

## **Health conditions in the occupied Palestinian territory, including east Jerusalem, and in the occupied Syrian Golan**

**Draft decision proposed by Algeria, Bahrain, Bolivia (Plurinational State of), Brunei Darussalam, China, Colombia, Cuba, Egypt, Indonesia, Iraq, Islamic Republic of Iran, Jordan, Kuwait, Lebanon, Malaysia, Mauritania, Morocco, Namibia, Nicaragua, Oman, Pakistan, Palestine, Qatar, Russian Federation, Saudi Arabia, South Africa, Sri Lanka, Sudan, Syrian Arab Republic, Türkiye, Venezuela (Bolivarian Republic of) and United Arab Emirates**

The Seventy-seventh World Health Assembly, taking note of the report by the Director-General requested in World Health Assembly decision 76(12) 2023, decided to request the Director-General:

1. to report based on field monitoring and assessment conducted by the WHO on progress in the implementation of the recommendations contained in the report on the health conditions in the occupied Palestinian territory, including East Jerusalem, and in the occupied Syrian Golan by the Director-General, to the Seventy-eighth World Health Assembly, bearing in mind the legal obligation of the occupying power;
2. to report, based on field monitoring and assessment conducted by the WHO emergency teams, on the public health implications of the catastrophic humanitarian crisis in the occupied Palestinian territory, including East Jerusalem, including with respect to acts of violence against the wounded and sick, medical personnel and humanitarian personnel exclusively engaged in medical duties, their means of transport and equipment, and submit recommendations in this regard to the 156th session of the Executive Board and to the fifth meeting of the Standing Committee on Health Emergency Prevention, Preparedness and Response, and to the Seventy-eighth World Health Assembly bearing in mind the legal obligations of the occupying power;
3. to report on the malnutrition results from disordered nutrient assimilation characterized by recurrent infections and chronic inflammation, implying an underlying immune defect. *Recalling* that in the occupied Gaza Strip enclave results from the use of starvation of civilians and its direct consequences, and urging the occupying power to protect civilian infrastructure which is critical to the delivery of humanitarian aid and to ensure the proper functioning of food systems and markets during the ongoing occupying power military operations;
4. to report on the link between food insecurity and the threat of famine, and calls on the occupying power to comply with its obligations under international humanitarian law regarding

respecting and protecting civilians and taking constant care to spare civilian objects, including objects necessary for food production and distribution such as farms, markets, water systems, mills, food processing and storage sites, and hubs and means for food transportation, and refraining from attacking, destroying, removing or rendering useless objects that are indispensable to the survival of the civilian population, such as foodstuffs, crops, livestock, agricultural assets, drinking water installations and supplies, and irrigation works, and respecting and protecting humanitarian personnel and consignments used for humanitarian relief operations;

5. to report on the interconnectedness between health and other sectors, such as water and sanitation and nutrition, the intense overcrowding of the forcibly internally displaced civilians in shelters coupled with disrupted health and the need for a comprehensive approach to humanitarian assistance, and stressing that ongoing challenges in the occupied Gaza Strip enclave, including restrictions on the movement of goods can impact food availability contributing to malnutrition, while the limited availability of clean water, increases the risk of outbreaks and epidemics, and stressing that access to food, clean water and sanitation facilities is crucial for maintaining public health;

6. to support the Palestinian health sector, using a health system strengthening approach, including through capacity-building programmes by improving basic infrastructures, human and technical resources and the provision of health facilities, and of ensuring the accessibility, affordability and quality of health care services required to address and deal with structural problems emanating from the prolonged occupation, the wanton destruction of the Palestinian health system and forced displacement of civilians and the development of strategic plans for investments in specific treatment and diagnostic capacities locally;

7. to report on the wanton destruction of health facilities including hospitals and ambulances, and at the catastrophic humanitarian conditions that have been inflicted to the public health system in the occupied Palestinian territory, including East Jerusalem;

8. CALLS UPON the occupying power to fulfill its obligations under international law, including international humanitarian law to ensure, to the fullest extent of the means available to it, the supply and replenishment of medicine and medical equipment to the civilian population and *Calls* for safe and continuous passage of fuel and health supplies, and additional humanitarian assistance,

9. to assess, in full cooperation with UNRWA and UNICEF and relevant UN agencies in the occupied Palestinian territory, including East Jerusalem, the extent and nature of psychiatric morbidity, and other forms of mental health and psychosocial support needs and challenges, resulting from protracted aerial and other forms of bombing among the population, particularly children and adolescents, of the occupied Palestinian territory, including East Jerusalem;

10. to continue strengthening partnerships with other UN agencies such as the UNRWA and partners in the occupied Palestinian territory, including East Jerusalem, to enhance humanitarian health response capacities by delivering emergency aid and protection in an inclusive and sustained manner before, during and after the occupying power air, sea and land military operations and the complex humanitarian emergencies;

11. to ensure timely access to specialized trauma care as it is a vital element in patient outcome after severe and critical injury requiring the skills of trauma teams to avoid preventable imputation, permanent disability and mortality;

12. to continue strengthening partnerships with other UN agencies such as the UNRWA, UNICEF and partners in the occupied Palestinian territory, including East Jerusalem, to enhance health response capacities, by conducting an extensive and comprehensive mapping and screening of the capacity of the health system to respond to health emergencies adequately and properly, including preparedness and response;
13. to ensure sustainable access to health-related products particularly for women and girls at a scale required to meet their full health, dignity, privacy and hygiene needs in the occupied Palestinian territory, including East Jerusalem, *Recalling* the very limited access to menstrual hygiene products in the occupied Gaza Strip enclave. This is even more difficult for women and girls with disabilities who are already facing major access challenges;
14. to ensure sustainable procurement of WHO prequalified vaccines and medicine and medical equipment and *to ensure* unhindered access to health-related products to the occupied Palestinian territory including East Jerusalem in compliance with the international humanitarian law and the WHO norms and standards;
15. to ensure non-discriminatory, affordable and equitable access to medical countermeasures such as vaccines, therapeutics and diagnostics to the protected occupied population in the occupied Palestinian territory including East Jerusalem and in the occupied Syrian Golan in compliance with the International Law and WHO norms and standards;
16. to ensure a sustained, orderly, unimpeded, safe and unobstructed unhindered passage for medical personnel and humanitarian personnel exclusively engaged in medical duties, their equipment, transport and supplies, including surgical items, to all Palestinian patients in need, consistent with international humanitarian law, calls for the passage for ambulances and medical evacuations of critically injured and sick patients and medical staff to the Palestinian health institutions in occupied East Jerusalem and abroad;
17. to identify the impact of barriers to health access in the occupied Palestinian territory including East Jerusalem, as a result of the longstanding occupation and the ongoing war and movement restrictions of goods and persons and territorial fragmentation, as well as progress made in the implementation of the recommendations contained in the World Health Organization reports in the occupied Palestinian territory including East Jerusalem;
18. to ensure the respect and protection of wounded population and injuries, health and humanitarian aid workers, the health care systems, all medical and humanitarian personnel exclusively engaged in medical duties, their means of transport and equipment, as well as hospitals and other medical facilities in compliance with The Geneva Conventions and their Additional Protocols;
19. to strengthen and to continue providing the necessary technical and material health assistance in order to meet the health needs of the Palestinian people, including prisoners, detainees, in cooperation with the efforts of the International Committee of the Red Cross, as well as the health needs of handicapped and injured people, and the human treatment of all persons deprived of their liberty or any other form of deprivation of liberty like enforced disappearance and their access to medical treatment in compliance with international humanitarian law, including the Geneva Conventions and their Additional Protocols;

20. to continue strengthening partnership with other UN agencies and partners in the occupied Palestinian territory, including East Jerusalem, and in the occupied Syrian Golan to enhance humanitarian health response capacities by delivering aid and protection in an inclusive and sustained manner before, during and after pandemic crisis;
21. to report, based on field assessments conducted by the WHO, on health conditions of the Syrian populations in the occupied Syrian Golan including prisoners and detainees and ensure their adequate access to mental physical and environment health, and to report on ways and means to provide them with health-related technical assistance;
22. to support the rehabilitation of the health sector and the development of the health system in the occupied Palestinian territory, including East Jerusalem, by focusing on the development of human resources, in order to localize health services, decreasing referrals, reducing cost, strengthening mental health services provision and maintaining strong primary health care with integrated complete appropriate health services;
23. to hold an urgent conference for donors, prior to the Seventy-eighth World Health Assembly, to finance immediate health needs as well as the rehabilitation and rebuilding of the health system in the occupied Palestinian territory, including East Jerusalem, and calls on member States, donors and international humanitarian and development actors to provide humanitarian assistance to the Palestinian people;
24. CALLS upon the international community to secure appropriate funding to support the immediate and future needs of the WHO health programmes in the occupied Palestinian territory, including East Jerusalem, and for rebuilding the Palestinian health system, in full cooperation with the WHO and relevant UN agencies such as the UNRWA and partners; and
25. to ensure the allocation of human and financial resources in order to urgently achieve these objectives.

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