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Health conditions of, and assistance to, the Arab population in the occupied Arab territories, including Palestine

The Director-General has the honour to bring to the attention of the Health Assembly the attached annual report of the Director of Health, UNRWA, for the year 1999.

ANNEX

REPORT OF THE DIRECTOR OF HEALTH, UNRWA, FOR 1999

INTRODUCTION

1. After almost six years of the transfer of responsibility for the health care system to the Palestinian Authority, health services in Gaza Strip and the West Bank are still offered by various health care providers, including the Ministry of Health, UNRWA, nongovernmental organizations and the private sector. In addition, some segments of the population have access to the Israeli health insurance schemes. In spite of the attempts to avoid duplication, overlap and incompatible priorities, the progress towards streamlining health policies and strategic approaches still leaves much to be desired. Virtually all health care providers suffer from significant budget deficits and inadequate coordination of international assistance.

2. The demographic and epidemiological profile of the Palestine refugees resembles that of many populations whose health status is in transition from a developing to a developed stage. Approximately 65% of the populations in Gaza Strip and 56% in the West Bank are women of reproductive age and children below 15 years. The increase in life expectancy, reduction of infant and early child mortality, increased morbidity and mortality from noncommunicable diseases and poor environmental health conditions have all contributed to a situation in which the public health services have had to face the double burden of disease and the consequences of rapid population growth.

UNRWA HEALTH SERVICES TO THE REFUGEES

3. Since 1950, under the terms of an agreement with UNRWA, WHO has provided technical supervision of the Agency's health care programme through the sustained support of the Eastern Mediterranean Regional Office, the cooperation of staff from WHO headquarters, and assignment to UNRWA headquarters, on non-reimbursable loan, of the UNRWA Director of Health and other senior staff.

4. UNRWA since then has been the main health care provider for the Palestine refugee population in the five fields of its area of operations, namely Jordan, Lebanon, the Syrian Arab Republic, the Gaza Strip and the West Bank. The total number of the refugee population registered with UNRWA in 1999 was approximately 3.7 million, out of whom 1 384 000 were in Gaza Strip and the West Bank, representing approximately 50% of the total population in Palestine. Of those, 27% in the West Bank and 55% in Gaza Strip lived in 27 overcrowded camps under poor sanitary conditions.

5. With a health budget that is approximately half the budgetary resources allocated by the Ministry of Health of the Palestinian Authority, UNRWA provided comprehensive primary health care to the Palestine refugee population, comprising essential medical care services, disease prevention and control, and family health services including family planning. These services were provided directly and at no cost through the Agency's network of 51 primary health care facilities in and outside camps, 34 in the West Bank and 17 in Gaza Strip. Owing to the high workloads in Gaza, a system of double-shift clinics was maintained at six health centres in the largest camps.

6. Of the 51 primary health care facilities, 38 accommodated fully equipped laboratories, 35 accommodated dental clinics, and all of them provided family planning services as an integral part

of maternal and child health care services. These facilities also provided special care for diabetes mellitus and hypertension as part of the integrated noncommunicable disease control programme. In addition, six maternity units integrated within health centres in the largest camps in Gaza provided safe delivery to pregnant women, and six physiotherapy clinics in each of Gaza Strip and the West Bank provided physical rehabilitation services to the refugee population.

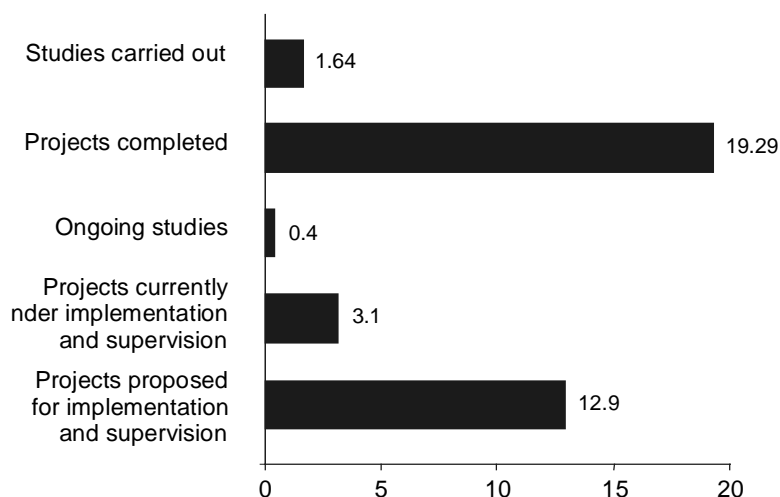
7. During 1999 UNRWA primary health care facilities handled over 2.5 million medical consultations, 0.76 million nursing treatments and more than 194 000 dental consultations. In addition, 36 630 pregnant women received antenatal care at these primary health care facilities and 102 000 children below three years received comprehensive preventive care comprising growth monitoring, immunization and medical supervision. More than 9000 new family planning acceptors were enrolled in the programme, bringing the total number of family planning acceptors to 35 780. More than 70% were in Gaza, where UNRWA is the main provider of health care to approximately two-thirds of the total population, both residents and refugees. The zero incidence of poliomyelitis and neonatal tetanus was maintained and the vaccination coverage was almost complete both for primary series and booster immunizations.

8. UNRWA continued to place special emphasis on health educational activities targeting schoolchildren and adolescents. The special programmes on prevention of tobacco use and HIV/AIDS, which were developed in previous years, continued to be implemented as multisectoral activities with full participation of teaching staff.

9. In addition to these services at the primary level, UNRWA provided assistance towards cost of hospitalization of the refugee population at nongovernmental hospitals in Gaza Strip and the West Bank, and directly through its 43-bed hospital in Qalqilia in the West Bank. More than 19 800 refugee patients received hospital care in 1999 and utilized approximately 72 000 hospital days.

10. In the environmental health sector, UNRWA carried out a series of feasibility studies, prepared detailed technical designs and made major contributions towards improving the poor infrastructure in refugee camps and adjacent municipalities under its Special Environmental Health Programme in Gaza. The figure below outlines the progress achieved thus far under this programme and the planned projects available for funding.

Projects completed or planned under the Special Environmental Health Programme, Gaza



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COOPERATION IN HEALTH

11. UNRWA remained committed to the goal of contributing to the process of rehabilitation and building a sustainable health care system in Palestine within the means available to it and within any framework that is considered appropriate by the Palestinian Authority. However, the prevailing circumstances and the restrictions imposed on movement of area staff between Gaza and the West Bank continued to have adverse effects on promoting coordination in health not only within UNRWA but also between UNRWA and other health care providers.

12. The cooperation between UNRWA, the Ministry of Health of the Palestinian Authority and nongovernmental organizations in 1999 covered several areas, including disease surveillance and control, maternal health, and development of human resources for health. The immunization policies of UNRWA and the Ministry of Health have been streamlined to be consistent with WHO concepts and principles. Meantime, UNRWA continued to receive its requirements of the six antigens for the expanded programme on immunization, and hepatitis B and measles-mumps-rubella vaccines as in-kind contribution from the Ministry of Health. UNRWA also participated in the national immunization days against poliomyelitis and the mass immunization campaign against measles in the West Bank.

13. Other aspects of cooperation in the area of disease surveillance and control included implementation of the directly observed treatment, short course (DOTS) strategy for control of tuberculosis beginning 1999 in full coordination with the national tuberculosis programme. UNRWA is also participating in the national programme for control of human brucellosis.

14. The three-year maternal health project for development of open-learning material on antenatal care, family planning, management information systems and total quality management was completed with the assistance of Kingston University, United Kingdom of Great Britain and Northern Ireland, and the full participation of the Ministry of Health and local nongovernmental organizations in Gaza Strip. Not only has this project enhanced the process of capacity-building among all project partners, but it has also helped to streamline several aspects relevant to service standards and practices of all health care providers in the Strip. Appropriate arrangements were made during the year to ensure the future sustainability of the project and to expand its activities to the West Bank, building on the institutional capacity that has been so far developed at local level.

15. Staff from the Ministry of Health of the Palestinian Authority participated in the training programme organized by UNRWA in collaboration with the WHO collaborating centre at the Centers for Disease Control and Prevention, Atlanta, United States of America. The programme, which aims at enhancing the process of institutional capacity-building of senior and mid-level managers in epidemiology and reproductive health counselling, has been under way since 1997 and was maintained in 1999. Participants from UNRWA and the Ministry of Health identified joint health services research projects which were carried out in the context of this programme. The project helped to build up a core group of trainers-of-trainers who started the process of transfer of the knowledge and skills acquired to other staff.

16. After a series of delays, the European Commission, the Ministry of Health of the Palestinian Authority, the International Management Team and UNRWA signed a Note for the Record in November 1999 marking completion of the process of transfer of management authority over the European Gaza Hospital to the International Management Team and start of the commissioning phase.

17. According to the proposed business plan prepared by the Management Team, the first outpatients will be received on 15 July 2000, the first inpatients on 15 December 2000 and the hospital

would become fully operational on 15 January 2001. It will then be integrated into the health care system of the Palestinian Authority. Its bed complement is expected to be 291, including intensive and antenatal care. UNRWA, which completed the construction works and procurement of most of the equipment in November 1996, contemplates purchasing services from the hospital for treatment of refugee patients.

18. UNRWA is also assisting in the establishment of a public health laboratory in Ramallah, West Bank. By the end of the year, approximately 50% of construction works was completed. This project, which was funded by the Government of Italy, will be taken over by the Ministry of Health of the Palestinian Authority and integrated into its health care system.

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