

occupied Palestinian territory



Health Sector Needs Assessment

Political, geographical and institutional fragmentation during 2007 has led to a further deterioration of security in the West Bank and Gaza Strip. Access to health services in the occupied Palestinian territory is increasingly affected by restrictions on the movement of people and goods. Few residents are permitted to exit Gaza, even in the case of medical emergencies. Only limited commercial and humanitarian supplies can enter. Dependency on the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA), WFP and other UN agencies now stands at 80% and will increase as border restrictions are intensified.

Border closures, strikes and deteriorating economic conditions are impeding the Ministry of Health's effectiveness to respond to pressing health needs. All hospitals have reduced services, most frequently due to a lack of medical supplies, spare parts and adequate maintenance of medical equipment because of the Palestinian Authority's financial crisis. With healthcare quality deteriorating and mental health symptoms on the rise, the main issues identified are:

1. Access to medical care, in particular pre-natal medical care, is compromised.
2. The reduction of services affects diagnostic services and vital specialized treatment, such as kidney dialysis.
3. Shortages of essential drugs and other medical supplies are recurrent, mainly in Gaza.
4. Border closures and restrictions impede the referral of patients in need of secondary and tertiary health services unavailable in the Gaza Strip – close to 6000 people were referred for treatment in Egypt and Jordan as well as in the West Bank, East Jerusalem and Israel between January and September 2007.
5. According to surveys, 86% of the population report sleeping problems, 77% deteriorating family relations, 72% increased tension among children,¹ and 55% feel insecure.² Almost half seriously fear losing their home, losing their land (46.1%) and being displaced or uprooted (44.5%).³
6. Micronutrient deficiencies are the main nutritional problems: according to UNRWA, iron deficiency anaemia affects 57.5% of children under three in the Gaza Strip and 37.1% in the West Bank, and 44.9% of pregnant women in the Gaza Strip and 31.1% in the West Bank.
7. The procurement and funding of drugs for 2008 are not secured.

Health Sector Priorities for 2008

The Ministry of Health's facilities provide more than 60% of health services and most public health programmes. The weaknesses of the Ministry of Health, around which all other health actors revolve, threatens the entire Palestinian health system. Maintaining its integrity and functionality, by assisting the Ministry of Health to ensure access to health care for all and by coordinating partners' support, is therefore a priority.

Specific attention should be given to children and women in reproductive age since the current socio-economic pressure is likely to add to an increased level of anaemia and micronutrient deficiencies and to more underweight children. The elderly and the chronically sick often depend on regular and critical medication and access to specialized care. Bedouin communities are also especially vulnerable as they face severe threats in sustaining their livelihood and accessing basic health care.

To alleviate the suffering of the Palestinian population and to maintain the integrity and functionality of the public health system, the following are the priorities for 2008:

- Ensure the availability of skilled health personnel and community health providers at all levels;⁴
- Ensure the availability of essential and supplementary drugs, medical and laboratory supplies and of non-medical items as well as the availability and maintenance of standard medical equipment;
- Support referral to health care facilities in East Jerusalem and neighbouring countries, if required;
- Improve coordination both with the Ministry of Health and with other sectors.

WHO Projects for the CAP 2008

WHO projects are complementary to those planned by other UN agencies and non-governmental organizations. All WHO planned actions aim at supporting the Ministry of Health and other health partners.

Project titles	Requested funds *	Implementing partners
Strengthening emergency coordination for health oPt-08/CSS07	281 540	MoH, local and international NGOs, UN agencies
Advocacy for health as a human right oPt-08/P/HR/RL08	139 100	

Project titles	Requested funds *	Implementing partners
Strengthening the Ministry of Health pharmaceuticals storage capacity in Gaza oPt-08/H11	3 100 000	MoH
Building the capacity of the Ministry of Health in health emergency response and preparedness at the district and central levels oPt-08/H15	878 416	
Nutrition surveillance system oPt-08/H16	225 984	
Monitoring Health Trends in Emergency oPt-08/H14C	214 000	
Procurement of pharmaceutical products to the Ministry of Health and support to the Ministry of Health pharmaceutical management oPt-08/H17	9 300 000	MoH, UNRWA
Strengthening the community mental health services in Gaza oPt-08/H22	485 000	MoH
Control of non communicable and chronic diseases in emergency oPt-08/H25	1 444 500	

* Amounts given in US dollars.

Total funds requested: US\$ 16 068 540

Notes

1. Save the Children UK, *Assessment of the psychosocial well-being of the population*, 2007.
2. Unpublished data from IUED, *Palestinian Public Perceptions Survey*, No. 11, May 2007.
3. WHO, Community and Public Health Institute of Birzeit University and Palestinian Central Bureau of Statistics, *Quality of Life Survey in the West Bank and Gaza*, 2006.
4. The strike of health workers related to non-payment of salaries, their replacement by volunteers in Gaza and the removal of directors and decision-makers in the Ministry of Health management system are factors that contribute to the deterioration of access to health care, but within the framework of the CAP, can only be mitigated through advocacy.