
Right to health

Crossing barriers to access health in the occupied Palestinian territory, 2014-2015

Executive summary

This WHO report, utilizing data on health access in 2014 and 2015 in the occupied Palestinian territory, is the latest in a series of evidence-based advocacy reports that focuses on bureaucratic barriers to Palestinian health caused by policies of the occupation that restrict access for patients, health personnel and ambulances.

WHO obtained quantitative data from official Palestinian sources for 2014-2015 to examine trends in health access for both West Bank and Gaza patients. WHO also used qualitative methods, based on interviews with patients, health personnel and health providers and field visits, to understand actual experiences and other aspects of health access. For the first time, the report also covers the impact on health access of attacks on health facilities, patients and health personnel, and looks at the health access situation for Palestinian communities in "Area C," the 60% of the West Bank where Israel retains full security and civil authority, according to the Oslo designations.

The Palestinian Ministry of Health purchases referral medical care from other health service providers when treatment is not available in its own facilities, most frequently for radiotherapy and chemotherapy for cancer. This has been an important part of health coverage provided by the Ministry of Health to West Bank and Gaza residents, and free access to medical centres is crucial.

Eighty-six percent of the 162 300 referrals issued by the Palestinian Ministry of Health in 2014 and 2015 were to Palestinian medical centres. However, most were located in East Jerusalem, which patients can no longer access without first obtaining an Israeli-issued permit, a complex process that can result in delays and denial of care. The remaining 14% of referrals are to Israeli hospitals, or to Jordan and Egypt, for which entry requires a permit, approval or other conditions from those governments. Few Gaza patients were able to exit through Rafah to Egypt in 2014 and 2015 due to the closed borders.

Israeli security services can deny travel permits without explanation, for 'security reasons'. Denials and delays in responding to health permit applications noticeably increased for Gaza patients who have faced tightened security procedures since 2012 and particularly over the past two years. The number of patients seeking access permits through Erez checkpoint has more than doubled from 2012 to 21 899 in 2015 but the permit approval rates have steadily dropped: from 92.5% in 2012 to 88.7% in 2013, 82.4% in 2014 and 77.5% in 2015. In contrast, an improvement in access was noted for West Bank patients over the same period, greater for patients than companions, due in part to security procedures being eased for older travellers.

Access barriers continue to reshape the Palestinian health system. In 2015, for the first time, more West Bank patients were referred to private and non-profit medical facilities within the West Bank (47%) than to East Jerusalem hospitals (43%), due to access barriers and local growth of private medical centres as more accessible alternatives. Patients from Gaza have similarly not benefited from local development of their public or private health system, and remain more dependent on referrals outside, requiring permits to exit the Gaza Strip.

The report concludes with health advocacy recommendations for the international community regarding the legal obligations of duty-bearers to respect and fulfil the right to health in the occupied Palestinian territory, based on the evidence provided of the difficulties that Palestinians face in accessing necessary health care.

http://www.emro.who.int/images/stories/palestine/documents/WHO_-_Access_Report_2014-15_-_Final.pdf?u=1

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