

Monthly EHA Update

Country: occupied Palestinian territory

Date: 1-31 March 2007

1 General Situation

Dr. Radwan Al Akhras is the new Minister of Health of the recently sworn in Government of National Unity. He is a member of the Legislative Council and former Director of the Private Sector Licensing at the Ministry of Health.

The Quartet agreed that the commitment of the new government in this regard will be measured not only on the basis of its composition and platform, but also its actions. The Quartet endorsed the continuation of the Temporary International Mechanism (TIM) for a three-month period while it evaluates the situation and the international community works to develop a more sustainable international mechanism for support to the Palestinians. (21/03)

The security situation in Gaza is becoming more risky for all operations especially after the unprecedented attack on the UN convoy in Gaza. After the recent hi-jacking of a UN vehicle it was decided that there will be no increase in the number of International Staff coming to Gaza as there are no security conditions and police resources to protect UN staff. The main thrust over the next few days will be to implement a security strategy with the PA Police / PA Government.. UNDSS informed that UN agencies without hardened vehicles will be unable to operate in Gaza for the foreseeable future and agencies without hardened vehicles MUST take this into consideration as a prerequisite to operate in the Gaza strip.

The humanitarian situation in the occupied Palestinian territory continues to worsen, the Israeli military operations continue, settlement activity continue, rocket attacks continue at Israel and severe movement restrictions erode prospects for socio-economic recovery on the Palestinian side. Health (Main events, interests and concerns for health)

On 27 March 2007, at about 8.30 AM, the new pool of sewage burst its banks near a Bedouin village with 700 families (5,000 inhabitants). The sewage destroyed the walls and flooded a residential area. The flood resulted in 5 deaths and 24 injuries. As a result, the Ministry of Health (MoH) announced the emergency state in Gaza Strip. Four primary health care (PHC) clinics that are located in close proximity to the affected area are currently operating 24 hours. Two MoH medical points have been put in place and referral of patients will be made to three hospitals available in the area. Many UN organizations responded to the event. UNRWA has set up a camp for the affected population. The number of installed tents is 301 providing shelter for 217 families. The Union of Palestinian Medical Relief Committees (PMRS) has made one mobile clinic available in the area that is supported by Médecins du Monde (MDM) and Médecins Sans Frontières (MSF) in terms of drugs and health personnel. A majority of the organizations distributed food items, non food items, hygiene kits and drinking water. WHO is providing technical support to the MoH in identifying epidemic prone and vector

prone diseases that will be monitored as part of their surveillance for early detection and response in case of an outbreak. As part of health promotion activities, WHO is assuring that standard and easy to understand messages are conveyed to the affected population by coordinating between the MoH and PMRS who will be responsible for conducting the educational sessions. WHO will also conduct a meeting for all the medical providers in the affected area to guarantee good coordination among the different bodies in the administration of the surveillance system and the health education messages.

The governmental health sector staff in the West Bank continued their strike. WHO, UNICEF and UNFPA issued a press release to express their serious concern about the deterioration in access to medical services in the Occupied Palestinian Territory as a result of the ongoing strike of governmental health care workers since Feb 17th. In their release, the UN agencies reiterated their concern that the withdrawal of vital medical services will further exacerbate the already difficult humanitarian situation affecting Palestinian lives and their right access of health services. The UN agencies also called on the parties concerned to reach an agreement guaranteeing essential medical care in accordance with international ethical standards and the international community to support the Palestinian public health sector in this critical case. (28/3)

2 WHO Actions/Activities

WHO Head of Office had a meeting with the new Minister of Health Dr. Radwan Al Akhras in Ramallah. Participants included: Dr. Anan Masri (Deputy Minister of Health), Dr. Jihad Badawi (Director General of Inspection), Mr. Mahamad Oudeh (Director of Ministers' office) and Dr Abu Mogli (WHO National health Officer for West Bank). In the meeting, WHO Head of Office briefly presented WHO's activities in the oPt. The Minister appreciated WHO's support, highlighted the importance for MoH and Palestinian people to continue the strong collaboration with WHO and pointed out the need to further strengthen the Palestinian health system, particularly the secondary and tertiary care. (29/03)

2.1 Communicable Disease Control

After the incident of *Klebsiella* infection in an Israeli hospital and one reported case in Asheva hospital in Gaza, WHO provided the MoH with guidelines on 'Controlling hospitals associated infections including *Klebsiella*'. (14/03)

WHO monitored the status of *Klebsiella* in oPt hospitals. According to MoH, the cases are within the normal monthly range and the situation is well managed. There have been five reported cases in NGO hospitals in Hebron and Bethlehem. MoH distributed the protocols for hospitals associated diseases to all hospitals in the districts.

WHO along with MoH have distributed line listing and case definitions for epidemic prone and vector borne diseases in the wake of the flooding that occurred in Gaza. This increased surveillance will greatly help with early detection and a rapid response in case of an outbreak.

2.2 Monitoring activities: Primary health care/secondary health care (hospitals)

WHO monitored the strike announced by the health syndicates which escalated on 26 February 2007. The statement issued by the syndicates reports restricting immunization coverage to one day per week. Access of chronic patients to PHC clinics will be restricted to Sunday of every week. Only emergency deliveries will be accepted. WHO will continue its

efforts to monitor the situation and study the effects of the strike on the health status of the Palestinian community.

WHO contacted the PHC directors in the West Bank and conducted two field visits to Beit Jala and Hebron Public Hospitals. It was observed that vaccination coverage is now restricted to one day every two weeks, chronic patients can access PHC only once every two weeks. Therefore, follow up on chronic patients is limited. Outpatient clinics remain closed and only emergency cases and urgent deliveries are being admitted to the hospitals. ICU, dialysis, Thalassemia, and oncology services continue as usual. (3/03)

Since the 21st of March, there has been a sharp escalation in the strike. As a result, vaccination and dispensing of drugs to chronic patients was reduced to bi-weekly services, the entire PHC services are closed, the headquarters of MoH in Ramallah and Nablus were requested by the syndicates to close along with the Central Public Health Laboratory in Ramallah. For hospitals only life saving cases were being accepted.

WHO held the monthly donor coordination meeting. WHO presented the main findings of the monitoring report from the last month and updates on the strike. There was also a presentation from East Jerusalem Hospitals highlighting the effects of the separation barrier on access to healthcare and on the topic of restrictions to sell pharmaceuticals produced in the West Bank in Jerusalem. (15/03)

2.3 Mental health

WHO mental health and information unit teams met with the director of the Information Unit of the MoH. The purpose of the meeting was to agree on the sample size and methodology in order to conduct a mental health survey in the West Bank and Gaza. The objective of the survey is to study the characteristics of mental health illnesses of the patients accessing health facilities in the government/public sector. By the end of the meeting it was agreed that the information unit in MoH should provide a clear written methodology and sample size calculation. A sample size of 753 was agreed to be sufficient to cover the limited objective of the study. (7/03)

The mental health team worked on the preparation of a 3 day workshop that will take place during the period (11-14/03) in Amman for the Coordination of Mental Health and Psychosocial Activities in oPt. Preparatory meetings were conducted with the Ministry of Health

The Mental Health team organized and participated in a three-day workshop in Amman for the coordination of mental health and psychosocial activities in oPt. 20 persons participated from WHO West Bank and Gaza, HQ, EMRO, UNRWA and the MoH. The resulting action points of the workshop were: the national mental health committee should start meeting on a monthly basis; a mental health directorate should be established; the task force should be formulated; available resources should be mapped for GIS; review the existing instructions, regulations, and legislation; modalities of implementation of the agreed upon recommendation; and to prepare a plan to strengthen the national capacity to ensure sustainability. (11-14/03)

WHO sponsored the execution of a one week mental health mission that is related to “Family Group Associations”. The mission was funded by ECHO and aimed at facilitating the exchange of experiences between different family groups and to promote networking and social interactions in the context of a study tour. Team members included three WHO staff members, one staff member from the psychiatric hospital and another from the mental health community center in Gaza, one staff member from the psychiatric hospital in Bethlehem and

another staff member from the mental health community center in Hebron. In addition, three staff members from the Family Association Groups participated. (30/3)

2.4 Pharmaceuticals

A teleconference was organized with EMRO and HQ to follow-up on the implementation of the pharmaceutical project financed by ECHO. Procurement of emergency items is under way, the laboratory items have already been shipped and are in the clearing process. The bidding process started for the consumables and lab reagents of the master list. (08/03)

The pharmaceutical team, although not complete, started work in the Gaza strip and the West Bank. Three working subteams were formed in order to start activities on capacity building; procurement/supply and visibility, including donor relations. A first assessment of the storage facilities in Gaza and the West Bank was done and needs were quantified.

WHO finalized the implementation of the activities related to the emergency fund provided by the Central Emergency and Relief Fund (CERF). CERF aims at restoring the emergency drug stores in North Gaza district. The amount of the fund was \$1.5 million and was dedicated to compensate for the shortage in 80 drug items from the essential drug list. (28/3)

2.5 Coordination

WHO hosted a meeting with the health sector UN agencies. The purpose of this meeting was to discuss key issues and the health sector's inputs to be included in the February edition of OCHA's monthly Humanitarian Monitor. UNFPA, UNRWA and OCHA agreed to integrate their efforts with WHO in order to produce a coherent and summarized analysis of the health sector inputs. (1/03)

WHO participated in the protection sector meeting in preparation of February's Humanitarian Monitor (HM). It was agreed that the protection focus of the upcoming HM will highlight internal displacement (from house demolitions, Gaza, closed military areas, the barrier etc.) and accountability, specially considering Prof. Dugard's recommendation to seek an advisory opinion of the International Court of Justice on the occupation with colonialism and apartheid elements; and Israel's report to the Commission on the Eradication of Racial Discrimination (CERD) and the concluding observations. (1/03)

WHO organized a UN Health coordination meeting where the following points were discussed: the new political setting and general situation in the health sector's mid to long term initiatives; the health sector review, MoP 2007 Plan, health policy and planning activities; contingency planning; a CAP update of agencies' main activities and synergies in specific fields (e.g. pharmaceuticals, nutrition, mental health, etc.). UNFPA, UNICEF and UNRWA participated. (06/03)

WHO participated in a meeting with different UN agencies in order to discuss the UN contingency plan for Gaza. (6/03)

WHO met with the director of the International Cooperation Department (ICD) in the MoH. The purpose of the meeting was to introduce the new Head of WHO's information unit to the director of the ICD department. In addition, WHO revised the coordination draft with the ICD director. By the end of the meeting, the participants agreed on the agenda and date of the next coordination meeting which will take place on Wednesday the 14th of March. (7/03)

A meeting was organized with the Ministry of Health, the Palestinian Authority Border Unit and the President's Office in order to agree on a mechanism to assist the movement of patients referred abroad through Rafah border (southern Gaza border crossing) and to have appropriate information on the number of patients crossing the border. Coordination was agreed between the participants. The border has been opened on average five days per month since June 2006 (when the IDF soldier was kidnapped in Gaza). (07/03)

WHO had a meeting with the Italian Cooperation, discussed on health coordination mechanisms, donor harmonization, alignment, and the relationship with the Palestinian Authority. (08/03)

WHO held the second Central Health Coordination Meeting jointly with the MoH in Ramallah, 25 participants from International/national NGO's and organizations working in the West Bank attended the meeting. In the meeting the joint coordination plan for the coming year was presented. (14/03)

WHO, the EC, the World Bank, The MoH and the Italian Cooperation had a finalization meeting on the Health Sector Review, with the publication of a joint document on health policy and planning. (20/03)

WHO participated in the UN agencies mission to the Jordan Valley. The mission was organized by the UN Special Coordinator and the objective was to have a coordinated approach to support the Palestinians living in the Jordan Valley. The visit was done to a specific group of villages which are located in area C (military control of the Israeli Authorities). WHO did an assessment of the available health facilities. (21/03)

WHO met with the Director of PHC for West Bank (MoH) in order to revise the mechanism of communication and information between WHO and MoH in current WHO projects, such as: nutrition, mental health, communicable diseases and food safety. (21/03)

WHO had a meeting with a delegation of the World Bank, led by Akiko Maida (Team Leader for the Middle East and North Africa). The objective of the meeting was to oversee the coordination and collaboration mechanisms, and to set up capacity building on quality, rational use, procurement and drug supply (both for the emergency and master list) the implementation of the pharmaceuticals project. (23/03)

The Humanitarian Office of the EU organized the bi-weekly 'Friday Group' meeting. WHO participated and updated the EU member on the strike and other health developments in oPt. (23/03)

WHO participated in the "First Regional Workshop for WR Offices Information and Library Staff" held in the WHO's Regional Office in Cairo. Participants from Afghanistan, Djibouti, Iran, Iraq, Jordan, Lebanon, Morocco, Oman, Pakistan, occupies Palestinian territory, Saudi Arabia, Somalia, Sudan, Syria, Tunisia and Yemen attended the workshop. The purpose of the workshop was to create knowledge hubs in country offices in order to facilitate and promote knowledge sharing. During the closing session, EMRO provided the participants with a list of action points in which WR offices are expected to implement and a list of recommendations. (18/3-22/3)

WHO held the district health coordination meeting in Qalqilya jointly with the MoH. Twenty two participants attended representing the six health stakeholders in the district. The objective of the meeting was to share information and strengthen coordination and cooperation among different health stakeholders. During the meeting, participants provided updates regarding service provision and challenges facing healthcare service provision in those institutions. Main problems raised included shortages of drugs and the difficulty of medical staff to reach

some villages surrounded by the separation barrier. Hardship was also reported, caused by the Israeli separation barrier that hindered patient mobility to access other clinics outside the wall was considered as another main problem. (28/3)

WHO launched its website (www.emro.who.int/palestine) which is integrated with EMRO's main website. The website includes the following sections: monitoring the health status in oPt, coordination activities for different stakeholders, geographic information system (GIS) health maps and health facilities network, WHO program overviews, reports and publications, Palestinian country profile and the UN initiatives in the region. (28/3)

2.6 Nutrition

WHO's nutrition project sponsored the participation of two MoH senior staff members at a training workshop organized by EMRO for the new WHO Growth Charts. The participants are the West Bank Nutrition Department Director and the West Bank MCH Director. Gaza participants could not attend due to the closure of Rafah border crossing to Egypt. (26/02 to 03/03)

WHO conducted a two-day workshop for MoH nurses in Gaza to train them on anthropometric measurements and nutrition indicators. 25 nurses participated. (4,5/03)

Dr. Kunal Bagchi/ Regional Advisor for Nutrition (EMRO) carried out a five-day visit to support the local WHO nutrition team in the re-launch of the Nutrition National Operational Plan of Action. (19-23/3/07)

A Nutrition Steering Committee meeting took place at the Palestinian Central Public Health Laboratories with the main objective of revitalizing the Nutrition National Operational Plan of Action. During the meeting, updates from the MoH and nutrition stakeholders' activities were presented. The meeting ended with consensus on the need to revise and update the operational plan; and to form a small technical committee on nutrition that will carry on the recommendations of the steering committee. (21/3/07)

2.7 Advocacy for 'health as a human right and as a bridge for peace'

On the occasion of the International Women's Day, the Ministry of Health is organizing in Gaza a seminar on Violence Against Women funded by UNFPA. WHO provided materials to be disseminated among participants, namely the *WHO Multi-Country Study On Women's Health And Domestic Violence Against Women*. (11/03)

WHO met with Dr. Rita Giacaman from Birzeit University to explore possible initiatives on the deterioration of the quality of life of Palestinians, especially considering that Birzeit University was part of the team working on the Quality Of Life Survey launched in the first trimester of 2006. (21/03)

WHO's 2006 emergency activities are funded by the Organization's Regular Budget and contributions from ECHO, Finland, Japan and Norway as well as the CERF. For 2007, support has been pledged from Norway and Italy.