

Rising tensions boost humanitarian concern for Palestinians

UN agencies are warning of a “sharp deterioration” in the humanitarian situation since Hamas won control of the Palestinian Authority in January. But health workers also worry that Hamas’ victory will further dent confidence in Israeli and Palestinian cooperation in health. Sharmila Devi reports.

The victory of the militant group Hamas in January’s Palestinian legislative elections has sharpened the debate over humanitarian aid, with the USA, Britain, and other major donors saying they cannot deal with a group which has not renounced violence.

The Palestinian health-care system, already under severe strain, faces further cutbacks as western donors seek ways to administer aid but bypass a Hamas government.

UNICEF warned in mid-March that it urgently needed US\$6.2 million to address a “sharp deterioration in the humanitarian situation” since Hamas was elected. It said money was needed to pay for vaccines, antibiotics, and medical supplies for children and mothers. It also said 11 Palestinian children had died and 50 others had been injured in ongoing violence since January.

“It’s hard to say what will happen after the Hamas victory but there has been an escalation in the conflict and it’s harder for Palestinian patients to get treatment in Israel”, says Danny Filc, chairman of the board of Physicians for Human Rights–Israel (PHR), who is a paediatrician and lecturer at Ben Gurion University of the Negev. “At the moment, the Palestinian Authority (PA) pays for some treatments in Israel even though it should be Israel’s responsibility as it is the occupying power.”

Co-operation between Israelis and Palestinians remains a politically fraught enterprise and many contacts are initiated through PHR, which has won the trust of both sides. Last year, a group of Palestinian medical and health-service providers signed an open letter protesting against what they called increased pressure to enter into cooperation ventures with certain Israeli institutions.

The letter said the role of these ventures was “limited to enhancing Israel’s institutional reputation and legitimacy, without restoring justice to Palestinians”. It urged Israeli health professionals to become actively involved to end the “root cause of ill health: the occupation”.

However, many other Palestinians continue to work with groups such as the Peres Centre for Peace, which has a programme helping Palestinian children get treatment in Israeli hospitals.

Yoram Blachar, president of the Israeli Medical Association and director of the paediatric emergency unit at the Kaplan hospital, says political antagonisms have prevented closer working relationships with Palestinian colleagues and those in Jordan and Egypt. “Whenever we hear of a problem of a denial of passage to the sick, we act within our capacity to appeal to the military forces”, he says.

The election of Hamas is likely to further dent confidence in Israeli and Palestinian cooperation, which took a blow during the bloody years of the intifada that began in 2000.

“We already suffer from a lack of funds for hospitals and demoralisation when staff don’t get their salaries”, says Mohammed Shadid, director of the Welfare Association, a development group. “Referrals to Israel are likely to be further reduced if there is less international aid.”

The West Bank and Gaza Strip have been under Israeli occupation since 1967 when Arab east Jerusalem was annexed in a move not recognised internationally. Even before the Oslo accords on limited self-rule in the mid-1990s, the West Bank and Gaza health systems were severely under-funded. Israel handed over health care to the PA in 1994. But under international law its responsibility did not end as there remains no sovereign state in the territories. Israel is the only state that holds effective control over vital border crossings and water resources.

The picture is further complicated by the presence of more than 200 000 Jewish settlers in the West Bank, who do have access to specialised services such as paediatric chemotherapy and transplants.

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Clinics in the Gaza strip have long suffered from neglect and lack of funds

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The Israeli health services are far better equipped and funded than their Palestinian counterparts

"I was among the few who came out against occupation soon after 1967", says Zvi Bentwich, an eminent immunologist and founder of Israel's first AIDS clinic. "Of course some of Israel's security measures were introduced because of suicide bombings but I'm always aware of what I consider the unwise, blind application of measures that are by no means necessary. And there are no real statistics on what are the true effects of shortages or obstructions to health services on morbidity or mortality rates."

When talking about Palestinian health, there are several systems in place for the different classifications of Arabs living between the Mediterranean and the Jordan river. Out of a total of some 6 million Israelis, there are about 1 million Palestinians who were granted Israeli citizenship after Israel was created in 1948; another 2.3 million in the West Bank who are physically separated from the 1.3 million Palestinians in the Gaza Strip; and more than 200 000 east Jerusalem ID card holders, who have the right to travel in Israel but do not have citizenship.

Palestinians hope to unite east Jerusalem, the West Bank, and Gaza Strip in future but in the meantime contend with differing health systems suffering from duplication and inefficiency.

Israeli Arabs say their health system matches their status as second-class citizens. "The Jewish population has

more diagnostic testing because the Arab health sector has fewer resources", says Kareem Azab, an Israeli Arab who is finishing a doctorate at Jerusalem's Hebrew University. "In the Arab sector, I see more cancer, heart disease, and genetic disorders. We need more prophylactic medicine and campaigns to raise awareness of diabetes, high blood pressure, and cholesterol."

The Gaza Strip, which Israel surrounded with an electrified fence in 1994, remains cut off from the outside world, with access to and from the territory severely restricted even after the withdrawal of some 7000 Jewish settlers last summer.

Gaza does not have a faculty of medicine and lacks any specialised oncology, cardiology, neurosurgery, or burns facilities. Patients must seek treatment outside and permission for visits to Israel entails a cumbersome bureaucratic process, which severely disrupts continuity of treatment. A link between Gaza and the West Bank has never opened although it has been talked about for more than a decade.

A report last year by PHR and WHO said 60% of all breast cancer cases in Gaza were diagnosed at a late stage whereas the figure in Israel was 6-7%.

"The Palestinians suffer from extreme poverty so even if they go to a doctor they cannot afford the medicines", says Rafi Walden, head of surgery at Israel's Tel Hashomer hospital. "The Palestinian

health system has suffered from long-term neglect and depends on Israel, which does not allow free passage."

Severe restrictions on Palestinian freedom of movement were first imposed during the 1991 Gulf war but were reinforced since 2000 and the start of the second intifada. Israel's construction of a separation barrier on the West Bank is also posing severe problems.

"Things were getting a little bit easier in the West Bank but we still have to overcome obstacles such as flying checkpoints that suddenly appear, which need lengthy coordination with the military authorities", says a delegate from the International Committee for the Red Cross. "But the wall is making it more and more impossible to go to the other side."

In east Jerusalem, Palestinian doctors are facing a host of other problems. Part of Israel's "eternal and undivided capital" but without Israeli citizenship, they are forced to operate hospitals and clinics with higher Israeli costs but serving a population that is much poorer.

"We Palestinians are not a big population, maybe a quarter of the size of London, but we have to supply separate services when, for example, one or two cardiac centres would be enough", says Rajai Dajani, director of the Dajani Hospital for Women in east Jerusalem.

The West Bank separation barrier has caused a new problem as up to 50 000 Palestinians will end up on Israel's side when it is completed. "These enclaves have created a paradoxical situation whereby it should only take a patient 20 min to get to an Israeli hospital but this must be coordinated in advance. Israel does not want to give them services and they are dependent on the Palestinian health system even though they are on Israel's side of the barrier", says Hadas Ziv, executive director of PHR. "Even when we get clearance to get an ambulance from the West Bank to Jerusalem, it has to stop at the hospital's gates in a back-to-back system."

Sharmila Devi