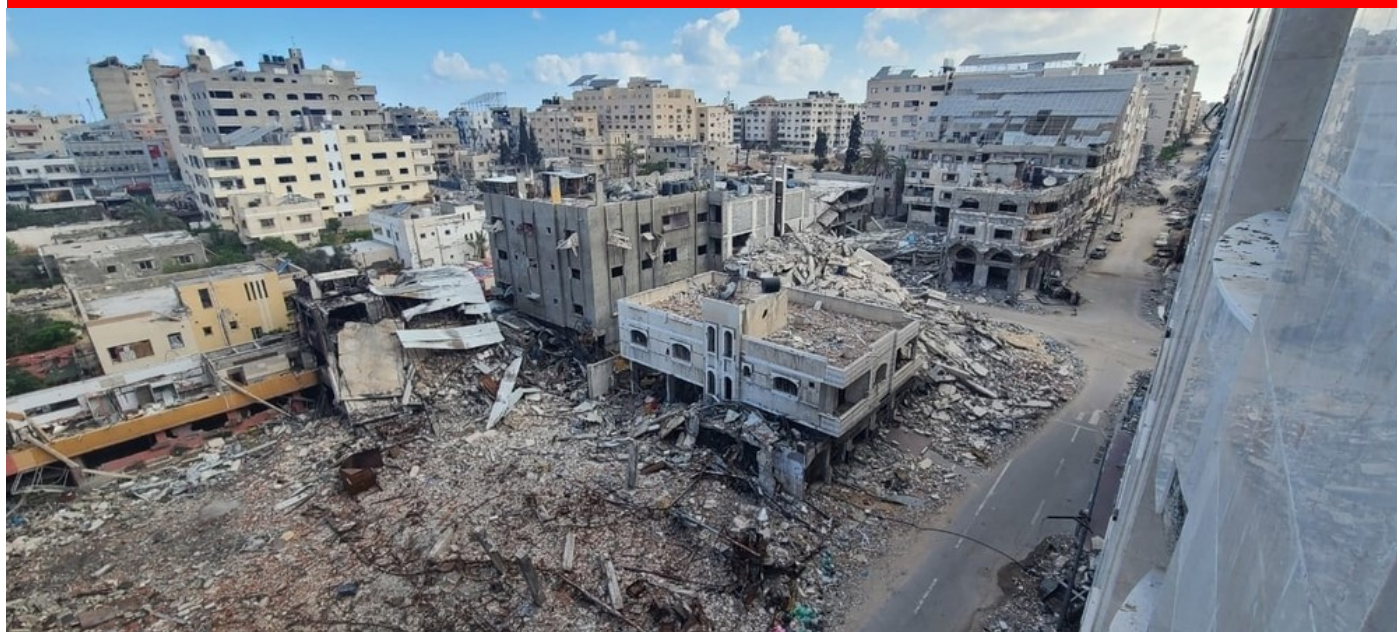


War in Gaza

One year on

Report on MSF response, October 2024



A general view of destroyed buildings in the Al-Shifa neighbourhood in the north of the Gaza Strip, near an MSF clinic. Gaza City, Palestine, June 2024. © MSF

Summary

A year after the war between Israel and Hamas broke out in the Gaza Strip, Palestine, Médecins Sans Frontières (MSF) teams continue to respond where and how we can to the enormous, and growing, needs in the Strip. MSF teams are also responding in the West Bank, where access to healthcare has become even more difficult after the Gaza war started.

MSF's activities in Palestine before October 2023

MSF started working in Palestine and in the Gaza Strip in 1988, when we provided physiotherapy to people injured during the First Intifada (Dec 1987 – Sep 1993).

Gaza

Before October 2023, we worked to fill gaps in the healthcare system in Gaza, which was already overstretched, underfunded and deeply impacted by a 16-year blockade. Working in three hospitals and several outpatient clinics, we offered comprehensive care for people with burns and trauma; this included providing surgery, physiotherapy, psychological support, occupational therapy and health education.

We also ran a reconstructive surgery programme in northern Gaza, which started in 2018. We worked in laboratories to identify and treat antibiotic-resistant infections, and provided training and psychological support for local healthcare workers. Since early October 2023, these activities have been largely suspended or have been adapted to a context in which we now work with extremely limited supplies, in diminishing space, and under constant danger to our teams .

West Bank

In the West Bank, Israeli occupation, violence, unemployment, and poverty have a profound impact on the mental health of Palestinians. Our teams offer psychological support, in various forms, to both groups and individuals, in Hebron, Nablus, Tubas, and Qalqilya. In Jenin, MSF is working with the Ministry of Health in Jenin hospital to strengthen emergency response mechanisms. We also provide basic healthcare, through fixed clinics in Hebron's old city, and through mobile clinics in Masafer Yatta.



MSF psychologists provide emergency mental health consultations to people in Jenin refugee camp, following a nine-day Israeli incursion. West Bank, Palestine, September 2024. © Alexandre Marcou/MSF

Context

Gaza

On 7 October 2023, Hamas, which has been in power in the Gaza Strip since 2007, launched a coordinated attack inside Israel, killing around 1,200 people and taking more than 250 captive.

Israel subsequently declared war on Hamas and Israeli forces have launched massive attacks on the Gaza Strip. Israeli forces have systematically bombed and violently raided residential areas, schools, hospitals, health centres and ambulances, and refugee camps. In October 2023, Israel imposed a total blockade on Gaza, banning water and food, and severely restricting the import of essential supplies, including medications and medical supplies.

Successive evacuation orders, followed by intense bombing and attacks – first, as Israeli forces progressively moved from north to south – have left most Gaza residents displaced multiple times. An estimated 90 per cent of the people in Gaza are displaced and living in just 10 per cent of the Strip's area.¹ Nowhere in the Gaza Strip is safe. Over 41,200 people have been killed,² including an estimated nearly 17,000 children.³

For 12 months, people have had very little food, water, shelter and little or no access to healthcare. Figures from the Integrated Food Security Phase Classification suggest that nearly 500,000 people are facing catastrophic levels of acute food insecurity. Our teams are seeing the impact of the lack of food in the numbers of people, especially children, being treated for malnutrition. People are falling ill with diarrhoea because of a severe lack of safe drinking water.

Gaza's health system has now been decimated: most of the Gaza Strip has been destroyed and that includes healthcare facilities. Only 17 out of 36 hospitals are still at least partly functioning.⁴ The healthcare system in Gaza has collapsed. Our teams have been forced to leave 14 different health facilities – sometimes leaving patients behind – due to evacuation orders. Six MSF staff have been killed in Gaza since 7 October.

Context (cont.)

Gaza (cont.)

Our teams are facing critical shortage of essential medicines and equipment. Our teams have witnessed increased blockades, obstruction, and appalling delays in the transport of medical supplies and equipment our patients need for treatment since 7 October 2023. The closure of the Rafah border crossing, following Israel's offensive in the south of Gaza in early May, coupled with the endless red tape imposed by Israeli authorities, have dramatically congested the flow of humanitarian aid through the Kerem Shalom entry point. Essential supplies are coming through in sporadic drips. At two border points, it's estimated there is a backlog of around 30,000 pallets – equivalent to 5.2 football/soccer pitches – worth of aid waiting to cross into Gaza. Even when aid can finally enter the Strip, insecurity, including looting of trucks, often does not allow humanitarian organisations to get it where it is desperately needed.

The north of Gaza is particularly affected; it remains isolated, receiving negligible amounts of humanitarian aid in contrast to the actual needs. As of end June, Israeli authorities had facilitated only 49 per cent of the planned humanitarian assistance missions to northern Gaza.⁵ The rest were impeded, denied access, or cancelled due to logistical, operational or security reasons.

West Bank

Violence has surged across the West Bank in parallel to the Gaza war. Since 7 October, over 770 Palestinians have been killed in raids by Israeli soldiers or clashes with Israeli settlers.⁶ Israeli forces regularly raid Palestinian areas across the territory, including refugee camps. There has been a spike in attacks on healthcare, with WHO having documented nearly 500 attacks in the West Bank until the end of May, including on ambulances.⁷

Incursions on camps in neighbourhoods in the West Bank have had a devastating impact. Israeli forces shut down any access in and out of the area under incursion for hours or days at a time – a recent incursion in Jenin lasted nine days – preventing people from seeking healthcare. Thousands of people have been forcibly displaced, with over 100 houses demolished. Checkpoints remain closed and workers are not allowed to cross to Israel. Over 5,000 Gazans are internally displaced in the West Bank after their Israeli work permits were suspended and they were ordered to leave Israel.



Tents of displaced people in Al-Mawasi, Khan Younis. Gaza Strip, Palestine, August 2024. © Nour Daher

MSF response

Gaza

Our response in Gaza is comparatively limited, given our activities before the war and – more importantly – the massive needs there now are. Over the last year, systematic evacuation orders by Israeli forces on various hospitals have pushed our activities into a tiny space and are limiting our response.

Our teams are offering surgical care, wound care, physiotherapy, post-partum care, basic health care, vaccination, and mental health services.

MSF response (cont.)

Gaza (cont.)

MSF staff – internationally mobile and local staff – plus MSF-supported staff⁸ are working/have worked in the following facilities since 7 October:

(Note: facilities marked with an asterisk [*] are those in which we are working under MSF management as at time of writing; those in red are where there is no longer any MSF presence.)

Northern Gaza

- MSF clinic, Gaza City* - MSF staff who have chosen to remain in Gaza City provide care for people in our clinic close to Al-Shifa hospital. The team worked between April and the beginning of July, before they were forced to stop activities for almost a week due to an Israeli evacuation order. We were able to start activities again from mid-July. We provide general healthcare consultations, consultations for non-communicable diseases and for malnutrition. Since the beginning of August, our teams have started scaling up sexual and reproductive health activities to include following up pregnant women for antenatal and postnatal care, providing gynaecological consultations and family planning services.
- Al-Awda hospital - MSF stopped working in Al-Awda at the end of December 2023, after our agreement (memorandum of understanding) with the Ministry of Health to work in the hospital ran out. However, some former MSF staff remained at Al-Awda and provided care until it was besieged by Israeli forces for five days in May.
- Al-Shifa hospital – evacuated November 2023; last MSF staff left in February 2024. Before evacuating, we had scaled up our response in the hospital by opening an operating theatre on 10 October. Following a two-week Israeli forces military operation inside the hospital which ended on 1 April, the hospital was left in ruins and is no longer functional.
- Indonesian hospital – evacuated October 2023.

Middle Area

- Al-Aqsa hospital, Deir Al-Balah - Palestinian and international staff provide orthopaedic and reconstructive surgery, advanced wound care, post-operative wound care, physiotherapy, health promotion and mental health support.
- Al-Hekker clinic, Deir Al-Balah* - we opened a clinic in mid-April, where teams provide general consultations, vaccinations, reproductive health services, wound dressing, and mental health services.
- Deir Al-Balah field hospitals x 2, Deir Al-Balah* – Located near Al-Aqsa hospital, we opened two tented field hospitals – one at the end of August, the other in mid-September – to provide extra capacity and support to Al-Aqsa. We treat people in an emergency room, patients who need to be admitted, and provide outpatient consultations.
- Al-Martyrs clinic, Deir Al-Balah* - from early March, MSF staff have been providing wound care and malnutrition screening.



MSF staff work in one of the two new field hospitals in Deir Al-Balah to provide extra medical care capacity. Gaza Strip, Palestine, September 2024. © MSF

MSF response (cont.)

Gaza (cont.)

Southern Gaza

- Nasser hospital, Khan Younis – following the destruction of Al-Shifa, Nasser hospital is now the largest surgical centre in Gaza. After MSF staff were forced to flee in mid-February, we returned to the hospital in mid-May, and relaunched activities in collaboration with the Ministry of Health. Our team focus on orthopaedic and plastic surgery, treating burns, and providing laboratory services, physiotherapy, and counselling. We have opened an outpatient unit for wound care and a unit for providing minor surgical interventions on a day patient basis. We also support and provide treatment in two paediatric wards, maternity services in the delivery, pre- and post-partum wards, and treat babies and children in the paediatric intensive care unit and newborn intensive care unit. In mid-June, we also opened an inpatient therapeutic feeding centre for malnourished children.
- Al-Mawasi clinics x 2, Rafah* - we work in two clinics in Al-Mawasi, where we provide general consultations, ante- and post-natal care, mental health services, physiotherapy, wound dressing changes, vaccination, and malnutrition screening and treatment.
- Khan Younis clinic, Khan Younis* – opening in early-May, MSF teams provide medical consultations, vaccination, mental health services, outpatient treatment for malnutrition, and pre-natal and sexual and reproductive health services. We also provide wound care and physiotherapy, and health promotion.
- Al-Attar clinic, Khan Younis* - we opened this clinic located between Al-Mawasi and Khan Younis in mid-June to provide general and paediatric consultations, emergency health care, wound care, antenatal and postnatal care, mental health care, and health promotion services.
- European Gaza hospital, Khan Younis – no MSF staff. Activities stopped in March due to insecurity. We provided surgical services and changing dressings of wounds.
- Rafah Indonesian Field hospital, Rafah - working with the Ministry of Health, we provided care to patients in the inpatient and outpatient departments, as well as in the operating theatre. Teams provided surgery and post-operative care to war-wounded patients, including dressing changes, physiotherapy, and counselling. In mid-May, we stopped our activities at the hospital due to the offensive on Rafah, as we could no longer guarantee the safety of patients.
- Al-Najar hospital - activities ended. We provided surgical and wound care, ending our activities at the end of March.
- El-Emirati Maternity hospital, Rafah* - our teams, including gynaecologists, nurses and hygienists, provided postpartum care and managed complications in pregnancies in round-the-clock shifts. In early May, we made the decision to hand over activities to the Ministry of Health, due to the ongoing offensive on Rafah, and to relocate resources based on needs, given the shifting displacement of people.
- Al-Shaboura clinic, Rafah*- our team provided general consultations, vaccinations, reproductive health services, wound dressing changes, and individual and group mental health services until early May. We also screened people for malnutrition. We suspended our activities due to the Rafah offensive and to relocate resources where they were more needed.
- Trauma Stabilisation Point in Tal Al-Sultan, Rafah – on 14 May, MSF opened a Trauma Stabilisation Point (basic facilities where patients are provided with initial treatment before being referred to hospitals if specialist care, like surgery, is required) near the front lines in Rafah. On the night of 26 May, 180 wounded and 28 dead were recorded at the stabilisation point after Israeli airstrikes hit a camp sheltering displaced people. During the night on 27 May, heavy bombardments and ground forces operating close to the stabilisation point forced its closure. All patients and staff were safely evacuated. The following day, we took the decision to permanently close the stabilisation point due to the intense fighting in the area.
- Beni Suhaila clinic - we provided basic health care, wound dressing, and mental health consultations, until Israeli forces ordered people to evacuate the area on 1 December.

Water and sanitation, supplies and logistics

- Water and sanitation – MSF teams distribute over 620,000 litres of clean water per day in more than 40 water points in Al-Mawasi, Khan Younis, Rafah, and Deir Al-Balah. At the end of March, we set up a new desalination plant in Al-Mawasi. Three more are being set up in Deir Al-Balah, with an expected delivery of 70,000 litres/day, and will be functional end-September/beginning-October.

MSF response (cont.)

Gaza (cont.)

Water and sanitation, supplies and logistics (cont.)

- Since February 2024, through partnership with PARC - Agriculture Development Association – we are implementing water and sanitation activities in camp shelters in Deir Al-Balah and Khan Younis. This includes building latrines for more than 30,000 people located in six camps. We are distributing hygiene kits for 2,400 families and providing enough daily clean drinking water to a population of 25,000 people. The partnership also includes equipping a camp hosting 70 families (400 people) of people living with disabilities with the needed sanitary facilities (accessible latrines and showers).
- We have a base in Egypt to facilitate the transit of our international supplies, and a supply emergency team based in Amman, through which we try to send supplies into Gaza. As of end of June, MSF had brought seven loads of cargo, a total of 73 trucks, into Gaza through United Nations.

Response in figures

Please note – figures are not exhaustive; covers 7 October 2023 – 21 August 2024.



People treated for physical violence: **36,000**



People treated for diarrhoea: **27,000**



Consultations for non-communicable diseases: **16,000**



Individual mental health consultations: **13,000**



Antenatal consultations: **12,000**



Inpatients admitted: **10,000**



Surgical interventions: **5,000**

West Bank

Since October 2023, access to medical care in the West Bank, which was difficult before the war in Gaza erupted, has been severely disrupted at times in some places. In response, we have expanded our activities. We maintain our operations focused providing emergency care, basic healthcare via mobile clinics, and mental health care in Hebron, Nablus, Jenin and Tulkarem.

Hebron

- We provide medical care through 15 mobile clinics in areas outside and inside Hebron's Old City, and in the remote villages of Masafer Yatta in the Southern West Bank.
- We provide medical care support to four clinics, and provide personnel to increase the capacity of the maternity ward and emergency room in Halhoul hospital.
- We provide extra staff capacity in the emergency room at Al-Moktaseb hospital and provide mental health services.
- We also make donations to various hospitals and provide first-aid kits to community focal points in Beit Omar, Al-Fawwar camp, Al-Arroub camp, Al-Rshaydeh, and Umm Al-Kheir.
- We have trained medical staff in Al-Moktaseb, Hal-Hul, Dura, and Yatta hospitals in the wider Hebron area.
- Since October 2023, we've increased health promotion activities and the distribution of relief items, hygiene kits and food parcels to internally displaced Gazans, and West Bank residents affected by violence and forcible displacement.

MSF response (cont.)

West Bank (cont.)

Nablus

- We continue to offer individual and group mental health sessions, as well as psychiatric consultations, in Nablus, Qalqiliya and Tubas.
- In March, in collaboration with the Palestinian Union of Social Workers and Psychologists we started training for eight psychologists, who undertake theoretical and practical training in the MSF clinic.
- MSF is also training Palestine Red Crescent Society volunteers as first aid providers and first responders in the governorates of Nablus, Tubas, and Qalqilya.
- We have equipped five stabilisation points across Nablus, Qalqiliya and Tubas, to mitigate access constraints for patients and ambulances.
- In April, MSF staff started training doctors and nurses in the emergency room in three different hospitals (Nablus, Tubas and Qalqilya) to enable staff to respond to trauma cases.
- Since July, teams are providing general and more specialised healthcare consultations via a mobile clinic across six locations in Qalqilya and Nablus governorates.

Jenin and Tulkarem

- Our medical staff provide extra capacity in the emergency room at Khalil Suleiman hospital in Jenin, where we undertake bedside training of emergency personnel.
- We equip volunteer paramedics – including members of the community – in Jenin, Tulkarem and Nur Shams refugee camps with donations and training, so they can stabilise patients during hostilities.
- We provide mental health sessions and psychological first aid to communities, including training for medical staff on the latter. We also provide individual mental health consultations to people at Khalil Suleiman hospital.
- We also provided medical and mental health consultations and health promotion through mobile clinics in Jericho.

Expenditure/budget

€53.2 million – Oct 2023 - Sep 2024.

Projected Needs (2023-2025): MSF predicts financial requirements of €116 million under the Regional Fund – Gaza Emergency for 2023-2024. Additional income will be required for 2025 (budgets to be confirmed). New, emergency-related activities in Lebanon are also included in this Fund, which will likely increase the budget further.



Salah is an MSF-trained paramedic working in Jenin refugee camp, driving an adapted golf cart, donated by MSF, to transport patients. West Bank, Palestine, September 2024. © Alexandre Marcou/MSF

1 According to OCHA.

2 According to Ministry of Health, Gaza.

3 According to UNICEF.

4 According to WHO.

5 According to OCHA

6 WHO

7 According to WHO

8 MSF-supported staff refers to daily workers whose salaries are paid by MSF, but who are not MSF employees. These staff do not work under MSF management.