# **Current Status Report/ Gaza**

Date: 7 December 2025

### **Overview**

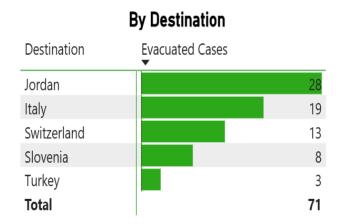
According to data from the Health Cluster and the World Health Organization covering the period from October 2024 to October 2025, the Gaza Strip recorded a total of 825 attacks on health care. Of these incidents, 687 attacks targeted health facilities. Additionally, 211 attacks impacted health transport, severely restricting the mobility of ambulances and emergency medical teams and limiting the timely delivery of life-saving The human toll of these attacks remains severe. Recorded casualties include 985 fatalities associated with violence against health care, alongside approximately 2,000 injuries among health workers, patients, and individuals attempting access medical services. to Furthermore. 306 health workers were detained, in addition to 70 detained patients, underscoring the escalating risks faced by medical personnel and vulnerable populations seeking or providing care.



#### **Medical Evacuation**

According to the WHO, there are still approximately 16,500 patients in Gaza in need of medical evacuation. The top medical evacuation needs are trauma and oncology, followed by ophthalmology, congenital

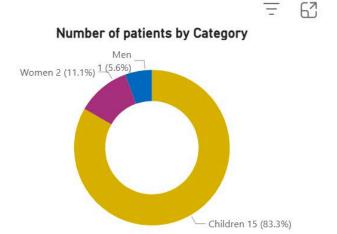
cardiovascular anomalies. and diseases. Current referral destinations include Egypt, the United Arab Emirates, Qatar, Turkey, EU countries, Jordan, Algeria, Tunisia, Oman, and the USA. Despite the scale of medical need, only a very small number of evacuation cases have been processed. The pathways are highly restricted, approvals are slow and inconsistent, and crossings frequently close without notice. As a result, in November, just 71 cases were processed, including 60 children, 5 women, and 6 men. These cases were transferred to Jordan, Italy, Switzerland, Slovenia, and Turkey.



Moreover, between 1 and 12 December, only 18 cases were evacuated, most of them to Jordan. This reflects the extreme gap between urgent medical needs and available evacuation pathways, highlighting how complicated and restrictive the evacuation process has become for patients who require immediate, lifesaving care.

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Restoring access to East Jerusalem hospitals for patients from Gaza remains the fastest, most efficient, and most humane solution. Reopening this corridor would relieve Gaza's collapsing system and reinforce health humanitarian commitments. The infrastructure. expertise, referral and mechanisms already exist; what is urgently required is political will and diplomatic support to restore regulated medical access and save lives.

## Status of AVH Services in Gaza

AVH's team in Gaza continues to operate at full capacity across all departments, maintaining regular workflows while implementing a rotation system in select units as needed. Despite internal stability, access to the facility remains a significant constraint. The primary challenge concerns staff returning to Khan Younis, where travel may take up to 3 hours

due to extensive road damage and limited movement between the northern and southern areas. These conditions adversely affect staff attendance and overall mobility.



During **November,** the Radiology Department recorded a high caseload. A total of 1,478 CT scan cases and 3,394 (DR) cases were received. This volume reflects the increased demand for diagnostic imaging services amid the ongoing strain in the broader health system. It underscores the essential role of radiology in supporting emergency, surgical, and oncology-related care.

Another challenge AVH faces in Gaza is that the CT scanner remains the only central diagnostic device still operational. It has continued operating under extremely difficult conditions but has been forced to work far beyond its intended capacity due to the overwhelming number of patients. Damage to the surrounding infrastructure, along with repeated power outages, has led to frequent malfunctions and increased the need for urgent maintenance and spare parts. These factors are likely to affect the machine's performance further and place essential diagnostic services at serious risk. For this reason, AVH management is developing a plan to closely monitor workload while ensuring patient needs continue to be met. Currently, only the pathology laboratory is operational. The laboratory comprises three units: Pathology, Clinical Laboratory, Cytology, and Chemistry. The cytology/chemistry units

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remain non-operational due to shortages of essential supplies and disposables, as well as insufficient technical staffing. The available laboratory workforce consists of one physician and two technicians, all from the pathology unit. It is worth noting that the AVH pathology laboratory in Gaza is equipped with advanced, high-quality technology. However, during the war, the laboratory was not operational. To protect the equipment from damage, the staff carefully moved all machines and tools into a single secure room, with the intention of restoring them once conditions allowed.

After the ceasefire, the team returned the equipment to the laboratory and resumed limited operations. Moreover, recent supplies delivered as part of an LWF/AVH medical shipment have improved service quality, particularly in hormone testing related to breast cancer and other malignancies. These materials have enhanced the accuracy and reliability of diagnostic reports. Limited quantities of essential consumables, such as alcohol and formalin, have also enabled the laboratory to operate within its current capacity constraints.

However, although the laboratory is now operational again, the quantity of medical supplies received remains below what is required to meet the clinic's high daily demand and the number of cases it receives. As a result, services are operational but significantly constrained.

Additionally, in mid-**November** 2025, another medical shipment was sent to the AVH clinic in Gaza with WHO support. The shipment is expected to arrive next week and includes essential supplies needed for basic laboratory and diagnostic work. These materials are critical to helping the pathology and laboratory teams continue performing accurate, timely

medical tests, even under extremely difficult operating conditions.



# **Information Systems and Infrastructure**

In November 2025, the AVH team in Gaza assessed the facility and equipment following the war and began implementing maintenance plan to restore safe operations. During this period, electronic systems and internet connectivity were restored, technical teams continued to monitor and maintain the servers on the AVH floor to ensure uninterrupted service. Close cooperation between the AVH teams in Gaza and Jerusalem now supports ongoing technical coordination and problem-solving. A protective security gate was installed on the second floor to safeguard equipment. Maintenance work continues under AVH supervision, including checks of power systems, generator servicing, calibration of medical and IT equipment, and reinforcement of infrastructure to withstand power and connectivity disruptions.



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# **Advocacy & Humanitarian Support**

LWF, together with international advocacy partners, remains committed to supporting Gaza's health sector through both immediate humanitarian action and long-term legal and policy advocacy. In November, LWF's advocacy partners prepared documentation and case files for submission to the Israeli High Court, working alongside leading NGOs to challenge restrictions and protect access to health services. This advocacy is essential demonstrating how the East Jerusalem Hospitals Network (EJHN) plays a critical, life-saving role for Palestinian patients, particularly in ensuring medical evacuations and sustaining specialized care that is currently unavailable inside Gaza. Also, in November, with the guidance of LWF, AVH reviewed several severe cancer cases that required immediate medical evacuation and explored secure options for transferring these patients out of Gaza. In coordination with the East Jerusalem Hospital Network (EJHN), planning also began to identify medical teams to deploy to Gaza to support overstretched healthcare staff.

**Ongoing Needs and Advocacy Priorities** 

Looking ahead, sustaining the health response in Gaza requires urgent and coordinated action. LWF and its partners highlight three immediate priorities: reopening the humanitarian medical corridor to ensure timely evacuations and access to treatment; deploying multidisciplinary medical teams from the East Jerusalem Hospital Network (EJHN) to support exhausted healthcare workers; and securing the release of detained medical staff to restore the health workforce and uphold international humanitarian

standards. Together, these steps are essential for rebuilding critical services and safeguarding the well-being of both patients and medical personnel. Continued coordination international and regional actors will remain vital to overcoming access barriers and ensuring that lifesaving assistance reaches those most in need. Moreover, the situation remains fluid and highly fragile, and AVH and its partners continue to prioritize emergency care, patient protection, and the restoration of essential health services, while advocating for sustained humanitarian access and the safety of medical personnel.

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