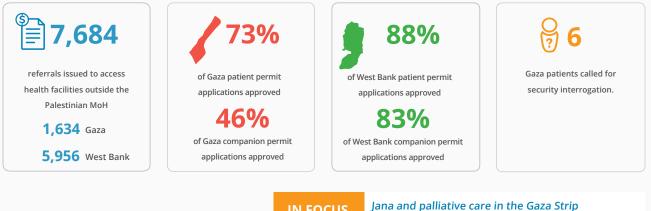




MONTHLY REPORT February 2021

Health Access

Barriers for patients in the occupied Palestinian territory



IN FOCUS

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Part 1 Referrals

February Referrals by the Ministry of Health

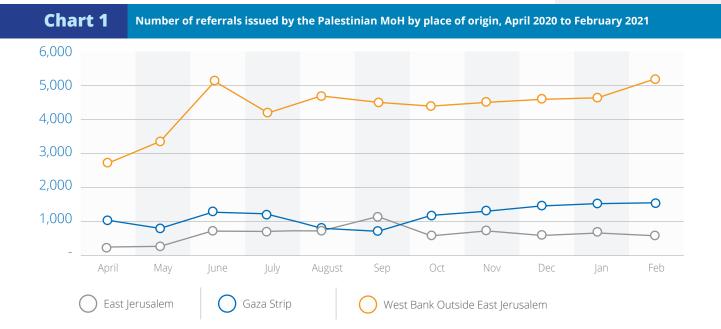
In February, the Palestinian Ministry of Health (MoH) issued 7,684 referrals to health care services delivered by non-MoH providers. West Bank referrals comprised 78% (5,956) of all MoH referrals, including 696 referrals for patients from East Jerusalem, while the West Bank population comprises approximately 60% of the population in the oPt. Gaza referrals accounted for 21% (1,634), while Gaza's population comprises approximately 40% of the population in the oPt. The origin of 92 (1%) of referrals was not reported and two patients were referred from Jordan.

After an almost 40% reduction in West Bank referrals from March to April 2020, by June 2020 West Bank referrals had recovered to the pre-COVID-19 level. In February, there were 5,956 referrals compared to a monthly average of 5,056 referrals for 2020. By contrast, in the Gaza Strip the reduction by more than half (58%) in the monthly number of referrals from March to April persisted for most of 2020, though there has been a sustained increase in referrals since a low of 783 in September 2020. In February, there were 1,634 referrals, representing a more than doubling since September 2020 but a 34% reduction from the first quarter of 2020.

Palestinian MoH referrals to hospitals in the West Bank, outside East Jerusalem, comprised a half (51%) of all referrals in February; referrals to East Jerusalem hospitals over a third (36%) of the total; referrals within the Gaza Strip 4% (a decrease from 8% in 2020) of; to Israeli hospitals 5%; to Egypt 4%; to Jordan 0.4% (27); and to Turkey 0.1% (7).

The top needed specialties for referrals were oncology (27%); urology & nephrology (13%); ophthalmology (6%); cardiac catheterization (5%); cardiology (5%); radiotherapy (4%); and (3%) each for haematology, paediatrics and medical imaging. The remaining 31% were for 25 other medical specialties.

Referrals for patients under 18 years of age comprised 20% (1,543) of the total, while 30% (2,280) were for those aged 60 years or older. Referrals for female patients comprised 45% of the total.







referrals approved financial coverage for healthcare outside the Palestinian Ministry of Health

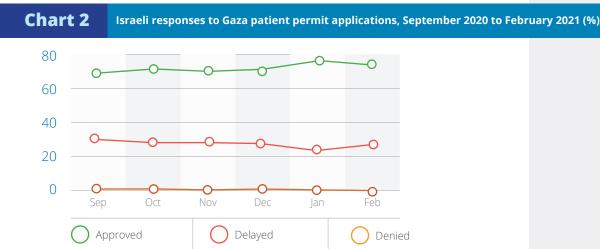
Part 2 Access

The Gaza Strip

There were 1,048 (M: 534; F: 514) patient permit applications for patients from the Gaza Strip to the Israeli authorities in February 2021. A quarter (24%) were for children under 18 and a fifth (20%) were for patients aged 60 years or older. 49% were for female patients, while 86% were for referrals funded by the Palestinian MoH. More than three-fifths (63%) of applications to cross Beit Hanoun/Erez were for appointments in East Jerusalem hospitals, a quarter (25%) for West Bank hospitals outside East Jerusalem, and 12% for Israeli hospitals.

More than half (56%) of applications were for appointments at either Augusta Victoria Hospital (42%) or Makassed Hospital (14%), both in East Jerusalem. The top five specialties accounted for 78% of permit applications: oncology (48%); haematology (9%); ophthalmology (9%); cardiology (8%); and paediatrics (4%). The remaining 22% of applications were for 20 other specialties.

Approved permit applications: 770 (M: 370; F: 400) or 73.5% of the 1,048 patient applications to cross Beit Hanoun/Erez in February 2021 were approved, 2% less than the previous month and higher than the approval rate of 68% for 2020. 52% of the approved applications were female patients; more than a fifth (23%) were for children under 18; and close to a quarter (24%) for patients aged 60 years or older.



Denied care: A 37-year-old male patient who had been referred for a cardiology appointment at Makassed Hospital in East Jerusalem was denied a permit in February.

Delayed care: 277 (M: 163; F: 114) patient applications, or 26.4% of the total, were delayed access to care, receiving no definitive response to their application by the date of their hospital appointment. 29% (79 applications) were for children under the age of 18; 61% (170 applications) for patients aged 18-60 years and 10% (28 applications) for patients over 60 years of old. A third (33%) of those delayed had appointments for cancer care (oncology); 14% for ophthalmology; 10% for cardiology, 9% for haematology; and 5% each for orthopaedics and paediatrics. The remaining 23% were for 14 other specialties. Of delayed applications, 49% (136) were for appointments in East Jerusalem hospitals, 36% (100) for the West Bank and 15% (41) for Israeli hospitals. Most delayed applications (243 or 88%) were 'under study' at the time of appointment.



to Israeli authorities to cross Erez/ Beit Hanoun to access healthcare



Security interrogation

In March, 6 (5 male; 1 female) patients between the age of 18 to 60 were requested for security interrogation by Israeli services as a prerequisite to processing their permit applications. Two patients had appointments for oncology, two for cardiology, one for orthopedics and one for internal medicine. Four of them had appointments in East Jerusalem hospitals and two in the West Bank. By the end of March, one was denied and five remained under study.

Patient companions

The Health Liaison Office submitted 1,241 companion permit applications to Israeli authorities to accompany patients in February. These applications include parents or other companions applying to accompany children. Patients are eligible to apply to Israeli authorities for one companion to accompany them for health care outside the Gaza Strip. In February, 572 companion permit applications (46.1% of the total) were approved, 4 applications (0.3%) were denied and the remaining 665 (53.6%) were delayed, receiving no definitive response by the time of the patient's appointment. The companion permit approval rate in February (46%) was similar to the monthly average of 47% in 2020.

Patients and companions crossing Beit Hanoun/Erez

The Palestinian General Authority of Civil Affairs reported that 791 Gaza patients and 617 companions exited through Beit Hanoun/Erez checkpoint in February to access hospitals outside the Gaza Strip. Of the 791 patients, 55 patients were transferred by back-to-back ambulance with 56 companions. These numbers show that more than a fifth (22%) of patients crossed Beit Hanoun/Erez checkpoint in February without a companion. 12 bodies of deceased patients were returned to Gaza. During the month, Beit Hanoun/Erez checkpoint was open for 24 days for daytime working hours and closed on 4 days (4 Saturdays).



1.241 companion applications to Israeli authorities to cross Erez/ Beit Hanoun to access healthcare









exited through Beit Hanoun/Erez

617

Hanoun/Frez

patient companions exited through Beit

Rafah crossing – Egypt



The West Bank

The Palestinian Civil Affairs Office reported submission of 7,199 applications for patients and 7,947 applications for patient companions in February for permits from Israeli authorities to access health care in East Jerusalem and Israel from the West Bank (outside East Jerusalem). Restrictions on the movement of Palestinians from the West Bank to Israel and East Jerusalem are less severe for certain sections of the population. Many women older than 50 years of age and men older than 55 years of age, as well as children under 13 years traveling with an approved adult, are exempted from the requirement to obtain a permit to travel – provided they are not traveling on a Saturday, before 8am or after 7pm. Lockdown restriction have further affected accessibility from the West Bank to East Jerusalem and Israel since the outbreak of COVID-19.

Of 7,199 West Bank patient applications, 6,306 (87.6%) were approved, 715 (9.9%) were unsuccessful (denied) and 178 (2.5%) were pending reply at the time of monthly reporting. Of the 7,947 West Bank companion applications, 6,585 (82.9%) were approved, 1,168 (14.7%) were unsuccessful and 194 (2.4%) were pending reply at the time of monthly reporting.

i 7,199

patient permit applications for Israeli permits to access healthcare in East Jerusalem and Israel





3% pending at the time of monthly reporting

i 7,947

patient companion applications to access healthcare in East Jerusalem and Israel



15% denied



pending at the time of monthly reporting

In Focus

Jana and palliative care in the Gaza Strip



Jana is 4 years old from Jabalia, in the north of Gaza City. She was diagnosed with cancer in 2018 and underwent surgery to have a tumour in her bladder removed in January 2019.

WHO first met Jana in January 2020, when she had been unable for several months to obtain an Israeli-issued permit to access radiotherapy treatment at Augusta Victoria Hospital, located in East Jerusalem, a different part of the occupied Palestinian territory. On 16 February 2020, after a four-month delay in her access, Jana and her mother were able to travel to reach health care outside the Gaza Strip.

The outbreak of COVID-19 occurred in the occupied Palestinian territory on 8 March 2020, with the first cases detected in Bethlehem. Since that date, Jana travelled to East Jerusalem for health care twice. From 16 February to 20 May 2020, she completed a course of chemotherapy and radiotherapy at Augusta Victoria Hospital. Jana returned on 29 June for further investigations, and was discharged on 13 July. Since this time, Jana has been followed up for palliative treatment in the Gaza Strip, although drugs shortages, lack of trained staff, and the demands of the emergency response to COVID-19 have all posed a challenge to her receiving the quality of care that she needs. Dr Mahmoud Shbair, a paediatric oncologist at Rantisi Hospital, commented on some of these challenges: "We often give high doses of morphine and fentanyl to patients with advanced cancer, to try to effectively control their pain. But we often run out of painkillers. We need staff training for palliative care, as well as sufficient drugs and the right equipment."

Jana's father told WHO, "Doctors in East Jerusalem told us there was nothing more that could be done for Jana. We went to Rantisi Hospital in Gaza on 24 August for follow up and her doctor there said the same. So, we are taking care of Jana at home. We go to Rantisi Hospital from time to time, but things have become difficult with coronavirus. We try to avoid taking her to hospital." The systems for palliative care are not well developed in the Gaza Strip, where rates of poverty and unemployment also affect the ability of families to purchase even basic painkillers from private pharmacies.

Palliative care aims to improve quality of life for patients and their families and reduce suffering for persons with life-threatening illnesses, with the integration of physical, psychosocial, and spiritual aspects of patient care. Palliative care is an essential part of the right to the highest attainable standard of health, while palliative care medicines – including those needed for proper relief of pain and suffering – feature in the Essential Drugs Lists of WHO and the Palestinian Ministry of Health.

Dr Bushra Lubad is Head of the Intensive Care Unit in Rantisi Paediatric Hospital in the Gaza Stip. She stated, "Palliative care is needed from the initial point of care, it's not only for patients in terminal stages of illness. It's also needed for many conditions, not just cancer. We need to take care of children with kidney failure, cystic fibrosis, neurological, and other chronic diseases from all hospital departments." Her team comprises two doctors, five nurses, a pharmacist, a psychologist, and a volunteer spiritual therapist. They have worked to strengthen palliative care for their patients in the hospital, but protocols for referral to palliative services are not well established and Dr Lubad points to a need for greater awareness, improved capacities, standard guidelines, and better integration of palliative care across the health system. At Rantisi Hospital, the team serves children who are staying as inpatients only and the service is in its early stages, established since September 2019 and working across different departments. "There is no palliative care department or even a room where a doctor or nurse can receive patients for palliative care consultations. An outpatient clinic for palliative care is still a dream!"

The sole psychologist at Rantisi Hospital often has to function as a social worker as well. She explained, "I talk to patients and their families to try to provide psychological support. However, many of them are facing severe hardship and they really need social interventions and assistance. But I don't have anywhere to refer them to. Many times, we can't afford basic materials to keep the children amused, like coloring books, crayons, and paper. I can only see the children staying as inpatients, but these children and families need help outside hospital too. The health staff in the hospital suffer psychologically, and they also need someone to take care of them."

Jana's ability to walk and play has become limited due to her illness and these days she gets tired quickly. One of the effects of her cancer is that it can stop her from passing urine, which has been happening once or twice each month in recent times. According to Jana's father, "When this happens, we take her to Rantisi Hospital or to a private clinic. A nurse who lives near us has also come to help sometimes." The family buys Jana simple pain relief medicines at the local pharmacy and do not receive psychosocial support at home. They continue to hope for a cure for Jana. Her father added, "If we knew of a place they could cure Jana we would do anything, even sell the house. We keep looking for the possibility of referring her outside for help."