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As sickness, hunger, and disease spread, Gaza's health system faces increasing threats

Healthcare must be actively protected as a neutral and basic human right and a lasting ceasefire must be negotiated to bring an end to the cycle of violence and suffering, writes Hanan Balkhy

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As a mother, paediatrician, humanitarian, and now the World Health Organisation's Regional Director for the Eastern Mediterranean, the crisis in Gaza weighs heavily on my heart and strengthens my commitment to advancing healthcare for all people across the region.

In just over four and a half months, almost five percent of Gaza's population has been killed, injured, or remains missing under the rubble.¹ UNICEF estimates that over 17 000 children have been orphaned, and the horrors of war are leading to post-traumatic stress disorder, anxiety, and severe depression for all Gazans.² Health workers, themselves traumatised and facing survival challenges, are stretched thin. UNRWA reports that 70% of civilian infrastructure, including healthcare facilities, is damaged or destroyed, with only about a third of Gaza's hospitals operating, albeit at limited capacity.³ Médecins Sans Frontières have warned the UN security council that the healthcare system in Gaza is no longer functioning.⁴

The number of trauma patients with infected wounds or facing unnecessary limb amputations is increasing due to lack of specialised care and medical supplies. Outbreaks of hepatitis A and diarrhoea have been reported, while acute respiratory infections, skin infections, and others are increasing due to overcrowding and poor sanitation. To make this catastrophic situation worse, the spectre of famine looms large. The consequences of this war will last far beyond the cessation of hostilities.

The timeline of the Gaza crisis is a harrowing testament to the degradation of health, wellbeing, and human dignity. In the first week following the escalation of hostilities, WHO's pre-positioned trauma and surgical supplies were quickly used up by hospitals receiving streams of injured patients, mainly women and children.

As the hostilities expanded across the entire length of the Gaza Strip, more hospitals continued to deplete their stocks of trauma and surgical supplies. Trucks loaded with additional supplies airlifted from our logistics hub in Dubai stood just 20 minutes away on the Egyptian side of the Rafah border crossing, waiting for approvals to move. Further compounding the situation, fuel shortages and initial communication blackouts left emergency and ambulance services in Gaza crippled.

Three weeks passed before aid convoys were allowed to cross into Gaza. By then, the supplies they carried were not nearly enough to cover the immense needs.

Despite enduring 16 years of blockade and access restrictions, the occupied Palestinian territory's health system had been achieving significant outcomes before 7 October: maternal mortality rates in 2020 (20 deaths per 100 000 live births) and infant mortality rates in 2021 (9.3 per 1000 live births) were among the lowest across the region. ^{5 6}

The ongoing crisis has severely undermined its functionality. WHO is diligently supporting initiatives to strengthen its capacity, but the attacks on healthcare, coupled with insufficient humanitarian aid flowing into and across Gaza, means that humanitarian operations are severely hampered.

To date, almost 1200 critically injured and sick patients have been evacuated from Gaza for specialised treatment while 8000 more in need of evacuation remain inside the Strip. WHO has supported the deployment of three field hospitals and 12 emergency medical teams to relieve the strain. But these cannot replace health service delivery across the Strip.

As sickness, hunger and disease spread, Gaza's health system faces increasing threats: specialised health personnel, fuel, clean water, food, and health supplies are lacking; patients, health workers and displaced people are given evacuation orders; hospitals are attacked, and patients and health workers are killed, injured, or detained.

Missions to keep patients alive and hospitals afloat through the delivery of aid face hurdle after hurdle. Out of 16 UN missions planned to northern Gaza in January 2024, only three were facilitated. Humanitarian workers find themselves caught in the crossfire, and food intended for patients and health workers in hospitals is taken—understandably—by starving people before it can reach its final destination. Decisions by a number of donors to pause funding for UNRWA, the most important and largest supplier of humanitarian aid in this crisis, mean further catastrophic consequences for the people of Gaza.

Healthcare must be actively protected as a neutral and basic human right. And while reports of militarization of health facilities raise serious concerns—and, where proven, are roundly condemned by WHO—any military action against such facilities must be consistent with the principles of proportionality, distinction and precaution.

Even in the midst of conflict, preserving health and the value of human life is imperative. WHO continues to call for adherence by all parties to humanitarian principles and International Humanitarian Law. Humanitarian corridors must be respected, and all parties must safeguard the sanctity of medical facilities and personnel.

A lasting ceasefire must be negotiated to bring an end to the cycle of violence and suffering. Only through dialogue and diplomacy can a sustainable solution be found that tackles the root causes of the conflict and ensures the health and wellbeing, rights, and dignity of all people in Gaza.

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