Risk of imminent polio epidemic in Gaza and beyond- NGO Briefing Note (20 August 2024)

The Ministry of Health has confirmed the first case of polio in a 10-month-old child in Gaza on 16 August 2024, and the World Health Organization has found traces of polio in wastewater. Polio mainly affects children under five years of age. However, anyone of any age who is unvaccinated can contract and spread the disease. There is no cure, it can only be prevented. Polio invades the nervous system and can cause total paralysis in a matter of hours. The epidemic risks in Gaza are vast due to the destruction and lack of water and sanitation facilities, open air wastewater, overcrowding, displacement, and destruction of and lack of access to healthcare.

A polio epidemic is a risk that children in Gaza cannot afford. At least 50,000 children have been born in Gaza since the escalation of the conflict and are likely to have received no vaccinations whatsoever. One in 200 unvaccinated children who become infected will suffer from irreversible paralysis and require lifelong care. For some, the muscles they use to breathe will become paralyzed and they will die. Polio's re-emergence in Gaza is a result of the crippled health sector, Israel's systematic destruction of water and sanitation infrastructure, compounded by its restrictions on repairs and supply access, and the presence of unexploded ordnance in and around key infrastructure.

This outbreak will hit a child population that has very few reserves left. We expect children in Gaza to be more susceptible to poliovirus infection due to high levels of malnutrition, destruction of the healthcare system, destruction of wash and sanitation systems, multiple displacements, and toxic stress. For children, the stress of this outbreak on top of everything else they have experienced will undoubtedly exacerbate existing mental harm.

Polio anywhere is a threat to children everywhere. If left unchecked, there is a high likelihood that the virus will spread through the region. Polio was close to elimination worldwide, and had been eliminated in Gaza two decades ago. Polio outbreaks are highly challenging to contain as vaccinated people (children and adults) can still be infected and spread the disease without showing any symptoms. If swift action is not taken, there is a high risk that the virus will spread throughout the region and beyond. Israel in particular has a low level of vaccine coverage in many communities.

Gaza's healthcare system is not capable of responding to a polio outbreak as the system is <u>'virtually depleted'</u>. There are only <u>1400 hospital beds</u> for 2.1 million people. What health systems that are still standing will likely be overwhelmed, inhibiting the ability to respond to all other healthcare needs, including those being created by ongoing violence. Morbidity and

mortality will rise for all other injuries and illnesses, as scarce medical resources go to supporting children affected by this virus. Movements of people will be impacted and may slow down a humanitarian access system that is already deliberately denying civilians the assistance required to meet their basic human needs.

What humanitarians require to respond effectively to the outbreak:

- Guarantee and facilitate safe, unhindered access for all vaccines, associated equipment (including cold chain storage), and specialist staff through all crossing points into and within Gaza, as well as safe unfettered access for children and families to health points across the Strip. In addition to the vaccines, full, unhindered humanitarian access into and within the Gaza Strip is essential. All blockages must end now for the full range of assistance needed to sustain civilian's basic human needs.
- 2. In addition to the <u>humanitarian pause requested by the UN</u>, the only way to comprehensively address humanitarian and protection needs is through an immediate and sustainable ceasefire. Thousands of children do not have time to wait for a negotiations process that continues to delay. At a minimum, an immediate end to hostilities across the whole of Gaza must be instituted to facilitate the vaccination campaign in August and September.
 - a. These should be full, consecutive days defined by the cessation of hostilities for no less than one week for each phase to enable setting up and undertaking the immunization campaign, though the amount of time needed may increase due to the challenges of operating in such a complex environment. The polio vaccine requires two rounds that each reach at least 95% of the intended child population.
 - b. The timeframe is based on the assumption of no access impediments or violent incidents of the type <u>civilians and humanitarians witness every day in Gaza</u> and all attacks on humanitarian workers and medical staff must cease immediately, and permanently.
 - c. It is essential that the geographic, timeframe, access and protection conditions are respected by all parties and the terms are outlined in writing including how compliance will be monitored and breeches addressed. These terms must also be communicated transparently in a timely fashion to affected communities and humanitarian actors in order to ensure there is time to prepare.

Signed:

Islamic Relief Worldwide

MedGlobal

ActionAid

Churches for Middle East Peace (CMEP)

War Child

Norwegian Refugee Council (NRC)

WeWorld

CARE

Medical Aid for Palestinians (MAP)

Humanity & Inclusion/ Handicap International (HI)

DanChurchAid

ChildFund Alliance

Plan International

Accion Contra el Hambre (ACF)

Médicos del Mundo (Médecins du Monde Spain)

Oxfam

International Rescue Committee

Mercy Corps

Children Not Numbers NGO

Save the Children

Doctors and medical professionals:

Feroze Sidhwa, MD, MPH, FACS, FICS

Trauma, critical care, acute care, and General Surgeon Served at European Hospital, Khan Younis, March 25 - April 8, 2024 French Camp, CA

Thaer Ahmad, MD

Emergency Medicine Physician Served at Nasser Hospital, January 2024

John Kahler, MD, FAAP

MedGlobal Cofounder

Served in Tel al-Sultan, Rafah, Gaza, January, March 2024

Abdullah Ghali, MD

Orthopedic Surgery Resident European Hospital in Khan Younis, April 3 - 8, 2024 Houston, TX

Abeerah Muhammad MSN, RN, CEN

Emergency and Critical Care Nurse European Hospital, May 2024

Yipeng Ge, MD, MPH, CCFP

Primary Care Physician and Public Health Practitioner
Tal Al Sultan Primary Health Care Center in Rafah, February 12-19, 2024
Ottawa, Canada

Benjamin Thomson, MD, MSc, MPH(c), FRCPC

Internal Medicine, Nephrology, Public Health Multiple sites in Rafah, Deir-el-balah March 2024 Toronto, Canada

Noor Amin, MD, CCFP(SEM), FCFP

Primary Care, Emergency and Sports Medicine physician Al Aqsa Hospital and European Gaza Hospital April 2024 Mississauga, Canada

Ahmad Yousaf, MD

Internal Medicine/Pediatrician
Al-Aqsa Shushes Hospital, June 24- July 16, 2024

Nabeel Rana, MD

Vascular Surgeon

Served at Al-Aqsa Martyrs Hospital, Deir al-Balah, June 20 - July 9, 2024

Hina Cheema, MD

Obstetrician and Gynecologist Served in Al Emirati hospital, Rafah March 2024 Served in Nassar hospital, Khan Younis, June-July, 2024

Ahmed Ebeid

Anesthesia

Served in European General Hospital, January - February 2024 Served in Kamal Eledwan Hospital, March- April 2024

Bilal Piracha, MD

Clinical Assistant Professor Emergency Medicine Served at Aqsa Hospital, DeirAl-Balah, March 7 -19 & July 19- 25, 2024 Served at Al Ahli Hospital (Gaza City), July 26 - August 1, 2024

Professor Nick Maynard MS, FRCS, FRCSEd

Consultant Surgeon (General and Thoracic Surgery)

Oxford University Hospitals, Oxford, UK

Served as member of Medical Aid for Palestinians Emergency Medical teams in Gaza:

December 26, 2023 – January 8, 2024, Al Agsa Hospital, Deir Al Balah, Gaza

April 22- May 6, 2024, Al Agsa Hospital, Deir Albalah, Gaza

Javid Abdelmoneim FRCP, DTMH

Emergency Medicine Physician Nasser Medical Complex, Khan Younis June -July 2024

Khaled Dawas MD, FRCS (General Surgeon)

Consultant Surgeon

University College London Hospitals

Member of Medial Aid for Palestinians Emergency Medical Teams in Gaza 2023/4

Dr. Trish Scanlan

Pediatrician & Co-Medical Director Children Not Numbers

Dr James Smith MBBS, MA, MSc, MSc

Emergency Physician, UK

Lecturer in Humanitarian Policy and Practice, UCL, UK

Served in Al Agsa Hospital, December 16, 2023 - January 8, 2024

Served in Al-Mawasi, Rafah, Al-Aqsa Hospital, & supported patient evacuations ins Gaza City, North Gaza)

Alia Kattan MD

Anesthesia and Critical Care Medicine Served in European General Hospital, Gaza, April 29 - May 17, 2024

Tanya Haj-Hassan, BMBCh, MSc

Servied in Gaza March 11-25, 2024