



# **NGO Malpractice: MSF (Doctors Without Borders) and the Gaza “Genocide” Campaign**

**E. Levenson and Gerald M. Steinberg**



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Institute for NGO Research R.A (#580465508) | 33 Pierre Koenig St., Jerusalem, Israel 9346941

Phone: +972-2-566-1020 | [mail@ngo-monitor.org](mailto:mail@ngo-monitor.org) | [www.ngo-monitor.org](http://www.ngo-monitor.org)

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*“They have eyes but will not see; they have ears but will not hear!” Jeremiah, 5:21*

*“Our teams report what they see with their own eyes, and what they themselves experience.” MSF*

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## Executive Summary

This report presents a detailed history and analysis of the transformation of MSF (Doctors Without Borders) into a leading source of false accusations and demonization targeting Israel. The comprehensive study traces initial MSF involvement in Gaza and the introduction of politicized commentary and bias into “testimonies” from staff and volunteers, and in reports on medical and health services.

Following the October 7, 2023 Hamas atrocities, MSF joined other influential NGOs in the intensive advocacy campaign that labeled the Israeli response as “genocide,” based on manipulated and distorted evidence to support a predetermined conclusion. The accusations rely on invented criteria and unverified evidence, while blatantly [omitting essential details and context](#): large-scale militarization of hospitals and military requirements for neutralizing a terror organization with a massive underground network embedded in civilian infrastructure. The political campaign, including in social media, parroted [invented legal arguments](#) applied exclusively to Israel, and incorporated blatant [hypocrisy](#) and double standards in comparison to responses in other conflicts.

In particular, this report highlights MSF’s repeated silence regarding the extensive Hamas presence in the hospitals in which MSF personnel maintained an active presence, and were clearly aware of closed and off-limits sections. In addition, the evidence confirms [systematic and blatant erasure of the conditions in Gaza](#), including exploitation of schools, mosques, and other civilian facilities for terror. This report also highlights the ways in which MSF’s accusations were amplified by the international media including professional medical journals, in university frameworks, United Nations agencies, and used as evidence in proceedings before international courts.

Recommendations include:

1. Comprehensive, independent, and public investigations to document how MSF International and its national branches – specifically MSF USA and MSF UK – became central participants in demonization campaigns involving unsubstantiated claims of starvation and genocide, and steps to restore the principles of political neutrality and integrity of medical personnel.
2. Immediate end to the “genocide” accusation, as well as intentional starvation, famine, war crimes, ethnic cleansing, and similar unsupported allegations.
3. All MSF personnel and volunteers must be externally vetted to prevent the inclusion of individuals who support or have links to terrorist organizations.
4. Removing sources of bias, and implementing accountability mechanisms to prevent weaponizing medicine to marginalize Jews and Israelis or provide cover for extremist ideologies.
5. Review of the grant charitable status for MSF branches in their respective countries.

## Introduction

Médecins Sans Frontières (MSF), also known as Doctors Without Borders, is one of the world’s most influential medical humanitarian organizations. It was founded in 1971 in Paris by French doctors and journalists with the proclaimed goal of delivering aid in conflict regions based on the principles of [neutrality, impartiality, and humanitarianism](#). MSF currently operates [in more than 70 countries](#) and has a massive annual budget of \$2.4 billion. In 1999 the NGO was [awarded the Nobel Peace Prize](#), and it is widely recognized for its emergency medical relief work in regions devastated by violent conflict, natural disasters, or epidemics.

However, in recent years, MSF has frequently violated its core humanitarian mandate. By leveraging its global standing and massive budget for destructive political advocacy, the organization transitioned from a provider of emergency relief to a primary architect of a coordinated international campaign to demonize Israel. As Alain Destexhe, former Secretary General of MSF International, warned in 2025, [“MSF is no longer neutral: its humanitarian language now serves a political cause.”](#) This transformation is most evident in MSF’s activities during the Israel-Hamas conflict in Gaza.<sup>1</sup>

In this report, we examine the role of MSF in the campaign, and the organization’s impact, reflecting the influence it carries in the medical, political, journalistic, scientific, and academic arenas. As demonstrated, MSF messaging was increasingly controlled by anti-Israel advocates under the facade of medical and humanitarian reporting.

Following the October 7, 2023 Hamas atrocities, MSF joined a number of other influential NGOs in leading the intensive advocacy campaign that labeled the Israeli response as “genocide.” As [critics have documented in detail](#), publications by Amnesty International, Human Rights Watch, Palestinian advocacy groups, and particularly MSF, are based on highly distorted and selective “evidence” to support their predetermined conclusion

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<sup>1</sup> In addition to MSF’s International headquarters in Switzerland, the organization has 28 country “associations,” including the US (“Doctors Without Borders”), UK, Canada, France, Spain, Belgium, etc. According to MSF International’s website (<https://www.msf.org/international-office>): “We are run by MSF associations, whose members are mostly current and former field staff. The MSF associations are linked to six operational directorates (OD) .... All 28 MSF associations, as well as individuals and the International President, are members of MSF International, the association that safeguards the identity of the MSF movement.” As demonstrated in this report, for the political messaging on Gaza in general, and on the “genocide” campaign in particular, the associations appear to have been coordinated. In some examples, one or more of the associations took the lead and the others amplified and linked to its reports, press releases, “testimonies,” and social media posts.

of genocide. The accusations rely on invented criteria and false and unverified evidence, including casualty data from Hamas-controlled sources, while systematically [omitting essential details and context](#): the basic military requirements faced by Israel for neutralizing a terror organization with a massive underground tunnel network embedded in civilian infrastructure, and in which hostages were hidden.

The genocide demonization campaign, in which MSF has played a central role, has drawn broad condemnation. Prominent experts criticize the [invented legal arguments](#) applied exclusively to Israel, point to blatant [hypocrisy](#) and Holocaust inversion, and call it a modern [blood libel](#). According to the consensus International Holocaust Remembrance Alliance (IHRA), the use of the [double standards](#) reflected in the genocide accusation is a central form of antisemitism. In addition, MSF [systematically and blatantly erases the conditions in Gaza created by Hamas](#) – specifically the exploitation of hospitals, schools, mosques, and other civilian facilities for terror. These omissions are not mere oversights; they are blatant indicators of bias behind MSF’s reports, press statements, and declarations.

MSF’s one-sided narrative and accompanying accusations were amplified by the international media, professional medical journals such as the *Lancet* and *BMJ* (British Medical Journal), and institutions such as the World Health Organization (WHO) and other United Nations agencies. These claims have subsequently been used as evidence in proceedings before international courts, as detailed in this report.

This publication is divided into three major sections, each presenting citations and quotations from numerous MSF statements, press releases, social media posts, and interviews:

- 1) The years preceding October 7, 2023.
- 2) From October 7, 2023 to December 2024.
- 3) From December 2024, when MSF directly joined the “genocide” campaign, to present.

These are followed by discussions of the posts in MSF’s social media accounts, and the documented ties between some of its staff members and terror groups.

The final Analysis section describes the ongoing inconsistencies and omissions that have characterized MSF’s messaging about Israel since October 7.

## MSF Reporting Prior to October 7, 2023

[MSF began providing medical services to Palestinians in 1989](#), including orthopedic surgery, burn care, and mental health support. Following the [violent Hamas takeover of Gaza](#) in 2007, MSF communications increasingly included comments on the political context. For example, it frequently attributed Gaza’s overwhelmed healthcare system to a “[host of political and economic factors](#)” that included both complex Palestinian internal conflicts and long-term denial of medical supplies and movement restrictions. MSF said that the latter factors were due in part to what it later characterized as “[more than 15 years of the Israeli blockade](#).”

In February 2008, Duncan McLean, MSF’s head of mission to Gaza at the time, [stated](#), “the current closure is worsening an already grave situation ... MSF is particularly concerned about the impact of this blockade on hospitals.” In a 2010 update, “[Gaza: One year after the war](#)” (referring to the conflict at the end of 2008 following missile attacks against Israel), MSF cited “Inter-Palestinian clashes [sic]” from the 2007 Hamas takeover as “factors that continue to have impacts, both direct and indirect, today” on the healthcare system. These clashes involved “targeting hospitals, forcing medical staff to strike, vilifying humanitarian actors and blocking medical care,” severely weakening the system’s ability to function. MSF concluded: “the blockade must be lifted today. It’s urgent... Everything must be rebuilt - houses, health facilities, public infrastructure . . .”

In some publications during this period, MSF referred to the “[Israeli-Egyptian blockade](#)”; in others, it solely blamed Israel, such as when Mego Terzian, President of MSF France, wrote, “[As occupied territory, Gaza depends – both for its immediate survival and its development – on the goodwill of the Israeli authorities](#).”

By 2015, MSF statements reflected an increasingly narrow narrative that exclusively criticized Israel and erased Hamas’ ongoing rocket terror attacks against Israel and cross-border tunnels designed for terror attacks within Israel. For example, following the 2014 war, MSF’s “[Gaza activity update - July 2015: One Year Report](#),” which described daily life “amidst the ruins and under the Israeli blockade,” referred to the suffering of “children with injuries either from the war or from domestic accidents, often due to living in damaged homes or makeshift shelters, under extensive power cuts due to the ongoing blockade.” [A July 2015 press release](#) claimed that MSF teams “continue to witness the long lasting and devastating health impact of the continued Israeli military occupation and siege” and asserted that the “brutality and disregard for the human consequences of the Israeli occupation have become normalized.”

MSF generally attributed the failure to rebuild medical infrastructure in Gaza exclusively to [“the military blockade of Gaza \[that\] continues to starve the territory of desperately needed supplies, including building materials that could help rebuild some of the neighborhoods.”](#) Notably, MSF maintained total silence regarding the role of Hamas and its diversion of resources to terror, including the production of tens of thousands of rockets and missiles, and large-scale terror tunnels. While MSF framed the scarcity of building materials as an indefensible restriction on vital aid, it omitted the security reality that these items were largely classified as “dual use” materials, legally restricted because they were often diverted to Hamas to construct massive military (rather than medical) infrastructure. As documented by Israel’s Ministry of Foreign Affairs (2014), [“Hamas made wide use of the cement that reached the Gaza Strip... to rebuild its military infrastructure and to construct new military-terrorist facilities.”](#) The *New York Times* published a detailed report on [“the metro”](#) tunnel network, which consumed [“millions of dollars ...diverting building materials and money from reconstructing Gaza,”](#) and utilized hundreds of thousands of tons of concrete and fuel ostensibly provided for the medical facilities MSF described as critically lacking.

MSF’s communications regarding the 2018-2019 Great March of Return, orchestrated by Hamas, reflected a further intensification of the bias. This “march” consisted of deliberately provocative mass confrontations [“nearly every Friday between March 2018 and December 2019”](#) along the fence bordering Israeli communities. In August 2018, MSF cited an unverifiable claim of “over 7,900 people shot with live ammunition, according to the [Gaza] Ministry of Health” and blindly repeated accusations that the Israeli army applied [“lethal force.”](#) In a [2018 project update](#), MSF claimed evidence of unusually severe and devastating gunshot injuries where most patients will have physical disabilities for life. MSF emphasized that these injuries strained the already [severely weakened health system](#). In December 2019, MSF’s dedicated Gaza update page parroted the Hamas narrative of protestors who [“were met with hails of bullets from the Israeli army,”](#) and called the Israeli response [“unacceptable and inhumane.”](#)

The condemnations omitted any mention of the context for Israel’s responses – specifically the [frequent rocket and terrorist attacks](#) launched from Gaza into Israel, and the potential for a cross-border mass attack, as took place on October 7, 2023. They also failed to mention the documented presence [of Hamas terrorists and others within the crowds](#) (human shields), and the [use of incendiary kites and explosives](#). According to The Times of Israel, quoting Palestinian sources, Hamas provided transportation to the border and [pledged financial payouts](#) between \$200-\$500 to families of those injured and \$3,000 to those killed to ensure high attendance at the most violent flashpoints. MSF alludes to this, although minimally: [“some may have been manipulated by the authorities into protesting along the fence.”](#)

The “Great March” was followed, in May 2021, by an 11-day armed conflict. Palestinian armed groups launched over 4,360 rocket attacks from Gaza. MSF’s reporting provided granular detail on IDF counterattacks but largely erased the targeted Israeli population. In press releases, MSF again erased the Israeli population, including children, who ran to missile shelters with every attack from Gaza, and focused exclusively on the [“injury and death of many thousands of Palestinian civilians, many of them children.”](#)

A one-sided MSF USA [urgent update](#) titled “Gaza: Inexcusable Israeli airstrikes kill scores of civilians and damage MSF clinic” declared, “Israel needs to stop these attacks in the heart of Gaza as we have seen time and again that they kill civilians no matter how ‘targeted’ they are.” Once again, in condemning Israel, the issues of military necessity in responding to the attacks from Gaza were ignored. For example, MSF asserted that “Israeli airstrikes in the area of the MSF clinic in Gaza City killed at least 42 people including 10 children, according to the Gaza Ministry of Health.” An MSF [press release](#) claimed, “relentless bombing has destroyed many homes and buildings all around us,” and concluded, “the level of violence and injury sustained... is unbearable and unacceptable. After each war, each ‘escalation’, each wave of protests, we treat people in our clinics and hospitals who the Israeli armed forces have injured.”

These blatantly one-sided condemnations, couched in the language of humanitarian principles including the ostensible inviolability of hospitals and clinics, were precursors to MSF’s greatly amplified political advocacy immediately following the October 7, 2023 Hamas atrocities. As presented in the following section, the rhetoric deployed by MSF, including the “genocide” blood libel and Holocaust inversion, followed from the policies that were displayed and deeply embedded in MSF’s corporate culture in the preceding years.

## **October 7, 2023 to December 2024: MSF’s Demonization After the Massacre**

The October 7, 2023 massacre of Israelis by Hamas and other terror groups marked a further escalation in MSF’s highly biased advocacy. Despite the slaughter of over 1,200 people, the injuries to thousands, and the kidnapping of over 250 hostages into Gaza, MSF’s public communications and almost daily updates immediately pivoted to a singular focus on condemning Israel’s response. A detailed [December 2023 report](#) by former MSF Secretary General Alain Destexhe (“[Doctors Without Borders, an accomplice of Hamas?](#)”) demonstrated that over 40 percent of statements by staff, including senior figures, praised Hamas and the attacks. Some boasted of participation in tunnel construction and weapons production. A former deputy MSF coordinator in Gaza publicly celebrated Hamas and

circulated images of abducted hostages.<sup>2</sup> MSF’s messaging was controlled by anti-Israel advocates, using a thin facade of medical and humanitarian reporting.

### Immediately Following the Massacre

On October 7, MSF’s [first post on X](#) (formerly Twitter) after the initial reports, including posts by the Hamas terrorists boasting of the atrocities that they had committed, was an unverified accusation directed at Israel for causing the death of a nurse and an ambulance driver, stating that these events followed “the escalation between Israel and Gaza,” without condemning Hamas or even acknowledging the heinous slaughter, rapes, mutilation, torture, burning of families alive, or kidnapped hostages. MSF’s first [Instagram post](#) declared: “Health care facilities cannot become targets. We call on all parties of the conflict to respect health infrastructure and workers.” These were posted *before* MSF had made any reference to the Israeli victims of Hamas’ atrocities.

MSF’s [October 8 press release](#) quoted Gaza Deputy Coordinator Ayman Al-Djaroucha, who stated that “hospitals are overcrowded with injured people” and that MSF was preparing donations of “medicine and medical consumables” since “health facilities need this equipment because of the many injured patients.” The statement included a casualty count from the Gaza Ministry of Health (controlled by Hamas) and only briefly mentioned the Israeli death toll, without addressing the Hamas atrocities: “Authorities have reported over 2,200 injuries and over 300 deaths, including 20 children, in Gaza so far. In Israel, over 600 people have died and over 2,000 have been reported injured.”

On October 10, an [MSF’s ‘Voices from the Field’ report](#) first mentioned the massacre, albeit minimally, and linked it to a condemnation of the “intensity of violence and bombardments.” (The IDF was actively engaged in combat with Hamas forces that had invaded, and in some cases, still controlled 22 communities, including Be’eri and Kfar Aza, as well as suppression of intense rocket attacks from Gaza.) The update focused on the collapse of healthcare services and the scale of violence in Gaza, described as “shocking, as is the death toll.”

This MSF report, among others, also repeated the standard accusations of advocacy NGOs such as Human Rights Watch (HRW) and Amnesty International, referring to “collective punishment of the population of Gaza,” declaring that “cutting off water, electricity and fuel supplies is unacceptable, as it punishes the entire population and deprives them of their basic needs.” On October 12, 2023, an MSF statement declared that

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<sup>2</sup> See also Alain Destexhe and Karine Toledano [“Doctors Without Borders and the Collapse of Medical Neutrality,”](#) *Times of Israel*, March 9, 2026

[“millions of men, women and children are facing a collective punishment in the form of total siege, indiscriminate bombing, and the pending threat of a ground battle.”](#)

### Al-Ahli Hospital Disinformation and Intensified Advocacy

Following the explosion at Al-Ahli Hospital on October 17, 2023, MSF became a primary source of disinformation and demonization. The NGO issued and intensely promoted a press release quoting Dr. Ghassan Abu Sittah, an MSF doctor who had made multiple visits to Gaza, who asserted that [“this is a massacre,”](#) falsely blaming Israel for the Al-Ahli hospital explosion, and fueling immediate international accusations of Israeli war crimes.<sup>3</sup> MSF provided credibility and visibility to his claims that led major media outlets and academic bodies to repeat and amplify Abu Sittah’s accusations as authoritative medical testimony.

However, subsequent analysis from the governments United States, Canada, and France, as well as an investigation by *The New York Times*, concluded that the explosion had been caused by a misfired Palestinian Islamic Jihad rocket. The *Times* also acknowledged its early reporting [“relied too heavily on claims by Hamas”](#) and left readers with “an incorrect impression,” yet MSF never retracted or amended its reports. Abu Sittah’s anti-Israel advocacy and demonization continued, where he was presented as an “MSF doctor in Gaza” and primary witness. Leveraging this visibility, he was hosted by Harvard’s FXB Center for Health and Human Rights, the Carr Center, and Harvard Law School’s Human Rights Program, among others. In these forums and interviews with major media platforms, he used his status to accuse Israel of a [“strategy of intentional dismantlement and destruction of the Palestinian Health sector.”](#) On social media, he was more explicit. In February 2024 he [tweeted](#), “Israel fears Palestinian children. They represent the Palestinian tomorrow and are therefore a mortal threat to the Zionist project. That is why Israel has intentionally targeted children in its genocidal war.”

### Overt Political Advocacy

In its October 27 publication [“Five Ways the War in Gaza is Impacting Palestinians’ Health,”](#) MSF labeled fuel shortages as “death sentences” and described Gaza as a “humanitarian catastrophe.” The organization repeated the rhetoric of international law used by NGOs such as HRW and Amnesty, depicting Israel’s actions as violations of the

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<sup>3</sup> For more on Abu Sittah, MSF, and Gaza, see <https://quilllette.com/2025/12/10/the-humanitarian-mask-medecins-sans-frontieres-doctors-without-borders-gaza-israel/>

[Fourth Geneva Convention](#) and the [Rome Statute](#), including “collective punishment” and “indiscriminate attacks.”

On October 28, an MSF statement sought to leverage its influence to pressure world leaders, criticizing their “sluggishness,” declaring: “[The actions of world leaders are too weak, too slow... \[and\] have done nothing to rein in the indiscriminate violence unleashed on a helpless people.](#)” On October 31, MSF concluded, “[We condemn this latest episode of senseless violence.](#)”

Numerous MSF statements highlight direct involvement in the political campaign seeking to apply international pressure on Israel to end the military actions against Hamas. For example, on December 8, 2023, Avril Benoît, executive director of MSF-USA [condemned the US veto of a UN ceasefire resolution](#) as “a vote against humanity,” providing “diplomatic cover for the ongoing atrocities in Gaza.”

Similarly, in a widely publicized [open letter](#) addressed to the UN Security Council on December 4, 2023, MSF International President Dr. Christos Christou urged the Council to intervene against Israel directly, demanding “an immediate and sustained ceasefire in the Gaza Strip.” MSF further accused Israel of “incessant and indiscriminate warfare,” and argued that “subjecting an entire population to collective punishment is a war crime under International Humanitarian Law.” As MSF is ostensibly a medical aid NGO, unlike HRW and Amnesty, assessment of the requirements of asymmetric warfare are outside MSF’s competence, and reflect the political emphasis, particularly since no references are made to the war waged by Hamas.

On February 22, 2024, the Algerian UN delegation invited MSF Secretary General Christopher Lockyear to participate in a [briefing to the UN Security Council \(UNSC\) on the Situation in Gaza](#) that was part of the intense political demonization campaign against Israel. Following the MSF script, he described the conflict as “a war of collective punishment, a war without rules, a war at all costs,” and declared that “anything short of a sustained ceasefire is gross negligence... This death, destruction, and forced displacement are the result of military and political choices that blatantly disregard civilian lives.” He further accused key UNSC members, particularly the United States, of political complicity, stating, “this is not just political inaction – it has become political complicity.” Lockyear’s account omitted the documented Hamas abuses, ascribing sole responsibility to Israel for attacks on medical facilities, killings and injuries of MSF staff, the collapse of Gaza’s healthcare system, and obstruction of humanitarian access.

## Allegations of “Intentional Starvation”

MSF was a major participant in the coordinated campaign involving other major international NGOs and UN agencies, as well as the [South African initiative](#) in the International Court of Justice (ICJ), accusing Israel of deliberate starvation, deprivation, and displacement. An MSF publication headlined “[War in Gaza – Six Months On](#)” (March 2024) declared, “there is nowhere safe left in Gaza” and claimed that “for more than six months, people have had no food, water, shelter, and little or no access to healthcare.” The primary evidence consisted of high profile but unsubstantiated (and [subsequently disproven](#)) [reports from the Integrated Food Security Phase Classification \(IPC\)](#) and the World Health Organization claiming that “[famine is imminent in Gaza](#).” In addition, MSF doctors provided what was portrayed as eyewitness testimony in the [reports](#). South Africa’s ICJ application repeatedly cited MSF 8 times<sup>4</sup> in the context of Article II(c) of the Genocide Convention, claiming that Israel was deliberately inflicting “[conditions of life calculated to bring about physical destruction](#).”

In April 2024, MSF posted another tendentious report under the heading of “Gaza’s Silent Killings: The Destruction of the Healthcare System in Rafah,” as well as a press release that claimed that [Gaza’s entire healthcare system has been decimated](#) and the entire population was under [siege](#). ([Asymmetric siege warfare](#) is a legitimate tactic under International Humanitarian Law when directed at a military objective – which in the case of Gaza, applies to Hamas’ embedding of combatants and assets such as thousands of rockets within the civilian infrastructure.) As detailed in the section on *Systematic Omissions* below, MSF erased Hamas’ responsibility for the conflict, including the use of the civilian population as [human shields](#) and torturing of Israeli hostages in Gaza.

In October 2024, one year after the Hamas atrocities, MSF condemned what they termed Israel’s “[unmitigated slaughter](#)” and “total impunity,” according to the press release, “[Israel’s all-out war on Gaza seems to have no end in sight](#).” Again, a July 2024 MSF press release declared: “Supply shortages and patient influxes leave Nasser hospital at breaking point.... The Israeli authorities must urgently open more crossing points,” and asserted that “this is the only way to avoid more preventable deaths.”

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<sup>4</sup> *Application Instituting Proceedings (South Africa v. Israel)*, 29 December 2023, International Court of Justice, see footnotes 323, 332, 334, 337, 342, 344, 346, and 350.

## **December 2024: MSF’s “Genocide” Campaign**

The multifront “genocide” campaign launched in November 2024 with the MSF-USA publication “[Timeline: Bearing Witness to Genocide in Gaza](#),” followed by the December 2024 MSF International report, “[Gaza: Life in a Death Trap](#).” Concurrent with the latter publication’s release, other advocacy NGOs -- particularly HRW and Amnesty -- also started accusing Israel of genocide, suggesting an orchestrated demonization narrative. (MSF’s Gaza advocacy, and particularly the genocide campaign, stands out in comparison to other conflict situations, such as Darfur and Myanmar – as detailed in the “Hypocrisy, Double Standards, and Singling Out Israel” section below.)

“Gaza: Life in a Death Trap” framed Israel’s response to October 7 as “Israel’s war on Gaza,” asserting that Israel is “crushing an entire population under bombs and rubble” and stating, “we are witnessing clear signs of ethnic cleansing as Palestinian life is being wiped off the area.” MSF claims to have “witnessed 14 months of repeated attacks on civilians, the dismantling of essential civilian infrastructure including healthcare facilities... to unravel the very fabric of society in Gaza.” On the basis of this “evidence,” and erasing the context of the conflict, MSF painted Israel’s response to the October 7 atrocities as “a campaign of total destruction... destroying the Palestinian people in Gaza” and “indiscriminate attacks against civilians.”

To claiming genocide, MSF relied on unverified aggregate casualty and displacement statistics – 44,000 deaths, 105,000 wounded, approximately 1.9 million people or 90 per cent of the population displaced, citing Gaza’s Ministry of Health (MoH) – supplemented by accusations in unverified testimonies of patients and MSF staff. A “Critical Incidents” log in the publication lists over “40 events [allegedly] endured by MSF supported structures, staff and their families from 7 October 2023 to 7 October 2024.”

MSF officials appear to have made no attempt to independently verify these claims or to assess and report on the complex situation in Gaza – particularly the large-scale Hamas military presence in closed areas of hospitals, and the corresponding requirements for the IDF. (Detailed analysis below.)

**CRITICAL INCIDENTS ENDURED BY MSF SUPPORTED STRUCTURES, MSF STAFF AND THEIR FAMILIES FROM 7 OCTOBER 2023 TO 7 OCTOBER 2024**

Date	Event description	Date	Event description
07/10/23	Airstrike on Indonesian hospital: 1 death nurse (non-MSF)	17/12/23	Israeli troops took control of Al-Awda hospital & staff (including MSF staff) interrogated/stripped
07/10/23	Airstrike on one ambulance in front of hospital Nasser: 1 death & multiple casualties	06/01/24	Sniper bullet fired through ICU wall. Displacement orders around hospital Al-Aqsa, including MSF pharmacy MSF decision to evacuate
10/10/23	Airstrike resulting in damages on MSF Gaza clinic	08/01/24	Shelling MSF shelter housing 100 staff and families. 1 family member killed and 3 injured
11/10/23	Airstrike close to hospital Al-Awda - some material damages	16/01/24	IL bombing close to Nasser. Patients and displaced civilians flee in a panic
17/10/23	Airstrike on the parking area of Al Ahli hospital: 100 dead	22/01/24	Nasser hospital surrounded by fighting, bombing and evacuation orders Airstrikes killed people 150m from hospital entrance according to MSF staff
30/10/23	Projectile hit the Turkish-Palestinian Friendship hospital causing damages	09/02/24	Shooting inside Nasser; 2 dead, 5 injured (1 nurse). Access to hospital impossible due to combats around and Israeli forces operating in immediate vicinity. People trapped inside.
03/11/23	Airstrike outside the gate of hospital Al-Shifa: one ambulance hit. Several dozens of people killed.	15/02/24	Shelling on orthopaedic department of Nasser hospital: 1 dead & several injured.
10/11/23	Shelling on Al-Shifa hospital. Many dead and injured. Patients/staff trapped inside	15/02/24	1 MSF staff arrested by Israeli forces
14/11/23	Shots fired at MSF shelter	20/02/24	Shelling MSF shelter: 2 family members dead & 7 injured
15/11/23	Ground troops inside Al-Shifa	02/03/24	Shelling next to the entrance Emirati hospital: 2 dead & several injured (1 ambulance worker)
18/11/23	MSF staff evacuation convoy targeted: 2 deaths	25/03/24	Impossible access to Al-Shifa according to staff. Heavy Israeli airstrikes and fighting around.
20/11/23	Damages & fire affected MSF Gaza clinic. Israeli tank seen in the street	27/03/24	Airstrike close to clinic Al-Shaboura. Several killed.
20/11/23	5 MSF cars destroyed	31/03/24	Airstrike in the Al- Aqsa yard, outside ER where people were sheltering. Many killed and injured.
21/11/23	Airstrike on Al-Awda hospital. 3 deaths (2 MSF staff)	01/04/24	Al-Shifa hospital in ruins after 14-day long IL operation. Hundreds killed, including medical staff and mass arrests of medical staff and other people in and around the hospital
22/11/23	MSF convoy cars targeted by Israeli vehicles	20/05/24	Hospital Al-Awda encircled by tanks. Staff and patients forced to take cover under tables and beds as bullets and shelling smashed windows
24/11/23	MSF cars + 1 rental bus destroyed	23/05/24	Al-Awda forced to close following a 4-day siege
01/12/23	Blast damages hospital Al-Awda	22/07/24	Airstrike on Al-Aqsa hospital
05/12/23	Total siege of Al-Awda hospital since 05/12. In the following days, 2 members of the medical staff shot and killed by snipers	04/08/24	Shelling tents inside Al- Aqsa hospital compound. 3 dead and 18 injured.
12/12/23	1 MSF surgeon staff injured inside Al-Awda hospital by snipers located outside	25/08/24	Explosion 250m from Al-Aqsa & evacuation order in the vicinity of Al- Aqsa hospital triggered a panic and the departure of around 550 patients.
17/12/23	Maternity ward in Nasser hospital impacted by Israel tracer bullets. 1 patient killed (13 years old) and other wounded.	05/09/24	Airstrike within the compound of Al- Aqsa hospital. 4 dead & 16 injured.
		07/10/24	Airstrike within the compound of Al- Aqsa hospital. 8 injured.

**Critical Incidents log from MSF’s 2024 report “[Gaza: Life in a Death Trap.](#)”**

On the basis of the highly distorted casualty and incidents claims, the MSF publications concluded that “the signs of ethnic cleansing and ongoing devastation—including mass killings, severe physical and mental health injuries, forced displacement, and impossible conditions of life for Palestinians under siege and bombardment—are undeniable.” The report added: “attacks on civilians, the dismantling of the healthcare system, the deprivation of food, water and supplies are a form of collective punishment inflicted by the Israeli authorities on the people of Gaza” and declared “this must stop now.” MSF again urged governments, “particularly Israel’s closest allies,” to “end their unconditional support for Israel and fulfill their obligation to prevent genocide in Gaza.” (At the time of MSF’s publication, US policies on Gaza could not accurately be described as [unconditional support for Israel.](#))

The MSF publication acknowledged that it “do[es not] have legal authority to establish intentionality,” the core requirement for any finding of genocide. Nonetheless the report asserted, “our firsthand observations of the medical and humanitarian catastrophe inflicted on Gaza are consistent with the descriptions provided by an increasing number of legal experts and organisations **concluding that genocide is taking place in Gaza**” (emphasis added). The only legal body referenced in support of these assertions is the ICJ – [a highly politicized framework](#), particularly [regarding Israel](#), Palestinians, and Gaza.

Following publication of “Life in a Death Trap,” the accusation of genocide was echoed and amplified by top MSF leadership. In a December 19, 2024 press release,

Secretary General Lockyear declared, “[what our medical teams witnessed... is consistent with the descriptions provided by an increasing number of legal experts and organizations concluding that genocide is taking place in Gaza.](#)” Dr. Christos Christou, MSF International President addressed a letter to the members of the United Nations Security Council, calling on them to “[use their leverage and help stop the bloodshed being committed in Gaza.](#)”

In addition, individual MSF chapters amplified the accusation of genocide:

**MSF-UK** condemned the British government and on its dedicated “[Gaza Genocide](#)” webpage claimed that the accusation was the product of “nearly two years of extensive, firsthand information” in which medical teams witnessed “massive levels of death and destruction by Israeli forces, a campaign of ethnic cleansing...” In a [submission](#) to the UK Parliament’s International Development Committee (IDC), consisting of excerpts from “Life in a Death Trap,” MSF stated that “teams are witnessing clear signs of ethnic cleansing as Palestinian lives are being wiped out” and “the firsthand observations by our staff of the medical and humanitarian catastrophe inflicted on Gaza are consistent with the descriptions provided by an increasing number of legal experts and organisations, who have concluded that genocide is taking place in Gaza.” Israeli military actions were painted as “attacks on civilians, the dismantling of the healthcare system, and the deprivation of food, water and other essentials... a form of collective punishment inflicted by the Israeli authorities on the people of Gaza.”

In a July 2025 [open letter to Prime Minister Keir Starmer](#), MSF-UK Executive Director Dr. Natalie Roberts again exploited the organization’s medical reputation: “Genocide is being committed in Gaza. The UK government is complicit... what our colleagues in Gaza were seeing and experiencing was consistent with the description of ethnic cleansing and genocide.” Roberts concluded, “the UK Government just does not want to acknowledge what everybody else can see: that genocide is being committed in Gaza, and it is being committed with the military, diplomatic, and material support of the UK.” In September 2025, Roberts repeated the demonizing rhetoric in a transparently propagandistic “[Gaza Tribunal](#)” held in London.

**MSF-Switzerland** issued a provocative public appeal to the Swiss Federal Council titled, “[Switzerland Cannot Hide Behind Neutrality in the Face of Genocide in Gaza!](#)” declaring that “the situation in Gaza is genocide,” that “neutrality cannot be an excuse in the face of genocide,” and “Silence kills. Inaction is not an option.” MSF concluded, “the war waged by Israel amounts to collective punishment, in flagrant violation of international humanitarian law” and urged Switzerland to help “end the genocide in Gaza now!” stating, “Silence is not an option. Sign the appeal now.” The appeal tendentiously argued that the neutrality principle, designed to protect victims and doctors in a war zone, has instead

become a barrier to justice. Rejecting traditional “quiet diplomacy,” MSF called on the Swiss Federal Council to abandon its impartial stance, exert political pressure on Israel, and endorse the organization’s genocide accusations.

**MSF Canada’s** role in the campaign included costly full-page advertisements in two major Canadian newspapers, the *Toronto Star* and *Globe and Mail* on September 27, 2025 with the headline “Doctors can’t stop genocide, World leaders Can,” as cited by the organization [Honest Reporting](#). The ad repeated both Hamas’ unsupported casualty claims and MSF International’s vilification of Israeli actions, referring to “intentional” targeting of healthcare workers and journalists, and unjustified withholding life-saving aid (much of which is classified as “dual use,” meaning that the same materials can and are used for weapons.

**DOCTORS  
CAN'T  
STOP  
GENOCIDE**

**WORLD LEADERS CAN**

**As a medical humanitarian organization, we are clear: Israel is committing genocide against Palestinians in Gaza and doing so with absolute impunity.**

The human toll of this conflict is staggering:

- **14,000+ people** have been killed
- **1.2 million** civilians are displaced
- **1.5 million** medical workers have been killed
- **23 months** of systematic destruction and have displaced people again and again.

Doctors Without Borders (Médecins Sans Frontières, MSF) medical teams have announced that there is no safe place left in Gaza. Every health worker has been killed and thousands have been displaced. The Israeli authorities have systematically targeted Gaza's healthcare system – bombing hospitals, ending medical facilities and endangering the lives of staff and patients.

Health care workers, including 12 of our own colleagues, have been killed. Humanitarian aid has been targeted for blocking entrance and everything in Gaza.

Besides direct attacks, Israeli authorities have withholding medical food, denying a total siege, with several restrictions on fuel, water, food and medical supplies.

A policy of collective punishment, including starvation by design, has achieved its objective: famine has been confirmed.

The United Arab Emirates mediation talks have been cancelled. Food distribution sites run by the so-called Gaza Humanitarian Foundation (GHF), an Israeli-run UN-backed operation, are sites of killing and dehumanization. Since the GHF was established in late May, at least 1,400 people have been killed and 1,000 more injured while seeking food, according to UN reports.

Through their speeches, silence or direct support of the Israeli authorities, governments around the world are complicit in this genocide.

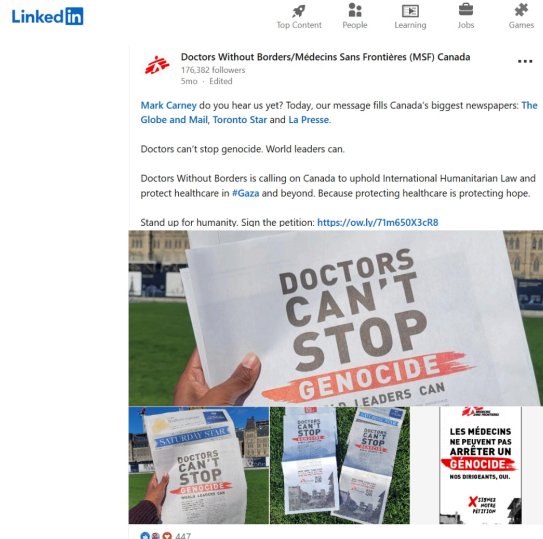
Canada has both a moral and legal obligation to respond, using every political, diplomatic and economic measure available to stop the atrocities.

Every day, our 100 colleagues working in Gaza face the devastating reality that they cannot stop genocide. But we find a way. It's their choice to act.

**Don't accept the myth that Canada is powerless.** It has the diplomatic force and capacity to pressure International Humanitarian Law. Use your voice and join us call on the Canadian government to support International Humanitarian Law.

**NOW MORE THAN EVER  
WE MUST ALL STAND UP FOR HUMANITY  
SIGN OUR PETITION TODAY**

MSF Canada advertisement in the *Toronto Star* and *Globe and Mail* on September 27, 2025



MSF Canada's LinkedIn post featuring their printed full front page article that highlighted their genocide campaign

In parallel, these and other MSF branches activated intensive social media campaigns in support of the genocide accusation, as described in the following section.

### Genocide in MSF Social Media

Highly visible social media activity reinforced the genocide campaign, reaching millions through different platforms, including [MSF International](#)'s X account (230.5K followers) and Instagram (1.3 million followers), alongside numerous regional chapter accounts with major followings. A qualitative, multilingual audit of MSF's global communications that were conducted between October 7, 2023 and January 14, 2026, reveals the role of digital platforms as force multipliers for anti-Israel activism, and particularly “genocide.”

### Singling Out Israel

During this 27-month period, MSF used the Israel “genocide” label 272 times across all platforms (X, Instagram, Facebook, LinkedIn, YouTube) and 70 times on MSF's primary X accounts spanning English (40%) and French/Spanish/Portuguese (60%). In contrast, “Israeli hostages” were the primary subject in only 3 posts across MSF's international feeds, representing a frequency of less than 1.1% relative to the “genocide” accusations.

The analysis also illustrates the degree to which MSF's use of the “genocide” label is reserved exclusively for Israel. When compared to MSF's posts on every other conflict, Gaza is clearly unique: During the same period (2023-2026) MSF made no mentions of “genocide”

on any platform regarding the conflicts in Sudan, Syria, Yemen, Ukraine, or Myanmar. Despite documenting ethnic cleansing in Darfur and indiscriminate bombing in Syria, MSF avoided the legal weight of the genocide label except when it applied to Israel. (See the section “Hypocrisy, Double Standards, and Singling Out Israel” below.)

**X (Twitter):** 204 posts. The highest volume of genocide rhetoric originated from [MSF-France](#) (40-50 posts), [MSF-Canada](#) (30-40), and [MSF-Spain](#). (30-40).

**Instagram:** 70 posts. MSF International’s [Instagram](#) posts utilize video reels and carousels with bold captions such as “[Stop the Genocide. Let aid in. Let Gaza live,](#)” or “[this isn't aid, this is orchestrated killing](#)” or “[Lift the siege. Stop the genocide](#)” explicitly urging followings to tag their local representatives and become involved politically.

**Facebook and LinkedIn:** 40 total posts targeted at broader audiences and professional donors, often with links to petitions.

### Chronological Framing

The biased advocacy in MSF International’s digital strategy was immediately visible on October 7, 2023 and continued afterwards. As [The Atlantic](#) explained, “Doctors Without Borders seemed to minimize the egregiousness of the Hamas attack from the start, describing it on X that very day as ‘the escalation between Israel and Gaza.’” The initial post on X claimed that “[Israeli forces struck the enclave’s Indonesian hospital and an ambulance in front of Nassar Hospital.](#)” Only on October 10 (three days after the massacre) did MSF acknowledge that the “[Palestinian militant group Hamas launched a major attack... fired rockets... and took hostages](#)” – and then pivoting to Matthias Kannes (MSF’s Head of Mission in Gaza) and his description of the “[horrific](#)” situation: “[...our Palestinian colleagues are working day and night to cope with the influx of wounded.](#)”

The volume of posts accusing Israel and erasing the Hamas attack and the Israeli victims increased continuously, including multiple posts daily. In December 2024, the social media accounts strongly echoed the “[Gaza: Life in a Death Trap](#)” report and the accompanying genocide campaign. MSF International and MSF-USA posted influential [threads](#) and [video interviews with Christopher Lockyear](#) regarding the publication. On December 19, the day of the report’s launch, [MSF’s Instagram page](#) shared an emotive carousel, also including “ethnic cleansing.”

In September 2025, MSF International launched a wider multi-platform social media campaign under the slogan of “[Doctors Can’t Stop Genocide – World Leaders Can.](#)” A caption on Instagram declared, “[MSF is clear: Israel is committing genocide against Palestinians in Gaza.](#)” The [background image](#) for the MSF International X and LinkedIn

accounts is a cover photo spreading the message, “Doctors Can’t Stop Genocide, World Leaders Can,” alongside several posts on X like: “[we are witnessing Israel commit a genocide in Gaza.](#)” Across platforms, MSF urged followers to “[tag \[their\] elected representatives. Demand they use their power... to stop the genocide.](#)” In its YouTube channel, they posted medical testimonies such as those in the December 2024 documentary “[Gaza City: Traces of the Genocide,](#)” in which testimonials are combined with emotional – and clearly staged – footage of nurses walking through ruins. Captions frame Israel’s military response as a “[genocidal campaign.](#)”



[MSF International X](#) cover photo

## Social Media Disinformation

MSF’s social media channels frequently highlighted and shared propaganda posts by staff members and volunteers. Dr. Ghassan Abu Sittah is a clear example: MSF-USA [amplified](#) his false claims regarding Al-Ahli Hospital, as discussed above. The post on X received 600,000 views, illustrating the immediate impact of this example of disinformation. MSF’s posts also eulogized staff members killed in the conflict and erased their terror links. For example, when Fadi Al-Wadiya (see details below) was killed, MSF described him only as a “[physiotherapist and father of three.](#)” This Instagram post received over 63,000 “likes.”

## Evidence of MSF Staff Links to Hamas and Other Terror Groups

The numerous examples of known links between MSF personnel – including volunteers sponsored by the NGO – and terrorist groups such as Hamas mark an additional dimension in analyzing the shaping of the genocide campaign. An MSF staffer involved in hiring [admitted](#): “We were told not to check backgrounds,” and that “Our Arab staff was greatly concerned because to be in the same room with operatives put all at risk.” Similarly, Karine Toledano and Alain Destexhe [conclude](#) “Further evidence has emerged that some MSF-affiliated healthcare workers in Gaza were members of Hamas or other Palestinian terrorist groups... The abuse of protected medical roles by armed operatives should have prompted institutional reckoning, transparency, and reform. Instead, MSF has in recent years appointed senior figures across multiple national branches with overtly political positions aligned with narratives that excuse or erase Hamas violence while condemning Israel.”

**Fadi Al-Wadiya** (Palestinian Islamic Jihad – PIJ) – a physiotherapist with MSF for six years, was also identified by the IDF as a significant operative in PIJ’s [missile](#) array. MSF condemned the strike that killed him in June 2024, ignoring [photo evidence](#) of Al-Wadiya in a PIJ military uniform. Later, MSF stated that it was “deeply concerned by these allegations” and said it would “never knowingly employ” a fighter. But an October 2025 MSF statement headlined “[Remembering Our Colleagues Killed in Gaza](#)” eulogized Al-Wadiya.

**Mahmoud Abu Nujaila** was employed by MSF and headed the Democratic Health Association for the Popular Front for the Liberation of Palestine (PFLP), a terrorist group. In 2021, he openly celebrated the assassination of an Israeli Minister on his Facebook page, calling it “[the prettiest day](#).” When he was killed in November 2023 in an airstrike that hit [Al-Awda hospital](#), MSF [lionized him as a martyr](#).

**Ahmad Al-Sahar** was employed by both MSF and UNRWA. In social media posts, he praised Hamas field commanders as martyrs, stating “yesterday it was his father and now it is him. May Allah have mercy on them and accept them [in heaven] as martyrs.”

**Nasser Hamdi Al-Shalfouh** was an MSF driver killed in October 2024, who Israel’s Foreign Ministry tweeted “[was also employed by @MSF and identified as a Hamas terrorist involved as a sniper in combat and operational activity](#).” MSF [condemned](#) the killing of Al-Shalfouh and maintains he was strictly a humanitarian worker.

**Al-Awda Hospital:** Since 2018, MSF has funded and staffed this institution run by the AWDA Association (formerly UHWC), which the [U.S. government identifies as](#) a front for the Popular Front for the Liberation of Palestine (PFLP) and the “PFLP’s health organization.”

**Nasser Hospital:** In February 2026, MSF publicly disclosed – through an addition at the bottom of an ongoing website section “[Addressing frequently asked questions and allegations about MSF’s work in Gaza](#)” – that it had suspended non-critical medical operations at Nasser Hospital due to a “pattern of unacceptable acts” within the hospital. According to the update, its “patients and MSF personnel have seen armed men, some masked, in different areas of the large compound of the hospital” and reported a “recent situation of suspicion of movement of weapons.” This low visibility acknowledgement contrasted with the pattern of erasing or denying the clear evidence showing widespread use of hospitals by Hamas, as widely reported by [international news outlets](#), including testimonies from released Israeli hostages. (See “Hamas’ Weaponization of Hospitals” below.)<sup>5</sup>

## **The Conflict with MSF Over Israel’s NGO Registration Process**

In 2025, the Israeli government updated registration and oversight requirements for international NGOs operating in Gaza and other regions. Along with other politically powerful aid groups, MSF refused to comply, particularly in providing a list of staff members, as necessary for security vetting. In January 2026, after Israel rejected this position, “[MSF informed Israeli authorities on 23 January that, as an exceptional measure, MSF would be prepared to share a defined list of Palestinian and international staff names.](#)” However, following intense pressure, accusations, and attacks from critics, MSF reversed course again, and refused to comply, and on January 30, MSF announced that “[it will not share a list of its Palestinian and international staff with Israeli authorities.](#)”

MSF’s version of this conflict was reflected in numerous high-profile media reports, such as [The New York Times](#) and [Le Monde](#), which [parroted and emphasized the NGO’s claims](#) to provide vital and irreplaceable lifesaving medical aid to Gaza, and avoided or downplayed the evidence of terror links.

The Israeli Ministry of Diaspora Affairs and Combating Antisemitism responded, citing a “[substantial and ongoing violation of registration procedures](#)” – procedures designed to prevent the misuse of humanitarian cover. According to the statement:

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<sup>5</sup> In August 2025, [MSF Ireland posted](#) a condemnation of IDF strikes on the Nasser medical complex that allegedly killed “at least 20 people.” In this post, no mention was made of armed men (terrorists) and the movement of weapons (as admitted in the 2026 MSF FAQ), meaning that the complex was a legitimate military target.

Unfortunately, MSF is once again demonstrating a lack of transparency and acting out of irrelevant interests. The organization abruptly changed its position after publicly committing to act according to procedure. We are aware that MSF employs individuals active in terrorist organizations, which is why it hides its employee lists. The organization operates in coordination with the Hamas Ministry of Health, and not by coincidence, its statements were published in proximity to similar statements from elements within the Strip.

MSF’s response was published on a website section on [Addressing frequently asked questions and allegations about MSF’s work in Gaza](#):

***Israeli authorities claim that MSF staff have links to terrorism. How does MSF respond to this?*** MSF takes these allegations seriously. MSF would never knowingly employ people engaging in military activity. Any employee with links to an armed group would pose a serious risk to our staff and to our patients. For this reason, wherever we operate, all MSF staff are required to commit to the MSF Charter, which includes **strict adherence to humanitarian principles, independence, and medical ethics** (emphasis added.)

Recruitment procedures include rigorous due diligence, background and reference checks, CV verification, and probationary periods. MSF has implemented an enhanced screening and vetting process for all staff recruited in this context. As everywhere else, MSF operates strictly in accordance with the principles of neutrality, impartiality, and independence, providing medical care based on need alone, irrespective of political authority or affiliation. Our support to the health system in Gaza is purely humanitarian and in no way ideological.

In accordance with the regulations, the Ministry of Diaspora Affairs and Combating Antisemitism stated that “[MSF will cease its operations and depart the Gaza Strip by February 28, 2026.](#)”

## Analysis

### Systematic Silence and Omissions

Neutrality, impartiality, and the concept of [témoignage](#) (bearing witness) are ostensibly central to MSF’s mission. In contrast, the manipulated testimonies of MSF personnel and the condemnations and reporting on Gaza are characterized by blatant manipulation, selective silence and factual omissions that provide the ostensible justification for the orchestrated genocide narrative.<sup>6</sup> The framing in the years before October 7 functioned as a form of narrative priming, conditioning journalists, academics, politicians and government officials to view every Israeli response as indiscriminate.

In MSF’s strident and tendentious advocacy campaign accusing Israel of “genocide” this pattern was expanded. The publications, posts, and statements omit critical and readily verifiable information that did not conform to the objective of demonizing Israel. The messaging, including in social media posts, absolves Hamas, as the governing power of Gaza since 2007, of any responsibility. The following section details the specific omissions that result in MSF’s narrative distortion.

#### 1. Erasing Hamas’ Weaponization of Hospitals

As an organization claiming to embrace medical ethics and international humanitarian law, the extensive silence of MSF staff and volunteers working in Gaza’s hospitals on the [obvious militarization of these facilities by Hamas](#) is particularly damning. From at least [2009](#), the closed and off-limits areas, as well as visible presence of armed Hamas terrorists and weapons have been documented independently, including the [Indonesian hospital](#), [Al-Rantisi](#), Nasser, and [Al-Shifa](#).

And yet, for many years and until February 2026 (see below), none of the MSF officials or medical personnel included this in their “eyewitness testimonies,” and pretended not to have seen these core violations of medical ethics and international law. The [standard](#)

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<sup>6</sup> The genocide accusation against Israel was part of the demonization campaigns led by the Soviet Union and Arab League in the 1960s, and was featured in the infamous 2001 NGO Forum of the UN Durban Conference. See Steinberg, Gerald M. “Soft Powers Play Hardball: NGOs Wage War against Israel,” *Israel Affairs*. 12.4 (2006): pp 748-768. Following the October 7 attacks and Israeli responses, the anti-Israel NGO network and related UN agencies emphasized the genocide label (as well as “deliberate starvation” and similar allegations), and officials from [Oxfam](#) and the [World Health Organization \(WHO\)](#) have referred to predetermined campaigns.

[justification](#) that “Our teams report what they see with their own eyes, and what they themselves experience” is clearly hollow.

After October 7, the evidence of MSF’s policy of deliberate silence increased. [Former Israeli hostages](#) taken on October 7 and subsequently freed told how they were [brought into](#) and [hidden within and under hospitals](#). [One recounted](#) how she was held alongside another hostage in a hospital, and that he died during his captivity there. [CCTV footage](#) showed Thai and Nepali nationals kidnapped from Israel on October 7 and brought to Al-Shifa hospital. They are surrounded by a group of men, some armed, while individuals dressed in scrubs look on. In one frame, others in scrubs direct the kidnappers and usher one of the hostages on a gurney into a room. As noted by [Herzberg](#), “the video shows armed combatants bringing hostages into a hospital, a place with protected legal status. It would provide evidence that hostages kidnapped from Israel were present in Al-Shifa as early as the morning of October 7, and individuals in scrubs (potentially members of hospital staff) were aware of this presence. It is also reasonable to consider that these individuals may have possessed other salient knowledge, including the hostages’ medical condition, identity of their captors, and location of captivity.”

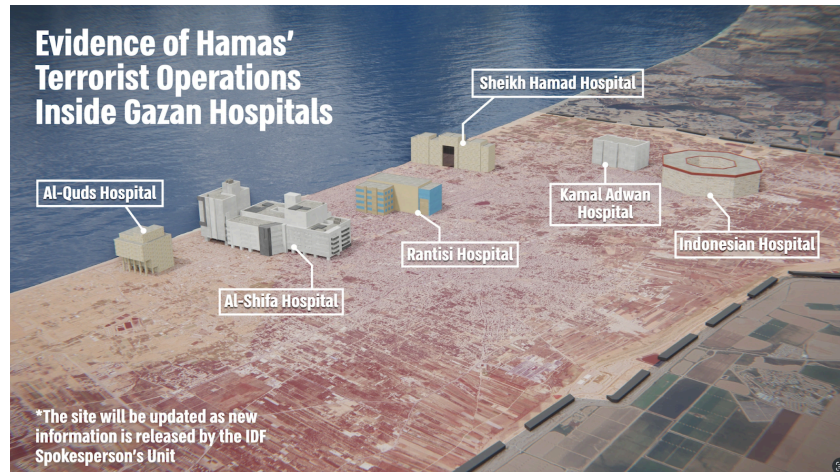


[Israel Defense Forces](#) Infographic from October, 2023 – Hamas Under Shifa Hospital

Under [Article 19 of the Fourth Geneva Convention](#), a hospital’s protection during war is terminated when facilities are “[used to commit, outside their humanitarian duties, acts harmful to the enemy.](#)” [IDF videos](#) show tunnel shafts and command centers in and below Al-Shifa Hospital, as well as munition caches including RPG’s (grenades, suicide vests) in the basement of al-Rantisi Children’s Hospital. [U.S. intelligence assessments](#) published information showing that Hamas and Palestinian Islamic Jihad used Al-Shifa as a command hub and hostage site. Former USAID director Dave Harden confirmed: “[It is well known that Hamas terrorists used Shifa \[sic\] Hospital as a command center and ambulances for travel.](#)” Similarly, journalist Jan Franke attested: “[I have been to the Al Shifa Hospital several times as a reporter... I have personally seen Hamas fighters there. Everyone in Gaza including UN staff knows about the dual use of these facilities.](#)” Destexhe (former MSF Secretary General) confirmed, “[some hospitals, and perhaps all of them, were used by Hamas.](#)”

In blatant contrast, MSF’s reporting on Gaza’s healthcare erased Hamas’ documented weaponization of medical facilities. MSF officials chose to erase the evidence including reports in The New York Times demonstrating [Hamas’ practice of using hospitals as military bases](#). [Declassified internal documents from Hamas’ Ministry of Interior](#) show that MSF-France operated from a specific room in the Abu Yousef El-Najar Hospital that contained a Hamas military wing “secure communication landline.” As documented by [Michael Powell](#), Katrina Penney, president of MSF Australia, declared that she had “seen no evidence that the hospital buildings or the compounds are being used by Hamas as a military base.” Powell also references two staffers who acknowledged that the presence of Hamas gunmen in Shifa and others was an open secret. “You knew Hamas was there; I went to meetings where this was made very clear... Doors were hidden. There were units you did not get into, that had armed guards at the door.”

These examples highlight the contrast between the “[principle of bearing witness to abuses](#)” and MSF’s behavior in Gaza in which the organization blatantly failed to challenge “armed groups such as Hamas that risk civilian lives by using hospitals as bases and hiding spots.”



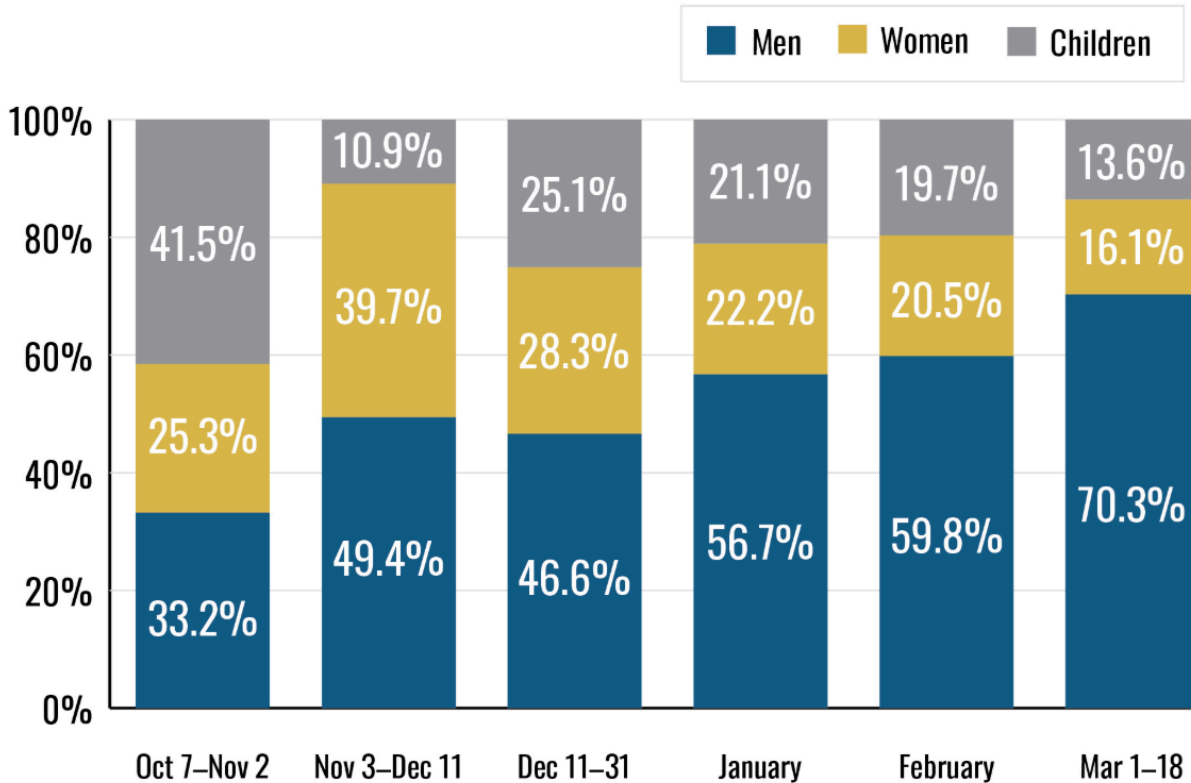
[Israel Defense Forces](#) Hamas Terrorist Operations Inside Gazan Hospitals

## 2. *Reliance on Unverified Casualty Data from Hamas*

The foundation of MSF’s genocide accusation rests on the adoption of unverifiable casualty claims produced by the Gaza Ministry of Health (GMOH), a Hamas-controlled entity. [Detailed analysis](#) reveals that these widely exposed and false claims are used by the NGO network, including MSF, to create international pressure in order to force Israel to end the war to disarm Hamas by withholding [weapons](#) (as in [Canada](#), [Germany](#), [UK](#), and [Italy](#)). The [report](#) by former MSF Secretary General Alain Destexhe demonstrates that MSF displayed a “systematic bias in favor of Hamas and hostility to Israel” Among other important aspects, the [preponderance of military age men](#) among the listed casualties and the inclusion of [non-violent deaths from natural causes](#) are of particular importance.

“Gaza Fatality Data Has Become Completely Unreliable”

Shifts in Proportion of Fatalities (Central Collection System)



March 2024: [Washington Institute for Near East Policy](#)

In other conflicts, in contrast, MSF openly acknowledged the lack of credible and verifiable information, as well as the clear discrepancies in the available data. For example, in the 2016 Syrian war, MSF acknowledged that the medical data they received “[does not distinguish civilian from non-civilian](#).” No such statements were made regarding Gaza.

**3. Hamas “Metro” Terror Tunnels and IEDs**

Beyond the militarization of hospitals, MSF’s narrative erases Gaza’s “[Metro](#)” [tunnel network](#) – a 500 kilometer fortress [built beneath Gaza’s civilian centers](#). Despite over two decades of presence in Gaza, MSF maintained silence on the hundreds of entrance shafts hidden within residences, mosques, schools, hospitals, and clinics. By turning a blind eye to evidence of the tunnels, MSF protected Hamas’s most critical military asset. The tunnels, equipped with the items necessary to stay underground for extended periods, were used to

hide Hamas members, launch terror attacks on Israel, and hold the hostages taken on October 7. As [analyzed in detail by Major General \(res.\) Yaakov Amidror](#) (and omitted by MSF), “the Gaza arena is a nightmare for any military professional: an extremely dense urban environment above ground, and an inconceivable number of tunnels below it. . . allowing movement from virtually any point to any other, with an enormous number of entrance and exit points carefully concealed within the dense urban landscape.... Most Hamas command centers were hidden beneath sensitive civilian buildings such as schools, mosques, and hospitals.” John Spencer, Chair of Urban Warfare Studies at West Point, explained in [Gaza’s Underground: Hamas’s Entire Politico-Military Strategy Rests on Its Tunnels](#), going into depth demonstrating how Hamas uses Gazans as human shields, “destroying the tunnels is virtually impossible without adversely impacting the population living in Gaza.”

In addition, MSF omitted the impact of an estimated 100,000 improvised explosive devices (IEDs) in Gaza. In many urban centers, this reached an average density of one device every 60 square meters,<sup>7</sup> transforming residential neighborhoods into a continuous minefield designed to collapse structures onto the IDF. Consequently, a significant portion of the structural destruction that MSF (and many others) attributed to Israel resulted from the detonation of Hamas’ booby traps and secondary explosions of stored munitions.

#### **4. Rocket and Missile Attacks**

MSF’s reporting omitted the military context of the unprecedented [rocket and mortar launches](#) by [Hamas and the Palestinian Islamic Jihad](#) from Gaza. According to the Times of Israel, in their [A Year of War](#) report, published on October 7, 2024, it explains terror groups from multiple fronts – including Gaza, Lebanon, Syria, Yemen and Iran “fired over 26,000 rockets, missiles and drones” at Israeli civilian population centers between October 7, 2023 and October 2024 (marking the first year of the conflict). This began with a massive barrage of over “5,000 rockets” on the morning of October 7 alone. MSF ignored these violations of international law, treating Israeli defensive strikes as unprovoked, reporting only on the response, never the provocation. This reporting also largely bypassed the humanitarian crisis within Israel: the internal displacement of over 150,000 Israeli civilians (approximately 60,000 from the northern border with Lebanon and 90,000 from the southern communities near Gaza) who were forced to flee their homes due to near-constant rocket fire.

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<sup>7</sup> According to IDF combat engineer reports and independent security analysis, Hamas filled Gaza’s urban areas with an unprecedented concentration of booby traps. [Frontline Israeli units reported encountering deadly booby traps every few dozen meters](#). This tactical choice directly contributed to the widespread structural destruction through secondary explosions of internal munitions and deliberate demolitions.

Furthermore, MSF has not acknowledged the lethal danger Hamas poses to its own population: approximately 10-12% of rockets fired from Gaza misfire, falling within the strip and [resulting in Gazan casualties](#). By failing to report these misfires, especially those in the vicinity of medical facilities, and instead attributing all explosive damage to Israel, MSF uses such tragedies to fuel their genocide narrative against Israel.

### **5. Strategic Hoarding and Aid Theft**

While MSF regularly attributes the lack of resources in Gaza entirely to the “Israeli siege,” it omits evidence of Hamas’s strategic [exploitation and hoarding of humanitarian aid](#) meant for civilians, prioritizing military infrastructure over medical investment. Critical analysis proves a lack of transparency regarding the diversion of resources.

In the years preceding October 7 (2007-2023), MSF’s narrative ignored the massive diversion of billions of dollars in humanitarian aid and construction materials, earmarked for the stabilization of civilian life. While MSF issued emotive press releases on the lack of medical infrastructure, it omitted that Hamas had spent “[hundreds of millions of dollars](#)” for their military rather than on public health. The funds were used to construct weapons and a vast network of military tunnels beneath civilian areas and medical centers. By framing the scarcity of supplies solely as an act of Israeli brutality, MSF malevolently transformed a complex security dilemma into a narrative of unilateral humanitarian deprivation. MSF’s framing also masked the complexity of the legal restriction of dual-use aid.

Following the October 7 massacre, MSF characterized the scarcity of food as a result of Israeli “intentional starvation,” yet omitted [documented evidence of Hamas gunmen hijacking humanitarian convoys](#) and aid trucks and engaging in price-gouging by selling the stolen aid in local markets to civilians at exorbitant prices.<sup>8</sup> Furthermore, while MSF characterized fuel shortages as a “death sentence” for patients, they omitted that “[Hamas \[was\] stockpiling more than 200,000 gallons of fuel](#).” In October 2023, MSF’s Deputy Director of the Middle East, Amber Alayyan, remarked in a Webinar entitled “[Gaza: Genocide in the Making](#),” that “we basically emptied our own stocks to give to the [Gaza] Ministry of Health,” an entity under the direct control of Hamas, subsidizing a regime that prioritizes its own military survival over the medical needs of its population.

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<sup>8</sup> Aid Theft and Price Gouging: [Video evidence](#) and local Palestinian testimonies have confirmed Hamas members seized aid trucks that entered Gaza through the Rafah and Kerem Shalom crossings. Reports indicate that humanitarian aid meant to be distributed free was sold in markets at 10 times the normal price.

## **6. October 7 Victims and Hostages**

Unlike MSF’s extensive Gaza reporting, no dedicated reports, press releases, or social media condemned Hamas’s atrocities or provided medical situational reports on the 1,200 murdered victims, the thousands of wounded Israelis and others in overwhelmed hospitals, or the hostages.


This blatantly unethical omission was criticized by over 40 current and former MSF staff who posted a statement on “The Souk” (an internal MSF platform) marking one year after October 7. They rejected the organization’s silence regarding Hamas’ “ferocious barbarity,” including sexual violence, and its failure to advocate for the Israeli hostages. The staffers declared that “this version of MSF does not represent us. It barely represents itself.” The small internal protest was made public in an article by Michael Powell in [The Atlantic](#).

MSF leadership did not respond directly, but in other frameworks, they attempted to explain or justify the silence on their lack of “operational access” in Israel and lack of firsthand testimony from their own staff or patients.


## **7. Hamas’ Manipulation of MSF via NGO “Guarantors”**

MSF’s claims of neutrality are contradicted by records from the Hamas Ministry of Interior and National Security (MoINS). Dated 2018-2022, these files reveal that Hamas’ internal security apparatus was embedded within MSF.

Now declassified, the documents expose Hamas’ system of “guarantors” (*kafeel*), mandatory for all international NGOs operating in Gaza. The system was designed to coerce organizations and ensure absolute compliance. Under this framework, Hamas mandated that every international NGO in Gaza assign a senior local official (such as a Director or Board Chair) to serve as a vetted “guarantor,” approved by Hamas. Internal documents show that Hamas closely monitored the movements, habits, and local reputations of high ranking NGO staff members, to “[classify guarantors according to security criteria in order to make use of them](#).” This arrangement allowed Hamas to gain access to the NGOs’ internal information and operations, specifically for MSF-Spain. The Hamas documents refer to the guarantors for MSF-Belgium as “not cooperating.” (See images below.)

State of Palestine Ministry of Interior & National Security Interior Security		 دولة فلسطين وزارة الداخلية والأمن الوطني جهاز الأمن الداخلي			
<b>Comments</b>	<ul style="list-style-type: none"> <li>She is the administrative director of the association.</li> <li>She traveled abroad four times and came back. Three times via the Rafah Crossing and once via the Beit Hanoun Crossing [Erez Crossing].</li> <li>Has four Hawala money transfers via [the method of] registered small package.</li> </ul>				
<b>Guarantor</b>	[Redacted]	<b>ID no.</b>	[Redacted]	<b>Association</b>	Doctors Without Borders - Spain
<b>Address</b>	[Redacted]	<b>Security Category</b>	None	<b>Association Cooperation</b>	Neutral
<b>Comments</b>	<ul style="list-style-type: none"> <li>She is the administrative director of the association.</li> <li>Does not have any stated [security] indications against her.</li> <li>She traveled abroad once and came back via the Beit Hanoun Crossing.</li> </ul>				
<b>Guarantor</b>	[Redacted]	<b>ID no.</b>	[Redacted]	<b>Association</b>	Doctors Without Borders - Spain
<b>Address</b>	[Redacted]	<b>Security Category</b>	None	<b>Association Cooperation</b>	Neutral
<b>Comments</b>	<ul style="list-style-type: none"> <li>She is the deputy head of the representative body of the association.</li> <li>She did not face any security meetings with the occupation or harassments by the occupation.</li> <li>She travels abroad and comes back many times via the Rafah Crossing and the Beit Hanoun Crossing.</li> <li>She received a single Hawala money transfer in August 2021 in the sum of 119 dollars.</li> </ul>				
<b>Guarantor</b>	[Redacted]	<b>ID no.</b>	[Redacted]	<b>Association</b>	Doctors Without Borders - Belgium

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State of Palestine Ministry of Interior & National Security Interior Security		 دولة فلسطين وزارة الداخلية والأمن الوطني جهاز الأمن الداخلي			
<b>Address</b>	[Redacted]	<b>Security Category</b>	None	<b>Association Cooperation</b>	Not cooperating
<b>Comments</b>	<ul style="list-style-type: none"> <li>She is the administrative director of the association.</li> <li>Does not have any stated [security] indications against her.</li> <li>She traveled abroad twice via the Beit Hanoun Crossing.</li> </ul>				
<b>Guarantor</b>	[Redacted]	<b>ID no.</b>	[Redacted]	<b>Association</b>	Doctors Without Borders - Belgium
<b>Address</b>	[Redacted]	<b>Security Category</b>	None	<b>Association Cooperation</b>	Not cooperating
<b>Comments</b>	<ul style="list-style-type: none"> <li>She is the director of the association.</li> <li>Does not have any stated [security] indications against her.</li> <li>She traveled abroad five times and came back via the Rafah Crossing.</li> <li>She received a single Hawala money transfer in 2018 in the sum of 1,088 dollars from her spouse [Redacted].</li> </ul>				

Hamas “Guarantor” documents for MSF Spain and Belgium

These documents confirm other sources demonstrating the absence of vetting and oversight in MSF’s Gaza operations and policies. According to an article published in *The Atlantic*, an MSF recruiter referred to the “[great organizational pressure to expand hiring in Gaza. We were told not to check backgrounds... Our Arab staff was greatly concerned because to be in the same room with operatives \[terrorists\] put all at risk.](#)”

### **8. Factual contradictions and omissions to the genocide narrative**

In referring to the Holocaust – the Nazi regime’s effort to exterminate the Jewish people, which resulted in the murder of two-thirds of the Jewish population of Europe – Raphael Lemkin coined the word genocide in his book *Axis Rule in Occupied Europe*. He defined genocide as: “The destruction of a nation or of an ethnic group,” and “A coordinated plan of different actions aiming at the destruction of essential foundations of the life of national groups, with the aim of annihilating the groups themselves.”

The MSF report omitted these essential dimensions and the obvious fact that in Gaza, following the October 7 Hamas attack (which had the characteristics of clear genocidal intent), the Israeli military response was not intended to and did not “annihilate” the population. Instead of mass killing, IDF policies mitigated the potential for mass casualties, including the creation of “safe zones” and the mass movement (displacement) of large portions of the Palestinian population, both of which are clearly inconsistent with “genocide.” In addition, calls to Gazan civilians [warned them of imminent operations](#) and IDF leaflets told civilians to leave an area ahead of operations. Clearly, the IDF’s prime objective was to destroy Hamas’ terror infrastructure, assembled during two decades within “densely built urban terrain populated by civilians whose close relatives include terrorist operatives, underlain by an elaborate tunnel system....” As competent military [experts](#) have shown, this requirement makes the Gaza war “arguably more complex than almost any other conflict of the modern era.” These objectives resulted in deaths, including of non-combatants, but do not in any way indicate genocidal intent.

Similarly, MSF’s December 2024 “Life in a Death Trap” publication falsely accused the IDF of preventing life-saving mass vaccinations. At the time of publication, the IDF had facilitated two large-scale rounds of polio vaccinations for over 560,000 Palestinian children, achieving a 95% coverage rate according to the [WHO](#). In addition, [COGAT reported](#) entry of “282,936 vials of vaccines against a range of diseases and epidemics... sufficient for 1,000,000 civilians” (about half of Gaza’s population). [WHO noted](#) that these campaigns relied on the delivery of “90 cold storage boxes, 490 vaccine carriers, and other supplies.” This process involved tactical pauses and safe zones, which are obviously incompatible with the “intent to destroy.” These blatant omissions, taken individually and together, highlight the duplicity and deceit throughout the MSF “genocide” campaign.

## Hypocrisy, Double Standards, and Singling Out Israel

The blatant targeting of Israel, and particularly the genocide campaign, stand out in comparison to other conflicts. In [Yemen](#), MSF addressed the “[warring parties](#)” or the “[Saudi-led coalition](#),” while focusing on clinical outcomes and operational safety. There, MSF made accusations against specific political groups and individual leaders, in contrast to their accusations against the State of Israel as a whole. In addition, MSF’s repeated accusations against the United States for [complicity](#) regarding Israel (again in close coordination with other NGOs, such as HRW, Amnesty, and Oxfam) is not found elsewhere.

The blatant double standards are also reflected in the silence regarding war crimes committed by Hamas and its allies, erasure of the 1,200 Israeli victims, and MSF’s failure to publicly advocate for the medical needs, protection, and release of the 250 hostages taken to Gaza, including infants and the elderly. These are glaring exceptions to MSF’s practice of advocating for missing persons and the medical needs of detainees in other conflicts. In contrast to its current silence, MSF previously issued urgent warnings against abductions of civilians in Sudan, [urg\[ing\] the warring parties to spare civilians](#). In addition, MSF publicly demanded specialized medical and psychological care for thousands of women and children [kidnapped](#) by Boko Haram in Nigeria and launched specialized medical [programs to support survivors of ill treatment in Syria](#). Only regarding Israeli victims did the organization abandon its practice of “speaking out” against mass killing, such as in [Srebrenica](#), or during the [Rwanda Genocide](#). In its overall silence on the slaughter of Israeli civilians and the hostages, MSF substituted a one-sided narrative for the principle of ‘t moignage’ (witnessing).

A quantitative audit of MSF’s global communications in 2023-2025 revealed a profound imbalance in how the organization allocates its moral and political capital. While MSF operates in over 70 countries, its advocacy efforts throughout late 2023 were almost exclusively focused on Gaza, frequently at the expense of other high casualty crises. The selective genocide opprobrium – a form of insidious [Holocaust inversion](#) – is applied uniquely to Israel and absent from other areas of significantly greater bloodshed.

The hypocrisy was also highlighted in the justifications offered by officials who claimed that its positions are based on reporting provided by volunteers and staff in areas where they have operational access. MSF explained that it does not run programs in Israel, while “[in Palestine, \[the\] reporting is rooted in the direct witnessing of our patients and staff on the ground there.](#)”

However, the record shows that this is counterfactual. For example:

**Myanmar** (2017): MSF is barred from Rakhine State, but published a comprehensive report *based entirely on third party interviews of survivors and witnesses*. The report estimated that [“at least 6,700 Rohingya were killed in one month – at least 730 were children under five years of age,”](#) and detailed [“raids on villages, random and indiscriminate shootings, dead bodies on escape routes, arson attacks, and sexual violence.”](#)

**Syria** (2016): While MSF had no access to areas controlled by the regime, and acknowledged that the information on casualties was [“often erratic and can lack consistency,”](#) the organization including then-President Joanne Liu issued forceful condemnations of the [“bloodiest indiscriminate bombing”](#) in the siege of Aleppo.

**Sudan / Darfur**: 300,000 people were reportedly murdered, [8.5 million](#) displaced, and reports of ethnic cleansing were widespread. While MSF aggressively applied the “genocide” label to Gaza **over 270 times** across its platforms, the term was not mentioned regarding Darfur. Instead, MSF claimed that it lacked the authority to determine genocidal intent and therefore [refrained from using the term genocide](#), and considered it [“irresponsible”](#) for the organization to assert genocide, emphasizing that as a medical organization [“MSF does not have sufficient information to either claim or deny genocide”](#) and adopting such legal characterizations could compromise its neutrality, access, and credibility.

**Ethiopian forces** [executed three MSF staff members](#) in June 2021, yet the organization waited four years to release a report, in sharp contrast to the instant MSF accusations against Israel immediately after the October 7 atrocities.

The hypocrisy and double-standards were also reflected in MSF’s [2023 International Activity Report](#), which only briefly acknowledged the October 7 atrocities and then declared that [“Israeli authorities waged their offensive with impunity.”](#) On Sudan and Darfur, MSF merely described the war in passive terms - the result of a spiral of chaos.

## **Conclusions and Recommendations**

As this detailed report and analysis clearly demonstrates, for years before the October 7 attack, and more intensely in the months and years that followed – particularly in its intense “genocide” campaign, MSF officials and medical personnel consistently and egregiously violated the claims of **“strict adherence to humanitarian principles, independence, and medical ethics.”** In support of a partisan anti-Israel agenda, MSF used the credibility granted to doctors in order to erase weaponization of hospitals, and promoted

false depictions of Israeli actions. As documented by the CAMERA organization, MSF led the [“medicalization of Hamas disinformation.”](#)

In place of the **principle of neutrality**, MSF’s intensely partisan advocacy demonized Israeli responses to terror through false accusations of war crimes, collective punishment, siege, deprivation, and mass killings. As documented, with the December 2024 publication of “Gaza: Life in a Death Trap,” the genocide libel became dominant throughout MSF’s activities. In the global anti-Israel chorus of NGOs and UN officials, MSF’s medical experts played the role of “clinical validators.”

In response to critics, MSF’s website’s [“frequently asked questions and allegations about MSF’s work in Gaza”](#) acknowledged and then casually dismissed the extensive evidence:

"How does MSF respond to accusations regarding its lack of neutrality?"

Our teams report what they see with their own eyes, and what they themselves experience, in Gaza and the West Bank. Numerous observers, legal experts, human rights organisations, and several United Nations reports also describe the total destruction of the Gaza Strip. This includes Israel’s dismantling of the health system, siege imposed on the territory, disregard for civilians and civilian infrastructure, and man-made famine, which are all part of a genocidal campaign. (emphasis added)

In other words, MSF chose not to see “with their own eyes” or to “experience” the weaponization of hospitals or the torture and sexual abuse of Israeli hostages. The justification, also on the MSF website, is based on the patently absurd assertion that “Throughout our activities in Gaza since 7 October 2023, we have never encountered a patient who was presented as being among the hostages.” Since Hamas did not introduce MSF’s personnel in Gaza to the abused and tortured Israeli hostages, their suffering could be, and was, ignored.

In contrast, as documented in this report, MSF pumped out continuous and unsupported condemnations of Israeli “war crimes,” “deliberate killing,” “intentional starvation,” and “genocide,” based on [invented and unsupported pseudo-legal arguments](#) that were not applied to Hamas’ attacks – including thousands of rockets and missiles targeting Israeli civilians, each a war crime.

Furthermore, for years, MSF personnel in Gaza were, like others, surely aware of – but remained silent regarding – Hamas’s systemic abuse of hospitals, which was a blatant violation of medical neutrality under international law. This silence was broken in February

2026, two and one-half years after October 7, with the quiet addition at the bottom of the Gaza FAQ website section, asking: “Why did MSF suspend and stop some medical activities at Nasser hospital?” The response referred to “patients and MSF personnel [who] have seen armed men, some masked, in different areas of the large compound of the hospital,” as well as “security incidents affecting the safety of their international staff,” adding that “these incidents pose serious security threats to our teams and patients.” (Notably, MSF omits all details regarding these “security incidents.”) In contrast, legitimate and defensive Israeli military actions are condemned for “regularly and deliberately target[ing health facilities], resulting in loss of life and damage to infrastructure.”

MSF’s leadership role in advancing a false and perfidious blood libel against the Jewish state highlights the consistent violation of the fundamental principles of medical ethics. As an anonymous staffer concluded, MSF has become: “blindly pro-Palestinian to an extent that was destructive....”

**On this basis, we offer the following recommendations:**

1. Comprehensive, independent, and public investigations must be launched to document how MSF International and its national branches – specifically MSF USA and MSF UK – became central participants in demonization campaigns involving unsubstantiated claims of starvation and genocide. The mandates of these investigations include identifying the structural and decision-making failures that allowed the organization to abandon its founding principle of neutrality, and recommendations for revised structural and decision-making measures in order to restore the founding principle of political neutrality.
2. To restore its credibility, MSF must immediately stop repeating the “genocide” accusation ([Holocaust inversion](#) and a modern blood libel), as well as accusations of intentional starvation, famine, war crimes, ethnic cleansing, and similar unsupported allegations.
3. All MSF personnel and volunteers must be externally vetted to prevent the inclusion of individuals who support or have links to terrorist organizations.
4. Immediate measures are necessary to remove the sources of bias within MSF’s leadership and communication structures. While the organization has historically [denied accusations of institutional antisemitism](#), recent [whistleblower testimonies](#) point to a pervasive culture of silence regarding Hamas atrocities and Israeli victims, as well as antisemitism. Transparent accountability mechanisms are necessary to ensure that medical advocacy is not weaponized to marginalize Jewish and Israeli personnel or to provide cover for extremist ideologies.

5. The governmental agencies that grant charitable status to non-profit entities in different countries, such as the US Internal Revenue Service Section 501(c)(3) process, the Charities Directorate of the Canada Revenue Agency (CRA), and the UK Charity Commission, must undertake urgent reviews of the MSF branches in their respective countries.

