



What is happening behind the wall?

Laura de Korte

Although the Israeli-Palestinian conflict is often discussed, little is known about Palestinian refugee issues and the problems the Palestinian health care system faces due to the ongoing conflict. Who is a Palestinian refugee? What are the problems that Palestinian health workers are dealing with today? What is happening behind the wall?

I hope to give the answers to the questions mentioned above in this report. Not only by using many articles written on these subjects, but also by telling you my personal experiences, as I was one of the students participating in IMSTAR 2009, an IFMSA-NL project.

“ **Anas Eid, Palestinian medical doctor in Jerusalem.**
IMSTAR focuses on one of the forgotten sides of the middle east conflict; the unnoticed daily life in the refugee camps. A reminder that if people want to experience peace, they need to provide peace for the others too.

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Short history on Palestinian refugees

Long before World War II, the Belfour declaration of 1917 granted by the British supported a Jewish national home in Palestine. From then onwards a huge migration of Jews into the British mandate of Palestine began. After WWII this migration heavily increased. From that moment on, clashes between the Palestinian inhabitants and Jewish migrants started to take place. After two years of turmoil within the British mandate of Palestine, Britain declared its withdrawal from the mandate and submitted the land to the newly formed UN. Hereafter the UN approved of dividing the mandate of Palestine into a Palestinian and Jewish land in 1947. However, afterwards the Zionist leaders declared the independent state of Israel. This was followed by a mass expulsion of Palestinians from their lands. Most of the Palestinians fled to nearby places in the East and Southwest segments of Palestine, now known as the West Bank and Gaza. A smaller portion fled to surrounding countries. The mass expulsion of Palestinians from their homes is called the 'Nakba', Arabic for 'catastrophe'. The exact number of displaced Palestinians during the so-called Nakba remains an issue of debate today. The United Nations Relief

and Works Agency (UNRWA) for Palestinian refugees in the near East, an organization that has been responsible for the care of the Palestinian refugees starting back in 1950, estimated that around 750 000 Palestinians were expelled from their homes during that period.

Palestinian refugee situation

Today UNRWA takes care of 4.6 million Palestinian refugees living within the Occupied Palestinian Territories (e.g. West bank and Gaza), Syria, Lebanon and Jordan. One-third of the registered Palestinian refugees, around 1.3 million, still lives in the UNRWA established refugee camps. Until the nineteen fifties the Palestinian refugees were living in tents, nowadays they live in cement buildings. Although the living conditions have dramatically improved over the years, the overall socio-economic conditions are still very poor. Within the camps there is a high population density, poor infrastructure, bad sewage drainage and insecure water supplies. Living in a twelve square meter room with a family of six members is a 'normal' condition. As with most Palestinian refugee camps, the bad economic situation, growing groups of families with food insecurity and enormous

unemployment rates have lead to poor health and nutrition status. I have visited many families in refugee camps and I am truly impressed by the perseverance they exhibited; they continue struggling knowing that their home is only a few meters away. Once I saw many photos when I met a family in their home. Old photos of their original home. Of a garden with orange- and lemon trees. Of their grandfather who was killed during the Nakba. Of the sea only five minutes walking distance from their place. I felt ashamed of seeing their original home, smelling the air of orange blossoms and taking a swim in the sea of which they were deprived. Just two weeks before I met them.

The Palestinian health care system

Although UNRWA delivers part of the primary health care within the health centers of the refugee camps, they only run one hospital in the entire operating field. Therefore, most Palestinian refugees are compelled to use governmental hospitals available within their living area. The UNRWA health centers, the UNRWA hospital and the rest of the health care system in the West Bank suffer severely from the effects of the current Israeli occupation in this area.



Palestine



3 890 086
inhabitants



4 671 811
Palestinian refugees



♂ 71yrs ♀ 74yrs
life expectancy



4.4%
of GDP for health



57%
living below poverty line

IMSTAR

Two years ago IFMSA-NL launched a project called IMSTAR (Internship for Medical Students in Action for Refugees), a project that aims to create awareness of the Palestinian refugee issues and the problems of the health care systems around Palestinian refugee camps in Palestine and Jordan. The project involves several interesting lectures on culture, religion, human rights and a variety of insights into the Palestinian-Israeli conflict. After a year of preparation twenty selected participants supported the project by doing a four week medical and social internship in either Palestine or Jordan. For more information contact imstar@ifmsa.nl

There is a growing lack of geographical continuity within the West Bank, multiple factors are involved, like the combination of 85 manned checkpoints, Israeli settlements, outposts, 460 roadblocks, several permit systems and the (illegal) segregation wall around the West Bank and Gaza. With this challenging situation, the accessibility of all services for Palestinian residents, including health care services, is deteriorating. Due to the above mentioned movement restrictions many Palestinians are now forced to take detours and wait at checkpoints for hours resulting in patient admission delays. Moreover, ambulances are regularly stopped at checkpoints, causing delay of treatment, complications and even death. A doctor told me he had done a caesarian section while in an ambulance. This ambulance had to wait at a checkpoint for hours. Unfortunately, he was not able to help the mother or the child. Both died in his hands. As many checkpoints are not

active anymore, at this moment the situation has improved. Still, Israel can easily block the roads again.

Besides the problem of access to health care for the Palestinians, importation of medical supplies into the West Bank is a huge problem. This situation has been provoked due to the many Israeli permits needed to import such goods from the outside world. For example, one urologist told me once that the importation of a simple uroflow machine from Europe took him six months. Furthermore, some medical devices, including nuclear medical equipment, are not allowed at all to be imported into the West Bank except for East Jerusalem. This is why many forms of tertiary treatment, like radiotherapy, are only available within East Jerusalem. Although East Jerusalem is officially part of the West Bank, it is physically blocked by the segregation wall and one needs an Israeli permit to be allowed to travel through it.

Getting an Israeli permit for these patients takes hours, which are vital especially during emergency cases.

Conclusion

Increasing numbers of Palestinian refugees are living within crowded refugee camps, where insecure water supplies, bad sewage drainage and an overall poor economic situation are encouraging poor health and nutrition status. Furthermore, the Palestinian health system is constantly attacked by movement restrictions causing delays of patient admissions, an inability to import medical supplies and devices, complications and even death. Finally, without drastic changes a deteriorating health system and worsening of the livelihoods of all Palestinian refugees is to be expected.

About the author

Laura de Korte is the pseudonym of a fourth year medical student in Rotterdam

Further reading

- United Nations Relief and Works Agency for Palestinian refugees in the near East (UNRWA). www.unrwa.org
- Lancet series: Health in the Occupied Palestinian Territory. UK, 2009 (<http://www.thelancet.com/series/health-in-the-occupied-palestinian-territory>)

The importation of an uriflow machine from Europe takes six months