



Capability Statement

The West Bank

Tailored Risk Management

Nearest centre of medical excellence

Use our emergency app to initiate an emergency response and access our worldwide network of medical assistance care.

For medical evacuations within the West Bank, the recommended Centres of Medical Excellence (CMEs) are:

East Jerusalem – The most advanced medical care available to West Bank residents is located in East Jerusalem, including tertiary facilities such as Al-Makassed and Augusta Victoria. These provide 24/7 emergency care, oncology, paediatric ICU, and complex surgical services.

Access is only possible with prior permit approval and is subject to Israeli checkpoint closures. As of June 2025, access is limited to daylight hours, and checkpoints may close without notice during Israeli military operations. Coordination through humanitarian or Red Crescent channels is essential.

Nablus – Local tertiary facilities are available and support emergency care, trauma stabilisation,

and some surgical services. However, recent military incursions and clashes have disrupted road access and overburdened the system.

Hebron – Hospitals provide basic ICU and trauma services but face capacity constraints. Violent unrest and road closures frequently interrupt patient transport in and out of the city.

Bethlehem – Smaller hospitals serve the southern West Bank with paediatric and general medicine services. These are suitable for initial care and community level stabilisation.

Note: *Evacuation to Tel Aviv or other Israeli cities is not advised due to current missile threats and security restrictions. Amman, Jordan remains the most reliable regional CME destination for advanced care and onward transfer.*

Medical Evacuation Options

1 Emergency Extraction to Home Nation for Treatment	2 Emergency Extraction to Closest Specialist Treatment before Repatriation	3 Ground/Maritime extraction to stabilisation/treatment (In- country no fly)
<p>Direct air evacuation is not possible from within the West Bank. The most reliable route remains ground ambulance transfer to Queen Alia International Airport (Amman) via the Allenby/King Hussein Bridge, subject to real-time opening status. Ben Gurion Airport (Tel Aviv) is not currently recommended due to active airspace threats and political barriers for non-Israeli nationals. All evacuations require multi-agency coordination and pre-authorized movement permissions. Security escort is advised at all stages.</p>	<p>In-region stabilisation is only feasible at select hospitals in Nablus or Hebron under stable conditions. If access to East Jerusalem is possible, it remains the preferred first-stop CME, only during daylight, with checkpoint clearance. If East Jerusalem is inaccessible, transfer to Amman should be prioritised. Once stabilised, air ambulance or commercial medical escort flights can be arranged onward to the home country or third country CMEs (e.g., Cyprus, Turkey and Europe).</p>	<p>Ground movement inside the West Bank is volatile. Road closures, IDF operations, and spontaneous protests may halt all movement. Amman remains the safest and most predictable external CME. Evacuation to Amman is via Allenby Bridge; contingency overland routes (e.g. Wadi Araba to Aqaba) may be activated if central crossings are closed. No maritime option exists.</p>

Vaccination Requirements

Vaccine	Advice
Routine vaccines recommended (up to date)	Chickenpox (Varicella)
	Diphtheria-Tetanus-Pertussis
	Flu (influenza)
	Measles-Mumps-Rubella (MMR)
	Strongly recommended due to the recurrent outbreaks and disrupted immunisation. The West Bank is currently under a CDC Level 1 Global Alert for Measles Travellers are at risk if not fully vaccinated at least two weeks prior to departure or have not had measles in the past. All international travellers should be fully vaccinated against measles with the MMR vaccine, including an early dose for infants 6-11 months.
	Polio - Strongly recommended, as The West Bank is currently under a CDC Level 2 Global Polio Alert Required for stays over 4 weeks. The West Bank is a cVDPV2 outbreak zone. ICVP, 'Yellow Card' documentation may be required due to ongoing transmission.
Shingles	
COVID-19	Strongly recommended for all travellers . Vaccine access in The West Bank is limited.
Hepatitis A	Strongly recommended for all travellers, waterborne risk is high due to water contamination and limited food safety regulations
Hepatitis B	Recommended, particularly for those with exposure to blood or bodily fluids and unsterile equipment.
Typhoid	Recommended due to compromised sanitation particularly for field work and operations
Rabies	Strongly recommended due to the rising presence of rabid dogs, particularly for rural responders. Immediate medical attention is required in case of a bite or scratch, as post-exposure prophylaxis is not available.
Cholera	Recommended for responders, long term or high risk deployments, as outbreaks have been reported in The West Bank
Yellow Fever	Required if transiting from endemic countries

Special Precautions:

- CDC Level 1 Global Alert (*Measles*):**
As of June 2025, the CDC has issued a Level 1 Global Health Alert for *measles*. The West Bank remains at elevated risk due to disrupted routine immunisation, healthcare access delays, and densely populated refugee camps. Local outbreaks have been noted in Nablus and Hebron governorates. All travellers must be fully immunised with two documented doses of the *MMR* vaccine. Infants aged 6–11 months should receive an early dose prior to entry.
- CDC Level 2 Global Alert, Regional Poliovirus Spillover Risk (*Polio*):**
While no confirmed cases of circulating vaccine-derived *Polio* have been reported in the West Bank in 2025, neighbouring regions remain affected. A one-time adult *IPV* booster is strongly recommended for stays exceeding four weeks. Travellers may be asked to present an *ICVP* ('Yellow Card') on exit. Wastewater surveillance is minimal and delays in detection are possible.
- Airborne and Droplet Infections (*Measles, Tuberculosis, Covid-19, Hantavirus, MERS*):**
Transmission of *Measles* is facilitated in crowded urban areas and shelters. *Tuberculosis* is endemic and difficult to detect in under-resourced clinics. Long term personnel should consider pre- and post-deployment *TB* screening. *Covid-19* remains endemic, with low local testing and vaccination rates. All personnel should be fully vaccinated and boosted. *Hantavirus* may occur in rodent-infested ruins; exposure is possible via inhalation of dried urine or faeces. *Middle East respiratory syndrome (MERS)* is a rare but regionally present illness; awareness of symptoms resembling atypical pneumonia is advised in returned travellers.
- Vector-Borne Diseases (*Leishmaniasis*):**
Cutaneous leishmaniasis is endemic in Jericho, Tubas and Jenin. Risk increases in areas with poor drainage or open waste. Preventive measures include applying at least 60% *DEET*-based repellent, wearing long sleeves, and sleeping under insecticide-treated nets. No vaccine is currently available.
- Water and Foodborne Infections (*Cholera, Typhoid, Hepatitis A*):**
Sanitation and potable water access vary. Though no formal *cholera* outbreak has been declared, conditions in the Jordan Valley camps suggest risk is elevated. *Typhoid* and *Hepatitis A* are endemic. Only consume bottled or treated water, avoid raw foods, and ensure hand hygiene is strictly observed.
- Zoonotic Hazards (*Rabies*):**
Rabies remains a credible threat in rural and peri-urban regions. Canine vaccination coverage is limited. Pre-exposure vaccination is advised for travellers in field or animal handling roles. Post-exposure prophylaxis is not available. All animal bites or scratches require urgent medical evacuation.
- Bloodborne Infections (*Hepatitis B, HIV*):**
Due to inconsistent sterilisation and low screening capacity, there is elevated risk of *Hepatitis B* or *HIV* via injections, transfusions or minor procedures. Travellers should avoid unnecessary interventions and carry personal sterile kits if medically trained. *HIV PEP* is not widely available in the West Bank.
- Environmental and Hygiene Hazards (*Leptospirosis, Air quality*):**
Seasonal flooding and wastewater exposure elevate the risk of *leptospirosis*, particularly in lowland areas. Wear protective clothing and boots; disinfect any open wounds. *Air quality* is often poor in cities like Hebron and Ramallah due to protest fires, dust, and pollution. Use *N95* or *FFP2* masks in smoky or unventilated environments

- **Antimicrobial Resistance (AMR):**
Unregulated antibiotic use and poor diagnostic capacity have contributed to a rise in *AMR*. Skin and gastrointestinal

infections may not respond to first-line treatment. Responders should confirm sensitivities where feasible, avoid empirical overuse, and practise strict infection prevention and control (*IPC*).

Political evacuation options

In the event of widespread unrest, Israeli military escalation, or collapse of local governance, ground based evacuation remains the only viable strategy for foreign personnel in the West Bank.

Air evacuation from within the territory is not possible.

Allenby/King Hussein Bridge is the primary overland exit into Jordan. It is operational as of June 2025 but subject to sudden closure during protests, military raids or Israeli lockdowns. All movement through this crossing requires pre-authorisation, valid documentation and close coordination with Israeli and Jordanian authorities.

A secondary overland route exists via Wadi Araba Crossing near Eilat/Aqaba. This longer southern corridor traverses Israeli-controlled Route 90 and is less exposed to West Bank protest flashpoints. Though time consuming, it may remain open during Allenby closures and has been successfully used in past escalations. Evacuation to Ben Gurion Airport (Tel Aviv) is not feasible under current conditions.

As of late June 2025, Tel Aviv remains under intermittent missile alert, with civilian movement restricted and international air carriers suspending operations.

Foreign missions are not conducting evacuations from this airport and access for non-Israeli nationals is highly restricted.

In severe scenarios where border exits are closed, secure hibernation protocols advised.. Safehouse locations in Ramallah and East Jerusalem should be pre-stocked with at least two weeks of food, water, medical supplies, fuel for generators and backup communications.

Sites should be selected for their distance from known conflict targets (e.g. police compounds or militant enclaves) and benefit from reinforced structures and security teams.

Early evacuation is always preferable. If mobility is compromised, we advise full hibernation until a humanitarian corridor or ceasefire window allows overland movement to Jordan.

Passport and Visas

Entry into the West Bank is controlled by Israel. As of January 2025, all visa-exempt nationals must obtain an Electronic Travel Authorisation (ETA-IL) prior to arrival in Israel, whether entering via Ben Gurion Airport or the

Allenby/King Hussein Bridge.

The Allenby Bridge crossing does not issue visas on arrival for most nationalities. Travellers who plan to exit into Jordan must possess a valid Jordanian visa in advance, unless their nationality is specifically exempt under land-border entry regulations.

Passport validity of at least 6 months is required for both Israeli and Jordanian authorities. Movement between West Bank cities and Israeli-controlled territory requires

valid ID at all times. All non-Israeli nationals may be stopped and questioned at checkpoints; we strongly recommend carrying travel documents on your person.

	Visa Required	Passport Required
Other EU	Yes, advance ETA-IL	Valid ≥ 90 days + 1 blank page
USA	Yes, advance ETA-IL	Valid ≥ 90 days + 1 blank page
Canadian	Yes, advance ETA-IL	Valid ≥ 90 days + 1 blank page
Australian	Yes, advance ETA-IL	Valid ≥ 90 days + 1 blank page
British	Yes, advance ETA-IL	Valid ≥ 90 days + 1 blank page

Political considerations

Local closed sources advisors	2 , Reliable reporting via humanitarian, diplomatic and NGO channels.
Stable political governance	No , the Palestinian Authority's influence is weakening; control is fragmented.
Kidnap and ransom capability	No , criminal kidnapping remains rare, but crisis-driven opportunism may emerge. K and R capabilities are not available in country nor can be flown in.
Significant political events imminent	Ongoing , Israeli military operations continue in Jenin, Nablus, and southern Hebron.
Borders	<p>The West Bank's borders are complex and heavily controlled. All crossings are subject to closure without notice due to military activity or unrest. The five principal exit or movement points are:</p> <ul style="list-style-type: none"> - Allenby/King Hussein Bridge (to Jordan): The primary international exit for Palestinians and most foreign evacuations. Controlled by Israeli and Jordanian authorities. Operational but prone to sudden closure. Jordanian visas must be pre-obtained. - Qalandia Checkpoint (to East Jerusalem): Key crossing from Ramallah to East Jerusalem. Access restricted to those with Israeli issued permits. Frequently congested and subject to closure during IDF operations. - Tarqumiyah Crossing (to Israel Proper): Located near Hebron. Used for limited for goods/civilians' movement. Heavily secured and only accessible with prior Israeli coordination. - Wadi Araba Crossing (via Eilat to Aqaba, Jordan): Secondary international exit via southern Israel. Requires full Israeli transit. Longer route but often remains open during Allenby closures. - Green Line Crossings (internal boundary points): Includes Huwwara, Checkpoint 300 (Bethlehem), and the Container Checkpoint. Used for intra-West Bank and East Jerusalem access. Highly variable status depending on local unrest or IDF operations

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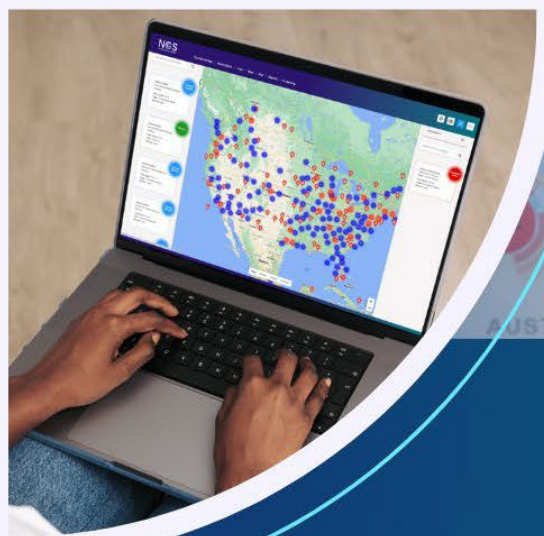
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