



Highlights

- The latest figures provided by the Ministry of Health (MoH) indicate that 7 Palestinians were **killed** (including two children) and 412 were **injured** by Israeli forces from 24th to the 30th July.
- 4 people were killed (two children) and 405 people were injured from the mass demonstration. An additional 3 were killed and 7 were injured as a result of Israeli artillery.
- Out of the total 412 injuries, 198 required transfer to the MoH hospitals or to NGO clinics including 37 children, and 11 females. From the hospitalized injuries, 10 cases were critically life-threatening, 90 moderate, 93 mild, and the remaining 5 were unspecified cases¹. For the types of casualties and casualties by body part, and by age, refer to Figures 1 and 2 on the following page.



Photo: patient is being stabilised at the Trauma Stabilisation Point (TSP) in

- An additional 214 injuries were managed and discharged at the 10 trauma stabilization points (TSP) and primary healthcare centers. These TSPs are led by the MoH, and primarily supported by the Palestinian Red Crescent Society (PRCS). WHO is supporting the upgrade of the TSPs across Gaza.
- Gaza's 14 public hospitals rely on **UN donated fuel** to run generators during the electricity black-outs, which last up to 18-20 hours per day. However, by the 30th August, the UN funded emergency fuel will completely deplete, public hospitals will severely reduce; and intensive care units, operating theatres and other critical units may face life-threatening interruptions. This 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.
- In July, a total of 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.

¹ Source: Ministry of Health

Figure 1: Type of casualties treated at the MoH & NGO hospitals from the 24-30th July ²

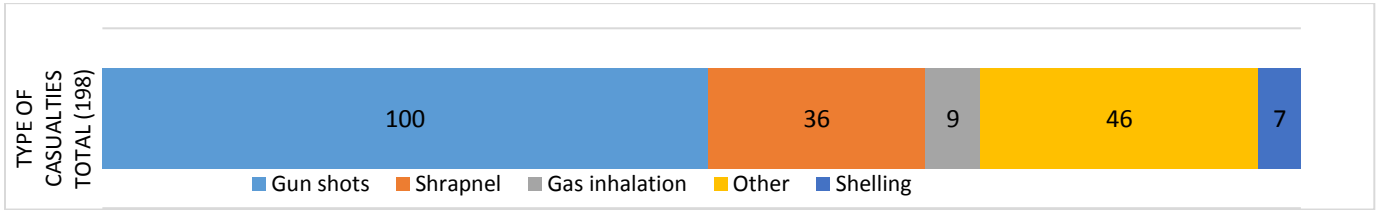


Figure 2: Casualties disaggregated by injury, gender and age at MoH & NGO hospitals from the 24-30th July ³

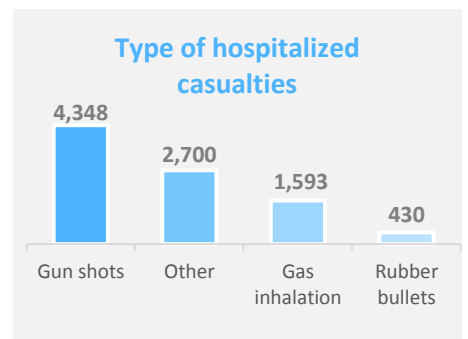
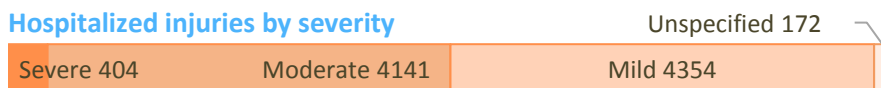
Total	By gender		By affected body part							By age	
	Male	Female	Head & neck	Upper limbs	Lower limbs	Chest & back	Abdomen & pelvis	Multi-injuries	Other	Children	Adults
198	187	11	12	34	109	10	7	9	17	37	161

Caseload of casualties related to the conflict

- Casualties:** Since the 30th March until the 30th July, 162 people have been killed⁴. 153 were killed by Israeli forces during the demonstrations and 9 from Israeli airstrikes.
- The figure of people injured amidst the conflict since the 30th March stands at 17,259. From this total, 8,188 were treated and immediately discharged from the TSPs and the remaining 9,071 were transferred to a hospital.
- Hospitalization:** Out of the total 9,071 injuries that required hospitalization:
 - 48% were live ammunition gunshot injuries, at a total of 4,348 cases.
 - 1,487 were children (16%), 607 (7%) were female and 8,464 (93%) were male.
 - 404 (4%) cases were critical, 4,141 (46%) were moderate, 4,354 (48%) were mild and 172 cases were unspecified.



Hospitalized injuries by severity



Continue to the next page for further information on casualties

² Source : Ministry of Health. 'Other' refers to the fact that the hospital records did not state the type of injury

³ Source : Ministry of Health. 'Other' refers to the fact that the hospital records did not state the affected body part

⁴ 155 have been reported by the MoH and an additional 7 have been held by the Israeli Authorities reported by OCHA.

▪ **Incidence of limb injuries:**

- A total of 5,694 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 years⁵.

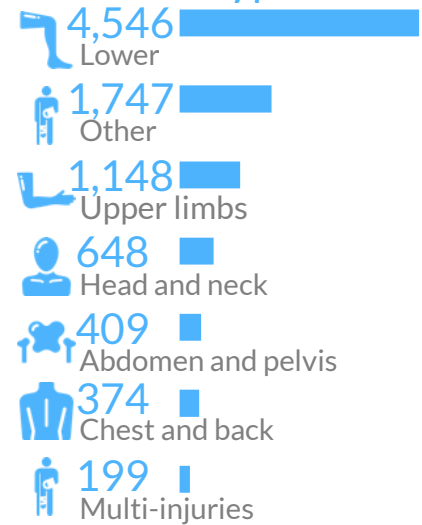
▪ **Amputations:** Since the 30th March until the 30th July, the total number of amputations was 70, including 14 children and 1 female. Out of this total, 62 were lower limb amputations and 8 were upper limb amputations⁶.

▪ **Paralysis:** Since the 30th March until the 30th 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.

▪ **Patients discharged early:** Patients are being discharged early every week to make room for the new wave of expected casualties. Approximately 600 patients have been discharged early since the 30th March. These patients are being requested to receive follow-up care with Health Cluster partners.

▪ **Elective surgeries postponed:** Since the 30th March, according to the MoH approximately 7,000 elective surgeries have been postponed due to the influx of trauma casualties, lack of bed capacity and the limited availability of electricity from the mains supply.

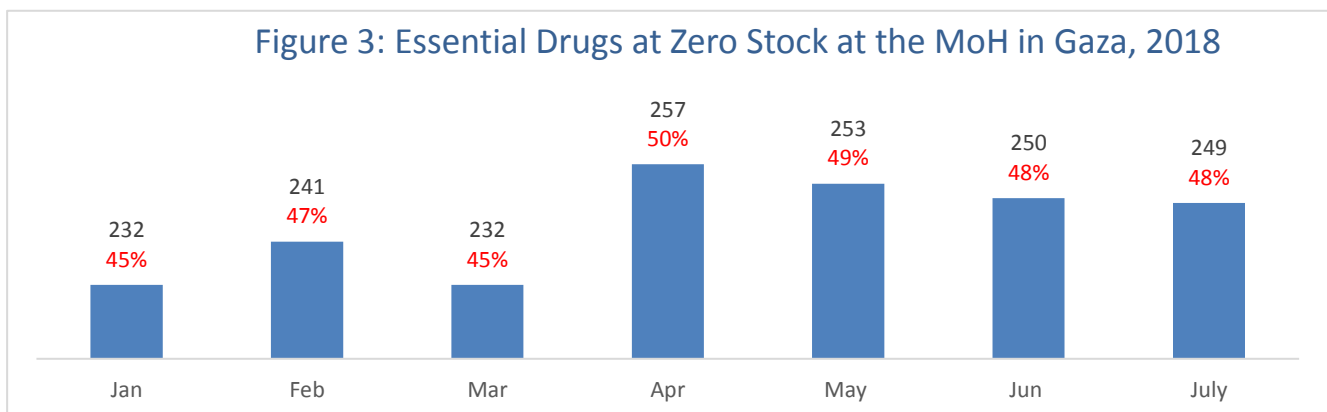
Hospitalized injuries by affected body part



Depleting essential medicines supplies

- The Central Drugs Store in Gaza supplies all 14 MoH hospitals (2,243 beds) and 49 MoH primary healthcare clinics in Gaza. These health facilities provide 40% of Gaza’s primary healthcare covering approximately 600,000 people and 90% of all hospital care services.
- According to Gaza’s Central Drug Store Ministry of Health, in July, 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. See figure 3 below.

Figure 3: Essential Drugs at Zero Stock at the MoH in Gaza, 2018



⁵ According to a recent assessment conducted by MAP-UK, however, further discussions on limb reconstruction are taking place in the Gaza Trauma Working Group.

⁶ According to Al Salama Society

Electricity crisis in Gaza

- The health sector in Gaza relies on fuel provided by the UN every month to run backup electricity generators in order to sustain the minimum critical health services for 1.27 million people. The UN donation is only enough to sustain the critical health services until the 30th August 2018.
- Meanwhile, the MoH has continued to implement drastic measures to rationalize the remaining 420,000 liters of donated fuel. Only 32 health facilities, from the initial 58 health facilities, are now supported through the UN fuel programme.
- Key services in the 14 public hospitals, such as elective surgery, sterilisation and diagnostic services continue to work at reduced capacity. In June, the waiting time for elective surgery was 64 weeks, which is well beyond the Ministry of Health (MoH) threshold of 24 weeks⁷. Delays of necessary surgical interventions may involve a prolonged period of suffering and ill health and affects the psychological and social life of the patient. In some cases, this can lead to further medical complications.
- 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, which prohibits entry of all goods except medical and food supplies. This includes construction material for health facilities and other essential items. The Health Cluster is currently monitoring the situation.

Attacks against health⁸

- According to the Ministry of Health, PMRS, UHWC and PRCS, for the period of 24th to the 30th July, 7 health workers were injured in 5 different incidents in the North and Gaza governorates: one by live ammunition, five by shrapnel, and one by tear gas inhalation.
- **Cumulative figures on attacks against health:**
 - From the 30th March to the 31st July, two health workers have been killed and 369 injured in 201 recorded incidents against health staff and facilities. 59 health vehicles were left damaged, as well as 2 health facilities - a specialized health center for people with disability and the MoH central ambulance station, which were damaged as the result of an Israeli air strike on 14th July.



⁷ WHO is monitoring the elective waiting time each month.

⁸ 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).

- Of the health workers affected, 7% were injured by live ammunition; 10% were hit directly with tear gas canisters; 4% were hit with shrapnel, 76% were injured by gas inhalation and 3% sustained other injuries including rubber bullet, physical injuries and combined injuries.

Emergency Response

Providing medical supplies:

- Medical Aid for Palestinians (MAP- UK) have initiated the procurement of 35 drug items and 13 disposable items worth approximately one million USD, through funding secured by the Humanitarian Fund. A second procurement of 22 drug items, 42 disposable items and 6 items of detergents for infection control, worth \$ 717,259 USD has also been initiated under the MAP Emergency Appeal. More than 800,000 patients will benefit from this intervention.
- Islamic Relief (IR) delivered 14 drug items worth of \$ 200,000 USD and 27 disposable items worth of \$125,000 USD to the MoH, supporting over 150,000 patients.
- WHO has initiated the procurement of kits to test for measles, as part of its outbreak prevention programme.

Trauma Management & Emergency Medical Teams (EMTs):

- **Humanity and Inclusion (HI)**, in partnership with local organizations, have deployed 10 multidisciplinary teams in the five governorates of Gaza. So far, HI has provided nursing and rehabilitation services to 826 persons who have received a cumulative total of 7,930 multidisciplinary sessions. HI has also distributed a total of 156 assistive devices, including wheel chairs, elbow and axillary crutches.
- **The Union of Health Work Committees (UHWC)** teams provided first aid to 19 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 16 cases at their emergency department.
- **The Palestinian Medical Relief Society (PMRS)** provided first aid to 93 injured people. Since the start of demonstrations, PMRS has provided first aid to a total of 3,143 patients. PMRS has also mobilized three outreach teams in Khan Younis, Gaza and the North Gaza. The teams provided post-operative care to 13 new cases. To date, PMRS has provided postoperative care to 616 casualties, out of those, 166 have received assistive devices.
- **Al Salama Society** provided 516 wound dressings, 350 physiotherapy sessions, 107 clients with needed medicines, 113 first aid bags, and 10 psychosocial sessions. Al Salama Society also provided more than 30 assistive devices to patients.
- **MSF-France** admitted an additional 18 trauma patients to their five postoperative clinics. Furthermore, MSF-France teams operated on 30 patients in Shifa and Patients Friends Benevolent Society Hospitals (10 new and 20 follow-up cases).
- **Palestine Children's Relief Fund (PCRF)** currently has a vascular surgeon working in Al-Shifa Hospital.



- **Health Matters/International Medical Corps partners** provided immediate care to a total of 81 injured cases at the TSPs. Health Matters/IMC partner hospital provided post-operative wound care for 93 patients and performed two general surgeries referred from public hospitals.
- **Public Aid Hospital** ambulances has transferred and provided first aid services to 11 injured patients, during the recent demonstration.
- **ICRC** is continuing to operate its 50-bed temporary surgical ward in Shifa Hospital. The unit will primarily focus on orthopaedic surgery and wound management.
- **WHO** is currently working closely with the MoH to establish an Emergency Medical Teams- Coordination Cell. The Cell will coordinate all national and international EMTs working in Gaza, including the reporting of EMTs, logistical support and ensuring that global professional standards are met. WHO, as the Health Cluster lead agency, continues to lead the Gaza Trauma Working Group.

Coordination and Information:

- The Gaza Trauma Working Group conducted a general meeting on the 24th July attended by MoH, ICRC, MSF, PRCS (Palestinian Red Crescent Society), Medical Aid for Palestinians-UK (MAP-UK), Palestinian Children’s Relief Fund (PCRF), Al Awda NGO Hospital, Union of Health Workers Committee (UHWC), Humanity and Inclusion (HI), UNRWA, MDM France and MDM Spain. Key issues were discussed, including referrals, monitoring of EMTS and osteomyelitis. Meeting minutes can be found [here](#).
- On the 30th July the Gaza Trauma Working Group held a rehabilitation specific meeting to agree a joint approach to managing patients.
- On the 30th July, the Health Cluster met with key officials from the Ministry of Health to establish a routine assessment of the mobile health teams operating in Area C of the West Bank. This follows after the closure of teams, leaving 65 communities with limited access to primary healthcare services. The infographic can be accessed from [here](#).
- On the 31st July, WHO is deploying an energy specialist to Gaza to conduct a rapid assessment of WHO’s solar project at Nasser Hospital, funded by Japan. WHO will also be developing key health indicators to monitor the impact of the electricity crisis on the health facilities.
- The Health Cluster has extended the monitoring of availability and functionality of health facilities to include all 22 UNRWA primary healthcare clinics. The report for June can be accessed from [here](#).



UNRWA PHCs Dashboard



INFORMATION TOOLS AVAILABLE ON THE HEALTH CLUSTER WEBSITE HTTP://HEALTHCLUSTEROPT.ORG	
Health Cluster & WHO Situation Reports	http://healthclusteropt.org/pages/3/situation-reports
Health Cluster HeRAMS dashboard <i>The tool reflects the health services availability and functionality each month. June data is now available.</i>	MoH Hospitals: http://healthclusteropt.org/pages/9/herams-hospitals MoH PHCs: http://healthclusteropt.org/pages/10/herams-phcs UNRWA PHCs: http://healthclusteropt.org/pages/15/unrwa-phcs-dashboard
Infographics	http://healthclusteropt.org/pages/4/infographics
Health Sector Medical Supply Needs	http://healthclusteropt.org/pages/11/health-sector-needs
EMTs calendar	http://healthclusteropt.org/pages/12/emt-calender
Procurement activities conducted by partners	http://healthclusteropt.org/pages/13/procurement-activities
Gaza Trauma Meeting Minutes	https://bit.ly/2Our0Gr
Mobile Health Clinics infographic	https://bit.ly/2AqTi1l

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:
 - Funding for fuel to run hospitals on back-up generators during the mains power cuts, which last for 18-20 hours per day
 - 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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