Highlights

- The latest figures provided by the Ministry of Health (MoH) indicate that three Palestinians, including two children, were killed, and 901 were injured by Israeli forces during the demonstrations between 28th August and 9th September.

- Out of the total 901 injured, 300 required transfer to the MoH hospitals or NGO clinics, including 76 children and 8 females. Of the hospitalized injured, 4 cases were critically life threatening, 118 moderate, 168 mild, and the remaining 10 were unspecified cases\(^1\) (see also figures 1 and 2 on the following page).

- The MoH and the Palestinian Red Crescent Society (PRCS) set up nine Trauma stabilization Points (TSPs). 601 injured were managed and directly discharged at the TSPs. WHO continues to strengthen the capacity of the TSPs across Gaza to provide life-saving interventions.

- Gaza's 14 public hospitals rely on donated fuel to run generators during the electricity black-outs, which last 18-20 hours per day. The last batch of UN donated fuel has been distributed during August 2018. The local authorities have since procured 120,000 litres and a charity organization (Human Appeal International) has provided 10,500 litres to sustain services at public hospitals throughout the month of September; hospitals are rationalizing the use of the remaining reserves by suspending sterilization, laundry, cleaning, catering and selected diagnostic services during grid electricity cuts. Uninterrupted electricity supply is critical to sustain life saving services in particular in intensive care units and operating theatres.

- In August 2018, the Central Drug Store of the MoH in Gaza reported 47% of essential drugs at less than one month’s supply and 40% completely depleted. 30% of essential disposables were at less than one month’s supply.

\(^1\) Source: Ministry of Health
Caseload of casualties related to the conflict

- **Casualties**: Since the 30th March until the 9th September 180 people have been killed; 165 people were killed by Israeli forces during the demonstrations and 15 people killed during Israeli attacks. The total figure of people injured amidst conflict since 30th March stands at 19,640. From this total, 9,568 were treated and immediately discharged from the TSPs, with the remaining 10,072 transferred to hospital treatment.

- **Emergency Department (ED)**: Out of the total 10,072 injured referred to emergency departments:
  - 47% were live ammunition gunshot injuries (a total of 4,782 cases).
  - 1,718 were children (17%), 666 (7%) were female and 9,406 (93%) were male.
  - 427 (4%) cases were critical, 4,538 (45%) were moderate, 4,901 (49%) were mild and 206 cases were unspecified.

- **Incidence of limb injuries**: From the 30th of March to date;
  - A total of 6,276 limb injuries arrived to emergency departments in referral hospitals.
  - Some 1,200 injured people will be in need of limb reconstruction, and will require up to 7 surgeries and extensive rehabilitation and treatment for up to 2 years.

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2 174 have been reported by the MoH and an additional 6 have been held by the Israeli Authorities reported by OCHA.
3 According to a recent assessment conducted by MAP-UK.
• **Amputations**: Since the 30th March until the 9th September the total number of amputations was 76, including 14 children and 1 female. Out of this total, 68 were lower limb amputations and 8 upper limb amputations.

• **Paralysis**: Since the 30th March until the 9th September the total number of patients with paralysis due to spinal cord injury was 11, two of which have died, with 9 cases remaining.

• **Patients discharged early**: Patients are discharged early every week to make room for a new wave of expected casualties. Approximately 700 patients have been discharged early since the 30th March. Most of these patients are receiving trauma follow-up care through Health Cluster partners.

• **Elective surgeries postponed**: Since 30th March approximately 7,500 elective surgeries had to be postponed due to the massive influx of trauma casualties, lack of bed capacity and limitations through electricity shorages.

**Depleting essential medicines supplies**

- The Central Drug Store in Gaza supplies all 14 MoH hospitals (2,243 beds) and 49 MoH primary healthcare clinics in Gaza. These health facilities provide 40% of Gaza’s primary healthcare, covering approximately 600,000 people and 90% of all hospital care services.

- According to Gaza’s Central Drug Store at the end of August 243 essential medicines out of the total 516 essential medicines list (47%) were at less than one month’s supply and 206 essential medicines (40%) were completely depleted at the MoH store in Gaza. In addition, 253 essential disposables out of the total 853 essential disposables list (30%) were at less than one month’s supply (See also figure 3 below).
On the 12th August shortages in cancer drugs have reached around 85%, which halted the provision of all cancer services in the Gaza Strip. Following this, the MoH in Ramallah has released 29 cancer drugs from the central drugs store in Nablus, West Bank on the 14th August. According to health authorities in Gaza, 12 items will cover the need for one month and the remaining 17 will cover the needs for three weeks.

**Electricity crisis in Gaza**

- The health sector in Gaza relies on donated fuel to run backup electricity generators in order to sustain minimum critical health services. Every month, approximately $500,000 USD are needed to purchase fuel for emergency generators in order to sustain 58 hospitals and critical health facilities. The last UN donation was distributed throughout August 2018 and fuel reserves are rapidly depleting.
- Meanwhile, the MoH has initiated drastic measures to rationalize the remaining fuel supplies: Key services in the 14 public hospitals, such as elective surgery, sterilization and diagnostic services continue to work at reduced capacity. In August, the waiting time for elective surgery was 56 weeks, which is well beyond the Ministry of Health (MoH) threshold of 24 weeks. Delays of necessary medical interventions may involve a prolonged period of suffering and ill health, and affects the psychological and social life of the patient. In some cases, this can trigger further medical complications.
- In the 1st week of September, the local authorities procured 120,000 litres of fuel to sustain services at hospitals, and a charity organization has donated 10,500 litres to Public Hospitals, which will help MoH hospitals to sustain essential services until end September 2018.

### Waiting time for elective surgery in weeks since the start of 2018

<table>
<thead>
<tr>
<th>Month</th>
<th>Waiting time for elective surgery measured in weeks</th>
<th>Acceptable threshold of 24 weeks</th>
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<tbody>
<tr>
<td>Jan</td>
<td>44</td>
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<td>Feb</td>
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<tr>
<td>August</td>
<td>56</td>
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- The extended power cuts mean that generators become increasingly overused, translating into accelerated wear and tear and increased need for repairs or replacement. This has also increased the maintenance demands, which is difficult to provide, as spare parts are part of the “dual-use list” and restricted from entry to Gaza. According to the WHO HeRAMS assessment results, currently 6 generators supporting the public hospitals are in need of repair or replacement.

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5 WHO is monitoring the elective waiting time each month.
6 The Government of Israel restricts the entry of a large number of materials, particularly machinery and related equipment, on the grounds that these serve dual-purposes (i.e. civilian and military) and are misused by the Hamas and armed groups in Gaza. As such, every import of a good or material on the dual-use list must be individually approved by the relevant Israeli authorities.
Any disruption in the power supply will be immediately life threatening for over 4,800 patients relying on electrical devices, including neonates in incubators, and over 1.27 million people would be directly affected by potential closures of hospitals, in addition, this could translate into increased risks of waterborne diseases and outbreaks across the Gaza Strip.

Karem Shalom Closure

On 9th July, Israeli authorities announced the closure of Kerem Shalom crossing, temporarily prohibiting entry of goods except medical and food supplies. Kerem Shalom has reopened as of 15 August, operating at the capacity as prior to the closure. The crossing has been closed on 9 September because of Jewish holidays, and is expected to remain closed until 12 September. The Health Cluster is constantly monitoring the situation.

Attacks against health

According to MoH, PMRS, UHWC and PRCS, for the period of 28th August – 9th September, 13 health workers were injured and 1 ambulance was damaged in 12 different incidents. Of the health workers, 5 were hit by gas canisters, 3 by live ammunition, and 5 suffered injury from gas inhalation.

Cumulative figures on attacks against health: From 30th March to 9th September, three health workers have been killed and 417 injured in 236 recorded incidents against health staff and facilities. 61 ambulances and 5 others health vehicles have been damaged, as well as 2 health facilities (a specialized health center for people with disability and the MoH central ambulance station were damaged as the result of an Israeli air strike on 14th July).

Access through Erez

As of 9th September there were 271 patient applications (237 applications through the Palestinian Patient Liaison Office and 34 applications coordinated with Jordan) for persons injured in demonstrations to exit Gaza via Erez Crossing for health care. The status of these permit applications are as follows:

- 66 applications were approved (acceptance rate of 24%, which is significantly lower than the overall rate of 59% for the first half of 2018)
- 106 were denied (denial rate of 39%, which is significantly higher than the overall denial rate of 9% for the first half of 2018)
- 99 patient applications were still pending (37% of the total)

For additional information on access barriers for Palestinian patients, see WHO’s latest monthly access report.
Emergency Response

Provision of medical supplies:

- **WHO** delivered to the Ministry of Health essential medicines for treatment of mental health disorders as well as assistive devices for trauma patients.
- **The United Nations Children’s Fund (UNICEF)** delivered 201,300 bags of 500ml Sodium chloride 0.9% injection, with their giving sets to the MoH in Gaza. About 45,000 people will benefit from this procurement.
- **Medical Aid for Palestinians (MAP-UK)** delivered 7 drug items and 1 disposable item to the MoH Central Drug Store. Those items were procured under the project “Provision of life saving drugs and disposables to respond to emergency medical needs in Gaza” funded by OCHA/oPT Humanitarian Fund second release allocation and implemented by MAP. Fourteen drug items at zero stock level including items for oncology will soon be purchased, with a total worth of US$126,000.

Health Partners’ Response:

- **The Union of Health Work Committees (UHWC)** teams provided first aid to 61 cases, including 29 gunshot injuries, at their medical points in Rafah and the Mid-zone. In addition, Al Awda hospital, using a fund from Muslim Aid, was able to provide emergency services for 33 cases at their emergency department, 8 of which underwent urgent surgical operations.
- **Humanity and Inclusion (HI)** in a partnership with local organizations has deployed 10 multidisciplinary teams in all the five governorates of Gaza. So far, HI has provided nursing and rehabilitation services for 1,314 injured persons with the total of 13,281 multidisciplinary sessions. HI has also distributed a total of 231 assistive devices including wheelchairs, crutches, and anti-bed sore mattresses. Furthermore, HI has conducted a two-day specialized training to partners occupational therapists and physiotherapists on fractures, x-ray reading and therapeutic planning.
- **Doctors Worldwide – Turkey (DWWT)** provided 265 cases with a total of 1,209 multi-disciplinary rehabilitation sessions, including nursing, medical examinations, physical therapy and psychosocial support.
- **Public Aid Hospital** ambulances have transferred and provided first aid services to 13 injured patients.
- **United Nations Relief and Works Agency (UNRWA)** provided 144 post-operative consultations offering medication and wound dressing. Since the 30th March, UNRWA has provided a total of 3,908 postoperative consultations at their 22 primary healthcare clinics.
- **Health Matters/ International Medical Corps (IMC)** partners provided immediate care for a total of 66 injured cases, out of them 41 cases received wound care at the TSPs; and 25 were transferred to hospitals.
The Palestinian Medical Relief Society (PMRS) provided first aid to 91 injured people, including 18 gunshot injuries. Since the start of demonstrations, PMRS has provided first aid to a total of 3,595 patients. PMRS has also mobilized three outreach teams in Gaza, Khan Younis and the North governorate. The teams provided post-operative care to 22 new cases. To date, PMRS has provided postoperative care to 691 casualties, out of those, 195 have received assistive devices.

The Palestine Children's Relief Fund (PCRF) deployed a spine surgical team mission to European Gaza Hospital (EGH), for the period from the 2nd to the 7th September. During this period, the mission was able to screen 32 cases and operate on 11 cases, most of them were with cervical spine.

Haifa Charity Hospital staff and ambulances provided first aid to 90 injured patients in the field and transported 35 cases to the medical points in Malaka area, east of Gaza. The hospital also conducted 6 peripheral neurosurgeries and provided 242 post-operative consultations, including provision of medication, consumables, laboratory and x-ray services and wound dressing.

The Near East Council of Churches - Department of Service for Palestinian Refugees (NECC/ DSPR) has conducted 73 home visits through its three clinics in Shajia, Daraj and Rafah, and delivered 73 medical packages to those injured during the demonstrations. NECC clinics have also provided medical services and treatment to 32 injured cases. Through their psychosocial program, NECC has conducted home visits to 30 injured children to provide psychosocial support sessions, including stress management, debriefing sessions, healing and education by art.

Médecins du Monde-France has been providing support on wound management to five MoH PHC centers: Bani Suhaila, Abassan Kabira, Shuhaida Deir el Balah, Old Bureij and Old Nuseirat. The support included in-service training as well as the provision of drugs and disposable medical supplies. During the reporting period, 138 new patients benefited from these services. Also, to respond to the MH needs identified while providing these services, MDM-Fr is currently working with the MoH to set up psycho-education sessions, targeting patients as well as care givers, which are planned to start in September.

Coordination and Information:

- The Humanitarian Response Plan (HRP) Workshop took place in Gaza on the 4th September. Partners reviewed the humanitarian needs of the health sector, and set the activities required to address those needs.
- WHO continues to monitor the access of patients from Gaza and attacks against healthcare across the oPt. For additional information on access barriers for Palestinian patients, see WHO’s latest monthly access report.
Funding needs

- From the 30th March until 31st December 2018, WHO and the Health Cluster partners require a total of $43.8 million USD. To date, a total of $21.5 million USD has been received, leaving a gap of $22.3 million USD in order to cover the needs until the end of the year.

- The funding is necessary to support the following activities:
  - Fuel to run hospitals on back-up generators during the mains power cuts for a period of 8 weeks
  - Deployment, coordination and support to quality-assured emergency medical teams (EMTs) across the trauma path;
  - Expanding multi-disciplinary outreach teams, with a focus on physiotherapy and mental health and psychosocial support;
  - Providing essential medical supplies for the treatment of trauma patients, emergency patients and non-communicable disease patients, including new-born’s and other vulnerable groups;
  - Strengthening the reporting and monitoring of attacks on healthcare;
  - Strengthening emergency preparedness

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