As of the 23rd July 15:00, the latest figures provided by the Ministry of Health (MoH) indicate that 7 Palestinians were killed and 351 were injured by Israeli forces from 17th to the 23rd July.

Out of the 7 killed, 3 were killed during the demonstrations and 4 from Israeli airstrikes.

Out of the 351 injured, 178 required transfer to the MoH hospitals or to NGO clinics including 40 children, and 14 females. From the hospitalized injuries, 3 cases were critically life-threatening, 59 moderate, 111 mild, and the remaining 5 were unspecified cases.

An additional 173 injuries were managed and discharged at the 10 trauma stabilization points (TSP) and primary healthcare centers. These TSPs are led by the MoH, and supported by the Palestinian Red Crescent Society (PRCS), and the Union Health Workers Committee (UHWC).

One IDF soldier was killed by sniper fire from Gaza, the first such fatality since the 2014 hostilities.

**Type of casualties treated at the Ministry of Health and NGO hospitals**

<table>
<thead>
<tr>
<th>TYPE OF CASUALTIES TOTAL (178)</th>
<th>Gun shots</th>
<th>Rubber bullets</th>
<th>Gas inhalation</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>58</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>106</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Casualties disaggregated by injury, gender and age at MoH and NGO hospitals (cases: 178)**

<table>
<thead>
<tr>
<th>By gender</th>
<th>By affected body part</th>
<th>By age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>164</td>
<td>23</td>
</tr>
<tr>
<td>Female</td>
<td>14</td>
<td></td>
</tr>
</tbody>
</table>

2. Source: Special Coordinator for the Middle East Peace Process, Briefing to the Security Council on the situation in the Middle East, 24th July 2018.
3. Source: Palestinian Ministry of Health. *Other* refers to the fact that the hospital records did not state the type of injury.
4. Source: Palestinian Ministry of Health. *Other* refers to the fact that the hospital records did not state the affected body part.
Caseload of casualties related to the conflict

- **Casualties:** Since the 30th March until the 23rd July, 155 people have been killed\(^5\). 149 were killed by Israeli forces during the demonstrations and 6 from Israeli airstrikes.

- The figure of people injured amidst the conflict since the 30th March stands at 16,847. From this total, 7,974 were treated and immediately discharged from the TSPs and the remaining 8,873 were transferred to a hospital.

- **Hospitalization:** Out of the total 8,873 injuries that required hospitalization:
  - 48% were live ammunition gunshot injuries, at a total of 4,248 cases.
  - 1,450 were children (16%), 596 (7%) were female and 8,277 (93%) were male.
  - 394 (4%) cases were critical, 4,051 (46%) were moderate, 4,261 (48%) were mild and 167 cases were unspecified.

### Hospitalized injuries by severity

<table>
<thead>
<tr>
<th>Severity</th>
<th>Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Severe</td>
<td>394</td>
</tr>
<tr>
<td>Moderate...</td>
<td></td>
</tr>
<tr>
<td>Mild</td>
<td>4,261</td>
</tr>
<tr>
<td>Unspecified...</td>
<td></td>
</tr>
</tbody>
</table>

- **Incidence of limb injuries:**
  - A total of 5,551 limb injuries have been hospitalized. This represents the highest type of injury at 63% of the total hospitalized injuries.
  - Approximately 1,200 cases of injured people will be in need of limb reconstruction, and will require up to 7 surgeries and extensive rehabilitation and treatment for up to 2 years\(^6\).

- **Amputations:** Since the 30th March until the 23rd July, the total number of amputations was 69, including 14 children and 1 female. Out of this total, 61 were lower limb amputations and 8 were upper limb amputations\(^7\).

- **Paralysis:** Since the 30th March until the 23rd July, the total number of patients with paralysis due to spinal cord injury was 10, two of which have died, with a remaining 8 cases.

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\(^5\) 148 have been reported by the Palestinian MoH and an additional 7 have been held by the Israeli Authorities reported by OCHA.

\(^6\) According to a recent assessment conducted by MAP-UK, however, further discussions on limb reconstruction are taking place in the Gaza Trauma Working Group.

\(^7\) According to Al Salama Society
Impact on the Health Sector

- Patients are being discharged early to make room for the new wave of expected casualties, each week. **Approximately 600 patients have been discharged early since the 30th March.** These patients are being requested to receive follow-up care at the MSF clinic, PMRS, UNRWA and other primary healthcare centers.
- Since the 30th March, according to the MoH over **7,000 elective surgeries** have been postponed due to the influx of trauma casualties, bed capacity and the lack of remaining fuel for electricity.
- According to Gaza’s Central Drug Store Ministry of Health, in June, 250 essential medicines out of the total 516 essential medicines list (48%) were at less than one month’s supply and 206 essential medicines (40%) were completely depleted at the MoH store in Gaza. In addition, 247 essential disposables out of the total 853 essential disposables list (29%) were at less than one month’s supply.
- The **UN-funded fuel programme is severely depleting.** In order to rationalise the remaining 420,000 litres, only 32 health facilities, from the initial 58 health facilities, are now supported through the UN fuel programme. The remaining fuel will be completely depleted by the end of August. Any disruption in the power supply, will be immediately life-threatening for over 2,000 patients relying on electrical devices, including neonates in incubators, and over 1.27 million people will be directly affected by the closure of the hospitals, in addition there will be an increased risk of waterborne disease and outbreaks across the Gaza strip.

Impact of Kerem Shalom Closure

- On 9th July, Israeli authorities announced the closure of Kerem Shalom crossing, prohibiting the entry of all goods except medical and food supplies. The new restrictions also prevented the import of fuel needed to operate the health facilities. On 22nd July, Al Quds Hospital, which provides life-saving medical interventions for 150,000 people per year, including major surgeries, deliveries and intensive care, was forced to shut some of their services, including operation rooms. Later, some fuel was secured from the private sector to resume its services.
- On the 24th July, fuel for the health sector was allowed to enter from Karem Shalom.

Attacks against health*

- According to the Ministry of Health, PMRS, UHWC and PRCS, for the period of 17th – 23rd July, 2 health workers were injured, one was hit directly by tear gas canisters and one was injured by tear gas inhalation.
- 1 ambulance was partially damaged after being hit by a gas canister.
- **Cumulative figures on attacks against health since the 30th March:**
  - Up until the 23rd July, two health workers were killed, 362 were injured and 58 vehicles used for health transport were

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*Disclaimer: initial analysis based on preliminary aggregate and disaggregated data provided by the Palestinian Ministry of Health (MoH), the Palestinian Civil Defense medical teams, Palestinian military medical services, the Palestinian Red Crescent Society (PRCS), the Palestinian Medical Relief Society (PMRS) and the Union of Health Work Committees (UHWC).*
damaged (including 10 damaged during an Israeli air strike on 14th July). One specialized healthcare center for people with disability and the MoH central ambulance station sustained collateral damage following an Israeli air strike on 14th July.

- Of the health workers affected, 27 were injured by live ammunition, including the two health workers who were killed; 41 were hit directly with tear gas canisters; and 12 were hit with shrapnel.

### Emergency Response

#### Provision of medical supplies:

- Medical Aid for Palestinians (MAP-UK) released 2 disposable items and 5 drug items to the Ministry of Health (MoH) worth of 46,655 USD, and prepositioned 2 disposable items and 5 drugs items worth of 59,255 USD. MAP-UK will also procure two refrigerators and one deep freezer for the MoH blood bank.
- The Central blood bank society (CBBS) has collected 153 blood units and distributed 60 units, since the start of demonstrations.
- United Nations Children’s Fund (UNICEF) has delivered 83 pallets of essential drugs to MoH Central Drug Store. The delivered items were funded by the CERF and are enough for 67,700 patients.
- United Nations Population Fund (UNFPA) has delivered 2 disposable items for the MoH maternity departments.
- Palestine Children's Relief Fund (PCRF) has delivered anti-cancer drugs to the cancer department in Rantisi paediatric hospital. The delivered quantity will be enough to cover the needs for 2 months.

#### Trauma Management & Emergency Medical Teams (EMTs):

- PCRF deployed a surgeon to the European Gaza Hospital to provide complex spinal surgery and train local doctors. PCRF also deployed an emergency physician to provide first aid training to medical students at Al-Azhar University.
- Health Matters/IMC partners provided immediate care to a total of 60 injured cases at the TSPs; out of the 60 cases, 31 received wound care at the TSPs and 29 were transferred to hospitals. Health Matters/IMC partner hospital provided post-operative wound care for 67 patients and performed one orthopedic surgery.
- Humanity and Inclusion (HI), in partnership with local organizations, have deployed 10 multidisciplinary teams in all the five governorates of Gaza. So far, HI has provided nursing and rehabilitation services to 778 persons with injuries who have received a cumulative total of 6,991 multidisciplinary sessions. HI has also distributed a total of 118 assistive devices, including wheel chairs, elbow and axillary crutches, and anti-bedsore mattresses.
- Doctors Worldwide – Turkey Palestine provided 300 cases with 761 multi-disciplinary rehabilitation sessions in addition to drugs and assistive devices.
- Islamic Relief (IR) delivered 8 drug items and 12 disposable items to the Ministry of Health. These items meet urgent needs at emergency departments, ICUs and operation theatres for Al-Shifa, Indonesian, Al-Aqsa, Gaza European, Nasser and Najjar hospitals.
- The Union of Health Work Committees (UHWC) teams provided first aid and health services to 10 gunshot injuries at their medical point in Rafah and the mid-zone. In addition, Al Awda Hospital, with funding from Muslim Aid, was able to provide emergency services for 3 cases (1 gas inhalation and 2 shrapnel injuries) at the emergency department.
- PRCS teams provided first aid services to 142 casualties including 45 live ammunition cases; 49 tear gas cases, 44 tear gas canister wounds and 4 were killed. 34 cases were hospitalized at Al Quds and Al Amal Hospital.
PRCS’ Psychosocial Support Team provided Psychological First Aid (PFA) to more than 25 persons in the Gaza Strip. PRCS activated The National Disaster Response Team (NDRT), 65 staff and volunteers were deployed in the field, the team assisted 57 casualties.

- Public Aid Hospital ambulances has transferred and provided first aid services to 5 injured patients, during the recent demonstration.
- United Nations Relief and Works Agency (UNRWA) provided 113 post-operative consultations offering treatment and wound dressing, including care for 98 gunshot injuries and 26 severe cases. Since the 30th March, UNRWA has provided a total of 3,363 postoperative consultations at their 22 primary healthcare clinics.
- PMRS provided first aid to 73 individuals. Since the start of demonstrations, PMRS has provided first aid to a total of 3,050 victims. However, due to the lack of funding, PMRS’ two post-operative and physiotherapy outreach teams in Rafah and Middle Zone have closed; the remaining three teams for Gaza, North and Khan Younis have continued their services. This week, PMRS has provided post-operative care to 16 new cases, raising the total of beneficiaries to 603, out of which, 151 have received assistive devices.

**Coordination and Information:**

- On the 18th July, a Health Cluster meeting, chaired by WHO as the lead agency, took place in Gaza.
- On the 17th July, the Humanitarian Coordinator met with Health Cluster partners in the Gaza Strip to discuss the needs and the challenges in delivering the emergency response. It was agreed that the funding need will be reviewed and updated.
- WHO has supported the Humanitarian Coordinator in his advocacy efforts articulated in the HC’s Statement of 22 July to highlight the impact of fuel shortages on the health situation of affected population in Gaza.
- The Trauma Working Group (TWG) under the Health Cluster is working with MAP-UK to identify gaps in limb reconstruction services, working closely with the local limb reconstruction unit in the MoH.
- The Health Cluster is strengthening its logistics capacity to support partners deliver the emergency response. Partners facing any challenges have been requested to make contact with the Cluster team.

### INFORMATION TOOLS AVAILABLE ON THE HEALTH CLUSTER WEBSITE

HTTP://HEALTHCLUSTEROPT.ORG

| Health Cluster HeRAMS dashboard | **MoH Hospitals:** [http://healthclusteropt.org/pages/9/herams-hospitals](http://healthclusteropt.org/pages/9/herams-hospitals)  
**MoH PHCs:** [http://healthclusteropt.org/pages/10/herams-phcs](http://healthclusteropt.org/pages/10/herams-phcs)  
**UNRWA PHCs:** [http://healthclusteropt.org/pages/15/unrwa-phcs-dashboard](http://healthclusteropt.org/pages/15/unrwa-phcs-dashboard) |
| EMTs calendar | [http://healthclusteropt.org/pages/12/emt-calender](http://healthclusteropt.org/pages/12/emt-calender) |
| Procurement activities conducted by partners | [http://healthclusteropt.org/pages/13/procurement-activities](http://healthclusteropt.org/pages/13/procurement-activities) |
Funding needs

- WHO and the Health Cluster partners are reviewing their critical funding needs for the emergency response alongside other sectors as the situation continues to change and needs of the affected population continue to increase. However, funding is still needed for the following priority areas:
  - Deployment and coordination of quality-assured emergency medical teams (EMTs) for trauma surgery, emergency non-trauma surgery, and elective surgery.
  - Enhancing outreach post-operative teams for complex wound management.
  - Expanding multi-disciplinary outreach teams, with a focus on physiotherapy and MHPSS.
  - Strengthening pre-hospital care by upgrading the TSPs.
  - Improving patient information and tracking from point of injury to rehabilitation.
  - Providing essential medical supplies for the treatment of trauma patients, emergency patients and non-communicable disease patients.
  - Strengthening the reporting and monitoring of attacks on healthcare.

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