SITUATION OVERVIEW

From 7 to 30 October at least 9770 people were killed in Gaza: 41% are children (4008), 45% female (4409) and 55% male (5361), according to MoH. 141 Palestinians have been killed in the West Bank; 30% (43) are children.

According to Israeli authorities, 1400 Israelis and foreign nationals have been killed, 5,400 injured and 239 being held hostage since the hostilities started.

Gaza: Largescale fatalities and casualties with mass displacement of 1.5 million people and continued siege severely restricting entry of essential supplies, as well as entry/exit of humanitarian workers and evacuation of the injured/sick. Of 1.5 million displaced, 717 000 are in UNRWA shelters; 122 000 in hospitals, churches, and public buildings; and 110 000 people in 89 non-UNRWA schools. 2260 people including 1270 children reported to be missing and may be trapped under the rubble, obstacles to providing first aid response.

West Bank, including east Jerusalem: Increased settler and military violence, including airstrikes and live ammunition. Complete obstruction at checkpoints between Palestinian towns and closure of several communities, restricting access
for patients, health personnel and ambulances. Since 7 October, at least 1048 people, including 424 children, have been forcibly displaced in the context of settler violence, discriminatory planning regulations in Area C and east Jerusalem, and punitive demolitions.

HEALTH NEEDS AND RISKS

Gaza
- **Traumatic injuries**: at least 24 808 people injured in Gaza, of whom 33% are children (8283), 34% female (8479) and 66% male (16 329).
- **Destruction** severely affecting infrastructure in the Gaza Strip and obstructing ambulance access to the injured.
- **Functioning of health care facilities and ambulances** is critically affected by acute shortages of fuel with lack of mains electricity, as well as depletion of medications and medical supplies.
- **350,000 non communicable diseases patients** (diabetes, heart disease, cancer, and others). 1000 patients in need of kidney dialysis.
- **50,000 pregnant women**, with an average of 183 births per day.
- **130 premature infants are dependent on incubators of which 61% are in the north**, require electricity to keep them alive.
- A public health catastrophe is rapidly evolving in Gaza with high levels of violent deaths and injuries, mass displacement, overcrowding, major disruption and dysfunction of the health system, and damage to water and sanitation infrastructure.
- **Routine surveillance systems** are not functioning, and laboratory capacity is severely diminished, hampering detection and response of potential outbreaks. UNRWA shelters report thousands of cases of acute respiratory infections, diarrhoea, chickenpox, skin infections including scabies and others.
- **Severe stressors for mental health affecting the whole population**, including bombardment and siege. Over 485,000 people with severe or moderate mental health disorders were reported before the escalation in hostilities.

West Bank, including east Jerusalem
- **Increased injuries** placing a high demand for emergency medical supplies for first response and at hospitals.
- **Over 270 patients per day** need access to health care in east Jerusalem, as well as in Israeli facilities, from the rest of the West Bank.
- **At least 400 patients and companions** from the Gaza Strip are stranded in the West Bank, including east Jerusalem.
- **At least 5491 Palestinians from the Gaza Strip** who had been working in Israel on 7 October are also sheltering in the West Bank, where they require primary health care support and provision of medications for chronic conditions.

HEALTH SERVICE AVAILABILITY AND ACCESS

Gaza
- **70% (51/72) of primary care facilities not functioning**, a higher proportion non-functional in North Gaza and Gaza City.
- **39% (14/36) of hospitals and two outpatient specialist centres are not functioning. 123%** of hospital beds currently occupied in 7 major hospitals. At Shifa hospital, the bed occupancy rate has reached 188%.
- **Health care staff** are stressed and overworked. 192 health staff have been killed, of whom 16 were killed on duty.
- **Critical outages and shortages of essential medications and medical supplies**, including lifesaving medications for acute and chronic care: e.g. saline, anaesthesia, pain medications, antibiotics, insulin, and cancer chemotherapy.
- **Blood bank supplies**: Calls continue for blood donation and appeals for outside supply of blood units.
- **Separation of North Gaza and Gaza City from governorates in the south, along with evacuation orders.**
  - 12 hospitals in Gaza City and North Gaza are currently functioning and facing repeated evacuation orders, which are impossible to carry out and risk the lives of inpatients and IDPs.
  - Most dialysis capacity (80%) located in the northern areas, separated from the south.
- **From 1 to 3 November, 80 patients and 60 companions were medically evacuated across Rafah.**

West Bank, including east Jerusalem
- **First response capacities overstretched by increased casualties**, with high demand for emergency medical supplies.
- **Checkpoint closures, insecurity, movement restrictions, and attacks on health** obstruct access for ambulances, health care workers, and patients – including to primary and hospital care.
- **Twenty-nine communities in Area C remain inaccessible to partners running mobile clinics**, leaving the population without access to essential healthcare services.
• Increased shortages of essential medicines and medical supplies continue, affecting first response, primary care, and hospital care.

HEALTH ATTACKS

WHO has documented 235 attacks on health care in the occupied Palestinian territory since 7 October.

• 108 attacks in the Gaza Strip have resulted in 512 fatalities and 654 casualties, including 16 fatalities and 37 injuries of health care workers on duty. The attacks have affected 39 health care facilities (including 22 hospitals damaged) and affected 36 ambulances (including 33 which sustained damage).

• 127 attacks in the West Bank affecting 104 ambulances and including 72 attacks involving obstruction to delivery of health care; 70 involving physical violence towards health teams; 19 involving detention of health staff and ambulances; and 12 involving militarised search of health assets.

HEALTH RESPONSE

WHO

• 113 trucks with medical supplies were sent from Al Arish to be scanned and enter Gaza until 5 November including 14.5 from WHO and others from Egyptian MoH, ERC, ICRC, UNICEF, Qatar and Tunisia.

• WHO has delivered medical supplies to seven hospitals (2 in the north, 5 in the south) between 24-25 Oct, 30-31 Oct and on 1 November, Palestine Red Crescent Society (PRCS) to support ambulance operations, and to the UNRWA warehouse for onward distribution to approximately 8 UNRWA primary health care centres. The supplies delivered are enough for 411,000 people with different needs. On 6 November, WHO delivered anesthetic medications and oxytocin to Nasser Medical Complex and European Gaza Hospital to support more than 3500 operations and over 3000 safe deliveries.

• WHO, with support from UNRWA, delivered the minimum amount of fuel required to six major hospitals and PRCS to sustain its ambulance services.

• Three flights arrived to Al Arish, Egypt, since 14 October carrying trauma and surgical supplies. In addition, a truckload of medications came overland from Cairo through Al Ismailia. More trucks are in the pipeline.

• WHO is coordinating with MOH, UNRWA and others to establish early warning systems to support disease surveillance and control measures, especially in over-crowded shelters.

• WHO has delivered emergency trauma bags to two UNRWA designated shelters in support of the IDPs.

• WHO-supported mass casualty response plans and protocols are active in seven hospitals. WHO has previously provided extensive mass casualty management training to health workers at all seven hospitals and ensured availability of pre-positioned supplies as part of maintaining emergency preparedness.

Health partners

• Inter-sectoral prioritisation strategy for supplies into Gaza and humanitarian partners continue to advocate for increasing the number of trucks and type of supplies allowed entry.

• Gaza Health Cluster Logistics & Medical Supply Working Group has been set up in Cairo and is compiling supply chain information from all partners and service providers in Gaza.

• UNRWA and PMRS are providing primary healthcare services to IDPs via mobile teams.

• Surge staff deployed from inside Gaza are continuing to support trauma management at Gaza hospitals.

• Twenty global EMT (Emergency Medical Team) partners are on standby ready to be deployed to support the Gaza health facilities with management of patients.

• Health Cluster partners are providing health and MHPSS services to workers from Gaza sheltering in the West Bank and supporting emergency and trauma care needs across the West Bank.

• Health Cluster partners continue providing humanitarian health response across West Bank. The Inter-Agency Contingency Plan is activated in response to increased military operations, settler violence and civil unrest.

WHO RECOMMENDATIONS

• Immediate end to hostilities.

• Establish and sustain protected humanitarian access for the immediate entry of adequate quantities of humanitarian supplies and personnel into the Gaza Strip and unimpeded access for patient evacuation and outside referral.

• Prioritization of the shipment of fuel to operate desalination plants, hospital generators, ambulances.

• Ensure safe passage for medical supplies and civilians within the Gaza Strip. Ensure WHO medical supplies can safely reach major hospitals in Gaza City and North Gaza and hospitals in south Gaza.
• Ensure the respect and the protection of health care as well as civilians and civilian infrastructure against attacks.
• Ensure the injured have immediate and unhindered access to health care.
• Ensure continuity of essential health services.
• Rapidly reinforce infectious disease surveillance and control measures.

**FUNDING**

- WHO estimates **$110 million** needed to support the health response efforts through **January 2024**. WHO has confirmation from several partners regarding funding to support the response. The inter-cluster Flash Appeal has been revised and the funding requirement for humanitarian health response is **$227.6 million** and is targeting **2.5 million people** in Gaza and West Bank.

- WHO has secured **$8.2M from the WHO Contingency Fund for Emergencies**. It has reprogrammed $1 million to procure urgently needed medical supplies from the local market to ensure the continuity of essential health services, including emergency obstetric care, management of chronic diseases, and infectious disease control. Additionally, WHO has secured **$2.5M from Central Emergency Response Fund (CERF)** (of which, $500,000 is allocated for West Bank), and **€5M from ECHO** for the immediate procurement of essential medications and supplies.

**Further information:**

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