



occupied Palestinian territory (oPt)

Emergency type: Complex

Reporting period: 1-January-2021 to 31-March-2021

HIGHLIGHTS

- During the first quarter of 2021, there were close to 140,000 new confirmed cases of COVID-19 as the pandemic continued to put pressure on the fragile healthcare system.
- Based on the National Deployment and Vaccination Plan, COVID-19 vaccination was rolled out first prioritising frontline health workers.
- Ensuring continued access to essential services such as primary healthcare, sexual and reproductive health, surgical care, nutrition as well as mental health and psychosocial support, remained a priority for partners who managed to reach about 800,000 beneficiaries.
- Patients and companions requiring permits to access health services outside Gaza and West Bank received support, benefitting 43,103 of them.
- Partners managed to train close to 900 health workers across oPt on various health topics.



1.4 M need assistance
1.2 M targeted
100 partners

HEALTH FACILITIES (GAZA)



27 (94%) fully functioning hospitals
2 (6%) partially functioning hospitals
135 (91%) fully functioning primary health care clinics
5 (3%) partially functioning primary health care clinics
9 (6%) not functioning primary health care clinics

MOBILE CLINICS (WEST BANK)



8 mobile medical teams/clinics currently provide primary health care services

COVID-19 UPDATE as of 19 April 2021



311,096 confirmed cases
30,015 active cases
3,315 deaths

AVAILABILITY OF MEDICAL SUPPLIES (GAZA) March 2021



50% of essential medicines, less than one-month supply
33% of essential disposables, less than one-month supply

HEALTH CLUSTER FUNDING STATUS



	Funded	Requested US\$
HRP 2021	13 %	46.4 M

Public Health Risks, Priorities, Needs and Gaps

Communicable diseases



11,453

Home isolated people benefited from medical follow up and isolation kits with adequate messaging

Women	5,159	Elderly	1,357	West Bank	5,263	MDM-Suisse, PMRS, weworld-GVC
Children	935	PwD	198	Gaza	6,190	CARE, PMRS, UHWC, UNRWA

Needs and gaps

- During the first quarter there has been a dramatic surge in COVID-19 cases both in Gaza and West Bank which resulted acute pressure on diagnostic and case management facilities.
- Hospital, intensive care units and ventilator occupancy has been stretched to capacity demanding expansion of facilities to accommodate the increase in influx of patients.
- There has been greater demand for ambulance services as the number of emergency cases and patient transfers, increased.
- Number of infections amongst health workers also increased as the number of COVID-19 cases increased. By end of March 2021 about 5,000 health workers were infected with COVID-19.
- The strike by health workers in the West Bank impacted service provision.
- Community adherence to public health measures continues to be a challenge.
- The roll out of vaccination has been slow and there is hesitancy from the prioritized groups to take vaccines. By the end of March oPt had received 258,440 doses of vaccines and 78,379 people had received their first dose.



Priorities

- Increase COVID-19 laboratory testing capacity by ensuring adequate and consistent availability of supplies.
- Increase hospital and ICU capacity, especially in the West Bank.
- Increase capacity for healthcare facilities and workers to manage cases through procurement of medical equipment, essential drugs and disposables, PPE kits and training, including provision of MHPSS.
- Mobilize for resources to support scale up of the COVID-19 response.
- Engage with the community to ensure adherence to public health measures and create demand for vaccination to support the roll out of the vaccination campaign and reduce vaccine uptake hesitancy.
- Work with the MoH to ensure that vaccines are consistently available and accessible to targeted groups.
- Support continuity in the provision of other essential services such as PHC, NCD, Sexual and Reproductive Health, Maternal and Child Health.



190,440

Suspected/ confirmed cases of COVID-19 benefited from PCR testing

Gaza	190,440	WHO	
Women	49,876	Elderly	11,426
Children	90,250	PwD	9,522



419

Healthcare workers trained on COVID-19 laboratory testing, IPC, and case management

West Bank	84	MDM-Suisse
Gaza	335	UNFPA, UHWC, UNRWA, WHO

Risk communication and community engagement



732,650

People benefited from Risk Communication and Community Engagement activities

Women	255,288	Elderly	6,588	West Bank	12,274	MDM-Suisse, PMRS, PUI, WHO
Children	40,629	PwD	3,282	Gaza	720,376	CARE, GCMHP, HI, MDM-Suisse, PMRS, PUI, RCS4GS, UHWC, WHO



43,600

People received hygiene and prevention kits with adequate messaging

Women	13,554	Elderly	6,409	West Bank	3,560	MDM-Suisse, PMRS
Children	17,991	PwD	3,112	Gaza	40,040	AEI, CARE, GCMHP, MDM-Suisse, PMRS, PUI, RCS4GS, UHWC

- Continue to scale up relevant messaging and guidelines through the current social media platforms, radio and TV spots, printed materials, billboards and signage, SMS and press and broadcast coverage – with regards to advancing knowledge, and changing attitudes and behaviours, especially in relation to COVID-19 vaccine uptake.
- Encourage local committees under the local government units, as well as youth, health unions and associations to take part in this campaign through their own online platforms and information dissemination efforts.
- Continue to generate evidence (one per month) around people's adherence to COVID-19 measures, knowledge, personal normative beliefs, and normative expectations – and to address any lack of adherence to protective and mitigating measures to counter the COVID-19 outbreak.
- Address misinformation as a priority: introduce strategies for managing fears exacerbated by dis-information, especially with recent developments over the safety concerns of particular vaccine brands.
- Support the creation and capacity development of a media alliance across Palestine to address rumours, stigma, and misconception and promote vaccine uptake in general.
- Train social mobilizers and healthcare workers on disseminating accurate information and data
- Work with the MoH and partners to brainstorm ideas and strategies at ground level to encourage vaccine uptake.



An awareness session about COVID-19 prevention in Masafer Yatta - Al Fakheit. Photo: CARE International

Trauma and Emergency Care



539

Patients treated for limb reconstruction

Women	76	Elderly	81	Gaza	539	HI, MAP, PHR, WHO
Children	51	PwD	195			



7,088

Patients benefitted from provision of elective surgery

Women	4,166	Gaza	7,088	PCRF, PHR, UHWC, UNRWA
Children	534			

Needs and gaps

- Elective operations: While the COVID-19 confirmed cases are on the rise with an overall increasing testing positivity rate, it is anticipated that there will be another backlog on elective operations in the Gaza strip.

Priorities

- The top priority remains to ensure that trauma-related cases are not neglected and in parallel further enhance trauma health care in Gaza and West Bank.
- Moreover, health staff are being encouraged to get vaccinated, against COVID-19.

- Finally, it is important to highlight that even during the ongoing COVID-19 pandemic, injury is the largest burden of disease for Gaza MoH Emergency Departments (EDs): From January to end of February 2021, there were 126,973 consultations in the EDs of Gaza's six major hospitals, of which 86.2% were trauma related, minor injuries included.



14,413

People benefiting from the provision of medical supplies (drugs, disposables, equipment, ..)

West Bank	1,380	MDM-Suisse, PMRS
Gaza	13,033	HI, PMRS, PHR, PUI, UHWC, WHO



160

Health staff trained on essential life-saving interventions

West Bank	78	PMRS
Gaza	82	PMRS, PHR, WHO

Disability and rehabilitation



1,252

Patients provided with multidisciplinary rehabilitation services

Women	498	Elderly	138	West Bank	624	PMRS
Children	129	PwD	58	Gaza	628	GCMHP, PMRS, UNRWA, WHO

Needs and gaps

- Several technical missions and training courses remain cancelled.
- There continues to be limited access of people with disabilities/injuries to rehabilitation services.
- Concerns remain for patients with chronic conditions who continue to be de-prioritized in favour of acute cases.
- Shortage of PPE and cleaning materials at the level of rehabilitation centres and clinics to support rehabilitation service providers to sustain the service provision and protect staff.
- Critical shortage of disposables, medical supplies, and assistive devices for people with disabilities including trauma patients. There are delays in the procurement of items that must be purchased from outside Gaza.
- As focus remains on COVID-19, there continues to be lack of funds for rehabilitation projects targeting people with disabilities in need for long term rehabilitation and or aiming for community inclusion.
- Outreach services to target people with disabilities/ injuries who have limited access to centres and living in remote areas remains suspended.

Priorities

- Finalize development of minimum standards for rehabilitation services in COVID-19 and pandemic scenarios.
- Conclude standardization of remote rehabilitation and adopt it as a rehabilitation modality of intervention to access people living in remote areas or having chronic condition.
- Regular update of the mapping surveys for rehabilitation actors to ensure better coordination.
- Activate the referral pathways between MoH facilities, NGOs and community-based rehabilitation programs working in the field to respond to the holistic needs of people with disabilities.
- Support NGOs and rehabilitation centres with PPEs to sustain the rehabilitation services in a safe environment.
- Work with rehabilitation actors to develop their contingency plans.
- Intensify fundraising for rehabilitation projects targeting people with long term disabilities.

Sexual and Reproductive Health



4,146

Women and girls accessed sexual and gender-based violence (SGBV) life-saving services (including CMR)

Women	3,703	PwD	50	West Bank	694	CARE, PMRS, PFPPA
Children	443			Gaza	3,452	CARE, PMRS, PFPPA, RCS4GS, UNFPA, UHWC, UNRWA

**2,126****Women and girls referred to shelters, Mental Health and Psychosocial Support services (MHPSS) and/or legal services**

Women	1,958	Elderly	6	West Bank	78	CARE, PFPPA
Children	168	PwD	32	Gaza	2,048	CARE, MAP, RCS4GS, UNFPA, UHWC, UNRWA

Needs and gaps

- Availability and accessibility of essential sexual and reproductive health services in Gaza, and West Bank given the new flare of COVID-19 cases and the recurrent or expected closure measures.
- Family planning services remain a particular concern, especially for IUD insertion, where there are needs for provision of quality instruments, training for staff and strengthening the supply chain especially between the central and peripheral levels.
- Adherence to the COVID-19 infection in pregnancy guidelines/ protocol by SRH providers in secondary level (Hospitals) when dealing with positive COVID-19 pregnant women, needs more improvement.
- Coordination between different SRH providers needs more improvement the follow up on the ground where this is believed to be core component to strength the complementarity roles.



Identification and referral for child protection and gender-based violence during COVID-19 training for health workers Photo: MDM Suisse

Priorities

- Ensure continuation of essential and life-saving primary healthcare services, including antenatal / postnatal care and family planning services are being provided, particularly within the increasing COVID-19 spread and potential movement restrictions.
- Ensure filling gaps of lifesaving SRH supplies including equipment, drugs and disposables, i.e. Bakri balloons etc.
- Activation of telemedicine, and home visits which have approved their effectiveness and efficiency during the lockdown measures thus will preserve the continuum of essential and lifesaving PHC and SRH services.

Mother-Child Health and Nutrition

**100,575****Children under 5-years-old received quality health and nutritional services**

Boys	51,216	PwD	105	West Bank	12,493	CARE, PMRS, UNRWA
Girls	49,359			Gaza	88,082	AEI, MAP, PMRS, RCS4GS, UNICEF, UNRWA

**155,446****Pregnant and lactating women received quality Sexual and Reproductive Health and nutritional services**

Women	154,723	PwD	78	West Bank	14,410	CARE, PMRS, PFPPA, UNRWA
Children	723			Gaza	141,036	AEI, MAP, PMRS, RCS4GS, UNICEF, UHWC, UNRWA


**270,275****People benefiting from the provision of medical supplies (drugs, disposables, equipment, ..)**

West Bank	14,500	CARE, PMRS
Gaza	255,775	AEI, PMRS, RCS4GS, UNFPA, UNRWA

**167****Healthcare workers trained on neonate interventions, SRH topics and management of Malnutrition**

West Bank	57	PMRS, UNRWA
Gaza	110	AEI, PMRS, UNFPA, WHO

Non-communicable diseases

	186,440		Women	98,400	Elderly	63,033	West Bank	36,574	CARE, PMRS, PHR, UNRWA
			Children	19,155	PwD	4,644	Gaza	149,866	AEI, CARE, PMRS, PCRF, PHR, RCS4GS, UNRWA


Patients with chronic diseases receive treatment and consultations


Needs and gaps

- Lack of the standard treatment protocols for common non-communicable diseases such as Diabetes Mellitus and Hypertension between multiple service providers, remains a problem. According to the MoH Central Drugs Store monthly report, in February 2021, 15 (45%) out of 33 NCDs drug items were in zero-stock.
- Instability in supplies of essential medicines and technologies, screening and diagnosis, and limited access to resources including health workers and other support services critical for the pre-existing management of NCDs remain a main problem that affecting the NCDs services provided by MoH facilities in Gaza Strip.
- Due to limited NCD case management capacity in Gaza, complicated cancer patients are referred to the West Bank, East Jerusalem and further abroad, resulting in high levels of expenditure and with movement restrictions, referral is further complicated.


Priorities

- Strengthen monitoring the access to and continuity of essential health services for noncommunicable diseases to minimize the disruption of essential services due to COVID-19 Community spread.
- Addressing challenges of a sustainable supply of NCD medications and the shortage of specialized human resources.

		177,472	People benefiting from the provision of medical supplies (drugs, disposables, equipment, ..)		
West Bank	8,004	CARE, PHR			
Gaza	169,468	AEI, GCMHP, MDM-Suisse, MAP, PHR, RCS4GS, RCS4GS, WHO			

		146	Healthcare workers providing NCD treatment trained on NCD management		
West Bank	45	PMRS			
Gaza	101	MAP, PMRS			

Mental Health and Psychosocial Support

	16,668		Women	11,462	Elderly	770	West Bank	194	CARE, PMRS
			Children	1,351	PwD	353	Gaza	16,474	GCMHP, MDM-Suisse, MAP, PMRS, PCRF, RCS4GS, UHWC, UNRWA

People received Mental Health and Psychosocial Support services

Needs and gaps

- COVID-19 patients and their families are under stress and stigma and in need of MHPSS support.
- The economic and financial situation caused by the pandemic has increased the level of unemployment, poverty lack of security and this will impact the mental health of people.
- People with pre-existing mental health conditions may experience an increase of stress and anxiety.
- Frontline health workers are experiencing an increase of stress and anxiety
- Integrating MHPSS component in the case management of COVID-19 patients; specifically, with old patients hospitalized with a manifestation of delirium; considering the high prevalence of delirium in COVID-19 old patients and the potential serious consequences on their physical and mental health.
- An increase of GBV and domestic violence during the pandemic has occurred

- Lack of investment in mental health programmes at the national and international levels.
- Strengthen the MHPSS multisectoral services for children in MoH and Ministry of Education (MoE) and Ministry of Social Development (MoSD) and referral
- Continuity of essential health services including mental health services at primary health care and community mental health centres.

Priorities

- Set minimum standards for tele-MHPSS services during the pandemic
- Evaluate the interventions that were part of the action plan for MHPSS COVID-19 response in 2020.
- Initiate the revision of the national Mental Health Strategy
- Integrate mental health into Health facilities (general hospitals, Emergency departments and PHC)
- Recruit mental health professionals to work at the community mental health services.
- Provide MH services for adolescence with risky behaviours (substance abuse, self-harm, attempting suicide)
- Work with MoH to revise the national mental health policy and set new priorities
- Strengthen school mental health programmes
- Continue the development of community mental health services and to provide specialized psychosocial support
- Provide specialized MH care for survivors of violence by integrating GBV component in mhGAP program

Mobile Clinics



59,767

People received treatment and consultations through mobile clinics

Women	28,809	Elderly	6,138	West Bank	48,687	CARE, PMRS, PHR, UNFPA, UNRWA
Children	15,783	PwD	1,334	Gaza	11,080	PMRS, PCRF, PHR, UHWC

Needs and gaps

- There is a high demand on the mobile clinic services due to the recurrent lockdown measures in the West Bank, however these additional needs were not anticipated during the planning for the services.
- There are some vulnerable locations not covered by mobile clinics services, these locations are classified as marginalized and vulnerable communities in the HNO/HRP 2021.
- 5% of the total beneficiaries are persons with disabilities who are in need for special medications and assistive devices.



Mobile clinic providing services to beneficiaries in Gaza. Photo: UHWC

Priorities

- Mapping of mobile clinic service locations to identify gaps in coverage.
- Work with MoH in provision of COVID-19 vaccine to targeted communities
- Improve quality of services and referral system for persons with disabilities and GBV survivors.

Attacks on health care



11

Attacks on healthcare

West Bank	7
Gaza	4

WHO recorded 11 attacks against health care in the West Bank and Gaza Strip in the Surveillance System for Attacks on Health Care (SSA) from January to March 2021. Of these, seven attacks were in the West Bank and three in the Gaza Strip. Three incidents involved the prevention or delay of access for patients or medical teams. Three incidents involved physical attacks against patients, health staff, ambulances, or health facilities; three incidents involved arrest and/or detention of a patient, companion, or paramedic, while two incidents involved the incursion or raiding of health facilities or premises.

Health Access



20,571

Permit applications for patients

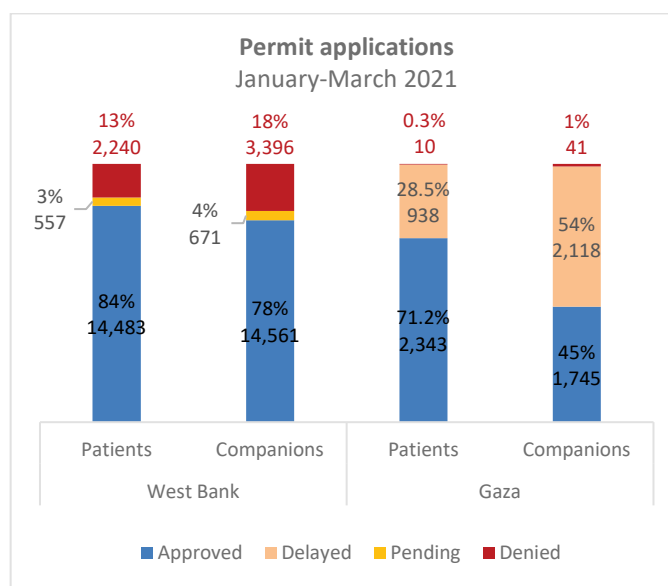
West Bank	17,280
Gaza	3,291



22,532

Permit applications for companions

West Bank	18,628
Gaza	3,904



Read more in WHO's monthly Health Access reports: <http://www.emro.who.int/pse/publications-who/monthly-referral-reports.html>

Assessments

Rapid Gender Assessment, CARE International, West Bank and Gaza Strip

This RGA report is a part of efforts to ensure a more systematic gender analysis is accessible, and utilized, throughout the 2021. Drawing on Rapid Gender Analysis Report of the 2020, this report aims of helping main actors of humanitarian sector had better integrate gender analysis into the planning process. To do this, the document specifically focuses on:

- Assessing the impacts of COVID-19 in terms of Women Leadership, Participation and Voice, Women's Economic Empowerment; Access to and Control over Financial Resources, Access to Basic Services, protection, Risk Communication and Awareness, and priority needs.
- Identifying specific recommendations to the humanitarian organizations, for consideration in the 2021 humanitarian programme cycle.

This report aims to provide additional gendered information and recommendations needed to achieve gender integration into the humanitarian and community development programs for the oPt. The information presented here is therefore intended to complement existing gender data, analysis, and actions presented in the 2020 by CARE Palestine (West Bank\Gaza), not to repeat or replace it.

Five Hospitals Emergency Department Mass Casualty Management Preparedness: Rapid Assessment Report, World Health Organization, Gaza Strip

WHO conducted an assessment for the emergency departments within the main five governmental hospitals that aimed to determine the MCM preparedness baseline of these EDs and to identify the MoH needs in order to provide support according this assessment.

Assessment of Suicide Risk and preventive Factors among Youth and adolescents in Palestine, Médecins du Monde – Switzerland, Gaza Strip

The assessment aims to assess the risk factors of suicide and developing an understanding of current care provided to attempted suicide patients in four to five hospitals in the Gaza Strip to identify areas for improvement.

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