

Gaza Strip

Overview As of 29 July 2024

Source: Ministry of Health.



39,400
Fatalities



90,996
Injuries



+10,000
Reported missing
under the rubble

Source: Palestinian Civil Defense

Health Facility functionality and access



16/36 (44%)
Hospitals **partially functional (HPF)***
Bed capacity 1,490, including inpatient, maternity and ICU beds.†



48/107§ (45%)
Primary health care facilities are **functional**

§ The number of PHCCs includes active NGOs.



4 Field hospitals **partially functional (FHFP)**



4 Field hospitals **fully functional (FHFF)**

3 Accessible
2 Surgeries
2 Inpatient
1 ICU
2 FHFF
3 FHFP

0 Accessible
0 Surgeries
0 Inpatient
0 ICU
1 FHFF
1 FHFP

Deir al Balah
3 HPF
1 FH

Khan Younis
3 HPF
5 FH

Rafah
0 HPF
2 FH

Gaza
7 HPF

North Gaza
3 HPF

3 Accessible
3 Surgeries
3 Inpatient
2 ICU

7 Accessible
5 Surgeries
6 Inpatient
2 ICU

3 Accessible
3 Surgeries
3 Inpatient
1 ICU
1 FHFF
0 FHFP

* Partially functional facility: when a health facility is unable to fully provide some or all of the services as normal, or there is an interruption in any of the services provided at the facility, due to various reasons.

- Of the 16 partially functional hospitals, 11 are partially accessible due to insecurity or physical barriers, such as damage to both patient and ambulance entrances, and surrounding roads.
- Evacuation orders continue to disrupt the functionality of health facilities:
 - One primary healthcare center and five medical points are within the evacuation area announced on 27 and 28 July.
 - Expanded inpatient capacity at Indonesian and Kamal Adwan Hospitals (61 and 166 beds), and 9 ICU beds at Indonesian Hospital have been restored and are functional.
 - European Gaza Hospital (650 inpatient beds) remains out of services, since 1 July. Efforts to restore functionality were halted due to expanding the evacuation area.
 - No functioning hospitals in Rafah for over eight consecutive weeks.
- A total of eight operational field hospitals (FH) in the Gaza Strip:
 - Rafah: the ICRC FH is fully functional, while the UAE FH operates at partial functionality with access restrictions due to ongoing siege and hostilities.
 - Khan Younis: the UK-Med and Jordanian FHs are fully functional, while Al-Quds, Kuwait 'Heal Palestine', and PRCS Kuwaiti FHs are partially functional.
 - Deir Al-Balah: the IMC FH is fully functional.

† Source: The Health Resources and Services Availability Monitoring System (HeRAMS)



Variant type 2 poliovirus isolated from sewage samples in Gaza

- On 16 July 2024, the Global Polio Laboratory Network (GPLN) notified the detection of six circulating variant poliovirus type 2 (cVDPV2) isolates in environmental samples from Deir al-Balah and Khan Younis in Gaza. Seven samples were collected and six of these have tested positive for VDPV2.
- Further genomic sequencing of poliovirus isolates has identified that these strains have close genetic links with each other and are also closely related to the poliovirus variant that was circulating in Egypt during the second half of 2023. The last detection of the related variant polioviruses in Egypt was in samples collected in December 2023.
- Between 22-29 July 2024, three suspected cases of Acute Flaccid Paralysis (AFP) were reported to the MOH, following efforts to enhance polio surveillance by WHO in Gaza.
- WHO coordinated transportation of these stool samples from Gaza to Jerusalem for testing in a WHO-accredited polio laboratory in Jordan.
- A risk assessment is being implemented, led by the Ministry of Health, including to assess surveillance sensitivity for the detection of acute flaccid paralysis (AFP) and environmental surveillance, and subnational immunity levels are being more clearly assessed.
- These crucial activities are being organized and conducted in close coordination with WHO, UNICEF, UNRWA and other partners. The results of the risk assessment will guide context-specific cVDPV2 outbreak response in Gaza.

Malnutrition



127 Patients admitted due to severe acute malnutrition

Source: Ministry of Health

Medical evacuation through Rafah



4,916 Patients*
(35% of 13,880 requested cases)
have been evacuated since October

* Medical evacuation is halted.



Communicable Diseases* (as of 30 June 2024)



974,253 Cases of acute respiratory infections



562,753 Cases of diarrhea <5 years: **122,338**



103,385 Cases of scabies and lice



65,368 Cases of skin rashes



11,214 Cases of chickenpox

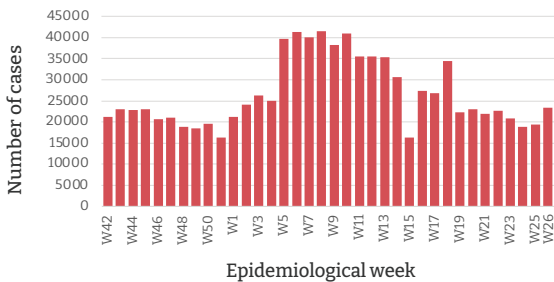


104,766 Cases of acute jaundice syndrome

* Listed figures to be interpreted with caution, due to delayed and incomplete data reporting.

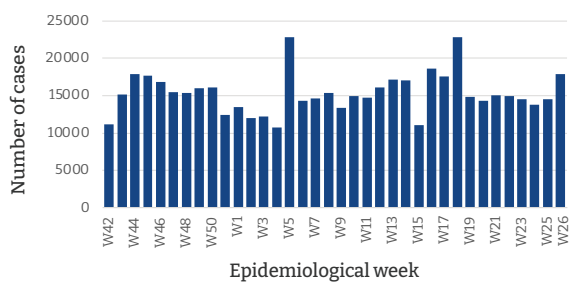
Trend analysis of communicable diseases (Data as of 30 June 2024)

Weekly trend of acute respiratory infection (ARI) in Gaza Strip* (Data from 16 Oct 2023 to 30 June 2024)



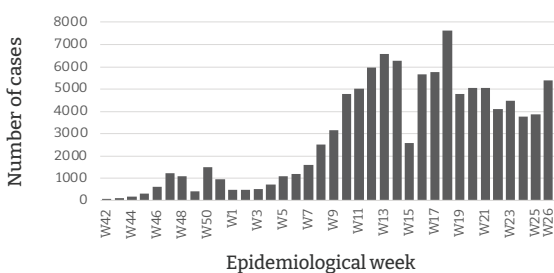
Following decreasing trends in **ARI**, there has been an **increase in cases** reported from Week 25 to Week 26 by about **3,500 cases**.

Weekly trend of acute watery diarrhea (AWD) in Gaza Strip* (Data from 16 Oct 2023 to 30 June 2024)



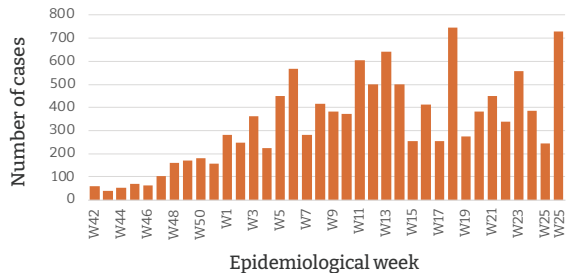
The weekly trends of **AWD** have remained stable over the last four weeks (**14,000 -15,000 cases**), with an **increase of 18,000 cases** reported in Week 26.

Weekly trend of acute jaundice syndrome (AJS) in Gaza Strip* (Data from 16 Oct 2023 to 30 June 2024)



Weekly trends of **AJS** have remained somewhat stable over the last four weeks and have **increased by 1,500 cases** from Week 25 to Week 26.

Weekly trend of bloody diarrhea in Gaza Strip* (Data from 16 Oct 2023 to 30 June 2024)



After weeks of decreasing trends in **Bloody Diarrhea**, the number of reported cases **increased by almost 500 cases** from Week 25 to Week 26.

Current epidemiological trends should be interpreted with caution due to reporting delays, retrospective data and adjustments, limited geographical coverage of surveillance activities and constant population movements.

Source: MoH, UNRWA, EMT

*Note: Weeks with incomplete data were not included

Long term conditions



>2,000 People diagnosed with cancer each year, including 122 children



>1,500 Patients in need of kidney dialysis to maintain life[§]



>60,000 People with raised blood glucose*



45,000 Patients living with cardiovascular disease



>650,000 People with raised blood pressure*



+ 485,000 People with mental health disorders*

§ Source: Ministry of Health

* Source: STEPS Survey 2022

- Limited access to essential and specialized healthcare services, very limited medical evacuation, compounded by the degradation in social determinants of health during the ongoing emergency acutely affects patients with non-communicable diseases.
- According to MoH reports, there are 60 hemodialysis machines currently available across the Gaza Strip (compared to 182 prior to the war). Therefore, the provided services are severely decreased to two dialysis sessions of two hours per week, instead of three weekly sessions of three to four hours. This has a detrimental impact on the quality of life of these patients and could lead to fatal consequences.
- Only one out of originally six MoH Community Mental Health Centers is operational -at minimum capacity-, while the only existing Psychiatric Hospital went out of service in November 2023 after an attack. Medication shortages, continued hostilities, recurrent displacement and lack of proper shelters are negatively affecting the mental health of the vulnerable population, particularly those with pre-existing mental health disorders.

Reproductive, Maternal, Newborn and Child Health



~ 50,000 Women are pregnant



~ 5,500 Women are due to give birth within the next month including

~ 1,400 Requires Cesarean section
~ 180 Deliveries / day

- More than 500,000 women in the reproductive age lack access to essential services including antenatal care, postnatal care, family planning and management of sexual transmitted infections.
- Maternity services are provided at eight out of 16 partially functioning hospitals, and at four field hospitals (ICRC, IMC, UKMED, and Kuwait FHs).



498 Health Attacks As of 30 July 2024



747 People killed in attacks



969 People injured in attacks



128 Health workers remain detained/arrested



110 Health facilities affected



32 Hospitals damaged

Including



115 Ambulances affected



63 Sustained damage

Including



592 Fatalities



5,537 Injuries



520 Health Attacks As of 30 July 2024



23 People killed in attacks



100 People injured in attacks



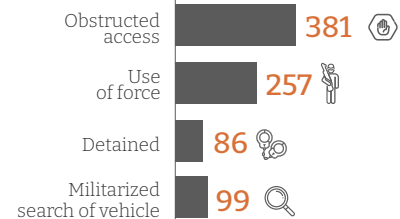
54 Health facilities affected



20 Mobile clinics Including



358 Ambulances affected



Situational update

- Continued dismantling of the health system, reducing health service availability, and threatening the right to health of over 2.1 million people in the Gaza Strip.
- Evacuation orders continue to exacerbate the vulnerability of Gazans, many of who were forced to go through multiple waves of displacement. OCHA reported that the new evacuation orders issued on 27 and 28 July, affected parts of Rafah, Khan Younis and Deir al Balah governorates, where an estimated 56,000 people had been sheltering. The Site Management Working Group estimated that more than 200,000 people were displaced, between 22 and 27 July, including 9,000 people who arrived in Al-Mawasi on 27 July.
- The Health Cluster reported that one primary healthcare center and five medical points are within the evacuation areas announced on 27 and 28 July. Some 35 health service points are also within 100m to one kilometer from the evacuation areas, including the ICRC FH -the only fully functional FH in Rafah governorate- (400m), Al-Awda Nuseirat Hospital (640m), Al-Amal Hospital (700m), Jordanian and Kuwaiti PRCS FHs (700m), and Nasser Hospital (1km).
- The Ministry of Health stated that it will not be possible to restore the European Gaza Hospital, due to the expanded evacuation area, on 27 July.
- The forced mass displacement of 1.7 million people, ordered to evacuate to the so-called “Humanitarian area” of 48km² (13% of the Gaza Strip area), has a grave impact on public health. Overcrowding, lack of proper shelter infrastructure, and poor water, sanitation and hygiene (WASH) conditions, including limited supply and access to safe drinking water and untreated sewage and wastewater, increase the risks of communicable diseases. Overcrowding also increase the risk of mass casualties, in the event of attacks on heavily populated areas.
- Medical evacuation of patients outside of Gaza remains extremely limited since 7 May. Out of 13,880 cases requested for medical evacuation, only 4,916 (35%) have been evacuated, since October 2023. The number of patients requiring medical evacuation is expected to increase considering the diminishing capacity of the health system compounded by the ongoing escalation. WHO appeals for the establishment of multiple medical evacuation corridors to ensure sustained, organized, safe and timely passage of patients via all possible routes, including Rafah and Kerem Shalom. Of utmost urgency is the restoration of medical evacuations from Gaza to the West Bank, including East Jerusalem, where hospitals are ready to receive patients. Patients must also be facilitated to be transferred to Egypt and Jordan, and from there to other countries when needed.
- On 24 July, 16 patients from Gaza with complicated medical conditions, along with their 25 companions, were evacuated from Egypt to Spain for further specialized treatment, with support from the WHO, EU Civil Protection and Humanitarian Aid, Emergency Response Coordination Center, Palestine Children’s Relief Fund, and the governments of Egypt and Spain. The patients were medically evacuated to Egypt before the closure of Rafah Crossing.
- On 29 July, four children from Gaza were evacuated from Cairo to Belgium, accompanied by 12 companions. The evacuation was supported by WHO, EU Civil Protection and Humanitarian Affairs, Emergency Response Coordination Center, Palestine Children’s Relief Fund, and the governments of Egypt and Belgium. Patients were medically evacuated to Egypt before the closure of Rafah Crossing.
- Persistent fuel shortages continue to threaten humanitarian interventions, including health care provision, impacting the functionality of hospitals, PHCCs and ambulance services.
- Four severe acute malnutrition stabilization centers (SAM SC) are currently functional, across the Gaza Strip: two supported by MedGlobal, one at the Kamal Adwan Hospital (10 beds) in the North Gaza governorate, and the other at

PFBS Hospital (10 beds) in Gaza City; one SC (six beds) at the IMC FH in the Middle Area; and one SC supported by MSF-Spain at Nasser Medical Complex (six beds) in Khan Younis.

- Increasing insecurity, destroyed roads and infrastructure, and lack of proper facilitation of humanitarian missions continue to hinder access to health. A sustained and functional deconfliction mechanism is needed to facilitate safe delivery of humanitarian aid across the Gaza Strip, as per international humanitarian law.
- Restrictions on entry of medical supplies, medications, and equipment to support setting up and operating temporary health facilities, following the Rafah incursion and closure of Rafah Crossing.
- Disrupted telecommunication is negatively affecting partners operations and weakening referral mechanisms (community to facility and among facilities).
- According to Israeli authorities, over 1,200 Israelis and foreign nationals were killed inside Israel, and approximately 5,400 reported injuries. As of 29 July, there have been 329 reported fatalities and 2,165 reported injuries of Israeli soldiers since the start of the ground operation in the Gaza Strip. One hundred and fifteen hostages remain in Gaza.

Response

WHO

- WHO has procured more than USD32.9 million worth of health commodities, 54% of which has already been delivered to the Gaza Strip. Procured items include essential trauma emergency supply kits (TESK), NCD and SAM kits, in addition to critical medications and supplies that are needed to maintain provision of essential health services.
- WHO and partners continue to carry out missions, support patient transfers, conduct needs assessment, support deployment of emergency medical teams (EMT) and field hospitals, and deliver food, water, and medical supplies to health facilities, across the Gaza Strip.
- WHO is working closely with the MoH, UNICEF and UNRWA, coordinating with the Global Polio Eradication Initiative (GPEI) in the region, to assess the scope of the poliovirus spread, and determine appropriate response activities. Ongoing field investigation and risk assessment will inform the response which may include vaccination campaigns and boosting routine immunization and surveillance as much as possible given the current situation.
- WHO supported MoH in establishing five rapid response teams across the Gaza Strip, to ensure timely surveillance and investigation of any Acute Flaccid Paralysis (AFP) alerts.
- Ongoing efforts to expand “EWARS in a Box” to include additional EMTs, to enhance communicable disease surveillance, including for AFP.
- Close collaboration and coordination with the Health and WASH Clusters and Health Service Delivery Technical Working Group (TWG) to assess the c-VDPV2 response capacity of health and WASH partners.
- A WASH/ infection prevention and control (IPC) assessment is ongoing at seven hospitals and three PHCCs, across the Gaza Strip, to identify the needs and determine improvement action activities for 2024.
- Ongoing efforts to expand the capacity of Nasser Medical Complex and Al-Aqsa Hospital to manage the increasing influx of patients, including post-operative trauma patients.
- WHO, in collaboration with UNFPA and MoH, is preparing the gender-based violence (GBV) training package, to be used in upcoming scheduled health workers training.
- The Health Cluster and WHO regularly update the oPt [Unified Health Dashboard](#), providing a snapshot of conflict-related casualties, communicable disease surveillance, medical evacuations, attacks on health, and overall Health Cluster response in the oPt, with emphasis on the ongoing emergency in the Gaza Strip.

Partners

- The Health Cluster reported that 61 partners are currently operational in the Gaza Strip, reaching a weekly average of 309,200 people with various healthcare services and supplies. In total, 192 health service points, including 120 medical points, are currently operating throughout the Gaza Strip, providing essential primary health care services to the vulnerable population. Mapping of population density and health service points availability is ongoing to identify gaps in service delivery.
- An inter-cluster WASH/IPC TWG will be set up between Health and WASH Clusters to strengthen IPC and information sharing on disease surveillance between the two clusters.
- The Mass Casualty Incident (MCI) plan was finalized, by the Trauma TWG, and disseminated to partners.
- The EMT Coordination Cell (EMT CC) reported an expanded presence of EMTs in North Gaza Valley (four teams between Gaza city and North Gaza).
- The Health Cluster is working closely with other clusters, such as Shelter, Food, Nutrition, Protection, and Water, Sanitation, and Hygiene (WASH), to address the comprehensive healthcare needs of populations, considering the social determinants of health.
- Close collaboration between the Health, Protection and Site Management Clusters to address the congestion of hospitals by internally displaced people sheltering there.

WHO Mission Update

23 - 29 July 2024



Missions planned
(in the North and South)



Missions facilitated
(including partially facilitated)



Missions impeded
(ie. delays/unpassable routes)



Missions denied
(or canceled)

Operations have been severely impacted due to the deteriorating security situation.

- **On 24 July**, WHO led an interagency mission to North Gaza to assess the capacity of the Indonesian and Kamal Adwan Hospitals and facilitate the deployment of EMTs. Two Palestine Children Relief Fund's (PCRF) EMTs were deployed at the Indonesian Hospital, and three Palestinian American Bridge (PAB) EMTs and one Fajr team member were deployed to the Public Aid Hospital. WHO also facilitated the rotation of one EMT from Kamal Adwan, in addition to the rotation of Palestine Red Crescent Society (PRCS) ambulances between north and South of Gaza Valley. Additionally, WHO delivered a total of 46,000L of fuel to maintain service provision at Kamal Adwan, Indonesian, PCRS and Al-Awda Jabalia Hospitals.
- **On 27 July**, WHO conducted a mission to the north to medically evacuate 9 patients and their companions, to the south, prior to their referral abroad for further specialised treatment.

WHO Recommendations

- Immediate ceasefire.
- Expand and sustain humanitarian access into Gaza for fuel, water, food, medicines and other necessary supplies.
- Expand humanitarian corridors and ensure safe passage to allow delivery of humanitarian aid within Gaza.
- Active protection of civilians and health care, preserving the function of remaining health facilities.
- Establish and strengthen a routine process for medical evacuation for all patients in need, without distinction of any kind, ensuring timely referral of the +10,000 critical patients that need to be medevaced out of Gaza.

Funding

WHO oPt total funding ask

\$110M

Operational plan
(Oct 23 to Mar 24)

\$222.2M

Operational plan
(Apr 24 to Dec 24)

\$275.55

Operational plan
(Apr 24 to Dec 24)



Funding received

\$605.75M

The total needed

\$95.5M

Received to date

- The inter-cluster Flash Appeal has been revised and the funding requirement for humanitarian health response is **\$408.5M*** and is targeting **2.9M people in Gaza and West Bank**.



[The WHO Operational Response Plan for the occupied Palestinian territory \(oPt\) for April 2024 to December 2024](#) was published, on 29 May 2024.

Further information:

• **Dr Richard Peeperkorn**,
WHO oPt Representative,
peeperkornr@who.int

• **Dr Ayadil Saparbekov**,
WHO oPt Emergencies Lead,
asaparbekov@who.int

• **Bisma Akbar**,
WHO oPt Communication Officer,
akbarb@who.int