

WHO Special Situation Report occupied Palestinian territory, Gaza December to January 2018



Highlights

- Continued power cuts are placing an increasing burden on the health sector with only enough fuel to sustain the critical health services until the 28th February. Meanwhile, the Ministry of Health (MoH) implemented strict contingency has measures, including the partial closure of Beit Hanoun Hospital, Durrah Hospital, Psychiatric Hospital, and an additional 13 MoH primary healthcare clinics. In 2018, US \$3.12 million is required to provide 3.7 million litres of emergency fuel to sustain the bare minimum needed to prevent the collapse of the health sector.
- In January, out of the 516 essential drugs, a total of 40% were completed depleted. This includes drugs used in emergency departments and other critical units. Out of the 853 essential disposables, 23% were completed depleted.
- Violent escalations and clashes in December and January resulted in 11 deaths and 5,632 reported cases of injuries. Hospitals faced difficulties to cope with the influx of trauma patients and requested support from the international community for prepositioned medical supplies.
- WHO is currently in the process of disseminating over \$1 million USD worth of medical equipment and procuring over \$1.2million USD worth of drugs and disposables.
- The Health Cluster, led by WHO is currently reviewing its emergency preparedness and response activities with the active involvement of over 20 leading agencies.

		HEALTH SECTOR
1-	59	WHO STAFF
1-	70	HEALTH CLUSTER PARTNERS
FUNDING REQUIREMENTS FOR 2018		
\$	\$ 5 M	WHO
	\$ 26 M	HEALTH CLUSTER
FUNDING RECEIVED FOR 2018		
5%	10%	WHO EMERGENCY PROGRAMME
	5%	HEALTH CLUSTER
DRUGS & DISPOSABLE SHORTAGES		
A	40%	DRUGS TOTALLY DEPLETED
	23%	DISPOSABLES TOTALLY DEPLETED
HOSPITALS AFFECTED BY THE ELECTRICITY CRISIS		
н	11	PUBLIC HOSPITALS REDUCED
	3	HOSPITAL PARTIALLY CLOSED
	14	NGO HOSPITALS REDUCED
PRIMARY HEALTHCARE CLINICS AFFECTED BY THE ELECTRICITY CRISIS		
РНС	36	MOH CLINICS REDUCED
	13	MOH CLINICS PARTIALLY CLOSED

Situation Update

Impact of the electricity crisis in Gaza

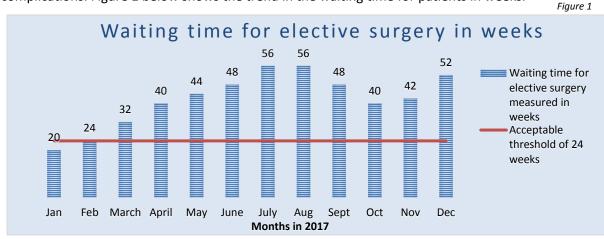
 The health sector in Gaza relies on fuel provided by the UN every month to run backup electricity generators in order to sustain the minimum critical health services for 1.27 million people. The UN donation is only enough to sustain the critical health services until the 28th February.



• Meanwhile, the MoH has implemented drastic

measures to rationalize the remaining 315,000 liters of donated fuel. On the 29th January, the MoH partially closed Beit Hanoun Hospital, leaving only the Emergency Department functioning at minimal capacity. Beit Hanoun Hospital is a 63-bed hospital located in the North Gaza and serves a catchment population of approximately 60,000 people.

- On the 4th February, the MoH partially closed an additional two hospitals, Durrah Hospital serving a catch population of 250,000 people, and the only Psychiatric Hospital in Gaza.
- A further two hospitals are expected to close before the 20th February; Kamal Adwan serving a catchment population of 150,000 and Najjar Hospital serving a catchment population of 200,000 people. Najjar Hospital is also home to the only hemodialysis unit in the south of Gaza.
- Key services in the remaining 11 hospitals, such as elective surgery, sterilisation and diagnostic services continue to work at reduced capacity. Since the beginning of 2017, WHO has been following the waiting list for elective surgery¹. In December, the waiting time for elective surgery was 52 weeks, which is well beyond the Ministry of Health (MoH) threshold of 24 weeks. Delays of necessary surgical interventions may involve a prolonged period of suffering and ill health and affects the psychological and social life of the patient. In some cases, this can lead to further medical complications. Figure 1 below shows the trend in the waiting time for patients in weeks.



¹ WHO has been monitoring the waiting time for elective surgery in ENT (ear, nose and throat surgery) as a key indicator

- The extended power cuts mean that hospitals and primary health centers have to rely on generators, which are becoming increasingly overused. Currently, twelve generators are out of order and in need of repair. The ICRC has committed to repairing six out of the twelve generators. Additional support is needed to repair the remaining six generators that have stopped functioning.
- In addition, 13 MoH primary healthcare centers have severely reduced their services due to the lack of fuel, these include: Sourani Healthcare Centre, Medical Commission, Medical Institution, Gaza Health Administration, Abasan Main Healthcare Centre, Al-Atara Healthcare Centre, Physically Disabled Healthcare Centre, Shuha'da'a Al-Shata' Healthcare Centre, Beit Hanoun Healthcare Centre, Shuhada'a Rafah Healthcare Centre, Al-Bureij Central Healthcare Centre, Al-Zawaida Healthcare Centre, and Al-Bakara Healthcare Centre.
- Blood storage centres in Rafah and Khan Younis in Gaza are unable to operate due to the lack of electricity. Blood units are now only being stored at European Gaza Hospital and Shifa Hospital. The transportation of blood to Rafah and Khan Younis can take up to 30 minutes potentially compromising the health status of patients particularly during times of emergency.
- Due to the electricity crisis, water supply through the network reaches most homes for just 3-5 hours every day, and desalination plants are functioning at less than 50 per cent of their capacity. More than 100 million litres of poorly treated sewage are being discharged into the Mediterranean every day. As a result, there is an increased risk of waterborne diseases, including acute diarrhoea and parasite infections.
- WHO has been monitoring the prevalence of diarrhoeal disease amongst children less than 3 years of age². Figure 2 illustrates the prevalence of diarrheal diseases amongst children compared to the same months in 2015, 2016 and 2017.

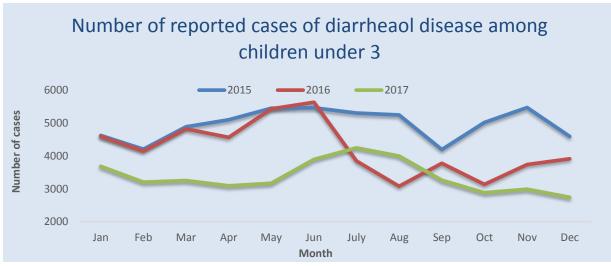


Figure 2

² Method of collection involves passive recording of cases at the hospital and primary healthcare level for MOH, UNRWA and NGO facilities across the whole of the Gaza Strip.

Shortages in drugs and disposables in Gaza

- The Central Drugs Store in Gaza supplies all 14 MoH hospitals (2,243 beds) and 49 MoH primary healthcare clinics in Gaza. These health facilities provide 40% of Gaza's primary healthcare covering approximately 600,000 people and 90% of all hospital care services.
- In January, the Ministry of Health (MoH) released drugs from the MoH warehouse in the West Bank to Gaza's Central Drugs Store (CDS). This shipment includes a total of 45 types of essential drugs and 76 essential medical disposable items, in addition to other items related to laboratory services. The most recent delivery arrived in Gaza on the 31st January.
- In December, out of the essential 516 drugs on the essential drugs list, 229 drugs (44%) were at zero stock³, out of which 200 items (39%) were completed depleted. In mid-January the bulk delivery of drugs and disposables from the MoH had arrived, which decreased the percentage of drugs at zero to 41%, however, by the end of January the zero stock increased again to 223 drugs (43%), out of which 206 items (40%) were completely depleted. Figure 3 illustrates the worrying trend of depleting drug supplies in Gaza.



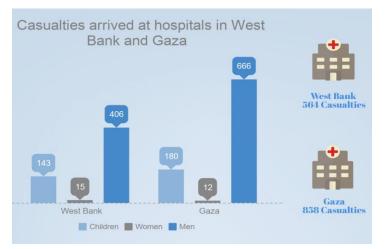
- There are 853 items on the essential medical disposables list considered by the MoH as necessary for the provision of essential health care. Disposables include a wide variety of essential items such as syringes, line tubes, filters for dialysis and dressing materials.
- In December, out of the 853 medical disposables on the essential disposables list, 236 (28%) were
 reported at zero stock levels in the CDS in Gaza, out of which 202 medical disposables are completed
 depleted. In January 220 (26%) disposables were reported at zero stock, out of which 194 (23%)
 items of medical disposables were completed depleted. Figure 4 below illustrates the level of
 essential disposables at zero stock since the start of the year.

³ "Zero level stock" designates critical supplies that will be totally depleted in less than one month at the Central Drug Store (CDS).



Casualties in the oPt

From December until January, 11 people died following violent clashes across the oPt, 8 from the Gaza Strip and 3 from the West Bank. There were 5,632 reported cases of injuries, from which 1,422 were admitted to hospitals. In the West Bank, hospitals received 564 cases of casualties, which included 143 children, 15 women and 406 men. In Gaza, hospitals received 858, which included 180 children, 12 women and 666 men.



The already under-resourced public hospitals faced difficulties to cope with the influx of trauma
patients and requested support for the provision of essential drugs and disposables from the
international community.

Outbreaks in the oPt

 From December to January, a total number of 799 SARI cases were reported (789 in the West Bank and one in Gaza). Out of which, 209 cases were tested at the laboratory and confirmed as H1N1. There were a total of 12 reported deaths, the majority (10) of which had compromised immunity. WHO has shipped 1,000 boxes of Tamiflu for adults and children, which were provided to the MoH.

- Provision of life-saving drugs, disposables, medical equipment and generators for health facilities
- Health Equip hospitals and health facilities with fuel and solar energy system units
- needs & Provision of resources to support the collection, storage and transport of blood across the Gaza Strip
 priorities
 - Preposition supplies in order to strengthen emergency preparedness
 - Enhance coordination and health information amongst key emergency players on the oPt
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 - WHO is disseminating over \$1million USD worth of medical equipment to replace some of the malfunctioning life-saving machines in Gaza's hospitals

WHO Response

- With support from the EU, WHO is disseminating emergency life-saving drugs to Gaza's hospitals worth over \$1.2 million USD. These drugs will be distributed to the emergency departments to serve some of the most vulnerable patients
- WHO has requested \$5 million as part of the Humanitarian Response Plan (HRP) for 2018, which includes humanitarian support to address non-communicable diseases, in addition to installation of solar panels, and pre-positioning and disseminating lifesaving medical supplies
- WHO continues to release monthly updates on the access to healthcare for patients being referred outside of Gaza and is monitoring and reporting attacks on healthcare

Health Cluster Response

On the 18th January, WHO as Health Cluster lead, initiated an emergency Health Cluster meeting to discuss the Gaza crisis. The partners agreed to review emergency preparedness actions

 On the 30th January, the Health Cluster hosted a diplomat and donor visit to key health facilities; the visit included briefings from WHO, UNRWA, MOH and Palestinian Children Relief Fund. The



Health Cluster advocated for fuel and medical resources to prevent the collapse of the health sector

- MAP-UK are procuring seven items of drugs to cover emergency needs for a minimum of one month and have provided some disposables for the Central Blood Bank in Shifa Hospital. In addition, MAP-UK plans to conduct 18 medical missions including trauma, physiotherapy and neurosurgery.
- UNICEF is in the process of supplying essential drugs worth \$2million USD, some of which will be prepositioned. UNICEF is also donating 8 incubators and 20 phototherapy equipment for the neonatal and paediatric units in Gaza
- The ICRC is conducting vascular training for doctors across four hospitals: European Gaza Hospital, Shifa Hospital, Indonesia Hospital and Nasser Hospital. The ICRC is continuing to provide ongoing support to the maintenance of back-up generators for Gaza's heath sector

Upcoming activities

In February, WHO will conduct an assessment on the availability, functionality and usage of medical equipment across Gaza's hospitals and provide on-job training to biomedical engineers

- WHO is enhancing the health monitoring in Gaza with the aim to rapidly and continuously assess, map and monitor health service availability, response readiness and the health impact by establishing 'Health Resources Availability Monitoring Systems' (HeRAMS)
- An ad-hoc emergency Health Cluster meeting will take place in February to decide how to respond to the critical fuel shortages in the health sector

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