In December 2016, the Humanitarian Country Team (HCT) in the occupied Palestinian territory (oPt) launched its Humanitarian Response Plan (HRP) for 2017. Since then, the situation in the Gaza Strip has significantly worsened, due to a dramatic deterioration in the energy situation and other developments related to internal Palestinian dynamics, affecting the entire population of two million people. In response, the HCT, including UNRWA, has identified the following top priority, life-saving interventions needed in the Health, WASH and Food Security sectors to address the most acute humanitarian needs today. Many of these interventions were previously included in the 2017 HRP but remain unfunded despite the added urgency. Other interventions are new interventions that will now be added to the HRP to address the changing humanitarian context. These prioritized funding requirements amount to US $25.2 million. Failure to respond to these needs will exacerbate human suffering and increase the risk of a new round of violence.

DETERIORATING HUMANITARIAN CONTEXT: 2017 DEVELOPMENTS

In the 10 years since the violent take-over of Gaza by Hamas, the enforcement of a blockade on Gaza by Israel and the administrative division that ensued within the Palestinian Authority, the humanitarian situation in the Gaza Strip has become increasingly fragile. The situation, has deteriorated further still in recent months following an escalation of the conflict between the Hamas de facto authorities and the West Bank-based Palestinian Authority (PA).

At the heart of this deterioration is an aggravation of Gaza’s longstanding electricity crisis. In mid-April 2017, Gaza’s sole power plant (the ‘GPP’), which provided about a third of Gaza’s electricity, was forced to shut down following the failure by the two parties to resolve a dispute over the payment of taxes on fuel. In May, the Palestinian Authority informed the Israeli Electricity Company (IEC) it will no longer fully pay for the electricity supplied to Gaza through Israel and requested that supply be reduced by 30 per cent. One month later, the IEC implemented the decision in stages, with the first on 19 June. As the supply was gradually reduced, almost concurrently, on 22 June, Hamas and the Egyptian authorities reached an arrangement to import fuel from Egypt, allowing the GPP to resume partial operation. However, the amount of energy produced by the GPP with the fuel purchased in the Egyptian market, is only enough to counteract the reduction in Israeli supply and does not result in an overall gain in energy supply. As such, Gaza is currently being supplied with only about 4-6 hours of electricity a day, down from 8-12 hours before April.

The longer blackouts are having a pervasive impact on all aspects of life, undermining basic services and generating serious public health concerns. Hospitals are postponing elective surgeries, discharging patients prematurely, and reducing cleaning and sterilizing of medical facilities. Water supply through the network reaches most homes for just a few hours every 3-5 days, and desalination plants are functioning at only 15 per cent of their capacity. More than 108 million litres of untreated sewage are being discharged into the Mediterranean every day, while wastewater pumping stations are at constant risk of overflow.

Despite the longer power shortages, 189 critical facilities providing health, water and sanitation, and solid waste collection services are able to maintain a minimum level of operation, with emergency fuel provided by humanitarian agencies to run backup generators and vehicles. However, even this current minimal level of service provision is at risk due to the shortage of funds to maintain emergency fuel deliveries beyond August 2017.

The exhaustion of emergency fuel could occur even earlier if electricity supply declines further. This may happen as a result of a new shutdown of the GPP, which depends on an uncertain arrangement for the supply of fuel, or as a result of an additional reduction in the PA’s funding for the electricity supplied by Israel.

The provision of health services is also challenged by additional factors. Delays in the shipment of essential drugs and disposables from the West Bank by the PA’s Ministry of Health (MoH), has resulted in some 37% per cent of essential pharmaceuticals and 32% of medical supplies being at zero stock at Gazas Central Drug Store. The MoH appears to have also recently been delaying or suspending the payment for the referral of patients to medical treatment outside Gaza, as reported by the World Health Organization, with about 1,600 patients currently on a waiting-list at the time this document went to print. This may be resulting in higher mortality rates among waiting patients, including highly vulnerable neonates.

The escalation in this internal Palestinian divide is also being felt more widely in the fragile economy of Gaza, affecting the livelihoods of many. Power shortages have undermined economic activity, particularly in the manufacturing and agriculture sectors, compounding the impact of an ongoing salary crisis in the public sector. Since March 2017, the PA has cut the salaries of some 62,000 public employees in Gaza by 30-50 per cent, while about 22,000 employees recruited by the Hamas authorities receive typically less than half of their salaries, and on an irregular basis. In addition to the direct impact on affected staff and their families, some of whom may risk becoming food insecure, the salary crisis will ultimately be felt more broadly in Gaza’s restricted economy, as a result of an expected fall in consumption levels.

1 Of which around 80% are existing 2017 HRP requirements.
2 Over 70 per cent of these staff were not working since 2007 following PA’s instructions to boycott the Hamas government.
GAZA POWER DEFICIT UPDATE MAY 2016

Palestine

Gaza Strip Total

Deficit

Percentage of demand met

Electricity by provider

Israel 59%
Gaza power plant 29%
Egypt 12%

450 MW Demand
205 MW Available

1.9 Million Affected population

8-12 HOURS of scheduled electricity outages are implemented across Gaza per day.

GAZA POWER DEFICIT | PRE-APRIL 2017
MAIN HUMANITARIAN NEEDS

Existing information, including from field observations, indicates that the following are the most immediate factors undermining the humanitarian situation and generating threats to life for the population of Gaza

**HEALTH AND NUTRITION**

The entire 2 million people in Gaza are affected directly or indirectly by the health consequences of the current crisis. The prolonged electricity cuts and the shortages of fuel to run generators impact on the functionality of health facilities and hospitals, jeopardizing lifesaving services, including intensive care, hemodialysis and neonatal care units. The situation is aggravated by the shortages of drugs and medical supplies and the increasing delays in the referral of patients to treatment outside Gaza, following delays in the processing of permits and financial commitment documents.

**WASH**

1.45 million people in Gaza are at risk of contracting waterborne diseases due to the consumption of unsafe water. This is due to the electricity shortage that is impacting the operation of approximately 130 critical water and sanitation facilities and is also resulting in the discharge of untreated sewage into the sea, causing environment pollution.

**FOOD SECURITY**

1.2 million people in Gaza, who were considered moderately to severely food insecure prior to the recent deterioration, are now facing increased economic obstacles in accessing food. The underlying fragility in food and nutrition security, which is particularly under stress in times of shock like the current crisis, continues to pose grave risks to the social welfare of the population in the Gaza Strip. Without additional social assistance and basic services, the food insecure will be placed at further risk. Vulnerable farmers face increased risk of losing their crops, livestock and having their agricultural and livelihood assets threatened, further exposing them to negative coping mechanisms.
Prolonged electricity cuts and fuel shortages have a negative effect on hospitals, particularly on critical departments, such as intensive care, kidney dialysis and neonatal care units, where patients rely on electrical equipment. The situation is life-threatening for newborn babies in neonatal intensive care units, patients in intensive care and patients requiring hemodialysis 2-3 times a week.

Refrigeration for blood and vaccine storage is at risk.

Common coping mechanisms include the postponement of non-urgent and elective surgeries; increasing referrals of patients outside of Gaza, particularly for chronic illnesses; discharging patients prematurely; and reduction and/or cancellation of complementary services, such as cleaning and catering.

The constant fluctuation in the current of electricity results in frequent damage to the medical equipment; according to WHO, there are 300 machines and equipment items currently out of order and awaiting repair.

Shortages of essential drugs continue to be a challenge: by end-June 2017 some 36 per cent of essential pharmaceuticals and 32 per cent of medical supplies are at zero stock at Gaza’s Central Drug Store, which in turn contributes to increasing the need for patients to be referred outside of Gaza for treatment.

The number permit applications denied or delayed by the Israeli authorities to access health care outside Gaza has been on the increase, reaching 53 per cent by end-May 2017.

*For a set of indicators identified by the Health Cluster to monitor any change in the impact of the electricity crisis on the health sector in Gaza, see page 8.
The chronic energy crisis continues to have a negative impact on the water and sanitation sector, particularly on the operation of water treatment facilities, wastewater pumping stations, and drinkable/piped water supply, leading to increased public health risks.

The power shortages and lack of repairs have reduced water supply from 90 liters per capita per day to about 70 liters per capita per day, leaving people supplied with piped water for 6-8 hours each 3 to 5 days.

Production of desalination plants has decreased to 15 per cent of their maximum capacity of 20,000 m$^3$/day, which risks lowering hygiene standards.

There is a heightened risk that raw sewage will overflow into the streets, with the potential to flood heavily populated areas, pollute the ground water source and impact health and well-being.

Over 108 million litres of raw or poorly-treated sewage are being discharged into the Mediterranean Sea every day, contaminating coastal areas.

*For a set of indicators identified by the WASH Cluster to monitor any change in the impact of the electricity crisis on the health sector in Gaza, see page 8.*
IMPACT OF CRISIS AND LACK OF FUNDING FOR THE FOOD SECURITY SECTOR*

• Unless new funding is imminent, the World Food Programme (WFP) will be forced to suspend its assistance to nearly 92,000 residents of the Gaza Strip in July, the majority of whom are women and children. A disruption of WFP food assistance could undermine food security and worsen the living conditions of the poorest and most severely food-insecure families, most of whom live on less than $3.20 a day.

• Immediate loss of agricultural produce, compounded by further loss due to unaffordable vegetable storage refrigeration costs.

• Expected further deterioration in the income of severely food-insecure households headed by women, fishers and farmers who will be unable to continue their agriculture production, and to safeguard their assets, leading them to resorting to negative coping mechanisms. These severely food insecure families had a significant consumption gap even before the current crisis and are less able to cope.

*For a set of indicators identified by the Food Security sector to monitor any change in the impact of the electricity crisis on the health sector in Gaza, see page 8.
The Humanitarian Country Team in the oPt has identified a set of indicators to monitor any change in the deterioration of the crisis in Gaza. These can be used as a trigger for humanitarian action and help prevent the downward spiral of increased vulnerability to a future crisis.

### EARLY WARNING INDICATORS FOR MONITORING THE SEVERITY OF THE CRISIS IN GAZA

<table>
<thead>
<tr>
<th>Cluster</th>
<th>Indicator</th>
<th>Source</th>
<th>Frequency of data collection</th>
</tr>
</thead>
<tbody>
<tr>
<td>General</td>
<td>Hours per day (electricity)</td>
<td>OCHA</td>
<td>Monthly</td>
</tr>
<tr>
<td></td>
<td># of days of fuel availability (WASH, HEALTH, Solid Waste)</td>
<td>UNRWA/OCHA</td>
<td>Monthly</td>
</tr>
<tr>
<td></td>
<td>Monthly fuel requirement (in liters) to cover the electricity shortage</td>
<td>UNRWA/OCHA</td>
<td>Monthly</td>
</tr>
<tr>
<td>Health</td>
<td>The monthly number of medical referrals (With approved financial cover).</td>
<td>WHO/PCHR</td>
<td>Monthly</td>
</tr>
<tr>
<td></td>
<td>Incidents of diarrheal diseases among children under three years old.</td>
<td>UNRWA/MOH</td>
<td>Monthly</td>
</tr>
<tr>
<td></td>
<td>Waiting time for elective surgeries (e.g. ENT) at Shifa hospital.</td>
<td>MOH</td>
<td>Monthly</td>
</tr>
<tr>
<td>Food Security</td>
<td>% of increase cost of daily dish vegetables (tomato, potato and eggplant)</td>
<td>FSS (MoA)</td>
<td>Monthly</td>
</tr>
<tr>
<td></td>
<td>Average Food – coping strategies Index (CSI)</td>
<td>FSS (WFP)</td>
<td>Monthly</td>
</tr>
<tr>
<td>WASH</td>
<td>Quantity/quality of wastewater flows into the sea</td>
<td>CMWU</td>
<td>Monthly</td>
</tr>
<tr>
<td></td>
<td>Access to piped water (Liter/capita/day)</td>
<td>CMWU</td>
<td>Monthly</td>
</tr>
</tbody>
</table>

### FUNDING NEEDED

**TOTAL FUNDING REQUIRED TO RESPOND TO CRITICAL NEEDS:**

<table>
<thead>
<tr>
<th>PRIORITY SECTORS</th>
<th>2017 HRP FUNDING FOR GAZA FOR PRIORITY SECTORS</th>
<th>ORIGINAL REQUIREMENTS FOR PRIORITIZED PROJECTS US$</th>
<th>URGENT REQUIREMENTS OF PRIORITIZED PROJECTS US$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and Nutrition</td>
<td>9M 0.29M 8.7M</td>
<td>4.1M 8.5M²</td>
<td></td>
</tr>
<tr>
<td>Food Security</td>
<td>214.8M 67.8M 147M</td>
<td>44.8M 8.8M⁴</td>
<td></td>
</tr>
<tr>
<td>WASH</td>
<td>21.5M 2M 19.5M</td>
<td>10.1 M 7.9M⁵</td>
<td></td>
</tr>
<tr>
<td></td>
<td>245.4 M 70.09 M 175.2 M</td>
<td>59.1 M 25.2 M⁶</td>
<td></td>
</tr>
</tbody>
</table>

² The requested amount for Health includes the addition of a new project and an existing project which has been expanded to respond to emerging needs in Gaza. The other projects included in the health package are existing projects with only their Gaza unfunded requirements factored into the total requirements.

⁴ FSS partners have agreed to prioritize certain components of the selected projects as follows: most of the selected livelihood projects have had 20-30% of their original requirements prioritized, except for two small projects proposed by local NGOs which include 50% and 100% of their original requirements, while of the $6.6 million urgently needed for WFP’s food assistance programme, only the budget partition for the Gaza food assistance has been factored into the total requirements for this prioritized response.

² The requested amount for WASH includes existing projects with only their Gaza unfunded requirements factored into the total requirements.

⁶ Of which around 20% of the total requirements represent new activities to respond critical needs identified for this current crisis.
Health and Nutrition

Food Security

Water, Sanitation & Hygiene (WASH)

[Note: specific projects to respond to priority actions are presented as an ANNEX at the end of this document]

7 The response priorities listed in this section were the three agreed priorities that were used by clusters to guide the criteria for the identification of projects prioritized for this package.
RESPONSE TO CRITICAL LIFE-SAVING NEEDS IN THE HEALTH SECTOR

- Secure fuel to operate the backup electricity generators for hospitals in Gaza.
- Provide maintenance, spare parts and upgrade the backup electricity generators of Gaza hospitals.
- Provide essential lifesaving drugs, including neonatal, medical consumables and infection control supplies to be used for new born babies, children, pregnant and lactating mothers in Gaza.
- Procure essential medical equipment and disposables, laboratory reagents and supplies for primary health care, hospitals and clinics.
- Advocate for access of referral patients to proper medical destinations.

RESPONSE TO MITIGATE A FURTHER DETERIORATION IN THE FOOD INSECURITY SITUATION FOR THE MOST VULNERABLE HOUSEHOLDS IN GAZA

- Provide food assistance through vouchers for the next three months to the poorest and severely food insecure non-refugee families in the Gaza Strip.
- Provide urgent support for Gazan farmers who have been facing a severe shortage in electricity needed to operate irrigation wells and pumping systems and hence risking significant losses in the current production cycle.
- Provide photovoltaic systems for pumping irrigation water, as well as other applications utilizing solar energy instead of unreliable grid connection or diesel generators. This approach will also include providing urgent assistance for vulnerable heads of household suffering from the current crisis, including farmers and fishers.
- Support farmers to recover from this shock and to avoid them missing the next planting season.
RESPONSE TO BASIC LIFE-SAVING WATER, SANITATION AND HYGIENE NEEDS TO AVOID AN OUTBREAK OF WATER-BORNE AND WATER RELATED DISEASES

- Provide emergency fuel, in the absence of electricity, at a rate of 200,000-400,000 liters/month to 130 critical/lifesaving water and sanitation installations in consultation with other stakeholders, including Palestinian Water Authority (PWA) and Coastal Municipalities Water Utility (CMWU) and communities.

- Carry out critical electromechanical repairs, maintenance works and procurement of materials and spare parts required for water wells, booster stations and desalination plants, wastewater pumping and treatment facilities, as well as heavy machinery repairs.

- Procure and supply hygiene kits.

- Procure and supply spare parts and consumables as well as repair electric power supply generators for key water and wastewater installations.

- Procure and supply sodium hypochlorite solution and chlorinators for urgent disinfection of water produced by water wells and pumped into distribution networks, in addition to chlorine dosing pumps (chlorinators) and its associated spare parts, electronic residual chlorine testers, and water testing kits and reagents.

- Procure and supply chemicals for water treatment in desalination plants (antiscalant, caustic soda, HCL acid, and citric acid).

- Procure and supply fittings and accessories for water networks and carrier lines emergency and regular repairs.

- Procure and supply fittings and accessories for water chlorination systems including provisional systems required to chlorinate effluent wastes water in order to reduce pathogens contamination of sea water at the location of outfalls and their surroundings.
GUIDE TO GIVING

TO URGENT NEEDS AS A DIRECT RESULT TO THE ELECTRICITY CRISIS IN GAZA

CONTRIBUTING TO THE OPT PRIORITY FUNDING REQUIREMENTS TO RESPOND TO PRIORITY NEEDS IN GAZA.

Donors wishing to support the priority projects outlined in this report can make their contributions directly to the Agencies involved.

CONTRIBUTING TO THE OPT HUMANITARIAN FUND

Support for the OPT Humanitarian Fund: The HF can rapidly fund NGOs and UN agencies to support critical humanitarian activities in sudden onset emergencies. The HF is also now an expanded instrument to strengthen strategic coordination of resources, in particular to support “time critical” priority projects in the Humanitarian Response Plan, including the response to urgent needs in Gaza outlined in this funding document.

With the support of the OPT HF donors (Belgium, Germany, Ireland, Norway, Spain, Sweden, Switzerland and Turkey), the HC will be launching a reserve allocation to support the identified needs in this funding requirements document for Gaza with available total of US $2.5 million. The reserve allocation is intended for rapid and flexible allocation of funds in response to unforeseen circumstances, emergencies, or contextually relevant needs. The reserve allocation process is significantly quicker and lighter than the standard allocation process. All reserve allocation proposals must undergo a competitive prioritization process using scorecards in the GMS. The process of the reserve allocation is executed through a number of steps starting by developing an allocation strategy. Eligible partners can prepare project submissions that address the priorities outlined in the Allocation Strategy Paper. These take the priorities of the HRP as the starting point and identify priority sectors/geographical locations/target populations that the fund will support. For any further information, please contact: Saad Abdel-Haq at Mobile: (+972) 0543311815; E-mail: Abdel-haq@un.org

REGISTERING AND RECOGNIZING YOUR CONTRIBUTIONS

OCHA manages the Financial Tracking Service (FTS), which records all reported humanitarian contributions (cash, in-kind, multilateral and bilateral) to emergencies. Its aim is to give credit and visibility to donors for their generosity to show the total amount funding and resource gaps in humanitarian appeals. Please report your contributions to FTS, either by email to fts@un.org or through the on-line contribution report form at http://fts.unocha.org. For any further information, please contact: Alicia Burke-Moore at Mobile: (+972) 543311829; E-mail: burke@un.org

All details are available on-line at:

https://fts.unocha.org/appeals/529/projects?order=project_property_2&sort=asc

https://fts.unocha.org/appeals/529/
ANNEX
PROJECTS

- Water, Sanitation & Hygiene (WASH)
- Health and Nutrition
- Food Security
## WATER, SANITATION AND HYGIENE PROJECTS

**PRIORITY REQUIREMENTS: 7,886,267 US$**

<table>
<thead>
<tr>
<th>Appealing Agency</th>
<th>Project code</th>
<th>Project title</th>
<th>Original Requirements US$</th>
<th>Priority Requirements US$</th>
<th>Revised/ New/ Original</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNRWA</td>
<td>OPT-17/WS/98428/5593</td>
<td>A critical deterioration in public health among refugees is avoided through emergency water and sanitation interventions</td>
<td>4,500,000</td>
<td>2,658,372</td>
<td>Original</td>
</tr>
<tr>
<td>UNICEF</td>
<td>OPT-17/WS/98346</td>
<td>Providing safe water and sanitation to the most vulnerable communities affected by access restrictions to WASH facilities in the Border Area (AR/BA) of the Gaza Strip.</td>
<td>3,111,329</td>
<td>2,761,155</td>
<td>Original</td>
</tr>
<tr>
<td>UNICEF</td>
<td>OPT-17/WS/98360</td>
<td>Humanitarian response to improve access to the essential structures for hygienic services for the most vulnerable girls, boys, women and men in the Gaza Strip</td>
<td>1,319,215</td>
<td>1,251,352</td>
<td>Original</td>
</tr>
<tr>
<td>OXFAM GB</td>
<td>OPT-17/WS/97653</td>
<td>WASH Support to Vulnerable Gaza Population in Fragile War Affected and Under-Served Communities*</td>
<td>1,215,388</td>
<td>1,215,388</td>
<td>Original</td>
</tr>
</tbody>
</table>

## HEALTH AND NUTRITION PROJECTS

**PRIORITY REQUIREMENTS: 8,509,049 US$**

<table>
<thead>
<tr>
<th>Appealing Agency</th>
<th>Project code</th>
<th>Project title</th>
<th>Original Requirements US$</th>
<th>Priority Requirements US$</th>
<th>Revised/ New/ Original</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNICEF</td>
<td>OPT-17/H/98224/124</td>
<td>Essential and life-saving child health interventions in most conflict affected communities in Gaza - Reducing neonatal mortality</td>
<td>2,804,490</td>
<td>1,924,584</td>
<td>Original</td>
</tr>
<tr>
<td>WHO</td>
<td>OPT-17/H/98173</td>
<td>Protecting Right to Health in Gaza through advocacy</td>
<td>584,465</td>
<td>584,465</td>
<td>Original</td>
</tr>
<tr>
<td>UNRWA</td>
<td>OPT-17/H/</td>
<td>Emergency Health Program in Gaza</td>
<td>N/A</td>
<td>4,500,000</td>
<td>New</td>
</tr>
<tr>
<td>WHO</td>
<td>OPT-17/H/98143/R</td>
<td>Sustaining health service delivery to patients seeking care at Gaza Hospitals</td>
<td>750,000</td>
<td>1,500,000</td>
<td>Revised</td>
</tr>
</tbody>
</table>
## FOOD SECURITY PROJECTS

**PRIORITY REQUIREMENTS: 8,854,442**

<table>
<thead>
<tr>
<th>Appealing Agency</th>
<th>Project code</th>
<th>Project title</th>
<th>Original Requirements US$</th>
<th>Priority Requirements US$</th>
<th>Revised/New</th>
<th>Original</th>
</tr>
</thead>
<tbody>
<tr>
<td>WFP</td>
<td>OPT-17/F/98232/561</td>
<td>Food Assistance for Food-Insecure Population in the Gaza Strip-PRRO 200709</td>
<td>28,406,586</td>
<td>4,000,000</td>
<td>Original</td>
<td></td>
</tr>
<tr>
<td>Première Urgence - AideMédicale Internationale</td>
<td>OPT-17/ER/96686</td>
<td>Protect people living in the Access Restricted Areas and surroundings from protracted protection threats, enhance their resilience and livelihoods and advocate for their rights</td>
<td>1,059,675</td>
<td>317,903</td>
<td>Original</td>
<td></td>
</tr>
<tr>
<td>CARE International</td>
<td>OPT-17/F/97233</td>
<td>Emergency livelihoods response to small scale farmers affected by the Gaza crisis.</td>
<td>1,895,899</td>
<td>568,770</td>
<td>Original</td>
<td></td>
</tr>
<tr>
<td>ECONOMIC &amp; SOCIAL DEVELOPMENT CENTRE OF PALESTINE (ESDC)</td>
<td>OPT-17/F/97842</td>
<td>Restoring livelihood of small scale farmers in the Gaza Strip for humanitarian assistance to women headed households through poor to poor support</td>
<td>657,300</td>
<td>328,650</td>
<td>Original</td>
<td></td>
</tr>
<tr>
<td>FOOD &amp; AGRICULTURE ORGANIZATION OF THE UNITED NATIONS (FAO)</td>
<td>OPT-17/F/98097</td>
<td>Protecting farmers through timely response to and preparedness for human made and natural shocks</td>
<td>4,700,232</td>
<td>940,046</td>
<td>Original</td>
<td></td>
</tr>
<tr>
<td>FOOD &amp; AGRICULTURE ORGANIZATION OF THE UNITED NATIONS (FAO)</td>
<td>OPT-17/F/98117</td>
<td>Emergency support to vulnerable herders in the Gaza Strip</td>
<td>2,760,238</td>
<td>828,071</td>
<td>Original</td>
<td></td>
</tr>
<tr>
<td>FOOD &amp; AGRICULTURE ORGANIZATION OF THE UNITED NATIONS (FAO)</td>
<td>OPT-17/F/97931</td>
<td>Restoring farmers’ access to land and water in the Access Restricted Area, Gaza Strip</td>
<td>2,000,000</td>
<td>600,000</td>
<td>Original</td>
<td></td>
</tr>
<tr>
<td>OXFAM</td>
<td>OPT-17/F/97156</td>
<td>Recovery support to vulnerable farmers in Gaza Strip</td>
<td>1,711,692</td>
<td>513,308</td>
<td>Original</td>
<td></td>
</tr>
<tr>
<td>PALESTINIAN FARMERS ASSOCIATION (PFA)</td>
<td>OPT-17/F/97455</td>
<td>Improving livelihood of 400 marginalized women in Khan Younis through cultivating their home gardens and/or enabling them to process food.</td>
<td>224,000</td>
<td>224,000</td>
<td>Original</td>
<td></td>
</tr>
<tr>
<td>SAVE THE CHILDREN (SC)</td>
<td>OPT-17/F/98051</td>
<td>Improve Community Resilience in Vulnerable and Conflict Affected Communities in the Gaza Strip</td>
<td>945,000</td>
<td>283,500</td>
<td>Original</td>
<td></td>
</tr>
<tr>
<td>UNION OF AGRICULTURAL WORK COMMITTEES (UAWC)</td>
<td>OPT-17/F/98064</td>
<td>Rehabilitation of the damaged greenhouses.</td>
<td>500,388</td>
<td>250,194</td>
<td>Original</td>
<td></td>
</tr>
</tbody>
</table>
This document is produced on behalf of the Humanitarian Country Team and partners.

This document provides the Humanitarian Country Team’s shared understanding of the crisis, including the most pressing humanitarian need and the estimated number of people who need assistance. It represents a consolidated evidence base and helps inform joint strategic response planning.

The designations employed and the presentation of material in the report do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

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