ADDAMEER
الضمير

Prison Violence

A Gradual Genocide of Palestinian Prisoners

> In the shadows of the prison, I vividly recall my conversation with the female officer regarding Musab, who was physically unwell, unconscious, and teetering between labored breaths and the brink of death. Her reply was devoid of empathy and deeply hurtful: 'Is he still breathing? Inform us when he passes away.[1]

Musab ultimately succumbed, leaving behind unfulfilled aspirations, a silence that echoes injustice, and lives that could have been lived.

This moment highlights the systematic policy of the Israeli occupation to kill prisoners and infringe upon their fundamental rights. Since 7 October 2023, Israeli detention facilities have morphed into arenas of genocide, where severe and systematic violations are inflicted upon Palestinian prisoners. These abuses stem from policies involving physical and psychological torture, intentional medical neglect, starvation, sexual violence, solitary confinement, and the denial of the most basic human rights. Such actions are part of a broader strategy of slow genocide aimed at eroding the lives and dignity of prisoners, often resulting in their deaths within these detention centers. These policies are inextricably linked to the larger context of the genocide being executed by the occupying authorities against the Palestinian people, with Israeli prisons serving as a primary mechanism for sustaining systematic killings and the continuous breach of international law and humanitarian standards.

The operations carried out by the Minister of National Security, Itamar Ben-Gvir, in Israeli prisons have played a significant role in fostering a culture of institutionalized torture within these facilities. The ongoing nature of these operations, combined with political discourse promoting more severe actions against prisoners, has led to the normalization of excessive force and inhumane treatment, which now exists beyond the reach of accountability. Consequently, violence in Israeli prisons has evolved into an institutionalized practice, driven by political narratives and the organizational culture within the security apparatus.

Consequently, the year 2025 marked the declaration of the martyrdom of 32 Palestinian prisoners, followed by the later announcement of three additional martyrs, one of whom was reported as martyred on 9 September 2025, another on 12 February 2026, while the martyrdom of the third was announced on 28 March 2026. From 7 October 2023 to 15 April 2026, the martyrdom of 89 Palestinian prisoners was confirmed, a figure that can be substantiated, representing the highest toll in history and marking this period as the most violent in the history of the prisoner movement since 1967. The cumulative total of martyrs within the prisoner movement in Israeli prisons since 1967 has reached 326. However, the true figure is probably even greater, considering the ongoing practice of enforced disappearance by the Israeli occupation against numerous prisoners from the Gaza Strip, whose fates remain uncertain to this day.[2]

[1] Interview conducted by Addameer with prisoner M. A. on 11 March 2025.
[2] To view the list of martyrs of the prisoner movement from 7 October 2023 to 1 May 2026, see: https://drive.google.com/file/d/10Em5-kMKzoaDckmleEyVlnc66FOp1CuB/view?usp=sharing

For over two years, the occupying authorities have persistently engaged in the crime of enforced disappearance concerning prisoners from the Gaza Strip. They continue to withhold significant information about the detainees and, in certain instances, they disseminate misleading information. In the case of martyr Bilal Talal Salameh, aged 24, who was arrested in April 2024, the occupying army initially asserted that he was held in the Ofer camp. In two subsequent statements, they claimed that he had been released on 11 August 2024. However, it was later disclosed on 23 April 2025, in response to a petition filed by the Center for the Defence of the Individual – HaMoked, that the prisoner had actually died on August 11, which marks his death date rather than his release date, as they had previously asserted.

In a comparable case, prisoner Ali Ashour Ali Al-Batsh, aged 62, was arrested on 23 December 2023 and subsequently transferred to Naqab Prison. Despite suffering from multiple chronic health conditions, he remained in detention. According to testimonies from released prisoners, he was expected to be released on 22 February 2025, but was transferred to the hospital the day prior due to a decline in his health. The Israeli army announced on March 5 that he had been released on February 21. Nevertheless, on March 6, the Palestinian Civil Affairs Authority received confirmation of his death at Soroka Hospital on February 21.

Despite the announcement regarding the deaths of 16 Palestinian prisoners from the Gaza Strip in 2025, the reasons behind their fatalities remain unclear. No autopsies have been performed on any of the deceased Gaza prisoners held in Israeli prisons, and all their remains continue to be retained. In contrast, the Israeli authorities, via the International Committee of the Red Cross, have returned the bodies of 345 martyrs from the Gaza Strip, of which only 97 have been positively identified thus far.[3]

[3] Anadolu Ajansı. "Israel returns remains of 15 more Gazans under ceasefire deal, Health Ministry." 15 November 2025. https://tinyurl.com/39zss43y

Preliminary examinations of the remains indicate evident signs that a significant number of them endured extreme and intentional torture and maltreatment. The findings also imply that some individuals were executed following their detention. The bodies exhibited evidence of hanging, with ropes around their necks, alongside injuries inflicted by gunfire at close range. Additional evidence of blindfolding was discovered, and the hands and feet were restrained with zip ties. Some remains were located crushed beneath tank tracks, while others displayed signs of severe physical abuse, including fractures, burns, and deep lacerations. This underscores the severity of the brutality and serious violations experienced by Palestinian prisoners.[4]

The occupying authorities persist in retaining a minimum of 777 martyrs, which includes 97 martyrs associated with the prisoner movement, 77 minors under the age of 18, and 10 female martyrs, alongside numerous martyrs from the Gaza Strip whose identities remain undisclosed. As a result, on 1 February 2026, the Jerusalem Legal Aid and Human Rights Center (JLAC) and the National Campaign for the Retrieval of the Bodies of Palestinian and Arab War Victims filed an urgent petition with the Supreme Court of Israel, seeking the immediate and unconditional release of all Palestinian martyrs' remains held in numbered graves and morgues. The Court granted the Public Prosecution until March 16 to submit its response to the petition.[5]

International humanitarian law, particularly the provisions outlined in the Geneva Conventions and their First Additional Protocol, mandates that the remains of the deceased be treated with respect, their identities recorded, their families informed, and efforts made to repatriate them whenever feasible, while forbidding any violation of their dignity or their exploitation as a means of coercion. Furthermore, the International Covenant on Civil and Political Rights safeguards human dignity and family life, which can be adversely affected by the unlawful detention of bodies. In situations of armed conflict, the arbitrary detention or degrading treatment of remains may be classified as a war crime under the Rome Statute of the International Criminal Court if it is associated with serious breaches of international law.

Furthermore, the deliberate targeting of prisoners, their extrajudicial killings, and the subsequent withholding of their remains represent a systematic policy enacted by the occupying forces. This is underscored by the Minister of National Security's repeated and public calls for the execution of prisoners, alongside his efforts to introduce legislation that would legalize such actions. Such behavior indicates criminal intent and holds those accountable internationally liable for serious offenses that could be classified as genocide.

[4] Al Jazeera. "Interview with Dr. Munir Al-Barsh, Director General of the Ministry of Health in Gaza." https://www.youtube.com/watch?v=tVKrHocZANs
[5] JLAC. "Petition for the immediate return of the bodies of Palestinian martyrs." https://tinyurl.com/29jncdey

Prisoners Who Died in 2025:
A Sign of Increasing Institutional Violence Within the Prison System

In the year 2025, there was a persistent rise in the number of prisoners who were martyred in Israeli prisons and detention centers. One of the initial prisoners whose death was reported this year was Mutaz Abu Znaid, a 35-year-old administrative detainee from Hebron, who had been arrested on 27 June 2023. Abu Znaid was a former prisoner who had faced arrest five times, primarily under administrative detention, during which he engaged in hunger strikes to protest his detention. His death was reported on 12 January 2025, following a sudden and severe decline in his health. The administration of Rimon Prison, where he was incarcerated, intentionally postponed his transfer to a medical facility and exhibited systematic medical negligence towards him until he lapsed into a coma. He was ultimately transferred to Soroka Hospital on 6 January 2025, according to a released prisoner.[6] Following his death, the attorney representing the family filed a request for an autopsy to be performed with a physician from Physicians for Human Rights (PHR) present as a family representative; however, this request was denied.[7]

On 19 January 2025, the announcement was made regarding the death of Mohammad Jabr, a 22-year-old prisoner from Bethlehem, just one day following his passing on January 18. He had been placed under administrative detention since 11 December 2023 and was incarcerated in Naqab Prison. Jabr endured a severe gunshot wound to the abdomen, necessitating multiple surgical procedures over the year and a half leading up to his death. These procedures involved the resection of a portion of his intestines, and he required continuous medical supervision. Despite the gravity of his medical condition, his family and legal representative were unable to acquire any information concerning the circumstances surrounding his death.[8]

Documentation from PHR indicates that Naqab Prison ranks among the facilities where Palestinian prisoners have most frequently been martyred, with the prison administration failing to implement any substantial measures to enhance health or medical conditions. As of 30 August 2025, a total of 14 prisoners had died within this prison, excluding those who died later in external hospitals after being transferred.[9]

In the same context, following the passing of Jabr, the death of prisoner Ali al-Batsh was reported at Soroka Hospital, after he had been held in Naqab Prison. Additionally, the death of prisoner Mohammad al-Astal, aged 45, from the Gaza Strip, was reported on 2 May 2025, mere hours after his transfer from this prison to a medical facility.

[6] The Commission of Detainees and Ex-Detainees Affairs. "The Civil Affairs Authority informs the Commission and the Prisoner's Club of the death of administrative detainee Mutaz Abu Znaid at Soroka Hospital." 13 January 2025. https://tinyurl.com/yc64fhkz
[7] PHR. "Appendix to the report on the deaths of Palestinians in Israeli custody." November 2025, p. 16.
[8] The Commission. "The Commission and the Prisoner's Club: The martyrdom of the injured detainee, Mohammad Jabr, from Dheisheh Camp." 19 January 2025. https://tinyurl.com/2ysdby74
[9] PHR. "Deaths of Palestinians in Israeli custody." November 2025, p. 12.

According to information obtained by PHR, al-Astal's transfer for medical treatment was significantly delayed, despite his experiencing severe abdominal pain and constipation that persisted for 12 days without being taken to the hospital. He ultimately succumbed to septic shock[10] and acute intra-abdominal hypertension caused by a colonic obstruction, accompanied by extensive necrosis of internal organs. These findings unequivocally demonstrate a critical and hazardous delay in the provision of essential medical care.[11]

Subsequently, it was reported that Muhyiddin Najm, a 60-year-old prisoner from Jenin, died on 4 May 2025 at Soroka Hospital. He had been in administrative detention at Naqab Prison since 8 August 2023. Najm was afflicted with multiple chronic illnesses. A lawyer managed to visit him on March 10, shortly prior to his death, and disclosed a notable decline in his health. He had lost the ability to move independently and could only walk with considerable difficulty. Following several medical interventions, he was transferred for examinations; however, he was not apprised of the specifics regarding his health condition at that time. Consequently, the occupying forces perpetrated a compounded offense against him by prolonging his administrative detention for over two years while denying him necessary treatment and healthcare. It is important to highlight that he had spent approximately 19 years in Israeli prisons, illustrating a persistent pattern of targeting ill prisoners without providing them with adequate medical attention.

The announcement of the death of Raed Asa’sa, a 57-year-old prisoner from Tulkarm, was made just 27 days following his arrest and detention in this facility. He was transferred to an Israeli hospital on 9 June 2025, prior to his death. Furthermore, on June 30, the death of Luai Nasrallah, a 22-year-old prisoner from Jenin, was reported. He was an administrative detainee and had been incarcerated in Naqab Prison since his arrest on 26 March 2024. According to a report by PHR, Nasrallah died at Soroka Hospital after being transferred from prison under ambiguous circumstances. Despite the family's lawyer submitting a formal request for an autopsy to be conducted in the presence of a doctor designated by the family, the autopsy was carried out without the family's or their lawyer's knowledge, and the results have yet to be disclosed. This represents a blatant infringement of legal and humanitarian norms.[12]

These consecutive instances illustrate a consistent trend of medical neglect, intentional postponements in treatment, and a deficiency in transparency within Naqab Prison, especially regarding ailing prisoners and those in administrative detention. The evidence further indicates the direct accountability of the prison administration for these fatalities, considering the lack of independent inquiries, the refusal to provide information to families, and the ongoing practice of impunity.

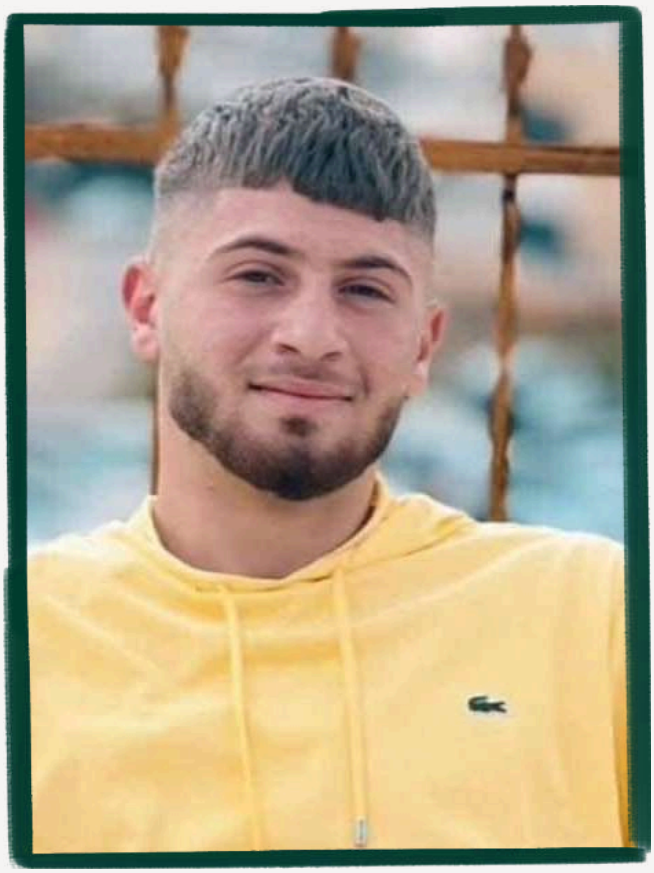
[10] A critical and pressing medical condition arises from an excessive and unregulated immune response to an infection (commonly bacterial), resulting in a significant decrease in blood pressure and the failure of essential organs, necessitating prompt medical attention.
[11] PHR. "Appendix to the report on the deaths of Palestinians in Israeli custody." November 2025, p. 11-12.
[12] Ibid. p. 12

The Naqab Prison is not an isolated or unique instance; instead, it is part of the broader Israeli network of prisons and detention facilities, which embodies a systematic policy that has resulted in the deaths of numerous prisoners within these centers. Consequently, the events that transpired in the Naqab Prison are fundamentally similar to those in other facilities, where a significant number of prisoners have died due to intentional medical neglect, mistreatment, and breaches of established international standards governing the treatment of detainees.

In a blatant reinforcement of the culture of impunity, autopsies were not conducted on all the deceased prisoners from 2025; only a select few underwent such examinations. This situation indicates a lack of sincere intent to investigate the causes of death, denying families their right to ascertain the truth and hindering any possible legal accountability concerning the conditions of detention, medical negligence, or the intentional killing of inmates.

This paper will analyze the cases of martyrs Walid Ahmad, Mohammad Ghawadra, Musab Haniyeh, and Musab Adili. It will seek to ascertain the reasons behind their deaths, utilizing autopsy reports and testimonies from fellow inmates.

Walid Ahmad: The First Child Martyr in the History of the Palestinian Prisoner Movement



In the year 2025, the first Palestinian child was martyred in Israeli occupation prisons since 1967. He died on 22 March 2025 at the age of 17 in Megiddo Prison. He is among seven other prisoners who have died in the same facility due to a series of offenses perpetrated by the Israel Prison Service (IPS), particularly torture and starvation. Ahmad was arrested on 30 September 2024 and was still undergoing trial at that time. As per the initial autopsy report and observations from the Megiddo Prison clinic, he was taken to the clinic on two occasions, in December 2024 and February 2025, for the treatment of scabies. On December 30, He reported a head injury and stated during that period that he was suffering from inadequate food provision and was not receiving sufficient quantities to meet his basic nutritional needs.

According to his medical records, Ahmad lost consciousness unexpectedly on March 22 at 7:48 a.m. Paramedics observed a decline in his vital signs, prompting his immediate transfer to the clinic, where resuscitation efforts, which included electric shocks and adrenaline administration, were unsuccessful. He was declared dead at 9:10 a.m. An autopsy was conducted on March 27. The preliminary autopsy report indicated that both external and internal examinations revealed significant emaciation, characterized by acute temporal wasting, a distended abdomen, and a nearly complete lack of muscle mass and subcutaneous fat in the trunk and limbs. Additionally, numerous skin rash patches, resulting from a scabies infection, were noted, particularly on the lower extremities and in the genital area.

During the autopsy, findings included air emphysema and dense air masses extending to the pericardium, neck, chest wall, abdomen, and intestines, alongside severe atrophy, a sunken abdomen, and a total absence of muscle mass and subcutaneous fat in the upper body and limbs. Multiple rash patches were also documented in various body regions, especially the lower extremities. The autopsy report concludes that starvation was the primary cause of death, compounded by dehydration due to inadequate water intake, fluid loss from diarrhea resulting from colitis, and inflammation of the mid-chest tissues due to air emphysema—factors that collectively contributed to his death.[13]

[13] PHR. "The autopsy report of the martyr Walid Ahmad." Unpublished.

In the aftermath of Ahmad's passing, the IPS declared the formation of an investigative team tasked with scrutinizing the events leading to his death. Nevertheless, the Hadera occupation court opted to terminate the investigation on December 3, asserting that all possible avenues had been explored and maintaining that no direct crime had been perpetrated against the martyr, as indicated by the autopsy findings and subsequent evaluations from the Abu Kabir Forensic Institute. This conclusion was reached despite corroborating reports that validated the claims made in the initial accounts and testimonies regarding the impacts of starvation and the decline of Ahmad's health prior to his death.[14]

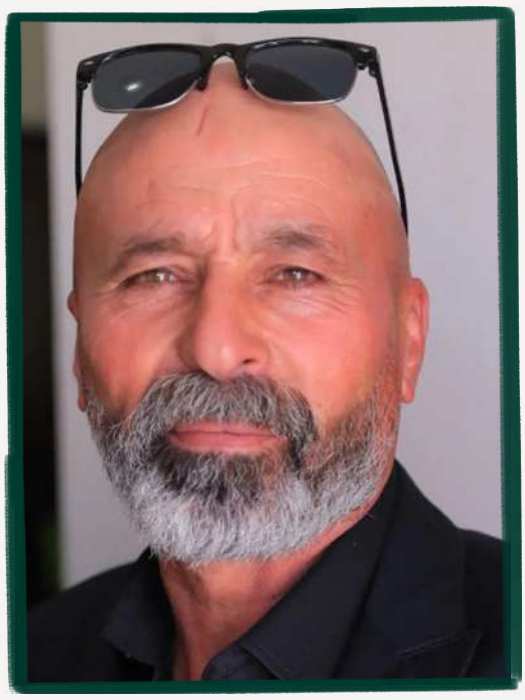
The decision to close the investigation into Ahmad's death underscores the reality that the occupation's judicial system fails to pursue justice. Instead, it appears to be complicit in the ongoing violations against Palestinian prisoners by shutting down investigation files, disregarding evidence, and denying victims and their families the opportunity to uncover the truth and seek accountability from the offenders. In light of the rising number of martyrs since 7 October 2023 and the revelation of multiple instances of torture, it is noteworthy that none of the alleged investigations have produced any significant outcomes since 2023.

Ahmad's death signifies a calculated crime embedded within the gradual genocide policies enforced by the occupying authorities in Israeli detention facilities. This event is not an isolated or natural occurrence; instead, it stems from a series of oppressive measures implemented in these facilities, such as starvation and intentional medical neglect, which together contribute to the recurrent fatalities among prisoners.

In addition to the martyr Ahmad, another prisoner, Khaled Abdullah, aged 40 from the Jenin refugee camp, also died in the same prison on 23 February 2025. He was an administrative detainee who had been taken into custody on 9 November 2023. Furthermore, prisoner Samir al-Rifai, aged 53 from Jenin, had his death reported on 17 July 2025. He died within Megiddo Prison, merely a week following his arrest. Al-Rifai had been suffering from multiple chronic conditions prior to his detention and required consistent daily medical care. Nevertheless, his death shortly after being imprisoned underscores the medical negligence he faced and the denial of essential healthcare during his time in custody.

[14] The Commission. "The Israeli occupation court has resolved to terminate the investigation into the death of the child prisoner Walid Ahmad within Megiddo Prison." 17 December 2025. https://tinyurl.com/2ky733wj

Martyr Prisoner Mohammad Ghawadra



Martyr Mohammad Ghawadra, aged 63 and hailing from Jenin, was arrested on 6 August 2024, and has been held in Ganot Prison – previously referred to as Nafha and Rimon Prisons – until his death was reported on 2 November 2025. According to the autopsy findings and existing medical records, the cause of death was identified as Sepsis, which is blood poisoning stemming from a widespread and uncontrolled infection, linked to purulent arthritis affecting both sternoclavicular joints, in addition to osteomyelitis, with a potential extension of the infection to his left shoulder.[15]

Records from the prison clinic reveal that Ghawadra endured chronic health issues, such as dyslipidemia and diabetes, and depended on inadequate or insufficient medical attention within the prison to manage his health status. Throughout his incarceration, he encountered multiple medical complications:

1-Shoulder pain (location unspecified): Commenced on 4 September 2025. An X-ray performed on October 22 revealed a fracture of the superior trochanteric process of the humerus. Treatment was restricted to painkillers alone, with no surgical intervention or thorough joint assessment conducted.

2-Skin abscess: Documented on September 16, with no records of treatment or required investigations to assess the severity of the infection.

3-Scabies: Reported on September 16, without indication of the infection's location or the treatment administered, highlighting a significant deficiency in medical follow-up.

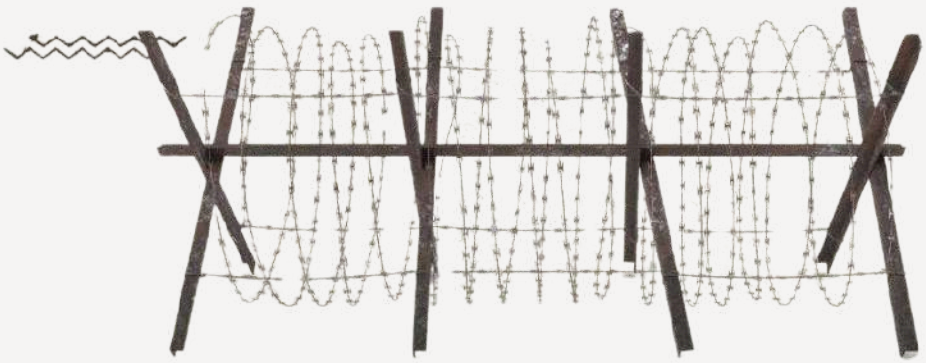
On the morning of November 2, the martyr's heart ceased functioning at 11:06 a.m. A thorough cardiopulmonary resuscitation was commenced, which included chest compressions, intravenous intubation, adrenaline administration, and intubation. Despite all resuscitative efforts, his death was declared at 11:58 a.m

[15] PHR. "The autopsy report of the martyr Mohammad Ghawadra." Unpublished.

This severe infection likely arose due to the dire health conditions prevalent within the prison, which included unstable blood sugar levels, malnutrition, overall weakness, and harsh detention circumstances—elements that render a prisoner susceptible to life-threatening systemic infections. Two months prior to his death, the prison physician noted a skin abscess and scabies, suggesting that the infection initially manifested locally before progressively affecting his joints and bones.

The death of martyr Ghawadra highlights significant medical negligence by the IPS and the medical personnel tasked with his treatment. He was not provided with the essential care required to address his chronic conditions, such as diabetes. His skin and joint infections (including abscess, scabies, arthritis, and bone inflammation) were not adequately addressed, resulting in the onset of sepsis (blood poisoning) and its subsequent spread to his joints, bones, and shoulder. The existence of a chronic heart condition, which was neither recorded nor treated, further intensified the neglect he experienced. These cumulative factors ultimately led to his death; however, prompt medical intervention could have preserved his life.

As a result, this egregious negligence is inextricably linked to a systematic policy of the Israeli occupation within detention facilities, a policy that embodies a form of genocide intended to gradually eliminate prisoners both physically and psychologically. The direct neglect of medical care represents a breach of both international and national laws regarding prisoners' rights to healthcare, rendering the prison administration and medical personnel legally accountable for the fatalities, as these are direct consequences of negligence and the inability to deliver essential medical treatment.



Martyr Prisoner Musab Haniyeh

The death of prisoner Musab Haniyeh, a 35-year-old from the Gaza Strip, was reported on 24 February 2025 in Israeli prisons, following his death on January 5. Haniyeh was arrested in Hamad City, Khan Younis, on 3 March 2024, and his family asserts that he had no prior health issues before his detention.

In a serious breach of international law, no autopsy was performed on Haniyeh's remains, nor was an autopsy report generated. This lack of examination hindered the determination of the precise causes of his death. Nevertheless, testimonies from fellow prisoners who were detained alongside him indicate that he endured harsh field interrogations during his arrest, coupled with severe physical abuse and medical neglect throughout his ten-month imprisonment. Following his arrest, he was moved to Sde Teiman Detention Camp. A fellow prisoner reported that he experienced intense stomach issues, leading to continuous vomiting, and that he lost a considerable amount of weight.[16] Subsequently, he was transferred to Ofer Prison.

Prisoner M. A. recounted: "Musab Haniyeh was detained with me in the same section of Ofer Prison, known as the 'Hell Section.' Musab faced brutal field interrogations during his arrest in Hamad City. He was subjected to unethical and inhumane interrogation techniques, in addition to severe beatings. At Sde Teiman, he was beaten severely. He lost nearly three-quarters of his body weight; he initially weighed around 150 kg and was reduced to approximately 60 kg or less. He became too weak to walk, and other inmates had to assist him to the bathroom. When the guards entered his cell, they would take the other inmates to solitary confinement, but they would enter his cell, search him while he lay on the bed, beat him, and then leave. They were aware of his illness. We could hear his cries. On one occasion, after a prolonged period, a doctor finally came to examine him. He was being cared for by a fellow doctor who was also a prisoner from Gaza. This prisoner informed the doctor that Musab required ointment for hemorrhoids and that there might be an issue with his blood. The doctor inquired, "Is the sick prisoner breathing?" The prisoner confirmed this, and the doctor responded sarcastically, "Well, then let us know when he dies."[17]

[16] Interview conducted by Addameer with prisoner Kh. A. on 17 March 2025.
[17] Interview conducted by Addameer with prisoner M. A. on 11 March 2025.

In the account provided by one of the prisoners who was present with Musab on the day of his martyrdom, prisoner Kh. A. recounts: "Musab was martyred on 5 January 2025, and the events unfolded as follows: Following the morning roll call, I was instructed to exit the room to distribute food to the other prisoners. Before I left, I glanced at Musab to greet him, and I noticed that he was staring at the ceiling with his eyes wide open, completely still, except for the movement of his throat. I attempted to engage him in conversation, but he did not respond. Even his eyes remained unblinking for an extended period. The other inmates and I sensed that he was battling for his life. I promptly exited to distribute breakfast and notified the officer regarding Musab's condition. Upon receiving my report, they observed him through the surveillance cameras and the room window. After seeing him, they took immediate action. They instructed me to return to the room and cease the food distribution. They requested that the inmates and I assist in transferring him to the isolation room within the section.

I carried Musab and transferred him. On the way to the isolation room, I began conversing with him, encouraging him to recite the shahada. Subsequently, I placed him in the isolation room, where the doctors promptly arrived with medical and resuscitation equipment. They remained with him throughout the entire process. The doctor frequently approached me, inquiring about the last time I had spoken to Musab and the circumstances surrounding his condition. This physician, who communicated with me in English, was dressed in military attire. I informed him that the last conversation I had with Musab occurred at 10:00 p.m., just before I went to bed. In the days leading up to this, Musab had not experienced vomiting; however, his most significant issue was his inability to stand unaided, necessitating assistance to walk, use the bathroom, and even to remove his clothing. Despite his severe health issues, he was not administered any medication, nor was he admitted to the hospital. Tragically, Musab passed away in their presence while they attempted to resuscitate him. Following this, they placed him in a zip-top bag and removed him from the section in front of us."[18]

Despite the absence of an autopsy on the body of the martyr Haniyeh, the evidence at hand unmistakably indicates a multifaceted crime characterized by severe physical abuse and intentional medical neglect. Witness accounts suggest a clear intent to commit a crime, as the medical personnel intentionally withheld treatment from him, even in his dire state, allowing him to fight for his life for an extended duration, only to intervene when it was too late, ultimately limiting their actions to the handling of his deceased body.[19]

[18] Interview conducted by Addameer with prisoner Kh. A. on 17 March 2025.
[19] For additional details regarding this camp, please refer to the Ofer Camp document published by Addameer at: https://addameer.ps/ar/media/5496

Martyr Prisoner Musab Adili

On Palestinian Prisoner's Day, 17 April 2025, the announcement was made regarding the death of prisoner Musab Adili, a 20-year-old from Nablus. Adili had been detained since 22 March 2024 and died on April 16 at Soroka Hospital. In the aftermath of his death, the family, through their legal representative, sought to have an autopsy performed with the presence of a doctor of their choosing. However, they learned that the [Israeli] court had ordered the autopsy without notifying the family and without allowing them the chance to send their own physician to oversee the procedure. This situation hindered the family and their attorney from acquiring the autopsy report.[20]

Addameer has acquired a documented account from a prisoner who was present with Adili in the time leading up to his death. The prisoner, referred to as B. F., reported that Adili was afflicted with an amoebiasis infection, which he had contracted while in Megiddo Prison, prior to his transfer to Naqab Prison.[21] The testimony reveals that upon his arrival at Naqab Prison, Adili was violently assaulted by the Keter Unit. His medical condition was ignored, and he endured beatings with batons, punches, and kicks, in addition to facing insults, humiliation, and verbal mistreatment.

These attacks took place in a location known as Al-Amtana, an area lacking surveillance camera, which heightens concerns regarding a possible intentional effort to obscure these abuses. The prisoner noted that Adili, along with 11 other inmates, exhibited similar symptoms without receiving any medical attention, enduring extremely inadequate detention conditions. The cell had only one bathroom, and there were no clean clothes or even the most fundamental necessities for hygiene and humane living.

Prisoner B. F. stated that during the roughly 30 days he was detained alongside Adili, the prisoners consistently urged the section administration to provide a doctor or nurse for Adili and other ill prisoners; however, the guards responded to their appeals with ridicule and scorn. Approximately 30 days after Adili's transfer to Naqab Prison, he was removed from the section in a critical state, nearly fainting. The prisoners transported him to the administration building's entrance to seek medical attention following an intentionally extended delay. The prisoner affirmed that Adili's condition at that moment was exceedingly grave, and he was uncertain whether Adili was actually taken to the clinic or received any genuine medical care.

[20] PHR. "Appendix to the report on the deaths of Palestinians in Israeli custody." November 2025, p. 11.
[21] Interview conducted by Addameer with prisoner B. F. on 27 March 2025.

B. F. recounted that on April 17, following his release from incarceration, he learned of Adili's death within Naqab Prison. This news profoundly shocked him, particularly as Adili had been able to walk just days prior to his passing. He remarked that Adili was afflicted with boils due to scabies, in addition to suffering from amoebiasis, and that his mental health had significantly declined. In the final five days before his release from the section, a nurse attended to him only two or three times, without any awareness of the specifics of the treatment or medications he received, especially since the witness had been moved to a different room during that time.

In the limited instances where the immediate causes of prisoners' deaths were determined, it became evident that torture and associated severe violations, along with medical malpractice such as the intentional denial or improper administration of treatment, were the primary factors. These two categories of violations will be examined in detail in the following sections.

Torture and Inhuman Treatment

The use of torture in Israeli prisons and detention centers represents one of the most significant mechanisms of extrajudicial killing. This practice is not merely an isolated incident; it is an integral part of a colonial framework characterized by systematic control and oppression. Since 7 October 2023, there has been a troubling increase in torture practices, with the daily conditions in these facilities becoming forms of torture themselves. This situation encompasses widespread and systematic repression, including search operations during which prisoners endure severe beatings, kicking, and the application of various implements such as batons and rifle stocks. Furthermore, they face assaults by dogs, intentional starvation, systematic humiliation, solitary confinement, medical neglect, and other actions that constitute torture and cruel, inhuman, and degrading treatment.

As of October 7, at least 89 Palestinians have lost their lives in Israeli prisons. While the exact causes of these deaths remain obscured due to the intentional policy of secrecy and concealment enforced by the occupying authorities, existing evidence strongly suggests that torture played a significant role in these fatalities.

Despite the unequivocal ban on torture as stipulated by international law, it has evolved into a systematic policy that surpasses its conventional boundaries and manifests in intricate and ongoing forms. This policy is applicable to all prisons and detention facilities, affecting every prisoner irrespective of their age or legal standing. Torture has transitioned into a standard practice within prisons, rather than being an isolated occurrence, thereby highlighting its institutionalized and organized character.

Moreover, various governmental bodies have conspired to reinforce this policy. The legislative branch has played a role in formulating and enacting laws that offer legal justification for torture and the resulting impunity. In 1999, the Supreme Court established a legal loophole that permitted the justification of actions tantamount to torture under the pretext of necessity in scenarios where there was a perceived 'imminent and genuine threat' to individuals' lives—commonly referred to as a 'ticking time bomb' scenario.[22] This loophole was extensively misused, including the failure to record interrogation sessions of Palestinian detainees categorized as security threats. Subsequently, the state of emergency was declared to implement laws that curtailed detainees' rights to consult with their legal representatives for prolonged durations and obstructed visits from the Red Cross.

Similarly, the judiciary assumed a supplementary role by avoiding accountability, effectively granting immunity to those who committed crimes against prisoners, and prolonging the detention of individuals, especially those from the Gaza Strip, for lengthy durations without affording them any guarantees of a fair trial or the chance to mount a defense. This was further exacerbated by a significant rise in the practice of arbitrary and indefinite detention affecting thousands of prisoners in both the West Bank and Gaza, as reflected in the policies of administrative detention and the Unlawful Combatant Law. Such institutional complicity has resulted in the normalization of torture as a systematic practice, bestowing upon it a formal legitimacy that starkly contradicts the tenets of international humanitarian law and international human rights law.

Torture as a Method of Genocide

While torture is not a recent phenomenon, as of 7 October 2023, it has assumed a more perilous nature; it has evolved into a pervasive and systematic policy, constituting a serious violation of international law. Under Article 2 of the 1948 Convention on the Prevention and Punishment of the Crime of Genocide, as well as Article 6 of the Rome Statute of the International Criminal Court, genocide means any of the following acts committed with the intent to destroy, in whole or in part, a national, ethnic, racial, or religious group, as such:

(a) Killing members of the group;
(b) Causing serious bodily or mental harm to members of the group;
(c) Deliberately inflicting on the group conditions of life calculated to bring about its physical destruction in whole or in part

[22] Addameer. "Cell 26 – A Study on the Torture of Detainees in the Interrogation Facilities of the Israeli Occupation." July 9, 2021 https://www.addameer.ps/media/4821p. 39.

Consequently, the torture endured by Palestinians in Israeli prisons, along with the associated severe physical and psychological maltreatment, denial of medical care, and exposure to harsh and degrading detention conditions, constitutes conduct that—when specific intent is established—represents one of the fundamental material components of the crime of genocide. Furthermore, these actions qualify as war crimes and crimes against humanity, in accordance with international law principles.

Evidence of specific intent, the defining mental component of the crime of genocide, is evident in the public declarations made by various Israeli officials, particularly the Minister of National Security of the occupying state, Itamar Ben-Gvir, who has repeatedly advocated for the execution of prisoners. Such declarations, when combined with the physical actions carried out on the ground, provide substantial evidence of the specific intent to cause total or partial destruction of the targeted group. Therefore, this official rhetoric, when interpreted within the framework of systematic violations, acts of torture, and inhumane treatment, cannot be dismissed as mere political rhetoric. Instead, it serves as additional evidence of specific criminal intent, thereby reinforcing individual criminal accountability under international criminal law.

It can thus be claimed that the Israeli occupation utilizes torture in a manner that aligns with the definition of genocide. On one side, torture is implemented in detention centers as part of a larger system of actions that amount to genocide, designed to cause significant harm and systematic anguish to detainees. Conversely, actions that are classified as genocide, in relation to the effort to annihilate Palestinians as a collective, entail the intentional and extensive imposition of shared suffering. Within this context, the act of dehumanizing the victim converts torture into a means of exclusion from the human community, ultimately resulting in the effective obliteration of the individual's existence.[23]

Systematic Torture at All Stages of Detention

The use of torture in Israeli prisons and detention facilities has manifested in various ways, correlating with the duration of detention and encompassing all phases of the detention process, from the initial arrest to the conditions of confinement, interrogation, imprisonment, and ongoing transfers, culminating at the point of release. It is crucial to note that no detainee has been spared from such treatment.

In the initial arrest stage, individuals experienced extreme forms of torture, which included field interrogations and severe beatings across their bodies. This often led to fractured ribs and significant physical harm. These practices involved assaults on personal property, the confiscation and destruction of belongings, attacks on family members, and, in certain instances, the deployment of live ammunition, resulting in direct injuries. Moreover, detainees faced deprivation of food, water, sleep, and access to sanitation facilities.

[23] Francesca Albanese. "Torture and Genocide: Report of the Special Rapporteur on the situation of human rights in the Palestinian territories occupied since 1967." United Nations Human Rights Council, 23 March 2026, par. 48. https://tinyurl.com/8cwskfwh.

In this regard, prisoner M. W., who was arrested at his residence in the Zeitoun neighborhood of Gaza City, reports that he endured a violent field interrogation, which involved beatings on a pre-existing injury. He stated:

"Initially, we were blindfolded and restrained with zip ties behind our backs. We were made to sit in an empty lot adjacent to our residence. During this period, they inscribed the letter (o) or the numeral zero on our backs, leaving us unaware of its significance. After five hours, we were moved to a house designated as a military base, where we underwent interrogation in the field. This interrogation lasted approximately one and a half hours. The interrogator identified himself as Captain Rami, but I later discovered his true name was Daniel when one of the soldiers addressed him. He possessed blue eyes, fair skin, and a mole beneath his mustache. The physical assaults persisted throughout the field interrogation, targeting my face, back, and head with various implements: sticks, slaps, and kicks. These beatings were administered by the soldiers rather than the interrogator.

I had a pre-existing minor wound on my right leg. Upon noticing this injury, one soldier began to apply pressure to my leg with his hand, causing me significant pain. After about five hours, we were transported via an armored personnel carrier to a location across the border. We remained there for an entire night, surrounded by tents and an army camp. We slept in one of the tents, each provided with a blanket that was damp with water. At regular intervals, a soldier would come and douse us with water, despite the frigid temperatures, as it was the middle of winter. The following morning, we were transported by a bus accommodating 50 passengers, which was filled with detainees upon arrival. They placed us on the bus with our hands bound and our heads lowered. Throughout the journey, anyone who moved was met with blows to the head and back."[24]

[24] Interview conducted by Addameer with prisoner M. W. on 9 February 2025.

Prisoner A. S. corroborates the preceding account:

"Upon my arrest, they escorted us individually to an interrogation chamber. Once inside, I was compelled to assume a squatting position like a frog against the wall, mimicking a seated posture without an actual chair. Each time I collapsed, they insisted I sit upright again. This ordeal persisted for fifteen minutes. Subsequently, an interrogator entered and commenced questioning me. When I asserted my lack of involvement in any of the activities, he forcefully pushed me to the ground and stomped on my chest with his boot. I suffer from asthma. In that instant, I lost consciousness. Following this, I was transported to a yard adjacent to the checkpoint. There, they brought a ball and began to play around me, striking me in the face with it. My nose began to bleed. My eyes were covered, preventing me from seeing how many individuals were present. My face became bloodied from the impacts of the ball. Eventually, a civilian bus arrived and transported me to the barracks located on the opposite side of the border. Naturally, throughout the journey, I endured beatings and verbal abuse, was struck with the butt of a rifle, and subjected to electric shocks from a stun gun. I experienced electrocution approximately twice."[25]

In the subsequent phase, upon their arrival at the detention center, the detainees underwent what was referred to as "the honoring ceremony," during which they faced assaults from the transport units. Prisoner H. A. recounted:

"Fourteen days post-arrest, I was moved to Naqab Prison via prison buses operated by a unit known as 'Nahshon.' We reached a location termed 'the doghouse' situated in front of Naqab Prison. This area resembled a cage containing dog kennels, surrounded by metal mesh on all sides. There was a single dog equipped with a metal muzzle. It lunged at us and struck us with its muzzle, inflicting painful blows. It hit me multiple times. After a brief period, the Nahshon unit arrived and escorted us into the prison. Upon entry, they conducted what they referred to as the 'honoring ceremony,' with the guards explicitly stating, 'This is an honoring ceremony for you.' Subsequently, they assaulted us with batons, kicks, and punches for approximately ten minutes. One soldier restrained me while another forcefully kicked me in the chest with his boot. Following that, I experienced a sensation of suffocation for several seconds."[26]

In a similar vein, prisoner A. S. reported: "After roughly 94 days, I was transferred to Ofer Prison. The transfer experience was extremely distressing. I was transported alongside about 40 other prisoners. The bus was overcrowded with soldiers wielding stun guns and batons. I developed a spinal issue due to the beatings I endured on my back from the batons. The assaults were vicious. We were seated on the bus with our backs hunched forward. They also employed the stun gun, shocking us multiple times. Upon our arrival at Ofer Prison, after disembarking from the bus, they positioned us against the wall, forced our legs apart, and kicked us in the genital area. Subsequently, they ordered us to lie on the ground and commenced beating us with their boots."[27]

[25] Interview conducted by Addameer with prisoner A. S. on 4 June 2024.
[26] Interview conducted by Addameer with prisoner H. A. on 17 December 2025.
[27] Interview conducted by Addameer with prisoner A. S. on 4 June 2024.

The occupying authorities have transformed the everyday existence within prisons into a methodical instrument of torture, employing daily beatings, ongoing repression, starvation tactics, intentional medical neglect, and sexual violence, among other abuses. This has resulted in a significant decline in the health and psychological well-being of the prisoners. Prisoner B. N. recounted his experience during a 30-day detention at Sde Teiman Detention Camp prior to his transfer to another facility:

"During my detention at Sde Teiman, I was subjected to blindfolding, handcuffing, and compelled to kneel. Access to bathrooms and water was not consistently provided. The meals consisted of stale bread accompanied by minimal amounts of jam or tuna. Daily, we faced suppression, beatings, and electric shocks. Dogs were utilized to instill fear, and we were punished by being forced to stand for extended durations. No medical care or medication was administered. I observed ten instances of such suppression. I continue to endure health issues stemming from the beatings, prolonged periods of sitting, electric shocks, and having cigarettes extinguished on my skin. I experience nerve inflammation in my feet. During the transfer from Sde Teiman to Ofer, I was repeatedly beaten by the military, in addition to being struck with metal implements and batons. I was electrocuted around five times, and cigarettes were extinguished on my hand three times. My detention in Ofer lasted for three months.

The conditions of detention at the facility were extremely poor. During the day, our mattresses were confiscated, and we were not provided with any health or cleaning supplies, such as tissues and soap. The food served was of very low quality, consisting of spoiled cucumbers and tomatoes, with no fruit available. I experienced a significant weight loss, dropping from 85 to 64 kilograms. When I requested treatment or painkillers, my pleas were denied. The pain in my limbs prevented me from sleeping. Repression occurred once or twice a week, during which we endured beatings and searches by the soldiers, in addition to being subjected to gas sprays or being ordered to lie on our stomachs for extended periods. This led to my suffering from gastroenteritis. Furthermore, I was not given any clothing. I had to wear the same trousers from Sde Teiman until my release from Ofer, which resulted in many prisoners developing skin rashes."[28]

The severe conditions faced by prisoner B. N. in Sde Teiman were not unique or confined to a particular prison; instead, they represented a widespread reality that impacted all prisons universally. This situation was part of a systematic approach that utilized torture, extermination, and slow death, resulting in a significant decline in both the physical and mental health of the prisoners. Prisoner A. H. recounted his experiences in Gilboa Prison, which closely mirrored those of prisoner B. N. in Sde Teiman. He remarked,

[28] Interview conducted by Addameer with prisoner B. N. on 4 May 2025.

"I was detained in Gilboa for ten months. We endured relentless oppression from the prison units. Most of the assaults targeted our sides and ribs. I experienced broken ribs following the beatings, and I also lost my upper front teeth. One of my fellow cellmates asked a female guard about the dates of the Jewish holidays in October, as two inmates in our cell had upcoming court appearances. Around 10:00 p.m., we were suddenly startled by the sound of a stun grenade, followed by the invasion of approximately 20 guards into our section. Among them was Sharon, the head of the roll call, a Russian Jew known for his brutality in Gilboa. He commanded us to lie face down, and they began to handcuff us behind our backs while demanding to know who had spoken to the female guard. Subsequently, a masked female guard arrived and began to identify the prisoner. Naturally, this led to a violent beating of all present. The raid continued for about 40 minutes. Most of us ended up losing teeth or sustaining fractures. I was kicked four times in the head, resulting in a split lip and broken teeth.

Upon seeing blood pouring from my nose and mouth, they forcibly removed me from the room. Once outside, I gazed up at them, and a guard inquired, "What are you staring at us for?" Subsequently, Sharon, the head of the roll call, instructed them to bring me back inside, where they commenced striking me with sticks on my back. Sharon then questioned me about my interaction with the female guard, to which I replied that I had not spoken to her. He informed me that I would be sent to solitary confinement alongside my friend. Following this, the guards approached and began to strike my face. Thereafter, they filled a bucket with water and began to chant, 'Give him a shave, oh barber, a groom's shave.' They then doused me with the water, which was laced with soap."[29]

Documentation from Addameer and various human rights organizations reveals that all detainees experienced beatings at one or more points during their arrest and subsequent detention. This evidence indicates that such violations were not mere isolated occurrences but rather systematic and pervasive, affecting prisoners from both the West Bank and the Gaza Strip, and taking place in a range of detention facilities, including prisons, detention centers, interrogation centers, and military camps. The geographical distribution and the recurrence of these practices signify a coordinated policy designed to subjugate and psychologically and physically break prisoners, thereby clearly illustrating the systematic nature of these violations.

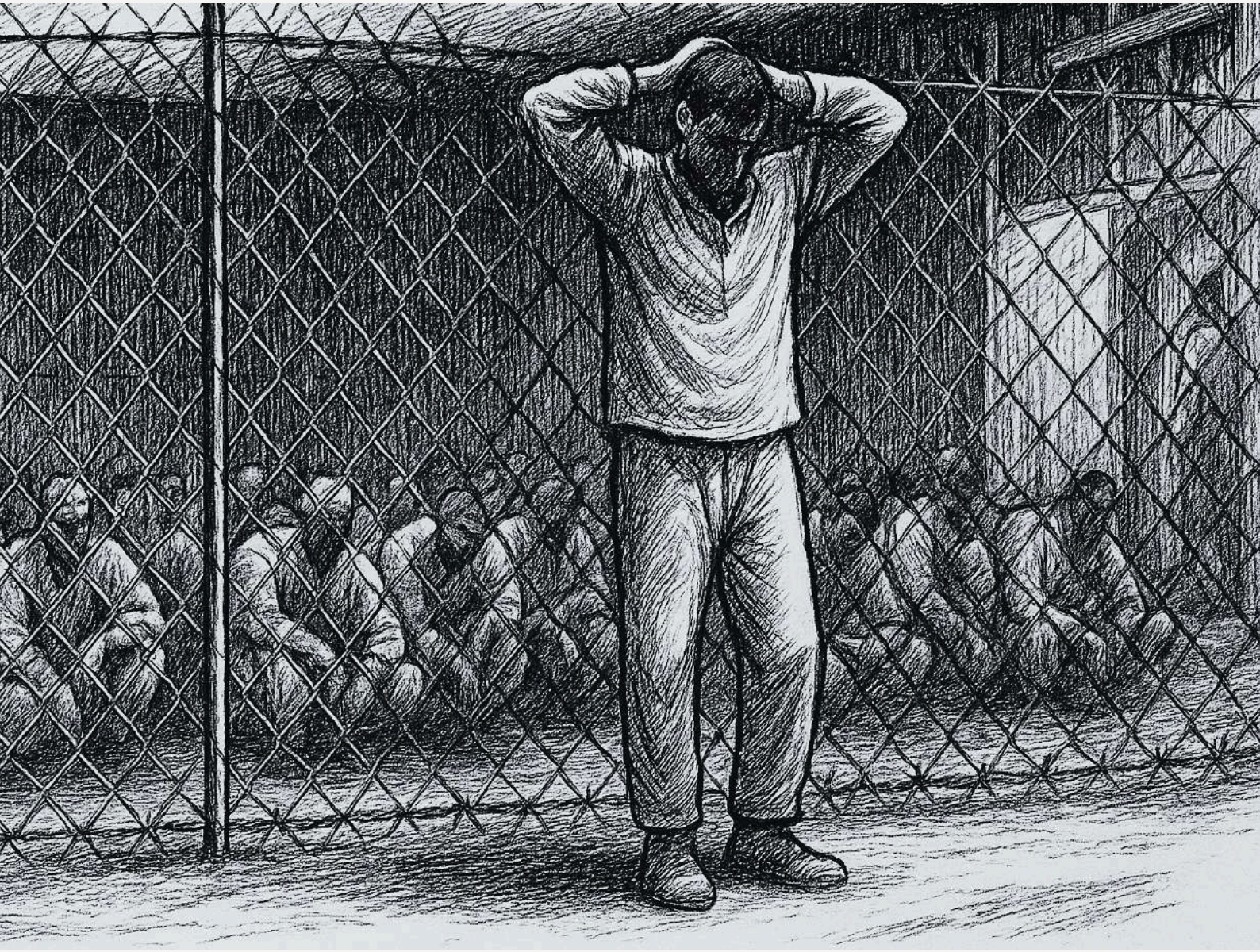
[29] Interview conducted by Addameer with prisoner A. H. on 18 May 2025.

Torture During Interrogation

Since the onset of its occupation of Palestinian territories, the Israeli authorities have been closely linked to the practice of torture against Palestinian detainees within interrogation centers. Addameer and other organizations have documented the implementation of cruel, painful, and at times lethal methods, which include: violent shaking, enforced stress positions on small chairs for extended periods, the placement of bags over heads, continuous exposure to loud music, fingernail extraction, confinement in cramped spaces referred to as "the closet," in addition to beatings, physical and psychological abuse, and other coercive techniques aimed at forcibly obtaining confessions.

These actions are not mere isolated events; instead, they represent a persistent and systematic policy that has evolved over decades. Following 7 October 2023, innovative and unprecedented forms of torture have been utilized, marked by extreme brutality and a calculated intention to cause enduring physical and psychological damage. Testimonies from prisoners reveal that certain practices have resulted in lasting medical repercussions, such as chronic physical injuries, neurological issues, and significant psychological disorders, the impacts of which persist beyond the duration of incarceration.

Torture at Sde Teiman



For two consecutive years, the Sde Teiman Detention Camp has maintained its genocidal function with notable consistency, employing systematic methods designed to exact vengeance on prisoners, thereby preserving its notorious reputation as one of the most dreadful detention facilities. It has created an environment conducive to both physical and psychological torture, where detainees endure the most atrocious acts of maltreatment and degradation, all within a context devoid of fundamental human rights and legal protections. The camp appears to exist solely as a venue for collective retribution and a hub for the physical and psychological torment of Palestinian detainees. Soldiers explicitly articulated this intent upon the arrival of the prisoners by greeting them with the phrase: "Welcome to hell." This statement succinctly captures the nature of the treatment that awaits them within the camp and illustrates a deliberate intention to impose the most severe forms of physical and psychological suffering, entirely lacking any legal or humanitarian responsibility.

Testimonies from soldiers who have served at this facility expose the profound moral and psychological corruption that thrived there, as well as the degree of ideological conditioning to which the soldiers are subjected. This conditioning seeks to dehumanize Palestinian detainees and enable the commission of atrocities against them. One soldier, in a testimony published by Haaretz newspaper, remarked:

"I sat on my bed, and for hours, I googled laws related to the incarceration of unlawful combatants. I did a session on ChatGPT and asked about crimes and rules of war. The next day, I realized that I couldn't continue there any longer ... after all the preparation and the things they tell you there. They keep pumping it into your brain that you have to disconnect. That they're not people. That they're not human beings... The guys, the company commander, the officers, everyone. You know, there was a female officer who gave us a briefing on the day we arrived. She said, 'It will be hard for you. You'll want to pity them, but it's forbidden. Remember that they aren't people. From your point of view, they are not human beings. The best thing is to remember who they are and what they did in October."[30]

The sentiments articulated by the Israeli soldier are not merely an isolated occurrence; they represent a significant manifestation of a systematic methodology that fosters notions of absolute animosity and dehumanizes Palestinian detainees. This methodology is designed to psychologically condition soldiers to accept, and even engage in, criminal acts devoid of any feelings of guilt or hesitation.

This methodology serves as a direct continuation of a deeply rooted colonial heritage that has historically depended on the dehumanization of entire populations by attributing to them derogatory traits that rob them of their humanity, thereby rationalizing their treatment without moral or legal accountability. This narrative functions as a mechanism for psychological conditioning aimed at facilitating domination and oppression, acting as a preparatory phase prior to acts of mass violence, during which the collective psyche of both soldiers and society is altered to regard atrocities as legitimate, or even essential, actions.

Consequently, Israeli soldiers have perpetrated some of the most atrocious acts against Gazan detainees, from the initial moment of their arrest to their eventual release, encompassing the periods of interrogation and detention during which they endured the most severe violations, including torture, sleep deprivation, medical neglect, sexual violence, and other abuses that resulted in lasting consequences, such as physical disabilities, sensory loss, and chronic illnesses.[31]

[30] Letter dated 27 February 2025 from the Permanent Representative of South Africa to the United Nations addressed to the President of the Security Council. P. 136. https://digitallibrary.un.org/record/4079252?v=pdf
[31] For additional details regarding this camp, please refer to the Sde Teiman Detention Camp document published by Addameer at: https://www.addameer.ps/media/5499

Excessive Force at Sde Teiman: Extrajudicial Killings

The Sde Teiman Detention Camp has recorded the highest fatalities among Palestinian prisoners in comparison to other facilities, with over 29 identified Palestinian prisoners having lost their lives. Nevertheless, the true number of deceased prisoners in this facility is believed to be greater, as the occupying authorities persist in obscuring the fates of numerous inmates. All available information regarding these deaths originates from the occupying military, and there exists no additional evidence to confirm their deaths, as the occupation continues to retain their remains.

The predominant cause of these fatalities is linked to the application of excessive force. Former prisoners have reported witnessing the deaths of numerous prisoners due to brutal beatings and the lack of essential medical treatment, suggesting a calculated intention to inflict injury and cause death.

Among those who died due to excessive force was Kamal Radi, a 46-year-old from the Gaza Strip, who died on 25 March 2024. At approximately 10:00 p.m., as recounted by fellow prisoners, soldiers invaded the barracks where Radi was detained. They promptly commanded all prisoners to lie face down on the ground, subsequently calling out Radi's identification number and escorting him outside. One prisoner recounted: "They took Kamal outside and assaulted him for approximately an hour. We could hear both the screams and the sounds of the beating. Subsequently, they returned him and threw him down onto us. After a short period, it was time for the roll call. We stood up, and Kamal did as well, but he quickly collapsed. They then commanded us to lie face down once more. They entered, assessed Kamal, placed him in a black bag, and removed him. The following day, they notified his son, Abdullah, who was in a section next to ours, that his father had died and that they were responsible for his death."[32]

Less than two weeks following Radi's death, prisoner Islam al-Sersawi also died on March 4 in the same detention facility and under similar circumstances. Despite the occurrence of his death on this date, the occupying authorities did not officially acknowledge it until four months later, on August 7, after his attorney made a request.

Concerning the circumstances surrounding his death, multiple prisoners provided testimony indicating that in early April 2024, the prison's suppression unit raided the area where al-Sersawi was incarcerated. They commanded all prisoners to lie face down, assaulted three or four individuals, and subsequently exited the section. Among those present was al-Sersawi, a 40-year-old from the Gaza Strip. That same evening, following the assault, al-Sersawi requested to use the bathroom, but his request was denied as the section head was asleep. At that moment, the female officer on duty noticed him and began to yell at him. She then left for a few minutes, returning with the supervising officer, who also began to shout at al-Sersawi. Fifteen minutes later, the canine unit arrived, and al-Sersawi was taken away and subjected to severe beatings for nearly thirty minutes. Based on the testimonies of the prisoners, it was evident from the sounds of his voice that he endured brutal assaults involving kicks and punches. Subsequently, the officer issued a threat to all present before leaving, stating, "Anyone who rises or stands will face the same consequences."[33]

[32] Interview conducted by Addameer with prisoner Kh. A. on 23 September 2025.
[33] Interview conducted by Addameer with prisoner Kh. G. on 16 December 2025.

Throughout the night, al-Sersawi remained in distress, moaning and crying out in pain, begging for medical assistance and pain relief, yet no one heeded his pleas. In the morning, soldiers arrived to remove the mattresses. Al-Sersawi was still lying on his back, unable to rise, despite the threats from the officers. He remained in that position until midday, moaning, delirious, and speaking nonsensically. A few hours before noon, the section head escorted him to the bathroom. Afterwards, he instructed al-Sersawi to attempt to sit up, fearing the repercussions from the officer. Ten minutes later, he collapsed. The officer arrived, but it was too late; al-Sersawi had lost his pulse. Five minutes later, the officer commanded that he be carried and placed at the section's door. His legs were restrained, and a doctor arrived, after which he was taken away on a stretcher. The other prisoners only became aware of his death later, following their release.

These two instances cannot be regarded as isolated occurrences or exceptions. Instead, they distinctly reveal a persistent trend of systematic violence inflicted upon prisoners. This trend signifies a calculated policy characterized by the application of excessive force, physical abuse, and medical neglect. In numerous instances, this culminates in the fatalities of prisoners due to the torture and inhumane treatment they suffer during their confinement. The repetition of these occurrences further suggests a coordinated practice, rather than isolated actions. This underscores a strategy designed to impose both physical and psychological suffering on prisoners, perpetually jeopardizing their lives.

Interrogation at Sde Teiman

A significant number of prisoners underwent interrogation at the Sde Teiman Detention Camp, where two interrogation facilities were established in proximity. One facility is operated by the Shin Bet (Israel Security Agency), while the other is managed by Military Intelligence. Detainees at these facilities were subjected to extreme torture. Among the most infamous techniques employed was a room referred to as "the Disco," where prisoners were exposed to incessant loud music around the clock, coupled with frigid temperatures generated by large fans, in addition to being entirely deprived of sustenance and hydration.[34]

Among the detainees was M. K., who endured severe interrogation techniques, including being placed in a stress position for ten consecutive days without any respite. He was also subjected to physical abuse while suspended, resulting in a broken arm and a leg that was drilled through. In recounting his experience, he described the torture of being held in a stress position within a cell that measured two by one meter. His hands were restrained with metal handcuffs, and an additional restraint was affixed to the window bars behind him, forcing his hands to be elevated above his head while he was suspended.[35] He was positioned on a small piece of wood, no more than thirty centimeters above the ground, roughly the length of a table used for dough preparation, facing the door rather than the window. His hands were bound behind his back and secured to the window bars, allowing his face to be oriented forward without a blindfold, enabling him to observe his surroundings. The room was dim and devoid of furnishings, with light only illuminating the space upon the interrogator's entry.

He states: "From the onset of the interrogation, I was subjected to the same stress position for ten consecutive days. Even when I requested to sleep, they instructed me to do so in my current position. When I needed to relieve myself, they denied my request, insisting that I use a bottle instead. After I complied, one of them would pour the contents over my head. I remained in that same position within the confines of the cell. My sustenance consisted solely of half a loaf of bread and a cucumber. They would command me to open my mouth, feed me, and then leave. I received only one meal per day: a small piece of bread accompanied by a cucumber. When I experienced thirst, they would provide me with water, dispensing it from the end of the bottle. When I needed to defecate, they would escort me to the toilet, allowing me merely five minutes. If I exceeded this time limit, they would begin throwing stones at the toilet and demand that I exit."

[34] For additional details regarding the interrogation within the disco room, please refer to the Sde Teiman Detention Camp document published by Addameer at: https://www.addameer.ps/ar/media/5480
[35] Affidavit collected by Addameer from prisoner M. K. on 27 February 2026.

In an even more harrowing incident, the prisoner recounted the most dreadful experience he faced, asserting: "On the tenth day of interrogation, while I was being subjected to a stress position in the cell, the interrogator informed me that he intended to treat me differently. He lowered my pants and positioned a drill against my right leg, just above the knee, from the front. He initiated the first hole, driving the drill bit all the way to the bone. I screamed in agony and lost consciousness. Throughout the drilling, they continued to pose the same questions. Upon regaining consciousness, I found the camp doctor, named Rabee, attempting to revive me. The pain was unbearable; my knee's bone had been fractured. I began to cry and scream, pleading for assistance.

The doctor indicated that I required hospitalization. I was already restrained with handcuffs. A dispute arose after the doctor cleaned the blood from my body and requested that I be sent to the hospital due to my condition. The interrogator responded, 'We want this one to die.' They left me in the same room for two days following the drilling, without a mattress, blanket, or any form of comfort at all. They turned on the cold air conditioning, and I experienced bleeding for two consecutive days. Each night, the doctor would administer a painkiller and replace the dressing. Throughout that period, I was not confined to the window; they liberated me afterward, yet my hands remained shackled in front of me."

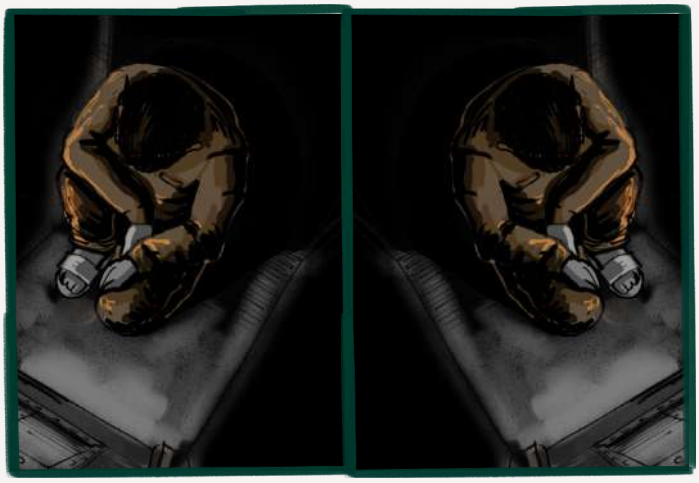
Upon his arrival at the hospital two days post-incident, he underwent a surgical procedure to insert a metal plate. Following the operation, he consulted with a doctor and expressed discomfort in his arm. X-ray examinations indicated that he had also sustained a fracture in his right arm as a result of the assault. The doctor informed him that this injury necessitated another metal plate implant; however, the surgery was not conducted, and instead, a cast was applied to his right arm. He spent two days in the hospital, restrained to the bed by one hand and one leg. The quality of care at the hospital was substandard. Two soldiers dressed in prison guard uniforms were stationed in his room and subjected him to verbal abuse.

Subsequently, he was returned to Sde Teiman. Despite his deteriorating health, he was promptly taken to the 'disco' room, where he remained for four days without any interrogation. He was confined to a wooden floor and exposed to incessant loud music. The food provided was extremely inadequate, consisting of merely a single piece of bread. Each night, the guards would enter the cells late and compel the prisoners to dance, further degrading them. They would then assault the injured prisoner and beat him.

He was later moved to the camp's sections, which were frequently subjected to crackdowns. In May 2024, the canine unit raided the section at dawn, instructing everyone to lie face down. While he was in this position, he was forcibly dragged from his spot and made to stand by the window. He informed them of the metal plate in his leg, to which they responded, 'Even if you die, stand up!' This compelled him to stand, despite being blindfolded. He was then struck on the back of the head with a metal rod. He lost consciousness and was subsequently transferred to Soroka Hospital, where he remained in a coma for approximately 12 days, as per his own account. Upon regaining consciousness, he found himself connected to an oxygen machine. He was returned to Sde Teiman on the same day.

For the complete testimony, refer to:
https://drive.google.com/file/d/1IHMZKx3Z3JIJWoemQobghtVEZil-jrmW/view?usp=sharing .

Kh. F.: Severe Physical, Psychological, and Sexual Torture[36]



Prisoner Kh. F. was arrested on 5 March 2024 in Hamad City. After being transported to the Sde Teiman Detention Camp for approximately two and a half hours, he was taken for field interrogation in a tent adjacent to the detention cages. This interrogation lasted around fifteen minutes, after which he was directly transferred to military intelligence interrogation at the camp.

Kh. F. underwent interrogation for five consecutive days, during which he experienced physical, psychological, and sexual torture. On the initial day, he faced a direct and explicit threat from the officer, who stated, "You hold no value to me. Before your presence, I had 23 individuals seated in the same chair, all of whom died. Therefore, I have no concern about the possibility of ending another life." Following this, the interrogator produced a pair of pliers and positioned them on the tips of three of the prisoner's fingers at the nail bed, exerting pressure for two to three minutes on each finger. This inflicted excruciating pain on the prisoner. The entire procedure lasted about ten minutes, resulting in swollen fingers and subsequent loss of nails.

Shortly thereafter, the interrogator applied the pliers to the prisoner's nipples, placing them on the left nipple for approximately two minutes with significant pressure, before similarly moving to the right nipple, applying pressure for several minutes. The interrogation persisted for roughly sixteen hours on the second day. During this period, the prisoner was compelled to maintain a squatting position on his toes for an hour, with his hands and legs bound behind his back. The officer stood beside him, wielding a baseball bat. If the prisoner shifted or fell, the interrogator would strike him. Throughout this hour, he was also subjected to explicit sexual threats involving the same bat. The interrogator menaced him, brandishing the bat, stating, "Now I'll put it somewhere else, and you know where."

The third day proved to be the most brutal and horrifying. In a transgression that breached all legal and ethical norms, after the prisoner requested to use the restroom, a female soldier, acting on the orders of the interrogator, bound his penis with a zip tie, leaving him exposed and lying on the floor for an hour. The zip tie remained affixed to his penis for an entire day and was not removed until the next day, when he endured psychological torment by being forced to listen to the sounds of his two brothers undergoing torture. They had been detained simultaneously with him.

For the complete testimony, please refer to:
https://drive.google.com/file/d/1fqVpCPM5pv6rKf-Ojy8bvhQyoGpdZ4Nr/view?usp=sharing

[36] Affidavit collected by Addameer from prisoner Kh. F. on 21 December 2025.

Al-Mascobiya: A Prolonged History of Systematic Torture and Inhumane Treatment

“We treated you because we wanted to interrogate you; otherwise, we would have left you to die”[37] said one of the interrogators to prisoner H. A. during his interrogation at the Al-Mascobiya Interrogation and Detention Center. In spite of the occupying authorities' legal responsibility to offer medical assistance to prisoners, they frequently manipulate this right as a means of control and a demonstration of power, framing the act of saving a life as a "favor" rather than a humanitarian or legal obligation. Medical treatment is not regarded as an inherent right for prisoners, but instead as a mechanism for humiliation and the erosion of their will, reinforcing the perception among detainees that their lives and destinies are wholly contingent upon the whims of the governing authority. This illustrates a systematic approach to psychological manipulation and the arbitrary misuse of fundamental rights.

Approximately 19 days following the arrest of H. A. from Hamad City in Khan Younis and his subsequent transfer to Sde Teiman, he endured a horrific sexual assault by the riot control unit. A soldier struck him in the genital area, resulting in swelling and intense pain. The next day, he was moved to Al-Mascobiya, where he remained held for 10 months. Throughout this period, he was interrogated for nearly 100 days, adhering to a repetitive cycle: one day he would face interrogation for about an hour, the subsequent day he would be subjected to stress positions and physical assaults for roughly an hour, and the day after that, he would again be interrogated while enduring stress positions and beatings for an hour.

[37] Interview conducted by Addameer with prisoner H. A. on 10 November 2025.

The prisoner endured multiple forms of torture, one of which included being placed in stress positions. His hands were restrained behind his back and elevated above his head, with the bindings secured to a metal ring affixed to the wall. His body was lifted approximately twenty centimeters off the ground, leaving his feet suspended without contact with the surface. He remained in this position for less than a minute following a question posed by the interrogator, after which he was lowered upon providing an answer.

Furthermore, he experienced a technique referred to as "Method 2," which entailed seating him on a metal chair, securing his feet to the chair legs, and cuffing his hands in front of him. The handcuffs were then linked to a chain roughly two meters in length, anchored to the wall. The interrogator would tilt the chair backward until it began to slide, while placing a lightweight piece of foam on the floor behind his head. Throughout this process, he was subjected to ongoing questioning, culminating in a sudden drop backward that caused the back of his head to collide with the floor. This particular procedure lasted about one hour and was employed against him only once during the interrogation.

In addition to that, he was tortured by being placed on a stretcher approximately one and a half meters in length, constructed from a rigid material. He was positioned face down on the stretcher, with his hands and feet bound, and subsequently placed on a metal staircase comprising around ten steps that concluded at a wall and a metal post at one end. The stretcher was then pushed from the top of the staircase, resulting in him sliding down until he impacted either the wall or the metal post, leading to his shoulder or head striking it. This method was executed approximately four times. On the final occasion, he lost consciousness and was revived by having a liquid sprayed onto his face. This technique was utilized against him only once during the interrogation. Also, he endured other forms of torture, including repeated beatings characterized by direct and forceful slaps and punches to the face. This resulted in several broken teeth, with most of his front teeth ultimately falling out. Pepper spray was additionally employed, being discharged into his mouth.

During one of the interrogation sessions, he endured a sexual assault characterized by rape. A stick, comparable in thickness to a broomstick, was inserted into his anus. He was restrained, his clothing was removed, and the stick was inserted approximately six times. With each insertion, it was forced into his mouth until he vomited. He perceived it penetrating to a depth of about five centimeters, resulting in bleeding and excruciating pain. Due to the injury, he requested medical attention. When he was eventually permitted to see a doctor, the doctor informed him that no effective treatment could be provided, merely offering him a piece of cotton without any suitable medical care for his injury. Consequently, he experienced chronic bowel issues during his detention, which persisted for an extended duration. He continues to seek treatment for these issues and still suffers pain during bowel movements.

For the complete testimony, please refer to:
https://drive.google.com/file/d/1EKJoZJAdu9nUo5MOuNn3jaNPFKdO-y6G/view?usp=sharing

The comprehensive nature, frequency, and direct association of the acts perpetrated against the prisoner indicate a clear pattern of systematic torture. He endured suspension, stress positions, intentional drops, repeated slamming, beatings that led to broken teeth, the application of irritants within his mouth, the denial of adequate medical treatment, and rape. Collectively, these actions represented cruel coercive tactics aimed at inflicting severe and enduring pain, as well as coercing him into providing false information and confessions. The recurrence of these methods over an extended duration of up to one hundred days, coupled with their direct relation to interrogation practices, categorizes them as systematic torture, given their intent, premeditation, and the resultant permanent physical and psychological harm, which includes chronic suffering and significant psychological repercussions.

In a similar vein, prisoner M. Z. experienced severe interrogation at Al-Mascobiya. Following his arrest at a school in the Gaza Strip, where he had sought safety, he was transported to Sde Teiman and subsequently to Al-Mascobiya, where he remained for nearly ten months. Upon his arrival, he was taken to the clinic, where it was determined that he was suffering from fractured ribs due to the beatings sustained during his transfer, which specifically targeted his chest area. An X-ray confirmed a fracture in one rib, accompanied by external bruising. As a result, he was prescribed painkillers for a duration not exceeding one week.[38]

He was subsequently taken to the interrogation room, where he was placed on a metal chair with his hands restrained behind his back and his legs secured to the chair legs. This initial session lasted approximately four hours, during which he was not subjected to physical violence. Following this, he was moved to a solitary confinement cell measuring no more than two by three meters, which contained only a mattress and a light blanket, a small toilet with a door approximately 60 by 70 centimeters in size, and a sink. The cell had no window. The door featured a small opening, but it remained closed at all times. The sole source of ventilation was an air conditioning unit that operated continuously in cooling mode, regardless of the season. He spent two full days in this cell without any interrogation before being returned to the interrogation room.

He was interrogated for around eight consecutive hours without being permitted to use the bathroom or eat. During this period, he faced threats of being transferred to military interrogation, was subjected to obscene language, and experienced verbal abuse directed at his wife, mother, and sisters. While being moved from his cell to the interrogation room, he was consistently beaten by the guards. Typically, two guards would be positioned in front and one behind him, forcing his head to be bent low. The beatings were primarily focused on his head and back, often involving batons, in addition to his head being forcefully shoved against doors as he passed through.

Regarding the living conditions at Al-Mascobiya, he reported that they were exceedingly harsh. The detention was marked by a systematic policy of starvation, a severe lack of hygiene supplies, near-total deprivation of natural light, and a deliberate approach of medical neglect towards ill prisoners.

[38] Interview conducted by Addameer with prisoner M. Z. on 20 January 2026.

The Voices of Female Prisoners from the Interrogation Cells

The interrogation cells constitute one of the most severe stages of the detention experience, wherein female prisoners encounter challenging conditions along with significant psychological and physical stressors. Within the confines of closed doors and isolated interrogation chambers, female detainees are subjected to prolonged periods of relentless questioning in an atmosphere lacking the most fundamental aspects of comfort and safety. The accounts of numerous female prisoners illustrate profound anguish during this time, characterized by extreme isolation, deprivation of sleep, incessant psychological and physical strain, malnutrition, and neglect in medical care. This situation transforms the interrogation cells into a harsh environment, intensifying the suffering experienced by the female prisoners.

Among the female detainees interrogated at the Asqalan Interrogation and Detention Center was prisoner T., who was arrested on 2 November 2025, at the Al-Ard Al-Tayyiba Camp in Khan Younis. Following her arrest, she was transported to Asqalan. Upon her arrival, she underwent a metal detector screening, after which she was taken to a small, cell-like space where she faced a near-strip search before being placed in a cramped cell.[39]

T. was held at the Asqalan Center for a duration of 27 days, during which she experienced continuous interrogation for 18 days. Throughout this period, she faced three interrogation sessions each day, with each session lasting between three and four hours, during which she was persistently threatened with the bombing or capture of her family. She also endured extremely vulgar verbal abuse.

[39] Interview conducted by Addameer with prisoner T. on 15 December 2026.

Approximately one week after her transfer to the interrogation center, she was taken to a room equipped with a lie detector, which included a chair with wires attached. One wire was affixed beneath her chest while another was placed above it. A pulse oximeter was positioned on one finger, and another was placed on a different finger to monitor perspiration. The expert later asserted that she did not pass the test. Following this, she was subjected to continuous interrogation for three days without any respite. Her hands were restrained to a chair that was fixed to the floor, and she was permitted to use the bathroom only. Food was provided to her in the interrogation room, but she was denied any opportunity to sleep. Consequently, she experienced convulsions that rendered her immobile; only her mouth was able to move. This condition was attributed to the stress and fatigue from remaining seated in the chair for three consecutive days without sleep.

The arrest of T. occurs within the broader context of applying pressure on her detained father. He had previously been threatened with her arrest as a means to compel him to make false confessions. This threat was actualized with her arrest and subsequent interrogation. On the eighteenth day of her interrogation, she was confronted with her father inside the interrogation center, a procedure designed to heighten the psychological pressure on both individuals to elicit confessions from them. These practices reflect the implementation of psychological pressure tactics that may constitute cruel or inhuman treatment, contravening the protections afforded under international humanitarian law and international human rights law, particularly the prohibition against coercion for confession extraction and the right to humane treatment during detention.

In the same context, prisoner H. endured severe interrogation at the Al-Jalameh Interrogation and Detention Center. Several hours following her arrest on 4 December 2024, she was moved to Al-Jalameh. Initially, she was confined in an open area until the morning, after which she was taken to a small room for a strip search. During this procedure, a female soldier touched and examined her breasts, instructing her to stand and sit down twice while she was unclothed. Her hands were subsequently restrained behind her back, and her legs were shackled. She was then moved to a small cell, roughly two meters in size, infested with bedbugs, where she remained until the next morning.

At around 8:00 a.m., a prison guard escorted her to the interrogation room. Approximately 18 interrogators were present, along with the head of the Shin Bet, who was holding a bottle of alcohol. He had brought it to commemorate the martyrdom of the prisoner's son, who had been killed four and a half months prior to her arrest. This "celebration" lasted for an hour and involved insults directed at both the prisoner and her deceased son. The prisoner remained seated and motionless for about eight hours, enduring beatings every fifteen minutes. When she requested to use the bathroom, they responded, "Do it on yourself."[40]

[40] Interview conducted by Addameer with prisoner H. on 6 January 2025.

She underwent interrogation for a duration of forty days, with sessions lasting between four and ten hours each day. Throughout this period, she experienced physical abuse, including beatings to her back and face, threats regarding the arrest of her children, and the destruction of her home. Additionally, she faced verbal insults and intrusive questions laden with sexual innuendo, such as, "How do you sleep with your husband?" In the initial four days of her interrogation, she was deprived of food and only provided with tap water. She reported that the interrogators would inquire about her food intake, despite not having supplied any, which contributed to her feelings of mockery and psychological humiliation. Furthermore, during this time, she experienced her menstrual cycle and requested sanitary pads from the guards, who denied her request. She also sought pain relief in the form of painkillers, which were similarly withheld. Consequently, she endured six hours of interrogation without sanitary pads, resulting in her clothing becoming soiled.

Upon the conclusion of the interrogation, the interrogator inquired about sanitary pads, and she was given only three for a span of five days. Her soiled garments were not replaced. It was not until fifteen days post-arrest that she was provided with a towel, pajamas, and underwear, and permitted to take a shower, albeit with cold water. Additionally, she was subjected to a degrading strip search approximately five times. During these searches, guards would enter her cell, compel her to disrobe completely, and then proceed to physically examine her by grabbing her breasts, spreading her legs, and inspecting between them.

For the complete testimony, please refer to:
https://drive.google.com/file/d/1CMIYJRWktNBL1kEMkXpZstn3wLSL4o61/view?usp=sharing

It is evident from the preceding discussion that the occupying forces have utilized torture as a method of gradual extermination, systematically and progressively depleting the victim both physically and psychologically. In this regard, the UN Committee Against Torture, in its final observations concerning Israel's sixth periodic report, voiced significant apprehension regarding reports of widespread torture and ill-treatment that amount to a de facto policy.[41]

The joint report presented on 13 October 2025 by the Committee Against Torture in Israel, alongside other organizations, documented persistent patterns of severe beatings, extended exposure to painful physical positions, sleep deprivation, starvation, continuous handcuffing, solitary confinement, stringent limitations on access to legal counsel and family visits, as well as restricted access to medical care and delays in treatment. The report underscored that these practices are not mere isolated occurrences but rather form a recurring pattern within a systematic framework that imparts an institutional character to them.[42]

[41] United Nations Committee against Torture. "Concluding observations on Israel's sixth periodic report." https://tinyurl.com/4s2pvpz3
[42] Public Committee against Torture in Israel (PCATI), Adalah, HaMoked, Physicians for Human Rights-Israel (PHRI), Parents against Child Detention (PACD). "Torture as State Policy: Abuse of Palestinian Detainees in Israel and the Absence of Accountability Since 7 October." 13 October 2025. https://tinyurl.com/2nj3tvhr

Moreover, a report released by the Israeli Public Defender's Office underscored the harsh and challenging conditions faced by prisoners within detention facilities, including extreme overcrowding, insufficient food and water, poor sanitation, and deteriorating health due to the denial of medical treatment, which exemplifies the conversion of torture into a method of slow extermination.[43]

These findings, drawn from both official and unofficial sources, provide strong evidence that the violations were not isolated events but rather systematic and organized. This reinforces their legal categorization as genocide, war crimes, and crimes against humanity, necessitating international investigation and accountability.

[43] The Public Defender's Office (Israel). "Conditions of Detention in Facilities of the Israel Prison Service: A Special Report in Response to the Emergency Detention Circumstances." February 2024 (Report No. 48) (https://tinyurl.com/whcvne53)

Medical Crimes: Breaches Endangering the Prisoners' Lives

Medical crimes represent one of the gravest and most pervasive offenses within Israeli prisons. In recent years, Addameer has recorded thousands of instances of intentional medical crimes that have resulted in fatalities, severe and irreversible physical injuries, loss of limbs, or significant sensory impairments, which in certain situations can culminate in the total loss of that sense. These offenses are evident in systematic practices that encompass intentional medical negligence, the refusal of appropriate treatment or delays in its provision, and the manipulation of illness as a method of torture and oppression, alongside harsh environmental and health conditions that worsen the health status of prisoners.

Due to a lack of oversight and ineffective accountability systems, prisons have evolved into fertile grounds for the proliferation of epidemics, chronic illnesses, and permanent disabilities. Consequently, health-related suffering has become a mechanism of control and domination, as diseases have transformed into additional tools of torture. The refusal to provide personal hygiene products, cleaning and bathing supplies, and insufficient access to light and ventilation have resulted in the outbreak of skin diseases, particularly scabies, which has severely impacted the prison population. This ailment was weaponized and utilized as a means of repression and maltreatment by neglecting those infected, isolating them, or failing to implement any preventive measures to curb its spread. This has intensified their suffering and anguish, leading to widespread transmission of the disease among prisoners.

Moreover, the occupying forces ignored the critical conditions faced by certain individuals, arresting them within healthcare facilities, without any regard for the severe injuries they were enduring. This worsened their health status, as numerous patients were taken from their hospital beds before completing their prescribed treatments. Subsequently, they were subjected to brutal beatings during field interrogations, transfers, or while in detention, with no consideration for their medical conditions. In numerous instances, the assaults were intentionally aimed at injured areas. Furthermore, during their time in detention, they experienced gross medical neglect, which ultimately resulted in the loss of limbs or even death. This represents a sequence of crimes, starting with their targeting, followed by violent assaults, the denial of essential medical care, and culminating in their deaths and the retention of their bodies.

In this context, prisoner M. W., who underwent interrogation in the field prior to being moved to the occupation camps, reports that he was beaten during this interrogation on his face, back, and head using various implements, including sticks, hands, and feet, with particular focus on a prior injury: "I had a pre-existing minor wound on my right leg. Upon noticing this injury, one soldier began to apply pressure to my leg with his hand, causing me significant pain. They also similarly interrogated my brother."[44]

The practice of medical neglect has been a constant for prisoners throughout every phase of their detention, from the moment of their initial arrest until their eventual release. In many instances, the individual targeted for arrest was shot and critically injured, followed by severe medical neglect, leading to lasting harm to the detainee.

Regarding the detainee W. G., who was arrested on 1 October 2024 at the maritime checkpoint in the Gaza Strip and later moved to the Sde Teiman Detention Camp, he recounted: "I have undergone an amputation of my right foot. Initially, my foot was in good condition, but I required ongoing treatment due to the severing of the nerve during the amputation that occurred amidst the war. I faced interrogation nine times, occurring twice weekly. The interrogators consistently assaulted me, hitting my sides and head with their hands. They maintained the air conditioning at an extremely low temperature in the interrogation room. I was subjected to a stress position once, disregarding my health status as an amputee. I didn't receive any medical treatment, and this was overlooked during the interrogation process. I was never taken to a medical facility. Consequently, due to the blows to my head and slaps to my face, my hearing has diminished by over 50%."[45]

Furthermore, female prisoner D. H., who was detained on 29 January 2025, corroborated the existence of a policy of medical neglect within Damon Prison. She remarked, "Any prisoner who expressed discomfort was met with indifference. At the clinic, we were often advised to simply drink water or were given a Dexamol tablet. I visited the doctor only once for flu symptoms and a sore throat, and she instructed me, 'Drink water, you're fine.' No medical conditions are addressed except for hypertension, diabetes, and high cholesterol; otherwise, we are accused of feigning illness. Any prisoner who sought treatment through legal channels faced harassment from the prison officer and female guards."[46]

[44] Interview conducted by Addameer with prisoner M. W. on 9 February 2025.
[45] Interview conducted by Addameer with prisoner W. Gh. on 9 February 2026.
[46] Interview conducted by Addameer with prisoner D. H. on 28 February 2026.

Doctors and Nurses: An Integral Part of the System of Repression within Prisons

Healthcare professionals, including doctors and nurses, have become a crucial component of the oppressive and persecutory framework within prisons through their cumulative actions and practices, which constitute a serious infringement on the right to health and reveal a systematic pattern of complicity in the mistreatment and torture of prisoners. This situation commenced from the very outset of detention, when medical personnel neglected to perform a thorough initial medical assessment. Their involvement was restricted to posing superficial inquiries regarding the health status of the prisoners and the ailments they were experiencing, without undertaking genuine medical evaluations or documenting pre-existing injuries, including those inflicted by torture.

Prisoner A. J., who was arrested on 21 March 2024 at Al-Shifa Hospital in the Gaza Strip, recounted: "Upon our arrival at a military facility known as Sde Teiman, the first action taken was to perform a medical examination. Prior to reaching Sde Teiman, I had sustained a significant injury to my eye from a soldier. A soldier kicked me forcefully in my right eye, resulting in bleeding and necessitating stitches. During the medical examination, no treatment was administered; they merely recorded my name and posed a few medical questions, allowing my eye to bleed until the blood clotted on its own. The blindfold was soaked in blood, which remained unwashed for almost three months."[47]

This trend persisted with the ongoing refusal to monitor the medical conditions of prisoners and the denial of treatment upon request, even though the medical staff was fully aware of the severity of their health issues. Despite the legal and ethical responsibilities of physicians to document and report instances of torture and ill-treatment, such actions were taken in only one out of countless cases.[48] This indicates a serious violation of the reporting duty and represents a form of complicity.

Moreover, in spite of the severe decline in the health of certain prisoners to the extent that they required transfer to external medical facilities, they were returned to their respective prisons on the same day, without the completion of their necessary treatment or assurance of their recovery, and without any follow-up medical care, which is a clear infringement of their right to treatment and its continuity. Medical professionals did not manage to provide even a basic level of adequate healthcare for the prisoners, despite their direct observation of the enforced starvation policy and the dire health conditions present in the prisons, which included overcrowding, poor hygiene, and the proliferation of epidemics and skin ailments, particularly scabies. Collectively, these actions resulted in a significant deterioration of the prisoners' health and the deaths of a considerable number of prisoners while in custody.

[47] Interview conducted by Addameer with prisoner A. J. on 18 January 2026.
[48] For additional information regarding this case, refer to the case of prisoner S. A., which is documented on page 19 of the Sde Teiman Detention Camp document published by Addameer at https://addameer.ps/media/5499

The responsibilities of doctors and nurses extended beyond mere negligence, abandonment of duty, or refusal to administer treatment; they also involved active complicity in the physical mistreatment of prisoners. This represents a flagrant violation of medical ethics and a serious infringement of international humanitarian law, positioning these healthcare workers as direct accomplices in the system of abuses.

Among the prisoners who witnessed the involvement of the medical system was M. Z., who recounted an incident of being assaulted by a physician in Ofer Prison: "They brought me to the doctor, who was clad in a white coat, and he kicked me in the chest. The assault was unprovoked, occurring without any verbal exchange from me. He did not even conduct an examination, and when he struck me, I refrained from responding to his medical inquiries out of fear that he would inflict further harm."[49]

Prisoner J. K. supported this account, asserting that in Naqab Prison, no individual dared to request a visit to the clinic; anyone who attempted to do so faced violence. He further noted that even the nursing staff were complicit in these acts of aggression, and he observed multiple prisoners being assaulted by one of the nurses.[50]

In a similar vein, prisoner A. J. testified to being beaten by a physician at the Asqalan Interrogation and Detention Center. He recounted: "When I was taken for a medical evaluation, I informed them of my history of stomach ulcers. Unexpectedly, the doctor, dressed in white civilian attire, struck me in the abdomen and instructed me to leave. During an X-ray procedure, one of the guards hit me in the throat, resulting in a loss of my voice and significant weakness. I experienced prolonged difficulty in speaking, and I continue to suffer from this condition."[51]

Despite the varying detention facilities of the prisoners mentioned, the recurring pattern of violence they experienced was consistent, suggesting an institutionalized nature of these assaults.

The journey to the clinic has transformed into a route of punishment and agony, resembling a slow death road, as articulated by prisoner Mohammad Qaoud. "The peril associated with the journey to the doctor has emerged as one of the barriers hindering prisoners from pursuing medical care, despite their pressing need for it. A prisoner now perceives that enduring one form of pain is preferable to suffering a multitude of others. Consequently, a prisoner would rather succumb to the pain than seek medical assistance and face death at the hands of soldiers en route to the doctor."[52]

[49] Interview conducted by Addameer with prisoner M. Z. on 10 January 2025.
[50] Interview conducted by Addameer with prisoner J. K. on 30 November 2023.
[51] Interview conducted by Addameer with prisoner A. J. on 18 January 2026.
[52] Mohammad Qaoud. "Monsters in Doctors' Clothes: My Testimony about Sde Teiman Prison." 16 July 2025. https://tinyurl.com/54rbaez3

Moreover, prisoners face assault when they challenge the policy of medical neglect or assert their right to treatment, thereby enforcing medical neglect and establishing it as a de facto policy. Prisoner H. A. remarked: "The Naqab Prison resembles Guantanamo. I recall one of the most brutal crackdowns I experienced, which occurred on 5 May 2024 in section 12, where a young man among us was afflicted with scabies, and his health was deteriorating. The prisoners protested during the noon roll call to demand treatment. Suddenly, the section alarm sounded, and a large contingent of units entered, outnumbering the prisoners, accompanied by the warden. They compelled us to lie on our stomachs, handcuffed behind our backs, and they trampled over us, striking us with batons, electrical wires, and rifle butts. I endured a severe blow to my chest that resulted in excruciating pain. This crackdown persisted until nearly the evening roll call."[53]

[53] Interview conducted by Addameer with prisoner H. A. on 17 December 2025.

The Ramla Prison Clinic: Overlooked Healthcare and Ongoing Crimes

"There, in the Ramla Prison Clinic, souls await the Angel of Death with anticipation, acutely aware that He is poised to guide them away from this jungle where its beasts have assailed them."[54]

The occupying authority has converted prisons into sites where prisoners linger in expectation of death, particularly at the Ramla Prison Clinic, which bears no resemblance to a medical facility. Within its confines, the walls stand as mute witnesses to suffering, and the beds serve not as places for healing but as final resting spots between existence and oblivion. In this stifling environment, the distinction between prison and graveyard becomes indistinct, and the clinic forfeits its humane significance, with waiting emerging as the predominant feature—a waiting laden with anguish and precariously suspended by a delicate thread of hope.

[54] Walid Al-Hudali, "Burials of the Living", p. 9-10.

Accounts from prisoners reveal that the occupying forces fail to deliver adequate medical care to sick prisoners according to their health requirements. Rather, they take advantage of these health problems to advance a genocidal agenda within detention centers, particularly at the Ramle Prison Clinic. This has led to the deaths of many prisoners at that facility, excluding those who later died in external hospitals after being transferred from the clinic.

Despite the already critical conditions in the clinic, they deteriorated further following the initiation of this genocidal campaign. On 8 November 2023, prison guards invaded the rooms in the Ramle Clinic and seized everything, including medications, medical records, and personal photographs of the prisoners. Subsequently, appointments for prisoners scheduled to be transferred to hospitals were canceled, with guards asserting that "the treatment has changed now. When we see someone about to die, we transfer them to the hospital; otherwise, there are no transfers." Even the specialist doctors who previously monitored patients weekly or biweekly now only visit every two to three months.[55]

Among those who succumbed to medical neglect at the Ramla Prison Clinic was Rafat Abu Fanouneh, a 34-year-old from the Gaza Strip. Abu Fanouneh was arrested on 7 October 2023, and his death was reported on 26 February 2025. During this time, the occupying authorities did not reveal any information regarding his condition or permit any visits. According to accounts from fellow prisoners, Abu Fanouneh was detained in Ramla Prison, where he endured seven ulcers on his back due to shrapnel wounds incurred prior to his arrest. Despite the seriousness of the deep ulcers that were devastating his body, he was denied treatment or even dressing changes, which were left to the prisoners to manage. He was severely emaciated, and in the days leading up to his death, his legs exhibited considerable swelling.

In spite of his severely compromised health, the authorities consistently declined to assess his condition or provide the essential medical care he required. He spent the majority of his time in a prone position, with his fever often escalating without any substantial treatment. Transfers to the hospital were infrequent, and even when they occurred, his stay was limited to no more than a single day.[56] Two days prior to his death, despite a marked decline in his health, the prisoners persistently requested that he be moved to a hospital for the medical attention he desperately needed; however, all such requests were refused.

Abu Fanouneh had previously ceased all intake of food and water, depending entirely on intravenous nutrition for his survival. Yet, in the final two days, even the IV fluids were withheld, suggesting a slow and intentional act of lethality. In the final hours leading up to his death, his respiratory function diminished significantly, and he exhibited no movement whatsoever. Consequently, he was removed from his room and placed on a bed in the corridor. Subsequently, some medical equipment was brought in for a brief examination, after which he was transferred to the clinic, where, according to the inmates who were with him, it was later declared that he had died.

[55] Interview conducted by Addameer with prisoner E. R. on 15 March 2025.
[56] Interview conducted by Addameer with prisoner H. J. on 10 March 2026.

The situation surrounding martyr Abu Fanouneh should not be regarded as simple medical negligence; instead, it represents a continuation of the genocide executed by the occupying authorities within prisons and detention centers. His ongoing denial of medical assistance, which resulted in his suffering from severe ulcers, significant swelling in his limbs, and life-threatening emaciation, illustrates a calculated intention to cause him profound physical and psychological distress.

Prior to Abu Fanouneh's death, several other prisoners at Ramle Prison also lost their lives, including Izz al-Din al-Banna, a 40-year-old from the Gaza Strip, who died on 20 February 2024. Al-Banna had a physical disability, along with deep wounds and extensive lacerations on his back. Following his arrest, he endured extreme torture at Sde Teiman before being moved to the Ramle Prison Clinic. Just two days after his transfer, his health significantly declined; his temperature soared to 41 degrees Celsius, and he experienced violent tremors. The head of the section communicated with the doctor to request his transfer to a hospital due to the rapid deterioration of his condition. Tragically, around 8:30 p.m., al-Banna succumbed to his ailments before he could be moved to the hospital.

In the same clinic, martyr Walid Daqqa, aged 62 from the occupied Palestinian territories, spent an extended period. In 2022, he was diagnosed with a rare form of bone marrow cancer and faced the systematic medical neglect enforced by the Israel Prison Service. Consequently, his health worsened considerably, and medical professionals advised a bone marrow transplant and his relocation to a more suitable environment. Nevertheless, the IPS disregarded the medical recommendations and retained him in prison under conditions detrimental to his health until he ultimately died on 7 April 2024.[57]

The treatment of the prisoners cannot simply be characterized as medical neglect; rather, they were victims of a persistent and systematic series of medical offenses. In spite of their severe health issues, the occupying authorities continued to hold them without offering the essential medical care or urgent treatment required. This resulted in a considerable decline in their health and obstructed their transfer to a hospital for necessary medical interventions. This conduct is not merely a case of individual or professional negligence; it represents a systematic policy designed to achieve the physical and psychological annihilation of prisoners. When such actions are directed at a specific group of prisoners in a repeated and systematic manner, it constitutes genocide under international law, where intentional medical practices and extreme neglect serve as instruments to cause death and profound suffering to the targeted group.

[57] For additional details regarding prisoners who were killed in Israeli detention facilities following 7 October, please refer to: https://addameer.ps/media/5539 and https://addameer.ps/media/5342

In the Midst of Bullets and Medical Neglect: The Suffering of Prisoner M. F. at Ramla Prison Clinic

On 21 November 2024, at around 10:00 p.m., prisoner M. F. was arrested after being shot multiple times, resulting in severe injuries. These injuries included a pelvic fracture and a severed tendon in his right hand, leading to the loss of movement in his thumb and forefinger. He also suffered a bladder injury and continues to receive medical treatment. He is compelled to use medical bags,[58] as three tubes have been inserted into his body: two connected to his kidneys from the back and one leading to his abdomen. Due to this condition, he is unable to urinate normally and must drain his urine through these tubes.[59] His suffering has been exacerbated by the fact that these tubes were not changed regularly and often became clogged, which hindered his ability to urinate and caused him severe pain along with significant health complications. He repeatedly alerted the guards and those responsible for his care about the urgent need for medical intervention, but his pleas were met with neglect and inaction.

In certain instances, due to the blocked tubes and the ongoing suffering of the detainee, the prisoner assigned to care for the sick was compelled to attempt to unclog them by injecting water through a syringe, fully aware that this could be considered medical malpractice. On one occasion, a nurse executed the same procedure. Consequently, the detainee developed a severe infection, his temperature soared to 42 degrees Celsius, and his condition became critical, nearly resulting in his death, which necessitated his transfer to the hospital. The specialist at the hospital confirmed that these medical tubes should be changed monthly and stressed the absolute prohibition against pumping water through them. The prisoner in charge had only resorted to this method after observing a nurse perform it. Despite the gravity of his condition and the necessity for surgical intervention, the operation was denied, further worsening his health issues.

[58] A lawyer's visit to prisoner M. F. at Ramle Clinic on 19 May 2025.
[59] Interview conducted by Addameer with prisoner H. J. on 10 March 2026.

The occupying forces ignored his severe health condition and assaulted him. One day, seven prison guards entered his cell, restrained him with handcuffs behind his back, shackled his legs, and violently beat him with batons, punches, and kicks. Subsequently, he was moved to solitary confinement, where he remained for a week. Despite his pressing need for help, no other prisoners were permitted to assist him. He was taken to the clinic for a single day, with his eyes swollen from the assault, blood leaking from his tubes, and his body marked with bruises.

In a similar context, prisoner Y. H. recounts the circumstances of his arrest, which occurred in the early hours of 12 August 2024. He was asleep in his residence when he heard an explosion, followed by soldiers invading his home with dogs and opening fire. He sustained a gunshot wound to his left leg, and it was later revealed that he had also been shot twice in his right leg, which he did not feel due to losing consciousness. According to the prisoner's account, he underwent two surgical procedures, but the operation on his left leg was inadequately performed, requiring a second surgery.[60]

One of the prisoners observed a distressing medical malpractice inflicted upon Y. H. Eight months later, an additional surgery was conducted during which they excised four centimeters from his leg, resulting in one leg being longer than the other. When the time came to extract the metal rods from his leg, they provided him with no anesthesia. The doctor entered the room unexpectedly, seized the prisoner's leg, and began to remove the rods with his bare hands, causing the room to become drenched in blood. Due to the brutality and horrific nature of the scene, the guards vacated the room because, as the witnessing prisoner described, "the room had become like a slaughterhouse." Y. H. screamed in pain and was subsequently denied any pain relief, despite being unable to sleep due to the intense suffering. On rare occasions, they administered a very mild painkiller that had virtually no effect.[61]

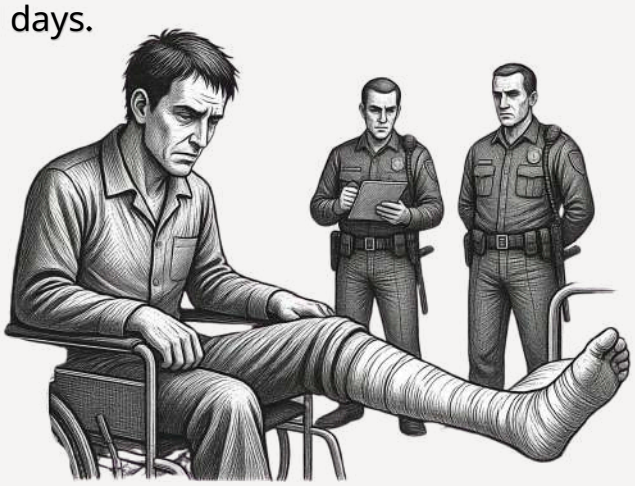
It is evident that detainees experience a systematic pattern of intentional medical neglect within detention facilities, where ill prisoners are deprived of essential treatment and care until their health deteriorates to a critical level that poses a direct risk to their lives. This intentional decline in medical care encompasses the postponement of routine examinations, limited access to specialists, and the deferral or outright denial of necessary surgical procedures. Consequently, illnesses progress, and health complications escalate, resulting in significant physical and psychological distress for detainees.

This pattern of egregious negligence suggests a clear intention to inflict serious harm upon detainees and represents a direct threat to their lives. Patients are left without adequate medical intervention, which exacerbates their injuries and ailments. Thus, this treatment cannot merely be classified as negligence or a failure to fulfill duty; it amounts to a comprehensive crime that jeopardizes the lives of detainees, considerably deteriorates their health conditions, and may ultimately result in their death.

[60] A lawyer's visit to prisoner Y. H. at Ramle Clinic on 19 May 2025.
[61] Interview conducted by Addameer with prisoner H. J. on 10 March 2026.

Medical Negligence Turns Diabetes into a Tragedy: The Amputation of Prisoner J.S.'s Leg at Sde Teiman[62]

Prisoner J. S. was arrested on 4 March 2024 in Hamad City, located in Khan Younis, and from the outset of his detention, he experienced severe conditions. Initially, he underwent a violent field interrogation aimed at coercing him into providing false confessions. During this interrogation, two soldiers approached him and forcefully struck his head against the wall approximately 13 to 15 times; this action caused him to collapse to the ground, after which they continued to assault him, inflicting multiple blows. Subsequently, he was transferred to the Sde Teiman Detention Camp. As a consequence of the physical abuse he suffered during the field interrogation, he fell ill the day after he arrived at the camp, losing his ability to move. Despite his persistent requests, his plea for medical treatment was rejected because there were no medications available for newly admitted prisoners. This situation persisted for several days.



On the eighth day, he developed a high fever, for which he was administered only paracetamol. He would frequently lose consciousness due to the oppressive heat. The following day, he regained consciousness to discover a significant amount of blood beneath him; his foot had been severely lacerated, splitting it in two. Due to his diabetes, the wound failed to heal properly. After numerous appeals from the other prisoners, an officer eventually arrived, and he was subsequently transferred to the camp's field hospital before being taken immediately for surgery.

Subsequently, the prisoner underwent a series of seven surgical debridement procedures in quick succession, approximately one every day or two, all performed under general anesthesia. He was restrained to the bed with handcuffs, blindfolded, and his legs were shackled, each leg secured to either side of the bed. After spending seven days in the field hospital, a decision was made to transfer him to an undisclosed external hospital. During the transfer, he experienced physical assault and verbal mistreatment inside the ambulance, where he was transported while handcuffed, shackled, and blindfolded, lying on a stretcher. Upon his arrival at the hospital, he was taken directly to the operating room without being informed about the nature of the surgical procedure or the specific type of surgery he was to undergo. Furthermore, he was prohibited from discussing his health status with the medical staff.

[62] Interview conducted by Addameer with prisoner J. S. on 25 October 2025.

Following the operation, he was returned to the field hospital at Sde Teiman, where he remained for five days. Throughout this period, his wound was regularly dressed. After these five days, a physician who introduced himself as Rabee came to assess his condition and informed him, "We will refer you to a senior surgeon at a major hospital." He was transferred to the hospital on the same day and underwent another operation, the specifics of which were unknown to him. He was then brought back to the field hospital, where the dressing of his wound continued. Subsequently, a doctor informed him that his life was at risk unless his legs were amputated. He was presented with a choice between preserving his legs or saving his life, without any explanation provided. He was instructed to sign the consent form for the amputation immediately, and out of fear for his life, he complied without hesitation. Two days later, he was moved to the hospital, where his right leg was amputated below the knee.

Despite his severely compromised health, the detainee was subjected to multiple interrogations at Sde Teiman. Initially, he endured a six-hour interrogation. Subsequently, military intelligence took over, during which he was subjected to torture for two consecutive days in the so-called "disco" room. An officer identifying himself as "General Sami" was present and issued threats of sexual violence using a stick. The first day of interrogation extended for approximately eight hours, during which he was physically assaulted while restrained in an electric chair. His hands and feet were connected to electrical wires, and he remained in this agonizing position for eight hours.

Although he was not electrocuted, he faced beatings from soldiers. Captain Sami seized his neck and forced his head backward against the chair, while another officer struck him three times in the face. Following the interrogation, he was confined to the "disco" room for 24 hours, receiving only insulin during this time. The extreme conditions of his detention and the severe medical neglect he experienced have left him unable to walk, with significant weakness and loss of sensation in his left leg.

For the complete testimony, please refer to:
https://drive.google.com/file/d/1BLdu2Jy5MthwpP65D9oj8dkir6z5Gvuk/view?usp=sharing

The medical negligence experienced by J. S., which included the disregard for a deep wound in a diabetic patient and the failure to address his treatment requests for several days, culminated in a permanent disability: the amputation of his right leg and weakness in his left leg. This case is one among many instances of similar medical malpractice.

S. H.: Medical Negligence Leading to 35 Surgical Debridement Procedures, a Platinum Implant, and Two Leg Amputations[63]

Prisoner S. H. was arrested on 18 March 2024, while in his hospital bed at Al-Shifa Hospital in the Gaza Strip. He had sustained a gunshot wound to his right leg above the knee, and his left leg also bore a bullet injury. Following his arrest, he was taken to the hospital yard, where he remained for about an hour. During this period, he endured severe beatings with rifle stocks and the boots of soldiers on his already injured legs. Furthermore, he faced verbal abuse and humiliation, along with being doused with cold water. He was unclothed, resting on his hospital bed due to his injuries, with only a blanket provided by the doctors for coverage. Upon his arrest from the hospital, he retained the blanket around his body, lacking any clothing beneath it.

Later that evening, around 10:00 p.m., he was arrested after having undergone three prior surgeries on his right leg, while his other leg was entirely bandaged. He was promptly transported to the Sde Teiman Detention Camp, arriving late Thursday night, still entirely unclothed, even lacking underwear. The authorities denied him the hospital blanket. He was immediately moved to the camp's field hospital. A significant wound was present on his right leg, extending from the sole of his foot to the knee, affecting both the front and back sides. Both injuries were substantial and open. He was slated for a metal plate implantation; however, the army's incursion into Al-Shifa Hospital and his subsequent arrest hindered the execution of this procedure at that time.

For the initial two days, he was confined to the field hospital, restrained with handcuffs and shackles to the bed, blindfolded, and received no medical examinations or changes to his wound dressings, all under the pretense that no specialist doctors were available on Friday and Saturday. It was not until Sunday, two days post-arrest, that several doctors arrived. They were clad in military uniforms beneath their white coats. After assessing his injury, the doctors mandated his immediate transfer to Soroka Hospital. He was transported there the same day, still handcuffed and blindfolded. Upon arrival, he was administered general anesthesia, underwent a procedure to cleanse the wound, and was subsequently returned to the field hospital on the same day. Due to the lack of treatment for five days following his arrest, the medical personnel discovered maggots on his legs and significant tissue damage, necessitating the removal of some necrotic flesh.

The following day, the doctors returned and arranged for yet another transfer to Soroka Hospital for the implantation of a platinum plate. The subsequent day, while being transported to the hospital, he was assaulted inside the ambulance by the soldiers accompanying him. Three soldiers and two medics escorted him, and throughout the journey, he endured repeated beatings with electric batons, which were applied near his ear to deliver electric shocks. The intensity of the electric shocks was exceedingly high.

[63] Interview conducted by Addameer with prisoner S. H. on 12 November 2025.

At the hospital, he underwent a surgical procedure to insert a metal plate into his right leg and was sent back to the field hospital on the same day. He stayed there for eight days, during which his wounds were regularly dressed. However, he was denied any pain relief, which resulted in considerable discomfort following the surgery. Moreover, he did not receive any antibiotics; only intravenous fluids were administered when specialist doctors, who were not part of the permanent staff at the field hospital, arrived. After eight days, the condition of his leg deteriorated, and white maggots were visible when the wound was examined.

Consequently, four specialist doctors, accompanied by an interpreter, informed him that amputation was necessary. He declined to sign the consent form for the amputation, prompting the interpreter to inform him that he would have an hour to reconsider. When the doctors returned an hour later, they inquired once more about his consent for the amputation. He reiterated his refusal. The interpreter then warned him, "If you do not agree to the amputation, you will be placed in the numbered graveyard," which compelled him to consent to the amputation under pressure and psychological manipulation. He was transferred to Soroka Hospital on the same day, remaining blindfolded throughout the journey.

Upon his arrival, he was presented with four documents written in Hebrew. The interpreter explained, "The doctors will attempt to treat it if possible, and if not, they will proceed with the amputation." He signed the documents, was blindfolded again, and taken to the operating room. Upon regaining consciousness from the anesthesia, he discovered that his right leg had been amputated approximately 10 centimeters above the knee. He was returned to the field hospital the same day. For ten days following the amputation, the wound was dressed without any pain relief or antibiotics. His leg became swollen, which he described as being "like a balloon." Consequently, he was readmitted to Soroka Hospital, where an additional 17 centimeters of his leg were amputated.

Three months later, the prisoner was moved to the detention cages of the camp, despite having a significant wound on his leg that remained unhealed due to infection and pus. He was assigned to Barrack A and was transferred to the nearby field hospital every ten days. For a duration of 45 days, he was placed in a wheelchair within the barracks and transported to the field hospital by the transport team. His visits to the hospital were restricted to checkups and dressing changes, with no medication provided. During this period, the other prisoners in the cages were unable to sit beside him due to the foul smell emanating from his leg. This led them to file complaints with the officer in charge, resulting in his transfer to the field hospital, where he stayed for 60 days. His wound was dressed daily, and he underwent cleaning procedures; in total, 10 complete cleaning operations were conducted under anesthesia.

Despite his severely compromised health, he was subjected to interrogation nine times while in the camp. The initial interrogation lasted eight hours, during which he was handcuffed to a chair. The interrogation was not continuous; they would leave him handcuffed to the metal chair, exit, and then return to pose further questions. The second interrogation lasted three hours, while the third lasted ten minutes, during which he was assaulted by the transport team while being taken for questioning.

He was moved to the "Disco" interrogation center for a duration of three days, during which he underwent five separate interrogations, each lasting thirty minutes. Recounting one of these interrogation experiences, he remarked, "In one session, there was a crescent-shaped plastic pole. They compelled me to lean backwards onto it, with my legs in contact with the ground, my back arched backwards, as if I were supine. I was balancing on one leg, as my other leg had been amputated. I endured this position for three hours. The agony was intolerable. I experienced back pain for some time, and the inmates in the barracks assisted me. There was also a detained physical therapist who attended to my needs."

For the complete testimony, please refer to:
https://drive.google.com/file/d/17qlGXExf2k6FlhmyxV7w4MZ_L9ytAZIx/view?usp=sharing

The situation involving prisoner S. H. should not be regarded as a singular event; instead, it clearly illustrates a systematic trend of severe violations that constitute medical crimes against prisoners, serving as an additional mechanism for mistreatment and retribution. Following his targeting in Gaza, he was denied the opportunity to complete his medical treatment; rather, he was arrested directly from his hospital bed. Subsequently, he endured 35 surgical debridement procedures, a platinum implantation, and two leg amputations due to the medical negligence he experienced. Had he been provided with adequate medical care from the outset of his detention, the amputation of his leg could have been avoided.

It is crucial to highlight that each time he was notified about the surgical procedure, it was done without any explanation and without providing him access to his medical records, at a moment when he should have been afforded comprehensive medical protection instead of being subjected to a relentless cycle of detention and interrogation. Despite his severely critical health status, he faced interrogation nine times, with his vulnerable physical condition being manipulated as a form of coercion and torture.

Sde Teiman's Field Hospital: Medical Negligence, Complicity, and the Imperative of Accountability

The field hospital located at Sde Teiman was created ostensibly to offer medical assistance to detainees in the camp after Israeli hospitals declined to accept them. Nevertheless, evidence suggests that this establishment failed to operate as a treatment center in accordance with medical and humanitarian standards. Rather, it transformed into a confined detention setting where healthcare was administered within a military context, devoid of even the most basic legal and ethical protections. This represents a serious violation of the responsibilities imposed on the occupying power as dictated by international humanitarian law. Ultimately, the hospital was shut down in response to the increasing documented abuses occurring within its premises.

Testimonies reveal that the events that transpired within the field hospital transcended mere medical negligence, escalating to acts of torture and cruel, inhuman, and degrading treatment, which are prohibited under international law. The suffering endured by the prisoners extended beyond the consequences of their injuries or illnesses; it encompassed systematic physical violence, including beatings and electric shocks, even while they were confined to hospital beds.

The detention conditions within the medical facility further illustrate severe indicators of gross medical negligence. Essential treatments were denied to prisoners, and their food was restricted to inadequate amounts that failed to satisfy even the most basic health standards. They were compelled to wear diapers continuously, enduring degrading circumstances, with their hands and feet restrained to the hospital bed and their eyes covered. This, coupled with other practices involving verbal and psychological humiliation, constitutes cruel and inhuman treatment and represents a blatant violation of the principle of maintaining human dignity.

Moreover, violence was employed in response to prisoners' grievances and requests for better conditions at this hospital. Prisoners were also intentionally exposed to harsh environmental conditions, including extreme cold, lack of clothing and blankets, extended periods of being handcuffed and blindfolded, and denial of personal hygiene.[64]

In this context, the role of the medical personnel operating within this facility is of utmost importance. International law and professional ethics mandate that they deliver care impartially and refuse to engage in or be complicit with any actions that infringe upon patients' rights. Consequently, remaining silent regarding these violations or functioning within a system that permits their occurrence is tantamount to complicity and a violation of professional obligations, thereby necessitating thorough investigation and accountability.

All of these occurrences amount to grave breaches of international humanitarian law and constitute international crimes, including torture and inhumane treatment, which necessitate investigations and the prosecution of all individuals accountable to uphold the principle of no impunity.

[64] For additional details regarding the field hospital, refer to the Sde Teiman Detention Camp published Addameer at https://www.addameer.ps/media/5499

The System of Impunity

The Israeli occupation has established a complex system of immunity aimed at shielding its forces from facing accountability for serious violations against Palestinian prisoners and detainees. This state of impunity extends beyond mere political reluctance, the lack of judicial independence, or ineffective complaint mechanisms. Instead, it arises from systematic institutional policies and procedural strategies that are intentionally crafted to hinder justice from its inception.

In the framework of the systematic genocide of detainees within Israeli detention centers, a thorough system was put in place to hide the atrocities committed against them. This system involved limiting access for lawyers and barring visits from family members and the Red Cross, thereby obscuring the reasons behind the deaths, especially considering the absence of autopsies for the overwhelming majority of martyr prisoners, which hindered the identification of the direct causes of their deaths.

Moreover, the act of enforced disappearance was executed against the prisoners, leading to the withholding of vital information regarding their fate, locations of detention, and their legal and health circumstances. This situation rendered it impossible to ascertain the precise number of prisoners, in addition to the lack of clear statistics on those who died while in custody. It has also been established that there was tampering with the medical records of prisoners, which undermines the integrity and dependability of medical evidence. Medical professionals who conducted autopsies on certain prisoners indicated that several critical medical details and information on their health conditions were omitted from their medical records, despite their significance and direct relevance to evaluating the causes and circumstances surrounding their deaths.[65]

The occupying authorities persist in withholding numerous autopsy reports from human rights organizations and legal representatives of the martyrs' families, thereby restricting the ability to determine the actual causes of death. Autopsies have only been performed in a limited number of instances. A response to a Freedom of Information request made by Physicians for Human Rights to the Ministry of Health and the Abu Kabir Forensic Institute indicates that between October 2023 and the end of March 2024—a timeframe during which 35 Palestinians are confirmed to have died while in Israeli military custody— has revealed that the army failed to transfer any bodies to the forensic institute for autopsy to ascertain the cause of death.[66]

Despite the entitlement of the deceased prisoner's family to request the presence of a physician of their choice to observe and oversee the autopsy process, numerous instances have been recorded where families were not informed of the autopsy date. This lack of notification precluded the presence of a doctor on their behalf, resulting in the autopsy being carried out without any independent supervision.

[65] PHR. "The autopsy report of the martyr Sakhr Zaghloul." Unpublished.
[66] PHR. "Deaths of Palestinians in Israeli custody." November 2025, p. 20.

In accordance with international standards, an autopsy should be conducted as promptly as possible following death, ideally within 48 hours of the body being received, to ensure an accurate assessment of the cause of death. Refrigeration or freezing of the body does not halt post-mortem changes; it merely postpones them. Decomposition and tissue putrefaction continue, adversely affecting diagnostic capabilities. Data from Physicians for Human Rights reveals that the average interval between the declaration of a prisoner's death and the performance of the autopsy was roughly 14 days, which constitutes a significant breach of international medical and legal standards. This delay contributes to the destruction of forensic evidence, obstructs the precise determination of the cause of death, and ultimately undermines the prospects for accountability and legal action.[67]

Despite the increasing number of testimonies and evidence documenting the deaths of Palestinian detainees in custody, along with disclosures of the severe violations they face, such as torture, neglect, and medical malpractice, the investigations that have been announced continue to be mere formalities that have not produced any concrete outcomes thus far. No individuals have been held responsible, and no clear findings have been released regarding any of these inquiries, whether related to the deaths of detainees or other offenses. As a result, the occupying authority has crafted these procedural actions with the intentional aim of hiding forensic medical data. This effectively obscures evidence that could substantiate claims of extrajudicial killings, deaths resulting from torture, or fatalities caused by excessive force, thereby maintaining a culture of impunity for offenders, both within the country and on an international scale.[68]

[67] Ibid. P. 23

[68] For further insights into the issue of impunity regarding crimes perpetrated against Palestinian prisoners, refer to the document titled "Out of Accountability: A Legal Report on the Policy of Impunity in the Context of Crimes Committed Against Palestinian Prisoners," which can be accessed at: https://www.addameer.ps/media/5685