WORKING DOCUMENT

HUMANITARIAN NEEDS OVERVIEW OPT

HUMANITARIAN PROGRAMME CYCLE 2021

ISSUED DECEMBER 2020



About

This document is consolidated by OCHA on behalf of the Humanitarian Country Team and partners. It provides a 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

PHOTO ON COVER

Reem, 9th grade, Bethlehem Governorate. © 2020 Photo: Save the Children/Jonathan Hyams.

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The Financial Tracking Service (FTS) is the primary provider of continuously updated data on global humanitarian funding, and is a major contributor to strategic decision making by highlighting gaps and priorities, thus contributing to effective, efficient and principled humanitarian assistance.

fts.org/appeals/2019

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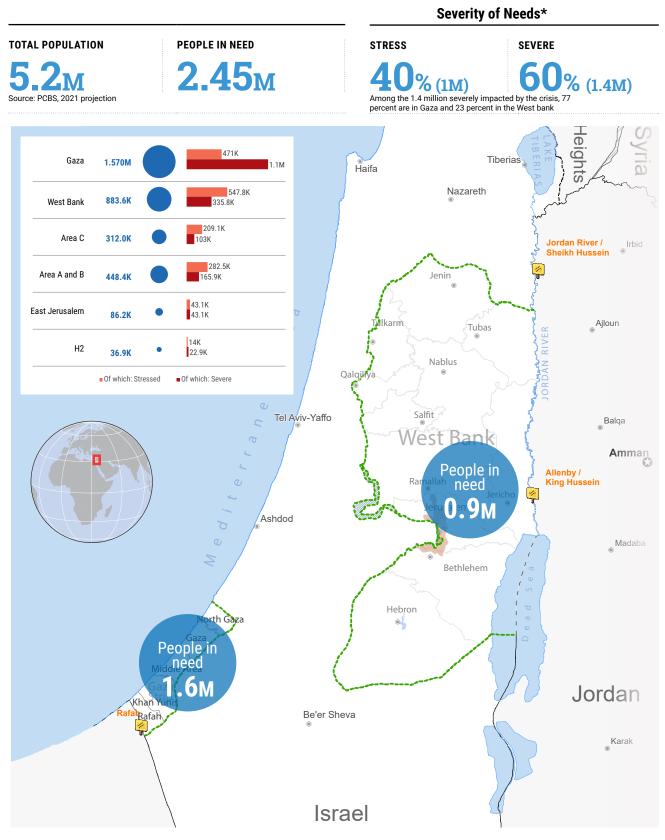
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Summary of Humanitarian Needs

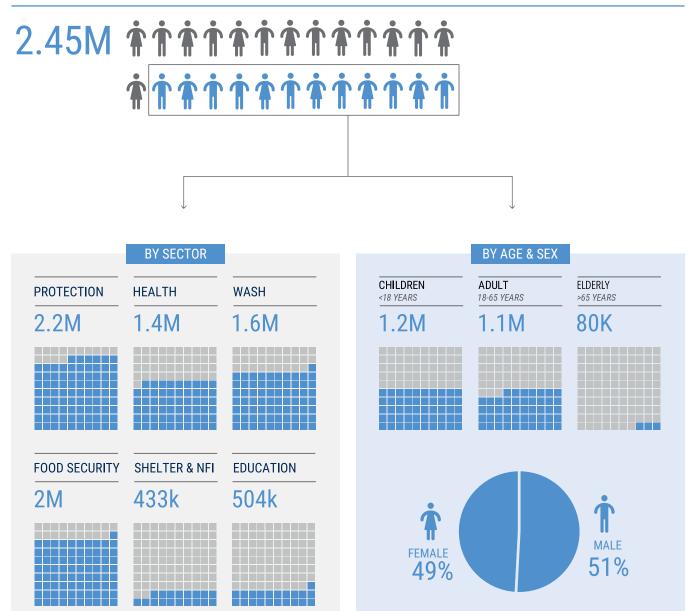


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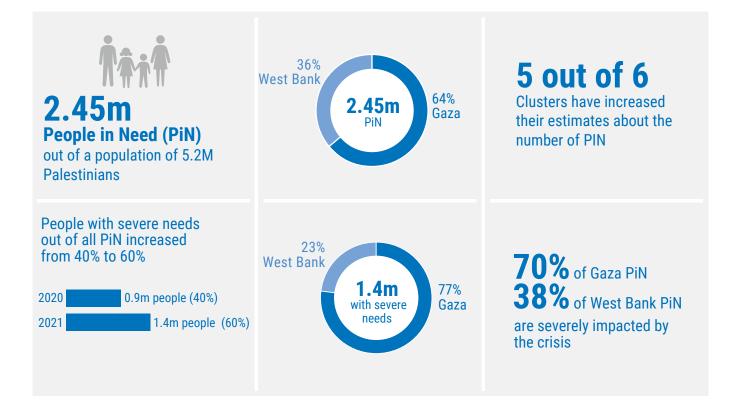
*Severity of needs was calculated based on the Joint Inter-sectoral Analytical Framework (JIAF). For more information see the methodology page 58.

TOTAL POPULATION

PEOPLE IN NEED



2021 HNO Key Figures



The context in the occupied Palestinian territory (oPt) remains a protracted protection crisis, where too many Palestinians struggle to live in dignity. The crisis is characterized by more than 53 years of Israeli military occupation, lack of respect for international humanitarian and human rights law, internal Palestinian political divisions, and recurrent escalations of hostilities between Israel and Palestinian armed groups.

Recognising that the situation in the oPt is effectively a chronic protection crisis, protection concerns continue to be the primary drivers of humanitarian need. Palestinians in the oPt face a range of threats, including to life, liberty and security, destruction or damage to homes and other property, forced displacement, restrictions on freedom of movement and on access to natural resources and livelihoods, and lack of accountability and effective remedy. These policies and practises impact differently on people, depending on their gender, age, location and resources, among other factors. Critical problems of concern relate to the protection of civilians and forced displacement, access to essential services, and erosion of resilience with associated humanitarian consequences that translate into needs. 2020 witnessed a significant increase in the severity of humanitarian needs across the oPt, due to the COVID-19 outbreak and the unilateral measures taken by the Palestinian Authority in response to Israel's plans to annex parts of the West Bank.

In 2021, the Humanitarian Country Team (HCT) estimates that approximately 2.45 million Palestinians across the oPt will require some form of humanitarian assistance. Although this is only slightly more than the estimate for 2020 (2.41 million), the number of people suffering from severe, as opposed to moderate, need has increased by 346,000. About 64 per cent of those in need of assistance, or 1.57 million people, live in the Gaza Strip and 36 per cent, 880,000 people, in the West Bank, including East Jerusalem.

Key Findings



By Humanitarian Consequence

More on pages 16-21, 26-29

CONSEQUENCE	PEOPLE IN NEED
Humanitarian consequences related to protection and forced displacement	2.1 m
Humanitarian consequences related to access to essential services	1.5 m
Humanitarian consequences related to resilience and recovery	2 m

By Age and Gender

AGE AND GENDER	PEOPLE IN NEED	% PIN
Male 0- <18	631k	26%
Female 0- <18	598k	24%
Male 18-65	582k	24%
Female 18-65	563k	23%
Male 65+	36k 🔹	1%
Female 65+	44k 🔳	2%

By Population Groups

More on pages 18 and 24

POPULATION GROUP	PEOPLE IN	INEED
People living under poverty line	1.5m	—
Refugees	1.3m	—
People affected by conflict related violence	928k	-
FHH	200k	•
Small-scale farmers, herders and fisherfolk in Gaza	150k	e
People living with disabilities	140k	1 de 1
Bedouin & Herders in Area C	37k	1
IDPs	16k	I.

With Disability

More on page 24

AGE	PEOPLE IN NEED	% PIN
Persons with disabilities	140k	5.8%

OCCUPIED WEST BANK: INCREASING FRAGMENTATION

OCHA

Area C

The over 60% of the West Bank where Israel retains almost exclusive control. Over 350,000 Palestinians and over 400,000 Israeli settlers reside in Area C

Area A

The 18% of the West Bank where the Palestinian Authority has extensive law enforcement and planning $_{O-}$ powers.

Area B

The 22% of the West Bank where the Palestinian Authority has planning powers and joint law enforcement authority with Israel. Some 80% of Palestinians live in O-Areas A and B combined.

Settlements municipal boundaries

Cover around 10% of the West Bank where some 150 settlements were established in contravention to int'l law. These areas are off limits for Palestinian access. O-Some 630,000 Israelis live there

Firing zones

Cover some 18% of the West Bank and are closed for omilitary training. Some 50 herding communities living there are at risk of expulsion.

The West Bank Barrier

Built since 2002 following wave of Palestinian attacks in Israel. Most of the route encroaches into the West Bank, O in contravention to int'l law. Palestinians access is subject to a restrictive permit and coordination system.

------ Constructed Barrier

----Projected; Under Construction Barrier

East Jerusalem

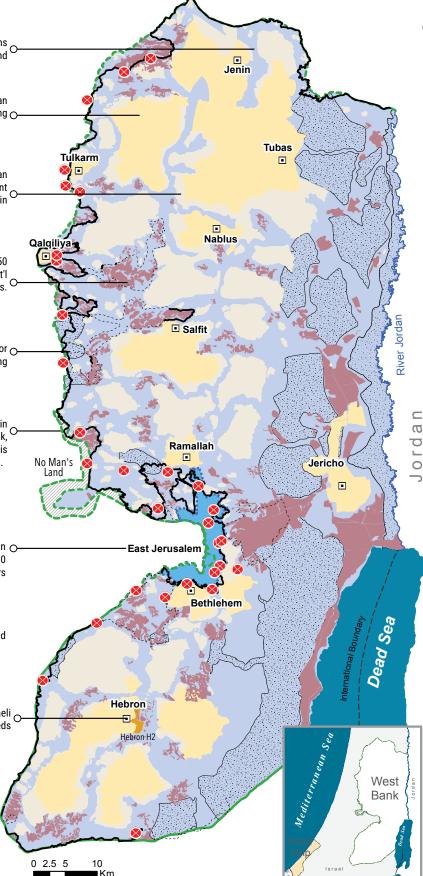
Covers 70 KM2, unilaterally annexed to Israel in o contravention of international law. Over 350,000 Palestinians and more than 200,000 Israeli settlers reside there.

---- Green Line

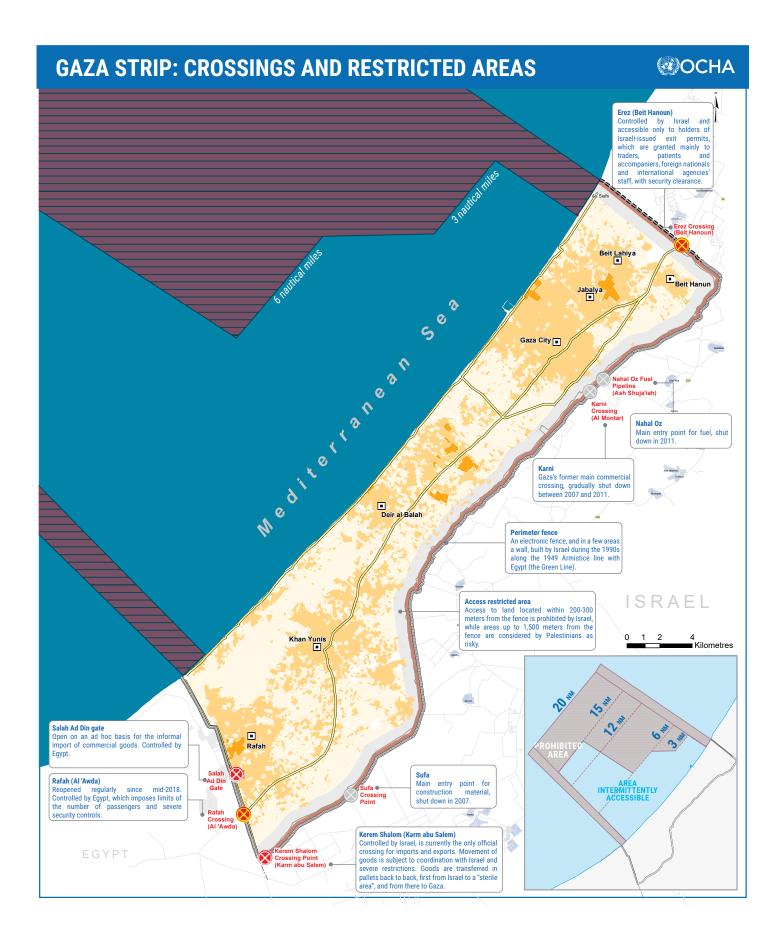
The 1949 Armistice boundry agreed between Israel and Jordan.

Hebron city: H2

The 20% of Hebron city which remains under direct Israeli control. Some 42,000 Palestinians and a few hundreds Israeli settlers live there.







Summary of Humanitarian Consequences

CRITICAL PROBLEM 1: HUMANITARIAN CONSEQUENCES RELATED TO PROTECTION AND FORCED DISPLACEMENT

PEOPLE IN NEED		FEMALES	T CHILDREN	E PEOPLE WITH
21	INCLUDING	52 %	50%	5 2 %
L million		52%	JU %	J.0 %

HUMANITARIAN CONSEQUENCE		PEOPLE IN NEED
Education	Mental health issues	246,940
Education	Violations/ Attacks on education facilities	21,085
	Attack on Healthcare patients, staff and facilities leading to increased morbidity, injuries, death, and reduced health facility access	50,864
Health	Increased caseload of mental health issues as result of conflict	255,960
	People at risk of contracting COVID-19	65,000
	Children affected by conflict-related violence	1,500
	Displacement and forcible transfer	
	Exposure to protection risks in the context of COVID-19 isolation and quarantining	
	Gender-based violence	277,749
Protection	Grave violations against children (as defined by UNSC Res. 1612)	
	Impact of military occupation and protracted protection crises	2,120,959
	Psychosocial distress and mental disorders	
	Settler violence	337,695
	Severe restrictions on freedom of movement	2,496
Shelter	Forcible transfer and displacement, and risk thereof	65,960
WASH	Limited access to WASH services	1,229,732

CRITICAL PROBLEM 2: CRITICAL PROBLEMS RELATED TO ACCESS TO ESSENTIAL SERVICES

PEOPLE IN NEED	INCLUDING	FEMALES	M CHILDREN	
1.5 million		51%	68 %	5.8%
HUMANITARIAN CONSEQUENCE				PEOPLE IN NEED
Education	Lack of access to ec	lucation		930,342
Education	Unsafe access to sc	hools		100,618
		morbidity, GBV, high rates cronutrition deficiencies a		5 172,983
	Increasing rate of maternal and infant mortality			401,808
11 14.	Lack of acute care for emergency cases			162,705
Health		on-communicable diseas and face a deterioration		64,456
	Postponed elective surgeries leading to complications and morbidity			12,000
	Severe cases with d	sability do not have acce	ess to multidisciplinary c	are 10,000
	Individuals injured d	ue to GMR and need shel	ter adaptation	143,400
Shelter	Lack of adequate living conditions			221,900
	Lack of protection from weather conditions			69,800
	Inadequate sanitatio	on and hygiene conditions	3	732,337
WASH	Limited access to sa	afe drinking and domestic	c water services	1,280,024
	Limited access to WASH services in key institutions			361,369

CRITICAL PROBLEM 3: HUMANITARIAN CONSEQUENCES RELATED TO RESILIENCE AND RECOVERY

PEOPLE IN NEED		FEMALES	CHILDREN	E PEOPLE WITH
2 million	INCLUDING	49 %	49 %	5.8 %

HUMANITARIAN CONSEQUENCE		PEOPLE IN NEED
EDUCATION	63,850	
FSS	Food insecurity	2,022,664
Health	Limited preparedness capacity leading to increased risk of mortality and morbidity	251,058
Shelter	Lack of emergency preparedness in Shelter	150,000
WASH	Lack of preparedness	1,618,889
WAUT	Lack of preparedness and response against the risks of floods	135,686

Part 1 IMPACT OF THE CRISIS AND HUMANITARIAN CONDITIONS

WEST BANK

Area C communities that are not connected to the water network depend on trucked water and cisterns. April 2017. ©Photo by WASH Cluster.



1.1 **Context and Drivers of the Crisis**

Humanitarian needs in the occupied Palestinian territory (oPt) continue to be driven by a protracted protection crisis that leaves many Palestinians struggling to live a life with dignity. This crisis is characterized by more than 53 years of Israeli military occupation, lack of respect for international humanitarian and human rights law, internal Palestinian political divisions, and recurrent escalations of hostilities between Israel and Palestinian armed groups. 2020 witnessed a significant increase in the severity of humanitarian needs across the oPt, due to two major developments.

The first is the outbreak of COVID-19: as of end-September over 50,000 Palestinians have contracted the virus and nearly 400 have died. While the mortality rate remains low by global standards (77 persons per million people), the measures imposed to contain the pandemic - including recurrent lockdowns and travel restrictions, school closures, reduction of commercial activities and mandatory quarantines have severely undermined living conditions across the oPt. (As of mid-December, over 131,000 had contracted the virus and nearly 1,150 had died.)

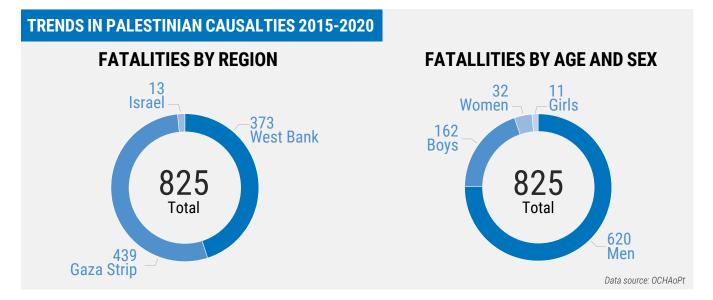
The World Bank forecasts that by the end of the year, the Palestinian economy will shrink by eight per cent compared to 2019.¹ The proportion of poor households in the Gaza Strip will increase from 53 to 64 per cent

LATEST DEVELOPMENTS

By mid-November 2020, the PA indicated that it would resume civil and security coordination with Israel. This may reduce or eliminate some of the no-contact policy's negative humanitarian ramifications identified in this HNO. However, the actual implementation of this decision and its impact on vulnerable Palestinian is yet to be assessed.

and will more than double in the West Bank, from 14 to 30 per cent.²

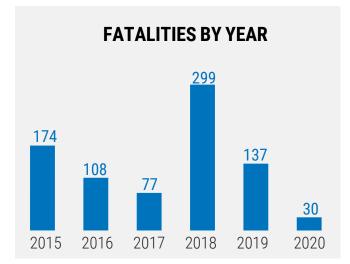
The second development in 2020 is the Palestinian Authority's (PA) unilateral decision to halt almost all bilateral contacts with Israel, in response to the Israel's plan to formally annex parts of the West Bank.³ In this context, the PA has stopped accepting the tax clearance revenues that Israel collects on its behalf.⁴ Together with the economic slowdown due to the pandemic, this has resulted in the loss of 80 per cent of its income, reducing the PA's capacity to pay salaries, deliver services and maintain its social safety nets. The no-contact policy exacerbated the impact of longstanding access restrictions, particularly for those requiring Israeli permits, or special authorization, to access workplaces, farmland and basic services. This



policy also undermined Israeli-Palestinian joint efforts to contain the pandemic, which were implemented during the two months following the initial outbreak.

So far in 2020, there has been a significant decline in conflict-related violence and casualties, which are recorded mainly among young men. Between January and September, 24 Palestinians were killed by Israeli forces, compared to 91 and 229 fatalities in the equivalent periods in 2019 and 2018, respectively. Similarly, the number of Palestinian injuries in 2020 declined by nearly 85 per cent, compared to 2019 (approximately 2,000 vs 13,000). This decline is primarily due the halt in the mass demonstrations that had been taking place along Israel's perimeter fence around Gaza in 2018 and 2019. While the occasional shooting of projectiles and launching of incendiary balloons from Gaza towards southern Israel, and Israel's subsequent airstrikes in Gaza continued, these did not result in casualties or further escalation. Albeit more limited than in Gaza, the West Bank too witnessed a reduction in clashes and casualties, with the number of searchand-arrest operations by Israeli forces in Palestinian localities falling by nearly 30 per cent during January-September 2020, compared to the same period in 2019.

However, concerns about excessive use of force by Israeli soldiers resulting in the killing or serious injury of Palestinians, as well as lack of accountability for such possible violations of international law, remain.⁵ Moreover, against the backdrop of a general deterioration in living conditions and the lack of security coordination between the PA and Israel, there remains



the potential for an increase in violence, including an escalation of hostilities in Gaza, during 2021.

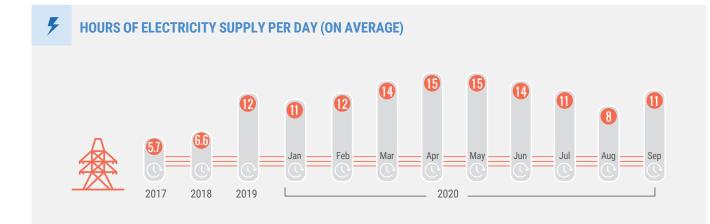
In the Gaza Strip, the two million Palestinians, who, for over 13 years, have been under a blockade imposed by Israel citing security concerns, have been further isolated from the external world by COVID-19 related restrictions. Since the outbreak, Israel has allowed only the most serious medical cases to exit Gaza via the Erez Crossing, a situation further complicated by the PA's halt in the processing of applications for exit permits, as well as by the long mandatory quarantine imposed by Hamas on patients returning to Gaza. The entry of Palestinian workers from Gaza to Israel, which resumed in 2019 after more than a decade of suspension, was halted again following the outbreak of the pandemic, resulting in the loss of some 7,000 jobs. The Egyptian-controlled crossing with Gaza (Rafah)



EXITS OF PEOPLE INTO ISRAEL

Source: OCHA/Palestinian Ministry of Civil Affairs



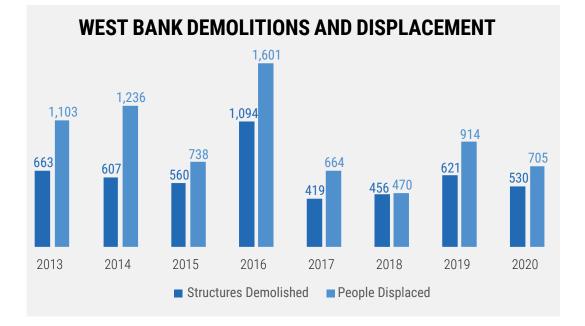


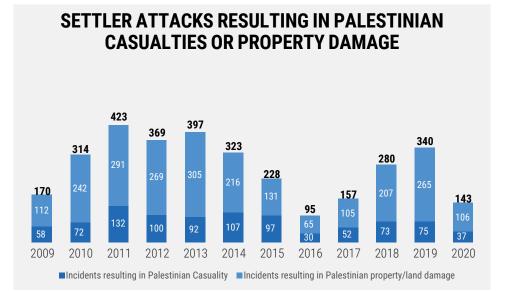
has been largely shut down for all passengers, except for a few scheduled openings. Overall, during March-September 2020, the number of exits from Gaza, both via Israel (Erez) and via Egypt (Rafah) was about 10 per cent of the figures in the same period in 2019.

Meanwhile, the main factors driving the fragile humanitarian situation in Gaza remain in place. Although Gaza's main crossing for goods (Kerem Shalom) has been operating as previously, the longstanding import restrictions, as well as lack of agreement and coordination between the PA and Israel, continue to impede the implementation of infrastructure projects, economic recovery and employment generation.⁶ Continuing insecurity discourages the 3,000 farmers who own, or work, land located up to 1,000 meters from Israel's perimeter fence from developing agricultural livelihoods. Similarly, the fishing livelihoods of about 4,000 families continue to be disrupted by Israeli restrictions on access to the sea off the Gaza coast, in response to the Palestinians' launching of projectiles or incendiary balloons towards Israel.⁷

Prolonged electricity blackouts of about 12 hours a day (the same as in 2019, but an improvement compared to 2017-2018) continue disrupting all aspects of life in Gaza, particularly the delivery of essential services.⁸ Finally, despite a new round of reconciliation talks launched this year, the divisions between Hamas and the Fatah-led PA remain unresolved, undermining the payment of salaries to civil servants,⁹ and providing for the needs of the Gaza's population in general.

The mobility restrictions imposed since the outbreak of COVID-19 amplify the impact of pre-existing conditions on the Gazan economy: combined, they have resulted in a further increase in unemployment in the second quarter of 2020, which reached an historical high of over 49 per cent,.¹⁰ The absence of employment





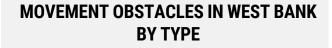
opportunities and low salaries also discourage people from seeking work, further reducing the already low labour force participation rate. This has declined from 41 per cent of the population in 2019 to less than 35 per cent in April-June 2020, and to a mere 15 per cent among women (people outside the labour force are not counted as unemployed).¹¹

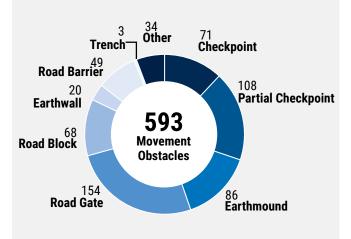
It is estimated that some 9,500 families in Gaza living in rented accommodation are at risk of eviction due to their inability to pay rental costs.¹²

In the West Bank, Palestinian households and communities in Area C. East Jerusalem and the H2 area of Hebron city continue to face a coercive environment, due to a range of longstanding Israeli policies and practices. The restrictive and discriminatory planning regime applied in Area C and in East Jerusalem prevents Palestinians from addressing basic housing, livelihood and service needs. Between January and September, 550 structures were demolished or confiscated on the grounds of a lack of building permits, displacing some 750 Palestinians, a significant increase compared with 2019. Of particular concern is the increasing application of military orders permitting the expedited demolition or seizure of properties in Area C, as well as the greater punitive fines against unauthorized construction in East Jerusalem, which has led to a significant increase in self-demolitions.13

Further components of the coercive environment of continuing concern are continuing attacks and intimidation by Israeli settlers, along with the authorities' lack of adequate law enforcement.¹⁴ As of end-September, nearly 230 such incidents resulting in Palestinian injuries, or damage to their property, have been recorded, approximately the same rate as in 2019. Historically, settler violence has facilitated the takeover of Palestinian land and the establishment of settlement outposts, without the building permits or authorization required under Israeli law. Subsequently, many of these outposts established on areas designated as public ('state') land have been "legalized" under Israeli legislation.¹⁵

Palestinian access to areas separated from the remainder of the West Bank by the Barrier has also deteriorated in 2020. Following the outbreak of COVID-19, Palestinian access to East Jerusalem hospitals has been limited by both the Israeli and Palestinian authorities, mostly to cancer patients; in turn, this has





further undermined the financial situation of these hospitals. Following a tightening of the eligibility criteria for farmers to obtain permits to access their land in the 'Seam Zone', the closed area behind the Barrier, some 84 per cent of such applications in the first half of 2020 were rejected, mostly on bureaucratic grounds.¹⁶ However, while there has been some disruptions during intensified lockdowns, the access of tens of thousands of West Bank Palestinians to their workplaces in Israel, has largely continued.

Palestinian access to and within the central part of H2, physically segregated from the rest of Hebron city by multiple checkpoints and barriers, is still permitted only to those registered as residents of that area.¹⁷ The access challenges faced by these residents have been further compounded since May 2020, as they cannot rely any longer on the PA to intervene on their behalf with the Israeli authorities.

Across the West Bank, however, a comprehensive survey conducted in January-February 2020, showed a 16 per cent decrease in the overall number of fixed permanent obstacles (checkpoints, earthmounds, roadblocks, etc.), compared with the last survey in July 2018: from 705 to 593 obstacles.¹⁸

Many of the above restrictions are aimed at protecting and providing space for the expansion of Israeli settlements and their gradual annexation to Israel, some de jure (as in East Jerusalem) and others de facto (as in Area C), in contravention to international law. There are, at present, over 630,000 Israeli settlers living in the West Bank, including East Jerusalem, in some 250 settlements and settlement outposts, which directly control approximately 10 per cent of West Bank land.¹⁹

Despite a slowdown in the number of building permits issued, and housing unit starts during the first half of 2020 compared to same period in 2019,²⁰ settlement expansion continued. Of particular concern this year, is the advancement of the E1 settlement project, entailing the construction of 3,500 housing units in a strategic part of Area C, to the east of East Jerusalem.²¹ If actually implemented, this project will intensify the coercive environment on 18 Palestinian Bedouin communities located in the area, in addition to further separating East Jerusalem from the remainder of the West Bank.

Finally, Palestinians living in the 19 refugee camps across the West Bank, have been seriously affected by the pandemic and related measures, as well as by significant shortfalls in donor support to UNRWA, the UN agency for Palestine refugees. Overcrowded living conditions have exacerbated tensions and hardship at the household level during lockdowns and school closures and increased the difficulties in isolating family members who contract the virus. Increasing unemployment, the salary crisis in the governmental sector, and the weakening of social safety nets as a result of the growing deficit in both the PA and UNRWA, further undermine the situation of vulnerable refugee households.



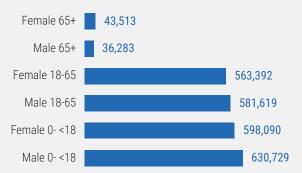
Israeli forces demolishing Palestinian residential structure in Mantiqat Shib Al Butum in Massafer Yatta area. September 2020. ©Photo by Mashhour Wahwah.

1.4 Scope of Analysis Affected geographical areas, groups and severity

In 2021, the Humanitarian Country Team (HCT) estimates that approximately 2.45 million Palestinians across the oPt will require some form of humanitarian assistance. Although this is only slightly more than the estimate for 2020 (2.41 million), due to the new developments detailed above, the number of people suffering from severe, as opposed to moderate, need has increased by 346,000. About 64 per cent of those in need of assistance, or 1.57 million people, live in the Gaza Strip and 36 per cent, 880,000 people, in the West Bank, including East Jerusalem.

The nature of humanitarian need and the assistance required can be grouped into three categories, according to the critical problems that underlie them: those related to 1) lack of protection and displacement; 2) limited access to essential services; and 3) erosion of resilience and preparedness.

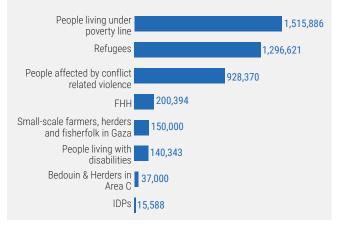
Most of these problems require multi-sectoral responses in order to mitigate the risk and suffering they entail for



PEOPLE IN NEED BY GENDER AND AGE

PEOPLE IN NEED BY POPULATION GROUP

People living under poverty, people afftected by conflict related violence and refugees have the **highest number people in need with 1.5m, 0.9m and 0.9m respectively.**



affected people, the majority of which face multiple humanitarian challenges and are, therefore, included in more than one of the three categories. Across these critical problems, the following groups have been identified as most vulnerable: people living in poor or women-headed households; Palestine refugees living in refugee camps; children, in particular those under five; the elderly; pregnant and lactating women; persons with disabilities (PwD); small-scale farmers, herders and fishers; and displaced people.

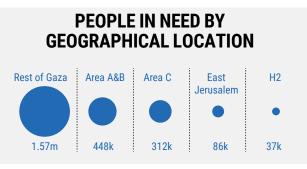
CRITICAL PROBLEM 1: HUMANITARIAN CONSEQUENCES RELATED TO PROTECTION AND FORCED DISPLACEMENT

PEOPLE IN NEED		FEMALES	T CHILDREN	E PEOPLE WITH DISABILITY	
2.1 million	INCLUDING 52% 50%		5.8 %		
HUMANITARIAN CONSEQUENCE				PEOPLE IN NEED	
Education	Mental health issues	S		246,940	
Education	Violations/ Attacks of	on education facilities		21,085	
		e patients, staff and faciliti educed health facility acce		norbidity, 50,864	
Health	Increased caseload of mental health issues as a result of conflict				
	People at risk of contracting COVID-19				
	Children affected by conflict-related violence				
	Displacement and forcible transfer				
	Exposure to protection risks in the context of COVID-19 isolation and quarantining				
	Gender-based violen	псе		277,749	
Protection	Grave violations against children (as defined by UNSC Res. 1612)				
	Impact of military occupation and protracted protection crises			2,120,959	
	Psychosocial distress and mental disorders			549,716	
	Settler violence			337,695	
	Severe restrictions of	on freedom of movement		2,496	
Shelter	Forcible transfer and displacement, and risk thereof				
WASH	Limited access to W	ASH services		1,229,732	

Over 85 per cent of the people in need, or 2.1 million Palestinians, are estimated to be affected by problems related to the lack of protection and displacement.

People in this category include those affected by the severe access restrictions to and from Gaza and the coercive environment in the West Bank, including those who require legal aid to protect their housing, land and property rights, or secure their access and movement. Those displaced due to demolitions or evictions and require emergency shelters, or cash assistance, and, often, also support to maintain their livelihoods and to ensure access to basic services, are included as well.

The same factors, along with chronic recurrent exposure to violence, including conflict related and gender-based violence, have increased mental health and psychosocial needs. The COVID-19 pandemic has further eroded mental health through loss of livelihoods, increased domestic violence, and economic vulnerability. Hundreds of those injured or traumatized in the context of the 2018-19 protests at the fence in



Gaza, still require follow-up treatment and rehabilitation. Protection measures addressing explosive remnants of war (ERW) in the Gaza Strip, and settler violence in the West Bank, are also needed.

The continuous monitoring and documentation of violations of international law, as well as advocacy to prevent further violations and end the cycle of impunity, remain overarching needs.

CRITICAL PROBLEM 2: HUMANITARIAN CONSEQUENCES RELATED TO ACCESS TO ESSENTIAL SERVICES

PEOPLE IN NEED	INCLUDING	FEMALES 51%	thildren 68%	E PEOPLE WITH DISABILITY 5.8%
HUMANITARIAN CONSEQUENC	E			PEOPLE IN NEED
Education	Lack of access to e	ducation		930,342
Education	Unsafe access to so	chools		100,618
		morbidity, GBV, high rates o deficiencies amongst childr		incies 172,983
	Increasing rate of maternal and infant mortality			401,808
	Lack of acute care for emergency cases			162,705
Health	Patients suffering non communicable diseases have no access or disrupted treatment and face a deterioration in their morbidity status			pted 64,456
	Postponed elective	surgeries leading to compli	cations and morbidity	12,000
Severe cases with disability do not have access to me				e 10,000
	Individuals injured of	lue to GMR and need shelte	er adaptation	143,400
Shelter	Lack of adequate living condition		221,900	
	Lack of protection from weather conditions			69,800
	Inadequate sanitation and hygiene conditions		732,337	
WASH	Limited access to safe drinking and domestic water services		1,280,024	
	Limited access to WASH services in key institutions			361,369

More than 1.5 million Palestinians, or over 60 per cent of those in need, are affected by problems related to their limited access to basic services.

Over 60 per cent of those in need, or more than 1.5 million Palestinians, are affected by problems related to their limited access to basic services.

The already overburdened healthcare system in the oPt requires continuous support to address the new/ additional challenges generated by the ongoing pandemic, including through the provision of supplies and capacity building. The reallocation of resources and mobility restrictions resulting from the pandemic, have further undermined the access of people to regular healthcare, including mental health, obstetric and neonatal care and emergency nutrition services. Due to existing gender norms, there has been an increased demand on women and girls to care for the sick and the elderly. Public institutions require support to adapt their WASH facilities to meet COVID-19 safety measures, while quarantine centres also need non-food items (NFIs). In Gaza, the longstanding restrictions on the movement of people and goods, internal Palestinian divide and chronic electricity shortages have contributed to the severe degradation of infrastructure, including in the area of health, education, water and sanitation. In the West Bank, especially in East Jerusalem, Area C, the H2 area of Hebron city and the 'Seam Zone', infrastructure and related services have been undermined by the discriminatory planning regime and by movement restrictions.

In the same context, tens of thousands of families across the oPt are residing in sub-standard homes that do not meet minimum requirements of living space per person, weather protection, hygiene facilities and privacy; they need urgent rehabilitation or reconstruction.

CRITICAL PROBLEM 3: HUMANITARIAN CONSEQUENCES RELATED RESILIENCE AND RECOVERY

PEOPLE IN NEED	INCLUDING	FEMALES	CHILDREN	
Z million		49%	49%	5.8%
HUMANITARIAN CONSEQUEN	ICE			PEOPLE IN NEED
EDUCATION	Lack of emergency preparedness			63,850
FSS	Food insecurity	1,987,640		
Health	Limited prepared morbidity	and 251,058		
Shelter	Lack of emergency preparedness in Shelter			150,000
WASH	Lack of Prepared	ness		1,618,889
	Lack of prepared	ness and response agains	t the risks of floods	135,686

Almost 82 per cent of Palestinians in need, or about 2 million people, are affected by problems related to the erosion of their resilience and their capacity to cope with various shocks.

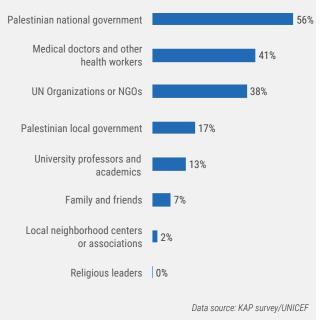
These people are estimated to suffer from severe, or moderate, food insecurity and will require food assistance, and/or support to maintain their farming, herding or fishing livelihoods.²² Driven by an increase in poverty and unemployment generated by the above developments, this represents a net increase of approximately 300,000 newly food insecure people compared to 2019. Furthermore, over 217,000 people, previously considered moderately food insecure, have become severely food insecure.

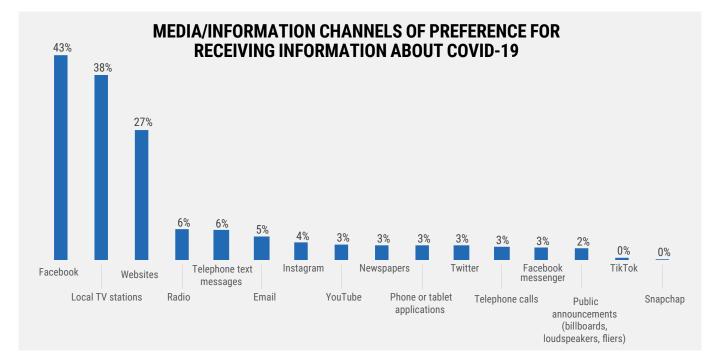
People residing in low-lying areas are exposed to the risk of flooding during the rainy season, as well as the overflow of stormwater facilities and sewage pumping stations, due to the poor status of the sanitation infrastructure.

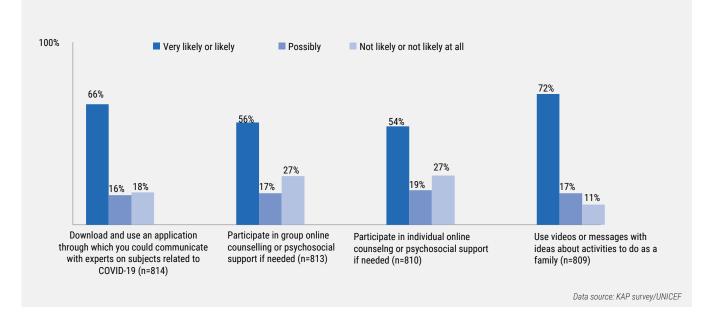
1.5 Accountability to Affected Populations

Views and perceptions of affected persons in the oPt including women, men, boys and girls, elderly and people with disabilities, shape the identification of needs and responses. While the oPt does not yet have a systematic inter-cluster channel that institutionalizes the collection of feedback from communities, implementing partners collect this information through interviews, focus groups, and surveys they carry out among beneficiaries. The collected data is analyzed by the implementing partners in order to identify the needs and determine the most efficient way of communication with the affected persons though out the implementation of the projects. Additionally, in 2020, UNICEF conducted a comprehensive study on Knowledge, Attitude and Practice (KAP) in relation to COVID-19 and the Risk Communications and Community Engagement response; while focused on the pandemic, key elements of the findings will be relevant for broader issues and will inform responses to be implemented in 2021,

TRUSTED SOURCES OF INFORMATION ON THE COVID-19 PANDEMIC







ATTITUDES TOWARD TWO-WAY COMMUNICATION CHANNELS

(see charts herein). For example, Palestinian national sources of information on the pandemic were the most trusted, at 56 per cent, while 38 per cent of respondents trusted UN and NGOs as sources of information. The top three preferred channels for receiving information were Facebook (43%), Local TV (38%) and websites (27%). Of particular relevance, the survey revealed a high willingness of participants to engage in two-way communication channels, including group or individual online counseling sessions.

The HCT previously, in 2018, conducted a mapping of organizational capacity on the Prevention of Sexual Exploitation and Abuse (PSEA), and supplemented this with a second mapping of SEA knowledge and capacities among community-based organizations in 2020. These mappings were supplemented by a series of consultancies in 2019 and 2020, inputs from a range of stakeholders, including affected community members in Gaza and the West Bank, designed to identify needs and gaps. This information has guided the HCT PSEA Network's Action Plan. During 2020, the PSEA Network conducted a learning review to assess systems in place for PSEA among a sample of Network members, most of which were identified to have moderate risk because complaint channels are not fully mainstreamed among beneficiaries and because PSEA practices are mainly informal and not yet enshrined in a code of conduct and internal policies.

For further details on specific needs see the respective cluster sections below.

^{1.6} **People in Need**

The HNO provides analysis of the overall affected population disaggregated by different age cohorts and gender across key geographic areas of concern, including Gaza, Areas A & B, Area C, East Jerusalem and H2 area of Hebron city. In addition, particular attention is placed on the most vulnerable groups:

These specific vulnerable groups and geographic areas have been identified by the Humanitarian Country Team and analysis is drawn from a range of different primary and secondary date sources. The identification of who is in need in the 2020 HNO follows the new approach since 2019 of defining vulnerability and most vulnerable groups in the oPt based on their geographic location, status, gender, protection risks and severity of needs.

The below table provides an overview of the scope of the HNO analysis, which was determined by the relevance of the identified vulnerable groups per geographic vulnerable area as well as to the availability of data.



Scope of Analysis Matrix

		Population Groups						
	Gaza	Area C	Area A&B	East Jerusalem	H2			
Male 0 - <18	Yes	Yes	Yes	Yes	Yes			
Female 0 - <18	Yes	Yes	Yes	Yes	Yes			
Male 18 - 65	Yes	Yes	Yes	Yes	Yes			
Female 18 - 65	Yes	Yes	Yes	Yes	Yes			
Male 65+	Yes	Yes	Yes	Yes	Yes			
Female 65+	Yes	Yes	Yes	Yes	Yes			
People living undue the poverty line	Yes	Yes	Yes	Yes	Yes			
People living with disabilities	Yes	Yes	Yes	Yes	Yes			
Refugees	Yes	Yes	Yes	Yes	Yes			
IDPs	Yes	Yes	No	No	No			
Bedouins & Herders	No	Yes	No	No	No			
Small scale farmers, herders and fisher-folks	Yes	No	No	No	No			

*The "Yes" and "No" in the matrix above refers to whether the vulnerable group was included in the scope of this HNO analysis.

Part 2 SECTORAL ANALYSIS

GAZA STRIP Gaza shore, 2019 ©Photo by OCHA



 \cap 1

Prote	ectio	n					4	þ
TOTAL IN NEED	SEVERE	STRESSED	GAZA	WEST BANK	WOMEN %	CHILDREN %	ELDERLY %	
2.1m	1.3m	868k	1.3m	836k	49%	46%	3%	

Over 2.1 million Palestinians across the oPt, 60 per cent in the Gaza Strip and 40 per cent in the West Bank, experience or are at risk of conflict, violence and forcible displacement/transfer, and will be in need of protection assistance in 2021.

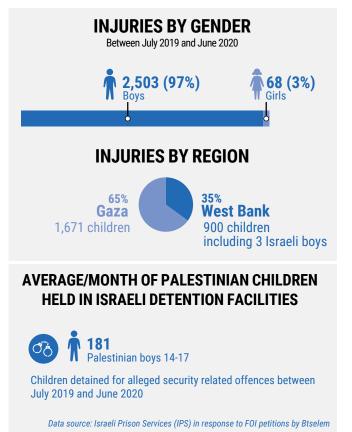
2020 has seen a profound deterioration in the severity of the protection risks in the oPt. This has been driven by the outbreak of COVID-19 and related movement restrictions, school closures, job losses and socioeconomic distress. The administrative vacuum, as a result of the PA's halt in coordination with Israel, has disrupted government-run protection services and led to additional challenges.

In the Gaza Strip, the longstanding Israeli blockade and related limitations on economic opportunities, recurring escalations of violence, the internal Palestinian divide and prevailing traditional gender norms, are key drivers of protection needs. The already limited freedom of movement afforded to Palestinians in Gaza has been further reduced by the pandemic, with only minimal movement allowed through the external crossings with Israel and Egypt. Internal movement and business operations have also been curtailed by the lockdown imposed since late August.

The overall deterioration in living conditions has had a disproportionate impact on children, youth, women and persons with disability (PwD). It has increased the risk of poor mental health, stress, anxiety and depression, lower educational outcomes, child labour and domestic violence. Vulnerability also remains high among those seriously wounded or traumatized during the 'Great March of Return' demonstrations in 2018-2019,²³ IDPs from the 2014 conflict, refugees, and poor households, in particular those at risk of eviction due to their inability to pay rent.

In the West Bank, the coercive environment facing many Palestinians in Area C, East Jerusalem and the Israeli-controlled part of Hebron city, H2, continue to generate a risk of forcible transfer. Related policies and practices include discriminatory planning, demolitions and confiscations, forced evictions, access restrictions and lack of law enforcement and impunity for settler violence. A range of settlement expansion projects, currently underway, threaten to further encroach onto Palestinian land, increase fragmentation, and heighten the risk of displacement.

In 2020, there has been an increased application of military orders permitting expedited demolitions and confiscations in Area C, significantly impeding access to legal recourse. The introduction of greater punitive measures against unauthorized construction in East Jerusalem has led to an increase in self-demolitions. Access to farmland behind the Barrier in the 'Seam





Zone' continues to deteriorate, following a tightening of the eligibility criteria for farmers and workers to obtain permits. The additional restrictions due to the COVID-19 has also further undermined the access of the 'Seam Zone' residents to basic critical services.

Throughout the West Bank, Palestinians have been exposed to excessive use of force by Israeli forces in clashes that erupt during search-and-arrest operations and protests, including the shooting of live ammunition and excessive amounts to tear gas. Meanwhile, ongoing pressures on civil society organizations by both Israeli and Palestinian authorities pose a threat to their ability to deliver protection services to those in need.

A broad range of assistance to respond to rising needs is required, including: child protection responses; prevention of gender-based violence (GBV) and support for its survivors; mental health and psychosocial support (MHPSS) interventions; and legal aid to protect housing, land and property rights, and secure access and movement. The monitoring and documentation of violations of international law, as well as advocacy to prevent further violations and end the cycle of impunity, as well as mine action, remain central.

PwDs are one of the most disadvantaged, vulnerable and marginalized groups in Palestinian society in need of protection services: in addition to the aforementioned pressures, they face institutional and attitudinal barriers, which impede their access to appropriate multi-sectoral responses. PwDs experience lower educational outcomes; poor health; high rates of unemployment and poverty, and greater risks of violence, stigma and discrimination.²⁴ Females with disabilities are significantly more vulnerable to these risks than males.²⁵

conflict-related Children exposed to violence remain a most vulnerable group, requiring various protection responses. Between July 2019 and June 2020, Child Protection partners documented 516 violations, affecting nearly 13,000 children across the oPt.²⁶ During this period, 21 children, including one girl and 20 boys were killed, and 2,571, including 68 girls and 2,503 boys, injured; a monthly average of 181 Palestinian boys, aged 14 to 17, were held in Israeli detention for alleged security related offences.27 Children normally remain in detention for the duration of their investigation, indictment and trial proceedings, and are at high risk of violence, ill-treatment and due process violations.²⁸ After their release, they face various reintegration challenges, including increased risk of school dropout and forced marriage. Although child detention has declined since the outbreak of COVID-19, related restrictions have added hardship and challenges to their access to legal advice and proceedings.²⁹

The pandemic also amplified protection risks affecting orphaned children and children whose primary caregivers are quarantined or hospitalized.³⁰ Children transferred into facility-based isolation or quarantine face stress, fear, and panic, especially if separation from primary caregivers is required or if children are placed in facilities, where non-relative adults are present.

Across the oPt, it is estimated that three per cent of children aged 10 to 17 are engaged in child labour.³¹ In households living in poverty, the pandemic has increased pressure on boys to work and generate income, and exposed girls to additional burdens associated with domestic work and caregiver duties. Preliminary data indicates that child labour in Gaza increased by 52 per cent, in the first eight months of 2020 compared to the same period in 2019.³² A recent survey has also shown that some 26 per cent of boys under the age of 11 experience severe physical violence from their caregivers,³³ with children with disabilities three to four times more likely to experience all forms of violence, and three times more likely to experience sevual violence.³⁴

Against the backdrop of the deteriorating living conditions, there is an increased need for MHPSS interventions. Of particular concern is the situation in Gaza, where, since the start of the pandemic, there have been 44 attempted suicides involving children, compared to eight in all of 2019.³⁵ The Protection Cluster estimates that some 198,000 children in Gaza are in need of structured protection and psychosocial support, due to risk of severe and moderate mental health conditions,³⁶ while nearly 36,000 children require individual case management. Additionally, over 242,000 adults in Gaza, including caregivers, are also in need of various MHPSS services.³⁷

The pandemic-related restrictions have also exacerbated the prevalence of GBV, including domestic violence, sexual abuse and forced marriage. Lockdown measures have increased the burden on mothers to support their children's online education, on top of their traditional domestic and reproductive roles. Alongside fears about the virus and the financial stress due to the loss of livelihoods, these factors have heightened household tensions, resulting in a spike in domestic violence since March 2020.³⁸ COVID-related measures have curtailed access to, and availability of, support services for people at risk, and survivors of GBV. Significant gaps in response have resulted from the suspension of face-to-face interactions, the paralysis of the judicial system and the reduced access to primary health care centres and shelters. Women with disabilities, who survived GBV, have been particularly affected by these gaps. As the crisis continues, there is a need to scale up emergency GBV services, build capacity in remote delivery, and support frontline teams with stress management and psychological support.

The pandemic has also exacerbated risks for pregnant and lactating women, who are now less likely to attend routine appointments, due to the lockdowns and fear of infection.³⁹ To mitigate protection risks, pregnant and nursing women must be prioritized in the "provision of medical supplies, food, care, social protection measures and psychosocial services".⁴⁰ Finally, Palestinians in the Gaza Strip remain exposed to the risk of explosive remnants of war (ERW) from past and ongoing escalations. Mine action partners have noted a marked increase in desensitization towards ERW contamination. Children out playing are particularly vulnerable, as well as young men who, collect scrap metal as a livelihood. In the West Bank, there are 16 confirmed minefields in Area A and B, with an additional 86 minefields on the border with Jordan. Additionally, ERW contamination has been documented in and around Israeli military training zones posing a particularly high risk to Palestinian Bedouin and herding communities located in their vicinity.

#	INDICATORS	SECTORS	SOURCE
1	# of Palestinians exposed to protection risks related to military occupation	Protection	POC database
2	# of Palestinians injured by Israeli forces and settlers	Protection	POC database
3	# of Palestinians killed by Israeli forces and settlers	Protection	POC database
4	# of Palestinians exposed to ERW-related risks	Protection	POC database
5	# of children affected by grave violations	Protection / Child Protection	UNICEF
6	# of incidents of settler related violence	Protection	POC database
7	# of people displaced	Protection / Shelter	Demolition Database
8	# of demolition orders	Protection / Shelter	Demolition Database
9	# of people at risk of displacement (demolition orders, eviction orders)	Protection / Shelter	Demolition Database
10	# of adults in need of MHPSS	Protection	UNICEF and WHO
11	# of children in need of structured psychosocial support services and child protection interventions	Protection / Child Protection	UNICEF
12	# of children in need of individual case management services	Protection / Child Protection	UNICEF
13	# of people with severe or moderate mental health disorders	Protection	UNICEF and WHO
14	# of ever married women exposed to GBV	Protection / GBV	UNFPA
Child F	Protection Needs indicators		
#	INDICATORS	SECTORS	SOURCE
1	# of children affected by grave violations as per UNSCR 1612	Protection / Child Protection	UNICEF
2	# of children in need of structured psychosocial support services and child protection interventions	Protection / Child Protection	UNICEF
3	# of children in need of individual case management services	Protection / Child Protection	UNICEF

General Protection Needs indicators

3.5 Health and Nutrition



TOTAL IN NEED	SEVERE	STRESSED	GAZA	WEST BANK	WOMEN %	CHILDREN %	ELDERLY %	
1.4m	1.2m	201.1M	951k	495k	49%	45%	3%	

More than 1.45 million Palestinians across the oPt have been identified as requiring health-related humanitarian assistance in 2021, two-thirds of them in the Gaza Strip and one third in the West Bank.

Since March 2020, the already challenged healthcare system in the oPt is experiencing added pressure from the COVID-19 outbreak. The reallocation of already scarce resources to respond to the pandemic, along with the contagion of healthcare workers, has undermined people's access to healthcare. Direct mortality from the virus and indirect mortality from preventable diseases is of major concern. Overall, the pandemic has rendered an estimated 115,000 people in need of health humanitarian assistance.

The demand to scale-up laboratory testing, surveillance, contact tracing, isolation and case management is increasing rapidly, as the number of confirmed COVID-19 cases passed 50,000 by end-September. However, meeting this demand is hindered by the continuous shortages of test kits, testing reagents and swabs to ensure a minimum of 5,000 daily tests. Shortages of equipment, pharmaceuticals and disposables for case management, place, the lives of at least 20 patients in need of intensive care at risk at any given moment. Close to 37,000 frontline healthcare workers (about 41 per cent female) in COVID-19 designated hospitals, isolation and respiratory triage centres, ambulance services and primary healthcare facilities, including UNRWA health centres, struggle with constant shortages of personal protective equipment (PPE) and funding gaps for additional healthcare staff. As of September 2020, nearly 700 healthcare workers (nearly half of them women) have contracted the virus.

In Gaza, the rapid spread of the virus within the community since late August has posed a heavy burden on a healthcare system, already over-stretched due to 13 years of Israeli access restrictions, the internal Palestinian divide, recurrent hostilities and violence. In the first half of 2020, 43 per cent of essential medicines

at Gaza's Central Drugs Store were completely out of stock. Due to the chronic electricity deficit, Gaza's healthcare facilities continue to rely on fuel donations to run backup generators during black-outs.

Efforts to contain the outbreak have undermined the delivery of other essential healthcare services. In Gaza, only 19 out of 51 primary healthcare centres are functioning, as of end-September. Healthcare centres have been converted into COVID-19 quarantine and isolation centres, while some 400 doctors, nurses and administrative staff were mobilized to support their operation. The care of non-communicable diseases and palliative care has been postponed, affecting more than 64,000 people. About 3,500 elective surgeries per month are also being postponed. In addition, there are on average approximately 2,000 elective surgeries added per month to the waiting list, which has reached 11,400 surgeries.⁴¹

The redirection of resources from the provision of sexual and reproductive healthcare, obstetric and neonatal care and emergency nutrition services has affected an additional 80,000 vulnerable women and 210,000 children, including 25,000 neonates.⁴² A recent study found that many pregnant and lactating women face a double vulnerability due to the combination of obesity and and malnutrition, with 28 per cent of lactating women in Gaza experiencing having depleted levels of iron.⁴³

While resources have shifted to address the pandemic, time-sensitive trauma care needs in the Gaza Strip remain. Health Cluster partners estimate that at least 540 patients injured during the 'Great March of Return' in 2018-2019 are still in need of limb reconstruction surgeries, and more than 1,000 need rehabilitation.

In the West Bank too, most hospitals have suspended

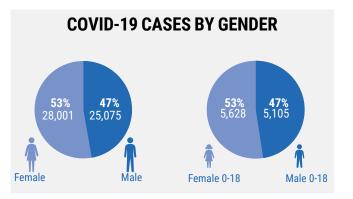
elective surgeries. Outpatient admissions at hospitals have declined by over 50 per cent, as a result of a policy decision on the reallocation of resources, as well as due to the access restrictions and fear of contagion by the population.⁴⁴ The financial situation of East Jerusalem hospitals has been severely undermined, due to a 30 per cent decline in revenues since the beginning of the COVID-19 crisis, driven by the decline in referrals from the remainder of the oPt.

The mental strain generated by the pandemic and its related measures has also increased the need for mental healthcare services. However, the ability of the health system to address this need is severely impaired by major shortages in specialized personnel and drugs. This is underscored by the longstanding struggle of this system to integrate mental healthcare into the essential services offered to the population. For example, in the oPt there are 0.41 active psychiatrists per 100,000 people, well below the global median of 1.3.45 Significant capacity gaps and lack of mainstreaming into the essential services are also pervasive in the clinical management of GBV, including rape, at a time when this phenomenon is on the rise.⁴⁶ Consequently, people with severe mental illness, GBV survivors, adolescents with problematic behaviour, and patients with COVID-19, among others, require urgent mental health support.

Despite significant progress achieved in raising awareness about COVID-19 and the means to prevent its transmission, an oPt-wide survey carried out in June 2020 indicated that some 30 per cent of the population lack sufficient information and 25 per cent tend to stigmatize specific groups for the spread of the virus.⁴⁷ Mothers of children who contracted the virus are particularly vulnerable to stigma, associated with social perceptions about their responsibility for the healthcare of the family.⁴⁸

About 173,000 Palestinians, including refugees, living in communities located in Area C, East Jerusalem, Hebron/H2 and the closed area behind the Barrier, continue suffering from limited, or no, access to primary healthcare and are therefore in need of mobile clinic services. This is primarily because of the restrictive Israeli planning regime, which prevents the construction of the necessary facilities, as well as the prevailing movement restrictions, which impede access to the main service centres.

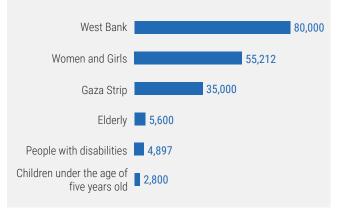
The access of patients in the Gaza Strip and the West



Bank (except East Jerusalem) to specialized healthcare in hospitals outside their respective areas, has also deteriorated since the outbreak of the pandemic. Driven by a combination of financial constraints and precautionary measures, the number of referrals issued by the Palestinians Ministry of Health has declined by about 90 per cent. Those patients referred to such hospitals (mainly in East Jerusalem, and for Gaza residents, elsewhere in the West Bank) have continued facing delays and denial of their applications for exit permits by the Israeli authorities. In the first half of 2020, a third of patients' applications from Gaza, and a fifth of applications from the West Bank. were unsuccessful.

Finally, Palestinian healthcare remains vulnerable to attacks by various perpetrators. Between January-September 2020 there were 40 attacks recorded in oPt in WHO's Surveillance System for Attacks on Healthcare, which impacted healthcare personnel, transport, facilities, patients and supplies.

COVID-19 HEALTH CASELOAD BY MAIN POPULATION GROUPS



Health and Nutrition Needs Indicators

#	INDICATORS	SECTORS	SOURCE
1	# of attacks against healthcare, including patients denied access to health- care outside Gaza	Health & Nutrition	WHO
2	# of people with severe or moderate mental health disorders	Health & Nutrition	WHO and UNICEF
3	# of people in need of legal aid to access health services	Protection / Health & Nutrition	Protection and Health partners
4	# of people in need of emergency care services, including trauma care	Health & Nutrition	WHO
5	# of elective surgeries postponed for over 12 months	Health & Nutrition	WHO
6	# of PwD with no access to multidisciplinary rehabilitation	Health & Nutrition	Health partners
7	# of non-communicable disease patients acutely affected by the shortage in medical supplies	Health & Nutrition	WHO
8	# of women and children under 5 years old in need of quality maternal, nutritional services, specialized services	Health & Nutrition	WHO and UNICEF
9	# of people with an essential package of basic primary healthcare services	Health & Nutrition	Health partners
10	# of people in need of acute and frontline care as a result of an emergency event	Health & Nutrition	Health partners
11	# of women in reproductive age, pregnant and lactating women receiving quality maternal and nutrition services	Health & Nutrition	UNFPA and UNICEF

3.4 Food Security



TOTAL IN NEED	SEVERE	STRESSED	GAZA	WEST BANK	WOMEN %	CHILDREN %	ELDERLY %	
2m	1.3m	749k	1.4m	0.6m	49%	48%	4%	

It is estimated that two million Palestinians across the oPt are severely, or moderately, food insecure and will require food assistance, and/or support in maintaining their farming, herding or fishing livelihoods in 2021.⁵⁵ This represents a net increase of 300,000 newly food insecure compared to 2019. Furthermore, over 217,000 people, previously considered moderately food insecure, have become severely food insecure.

Food insecure people suffer from limited access to food in appropriate quantities and variety to meet their dietary needs; in the oPt, food insecurity is caused by unemployment and poverty. These two indicators have been on the rise in 2020, due the overall slowdown of the economy, following the restrictions imposed to contain the COVID-19 pandemic.

These restrictions have had a severe disruptive impact on the entire food system, including producers, processors, marketers, transporters and consumers. Small-scale producers have been particularly affected by the reduced demand, the unprecedented challenges in securing basic inputs, and the impediments in accessing credit and markets.

The serious economic impact of the pandemic-related measures was reflected in a comprehensive household survey covering the first three months of the crisis (March-May), carried out by the Palestinian Central Bureau of Statistics (PCBS) across the oPt.⁴⁹ Among other findings, 52 per cent of households reported that the main income earner did not receive any wage/salary during the lockdown period, over 40 per cent said that they have reduced their monthly expenditures on food, compared to February 2020, and 57 per cent indicated that their diet is less diverse. Available evidence suggest that women and children are particularly hard hit by the decline in the quality of nutrition, as a result of such coping strategies.⁵⁰

The situation has been further aggravated since mid-2020 by the Palestinian Authority's (PA) increasing budget deficit, following its decision to stop accepting the clearance revenues that Israel collects on its behalf. This has undermined the livelihoods of tens of thousands of public employees, who have not received the bulk of their salaries since then. Due to the same reason, the PA has been unable to maintain its social safety networks, including cash transfers to food insecure households.

Nearly 72 per cent of the food insecure, or over 1.4 million people, live in the Gaza Strip, where the pandemic and the PA's financial crisis have compounded the socioeconomic impact of the longstanding Israeli blockade, the internal Palestinian divide and frequent escalations of hostilities.

The unemployment rate in the Gaza Strip during the second quarter of 2020 reached 49.1 per cent, an historical high, up from 45.5 in the previous quarter.⁵¹ The sharpest increase in unemployment was recorded in restaurants, hotels, commercial and construction activities. Additionally, some 7,000 people employed in Israel have lost their jobs following the outbreak of COVID-19. The World Bank forecasts that by end of the year the poverty rate in Gaza will increase from 53 to 64 per cent, or the equivalent to 37,300 new poor families.

Moreover, 82 per cent of Gaza's private sector employees received is less than the minimum wage (US\$ 350) in the oPt in the second quarter of 2020.⁵² Since early 2019, Gaza employees on the PA's payroll have been receiving only 70 per cent of their monthly salaries, with further deterioration taking place since mid-2020. The situation of civil servants employed by the de facto authorities in Gaza is even more tenuous, as, in recent years, they have been paid only 40 per cent of the salaries every 40-50 days.

The absence of employment opportunities and the poor salaries has also led to the withdrawal of people from the labour market, as reflected in the fall in the participation rate, from 39 to 35 per cent between the first and second quarters of 2020. Women's participation in the labour market in Gaza is dramatically lower than among men and stood at less than 15 per cent in the second quarter of 2020; while the unemployment rate among women (those within the labour force) was 67 per cent. In a recent survey, over two-thirds of female-headed households reported fearing a high risk of food shortage, nearly ten percentage points above male-headed households.⁵³

Some 3,000 farmers owning, or working land, located up to 1,000 meters from Israel's perimeter fence surrounding Gaza have continued to face significant insecurity, discouraging their access to, and development of, their assets. Access to areas within 300 meters of the fence is largely prevented by Israeli forces through the opening of warning fire, land levelling and the spraying of herbicides.

The livelihoods of around 4,000 fisher households have been also affected by similar policies and practises. Despite the expansion of the fishing zone off the southern coast of Gaza to up to 15 nautical miles in 2019, access to the sea remains unpredictable. This is due to the Israeli authorities' intermittent reduction, and, occasionally, complete closure of this area, in response to the firing of projectiles and the launching of incendiary balloons into Israel. Fishers also face warning shots, arrest and the confiscation of boats and equipment by the Israeli navy and, occasionally, also the Egyptian navy.⁵⁴

Finally, the chronic electricity deficit, entailing scheduled power cuts of eight hours a day, represents an additional major constraint affecting most economic activities, including agriculture. Failing to address the energy deficit will further decrease local production, resulting in additional families falling into poverty. Power cuts also add to the shortage of water for irrigation and the limited re-use of wastewater.

Approximately 28 per cent of the food insecure, or some 560,000 people, live in the West Bank, including East

Jerusalem, where the COVID-related deterioration has added to the hardship of poor households, as well as those affected by the coercive environment linked to the Israeli occupation.

Despite the only marginal increase in unemployment in the West Bank between the first and second quarter of the year (both below 15 per cent), the impact of the pandemic is expected to be fully reflected in the employment statistics covering July-December. Based on various indicators, the World Bank forecasts that the share of poor households in the West Bank will more than double by the end of the year, from 14 to 30 per cent.

Over 65 per cent of those food insecure in the West Bank, some 365,000 people, live in vulnerable households in Areas A and B. The recent deterioration is estimated to have particularly affected Palestine refugees, among whom food insecurity was already more prevalent before the crisis (almost four percentage points higher).

The livelihoods of households and entire communities located in, or relying on access to, Area C and East Jerusalem continue to be undermined by the Israeli authorities' destruction/confiscation of structures lacking building permits; restrictions on access to farming and grazing land; and the lack of adequate law enforcement on violent settlers. Between January and September 2020, some 82 livelihood-related structures were demolished or seized by the authorities, and over 5,000 trees were vandalized or destroyed by Israeli settlers. Palestinian Bedouin and herding communities are disproportionately affected, due to their location in sensitive areas and their reliance on agriculture-based livelihoods as their sole, or main source of income. Forced displacement as a result of a home demolition, or the recurrent loss of assets, has devastating socioeconomic consequences, including increased food insecurity and dependence on humanitarian assistance.

Food Security Sector Needs indicators

#	INDICATORS	SECTORS	SOURCE
1	# of people who are severely and moderately food insecure	FSS	The SEFSec survey

3.7 **Education**

TOTAL IN NEED	SEVERE	STRESSED	GAZA	WEST BANK	WOMEN %	CHILDREN %	ELDERLY %
0.54m	437k	67k	290k	214k	48%	97 %	0%

An estimated 504,000 Palestinians across the oPt, the vast majority of whom are school children, will be in need of humanitarian assistance to access education in 2021. Nearly 60 per cent live in the Gaza Strip and over 40 per cent in the West Bank, including East Jerusalem.

The main drivers of education-related vulnerabilities include attacks on schools, movement restrictions, insufficient and/or inadequate school infrastructure, and poverty. These factors undermine the quality of education, generate protection concerns and contribute to the early school dropout.

In 2020, these challenges have been significantly compounded by the outbreak of COVID-19, which has led to the prolonged closures of schools and kindergartens, as part of the measures adopted to contain the pandemic. As of the end of August 2020, 1.3 million children have lost at least three months of schooling and have not been able to engage in summer activities and extracurricular activities. While the Ministry of Education (MoE) and UNRWA have put in place various distance learning programmes to be used in the new academic year, these are not fully accessible to around 20 per cent of children living in homes without internet connectivity, or who could not collect the printed self-learning materials being distributed by schools. Women-headed households have significantly lower connectivity and fewer electronic devices than those headed by males.⁵⁶

The pandemic has posed additional challenges to the education system, including due to the related deterioration in socio-economic conditions; the gaps in adequate WASH facilities and hygiene kits at schools, impeding their safe reopening; and the need to train teachers and school staff in new educational approaches, mixing face-to-face and distance learning.

On the other hand, the closure of schools since the outbreak of COVID-19, along with the relative calm that prevails in Gaza and southern Israel, has resulted in a sharp decline in violent incidents disrupting access to education (as of end-September), compared with previous years. However, the volume of incidents is expected to rise again, following the reopening of schools and the easing of mobility restrictions.

In 2019, the Education Cluster recorded 328 incidents of interference with education across the oPt, affecting almost 20,000 students. The vast majority of these incidents occurred in the West Bank, primarily in the Israeli-controlled area of Hebron city (H2), and in areas of East Jerusalem separated from the city by the Barrier. These involved Israeli forces' firing of tear gas canisters at schools, the detention of students commuting to or from schools, and their harassment and intimidation by Israeli settlers. A few incidents occurred during three rounds of hostilities in Gaza and southern Israel recorded in 2020, resulting in the closure of all Gaza schools for up to several days, as well as in minor damage to 27 school premises during Israeli airstrikes.

Exposure to violence during such incidents is a key source of stress and anxiety among children, parents

EDUCATION RELATED INCIDENTS



328 educationrelated incidents affecting19,913 students in 2019



27 schools in Gaza sustained minor damage causing a loss of 6 school days and affecting
560,000 students in 2019



and teachers. In 2020, this has been exacerbated by the fear of COVID-19 infection and the hardship generated by the related lockdowns.⁵⁷ However, major capacity gaps in school-based psychosocial support (PSS), particularly in the most exposed areas, have prevented the educational system from properly addressing the impact. This has resulted in an extra burden on teachers, who are often untrained to deliver PSS, and has increased the risk of long-term mental health disorders among affected children.

The lack of adequate school infrastructure is another major concern in the Gaza Strip and in vulnerable areas of the West Bank, especially in H2, Area C and East Jerusalem. This problem is driven by the restrictive and discriminatory planning regime imposed by the Israeli authorities, which prevents the construction and upgrading of schools. Those schools built, or expanded, without permits risk demolition or confiscation. Since the start of 2019, four schools have been partially or fully destroyed/confiscated, and eight schools have received demolition or stop work orders; as of September 2020, a total of 52 schools have such orders pending against them.

In annexed East Jerusalem, where the responsibility for the delivery of education is with the Israeli authorities, there is a shortage of more than 3,000 classrooms in the public system for Palestinian residents.⁵⁰ Many schools operate in private residential properties, which do not meet minimal standards; nearly 60 per cent of schools lack playgrounds, libraries or science labs; and at least half of the schools suffer from substandard physical conditions.⁵⁹ Similar challenges affect schools in Area C and H2, of which at least one third do not meet the minimum standards for safe learning environments. and 23 per cent have no playgrounds.⁶⁰

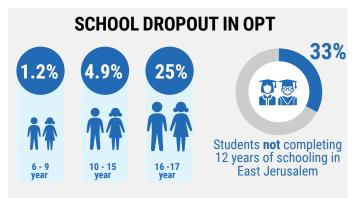
East Jerusalem schools are also facing increasing pressures by the Israeli authorities to replace the PA curriculum with an Israeli one, compromising academic freedom and institutional autonomy, which, in the context of a longstanding occupation, are essential components of the right to education.⁶¹

In the Gaza Strip, the shortage of adequate school infrastructure is driven by a range of factors, including the longstanding Israeli blockade and the internal Palestinian divide, electricity blackouts and the recurrent escalations of hostilities. To mitigate overcrowding, around 65 per cent of schools in Gaza operate on a double-shift system, resulting in reduced hours in core subjects and foundation learning. In addition, the chronic electricity deficit has serious implications for children's right and ability to access education, both at school and at home.

Poor children lack basic conditions allowing learning: they live in overcrowded homes; lack backup generators that mitigate the impact of power cuts; are unable to afford basic education supplies and, often, transportation costs; and are at high risk of early dropout.

About one quarter of children aged 16-17 throughout the oPt, and five per cent of children between 10 and 15, are out of school (either dropped out or never enrolled).⁶² Included in these figures are 46 per cent of all children with disabilities between 6-17 years of age.⁶³ Those enrolled in education face higher risk of dropout, due to gaps in adapted facilities and assistive devices at schools, adequate transportation means, and staff capacity to accommodate for their needs.

Dropout rates are higher for boys, who are expected to contribute to household income in poor families. Early marriage, commonly used by families as a coping mechanism to reduce expenses, is the most significant cause of early dropout among girls, followed by protection concerns related to friction with Israeli forces and settlers.⁶⁴



Education Cluster Needs indicators

#	INDICATORS	SECTORS	SOURCE
1	# of children in need of PSS	Education / Protection	UNICEF
2	# of children, teachers and other education personnel affected by violations and attacks on education facilities	Education / Protection	UNICEF
3	# of children, teachers and other education personnel affected by schools affected by demolition orders	Education / Protection	POC database
4	# of out of school children	Education	Education Cluster partners
5	# of children in need of emergency school supplies (including caravans, stationary, school bags, students' kits, teaching supplies, uniforms, solar systems or fuel, winterization kits)	Education	Education Cluster partners
6	# of children, teachers and other education personnel who are affected by schools that are not adequately prepared for emergencies	Education	Education Cluster partners

3.3 Water, Sanitation and Hygiene (WASH) 축

TOTAL IN NEED	SEVERE	STRESSED	GAZA	WEST BANK	WOMEN %	CHILDREN %	ELDERLY %	
1.6m	0.5m	1.1m	1m	0.6m	49%	50%	3%	

It is estimated that over 1.6 million Palestinians across the oPt are suffering from insufficient access to WASH services and will be in need of related humanitarian assistance in 2021.⁷⁰

WASH vulnerabilities in the oPt have been driven by the longstanding Israeli occupation and Gaza blockade, the internal Palestinian divide, and, most recently, the COVID-19 outbreak and the halt in contact between the Palestinian Authority (PA) and Israel, along with the fiscal and socioeconomic consequences of these factors.

In the Gaza Strip, the ability of the authorities and service providers to upgrade, maintain and operate more than 500 water and sanitation facilities at full capacity has been undermined by a number of factors. These include major funding gaps impeding the purchase of required inputs, including fuel to operate backup generators during the long electricity outages; Israeli import restrictions on equipment and materials designated as 'dual-use items'; and significant capacity gaps stemming from the tensions between the Gaza and Ramallahbased authorities. Meanwhile, over-extraction from, and sewage infiltration into, the coastal aquifer (Gaza's sole source of natural water) continues, rendering it almost completely unfit for human consumption.

In the West Bank, the restrictive and discriminatory planning regime enforced by the Israeli authorities in Area C and East Jerusalem prevents the connection of Palestinian communities to the water and sewage networks, as well as the deployment of rain-harvesting cisterns and mobile latrines. Between January and September 2020, 45 WASH-related structures were demolished or confiscated on the grounds of a lack of building permits.⁶⁵ Additionally, many communities which are connected to the water network are poorly supplied, due to the limited amounts of water available to Palestinians, as a result of Israel's unequitable exploitation of the shared-water resources (the aquifers and the Jordan River basin).⁶⁶ The COVID -19 outbreak and its associated lockdowns, compounded by the growing PA budget deficit and suspension of salaries for government employees, has led to the erosion of WASH coping mechanisms on the part of vulnerable households. These factors have also resulted in the adoption of negative practices, such as reducing water consumption, consuming water from unsafe sources, and dumping wastewater and solid waste in the open. The economic deterioration has also undermined the ability of service providers to collect fees from consumers and, as a result, their capacity to maintain the level of services. According to the Palestinian Water Authority (PWA), more than 60 per cent of WASH providers in the oPt have not been able to collect most of their services fees and consequently lost their main source of revenues.

The four main factors generating people's need for WASH assistance are insufficient water supply to households; gaps in sanitation and solid waste services; gaps in WASH services to public facilities; and the risk of flooding.

Nearly 187,000 Palestinians, of whom 85 per cent live in the West Bank, are either not connected to piped water services, or are very poorly supplied; consequently, they consume less than 35 litres of water per day per capita, well below the 100 litres recommend by WHO. This has undermined the hygiene standards of affected families, which are critical in preventing the transmission of COVID-19, as well as the living conditions of families depending on herding and agricultural livelihoods. In Area C alone, there are 125 unconnected communities/ residential areas that entirely rely on rainwater harvesting and water trucking; the price of the latter reaches over NIS 30 per cubic metre, compared to NIS X paid for piped water. Although the vast majority of households in the Gaza Strip are connected to the network, in most areas the water supplied does not meet the minimum standards for potable water.⁶⁷ This forces families to purchase purified or desalinated water for drinking and cooking purposes, mostly from unregulated private vendors, at an average cost of NIS 30 per cubic metre, compared to NIS 2 paid for piped water. An estimated 20,200 poor families, who cannot afford these expenses, rely on water collection from public filling points (usually in bottles and buckets), as well as the consumption of unsafe tap water. This exacerbates their exposure to waterborne diseases (particularly acute diarrhoea among children under five) and the risk of a waterborne epidemic, affecting the wider population.⁶⁸

Due to the traditional gender division of labour in Palestinian society, women and girls bear the bulk of the burden related to the water shortage, as they are expected to secure the water needed for domestic consumption and care for the children's hygiene. The journey to collect water often expose them to GBV. Women and girls also have additional water needs related to r menstrual hygiene and health, in the case of those pregnant or lactating. Other groups disproportionally affected by poor access to water include the elderly, the sick and people with disabilities.

Regarding access to sanitation services, nearly 440,000 households in the oPt are not connected to any sewerage system, while approximately 3,700 households are discharging their sewage in adjacent streams and open areas, creating health and environmental hazards to downstream communities. About 90 per cent of these households are in the West Bank and the remaining are in Gaza.

Due to power shortages and poor infrastructure, the quality of the treated wastewater produced in the Gaza Strip, and discharged into the Mediterranean Sea, is well below international standards. As a result, over three-quarters of Gaza's beaches are polluted and prohibited for swimming, while the coastal aquifer is further polluted by poorly treated sewage percolation. **Indicators**

Additionally, there are major shortages of adequate sanitation facilities at the household level. Coping mechanisms common in vulnerable communities in Gaza and in Area C, include the sharing of latrines by several families and the use of shelter spaces, other than bathrooms, for handwashing or bathing. Such practices generate privacy and protection concerns, particularly for women and girls.

Almost 29,000 households across the oPt suffer from an acute lack of solid waste collection services or are located in the vicinity of informal and unregulated dumping sites. Affected people are exposed to a range of health and environmental hazards, including due to the mixing of dangerous medical and electronic waste and ordinary household trash. Accumulated trash also attracts stray dogs and cats, as well as rodents – all possible vectors of diseases - and contaminates ground water resources and agricultural land.

With regard to institutions, at least 178 schools (144 in the West Bank, 34 Gaza) and 272 health care units (132 West Bank, 140 Gaza) suffer from insufficient WASH facilities (primarily toilets, drinking and handwashing stations) to meet the standards set up by the Ministries of Education and Health.⁶⁹ This is resulting in the overcrowding of existing facilities and undermining hygiene practices, all of which raise special concern due to the ongoing pandemic. In connection to the latter, there are at least seven quarantine centers in Gaza with poor access to potable water and a sewage disposal system.

Finally, almost 118,000 Palestinians, two-thirds in Gaza and one-third in the West Bank, reside in low-lying areas at risk of flooding s during winter due to heavy rains, as well as the overflow of stormwater facilities and sewage pumping stations. In the past, flooding has caused significant losses of assets, displacement, disrupted access to livelihoods and services, and exacerbated the risk of waterborne diseases. Women bear the brunt of the hardship of flooded homes, as they are expected to continue fulfilling their domestic duties under adverse conditions.

#	INDICATORS	SECTORS	SOURCE
1	# of people who have limited access to safe drinking and domestic water services	WASH	Cluster partners
2	# of people with inadequate access to sanitation and hygiene services	WASH	Cluster partners
3	# of people in need of adequate WASH capacity during emergencies and shocks	WASH	Cluster partners
4	# of people with lack of preparedness activities against the risks of floods	WASH	Cluster partners

3.7 Shelter and Non-Food Items (NFIs)

TOTAL IN NEED	SEVERE	STRESSED	GAZA	WEST BANK	WOMEN %	CHILDREN %	ELDERLY %	
0.43m	268k	164k	359k	73k	49%	45%	3%	

It is estimated that 433,000 Palestinians across the oPt will be in need of humanitarian assistance in 2021 to access an adequate shelter (including basic households supplies), an essential component of providing people with a minimum level of privacy, protection and dignity. Some 83 per cent of the people in need of such assistance are in the Gaza Strip and 17 per cent are in the West Bank.

Gaza is one of the most densely-populated areas in the world, which is affected by a longstanding housing shortage that in 2021 will exceed 120,000 units. The has been driven by over 13 years of Israeli restrictions on the import of building materials and equipment, the deteriorating socio-economic situation, and the recurring waves of hostilities. Some 4,000 people, who lost their homes in the 2014 escalation of hostilities, remain displaced and 16,000 live in homes that were damaged in that context and are yet to be repaired.

A 2020 assessment found that 28,500 existing housing units across Gaza are substandard and do not meet the minimum requirements of living space per person, weather protection, hygiene facilities and privacy. Of these, 7,000 are assessed as being beyond repair, thus requiring complete reconstruction, while the other 21,500 require different degrees of rehabilitation.

In addition, it is estimated that some 9,500 families in Gaza living in rented accommodation are at risk of eviction due to their inability to pay rental costs. This figure is expected to increase over the coming year as a result of the increase in unemployment, COVID 19 spread and poverty.

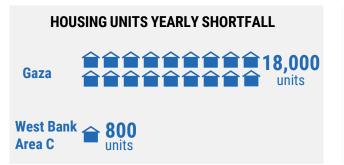
Finally, some 118,000 people living in the ground floors of homes located in low depression areas, or next to sewage pumping stations, are at constant risk of flooding during the rainy season.

This is primarily due to the lack of proper storm water drainage and winterization preparedness, which are affected by Israeli import restrictions, the PA's financial crisis and the tensions between the Gaza and Ramallahbased authorities.

Over 73,000 Palestinians of those in need of shelter assistance live in West Bank, primarily in Area C, East Jerusalem and the H2 area of Hebron city. The restrictive and discriminatory planning regime applied by Israel in Area C and East Jerusalem makes it virtually impossible for Palestinians to obtain building permits, impeding the development of adequate housing and infrastructure. Public (also called 'state') land is almost exclusively allocated to Israeli settlements or for military training, while most private Palestinian land is zoned as agricultural, where construction is severely restricted. The resulting housing deficit alongside the risk of demolition, is a significant 'push-factor' for residents of Area C and East Jerusalem to relocate elsewhere in the West Bank.

Between January and September 2020, a total of 214 residential structures were demolished or confiscated, rendering 747 people, half of them children, homeless and in need of urgent shelter assistance. In Area C alone, there are over 12,500 demolition orders pending against Palestinian structures. In East Jerusalem, in addition to those living in homes at risk of demolition, some 200 families are at risk of eviction, primarily due to court cases filed mainly by Israeli settler organization.

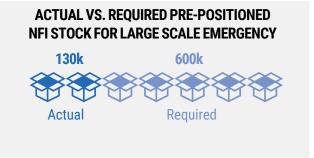
A recent assessment identified at least 3,200 residential shelters in Palestinian Bedouin and herding



communities in Area C, including tents, metal shacks and caves, as being substandard and in need of urgent rehabilitation.

In the H2 area of Hebron, a multi-sectoral survey indicated that nearly 70 per cent of homes located in the access-restricted areas require essential renovation; however, residents reported difficulties in securing the entry of building materials and labourers through the checkpoints. Additionally, 46 per cent of households in this area reported the need of shelter protection measures (e.g external fences/gates, windows steel protection nets) due to violence by Israeli settlers and soldiers.

Across the oPt, over 276,000 Palestinians (as of end-September) have been referred to home quarantine in the context of the COVID-19 pandemic. This has generated additional hardship for families living in



substandard shelters, as members who have contracted the virus could not be properly isolated, increasing the risk of transmission. These families are in need of support to adapt their housing for the isolation of members, and access hygiene items and disinfectant materials. Similarly, institutional quarantine and isolation centres require NFI support for 2,000-3,000 individuals monthly.



Shelter Cluster Needs indicators

#	INDICATORS	SECTORS	SOURCE
1	# of displaced	Shelter&NFIs / Protection	OCHA Demolition Database
2	# of people displaced	Shelter&NFIs / Protection	OCHA Demolition Database
3	# of demolition orders	Shelter&NFIs / Protection	OCHA Demolition Database
4	# of people at risk of displacement (demolition orders, eviction orders)	Shelter&NFIs / Protection	OCHA Demolition Database
5	# of HH received timely post-demolition shelter assistance	Shelter&NFIs	OCHA Demolition Database
6	# of HH in need of shelter protective materials	Shelter&NFIs	OCHA Demolition Database
7	# of people evicted or at risk of eviction due to deteriorated socio-economic situation	Shelter&NFIs	OCHA Demolition Database
8	# of people in need for support with emergency shelter and NFIs at the onset of emergencies	Shelter&NFIs	Shelter & NFIs partners
9	# of communities in need of capacity building and awareness raising on emergency preparedness	Shelter&NFIs	Shelter & NFIs partners
10	# of potential host families in need of emergency preparedness for hosting IDPs	Shelter&NFIs	Shelter & NFIs partners



Part 4 ANNEXES

WEST BANK

Sa'ad Salah, Abu Murad, 68, sits in the old part of his family's house, in Shushahleh village which is targeted by settler violence. @Photo by Tanya Habjouqa/NOOR for Oxfam)



Annex 1: **Data Sources**

Palestinian Central Bureau of Statistics (PCBS)

Most population figures used in the HNO, including for specific vulnerable groups and geographical areas, rely on PCBS population projections for 2021, which are based on the 2017 PCBS census. PCBS's datasets are available online.

Assessments by humanitarian partners

Much of the analysis and figures included in the HNO rely on 110 assessments and vulnerability studies conducted by 60 humanitarian partners over the course of 2019 and 2020, across various thematic and geographical areas. In cases, needs determined through secondary data review were validated through focus group sessions and meetings with community leaders and affected persons. In such sessions and meetings, partners have ensured inclusion of representatives of vulnerable groups, such as women, youth, and persons with disability. The majority of these assessments and studies includes age and sex-disaggregated data. More information about these assessments and studies is available in an <u>online registry.</u>

OCHA digital services and platforms

The analysis presented throughout the HNO also relies on interactive charts, maps and databases developed by OCHA to support the humanitarian community's response in the oPt, all of which are <u>available online</u>. Some of the tools were fully developed by OCHA oPt and others depend on secondary data generated by the local authorities and humanitarian partners. To protect the privacy of people who share their information with us, some of the tools can only be accessed by operational partners.

NO. OF ASSESSMENTS ONGOING ASSESSMENTS		R MC	CHNIQUESCNA14Inerability Assessment22eds Assessment88		
	Gaza Strip	oPt	West Bank	Grand Total	
WASH			1	1	
Education	1	3	3	7	
FSS	3	4	2	9	
Health and Nutrition	1		1	2	
Multisectoral	4	6	4	14	
Protection	19	5	6	30	
Shelter / NFIs	6		4	10	
WASH	15	3	19	37	
Grand Total	49	21	40	110	

Number of assessments

Annex 2: Methodology: Estimating people in need, severity rate and information gaps

Total number of People in Need (PiN)

The estimate of the total number of PiN in the oPt used in this HNO assumes that needs overlap. This means that the same individuals are vulnerable and need assistance in multiple thematic areas covered by different clusters. Consequently, the highest estimate for PiN among the six thematic areas/clusters is assumed to be inclusive of all PiN in each geographical area. For example, the estimate for the PiN in the Gaza Strip is based on the Food Security Sector assessment (1.5 million people), which is the highest for that area, and it is assumed to include also people affected by protection concerns, shortage of water and sanitation, etc. The overall PiN for the oPt consists of the aggregation of the figures selected for each geographical area.

This is a conservative methodology adopted in the absence of an oPt-wide multisectoral needs assessment (MSNA) at the household level. Such a MSNA is currently in the planning phase and will be carried out in 2021, with PCBS being in charge of the data collection. The MSNA findings and analytical report will inform joint humanitarian-development response planning based on the nexus approach that the United Nations Country Team (UNCT) has adopted for 2021; allow a more accurate estimate of the PiN, in particular a better identification of most at-risk and 'furthest left behind' population groups; and support inclusive and peoplecentered assistance provision based on the principles of Accountability to Affected Populations.

Protection

To estimate the number of PiN of protection services, the Protection Cluster relied on a variety of direct indicators, along with contextual and proxy indicators. The following indicators were used in each of the Areas of Responsibility (AoRs) within the Protection Cluster:

Child Protection and MHPSS used the number of boys and girls aged 11 years and less who experienced severe physical violence; number of children affected by all conflict-related violations; the percentage of 18-64 years-old women in oPt exposed to psychological, sexual or economic violence (PCBS Violence Survey, 2019); and WHO estimates on the prevalence of mental disorders in conflict settings.

Key limitations resulted due to the data from the PCBS Violence Survey were not available at the locality level, and national level ratios were applied at the local level. Age disaggregated data for severe physical violence against children was available only for boys and girls aged 11 years and less. Also, the shortage of data on early marriage, GBV/violence, and attempted suicide can make data appear inconsistent and give an inaccurate representation of current trends.

Gender Based Violence used the number of currently or ever-married women exposed to GBV (PCBS Violence Survey, 2019). The distribution for each geographic area was calculated on a range of proxy indicators produced by PCBS, including the Socio-Economic Conditions Survey, 2018; the Poverty Profile in Palestine, 2017; the Quarterly Labour Force Surveys, 2019-2020; and the Population, Housing and Establishments Census, 2017. Additionally, OCHA's Vulnerability Profile Project (2014-2015) and the Shelter Cluster Dashboard (2020) were also used.

Legal Task Force (LTF) indicators include the estimated number of people at risk of displacement and in need of legal aid and people affected by demolition or evictions incidents; the estimated number of people affected by settler violence; and number of people in the Gaza Strip requiring exit permits to access healthcare.

The LTF analysis has been affected by several limitations on available data, including lack of comprehensive and updated datasets about demolition orders, applications for building permits, revocation of permanent residency status, suspension of national insurance benefits, and denial of family unification requests, etc. Information on incidents of settler violence is indicative, but not comprehensive.

Mine Action PiN for the West Bank includes residents of communities located in or around military training sites and minefields, while for Gaza it was estimated to be 10 per cent of the residents of communities in close proximity to Israel's perimeter fence. There are gaps in data regarding ERW contamination and casualties in the West Bank.

The severity rating was done separately for each geographical area based on the exposure to at least one time-critical protection risk affecting physical and mental wellbeing, or exposure to such a risk, where resilience is undermined by deteriorating living standards. For Gaza, high severity was applied to women and children living under the poverty line, including those with disabilities, who are highly exposed to recurrent shocks and negative coping mechanisms associated with COVID-19 restrictions, as well as chronic concerns including the blockade; in Area C of the West Bank this category includes Bedouin and herder communities who are at the highest risk of displacement, lack access to services and are exposed to conflict related violence including settler violence; in Hebron H2 severity is applied to the population living in closed and restricted areas in the old city where protection risks are similarly compounded; and in East Jerusalem to those most exposed to conflict related violence, including arrest, detention, settler violence and forced displacement, compounded by exposure to GBV and compromised access to related services. For areas A and B, the Protection Cluster included the population living in abject poverty and unable to access basic services including child protection and GBV particularly in the context of COVID-19.

Food Security

Estimates of the PiN of food security assistance are based on the findings of the 2018 Socioeconomic and Food Security (SEFSec) survey, adjusted to reflect the impact of the recent economic deterioration as a result of the pandemic, as well as population growth. The calculation of the scope of the increase in food insecurity is based on the distribution of households in the 2018 SEFSec across the five food security categories (food secure, marginally food secure, moderately food insecure, severely food insecure) to which a principle of downgrading shares was applied. More significant ratios were applied to the Gaza Strip that to the West Bank. This methodology was complemented by specific assessments carried out by partners to determine their specific caseload. The current estimate will be revisited during the first quarter of 2021, based on a new SEFSec survey conducted in 2020.

Health and Nutrition

The Health Cluster estimated the number of PiN for each geographical area and each vulnerable group based on their rating for the following indicators: access to primary and secondary healthcare; access to sexual and reproductive health services; nutrition status; access to mental health and Psychosocial Support (PSS); exposure to communicable and non-communicable diseases; exposure to trauma; and attacks against healthcare facilities and staff. The critically vulnerable are identified based on the impact of the lack of health services on morbidity and mortality rates. While the Gaza Strip in its entirety is considered a vulnerable area, in the West Bank, vulnerability is determined by the people's place of residence.

The severity rating was determined by the likelihood of death or severe morbidities, such as disability, or deterioration of physical or mental health, in the absence of health services or lack of timely response.

The analysis presented has been affected by several gaps and limitations on available data. There is limited information about those affected by bureaucratic and political barriers in accessing health care in East Jerusalem. The MoH annual reports have insufficient disaggregation of data according to age, gender and disability. Following the halt in coordination between the PA and Israel, the Health Cluster observed gaps in data about exit permits. Key vulnerable groups, such as those suffering non-communicable diseases, have often been neglected. The ongoing COVID-19 outbreak has further worsened those gaps. Data on GBV survivors is believed to be partial due to under-reporting and lack of standardized information management systems. Lastly, information on the impact of COVID-19 on different health services and vulnerable groups is far from comprehensive.

Education

To analyze the needs and calculate the PiN, the Education Cluster conducted two consultation workshops with partners in Gaza and the West Bank. The workshops' discussions and final results were informed by a range of new assessments carried out by partners in 2020, mainly to understand the impacts of the COVID19 outbreak, as well as regular dataset maintained by the MoE, PCBS and OCHA.

Three indicators were used to calculate the overall PIN in each geographical area, while ensuring that there is no overlap between them: number of children out of school; number of children and teachers in need of hygiene kits; and number of children in need of PSS. The first indicator was calculated based on UNICEF's "Out of School Children Study" published in 2018. This figure was adjusted using MoE data on dropouts during 2019/2018 and on children who were reached and reintegrated to schools following Education Cluster interventions in 2019. The second indicator includes 25 per cent of all children and teachers in public and UNRWA schools across the oPt, including Areas A and B of the West Bank. The third indicator relies on the estimated number of children in need of PSS as produced by the Child Protection AoR, and included fifty per cent of the identified caseload.

The severity rating was calculated depending on the risk of school drop-out and level of expose of children to violence.

For the humanitarian consequences of lack of access to education and unsafe access to schools indicators (including out of school children, children without access to e-learning platforms, children in need of emergency supplies and children facing protection risks in an educational context) ranked between stressed and severe needs. Based on up-to-date information, percentages applied to define the severity level among needs indicators. On emergency preparedness indicator, the West Bank PIN is defined as people with stressed needs while in Gaza, sixty per cent of the people in need categorized under stressed needs.

Main limitations in the analysis include the existence of communities not covered by any assessment; and insufficient information on the numbers of students without access to any form of distance learning, as well as challenges facing children with disability and slow learners in the context of distance learning. Deeper analysis is needed regarding the triggers for school dropout and the potential increase in rates as a result of COVID19. There is an information gap regarding the relevance of conditional cash assistance in education. In Gaza, analysis of the public schools' physical environment is also limited.

Shelter & Non-food Items

The number of PiN was calculated using datasets and other information provided by the Ministry of Public Works and Housing (MoPWH), the Ministry of Social Development (MoSD), assessments conducted by Cluster partners, and the Shelter Cluster database.

Data about substandard shelters are based on the findings of the MoPWH survey of home conditions in Gaza, conducted in January 2020. These findings were subsequently refined on the basis of the MoSD database about hardship caseload.

Information related to families in the Gaza Strip residing in rented accommodations, who are at high risk of eviction, is based on a MoSD database regularly tracking this indicator. Other vulnerable groups, such as people at risk of flooding, were identified based on recent partners' assessments and previous interventions.

The severity rating is based on an index consisting of three criteria given different weights: the nature of the need and the urgency for the response (30 per cent); the humanitarian consequences of the lack of action (50 per cent); and the vulnerability level of the household (e.g poverty, female-headed household, risk of displacement) (20 per cent).

Information gaps have limited the analysis regarding shelter needs in East Jerusalem, as well as in Areas A and B of the West Bank, where no assessments have been conducted. In East Jerusalem, these gaps have impaired the understanding of the impact of the increasing housing shortage on patterns of relocation outside the city. In the Gaza Strip, the IDPs database has been last updated in 2016, impeding a comprehensive assessment of their current

living conditions and coping mechanisms. Data disaggregation by sex and gender is not available in most assessments, while detailed information about the living conditions of people in rented accommodations and at high risk of eviction is not available. Shelter Cluster partners have emphasized the need for a robust centralized database system managed by MOPWH and/or MOSD, which partners can access and rely on for their programming.

Water, Sanitation and Hygiene (WASH)

The number of PiN of WASH assistance was produced on the basis of a joint key informant assessment carried out by cluster partners in the summer of 2020 in 1,059 communities/neighborhoods in the West Bank and the Gaza Strip.

For each community/neighborhood, vulnerability was measured against the number of people whose access

to water and sanitation services is affected by Israeli restrictions, attacks and blockade; who have limited access to safe drinking and domestic water services; who have inadequate access to sanitation, solid waste, and hygiene services; who are at risk of seasonal flooding; who are in need of adequate WASH capacity during emergencies and shocks; who are served by institutions with inadequate access to WASH services.

The following thresholds were used to determine severity for each of the indicators:

VULNERABILITY LEVELS	WATER SOURCE				
	West Bank	Gaza			
Not Vulnerable	Rest of the population	Water network, more than 75 l/c/d water consumption, water price less than 5 ILS/m3, water losses less than 50%			
Minimal	30-50 I/c/d consumption, water trucking price more than 15 ILS	50-75 l/c/d water consumption, water cost 5-7, water losses more than 50%			
Stress	 Water network with less than 30 l/c/d consumption and water trucking at more than 20 ILS/m3 Not connected to water network, consumption 30-50 l/c/d price and water trucking at more than 15 ILS/m3. 	35-50 I/c/d water consumption, 7-10 water cost,			
Severe	Not connected to water network, water trucking over than 15 ILS/m3, 0-30 I/c/d water consumption	Not connected to Water network, or using domestic water for drinking, avg. merging water cost over than 10 ILS/ m3, 0-35 water consumption I/c/d			

1. Access to water vulnerability thresholds

2. Access to sanitation vulnerability thresholds

VULNERABILITY LEVELS	SEWER SERVICE, VACUUMED PRICE,				
	West Bank	Gaza			
Not Vulnerable	Sewer network	Sewer network, price 0 to 20 ILS			
Minimal	Cesspit and price more than 200 ILS	Septic or cesspit, price less than 50 ILS			
Stress	Septic system and price more than 200 ILS	Cesspits or septic and price more than 50 ILS			
Severe	No latrine, no system	No system (open area)			

3. Access to flood prevention vulnerability thresholds'

VULNERABILITY LEVELS	PRESENCE AND IMPACT OF FLOODS			
	West Bank	Gaza		
Not Vulnerable	Never	Never		
Minimal	1-3 and medium	1-3 and mild impact		
Stress	3 or more and medium, 1-3 and severe	More than 1 and medium impact		
Severe	3 or more and severe	3 or more or 1-3 and severe impact		

4. Access to solid waste services vulnerability thresholds

VULNERABILITY LEVELS	SOLID WASTE (SW) COLLECTION SERVICES AND SW ACCUMULATION				
	West Bank	Gaza			
Not Vulnerable	Throw in the area & no accumulation, or existing SW collection services and no or rarely SW accumulation	Existing SW collection services and No or Rarely SW accumulation			
Minimal	Burning or dumping station and occasional accumulation	Dumping station and occasionally accumulation and throw in the area with rare accumulation			
Stress	Burning or dumping station with properly SW accumulation	Throw in the area or dumping station with occasionally SW accumulation			
Severe	Throw in the area with properly or occasionally SW accumulation	Throw in the area or dumping station with properly SW accumulation			

5. Access to WASH facilities in institutions vulnerability thresholds' (West Bank and Gaza)

VULNERABILITY LEVELS	ACCESS TO WASH IN SCHOOLS (# STUDENTS)	ACCESS TO WASH IN HCFS (# DAILY CAPACITY OF HCF)	ACCESS TO WASH IN QCS (# OF QC CAPACITY)
Not Vulnerable	Adequate WASH Facilities (Quantities and Quality)	Adequate WASH Facilities (Quantities and Quality)	Adequate WASH Facilities (Quantities and Quality)
Minimal	Inadequate WASH Facilities (Quality)	Inadequate WASH Facilities (Quality)	Inadequate WASH Facilities (Quality)
Stress	Inadequate WASH Facilities (Quantities)	Inadequate WASH Facilities (Quantities)	Inadequate WASH Facilities (Quantities)
Severe	Inadequate WASH Facilities (Quantities)	Inadequate WASH Facilities (Quantities and Quality)	Inadequate WASH Facilities (Quantities and Quality)

Several information gaps limited the analysis on the WASH needs across the oPt. Those included the lack of comprehensive household-level data complementing the community-level assessments; the unavailability of primary and secondary data about WASH vulnerabilities in East Jerusalem; lack of an intersectoral assessment to identify the impact of inadequate WASH services on education, health and shelter sectors; and limited data about the existing hygiene practices and its patterns during COVID 19 outbreak.

Annex 3 **2021 HNO Key Figures**

Table 1: PIN by Cluster

CLUSTER	HNO 2019	HNO 2020	HNO 2021	INCREASE/ DECREASE 2020/2021	% INCREASE/ DECREASE 2020/2021
Protection	1,971,819	1,852,211	2,120,959	+268,748	15%
Health & Nutrition	1,163,618	1,328,552	1,446,834	+118,282	9%
WASH	1,900,635	1,810,659	1,618,889	-191,770	-11%
FSS	1,700,000	1,683,000	2,022,664	+339,664	20%
Shleter&NFIs	304,628	307,090	432,940	+125,850	41%
Education	519,258	416,017	503,926	+87,909	21%
Total PiN (max of each area)	2.5 million	2,419,700	2,453,627	844,692	35%

Table 2: PIN severity by Geography (how the severity of the same category is divided between the WB and GZ)

	TOTAL PIN	% OF TOTAL PIN	SEVERE	% OF TOTAL PIN	STRESS	% OF TOTAL PIN
West Bank	883,584	36%	335,762	23%	547,822	54%
Gaza	1,570,043	64%	1,099,030	77%	471,013	46%
oPt Total	2,453,627		1,434,792		1,018,835	

Table 3: PIN Severity by Geography (percentage of severity between severe and stress within the same geography)

GA	ZA	WEST	BANK	ARE	A C	AREA A	AND B	EAST JER	USALEM	н	2
Stress	Severe	Stress	Severe	Stress	Severe	Stress	Severe	Stress	Severe	Stress	Severe
30%	70%	62%	38%	67%	33%	60%	40%	50%	50%	38%	62%
471,013	1,099,030	547,822	335,762	209,070	102,975	269,043	179,362	43,100	43,100	14,034	22,898

Table 4: PIN by Age and Gender

MALE 0- <18	FEMALE 0- <18	MALE 18-65	FEMALE 18-65	MALE 65+	FEMALE 65+
630,729	598,090	581,619	563,392	36,283	43,513
26%	24%	24%	23%	1%	2%

Table 5: PIN by demographic group/vulnerable groups

DEMOGRAPHIC GROUP	PIN
People living under poverty line	1,515,886
People affected by conflict related violence	928,370
Refugees	1,296,621
FHH	200,394
IDPs	16,000
People living with disabilities	140,343
Bedouin & Herders in Area C	37,000
Small-scale farmers, herders and fisherfolk in Gaza	150,000

Table 6: PIN by Cluster and Severity

CLUSTER	SEVERE	STRESS
Protection	1,253,000	867,959
Health & Nutrition	1,195,776	251,058
WASH	490,676	1,128,213
FSS	1,274,027	748,637
Shleter&NFIs	267,688	163,572
Education	437,339	66,587
	1,461,017	992,610
	60%	40%

Table 7: PIN by Critical Problem and Severity

CRITICAL PROBLEM	PIN	STRESS	SEVERE
Critical problem 1: Access to services	1,544,941	55%	45%
Critical problem 2: Resilience and recovery	1,987,640	58%	42%
Critical problem 3: Protection and physical and mental wellbeing	2,120,959	48%	52%

Table 9: PIN by Critical Problem and Cluster

CLUSTER	CRITICAL PROBLEM 1	CRITICAL PROBLEM 2	CRITICAL PROBLEM 3
Protection	2,120,959		
Health & Nutrition	371,824	823,952	251,058
WASH	1,229,732	1,544,941	1,618,889
FSS			1,987,640
Shleter&NFIs	65,960	365,300	150,000
Education	237,624	385,115	63,850

Table 10: Percent of PIN by women, children and people with disabilities

WOMEN	CHILDREN	PEOPLE WITH DISABILITIES
49%	50%	5.8%

Table 11: Percent of PIN by gender and age

CHILDREN	ADULTS	ELDERS
50%	47%	3%

People in Need by Cluster

FOOD SECURITY

OVERALL PIN	2,022,664		
	Stress	Severe	
S03	748,637	1,274,027	
	Stress	Severe	Total
Gaza	352,313	1,076,279	1,428,592
West Bank	396,324	197,748	594,072
	Stress	Severe	Total
Gaza	352,313	1,076,279	1,428,592
Area C	116,854	58,305	175,159
Area A and B	243,447	121,466	364,913
EJ	24,016	11,984	36,000
H2	12,007	5,993	18,000
Total	748,637	1,274,027	2,022,664

EDUCATION

OVERALL PIN	503,926		
	Stress	Severe	
S01	237,624		
S02	385,115		
S03	63,850		
	Stress	Severe	Total
Gaza	55,456	234,259	289,715
West Bank	11,131	203,080	214,211
	Stress	Severe	Total
Gaza	55,456	234,259	289,715
Area C	2,226	12,797	15,023
Area A and B	6,679	156,205	162,884
East Jerusalem	1,669	27,538	29,207
H2	557	6,541	7,098
Total	66,587	437,339	503,926

SHELTER

OVERALL PIN	431,260		
	Stress	Severe	
S01	55,240	10,720	
S02	212,448	152,852	
S03	150,000		
	Stressed	Severe	Total
Gaza	223,948	134,852	358,800
West Bank	43,740	28,720	72,460
	Stress	Severe	Total
Gaza	223,948	134,852	358,800
Area C	15,300	17,120	32,420
Area A and B	23,000	8,000	31,000
East Jerusalem	5,440	2,680	8,120
H2		920	920
Total	267,688	163,572	431,260

PROTECTION

	•		
OVERALL PIN	2,120,959		
	Stress	Severe	
S01	867,959	1,253,000	
	Stress	Severe	Total
Gaza	266,622	1,018,492	1,285,114
West Bank	601,337	234,508	835,845
	Stress	Severe	Total
Gaza	266,622	1,018,492	1,285,114
Area C	326,000	36,000	362,000
Area A and B	193,000	138,000	331,000
EJ	46,492	53,508	100,000
H2	35,845	7,000	42,845
Total	867,959	1,253,000	2,120,959

HEALTH

OVERALL PIN	1,446,834		
	Stress	Severe	
S01		371,824	
S02		823,952	
SO3	251,058		
	Stressed	Severe	Total
Gaza	142,150	808,988	951,138
West Bank	108,908	386,788	494,396
	Stress	Severe	Total
Gaza	142,150	808,988	951,138
Area C	102,910	194,483	297,393
Area A and B		88,010	88,010
East Jerusalem	5,998	62,200	68,198
H2		42,095	42,095
Total	251,058	1,195,776	1,446,834

WASH

OVERALL PIN	1,618,889		
	Stress	Severe	
S01	778,262	448,266	
S02	1,131,052	413,675	
SO3	1,245,538	509,037	
	Stress	Severe	Total
Gaza	550,332	409,320	959,652
West Bank	577,881	81,356	659,237
	Stress	Severe	Total
Gaza	550,332	409,320	959,652
Area C	141,222	33,212	174,434
Area A and B	349,951	39,206	389,157
East Jerusalem	86,709	3,203	89,912
H2		5,734	5,734
Total	1,128,213	490,676	1,618,889



Acronyms

4W	Four W's (Who is Where, When, doing What)
AOR	Area Of Responsibility
ARA	Access Restricted Areas
AIMWG	Assessment and Information Management
	Working Group
AWD	Acute Watery Diarrhea
CERF	Central Emergency Response Fund
CWD	Children with Disabilities
DES	Designated Emergency Shelter
EIE	Education in Emergencies
EJ	East Jerusalem
ER	Early Recovery
ERW	Explosive Remnants of War
EU	European Union
FAO	Food and Agriculture Organization of the United
	Nations
FHH	Female Heading Households
GAM	Gender and Age Marker
GBV	Gender-based violence
GEDCO	Gaza Electricity Distribution Company
GMR	Great March of Return
H2	Hebron City
HC	Humanitarian Coordinator
HCT	Humanitarian Country Team
HeRAMS	Health Resources Availability Monitoring System Households
HNO	Humanitarian Needs Overview
HRC	Human Rights Council
HRP	Humanitarian Response Plan
HF	Humanitarian Fund for the oPt
	Inter-Cluster Coordination Group
ICRC	International Committee of the Red Cross
IDP	Internally Displaced People
IHL	International humanitarian law
IHRL	International human rights law
INGO	International non-governmental Organisation
ISF	Israel Security Forces
JMP	Joint Monitoring Programme
MCNA	Multi-Cluster Needs Assessment
MHPSS	Mental health and psychosocial services
MoE	Ministry of Education
MoEHE	Ministry of Education and Higher Education
MoH	Ministry of Health
MoLG	Ministry of Local Government
MoP	Ministry of Planning
MoSA	Ministry of Social Affairs
MoPAD	Ministry of Planning and Administrative
	Development
MoPWH	Ministry of Public Works and Housing
MOSD	Ministry of Social Development
NCD	Non-communicable disease
NFI	Non-Food Item
NGO	Non-Governmental Organisation
NIS	New Israeli Shekel
NM	Nautical Miles

NNGO National NGO NRC Norwegian Refugee Council OCHA Office for the Coordination of Humanitarian Affair OXFAM Oxford Committee for Famine Relief OHCHR Office of the High Commissioner for Human Right oPt occupied Palestinian territory PA Palestinian Authority PCBS Palestinian National Authority PRN Periodic Mid-Year Monitoring Report PiN People in Need PNA Palestinian National Authority PNGO Palestinian NGO network PoC Protection of Civilians PPP Purchasing Power Parity PRCS Palestinian Reconstruction and Development Plant PSEA Protection Against Sexual Exploitation and Abuse PSS Psychosocial Support PWD Persons with Disability RPM Response Planning Module SC Res. Security Council Resolution SIDA Swedish International Development Cooperation Agency SEFSec Socio-economic and Food Security Monitoring System SOP Standard Operating P			
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End Notes

- 1. The World Bank, <u>Economic Developments in the Palestinian</u> <u>Territories</u>, 24 November 2020.
- 2. The World Bank, Economic report to the ad-hoc liaison committee, June 2020.
- 3. Agreements on the normalization of relations between Israel, the United Arab Emirates and Bahrain, signed in September 2020, have reportedly led to the suspension of Israel's annexation plans for parts of the occupied West Bank; consequently, the PA has maintained its no-contact policy. See: Tova Lazaroff, "Netanyahu pledges annexation", The Jerusalem Post, 31 August 2020; Middle East Eye, "Israel's West Bank annexation postponed for a year, not cancelled, says Friedman", 30 September 2020.
- The Israeli authorities have reportedly invested efforts to engage with the PA in order to restore prior relations and coordination agreements.
- See for example, <u>Report by the High Commissioner of Human</u> <u>Rights</u>, Ensuring accountability in the occupied Palestinian territory, March 2020.
- 6. Israel has agreed to a project involving the creation of an industrial estate in the area of the former Karni crossing, including the regular entry of restricted goods under the Gaza Reconstruction Mechanism (GRM), facilitated by the UN. While this project can generate significant employment opportunities, the PA and Israel failed to reach agreement about its implementation.
- 7. The permitted fishing zone along Gaza's southern coast was expanded by Israel in 2019 to 15 nautical miles, the largest such distance since 2007.
- Service delivery has been also impacted by the decline in the recovery of fees from consumers, as a result of the overall economic deterioration.
- 9. Since early 2019, Gaza employees on the PA's payroll have been receiving only 70 per cent of their monthly salaries, with further deterioration taking place since mid-2020. The situation of civil servants employed by the de facto authorities is even more tenuous, as, in recent years, they have been paid only 40 per cent of the salaries every 40-50 days.
- The average unemployment rate in Gaza during 2019 stood at 45.1 per cent Palestinian Central Burau of Statistics (PCBS), <u>Labour Force Survey</u>, April-June 2020.
- 11. PCBS, Ibid.
- 12. Ministry of Social Development (MoSD) database.
- 13. The military "Regulations Concerning the Transfer of Goods (Judea and Samaria)" allow the seizure without prior notice of mobile structures, within 60 days of their installation, with the latter period extended in August 2020 to 90 days. Military order 1797, implemented since 2019, allows the demolition of structures built in the prior 3-6 months, within 96 hours of the issuance of a removal notice.
- 14. The Israeli human rights organization Yesh Din reported that of the 273 Police investigations on settler violence tracked by the organization, which were opened between 2014 and 2019 and reached a final stage, only 25, or 9 per cent, led to the prosecution of offenders, while the other 248 investigations were closed without indictment. Of the latter, more than 70 per cent were closed on grounds of 'offender unknown' or 'insufficient evidence', "indicating the police found an offense had been committed, but failed to identify the perpetrators or collect enough evidence to

prosecute". Yesh Din, Law enforcement on Israeli civilians in the West Bank, December 2019.

- 15. See for example, <u>Report by the High Commissioner of Human Rights</u>, Israeli settlements in the occupied Palestinian territory, January 2020, para. 10,15. On 9 June 2020, the Israeli High Court of Justice struck down a 2017 law enabling the 'legalization' of settlement outposts built on private Palestinian land.
- 16. Hamoked, <u>New military data</u>, 30 June 2020. New standing regulations, issued in September 2019, set a limit on the number of days that farmers can access their land over the course of a year, based on the size of the plot and the nature of the crop.
- OCHA, <u>Tightened movement restrictions increase hardship</u> on <u>Palestinians in Hebron</u>, The Humanitarian Bulletin, August-September 2020.
- OCHA, "Longstanding access restrictions", The Humanitarian Bulletin, March-May 2020.
- 19. This includes only the area within the municipal boundaries of individual settlements, as defined in military orders, which are off limits for Palestinians. Much larger areas, encompassing up to 43 per cent of the West Bank, are included within the boundaries of the settlements' regional councils, however most of these areas are designated as 'firing zones' for military training and are not administered by the settlements' authorities.
- 20. The Israeli Central Bureau of Statistics, <u>Monthly Bulletin</u> <u>September 2020</u>, Construction Statistics.
- 21. See Peace Now, Objections to Building in E1, August 2020.
- 22. Estimates are based on the findings of the 2018 Socioeconomic and Food Security survey (SEFSec), adjusted to reflect the impact of the recent economic deterioration, as well as population growth. The current estimate will be revisited early next year, based on 2020 SEFSec survey, which is currently in the preparation stage.
- 23. According to UN Women, the GMR has taken a particular toll on children. Twenty per cent (533) of persons treated in UNRWA health clinics were children. Almost 10 per cent of cases involving children have been classified as 'severe' and have required hospital admissions. Eighty per cent of all children treated by UNRWA were injured with gunshot wounds".
- 24. More than a third of PwD over 10 years old are illiterate, unemployment among PwD stand at 19 per cent in the West Bank and 54 per cent in Gaza, well above the equivalent figures for the broader population, and 40 per cent of households with children with disabilities had monthly incomes half of the extreme poverty line.
- 25. The majority of women with disability are single- reflecting the level of societal discrimination (UN Women, Gender Alert, 2018). Regrading those married, a PCBS Violence survey from 2019 indicated that 37 per cent experienced violence at least once by their husbands in the 12 months preceding the survey.
- 26. These grave violations affected 12,003 boys and 931 girls in Area A/B (7,570), Gaza (2,841), East Jerusalem (1,514) and H2 (1,009). The six grave violations as stipulated in Security Council Resolutions on children and armed conflict include killing and maiming of children, recruitment and use of children, sexual violence against children, abduction of children, attacks against schools and hospitals and denial of humanitarian access for children.

- 27. Data as reported by the Israel Prison Service (IPS) in response to FOI petitions by Btselem.
- 28. This is inconsistent with the Convention on the Rights of the Child (CRC) obligations for detention to be as a last resort and for the shortest appropriate time. In 2019, the United Nations received testimonies of 166 children, who reported ill-treatment and breaches of due process by Israeli forces (SG-CAAC report, June 2020, para.84).
- 29. See HC/OHCHR/ UNICEF Joint Statement of 11 May 2020.
- 30. CARE International. "Gender Implications of COVID-19 Outbreaks in Development and Humanitarian Settings", 2020. UN Women" Gender Alert, August 2020". See also, Ministry of Social Development, UNICEF, UNOHCHR, Independent Commission for Human Rights. "The rights of children amid COVID-19". 2020. UN Women" Gender Alert, August 2020".
- 31. PCBS, Labour Force Survey (April-June, 2019)
- Preliminary key findings based on secondary data review, online consultation and qualitative data from ongoing Child Protection Needs Identification Framework (NIAF) COVID-19 assessment in the oPt (August 2020).
- PCBS, Preliminary Results of the Violence Survey in the Palestinian Society, 2019.
- 34. WHO, Disability and rehabilitation, 2020.
- 35. Data refer to the period between January 1 to July 31, 2019 and January 1 to July 31, 2020. For the West Bank, two cases were reported in 2019 compared to 11 cases in 2020.
- 36. Based on calculation of total number of affected children, and WHO proportionate estimate (13% + 9.1% of severe, moderate and mild of affected population). https://www.thelancet.com/ journals/lancet/article/PIIS0140-6736(19)30934-1/fulltext.
- 37. Calculated as total female population (18-64 years) multiplied by exposure to violence multiplied by 9,1 per cent (Source: WHO meta-analysis and PCBS Estimated Population in Palestine Mid-Year by Governorate,1997-2021).
- SAWA Helpline Factsheets, WCLAC COVID-19 Weekly Response Reports, UN Women Rapid Assessment on COVID-19 and Domestic and Family Violence Services across Palestine (June 2020).
- 39. Health Cluster oPt. <u>"Health Cluster Bulletin 1 May 30 June 2020"</u>.
- 40. IASC Reference Group for Gender in Humanitarian Action. "Gender Alert for COVID-19 Outbreak". 2020. UN Women "Gender Alert, August 2020).
- 41. HeRAMS
- 42. Pregnant women and new mothers are at increased risk of not being able to access proper healthcare, especially with the current lockdown measures and the severe reduction in medical referrals to hospitals in Jerusalem and Israel. See, UN Women, Gendered Impacts of the Pandemic in Palestine and Implications for Policy and Programming: Findings of a Rapid Gender Analysis of COVID-19 in Palestine, April, 2020.
- 43. WFP-UNICEF. "Barrier Analysis and In-depth Qualitative Interviews Report". 2020. UN Women "Gender Alert, August 2020).
- 44. Palestinian Institute of Public Health report, June 2020.
- 45. WHO, Mental health Atlas, 2017.
- 46. OCHA, <u>A crisis within a crisis</u>, The Humanitarian Bulletin, April-May 2020.
- Baseline Assessment for the 'Risk Communication and Community Engagement Plan (RCCE)' for the State of Palestine", published by UNICEF September 2020.
- 48. See, UN Women, Gendered Impacts, Ibid.
- 49. PCBS, <u>Press Release</u>, 4 October 2020. The sample included 9,926 households and the time covered in the data was 5 March to 25 May, 2020.
- 50. UNICEF. "Humanitarian Situation Report: State of Palestine".

2019. UN Women "Gender Alert, August 2020).

- 51. PCBS, Labour Force Survey, Second Quarter 2020.
- 52. Ibid.
- 53. Gender Alert UN Women SEP 2020.
- 54. Al Mezan Center for Human Rights documented 172 "violations against the fishing sector" in the first half of 2020. On 25 September 2020, Egyptian naval forces opened fire at a Palestinian fishing boat, killing two and injuring another, the first such killing since November 2018..
- 55. Estimates are based on the findings of the 2018 Socioeconomic and Food Security survey (SEFSec), adjusted to reflect the impact of the recent economic deterioration, as well as population growth. The current estimate will be revisited early next year, based on 2020 SEFSec survey, which is currently in the preparation stage.
- 56. PCBS, International Women's Day Highlights, 2019.
- 57. Gaza Community Mental Health Programme, Impact of Corona Virus on Mental Health in Gaza, 2020.
- 58. Ir Amim, THE STATE OF EDUCATION IN EAST JERUSALEM: FAILING INFRASTRUCTURE 2019.
- 59. UNDP East Jerusalem schools survey, 2020.
- 60. ECW Baseline Assessment, 2020.
- 61. In May 2017, the Israeli Cabinet approved the implementation of a five-year plan providing East Jerusalem schools with incentives to make such shift.
- 62. UNICEF Country report on Out of School Children, 2018.
- 63. PCBS, Persons with disabilities in Palestine, 2018.
- 64. ESCWA (2019), <u>Social and Economic Situation of Palestinian</u> <u>Women and Girls</u> (July 2016 – June 2018), Beirut, 2019, p. 17.
- 65. Demolition and displacement in the West Bank database, oPt OCHA Dashboards. https://www.ochaopt.org/data/demolition)
- 66. <u>Securing Water for Development in West Bank and Gaza</u>, World Bank, 2018.
- 67. Gaza Water status report, PWA June 2018.
- https://reliefweb.int/report/occupied-palestinian-territory/gazawater-status-report-2017-june-2018
- 68. Epidemiological Bulletin for Gaza Strip, UNRWA December 2019.
- 69. JMP 2020 report mentions that 76% of schools had a limited hygiene service, (https://washdata.org/sites/default/files/2020-08/jmp-2020-wash-schools.pdf)
- Estimates provided in this overview are based, unless otherwise indicated, on a community-evel mapping assessment carried out by the WASH Cluster and its members in July and August 2020.

See http://digitalhumanitarians.com/