Women with Cancer Face Imminent Death in the Gaza Strip Amid Ongoing Genocide
The Right to health is a fundamental human right protected by all relevant instruments of International Human Rights Law (IHRL) and International Humanitarian Law (IHL). Patients’ access to treatment and fulfilling their health needs is essential to the realization and provision of right to health.

Under IHL, Israel, as an occupying power, has well-defined obligations under the 1949 Fourth Geneva Convention and International Customary Law, including the 1907 Hague Regulations, which all guarantee health rights of civilians in times of armed conflict and in occupied territories and provide special protection to sick civilians.

Since its founding, the Palestinian Centre for Human Rights (PCHR) has monitored the Israeli restrictions on Palestinian civilians’ enjoyment of their full health rights, including the strangulating closure imposed on Gaza that has left the health system incapable of providing services to patients with serious diseases, and severe limitations on patients’ right to travel abroad for medical treatment that is not available in Gaza.

Since the Israeli military aggression started on 07 October 2023, patients in the Gaza Strip has suffered catastrophic health conditions. Meanwhile, PCHR has documented those women with cancer has experienced compounded violence, especially that cancer incidence rate among women in the Gaza Strip is higher estimated at 54% as there are types of cancer affecting only women such as breast, uterine and ovarian cancers. Moreover, breast cancer is the most common in the Gaza Strip accounting for 19.2% of all cancer cases.

The report sheds light on the Israeli measures impeding women with cancer from enjoying their health rights amid the ongoing aggression. These measures fall under Israel’s relentless genocidal acts committed against the Palestinian civilians in the Gaza Strip since 07 October 2023. These unlawful measures include deliberately targeting Gaza health system, forcing the Turkish-Palestinian Friendship Hospital in Gaza to cease operations, hindering patients’ travel for treatment abroad and imposing a disastrous health situation that has serious implications on patients’ health and led to their death while cancer has spread in other patients’ bodies forcing them into imminent death.
i. Catastrophic Situation of Women with Cancer in the Gaza Strip during the Israeli-imposed siege on the Gaza Strip

In the Gaza Strip, 2,047 new cancer cases were reported, with incidence rate 94.5 cases per 100,000 population in 2022. Breast cancer is the most common type in the Gaza Strip with 394 new registered breast cancer in 2022 which is 19.2% of all new cancer cases with incidence rate 18.2 cases per 100,000 population.\(^1\)

Meanwhile, the total number of registered female and male cancer patients in the Gaza Strip is 10,000, including 2000 under treatment and 8000 under follow-up and examination.\(^2\) Cancer incidence rate among females is the highest with 54% of all reported cancer cases in the Strip as there are types of cancer affecting women only such as breast, uterine and ovarian cancers. In the Gaza Strip, breast cancer is the most common type of cancer among females followed by colon cancer, lung cancer and thyroid cancer.\(^3\)

In November 2021, the Palestinian Ministry of Health (PMOH) relocated oncology and oncology-related services from the different governmental hospitals in the Gaza Strip to the Turkish-Palestinian Friendship Hospital in a bid to unify the diagnostic and treatment services in one specialized and integrated center. Thus, this hospital has become the only specialized hospital to treat cancer patients in Gaza and provide them with psychological support. Before the Israeli military aggression was launched on Gaza on October 7th, the hospital was providing health services to female cancer patients within the available capabilities. The health system was already frail due to 17 years of Israeli strangulating closure imposed on the Gaza Strip, failing to provide the essential services for female cancer patients and fulfill their right to health. This has forced the PMOH to refer the female cancer patients for treatment abroad and eventually led to another violation and exaggerate their suffering through the Israel’s obstruction of these patients’ travel and tightening the criteria required for obtaining permits to travel via Erez Crossing.

1. Israel’s ban on entry of medical devices necessary for female cancer patients’ treatment:

Israeli restrictions imposed on the entry of medical equipment have continued to hurdle the ability of the Gaza Strip health facilities to provide medical services. Israel’s onerous “dual-use list” of materials it classifies as having a potential military use restricts entry of some medical equipment, including many devices necessary for the treatment of female cancer patients, such as X-ray scanners and medical radioisotope.\(^4\) Restrictions and delays on entry for medical supplies limit health care availability in the Gaza Strip. In 2021, for example, of requests for entry of x-ray/CT spare parts or equipment, 69% were denied.\(^5\)

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\(^1\) Palestinian Ministry of Health, Annual Health Report 2022, pp. 64–68. Available at: https://site.moh.ps/Content/Books/qEbwa3OkFYRzxTPkZMgINqwMUHxwyY2NPBI5lui4FuikUtPnDiVA_jdAtJUL5SMcCo1cwhdKheWcMLNwvMRo2a7EjHcs7LEj5OkkGULmBUj.pdf

\(^2\) Interview with Dr. Ahmed al-Shorafa, oncology consultant at Fatmah al-Zahraa’ clinic in Rafah on 12 March 2024.

\(^3\) Interview with Dr. Sobhi Skaiik, Director of the Turkish-Palestinian Friendship Hospital in Rafah on 02 March 2024.

\(^4\) Palestinian Centre for Human Rights, Medical Equipment and Medicines in Gaza Strip: Perpetual Shortage and Serious Repercussions, March 2023, p. 6–7. Available at: https://pchrgaza.org/en/medical-equipment-and-medicines-in-gaza-stri...
There are 12 X-ray machines in the governmental primary health care centers across the Gaza Strip. These machines use old film developers that develop x-ray images of poor quality. Moreover, there are only 5 mammogram machines in the governmental hospitals providing the medical imaging services to women recognized as being at high risk for developing breast cancer and not part of the routine checkups. This limited number of mammogram machines is lower than median capacity for 1 million population. All of this combined is due to Israel’s ban on the entry of the breast cancer diagnostic and imaging devices necessary for diagnosing cancer among women although breast cancer was found to be the most common kind of cancer amongst women (34.3%). As cancer percentages increase among the Gaza strip population, it has become of dire need to have radiotherapy machines, including the Gama camera device.

Moreover, Israel bans sending out some medical devices to be repaired abroad, including CT scan machines and MRI machines necessary for the treatment and follow-up of female cancer patients. There are only 3 MRI devices in the Gaza Strip, 2 of which are not operational, becoming among the main reasons for referring patients abroad.

2. Shortage of medicines and medical supplies necessary for treatment of female cancer patients:

The chronic shortage of types of medicines poses imminent threat to patients, particularly female cancer patients, including lack of radiotherapy, chemotherapy, biological and hormonal therapies. Also, there a significant shortage of essential medicines necessary for their treatment, including Herceptin - Glivec - Taxol – Neupogen. This highlights the need for continuous flow of medicines for female cancer patients that may lead to incomplete treatment protocols, which usually include 3 to 4 types of medicines, and thereby deteriorating their health, reducing the chance of stopping the spread of cancer and posing imminent threat to the health and life of female patients.

The continued unavailability of types of medicines and lack of important medical devices for diagnosing tumors contribute to increasing the number of patients referred for treatment abroad, as 40% of female and male cancer patients are referred for receiving radiotherapy, 40% to receive chemotherapy, biological and hormonal therapies, and 20% for Atomic scanning. The female cancer patient is forced to go through long and arduous procedures in order to obtain a medical referral and then an Israeli permit to enter through the Beit Hanoun “Erez” crossing, after which she travels long distances in order to have an image or an atomic scan, all of this unless the Israeli occupation authorities obstruct her travel by refusal or delay.

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6 Palestinian Ministry of Health, Report of the Specialized Treatment Department, Palestinian Health Information Center, 2019.

7 Information about a CT scan machine equipped with a patient simulation system.

3. Obstruction of female cancer patients’ travel for treatment abroad

The Treatment Abroad Department PMOH operates the medical referrals and full financial coverage system for the Gaza Strip female patients, who suffer serious diseases that cannot be treated at the Gaza Strip hospitals. PMOH refers those patients to hospitals in the West Bank, including occupied East Jerusalem, Israel, Jordan, and Egypt according to a protocol signed by PMOH with its counterparts in these States.

The process of obtaining a medical referral for female patients’ treatment abroad is lengthy and tiring. The referral procedures begin with the approval of a specialist doctor, who follows-up the patient's case, and the approval of members of the Medical Committee in the PMOH’s Treatment Abroad Department, which examines the medical reports and make sure that their treatment is not available at the Gaza Strip Hospitals, and ends with other procedures related to submitting applications to obtain an Israeli permit to exit via Erez crossing to the hospitals they are referred to. According to the Israeli policy adopted since 2005 after Israel’s disengagement from the Strip, the Gaza Strip population are banned travel via crossing under the Israeli authorities’ control regardless of circumstances or reasons unless they have a permit approved by the Israeli authorities going through unclear criteria for obtaining approvals or rejections on the travel permit requests as Israel imposed several obstacles in this regard.

a. Obstruction of female cancer patients claiming permit request “under study” or delaying response:

The Israeli occupation authorities obstruct the male and female cancers patients’ access to hospitals they are referred to in Israel and the West Bank, including occupied Jerusalem. This occurs by responding to their permit requests to travel via Beit Hanoun “Erez” crossing “under study”. This forced female cancer patients to start again the exhausting procedures that would increase their suffering and deprive many of them of their right to have timely access to their treatment. 9

The Israeli authorities deliberately delay responses to female cancer patients’ permit requests to travel via Erez crossing for treatment in the hospitals they were referred to according to their scheduled hospital appointments. As a result, these patients will endure more suffering by going through onerous and long process again. 10


b. Depriving female cancer patients of travel for treatment under pretext a related family member is in violation of Israeli law or being summoned for security interview:

During the Israeli-imposed siege on Gaza, the Israeli authorities punished tens of female cancer patients in dire need for treatment abroad by depriving them of travel for treatment abroad for reasons pertaining to their relatives. The Israeli authorities claim these patients have relatives affiliated with the Palestinian armed groups or some illegal residing in Israel and the West Bank.\(^\text{11}\)

Moreover, The Israeli authorities were summoning some female cancer patients for an interview with the Israeli Intelligence Services at Beit Hanoun “Erez” Crossing to reconsider the possibility of giving them travel permits. These patients are interrogated, and the Israeli authorities then decide to ban or allow their travel via the crossing and access to the hospitals in the West Bank, including occupied Jerusalem, Israel or Jordan.\(^\text{12}\)

c. Israeli restrictions on the travel of companions of female cancer patients referred for treatment abroad:

The Israeli authorities deny tens of female cancer patients referred for treatment abroad to have their companions and ignore their dire need for the presence of a companion with them by refusing or delaying responses to their requests to travel with a companion. Also, the Israeli authorities deliberately do not respond to companions’ travel requests, forcing patients to travel without a companion or ask them to change the companion and thereby starting the procedures again. As a result, their treatment will be delayed, threatening their health.\(^\text{13}\)

d. Blackmailing female cancer patients and their companions in exchange for their permits:

The Israeli intelligence at Beit Hanoun “Erez” crossing adopted a policy of blackmailing female cancer patients forcing them to choose between dying from disease or collaborating with them by providing security information that would guarantee their treatment and survive. Also, the Israeli authorities were asking some patients’ companions for security interviews at Beit Hanoun “Erez” crossing and others are arrested, forcing the female cancer patients to apply for a new permit to another companion.\(^\text{14}\)

On October 2023,9, following the commencement of the ongoing Israeli aggression on the Gaza Strip, the Israeli Minister of Defence officially declared a blockade on Gaza. This announcement suggested that the residents of Gaza had not been under siege before. However, after this declaration, all crossings under the occupation’s control were completely closed, exacerbating the humanitarian crisis for patients in the Gaza Strip, including the female cancer patients addressed in this study, in an unprecedented manner

\(^\text{11}\) Ibid, page 17.
\(^\text{12}\) Ibid, page 19
\(^\text{13}\) Ibid.
\(^\text{14}\) Ibid.
ii. Israeli Violations that Impeding Women with Cancer from Enjoying their Health Rights Amid the Military Aggression Ongoing since 07 October:

Since 07 October 2023, Israeli Occupation Forces (IOF) have imposed various forms of collective punishment against the Palestinian civilians in the Gaza Strip. Depriving female cancer patients of receiving adequate treatment during the ongoing aggression falls under Israel’s ongoing genocidal acts in absence of the minimum humanitarian standards. Israel has attacked the health system in the Strip and forced the Turkish-Palestinian Friendship Hospital to cease operations as well as obstructing the travel of female cancer patients from receiving treatment abroad amid deliberately-caused catastrophic health conditions. All of this combined has led to the death of many of them while leaving the rest in deadly struggle with the outbreak of infectious diseases.

1. Poor health services provided to female cancer patients during the Israeli military aggression on the Gaza Strip

Since 07 October 2023, IOF have continuously raided hospitals and systematically destroyed the health system in the Gaza Strip. As a result, 33 out of 35 hospitals have gone out of service, while 160 health institutions were targeted, including the Turkish-Palestinian Friendship Hospital in Gaza, the only specialized cancer hospital in Gaza, drastically exacerbating the situation and endangering female cancer patients’ lives and forcing them into imminent deaths.

The Hospital’s staff has insisted on providing services until the very last moment, but unfortunately on 01 November, the IOF bombed the hospital for the second time, particularly the third floor of the hypnosis department building, and electricity went off amid lack of water or infrastructure, rendering it impossible and dangerous to follow up patients.

Part of the Hospital’s staff moved to al-Aqsa Martyrs Hospital in Deir al-Balah while the rest went to Dar al-Salam Hospital in Khan Younis. Afterwards, the latter moved to Naser Medical Complex in Khan Younis but when IOF launched their ground invasion of the City, the staff moved to Abu Younis al-Najjar Hospital in Rafah. Currently, the staff follows up female cancer patients in the Fatmah al-Zahraa’ clinic in al-Jneina neighborhood in Rafah, where medicines are dispensed and medical care is provided to the extent possible. After the Friendship Hospital went out of service, female cancer patients have endured extremely dire conditions with no access to chemotherapy and hormone therapy drugs as well as no routine follow-ups, thereby putting their lives at stake.

Since the beginning of the war entering its sixth month, there are estimated 1000 female and male cancer cases that have not been yet diagnosed or discovered due to lack of capacities or diagnostic capabilities. Moreover, there is unprecedentedly chronic shortage of medicines available for female cancer patients, particularly pain relievers which ran out in January and February 2024.
Regarding the medical personnel, there should be 50 oncologists operating in the Gaza Strip but currently there are 10 with only five of them on duty. Two oncologists specialized in cancer diagnoses and biopsy were killed by IOF, incurring heavy burden on the oncology diagnosis specialization.20

Mervat Mousa Hasan, a 45-year-old breast cancer patient was displaced from her home in Khan Younis to Deir al-Balah in central Gaza Strip:21

“My struggle with cancer started 10 years ago. According to my treatment protocol, I shall undergo a CT scan for the chest and uterus every 6 months. I receive a medication for my stomach after suffering cancer complications, including gastroesophageal reflux and enlarged underactive thyroid. During this war, I cannot do my regular checkups anymore at the Friendship Hospital, the only specialized hospital for cancer in Gaza, after it was destroyed by the IOF. Also, my medicines are not available as I monthly take thyroxin tablets, which is a life-long medicine for my underactive thyroid, and an osteoporosis injection every 6 months. As a result, my health condition deteriorated, I am feeling physically weak and tired all the time that I cannot sleep. Fluid has collected in my hand as I had undergone a mastectomy, rendering me unable to use that hand and weakening the other which I rely on. I also used to take Tramadol and Zaldiar to relieve the pain but now they are not available. Moreover, I need physiotherapy but there are no hospitals providing this service. All of this suffering makes me feel anxious and terrified that cancer might come back and I would experience its pains.”

The Israeli occupation blatantly violates international law. Civilian hospitals organized to give care to patients may in no circumstances be the object of attack, but shall at all times be respected and protected.22 The Occupying Power may requisition civilian hospitals only temporarily and then on condition that suitable arrangements are made in due time for the care and treatment of the patients.23 Moreover, the Occupying Power has the duty of ensuring and maintaining, with the cooperation of national and local authorities, the medical and hospital establishments and services.24

19 Interview with Dr. Ahmed al-Shorafa, Oncology Consultant, Fatmah al-Zahraa’ Clinic, Rafah, 12 March 2024.
20 Ibid
21 Palestinian Centre for Human Rights fieldworker received her testimony on 25 February 2024 in Deir al-Balah.
22 1949 Fourth Geneva Convention, Article 18: “Civilian hospitals organized to give care to the wounded and sick, the infirm and maternity cases, may in no circumstances be the object of attack, but shall at all times be respected and protected by the Parties to the conflict.”
23 Fourth Geneva Convention, Article 57: “The Occupying Power may requisition civilian hospitals only temporarily and only in cases of urgent necessity for the care of military wounded and sick, and then on condition that suitable arrangements are made in due time for the care and treatment of the patients and for the needs of the civilian population for hospital accommodation.”
24 Fourth Geneva Convention, Article 56: “To the fullest extent of the means available to it, the Occupying Power has the duty of ensuring and maintaining, with the cooperation of national and local authorities, the medical and hospital establishments and services, public health and hygiene in the occupied territory, with particular reference to the adoption and application of the prophylactic and preventive measures necessary to combat the spread of contagious diseases and epidemics. Medical personnel of all categories shall be allowed to carry out their duties.”
Meanwhile, IHL, particularly the 1949 Fourth Geneva Convention, forbids requisition or destruction of medical material, including all the equipment and supplies necessary for the functioning of medical units. Moreover, the Occupying Power is under the obligation to allow the free passage of all consignments of medicine and medical material and to the fullest extent of the means available to it has the duty of ensuring the food and medical supplies of the population, as well as not prohibiting any action that consists of supplying medicine and medical materials.

2. Israeli restrictions on travel of female cancer patients referred for treatment abroad:

Since the beginning of Israel’s unprecedented military aggression on the Gaza Strip on 07 October 2023, the Israeli occupation authorities have closed Beit Hanoun “Erez” crossing banning the travel of Palestinians, including patients, from the Gaza Strip. Gaza female cancer patients, whose treatment is not available at the Turkish-Palestinian Friendship Hospital, were receiving healthcare at the hospitals in the West Bank, Israel and Jordan, but their treatment was suspended following the brutal aggression on the Strip. Israel has imposed a total and tighter siege, depriving hundreds of female cancer patients of travel for treatment abroad and of continuing their treatment protocols, which they had previously started, thereby exaggerating their suffering.

A while after the aggression started, some countries announced they are ready to receive cancer patients for treatment at their hospitals, including Turkey, United Arab Emirates and Egypt; however, there are still hundreds of female cancer patients in urgent need of treatment abroad facing slow death. Only very limited numbers travel through Rafah crossing amid the catastrophic health situation and the urgent need. These numbers only include the residents in the south or those previously displaced to the south, but for those remaining in northern Gaza not willing or able to evacuate, they are not included in the lists of patients waiting to travel for treatment abroad. Moreover, there is no specialized medical personnel in northern Gaza to follow up these patients amid lack of any safe passage to secure their way to Rafah crossing in case their names were put on the travel lists.

Restricting the number of female cancer patients allowed to travel from the Gaza Strip for treatment is due to the slow and complex travel procedures. It begins with a specialist doctor or the hospital nominating female patients in need of the most urgent medical care to the PMOH. These names are then sent to the Egyptian authorities, who run a security check. Once Egypt has approved the list, it is then vetted by the Israeli authorities, who must also approve the names. When the final list is approved, it is shared with the countries who have said they are willing to receive cancer patients and is published online. But whether a patient is ultimately allowed to leave is up to the discretion of the Israeli occupation authorities.

According to PCHR’s documentation on the movement at the crossings before the aggression, around 110 patients daily travelled for treatment abroad. Meanwhile the official figures during the ongoing aggression indicate that 870 female and male patients have travelled from the Gaza Strip to receive treatment. This number is out of 3500 patients, who have obtained medical referrals until late February 2024. Moreover, among them, only 550 female and male cancer patients have travelled. Dr. Ahmed al-Shorafa, a consultant oncologist, said to PCHR’s fieldworkers, “most of the patients referred for treatment abroad are women with breast cancer, accounting for only 1500 cancer patients of the total referred patients.”

25 Fourth Geneva Convention, Article 55: “The Occupying Power may not requisition foodstuffs, articles or medical supplies available in the occupied territory, except for use by the occupation forces and administration personnel, and then only if the requirements of the civilian population have been taken into account. Subject to the provisions of other international Conventions, the Occupying Power shall make arrangements to ensure that fair value is paid for any requisitioned goods.”

26 Fourth Geneva Convention, Articles 23: “Each High Contracting Party shall allow the free passage of all consignments of medical and hospital stores and objects necessary for religious worship intended only for civilians of another High Contracting Party, even if the latter is its adversary. It shall likewise permit the free passage of all consignments of essential foodstuffs, clothing and tonics intended for children under fifteen, expectant mothers and maternity cases.” And Article 55 of the same Convention: “To the fullest extent of the means available to it, the Occupying Power has the duty of ensuring the food and medical supplies of the population; it should, in particular, bring in the necessary foodstuffs, medical stores and other articles if the resources of the occupied territory are inadequate.”

27 Ibid.
By comparison, there was a drastic decline in the rate of female cancer patients who travelled for treatment during the ongoing Israeli aggression compared to the rate of female cancer patients who used to travel daily for treatment abroad before the aggression. This comparison materializes in the rate of medical referrals and the number of female cancer patients who managed to travel for treatment, indicating an imminent threat to the health and life of many female cancer patients waiting to travel and in need of urgent healthcare to complete their treatment protocols.

‘Abeer Sa’do Hasan ‘Abdel Salam, a 54-year-old patient with bone cancer from Tal al–Hawa:

“I suffered from breast cancer, which had disappeared for 5 years but cancer came back in my bones in 2021 when I started receiving monthly medical treatment at the West Bank’s hospitals. After the war broke out in Gaza and the closure of Erez Crossing, I have been constantly worried about my health for not being able to travel for treatment. My body had positively responded to the new treatment, but since it stopped, it will drastically affect and worsen my health. I was very sure that cancer would spread to other areas in my body. Moreover, I could not take my painkillers as going to the Turkish Friendship Hospital was very dangerous and then it was destroyed by IOF.

I was unable to contact my doctor due to the communications blackout in northern Gaza. I was also scared to cross the checkpoint established by IOF to separate the southern Gaza from the northern Gaza as I was hearing horrific stories about arrests, bombardment and shooting. One of my friends died out of fear while crossing that checkpoint via the so-called “safe passage”, which is not at all. On 24 November when the humanitarian pause had entered into force and the communications network had been repaired, I was able to contact my doctor, who advised me to go to the south otherwise he would not be able to provide any medical intervention. Therefore, I decided to evacuate with my daughter to the south and left my family back in Gaza. We thought it would be only for few days and the truce would be extended to end the war. If there had been no truce, I would have never crossed the checkpoint for the reasons I clarified.

When I arrived in Khan Younis, my doctor signed me a medical referral for my treatment abroad. I daily wait to see my name in the travel lists. During that time, I started feeling severe pains in new areas in my body, pains that I have not experienced while receiving treatment. I also have no access to healthy food that I used to eat to boost my immune system and stay healthy due to its unavailability in the markets, where there are also no vegetables or fruits. Meanwhile, I lost my appetite for being worried all the time about my children and family, whom I left back in Gaza.

28 Interview with PCHR’s lawyer, Mohammed Bseiso.
29 Interview with Dr. Subhi Skaik.
30 Interview with Dr. Ahmed al–Shorafa.
31 Palestinian Centre for Human Rights fieldworker received her testimony on 01 February 2024 in Rafah.
This has severely affected my physical and mental health, and I started having extremely severe pains knowing that my health is getting worse. I thought that it would take only a week or two for my name to be on the travel lists, but unfortunately it has been 2 months and I have not received any response and 5 months since the last time I receive an adequate treatment.”

Impeding the travel of female cancer patients to receive treatment and forcing them into imminent death fall under IOF’s systematic collective punishment policy that has been ongoing since 07 October 2023. By this, Israel violates Article 33 of the Fourth Geneva Convention, which states: "No protected person may be punished for an offense he or she has not personally committed. Collective penalties and likewise all measures of intimidation or of terrorism are prohibited."

3. **Imposing a disastrous health situation poses imminent threat to the health of female cancer patients:**

Women with cancer experience twice the suffering other women experience given their health conditions, which get worse day by day, particularly due to being constantly exposed to dust, smoke, and any hazardous substances released from the bombings and internationally prohibited white phosphorous. Moreover, being forcibly displaced and walking up to several kilometers amid heavy deployment of Israeli tanks and weapons and under relentless bombardment have aggravated these women's pains and increased the risk for cancer to spread in their bodies.

Also, in her testimony to PCHR’s fieldworker ‘Abeer Sa’do Hasan ‘Abdel Salam said regarding her suffering from the military attacks: 32

“After the war erupted on 07 October and particularly on 18 October, our house was bombed when IOF suddenly pounded the area with heavy fire belts without any warning. I fled the house with my children while the missiles were falling all the way long. Thank god, all of us survived, but my heart muscle has become weak after running so long out of intense fear. Afterwards, we sought shelter in the area surrounding al-Shifa Hospital, during which, IOF daily and intensively bombed the area scaring me to death. One day, IOF heavily fired white phosphorus, and I felt suffocated while my heart was beating so fast. I was feeling extremely tired and weak not being able to do the house chores I used to do before the war.”

Their suffering is not only limited to the Israeli military attacks. Women with cancer struggle in shelters with low levels of hygiene and with no protective isolation for them.
The conditions of shelters overcrowded with hundreds of displaced people, mostly women and children, are ripe for the spread of infectious diseases due to lack of basic hygiene and sanitation, scarcity of clean water, few toilets used by a lot of people, waste and sewage piling up, and being constantly exposed to smoke coming from burning firewood due to lack of cooking gas. All of this combined is helping various epidemics to spread and particularly affect immunosuppressed patients with cancer.

Moreover, female cancer patients’ health is threatened by the steep rise of acute malnutrition in the Gaza Strip. As the Israeli military aggression on the Gaza Strip enters its sixth month, food has become incredibly scarce. Therefore, these women have no access to healthy food and clean drinking water, becoming more likely to develop serious health complications that may lead to death.

Anwar ‘Omer Shames ‘Abdo 54-year-old woman breast cancer patient displaced from western Gaza City to Rafah, talks about her suffering with malnutrition:

“My weight was 100 kilograms, but due to my disease and malnutrition, I have slimmed down to 70 kilograms. I am bedridden all the time and unable to move. When I need to get out of bed, I have to ask others for help. I constantly feel weak and dizzy. I stayed in my sister’s house for 27 days, where we could only eat one rice meal for all the day and I was paying 10 to 15 shekels for a 1.5-litter bottle of mineral water, drinking only half a litter of it a day not as it should be. I ran out of medication and have not received any treatment since November 2023, so my breast pains increased and spread to my hands and then to all my body. I have become very weak and unable to move.”
“I have breast cancer and underwent a mastectomy to remove my left breast. I have also suffered from cancer spreading to my bone, particularly in my thigh, and due to the ongoing war and lack of treatment, my pains are getting worse. My hands have become numb and I cannot move them. I barely move and feel that cancer has spread all over my body and my feet, making me unable to do anything and fainting from time to time. I take non-chemo Intravenous infusion and other medicines to reduce cancer effects, but the UNRWA clinic, which dispenses such an injection for free, does not have any and only pills and sprays are available, so I buy the injection from pharmacies. I also have breathing difficulty and suffer seizures due to the smoke coming from firewood burnt by displaced people to cook, boil water and bake bread at school shelters. Thus, I have to take this injection one day after another right after being exposed to smoke. Moreover, sewage water is everywhere and I have no access to clean potable water or water to bath and clean. I shall eat only certain kinds of food and drink pure clean water, but unfortunately, we only have canned food and contaminated water to drink that cause my health to deteriorate.”

Bahiyah Hamdan Daloul, 54-year-old breast cancer patient from Tal al-Hawa neighborhood in Gaza City, said: 34

“As Israeli bombardment massively intensified on Tal al-Hawa neighborhood, my children and I had to evacuate to the south on 15 October 2023 and sought shelter in a makeshift tent in a school in Deir al-Balah. Beside my suffering with no access to medications due to IOF banning their entry, I suffer from malnutrition as only canned food is available amid lack of vegetables and fruits in the markets. The school has no hygiene and no clean drinking water. I also have to cook on fire and so inhale a lot of smoke. All these conditions make me feel tired and weak all the time as well as being constantly worried that cancer might spread to my body or I might catch any of the diseases spread at school.”

33 Palestinian Centre for Human Rights’ fieldworker received her testimony on 15 February 2024 in Rafah Elementary School (A), Rafah.
34 Palestinian Centre for Human Rights’ fieldworker received her testimony on 08 March 2024 at ‘Abdel Karim al-‘Aklouk School, Deir al-Balah.
These serious health conditions deliberately imposed by IOF constitute a blatant violation of female cancer patients’ life and integrity and thereby a grave breach of the Occupying Power’s international obligations, which stipulate that sick persons shall be the object of particular protection and respect, as well as the necessity to remove them from besieged or encircled areas.

iii. Implications of Israeli Violations on Female Cancer Patients during the Israeli Military Aggression:

Female cancer patients constantly face imminent death due to the Israeli blatant violation of their right to life and right to access medical treatment. The Israeli coercive and unfair measures have led to the death of many female cancer patients while leaving others to face imminent deaths due to the deterioration of their health conditions.

1. Female Cancer Patient died after her treatment stopped during the Israeli ongoing aggression:

The Israeli violations against female cancer patients have led to deaths among them after prolonged waiting to receive treatment amid almost-complete absence of the health system providing healthcare for them in the Gaza Strip.

*Amal Yousif Isma’il Ayoub, 67-year-old patient with liver and colon cancer from al-Shati’ refugee camp in Gaza City, died due to lack of healthcare and medical treatment as well as denying her travel for treatment abroad.

Dina Zuhair ‘Amer Hiji (35), from al-Shati’ refugee camp in Gaza City, said to PCHR’s fieldworker:

“In September 2024, a month before the war, my mother, Amal Yousif Isma’il Ayoub (67), from al-Shati’ refugee camp in western Gaza City, was very sick and had low blood cell count of 6 that caused her bleeding. When the symptoms went worse, she went to an internist who examined her and asked for additional tests that showed she had a tumor in her colon and liver. Afterwards, she went to al-Shifa Hospital and in September she was admitted to the Hospital 3 times, each time was for a week. And due to her health condition, the hospital referred her to the Turkish-Palestinian Friendship hospital so she would be under the doctor’s follow-up.

35 Fourth Geneva Convention, Article 16, „The wounded and sick, as well as the infirm, and expectant mothers, shall be the object of particular protection and respect.”
36 Fourth Geneva Convention, Article 17, „The Parties to the conflict shall endeavour to conclude local agreements for the removal from besieged or encircled areas, of wounded, sick, infirm, and aged persons, children and maternity cases, and for the passage of ministers of all religions, medical personnel and medical equipment on their way to such areas.”
37 Palestinian Centre for Human Rights’ fieldworker received her testimony on 13 March 2024 in Deir al- Balah.
Her first appointment at the Turkish Hospital was on Monday, 09 October 2023, but she could not start her treatment because the war erupted on Saturday, 07 October 2023.

During the war, we went to al-Shifa Hospital, where doctors said that she should go to the south as her treatment was not available there. My mom started feeling very tired and was not able to move or sit, so my sister and I decided to go with her to the central Gaza Strip, to seek treatment for her.

On 09 November, I evacuated with my sister and mother to Deir al-Balah searching for doctors and treatment, we went to many doctors but all of them were saying that there was no treatment available for her and she should wait until the war ends.

Afterwards, we went to Dar al-Salam Hospital in Khan Younis because the pain severely increased in her back that made her unable to sleep or sit. She was constantly saying describing her pain, “like if someone is hitting me with a stick all over my body.” Doctors said that cancer had spread to her lungs and other areas in her body. She had breathing difficulty and needed tests, which were not available because Dar al-Salam Hospital was not equipped with medical devices or treatment for cancer patients.

After 24 hours of staying at the hospital, she was discharged and doctors prescribed her several painkillers to take 4 pills of each one so she could cope with the pain. Getting and buying those prescribed painkillers was very hard as they were not available at pharmacies.

After several desperate attempts, we could get her a medical referral from Dar al-Salam Hospital to travel for treatment in the United Arab Emirates. Her case was very urgent as she needed an urgent colon surgery.

My mother waited so long to have her name on the travel lists for treatment in the UAE. I sent many appeals via TV channels, Whatsapp and Facebook, but in vain. I contacted friends and relatives in the UAE to go to the hospital and expedite the procedures but this went in vain as well. Meanwhile, the hospital would always tell me that they had nothing to do and it was only relevant to the Israel authorities measures.

What we could only do was to wait until IOF launched their ground invasion into Khan Younis and we could not go to Dar al-Salam Hospital anymore after hospitals were being targeted by IOF. We went to al-Aqsa Martyrs Hospital, where we found doctors who used to work in the Turkish Hospital. There were also medicines at the hospital and doctors gave her medicines for free upon her medical case.

My mother’s health was getting worse day by day and symptoms became more intense, she had fever and was vomiting. Her pains were unbearable and she was screaming all the time from her chest and back pains. And when we were asking doctors what to do, they would say she would stay like that until she drew her last breath.

I cannot describe how hard was the pain and the complications she experienced. While waiting to travel for treatment abroad. On 21 January 2024, we took her to al-Aqsa Martyrs Hospital, where she went into coma for 3 days and doctors said she was dying.
My mother died on 24 January 2024 for not allowing her to travel amid lack of medicines or hospitals for cancer patients. My mother was supposed to travel for treatment abroad but due to the slow referral procedures and Israeli obstruction of patients’ travel, my mother could not travel for treatment and died.”

2. Female cancer patients face imminent death due to their deteriorating health conditions:

The Israeli unfair measures against female cancer patients during the ongoing aggression have forced hundreds of them into a very difficult situation and have left them in a deadly struggle with their pains and constantly worried about cancer spreading in their body and thereby facing imminent death.

Sa’diyah Ibrahim Mahmoud Abu Harbid, 44-year-old resident of Beit Hanoun and displaced to Deir al–Balah Elementary Mixed School:

“I am a cancer patient living in Beit Hanoun, a border area in northern Gaza Strip, and whenever an escalation occurs, we evacuate to Jabalia. And we did so after Israel launched its war on the Gaza Strip on 07 October 2023. At 16:00 on that day, we sought refuge in Halab school in Jabalia, where we suffered a lot. Under heavy bombardment, I left home barefoot and could only pack a small handbag. The Israeli warplanes pounded the area with heaviest fire belts, and plumes of smoke filled the area. While evacuating, I had to rest on the sidewalks tens of times not being able to walk long distances. We walked for about five hours as I was walking slowly, feeling very tired after taking my chemotherapy dose. I knew that I was inching towards death. On 09 September 2023, I received my chemotherapy dose and I was supposed to take another one at the Turkish-Palestinian Friendship Hospital on 01 October 2023, but unfortunately, I could not due to the war and because the way to the hospital was very dangerous.

The bombardment intensified near the school, witnessing many people dying and injured amid smoke and white phosphorus filling the area as we were near the Indonesian hospital. We decided to flee to the south because gunpowder and smoke inhalation is harmful to my health and fearing that the IOF would close the road connecting the north with the south and we would then go on foot. On 10 October 2023, we sought refuge in Deir al-Balah Primary Mixed School. I did not complete my chemotherapy protocol as I was supposed to take 10 chemo doses but I could not due to the war and after the Turkish Hospital was targeted by IOF. I shall receive a dose every 15 days due to my difficult health condition, and not receiving the doses has exacerbated my suffering and worsened the pain that has left me sleepless at night. Meanwhile, there is no hygiene at the school shelter and no healthy food, including vegetables and fruits, as my immune system is very weak.

Sa’diyah Abu Harbeed, 44-year-old resident of Beit Hanoun and displaced to Deir al–Balah Elementary Mixed School:”

“PCHR’s lawyer, Samah Ashour, while taking testimony of Sa’diyah Abu Harbeed.”

Palestinian Centre for Human Rights fieldworker received her testimony on 28 February 2023 in Deir al–Balah Martyrs Elementary Mixed School, Deir al–Balah, central Gaza Strip.
Due to the very cold weather, I started having severe bone pains and there were no painkillers, leaving me screaming out of the unbearable pain. In November 2023, I obtained an urgent medical referral for treatment in the UAE, and every day, I go to al-Aqsa Martyrs Hospital, which houses the treatment abroad coordination office, to check if my name is on the travel lists. Unfortunately, I am still waiting my turn to travel and complete my treatment. Beside the pain I am feeling, I am intensely worried about cancer spreading in my body and then treatment would be in vain.”

Noha Fathi Yousif Hasanein, 29-year-old colon cancer patient for 5 years and displaced from al-Sheikh Redwan to Abu Yousif al-Najjar Elementary School in Rafah, said:

“On 07 October, I was checking the news on social media and the movement at crossings as the next day I was supposed to travel to al-Mutale'a Hospital in Jerusalem to receive my chemotherapy and do tests for the liver and uterus. I packed my bag preparing myself to leave the next day. We stayed at home in despair and I was fully aware that I would not travel for treatment but I was still hoping that the war would end soon as stated by the Israeli authorities that the war would take three months. I did not expect it would be that long and continue for months. I could not do the liver tests at al-Shifa Hospital because it was receiving emergency cases only and overwhelmed with causalities. I felt like all doors were closed and I was all the time at home crying and praying because I will not be able to complete my treatment. My condition was stable, and any interruption in my treatment might cause my health to deteriorate. On 19 October 2023, I woke up for the Fajr prayer when suddenly I convulsed and then fainted out of being in persistent state of intense fear and worry, taking me a while to wake up.

After I was diagnosed with cancer, I suffered from anus bleeding, so I was wearing pads all the time. On 20 February 2022, I had a colectomy surgery to create an opening in my bowel to expel waste. However, at the school, where I sought shelter, I could not do the regular dressing change on the opening or clean it due to lack of privacy, so I have to go downstairs to the bathroom, which is very dirty fearing that I might catch any viral infection or disease because my immune system is very week. I try to wash the bathroom each time I use it and this takes a lot of time, making other women complain for having to wait.

On 11 December 2023, I woke up in the morning with my legs and pelvis stiffened. I started crying fearing that my health was deteriorating due to lack of treatment. I was taken to Abu Yousif al-Najjar Hospital, where a doctor signed me an urgent medical referral on the same day. The doctor told me there was no treatment for me at the hospital, so I went home. The bleeding increased, so I had to wear adult diapers for the heavy blood flow coming from the anus and vagina. Diapers were hard to find and too expensive to buy due to my poor financial conditions, so I have to attach 4 pads together to be like a diaper and prevent any leaks.
I had severe colic, a swollen abdomen, and could barely pass stool. All of this was due to malnutrition and not taking my treatment. Also, pain in the surgery opening increased. I went again to Abu Yousif al-Najjar Hospital on 18 February 2024 screaming out of severe pain. I was vomiting and not able to move. Doctors put me in a room, where I stayed with no medical treatment as the hospital is not specialized for cancer patients.

On 19 February 2024, the surgery incision had swollen and I was only given a pain reliever. Afterwards, I was discharged from the hospital and came back to the school shelter. After taking the pain reliever, I could sleep on my right side as the surgery opening was on my left side, but suddenly I woke up in the middle of the night feeling wet. I woke my mother to check the incision when she found it was bleeding and puss coming out of it. I found two holes in the incision and when I stood up to clean it, a lot of puss drained out. I pressed on the incision to clean it and put a gauze on it. After wearing my clothes, the incision started to drain a lot of puss again. I stayed like that until the morning when I went to a nurse in a nearby school shelter because there was no medical team in my school shelter. The nurse then told me she could not do anything and I should go to Abu Yousif al-Najjar Hospital. I called an ambulance that took me to the hospital, where I was treated on the floor as there were no enough beds. I stayed at the hospital for 3 days and had dressing change. I was then discharged from the hospital and did the dressing change afterwards by my own as there were no doctors at the school shelter amid lack of medical gauzes.

Meanwhile, I suffered a lot due to malnutrition and not being to regularly take laxatives because they are not available, so I try so hard not to take it constantly to save it as long as possible fearing it would run out. Thus, my pains and suffering increase. Also, I cannot buy vitamins or medicines because none of them is available.”
iv. Violations by Israeli authorities against female cancer patients fall within the ongoing crime of genocide since the beginning of the Israeli aggression:

Israeli violations against female cancer patients during the continuous military aggression since October 7, 2023, resulting in the deaths of several cancer patients and putting the rest of them at risk of death every day, constitute a crime of genocide committed by the Israeli occupation against civilians in the Gaza Strip. This is in accordance with Article 2 of the Convention on the Prevention and Punishment of the Crime of Genocide, which states: "In this Convention, genocide means any of the following acts committed with intent to destroy, in whole or in part, a national, ethnical, racial or religious group, as such:

(a) Killing members of the group.

(b) Causing serious bodily or mental harm to members of the group.

(c) Deliberately inflicting on the group conditions of life calculated to bring about its physical destruction in whole or in part."

Israeli violations against female cancer patients are also considered a crime of genocide according to Article 6 of the Rome Statute of the International Criminal Court, which states: "For the purpose of this Statute, 'genocide' means any of the following acts committed with intent to destroy, in whole or in part, a national, ethnical, racial, or religious group, as such:

(a) Killing members of the group.

(b) Causing serious bodily or mental harm to members of the group.

(c) Deliberately inflicting on the group conditions of life calculated to bring about its physical destruction in whole or in part."

The International Court of Justice issued a decision on January 2024, demanding the Israeli occupation immediately take interim measures to protect Palestinians and prevent genocide in Gaza. On February 16, 2024, the court also demanded the Israeli occupation to implement and respect the measures outlined in its previous decision in the preliminary stage of the genocide lawsuit filed by South Africa against the Israeli occupation promptly and effectively. The facts presented in this report clarify that the Israeli occupation has disregarded the court’s decisions and continues to commit this crime without respecting the minimum humanitarian standards towards civilians in the Gaza Strip, including female cancer patients.
The Israeli blatant violations against female cancer patients’ rights to life and health as well as their right to movement and access to hospitals amount to genocidal acts as these violations increase deaths among civilian women. Thus, PCHR calls upon the International community to exert pressure on Israel to:

- Cease all genocidal acts, including the restrictions imposed on the travel of female cancer patients that have directly increased the casualty toll among civilian women in the Gaza Strip.

- Comply with the legally-binding provisional measures order lately issued by the International Court of Justice to prevent all acts of genocide, and enable the provision of urgently needed basic services and humanitarian assistance, including allowing the Turkish-Palestinian Friendship Hospital to re-function with all its staff and equipment as well as ensuring the free passage of all consignments of medicine and medical material necessary for its functioning.

- Fulfill its obligation as an occupying power by ensuring everyone’s enjoyment of the highest attainable standard of health and accessibility to healthcare.

- Completely End the Israeli Siege on the Gaza Strip and not accepting easing it.

Recommendations: