

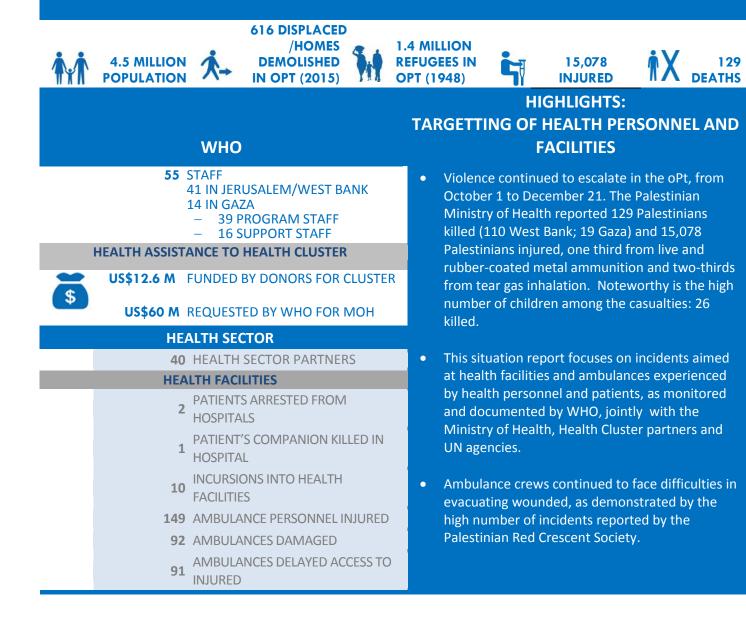
REGIONAL OFFICE FOR THE Eastern Mediterranean

Situation report # 2 27 DECEMBER 2015



Security forces raided a private clinic in Sair, Hebron, and interrogated staff and an ambulance crew in a search for an injured person (November 1, CCTV).

occupied Palestinian territory (oPt)



The frequency of violent confrontations between civilians and Israeli forces that began on October 1 were sustained over the past 10 weeks in the West Bank. A large number of incidents against Israeli military personnel, settlers and other civilians in Jerusalem, around checkpoints and settlements, and several in Israel occurred during the period under review. Youth also continue to protest in villages and urban areas, triggering clashes with Israeli security forces throughout the West Bank that have exceeded the thresholds of the past 10 years. Many of the alleged attackers were killed by police or security forces. Human rights organizations have called for official investigations.

SITUATION UPDATE Cas

Casualties

According to the Ministry of Health in Ramallah, from October 1 to December 21, 2015, 129 Palestinians were killed by Israeli security forces in the West Bank and Gaza, among them 26 children and 6 women. According to data from its own health facilities as well as from the Palestine Red Crescent Society, non-governmental hospitals and NGO health services providers, a total of 15,078 individuals were injured and treated in hospitals and in the field.

Most of those killed were from Hebron (33%), followed by Jerusalem (22%), Gaza Strip (15%), Ramallah (10%), Bethlehem (6%), Nablus (5%), and other districts (8%).

By district, the largest number of injuries occurred in Ramallah (22%), followed by Hebron (16%), Jerusalem (14%), Tulkarm (13%) and Gaza (13%), Nablus (9%), and other districts (13%).

Health facilities

As part of its efforts to promote the protection of the right to health in the occupied Palestinian territory, WHO works with health partners to document incidents in which health facilities, ambulances, personnel, patients and their family members are threatened or experience violence. Attacks on health facilities can have a serious impact on health and human rights, whether they result in death or injury, restricted or delayed access to health care, interference in work of health personnel or impediments in the supply of health materials.

Ambulance services

The Palestine Red Crescent Society (PRCS) reported a high number of incidents affecting their ability to operate emergency services in the West Bank and Gaza: as of 16 December, 146 paramedic personnel were injured, 91 ambulances were damaged and 91 ambulances reported being significantly delayed by security forces from reaching their destinations. Most of the injuries involving paramedics occurred when evacuating injured in the border areas in Gaza (47); in the West Bank, most paramedic injuries occurred in Ramallah (26), followed by Jerusalem (16) and Bethlehem (16), and Qalqilya (12). In addition, the Union of Health Work Committees in Gaza reported tear gas canisters were shot inside an al Awda Hospital ambulance and near a paramedic who was evacuating injured persons in two incidents in the border areas, injuring 4, and damaging one ambulance.

Health personnel access

A group of 13 PRCS staff were scheduled to travel to the West Bank on December 14 with ICRC-facilitated permits for training on new medical equipment. Three PRCS staff were requested for security interviews and held all day and one staff was held in detention until this date.

Patient access

In addition to permanent checkpoints at the entrances to Jerusalem, 29 cement

barricades were installed by Israeli security forces in early October at the entrances, and within, eight East Jerusalem neighborhoods which affected the movement of 150,000 residents, including access to hospitals and clinics. The East Jerusalem hospitals reported that severe traffic jams have created delays in access for medical staff and patients which has disrupted the operations of the six hospitals. Three of the barricades were at the entrances to East Jerusalem hospitals and surrounded Makassed hospital. Palestinian Ministry of Health referrals of dialysis and Gaza cancer patients housed in a nearby facility were particularly affected by the checkpoints at hospitals, physical searches and delayed care. Most of the barricades were removed by early December.

HEALTH NEEDS, PRIORITIES AND GAPS

The majority of injuries have been treated in public sector facilities, which has affected the medical stocks that were already short in supplies. In Gaza, the MoH reported in November that zero stock of essential medicines was 33% (higher for psychiatric, cancer, pediatric, blood, immunosuppressant, primary health and ophthalmic medications – 38% to 44% zero stock). Zero stock for medical disposables was 41%, primarily in certain categories (hearing, dental and ophthalmic and cardiac procedure supplies including for open heart surgeries – 86% to 100%). The Ministry's requirements for cardiac catheterization supplies alone represent 27% of the total list of medical disposables and the high cost of resupply has meant chronic shortages and the need to refer patients for these procedures. In the West Bank, zero stock was reported by the Ministry to be 18% of essential medicines. About \$5 million is required to fund one month of critical medical supplies for the Ministry of Health in the West Bank and Gaza.

Makassed Hospital in East Jerusalem has also received most of the cases of injuries that have occurred in the surrounding Jerusalem neighborhoods. The additional caseload is straining its resources; all six of the non-profit hospitals in the East Jerusalem Hospital Network are suffering from delays in reimbursements for services delivered for referral patients in 2015.

PUBLIC HEALTH CONCERNS The use of ammunition and tear gas on crowds and in or near health facilities, at checkpoints and in densely populated neighborhoods is a serious concern. In addition to risk of injury to patients and health personnel, it intimidates those needing health care from accessing health facilities. Access to health care for injured persons as well as for persons seeking treatment for acute or chronic illness must be protected at all times.

WHO ACTIVITIES

WHO has been monitoring, documenting and reporting attacks on healthcare workers and facilities in the occupied Palestinian territory since 2008. Incidents have damaged 34 hospitals, 105 clinics and 84 ambulances during three wars in Gaza. In the latest war in 2014, the 51-day violence in Gaza resulted in the destruction of 7 health facilities, and damage to 67 hospitals and clinics. 23 health workers were killed, 16 while on duty, and 83 injured, primarily while carrying out emergency services. In addition, there have been isolated military activities affecting health facilities, and interference and delays of ambulance services in the West Bank.

WHO continues to provide the MoH with technical assistance through its country cooperation programme, as well as humanitarian support through the coordination activities of the Health and Nutrition Cluster. WHO also supports the information needs of the MoH and donor coordination of emergency donations. WHO has previously called for the protection of citizens, and has appealed for assuring the safety of patients, health workers, and health care facilities.

Six UN agency resprentatives including WHO visited Makassed Hospital in East Jerusalem on November 2.¹ In a joint UN statement issued following the visit, UN Humanitarian Coordinator for the oPt Robert Piper stated: "The right to health is a fundamental human right which Israel must respect and protect at all times."²

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¹ <u>http://www.emro.who.int/palestine-press-releases/2015/un-agencies-call-for-respect-of-health-premises-and-the-right-to-health-care-november-2015.html</u>

² <u>http://www.emro.who.int/images/stories/palestine/documents/HC_Statement_East_Jerusalem_health_careFinalVersion.pdf?ua=1</u>