Israeli Violations of International Humanitarian Law During Operation Protective Edge

ARVIND REDDY

Writer’s Comment: My dream is to become a doctor in the global health field, and I am able to pursue this passion with the International Relations major. Hence, when my International Law class assigned a term paper on a legal issue, I was set on writing an essay regarding the U.S. airstrike on the Doctors Without Borders Kunduz hospital in northern Afghanistan. However, the issue was too recent and clouded with conflicting accounts, and so I instead focused on the UN report of war crimes committed in the 2014 Gaza conflict. My goal, as it had been with my initial focus on Kunduz, was to bring to light the attacks committed on medical personnel, civilians, hospitals and shelters. I wanted to use the legal knowledge I attained in my class to demonstrate that such illegal attacks must be prosecuted. Those who attempt to save lives and those who seek such protection must be protected with the full force of the law. I wanted to use my voice and words to call for the global community to safeguard these rights and thereby protect civilians and medical personnel, wherever they may be.

Instructor’s Comment: The judges were nervous about Arvind’s essay. It was clear to all of us that it was outstanding, but any piece on the ongoing conflict between Palestine and Israel would be controversial, regardless of its stance. At UC Davis tensions between students who are pro-Israel and those who are pro-Palestine run high; some affected students even feel unsafe here. As judges, we feel strongly the need not to censor; as teachers, we feel strongly the need to safeguard. So we took the unusual step of appealing to an outside expert to vet the
argument and then took the matter to then Executive Vice-Chancellor Ralph Hexter. He agreed that as long as the paper was sound, we should honor the author’s right to have it published. Arvind edited this piece to a very high standard, in particular working closely with the reviewer’s notes to ensure clarity, evenness of tone, and depth of proof. Arvind hopes one day to serve as a doctor in the world’s war torn regions. May he and all who are called to do such work be safe, whereever they serve.

— The Editor

I – Introduction

In the summer of 2014, Israeli Defense Forces (IDF) responded to Hamas rockets fired from Gaza by conducting Operation Protective Edge, with the goals of nullifying Hamas’ military capabilities and tunnels. The ensuing war in the Gaza Strip led to the deaths of 2,251 Palestinians, including 1,462 civilians, and “six civilians in Israel and 67 [Israeli] soldiers.” This paper will analyze how, during the course of the military operation, Israeli forces committed war crimes through the targeting of hospitals, medical workers and UN schools acting as shelters in clear violations of international humanitarian law, specifically the 1949 Geneva Convention IV and its Additional Protocol I. Israel defended its actions by stating that Hamas had either used the civilian targets as weapon depots or had launched missile attacks from those areas. These claims will be examined using the United Nations Human Rights Council’s detailed report of violations of international humanitarian law perpetrated by both parties in the conflict.

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Transgressions of international humanitarian law are prosecuted through the International Criminal Court (ICC), established by the Rome Statute. The ICC focuses on prosecuting “the most serious crimes of concern”, including war crimes. However, such illegal acts committed by Israel and the United States, both signatories to the 1949 Geneva Convention, violated international humanitarian law but did not lead to any ICC prosecution, suggesting the need to strengthen the Rome Statute for stricter enforcement and punishment.

II – Summary of Israeli Attacks on Protected Facilities in the Gaza Strip

In 2014, Israel remained in a perpetual conflict with Palestine, split between the Hamas-governed Gaza Strip and the Palestine Liberation Organization-governed West Bank. Prior to Operation Protective Edge, tensions were already extremely high due to Israeli settlements in the West Bank, the Israeli blockade of Gaza, Hamas rockets being launched into Israel, and the unearthing of Hamas tunnels. On April 23, 2014, Hamas and Fatah agreed to share power, hoping to unite the divided Palestinian state. Enmities between Israelis and Palestinians then erupted after three Israeli teenagers and a Palestinian teenager were brutally killed in an attack and counterattack. Shortly afterwards, on July 7, 2014, Israel

4 Ibid., 3.
5 UNGA HRC, Report, 5.
launched Operation Protective Edge in the Gaza Strip, with military activities concluding on August 26.⁸

During the military operation, Israeli assailments occurred on medical facilities, medical personnel and UN schools acting as shelters. The first major medical violation took place in the Gaza village of Khuza’a.⁹ Witnesses reported that the village’s “only clinic, Dr. Kamel Qdeih’s Clinic, was struck by repeated Israeli air strikes on 23 and 24 July,” with a doctor on duty estimating that thirty civilians were killed.¹⁰ A confidential source at the clinic further reported that requests for assistance were not met, as the “Red Cross informed [the source] that they were told by the Israelis that nobody would be authorized into Khuza’a because it was a closed military zone.”¹¹ Further testimonies described how the IDF delayed Palestinian Red Crescent Society (PRCS) medical assistance into and out of the clinic and the village, with one “critically injured” seven year old patient dying in an “ambulance … kept waiting for at least 20 minutes” at “an IDF checkpoint.”¹²

The second major medical violation occurred in “[t]he Shuja’iyya market neighborhood” on July 30, when the IDF declared a four hour afternoon truce with the exception of “the areas in which IDF soldiers are currently operating.”¹³ In this time period, the IDF shelled a market home in response to “an anti-tank missile,” an assertion denied by the home’s inhabitants who lost eight children in the bombing.¹⁴ After ten minutes passed, a second IDF burst of shells were launched “just as three ambulances and the paramedics arrived at the scene,” with video evidence further proving that “the sirens [were] clearly audible.”¹⁵ The

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⁸ UNGA HRC, Report, 6.
¹⁰ Ibid., 86.
¹¹ Ibid., 87.
¹² Ibid., 87.
¹³ Ibid., 98.
¹⁴ Ibid., 99.
¹⁵ Ibid., 99.
second shelling killed 23 people, “including 3 journalists, 1 paramedic, and 2 firemen.”

The third major medical violation took place in Rafah on August 1, where an intense IDF military offensive was launched due to “to the killing of two IDF soldiers and the capture of Lt. Hadar Goldin.” The same day, in Rafah’s Abu Yousef Al Najjar Hospital, doctors reported “that the hospital received more than a thousand casualties.” The hospital was hit by two missiles, as were several ambulances transporting the injured and rushing to save the wounded throughout Rafah. Then, civilians were injured when “[d]ozens of shells” hit the Al Najjar Hospital, further damaging the medical facility and leading to the evacuation of patients.

During Operation Protective Edge, the World Health Organization (WHO) reported that 7 health care facilities, including one hospital, were destroyed, 67 health care facilities were damaged and 10 remained untouched. Furthermore, the WHO reported that 16 medical workers were killed on duty, 7 died in their homes, and “a further 83 were injured, the majority of whom were ambulance drivers.” All in all, the WHO concluded that the deaths of these medical workers, along “with the direct targeting of health facilities … [was] a gross violation of International Humanitarian Law.”

The Israeli military additionally violated international humanitarian law by targeting UN schools as shelters. In the Gaza Strip, the UN Relief

17 Ibid., 92.
18 Ibid., 94.
19 Ibid., 94.
20 Ibid., 94.
22 Ibid., 13.
23 Ibid., 13.
and Works Agency (UNRWA) converted 85 schools into shelters for 300,000 civilians during the military conflict.24 A total of seven shelters were hit, three catastrophically, leading to mass civilian casualties. The first major shelter incident occurred on July 24, when the Beit Hanoun school was hit by multiple IDF shells, “killing between 12 and 14 people” and leaving “[a]t least 93 wounded.”25 IDF stated that the strikes were against Hamas “locations from which Palestinian missiles had been fired at them.”26

The second major shelter incident occurred on July 30, when the Jabalia Elementary Girls A and B School in the eponymous refugee camp was hit by Israeli shelling in the early morning, killing “[b]etween 17 and 18 people” and wounding “at least 99.”27 The third major shelter strike “hit the street in front of the UNRWA Rafah Preparatory Boys A School” on August 3, leaving 15 dead and “[a]t least 25 … injured.”28 As with the Beit Hanoun school incident, both IDF strikes in Jabalia and Rafah were stated to be counterattacks against alleged missiles from Hamas militants.29

III – Pertinent Legal Sources Regarding the Israeli Strikes

The IDF strikes against medical facilities, medical workers, and UN schools acting as shelters most clearly violate international humanitarian law, specifically the 1949 Geneva Convention IV Relative to the Protection of Civilian Persons in Time of War.30 According to the UN HRC, Israel has signed the four 1949 Geneva Conventions and Additional Protocol III, “but has not ratified Additional Protocols

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24 UN HRC, Detailed Report, 111.
25 Ibid., 112.
26 Ibid., 114.
27 Ibid., 115.
28 Ibid., 116-7.
29 Ibid., 115-7.
I and II on the protection of victims of international armed conflicts.”  

Multiple articles in Convention IV, as well as Additional Protocol I, were violated by the IDF in its strikes on protected facilities. Still, as Additional Protocol I has not been ratified and is not customary law, as it is not “a general practice accepted as law,” Israel can flout this protocol without fearing any international legal consequences. However, according to UN Judge Fausto Pocar, Additional Protocol I is undergoing “[a] slow but continuous trend towards [recognition of] the general value of … [its] provisions,” thereby eventually becoming customary international law and hence needing to be followed by all states.

In the Geneva Convention IV, Article 16 states that “[t]he wounded and sick … shall be the object of particular protection and respect,” but this provision was breached in the catastrophic medical strikes on hospitals, clinics and other medical facilities. By blocking medical care and stalling ambulances in Khuza’a, the IDF contravened Article 17, where safe passage must be given “for the removal from besieged or encircled areas, of wounded … [and] sick … and for the passage of … medical personnel and medical equipment on their way to such areas.”

By launching missiles against clinics and hospitals in both Khuza’a and Rafah, the IDF also explicitly violated Article 18, which states that “[c]ivilian hospitals organized to give care to the wounded and sick … may in no circumstances be the object of attack but shall at all times be respected and protected by the Parties to the conflict.”

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31 UN HRC, Detailed Report, 7.
35 YLS, Convention (IV).
36 Ibid.
37 Ibid.
The killing of doctors, nurses, ambulance drivers and other medical workers in IDF strikes on medical facilities and vehicles entirely disregards the protection afforded to such healthcare workers in Article 20. Article 21, focusing on the protection of medical vehicles, was also flouted by the IDF in its attacks on ambulances in Rafah, Shuja’iya, and Khuza’a. The 1958 analysis by the International Committee of the Red Cross (ICRC) of Article 21 states that warring parties must not also “interfere with [medical convoys’] running,” a dictate transgressed specifically by the IDF in Khuza’a.

The IDF’s legal defense of its strikes on protected facilities hinges on Article 19, where the legal protection given to “civilian hospitals” ends if such buildings “are used to commit … acts harmful to the enemy,” with the caveats being that “due warning has been given, naming, in all appropriate cases, a reasonable time limit” and, furthermore, that the presence of injured or debilitated opposition troops and their disabled weapons “shall not be considered to be acts harmful to the enemy.” In a legal report by the Israeli MFA, the IDF justified the aforementioned attacks on medical structures, stating that “on a number of occasions Hamas used medical facilities to endanger IDF forces and the Israeli civilian population.”

This claim was countered multiple times by the UN HRC, starting with the Khuza’a medical facility attack, where an anonymous doctor on duty unequivocally stated that “[n]one of the [fatalities of the attack] were combatants” and that “[t]here was no communication or warnings.” In the bombardment of the Al Najjar Hospital in Rafah that allegedly targeted “senior militants,” the IDF notified doctors to evacuate, but

39 Ibid.
41 YLS, Convention (IV).
43 UN HRC, Detailed Report, 86.
the strafing that “lasted several hours” should have been suspended as it was indiscriminate and not proportional to the alleged target goals, suggesting yet another violation of the need to afford protection to medical facilities.  

These statements, by doctors under fire in different parts of the Gaza Strip, suggest blatant breaches of Article 19, with Israel not only violating the Geneva Convention IV, but also exploiting Article 19 to justify attacks on protected facilities. For example, in the Rafah assaults on ambulances, the UN HRC stated that Israel made no attempt to distinguish between civilian and military vehicles, which violates international humanitarian law.  

Not only must civilian vehicles specifically not be targeted, but, “in case of doubt whether [such] an object … is being used to [instead] make an effective military contribution, it shall be presumed not to be so used” as stated in Additional Protocol I. The UN HRC concludes that, based on the attacks on ambulances in Rafah, the IDF appears to have committed “a deliberate attack against civilians and civilian objects … [that] may amount to a war crime.”

In regards to the attacks on shelters, the IDF claimed the presence of extremist weapons that “rendered these facilities military objectives” and that “military necessity compelled Israel to attack educational facilities,” but never “was the object of an attack an UNRWA school.” The UN HRC stated that while “weaponry was stored in three UNRWA schools … [, n]one of these schools was designated as a shelter.” Furthermore, as mentioned previously, contrary to the IDF’s claims, the UNHRC clearly documented seven attacks on UNRWA schools by Israeli shelling. This failure to admit responsibility for the deaths of civilians and medical personnel in UN documented strikes suggests that Israel viewed its actions as legitimate military endeavors, not patent violations of international humanitarian law.

45 UN HRC, Detailed Report, 98.
46 Ibid., 96.
47 Ibid., 96.
48 Ibid., 97.
50 UN HRC, Detailed Report, 117-8.
Asa Kasher, head of the IDF Personnel Division’s Military Ethics Committee from 1992 to 1994, alarmed the UN HRC by justifying Israel’s shelling of protected facilities. Kasher first states that “no state has or should shoulder as much responsibility for the safety of enemy civilians as it does for its own people” and then writes that “the presence of large numbers of non-combatants in the vicinity of a building … directly involved in terrorist assaults on Israelis [does not] render that building immune to Israeli attack.” Kasher ends by saying that it is “morally unacceptable” for Israeli “conscripts … [to] be[…] placed in greater jeopardy to save the lives of enemy non-combatants who have been repeatedly warned to leave the scene of battle.” Kasher’s terms “enemy civilians” and “enemy non-combatants” obfuscate previously straightforward understandings of war crimes. The UN HRC itself notes ‘that it is important to clarify that the concept of “enemy civilians” does not exist in international law,’ and that “[o]ne of the most elementary principles of international humanitarian law is the obligation to distinguish between combatants and civilians.” Civilians cannot be designated into separate groups, for civilians are just that: civilians.

Thus, the UN HRC’s difficulty in compiling its report lies in this essential dichotomy. While the attacks on clinics, hospitals, ambulances, and UN shelters are evident, Israel justifies these blitzes based on its right to protect Israeli civilians, even at the cost of Palestinian civilians. Morality cannot be easily debated in a court of law, and thus the UN HRC’s accusations of Israel breaking the Geneva Convention IV and Additional Protocol I will be dismissed by the IDF as a false claim as

52 UN HRC, Detailed Report, 103.
54 Ibid.
55 Ibid.
56 UN HRC, Detailed Report, 103.
57 Ibid., 103.
the dead are not doctors, paramedics, or civilians – the dead are instead “enemy civilians” and “enemy non-combatants.”

IV – Legal Consequences of the Israeli Strikes & Similar Violations of International Humanitarian Law

The UN HRC concludes with a summary of potential violations of international humanitarian law by Israel in regards to Operation Protective Edge. Primarily, the actions of the IDF that left 1,462 civilians - including 23 medical personnel - dead, and destroyed ambulances and medical facilities, breaks Geneva Convention IV, with the UN HRC stating that “impunity prevails across the board for violations of international humanitarian law and international human rights law allegedly committed by Israeli forces.” Secondly, “Israeli authorities failed to revise their policies in Gaza”, especially in light of “considerable information regarding the massive degree of death and destruction in Gaza, [which] raises questions about potential violations of international humanitarian law by these officials, which may amount to war crimes.”

In the Geneva Convention IV, Article 146 dictates that states must “enact any legislation necessary to provide effective penal sanctions for persons committing, or ordering to be committed, any of the grave breaches.” Article 147 notes that penal sanctions should come into effect for grave breaches, including “willfully causing great suffering or serious injury to body or health” and “[t]he extensive destruction … of property not justified by military necessity and carried out unlawfully and wantonly.” These contraventions are seen in the blockade and delay of ambulances in Khuza’a and the attacks on medical facilities and ambulances in Khuza’a, Shuja’iya, and Rafah, along with the UNRWA

58 Kasher, “The Ethics of Protective Edge.”
59 UNGA HRC, Report, 6.
60 WHO EMRO, Health Sector Assessment Report, 13.
61 UN HRC, Detailed Report, 181.
62 Ibid., 181.
63 ICRC, Convention (IV).
64 Ibid.
shelter attacks. The breach of “willful killing”\textsuperscript{65} is harder to prove due to a lack of evidence stemming from Israel’s non-cooperation\textsuperscript{66} with the UN HRC and is further evidence of a lack of accountability from either the armed forces or the government.

Article 148 further underlines the importance of the preceding articles by demanding that a state cannot “absolve itself or any other [state] of any liability incurred … in respect of breaches.”\textsuperscript{67} However, since the 1st Intifada in 1987, Israel has repeatedly deflected criminal investigations into civilian killings at the hands of Israeli security forces by classifying these violations of international humanitarian law as “combat activities.”\textsuperscript{68} The same policy is still in effect, thereby giving the IDF carte blanche to continue committing war crimes.\textsuperscript{69} According to the Rome Statute,\textsuperscript{70} the IDF attacks can be viewed as war crimes that violate the Geneva Convention IV, which should lead to the prosecution of the soldiers, commanders and government officials that oversaw the deliberate targeting of civilians, medical personnel, shelters, medical facilities and vehicles.

However, Israel is a not a party to the Rome Statute, and, furthermore, any attempts by the ICC to begin criminal prosecutions of Israeli government officials and soldiers would be stonewalled by the United States, who uses its UN Security Council (UNSC) veto to “[p]rotect[…] Israel from critical resolutions[,] … a central pillar of US Middle East policy.”\textsuperscript{71} The US carries out such actions as it is “fully committed to Israel’s security because it enhances [its] own national

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\textsuperscript{65} Ibid.
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\textsuperscript{66} UN HRC, Detailed Report, 3.
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\textsuperscript{67} ICRC, Convention (IV).
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\textsuperscript{69} UN HRC, Detailed Report.
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\textsuperscript{70} ICC, Rome Statute.
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security.” However, the US sets a dangerous precedent by refusing to acknowledge the war crimes committed by Israel and blocking attempts to bring to light such abuses. In doing so, the United States loses any moral ground, and allows other countries, especially U.S. allies, to commit similar violations with little fear of prosecution. The U.S. has also committed attacks against medical facilities, from the past to the present. During the Vietnam War, a Congressional Senate hearing confirmed that the U.S. conducted bombing raids on Cambodian hospitals. On October 3, 2015, a U.S. AC-130 gunship fired upon a Doctors without Borders hospital in Kunduz, Afghanistan, killing 42 staff and patients. Neither of these incidents led to any prosecutions of the individuals responsible nor the commanders that gave the orders.

The list of war crimes, of violations of international humanitarian law, will only grow longer unless meaningful changes are made to the ICC and the Rome Statute. One effective measure would be to give standing to nongovernmental organizations, such as MSF, to bring cases against states suspected of committing violations. Another effectual act would be to allow the UN General Assembly to pass binding resolutions, unaffected by a UNSC veto, that allow a majority to prosecute a state that has violated international humanitarian laws. A final compelling law that should be passed by the ICC is to allow arms sale and military sanctions against states that have violated international humanitarian laws. As noted by Amnesty International during the Gaza conflict, countries “must suspend all transfers of weapons, munitions and other

76 Ibid.
military equipment and technology to all sides until there is no longer a substantial risk that such items will be used for serious violations of international humanitarian law or serious human rights abuses.”

These necessary legislative acts will almost certainly not pass due to the global hegemony of the United States that will block such laws. While the world’s powers fail to stop the conflicts in Gaza, Yemen, and elsewhere, the victims, in the end, are the same: doctors, surgeons, nurses, medical workers, and civilians.

V – Conclusion

During the IDF’s Operation Protective Edge in the Gaza Strip during the summer of 2014, numerous protected facilities were struck, causing many civilians and medical workers to be killed. The facilities ranged from medical clinics to UN shelters, but all shared the same legal sanctuary under the 1949 Geneva Convention IV and its Additional Protocol I. The IDF justified its attacks as necessary responses to militant fire from the locations, but witnesses interviewed by the UNHRC say that only civilians were the victims of the IDF barrage. The findings of the UNHRC are further strengthened by the dubious language of the IDF ethics manual and by Israel’s history of non-cooperation and impunity in regards to criminal investigations of civilians killed by the IDF and other Israeli security forces. While the Rome Statute and the ICC could potentially demand more accountability through the prosecution of war crimes and by imposing military and arms sale sanctions, the United States’ global influence will continue to impede any hope of protecting the civilians and medical workers – the innocent – trapped on the globe’s battlefields.

Works Cited


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