- Medact, London, UK
- ² Centre for Humanitarianism and Social Inclusion, Institute of Epidemiology and Health Care, University College London, UK
- 3 Health Workers for Palestine, London, UK
- ⁴ University Hospital of North Norway, Tromsoe, Norway

Correspondence to: sara.elsolh@proton.me Cite this as: *BMJ* 2025;391:r2347 http://doi.org/10.1136/bmj.r2347 Published: 07 November 2025

Torture and health worker complicity in Israeli detention sites

Sara el-Solh, ¹ James Smith, ^{1,2} Amira Nimerawi, ³ Mads Gilbert⁴

Multiple credible reports have emerged since 2023 detailing the torture and inhumane treatment of Palestinians held in Israeli detention sites. ¹⁻⁸ At least 75 Palestinians—including children—have died or been killed while held in Israeli detention since October 2023. ⁹ These reports outline in graphic detail the extent of state-sanctioned Israeli violence against the Palestinian people and clearly expose repeated violations of international law. Recently released Palestinian hostages—held without charge—have reported repeated beatings and horrific conditions in Israeli prisons and detention sites. ¹⁰ Several reports also raise urgent concerns about the role of Israeli health workers in acts of torture, and the failure to prevent such acts. ^{2 4 8 11}

Patterns of torture and Israeli medical worker complicity

Torture by Israeli soldiers and health workers is not new. Depraved acts have been extensively documented over several decades by United Nations independent experts,12 and many human rights organisations including the United Against Torture Coalition, 13 Amnesty International, 14 Human Rights Watch, 15 and B'Tselem. 16 By the Israeli government's own admission, torture has been used "systematically" against Palestinian people. 17 Historical and contemporary violations include extreme physical, psychological, and sexual violence, the denial of medical care, sleep deprivation, the use of prolonged solitary confinement, attacks by dogs under the control of their handlers, being urinated on, and prolonged shackling of limbs—in some cases causing injuries requiring amputation—along with other forms of extreme and degrading treatment.1-8

After a barbaric incident in July 2024, nine Israeli soldiers were arrested in relation to their collective participation in the torture and sexual assault of a Palestinian man held in Israeli detention. 18 So violent was this attack that the man was left in critical condition with ruptured intestines, broken ribs, and lung trauma. Despite months of reports by the UN and investigative journalists detailing the abuse of Palestinian detainees, this was the first time that Israeli soldiers had been arrested in relation to such crimes. 18 Elected members of the Israeli Knesset joined protests in Israel in support of the soldiers, 1819 while a survey conducted by the Israeli Institute for National Security Studies found that 65% of Israeli Jews believed the arrested soldiers should not face criminal charges, both of which highlight an entrenched culture of wider political and public support for such violence.²⁰ The Israeli lawyer Yifat Tomer-Yerushalmi who leaked the footage of the attack has since been arrested for doing so, with the government and several politicians accusing the lawyer of damaging Israel's global standing and

casting Tomer-Yerushalmi's efforts to prosecute violence as a project to undermine the state.²¹

Particularly troubling is the longstanding and well documented complicity of Israeli health workers in torture, ^{22 · 25} wider detention practices, and the overarching conditions of occupation and apartheid. Both *The BMJ* and *The Lancet* have previously reported on violations, ^{24 25} which collectively contravene a multitude of laws, conventions, professional codes, and the core tenets of medical ethics. ^{26 27} Recent survivors of detention have reported that Israeli health workers have been physically violent towards detainees, knowingly denied medical treatment, and neglected detainees' injuries. ^{2 4 8 11}

Israeli whistleblowers have reported that detainees at the Sde Teiman detention site in Israel were denied analgesia during painful procedures, while doctors working at the site were told not to write their names on official documents, with one doctor revealing that "officials feared they could be identified and charged with war crimes."28 29 Others have reported they lacked the training for treatments and procedures they were made to administer.²⁹ An Israeli Ministry of Health policy document reviewed by investigative journalists working for the New York Times explicitly stated that detainees treated at the Sde Teiman field hospital should be blindfolded and handcuffed to their beds.²⁹ Drawing from extensive testimonials and evidence, Physicians for Human Rights Israel produced a report on medical ethics and Palestinians in detention, concluding that "conditions and the medical care standards at Sde Teiman are a low point for medical ethics and professionalism," and "that the Israeli healthcare system has enabled the ethical violations previously outlined concerning the medical treatment of Gazan detainees."30

Targeting Palestinian healthcare workers

The total number of Palestinians held in Israeli prisons and detention sites exceeded 9100 as of October 2025.³¹ Detailed reporting from Healthcare Workers Watch Palestine published in July 2025 identified 405 cases of unlawful detention of Palestinian healthcare workers since October 2023. 32 At least five Palestinian healthcare workers are known to have been killed in Israeli detention in the same period.³³ Among those killed was Adnan al-Bursh, a respected orthopaedic surgeon who was illegally detained by Israeli forces in December 2023. He was held without charge and died in prison in April 2024 after severe mistreatment.³⁴ As of October 2025, at least 95 Palestinian healthcare workers remained in detention,³⁵ including Hussam Abu Safiyeh, paediatrician and director of Kamal Adwan Hospital, who was abducted and unlawfully detained by Israeli forces in December 2024.³⁶

These are not isolated incidents and must be understood in relation to evidence that suggests a broader strategy of targeting healthcare professionals, aimed at undermining the Palestinian healthcare system and maximising harm inflicted against the Palestinian people.³⁷⁻³⁹ This strategy extends beyond the detention and torture of healthcare workers, to the killing of more than 1700 Palestinian healthcare workers in Gaza since October 2023,⁴⁰ and clearly documented patterns of systematic and targeted destruction of healthcare infrastructure, including hospitals, clinics, ambulances, and essential medical equipment.⁴¹⁻⁴⁴ These acts constitute clear violations of the Fourth Geneva Convention, intended to protect medical personnel during armed conflict.⁴⁵

Legal frameworks and ethical commitments

Complicity in torture represents not only a violation of several legal covenants and ratified agreements but also the profound betrayal of medical ethics, ²⁶ ²⁷ ⁴⁶ ⁴⁸ transforming medicine from an act of care into one of repression. International ethical codes explicitly forbid such involvement; the United Nations Principles of Medical Ethics deem participation in torture a gross violation, ⁴⁷ while the World Medical Association's (WMA) International Code of Medical Ethics affirms that physicians must never exploit medical knowledge to violate human rights. ⁴⁸ These standards represent a clear commitment to professional integrity and ethically responsible medical practice.

Documentation and institutional silence

Despite decades of extensive documentation exposing the Israeli State's systematic use of torture, these grave violations have been persistently disregarded, fostering a culture of impunity that enables repeated and flagrant breaches of the Palestinian people's fundamental human rights. Particularly alarming is the documented complicity and, in many cases, the active participation of Israeli health workers in acts of torture. 22-25 The Israeli Medical Association (IMA) has failed to investigate allegations of complicity among its members, ⁴⁹ 50 while the WMA and many national medical associations have failed to act in a timely and decisive manner on growing evidence of torture and medical complicity, which now spans several decades. In this context, it is important to note that medical associations (including the WMA), associated trade unions, and specialty bodies such as royal colleges, societies, and registration bodies all bear a responsibility to establish, promote, and enforce ethical codes of practice for their members.

We maintain that a failure to explicitly condemn violations in a timely manner, to clearly name perpetrators, and to demand accountability and remedial intervention, constitutes complicity. Medical institutions including the WMA, many national medical institutions, professional bodies, academic institutions, reputable journals, and others have failed to forcefully condemn and act on clear patterns of violence. Their failure to sever ties with complicit institutions and join calls for international accountability and justice, raises urgent questions about double standards, the politicisation and selective application of medical ethics, and our wider professional values as a global healthcare workforce. ⁵¹

The IMA must be pressed to acknowledge, independently investigate, and—most importantly—meaningfully challenge the systems of violence and oppression in which its members have actively participated or are otherwise complicit. As the IMA has thus far repeatedly failed to act, global networks of medical institutions such as the WMA must immediately revoke the IMA's status and sever ties with Israeli medical institutions, as was the case with the removal of the medical associations of the apartheid

states of South Africa and Rhodesia in 1970.⁵² To this end, in a long overdue move, members of the BMA voted at the June 2025 annual representative meeting to "suspend engagement with the IMA," though with the caveat that this is only "until it affirms medical neutrality and condemns attacks on healthcare in Gaza."⁵³ ⁵⁴

The culture of impunity that has allowed flagrant, repeated breaches of rights to persist must be brought to an end. The thousands of Palestinians held in Israeli detention sites must be immediately released and provided with the reparative care they require. Among them are at least 95 Palestinian healthcare workers, 35 the health and safety of whom remains under threat. 55 56

There is no place for the misuse of medicine as an adjunct to state repression and violence. Such practices represent an abhorrent derogation of our professional values and responsibilities and are gross violations of our Palestinian colleagues' basic right to life, health, and dignity. Torture not only destroys the lives of its victims but health worker participation and complicity in such acts corrodes the integrity of the health professions, and all those individuals and institutions that enable it. In the face of such violations, we have a moral and legal obligation, not only to speak out, but to act.

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