Referral of Patients from the Gaza Strip

Summary: April 2014

Access
- **High need for access through Erez:** In April the volume of patient applications to Israeli authorities to cross Erez checkpoint for health access (1,677 patients) was 46% higher than the monthly average in 2013. April was the second highest month for applications since the WHO began monitoring access. The increase in demand reflects the continuing problems of access through Rafah border to Egypt and lack of drugs, especially chemotherapy and lack of medical disposables.
- **8% drop in permit approval rates:** 78% of patient applicants received a permit in April 2014, down from 86% the previous month. 31 patients (13 females and 18 males, including 7 children) were denied permits (1.85%). 20.15% of patients who applied (338 patients: 135 females and 203 males, including 67 children and 30 elderly people over 60) received no response to their applications and their medical treatment was delayed as a result.
- **4 patients interrogated:** 4 men, including one patient over 60 years, were requested to attend Israeli security interviews after applying for a permit to cross Erez. Two so far were granted a permit following the security interviews in April.
- **A 6-month-old girl died in April while waiting for approval of permit to exit Gaza** (see case study p.5).
- **Patient access through Rafah almost stopped:** Only 7 Gaza patients were able to travel to Egypt through Rafah in April, compared to more than 4,400 in April 2013, before the closure.

Referrals
- **Increase in MoH referrals:** Total MoH referrals of Gaza patients (1,880) to outside facilities were the second highest recorded and 34% higher than the monthly average in 2013.
- **Medical reasons for referrals:** The top ten specialties requiring referrals for treatment were: oncology--305 referrals (16.22%), MRI--275 (14.63%), nuclear medicine--155 (8.24%), heart catheterization--141 (7.5%), ophthalmology--123 (6.54%), orthopaedics--116 (6.17%), neurosurgery--94 (5%), paediatrics--93 (4.95%), haematology--69 (3.67%), general surgery --67 (3.56%). The remaining 23.52% of referrals were to 21 other specialities.
- **Gender gap:** The gender gap in referrals continued: 55.53% male patients versus 44.47% female patients. 22.23% of all referrals were children aged 0-17 years and 19.73% were patients aged over 60 years.
- **Estimated cost of referrals for April 2014:** NIS 9,256,169.
Referrals reflect pressure on public health system

The Ministry of Health (MoH) in Gaza referred 1,880 patients to outside hospitals in April continuing a trend of a rise in referrals. April referrals were the second highest month ever, after March 2014 (1,914 referrals), and 34% higher than the monthly average for 2013. Referrals to East Jerusalem (623; 33.14%) and to West Bank hospitals (296; 15.74%) were the second highest since 2005. Referrals to Israel (345; 18.35%) were lower by 21% from the monthly average for the first quarter of 2014 (439) after peaking in January (Chart 1). Only one referral was issued to Jordan during April, following the 2012 halt to that destination due to accrued PA debts. Referrals to Egypt remained at below average levels (163; 8.7%) since July 2013, reflecting the unstable border and internal situation in Egypt prevalent since July 2013 (Table 1). Referrals to non-MoH facilities within Gaza (452; 24%) remained high and were primarily for MRI (256), heart catheterization (114), rehabilitation (32) and urology (12). The remaining 38 were to 13 different specialties.

88% of referrals were for in-patient admissions in hospitals and 12% were for out-patient services. 22% of patients referred were children aged 0-17 years and 18% were elderly patients over 60. Female referral patients were 44.5% of the total. Referral destinations needing coordination for exit through Erez crossing was 1,428 (76%) out of 1,880 referrals during April.

Limited access to Egypt

Rafah terminal was closed in April, with the exception of 2 half-days for travelers with humanitarian needs (patients, students and foreign passport-holders) and 8 days for pilgrims only. Of the 3,280 travellers who exited Gaza through Rafah terminal in April, almost half were pilgrims (1,546; 47%) travelling with special coordination from Egypt. The remaining 1,734 (53%) were traveling due to humanitarian necessity, among them only 7 patients (0.4%) and 7 companions (0.4%). This is the lowest monthly figure recorded in a 10-month downward trend of patients using that route following Egypt’s closure policy (Chart 2). No medical delegations and only one shipment of medical aid have been able to pass through Rafah terminal since July 2013.
Access through Erez

**Volume:** The volume of patient applications in April to cross Erez for health access was 46% higher than the monthly average in 2013. However, only 78% of patients’ permit applications were approved, the lowest rate since December 2010 (Table 2). The volume of permit applications for the period from January-April this year was 74% higher than the same period in 2013, while the approval rate for the same period was 3.5% lower (Table 3).

**Denied:** 31 patients (13 females; 18 males) were denied access through Erez to specialized hospitals in April, including 7 children and 3 elderly patients over 60 years --- 10 times the average rate of denials in 2013. They had been referred mainly for treatment in oncology, orthopedics, cardiology, neurosurgery, ophthalmology, hematology, nuclear medicine, neurology, endocrinology and general surgery. Twenty-two of the denied patients had appointments in East Jerusalem and West Bank hospitals, 5 in Israel, and 4 in Jordan. 25 of the denied patients were funded by the MoH, and 6 were self-funded. 6 patients waited 15-30 days, and 2 patients waited over 30 days to receive the negative response on their applications.

**Delayed:** According to the Palestinian District Coordination office, 338 patient applications (203 males; 135 females), including 67 children and 30 patients over the age of 60, received no response and they lost their hospital appointments. Of the 338 delayed applications, 46% had scheduled appointments in East Jerusalem hospitals, 26% in West Bank hospitals, 25% in Israel and 3% in Jordan. The Ministry of Health financially covered 95.5% of these referrals while 3.85% were self-funded. Israeli authorities should give a response to applicants within 10 days. Of those delayed, 51 patients were still awaiting a response after two weeks and 9 after one month. The delayed patients were mainly referred for treatments in oncology, orthopedics, ophthalmology, neurology, neurosurgery, cardiology, nuclear medicine and hematology.

4 male patients were called for security interviews by the Israeli General Security Services (GSS) as a condition to process their application, including one male patient over 60 years. To date, two had been granted a permit following the interview.

In April, 93.8% of patients applying for Israeli permits were referrals from the Palestinian MoH, 4.35% were self-funded, and the remaining patients were funded by Nour Al-Alam foundation, the Peres Center for Peace, Physicians for Human Rights-Israel, and other organizations. Patients and companions often face financial problems during long stays in hospitals due to uncovered costs such as transportation, companion costs and some patient care items such as medicines not available in the hospital supply.
Access through exit points: Erez and Rafah

The Palestinian General Authority for Civil Affairs registered 1,176 patients travelling through Erez checkpoint to hospitals in Israel, oPt or Jordan during April; patients had to walk through the terminal, except for 60 patients who were transferred via back-to-back ambulances.

The ambulance station at Rafah terminal reported that 7 patients only traveled from the Palestinian side to the Egyptian side of the terminal during April, all transferred by ambulance. This was the lowest number of patients reported to cross through Rafah in one month (Table 4).

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**Table 3: Decisions by Israeli District Liaison Office on permit requests to cross Erez, by response, sex of applicant and comparison with corresponding periods in 2013 and 2014 (number and %)**

<table>
<thead>
<tr>
<th>Period</th>
<th>April 2013</th>
<th>April 2014</th>
<th>January-April 2013</th>
<th>January – April 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>1,155 (F:535; M:620)</td>
<td>1,677 (F:798; M:879)</td>
<td>3,740 (F:1,774; M:1,966)</td>
<td>6,506 (F:3,034; M:3,472)</td>
</tr>
<tr>
<td>Approved</td>
<td>957 (F:457; M:500)</td>
<td>1,308 (F:650; M:658)</td>
<td>3,293 (F:1,594; M:1,699)</td>
<td>5,151 (F:2,689; M:2,811)</td>
</tr>
<tr>
<td>Denied</td>
<td>0 (F:0; M:0)</td>
<td>31 (F:13; M:18)</td>
<td>5 (F:2; M:3)</td>
<td>151 (F:51; M:100)</td>
</tr>
<tr>
<td>Delayed</td>
<td>198 (F:78; M:120)</td>
<td>338 (F:135; M:203)</td>
<td>442 (F:178; M:264)</td>
<td>855 (F:294; M:561)</td>
</tr>
<tr>
<td>-- called for GSS interrogation (of total applicants)</td>
<td>17 (F:5; M:12)</td>
<td>4 (F:0; M:4)</td>
<td>57 (F:13; M:44)</td>
<td>68 (F:8; M:60)</td>
</tr>
</tbody>
</table>

*Source: Palestinian District Coordination office, MoH -Gaza.*

**Table 4: Gaza Health Access Crossings, April 2014**

<table>
<thead>
<tr>
<th>Point of exit</th>
<th>Patient Exit</th>
<th>Crossing by ambulance (back-to-back transfers)</th>
<th>Days open in month</th>
</tr>
</thead>
<tbody>
<tr>
<td>Erez crossing (north-Israel)*</td>
<td>1,176 patients/1,128 companions</td>
<td>60 patients</td>
<td>Open 22 days; closed 8 days (4 Saturdays and 4 days for Jewish holidays)</td>
</tr>
<tr>
<td>Rafah crossing (south-Egypt)**</td>
<td>No patients exited as regular travellers during April</td>
<td>Only 7 patients/7 companions transferred by ambulance during April</td>
<td>Closed 28 days. Open 2 half-days (hours restricted to 9 am-2 pm). (The terminal was open for 8 days for pilgrims only, of which 4 days were only for returning pilgrims and people on hold in the Egyptian side of the terminal.)</td>
</tr>
</tbody>
</table>

*Source: Palestinian General Authority for Civil Affairs  
**Source: Emergency Medical Services of the MoH, Gaza, Rafah terminal*
6-month-old baby dies after 4 unanswered applications to Israeli authorities for health access

Amna al-Jazzar, 6 months old and daughter of a poor family living in Rafah, died in the pediatric intensive care unit at the European Gaza Hospital (EGH) while her family waited for Israeli approval to cross Erez to take her for medical treatment in Soroka hospital in Israel.

Amna was born on November 1, 2013, but soon developed neonatal jaundice and anemia and was treated in the neonatal unit of the EGH. At 2 months of age she developed hypoglycemia and had a seizure. She was diagnosed in the EGH with persistent hyperinsulinemic hypoglycemia of infancy (PHHI) but she did not improve with medical treatment. The family had another child who died from a similar problem at the age of 4 months. Her Gaza physician decided to refer her for further study and treatment to an outside hospital, the the Ministry of Health approved the financial coverage on January 9, 2014. The family submitted a total of four applications from February to April for a permit to cross Erez, to coincide with the baby’s hospital appointments, but three times did not receive an answer to their requests in time, and once was denied.

The first application was submitted to the coordination office in Gaza on February 6, with the mother as a companion, for an appointment on February 10. The application was reported to be still “under study” on the day of the appointment and so the appointment was lost. Meanwhile Amna’s condition deteriorated, so physicians in the EGH operated to remove her pancreas to try to control the persistent hypoglycemia on February 22. Amna’s mother said that the surgery was not successful and the child was referred urgently to Soroka hospital. On March 27, the family reapplied for a permit with the mother as a companion, after securing a new appointment for April 2. Again, the response was “under study” and the family lost the hospital appointment. On April 7 the family submitted their third application, this time using the grandfather as the child’s companion, for an appointment in April 9. This application was denied. The fourth application was submitted on April 23 for an appointment on April 29 with the mother again as a companion. While the family waited for a permit, the baby’s conditions continued to deteriorate and she remained in the pediatric intensive care unit in the EGH where she died on April 28, 2014. The response to the last application, which was received one day after the baby died, was “application is under study.”

Note: The Israeli authorities demand that children who require travel through Erez checkpoint to hospital must be accompanied by a first-degree relative who must apply to Israeli authorities for a permit. The Israeli authorities have often delayed permit requests for a child’s parent or other close relative, demanding that families “change the companion,” which can occur repeatedly for the same child and result in delayed medical treatment.