### **SEVENTY-SEVENTH WORLD HEALTH ASSEMBLY Provisional agenda item 20**

A77/18 14 May 2024

# Health conditions in the occupied Palestinian territory, including east Jerusalem, and in the occupied Syrian Golan

Summary of support and health-related technical assistance to the Palestinian people in the occupied Palestinian territory, including east Jerusalem, in the period from 1 January to 7 October 2023

#### **Report by the Director-General**

- 1. In the year 2023, the Seventy-sixth World Health Assembly adopted decision WHA76(13), in which it requested the Director-General, inter alia, to report, based on field monitoring and assessment conducted by WHO, on progress in the implementation of the recommendations contained in the report on the health conditions in the occupied Palestinian territory, including east Jerusalem, and in the occupied Syrian Golan by the Director-General to the Seventy-seventh World Health Assembly in 2024, bearing in mind the legal obligation of the occupying power. Owing to the escalation of hostilities in Israel and the occupied Palestinian territory, including east Jerusalem, since 7 October 2023, this report is restricted to a short summary on the activities conducted by WHO prior to that escalation in support of the health system and Palestinians in the occupied Palestinian territory, including east Jerusalem. Information on the health implications and humanitarian impact of the current crisis is presented in a separate report.
- 2. The dire humanitarian and social-economic situation, as well as the insecurity, the regular peaks of violence, and the severe restrictions on people's movement and limitations on the entry of humanitarian and medical goods and supplies, continued to have a complex impact on the functioning of the health care system and the health outcomes of the Palestinian population in the Gaza Strip and the West Bank. In the year 2023, WHO continued to provide support and health-related assistance to the Palestinian people in the occupied Palestinian territory, including east Jerusalem, in line with the Thirteenth General Programme of Work, 2019–2025, and the strategic priorities agreed between the WHO's office for the West Bank and Gaza and the Palestinian Ministry of Health.
- 3. WHO worked to support the realization of universal health coverage through health systems strengthening, including by evaluating and developing health policies and strategies, enhancing health information systems, strengthening primary health care, promoting family practice, and assessing financial risk protection in health. WHO supports health sector responses to trauma/injury needs, reproductive maternal, newborn, child and adolescent health needs, noncommunicable diseases and mental health.

<sup>&</sup>lt;sup>1</sup> Decision WHA76(13) (2023).

<sup>&</sup>lt;sup>2</sup> Document A77/12.

- 4. The under-5 mortality rate was 11.8 per 1000 live births, with 6.21 neonatal deaths per 1000 live births. Except for COVID-19, which was responsible for 7.7% of deaths in 2022, infectious diseases represented a relatively small burden of disease. Noncommunicable diseases represented the major burden of morbidity and mortality prior to the escalation of hostilities in October 2023, with WHO working to support policies to address major risk factors, as well as to strengthen service design and implementation. In the year 2022, ischemic and hypertensive heart disease, malignant neoplasms, cerebrovascular disease, and diabetes mellitus accounted for 61% of all deaths. 1
- Mental health represents another major burden of disease. Depressive and anxiety disorders remain a key concern; 44.7% of men and 50.2% of women in the occupied Palestinian territory, including east Jerusalem, experienced an incident of psychological distress, whereas in the Gaza Strip, 59.1% of men and 57.9% of women experience such distress. Rates of intimate partner violence are also a source of concern.<sup>2</sup> A 2022 Save the Children report highlighted that emotional distress levels among children in Gaza were on the rise even before the escalation in late 2023.<sup>3</sup> Between the years 2018 and 2022, emotional distress levels among children escalated on average from 55% to 80%. The specific emotional state of fear increased from 50% to 84% and grief from 55% to 78%. WHO is the technical advisor for the National Mental Health Thematic Group of the Palestinian Ministry of Health and the co-chair of the inter-cluster technical working group for mental health and psychosocial support in the Gaza strip. These bodies were undertaking efforts in emergency response; strengthening mental health services, including in schools; integrating mental health in general hospital care; building capacities of mental health professionals and primary health care staff; and procuring essential medicines for mental health to address critical gaps. In July 2023, the Palestinian Institute of Public Health, which was established as a WHO project in the year 2012 with the support of the Government of Norway, transitioned to come under the auspices of the Palestinian Authority. WHO undertakes capacity-building to strengthen monitoring and analysis and integrate human rights principles in health care, as well as advocacy with duty bearers for upholding respect, protection, and the fulfilment of the right to health for all Palestinians in the occupied Palestinian territory, including east Jerusalem.
- 6. In the first six months of 2023, there had already been a substantial increase in occupation- and conflict-related violence and casualties and fatalities resulting from trauma in the West Bank resulting in 292 deaths, compared with 154 such fatalities in the year 2022. WHO worked to build the capacities of health workers in mass casualty management and to train communities in first aid trauma response where access has been restricted; and provided supplies and resources to support functioning of services and the emergency operations centre of the Palestinian Ministry of Health.
- 7. As the Cluster Lead Agency for the Health Cluster, WHO worked to enhance coordination of the humanitarian health response, conducting an assessment of overall humanitarian health needs, assisting with the planning and mobilization of the humanitarian health response, and following up with 52 partners to track health needs and the implementation of response activities outlined in the

<sup>&</sup>lt;sup>1</sup> Ministry of Health, Palestine Health Information Center. Health Annual Report: Palestine, 2022.

<sup>&</sup>lt;sup>2</sup> 2022 WHO STEPwise approach survey.

<sup>&</sup>lt;sup>3</sup> Save the Children International. Trapped: The impact of 15 years of blockade on the mental health of Gaza's children. 2022. (https://resourcecentre.savethechildren.net/document/trapped-the-impact-of-15-years-of-blockade-on-the-mental-health-of-gazas-children/, accessed 18 April 2024).

<sup>&</sup>lt;sup>4</sup> United Nations Office for the Coordination of Humanitarian Affairs (OCHA). Data on casualties (https://www.ochaopt.org/data/casualties, accessed 18 April 2024).

Humanitarian Response Plan 2023. The Health Cluster partners reached over 500 000 people through primary, secondary and other specialized services in the reporting period.

- 8. WHO's humanitarian health assistance in the year 2023, prior to 7 October, also included continued support to strengthen capacities to detect, assess, and respond to potential public health emergencies of international concern in line with the International Health Regulations (2005), as well as the provision of medicines, vaccines, supplies and equipment needed to sustain essential health services. From the period of the Great March of Return, in 2018, when demonstrations took place in the Gaza Strip near the Gaza-Israel border to demand the end of the Israeli blockade and the right of return for refugees, until the unprecedented escalation in hostilities on 7 October 2023, the ongoing protracted humanitarian and protection crisis was assessed as a Grade 2 emergency in line with WHO's Emergency Response Framework, meaning that the level of response required by WHO exceeded its local capacity and required the provision of additional support from the WHO Secretariat.
- 9. Recognizing the substantial barriers to the functioning of the Palestinian health system under the occupation, WHO has continued to monitor and document barriers to the right to health, with a focus on access restrictions and attacks on health care. Movement restrictions throughout the occupied Palestinian territory, including east Jerusalem, have a detrimental effect on health access. In the West Bank, physical obstacles include the separation barrier that divides 9% of the territory from the remaining 91%;<sup>2</sup> the multitude of fixed and moving checkpoints; and zoning policies and an expanding settlement infrastructure, which includes restricted-access areas and roads. The Gaza Strip has been under a blockade since the year 2007, with a surrounding perimeter fence or barrier and severe restrictions placed on passage through the checkpoint at Beit Hanoun (Erez), as well as on the exit to Egypt via the Rafah border crossing. Israel has applied a permit regime controlling movement of all Palestinians in the Gaza Strip and the majority of Palestinians in the West Bank, excepting those with east Jerusalem identity cards and with exemptions for some age groups. Permit requirements affect access for patients, their companions, and health workers.
- 10. In the protracted protection crisis from 1 January to 6 October 2023, there were 233 occupation- and conflict-related fatalities (199 in the West Bank; 34 in the Gaza Strip) and 9379 casualties (9000 in the West Bank; 379 in the Gaza Strip), and WHO had already documented 201 attacks on health care. Of these, 190 attacks were in the West Bank and resulted in seven fatalities and 143 injuries. The health attacks affected 149 ambulances and 17 health facilities. Eleven attacks were in the Gaza Strip, resulting in two injuries. During those attacks, there was one incident where health transport was affected and six incidents where a health facility was affected. In the period from 7 October to 31 December 2023, WHO documented 619 attacks on health care: 315 attacks were in the West Bank and resulted in seven fatalities and 55 injuries; and 304 attacks were in the Gaza Strip leading to 606 fatalities and 764 injuries.

#### Update on the field assessment mission to the occupied Syrian Golan

11. In decision WHA76(13), the Health Assembly requested the Director-General to report, based on field assessments conducted by WHO, on the health conditions of the Syrian population in the occupied

<sup>&</sup>lt;sup>1</sup> United Nations Office for the Coordination of Humanitarian Affairs. Humanitarian Response Plan: Occupied Palestinian Territory, 2023. (https://www.ochaopt.org/sites/default/files/HRP\_2023.pdf, accessed 18 April 2024).

<sup>&</sup>lt;sup>2</sup> United Nations Office for the Coordination of Humanitarian Affairs. The humanitarian impact of 20 years of the Barrier – December 2022. (https://www.ochaopt.org/content/humanitarian-impact-20-years-barrier-december-2022, accessed 18 April 2024).

Syrian Golan, including prisoners and detainees, and ensure their adequate access to mental, physical and environmental health services.

12. Pursuant to that request, the WHO Secretariat continued its preparations and negotiations for a field assessment mission by requesting access and available health data on the Syrian population in the occupied Syrian Golan from Israeli and Syrian authorities. The objectives of the field assessment are to assess the health status of the population across the life course and their health risk behaviours, with attention to the disaggregated data by sex, age, locality, etc., as well as to assess the effective coverage of the full continuum of health services. As reported earlier, disaggregated health data on the Syrian population in the occupied Syrian Golan could not be identified in order to map available health services and their coverage within the initiated desk review. In the year 2023, a fact-finding mission by a multidisciplinary team of experts to assess the health conditions in the occupied Syrian Golan was not possible due to the unresolved access issue, the lack of approval by the occupying authority, and the interrupted negotiations resulting from the current hostilities in Israel and the occupied Palestinian territory. Therefore, the WHO Secretariat cannot provide a report on the prevailing health conditions in the occupied Syrian Golan at this time.

## RECOMMENDATIONS BY THE DIRECTOR-GENERAL FOR IMPROVING HEALTH CONDITIONS IN THE OCCUPIED PALESTINIAN TERRITORY, INCLUDING EAST JERUSALEM, AND IN THE OCCUPIED SYRIAN GOLAN

- 13. The recommendations below are based on the findings contained in the present report and previous work conducted by the Organization.
  - (a) Avoid duplication of reporting on the health conditions in the occupied Palestinian territory, including east Jerusalem, and therefore refers to the report contained in document A77/12, which contains relevant recommendations in that regard.
  - (b) Ensure conditions to assess the health situation of the Syrian population living in the occupied Syrian Golan and their adequate access to mental, physical and environmental health services, based on the field assessment mission.

#### ACTION BY THE HEALTH ASSEMBLY

- 14. The Health Assembly is invited to note the report in combination with the report contained in document A77/12. It is further invited to provide guidance on the following:
  - What can Member States do with a view to supporting WHO and partners in the delivery of humanitarian assistance for the restoration of all essential health services at all levels of care and ensuring sustained access to essential lifesaving health services within the protected health system?
  - How can the health system of the occupied Palestinian territory, including east Jerusalem, be safeguarded and the required environment for safe and dignified access to health care be established?

<sup>&</sup>lt;sup>1</sup> See document A76/15.

- How can the funding by Member States be ensured and increased to cover immediate health needs, as well as the rehabilitation and rebuilding of the health system in the occupied Palestinian territory, including east Jerusalem?
- How can the WHO field assessment mission to the occupied Syrian Golan be feasible and supported in order to report on the health conditions of the Syrian population living there and to provide them with health-related technical assistance?

= = =