall the story of Mohammed Abd Alkareem Hossain Alselek, a man whose legs were*

¹⁶ <u>An urgent call to the International community by the families of Palestinian prisoners of war in Israeli occupation prisons,</u> 05/06/2024.

¹⁷ Addameer: Prisoner Support and Human Rights Association, <u>www.addameer.org</u>, accessed on 07/06/2024.

amputated in the aggression in 2014. He lost his children then. During this current aggression, the occupation forces besieged his house and killed him with his wife and uncle in cold blood. He did not represent any danger or threat to the occupation forces but was killed with his family in Alshija'aia. There is also the torture of 35-year-old young Ezzalden Zyad Abd Albanna. He has paralysis in his lower limbs. He was arrested by the occupation forces. They dragged him to a detention center, tortured him without any services or medical care. The Red Cross and other humanitarian organizations intervened but the occupation refused to listen. He was killed under torture and medical negligence."

"I met with the OCHA, and I asked for assistance with aid tools, assistive devices for persons with disabilities. We don't have these anymore. Nobody is offering these tools/devices. We are living a genocide, we face death in every breath. I could be a victim of a missile where I am right now, and the world sees us only as numbers. We consider the world as a partner in the crimes against us. Every person who keeps silent is a partner in the crime that we have been living. I hope you can intensify efforts and pressure on all officials in the world, the United Nations, each one of us can communicate a message, can present a case. We must raise our voices and say enough is enough. Enough of silence. Words cannot describe what we are enduring in the Gaza strip."

Anji Malak on deaf and hard of hearing people in Gaza³: *"There were arrests as was mentioned by Dr. Mohammed, they were subjected to violence, a person with a hearing disability told us how he was detained for 50 days during which he was subjected to violence, beating, blindfolding and other torture methods. We have a colleague in the west bank who is originally from Gaza. He was supposed to be with us in this webinar. He could not participate because he's afraid that he could be arrested by the occupation forces. He lost his father in this war. He lost also his nephew in this war."*

Women and girls with disabilities

Women and girls with and without disabilities are being specifically and disproportionately targeted by the Israeli occupation. The barriers to healthcare facilities are particularly prominent for pregnant women, with many giving birth without anesthetics or other medication. ^{10,14,18} The International Planned Parenthood Federation says that stress and shock are causing many women to miscarry, with CARE International reporting a 300% increase in the miscarriage rate among pregnant people in Gaza since Israel's attacks.¹⁹

Overcrowded shelters and unsafe WASH facilities heightened the vulnerability of women with disabilities to sexual assault, sexually transmitted infections, and forced healthcare practices, such as abortion, because of limited access to sexual and reproductive health.^{10,14}

¹⁸ Palestinian Centre for Human Rights, March 2024, 'Israel's Measures Intended to Prevent Births within Gaza Strip' report.

¹⁹ CARE International, 25/01/2024, 'The long shadow of starvation in Gaza'.

There were reports of sexual violence also during detainment.²⁰ Moreover, given the breakdown in support systems, women and girls, including those with disabilities, are taking on more care and support responsibilities within their families and networks, yet continue to face patriarchal and ableist barriers.

Lateefa Al Jabari, a disability rights defender from Gaza working with hundreds of women and girls with disabilities, observed that during this period of aggression, "aid is not reaching women with disabilities, under the pretext that they are not responsible and not the heads of households."

Anji Malak, Deaf activist shared: "We also speak of the time of menstruation and period and post-natal needs. We don't have medical care. At least hygiene pads. They are not available to women. It was embarrassing for many women at the beginning of the war and if the pads are available, they were too expensive. There isn't water for showering or for these daily life issues."

Jehad Arafat (OPT OHCHR): "The collapse of sanitation facilities, lack of safe shelters, and restricted access to food and water have increased the reliance on caregivers, making survival particularly challenging for women, children and older persons with disabilities. The crisis has heightened vulnerabilities, including sexual abuses for women with disabilities and early marriage for girls."

2. Direct policies or patterns of conduct (including any application of 'humanitarian camouflage' set out in the Rapporteur's last report) are evident from the alleged perpetrators.

The West Bank, for decades before the 7 October and until present, has been targeted by the Israeli Occupation forces through settlement expansions, detention and imprisonment, displacement of communities, demolition of houses, infrastructure and institutions, checkpoints, arbitrary inspections, military operations, settler attacks targeting people, trees and properties, and many others. Persons with disabilities have experienced disproportionate impacts of these practices, continuing under the current war. The absence of inclusive emergency plans and the absence of a social protection system be it in the West Bank or Gaza, has rendered Palestinians with disabilities less prepared and less resilient.

However, many more barriers have worsen their situation since the Israeli attacks following October 7; indiscriminate attacks, forced displacement, targeting of healthcare and disability support facilities, detention, and blocking of essential aid as set out above.

²⁰ UN OHRCR, Press Release 19/02/2024, "Israel/oPt: UN experts appalled by reported human rights violations against Palestinian women and girls".

Palestinian activists with disabilities suggest that every Palestinian is a target for the Israeli Occupation's war machinery; disability in this regard is an additional burdening factor. Accordingly, the Israeli crimes against persons with disabilities in Palestine are a continuation and expansion of all policies and practices incorporated in the structure of this regime and designed to achieve the ethnic cleansing of Palestine.

Shatha Abu Srour, disability activist shared: "Since persons with disabilities are an integral part of the fabric of society, they are naturally susceptible to the practices of this settler colonial project. This colonial project and its occupation practices are increasing the number of persons with disabilities through their attacks and the aggression. They are deliberately increasing the disability rates when they target, when they shell, when they shoot. They have the intention to cause permanent disabilities to the victims."

3. Who are the alleged perpetrators for these violations?

More directly, Palestinian activists believe that the exact perpetrators responsible for designing and implementing those policies are: the Zionist movement; and the so-called State of Israel, which has been built on the Palestinians' bodies, lands, trees, dreams, homes, and all promises of dignified life; all states who support this settler colonial occupying regime militarily, politically, diplomatically, economically, ideologically, technically and informationally, including but not limited to: the United States of North America, the European Union, most Arab states, and unfortunately the Palestinian Authority.

It is worth noting that most of these States are parties to the UN Convention on the Rights of Persons with Disabilities (CRPD) ratified by 191 parties, including Israel and the EU. In its Article 11, the CRPD explicitly states that: *"States Parties shall take, in accordance with their obligations under international law, including international humanitarian law and international human rights law, all necessary measures to ensure the protection and safety of persons with disabilities in situations of risk, including situations of armed conflict, humanitarian emergencies and the occurrence of natural disasters."* The CRPD Committee is currently developing a General Comment on Article 11, and input from the Special Rapporteur could help to bring guidance based on lessons learned from the exclusion of persons with disabilities in humanitarian efforts of this present armed conflict and longterm occupation.

4. What conduct, policies and/or practices by actors in the broader international community during the reporting period, might rise to the level of international legal liability for complicity in and/or perpetrating these violations?

Defunding UNRWA

In its 2023-2028 strategic plan, UNRWA adopted the UN Disability Inclusion Strategy guidelines for disability inclusion across its programs and services, based on the twin-track approach.²¹ The agency provides vital services for persons with disabilities in Gaza and all occupied territories. The decision of the governments of the United States, Germany, the EU, Sweden, Japan, France, Switzerland, Canada, Australia, Austria, Britain, Estonia, Italy, Latvia, Lithuania, the Netherlands, Romania, New Zealand, and Iceland to suspend funding to UNRWA was an abrogation of their international commitments, including as parties (or signatory in the case of the US) to the CRPD. The withdrawal of this vital lifeline to persons with disabilities in Gaza in the context of no other agency or organization being able to replace it renders these governments complicit in the deprivation of support, healthcare, food, water, electricity and other services essential for the lives of disabled Palestinians.

5. Impact of international organizations/mechanisms in fulfilling or otherwise their mandates on the conduct, policies and practices being enacted in the occupied Palestinian territory?

Despite the near universal ratification of the CRPD and its specific provision on situations of risk and humanitarian emergencies (Article 11), the adoption of the first-ever <u>Security</u> <u>Council Resolution 2475 (2019)</u> on the protection of persons with disabilities in armed conflicts, and other related instruments, such as the <u>Charter on Inclusion of Persons with</u> <u>Disabilities in Humanitarian Action</u> (endorsed by several parties including the United States of America, the European Union, UN agencies, including UNRWA, and many others), there is a staggering failure to address the situation and the rights of persons with disabilities in Palestine, resulting in their deaths, targeted killings and exclusion from humanitarian aid and efforts. Contrary to the commitment to leave no one behind and reach the furthest behind first, persons with disabilities in Gaza and other parts of the occupied territories are the last to be reached and to receive information or aid, if at all.

Political conditional funding is a major discriminating policy imposed on Palestinian organizations by many funding entities. Civil society organizations have been actively filling

²¹ The twin-track approach involves: (1) ensuring all core programmes, such as education, health, relief and social services, and infrastructure and camp improvement, are inclusive and accessible to Palestine refugees with disabilities, while at the same time (2) providing targeted disability-specific support, such as the implementation of the Disability Programme in all five fields of operations, in order to address particular vulnerabilities, to facilitate rehabilitation, to equalize opportunity for persons with disabilities and to facilitate their inclusion.

gaps, even before the establishment of the Palestinian Authority, as Palestinian public institutions do not prioritize disability issues. These organizations play key roles in facilitating the access of persons with disabilities to services and making those services available. However, political conditioning of funding undermines the Palestinian resistance, reinforcing certain priorities and the scope of work in Palestine, and serves to fragment its civil society. Organizations affected by these conditions, such as the Palestinian Disability Coalition and its member organizations, have been intensively working with and for persons with disabilities, especially during times of conflict, but they often refuse such funding due to its alignment with the Israeli occupation. Consequently, their services and advocacy campaigns are curtailed. It is worth noting that political conditioning of funding requires organizations to conduct certain vetting acts on contracted parties, and in many ways, on beneficiaries. It has also a censoring effect on organizations' rhetoric, positions, and interventions. As a result, many persons with disabilities who acquired their disability from being injured by the Israeli Occupation forces, whether they happen to be in a certain place at a wrong time, or they happen to be Palestinian resistance, will be denied services of organizations that accept receiving political conditional funding. This is one of the most disturbing examples that portray the politicization of human rights, especially when international humanitarian law serves as an organizer for occupation/colonization, hand in hand with legitimizing resistance. Finally, it is very important to state that one of the Israeli occupation's well-known policies is 1) shoot to kill; and 2) shoot to cause permanent difficulty/disability. Thus, it is unacceptable for many Palestinian civil society entities to receive such funds, which tremendously jeopardizes their capacities to meet the needs of their people.

6. What are key human rights factors, considerations and risks in the aftermath of the war and what would constitute appropriate and comprehensive reparations (restitution, compensation, rehabilitation, satisfaction and guarantees of non-repetition) for all victims of the last escalation of violence?

People with disabilities must be included in all reparation efforts and processes. For example, persons with disabilities, together with other Palestinians, should be key players in the dismantlement of the settler apartheid regime, and in efforts to restore and rebuild Palestine to be a state that welcomes everybody, regardless of their differences, where all citizens will enjoy their rights independently, inclusively, equitably and with dignity.

These processes must be accessible to and inclusive of people with disabilities (including women with disabilities), respond to their particular experiences of human rights violation (including disability-specific harms and violations of the CRPD), and be an opportunity to

rebuild more inclusive, accessible, and just societies for people with disabilities (e.g., not rebuilding inaccessible or segregated institutions or practices of institutionalization).^{22,23,24}

There is a need for a specific and intentional approach to disability in reparations to ensure a respectful and progressive view of disability in the approach, where reparations for disablement and trauma must be delivered in a human-rights approach to disability, rather than through the medical model of disability. Reparations must uphold the dignity, selfdetermination, and equality of persons with disabilities in practical terms (e.g. rehabilitation or reparations must not involve forced treatment or institutional care; compensation must not involve substitute financial management of funds) and in discursive terms (e.g., not sending a message that disability is negative, burdensome, dangerous, etc.).

People with disabilities must be asked what reparations they want. A one-size-fits-all approach needs to be avoided, which is a common problem with reparations (or redress schemes in domestic legal contexts). They do not always reflect victims'/survivors' understanding of redress or their perspectives or priorities on what forms redress should take. Asking people what reparations they want will require inclusive and accessible processes, including for people's diverse communication methods and ways of learning and processing information (e.g., Easy-Read, braille, sign language, augmentative and alternative communication- AAC).

Additionally, there is also a need for attention to intersectionality in reparations and to avoid assuming a homogenous approach to reparations processes (e.g., noting different accessibility requirements) or outcomes (e.g., different people have different preferences and needs concerning rehabilitation), including attention to the diversity of experiences and needs of people with disabilities (e.g., impairment, age, gender, etc.). People with intellectual disabilities and people living with dementia might be particularly at risk of exclusion.

Reparations involving restitution must also be mindful of possibilities of trauma associated with previous interactions with medical and social care sectors, and thus ensure people's autonomy and choice are respected.²⁵

7. Other relevant information to assist the Special Rapporteur in drafting the report.

²² OHCHR A/78/174, 13/07/2023, "Peacebuilding and the inclusion of persons with disabilities - Report of the Special Rapporteur on the rights of persons with disabilities.

²³ Special Rapporteur on the rights of persons with disabilities, 15/08/2019, "International Principles and Guidelines on Access to Justice for Persons with Disabilities".

²⁴ UN Security Council, S/RES/2475(2019), Resolution 2475, 20/06/2019.

²⁵ Minkowitz, Tina. 2024. "Deinstitutionalization as Reparative Justice: A Commentary on the Guidelines on Deinstitutionalization, including in Emergencies" Laws 13, no. 2: 14. <u>https://doi.org/10.3390/laws13020014</u>

We believe it is essential that the Special Rapporteur's report address the situation of persons with disabilities as they have been continually overlooked in the genocidal war and are experiencing very specific and complex violations of their rights.

Above all, we seek the Special Rapporteur's support in addressing the following urgent points with the relevant international and regional authorities that exercise power and influence in these domains:

- Lifting restrictions to allow disability-inclusive humanitarian aid into Gaza and other occupied territories, including assistive devices (wheelchairs, crutches, batteries, etc.) and medicines required by persons with disabilities;
- ii. Ensuring that humanitarian action is inclusive and accessible in order for persons with disabilities to benefit on an equal basis with others, including information and communications, as well as food, water, medicines, shelter and WASH facilities;
- Reviewing and releasing detainees, particularly those with disabilities being held in conditions that do not accommodate their impairment and put at risk their physical and mental health;
- iv. Facilitating the exit of persons in need of urgent medical treatment including persons with disabilities and persons with chronic health conditions from Gaza;
- v. Standing in solidarity with Palestinians with disabilities and bringing light to the disproportionate impact experienced by them in this war and long-term occupation.