

Palestinian Health Care Conditions Under Occupation

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Global Research, April 10, 2006

10 April 2006

Region: [Middle East & North Africa](#)

In-depth Report: [PALESTINE](#)

Members of the Ibdaa Health Committee are on tour in the US. They are educating Americans on the devastating health conditions of Palestinians and health care workers in the West Bank, East Jerusalem and Gaza.

The facts on the ground are shocking, yet the international community ignores Israel's widespread violence and warfare against the Palestinians. The violence against health care workers, the health care system and the Palestinian infrastructure are equally appalling.

According to the Palestinian Ministry of Health, 36 health care workers have been killed, 447 health providers have been wounded and 129 patients have died at Israeli checkpoints. How? There have been 375 attacks on health care centers, 383 attacks on ambulances, with 38 ambulances destroyed altogether.

Palestinian women in labor have not been left out of the equation of military occupation. Since September 28, 2000, at least 67 women have given birth at Israeli checkpoints. As a result, 39 newborns died or they were delivered stillborn.

According to a map from the Applied Research Institute Jerusalem there are over 100 established checkpoints throughout the West Bank, an area totaling 5,970 sq. km, and this figure does not include flying checkpoints and barriers, such as roadblocks, razed roads, dirt mounds, etc. When Israel completes construction of the wall, approximately 33 per cent of villages within the West Bank will be denied "...free and open access to their health care system," per the IHC. Moreover, 81 per cent "...of people living in isolated zones and enclaves cannot access primary health clinics, medical centers, and hospitals as needed."

There are instances where Palestinians need access to urgent medical care, but Israeli forces will not allow Palestinian ambulances to cross the checkpoint. When this happens Palestinians are forced to transfer to an Israeli ambulance, which costs anywhere from 350 New Israeli Shekels (NIS) - 650 NIS (\$80 USD - 150 USD). Keep in mind that an estimated 50 per cent of Palestinians in the West Bank live below the poverty line (\$2 USD per person/day). The average unemployment rate for Palestinians in the West Bank, East Jerusalem and Gaza combined is over 60 per cent. In essence, the Israeli occupation has created business opportunities from Palestinians in need of urgent medical care that already impoverishes Palestinian families who struggle to meet their daily needs.

A Palestinian Central Bureau of Statistics (PCBS) survey about the effects of Israeli measures on the economic conditions of Palestinian families found that 86 per cent of households

decreased their spending for food. Moreover, over 66 per cent of households surveyed decreased their expenditures for health care. Some demographic factors for consideration are that 46 per cent of Palestinian families are 14 years of age or younger and 18 per cent of these families have children who are under four years of age (PCBS – 2005 population results).

Another dimension to this grim picture is that the IHC found there has been a decline in the quantity and quality of food in 73 per cent of the West Bank and Gaza. A recent example is the 2006 closing of Karni Crossing (Al-Mintar), which has resulted in severe shortages in food, such as flour and rice. Since Palestinians can not export their goods, such as peppers, tomatoes and carnations to Europe, it has resulted in losses compounding into millions of dollars thereby crippling the Palestinian economy. For the few days Israeli forces opened the crossing, it operated at 10 per cent capacity. In the West Bank 83 per cent of Palestinian families have difficulty accessing local and commodity markets because of the wall.

Although US media reports explanatory reasons behind IDF operations (they are targeting “terrorists,”), the US news fails to report that the occupation and its ramifications target Palestinian youth, along with the civil and governmental infrastructure they live in.

An online daily news source is [Ma’an News Agency](#), which provides up-to-the-minute news coverage of the Holy Land.

Ibdaa Health Committee

Members of the IHC toured the US to increase public awareness on the Palestinian health care situation. They asked for American cooperation and collaboration in future endeavors within the health care system.

Basically, they asked people to hold fundraisers and foundations to consider funding medical equipment, medicines, patient, and child sponsorship. Also they asked for physicians, nurses, psychologists, social workers, sociologists, healthcare professionals, mental healthcare professionals, and medical students interested in volunteering their time and expertise to help with medical services and training within the Palestinian health care system.

The IHC focused on Dheisheh Refugee camp, located outside of Bethlehem because the members grew up in this area. IHC members are volunteers who formed the committee to safeguard public health and improve the overall health care situation. Some of the IHC’s objectives are to provide a long-term, health educational program, establish a psycho-social program, provide a nutritional counseling program, establish a diabetes and education treatment center, establish an ophthalmology center to provide eye examinations, corrective treatment and prevention and establish a child abuse prevention center.

With regards to the 6,000 children living in Dheisheh over 95 per cent of the camp’s children suffer from psycho-social problems. Although several hundred children screened were diagnosed with poor vision, over 60 per cent came from families who could not afford to pay for eyeglasses. These examples represent some of the effects occupation has on children.

One of the members shared that allegedly some of Israel’s canned food sold in Palestinian markets contains high levels of E211, also known as sodium benzoate. In the US the FDA regulates that products with sodium benzoate must contain less than .1 per cent. High

levels of E211 in preserved food can potentially affect peoples' health and has raised moderate concern from this US research group <http://www.inchem.org/documents/cicads/cicads/cicad26.htm>

Since further research is needed, opportunities exist for both Israeli and Palestinian medical and scientific researchers, as well as the international community to collaborate on future endeavors for this important public health situation.

A logical response might be that people should buy fresh food instead of preserved food. The problem is how do Palestinians access unreachable markets and jobs under occupation and where do money trees grow so people can pay for it?

For the Palestinian farmers who still have [olive and citrus orchards](#) Israeli bulldozers have uprooted over one million trees over the last 39 years as they continue colonizing Palestinian land.

For Palestinians, access to clean water is a crisis and [here is why it exists](#).

There are over four million Palestinians living in the West Bank and Gaza. The Palestinian Ministry of Health has 23 hospitals and 799 hospital beds for the entire population. There are .71 nurses for every hospital bed.

Although the IHC came to share the needs of Dheisheh and its 13,000 residents, this refugee camp represents the 59 refugee camps across the West Bank and Gaza that have the same needs for medical and office equipment and supplies. Here is additional information about the challenges facing the Palestinian health care system [from Jerusalem](#).

More information can be found at <http://www.dheisheh-ibdaa.net> and their US Coordinator can be reached at lorir@unm.edu.

The Arabic word "Ibdaa" means "to create something out of nothing."

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