

Health conditions in the occupied Palestinian territory, including east Jerusalem, and in the occupied Syrian Golan

At the request of the Government of Israel, the Director-General has the honour to transmit to the Sixtieth World Health Assembly the attached report by the Ministry of Health of Israel.

ANNEX

**REPORT OF THE ISRAELI MINISTRY OF HEALTH
TO THE SIXTIETH WORLD HEALTH ASSEMBLY**

May 2007

1. May 2007 will mark 12.5 years that the Palestinian health and medical services in the West Bank (Judea and Samaria) and the Gaza Strip have been independently run by the Palestinian Authority. Nevertheless, during the past year (May 2006–May 2007), Israel has continued its humanitarian policy towards the Palestinians living in Gaza and the West Bank, including treatment of Palestinian patients in Israeli hospitals and the provision of public health laboratory services and training programmes for physicians, nurses and other health professionals. Furthermore, Israel facilitates the entry into Gaza and the West Bank of medical and pharmaceutical supplies donated by donor countries, WHO, ICRC and nongovernmental organizations (NGOs). And despite the accumulation of Palestinian debts to Israeli hospitals, Palestinians continue to be admitted to Israeli hospitals and to enjoy ambulatory services.

2. One factor that is a constant source of friction between Israel and Palestinian health personnel is the delays that occur at roadblocks. Unfortunately, military checkpoints are essential for the protection of Israeli lives, and regrettably, in choosing to support terrorism against the civilian Israeli population, the Palestinian Authority harms its own population in many ways. There have been several documented cases of Palestinian groups using ambulances to transport terrorists and explosives, which is a flagrant abuse of the usual practice of allowing free passage to ambulances, patients and medical personnel. Nonetheless, regulations were recently put in place to ease the movement of ambulances at the checkpoints. According to this regulation, six designated ambulances and their staff are authorized to transfer patients in emergency cases through the checkpoints, without inspection. Written instructions have been installed at every checkpoint, clearly directing the soldiers to give priority to these ambulances. Oral instructions were given as well.

3. It is important to note in this context that tens of thousands of Palestinians enter Israel for medical treatment of their own accord, without need of an ambulance. In 2006, tens of thousands of permits to enter Israel for medical treatment were issued, averaging over 200 patients per day.

4. The Israeli humanitarian approach persists despite the complicated and frustrating political environment. Since the Palestinian Ministry of Health cut off official contacts with the Israeli Ministry of Health in September 2000, official contacts and joint professional committees have not been renewed. Due to these external circumstances, Palestinian physicians and health professionals are not currently sent by the Palestinian Government to Israel for training programmes. However, Palestinian trainees are enrolled in training or specialization programmes in Israeli hospitals through Israeli NGOs such as Hadassah Medical Center, the Save a Child's Heart Foundation, the Peres Center for Peace and others. These NGOs coordinate between the trainees and the hospitals and finance the training projects using funds from donor countries.

5. Additionally, in outbreaks of infectious diseases, which threaten public health and endanger the lives of people in all areas, Palestinian and Israeli experts meet together under the umbrella of WHO or an NGO, for the exchange of information, evaluation of the situation and coordination of policy and action. Examples of such exchanges occurred in the recent past during the SARS outbreak, and again this past year as Avian Influenza appeared in poultry at several sites in the Gaza Strip and Israel. Throughout the last year (most recently in Jerusalem on 20 April), public health experts from the Palestinian Authority, Israel and Jordan met several times under the umbrella of an NGO, Search for Common Ground, to elaborate on aspects of Avian Influenza and to prepare for the possible future pandemic of the disease.

6. Despite these limited successes, if the quality of the Palestinian health and medical system has deteriorated, it is most likely because the Palestinian Authority has channelled its financial resources into purchasing ammunition, training terrorists and supporting terrorist activities instead of investing the required budgets in the creation and maintenance of satisfactory health services.

7. Nevertheless, Israel hopes that the day will soon come when the Palestinian Authority will decide to officially recognize the rights of the State of Israel, uphold all signed agreements, renounce terrorism and resume the dialogue for peace. Israel concomitantly strives for the opening of a new era of better understanding and healthy cooperation between the Ministries of Health of both parties.

ISRAELI-PALESTINIAN COOPERATION IN THE FIELDS OF HEALTH AND MEDICINE BETWEEN MAY 2006 AND MAY 2007

Provision of medical care to Palestinian patients in Israeli hospitals

8. Approximately 60 000 Palestinians from the West Bank area have been treated in Israel hospitals over the past year. Around 20 000 were hospitalized, and about 40 000 received ambulatory services of all sorts.

9. Approximately 5000 patients from the Gaza area have been treated in Israeli hospitals over the past year – about 2000 hospitalized and about 3000 receiving ambulatory services of all sorts.

10. Among the patients receiving medical care in Israel, approximately 2500 were children, the majority of whom received long-term treatment for cancer and complicated operations.

11. In spite of the fact that the Palestinian Authority delays or halts payments to Israeli hospitals, Israeli medical centers continue to admit Palestinian patients without any delays or restrictions.

Provision of public health laboratory services to the Palestinian Ministry of Health upon request

12. Public health laboratories at the Israel Ministry of Health continue to regularly provide assistance to the Palestinian Health Authority in the way of laboratory tests for poliomyelitis, measles, mumps, influenza and other viral diseases.

Ad hoc meetings of experts on public health events or crises

13. A few consultative professional meetings of public health experts from both parties on the subject of Avian Influenza and Pandemic Influenza were held during the past year. These meetings were organized by the NGO Search for Common Ground, and WHO officials from the WHO office in Jerusalem participated in these meetings.

Enabling medical equipment and medicines to enter the West Bank and the Gaza Strip

14. Israel facilitates the prompt transfer of medical equipment and medicines donated to the Palestinians by donor countries, WHO, ICRC and various NGOs.

Training programmes for Palestinian physicians, nurses and other professionals in Israeli medical institutions

15. During the past year Palestinians participated in training programmes in Israel organized by Israeli NGO including the Hadassah Medical Organization, Save a Child's Heart Foundation and the Peres Center for Peace, financed by donor countries. An example of a foreign organization that

organizes and finances training programmes for Palestinians is the Middle East Cancer Consortium (MECC) which deals with the field of oncology.

16. Sixty-five physicians and two nurses have been participating during the past year in a variety of medical and surgical training programmes. Sixty out of the 65 physicians underwent either short training programmes or medium term programmes of a few months duration. The majority of them were trained between 3–6 months. Five physicians are participating in a full residency programme of approximately five years.

17. The programmes were in the following medical specialties: anaesthesiology; intensive care (adults and children); traumatology; orthopaedic surgery; cardiac and thoracic surgery; vascular surgery; neurosurgery; urology; ear, nose and throat surgery; ophthalmology; oncology; hematology; gastroenterology; dermatology; medical imaging; paediatric cardiology; and paediatric rehabilitation.

Additionally, two nurses underwent short training programmes in general intensive care and neurosurgical intensive care.

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