

HEALTH CLUSTER PARTNERS UPDATE

24th November 2023











Casualties as of 23rd November 2023



 Gaza
 West Bank

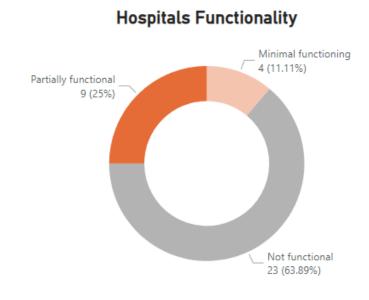
 14,854
 229



 Gaza
 West Bank

 36,000
 2,900

Health Facilities Functionality





Attacks on healthcare











^{*}The Gaza casualties information is based on Government Media Office announcements



Response Activities

Gaza

- 221 patients and companions were evacuated from Shifa Hospital including 31 babies (28 of whom were referred to Egypt whilst 3 remained at Emirati Hospital). Several medical staff were evacuated.
- ~500 patients and staff were evacuated from Indonesian Hospital.
- 72 rehabilitation and nursing sessions.
- ~30,000 primary healthcare consultations per day through fixed and mobile clinic services.
- 3,177 post-natal care consultations.
- There are a total of 5,349 pregnant women in the shelters.
- 10,156 children benefitted from vaccination services.
- 212 IEHK kits, 15 AWD community kit, 50 midwifery kit and 15 obstetric surgical kit were delivered to Nasser Hospital.
- 16 IARH kits were provided to the following hospitals Al Awda (Nuseirat), Al Aqsa, Emirati and Nasser, Al Amal and Al Khair to support emergency obstetric care services.
- ~20,000 people benefitted from MHPSS services.

West Bank

- Supplies which can benefit 2,000 trauma and emergency interventions have been prepositioned in Ramallah.
- 21 people benefitted from rehabilitation services.
- 3 foetal heart detectors were donated to safe motherhood and emergency centres in Yabad, Huwara and Hebron.
- 65 community volunteers in Nablus, Tulkarm and Bethlehem were trained in first aid and bleeding control techniques for the injured.
- ~500 people benefitted from MHPSS services including survivors of settler violence, excessive use of force by IF and demolitions.
- 10 doctors and nurses in Qalgilya received basic life-saving training.
- 10 supervision sessions were as part of mental health integration using the mhGAP.
- Partners continue to provide health services including MHPSS support to Gaza workers sheltering in the West Bank.

EMTs

- An EMT Coordination Cell has been established in Cairo and will soon be operational inside Gaza.
- The EMT strategy is based on providing surge (supplies, infrastructure, and staffing) to support existing health facilities and services.
- Donation of combined infrastructure and supplies, for use by local partners, is also possible.
- Surge teams from MSF and ICRC are already on the ground and providing surgical and primary healthcare services, while a Jordanian field hospital is currently being established.
- A total of 31 teams, in varying states of readiness, have expressed an interest in deploying, and a procedure
 has been established to support those teams tasked in coordination with WHO in obtaining access and
 transporting supplies.
- To express and interest in deploying an EMT, or for any other queries, please contact the EMT Coordinator: skeltonp@who.int

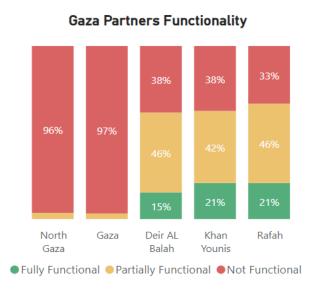


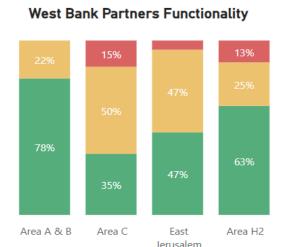
Supply Chain

- According to Logistics Cluster as of 23 November, 224/1,559 trucks have entered Gaza through the Rafah Crossing with medical supplies.
- 16 partners are currently reporting on the supply chain platform.
- Since 7 October, 12 hospitals, ambulance services and UNRWA and PMRS received some medical supplies to support service delivery. Visit <u>this link</u> for map of deliveries.
- Ongoing mapping exercise of health-related cold chain capacity in Al Arish and Gaza.

For more details on health supplies, please visit the interactive online dashboard.

Operational Challenges





Fully Functional
 Partially Functional
 Not Functional

Gaza

- 5 partners have reported 113 staff killed (108 UNRWA, 3 MSF/AWDA, 1 WHO and 1 MdM France).
- MoH reported more than 200 staff killed.
- Insecurity continues to impact partner operations and access to some locations especially the north.
- Lack of fuel, medical supplies, water, food, and other essential supplies.
- Displacement of partners, their staff and families are also affecting operational capacity.
- Overcrowding in the shelters is complicating health service delivery and increasing risk of communicable disease including outbreak-prone diseases.
- Internet and phone connection makes communication difficult.
- NGO partners are experiencing major delays in signing MoU with Egyptian Red Crescent which is impacting their logistics capacity in Egypt.
- Only 19% of funding required to respond has been committed.

West Bank

- Insecurity and targeting of health workers continue to present challenges to emergency responses.
- 29 communities in the West Bank have been left without access to mobile clinic services due to closures.
- Reluctance of injured individuals to seek critical healthcare services and/or engage with rehabilitation program due to fears of arrest, given the extensive reach of IF in the West Bank.
- Only 14% of funding required to respond has been committed.



Conditions required to support partners response activities

Gaza

- Immediate and sustained ceasefire.
- Sustained humanitarian access for adequate quantities of supplies (including urgently needed fuel supplies, hospital equipment) and people (humanitarian workers, health workers, and patients) to, from and around the Gaza Strip.
- Ensure respect and the protection of health care at all times.
- Mitigation measures to reduce risk to staff, such as armoured vehicles, personal protective equipment (ballistic), and communications equipment.

West Bank

- De-escalation of military violence and protection from settler violence for the Palestinian population living under occupation in the West Bank.
- Respect for medical missions and their protection from violence and attacks.
- End arbitrary restrictions on movement to allow health staff, ambulances, and patients to move throughout the West Bank and into east Jerusalem, where health access is needed.
- End to discriminatory planning policies and settlement expansion resulting in the displacement of
 Palestinians in the West Bank, particularly those in Area C, east Jerusalem, and area H2 of Hebron,
 and restricting the development of permanent or semi-permanent health facilities.

This report was made with contributions from the following partners:























