

**Mandates of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health and the Special Rapporteur on the situation of human rights in the Palestinian territory occupied since 1967**

Ref.: AL ISR 4/2023  
(Please use this reference in your reply)

5 May 2023

Excellency,

We have the honour to address you in our capacity as Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health and Special Rapporteur on the situation of human rights in the Palestinian territory occupied since 1967, pursuant to Human Rights Council resolutions 51/21 and 1993/2A.

In this connection, we would like to bring to the attention of your Excellency's Government information we have received concerning **Mr. Walid Daqqa**, a Palestinian prisoner who has been detained for more than 37 years in Israeli prisons and suffers from myelofibrosis, a rare form of bone marrow cancer. It is alleged that he has been deliberately and systematically denied of adequate health care while in detention, which directly contributed to his current critical condition.

According to the information received:

Mr. Walid Daqqa is a 61-year-old Palestinian writer and political activist from the city of Baqa Al-Gharbiya. Mr. Daqqa was arrested by Israeli forces on 25 March 1986 for allegedly participating in armed resistance against the Israeli occupation, as a member of the Popular Front for the Liberation of Palestine (PFLP). In 1986, he was sentenced to life imprisonment, which is capped at a maximum term of 37 years. However, in 2018, an Israeli civil court extended his sentence for another two years for allegedly having smuggled mobile phones into his cell in violation of the prison regulations. Mr. Daqqa remains in detention to date, despite having already served the maximum term of 37 years.

Mr. Daqqa is in the malignant stage of myelofibrosis - a rare form of bone marrow cancer – and suffers from critical health conditions, allegedly as a result of the Israeli Prison Service (IPS)'s deliberate and systematic denial of access to appropriate and adequate medical treatment and care.

In 2020, Mr. Daqqa's health began to deteriorate. As early as 2018, the prison doctor had recommended that Mr. Daqqa undertake periodic blood tests, as he had blood-related health problems. However, the IPS did not allow him to take these tests, allegedly as a form of punishment for having smuggled mobile phones into his cell.

On 7 December 2022, Walid was admitted to Barzilai Medical Centre following a sudden deterioration in his health, and he was subsequently

diagnosed with leukemia. Further tests revealed that he was suffering from myelofibrosis and required an urgent bone marrow transplant. In January 2023, Mr. Daqqa was examined by an external hematologist, who concluded that he was in the malignant stage of cancer and that without appropriate treatment, he had the average chance of survival for another year and a half. The hematologist also observed that he was at high risk of cardiovascular diseases and that the drug prescribed to him by his IPS-assigned physician was aggravating his condition and jeopardizing his immunity. He also recommended that Mr. Daqqa be transferred to a clean and hygienic environment in order to avoid infectious diseases, given that the prison was overcrowded, unhygienic, poorly ventilated and infectious diseases among prisoners were common. None of these recommendations was followed by the IPS.

In mid-February 2023, Mr. Daqqa suffered from a severe cardiovascular stroke and required an urgent medical intervention. However, the IPS at Askalan prison allegedly refused to transfer him to a hospital and the prison clinic declined to provide him with a necessary blood transfusion. Following the stroke, Mr. Daqqa reportedly lost a significant amount of blood through a minor tongue wound, lost over 10 kilos over the past month and a half, and developed symptoms of pneumonia. Nevertheless, the IPS allegedly ignored his conditions and did not provide him with appropriate medical care or transfer him to a hospital. Mr. Daqqa was finally transferred to Barzilai Medical Center 11 days after he suffered from the stroke, when his hematologist visited Askalan prison for a routine appointment.

Mr. Daqqa is currently held in a private room at Barzilai Medical Center, suffering from pneumonia, kidney failure, and a life-threatening drop in blood cell count. On 12 April, he has reportedly undergone a surgery to extract a part of his lung due to severe infection and remains in critical condition.

It is alleged that Mr. Daqqa's case reflects a pattern of the IPS' systemic failure to provide prisoners with adequate health care. Reports indicate that morbidity among the prison population in Israeli prisons is significantly higher than the general population, which is attributed to the abysmal conditions of detention and the poor quality and availability of health care in the prisons. The prison cells are often overcrowded, excessively humid, poorly ventilated and unhygienic, and the health care provided by the IPS is reportedly substandard and insufficient. In many cases, prisoners' health is reportedly jeopardized by inadequate treatment or the denial of essential treatment. Since 1967, 236 Palestinian prisoners reportedly died in Israeli prisons, and 32 per cent of them (75 prisoners) allegedly died as a result of lack of access to adequate health care and living conditions.

Without prejudice to the accuracy of the information received, we wish to express our serious concern at Mr. Daqqa's critical health condition and lack of access to adequate medical treatment. We underline Israel's obligation to provide for adequate health care to those deprived of liberty, in line with article 12 of the International Covenant on Economic, Social and Cultural Rights (ICESCR), and the

failure to do so may amount to a violation of the right of everyone to life, as set forth in article 6 of the International Covenant on Civil and Political Rights (ICCPR).

We furthermore highlight that in the context of deprivation of liberty, States have a heightened obligation to care for and protect the physical, mental health and well-being of detainees and must take any necessary measures to protect the lives of individuals deprived of their liberty. As repeatedly concluded by the Committee Against Torture, inadequate detention conditions could amount to ill-treatment. States are, therefore, required to provide adequate health care and take preventive measures to ensure that all “[P]risoners should enjoy the same standards of health care that are available in the community, and should have access to necessary health-care services free of charge without discrimination on the grounds of their legal status’, as stated in the UN Standard Minimum Rules for the Treatment of Prisoners (Nelson Mandela Rules). We would also like to underline that Israel, as the occupying power, has the obligation to provide for appropriate medical attention to protected persons detained by the occupying power (articles 76 and 81, Fourth Geneva Convention).

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 any comment you may have on the above-mentioned allegations.
2. Please provide legal and factual grounds on which Mr. Daqqa’s sentence was extended by two years, in excess of the maximum term of 37 years.
3. Please provide explanations as to why Mr. Daqqa was not provided with appropriate medical treatment when he was diagnosed with myelofibrosis, and why his haematologist’s recommendations were not implemented.
4. Please provide reasons why Mr. Daqqa was not immediately transferred to a hospital or given appropriate medical attention, after he had a stroke in February 2023.
5. Please indicate whether there has been any investigation or inquiry into the alleged failure by the IPS to provide Mr. Daqqa with appropriate medical care.
6. Please provide information on steps taken by the Israeli Government to ensure adequate health, safety, hygiene and living standards within prisons in line with its obligations under international humanitarian law

and international human rights law.

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 responsible of the alleged violations.

We may publicly express our concerns in the near future as, in our view, the information upon which the press release will be based is sufficiently reliable to indicate a matter warranting immediate attention. We also believe that the wider public should be alerted to the potential implications of the above-mentioned allegations. The press release will indicate that we have been in contact with your Excellency's Government's to clarify the issue/s in question.

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.

Please note that a copy of this letter is being transmitted to the State of Palestine for their information.

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

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

Francesca Albanese  
Special Rapporteur on the situation of human rights in the Palestinian territory  
occupied since 1967

## Annex

### Reference to international human rights law

In connection with above alleged facts and concerns, we underline Israel's obligation to provide for adequate health care to those deprived of liberty and the failure to do so may amount to a violation of the right of everyone to life, as set forth in article 6 of the International Covenant on Civil and Political Rights (ICCPR). The Human Rights Committee, in General Comment No. 36 (2018), defined the right to life as “[t]he entitlement of individuals to be free from acts and omissions that are intended or may be expected to cause their unnatural or premature death, as well as to enjoy a life with dignity” and stressed on the right to life to “[a]ll human beings, without distinction of any kind, including for persons suspected or convicted of even the most serious crimes.”

We would also like to bring to the attention of your Excellency's Government provisions of the International Covenant on Economic, Social and Cultural Rights (ICESCR). Article 12 (1), coupled with article 2.2 (non-discrimination) establishes States parties' obligation to respect the rights of everyone to the enjoyment of the highest attainable standard of physical and mental health, including prisoners and detainees. In its general comment No. 14, the Committee on Economic, Social and Cultural Rights reiterates that “States are obliged to respect the right to health by, *inter alia*, refraining from denying or limiting equal access for all persons, including prisoners or detainees, to preventive, curative and palliative health services.” In particular, it states that States should refrain from “limiting access to health services as a punitive measure, for instance, during armed conflicts in violation of international humanitarian law” (para. 34).

In the context of deprivation of liberty, States have a heightened obligation to care for and protect the physical, mental health and well-being of detainees and must take any necessary measures to protect the lives of individuals deprived of their liberty. Furthermore, States' failure to ensure equal and adequate access to health care can be a factor contributing to death and serious injury in detention. In that regard, we would like to stress the non-derogable obligation to prohibit torture and ill-treatment, under articles 2 and 16 of the Convention Against torture and other cruel, inhuman or degrading treatment or punishment (CAT), even during exceptional circumstances and emergencies. The Committee Against Torture has repeatedly concluded that inadequate detention conditions could amount to ill-treatment. States are, therefore, required to provide adequate health care and take preventive measures to ensure that all “[P]risoners should enjoy the same standards of health care that are available in the community, and should have access to necessary health-care services free of charge without discrimination on the grounds of their legal status”, as stated in the UN Standard Minimum Rules for the Treatment of Prisoners (Nelson Mandela Rules). In particular we would like to refer to rule 24, recognizing the responsibility of States to provide health care for prisoners, free of charge without discrimination, and rule 27, indicating that prisoners requiring specialized treatment shall be transferred to specialized institutions or to civil hospitals. We would also like to highlight that Israel, as the occupying power, has the obligation to provide for appropriate medical attention to protected persons detained by the occupying power (articles 76 and 81,

Fourth Geneva Convention).

Moreover, we wish to refer to the report of the former Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, in which he makes reference to the fact that “[i]n contexts of confinement and deprivation of liberty, violations of the right to health interfere with fair trial guarantees, the prohibition of arbitrary detention and of torture and other forms of cruel, inhuman or degrading treatment, and the enjoyment of the right to life” and that [v]iolations of the right to health emerge as both causes and consequences of confinement and deprivation of liberty”.<sup>1</sup> In addition, the Special Rapporteur urges States to “[f]ully abide by, and implement, the Nelson Mandela Rules, in particular as regards the provision of health care in prisons”.<sup>2</sup>

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<sup>1</sup> Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, A/HRC/38/36, para. 18.

<sup>2</sup> *Ibid.* para. 98 (a).