

## Health Cluster Bulletin - Aug 2024

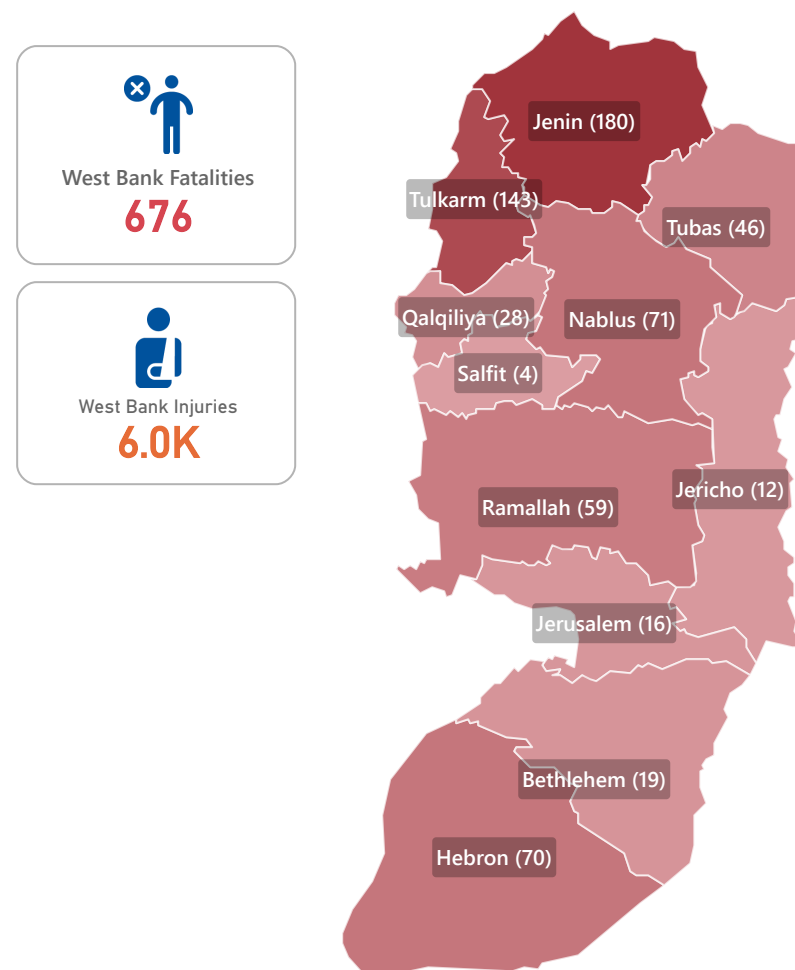
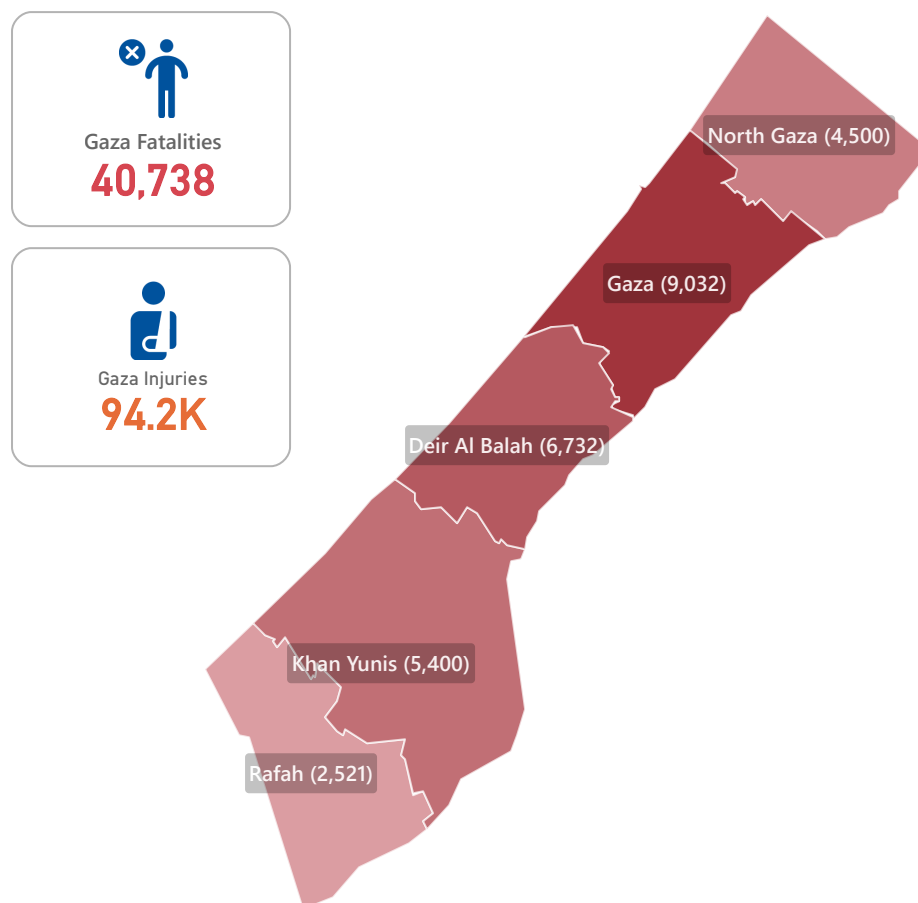




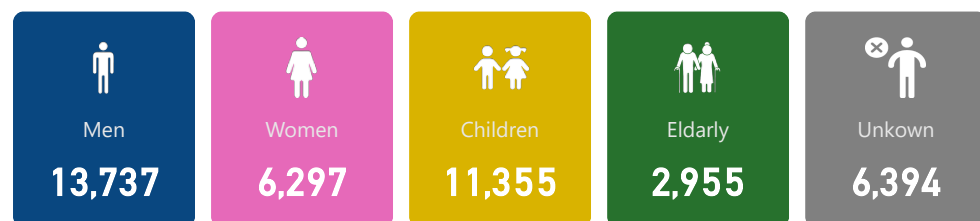
# Casualties

Since the 7th of October 2023

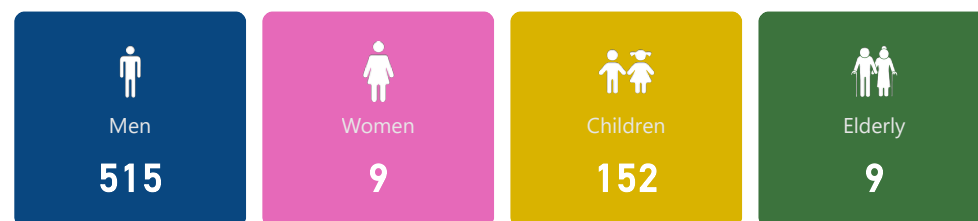
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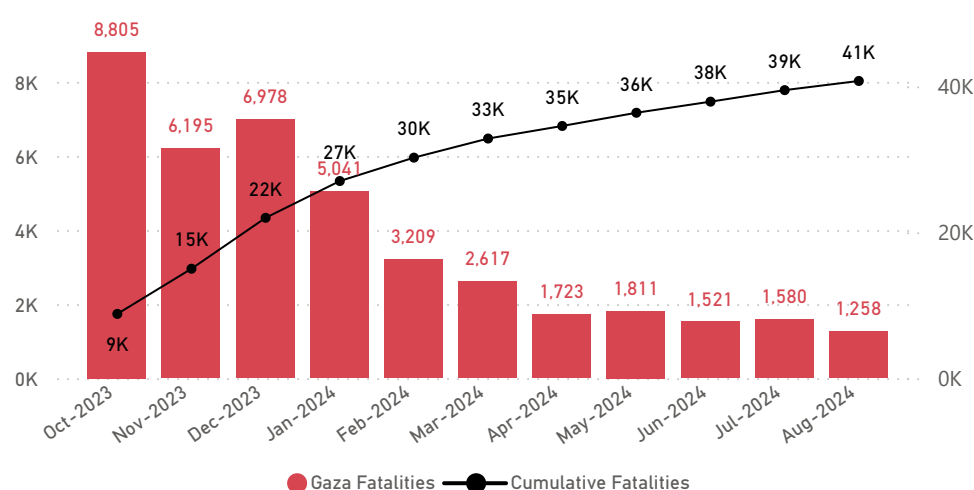
Gaza Fatalities breakdown



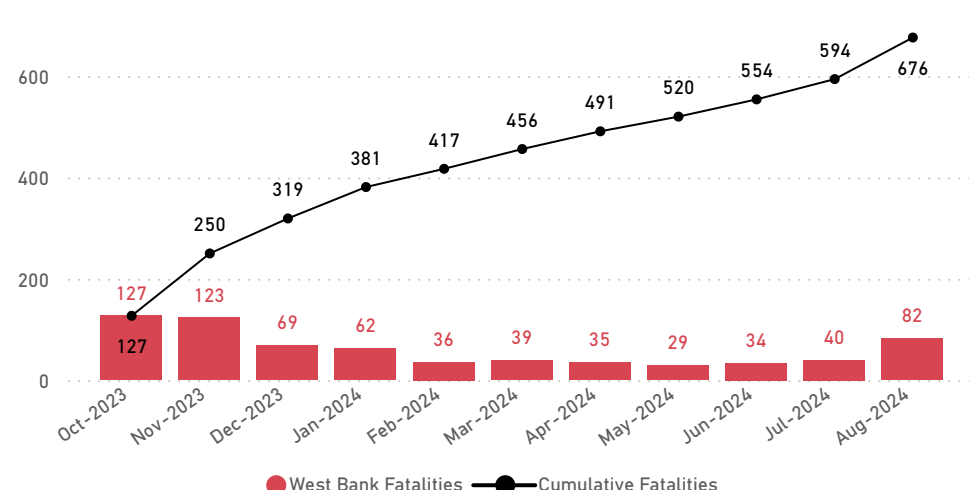
West Bank Fatalities breakdown



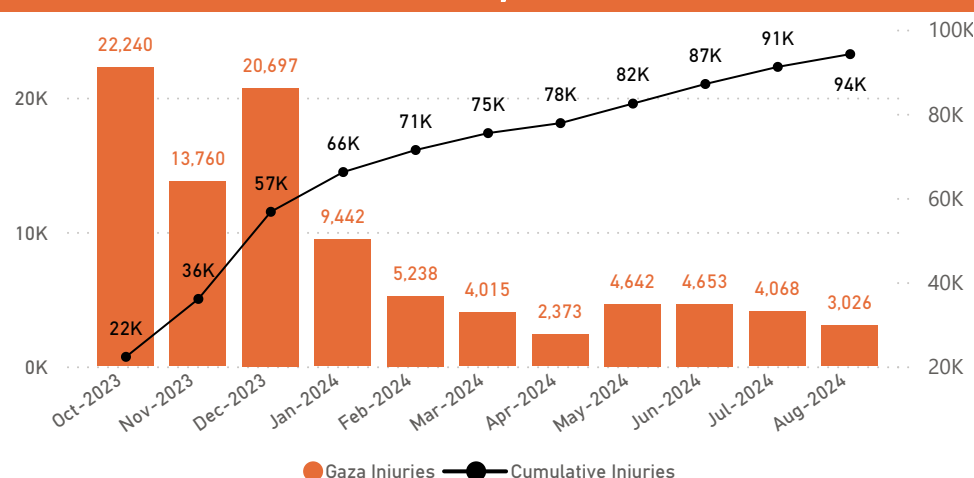
Gaza Fatalities



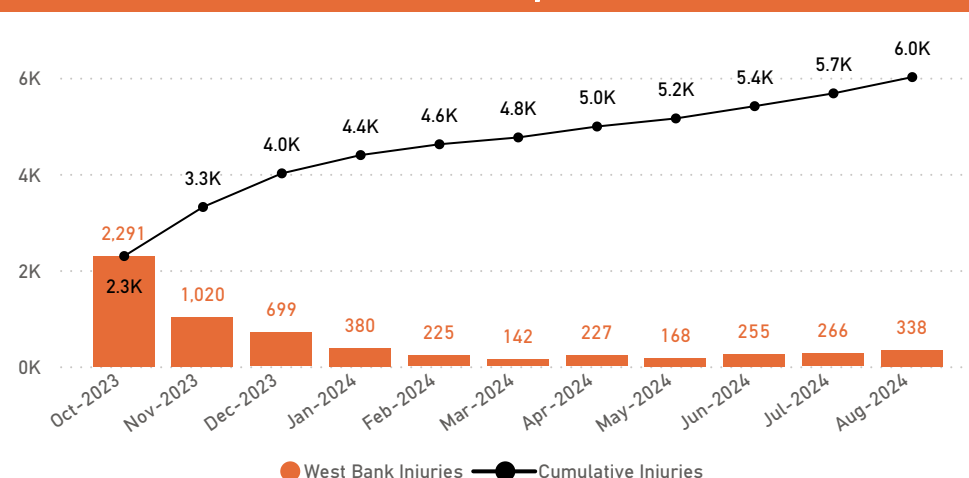
West Bank Fatalities



Gaza Injuries



West Bank Injuries



# Gaza Strip



People Reached

1.34 M

Supplies for (People)

298.1K

### Overview

The Health Cluster priorities in Gaza for August focused on ensuring access to essential health services focusing on primary and secondary healthcare services for acute and chronic cases including trauma, management of communicable and non-communicable diseases, SRH, rehabilitation and MHPSS. Partners engaged in activities to strengthen infection prevention and control in health facilities. Post the detection of variant poliovirus type 2 (cVDPV2) in the environment, efforts were put in motion by key partners to mobilize for a polio vaccination campaign.

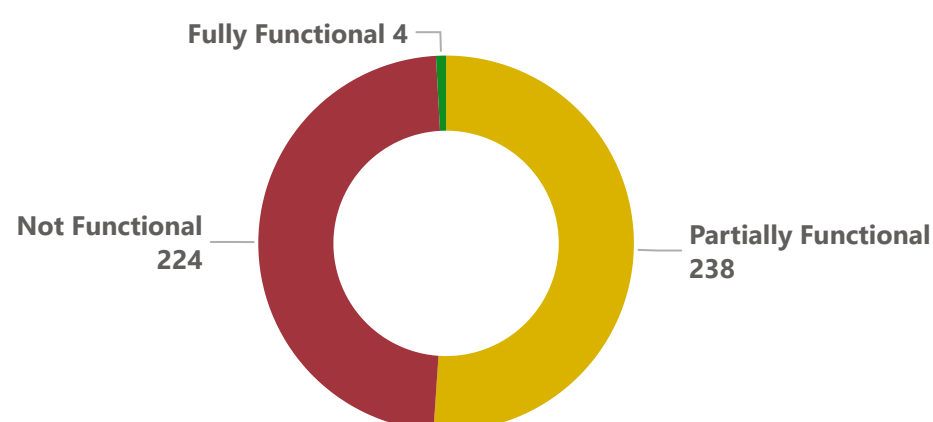


# Gaza Health Service Points

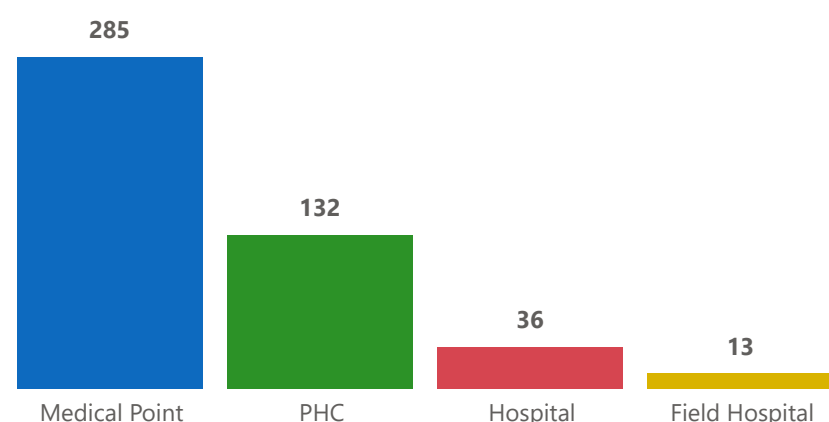
Health Cluster Bulletin - Aug 2024

Governorate	Fully Functional	Not Functional	Partially Functional	Total
<input checked="" type="checkbox"/> Khan Yunis	2	28	81	111
Medical Point		12	61	73
PHC		14	13	27
Hospital		2	4	6
Field Hospital	2		3	5
<input checked="" type="checkbox"/> Deir Al Balah	1	12	91	104
Medical Point		4	63	67
PHC		8	24	32
Hospital			3	3
Field Hospital	1		1	2
<input checked="" type="checkbox"/> Rafah	1	84	5	90
Medical Point		65	3	68
PHC		12	1	13
Field Hospital	1	4	1	6
Hospital		3		3
<input checked="" type="checkbox"/> Gaza		46	41	87
PHC		25	10	35
Medical Point		9	24	33
Hospital		12	7	19
<input checked="" type="checkbox"/> North Gaza		54	20	74
Medical Point		36	8	44
PHC		16	9	25
Hospital		2	3	5
<b>Total</b>	<b>4</b>	<b>224</b>	<b>238</b>	<b>466</b>

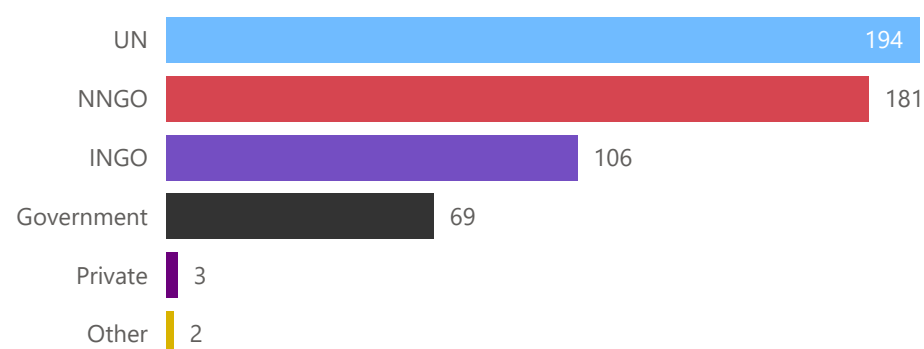
# of Service Points by Status



Health service points by Type



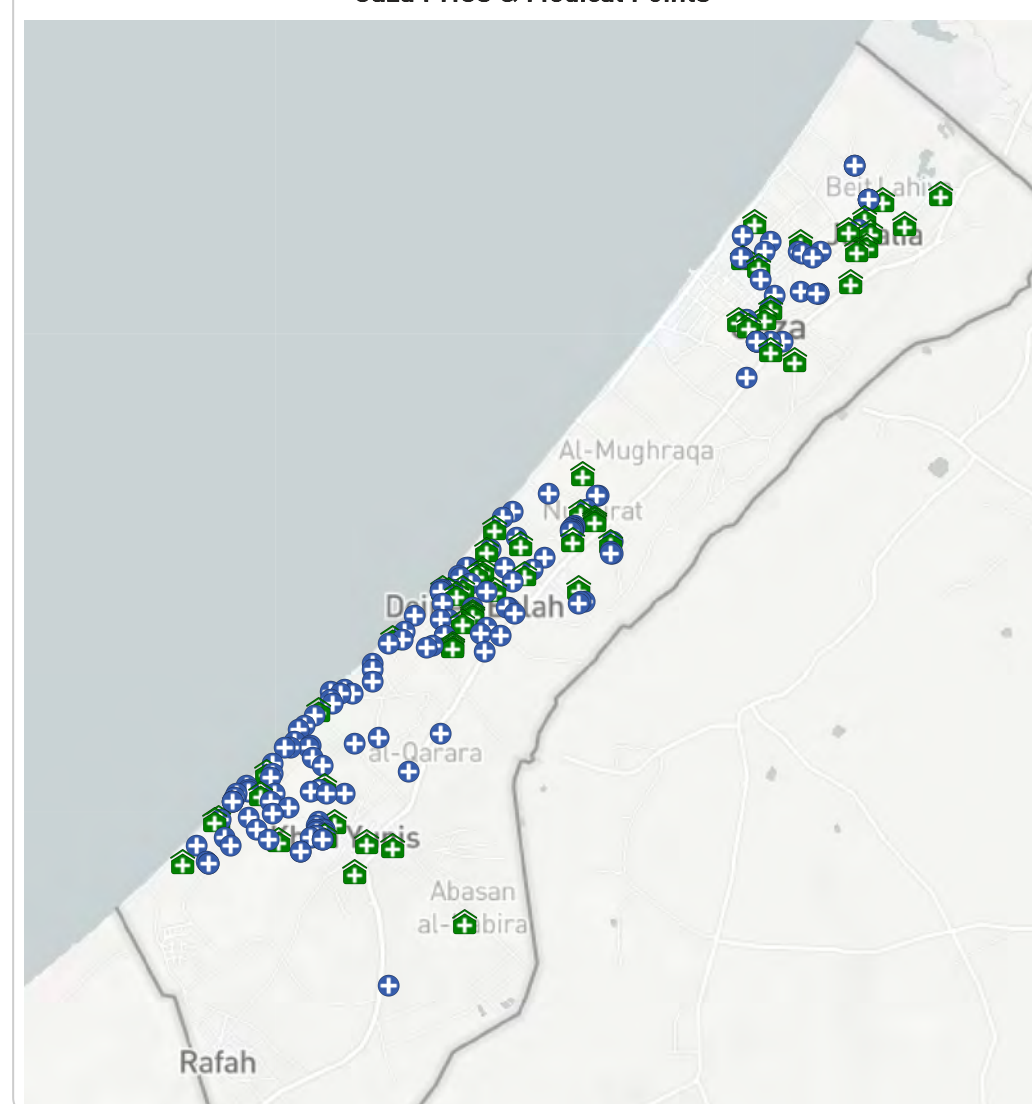
# of Service Units by Partner Category



Gaza Hospitals



Gaza PHCs & Medical Points



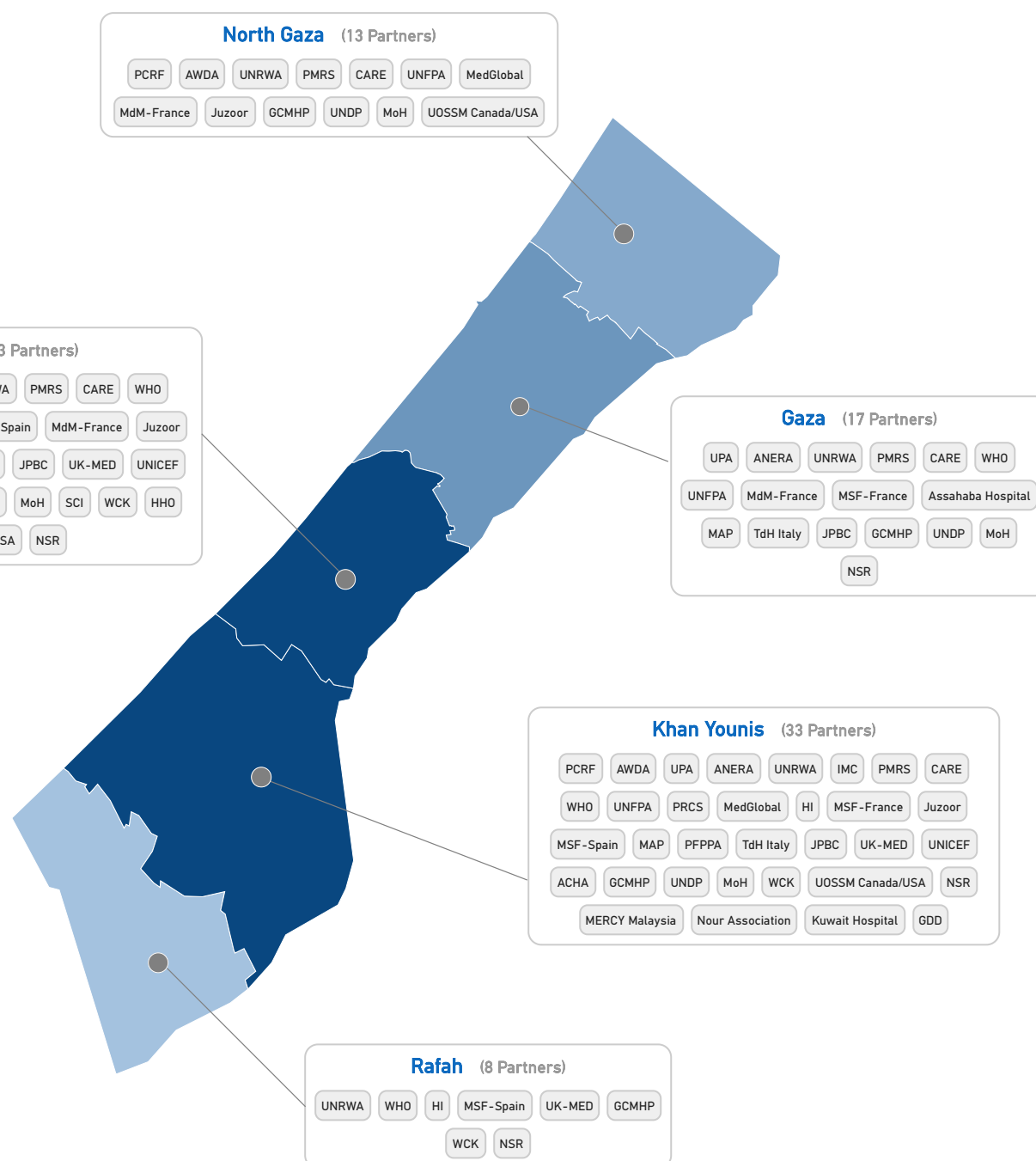
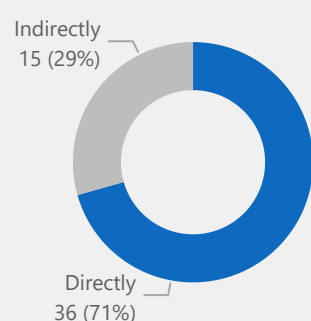
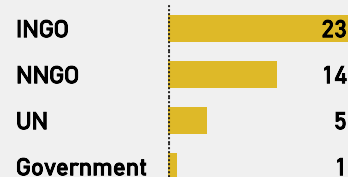
# Health Cluster Partners

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Active Partners

43



## List of Acronyms

Acronym	Organization Full Name
ACHA	Abdel Shafi Community Health Association
ANERA	Anera
Assahaba Hospital	Assahaba Hospital
AWDA	Al Awda Health and Community Association
BCD	Baitona association for Community Development
CARE	Care International
Caritas	Caritas Jerusalem
GCMHP	Gaza Community Mental Health Program
GDD	Gazze Destek Organization
HHO	Heroic Hearts
HI	Humanity and Inclusion
IMC	International Medical Corps
JPBC	Jerusalem Princess Basma Centre
Juzoor	Juzoor for Health and Social Development
Kuwait Hospital	Kuwait Hospital
MAP	Medical Aid for Palestinians
MdM-France	Médecins du Monde
MdM-Spain	Médicos del Mundo
MdM-Switzerland	Médecins du Monde - Switzerland
MedGlobal	MedGlobal
MERCY Malaysia	MERCY Malaysia
MoH	MoH

## List of Acronyms

Acronym	Organization Full Name
MSF-France	Médecins sans frontières-France
MSF-Spain	Médecins sans frontières-Spain
Nour Association	Nour Association/Help Me Live USA
NSR	National Society for Rehabilitation
PCRf	Palestine Children's Relief Fund
PFPPA	Palestinian Family Planning and Protection Association
PMC	Palestinian Medical Center
PMRS	Palestinian Medical Relief Society
PRCS	Palestine Red Crescent Society
Project HOPE	Project Hope
SCI	Save the Children International
TdH Italy	TdH Italy
UK-MED	UK-MED
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations International Children's Emergency Fund
UNRWA	United Nations Relief Working Agency
UOSSM Canada/USA	Union of Medical Care and Relief Organizations
UPA	United Palestinian Appeal
WCK	World Central Kitchen
WHO	World Health Organization

Priority needs

- Due to the poor living conditions and lack of access to basic amenities, there is increased number of people in need for access to primary and secondary healthcare services
- Need to strengthen disease surveillance to ensure early detection of outbreaks
- Quality monitoring of health services provided by partners

Achievements

- Mapping of non-trauma services discussed and a tool for mapping paediatric and neonatal services developed. Gaps identification and interventions to be discussed
- Partners have supported the restoration of some medical services at EGH
- Supported in the planning for the Round 1 Polio Vaccination Campaign
- Contingency plan for hospital evacuation in case of incursion discussed

Planned activities

- Further services mapping for adult internal medicine with a focus on complicated non-communicable diseases
- Partners will participate in Round 1 of Polio Vaccination Campaign
- Support to continuing expansion of health services at EGH and other hospitals that have been identified for support
- Explore restoration of health services at Al Khair Hospital
- Conduct assessment and monitoring visits to partner health service points
- Strengthen vertical and horizontal referral pathways between health facilities

Key challenges

- Severe supplies shortages affecting service delivery across different thematic areas of interventions
- Evacuation orders impacted people's access to health services

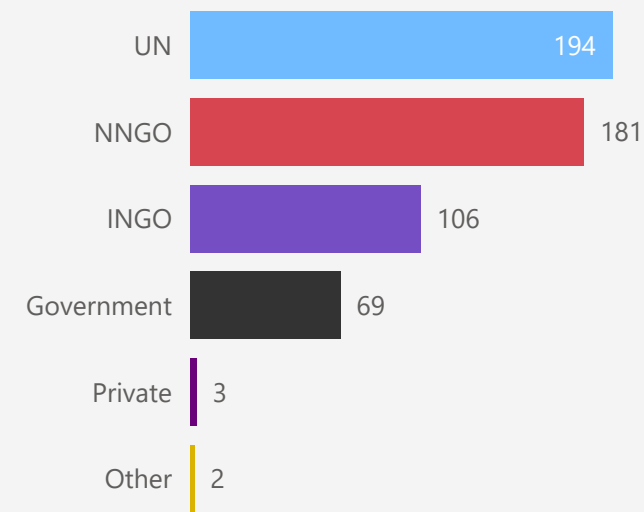
Key Asks

- Increase entry of health and logistics supplies to support service delivery
- Cessation of evacuation orders and displacements
- Support provision of specialised services

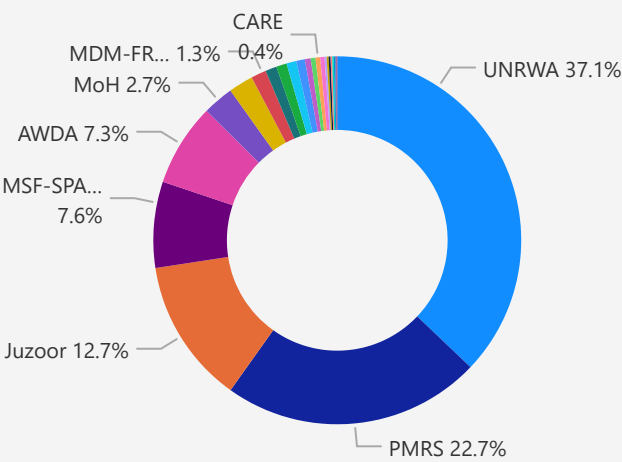
Health Consultations

Thematic Area	Number of Consultations
Primary Healthcare Service (Fixed/Mobile/Medical Points)	798.6K
Mental Health and Psychosocial Support	139.8K
Noncommunicable Diseases	129.3K
Trauma and Emergency Care	60.5K
Sexual and Reproductive Health including GBV. Maternal and neonatal care	59.9K
Multi-disciplinary rehabilitation	4.9K
Total	1.19 M

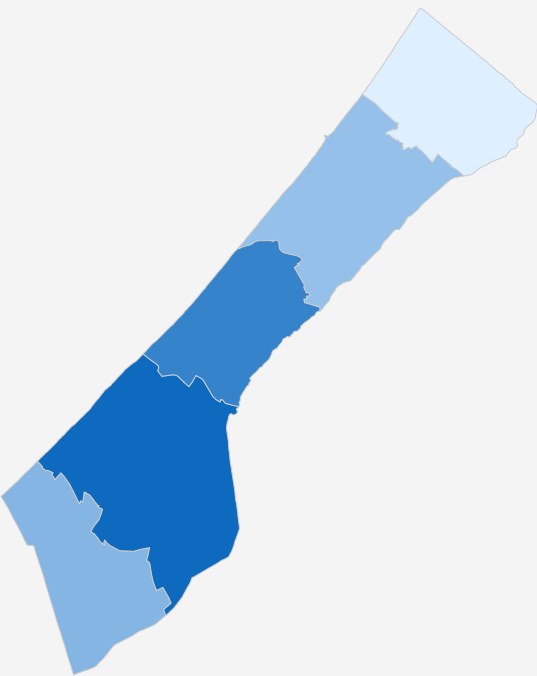
# of Service Units by Partner Category

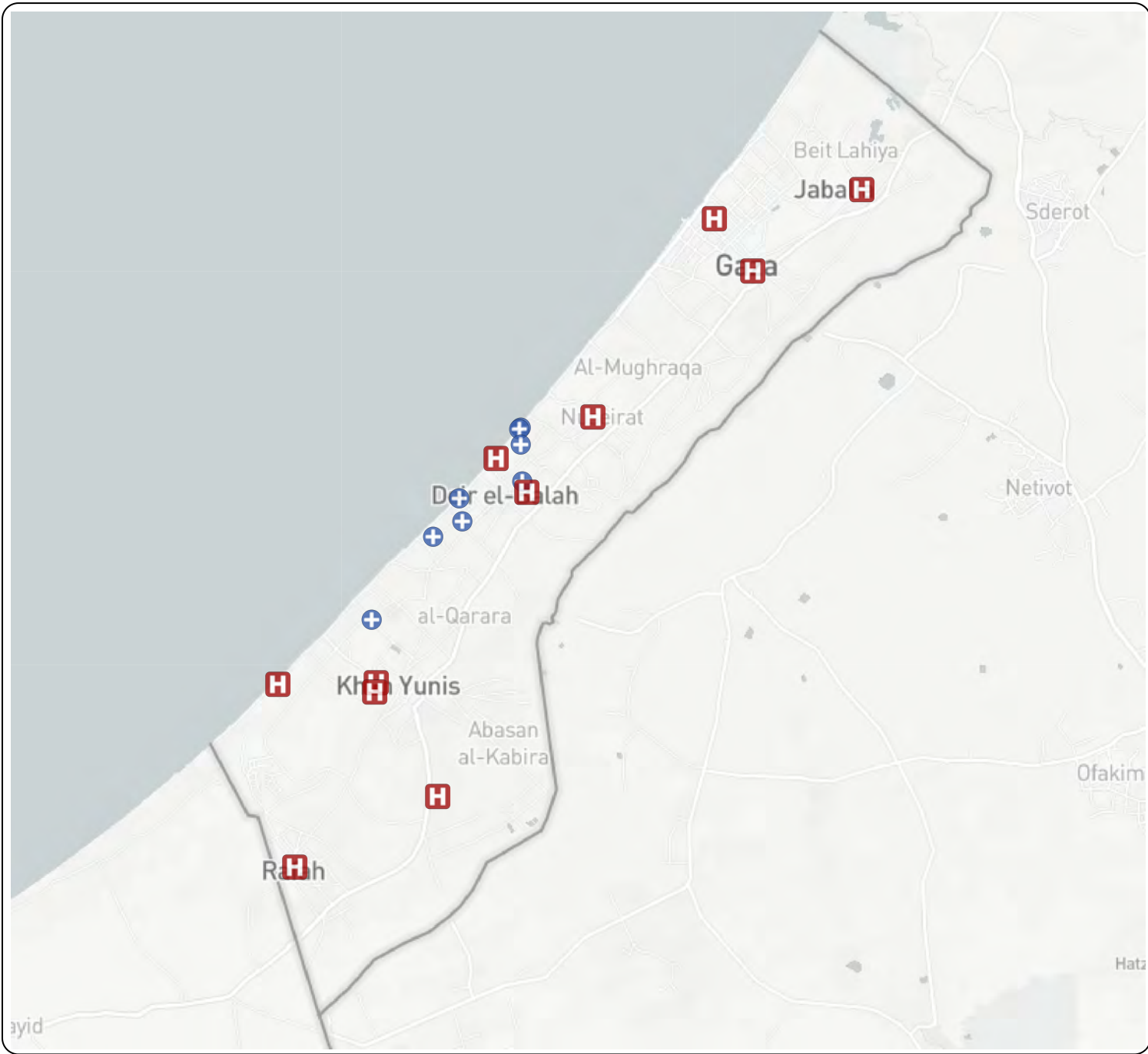


By Implementing Partner



Concentration of HSPs by Governorate





Priority needs

Need to deploy more EMTs to support the health workforce in case management

Achievements

- Deployment of the first MHPSS EMT in Nasser Hospital under the programme
- Deployment of two forward teams to plan ahead the implementation of two Type1 fixed clinics
- Finalized plan and budget for resumption of National EMT with imminent deployment to Shifa hospital (emergency department)
- On going plan to integrate 'NCD EMT' (currently focusing on hemodialysis) with breast cancer care
- Deployment of surgical EMT to newly resumed European Gaza hospital and ongoing distribution of teams across Gaza strip (North and South)

Planned activities

- To finalize deployment of National EMT to support the emergency department at Shifa Medical Complex
- Continue to focus on quality of medical care for EMTs
- Expansion of NCD program, particularly with breast cancer care

Key challenges

- Accessibility (lack of seats, now prioritized more for polio experts to support the vaccination campaign)
- Security and ongoing evacuations which presents lack of stability in activities with frequent suspensions, particularly for Type1 Mobile capacities

Key Asks

- Support localization strategy for national EMT
- Advocate for increase in international EMTs deployments

Total teams deployed

18

EMT international  
staff

63

Total consultations

185,479

Total surgeries

919

Total referrals

888

Total live birth

729

Total NCD patients

10,114

Total SAM cases

155

# Mental Health and Psychosocial Support

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## Priority needs

- Partners need capacity building on "Helping the Helpers" and evidence-based trauma-related scalable interventions
- Need for psychosocial support kits
- Need to set up spaces within primary health care facilities for delivery of mental health and psychosocial support services
- Increase supply of psychotropic drugs

## Achievements

- 45 Partners are reporting to the three clusters (Health, Protection and Education) providing MHPSS services covering all four layers of the MHPSS intervention pyramid
- A shipment of psychotropic medications, which will cover the needs of almost 15,000 people in need of psychotropics, was delivered into Gaza.
- The community needs assessment tool was finalised and the assessment will be conducted in September 2024. The assessment is aiming to estimate the extent of mental distress in the community, understand help-seeking behaviours and identify gaps in access to care.

## Planned activities

- Partners capacity assessment for specialized services to help in better planning and coordination to cover the gaps.
- A shipment of psychotropic medicines is planned to be delivered into Gaza.
- Expand the "helping the helpers" program in collaboration with the three clusters

## Key challenges

- Loss of safe spaces in the Gaza Strip to deliver services
- Continuous displacement of both MHPSS providers and beneficiaries
- The demand far exceeds the available human resources

## Key Asks

- Support of the Health Cluster to advocate for establishing mental health inpatient wards in functional hospitals

### Top Indicators

Sub-Activity	People Reached	Indicator Unit
Basic psychosocial support and psychological first aid for effected population	139.8K	Consultation
Provide essential psychotropic medicines to partners managing patients with mental health disorders	51.0K	Patient
Counselling for moderate and severe cases	2.1K	Person

### People Reached

206.4K

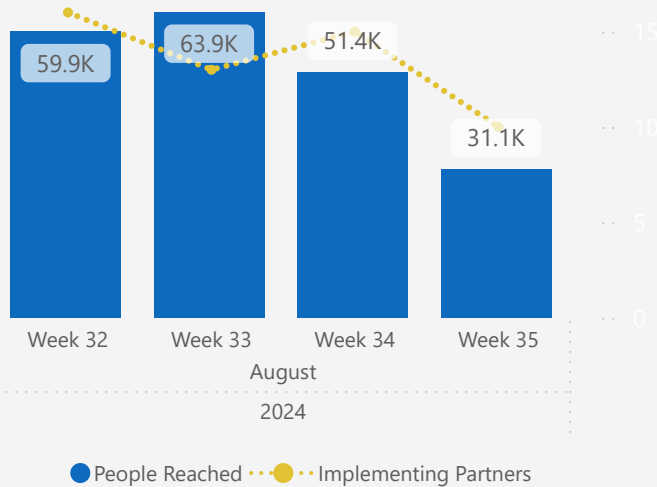
Implementing  
Partners

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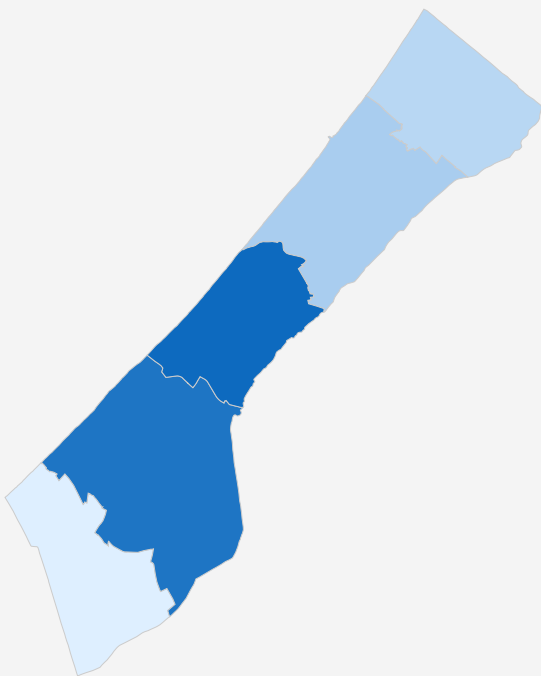
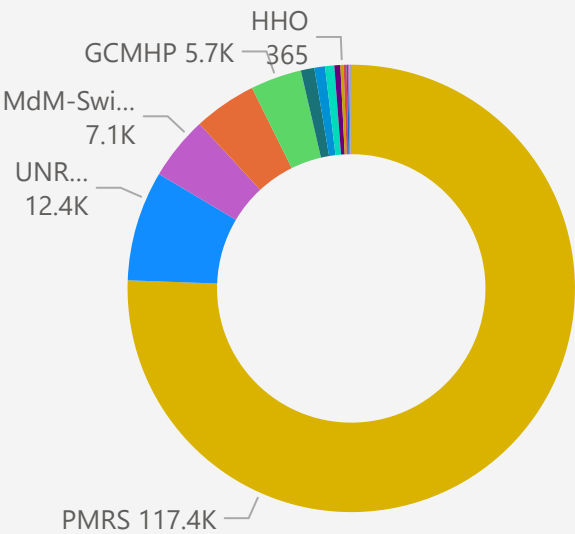
Supporting  
Organizations

11

### People reached weekly (including supplies)



### By Implementing Partner





# IPC and WASH in Public Health Emergencies

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## Priority needs

- Strengthen IPC/WASH within health facilities.
- Need for IPC capacity building, particularly in Northern hospitals where trained staff have relocated to the South.
- Reduce overcrowding in hospitals as it heavily impacts ability to implement IPC measures.
- Implement emergency IPC policies to improve basic practices in alignment with the current context and available resources.
- Conduct regular IPC assessments using tools tailored to the current context, as standard programmatic tools and SOPs may not be effective.
- Enhance wound care capacities by establishing and training a multidisciplinary mobile wound care team in each hospital. A concept note for this initiative has been developed.

## Achievements

- This working group is co-chaired by Health and WASH Clusters, a joint effort to tackle public health needs attributed to inadequate WASH and IPC interventions in community and health facilities. The TWG serves as the coordination platform with 60 partners from Health and WASH Clusters.
- Two meetings were held in August.
- 14 primary and secondary healthcare facilities (HCFs) in the north and south of Gaza were assessed using the IPC tool endorsed by the working group. The assessment focused on IPC practices within the health facility and the availability of IPC supplies and equipment. Following the assessment, IPC and WASH supplies were distributed to four hospitals (Kamal Adwan, Al Ahli, Al Aqsa and Nasser Hospital)
- 44 staff members from the central PRCS ambulance hub were trained on basic IPC practices. This training is crucial for safeguarding staff against various infections, especially those transmitted through blood and respiratory routes. It is equally important for protecting injured and trauma patients, particularly in Gaza's current situation, by preventing wound contamination and limiting the spread of infections during transportation
- 35 IPC focal points and cleaners deployed to priority HCFs.

## Key challenges

- Medical waste disposal in the community is a significant threat.
- Persistent disruptions in the supply chain for environmental cleaning and hand hygiene items.
- Poor coordination among IPC stakeholders leading to duplication and inconsistencies.
- Lack of clear discharge criteria is contributing to overcrowding in hospitals.
- Limited IPC capacities in North Gaza hospitals.

## Planned activities

- Develop a detailed work plan based on the assessment findings for each hospital.
- Implement an intervention package to integrate IPC into other outbreak response pillars.
- Establish IPC/WASH committees, chaired by the respective Hospital/PHC Director.
- Support the MoH in implementing the mobile team wound care initiative.
- Collaborate with the WASH Cluster and RCCE to enhance IPC in camps and shelters.
- Implementing emergency Standard Operating Procedures (SOPs).
- Regular monitoring of specific IPC indicators.
- Providing guidance for optimal resource utilization.
- Enhancing coordination between partners.
- IPC capacity building.
- Improving the supply chain of IPC materials.

## Key Asks

Scale up procurement and entry of critically needed IPC supplies through various entry points.

Priority needs

- Lack of assistive devices to support those in need
- Urgent need to strengthen prosthesis programs to guarantee service quality and adherence to standards.

Achievements

- A committee for retrospective data collection on amputations and spinal cord injuries was established in early August. So far, 800 amputees have been registered and scheduled for comprehensive rehabilitation assessments.
- The first dedicated rehabilitation clinic has been integrated within one of the primary healthcare centre to enhance service delivery.
- A robust referral system has been established to facilitate continuity of rehabilitation care from secondary facilities to specialized rehabilitation centers based on individual needs.
- Final approval has been secured on the estimated injury data. A press release regarding this data is scheduled for publication next week.

Planned activities

- A workshop is scheduled for next week to discuss the implemented referral pathway and tools, as well as to address the technical aspects of report generation.
- A Prosthetics and Orthotics (P+O) technical working group will be formed under the Rehabilitation Task Force and MoH to develop a sustainable strategic plan for artificial limb provision.
- Estimated injury numbers derived from Emergency Medical Teams MDS will be published as a reference about the situation in Gaza.

Key challenges

- Lack of assistive devices.
- Unavailability of secondary dedicated rehabilitation services (most of old trauma cases in highly needs for this kind of service).

Key Asks

- Securing the entry of assistive devices into the Gaza.
- Support to enhance the health information system, particularly in the collection and analysis of rehabilitation data and in

Top Indicators

Sub-Activity	People Reached	Indicator Unit
Provide occupational therapy (OT), physical therapy (PT), speech therapy (ST), nursing, etc	4.9K	Consultation
Provide assistive devices to persons with disabilities	104	Person

People Reached

5.0K

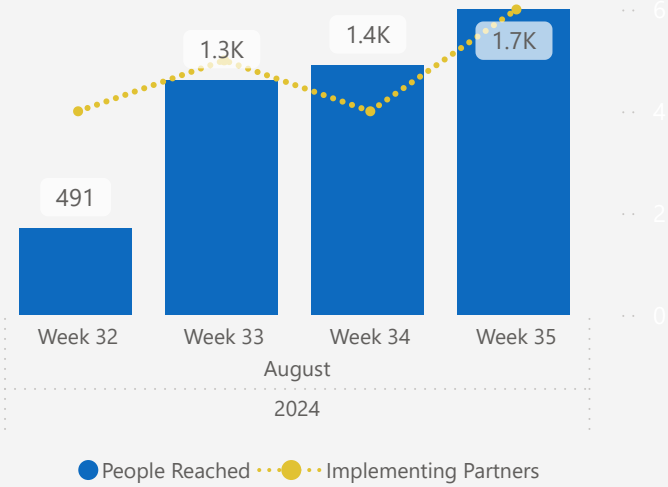
Implementing Partners

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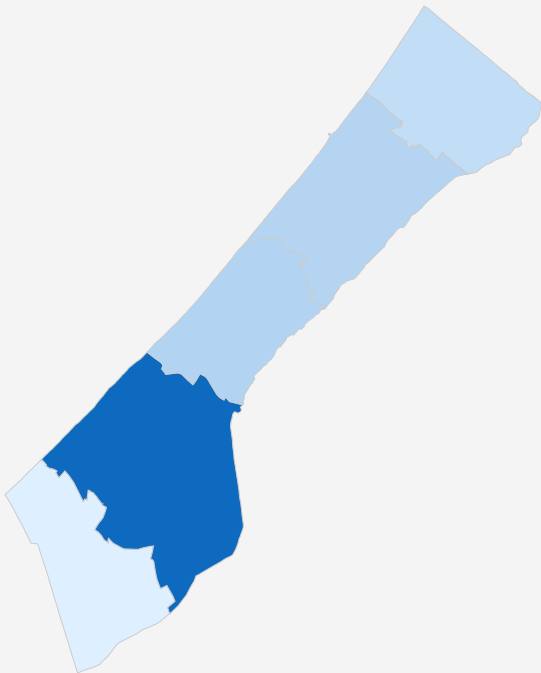
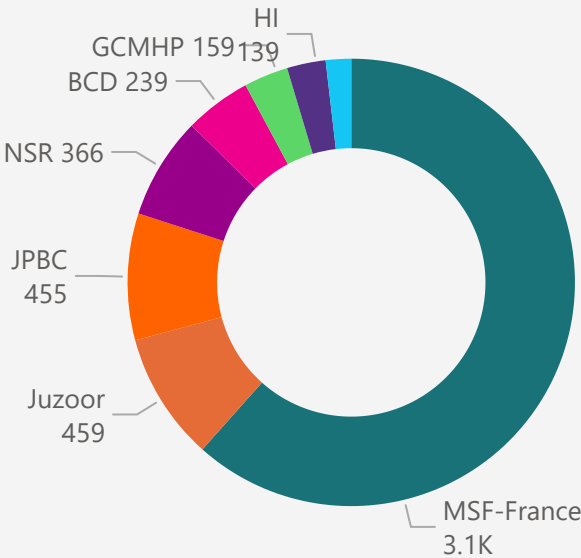
Supporting Organizations

1

People reached weekly (including supplies)



By Implementing Partner





# Sexual and Reproductive Health

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## Priority needs

- There are about 500,000 women 15-49 years old in the Gaza Strip, all with specific sexual and reproductive health needs and rights, which are challenged on daily basis due to the current situation.
- Need for increased access to sexual, reproductive, maternal and neonatal health supplies.
- Safe and private spaces to provide SRH services and breastfeeding support are badly needed.
- Safe childbirth infrastructures, supplies and referral network.
- Material, technical and mental support to SRH health workers

## Achievements

- 12 midwives have received refresher training on urgent deliveries and basic newborn resuscitation (to deal with emergencies).
- 50 midwives have been deployed in medical points to ensure integration of SRH services in primary healthcare services.
- 26 health professionals have been trained in providing holistic care for GBV survivors, this is in addition to the 26 already trained in July. For the remainder of the year, 125 more health professionals will be trained.
- Oxytocin, anti-D and blood transfusion kits were delivered into Gaza and will cover about 10,000 deliveries and obstetric complications, including 1,400 blood transfusions in the upcoming months. Hospital levels and outpatient kits for family planning and STIs were also distributed.
- 2,700 postpartum kits (PPK) were distributed in the northern governorates. A guidance note on PPK composition, distribution criteria and modalities has been finalised.
- 10 barks to the SRHWG partners, to manage severe postpartum haemorrhage.

## Planned activities

- SRH-focused outpatient service mapping is ongoing. The group is also launching a quality of care taskforce for SRHR.
- 18 additional midwives for the urgent delivery preparedness and SRH primary care services expansion have been identified for training and deployment, expanding this project to the North of Wadi Gaza.
- A joint study by partners on the impact of the war on maternal health will be launched. ToR finalized.
- An integrated interagency intervention (health, protection, education) is planned in Asdaa camp.
- The minimum set of indicators on health outcomes and services agreed among all members of the SRHWG.
- A collaboration with the IYCF TWG under the Nutrition Cluster to improve support to breastfeeding and nutritional support for women and girls in most need.
- CVA support for particularly vulnerable new mothers is under preparation.

## Key challenges

- Evacuation orders continued to disrupt provision of SRH services.
- Demand for contraception and treatment for STIs/RTIs are not met due to shortage of supplies.
- Specific equipment for SRH such as reusable kits for normal deliveries and caesarean sections (forceps, scalpels, autoclaves) are denied entry as labelled as potentially dual used items.
- Poor hygiene, overcrowding and lack of basic items expose population to deterioration of their reproductive health and increased risks of GBV and exploitation.
- Due to security and costs of fuel access to timely and adequate care for reproductive health is hindered, whilst providers in hard to reach areas (ex Eastern Khan Younis, Northern Middle Area) are increasingly withdrawing due to security concerns.

## Key Asks

- Unimpeded access of medical supplies and equipment for SRH services (kits 6B, kits 11B, TESK kits, foetal Doppler, CTG), generators, and spare parts to ensure continuous functionality of SRH services in the North and the South of Gaza is the most pressing need.
- Safety of health personnel in all health facilities as they provide essential care for women and girls.
- Support with referral network (ambulances, fuel, data management, communication) is needed.
- Support for level 3 and level 4 NICU is needed, particularly within the shrinking in medevac opportunities.
- Emergency medical teams and supplies for reproductive cancers need to be prioritised.

### Top Indicators

Sub-Activity	People Reached	Indicator Unit
Postpartum, maternal and neo-natal care	40.1K	Consultation
Antenatal care	19.6K	Consultation
Provide SRMNH supplies to partners providing SRMNH services	10.4K	Person

### People Reached

102.0K

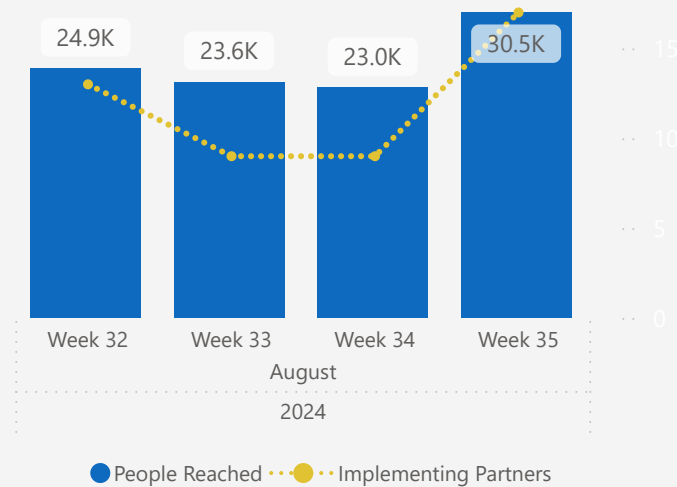
Implementing  
Partners

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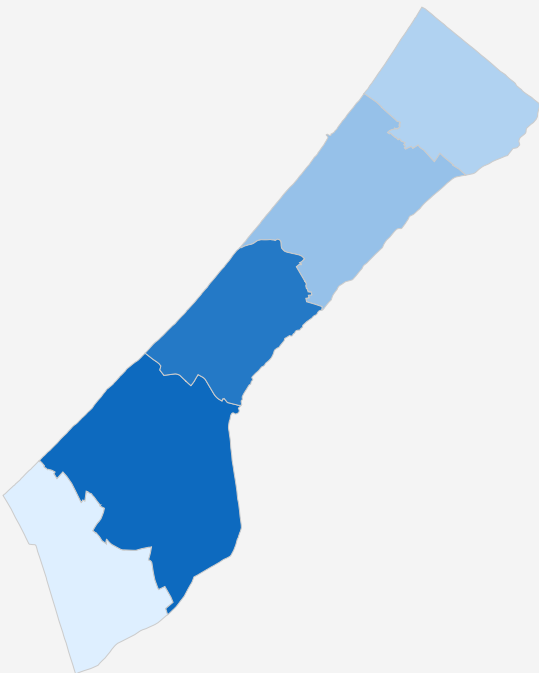
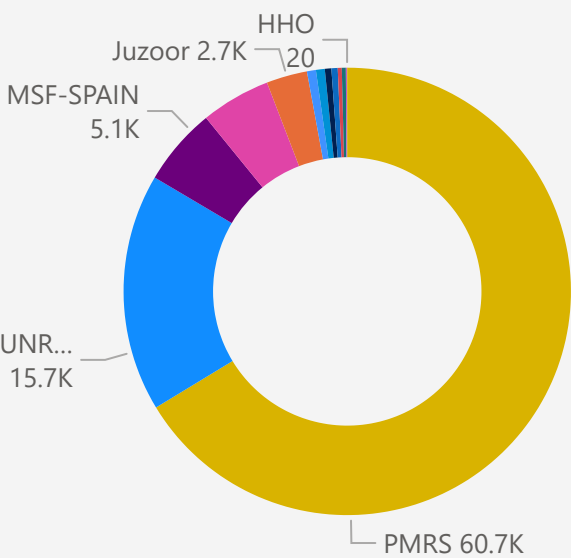
Supporting  
Organizations

11

### People reached weekly (including supplies)



### By Implementing Partner



# Trauma and Emergency Care

Health Cluster Bulletin - Aug 2024

## Priority needs

- Respond to numerous incidents of mass casualties
- Trauma, surgical and orthopedic supplies
- Strengthen capacity of emergency rooms at PHC level

## Achievements

- Enhanced Collaboration and Coordination: The TWG facilitated better field-level coordination among various actors, including the WHO trauma team, leading to a more unified approach in trauma care.
- Bed Expansion at Nasser Hospital: The process to expand bed capacity at Nasser Hospital has commenced, which will significantly increase the hospital's ability to accommodate and treat trauma patients. Bed expansion by 105 beds.
- Active Referral Pathway: A robust referral system has been established between hospitals, ensuring effective and timely patient transfers, particularly during mass casualty incidents.
- Active Mass casualty management Plans: Comprehensive plans for mass casualty management are now actively in place, improving preparedness and response during large-scale emergencies.
- Improved Emergency Services: There has been a notable enhancement in the quality of emergency services at hospitals, including better availability of beds, mattresses, essential medications, and dressing materials, thus ensuring more effective treatment for emergency cases.

## Planned activities

- Based on recent technical discussions with active partners and focusing on key challenges within the trauma care pathway, which align with WHO's operational strategy and partner plans, the following priorities have been established:
- Establish a new Trauma Stabilization Point (TSP) in Deir Balah.
  - Expand the capacity of field hospitals and MoH hospitals.
  - Enhance the quality of wound care at both PHC and hospital levels to reduce the rate of wound infections, particularly in post-operative care.
  - Facilitate the delivery of trauma supplies to all partners based on their needs.
  - Integrate Emergency Rooms at the PHC level to become an active component of the current trauma service delivery system.

## Key challenges

- The high liquid status of this war there were many challenges coming on the table during last month's meeting.
- Supply Access Issues: There are ongoing difficulties in securing access for essential supplies through the KS crossing into Gaza, impacting the availability of necessary resources for trauma care.
- Medical Supply Distribution: Obstacles in coordinating and facilitating missions have hindered the distribution of medical supplies to the north, affecting the readiness and capabilities of hospitals there.
- Infection Control Challenges: Despite recent improvements in the availability of IPC materials, maintaining adequate cleaning and hygiene standards in the Emergency Department and Operating Theatres remains a significant issue.
- Need for Specialized Surgeons: The type of explosive injuries being treated requires highly specialized surgical skills, which are currently in short supply, impacting the quality of surgical care.
- Mental Health of Staff: The mental health of the national team working in hospitals is under severe strain, which is affecting their performance and overall effectiveness in providing care.

## Key Asks

- Facilitate and support the procurement and access of critically needed supplies items through various entry points.
- Enhance and support the quality of comprehensive wound management, addressing both supplies and medical management.
- Address specialized surgical and reconstructive needs for acute injuries
- Ensure a more effective pathway for MEDEVAC.

People Reached

65.4K

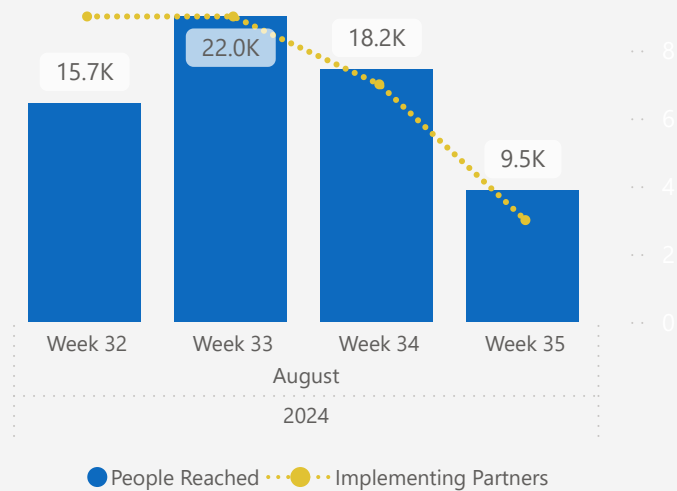
Implementing  
Partners

11

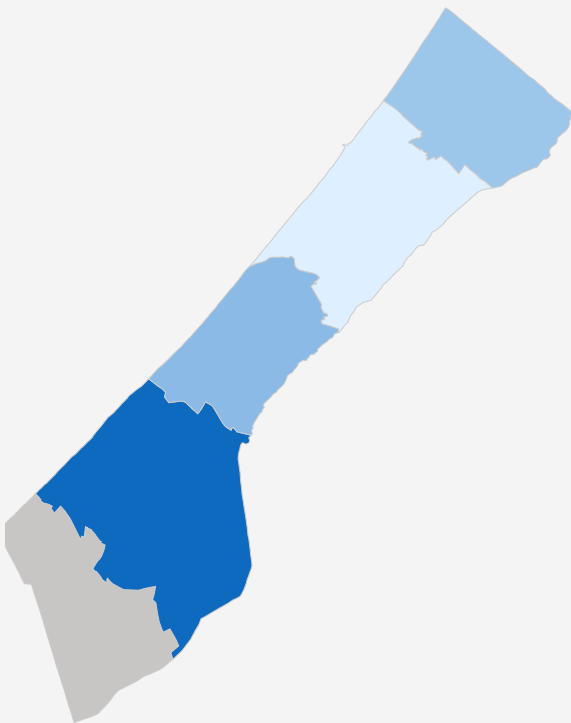
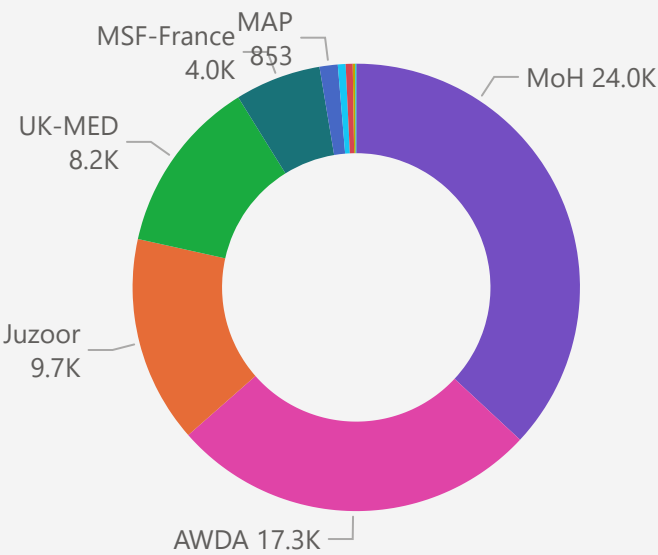
Supporting  
Organizations

2

## People reached weekly (including supplies)



## By Implementing Partner



## Top Indicators

Sub-Activity	People Reached	Indicator Unit
Emergency and trauma care in emergency departments, PHCs	60.5K	Consultation
Surgical care	4.4K	Intervention
Provide trauma and emergency care supplies to partners	472	Person



# West Bank



People Reached

121.5K

Supplies for (People)

36.2K

### Overview

The Health Cluster priorities in the West Bank for August focused on supporting to trauma and emergency care cases as a result of numerous military operations particularly targeting refugee camps and major cities in north West Bank, supporting public health facilities who are struggling due to the fiscal crisis and ensuring access to essential health services for marginalized communities in Area C.



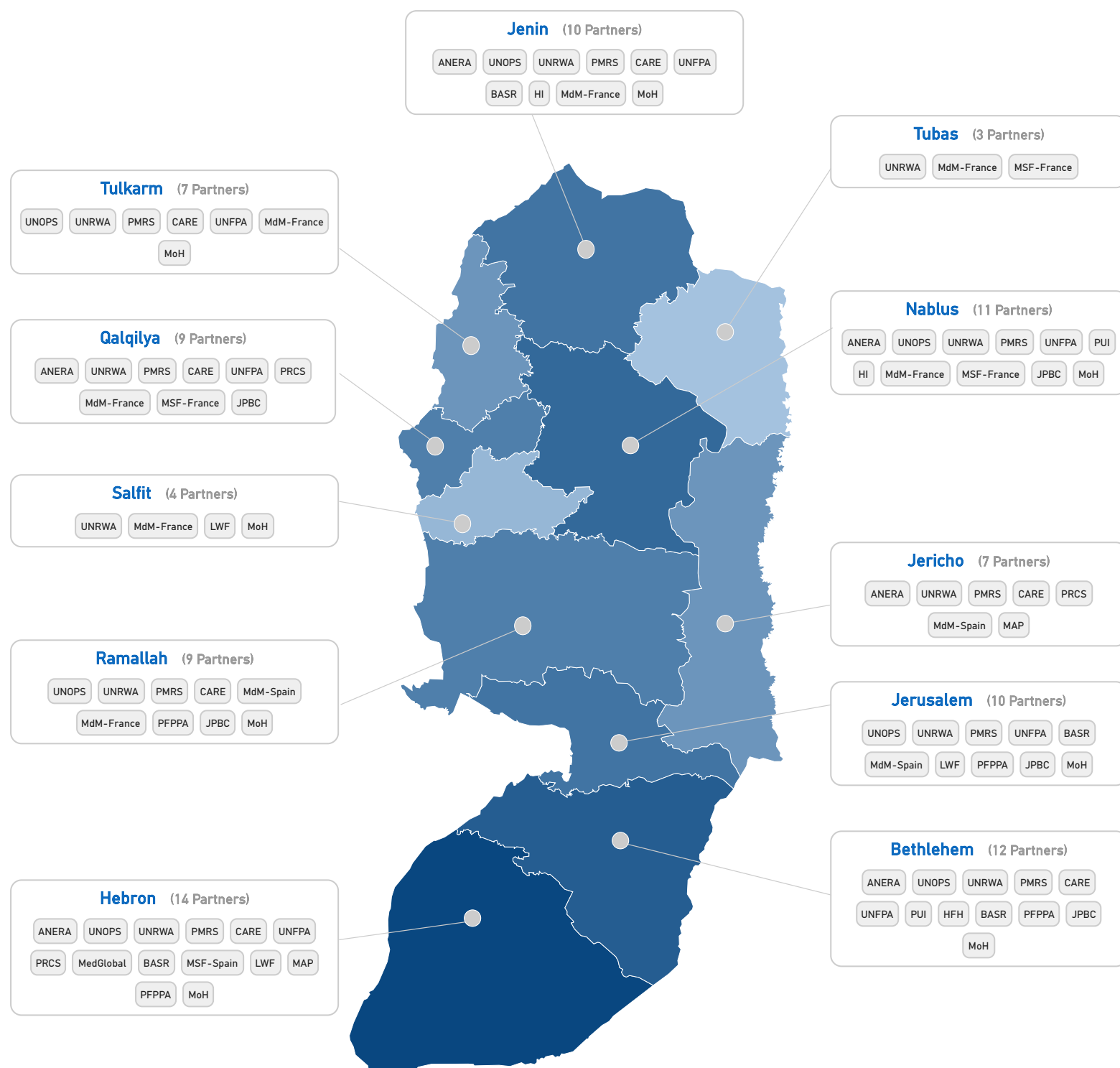
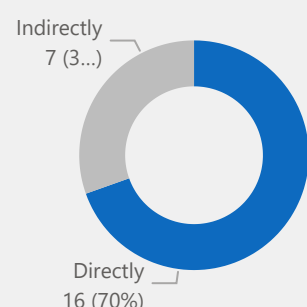
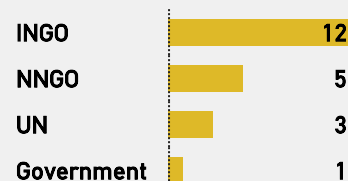
# Health Cluster Partners

Health Cluster Bulletin - Aug 2024



Active Partners

21



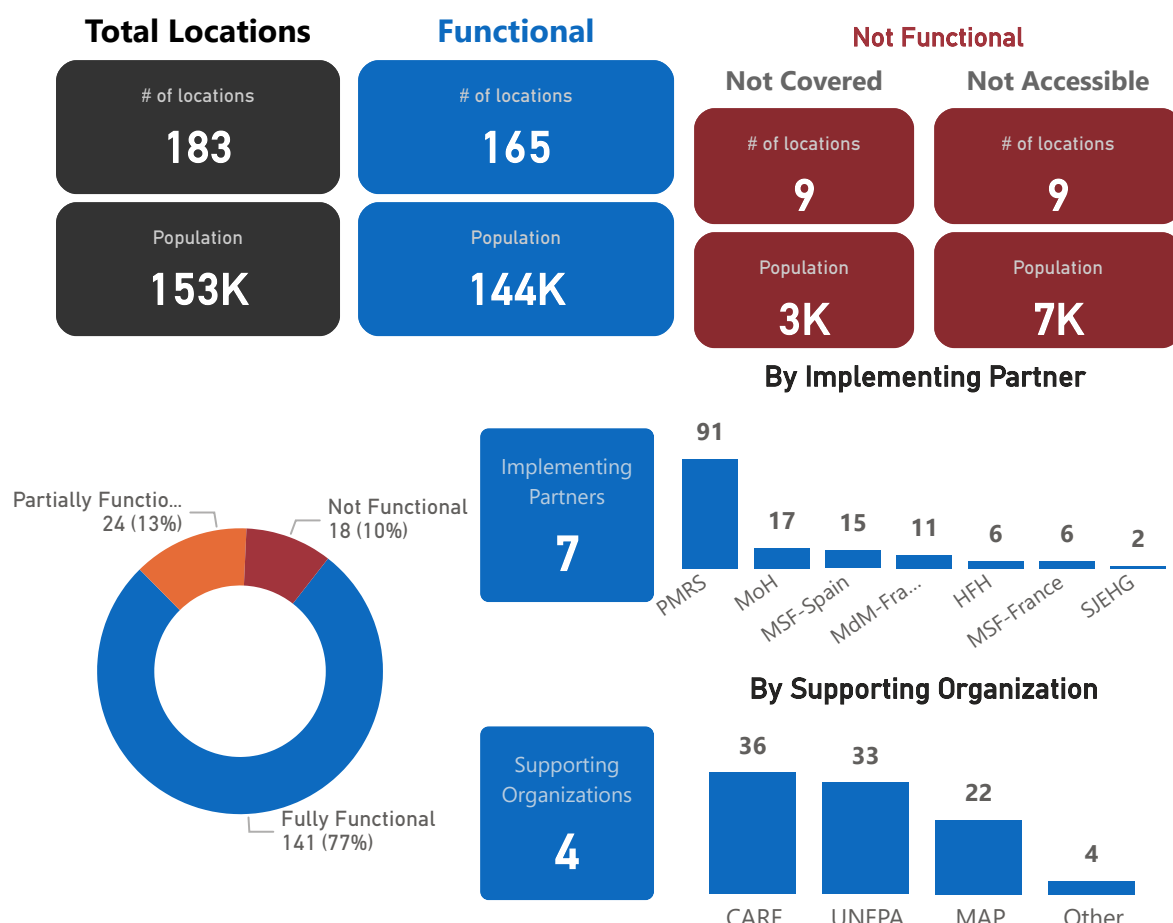
## List of Acronyms

Acronym	Organization Full Name
ANERA	Anera
BASR	Bethlehem Arab Society for Rehabilitation
CARE	Care International
HFH	Holy Family Hospital
HI	Humanity and Inclusion
JPBC	Jerusalem Princess Basma Centre
LWF	Augusta Victoria Hospital - Lutheran World Federation
MAP	Medical Aid for Palestinians
MdM-France	Médecins du Monde
MdM-Spain	Médicos del Mundo
MedGlobal	MedGlobal
MoH	MoH
MSF-France	Médecins sans frontières-France
MSF-Spain	Médecins sans frontières-Spain
PFPPA	Palestinian Family Planning and Protection Association
PMRS	Palestinian Medical Relief Society
PRCS	Palestine Red Crescent Society
PUI	Premiere Urgence Internationale
UNFPA	United Nations Population Fund
UNOPS	United Nations Office for Project Services
UNRWA	United Nations Relief Working Agency



# West Bank Mobile Clinics

Health Cluster Bulletin - Aug 2024



## Achievements

- There are 14 active mobile teams providing services to 140 locations across Area C. - Specialized mobile teams continue to provide rehabilitation, breast cancer screening, eye care, and SRH services. The specialized clinics visit a location based on need.

## Key Asks

- More sustainable fund required to keep the service for more wide range of beneficiaries and longer time.

## Key challenges

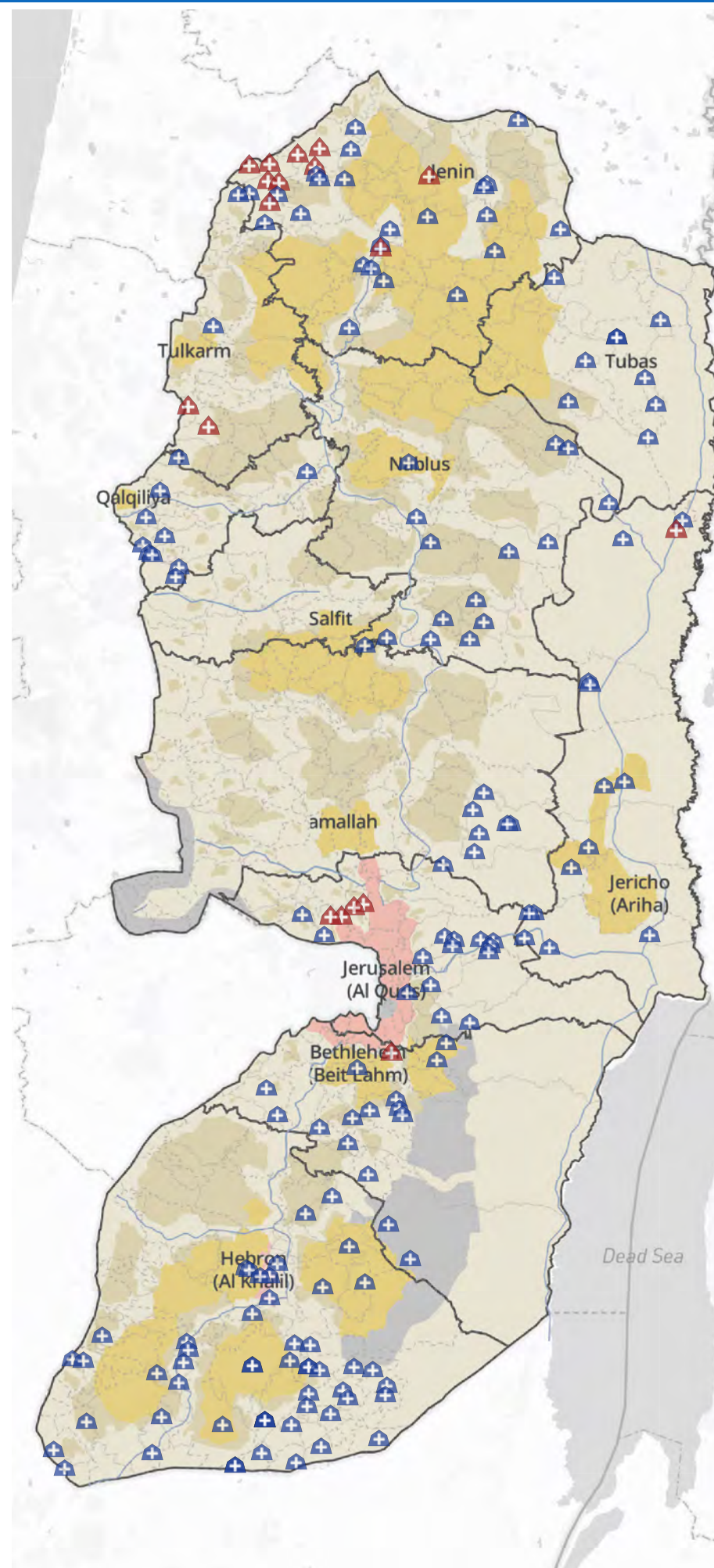
- Movement restrictions by the Israeli occupation forces
- Limited funding for mobile clinic response activities which has resulted in 9 communities without access.

## Planned activities

- Advocate for access for mobile teams to 8 locations that are currently inaccessible.
- Continue coordination and communication with potential partners who would be interested to run/support deployment of at least 2 mobile clinics to fill the gap.

## Priority needs

- 153,000 people in Area C depend on mobile clinics to access essential health services



## West Bank Communities with Mobile Clinics

Status	Fully Functional		Not Functional		Partially Functional		Total	
Governorate	# of locations	Population	# of locations	Population	# of locations	Population	# of locations	Population
Bethlehem	13	32,187	1	129	1	163	15	32,479
Hebron	44	25,264			8	11,052	52	36,316
Jenin	23	18,891	10	7,287			33	26,178
Jericho	11	9,647	1	273			12	9,920
Jerusalem	23	5,346	4	494			27	5,840
Nablus	12	6,076			4	16,086	16	22,162
Qalqiliya	7	5,431			3	6,037	10	11,468
Ramallah	5	3,083					5	3,083
Tubas	1	258			8	3,615	9	3,873
Tulkarm	2	554	2	1,540			4	2,094
<b>Total</b>	<b>141</b>	<b>106,737</b>	<b>18</b>	<b>9,723</b>	<b>24</b>	<b>36,953</b>	<b>183</b>	<b>153,413</b>

# Mental Health and Psychosocial Support

Health Cluster Bulletin - Aug 2024

## Achievements

- In an effort to improve MHPSS interventions and coordination at governorate level, a focal point for each governorate was selected.
- Capacity building on emergency response MHPSS interventions - There is one psychiatric hospital and 14 community mental health centres, who provide specialized mental health services. Partners and the Government provide MHPSS covering all the 4 layers. - One technical working group meeting was held during the month.

## Key Asks

- Better MHPSS coordination across clusters in order to strengthen response.

## Key challenges

- Inter-cluster coordination among partners implementing MHPSS activities still a challenge.
- Gaps remain in partners capacity mapping.
- Difficulty in movement between cities, and lack of payment of public civil servants is affecting service delivery
- Lack of salaries for public civil servants
- Limited number of mental health specialized workers
- Weak referral system

## Planned activities

- Planned capacity building for partners on emergency interventions.
- Workshop on Psychological First Aid.
- Training on Ensure Quality in Psychological support (EQUIP) tool.

### Top Indicators

Sub-Activity	People Reached	Indicator Unit
Basic psychosocial support and psychological first aid for effected population	7.6K	Consultation
Counselling for moderate and severe cases	937	Person

People Reached

10.9K

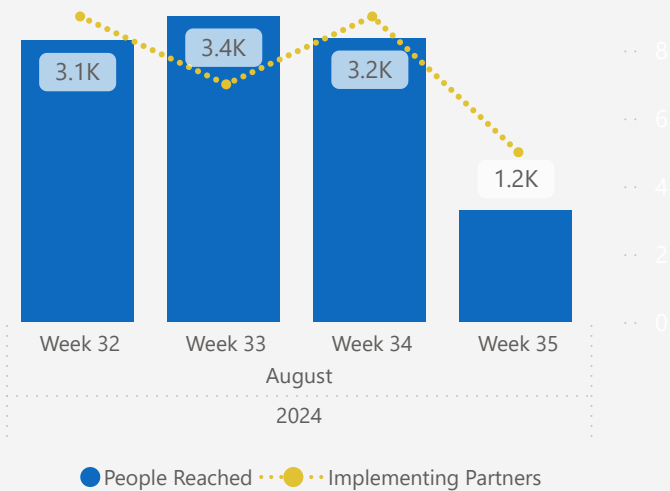
Implementing  
Partners

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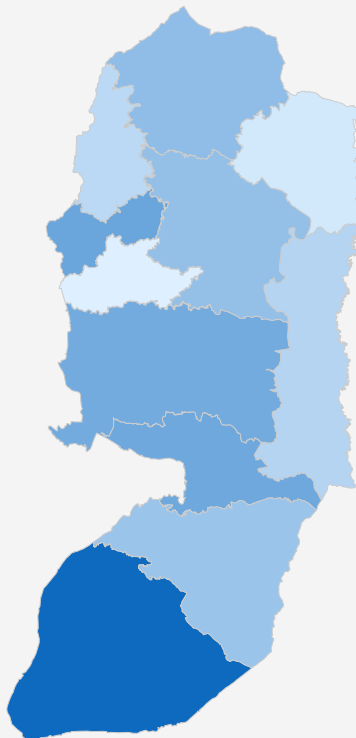
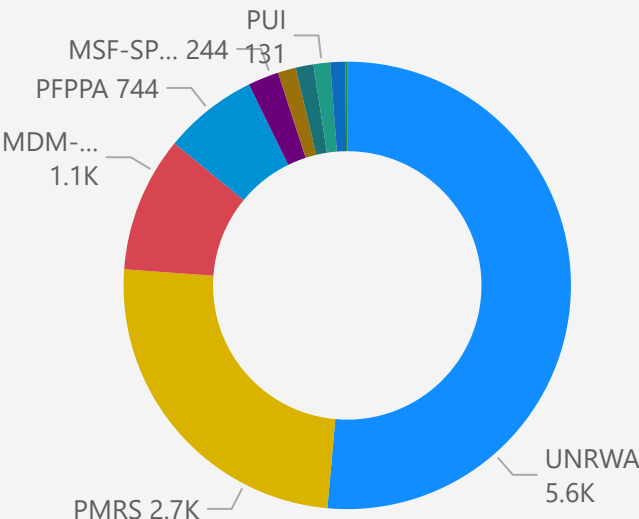
Supporting  
Organizations

3

### People reached weekly (including supplies)



### By Implementing Partner





# Trauma Technical working group

Health Cluster Bulletin - Aug 2024

## Achievements

- 65 community volunteers trained in bleeding control and first aid. They received trauma bags/ kits which can support the stabilization of 200 cases of injured.
- Trauma emergency supplies distributed to key primary healthcare centres and hospitals.
- Two field trauma posts have been established to support the management of the injured.

## Key Asks

- Advocacy for the cessation of military operations
- Unhindered access for emergency medical teams
- Cease damaging infrastructure surrounding health facilities

## Key challenges

- Lack of access: During military operations access of emergency medical services teams is impeded
- Financial Crises: The healthcare system is under severe financial pressure, limiting resources and capabilities.
- Staff Shortages: There is a significant shortage of medical staff, which affects the quality and availability of care.
- Inadequate Facilities: Many healthcare facilities are not equipped to handle the volume and severity of trauma cases.
- Coordination: There is a need for better coordination among various healthcare providers and international organizations.
- Emergency Preparedness: The lack of a comprehensive national emergency and trauma care plan hampers effective response to emergencies

## Planned activities

- Mapping of ambulance services and trauma referral pathway
- Review prepositioned stocks

### Top Indicators

Sub-Activity	People Reached	Indicator Unit
Emergency and trauma care in emergency departments, PHCs	1.3K	Consultation
Train community volunteers on first aid techniques	456	Community volunteer

### People Reached

1.8K

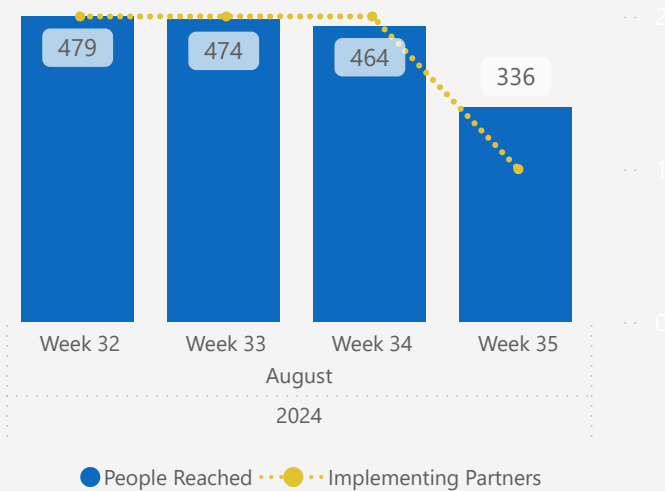
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Partners

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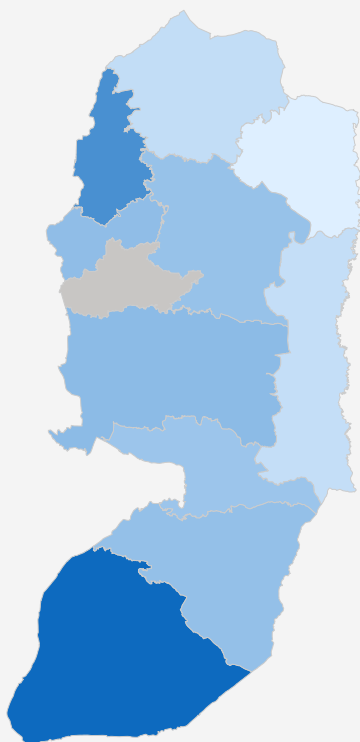
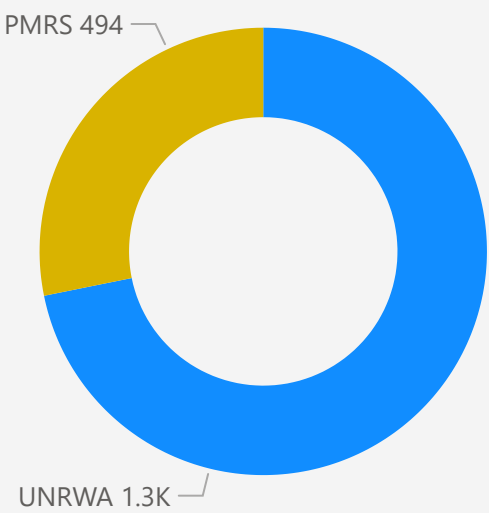
Supporting  
Organizations

3

### People reached weekly (including supplies)



### By Implementing Partner



# Multidisciplinary Rehabilitation Task Force

Health Cluster Bulletin - Aug 2024

## Achievements

- An effective referral system has been established amongst partners.
- 181 households in Jenin, Nablus, Tulkarm, and Hebron werecomprehensively assessed and they received assistive devices, and humanitarian aid kits.
- Wound dressing and first aid kits were provided to 60 first responders,to supporting their efforts.
- Capacity building sessions (2 days in Inclusive Humanitarian Action, and 3 Days in Early Rehabilitation in Emergency and conflict) were provided to members.

## Key Asks

- Protection and reconstruction of damaged rehabilitation health facilities and protection of humanitarian workers
- Advocate for unhindered access to rehabilitation services for all affected populations, particularly in areas with severe movement restrictions, is crucial.
- Increased advocacy is also required to secure more resources for addressing injury-related disabilities, especially those that often lead to permanent impairments.
- Increase access to prosthetic and orthotic services.
- Integration of rehabilitation into emergency preparedness and response plans of International, national and local of health actors, including emergency medical teams.

## Key challenges

- The volatile security environment in the West Bank, particularly in Jenin and Nablus, continues to disrupt the delivery of rehabilitation services. This unstable political situation, coupled with movement restrictions, creates significant barriers to accessing services, especially in isolated areas.
- The inconsistent coordination mechanism among different rehabilitation actors highlights the need for a more organized system of communication and collaboration.
- Gap in the coverage and affordability of prosthetic and orthotic services, making it difficult to provide adequate referrals in the humanitarian response field.

## Planned activities

- Work with partners to continue responding to the rehalitation needs across the West Bank especially in hotspot locations.
- The digitization of MDRTF referral and response tools, which would streamline the referral process by establishing a clear mechanism and integrating it into the public health system, thereby improving efficiency in managing beneficiaries' cases.

### Top Indicators

Sub-Activity	People Reached	Indicator Unit
Provide occupational therapy (OT), physical therapy (PT), speech therapy (ST), nursing, etc	2.5K	Consultation
Provide assistive devices to persons with disabilities	124	Person
Train health workers on multi-disciplinary rehabilitation	7	Health worker

### People Reached

2.6K

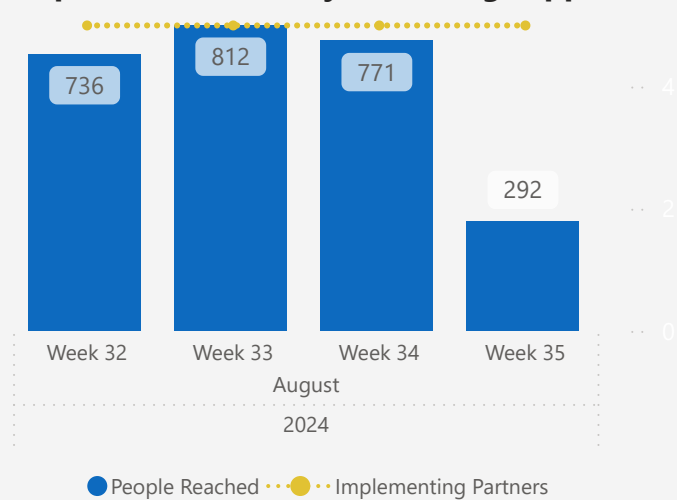
Implementing  
Partners

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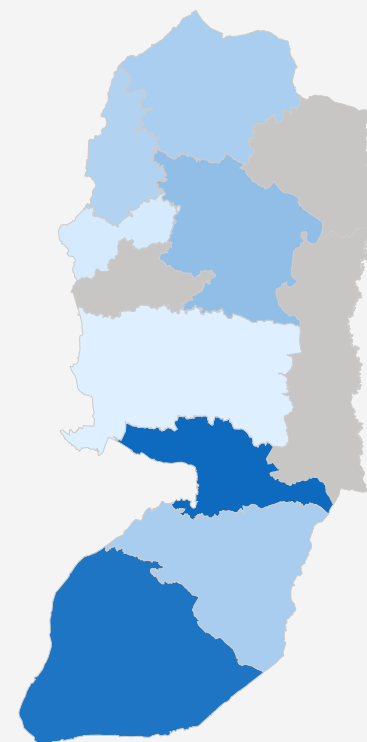
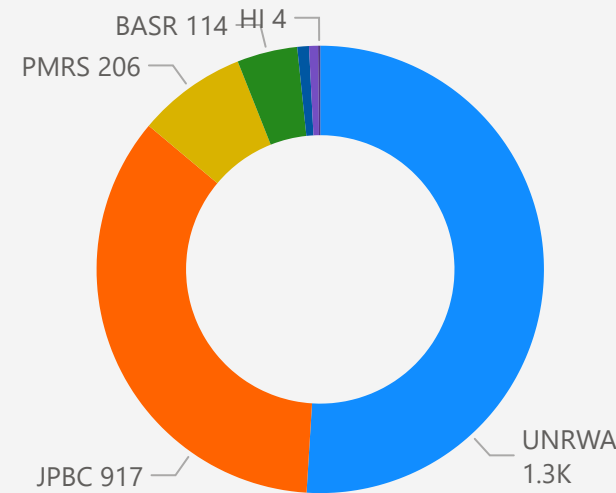
Supporting  
Organizations

1

### People reached weekly (including supplies)



### By Implementing Partner



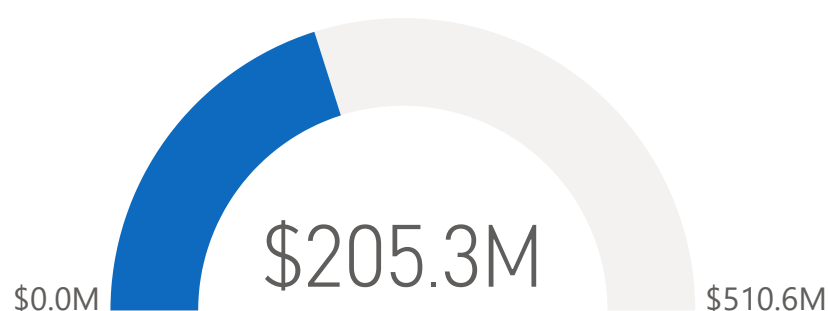


## Main coordination activities:

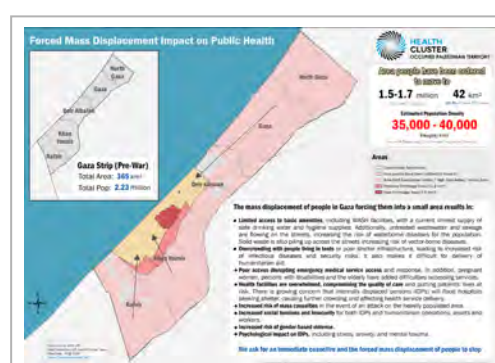
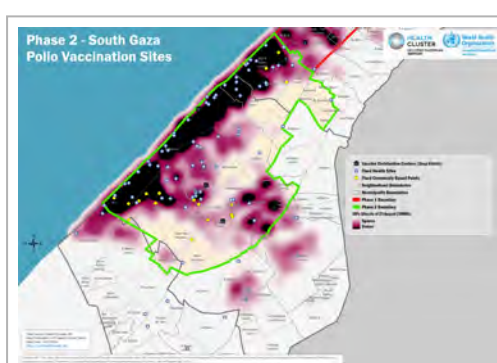
- 5** Health Cluster meetings were held During August.
- 1** Monthly donor briefing.
- 45+** Information products produced to inform and support the operational efforts.
- 60+** Partners participated in the cluster data reporting



## OPT Flash Appeal 2024 Funding Progress



During the Flash Appeal 2024 period, a total amount or funding requirement was \$510.6M, and up to August, the total amount of reported funding received is \$205.3M, which represents 40% of the funding requirement.



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