Palestinians face humanitarian catastrophe from coronavirus

By Jean Shaoul
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Health authorities confirmed the first two cases of the coronavirus in Gaza this weekend—citizens who had returned from Pakistan and entered Gaza via Egypt.

The arrival of the coronavirus in one of the most densely populated places on earth heralds a humanitarian catastrophe not just for the Palestinians in the Gaza Strip, but people all over the world who face similar atrocious living conditions and a lack of healthcare.

While hundreds of Gazans have returned home in the past two weeks, just 92 people have been tested, due to lack of test kits, suggesting that the number of cases is far higher. More than 1,270 people are in quarantine in hospitals, hotels and schools after crossing into Gaza from Israel and Egypt.

Two weeks ago, Hamas, the bourgeois clerical group that controls Gaza, closed schools and sent in sanitation crews to patrol the streets and public buildings and spray disinfectant. On Friday, it ordered the shuttering of weekly street markets and wedding halls and closed its borders, saying only patients requiring urgent medical treatment outside Gaza would be allowed to cross into Egypt or Israel.

Israel said it was its closing borders with Gaza and the occupied West Bank to commercial traffic, though some patients and humanitarian staff would be allowed to cross. It has sent a derisory 200 coronavirus testing kits to Gaza. Cogat, the Israeli military body that coordinates with the Palestinian Authority, said in a breathtakingly cynical statement, “Viruses and diseases have no borders, and so prevention of an outbreak of the coronavirus in Gaza [and the West Bank] are a prime Israeli interest.”

This foreseeable and foreseen disaster comes after Israel’s 13-year-long siege that has rendered Gaza almost uninhabitable, due extreme overcrowding, collapsed infrastructure, lack of electricity and water, poor sanitary conditions and the gutting of an already limited healthcare system. There is a chronic shortage of drugs, and Gaza’s barely functioning hospitals have struggled to cope with the thousands of horrendous injuries and amputations inflicted on Palestinians by Israel’s armed forces during the weekly “Great March of Return” that started two years ago.

Palestinians in Gaza, living in squalid makeshift camps and slums, have no possibility of either controlling the spread of the virus or accessing medical treatment and supplies. According to Abdelnasser Soboh, director of the World Health Organization’s (WHO) Gaza office, Gaza has only 62 ventilators, with all but 15 already in use, and needs at least another 100. He believes that Gaza’s hospitals can only handle the first 100 cases, if they come in gradually.

It is a death sentence for thousands, if not hundreds of thousands, of Gaza’s nearly two million inhabitants. Israel is, as the occupier of Gaza and the West Bank, under the Hague Convention (1907) and the Fourth Geneva Convention (1949) legally responsible for the safety and welfare of civilian residents, a responsibility Israel denies.

The Palestinian Authority (PA), which governs parts of the West Bank, has reported 59 cases, mostly in Bethlehem, including 17 who recovered. It announced a 14-day curfew, ordering everyone except the security forces, medical staff and food sellers to stay at home and closing roads between cities, towns and villages. Bethlehem has already been under lockdown for weeks. Prisoners who had served half of their sentence for criminal offences were given a pardon and released to reduce the numbers in Palestinian jails.

Despite the severity of the situation, Israel sent just 100 testing kits for the coronavirus to Ramallah.

The situation is no less dire for Palestinians throughout the region. In Israel, where 20 percent of the population are Palestinian, health authorities have confirmed that 1,071 people have tested positive for the coronavirus, one
patient has died and 18 are in serious condition.

With healthcare facilities decimated by decades of cuts and unable to cope, the caretaker government of Prime Minister Benjamin Netanyahu has ordered people not to leave their homes other than to go to work, shop for groceries or seek medical care and closed schools, universities and cultural and leisure facilities. It has banned gatherings of more than 10 people and entry to foreigners unless can prove they are able to self-quarantine for 14 days upon their arrival.

In neighbouring Jordan, which hosts one of the largest refugee populations—from Palestine, Iraq and Syria—per capita in the world, some 70 percent of the 9.7 million population is of Palestinian origin, with 3.2 million Palestinians registered as refugees. There are also at least 650,000 registered Syrian refugees, more than half of whom live in the squalid camps in Za'atari, Marjeeb al-Fahood, Cyber City and Al-Azraq, with at least another one million unregistered Syrians living in the country.

Amman has confirmed that 69 people have tested positive for the virus. On Tuesday, with Jordan’s already feeble economy in free-fall and healthcare facilities incapable of dealing with the virus, there was rioting at a prison in Irbid where two people were killed after visits were banned, King Abdullah signed an emergency law giving the government sweeping powers.

The government announced a nationwide, round-the-clock curfew, in from Saturday, closing schools, universities, leisure centres and workplaces, except for essential services, sealing the country’s borders and banning movement except for emergencies, saying, “The government will announce on Tuesday 24 March certain times when citizens will be allowed to run errands.” Those requiring urgent medical treatment would have to notify security authorities. Some 400 people have already been arrested for ignoring the curfew and face up to a year in jail.

In Lebanon, 10 percent of its 6.8 million population are of Palestinian origin, with most registered as refugees. They have long been denied basic rights—not allowed to attend public schools, work in a number of professions such as doctors and lawyers, own property or pass on inheritances.

The health authorities have reported 230 cases and four deaths in a country whose healthcare system lacks the most basic facilities. Only one hospital in the country is equipped with specialised isolation rooms compliant with international standards.

The pandemic comes amid Lebanon’s default on its $30 billion Eurobond and declaration that it needs its foreign currency reserves for key imports. Last week, the shaky new government of Hassan Diab, formed after protests brought down the government of Saad Hariri, announced a “state of medical emergency,” closing all public and private institutions except hospitals, pharmacies and bakeries, with supermarkets only open at specific times, in an effort to contain the coronavirus outbreak. The banks are closed until March 29.

On Saturday, after the government called in the army to enforce the stay at home orders, patrols drove through the streets of Beirut ordering groups of people to disperse, while army helicopters flew over other parts of the country calling out on loud speakers for those out on the streets to return home.

On Sunday, Syria, where there were 650,000 Palestinians before the nine-year proxy war to topple President Bashar al-Assad, confirmed its first case of the coronavirus. Damascus announced a ban on public transport and stepped up the lockdown introduced a few days ago that included the closure of schools, parks, restaurants and many public institutions. It has called off army conscription, issued a prisoner amnesty and ordered bakeries to close their stalls and deliver to customers at home.

A few weeks ago, a WHO spokesperson warned that Syria’s “fragile health systems may not have the capacity to detect and respond” to the pandemic. This is particularly the case in the crowded camps for tens of thousands of displaced Syrians.

The situation is no better in the rest of the Middle East and North Africa, where in country after country—Iraq, Libya, Yemen, Sudan, Syria and Iran—healthcare systems have been ravaged by years of wars and/or sanctions, orchestrated by US imperialism. Their plight foreshadows what is to come in the poorest countries of the world, where as many as one billion people, one seventh of the world’s population, live in squalid, makeshift shacks, without proper sanitation or access to clean water, basic services and healthcare.