Mandates of the Special Rapporteur on the human rights to safe drinking water and sanitation; the Special Rapporteur on the right to development; the Special Rapporteur on the issue of human rights obligations relating to the enjoyment of a safe, clean, healthy and sustainable environment; the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health; the Special Rapporteur on adequate housing as a component of the right to an adequate standard of living, and on the right to non-discrimination in this context and the Special Rapporteur on the situation of human rights in the Palestinian territory occupied since 1967

REFERENCE:
AL ISR 13/2020

8 February 2021

Excellency,

We have the honour to address you in our capacities as Special Rapporteur on the human rights to safe drinking water and sanitation; Special Rapporteur on the right to development; Special Rapporteur on the issue of human rights obligations relating to the enjoyment of a safe, clean, healthy and sustainable environment; Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health; Special Rapporteur on adequate housing as a component of the right to an adequate standard of living, and on the right to non-discrimination in this context and Special Rapporteur on the situation of human rights in the Palestinian territory occupied since 1967, pursuant to Human Rights Council resolutions 42/5, 42/23, 37/8, 42/16, 43/14 and 1993/2A.

In this connection, we would like to bring to the attention of your Excellency’s Government information we have received concerning the acute water and sanitation crisis in Gaza, which is severely affecting the health and wellbeing of its residents, including their capacity to protect themselves from contagion of Covid-19.

According to the information received:

Despite being known in the first half of the 20th century as a land with abundant water resources, during recent decades residents of Gaza have chronically suffered a situation marked by insufficient access to clean and safe drinking water and adequate sanitation. The territory inhabited by over 2 million lacks a perennial source of surface water. It only has one aquifer, which keeps decreasing and deteriorating with seawater, excessive extraction, saline groundwater intrusion and pollution. The blockade that Gaza is subjected to by the Government of Israel has also exacerbated the acute water crisis.

The total water supply in Gaza for domestic use is of 99,058,677 million cubic meters, provided by the municipal administration, the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) and private providers. Most of the water (95.4 percent) comes from groundwater, 2.6 percent is desalinated, and 2 percent is purchased from Israel's National Water Company Mekorot.

Most of the groundwater comes from the coastal basin (86 percent), which crosses Israel, Gaza and reaches Egypt. However, already in 1997 the World Bank described the situation of the aquifer as an “emergency state of affairs”
due to excessive extraction, seawater intrusion, and pollution. In 2018 the pumping was calculated by OCHA to be three times its sustainable recharge by rainwater. Despite enjoying alternative water resources, Israel is using 75 percent of the sustainable groundwater amount each year from the coastal aquifer, leaving little of it available for Gaza. Sewage infiltration and groundwater deterioration also pose further risks to the basin.

The high density of population in Gaza, increased by successive forced population transfers by Israel, and Palestine refugees fleeing into Gaza, also poses a particular challenge to the supply of water and sanitation services. With over 5,600 inhabitants per square kilometer, Gaza has one of the highest population densities in the world.

The water scarcity in Gaza is also augmented by the diversion carried out by Israel of an aquifer from the Jabal al-Khalil mountains in the southern West Bank, which contributed before to replenishing Gaza’s ground water.

From 1972 to 2005, Israeli settlers built agricultural colonies in Gaza and took up water-intensive farming enterprises that tapped into deep pocket freshwater, severely affecting the amount of land and water available to Palestinians.

The scarcity of water has pushed residents to use improvised, unregulated water sources of low quality, causing more than a quarter of all diseases in Gaza. Over half of the children have water-related parasitic infections and chronic diarrhea, hampering their growth and development. 223 out of 245 municipal wells present nitrate levels that are unsafe for the general population, and none of them have levels acceptable for drinking by children and infants. Children are particularly susceptible to nitrates in water, which stunts their growth and affects brain development, impacting their health in ways that have life-long consequences. High levels of nitrates cause cyanosis, harm pregnant women and increase the risk of cancer. Saline water also causes kidney dysfunction, heart failure, neurological symptoms, lethargy, and high blood pressure.

Israel’s attacks on Gaza have also caused massive destruction of water, sanitation, water treatment and sewerage infrastructure. For example, in 2008-2009, 919 wells and 243 pumps were destroyed. In 2014, 132 wells were damaged or destroyed. In 2016-2020, three water wells were destroyed.

The general humanitarian situation in Gaza has been worsening since 2018, due partially to power cuts (lasting 18 to 20 hours per day) caused by shortages of fuel that have been intensified by the blockade. During the first half of 2019, the average amount of piped water supplied in Gaza was almost 78 litres per capita per day, and 72 in the same period in 2018. However, this water is unfit for human consumption and is used primarily for domestic purposes other than drinking and cooking. As a result, 90 per cent of Gaza households buy water from desalination or purification plants delivered by water tankers, at a much higher cost than piped water.

Between 13 and 31 August 2020, Israel closed the Karam Abu Salem crossing and banned fuel shipments into Gaza, worsening the difficulties to provide access to water and sanitation to its residents. On 18 August 2020, Gaza’s power plant shut down when it ran out of fuel. On 31 August 2020, the total
ban on fuel was partially lifted, allowing the power plant to resume operating on 1 September. However, the supply of electricity only lasts for eight hours at a time, followed by power cuts lasting eight hours.

The recent electricity shortages greatly restricted the operations of the 48 desalination plants in Gaza, as well as the treatment of sewage water resulting in increased pollution. The limited electricity prevents water pumps from working at full capacity, resulting in difficulties to flush toilets, wash homes and household items, and maintain basic personal hygiene.

Gaza’s blockade by Israel has also severely limited the availability of construction material to build and maintain wastewater treatment plants and sewage networks, worsening the pollution, impacting the environment and full enjoyment of human rights.

The shortage of water and sanitation severely impacts the capacity of Gaza residents to protect themselves against contagion of Covid-19 through hand hygiene, in a context where the number of cases keeps growing. As of 2 February 2021, the World Health Organisation reported a total of 51,670 confirmed cases in the Gaza Strip, of which 4,248 active cases (50 of which were at intensive care units), as well as 523 deaths. To compare, as of 2 December 2020, 118 persons had died of Covid-19 in Gaza. The World Health Organization (WHO) had warned of an increasing risk of the health systems in the Occupied Palestinian Territory becoming overwhelmed if cases continued to increase. The insufficient provision of safe water and sanitation in hospital settings poses a great hindrance to the ability of Gaza’s medical system to respond to the pandemic.

Measures aimed at preventing the contagion of Covid-19 are also exacerbating the difficulties of residents in Gaza to obtain water, as persons ordered to stay in quarantine cannot go out and buy it from private vendors.

While we do not wish to prejudge the accuracy of these allegations, we express our utmost concerns about the effects of the water and sanitation crisis in Gaza on the human rights of the residents, their rights to life, health, adequate housing, safe drinking water and sanitation, especially in the context of the Covid-19 pandemic. We express our strong concerns about the drastic effects of the lack of safe drinking water on human health, and particularly on the children of Gaza, half of whom have parasitic infections and chronic diarrhea, denying them their right to grow and develop healthily.

We would also like to express our concerns about the direct military attacks at civilian water and sanitation facilities, and the blockade on Gaza causing electricity cuts and not allowing its residents to rebuild, maintain and develop a water and sanitation infrastructure that could ameliorate the scarcity of safe drinking water and alleviate the current human suffering caused by the water and humanitarian crises.

We express our utmost concern that, without the immediate lifting of restrictions barring the entry in Gaza of fuel and construction materials necessary for reconstructing, maintaining and developing water and sanitation infrastructures, the water and humanitarian crises will continue to worsen and exacerbate their devastating impact on the lives of residents in Gaza.
Non-discriminatory access to water, sanitation, energy, electricity and health care are essential elements of the rights to adequate housing, water and sanitation and to the highest attainable standard of health under international law. Israel is thus obliged to ensure that residents have non-discriminatory access to water, sanitation, electricity, energy and health care throughout its entire territory, including in territories occupied by it. This includes ensuring that institutions that exercise in Gaza functions of self-administration have all available resources at their disposal to restore and rebuild such services. Israel must not only abstain from any measures that undermine the equal enjoyment of these rights in the Gaza strip, it is also obliged to undertake positive measures until defacto discrimination is eliminated in the provision of water, sanitation, energy, electricity or health care in terms of accessibility, reliability and quality. Such positive measures must be maintained until residents in the Gaza strip enjoy services of similar quality and reliability as residents of Israel proper.

In connection with the above alleged facts and concerns, please refer to the Annex on Reference to international human rights law attached to this letter which cites international human rights instruments and standards relevant to these allegations.

As it is our responsibility, under the mandates provided to us by the Human Rights Council, to seek to clarify all cases brought to our attention, we would be grateful for your observations on the following matters:

1. Please provide any additional information and/or any comment(s) you may have on the above-mentioned allegations.

2. Please provide detailed information on any measures taken by your Excellency’s Government to ensure that Israeli extraction of water from the coastal aquifer does not impair the availability of safe drinking water in Gaza.

3. Please provide detailed information on any measures taken by your Excellency’s Government to ensure that military attacks on Gaza do not affect civilian water and sanitation infrastructure and the provision of electricity, energy, water and sanitation services to civilian households.

4. Please provide detailed information on any measure taken to ensure that the blockade on Gaza does not affect the human rights of its residents, with particular attention to the human rights to adequate housing, water and sanitation, and health.

5. Please provide detailed information on measures taken to prevent the spread of Covid-19 in Gaza, including sufficient and appropriate access by Gaza residents to water and sanitation services.

We would appreciate receiving a response within 60 days. Past this delay, this communication and any response received from your Excellency’s Government will be made public via the communications reporting website. They will also subsequently be made available in the usual report to be presented to the Human Rights Council.
While awaiting a reply, we urge that all necessary interim measures be taken to halt the alleged violations and prevent their re-occurrence and in the event that the investigations support or suggest the allegations to be correct, to ensure the accountability of any person(s) responsible for the alleged violations.

Please accept, Excellency, the assurances of our highest consideration.

Pedro Arrojo-Agudo  
Special Rapporteur on the human rights to safe drinking water and sanitation

Saad Alfarargi  
Special Rapporteur on the right to development

David R. Boyd  
Special Rapporteur on the issue of human rights obligations relating to the enjoyment of a safe, clean, healthy and sustainable environment

Tlaleng Mofokeng  
Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health

Balakrishnan Rajagopal  
Special Rapporteur on adequate housing as a component of the right to an adequate standard of living, and on the right to non-discrimination in this context

Michael Lynk  
Special Rapporteur on the situation of human rights in the Palestinian territory occupied since 1967
Annex
Reference to international human rights law

We would like to remind your Excellency’s Government of the explicit recognition of the human right to safe drinking water by the UN General Assembly (resolution 64/292) and the Human Rights Council (resolution 15/9), which derives from the right to an adequate standard of living, protected under, inter alia, article 25 of the Universal Declaration of Human Rights, and article 11 of International Covenant on Economic Social and Cultural Rights (ICESCR), ratified by Israel on 3 October 1991. In its General Comment No. 15, the Committee on Economic, Social and Cultural Rights (CESCR) clarified that the human right to water means that everyone is entitled to sufficient, safe, acceptable, physically accessible and affordable water for personal and domestic uses.

In the same General Comment, the Committee stated that water is a limited natural resource and a public good fundamental for life and health and a prerequisite for the realization of other human rights. It highlighted that the unequal distribution of water is exacerbating poverty, and that States parties are obliged to take effective measures to realize, without discrimination, the right to water.

The Committee also stated that the human right to water entails “sufficient, safe, acceptable, physically accessible and affordable water for personal and domestic uses”, not only to prevent death from dehydration, but also to reduce the risk of water-related disease and to provide for consumption, cooking, personal and domestic hygienic requirements. The Committee also pointed at the obligation of States to ensure that natural water resources are protected.

The Committee spelled out the scope of legal obligations related to the human rights to water and sanitation in three groups of obligations:

a) The obligation to respect: States must refrain, inter alia, from “destroying, water services and infrastructure as a punitive measure, for example, during armed conflicts in violation of international humanitarian law” (par. 21).

b) The obligation to protect: States parties must prevent third parties from interfering in any way with the enjoyment of the right to water, including individuals, groups, corporations and other entities as well as agents acting under their authority.

b) The obligation to fulfil: States must take positive measures to assist individuals and communities to enjoy their rights to water and sanitation, including the direct provision when individuals or a group are unable, for reasons beyond their control, to realize that right themselves by the means at their disposal.

We would also like to refer to article 11(1) of the ICESCR, which establishes the right to adequate housing as a component of the right to an adequate standard of living. The CESRC has, in its General Comment No. 4, stressed that the right to adequate housing includes various aspects such as legal security of tenure, affordability, and availability of services. Non-discriminatory access to safe drinking water, electricity and energy are essential elements of the right to adequate housing,
that must not be subject to any form of discrimination in accordance with article 2 (2) of the Covenant. The State of Israel must therefore ensure that population groups living in the Gaza strip, being a territory under Israel’s effective control, have similar access to electricity and safe drinking water in their homes as those living in Israel proper and undertake positive measures to overcome any de facto discrimination in accessing electricity and water. Destruction of water service infrastructure, electricity cuts, and an economic blockade that prevents the restoration of such services, obviously violate articles 11(1) and 2(2) of the ICESCR. We take note of the recent Concluding Observations (E/C.12/ISR/CO/4) of the CESCR, in which it reminded Israel that the applicability of its human rights obligations in the Occupied Palestinian Territory, as well as the concurrent application of international human rights law and international humanitarian law in a situation of armed conflict or occupation, have been affirmed by the International Court of Justice in its advisory opinion rendered on 9 July 2004 on the Legal Consequences of the Construction of a Wall in the Occupied Palestinian Territory.

The Framework Principles on Human Rights and the Environment, presented to the Human Rights Council in March 2018 (A/HRC/37/59) set out basic obligations of States under human rights law as they relate to the enjoyment of a safe, clean, healthy and sustainable environment. They underline States’ substantive responsibilities in this regard including the obligation to prevent from violating the right to a healthy environment or other human rights related to water through their own actions; and States’ duty to protect those rights from being violated by third parties. As set out in the Framework Principles, States should also fulfill procedural obligations related to water including by assessing the potential environmental, social, health, cultural and human rights impacts of all plans, policies, projects and proposals that could pollute, waste, damage, destroy or diminish water and freshwater ecosystems and ensuring access to justice and remedy for all.

We would like to further refer to article 12 of the ICESCR which protects the right to the highest attainable standard of physical and mental health. In its General Comment No. 14, the Committee indicates that the right to health is inclusive and extends not only to timely and appropriate health care but also to the underlying determinants of health, such as access to safe and potable water and adequate sanitation (para. 11), to which States have an obligation to ensure equal access for all (para. 36). While the right to health is of progressive realization and subject to availability of resources, there are various core obligations that States must fulfill with immediate effect (para. 30), including ensuring an adequate supply of safe and potable water (para. 43 (c)).

In its Statement on the coronavirus disease (COVID-19) pandemic, the CESCR identifies people living in conflict and post-conflict affected regions as particularly vulnerable during the pandemic as they frequently suffer higher rates of chronic illnesses and underlying health conditions than others, which places them at greater risk of developing severe health complications from COVID-19. The CESCR recommends States, as a matter of urgency, to adopt special, targeted measures, to protect and mitigate the impact of the pandemic on these groups in vulnerable situation. Such measures include, among others, providing water, soap and sanitizer to communities that lack them and specially tailored measures to protect their health and livelihoods.