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ARTICLE LETTER TO EDITORS

Urgent Appeal: Critical Children’s Health Crisis in Gaza—Ongoing Vaccination Shortages Exacerbated by Conflict, Yet Rooted in Pre-existing Challenges

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Regardless of race, religion, political belief, economic status, or social background, everyone has the fundamental right to the best possible standard of health.

Israel’s military occupation of the West Bank and Gaza Strip and annexation of East Jerusalem imposes restrictions on the Palestinians’ movement both within and between these territories. This makes it harder for patients to get specialized medical care due to challenges in obtaining permits from Israeli authorities, limitations on travel modes and routes, increased costs, time, and difficulties arising from the Gaza Strip blockade. This situation is further exacerbated by the settlements built by Israel in the occupied Palestinian territory and Jerusalem’s perimeter wall of separation (1). Pediatricians in Palestine focus on preventive care with an emphasis on vaccinations to protect children from diseases. Despite challenges such as limited access to clean water and restricted healthcare access in remote regions as a result of transportation challenges and checkpoints, over 90 percent of Palestinian children receive vaccinations (2). Two main healthcare providers manage the vaccination program and its supply in Palestine. The Palestinian Authority Ministry of Health oversees vaccination efforts for the public in the West Bank and the Gaza Strip. Meanwhile, UNRWA (United Nations Relief and Works Agency) is responsible for Palestinians with refugee status, who constitute 41 percent of the Palestinian population (2). The program includes vaccinations against the hepatitis B virus, tuberculosis, diphtheria bacteria, tetanus, pertussis bacteria, Haemophilus influenzae bacteria, the polio virus, pneumococcal bacteria, rotavirus, and the measles, mumps, and rubella viruses (3).

For the past 16 years, Gaza has faced ongoing difficulties that have been made worse by the COVID-19 outbreak and the current conflict. Because of the region’s instability, lack of resources, and devastated infrastructure, healthcare conditions are inadequate (4).

In 2019, the Gaza Strip reported 124 confirmed cases of measles. The region historically had high immunization coverage, but a socio-economic decline, war, and closure led to an unexpected surge in cases. The Ministry of Health responded by enhancing surveillance, vaccinating healthcare workers, and obtaining measles IgM test kits with support from WHO. However, the shortage of vaccines will exacerbate the defect in infection control of measles and other contagious diseases (5).

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During the COVID-19 pandemic, Israel demonstrated a potent example of global inequality in the rollout of vaccines by delaying the arrival of the vaccines to the Gaza Strip (6).

There is a current severe lack of children’s immunizations in the Gaza Strip, according to the health ministry, raising fears of potentially disastrous health effects. This announcement comes amidst ongoing Israeli bombardment that has continued for more than two months, making the already terrible situation in the crowded Palestinian area much worse (7).

RECOMMENDATIONS

- Quick humanitarian aid is essential, as it provides basic medical supplies involving vaccines to address the urgent children’s health crisis in Gaza.

- To address the scarcity of vaccines and improve healthcare infrastructure, international cooperation and support from donor nations and global health organizations should be pursued.

- A ceasefire must be advocated for to provide a favorable atmosphere for medical care, immunization campaigns, and diplomatic initiatives to deal with underlying issues and move toward a durable settlement.

- Long-term planning and readiness require investments in data monitoring systems, healthcare infrastructure, and professional capacity building.

- Promoting children’s rights, highlighting the right to health, and enlisting international assistance is crucial to fully implementing these suggestions and lessening the crises’ effects.

AUTHORS’ CONTRIBUTION


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