Following the sixth mass demonstration by Palestinians on the Gaza side of the perimeter fence with Israel, which took place on the 4th May 2018, 2,051 Palestinians were injured by Israeli forces, according to the Ministry of Health (MoH).

Out of the 2,051 injuries, 586 required immediate transfer to the MoH hospitals or to NGO clinics, (including 92 children, 58 females and 528 males). From the hospitalized injuries, 6 cases were critically life threatening, 175 moderate, 401 mild and the remaining 4 were unspecified cases.

An additional 1,465 injuries were managed at primary healthcare centers and trauma stabilization points by the MoH, Union Health Workers Committee (UHWC) NGO and by the Palestinian Red Crescent Society (PRCS).

The casualties occurred during the mass demonstrations by Palestinians on the Gaza side of the perimeter fence with Israel. People from all over the Gaza Strip gathered near the area, where the Israeli army imposes a ‘No Go Zone’, to mark the Palestinian ‘Land Day’, the sixth of a series of mass protests leading up to the 70th anniversary of what Palestinians refer to as the 1948 ‘Nakba’, on 15 May.

For the sixth week in a row, mass gatherings took place across Gaza, 500-700 meters away from the perimeter fence, in the following 5 locations:
- An-Nahda area in the east of Rafah
- Al-Najar area east of Khuza’a in Khanyounis
- Al Bureij camp in the Middle Area
- Malaka area east of Gaza City
- Abu Safiya in Jabalia and at the checkpoint in Beit Hanoun, North Gaza

![Hospitalised casualties per governorate](image)
The MoH confirmed the delivery of a shipment of 20 trucks containing pharmaceuticals and medical supplies items worth 3 million US Dollars for distribution through the central store in Gaza. The shipment, which is expected to reach its destination in another couple of days, was moved from central stores in Nablus to priority health points in Gaza.

The transportation company in charge of the delivery has confirmed a total of 200 pallets of drugs and medical disposables are on their way to Gaza from MoH-administered sub-stores in Ramallah. So far, reception points in Gaza received 12 pallets. Another 40 are to reach Gaza on May 9th.

MoH also confirmed the deployment of specialized surgeons (mainly orthopedic and vascular) to crisis prone areas in Gaza by early next week.

5 medical type 1 trauma stabilization points (TSP) were set up by the Ministry of Health (MoH) beside the mass gatherings. An additional 5 MoH primary health centers opened to provide support.

Palestinian Red Crescent Society (PRCS) also set up 5 trauma stabilization points (TSP). Each point is an inflatable tent that is equipped with beds, emergency equipment and surgical items, supported by 3 doctors, 4 nurses and 4 paramedics. Furthermore, UHWC opened 3 primary health centers, in the north Gaza, Middle Area and in Rafah.

A total of 1,465 casualties were managed at the 10 trauma stabilization points and primary healthcare clinics across the five governorates in Gaza.
Accumulative caseload

- Based on latest available information as recorded by the MoH, a total of 45 people have been killed since the mass demonstrations began on March 30th.
- Complementary information sources and data provided through OCHA record an additional 5 people have been killed during the same period, whose mortal remains are yet to be released by Israel. Another five fatalities are reported by OCHA, resulting from isolated incidents in different circumstances.

The current figure of people injured amidst ongoing demonstrations stands at 8,844. From this total, a cumulative 4,589 (52%) were admitted to hospitals including MoH medical centers and NGO clinics (Al Awda Hospital and Al Quds Hospital). The remaining 4,255 cases (48%) were treated at the primary healthcare facilities and medical points by the MoH, UHWC and by PRCS.

- From the total number of hospitalized cases since the 30th March, 3,796 (83%) were adults and 793 (17%) were children.

Access through Erez

- 29 patients injured in the demonstrations since 30th March applied to exit Gaza for health care. 9 applications were approved (acceptance rate of 31% - 29% lower than the overall rate of 60% for the first quarter of 2018) and 20 were denied (69% - significantly higher than the overall denial rate of 8% for the first quarter of 2018).

Violations against health

- According to MoH, PRCS and PMRS, from 29th April to 4th May 2018:
  - 72 health personnel were injured (66 by tear gas inhalation, 1 by live bullet and 5 by direct hit with tear gas canisters).
  - 2 PRCS ambulances were damaged due to targeting by tear gas canisters.

- From the start of the demonstrations to the 4th May, at least 169 health personnel have been injured and 18 ambulances were damaged, according to data provided by MoH, PRCS and PMRS.

Immediate critical Drugs and Medical Disposables needs:

- Out of the 148 drug items needed to respond to the increased influx of trauma casualties, currently only 107 are available, leaving a shortage of 27%. As part of the broader ongoing chronic crisis in Gaza, 45% of drugs are currently at zero stock (less than one month’s supply) and 40% are completely depleted.
- In addition, 190 items of disposables are urgently needed to respond to the current casualties, out of which less than 60% are currently available. A further 27% of disposables are currently at zero stock (less than one month’s supply).
Palestinian Red Crescent Society (PRCS) provided immediate care to one case of tear gas inhalation in the field and transferred 332 cases to hospitals, including 34 live ammunition injuries.

From the 29th April to 4th May, PMRS has provided post-operative care to 48 cases; 10 in Gaza and 38 in Khan Younis. PMRS also distributed 12 new assistive devices including wheel chairs and crutches.

International Medical Corps (IMC) partners provided immediate care to 74 injured cases in the field, with ambulances transferring 131 patients. IMC partner hospitals have also provided 180 patients with medical care including 159 for wound care and medications and 21 surgeries for cases referred from MOH in ENT, urology, pediatric surgery and orthopedics.

Palestine Children’s Relief Fund (PCRF) deployed a team of one pediatric orthopedic surgeon, one hand surgeon and two nurses. From 26th to 30th April, the teams operated on 14 cases at the European Gaza Hospital.

Medical Aid for Palestinians (MAP-UK) released five drugs items to Al-Awda hospital and also prepositioned 13 drugs and medical disposables. These prepositioned items are ready for immediate release to Al-Awda or MOH hospitals.

MDM- France provided refresher Basic Life Support (BLS) training to 19 active volunteers and disposable items, enough for a total average of 100 persons. MDM- F is also deploying emergency teams every Friday. MDM- F is also monitoring the situation of the mental health psychosocial support (MHPSS) interventions in Shifa hospital.

UNICEF continues to follow up on the status of children; weekly updates are being developed and cases of injured children are being followed in close coordination with the Child Protection Working Group. This week, UNICEF is receiving three drugs and medical consumable items (normal saline, atropine injection and salbutamol oral inhaler), which constitutes the remaining quantities of UNICEF’s prepositioned items.

Central Blood Bank Society (CBBS) collected 250 blood units and distributed 138 units.

Union of Health Work Committees (UHWC) teams provided first aid and hospital services to 201 injured cases.

“Gaza trauma working group” met for the second time on the 8th May, in order to enhance real time coordination of visiting EMT’s, establish minimal standards of clinical practice across the trauma pathway and ensure consistent, accurate data collection and sharing. For the updated EMTs calendar visit: http://healthclusteropt.org/pages/12/emt-calender

On the 7th May 2018, Health Cluster partners met in Ramallah to plan the upscale of emergency preparedness and response activities across the oPt. The meeting was attended by Minister of Health for Palestine, Dr. Jawad Awad.
Immediate health priorities and unmet needs

Health priority needs:
- The focus for the Health Cluster will be on the following three key elements:

1) **Strengthen the trauma pathway**
Enhance trauma pathway in order to decrease risk of death or disability amongst injured cases. This includes access to frontline emergency care, adequate transportation of casualties, injury management at the hospital, and post-operative and multi-disciplinary rehabilitative care (such as physiotherapy and mental health support). Similarly, the trauma pathway is ideally to undertake critical on site interventions by means of appointed trauma team leaders to advise on locally treatable pathologies. Other considerations include a) availability of appropriate surgeons, anaesthetists and paramedic crews for transfers and b) teams managing patients with life-threatening trauma.

2) **Protection of healthcare**
Monitor, verify and record attacks and violence against healthcare; and advocate for the protection of health under international humanitarian law and human rights law. Advocacy positions under IHL need to include considerations on attacks on and interference with health care services, providers, facilities, transports, and patients. The 1949 Geneva Conventions, as well as the Additional Protocol provide a framework for the respect and protection of sick, wounded, and civilian medical personnel, units, and transports. Medical personnel pursuing their exclusively humanitarian task, whether military or civilian, must be respected and protected from any form of conflict-related attacks.

3) **Ensure access to essential healthcare of other non-trauma emergency needs**
Ensure access to non-trauma emergency patients in need of essential healthcare.

Funding needs:
- In order to meet the essential health needs and respond to the humanitarian needs from the 30th March until the 31st May, the Health Cluster requires a minimum $5.9 million USD. To date, $1.8 million USD has been secured through reserve funds currently being released by the Humanitarian Coordinator, $ 1.8 million USD has been pledged by ECHO and a further $1 million USD by the Central Emergency Relief Fund (CERF).

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