

Netanyahu government denies vaccine to Palestinians as it lauds mass rollout to Israelis

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To great fanfare, Prime Minister Benjamin Netanyahu's immunisation drive has given a first dose of the Pfizer-BioNTech vaccine to 1.7 million Israelis, around 15 percent of Israel's nearly 10 million population.

A second dose will be administered within 21 days of the first, meaning all those most at risk—healthcare workers and those over 60 years of age—will be protected from the virus now raging across the country.

Nevertheless, the lifting of an early lockdown in May in the interests of the financial elite has seen an alarming rise in cases since September that will continue to escalate. A total of 471,000 infections and 3,600 deaths, largely in the latest wave, has forced the government to impose a third limited lockdown.

While Netanyahu has trumpeted the vaccination rollout, dubbed "Returning to Life", as the fastest in the world, its distribution has been rife with inequities and mismanagement. Teachers were excluded from the initial rollout, despite at least some schools remaining open, while tens of thousands of young people were able to get the vaccine and thousands of doses went to waste, according to the Health Ministry. The government has now agreed to vaccinate them after the Teachers' Union threatened strike action.

With the vaccines widely reported as running out, Netanyahu negotiated with Pfizer to increase the number of the vaccines and the speed of arrival.

Fewer of Israel's Palestinian citizens, including those living in East Jerusalem, have been vaccinated than Jewish Israelis, due to the far lower level of healthcare provision in the Palestinian communities and their distrust of official government programmes. But crucially the rollout does not include the five million Palestinians living in the West Bank and Gaza, which Israel has illegally occupied since the 1967 Arab-Israeli

war.

This is yet another example of the gross inequities in the distribution of the vaccine within and between countries across the globe as the rich get the jab while the poor wait in line. It is a gross violation of Israel's responsibilities under the 1949 Geneva Convention for the health of the Palestinians living in the areas it controls, including the obligation to ensure medical supplies and preventative measures "to combat the spread of contagious diseases and epidemics."

Under the Oslo Accords, Israel agreed to bilateral cooperation on issues involving healthcare and epidemics but has in practice reneged on its obligations to the extent that the Palestinians have long endured problems importing medical equipment and an opaque security permit regime that makes it difficult for those in need of life-saving medical care to seek treatment in Israel or abroad.

Israel turned down a modest request from United Nations officials to provide the Palestinians with vaccines for their medical workers, saying that there was a shortage of shots for its own citizens. Health Minister Yuli Edelstein said that while it was in Israel's interest to contain the virus among the Palestinians, its first obligation was to its own citizens.

Israel has refused to acknowledge the Palestinian Authority's (PA) informal approach to procure and distribute a vaccine on its behalf. Rejecting accusations of "medical apartheid" as tantamount to anti-Semitism, it argued that since the PA had not officially requested help obtaining the vaccine, Israel was not responsible for providing medical support to Palestinians.

The prejudicial treatment of the Palestinians will have its impact on all Israelis. Tens of thousands of Palestinians travelling from the West Bank to work in Israel and the settlements will be a major factor in

transmitting the virus.

Israel's actions are rendered still more obscene by the astronomical price Netanyahu has paid for the vaccines, demonstrating yet again the distorting effect of the profit gouging and ferocious national competition for the vaccines. According to a health ministry official, the government has bought the Pfizer-BioNTech vaccine that requires storage at ultra-low temperatures at the extortionate price of \$62 a dose, more than four times the \$14.59 the European Union (EU) is paying for the same vaccine. It is also far higher than the EU is paying for the Oxford-AstraZeneca vaccine at \$2.16 a shot or the Moderna vaccine at \$18.

For Netanyahu, price is no object if it secures a successful vaccine rollout, not due to genuine concerns for the health of the population. His motivation is an ability to pose as the man who banished the virus in the campaign for the March 23 general election. His political position has become increasingly precarious with the pending exit of his patron US President Donald Trump from the White House, a new Democratic Party administration under Joe Biden, and his scheduled appearance in court—now delayed due to the pandemic—to defend himself against charges of bribery, corruption and breach of trust in return for favourable news coverage.

The pandemic is surging throughout the Palestinian territories, with the West Bank reporting 119,000 infections and 1,257 deaths, and Gaza 44,000 infections, with 32 percent of daily tests positive, and 409 deaths, prompting a new round of restrictions and curfews.

Without any functioning air or seaports or mass-storage facilities for vaccines requiring refrigeration, and with all borders except for the Rafah crossing between Gaza and Egypt controlled by Israel, the Palestinians are totally dependent upon Israel for imports, including food, medical supplies and other basic commodities. Healthcare systems have withered under the pressure of a brutal occupation, constant military assaults and the deliberate destruction of largely agricultural economies.

The situation in Gaza is worse. The densely populated enclave has suffered an 11-year land, sea and air blockade, and only has electricity a few hours a day affecting water and sewerage facilities and making the use of vaccines requiring refrigeration impossible.

The combined effect has rendered 2.5 million Palestinians, about 47 percent of the occupied territories, dependent on aid, according to the UN Office of the Coordination of Humanitarian Affairs (OCHA), leaving them particularly vulnerable to the pandemic.

The PA has been unable to get Russia's Sputnik V vaccine, on which it had depended and which Israel is not expected to approve in the near future. Moscow has reportedly refused to export the vaccine, saying it has insufficient supplies for its own population.

According PA Health Ministry official Dr Ali Abed Rabbo, two million doses of the Oxford-AstraZeneca vaccine are expected in February, although it is unclear where the money to pay for this will come from. The PA is waiting for a shipment of 60,000 doses from the World Health Organisation's (WHO) Covax initiative, which is unlikely to arrive before the end of February, as vaccines offered by Covax have yet to gain "emergency use" approval by the WHO, the prerequisite for distribution. Even this and a shipment of up to two million doses later in the year will be insufficient for the five million Palestinians in the West Bank and Gaza.

These conditions are an indictment of the imperialist powers and the Arab bourgeoisie that have backed Israel's suppression of the Palestinians, paving the way for a catastrophe of vast dimensions, and of a capitalist order that is incapable of organising a rational, equitable and comprehensive vaccine programme that could end the pandemic.



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