



ICRC

ICRC Key Messages for Movement Partners

Hostilities in Israel and the Occupied Territories

5 April 2024

This document reflects the ICRC public communication approach to several topics of concern in ILOT (Israel and Occupied Territories). It is a reference document for use by National Society communication teams and should not be shared outside the Movement.

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Language guidance

Please refer to the ICRC-IFRC Communication Guidelines for Movement Partners for the most updated guidance.

General lines (public use)

Topline Messages

- For six months now, we have seen countless families, individuals and communities torn apart by this conflict. From the impact of the attacks in Israel on 7 October 2023, to the catastrophic humanitarian situation currently seen in Gaza, there has only been relentless human suffering.
- Right now, the humanitarian aid entering Gaza does not match the needs that ICRC teams are seeing on the ground. A cessation of hostilities is needed to allow desperately needed aid to reach civilians throughout the entire Gaza Strip. Israel, as the occupying power, must ensure that the basic needs of the civilian population are met.
- The reality of the situation on the ground, after more than **six** months of intense hostilities, must be taken into account for any potential military operations. Many in Gaza have been displaced two, three, or four times. There is a lack of food, drinking water, sanitation, health care, and safety. Coupled with constant stress and fear, and taking into account injuries, age, and disabilities, many residents are in a weakened state and at elevated risk of dying from common infections or diseases.
- Hostilities taking place in heavily populated urban areas, including around hospitals, endanger the lives of people in the most vulnerable situations, like medical staff, patients, the wounded, premature babies, people living with disabilities, and the elderly. At the same time, ICRC teams lack basic security conditions to move safely and provide humanitarian aid. They need these basic safety conditions to be able to operate and assist the population.
- The ICRC appeals for the urgent protection of all those affected by this conflict. We cannot overstate the need for sustained humanitarian relief given the catastrophic

humanitarian situation in Gaza. As soon as conditions allow, the ICRC is prepared to significantly step up its assistance.

- Diplomatic efforts must be intensified. The impact of this violence and the ongoing situation will not only have immediate consequences, but longer-term repercussions for millions of people. If IHL is completely disregarded, suffering will worsen and a political solution to end this bloodshed will be harder to find.
- The ICRC reiterates its call for unimpeded and regular flow of humanitarian assistance, and the necessary conditions in which to distribute this aid. It is the responsibility of the parties to this conflict to ensure civilians have the basic supplies like food, water and shelter. The ICRC can significantly expand food, shelter, and hygiene assistance. The ICRC's longstanding work in Gaza's health, electricity and water sectors would enable us to swiftly support with these services.
- The role of the ICRC as a neutral intermediary is simple – to implement what has already been agreed upon between the parties. The ICRC is not part of the negotiation, nor do they have any political input of any agreement. As a neutral intermediary, the ICRC's role is to facilitate the release and the transfer of either the hostages or Palestinian detainees, as per the agreement.
- Civilians continue to pay the heaviest price. Thousands of people have been killed and tens of thousands injured, many of them young children.
 - In Israel, we welcome the release of the 109 Israeli hostages so far. But there are still families with no news of their loved ones that have endured more than two months of terrible suffering.
 - In Gaza, the level of displacement currently seen is horrific. According to UN reports, more than 85 per cent of the population have been displaced since the beginning of the conflict.
 - In the West Bank, the heightened insecurity has led to death, injury, and tragic displacement. The ICRC fears that the alarming levels of violence in the West Bank may lead to irreversible consequences for its communities. In 2023, more than 500 Palestinians were killed in the occupied West Bank and thousands more wounded, making it the deadliest year in over a decade.
- **Civilians** must not be attacked. They cannot be taken hostage. They have a right to receive humanitarian assistance and medical care. Health-care workers and humanitarian organizations must be able to safely carry out their life-saving work to reach those in need.
- Israel, as the occupying power, must ensure that the basic needs of the civilian population are met.
- Hundreds of thousands of people in Gaza are sheltering in hospitals, schools, or sleep in their cars or out in the open after their homes and neighbourhoods have been turned to rubble. Destroyed homes and essential infrastructure will take years to rebuild.
- There is no justification for indiscriminate violence or attacks against civilians. The International Committee of the Red Cross calls on the sides to respect their obligations under IHL and to take every step possible to prevent **civilians and civilian infrastructure**, such as electricity and water supplies from coming to further harm.
- Medical professionals and humanitarian workers must be able to respond without fear for their own lives. Violence towards medical personnel is unacceptable.
 - Since 7 October, we've lost colleagues from both the Palestine Red Crescent Society (PRCS) as well as the Magen David Adom (MDA) in Israel. This is a tragic reminder of the dangers health-care personnel face and we offer our deepest condolences to their family, friends, and colleagues.
- The obstacles faced by civilians in Gaza are becoming insurmountable – the medical system has basically collapsed. Hospitals in the north of Gaza are no longer able to provide any form of surgery, yet they are still receiving patients because they have nowhere else to go. Medical facilities in the south are overwhelmed with patients and displaced people. The weather is getting colder, bringing rain and wind. The potential for flooding is very high, and this creates potential hazards for sanitation. An

unbearable human tragedy is unfolding in front of our eyes in Gaza. Hostilities taking place in heavily populated urban areas, including around hospitals, endanger the lives of the most vulnerable people, like medical staff, patients, the wounded, premature babies, people with disabilities, and the elderly. At the same time, Red Cross Red Crescent teams lack the basic security conditions to move safely and provide humanitarian aid. ICRC is constantly in touch with the Ministry of Health in Gaza and with the parties, but their teams have experienced security incidents, and need the basic safety conditions to be able to operate.

- We are horrified by the tragedies we continue to see at hospitals. Hospitals should be sanctuaries to preserve human life, not scenes of death and destruction. No patient should be killed in a hospital bed. No doctors should lose their lives while trying to save others.
- The ICRC is gravely concerned by the precarious and unsafe conditions under which civilians have been evacuating. Men, women, and children, waving white flags, walk for dozens of kilometres past dead bodies lying on the streets and without necessities like food and water. Irrespective of modalities of evacuations, safe zones or humanitarian pauses, the parties to the conflict continue to be bound by their obligations under international humanitarian law. Civilians, medical facilities and personnel, and humanitarian workers are protected by international humanitarian law.
- Though our partner, the ICRC has been able to help facilitate the reuniting of some hostages with their loved ones in their role as a neutral intermediary, there are still families are worried sick about loved ones taken hostage. The **taking of hostages** is prohibited under IHL. The ICRC is in contact with Hamas and Israeli officials as part of efforts on this issue. The ICRC stands ready to continue to act as a neutral intermediary to conduct humanitarian visits; facilitate communication between hostages and family members; and facilitate any eventual release.
- The current situation is extremely polarizing, and we are seeing this play out on many levels. The mis and disinformation we have seen spreading about ICRC operations and their role has very real consequences for their operations. ICRC is a neutral organization. ICRC does not make political statements, they do not condemn parties, and they do not engage in any activities beyond their humanitarian work. ICRC does not take part in any political negotiation, but step in once this is made.

ICRC Response

General overview

- Facts & Figures of ICRC response from [7 October 2023 – 29 February 2024](#)
- Facts & Figures of ICRC response from [7 Oct – 14 Dec 2023](#)
- Facts & Figures of ICRC response from [7 Oct – 7 Nov 2023](#)
- Facts & Figures of ICRC in [first six months of 2023](#)

In Gaza

- **European Gaza Hospital:**
 - ICRC, with Movement partners, deployed two surgical teams specializing in management of weapons-wounded patients .They have performed 1,625 surgical procedures (cumulative from 1 Nov – 18 February). These surgeries include general surgical interventions, reconstructive surgery, and orthopedic surgery.
 - Support includes nutrition program aimed at supporting patients during their recovery.
 - From 1 Nov to 15 Dec: 110 patients received other immediate medical attention of follow-up and the team applied 686 burn dressings.
 - Provided antibiotics, controlled drugs and anesthesia, medical supplies and renewables, blood bags, surgical instruments, mobility aid devices, sterilization materials, among others with capacity to treat over 1,000 patients.
 - Provided 1,638 physiotherapy sessions to patients.

- Conducted 920 sessions to provide patients, families and/or caregivers with basic emergency mental healthcare and psychosocial support.
- Provided mobility devices for patients, including wheelchairs, crutches and walking frames, with physical rehabilitation care ongoing.
- **Additional medical support:** Provided medical supplies, including weapon-wounded kits, wound dressing sets, medicine and emergency medical sets, to eight local health facilities, enabling 19,000 individuals to receive emergency medical care in Gaza.
 - Details: antibiotics, controlled drugs and anesthesia, medical supplies and renewables, blood bags, surgical instruments, mobility aid devices, foldable beds, sterilization materials, among others.
- **Working to bring families together:** In addition to ICRC's efforts to facilitate the release, transfer and return of hostages from Gaza to their families and Palestinian detainees from Israeli places of detention to their families, ICRC has:
 - Received 6,888 requests from family members seeking to clarify the fate and whereabouts of their loved ones through existing channels and additional emergency hotlines in Arabic, Hebrew, and English. So far, 1,392 cases have been closed as family contact has been reestablished.
- **Support for basic needs:**
 - 50,000 individuals made vulnerable by the conflict (mostly internally displaced people) received cash assistance to cover basic needs.
 - 308,500+ internally displaced people sheltering in non-UN shelters (south and middle area) received essential household items, including blankets, jerrycans, tarpaulins and hygiene parcels.
 - 2,000 pregnant and lactating mothers received high nutritional food bars (al-Shifa).
 - 472 Palestinian detainees who were released from Israel and returned to Gaza, were supported with clothing and cash assistance.
- **Essential services:**
 - Supported 285,000 people to access clean water by supporting local service providers to provide water, carried out network repairs, and power water wells and desalination plants.
 - Supported 20,000 IDPs in accessing clean water in 12 shelters by carrying out emergency repairs of desalination units and sanitation infrastructure, and installing solar powered water treatment units.
 - Equipped local electricity supplier in Gaza with solar systems to ensure minimal operational continuity of service. Provided financial support and supplies from ICRC contingency stock to enable this supplier to carry out emergency repairs to the power network, protect critical infrastructure, and prepare for rehabilitation as soon as security conditions allow.
 - Supported emergency power supply and fuel rational for 14 hospitals across Gaza through existing ICRC projects for the maintenance, optimization, and resilience of the public sector's generator fleet.
 - Supported water purification via 50,000+ chlorine tablets and aquatabs.
- **Weapon Contamination**
 - Alongside Palestine Red Crescent Society (PRCS), ICRC worked to raise awareness among civilians, as well as humanitarian, medical, and other frontline workers on the risk of weapons contamination/explosive remnants of water through SMS to 400,000 phone numbers.
 - Promoted safer behavior through posters and group sessions for reachable impacted communities in hospitals, schools and shelters.
- **Dignified treatment of human remains**
 - Distributed over 9,800 forensic teams, including face shields and body bags, to facilitate dignified management, identification and eventual return of human remains to their families.

In Israel

- **For health:**
 - Provided technical and financial support to the the Israeli Trauma Coalition to support the delivery of stress management training to frontline health workers. ITC has been a long-time partner of the ICRC in Israel.
 - Delivered an online training course to support the Association of Rape Crisis Centres in Israel, to organize technical workshops for their staff on providing mental health and psychosocial support for victims of sexual violence in armed conflict.
- **Dignified treatment of human remains**
 - Distributed 1,200 forensic items, including face masks and shield, and personal belongings bags, to facilitate the dignified management, identification and eventual return of human remains to their families.
 - Provided technical support and established a partnership with Israel's National Centre of Forensic Medicine to strengthen capacity for management of complex cases of the missing in armed conflict.

In the West Bank

- **For health:**
 - Made 117 real-time interventions to facilitate access and safe passage for PRCS ambulances to provide medical care to people injured because of violence in the West Bank.
 - Provided two negative pressure wound healing machines to Jenin Hospital.
 - Provided roughly 300 wheelchairs to the Patient's Friends Society in Ramallah.
 - Provided over 1,000 liters of IV fluid to emergency health facilities.
- **Supporting basic needs:**
 - 520 people in vulnerable situations received cash grants to support livestock production, 22 households received cash support to help recover from the consequences of specific incidents of violence.
 - 174 families whose houses were demolished in various locations in the West Bank, including East Jerusalem, received cash assistance to help meet their immediate needs.
- **Essential services:**
 - Assisted 5,000 people in H2 area of Hebron to have access to enhanced wastewater and drainage systems by providing technical and material support to Hebron Municipality.
 - Supported Palestinian Water Authority to enable 6,000 people in Qaryout village, and 13,000 people in Burin village to have improved access to water.
 - Provided technical and material support to local council in the Jordan Valley to enhance electricity access for 1,750 farmers.
 - Supported 50 households in the H2 area of Hebron with solar panels to enhance access to electricity.

Response in reverse chronological order

- **December** – distributed medical items to Nasser hospital and Al Aqsa hospital, both in the middle part of Gaza.
 - The distribution included items like medical disposables, metal bar fittings for orthopedic procedures, assistive devices (crutches and walkers), medicine (antibiotics and anesthesia), blood bags, body bags, infusions and fluids, and dressing kits.
 - This support will enable the medical teams at the two hospitals in responding to and treating hundreds of seriously and moderately injured people.
- **Hostage/detainees release & transfer operations**

- **Between 24-30 November** – The ICRC facilitated the release & transfer of 105 hostages and 154 detainees.
- **24-25 November** – Our team delivered two medical shipments per day to hospitals – these were for Nasser Hospital (Khan Younis) and Al-Aqsa Hospital (middle area). We continue to support the European Gaza Hospital in absorbing the large influx of patients. These supplies included war-wounded kits, disposables, vital surgical equipment, foldable beds, and mobility devices like crutches.
- **22 November** – Completed installation of solar systems at 12 school shelters to provide the needed energy for water well pumps (serving 30,000 IDPs), and desalination plants (serving 70,000 IDPs). Medical assistance to war wounded is ongoing at the European Gaza Hospital, with the addition of a nutrition program aimed at supporting patients during their recovery. Provision of psychological support to 36 new patients and family members ongoing, while PRP continue to work on mobility rehabilitation.
- **19 November** – as it started getting colder in Gaza, blankets and tarpaulins were distributed to nearly 5,000 displaced persons.
- **15 November** – cash assistance given to 3,000 IDP households (15,000 individuals) in the Middle, Rafah and Khan Younis areas through mobile cash (PaIPay), with each family receiving ILS 750 (around USD 200) to cover their basic needs.
- **14 November** – A further 61 received physical rehabilitation care, while over 150 patients in total have now received surgical and medical assistance, including 16 surgeries and 37 other medical interventions carried out since 9 October. The surgical team operating in the EGH received further supplies, and the ICRC also provided mobility devices for patients, including wheelchairs, crutches and walking frames.
- **11-12 November** – ICRC and the PRCS distributed essential household items, like blankets, tarpaulin and hygiene parcels to more than 13,000 in Gaza's Middle Area. More distributions are ongoing.
- The team continues to provide support (water trucking, purchase of solar panels for IDP camps and generators for ICRC premises) as best they can, securing critical materials from the remaining local suppliers and delivering it to needed sites through ICRC notified convoys whenever possible.
- An ICRC war surgery team is treating patients wounded in the conflict at the European Gaza Hospital (EGH). They treat patients with severe injuries, many of them burns that require complex labor-heavy medical interventions. They also provide follow-up nursing care as well as support to patients including changing burn dressings.
- **Between 31 October and 6 November**, 13 additional trucks have made their way into Gaza containing essential household items, medical and orthopedic supplies and body bags.
- **29 October** – Three additional trucks carrying medical supplies entered Gaza.
- **27 October** – A war surgery team and a weapons contamination specialist among 10 ICRC experts arrived in Gaza alongside six ICRC trucks carrying medical material and water purification supplies. The team will increase support to hospitals, trauma surgery, clean water provision, and family reunification of hostages. This small dose of relief is not enough, much more is needed. Three more trucks carrying medical supplies arrived on.
- As of **25 October** – We have mobilized 60 tons of humanitarian aid, including medical supplies, for Gaza. They are close to Rafah crossing waiting to enter. We also have staff on standby who could make an immediate, lifesaving difference, such as a war surgical team and weapons contamination specialists. These 8 trucks include 4,000 body bags 50,000 aquatabs (1 aquatab can treat/clear 1 liter of water) and we have 9 full Weapon-Wounded Kits ([general description](#)) and many more medical sets which can treat between 1,000 – 5,000 patients/people/war wounded injured at different degrees.

- **16 October** – the ICRC were able to supply the Civil Defense in Gaza, as well as the Military Medical Service, with gloves, bandages, sterile water, oxygen masks, blankets, scissors, adhesives and other essential medical equipment for their response.
- **15 October**
 - the ICRC is exploring all avenues to bring life-saving aid into Gaza. We are in the process of pre-positioning life-saving supplies in multiple areas, so that we're ready when access to Gaza is granted, which it must urgently be. This initial goods convoy includes medicine and thousands of household kits for families which include hygiene items and chlorine tablets for drinking water.
 - We are also urgently deploying staff to relieve colleagues in Gaza whenever we are able to move in. This includes a mobile surgical team and other health staff, a weapons contamination expert, and relief coordinators specialized in water and habitat and food security.
- In addition, prior to 15 October our teams were able to deliver fuel to the water sector; truck water within Gaza City; install batteries into water pumping stations to keep them working; and set up water storage tanks (enough to supply about 250,000 people with water). We also have supplies that could help make some repairs to the water network, but need to be able to do this safely.
- **7 October** – the ICRC dispatched a truck of medical supplies (stretchers, beds, body bags) to a hospital in Gaza. We are ready to provide further humanitarian assistance as required on both sides. Support with equipment has been ongoing since then and has included things like IT support for labs, as well as medical equipment. The ICRC donated 280 body bags and 12 stretchers to the Ministry of Health in Gaza.
- In Israel, ICRC teams have been supporting with forensic equipment and needs such as face masks and shields, to assist with these forensic efforts.
- Since armed hostilities began over the weekend (07.10.23), we have received many enquiries from people in Israel, Gaza and internationally desperate to know about the fate of their missing family members.
 - o We fully understand how devastating it is for the families not to know the fate of loved ones. Within the ICRC's mandate and capacities, we are ready to do everything we can to help.
 - o We are compiling these enquiries and are speaking with the authorities to try and clarify the fate of the individuals concerned. This can take some time given the volatile situation now. We will be in touch with families directly to keep them informed.

Colour (public use)

ICRC war surgery team

- The testimonies our teams are sharing with us every day are heartbreaking and terrifying at the same time. They are treating patients with severe injuries, many of them burns, that require complex and labor heavy medical interventions, and the essential supplies, like dressing material, are running dangerously low. They fear they may have to start operating on patients without anesthesia, causing them horrendous pain.
- Large numbers of the patients they are treating are children, some of them who have lost their entire families.
- When patients get discharged, they have nowhere to go after their homes have been flattened. Many of them remain in the hospital sleeping in the staircase and in the corridors, hoping that being inside the hospital can provide them with some safety. Tragically, nearly everyday our colleagues describe scenes of terrible violence around healthcare facilities.
- Surgeons operate with flashlights.
- Entire communities are cut off from vital services, including maternity care and childcare.

Hospitals in Gaza

- There is no longer a complete and functioning health system in Gaza, where, from start to finish, medical needs can be met. There are only pockets of facilities here and there that can provide certain services, with limited supplies and personnel. Before the hostilities began, there were around 3,500 hospital beds in Gaza. There are currently an estimated 1,500, for a population of more than 2 million people, who have skyrocketing medical needs.
- The risk of infectious diseases leading to more otherwise preventable deaths continues to rise. This is particularly dangerous for children, those who are immunocompromised, pregnant women, elderly people and those with disabilities. The weather is cold, and regular flu will spread like wildfire, let alone gastro-intestinal issues like cholera, skin diseases, and similar. ICRC teams have already reported increased cases of chicken pox and Hepatitis A, particularly in children. Without proper treatment, this can have life-long impacts.
- Facilities in southern Gaza are providing urgent emergency care, and only limited post-operative follow-up due to lack of beds (patients are in corridors, offices, schools, etc.) The exhausted workforce has also lived through displacement, reducing the capacity of functioning hospitals. Medical professionals in Gaza have been continually operating and responding for more than four months now, in horrific conditions and with a lack of needed supplies. Medical staff need reinforcement. They cannot keep going like this.
- ICRC teams see seriously injured children, women and men rushed into the school. They were all shaking as it was cold, they looked stunned and in shock. We need to remember that any movement from the north to the south is not easy – people are doing this under horrifically stressful conditions. Fear is a constant companion.
- Some arrived in ambulances as their injuries were very severe that they couldn't walk. Others were stepping off the bus on crutches with metal bars in their legs. They were asking for water, food, and warmth.
 - A child asked if we could make the place warmer. She also asked if we could make it brighter as she has been through many horrific nights, and was now terrified of the dark.
 - A lady did not want to be moved into the hospitals, because after spending nights at a hospital in the north, she felt she would be safer at the school as they spent haunting nights at the Indonesian hospitals.
 - They were wondering if there's anything to eat or drink, and they were so disappointed when they learned there's nothing for them at the school.
- The EGH is currently home to more than 20,000 people, patients and displaced persons. This created pressure on resources, and a challenging environment for medical teams to work in – but there are no other options.
- Our teams on the ground in Gaza have visited hospitals in the northern area. What they describe seeing are death, destruction, and displacement on a staggering level. People are sleeping in the stairwells of hospitals. Thousands of people have nowhere else to go and are seeking shelter in the hospitals. Our teams have felt building walls shake from explosions, and people are living through this day after day.

ICRC colleagues in Gaza

- Colleague one:
 - Sewage water is spreading everywhere around the displaced communities. They are surrounded by piles of garbage as municipal work halted due to the lack of fuel, human resources, and the dangerous situation.
 - Many internally displaced people in Gaza have relocated around five times now. Thousands of families continue to move, searching for a safe haven.
 - Rafah has few hospitals, all with limited capacities. Last night (11.02.24, during IDF extraction operation) proved they cannot withhold large influx of patients.

- Some families receive a can of food every other day for the whole family. Animal fodder and bird feed are replacing flour that is very scarce and extremely expensive – in some areas, prices have increased by 3000% for bags of flour.
- Nasser Medical Complex staff reported that sewage water broke into the emergency room and they fear the leaking reaches the X-Ray room.
- Cooking gas is now essential for cooking a hot meal, warmth and many use it to run their cars. It's becoming less available given the immense population increase in Rafah. Some people don't have any way of relocating or evacuating from their homes.
- Some of them, I saw with my bare eyes, families, children, women, elderly, walking for tens of kilometers trying to reach safe areas as was instructed.
- Many families now are staying in the streets, without a roof over their heads, without access to any water.
- No bathrooms, no blankets, no mattresses, no hygiene kits.
- Without access to information about what's going to happen.
- The infrastructure has been heavily damaged in the vast areas of the Gaza Strip, especially in the north and the Gaza governorates.
- The internet and the communication system is paralyzed.
- The majority of people are disconnected from the outside world.
- People are searching for food.
- People are searching for water.
- Without the entry of humanitarian aid, without allowing this assistance to enter Gaza, we're going to witness more casualties, more deaths, more agony, more horrific scenes.
- And it just doesn't end. It just doesn't stop.
- Colleague two:
 - In southern Gaza, tens of thousands of people have moved even further south in recent days, close to Rafah. When travelling, our teams can see small temporary communities created in whatever space is available. At one location, when we travelled there just a week ago, there were just a few dozen tents. A week later, there are hundreds, with more continuing to arrive. Many have come from Khan Yunis, but others from even further north.
 - They've arrived with what little they can carry, often not their first time having to flee fighting over the past weeks. Many of these families have next to nothing – a plastic sheet or tarpaulin over a simple wooden frame, a few household items, and then more valuable things – a blanket, a mattress, a meagre supply of food. In conditions like this, the most basic things become rare, and exceedingly important. Space is tight, and those who arrive later are doing the best they can, with even some setting up shelters on space between two lanes of traffic. There are little or no sanitation facilities in places like this, which is particularly tough for women and parents trying to care for children.
 - I remember one man talking to us in Arabic through the care window as we moved through the streets. "When will this end? We cannot live like this?" My colleagues answered "we do not know", but the same question is on everyone's mind.
 - At hospitals like European Gaza Hospital, even without going inside where patients are treated, you see the terrible legacy of this conflict. There are patients outside, still recovering from injuries, because there is so little space inside the buildings. There are thousands of families staying in tents and temporary shelters in the hospital grounds - anywhere they have found space, there is a shelter. Families have come here to be close to facilities - even if limited - like water, toilets, and medical treatment if they need it. Many have also come because they know that hospitals should be protected during conflict by those that are fighting. Still, with the sounds of armed conflict never far away, people are on always edge. Still, there is life here - even in such desperate

conditions. People cook on small stoves heated with firewood. In one corner, a man cuts hair and trims beards. In another space, children play hopscotch on a court scratched in the ground with a stone. There are few smiling faces, except among the children, who are doing what children do - trying to forget their pain in a way that adults cannot. Even the children with heart-breaking injuries somehow find a way to smile.

- Inside the hospital, staff are doing their best in extremely difficult circumstances. On days when fighting rages heavily, they are almost overwhelmed. In the treatment areas, medical teams work as quickly as they can, knowing that more patients are always waiting. Many of those arriving with horrific injuries are children. The ICRC surgical team at EGH help their local colleagues with some of the most severe cases. We have managed to bring some medical supplies, but each day means more patients in need, and the question of, "will there be enough if things get worse?"
- Colleague 3:
 - In EHG, the sounds of explosions can be heard regularly. The ever-present emotion is fear. People are anxious, they are stressed, they are sick with worry about what will happen to them and their families. Patients, displaced people and medical staff sleep in corridors next to each other, hanging sheets the only thing separating groups of people. There is little access to water, let alone cleaning products.
 - A mother begged one of our war surgeon team to save her wounded son's life because 'he is the only son left'. Families are falling apart before our eyes. No one in Gaza remains safe from the impact of this conflict.
 - People are trying to sell their personal belongings, anything they have, on the side of the street to get some cash to buy food. Prices have drastically increased, and many families can only afford one meal a day at best. There are reports of people grinding up animal fodder to make bread, because they cannot access flour. People cannot buy hygiene items, things like toilet paper or menstrual products, let alone antiseptic or hand sanitizer. Baby formula is almost non-existent, parents are being forced to find alternatives which are not suitable for infants.
 - Every day we see more tents being put up. Everywhere you look, it is a sea of tarpaulin or plastic. In any available space people try to provide shelter for their loved ones. People are moving closer to the beach because there's slightly more space, but there is only so far they can go. Hostilities are also being conducted from sea.
 - People are sleeping in cold mud, because they don't have supplies like mattresses. Residents feel lucky when it is sunny weather, they it isn't so cold, but they get water when it rains. There is no good option.
 - Wherever there are tents, people are digging holes around them. This is what they are being forced to use as a toilet, because there are no other options. People also use these to bury garbage, because there is nowhere else to put it.
- Colleague 4
 - What was brick and mortar now stands as tarpaulin and makeshift countertops. A bakery has been set up under tents, but bakers are forced to resort to using any wood they can find to keep their ovens running, determined to continue serving their customers. This includes broken fence palings and cut down trees or furniture.
 - More makeshift shops are getting set up alongside the tents where people live.
 - Nights are continually disrupted by explosions – a time that makes it especially tense for people who don't know how far away these may be.

The situation

- Hundreds of thousands of people found refuge in Gaza shelters, in hospitals, schools, at relatives, or sleep in their cars or out in the open after their homes and neighborhoods have been turned into rubble. At the end of December, there were more than 20,000 tents in southern Gaza. In a month, that number more than doubled, and it continues to grow. Most of these are concentrated in a very small area around Rafah.
- Large-scale displacements from Khan Younis and above to the southern area adds immense pressure on already fragile essential service systems – water, sanitation and wastewater, and electricity.
- Since 7 November, no bakeries have been working, due to the lack of fuel, water, and wheat flour, as well as extensive damage from hostilities. Wheat flour is reportedly no longer available in the market. Many bakeries have been destroyed and mills cannot operate due to the lack of electricity. Families struggle to find even the most basic food. Parents sacrifice their own meals to feed their children.
- Most water plants in Gaza have ceased operation. Water can no longer be pumped or desalinated, leaving families with no access to clean drinking water.
- All wastewater treatment plants are currently shutdown. This means sewage is being pumped directly into the sea in the best case – consuming fuel critically needed to operate the water supply system – or flooding the streets, putting the whole strip at risk of disease outbreaks.
- Lack of access to safe drinking water and sanitation creates a serious risk of diseases like cholera, diarrhea, dysentery, hepatitis A, and typhoid. With hospitals and primary health care centers already overstretched and lacking medical supplies, a vast majority of patients will go without treatment.
- Destroyed homes and essential infrastructure will take years to rebuild.
- People are waiting for more humanitarian aid to enter. They are on the side of the roads, no roofs over their heads, water supplies dwindling, lacking power and food.
- Medical teams have been working non-stop for more than 10 weeks, under horrific conditions. They haven't seen their families; some do not even know if their families have survived or been able to evacuate. Doctors are breaking down. The medical teams need reinforcement.
- Schools have been cancelled in many areas on both sides of the border. Roads have been shut, impacting ambulance routes.
- In Israeli communities, the sound of sirens has been heard constantly throughout the day. People are desperate to know if family members are safe, while parents hustle terrified children in shelters. People are locking themselves in their homes because they don't know where the threat will come from.

Quotes (public use)

"Among the most shocking impact is the agony children have had to bear. Children have been ripped from their families and held hostage. In Gaza, ICRC surgeons treat toddlers whose skin is charred from widespread burns. What more must children endure? The images of suffering, dead and wounded children will haunt us all. This is a moral failing." **Mirjana Spolijaric, ICRC President.**

"The images and reports we have seen this morning are utterly horrific. The violence directed against civilians is appalling and cannot be justified. If the situation continues to escalate, then civilians on both sides will suffer immensely. We are aware of reports relating to people being captured or detained. I want to make it clear that carrying out, or threatening to carry out, an act of hostage-taking is prohibited under IHL. Anyone detained must be treated humanely and with dignity." **Fabrizio Carboni, ICRC regional director for the Near and Middle East**

"We've seen what's happening in Gaza, the shelling. We've seen what's happened and what's still happening in Israel. And it's always the same feeling of frustration and sadness, because

at the end of the day who pays the price? Civilians. My thoughts are with the Israeli people who have lost their friends and family, who still don't know what's happening. And my thoughts are with the Gazan families stuck in Gaza hearing bombing, they can do absolutely nothing, just hope that they won't be in the wrong place at the wrong time." **Fabrizio Carboni, ICRC regional director for the Near and Middle East**

"We have our teams in Gaza trying to supply medical help. The power supply has been cut so we need to provide fuel to hospitals and essential services to avoid their collapse. And then we have some people who have been displaced and we need to provide them with aid. On the Israeli side we have been supporting MDA, who have had one of their ambulance employees killed and several wounded. We are trying to support them as much as we can mainly in the field of health. But the situation is very fluid and obviously we're also preparing for an even worse scenario. A ground operation in Gaza would be devastating from a humanitarian point of view." **Fabrizio Carboni, ICRC regional director for the Near and Middle East**

"We are closely monitoring the hostilities and the impact on so many communities in Israel and the Occupied Territories. We know the number of dead and injured will continue to rise. People are scared and unsure of what will happen next. We urge all parties to protect civilian lives and infrastructure at all costs. The ICRC is in regular contact with authorities and our Movement partners. The ICRC stands ready to provide whatever humanitarian assistance is required and to visit anyone deprived of their liberty in our role as a neutral intermediary." - **Yuval Arie Nevo, Head of Office in Tel Aviv**

General Q&A (reactive only)

Affected population

If pressed on bias or seeing suffering as great on one side than the other

In international humanitarian law – the law of armed conflict – there is no hierarchy or comparison in pain and suffering. Civilians always pay the highest price in conflicts. Our thoughts are with Israel people who lost loved ones or are worried sick because their family member was taken. And our thoughts are also with Palestinian families trying to survive under bombing with no electricity and a health care system on the verge of collapse.

As a humanitarian organization, the ICRC's job is to see the needs wherever they exist, and advocate for people's rights as per the Geneva Conventions. This means civilians cannot be attacked. They cannot be taken hostage. They must receive humanitarian assistance like food, water and medical care. These rules exist to help preserve humanity in our darkest moments and they desperately need to be followed today.

Why is ICRC using figures coming from Hamas authorities, how do you know they are real?

Total numbers are based on numbers reported by the MoH and OCHA. We do not report on our own numbers of casualties. We speak directly to what we see, which is that too many civilians, including children, are suffering the worst consequences of the conflict. We see the total destruction of critical civilian infrastructure like water, desalination and sewage treatment plants that are having enormous detrimental effects on large swaths of the civilian population.

On airdrops

Please ensure you welcome the initiative before speaking of challenges. We are not focusing on criticism, but the needs that still exist regardless of the airdrops.

The most effective and sustainable way to deliver aid – such as food, drinking water, and medical equipment – is via land transport. The trickle of aid being let into Gaza is simply not sufficient to meet the needs of the hungry and desperate people. Efforts need to be re-doubled

by all actors, and especially by the State of Israel, to ensure such aid is let in and is safely distributed to those in need.

In the meantime, we welcome any initiative that brings needed relief to people in need. At the same time, we note that airdrops are a last resort measure – because it is inefficient, unsustainable, can only supply limited quantities which often do not reach the most vulnerable, and can add to elements of risk. The fact that actors are turning to airdrops underlines the dire situation many Palestinians are currently facing, particularly in the north.

Challenges (if needed to expand): airdrops come with their own challenges. From finding a safe area to drop, free of people and objects, to the quantity that can be delivered, to the expense, it is not always the most efficient tool. Such operations need clear arrangements and cooperation of many different stakeholders to ensure aid is delivered safely and effectively. It is time-consuming, and civilians in Gaza cannot wait. The priority remains clear: ensuring that those in need immediately receive support.

Ceasefire, corridors, pauses, etc.

There are talks about opening humanitarian corridors. Is the ICRC involved in this and how could these help?

Humanitarian corridors – or what the ICRC refers to as safe passages – are an option that can help alleviate suffering. They can allow civilians to leave if they choose to do so or for humanitarian relief like food or medicine to get in. However, safe passages do not relinquish the parties' obligation under IHL. Civilians are protected wherever they are, whether there is a safe passage agreement in place or not. This also applies to anyone who chooses to stay or cannot leave. If the parties choose to establish them, it's important that the exact details are agreed upon clearly – the time, the route, the goods allowed in – and that any movement of civilians out of an area is voluntary. Because again: civilians are protected under IHL whether they are in a so-called humanitarian corridor, in their home, in a hospital bed, or on their way to school; this applies today and before, during and after any safe passage operation takes place so long as there is an armed conflict.

Urban warfare scenario in the south

*Internal only: please note that at this time (14.02.2) **no large-scale evacuation orders have been officially given**, so we must remain general using the below lines:*

- As the military operation in Gaza further escalates, civilians are still trapped with nowhere safe to go, only a little amount of humanitarian aid is coming in, and the fighting continues to close-in around civilians. We are now seeing this move further south.
- There is no where further south for civilians to go than Rafah. The humanitarian situation is already teetering on catastrophic. No public health system, no sustainable shelters or hygiene facilities, and drastically increased food prices, all under the constant fear and stress of where hostilities will impact next.
- It is the responsibility of the parties to this conflict to ensure civilians have adequate access to food, drinkable water, and shelter, wherever they are.
- Regardless of any warnings for evacuations being issued, it is incumbent upon all parties to the conflict to protect civilians in this urban warfare scenario. ICRC knows from experience that when cities become battlegrounds, it is civilians and civilian infrastructure, their lifeline, that will bear the most brunt of this conflict.
- The parties must put humanity first and take every possible step to prevent Gaza from becoming a tomb of rubble. All civilians must be protected: this applies equally to the population of Gaza and the Israeli hostages.

Evacuations

What IHL says on evacuations

- Regardless of whether civilians evacuate or not, they are still fully protected under IHL. Even if a warning has been issued, attacking forces must do everything prevent the loss and harm of civilian life and property.
- Every civilian who has evacuated their home has a right to return.
- Parties to the conflict must allow civilians to leave and must do everything to protect civilians who might otherwise be stuck in harm's way.
- Distinguish between civilians and military targets. When targeting the enemy, parties must always factor in the potential consequences on the surrounding environment and seek not to cause unnecessary harm to civilians and civilian objects.
- Take all possible precautions to protect civilian life and infrastructure when using explosive weapons in populated areas.
- Never use human shields to prevent military objectives from being attacked.

Does the ICRC evacuate civilians?

The ICRC in Israel and the Occupied Territories does not currently evacuate civilians. Any involvement of the ICRC in evacuating civilians from an area would require first the agreement of the sides on the exact terms and conditions so that this can be done safely, and then with the full consent of those evacuated.

Hostages and detainees

On agreements related to the release of hostages and detainees.

The ICRC's role is to act as a neutral intermediary, which means they implement what has already been agreed upon between the parties. The ICRC is not part of the negotiations, is not aware of the details of the negotiations, and does not have information on what exactly is the content of the agreement. As a neutral intermediary, which is at the core of ICRC's mandate, its role is to facilitate the release and the transfer of either the hostages or Palestinian detainees. The ICRC is in contact with the parties.

Suggested general lines on hostages

We stand by our partner, the ICRC who has said publicly and clearly: the taking of hostages is prohibited under IHL. They must be released immediately.

We welcome the release of the 109 Israeli hostages so far. We hope for more and our partner, ICRC stands ready to facilitate and bring loved ones to their families.

The ICRC has rightly received a lot of questions from families and the public about what they are doing to help the hostages. What we can tell you is: ICRC is speaking with Hamas at the highest levels face-to-face. The plight of peoples loved ones being held hostage is one of their top priorities. The ICRC are making demands to see them. They are asking that they be able to contact their loved ones. ICRC has also made it clear that they are ready to facilitate any eventual release. The ICRC has stated publicly and clearly that the taking of [hostages is prohibited under IHL](#).

We hear reports in the media that the ICRC will be delivering medicines to the hostages. Can you confirm this?

The ICRC welcomes the announcement released by Qatar's Ministry of Foreign Affairs on 16 January of a deal that will allow for the long-expected delivery of medicines to hostages and that will also make it possible for the delivery of medicines for the population in Gaza. The news is a much-needed moment of relief for the families of the hostages and the health facilities in Gaza. As part of their humanitarian work, the ICRC has been urging the parties and those who have influence to ensure that medicines get into the hands of all those who

need them and stand ready to continue to play its neutral intermediary role. The ICRC continues to call for the immediate release of all remaining hostages.

If pressed for more information by media on the delivery of medicines to the hostages, please refer them to the ICRC press@icrc.org. If you require more information for other stakeholders, please reach out to Courtney Wilson cwilson@icrc.org.

Will ICRC be visiting other hostages as stated by the Israeli government to check on their welfare and deliver medicines?

Since 7 October, the ICRC has continuously asked for the release of all hostages held in Gaza and for their humane treatment. We haven't stopped doing so and will continue as long as it takes. Should a visit be agreed upon, the ICRC stands ready to visit. The ICRC does not take part in the negotiations between the parties to the conflict.

Why did ICRC refuse to take medicines to the hostages after the families tried to give you them?

ICRC has been meeting directly with families and they have urged them to take possession of personal medications, but ICRC continues to ask the families to retain possession of those medicines. They do not have access to the hostages and there are logistics and security reasons that require medical items to be sourced differently. This is why they have asked the families to keep those medications. As soon as they would have the right to visit the hostages, they will be ready with the necessary medicines and other aid in hand to deliver. ICRC has been calling for access to the hostages since Day 1 and will continue to do so, and are ready to carry out those visits.

In most cases, a medical doctor accompanies and supports the release operations, accompanying the hostages out of Gaza with ICRC teams.

Why does ICRC want to visit Palestinians in Israeli prisons, when it cannot visit Israelis detained in Gaza?

Given its humanitarian mandate provided by the international community through the Geneva Conventions of 1949, the ICRC holds the responsibility to visit people deprived of their liberty in times of war. This applies to people detained by the Israeli authorities, by the Palestinian Authority or by de facto authorities in the Gaza strip. It is crucially important that detaining authorities, whoever they may be, abide by their legal obligation to grant ICRC's access to persons deprived of their liberty. The rules of IHL are not subject to the condition of reciprocity; they must be respected by every part to a conflict, in all circumstances.

This expectation of ICRC's detention visits is generally shared by families of detainees and communities at large. It is also stressed by the ICRC to the concerned authorities as often as necessary. The ICRC cannot, however, elaborate in detail on the content of these particularly sensitive dialogues. It can take time to secure and organize visits to detainees, it is ultimately the responsibility of the authorities concerned to ensure that the visits materialize. That is true in the case of Israel, the Palestinian Authority, and the de facto authority in Gaza. The ICRC visits places of detention regularly in Israel, the West Bank and the Gaza Strip, and has been doing so for decades. It is in the interest of all stakeholders that these detention visits are maintained and where challenges occur, the ICRC will relentlessly challenge the authorities concerned so that it can deliver on its mandate.

Hunger in Gaza

The IPC and others are speaking of famine as 'imminent'. Does the ICRC agree with this projection?

We know that people have struggled to access enough food in Gaza for months now. Weeks of not getting the proper nutritional intake has harmful consequences on the immune systems and general health of civilians, their mental health, physical strength, the

development of children, the ability to heal from wounds, and much more.

The ICRC is gravely concerned about increasing levels of hunger in the Gaza Strip, especially in the north. It is not necessary to wait - the prospect of famine should galvanize action. Famine can – and must – be prevented, and we should all be doing all we can to ensure that a famine does not occur.

Israel, as the occupying power, must ensure that the basic needs of the civilian population in Gaza are met. While we recognize that more aid is now getting in, including by air and sea, it is necessary that the trickle of food aid – as well as water, hygiene items, medicines, and materials for sanitation and shelter - being let into Gaza becomes a steady, robust stream.

What can you tell us about the levels of hunger in Gaza?

As already mentioned, we know that people have struggled to access enough food in Gaza for months now. Weeks of not getting the proper nutritional intake has harmful consequences on the immune systems and general health of civilians, their mental health, physical strength, the development of children, the ability to heal from wounds, and much more.

The situation is severe in the north: too little food can reach the population on a regular basis. In Rafah in the south, there is more food available than in the north, but still too little, at increased prices, and there is a lack of dietary diversity. People are surviving off small and irregular items like canned goods and energy bars and while this is better than nothing, it cannot substitute for essential nutrients found in fruit, vegetables, grains, and proteins. The already-weakened residents of Gaza need consistent and sufficient food supplies to avoid becoming more exposed to risks of disease, illness, and death.

What does IHL say about famine?

International humanitarian law prohibits the use of starvation of the civilian population as a method of warfare.

Specific Incidents

Did Israel deliberately target the World Central Kitchen workers?

While we are not in position to confirm exactly what happened, as we were not there or involved, we are aware and deeply saddened that seven humanitarian worker from World Central Kitchen were killed earlier this week in Deir al-Balah. We offer our sincere condolences to their families and colleagues.

Humanitarian workers provide crucial assistance amidst conflict and must never be targeted. The parties must facilitate safe access for humanitarian assistance. It's a legal obligation.

Humanitarian organizations for months have faced security challenges and incidents while trying to support Palestinian civilians in Gaza. These seven deaths are yet more reminders of the importance of safe and unhindered humanitarian assistance. Humanitarian workers must be able to conduct their work without risking their own lives.

If pressed on deconflicted vehicles: World Central Kitchen said they had deconflicted their vehicles – is this true? How does coordination work on the ground?

The recent killing of seven World Central Kitchen staff is a stark reminder of the dangers faced by humanitarian workers in Gaza right now, and our deepest condolences go out to the family and colleagues of these staff members.

Conflict areas are volatile,, with different challenges including telecommunication breakdowns, impassable roads, and constantly evolving security environment. The ICRC is in regular contact with parties to the conflict about our movements and operations. This is vital to ensure the safety and security of our staff. While there are specific processes our teams on the ground

follow, we can't speak for the mechanisms of other organizations working in Gaza. Our procedures depend on the activity being implemented (supply distribution, movement to higher-risk areas regular movements to key sites) at the time and the security assessments of our teams.

What is your response to the operation at Al-Shifa, and the hundreds of dead bodies found around it?

The scenes emerging from Al-Shifa Medical Complex are deeply distressing. Hospitals should be places of refuge for those who are sick and wounded. They are protected under international humanitarian law and must be spared from the fighting and from any misuse of them by parties to the conflict. At all times, measures must be taken to protect medical staff and civilians.

With more and more hospitals now unable to provide services, it is civilians who pay the price, at a time when these services are most needed. The public healthcare system in Gaza has been devastated during this conflict, and for every hospital impacted, thousands of patients lose access to critical care.

If pushed on bodies:

We are extremely concerned by the reports of bodies around Al-Shifa. In all cases where people are killed, or die, during conflict, their bodies must be handled respectfully and with dignity. The remains should be recovered, properly managed and identified to help prevent and resolve the tragedy of people unaccounted for as a result of the armed conflict.

On the 30 bodies recovered from Gaza (found handcuffed and blindfolded)

The ICRC is deeply concerned by reports of bound bodies being recovered in Gaza. While circumstances are not clear, whether these individuals were civilians or detainees, protections of their lives and dignity exist under international humanitarian law and we support our partners, ICRC in saying that these laws need to be respected.

On the UNRWA allegations and investigations, impacts on humanitarian aid in Gaza

The scale of humanitarian needs and suffering in Gaza is staggering. This is exacerbated by the ongoing intensity of hostilities, and the slow-moving entry of humanitarian assistance in the Strip. The system today does not allow an adequate response to the humanitarian needs. With humanitarian capacity already stretched thin, it's vital to avoid any additional disruptions in delivering aid, especially given the large scale of need.

UNRWA is engaged in a wide array of services, ranging from food distribution to education, underscoring the vast and complex nature of the humanitarian efforts required. While our partner, ICRC cannot comment on an ongoing investigation, we continue to support their call for all parties to the conflict to adhere to their obligations under international humanitarian law, protect civilians, and safeguard the uninterrupted provision of essential aid. We reiterate our call for unimpeded and regular flow of humanitarian assistance, and the necessary conditions in which to distribute this aid.

Are ICRC staff being investigated by IDF regarding 7 October?

The ICRC has no reason to believe that we are under investigation, nor that any of our staff were involved in the tragic events of 7 October. ICRC is in regular and direct dialogue with Israeli authorities, and if there were any concerns shared with us, we would of course follow-up immediately.

All ICRC staff must sign a strict Code of Conduct upon employment, which requires them to adhere to our humanitarian principles, according to which they must never participate in an

armed conflict or take sides in any political or ideological controversy. Anywhere ICRC works, they proactively seek to ensure their employees live up to the high standards expected of the ICRC, not only while carrying out their humanitarian work, but at all times. Any behaviour found that is not in line with the Code of Conduct is taken seriously and addressed appropriately. ICRC is not aware of any staff behaviour linked to the events of 7 October, or indeed to related activities before or since that date.

Why haven't you condemned the sexual assaults suffered by Israelis at the hands of Hamas?

The ICRC is deeply concerned with reports of sexual violence perpetrated against Israeli civilians and hostages, following the events of 7 October. Rape and other forms of sexual violence committed in the context of an armed conflict constitute violations under international humanitarian law. ICRC has reiterated that there is no tolerance for sexual violence.

As a humanitarian organization working in armed conflicts around the world, the ICRC works towards eliminating sexual violence, ensuring that its survivors have access to all necessary services. Directly after the events of 7 October, the Association of Rape Crisis Centres in Israel (ARCCI) approached the ICRC, and we have been, and are, exploring ways to support.

If asked about the ICRC response:

In coming weeks, the ICRC plans to hold the first orientation session on “Mental health and psychosocial considerations in helping people affected by sexual violence in armed conflicts” for professionals, ARCCI staff, and volunteers from ARCCI community.

If pressed on whether it is a war crime:

These reports are very serious. It is not the role of the ICRC to assign terms like these to such acts, but rather the wider international legal institutions.

Why hasn't ICRC condemned the sexual assaults suffered by Palestinian women and girls at the hands of Israeli forces?

The ICRC is deeply concerned with reports of sexual violence and abuse perpetrated against Palestinian civilians and detainees. Rape and other forms of sexual violence, when committed in the context of an armed conflict, constitute violations under international humanitarian law (IHL). ICRC has reiterated that there is no tolerance for sexual violence.

What is your response to the Director of al-Shifa Medical Complex being arrested? What about PRCS medics who were also arrested?

We have publicly reiterated that medical facilities like hospitals, as well as medical staff, are specifically protected objects under IHL – the work they do is lifesaving.

We do not know the details of these specific instances. What we can say is that the PRCS is part of the International Red Cross Red Crescent Movement and is bound by the core principles of neutrality and impartiality. They have a proven track record for their life-saving work and we work alongside their dedicated teams.

Humanitarian workers and medical staff work to help and save the lives of others. When their work is interrupted, the impact on the most vulnerable is too high. Medical staff and humanitarian workers in Gaza are risking their lives to help others. They must be protected and respected.

Regarding the takeover of the Al Shifa hospital by the Israeli side and/or possibility of investigating allegations that Hamas used Al Shifa to keep hostages or use as military base.

The ICRC does not have a permanent presence in hospitals in Gaza. As in many other contexts in which it operates, the ICRC provides medical supplies and equipment, trainings to medical personnel, or improve life-saving emergency facilities. In times of hostilities, such as

the current war, we have a surgical team punctually stepping in. Today such surgical work takes place in the European Gaza Hospital, in Khan Younis in southern Gaza.

On responding to the situation at Al Shifa hospital:

Overall approach and COM posture: focus on the human angle and try to stay away from legal/IHL explanations, if possible. Bring the narrative back to the people, civilians, etc. If needed, the following lines can be used:

- The misuse of hospitals is a serious matter which can have significant consequences for the sick and wounded, medical staff and civilians more broadly. All measure to avoid any consequences on them must be taken.
- Patients, medical staff and civilians must be protected at all times.
- Our partner, the ICRC is in contact with concerned authorities and continue to closely monitor the situation.

There are claims a PRCS ambulance was used by terrorists. How is this only okay for PRCS to do?

The Palestine Red Crescent Society (PRCS) has been providing ambulance and other core healthcare services in extremely dangerous circumstances in Gaza since the fighting escalated, caring for the many people wounded in the conflict. Many humanitarian and health workers, including members of the PRCS, have been tragically killed in the conduct of their duties over the last weeks.

There are reports that Israeli forces are blocking ambulance access in the West Bank. Isn't this illegal/a war crime?

We firmly emphasize that during armed violence, all armed actors must respect and ensure access to medical services, including vehicles, staff and facilities. These services mean the difference between life and death in violent situations, and it is critical that first responders can carry out their work. In many places throughout the West Bank, we were in constant contact with relevant authorities to ensure unimpeded access to emergency services.

On refugee camp strikes

The images that we are seeing from Jabalia camp are deeply distressing. It is beyond heartbreaking to see wounded children being taken out from under the rubble. Jabalia is the largest refugee camp in Gaza and was home to some 60,000 people, an extremely densely populated area. These are the most vulnerable communities in Gaza who have been living in difficult conditions and suffering multiple deprivations even before the current escalation. Civilians and essential civilian infrastructure are protected under IHL. The terrible human cost of this conflict is growing by the minute and we call on parties to spare civilians from further harm.

Is Israel using white phosphorous on civilians in Gaza and isn't this a war crime?

We do not have information that would confirm its use in Gaza.

On questions around dead body management

We are aware of reports stating that the International Committee of the Red Cross was involved in the recent transfer of bodies from Israel to Gaza. We were **not** involved in this operation at any stage.

In all cases where people are killed, or die, during conflict, their bodies must be handled respectfully and with dignity. The remains of individuals should be recovered properly and managed and identified to help prevent and resolve the tragedy of people unaccounted for as a result of armed conflict.

Aid

We've heard reports that fuel is being used for rockets by Hamas and that they are taking fuel supplies off aid agencies. What can you say to that?

Like many others, we are confronted with challenges all around the world when it comes to the politicization or diversion of aid. We do have very rigid systems in place and the fact that we speak to all side and all sides trust us and our purely neutral and humanitarian mission helps. For example, if we distribute medical supplies, we distribute those ourselves or together with our partners, so we see where those items go. On fuel, we mainly provide this in small quantities to hospitals or other facilities, so the risk of diversion is quite low. We understand the concerns, but we have a humanitarian imperative to follow and not allowing fuel in while it provides a lifeline to hospitals and people, in our view a problem. It is also essential that despite all these discussions, we can't forget that our focus should always be on civilians and civilian infrastructure and how we can protect them in times of hostilities.

If pressed about whether IL authorities want to search the relief items that are being deployed to Rafah:

ICRC's response is purely of a humanitarian nature. We want to bring additional staff such as war surgeons and relief items. The humanitarian goods that are currently on the move include medicine and thousands of household kits for families which include hygiene items and chlorine tablets for drinking water. We have nothing to hide, and we welcome any measure that will speed up the process to deliver life-saving aid to the people in Gaza.

How will ICRC ensure, under the conditions set out by the Israeli and US statement, that aid won't be used by Hamas?

First and foremost, humanitarian aid should never be politicized, particularly given the fact that the level of need among civilians in Gaza right now is overwhelming. Our partner, the ICRC is accustomed to working in highly volatile situations. They carry out assessments beforehand to identify people in need of assistance and determine what aid is required. They have rigorous checks in place to make sure that aid we deliver reaches those who need it. As an impartial humanitarian organization, ICRC's normal practice is to deliver aid themselves or through trusted partners, so they know exactly who benefits from it. In addition, our standard way of working is to monitor and evaluate aid distributions to ensure aid is reaching those who need it.

How do you ensure that the aid you're distributing is not being diverted?

The ICRC is accustomed to working in highly volatile, rapidly changing, and challenging environments. We have put a range of mitigating measures in place to prevent the diversion of goods or leakage of funds including (1) Compliance policies and practices; (2) Measures relating to inbound/import and reception of goods at ICRC warehouses (3) Careful needs assessments, beneficiary selection, and distribution; (4) Direct implementation and (5) Monitoring and Evaluation to ensure aid is reaching the targeted populations."

Do you fear that this will escalate into a regional conflict? What could you see unfolding in the coming weeks?

We do not want to speculate on what could come. Our focus today is on the humanitarian needs created by the ongoing escalation of hostilities that have been occurring for more than ten weeks *Move into the messaging above, bringing it back to today and the need for more aid into Gaza, humanitarian space to work, etc.*

Are you concerned about the increasing levels of violence we are seeing in the West Bank, including deaths?

We have consistently reiterated our concern about the rising levels of violence seen in the West Bank throughout this year. 2022 is no longer the deadliest year seen in over a decade in the West Bank – 2023 has surpassed this number in terms of casualties and injuries.

Unfortunately, we are seeing tension from the current armed conflict in Gaza now spreading in multiple areas of the West Bank.

Misinformation, Disinformation, and Hate Speech – and related allegations

See recurring [malicious narratives](#) against the ICRC & suggested responses.

There are reports that the Red Cross notified IDF of the coordinates of the hospital. Can you confirm?

Reactive lines

- The ICRC works with all parties in all conflicts to reduce human suffering.
- IHL is very clear that hospitals are specially protected facilities. Put plainly: No patient should ever be killed while lying in a hospital bed. No doctors, nurses, or any medical professionals should ever die in a fiery explosion while working to save lives.
- The hard truth is that medical facilities and medical personnel suffer from vicious attacks in conflicts around the world. Our bottom line for all fighting parties everywhere: Medical facilities must be humanitarian sanctuaries.
- As much as we wish we could, the Red Cross and Red Crescent Movement cannot physically shield people or buildings from attack. We have no control of how the parties wage war. The parties bear that responsibility: They must respect their obligations under IHL and protect civilians and civilian objects.
- Right now, the humanitarian toll of the ongoing hostilities is rising – civilians paying the highest price. And it's unacceptable.

If pressed on if we shared coordinates to IDF

- This is not something we as [insert your National Society] can speak to. What I can tell you is that, the ICRC is speaking to both parties as they do in conflicts around the world. We reiterate that hospitals must be humanitarian sanctuaries and benefit from special protection under the law. Bridge back further to above points as needed.

IDF says/a video is circulating that during an interrogation a Hamas fighter said the group was operating from the PRCS headquarters?

These are serious allegations, which could have grave consequences for humanitarian workers risking their lives to help others. They should not be made lightly. The PRCS is part of the International Red Cross and Red Crescent Movement and is bound by the core principles of neutrality and impartiality. They have a proven track record for their life-saving work. Humanitarian workers – and this include PRCS – are protected under IHL, and should be spared from the fighting.

There are allegations circulating that an ICRC staff member placing a tracker on an apparent member of Hamas.

The ICRC firmly denies these allegations. We are committed to upholding humanitarian principles and ethics in all our operations. These false claims put at risk the safety of our staff and our access, hindering humanitarian aid from reaching those in need.

On ambulance strikes and allegations that PRCS ambulance was transporting terrorists:

- We are heartbroken to see medical services in Gaza put in harm's way. Our partner, ICRC's urgent call is for the sides to respect and protect them.
- Medical personnel, including paramedics of our partner, PRCS, save lives. They should not have to risk their lives to save others.
- PRCS has a strong track record providing lifesaving services. Like all the organizations forming part of the Red Cross and Red Crescent Movement, they are bound by the principles of neutrality and impartiality, which are at the core of our humanitarian work.

Modus Operandi

Confidentiality: *The ICRC's time-tested mode of action, even in a situation in which a party violates IHL, is to preserve dialogue within the framework of a bilateral confidential manner with the authorities responsible for the violation. Confidentiality is a key factor in obtaining the best possible access to the victims of armed conflicts and other situations of violence, whether current or future, with a view to this access providing protection dividends to the victims. The aim of confidential approach is to convince the parties responsible for unlawful conduct to change their behavior and uphold their obligations. However, the ICRC's confidentiality is not unconditional, as its purpose and justification rest on the quality of the dialogue that the ICRC maintains with the authorities, as well as on the humanitarian impact that its bilateral confidential representations can have.*

Why are you silent on the terrorist attacks against Israel?

The International Red Cross and Red Crescent Movement is a humanitarian organisation first and foremost. As a neutral organisation, we do not do politics. Our concern is purely humanitarian. We are deeply distressed by the level of violence directed against civilians in Israel and the Occupied Territories in recent days. We reiterate our call for parties on both sides to protect civilians from harm at all costs.

When will the ICRC condemn war crimes by the Israelis / Palestinian militants?

We deplore the loss of civilian lives, including children. Direct and indiscriminate attacks against civilians and civilian objects are prohibited under IHL. All necessary precautions must be taken to avoid civilian casualties. Any concern resulting from the ICRC's own assessment on the ground will be addressed with the relevant authorities through our bilateral and confidential dialogue.

In the U.S., Hamas is sanctioned as a terrorist organization. How can the ICRC work in a place where there is a designated terrorist group?

- The ICRC works in line with its mandate from IHL to assist and protect people affected by armed conflict. We operate on the basis of the humanitarian principles, namely neutrality, independence, and impartiality, and carry out exclusively humanitarian activities targeting populations affected by armed conflict.
- The ICRC has in place robust oversight and risk mitigations measures to ensure our aid reaches targeted affected populations and to prevent aid diversion.

IHL Q&A

Basics

- FAQ on [Rules of War](#)
- FAQ on [Hostages](#)
- FAQ on special protection for [Hospitals](#) (short [video explainer](#))
- FAQ on [children, torture, sieges, food security, & hospitals](#) (also in [Hebrew](#) & [Arabic](#))
- Video explainer of [ceasefires, pauses, corridors](#)
- [Customary rules of IHL](#)

Application of IHL

What is one side of the party doesn't adhere to IHL?

The obligations of the parties to the conflict under IHL continue to apply regardless of violations committed by the adversary.

Confirming a violation of IHL is rarely a determination that is easy to make on the spot. For example, there are situations where hospitals [can lose their protected status](#) under IHL. ICRC's approach is to only collect information on alleged violations and present them and raise these

directly with the parties as our experience shows that this is the best way for us to achieve the change we're hoping to impact. We then do not publicly comment on violations and bridge back to the human impact and speak generally to what IHL says.

Classifications (for internal understanding)

What is the status of the Gaza Strip under international law?

The ICRC considers Gaza to remain occupied territory on the basis that Israel still exercises key elements of authority over the strip, including over its borders (airspace, sea and land - at the exception of the border with Egypt). Even though Israel no longer maintains a permanent presence inside the Gaza Strip, it continues to be bound by certain obligations under the law of occupation that are commensurate with the degree to which it exercises control over it. The Oslo Accords also recognize the West Bank and Gaza as forming a single territorial entity (even if geographically separated). Israel is bound by certain obligations under the law of occupation including to ensure the basic needs of the population of Gaza are met.

Those deprived of liberty (hostages, detainees, etc.)

What is the status of hostages under IHL?

Hostages are people who, irrespective of their status, have been captured by a person or organization that threatens to kill, injure or continue detaining them in order to compel a third party to do something as a condition for their release. Hostage-taking during armed conflicts is prohibited under IHL.

How are detainees exchange transactions carried out in terms of international law?

What is the involvement of international organizations?

Basic rules set out by IHL

- Transfers or exchanges of detainees must be carried out humanely.
- The conditions of transfer must not be prejudicial to the detainee's health. The detaining power should supply the detainees with sufficient food and drinking water and with the necessary clothing, shelter, and medical attention during the transfer and exchange.
- The detaining power must ensure the safety of the detainees during the transfer and exchange.
- Detainees must be allowed to take their personal belongings with them.
- A complete list of detainees exchanged must be drawn up before departure and should be shared with the receiving power and with the ICRC.

Regarding potential ICRC's involvement, here are the main conditions:

- Agreement of all parties concerned.
- Security guarantees: safe and unimpeded access for ICRC to carry out the operation.
- Respect at all times and by all parties of the requirements of IHL regarding such exchanges, in particular with regard to the humane treatment of the detainees before, during and after the transfer.

Urban Warfare

What do the parties have to take into account when engaging in hostilities in densely populated areas?

- Fighting in urban areas can have devastating humanitarian consequences for the civilian population. It often destroys or damages the critical infrastructure necessary to supply vital services, such as electricity, water and sanitation, health care, food or education. As these infrastructures are typically interconnected, the disruption of one service may cause the collapse of many others.
- It is thus of critical importance that the limits on the choice of means and methods of warfare imposed by IHL are respected.
- More specifically, IHL prohibits attacks directed at civilians and civilian objects, as well as indiscriminate attacks – that is, attacks that strike military objectives and civilians or civilian objects without distinction. IHL also prohibits attacks that may be expected to

cause incidental civilian harm that would be excessive in relation to the concrete and direct military advantage anticipated.

- In addition, IHL requires parties to the conflict to take a range of precautions in attack and against the effects of attacks to protect civilians and civilian objects. With regard to precautions in attack, all feasible precautions must be taken to avoid or at least minimize incidental civilian harm.
- The principles of distinction, proportionality and precautions are complementary, and all three must be respected for an attack to be lawful.

Special Protection

How are hospitals protected under IHL?

- Hospitals are especially protected under IHL because of their life-saving function that they have for the wounded and sick. This means that, as a general rule, parties to conflicts cannot attack hospitals and they cannot otherwise prevent them from performing their medical functions.
- That said, hospitals can lose their protection if used outside their humanitarian function humanitarian functions to commit “acts harmful to the enemy”. It would be the case for example if a hospital is used by a party to the conflict as a base from which to launch an attack; as a weapons depot; or to hide healthy fighters.
- Before carrying out an attack on a medical establishment or unit that has lost its protected status, a warning must be given. Where appropriate, this should include a time limit, which must go unheeded before an attack is permitted. The purpose of issuing a warning is to allow those committing an “act harmful to the enemy” to terminate such act, or – if they persist – to ultimately allow for a safe evacuation of the wounded and sick who are not responsible for such conduct and who should not become the victims of it.
- Where such a warning has remained unheeded, the enemy is no longer obliged to refrain from interfering with the work of a medical establishment or unit, or to take positive measures to assist it in its work. Even then, humanitarian considerations relating to the welfare of the wounded and sick being cared for in the facility may not be disregarded. They must be spared and, as far as possible, active measure for their safety be taken.
- This derives from the obligation to respect and protect the wounded and sick as well as the general rules on the conduct of hostilities that apply to attacks on any military objective. Notably, an attacking party remains bound by the principle of proportionality. The military advantage likely to be gained from attacking medical establishments or units that have lost their protected status should be carefully weighed against the humanitarian consequences likely to result from the damage or destruction caused to those facilities: such an attack may have significant incidental second – and third – order effects on the delivery of health care in the short, middle and long-term.
- An attacking part remains also bound by the obligation to take precautions in attack, in particular to do everything feasible to avoid or at least minimize harm to patients and medical personnel who may have nothing to do with those acts or for whom the humanitarian consequences will be especially dire.

War Crimes

See [Modus Operandi](#) section.

Communication materials

- **LIVE WeTransfer Portal of ICRC COM assets** (scroll down for most recent)
Please note: this will be updated on a regular basis to include our most recent assets. Please ensure you note anything that denotes “not for fundraising use”
- **One month on pieces:**

- One month on: [operational update & key facts and figures](#)
- On global ICRC X channel: “[In Gaza there is no time to grieve, only to survive](#)”
- On IL/OT X channel: “[One month since the horrific attacks in Israel](#)”

ICRC Statements, News Releases, etc.

- [9 March](#) A statement on Gaza and Israel from the President of the ICRC
- [14 Feb](#) Gaza: increased armed hostilities in Rafah pose a disastrous risk to civilian lives and infrastructure
- [14 Feb 2](#) ICRC remains extremely concerned about the lives and welfare of hostages in Gaza
- [18 Jan](#) ICRC welcomes the agreement to deliver medicines to the hostages and medical facilities in Gaza
- [15 Dec](#) ICRC President in West Bank
- [14 Dec](#) ICRC President in Israel
- [4 Dec](#) ICRC President in Gaza
- [2 Dec](#) Suffering for civilians continues as hostilities resume
- [24 Nov](#) ICRC starts multi-day release of hostages/detainees & deliver aid
- [20 Nov](#) ICRC President in Qatar
- [14 Nov](#) ICRC President meets with families of hostages
- [12 Nov](#) Urges protection for Gaza civilians evacuating and staying behind
- [10 Nov](#) Not only a legal obligation but a moral imperative to preserve human life
- [9 Nov](#) Humanitarian aid must not become a fig leaf for failing to protect civilians
- [7 Nov](#) ICRC convoy hit
- [7 Nov](#) Children dying by the 1,000s. This needs to stop.
- [6 Nov](#) Ambulances transporting patients from Al Shifa arrive at the Rafah
- [31 Oct](#) Rising violence in the West Bank
- [28 Oct](#) De-escalate now
- [27 Oct](#) War surgery team arrives in Gaza
- [20 Oct](#) Neutral intermediary role in release of hostages in Gaza
- [13 Oct](#) Evacuation order of Gaza: catastrophic humanitarian consequences
- [10 Oct](#) Targeting civilians leads to further spirals of violence and hatred
- [7 Oct](#) Calls for immediate protection of civilians

About the ICRC in ILOT

Through its permanent presence in Israel and the Occupied Territories (ILOT) since 1967, the ICRC has been working to alleviate the suffering of people impacted by conflict. The ICRC has been supporting the capacity-building of emergency responders e.g. teams from the Ministry of Health, primary health care centres, Palestinian Authority Ministry of Health (MoH) Coordination and Liaison Office in Gaza, EMS staff from MMS, MoH and Civil Defense. The ICRC currently has coordination agreements with national societies from the following countries: Japan, Germany, Spain, France, the Netherlands, Denmark, Sweden, and IFRC. In total, there are over 300 fulltime ICRC staff working in this delegation; of which 130 are based in Gaza.

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