

OPT EMERGENCY SITUATION REPORT

Issue 7 As of 23 October 2023, 17:00



| 5087 | 15273 | 94 | 1734 | 168* |
|---|--|--|---|---|
| Number of Palestinians killed in Gaza | Number of Palestinians injured in Gaza | Number of Palestinians killed in the West Bank | Number of Palestinians injured in the West Bank | Attacks on Health Care since 7 October *WHO SSA |
| 1.4 M Estimated number of people displaced | 34% Hospitals not currently functioning | 64% Ministry of Health primary health care clinics closed | 64% UNRWA primary health care clinics closed | 3 Liters of water available per person per day |

SITUATION OVERVIEW

Since 7 October, 1400 Israelis, including foreign nationals have been killed and more than 4,932 injured.

Gaza: Largescale fatalities and casualties with continued siege preventing entry of essential supplies at scale. Humanitarian workers unable to enter or exit, no evacuation of the injured and sick. Mass displacement of 1.4 million people, including 600,000 from the north to south of Gaza and 580,000 taking shelter in UNRWA schools at more than 2.5 times their designated capacity.

West Bank, including east Jerusalem: Escalations of settler and military violence, including use of live ammunition and airstrikes, as well as complete obstruction at checkpoints between Palestinian towns and closure of several communities, preventing entry/exit for patients, health personnel and ambulances.

HEALTH NEEDS AND RISKS

Gaza

- More people have been killed in the last 15 days than the total number of people who died of all causes in 2022¹.
- High incidence of casualties and fatalities as a result of the bombardment. MoH reported that its daily use of medical consumables during the war is equivalent to its monthly consumption before the war.
- **350,000** non communicable diseases patients (diabetes, heart disease, cancer, and others). 1000 patients in need for kidney dialysis.
- 50,000 pregnant women, with an average of 183 births per day.
- 130 premature infants are dependent on incubators, which require electricity, to keep them alive.
- An imminent public health catastrophe looms in the setting of mass displacement, overcrowding of shelters, damage to the water and sanitation infrastructure.
- Mental health toll affecting all facing bombardment and siege.

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 stuck in the West Bank, including east Jerusalem.
- Over 1000 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 CARE FUNCTIONING AND ACCESS

Gaza

- Acute shortage of fuel and electricity is seriously affecting the most critical functions at all hospitals and the ability of ambulances to respond. Fuel depletion risks the lives of patients in intensive care, those requiring surgery or neonatal incubators and over 1000 patients dependent on dialysis.
- Prevention of entry/exit for humanitarian supplies and people from Gaza.
 - Affecting fuel, water and sanitation, food and nutrition, medicines, medical supplies and equipment for health care.
 - All drugs and medical supplies are depleting, including those needed for immediate response to casualties (e.g. saline, anesthesia), those needed for treatment of long-term conditions (e.g. insulin) and lifesaving drugs for newborns.
 - Shortage of blood: Ministry of Health called for blood donation and appealed to ICRC to supply blood units from outside the Gaza Strip.
 - o Non-entry of **health workers** for humanitarian response, including management of casualties.
 - o Prevention of exit and evacuation of **patients and casualties**. 95 patients per day are unable to access the specialized health care they would usually receive outside the Gaza Strip.
- Health services severely affected.
 - o **64% (46/72) of primary care facilities not functioning**; a higher proportion not functioning in Gaza City (74%) and North Gaza (92%). Only six clinics out of 30 are operational in Gaza and the North of Gaza.
 - 34% (12/35) of hospitals not functioning; 112% of hospital beds currently occupied in 7 major hospitals. At Shifa hospital alone, the bed occupancy rate have reached 147%. This puts pressure on staff to free up beds for new patients, risking patient safety.
 - o Limited fuel supplies affecting **ambulance functioning** and access to the sick and injured.
 - o Medical equipment increasingly non-functional, affecting diagnostic and treatment capacities.

¹ 6061 deaths from all causes recorded in 2022. Since 7 October, 5087 people have been killed. An additional 1400 people trapped under the rubble.

- 55% of the Health Cluster partners stopped or limited operations because of the insecurity and mass infrastructure damage which makes it difficult to move.
- Evacuation orders affecting the north of the Gaza Strip.
 - 13 hospitals in Gaza City and North Gaza are currently functioning and facing evacuation orders.
 Evacuation orders are impossible to carry out and risk the lives of over 2000 inpatients, particularly the most vulnerable requiring life support. Bed capacity in the south (1/3 of that in the north) cannot accommodate and there is insufficient ambulance capacity.
 - Most dialysis capacity (80%) located in in the area ordered for evacuation.
- Destruction severely affecting infrastructure in the Gaza Strip and obstructing ambulance access to the injured.
 - 1400 people estimated to be trapped under the rubble, obstacles to providing first aid response.
- **Routine surveillance systems** are not currently functioning, hampering effective detection, analysis, and response to public health threats.

West Bank, including east Jerusalem

- **First response capacities overstretched by increased casualties,** with a high demand for emergency medical supplies at hospitals.
- Checkpoint closures, insecurity, movement restrictions, and attacks on health are making movement of ambulances difficult and restricting access for patients to primary and hospital care between towns in the West Bank and in east Jerusalem and at Israeli hospitals.
- Area C remains inaccessible to partners running mobile clinics, leaving the population without access to essential healthcare services.

HEALTH ATTACKS

From 7 to 22 October, WHO documented 168 attacks on health care in the occupied Palestinian territory.

- 72 attacks in the Gaza Strip have resulted in 491 fatalities and 370 casualties, including 16 fatalities of health care workers and 30 injuries of health workers on duty. The attacks have affected 34 health care facilities (including 19 hospitals damaged) and 24 ambulances.
- 96 attacks on health care in the West Bank affecting 77 ambulances and including 49 attacks involving obstruction to delivery of health care; 53 involving physical violence towards health teams; 17 involving detention of health staff and ambulances; and ten involving militarized search of health assets.

HEALTH RESPONSE

WHO

- Distribution of WHO medical supplies that arrived in Gaza on 21 October is ongoing. Deliveries have been made to
 Nasser Medical Complex, Al-Najjar Hospital, European Gaza Hospital and to the Palestine Red Crescent Society for
 distribution to two health facilities. With hostilities ongoing, a humanitarian ceasefire is needed to ensure the safe
 passage of the supplies to key health facilities in the north.
- WHO's delivery of supplies that arrived in Gaza contains trauma supplies to treat 1200 injured people, medicines for the treatment of 1500 people with chronic diseases, 235 portable trauma bags for on-the-spot stabilization of injured patients, essential supplies for 300000 people.
- Two additional flights arrived to Al Arish, Egypt, since 14 October carrying trauma and surgical supplies for 2300 people, essential medical supplies for 100,000, medicines for treatment of 150,000 people with noncommunicable diseases, medical tents, and vitally needed water tanks for hospitals.
- WHO is coordinating with MOH, UNRWA and others partners to establish an **early warning systems** to support disease surveillance and control measures, especially in over-crowded shelters.
- WHO-supported mass casualty response plans and protocols are in place at seven Gaza hospitals.
- WHO continues to systematically monitor health attacks within the Surveillance System for Attacks on Health Care, as well as to document and report on health needs and restrictions on health access.

Health partners

 Partners continue to preposition supplies and other resources in Egypt to support the health response; delivery of supplies to Gaza is needed to re-establish operations for most partners.

- Fourteen global EMT (Emergency Medical Team) partners are on standby ready to be deployed to support management of patients in Gaza.
- Health Cluster is tracking partner procurement and Nutrition Working Group planning response pending access.
- Health Cluster partners continue to support emergency and trauma care needs across the West Bank.

WHO RECOMMENDATIONS

- Immediate end to hostilities.
- Establish and sustain protected humanitarian access for the immediate entry of adequate quantities of humanitarian supplies including fuel, water, food, medicines, and other essential 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 \$50 million needed to support the health response efforts in the coming three months \$30 million for essential medicines and supplies and \$20 million for other health interventions.
- WHO has secured \$4.1 million from the WHO Contingency Fund for Emergencies and \$2.5 from Central Emergency
 Response Fund (CERF) (of which, \$500,000 is allocated for West Bank) for the immediate procurement of essential
 medications and supplies. Additionally, it is reprogramming \$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.
- Under CERF, Gaza allocated \$2 million and West Bank \$500,000 for health.

| Health Cluster partners support tracker | Cluster partners support tracker | | | |
|---|--|------------|--|--|
| | Partners | \$ | | |
| Delivered locally procured supplies | WHO, MedGlobal, Islamic Relief Palestine, MAP, QRCS | 4,306,999 | | |
| Confirmed incoming funding | WHO, MAP, AWDA, PMRS, MdM France, MdM Suisse, MdM Spain, UNFPA, CARE, MedGlobal, QRCS | 10,976,000 | | |
| Total support committed/ delivered | | 15,282,999 | | |

Further information:

- Dr Richard Peeperkorn, WHO oPt Representative, peeperkornr@who.int
- Dr Thanos Gargavanis, WHO opt Emergency Care Technical Officer, gargavanisa@who.int
- Bisma Akbar, WHO oPt Communication Officer, akbarb@who.int