

# U.S. Report Finds Human Disaster in Palestine

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A “humanitarian emergency” exists in the West Bank and Gaza Strip, is the conclusion of the Aug. 5 U.S. Agency for International Development (USAID) report, which contains the “preliminary findings” of a survey of more than 2,000 Palestinian households. But the survey—whose purpose was to uncover the extent of food shortages and humanitarian needs “since the onset of the second Intifada in the West Bank and Gaza Strip (WBGs) began in September 2000”—actually shows that a policy of deliberate genocide has been imposed on the citizens in the occupied territories by the Israeli government of Ariel Sharon. Israel’s war against Palestine has brought an already fragile economy to a halt, resulting in conditions of slow death.

In the broadest terms, the initial data document that nearly 55% of Palestinian children, ages 6 months to 5 years, suffer from either acute or chronic malnutrition, varying in degree from severe to moderate to mild, while almost 20% of children and 11% of childbearing-age women have severe or moderate anemia throughout the region. The direct correlation of these conditions to the Israeli war drive is explicit in the report. The “WBGs, and especially the Gaza Strip, face a distinct *humanitarian emergency* in regards to acute, moderate, and severe malnutrition,” which is exacerbated by Israeli military “curfews, incursions, border closures, and checkpoints” which disrupt supplies of food.

In *EIR*’s July 19, 2002 exposé, “Sharon’s Collective Punishment: A War Crime,” we documented that between June 19 and 24, at the height of Israeli incursions, curfews, and sieges of just seven of the most populated towns and cities of the region, more than 1.4 million Palestinians were confined. Supplies of essential services were cut off, and access to potable water and medical aid was halted. Also in June, the UN World Food Program reported that because of a collapsed economy resulting from Israeli security operations, food aid was needed for 800,000 Palestinians in the West Bank, Hebron, Jenin, and Nablus alone. World Bank estimates are that 50-60% of Palestinians now live in poverty; i.e., on income of less than \$2 a day.

The USAID data now add to an indictment of Prime Minister Sharon for his willful infliction of “conditions of life calculated to bring about [the] physical demise in whole or in part” of a target group, expressly prohibited by the 1951 Convention on the Prevention and Punishment of the Crime

of Genocide.”

Israeli government reaction to the report was swift. The Israeli daily *Ha’aretz* reported on Aug. 7 that Israeli Maj. Gen. Amos Gilad, Israel’s coordinator of activities in the occupied territories, protested that there is no hunger there. Demonstrating that he is a candidate for a war crimes tribunal, Gilad told the Israeli Knesset Foreign Affairs and Defense Committee, “I say there is no hunger in the territories. Hunger is when there is a lack of basic commodities. Hunger is when people have swollen bellies and fall over dead. There is no hunger now.” Gilad’s adviser, Dr. Yaakov Eldar, attempted to discredit the report by asserting that Palestinians were involved in the surveys, and therefore the report has a bias.

The USAID report, “Preliminary Findings of the Nutritional Assessment and Sentinel Surveillance System for West Bank and Gaza,” is the initial compilation of data collected beginning in June 2002. The USAID’s West Bank/Gaza Mission, in coordination with Johns Hopkins University School of Public Health, CARE International’s Emergency Medical Assistance Program, and Al Quds University in Jerusalem, have used their collective expertise in the fields of public health and humanitarian aid to devise a “three-component nutritional assessment” comprised of household, market, and clinic surveys. It is designed to “assess the causes of malnutrition and anemia” so as to pinpoint areas of strategic intervention to alleviate the distress. To complement this, due to “the curfews, road closures,” and movement “restrictions placed on . . . the Palestinian population,” a “sentinel surveillance system” was initiated to “measure humanitarian health indicators including food security.” The current report does not yet include data from the clinical survey, which will be completed at the end of August, nor final data from the household and market surveys, which will continue into early September. A final report is expected in September.

## Acute and Chronic Malnutrition

The reader is reminded that the root cause of this unfolding disaster of hunger is the denial of economic development, a condition imposed by Israel’s continuous occupation of the Palestinian territories, and now exacerbated by the brutal war conditions. Taking the current results of 1,000 households surveyed throughout the West Bank/Gaza Strip, evaluating the “most vulnerable groups”—i.e., women and children—and utilizing a “three-stage stratified random sampling” along with internationally accepted medical standards, the USAID report shows that cumulatively 54.5% of Palestinian children from 6 months to 5 years of age suffer from either acute or chronic malnutrition, which includes severe, moderate, and mild cases of malnutrition. “Acute malnutrition or wasting reflects inadequate nutrition in the short term period immediately preceding the survey.” Whereas “chronic malnutrition or stunting,” indicates a “past growth failure, implying a state of longer term . . . undernutrition.” The chronic form can lead to serious growth and development delays.

**Table 1** shows that for children 6 months to 5 years old, for

TABLE 1

### Children 6 Months to 5 Years With Acute or Chronic Malnutrition

(Percent)

	West Bank	Gaza Strip	WBGs*
Acute cases, mild to severe	16.1	27	22.3
Chronic cases, mild to severe	25.9	37.3	32.3

\*West Bank and Gaza Strip combined

Source: *EIR* analysis of USAID Aug. 5, 2002 report, "Preliminary Findings of the Nutritional Assessment and Sentinel Surveillance System for West Bank and Gaza."

severe, moderate, and mild cases, across the WBGs region, cumulatively 22.3% suffer from acute malnutrition and 32.3% from the chronic form. Of the 22.3% acute cases in WBGs, 9.3% are moderate to severe cases, which "is considered an emergency by most humanitarians and public health officials," the USAID report notes. In just the Gaza Strip the moderate to severe cases are well above this emergency norm, standing at 13.2%.

A breakout by each area of the cumulative incidents is a grim picture. Within the Gaza Strip alone the rate of incidents of the acute form is 27% for all types, or 3.8% severe, 9.4% moderate, and 13.8% mild. In the West Bank, acute cases total 16.1%, or 0.2% severe, 4.1% moderate, and 11.8% mild. But it is the longer term chronic malnutrition statistics which reveal the impact of Israel's new Israeli Defense Forces chief Moshe Ya'alon's "war of attrition" strategy.

Chronic cases account for nearly one-third of the children surveyed in the WBGs. If we look at the rate of incidence in each area, we see the makings of a holocaust. Chronic or stunting cases in the Gaza Strip totaled 37.3% of the children surveyed, with 7.9% severe, 9.6% moderate, and 19.8% mild. In the West Bank, total cases constituted 25.9%, with 2.9% severe, 5% moderate, and 18% mild.

Another metric used in the survey was the incidence of anemia found in children and women in the WBGs. Anemia is a by-product of malnutrition which can cause impaired learning and growth (in children), low birth weight and/or premature infants, fatigue and diminished physical and mental activity (in adults), and decreased immunity from infectious diseases (all ages). The report found, to date, "Nearly one-fifth of Palestinian children (6 months to 5 years) are moderately and/or severely anemic" across the whole WBGs. Specifically, cumulatively 19.7% suffer from severe or moderate anemia. If one adds to this the number of "mild" cases of anemia in these children, then cumulatively an incredible 43.8% of WBGs children suffer from anemia (see **Table 2**). Anemia was also measured in women ages 15 to 49 years. In the WBGs cumulatively, 10.9% of women suffer from severe to moderate anemia. Add this to the number of "mild" cases, and the percentage shoots up to 48.6% (see **Table 3**).

TABLE 2

### Children 6 Months to 5 Years With Anemia

(Percent)

	West Bank	Gaza Strip	WBGs*
Severe	0.5	0.2	0.3
Moderate	20.4	18.7	19.4
Mild	22.8	25.2	24.1
<b>Total</b>	<b>43.7</b>	<b>44.1</b>	<b>43.8</b>

\*West Bank and Gaza Strip combined

Source: *EIR* analysis of USAID Aug. 5, 2002 report.

TABLE 3

### Women 15 to 49 years With Anemia

(Percent)

	West Bank	Gaza Strip	WBGs*
Severe	0.1	0.4	0.3
Moderate	9.4	11.6	10.6
Mild	34.3	40.8	37.7
<b>Total</b>	<b>43.8</b>	<b>52.8</b>	<b>48.6</b>

\*West Bank and Gaza Strip combined

Source: *EIR* analysis of USAID Aug. 5, 2002 report.

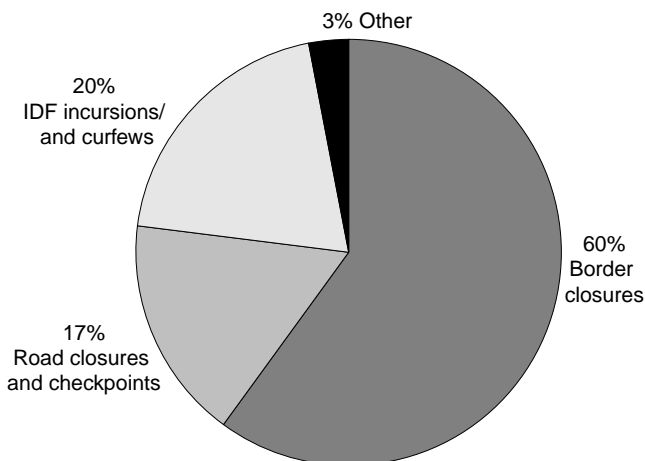
## IDF Operations Disrupt Food Supplies

The purpose of the nutritional assessment "market survey" is to "evaluate whether staple foods of the Palestinian diet were available in the marketplace"—comparing month-over-month supplies—and to "identify significant causes" of disruptions of food stuffs to retail and wholesale businesses. The U.S. researchers found that the availability of foodstuffs was insufficient. Dairy products, particularly powdered milk and products for infants, were lacking in half the food shops, with a severe shortage in the Gaza Strip. A total of 800 retailers and wholesalers across the WBGs were surveyed, in a two-stage stratified random sample including urban, large village, refugee camp, and small village establishments.

The survey found that during June 2002—at the height of the Jenin and Ramallah sieges—"significant marketplace disruptions for wholesalers and retailers" resulted from Israeli military actions. For example, 52% of West Bank wholesale disruptions were due to road closures and checkpoints, and 34% due to Israeli incursions and curfews. In Gaza, the numbers were bigger: 63% of wholesale disruptions were a result of border closures, 18% due to road closures and checkpoints, and 15% from IDF incursions. Gaza Strip retail outlets reported similar figures, although they suffered a higher rate of food supply disruptions due to IDF incursions and curfews (20%) than in the West Bank (see **Figure 1**).

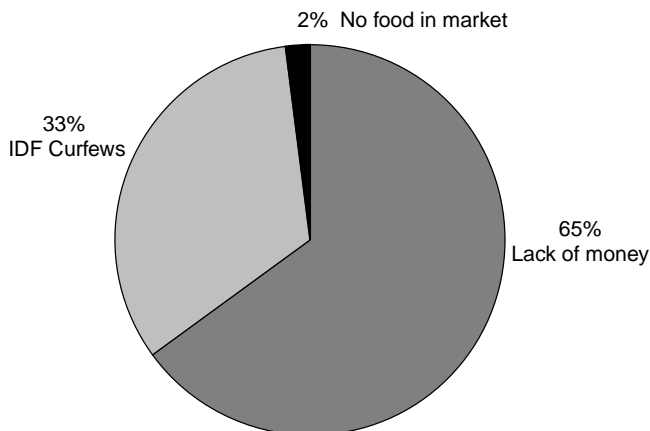
From the "sentinel surveillance system" data collected

FIGURE 1  
**Gaza Strip Retail Outlets,  
 Causes of Disruptions in Food Supply**



Source: USAID Aug. 5, 2002 report, "Preliminary Findings of the Nutritional Assessment and Sentinel Surveillance System for West Bank and Gaza."

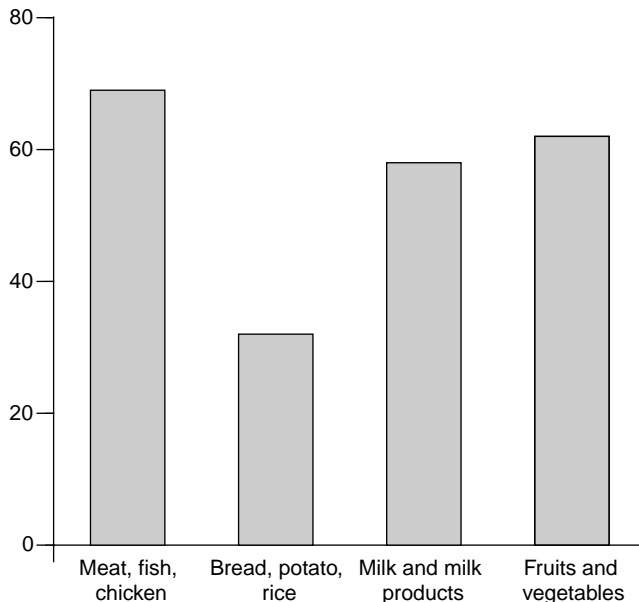
FIGURE 2  
**West Bank/Gaza Strip,  
 Reasons for Decreased Food Intake**



Source: USAID Aug. 5, 2002 report.

from 1,280 households, a clear picture of reduced food consumption emerged. "Throughout all districts of WBGs 56.6% reported that the amount of food eaten by household members had decreased for more than one day during the previous two weeks" surveyed. Of the households reporting this, "two-thirds cited lack of money and one-third cited curfews/closures as the reasons" (see **Figure 2**). In the eight-week period

FIGURE 3  
**West Bank/Gaza Strip,  
 Percent of Homes Denied a Healthy Diet**



Source: USAID Aug. 5, 2002 report.

for this data, food prices did not change. Yet, 53% of households were forced to borrow money to get food, while 17% were forced to sell assets to buy food! These rates were higher in various towns, ranging from 88.8% to 70% for borrowing, and 41% to 32% forced to sell belongings.

Lastly, the study confirms that the "inability to purchase high-protein foods is consistent with the diminished protein consumption" data of the household and market surveys detailed above. A high-protein diet is essential to correct anemia and malnutrition. Yet, **Figure 3** shows that 69% of households surveyed bought less meat, fish, and chicken, while 58% purchased less milk and milk products, 62% had less fruit and vegetables, and *almost a third (32.3%) couldn't even buy bread, rice, and potatoes*. The wartime causes of food supply disruptions described above "affected key high-protein food" consumption, especially "infant formula and powdered milk," the report concludes.

The situation could be reversed if immediate action were taken. USAID notes, "Today's acute malnutrition . . . will be tomorrow's chronic malnutrition . . . unless a variety of interventions—economic, political, and health-related—are made. The Sharon government's intentional "starvation of civilians as a method of warfare" and willful "impeding of relief supplies," all in violation of the Geneva Conventions, must cease, and full-scale economic development projects must be launched, to halt this holocaust.