

Limitation of movement and access to health sites in East Jerusalem and the West Bank, Palestine

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LIMITATION OF MOVEMENT AND ACCESS TO HEALTH SITES IN EAST JERUSALEM AND THE WEST BANK, PALESTINE

By: Emily Janin | *Public Health Practice in the Community*

ABSTRACT

The situation in the West Bank, Palestine is characterized by 51 years of occupation, violence, and increasingly restricted movement. Living conditions are becoming more dire every year, as over 26% of Palestinians are living in poverty [1]. Palestinians also disproportionately suffer from adverse health outcomes compared to their Israeli counterparts. Life expectancy for Palestinian men is 71 years, and 73.9 years for women. In contrast, Israeli life expectancy is 79.9 for men and 83.6 for women [2]. To further illustrate these health disparities, a 2017 estimate indicated that 1 out of 5 Palestinians are in need of emergency health and nutrition interventions [1].

While efforts have been made internally and by international organizations to improve the current state of health affairs in the territory, Israeli actions to further segment the West Bank via introductions of barrier walls, checkpoints, road blocks, and trenches, have resulted in more restricted access to health sites. In most cases, Palestinians must request access from Israeli officials to exit and enter various communities within the West Bank, a permitting process that can take weeks, months, or may never get approved. For many of the 5,021,369 Palestinians living in occupied territory [2], entering and exiting East Jerusalem for medical and health-related care can be a daily struggle.

This poster aims to depict these limitations on the freedom of movement of patients, medical personnel, ambulances, and medicine using data provided by the Office for the Coordination of Humanitarian Affairs (OCHA) in Jerusalem and ArcMap GIS software.

MAIN RESULTS

OCHA data specifies 381 health sites in the West Bank. These health sites refer to a wide range of facilities, including (but not limited to) hospitals, dentists, physical therapists, skin and laser clinics, rehabilitation centers, eye doctors, and elderly care. However, this number of health care resources is dramatically misleading, as infrastructural challenges can limit or entirely restrict access to such resources. In 2015, OCHA recorded 543 checkpoints, roadblocks, and earth mounds in the West Bank. This number has likely increased since then, as the Israeli government imposes more infrastructural changes to regulate Palestinian movement each year. Consequently, health care institutions suffer from a regular shortage of medical supplies and health professionals. Occasionally, Palestinians in need of medical attention are sent to pharmacies to buy injections themselves, as medical staff often lack basic medical equipment [3].

Having sufficient access to health sites in East Jerusalem is particularly critical, as more than 50% of patients in East Jerusalem's hospitals are referred from other areas of the West Bank or Gaza by the Ministry of Health. This is because East Jerusalem is the only place Palestinians can get cardiac surgery, specialist oncology treatment, children's dialysis, specialist rehabilitation services, and complex eye surgery [4]. Of the 87,000 patients that were referred to East Jerusalem health sites in 2015, roughly 52,000 of them were required to apply for an Israeli permit to access treatment [4]. Moreover, patients only find out if their application for a permit was successful the evening before they are due to travel.

REFERENCES

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MAPPED DATA

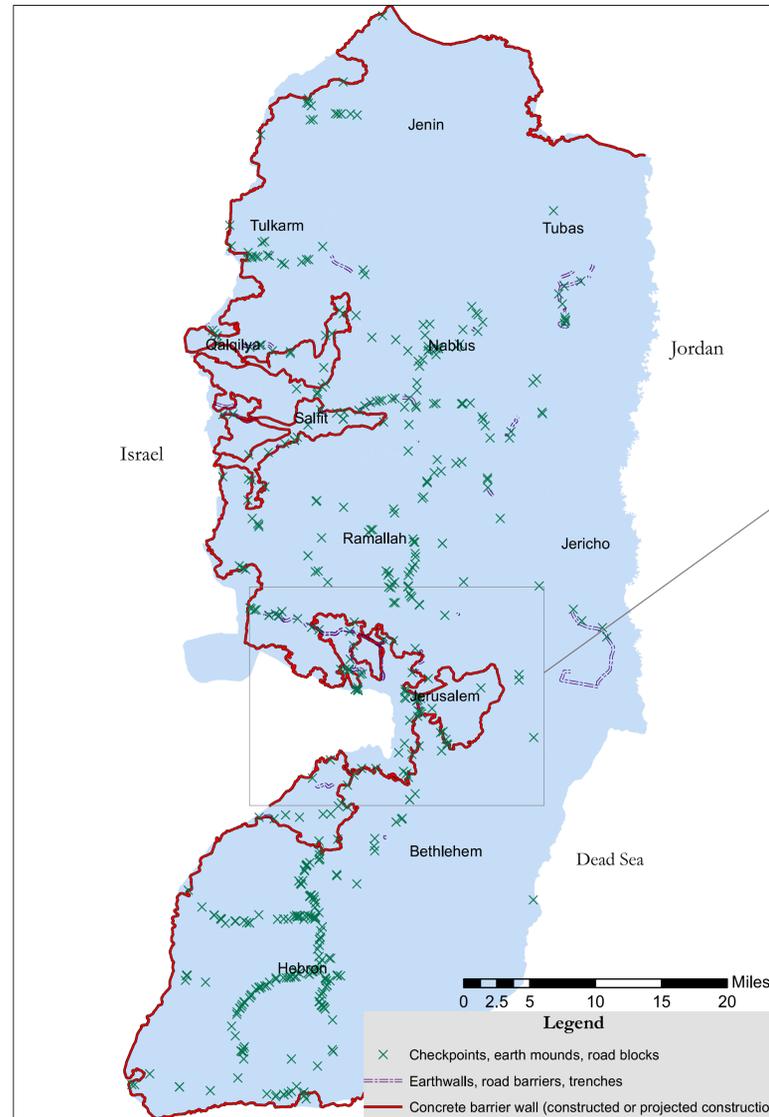


FIGURE 1: Physical Barriers to Movement in the West Bank, Palestine (2015-2018)

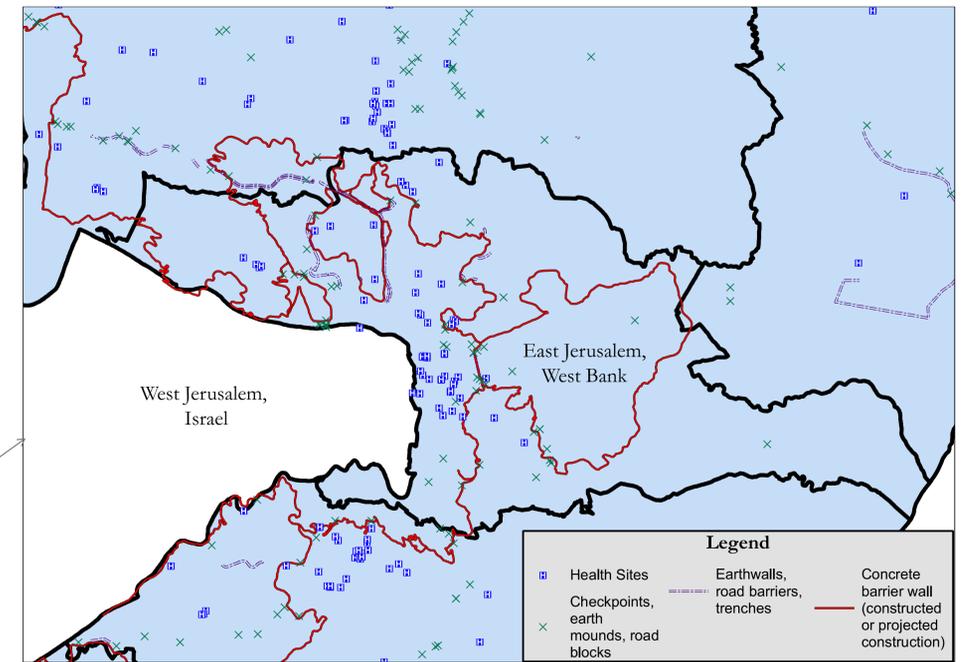


FIGURE 2: Limited Access to Health Sites in East Jerusalem, Palestine (2015-2018)



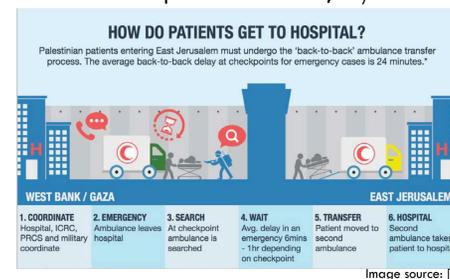
Early-morning Palestinian commuters crowd in an Israeli checkpoint on the border of East Jerusalem, West Bank [5]



Israeli border police check Palestinian identification cards at a checkpoint as they exit the Arab neighborhood of Issawiye in Jerusalem [6]

LOGISTICS

When a Palestinian travels from other regions of the West Bank and Gaza to East Jerusalem for emergency treatment, he/she must cross at least one checkpoint. At this time, he/she undergoes a "back-to-back" transfer during which Palestinian patients are moved from a Palestinian ambulance to an Israeli-registered one before entering East Jerusalem. This process takes 24 minutes on average, but often complications arise and cause further delays. Approximately 1/3 of patients seeking hospital care were denied or further delayed in 2016 [4].



CONCLUSIONS

This poster reveals the critical need for improved access to health sites in the East Jerusalem, and the West Bank more broadly. The following policy changes, with the aid of international players and Israeli cooperation, seek to reduce health disparities and foster more habitable conditions for Palestinians:

- 1) Revoke "back-to-back" ambulance transfer and permit application policies. This will allow for free movement of Palestinians seeking medical care and ambulances in all areas of the occupied Palestinian territory (Gaza, West Bank, East Jerusalem).
- 2) Eliminate physical barriers, such as concrete walls, road blocks, earth mounds, trenches, and checkpoints that further delay access to medical care.
- 3) Construct more specialized health sites (e.g. oncology care, rehabilitation services, and complex eye surgery) in Gaza and the West Bank to reduce the burden of crossing Israeli boundaries into East Jerusalem for specialized health care.