

OPT EMERGENCY SITUATION REPORT

Issue 8
<u>As of 26 October 2</u>023, 18:00



1,956 7,028 18,482 184* 104 Number of people Number of people Number of people Number of people Attacks on Health killed in Gaza injured in Gaza killed in the West injured in the West Care since 7 October Bank *WHO SSA Bank 1.4 M 34% 64% 64% Estimated number of Hospitals not Ministry of Health **UNRWA** primary Liters of water people displaced currently functioning primary health care health care clinics available per person clinics closed closed per day

Source for Gaza and West Bank death and injury figures: Ministry of Health

SITUATION OVERVIEW

According to the Ministry of Health, since 7 October, 7,028 Palestinians have been killed in the Gaza Strip of whom approximately 42% are children (2913), 44.5% are females (3129) and 55.5% are males (3,899). 104 Palestinians have been killed in the West Bank of whom 31% are children.

Approximately **1400** Israelis, including foreign nationals have been killed, more than **5,431** injured and more than **200** taken hostage since the hostilities started.

Gaza: Largescale fatalities and casualties with continued siege preventing entry of essential supplies at scale.

Humanitarian workers unable to enter or exit, no evacuation of the injured and sick. Mass displacement of 1.4 million people, including 600,000 from the north to south of Gaza and 641,000 taking shelter in UNRWA. The average number of IDPs per UNRWA shelter has reached three times their designated capacity.

West Bank, including east Jerusalem: Escalations of settler and military violence, including use of live ammunition and airstrikes, as well as complete obstruction at checkpoints between Palestinian towns and closure of several communities, preventing entry/exit for patients, health personnel and ambulances.

HEALTH NEEDS AND RISKS

Gaza

- High incidence of casualties and fatalities as a result of the bombardment. MoH reported that its daily use of
 medical consumables during the war is equivalent to its monthly consumption before the war.
- **350,000** non communicable diseases patients (diabetes, heart disease, cancer, and others). 1000 patients in need for kidney dialysis. **80% of dialysis machines are in the north**.
- 50,000 pregnant women, with an average of 183 births per day.
- 130 premature infants are dependent on incubators (61% are in the north), which require electricity, to keep them alive.
- An imminent public health catastrophe looms in the setting of mass displacement, overcrowding of shelters, damage to the water and sanitation infrastructure.
- Mental health toll affecting all facing bombardment and siege.
- Medical staff capacity is 30% of what is required.

West Bank, including east Jerusalem

- Increased injuries placing a high demand for emergency medical supplies for first response and at hospitals.
- Over 270 patients per day need access to health care in east Jerusalem, as well as in Israeli facilities, from the rest of the West Bank.
- At least 400 patients and companions from the Gaza Strip are stranded in the West Bank, including east Jerusalem.
- **Around 5000 Palestinians from the Gaza Strip** who had been working in Israel on 7 October are also sheltering in the West Bank, where they require primary health care support and provision of medications for chronic conditions.

HEALTH CARE FUNCTIONING AND ACCESS

Gaza

- Acute shortage of fuel and electricity is seriously affecting the most critical functions at all hospitals and the ability
 of ambulances to respond. Fuel depletion risks the lives of injured patients; patients in intensive care, those
 requiring surgery, in addition to neonatal incubators and over 1000 patients dependent on dialysis.
- Prevention of entry/exit for humanitarian supplies and people from Gaza.
 - Affecting fuel, water and sanitation, food and nutrition, medicines, medical supplies and equipment for health care.
 - All drugs and medical supplies are depleting, including those needed for immediate response to casualties (e.g. saline, anesthesia), those needed for treatment of long-term conditions (e.g. insulin) and lifesaving drugs for newborns.
 - Shortage of blood: Ministry of Health called for blood donation and appealed to ICRC to supply blood units from outside the Gaza Strip.
 - o Non-entry of **health workers** for humanitarian response, including management of casualties.
 - o Prevention of exit and evacuation of **patients and casualties**. 95 patients per day are unable to access the specialized health care they would usually receive outside the Gaza Strip.
- Health services severely affected.
 - o **64% (46/72) of primary care facilities not functioning**; a higher proportion not functioning in Gaza City (74%) and North Gaza (92%).
 - 34% (12/35) of hospitals not functioning; 119% of hospital beds currently occupied in 7 major hospitals. At Shifa hospital alone, the bed occupancy rate has reached 171%. This puts pressure on staff to free up beds for new patients, risking patient safety.
 - Severe shortage in fuel supplies is affecting:
 - Hospitals functionality (six hospitals stopped their operations due to fuel shortage)
 - UNRWA has announced that it will have to halt its operations if no fuel is received.
 - Ambulance functioning and access to the sick and injured.
 - Medical equipment increasingly non-functional, affecting diagnostic and treatment capacities.
 - 55% of the Health Cluster partners stopped or limited operations because of the insecurity and mass infrastructure damage which makes it difficult to move.

- Evacuation orders affecting the north of the Gaza Strip.
 - o 13 hospitals in Gaza City and North Gaza are currently functioning and facing evacuation orders. Evacuation orders are impossible to carry out and risk the lives of over 2000 inpatients, particularly the most vulnerable requiring life support. Bed capacity in the south (1/3 of that in the north) cannot accommodate and there is insufficient ambulance capacity.
 - Most dialysis capacity (80%) located in in the area ordered for evacuation.
- Destruction severely affecting infrastructure in the Gaza Strip and obstructing ambulance access to the injured.
 - According to the Ministry of Health, 1600 people, including 900 children reported to be missing and may be trapped under the rubble, obstacles to providing first aid response.
- Routine surveillance systems are not currently functioning, hampering effective detection, analysis, and response to public health threats. UNRWA shelters have reported thousands of cases of acute respiratory infections and diarrhea as well as cases of chicken pox. Trends will be monitored closely to understand if these exceed normal case numbers and efforts will be taken to reduce transmission.
- Overcrowding of shelters and inadequate water and sanitation will increase the risk of infectious diseases.

West Bank, including east Jerusalem

- **First response capacities overstretched by increased casualties,** with a high demand for emergency medical supplies at hospitals.
- Checkpoint closures, insecurity, movement restrictions, and attacks on health are making movement of ambulances difficult and restricting movement of healthcare workers, access for patients to primary and hospital care between towns in the West Bank and in east Jerusalem and at Israeli hospitals.
- Parts of Area C remain inaccessible to partners running mobile clinics, leaving the population without access to essential healthcare services.

HEALTH ATTACKS

WHO has documented 184 attacks on health care in the occupied Palestinian territory since 7 October.

- 76 attacks in the Gaza Strip have resulted in 491 fatalities and 372 casualties, including 16 fatalities and 30 injuries of health care workers on duty. The attacks have affected 35 health care facilities (including 20 hospitals damaged) and 24 ambulances. Twelve hospitals and 46 primary care clinics are no longer functioning, while all hospitals are implementing emergency contingency plans that affect functioning and access to health care.
 Coordination and communications have been affected following damage to the Gaza Emergency Operation Centre.
- 108 attacks on health care in the West Bank affecting 88 ambulances and including 59 attacks involving obstruction to delivery of health care; 55 involving physical violence towards health teams; 17 involving detention of health staff and ambulances; and 12 involving militarised search of health assets.

HEALTH RESPONSE

WHO

- 22 trucks with medical supplies have entered Gaza, including 5 from WHO and others from Egyptian MoH, ERC,
 UNICEF, Qatar and Tunisia. WHO supplies will cover the health needs of more than 300,000 people including trauma care, essential health needs and treatment for chronic conditions.
- WHO delivered 51 pallets of lifesaving medicines, supplies and surgical equipment to Shifa Hospital in Gaza city. WHO medicines and health supplies have also been delivered to four key hospitals south of Wadi Gaza, as well as to the Palestine Red Crescent Society (PRCS) for distribution to two of its health facilities and ambulance crews.
- WHO, with support from UNRWA, delivered the minimum amount of fuel required to six major hospitals and PRCS to sustain its ambulance services. However, this is only enough for just over 24 hours.
- Two additional flights arrived to Al Arish, Egypt, since 14 October carrying trauma and surgical supplies for 2300 people, essential medical supplies for 100,000, medicines for treatment of 150,000 people with noncommunicable diseases, medical tents, and vitally needed water tanks for hospitals.

 WHO is coordinating with MOH, UNRWA and others partners to establish early warning systems to support disease surveillance and control measures, especially in over-crowded shelters.

Health partners

- Partners continue to **preposition supplies and other resources** in Egypt to support the health response; delivery of supplies to Gaza is needed to re-establish operations for most partners.
- Surge staff deployed from inside Gaza are continuing to support trauma management at Gaza hospitals.
- Fourteen global EMT (Emergency Medical Team) partners are on standby ready to be deployed to support management of patients in Gaza.
- Health Cluster is tracking partner procurement and Nutrition Working Group planning response pending access. The Nutrition Cluster will now be activated.
- Health Cluster partners are providing health and MHPSS services to workers from Gaza sheltering in the West Bank and supporting emergency and trauma care needs across the West Bank.

WHO RECOMMENDATIONS

- Immediate end to hostilities.
- Establish and sustain protected humanitarian access for the immediate entry of adequate quantities of humanitarian supplies including fuel, water, food, medicines, and other essential supplies and personnel into the Gaza Strip and unimpeded access for patient evacuation and outside referral.
- Prioritization of the shipment of fuel to operate desalination plants, hospital generators, ambulances.
- Ensure safe passage for medical supplies and civilians within the Gaza Strip. Ensure WHO medical supplies can safely reach major hospitals in Gaza City and North Gaza and hospitals in south Gaza.
- Ensure the respect and the protection of health care as well as civilians and civilian infrastructure against attacks.
- Ensure the injured have immediate and unhindered access to health care.
- Ensure continuity of essential health services.
- Rapidly reinforce infectious disease surveillance and control measures.

FUNDING

WHO estimates \$50 million needed to support the health response efforts in the coming three months - \$30 million for essential medicines and supplies and \$20 million for other health interventions. WHO has confirmation from several partners regarding funding to support the response.

WHO has secured \$8.2 million from the WHO Contingency Fund for Emergencies and \$2.5 from Central Emergency
Response Fund (CERF) (of which, \$500,000 is allocated for West Bank) for the immediate procurement of essential
medications and supplies. Additionally, it is reprogramming \$1 million to procure urgently needed medical supplies
from the local market to ensure the continuity of essential health services, including emergency obstetric care,
management of chronic diseases, and infectious disease control.

Health Cluster partners support tracker		
	Partners	\$
Delivered locally procured supplies	WHO, MedGlobal, Islamic Relief Palestine, MAP, PCRF, QRCS	4,408,500
Confirmed incoming funding	WHO, UNICEF, MAP, AWDA, PMRS, MdM France, MdM Suisse, MdM Spain, UNFPA, Care, MedGlobal, QRCS, HI, PCRF	20,112,500
Total support committed/ delivered		24,521,000

Further information:

- Dr Richard Peeperkorn, WHO oPt Representative, peeperkornr@who.int
- Dr Thanos Gargavanis, WHO oPt Emergency Care Technical Officer, gargavanisa@who.int
- Bisma Akbar, WHO oPt Communication Officer, akbarb@who.int