

2017

HUMANITARIAN RESPONSE PLAN

— JANUARY-DECEMBER 2017 —

DEC 2016

Photo: OCHA



**OCCUPIED
PALESTINIAN
TERRITORY**

TOTAL POPULATION

PEOPLE IN NEED

PEOPLE TARGETED

REQUIREMENTS
(US\$)# HUMANITARIAN
PARTNERS

4.8M

2.0M

1.6M

547M

95

PEOPLE TARGETED

1.6M

SUMMARY OF REQUIREMENTS - BY LOCATION

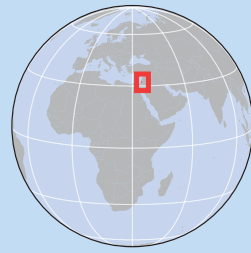
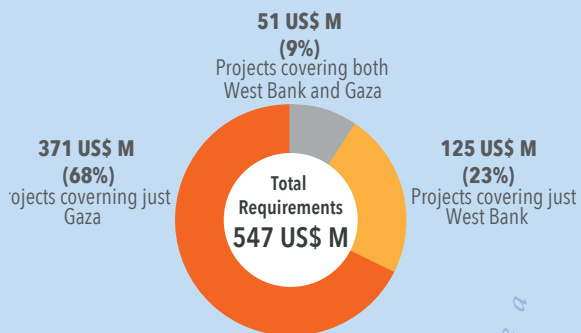
West Bank
People targeted
0.5MGaza Strip
People targeted
1.1M

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FOREWORD BY

THE HUMANITARIAN COORDINATOR

As the Israeli military occupation of the Palestinian territory (oPt) enters its 50th consecutive year, humanitarian needs remain high. Poverty and unemployment have driven more than a quarter of all households into food insecurity; an estimated one million people are in need of health and nutrition interventions; and 1.8 million people require some form of protection assistance. Overall, nearly half of all Palestinians living across the West Bank, including East Jerusalem, and in the Gaza Strip – some two million people in all – will need some form of humanitarian assistance in 2017.

Two years after the 2014 round of hostilities and nine years into the blockade, humanitarian needs in Gaza remain particularly acute and humanitarian services provided by the international community remain a life-line for 1.1 million people. Around 65,000 people are still displaced from the 2014 escalation, hospitals and primary healthcare services struggle to function without adequate stocks of lifesaving medicines and supplies, and farmers and businesspeople face numerous obstacles to restart their livelihoods. Access to clean water and electricity is sporadic for most inhabitants. Seventy per cent of the Gaza population has access to running water for only a few hours, every two to four days – most of which is not potable – while most of Gaza's households receive electricity only six to eight hours daily. Increased restrictions on permits to exit Gaza/access the West Bank and beyond are also taking a toll on patients in need of essential medical treatment as well as aid workers.

Accountability for violations of international law by duty bearers on both sides remains elusive, denying victims and survivors the justice and redress to which they are entitled. Sadly, the past year also saw continued tensions in the oPt, with sporadic airstrikes and tank shelling attacks on Gaza and an increase in live ammunition injuries of Palestinians in the West Bank. Added to this was a sharp increase in demolitions of Palestinian homes and infrastructure in the West Bank, including East Jerusalem.

Against this backdrop, we nevertheless saw the overall funding response for our humanitarian programmes reduce compared to the previous year, jeopardizing the delivery of critical assistance for those in need, whether they struggle to rebuild their lives in Gaza, protect their rights or access essential services in East Jerusalem or in Area C of the West Bank. We hope 2017 will be more successful in this respect.

The protracted protection crisis in the oPt stems from a stalled political process and recurring cycles of violence. A lack of respect for international law continues to drive the vulnerability of Palestinians, creating a man-made humanitarian crisis that has gone on for far too long. This Humanitarian Response Plan (HRP) for 2017 represents our best effort to shield vulnerable civilians from the impact of this protracted disaster.

Robert Piper
Humanitarian Coordinator

THE HUMANITARIAN RESPONSE PLAN

AT A GLANCE

STRATEGIC OBJECTIVE 1

Protect the rights of Palestinians under occupation in accordance with IHL and IHRL.

STRATEGIC OBJECTIVE 2

Ensure acutely-vulnerable Palestinians under occupation in Gaza and the West Bank have access to essential services.

STRATEGIC OBJECTIVE 3

Strengthen the ability of acutely-vulnerable Palestinian households to cope with protracted threats and shocks.

PEOPLE IN NEED



PEOPLE TARGETED



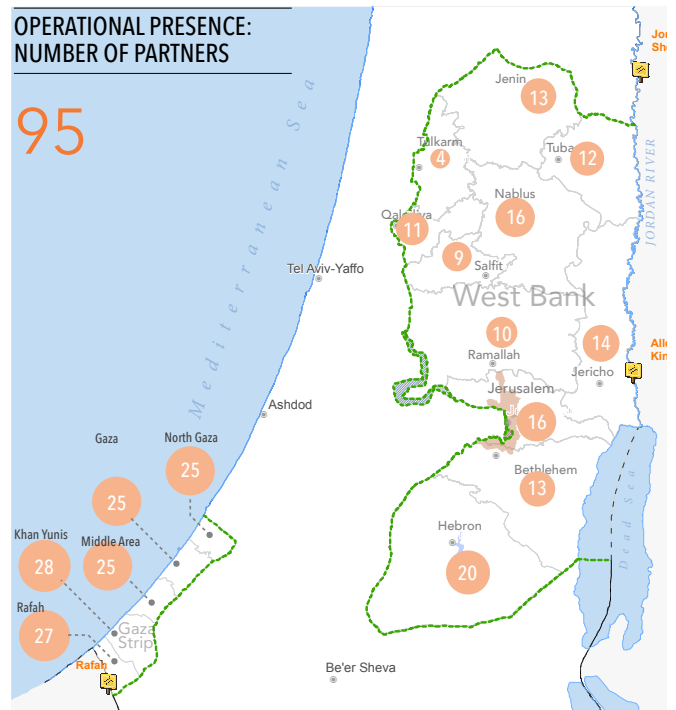
REQUIREMENTS (US\$)



OPERATIONAL PRESENCE: NUMBER OF PARTNERS

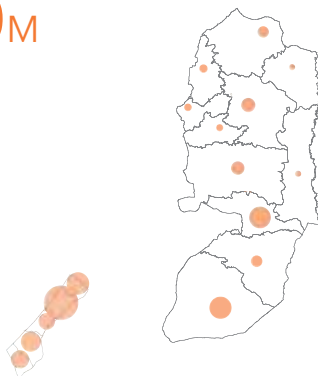
OPERATIONAL PRESENCE: NUMBER OF PARTNERS

95



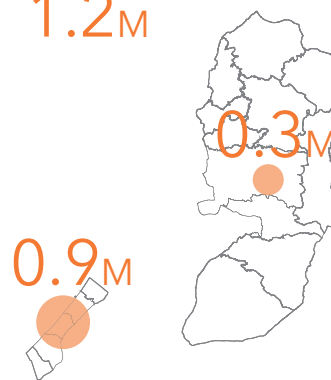
PEOPLE WHO NEED HUMANITARIAN ASSISTANCE

2.0M



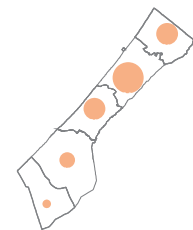
REFUGEES IN NEED

1.2M



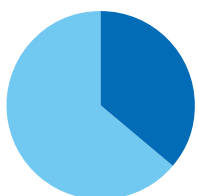
INTERNALLY DISPLACED PERS.

65K



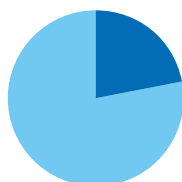
FOOD-INSECURE PEOPLE*

1.65M



REFUGEES IN NEED

1.2M



CHILDREN IN NEED OF PSYCHOSOCIAL SUPPORT

265K



INTERNALLY DISPLACED PEOPLE

65K



■ West Bank
■ Gaza

*The minor increase in the needs is due to the annual population growth rate only.

OVERVIEW OF

THE CRISIS

The major drivers of humanitarian vulnerability in the occupied Palestinian territory (oPt) remain unchanged. The oPt remains in the midst of a protracted occupation, now in its fiftieth year, accompanied by the systematic denial of Palestinian rights and continuing conflict. An estimated two million people are in need of humanitarian assistance throughout the oPt. In the Gaza Strip, years of blockade, imposed by Israel after the takeover of Gaza by Hamas, and recurrent outbreaks of hostilities have eroded basic infrastructure, service delivery, livelihoods and coping mechanisms. In the West Bank, continuing settlement expansion, the destruction of homes and livelihoods, and the lack of a horizon for ending the occupation are major sources of frustration and conflict. There has been no progress on the main political fronts, neither with regard to Israeli-Palestinian negotiations towards a realization of the two-state vision, or on the consolidation of a Palestinian Government of National Consensus (GNC), which will end the internal divide. A pervasive crisis of accountability continues, with no effective remedy for the vast majority of alleged violations of international law

GAZA STRIP

In the Gaza Strip, the August 2014 ceasefire has largely held and international support and some relaxation of import restrictions by the Israeli authorities led to highest level of imports since the imposition of the blockade and have resulted in progress in the rehabilitation of damaged health, education and WASH infrastructure. However, as demand exceeds level of allowed flow, as of September only 1,300 out of the totally destroyed 11,000 housing units have been reconstructed, with work on an additional 3,200 underway, and over 60,000 people remain displaced. Palestinian movement to and from Gaza has declined, affecting medical patients, business people and aid workers; less than half of the applications for local staff working with international organizations were approved in October, for example. Access restrictions have been exacerbated by the almost continuous closure of the Rafah passenger crossing by Egypt since October 2014.

The blockade imposed by Israel since 2007 and recurrent rounds of hostilities have inflicted large-scale destruction on Gaza's infrastructure and productive assets while restrictions on the import of goods Israel considers as having a 'dual' military and civilian purpose continue to impede basic service delivery. Service delivery is also affected by the continuing non-payment of salaries by the Palestinian authorities to tens of thousands of public employees since April 2014, due to the internal political crisis within Palestine, and by the chronic electricity deficit.¹ One million Palestinians in Gaza are now moderately-to-severely food insecure, even though many already receive food assistance or other forms of social transfers – resulting in low resilience and high vulnerability to shocks. Unemployment at 42 per cent, is more than twice as high as in the West Bank while youth unemployment in Gaza currently stands at 58 per cent. Although the economy in Gaza has expanded by 21 per cent in the first quarter of 2016 due to an upsurge in construction activity, the World Bank warns that in the event of a resumption of armed conflict, "the Gaza economy is expected to slip back into recession."²

1. In the Ad-Hoc Liaison Committee (AHLC), a high-level donor meeting held in September 2016, the Israeli authorities announced their intention to establish a new electricity line into the Gaza Strip. The line could supply an extra 100 megawatts (MW) of electricity, almost doubling the current supply from Israel.

2. World Bank, Economic Monitoring Report to the Ad Hoc Liaison Committee, 19 September 2016, p.7.

WEST BANK

Palestinians in the West Bank continue to be subject to a complex system of physical and bureaucratic barriers, imposed by Israel citing security concerns, which restrict their right to freedom of movement, undermine livelihoods, and increase dependency on humanitarian aid.³ The expansion of settlements, illegal under international law, continued with a 40 per cent increase in new housing units in the first six months of 2016 compared to the previous six months. Conversely, there was a sharp increase in the number of Palestinian-owned structures destroyed, dismantled or confiscated (804) by the Israeli authorities for lack of building permits in Area C – where the restrictive and discriminatory planning regime prevents Palestinian communities from building homes and infrastructure – and a corresponding increase in the number of Palestinians displaced as a result of these demolitions (1,133 to end-October). Palestinian Bedouin and herding communities across Area C, with a population estimated at 30,000, are also among those most at risk of forcible transfer, due to the coercive environment which they find themselves. The demolition rate in East Jerusalem in 2016 to end-October (150) is the highest since 2000 while the number of donor-funded, humanitarian assistance structures demolished or confiscated in 2016 to end-October (274) is also unprecedented.

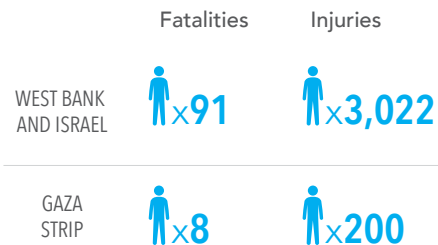
The wave of violence which erupted in October 2015 continued in 2016 resulting in 91 Palestinians killed and 3,222 injured by Israeli forces in the context of a reduced level of attacks/ alleged attacks, demonstrations and clashes to end- October. During the same period, 15 Israelis, were killed, and 163 injured by Palestinians. Refugee camps continue to be sites of concern: 77 search and arrest operations were conducted in refugee camps, with 23 adult and four child refugees and 309 adult and 67 child refugees in and around refugee camps up to end-October 2016.

More than 500 Palestinians have been shot and injured with live ammunition since the beginning of the year, including cases resulting in long-term disability. Security considerations notwithstanding, concerns remain over possible excessive use of force and extra-judicial executions by Israeli forces in their response to Palestinian attacks or suspected attacks as well as the lack of sufficient accountability regarding these cases. Also of concern is the continuous spreading of incitement to violence against Israelis, particularly on social media.⁴



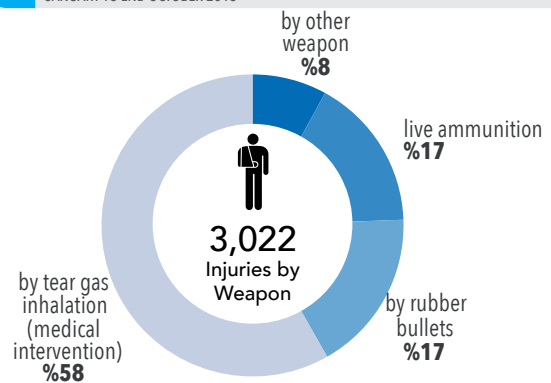
PALESTINIAN CASUALTIES IN THE OPT AND ISRAEL

JANUARY TO END OCTOBER 2016



PALESTINIAN INJURIES IN THE OPT AND ISRAEL

JANUARY TO END OCTOBER 2016



3. Relaxation measures introduced by Israel since 2008 have improved the connectivity between the main urban centers in the West Bank. However, access to large West Bank areas remain highly constrained, including East Jerusalem, the "Seam Zone", the Israeli-controlled area of Hebron city (H2), firing zones, the Jordan Valley border area, settlements' municipal areas, and restricted roads. Movement between the West Bank and Gaza remains largely banned.

4. See: Report of the Middle East Quartet, 1 July 2016.

STRATEGIC

OBJECTIVES

The goal of humanitarian assistance in the oPt is to protect the rights of Palestinians living under occupation, provide access to basic services for those who are acutely vulnerable, and support the ability of households to cope with prolonged stress in order to prevent a further deterioration in their situation until more sustainable solutions are found.



1

Protect the rights of Palestinians under occupation in accordance with International Humanitarian Law (IHL) and International Human Rights Law (IHRL)

Violations of IHL and IHRL are at the heart of the oPt crisis, and are the main driver of the humanitarian concerns in of Palestine, providing the entry point for the response across all clusters. The aim of this objective is to enhance protection by promoting respect for IHL and IHRL, promote accountability and mitigate the impact of violations. All Palestinians in the oPt are affected by the protection crisis in some way; however, direct interventions will focus on those identified as acutely vulnerable and in need of specific protection measures.

Interventions will, for example, monitor and document violations and advocate for respect for IHL and IHRL; provide legal assistance to affected communities; mitigate the impact of violations, including through psychosocial support; provide services to those affected by Gender-Based Violence (GBV); Explosive Remnants of War (ERW); and seek to prevent forcible transfers of populations in occupied territory. While the primary responsibility lies with the occupying power, this objective also addresses other duty-bearers including the Palestinian authorities, third states and non-state actors. Mainstreaming protection through all the work of the clusters is also a key component of this objective, ensuring that assistance is targeted and delivered to the acutely vulnerable, with respect for safety and dignity.



2

Ensure acutely-vulnerable Palestinians under occupation in the Gaza Strip and the West Bank have access to essential services

Where the occupying power fails to provide for the wellbeing of the population of the occupied territory it is incumbent on humanitarian actors to do so. Many Palestinians in Gaza, Area C, and East Jerusalem are highly vulnerable and need improved access to basic services, including education, health, WASH and adequate shelter. In Gaza, the blockade, recurrent outbreaks of hostilities and the internal Palestinian political divide have contributed to a serious deterioration in basic services.

Interventions under this objective will ensure services are provided to the acutely vulnerable, while continuing to advocate for the need for the occupying power to meet its responsibilities in accordance with IHL. In Gaza, those targeted will include those most affected by the 2014 conflict, and communities that the Vulnerability Profile and other assessments have identified as having the least access to services. In the West Bank, those targeted include people living in Area C and East Jerusalem, including people affected or at risk of demolitions and settler violence, and refugees living outside camps. Across the oPt, clusters have identified particular groups such as people with disabilities, the elderly, widows, children, and female-headed households as high priorities under this objective.



3

Strengthen the ability of acutely-vulnerable Palestinian households to cope with protracted threats and shocks

As a result of the prolonged nature of the occupation, including the blockade on Gaza now entering its tenth year, and three outbreaks of hostilities in Gaza, the resilience of Palestinians under occupation is under threat. Palestinian households are struggling to cope with prolonged stresses to their livelihoods. These prolonged stresses have also left Palestinians less able to cope with sudden shocks such as spikes in conflict in Gaza, demolitions in the West Bank, and natural hazards, such as winter storms and potentially much more devastating ones, such as earthquakes.

Interventions under this objective include food and cash assistance to prevent a further deterioration in food security (most acute in Gaza); promoting basic livelihoods, resilience, and safety nets; measures that seek to reduce the risk of displacement in Area C and East Jerusalem; and transitional solutions to conflict-displaced IDPs in Gaza. Provision of basic trauma training for communities so they are able to stabilize those injured during a conflict until appropriate medical care arrives on scene. This is known as the 'golden hour' and it is often the most crucial time in preventing a long-term disability or morbidity. Psycho-social assistance and protection interventions for children exposed to prolonged conflict-related stress are also relevant to this objective. Mainstreaming protection is particularly important to prevent negative coping mechanisms in response to shocks (e.g. early marriage and school dropout, or shifting burdens of care for the disabled, elderly and children solely onto women).

RESPONSE

STRATEGY

The humanitarian response in the oPt in 2017 will largely follow the same strategy as in 2016. Approximately 2.0 million Palestinians in the oPt, including 1.2 million refugees, continue to be in need of some form of humanitarian protection or assistance in the coming year. The 2017 Humanitarian Response Plan (HRP) will target the acutely vulnerable 1.6 million Palestinians, primarily in the Gaza Strip, Area C and East Jerusalem. Humanitarian assistance addresses needs and vulnerability primarily arising from the policies and practices of the occupation, including the blockade of Gaza. Those targeted for assistance are those most in need of protection, access to essential services, and interventions that will allow them to cope with prolonged occupation and repeated shocks. The strategy aims to protect the rights and to stabilize the situation of the protected population until longer-term development and political solutions are found.

The humanitarian strategy responds to needs arising primarily from the failure of the occupying power (the Government of Israel) to meet its obligations towards the occupied population in the oPt. The number of people in need of humanitarian assistance in the oPt is not decreasing substantially year by year – only more sustainable development and political solutions will achieve a substantial reduction in the humanitarian caseload. There remain, however, significant challenges to longer-term solutions; for example development is hindered by occupation-related constraints in Area C such as the discriminatory permit and planning regime and the repeated destruction of infrastructure in Gaza.

Geographically, the strategy is focused on areas of the oPt where the effects of the occupation and blockade take the greatest toll on Palestinians, i.e. Gaza, Area C, and East Jerusalem. East Jerusalem and Area C are also areas where the Palestinian Authority (PA) has least access and authority. In the case of UNRWA, its mandate extends across the whole of the oPt, including in Areas A and B

Identifying vulnerability

The 2017 Humanitarian Needs Overview (HNO) has identified two million Palestinians in need of humanitarian assistance in the oPt. The identification of who to target in the 2017 HRP follows the improved approach since 2016 of defining vulnerability and acutely vulnerable groups in the oPt, based on their geographic location, status, gender, protection risks and severity of needs. Each cluster has identified the acutely vulnerable groups and areas for assistance based on a “Vulnerability Profile Plus” assessment,⁵ IDP re-registration and re-profiling survey and numerous cluster data sources and studies. For each cluster, the definition of who is acutely vulnerable varies. For example, health partners target groups with a particularly vulnerable health status such as pregnant women, neonates and children under five without access

to regular health facilities; whereas shelter actors focus on vulnerable households such as the abject poor, large families, and female-headed households.

Making protection central to the strategy

Recognising that the situation in the oPt is effectively a chronic protection crisis, protection concerns continue to be the primary drivers of humanitarian need and inform every cluster's response plan.

Cluster responses are guided by the need to ensure there is full respect for the rights of Palestinians in accordance with international law. Protection is mainstreamed throughout interventions in the HRP through protection-focused or protection-sensitive programming and advocacy efforts that call for respect for IHL and IHRL and accountability for violations.

Building partnerships to decrease the humanitarian caseload and support transition

By its nature, humanitarian assistance should only be temporary. The oPt humanitarian strategy, therefore, continues to promote greater strategic and operational coherence with development actors, which should eventually allow an exit strategy for humanitarians and a move towards more sustainable solutions, provided that political and development solutions are found. The HRP is not intended to compete with or replace the existing plans of the Government of the State of Palestine. Welcome initiatives such as the government's Detailed Needs Assessment in Gaza have helped promote more strategic coherence, while the government's important work in areas such as emergency preparedness need to be strengthened. HRP interventions are coordinated with national efforts to avoid duplication and encourage complementarity.

5. For further information, please consult <http://data.ochaopt.org/vpp.aspx>

In addition, there are other important humanitarian and development actors operating outside the remit of the HRP, such as the International Committee of the Red Cross (ICRC), Palestine Red Crescent Society (PRCS), Gulf and Islamic charities, NGOs, and the regular programmes of UNRWA. Where relevant, the Humanitarian Country Team (HCT) and clusters will continue efforts to bring some of these actors into the plan. Where this is not desirable or possible, the HCT will better align its efforts with the activities of non-HRP actors, in order to reach as many people in need as possible.

Prioritized approach

Given that donors have limited resources to respond to all HRP interventions, the HCT has undertaken a prioritization exercise to identify what activities need to be funded first. The HRP process involves a robust vetting of projects by the clusters, to ensure that only critical humanitarian activities are included, and thus it should be noted that all HRP interventions are considered important and should be funded. Nevertheless, 35 per cent of the interventions in this document have been identified as “Top Priority” projects by the HCT, to help guide donors to where limited resources should be allocated first. These top priority interventions were identified using a combination of global prioritization criteria (i.e. interventions that are considered lifesaving, time critical or critically enabling) and the oPt context-specific criteria, such as interventions that focus on communities at imminent risk of displacement, or particularly vulnerable demographic groups such as children and youth in East Jerusalem.

Cross-cutting themes

In addition to the three strategic objectives that guide the response in 2017, there are four key cross-cutting areas of work which are mainstreamed throughout the three objectives and all the cluster strategies to help deliver a more targeted response to the needs of vulnerable Palestinians, while also paving the way for more sustainability.

1. Gender

The HNO defines specific gender-differentiated needs that affect the lives of men, women, boys and girls in oPt. Responding to those needs will rely on the continued efforts by humanitarian partners to adopt a gender sensitive approach to ensure the protection of all members of the affected population and to guarantee the effective and equitable delivery of humanitarian assistance. A range of measures has been identified to facilitate progress towards achieving this aim. Firstly, identifying and responding to the differentiated impact of the protection crisis in the oPt on men, women, boys and girls is increasingly based on understanding the structural and contextual drivers of vulnerability which have consequences for the affected population in terms of their humanitarian needs, their access to services and resources, their exposure

to violence, discrimination and denial of their rights. Gender analysis recognizes gender inequality to be one of those drivers of vulnerability and unveils the less visible aspects of vulnerability, such as women’s unpaid and unrecognized contribution to livelihoods and in agriculture, as a key driver of food insecurity; the absence of state protection and services to deal with violations faced by women and children in the private sphere as a main driver of GBV; and the socially prescribed roles and values that limit accessibility to basic rights and lead to negative coping mechanisms, impacting adolescent boys and girls, as a result of child labour and early marriage among girls.

The humanitarian response in the oPt seeks to ensure that humanitarian assistance is delivered without bias, and with a view to alleviating existing inequalities and vulnerabilities. Mainstreaming gender in the humanitarian response will be reflected in the way in which humanitarian assistance to households is delivered, while paying attention to intra-household dynamics. It will be evident in the introduction of new responses that are primarily targeted to addressing gender-based vulnerabilities and removing barriers to accessing humanitarian assistance through prioritizing interventions dealing with GBV, women’s property rights and family reunification and residency rights. It will be reflected in the design of assistance eligibility criteria that do not discriminate against women who may not have access to resources or voice, such as women victims of GBV, divorced and widowed women, people with disabilities, and adolescents. It will be evident in monitoring direct (rather than indirect) beneficiaries of humanitarian assistance by sex, when applicable. Finally, it will be evident in increased partnerships with local partners and women’s organizations in implementing humanitarian interventions and assessing needs. A gender sensitive approach emphasizes the value of tapping the full potential of Palestinian women and youth to build resilient individuals, households and communities.

2. Community engagement

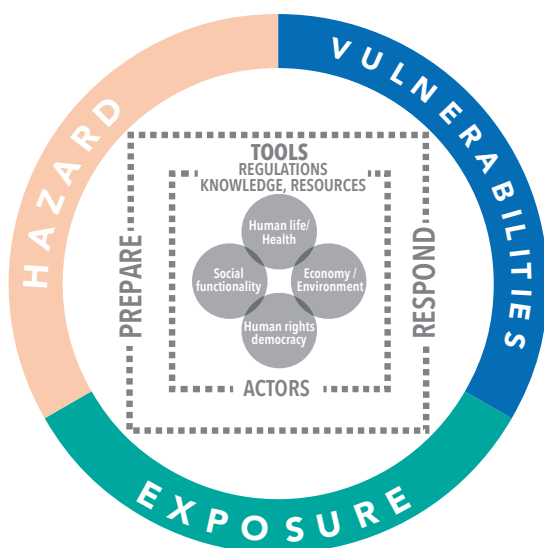
Community engagement is essential to enhance accountability to affected populations (AAP) and improve the quality and effectiveness of humanitarian assistance, in accordance with the Inter-Agency Standing Committee’s commitments to promoting greater accountability towards affected populations. Due to the protracted nature of the crisis and an active civil society, continuous engagement with affected communities is central to humanitarian planning and response in the oPt. A wide-range of channels throughout the oPt are used by humanitarian partners to provide communities with information, collect feedback and ensure participation in decision-making processes. These include regular face-to-face interactions, direct consultations with civil society actors or information provision through local media. Community engagement still needs to be further strengthened, systematized and streamlined throughout the humanitarian programme cycle, using accessible channels.

In order to support system-wide accountability, an inter-agency collective mechanism will be considered by the Inter-Cluster Coordination Group (ICCG) so that affected people have access to accurate and timely information and are able to provide feedback more systematically to influence the strategic direction of the humanitarian response. A common approach aligned with the Core Humanitarian Standard will ensure that the overall response is better informed by the views of affected people; humanitarian responders are held more to account by them and act on their feedback; and that more communities have the information and access to appropriate communication channels they need to make informed decisions and stay safe.

3. Disaster Risk Management (DRM)

The conditions for Disaster Risk Management (DRM) in oPt are multi-faceted, with number of complex, and different, legal, security and access aspects contributing to a complex environment. In order to contribute to enhanced DRM the humanitarian community will need to take a joint and coordinated approach in the oPt, working on addressing issues at different levels. The core of this is the response strategy's focus on addressing emergency humanitarian response through the enhanced ability of individuals, communities, organizations and authorities to anticipate, respond to, and recover from the impacts of likely, imminent or current shocks, as part of the separate Cluster response plans.

DISASTER RESPONSE MECHANISM



Given the impact of access restrictions in the oPt, closer cooperation and coordination in emergency preparedness and response with local partners will be pursued, so that the HRP will more effectively protect people and communities, strengthening their ability to cope and respond to shocks and enhancing their resilience through local response. Disaster preparedness and emergency response systems at local and community levels will be supported through activities to

enhance community awareness and preparedness, including by training volunteers, awareness raising activities, and supporting women and youth groups and/or local responders.

One key area within the humanitarian community will be the common work on the broad spectrum of preparation actions related to humanitarian Disaster Response Preparedness (DRP), which includes key processes such as inter-agency and inter-cluster contingency planning, joint assessment preparedness and logistical and operational preparedness.

Another joint area of work will be the development and agreement of internal coordination structures among humanitarian actors, covering both the national and local levels. An additional approach is the joint efforts of humanitarian actors to address emergency and disaster preparedness through the development and testing of relevant coordination mechanisms at the national and local levels – both Gaza and the West Bank – for possible future emergencies. Developing and testing the coordination mechanisms will ensure a clear understanding of roles and responsibilities in terms of coordination, communication and response.

Efforts will also be made to further explain and link these modalities to the relevant Israeli and Palestinian civil and military authorities, and develop closer and more effective coordination with their respective coordination and response structures at appropriate levels. The humanitarian community will also try to contribute to enhanced DRP and DRM coordination and cooperation between the relevant Israeli and Palestinian emergency response authorities. Regarding international aspects of DRM, including international response to local emergencies, efforts will support cooperation between the national authorities and other national DRM authorities in the region, on issues such as joint assistance protocols, response coordination and exercises.

Finally, the humanitarian community will take an active part in contributing to the development of a more comprehensive Palestinian DRM system. In addition to the already ongoing partnerships and cooperation at the national and local levels with Palestinian authorities and civil society - after the establishment of a national structure managed by the Prime Minister's office, and development of new DRM legislation – this will focus on the enrichment of key steps such as the development of national DRM data, a national risk and vulnerability assessment, and a first national DRM strategy.

4. Paving the way for more sustainable solutions (transition)

Promoting transitions to sustainable recovery and resilience cuts across the three strategic objectives and informs how relevant activities are delivered. Humanitarian action, while necessary, is not a substitute for the development and political action needed to address the underlying causes of humanitarian vulnerability in the oPt. Only more sustainable solutions beyond the humanitarian 'toolbox' will bring about the changes needed to address the underlying causes of need, and substantially decrease the humanitarian caseload. Humanitarian efforts should support, hasten and not

undermine the possibility for more sustainable solutions. To promote sustainability, humanitarian actors continue to build partnerships with development actors, national authorities, the private sector and communities, all of whom are better placed to find longer term solutions.

To this end, a few specific clusters – Education and WASH – have already been working with the relevant line ministries in order to hand over as much of their respective cluster coordinating role and actual interventions as possible. Nevertheless, the transition of cluster coordination functions is ongoing with the recognition that given the protracted and unique context of the oPt, the trajectory for full transition or even deactivation of clusters is not likely to be the same as in other country contexts. With the potential for renewed cycles of conflict, and with access restrictions to Area C, East Jerusalem and Gaza, the cluster system must remain operational in those areas and be ready to scale up as required.

Humanitarian actors will continue to ensure that their efforts promote strategic and operational coherence with other frameworks, such as the Palestinian Government's Recovery and Reconstruction Plan for Gaza. Humanitarian actors will also continue to advocate for an end to the root causes of humanitarian need including the occupation, blockade and the Gaza-Ramallah political divide, and work to build the capacities of national institutions and communities.

One of the outcomes of the World Humanitarian Summit held in Istanbul in 2016 was the "Grand Bargain – A Shared Commitment to Better Serve People in Need", an agreement which was endorsed by 15 of the largest humanitarian donors and 15 of the largest humanitarian aid organizations. In the oPt, a number of these commitments are already implemented or well underway. oPt has undertaken multiple efforts to implement some of the key commitments of the Grand Bargain.

Enhanced engagement with national and local actors

As a part of the Grand Bargain, donors and aid organizations committed to increasing support for the institutional capacities of local and national responders, including through preparedness, response and coordination capacities. In the oPt, this commitment is addressed through continued engagement with the local Palestinian authorities on disaster risk management (DRM), as well as working with the relevant authorities which have transitioned to taking over some of the cluster coordination functions (Education and WASH, in particular). *(More information about both efforts is included under the Response Strategy section).* In addition, increasing the access of local civil society to humanitarian financing continues to be a priority for the UN-led country-based pooled fund (CBPF), the oPt Humanitarian Fund. *(More information on the Humanitarian Fund can be found under the Operational Capacity section.)*

Improve joint and impartial needs assessments

The importance of coordinated quality humanitarian needs assessments as the basis for strategic decision-making on the improvement of joint and impartial needs assessments. The 2017 oPt HNO provides a comprehensive overview of the overall situation and needs in the oPt and provides evidence of sectorial and joint analysis undertaken by the humanitarian community. This lays the foundation for the humanitarian community to formulate humanitarian priorities at the cluster and inter-sector level in the oPt 2017 HRP. Moreover, one of the criteria for a project's inclusion in the 2017 HRP is that it must be based on a relevant and recent needs assessment and target the vulnerable group(s) identified in the 2017 HNO. In addition to global prioritization criteria, oPt cluster-specific prioritization criteria were established to guide the vetting of projects, based on the needs analysis.

In order to ensure that humanitarian response in oPt is based on impartial, unbiased, comprehensive, context-sensitive, timely and up-to-date needs assessments, the humanitarian community works throughout the year through the inter-cluster Assessment and Information Management Working Group (AIMWG) to coordinate and streamline data collection, joint analysis, and information management across clusters. (More information about Information Management and the AIMWG can be found in the Coordination and Support Services (CSS) response plan section.) One of the specific commitments made under needs assessments in the Grand Bargain relates to risk and vulnerability analysis, which in the oPt is carried out through the Vulnerability Profile Project (VPP) on Palestinian Communities in Area C.

A participation revolution: include people receiving aid in making the decisions which affect their lives

The Grand Bargain emphasized the importance of community engagement - including the people affected by the crisis in the decisions of the humanitarian community - in order to ensure that response is relevant, timely, effective and efficient. This means that effective processes should be in place to ensure meaningful participation and feedback from affected populations. In the oPt, a wide range of channels and methods are already utilized by humanitarian partners to provide communities with information, collect feedback and ensure participation in decision-making. Nevertheless, in order to continue to strengthen community engagement, a stronger inter-agency collective mechanism is planned for community engagement in the coming year. *(More information about community engagement in oPt is included under the Response Strategy section.)*

Multi-year planning and funding

Increasing humanitarian multi-year planning and funding is also a commitment made in the Grand Bargain to lower administrative costs and trigger more responsive programming, particularly where humanitarian needs are protracted or recurrent. In early 2017, the humanitarian community in the oPt plans to conduct inter-agency and donor consultations, to begin a process of multi-year humanitarian programme cycle planning from 2018 onwards. Given the protracted nature of the oPt humanitarian context, and the HCT's strategic focus of the on strengthening resilience in the affected population, multi-year planning may become the most effective way to ensure longer-term humanitarian programme support as well as enhanced alignment between the humanitarian and development sectors.

Harmonize and simplify reporting requirements

Aid organizations and donors pledged to simplify and harmonize reporting requirements by end-2018, including by reducing the volume of reports, developing a common report structure and enhancing the quality of reporting. A new system, the Response Planning Module, was piloted in the oPt in 2016, as an innovative tool to harmonize reporting on the HRP by all partners and clusters. The humanitarian community

will continue with a similar monitoring framework as used to monitor the 2016 HRP, having reviewed and adjusted the indicators based on lessons learned. (*More information on reporting and monitoring is included in the Response Monitoring section.*)

Enhance engagement between humanitarian and development

The final commitment drawn up in the Grand Bargain document (# 10) is to enhance the engagement between the humanitarian and development sectors by working collaboratively across institutional boundaries on the basis of comparative advantages. This commitment is reflected in the overall HCT oPt, strategy, in that one of the strategic objectives of the HRP is strengthening the ability of acutely-vulnerable Palestinians to cope with protracted threats and shocks. In the protracted oPt context, strengthening the resilience of the vulnerable population necessarily involves strengthening programmatic links between humanitarian and development frameworks. The plan of the oPt humanitarian community to move towards multi-year planning as of 2018, is also conducive to enhanced engagement between humanitarian and development aid frameworks. A number of humanitarian agencies have also participated in a recent development of a new CCA and UNDAF in the oPt

OPERATIONAL

OPERATIONAL CAPACITY

National and local capacity and response

Palestinian government

The Israeli occupation of the oPt, including the blockade of Gaza, has limited the capacity of the Government of the State of Palestine to deliver services in Area C and East Jerusalem and the Gaza Strip. The intra-Palestinian divide also remains a fundamental challenge, including for emergency preparedness and response capacity. To date, there has been little progress in the Government's efforts to integrate the administrative, legal and financial systems and security services of Gaza and the West Bank. The reconstruction of the Gaza Strip has also

been negatively impacted by political divisions, although the creation of a "National Office for the Reconstruction of the Gaza Strip", under the leadership of the Prime Minister represents an important step towards improving the national coherence. The non-payment of civil servants due to the PA fiscal crisis and intra-Palestinian divide remains a serious concern. The Government of Palestine however, has made progress on a number of other state-building objectives, in line with the Palestinian National Development Plan (PNDP) 2014-2016.

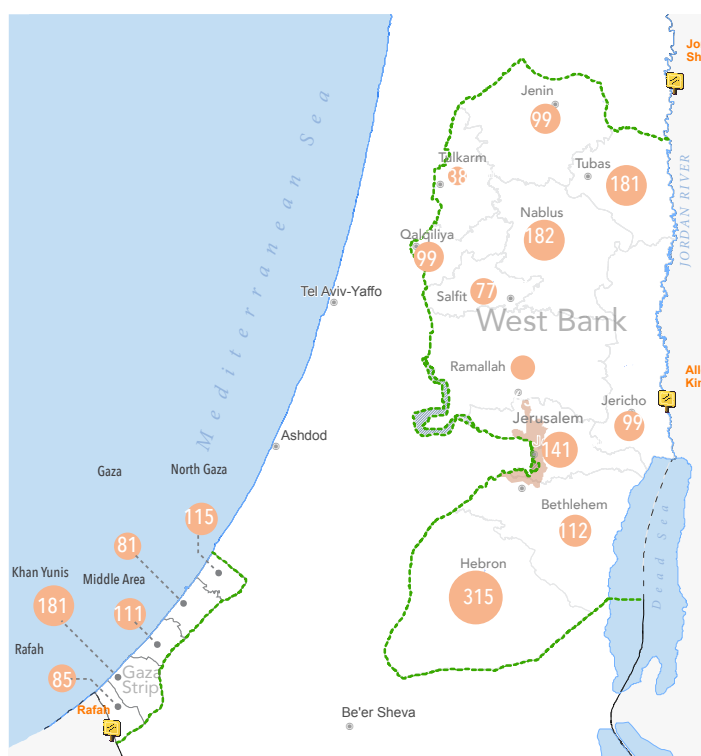
In addition to the PNDP, the Government launched a National Early Recovery and Reconstruction Plan for Gaza. Securing funding against the pledges made at the Cairo conference in 2014 has been slow, with USD 1.6 billion of the USD 3.5 billion pledged for Gaza materialized so far. However, if realised, implementation of the plan could potentially lead to a significant reduction in humanitarian needs in Gaza.

Over the last year, the Education and WASH clusters in the oPt have been working to transfer greater responsibility and ownership of cluster coordination functions and service delivery to the respective line ministries. While there have been significant achievements in this area, opportunities remain for continued technical support and international cooperation with the respective authorities.

Palestinian communities and civil society

Due to operational and access restrictions, Palestinian communities and civil society – and primary service providers such as national authorities and UNRWA – have acted as primary responders during emergencies. Palestinian institutions (including national and local level authorities, the private sector and notably the PRCS) have previously been at the forefront of the response to winter storms. As noted in the HRP Response Strategy, support for disaster preparedness and emergency response systems at local and community levels continues to be a priority, and will be done through enhancing community awareness and preparedness, including by training volunteers, awareness raising activities, and supporting women and youth groups and/or local responders.

ACTIVITIES PER GOVERNORATE



International capacity and response

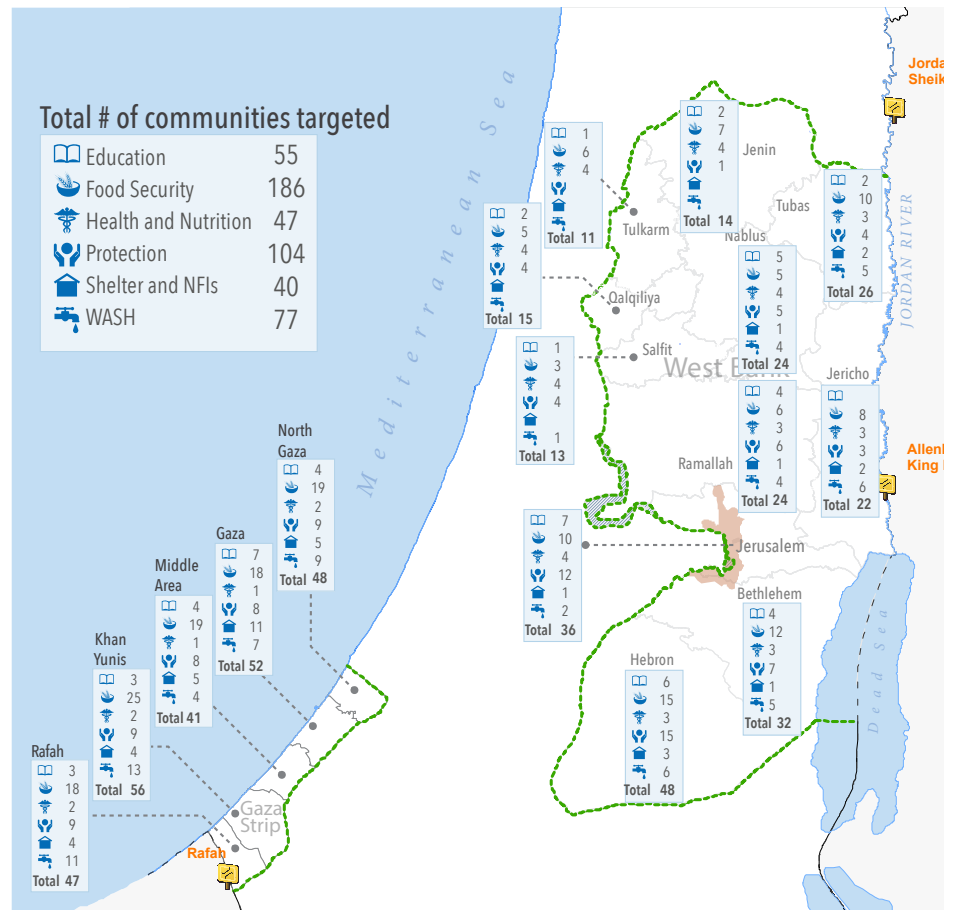
The HCT and clusters have a strong operational and protection presence across the oPt, with few gaps in geographical coverage. Despite restrictions on access to Area C, East Jerusalem and Gaza, in general, humanitarian organizations are able to deliver and reach populations in these areas, with some exceptions.

The HCT meets monthly and involves 32 actors engaged in the provision of humanitarian assistance and protection at the country level. In addition, there is a dedicated HCT Advocacy Working Group (AWG), and a taskforce on East Jerusalem that consists of humanitarian and development actors, as well as a number of other fora that bring together HCT members and donors on an ad hoc basis, such as the HCT Area C Taskforce, which discusses policy and operational considerations related to working in Area C.

OCHA facilitates the work of the ICCG, which in the oPt consists of six clusters/sectors (the Protection Cluster, Food Security Sector, Education Cluster, WASH Cluster, Health and Nutrition Cluster and Shelter Cluster). Each cluster coordinates the activities of its international and national partners; see 4Ws below:

OCHA also manages the country-based pooled fund (CBPF) – the oPt Humanitarian Fund – on behalf of the Humanitarian Coordinator (HC). This fund can be mobilized to support unforeseen emergencies, as well as underfunded priorities within the HRP. Between January and November 2016, the Humanitarian Fund allocated USD 8.1 million for unforeseen emergencies and underfunded projects in the HRP.⁶

OF COMMUNITIES TARGETED BY HRP PROJECTS GROUPED BY GOVERNORATE & CLUSTER



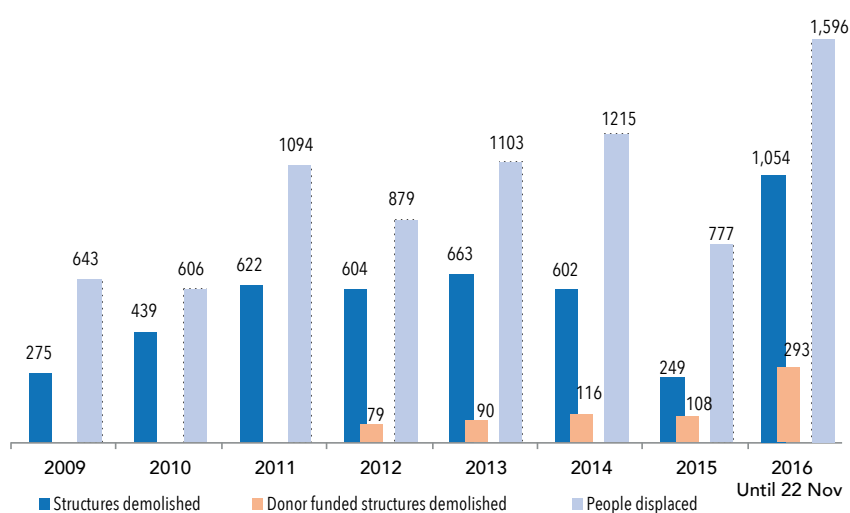
6. Find out more about the HF in oPt by visiting the oPt HF website: <http://www.ochaopt.org/content/opt-humanitarian-fund>

HUMANITARIAN

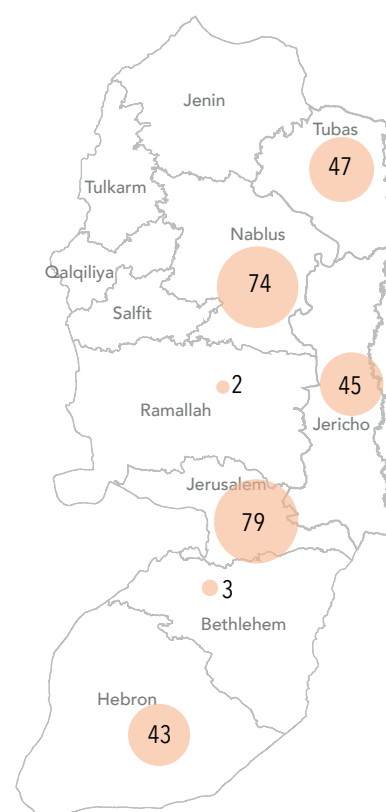
ACCESS

In 2016, humanitarian organizations continued to face a range of obstacles by the Israeli authorities offering the access of personnel and of materials needed for humanitarian projects, which hampered their ability to provide assistance and protection to Palestinians throughout the oPt. These obstacles include: physical and administrative restrictions on access and movement of (I)NGO and UN personnel, especially national employees, restrictions on the delivery of materials needed for humanitarian projects, and limitations on the implementation of projects that involve building, expanding or rehabilitating infrastructure in the Gaza Strip and Area C of the West Bank, and demolitions of housing or essential infrastructure. Humanitarian operations in Gaza were also impeded by restrictions imposed by, and the prohibition on contact with, the Hamas authorities, in addition to the prolonged closure of the Rafah crossing with Egypt.

OF DEMOLITIONS BY YEAR



OF DEMOLISHED DONOR FUNDED STRUCTURES - 1 JAN - 22 NOV 2016



Gaza Strip

Restrictions imposed by Israeli authorities on the movement of national staff of humanitarian agencies to and from Gaza intensified in 2016. In particular, the denial of permits for personnel who hold Gaza ID cards increased significantly, from three per cent in January to 52 per cent in October in the case of UN personnel. Over 300 UN and INGO permit applications were denied. In some cases, those who have been denied permits are prohibited from submitting another application for 12 months. Furthermore, UN and INGO national staff attempting to exit Gaza face further complications due to permit delays, interrogations and/or lengthy waiting times.

The de facto authorities in Gaza also continue to enforce access restrictions affecting humanitarian actors, including on the movement of staff and access to certain areas, and a permit regime applicable to national staff to exit and re-enter Gaza. The Rafah Crossing between Gaza and Egypt has also been closed by the Egyptian authorities since October 2014, except for a limited number of exceptional humanitarian cases, further impeding the access of humanitarian workers and assistance into Gaza.

Year	Permit Applications	Approved	Denied or Pending ⁵	% Approved
2016 (until 31 Oct)	1,196	721	475	60%
2015	1,441	1,112	329	77%
2014	1,408	1,051	357	75%
2013	1,083	873	210	81%
2012	784	656	128	84%
2011	812	585	227	72%

Humanitarian actors in Gaza, as elsewhere, work according to humanitarian principles of humanity, impartiality, independence, and neutrality to provide needs-based assistance to vulnerable populations. Few humanitarian operations around the world are as heavily restricted and monitored as in Gaza. In 2016, two organizations in the humanitarian community operating in Gaza were the subject of serious allegations by Israeli authorities concerning two staff members alleged to have misused their positions to divert humanitarian aid to Hamas. Humanitarian organizations operating in Gaza maintain strong due diligence and monitoring systems to ensure that aid reaches the affected populations as intended. Court proceedings of these two cases has not yet begun at the time of publication.

Delays at Checkpoints

Year	Incidents	Affected Staff	Hours lost
2016 (until 31 Oct)	161	983	1,072
2015	182	758	610
2014	178	1,483	1,859
2013	298	1,755	1,261
2012	365	2,040	1,517
2011	392	2,872	1,532

West Bank

In the West Bank, implementation of humanitarian projects was impeded by Israeli restrictions on access to East Jerusalem and limitations also on projects that involve building, expanding or rehabilitating infrastructure in Area C. Incidents at West Bank checkpoints continue to obstruct and delay the movement of personnel and goods, although such incidents have been declining in recent years.

Destruction/confiscation of donor-funded assistance

The implementation of humanitarian projects that involve the construction or rehabilitation of housing or essential infrastructure in Area C and East Jerusalem continued to be severely hampered by the permit regime applied by the Israeli authorities in these areas, as well as by the destruction or confiscation of donor-funded assistance. As of mid-October, demolition of donor-funded humanitarian assistance was 150 per cent higher than in all of 2016.

It is of great concern that humanitarian assistance delivered under humanitarian principles, is confiscated or destroyed. As the occupying power, Israel is required under international humanitarian law to meet the basic needs of the population. It is also required to facilitate and protect the rapid, unimpeded and impartial delivery of relief to civilians in need, and to assist personnel to the fullest extent practicable in carrying out their relief mission; relief items should not be requisitioned, confiscated, expropriated or interfered with in any way.

OF DEMOLISHED DONOR FUNDED STRUCTURES - 1 JAN - 22 NOV 2016

2016 (until 22 Nov)	293
2015	108
2014	116
2013	90
2012	79

SUMMARY OF

NEEDS, TARGETS & REQUIREMENTS

PEOPLE IN NEED⁷

243
projects



200

Projects designed to contribute significantly to gender equality

24

Projects is to advance gender equality

PEOPLE TARGETED



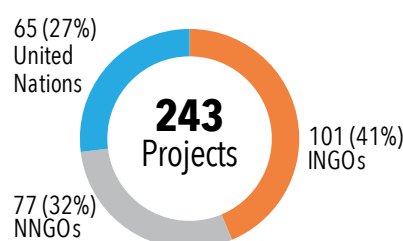
1.1 million people to be supported are in the Gaza Strip; the remaining 0.5 million are in the West Bank.

REQUIREMENTS (US\$)



2017 HRP requirements are 4% lower compared to 2016, due primarily to a significant reduction in the shelter request for Gaza.

PROJECTS BY TYPE OF APPEALING ORGANIZATION



	TOTAL		BREAKDOWN OF PEOPLE TARGETED					BY SEX & AGE	
	People in need	People targeted	People targeted Gaza	People targeted West Bank	UNRWA* Total	UNRWA target/Gaza	UNRWA target/West Bank	% female	% children, adult, elderly**
Education	521,569	417,225	351,263	65,962	184,260	184,260	NA	46%	95 5%
Food Security	1,650,000	1,570,000	1,650,000		1,010,000	912,000	98,000	49.1%	44.8 49.5 5.7%
Health/Nutrition	998,443	535,443	330,000	205,443	301,964	200,000	101,964	57%	58 39 3%
Shelter and NFIs	285,846	163,818	150,582	13,236	88,356	88,356	NA	49.1%	44.8 49.5 4.5%
WASH	1,461,800	465,151	327,408	137,743	NA	1,329,662	NA	49%	46.2 49.3 4.5%
Protection	1,848,665	1,630,192	1,030,912	600,000	NA	NA	33,766	49%	46.2 49.3 4.5%

*Target shown is for UNRWA beneficiaries in HRP projects only. UNRWA targets additional beneficiaries through other channels.

**Children (<18 years old), adult (18-59 years), elderly (>59 years)

7. Overall number of people in need was calculated by aggregating the highest cluster caseload by governorate in order to provide a conservative estimate while minimizing the margin of error by using estimates provided by several clusters. Clusters estimate of people in need are based on a variety of sources including cluster partner data and the VPP+.

RESPONSE

MONITORING

The oPt logframe consists of two levels: Strategic Objectives (outcomes) and Cluster Activities (outputs). All have related indicators, baselines and targets to measure progress, underpinned by mandatory monitoring by partners at the project level.

Monitoring progress towards the HCT's three strategic objectives

Response monitoring is an integral part of the humanitarian response. This year, the oPt HCT will continue with the framework designed last year, with alterations to some indicators. The design of the response monitoring framework ensures that each cluster's activity addresses at least one of the three country level strategic objectives in order to ensure better coherence between cluster plans and the HCT's overarching goals. Most cluster activities identify output level indicators that track contribution to the achievement of one strategic objective or more. Progress towards strategic objectives will be measured through a small number of outcome level indicators, designed in consultation with clusters and key agencies, who will support monitoring under the overall responsibility of the HCT. Financial inputs will be monitored by OCHA through the online Financial Tracking Service (FTS) platform, to which all partners participating in the HRP are obliged to report.

Cluster response monitoring frameworks

Each cluster has agreed upon a cluster monitoring framework comprising a small number of cluster activities to which progress will be measured through a number of output level indicators set by each cluster. Cluster activities are monitored by the ICCG. Indicators for the projects included as part of each cluster portfolio in turn contribute to these cluster level outputs. These projects are monitored by the individual members of the clusters.

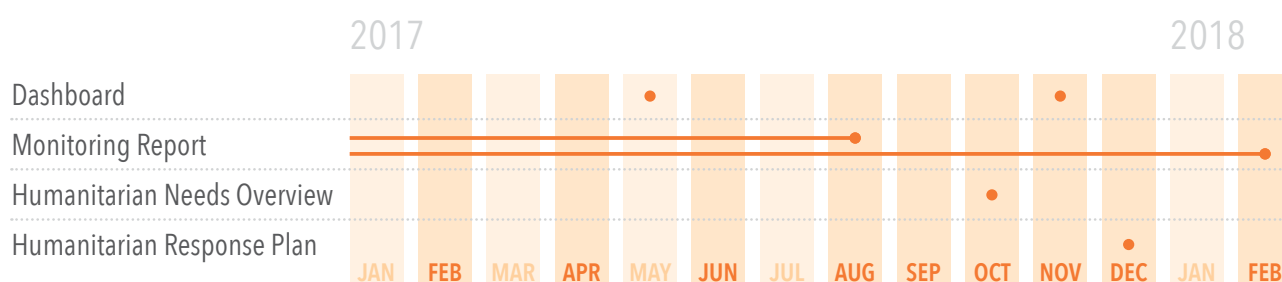
Gender

In order to ensure a gender equitable humanitarian response, the 2017 HRP outcome and output indicators identify sex and age disaggregated targets, and include specific indicators to address gender-based vulnerabilities. Applying such an approach across all clusters and activities is often constrained by the availability of sex- disaggregated data, as well as the difficulties associated with tracking the intra-household impact of household level assistance. Efforts to address those challenges will be pursued by the country team in order to improve availability of refined sex and age disaggregated data related to needs and direct beneficiaries. In some cases, clusters and partners will be encouraged to use monitoring tools that are tailored to assess the gender aspects of the response. In addition, specific indicators to monitor funding of gender focused projects and share of projects that have adequately mainstreamed gender will be tracked under the coordination objectives.

Community engagement/ accountability to affected populations (AAP)

OCHA has shared initial guidance on how to ensure that community engagement/ AAP is taken into account at different phases in the Humanitarian Programme Cycle (HPC), including specific guidance to partners. The ICCG workplan will include guidance for monitoring integration of AAP in project implementation mechanisms.

HUMANITARIAN PROGRAMME CYCLE TIMELINE



Monitoring data will be used to inform advocacy in regular HCT meetings on HRP progress with donors in order to highlight critical gaps. Monitoring data can also be used to highlight critical gaps that may benefit from pooled funding through the Humanitarian Pooled Fund.

Response Planning Module

The response planning module designed by OCHA Headquarters, which forms the first step in the wider development of new information services to support the HPC was piloted in the oPt this year. The tool is an essential component in the wider development of new information services to support the HPC and includes a monitoring module

Monitoring timetable

The HCT will produce a Periodic Monitoring Report at mid-year and two humanitarian dashboards at quarterly intervals. Monitoring data will be used to inform advocacy in regular HCT meetings on HRP progress with donors, in order to highlight critical gaps. Monitoring data can also be used to highlight critical gaps that may benefit from pooled funding through the Humanitarian Fund.

PART II: OPERATIONAL RESPONSE PLANS



Protection



Food Security



Shelter



Water, Sanitation & Hygiene (WASH)



Health and Nutrition



Education



Coordination

PROTECTION



PEOPLE IN NEED



PEOPLE TARGETED



REQUIREMENTS (US\$)



OF PARTNERS



22

KEY RESULTS

1 Increased respect for International Humanitarian Law and Human Rights Law and Accountability for Violations

2 Prevent and mitigate the effects of the Occupation and conflict-related violence

3 GBV victims and survivors have access to multi-sectoral responses

Response priorities

In 2017 there remains an urgent need to increase respect for International Humanitarian Law (IHL) and International Human Rights Law (HRL) and strengthen accountability for violations. These violations are a major driver of humanitarian need across the oPt. Related to this is the need to prevent and mitigate the impact of violations.

The protection cluster will address this through:

- Monitoring and documentation, advocacy and interventions with Israeli authorities and other relevant actors.
- Provision of legal aid
- Provision of protective presence
- Provision of child protection services, including individual case management
- Provision of structured psychosocial support for children and adults
- Awareness-raising on the risks of explosive remnants of war (ERWs) including with children
- Support for survivors of gender-based violence (GBV) to receive a multi-sectoral response

Implementation

Monitoring and documentation will focus on IHL and IHRL violations and conflict-related violence. In Gaza there will be a particular focus on the ARA and in the West Bank, on monitoring forcible transfer risk in East Jerusalem, H2 and Area C. Partners are committed to strengthening monitoring of protection issues related to human rights defenders as an emerging area of concern. Partners will undertake monitoring and analysis of settlement related activities (beyond incidents of settler violence) including retroactive legalization of outposts under Israeli law,⁸ land take over through declaration of state land, expropriation for nature reserves etc. with a view to understanding the links between these practices and their effect on Palestinians. Child Protection will continue to monitor grave violations against children under the MRM. Initiatives that enhance accountability for violations of HRL and IHL including advocacy are central to the Protection Cluster response.

Legal counselling and representation will prioritize victims seeking accountability for IHL and IHRL violations, including violations of the right to life and physical integrity by Israeli security forces and settlers, those at risk of demolitions, forced evictions and displacement, those at risk of revocation of residency rights, IDPs in Gaza including

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS					BY SEX & AGE	
	Gaza	West Bank	UNRWA Total	UNRWA Gaza	UNRWA West Bank	% female	% children, adult, elderly*
PEOPLE IN NEED	1,030,912	817,753				49%	46.2 49.3 4.5%
PEOPLE TARGETED	1,030,912	600,000	NA	NA	33,766	49%	46.2 49.3 4.5%
FINANCIAL REQUIREMENTS	\$54M					*Children (<18 years old), adult (18-59 years), elderly (>59 years)	

UNRWA will be providing its services to more than 800,000 indirect and direct refugees in need of protection in the West Bank through: its Community mental health program (for a total of 10,377 Bedouin refugees); through its Emergency Operations Support (West Bank) project to ensure access and neutrality is safeguarded, and respect for human rights and IHL is promoted, with violations documented, contributing to protection of refugees and UNRWA staff from the immediate effect of the conflict/occupation (for a total of 800,637); and, project aimed at Palestine refugees affected by military or law enforcement operations by ISF; Israeli settlers; at risk of forced displacement in the following emblematic communities: refugee camps, Barrier-affected communities, Area C Bedouin/herder communities, communities at risk of settler violence and expansion, and East Jerusalem (a total of 23,389). However, it was decided not to include the number of refugees supported through Emergency Operations Support into the Protection calculation for their total people targeted since this would over-inflate the overall number of people targeted for the Protection cluster. However, the whole refugee population is noted and considered as targeted people through Emergency Operations Support within the Protection cluster.

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8. While since mid-2015 there has been a sharp decrease in the number of incidents recorded, in part due to preventive measures adopted by the Israeli authorities, concerns remain regarding lack of accountability for perpetrators. The monthly average of settler attacks resulting in Palestinian casualties or damage to their property declined from 27 in 2014, to 8 in 2016 (OCHA's Protection of Civilians Database).

widows facing housing, land and property issues (HLP), people affected by access restrictions in Gaza and the West Bank, children arrested and detained and survivors of GBV. Legal work related to HLP will coordinate closely with other sectors providing response such as shelter and WASH. The LTF will strengthen its gender analysis and programming to ensure equal access to legal support and awareness raising for men and women.

The cluster will provide protective presence and accompaniment of individuals (including children) in the West Bank in communities exposed to settler violence and presence of Israeli forces especially in H2, in communities at risk of mass demolitions, and assist farming communities during the annual olive harvest.

The provision of structured psychosocial response and child protection including individual case management will be carried out in close coordination with the other clusters. Structured psychosocial support activities for children and adults include age and gender sensitive group and individual counselling, specialized mental health services, psychological first aid and other resilience building group activities (sports, expressive arts and mind and body sessions). Child protection services include child/ parent interaction programs, life-skills programs, youth-led protection initiatives and programs aimed at supporting children in alternative care centers who have been separated from their caregivers. Child protection actors will provide individual case management services to the acutely vulnerable children including those who are displaced/living in insecure shelter situations, are impacted by demolitions, have suffered life-changing injuries (including those due to ERW) or lost one or both parents as a result of the last escalation of conflict in Gaza. Partners in the West Bank will continue to strengthen their ability to undertake rapid assessments in communities affected by critical incidents such as mass demolitions, settler violence or killings and injuries of children by the ISF. Greater emphasis will be given to mainstreaming disability in child protection responses in both WB and Gaza.

In order to address the specific needs of survivors of GBV within the humanitarian context, the cluster will support awareness raising activities, enhance the provision of multi-sectoral services including psychosocial support and legal aid and support access to emergency medical care with particular attention to ensuring referral to safe and confidential specialized services. GBV actors will work closely with the health cluster to maximize the opportunities provided by health services to act as entry points for detection and referral of GBV. Efforts will continue to strengthen the data collection and analysis of GBV trends in Gaza and the WB and understand barriers to accessing available services. This work will complement the work of development actors to improve the quality and reach of services that respond to GBV.

The cluster will continue its activities focused on Gaza to determine the extent of Explosive Remnants of War (ERW) contamination and risk (survey), recovery and removal of ERW (clearance) and provide information to mitigate the risks posed by ERW exposure (risk education) including targeted

interventions to children. Humanitarians coordinate with local authorities (Gaza EOD police) and provide specialized support especially in respect risk surveys and complex clearance operations. ERW actors work closely with other clusters and development actors to enable reconstruction, rehabilitation and recovery of livelihoods as well as ERW victims' assistance.

People to be supported

Although all Palestinians in the oPt are affected by the lack of respect for IHL and IHRL, the protection cluster response will focus on those who are acutely vulnerable. In Gaza this includes those who live or work in the ARA, those still in need of child protection, legal and psychosocial support related to the most recent escalation of hostilities and blockade, and children and adults exposed to ERW as a result of where they live, work or play. In the West Bank including East Jerusalem, this focus is on communities at risk of forcible transfer, those affected by demolitions and settler violence and communities including H2 and refugee camps which see high rates of ISF-related injuries and fatalities. Children in need of individual case management will be prioritized in both Gaza and the West Bank; this includes those with who have undergone life-changing events as a result of the hostilities and blockade in Gaza or violence in the West Bank, those who have been arrested and detained, those who require support to stay in school, access specialized services (health, legal, psychosocial) and those at risk of abuse and neglect. GBV survivors and those who are most likely to have initial contacts with GBV survivors, especially health staff will also be the targeted by the cluster.

Prioritization criteria

The Protection cluster assigns top priority to projects which are lifesaving, critically enabling, time-critical or whose failure to be funded would significantly impact the cluster's ability to achieve its key targets. Specifically for projects proposing psychosocial support the following criteria was applied by geography:

- In Gaza, priority will be given to projects providing specialized mental health and psychosocial support services and structured child protection activities in the acutely vulnerable areas identified by the Child protection/MHPSS working groups. Those include areas with high IDP population, ARA and marginalized areas with limited access to services.
- In the West Bank priority will be given to projects which provide structured child protection services and psychosocial support services including legal assistance and case management support through a coordinated response, reaching the worst affected areas particularly Area C, Hebron, and East Jerusalem.

PEOPLE IN NEED



PEOPLE TARGETED



REQUIREMENTS (US\$)



OF PARTNERS



KEY RESULTS

1 the resilience and the productive capacity of vulnerable households are restored/enhanced and livelihoods protected.

2 Households suffering from lack of access to food are able to meet their basic food needs.

3 Improved coordination for preparedness and advocacy, activities implementation and information sharing.

FOOD SECURITY



Response priorities

Food insecurity in the oPt is driven by the protracted occupation, repeated conflicts and shocks, stringent restrictions on movement of people and goods, limited access to natural resources and productive activities. This has resulted in reduced economic opportunities, high unemployment and low household incomes. The coping capacity of households has been eroded to the point that their resilience to both rapid and slow onset shocks is deeply compromised. Against this adverse context, the Food Security Sector's (FSS) strategy aims at addressing food insecurity by:

- Restoring and enhancing the productive capacity of vulnerable and affected households, to protect their livelihoods and assets, and increase their resilience.
- Meeting basic food needs of households that are suffering from a lack of access to food and micronutrient deficiencies, while reinforcing Palestine's economy and food production by sourcing food locally, and by adopting other ad-hoc cash transfer mechanisms.
- Improving coordination among FSS partners, including line ministries at central and local level, and enhancing information sharing for preparedness, advocacy, and increased synergies in implementation.

Implementation

Given the limitations imposed by the occupation and related violations of IHL, the response to food insecurity in the oPt has to diversify its interventions in order to maximise the impact on affected households of food consumers and producers.

The lack of political progress suggests that the driving factors of food insecurity are likely to persist. Therefore responses will focus on supporting the eroded coping capacities of affected households with particular attention to gender based vulnerabilities. FSS partners will work on protecting and promoting the livelihoods of rural male and female farmers, herders, breeders, fishers and urban and peri-urban producers in order to decrease their aid dependence and promote resilience, increasing their capacity to cope and adapt to human-made and natural shocks. Response to demolitions in Area C of the West Bank and preservation of livelihood assets are key activities to be carried out in coordination with local institutions.

As an immediate response to food insecurity and to also help preserve a viable environment for livelihood support interventions, food commodities and cash transfers such as food vouchers, cash-for-work and conditional and unconditional cash assistance will be provided

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS					BY SEX & AGE	
	Gaza	West Bank	UNRWA Total	UNRWA Gaza	UNRWA West Bank	% female	% children, adult, elderly**
PEOPLE IN NEED	1,650,000					49.10%	49.1 44.8 5.7%
PEOPLE TARGETED	1,650,000		1,010,000	912,000	98,000	49.10%	49.1 44.8 5.7%
FINANCIAL REQUIREMENTS	\$299M					**Children (<18 years old), adult (18-59 years), elderly (>59 years)	

The FSS has identified 1.4 million people targeted as an estimation from targets of major projects. Target per governorate is also an estimation based on the same rationale, as FSS partners respond to food insecurity using a variety of modalities throughout the country.

CONTACT

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for food-insecure people. The use of vouchers ensure that food insecure households have access to nutritious locally produced foods, protect local food systems and support the Palestinian economy. Conditional cash assistance will enable food insecure households to protect household and community assets, necessary to generate income and preserve resilience.

The FSS will also continue to focus on enhancing emergency preparedness in close collaboration with relevant national authorities. This includes the improvement and standardisation of tools to analyse, prioritize and target responses to food security vulnerabilities. Current FSS assessment framework and tools allow appraisal of beneficiaries' backgrounds, profiles, age and sex and identification of the acutely vulnerable individuals and communities such as widows/widowers, female-headed households, single male-headed households, people living with disabilities, the elderly, and refugees, especially those living inside camps. Such refined analysis can help mitigate factors that constrain resilience, and exacerbate vulnerability to food insecurity resulting from unemployment patterns, especially among women and young men, as well as the low economic participation of women.

Finally, the FSS response also supports advocacy initiatives focused on highlighting the impact of settler violence and demolitions of livelihoods assets on food insecurity, as well as on the rights to access natural resources and maintain assets. To the extent possible, FSS responses will make use of local capacities through involvement of concerned communities and with a view to restore assets with a direct social protection value, e.g. cash-for-work schemes, and indirectly.

The FSS will work in cooperation with line ministries, to jointly agree on modalities for building local capacities to shape a coordinated and inclusive environment, ensuring consistency among humanitarian responses and with related development interventions. This will be accompanied by continuous assessment of the opportunities to transfer coordination responsibilities to ministerial bodies, at the central and decentralised levels.

The sector supports capacity development of partners, including the PA in cross-cutting issues and food security data collection and needs analysis. This includes use of qualitative programming components such as protection in food security, Accountability to Affected Populations and gender mainstreaming, supported by delivering trainings for FSS partner staff.

Population to be supported

Of the 1.65 million food insecure people in the oPt, the FSS partners will target approximately 1.57 million severely or moderately food insecure people. UNRWA serves food insecure refugee-led households, while other partners, primarily WFP, serve non-refugee households; WFP partners with UNRWA in its cash and voucher assistance. FAO and a wide range of local and international NGOs will provide emergency agriculture based livelihoods assistance to less resilient refugees and non-refugees households in rural and peri-urban areas. In the West Bank the focus is also on households affected by demolitions of productive assets as a result of both the occupation and settler violence

The Ministry of Social Development (MoSD), which provides assistance to food insecure people through its social safety net programme, works in cooperation with non-governmental responders, and uses the same beneficiary selection criteria as WFP to target those under the Deep Poverty line using a Proxy Means Test Formula (PMTF) to help households living in extreme poverty to reach an acceptable standard of living. UNRWA also utilizes a PMTF as a targeting tool and provides food assistance to more than 134,000 chronically poor refugees across Palestine through its core funding. WFP, UNRWA, and MoSD work in cooperation, assuring duplications are avoided. In addition, engagement among all FSS partners and line ministries is guaranteed through various interactions, from general meetings to the Technical Working Groups.

Prioritization criteria

All projects accepted in the FSS's portfolio for 2017 will propose a set of priority activities that have been agreed through a participatory process. As a result, a detailed set of guidelines was shared with implementing agencies ahead of the response planning process that included the type of activities that the sector agreed will be carried out in 2017. These will include, but not be limited to, rehabilitation of agricultural water facilities such as wells, springs, pools, carriers lines, water reservoirs, cisterns; land rehabilitation and seeds/forage cultivation; rehabilitation and restoration of agricultural roads, green houses, water networks and cash support, in addition to support direct access to food, by means of food in kind and food vouchers.

However, as with all other clusters the FSS has applied an additional filter to assign a "Top" and "Other" priority to each of the projects accepted in its portfolio for 2017:

"Top" priority:

- Projects with interventions considered "time critical" and "critically enabling".
- Projects with interventions to be carried out in Area C in the West Bank, particularly targeting communities at risk of forcible transfer or displacement or subject to demolitions and settler violence. No specific geographical criteria were applied to the Gaza Strip.
- Projects with interventions to be carried out in the West Bank and Gaza Strip aimed at protecting and promoting livelihoods for vulnerable groups and severely food insecure people such as Bedouins, small farmers/herders, and fishers.

"Other" priority:

- While the sector considers food assistance projects as necessary to contribute to the food security of its beneficiaries, the sector agreed to assign top priority to projects that face more difficulty in securing funds, contrary to what normally is the case for food assistance projects.
- Projects that have been identified as not fully meeting the criteria of "time critical" and "critically enabling".



PEOPLE IN NEED

0.28M

PEOPLE TARGETED

0.16M

REQUIREMENTS (US\$)

104M

OF PARTNERS

15

KEY RESULTS

1 . Protect acutely-vulnerable groups through repair and upgrading of substandard or damaged shelters

2 . Ensure emergency and transitional shelter or NFI response to conflict, demolition or natural hazards

3 . Enhance contingency planning and preparedness measures for timely and effective response to emergencies

SHELTER & NFI

Response priorities

An estimated 286,000 people in Gaza and the West Bank including East Jerusalem and H2 area in Hebron are in need of emergency and early recovery shelter support and essential non-food items (NFIs). The shelter response plan addresses the needs of the acutely vulnerable who have been displaced or are at risk of displacement as a result of manmade and natural disaster. Priorities for the Shelter Cluster are:

In Gaza:

- Ensuring continued access to shelter for 10,300 IDP families and improving standards for those living in inadequate makeshift or temporary accommodation, while promoting accountability and supportive measures that facilitate an end to displacement.
- Improving conditions in 1,750 substandard and 5,020 damaged properties through repairs and upgrading that mitigates against severe weather and ensures minimum shelter standards.
- Preparedness and contingency planning measures for large-scale response through adaptation of designated buildings for use as emergency shelters.

In Area C and East Jerusalem:

- Coordinated response to demolition and consolidation of inadequate shelters and winterization assistance for 1,000 vulnerable households that ensures access to safe, dignified and protective shelter and reduces the likelihood of displacement.
- Increasing household resilience and self-recovery capacity through community-based preparedness.
- Maintaining emergency response capacity across Palestine while supporting national stakeholders in contingency planning, emergency shelter/NFIs items stockpiling and emergency management.

Implementation

The cluster will use a combination of cash assistance, provision of direct shelter support and NFIs/voucher distributions to meet the needs of 10,300 IDP families in Gaza, and provide conditional cash, materials and training to address shelter repair and upgrading needs of 7,740 households across Palestine. Household resilience and self-recovery will be promoted through community-based training sessions to households at risk as well as distribution of vouchers or NFIs to households in need

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BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS					BY SEX & AGE	
	Gaza	West Bank	UNRWA Total	UNRWA Gaza	UNRWA West Bank	% female	% children, adult, elderly*
PEOPLE IN NEED	234,090	45,756				49.1%	44.8 49.5 5.7%
PEOPLE TARGETED	150,582	13,236	88,356	88,356	NA	49.1%	44.8 49.5 5.7%
FINANCIAL REQUIREMENTS	\$103M					*Children (<18 years old), adult (18-59 years), elderly (>59 years)	

of protection against displacement or response to weather extremes. Stockpiles will be maintained in accordance with an updated Contingency Plan and preparedness measures for Designated Emergency Shelters and, at a later stage, Collective Centres carried out in case of conflict escalations or natural disaster.

The cluster response also addresses barriers to reconstruction that would extend displacement through targeted support for Housing, Land and Property (HLP) concerns and seeks to overcome inadequate security of tenure, particularly for elderly, divorced and widowed female-headed households and People living with Disabilities (PWDs). Accountability to affected populations is fostered through information sharing projects and complaints mechanisms as well as through community involvement and participation in the different phases of project implementation. Gender needs analysis and protection mainstreaming are key drivers to maximize positive impact; partners will address gender needs of different groups through active beneficiaries' engagement at different phases, disaggregated beneficiary data and monitoring indicators in activity tracking data collection tools (4Ws). Local ownership is enhanced through interventions which enable and empower communities, foster positive coping mechanisms and encourage self-reliance by building on local skills and increasing the capacity of individuals and communities to withstand and mitigate multiple risks within the protracted crisis.

The cluster response plan includes coordination and engagement with government and PRCS, partnership with local NGOs and civil society, as well as integration with other Clusters in order to ensure coordinated and sustainable interventions. Cross sector coordination will be key with the Protection cluster on demolition prevention, risks analysis and response, the WASH cluster on ensuring coordinated WASH support to shelter interventions and with the IDP working group on adaptation of designated emergency shelters (DES) to integrate gender and protection considerations, as well as the Education cluster/ Ministry of Education (MoE) and UNRWA on the preparation of Designated Emergency Shelters /Collective Centres. In addition, strong linkages with development actors and government will be crucial to coordinating and monitoring the response in Gaza. In-depth analysis is also underway to strengthen response to gender needs in collaboration with UN Women. Although a significant proportion of the population in need have been affected by damage to their homes and are outstanding in need of assistance to repair, humanitarian actors will prioritize the most vulnerable, while the majority of this caseload will be referred to reconstruction actors. Gulf and other donors are investing heavily in the recovery and reconstruction needs, coordinated through the Ministry of Public Works and Housing and supported by the Shelter cluster.

The coordination work of the cluster related to emergency response and contingency stockpiles will also be supported by partners aligned with but not included in the HRP, particularly

ICRC, PRCS, Palestinian Civil Defence (PCD), UNRWA, the Ministry of Social Affairs and some INGOs with outside funding, to respond to the needs of up to 210,000 people. In addition, the cluster recognises community-based and religious organizations who also play a vital role in responding to shocks and will work to map and strengthen community-based mechanisms.

UNRWA carries out major re-housing schemes and reconstruction by mobilising distinct, often multi-year project funding outside of the annual emergency appeals. Additional repairs to refugee homes damaged by conflict will take place outside the HRP; the cluster response plan only includes priority needs and transitional solutions for refugees in Gaza. In the West Bank, the cluster will continue to coordinate closely with UNRWA to provide emergency response to refugees affected by demolitions.

Population to be supported

Cluster partners will use the Prevalent Vulnerability Index and Shelter Prioritization tool updated in 2016 and updates to IDP registration data alongside government databases to prioritize beneficiaries and target those most in need of assistance, including identification of vulnerable groups and families such as low-income or large families, the abject poor, those with disabled or elderly family members, marginalized female-headed households or families with multiple and layered vulnerabilities.

Prioritization criteria

For 2017, the Shelter cluster has assigned 'Top' priority to the following projects:

- West Bank: projects that focus on protecting safety and dignity and reduce the risk of displacement for vulnerable families due to exposure and harassment, with a particular focus on high risk communities in East Jerusalem, El, Hebron, Nablus and the Jordan Valley; as well as emergency response to demolitions
- Gaza: projects that provide appropriate temporary shelter solutions and protection for IDPs from harsh weather ; projects which ensure access to adequate shelter through upgrading for acutely-vulnerable households facing protection concerns due to substandard conditions ; emergency response and preparedness through adaptation of designated emergency shelters.

PEOPLE IN NEED



1.45M

PEOPLE TARGETED



0.5M

REQUIREMENTS (US\$)



37M

OF PARTNERS



16

KEY RESULTS

1 Ensure equitable access to basic WASH services in accordance with safety and dignity of the unserved, underserved and acutely vulnerable Palestinians under occupation in Gaza and the West Bank.

2 Strengthen WASH response capacity to cope with new and protracted emergencies, threats and shocks.

3 Increase national WASH sector governance and coordination capacity.

WATER, SANITATION AND HYGIENE (WASH)



Response priorities

Given the limitations on WASH infrastructural development imposed by the blockade and the occupation, 1.45 million people in Palestine (around 1.3 million people in the Gaza Strip and 150,000 people in the West Bank) are in need of humanitarian WASH assistance. The WASH cluster seeks to ensure equitable access to basic WASH services to the unserved, underserved, and acutely vulnerable Palestinians under occupation in Gaza and the West Bank. WASH interventions aim to respond to critical needs, strengthen coping capacities, while paving the way for more sustainable solutions by increasing national WASH sector governance and coordination capacity. As such, the cluster priorities include:

- Serving the basic WASH needs of the acutely vulnerable people affected by the 2014 conflict in Gaza; communities with the least access to services; people living in Area C of the West Bank affected by poor service, demolitions and settler violence; and vulnerable populations with disabilities, the elderly, widows, children, female-headed households.
- Ensuring basic WASH services in schools in particular need; damaged by the conflict in Gaza; or serving Area C populations; in coordination with the Education Cluster.

- Increasing the capacity of the Palestinian Water Authority (PWA), the focal agency for water in Palestine, to build its emergency response and Disaster Risk Reduction (DRR) capacity in WASH.

Implementation

The cluster plans to address the basic WASH needs of vulnerable communities and households in the Gaza Strip and Area C/East Jerusalem in the West Bank through a combination of minimal level of service provision involving targeted repairs / improvements to networks, repairs / construction of institutional or household facilities, alongside enabling mechanisms such as the distribution of water vouchers for targeted vulnerable people, and capacity building of service providers to ensure an adequate response. In addition, resources are being sought to allow for more durable solutions following larger-scale WASH demolitions which have frequently exceeded the emergency WASH support ensured by the ECHO-consortium.

Cluster partners work in close partnership with the PWA and the Coastal Municipalities Water Utility (CMWU) with regard to infrastructural projects to ensure complementarity with development plans. At the national level, given that a number of development interventions are a pre-requisite for sustainably serving the

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS					BY SEX & AGE	
	Gaza	West Bank	UNRWA Total	UNRWA Gaza	UNRWA West Bank	% female	% children, adult, elderly*
PEOPLE IN NEED	1,300,000	151,800				49%	46.2 49.3 4.5%
PEOPLE TARGETED	327,408	137,743	NA	1,329,662**	NA	49%	46.2 49.3 4.5%
FINANCIAL REQUIREMENTS	\$37M						

*Children (<18 years old), adult (18-59 years), elderly (>59 years)

** UNRWA will provide fuel for solid waste removal and water and sanitation facilities in Gaza and the total number of people who will benefit from this service includes direct and indirect beneficiaries. However, it was decided not to include this number into the WASH calculation for their total people targeted since this would over-inflate the overall number of people targeted for the WASH cluster.

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humanitarian constituency, efforts will continue to support the PWA in better integrating humanitarian and development WASH interventions in a context where such distinctions are difficult to uphold. To this end, projects included in this year's HRP will be explicitly incorporated within the PWAs strategy 2017-2022 covering those areas outside the administration of the PA, and vulnerable-household level needs.

As this transitional work proceeds, dedicated coordination resources will be sought to support the PWA in facilitating linkages with other relevant Ministries and related clusters/sectors, in addition to capturing lessons learnt and reinforcing the capacity of local WASH actors. Such dedicated resources will also support sectoral contingency planning and coordination with other key non-HRP actors working in the sector such as the ICRC, in addition to WASH cluster actors with activities funded outside the HRP.

Gender and protection mainstreaming are key aspects to maximise the positive impact of WASH interventions. Most projects identify different sub-groups of the population to ensure participation in the planning and design of project activities, and implement Knowledge, Attitude and Practices (KAP) surveys to evaluate different needs and ensure improvements amongst population sub-groups.

Accountability to affected populations is frequently operationalized through community level assessments, dialogue and surveys at different stages in the project cycle. Nonetheless, more can be done to strengthen these aspects and exchange practices and learning between cluster members, towards improving the quality and effectiveness of the cluster members response.

Given the nature of the underlying causes of humanitarian need, continued and concerted advocacy around WASH issues is needed. This is of particular importance in East Jerusalem given the nature of WASH vulnerabilities. To this end the WASH cluster will continue to engage with the HCT Advocacy Working Group, and the EWASH Advocacy Task Force.

Population to be supported

The WASH cluster is targeting 540,000 of the 1.45 million people in need of WASH support. These are the acutely vulnerable people affected by conflict or occupation, and include IDPs, refugees, children, the disabled, the elderly, widows, female-headed households, Bedouins, people living in Area C (who

are affected by demolitions and settler violence), the unserved and the under-served. People in Gaza make up 74 per cent of the targeted population in WASH.

Prioritization criteria

The WASH cluster identification of 'Top' priority projects is detailed below – it should however be noted that the WASH framework priorities could not be systematically followed to stay within the 20% envelope:

Activity prioritization based on globally identified best practice:

- Time-critical activities including flood prevention and response activities in the Gaza Strip, and demolitions and summer water distributions in the West Bank.
- Critical enabling activities in the Gaza Strip to maintain current levels of service in water provision, wastewater treatment and solid waste collection essential to populations and institutions.

Geographic prioritization based on context specific criteria for the oPt:

- In the West Bank projects targeting predominantly or exclusively sensitive communities at risk of displacement.
- In the Gaza Strip, although priority localities were identified, the vast majority of projects targeted these priority localities- either predominantly or exclusively- and therefore as such, most of the WASH projects targeting Gaza were assigned a "Top" priority.

Exclusion of UN projects: Given significant budgets, UN projects were systematically classified as normal priority – even where some would normally have been classified top priority – to remain within the 20% envelope.



PEOPLE IN NEED


1.0M

PEOPLE TARGETED


0.5M

REQUIREMENTS (US\$)


13M

OF PARTNERS


13

KEY RESULTS

1 Ensure access of vulnerable communities in the Gaza Strip and the West Bank to quality and affordable health services ensured, referral of victims of violence to protection organizations.

2 Vulnerable communities in the West Bank and Gaza are better prepared to cope with the impact of current and potential man-made and natural disasters.

HEALTH AND NUTRITION

Response priorities

The impact of the protracted occupation and blockade on the health of Palestinians has been both direct, such as with violence-related deaths, traumas and injuries, mental health disorders, and indirect, linked to the different obstacles in access to essential health and nutrition services. This presents a violation of the right to health. Against this background, the cluster response plan priorities in 2017 to address the needs of those deemed acutely vulnerable by the cluster are:

- Providing access to quality and affordable primary health care and nutrition services in the West Bank, namely in Area C, in East Jerusalem and in the Gaza Strip in areas or to groups where access is lacking.
- Providing access to emergency and life-saving services, particularly during crises.
- Strengthening emergency preparedness, coping capacity and the resilience of communities to potential future conflicts in Gaza and the West Bank.
- Providing mental health and psychosocial support services in East Jerusalem.
- Undertaking advocacy for patients from West Bank and Gaza to access referral destinations.

Implementation

The cluster plans to address the identified basic needs of the acutely vulnerable populations, enhance lifesaving activities and mitigate the risk of life threatening health conditions through delivery of essential primary health care (PHC) and nutrition services. This will take a variety of forms; including strengthening and enabling the existing service systems of the Ministry of Health (MoH) and of UNRWA. The cluster response is focused on providing services for particularly vulnerable groups that may otherwise not be available.

In Gaza, although the MoH runs 53 PHCs and UNRWA runs 21, both UNRWA and the MoH have no clinics in the Access Restricted Area and only offer limited services to the acutely vulnerable groups, such as specialised support to people disabled through conflict. Under the response plan, cluster partners will provide mobile clinic services in the West Bank in communities that face the most obstacles in accessing health services as these obstacles particularly affect the acutely vulnerable people in the community. The Palestinian MoH and the PRCS provide mobile clinics in some vulnerable communities and the cluster coordinates these clinics jointly with the MoH at the district level. UNRWA, which is a cluster partner, provides mobile health services for refugees living outside the camps in these communities.

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS					BY SEX & AGE	
	Gaza	West Bank	UNRWA Total	UNRWA Gaza	UNRWA West Bank	% female	% children, adult, elderly*
PEOPLE IN NEED	830,000	205,443				59%	57% 39.2% 3.3%
PEOPLE TARGETED	330,000	205,443	301,964	200,000	101,964	59%	57% 39.2% 3.3%
FINANCIAL REQUIREMENTS	\$13M					*Children (<18 years old), adult (18-59 years), elderly (>59 years)	

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The cluster response will also strengthen the capacity of PHC facilities, front line health providers and communities on management of mass casualties, rescue and first aid, and trauma care in the case of emergencies through capacity training, or provision of essential supplies, as well as supporting referral to more specialised healthcare services. The Health and Nutrition Cluster (HNC) response complements the efforts of ICRC in supporting emergency preparedness in hospitals and PHC centres, as well as PRCs which already covers pre-hospital ambulance services in the West Bank and Gaza, in order to strengthen emergency medical services and community resilience to man-made crises.

The cluster will also advocate for the right to health for Palestinians in the oPt through evidence-based advocacy with duty-bearers concerning their legal obligations under International Humanitarian Law and International Human Rights Law, especially regarding barriers to access to health services, through research, training, reports and direct advocacy with international and national actors.

to target 535,443 people. These include those living in the catchment of totally destroyed PHCs, people living in the ARA, Area C and East Jerusalem, and prioritized vulnerable groups such as neonates, those injured with long term impairment and disabilities, children under 5 and people with chronic diseases. HNC partners will mainstream GBV their approach, particularly in detection and referral.

Prioritization criteria

For 2017, the Health and Nutrition cluster has assigned 'Top' priority to projects that target the most isolated and vulnerable communities/ groups in Area C and Gaza or East Jerusalem to better access essential primary health care. Activities will include but not limited to: mobile health clinics in Area C; establishing primary trauma care in East Jerusalem; provision of essential life-saving drugs, health care services to neonates; management of chronic malnutrition in the Gaza Strip.

Population to be supported

An estimated one million people are in need of humanitarian, health, and nutrition interventions; over 830,000 people in the Gaza Strip and 205,443 in the West Bank. Of the 1 million people in need, the health and nutrition cluster is planning



PEOPLE IN NEED



PEOPLE TARGETED



REQUIREMENTS (US\$)



OF PARTNERS



KEY RESULTS

1 Education actions have strengthened capacities to report, document and advocate on education-related violations across the Gaza Strip, West Bank and East Jerusalem.

2 Vulnerable children in the Gaza Strip, East Jerusalem and the West Bank have access to safe and inclusive educational services.

3 All education stakeholders including parents, communities and children are better able to cope and respond to disaster and emergencies through DRR preparedness and psychosocial services, particularly in areas at risk of education-related violations and natural disasters.

EDUCATION

Response priorities

Approximately 521,000 children in the oPt require humanitarian assistance to get to school and learn in safe and protective environment. Education for these children continues to be significantly compromised by the presence of checkpoints, the Barrier, military and armed group activities and entry into schools, settler-related incidents, increasing detention of students and lack of infrastructure. In the first half of 2016 alone, education related violations have nearly doubled since 2015. There were 127 education-related violations in the oPt, affecting 14,751 children. Violations, predominantly occurring in Area C, the Hebron H2 area and East Jerusalem, included attacks on schools such as activities by military or other armed groups, occupation or military use of the premises, and settler-related incidents and also included denial of access to education.⁹

In the Gaza Strip, armed conflict, military incursions and the resulting damage and destruction of facilities and property have severely disrupted services and impacted the psychosocial wellbeing of children and teachers. These incidents and recurring emergencies, particularly in Gaza, require a strong focus on preparedness, mitigation measures and Disaster Risk Reduction (DRR).

Against this backdrop, the Education Cluster's priorities for 2017 continue to be:

- Access to school, safe learning spaces and/or essential educational services including coordination and implementation of essential education activities in Area C and East Jerusalem.
- School-based psychosocial support for children who face regular attacks and harassment in the West Bank and those still dealing with the trauma of war in Gaza.
- Measures to protect schools against attack and addressing education-related violations through advocacy, reporting and legal support.
- Capacity building of the MoEHE and schools for contingency planning, emergency preparedness, DRR and resilience programming.

Implementation

While the Sub-cluster in Gaza will remain fully operational in 2017, humanitarian coordination in the West Bank has transitioned to the Education in Emergencies Working Group (EiE WG) co-chaired by the Ministry of Education and Higher Education (MoEHE)

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS					BY SEX & AGE	
	Gaza	West Bank	UNRWA Total	UNRWA Gaza	UNRWA West Bank	% female	% children, adult, elderly*
PEOPLE IN NEED	467,841	53,728				49%	95% 5%
PEOPLE TARGETED	351,263	65,962	184,260	184,260	NA	46%	95% 5%
FINANCIAL REQUIREMENTS	\$20M					*Children (<18 years old), adult (18-59 years), elderly (>59 years)	

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9. According to the Israeli authorities, "security forces in the West Bank are instructed as a matter of policy not to disrupt educational activities at any educational institution, from kindergarten and elementary schools up to high schools and universities." However, many educational institutions serve as "a center for organizing violent activities which threaten public security" and "the security forces are left no option but to enter the schools" in order to confront these threats.

and UNICEF. Through the transition, MOEHE is gradually assuming the key cluster functions, while international and national partners continue to support in the area of advocacy. The transition from the cluster to sector coordination mechanism enables a sustainable, government-led, common coordination platform for humanitarian and development actors. This has already been evidenced in the MoEHE-development of the Joint Advocacy and Protection Strategy which articulates government priorities in humanitarian interventions and to which the 2017 HRP closely aligns itself to. Through strategic initiatives defined and led by the government in cooperation with donors, education actors can jointly tackle both the development and humanitarian educational needs of children in the oPt while accessing both humanitarian and development streams of funding.

Through the MoEHE service delivery, advocacy and capacity development, the Cluster/EiE Working Group seeks to mitigate the effects of, and ensure preparedness and provide an immediate response to micro-emergencies such as localized natural disasters, resurgence of conflict, forced displacement and attacks on schools. Cluster/working group partners work in strong partnership with stakeholders, with high levels of participation and consultation to ensure accountability to the affected population. In 2017, advocacy efforts will continue to focus on addressing the increasing trend of education-related violations, where there is little or no accountability for perpetrators of violations. Mitigation, preparedness and response measures for affected schools in the West Bank, East Jerusalem and the Gaza strip will include provision of teaching and learning materials, pre-positioning of key education materials, protected access to schools, reintegration of students into the school system through strengthened catch-up classes for children affected by conflict or deterioration in security, psycho-social programs for teachers and students including students with special needs, rehabilitation of existing and provision of semi-permanent classrooms constructions and strengthening emergency preparedness. Cross-sectoral linkages will be made with the Protection Cluster on strengthening data collection and reporting of grave violations; supporting awareness raising of legal rights and sources of legal aid as well as school-based psycho-social support (PSS).

Through its core funding UNRWA provides primary education to over 300,000 refugee students in 354 UNRWA schools. Cluster partners, including UNRWA, will provide refugee students with additional services not covered through core funding such as services for refugee children with learning difficulties or other special needs, school supplies for poorest families and psychosocial support and extracurricular activities for children suffering from psychosocial stress.

Population to be supported

Although all school children and youth in the oPt are affected by the ongoing policies and practices of the occupation and recurrent outbreak of hostilities, the response will focus on the acutely vulnerable children and youth, and the most affected schools, including those located in the access restricted areas (ARA) in Gaza, Area C, and East Jerusalem. Approximately 74% of children in need are between the ages of 6 and 15 and 90% of all people in need reside in Gaza thus support will be prioritized accordingly.

Prioritization criteria

For 2017, the EiE Working Group/Cluster has assigned 'Top' priority to projects based on the following criteria:

- For the West Bank, "Top" priority was given to interventions that include : rehabilitation of schools in communities in Area C at particular risk of forcible transfer; safe transport and protective presence in the acutely vulnerable communities where protection risks for school children are most severe and children are at the greatest risk of physical harm, e.g. H2 in Hebron, Nablus and other areas with a high incidence of settler violence; and emergency educational response to aftershocks such as demolitions and settler violence.
- In Gaza, "Top" priority was given to interventions that support access to quality education of most vulnerable/ children by provision of school uniforms, education and learning materials, stationary and other student supplies, interventions focusing on access to education for schools in ARA/marginalized areas or children crossing the ARA to attend school, and emergency interventions and rehabilitation and repair of damaged schools.



REQUIREMENTS (US\$)

 19M

OF PARTNERS

 9

KEY RESULTS

1 Support humanitarian actors and coordination mechanisms to ensure effective preparedness and delivery of response

2 Advocate to ensure vulnerable Palestinians receive the necessary protection and assistance.

COORDINATION & SUPPORT SERVICES

The Humanitarian Country Team (HCT) will remain – under the leadership of the Humanitarian Coordinator (HC) – the main senior strategic humanitarian policy forum. The ICCG will continue to be an inclusive inter-agency forum for year-round operational strategic planning and monitoring of humanitarian action. The cluster system remains necessary although some cluster functions, namely for the Education and WASH clusters, have already transitioned to local government coordination modalities in the West Bank while recognising the limits to PA access in East Jerusalem and Area C. To this effect, the HCT has identified a need to reassess the appropriateness of cluster coverage and current cluster activities, including as it relates to inter-cluster coordination. The HCT, in coordination with donors and development actors, will be working on better defining transition in 2017. Linkages between the HRP and development frameworks must also be improved as the new UNDAF is being prepared that will cover 2018-2019 period so as to create the conditions for a smooth transition from relief to recovery and development in the areas most affected.

Inter-cluster Coordination and Information management

Further progress was made in 2016 through the Assessment and Information Management Working Group (AIMWG) on improving data collection, joint analysis and information management across clusters. The AIMWG through the clusters continued to fill data gaps to better identify vulnerable groups and acquire a more nuanced understanding of vulnerability. However, more work needs to be invested at the cluster level to establish shared definitions of vulnerability – or rather, shared benchmarks for the conditions that would trigger a certain type of humanitarian response. To achieve this, the respective roles and responsibilities of OCHA, cluster coordinators and cluster members in collecting data, carrying out needs assessments, monitoring of the humanitarian situation and the implementation of the response must be clarified.

There has been an enhanced effort in 2016 to strengthen monitoring of the HRP. To date the HCT has produced two quarterly Humanitarian Dashboards and a Periodic Monitoring Report (PMR) that has provided information on progress against HRP objectives and indicators. The timing of the production of these dashboards and PMR has coincided with special HCT meetings with donors that take place on a quarterly basis.

A number of inter-agency information systems/platforms were published or/and created during the course of 2016. A Who Does What Where (3Ws) was customized and piloted in Gaza in coordination with the cluster coordinators and their members to enhance their ability to report to OCHA and to coordinate among their partners. The inter-cluster Demolition system was promoted among operational organizations with the aim to address humanitarian needs and gaps following a response to a demolition. A trilingual corporate website was launched with a high-end search engine, navigation capability and material that had been translated into 3 languages (Arabic, English and Hebrew). Dedicated information management support is being provided to the UN Country Team East Jerusalem Task force, the Gaza ICCG IDP Working Group and the Area C steering committee and will continue into 2017. In support of cross cutting issues such as GBV and Protection, the IM team has provided technical services to UNFPA and OHCHR to enhance their information analysis and ability to respond to on-going needs.

In 2017, OCHA oPt will continue to support the inter-agency working groups, cluster system and OCHA's senior management to collect, analyse and create interactive systems to strengthen OCHA's coordination role.

Gender mainstreaming and accountability to affected populations (AAP)

The HCT also seeks to enhance gender mainstreaming and accountability to affected populations within humanitarian operations and within the different stages of the HPC. The

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coordination effort will support implication of cluster response plans in a manner that responds to needs related to gender based vulnerability and APP. Support will also be provided for strengthening gender in the humanitarian coordination system in collaboration with UN Women. In particular, support to the GBV WG (under protection) and the convening of cluster gender focal points that have been assigned during 2016. Greater efforts will also be made to continue the work started in the 2016 HRP to better reflect the views of affected people by taking forward AAP in the ICCG work plan. A joint action plan for 2017 with UN Women will be developed to implement activities that are aimed at information management and improving availability of sex disaggregated data and gender profiles, integrating gender in preparedness and emergency plans and strengthening outreach and access to local women's organizations including through the Humanitarian Fund (HF).

Preparedness and emergency response

In the areas of disaster preparedness, emergency response and resilience the coordination effort will focus on coordination on these issues within inter-agency cooperation fora, leading the HCT's efforts towards joint inter-agency contingency planning. Efforts will also strengthen the linkage in these areas between humanitarian inter-agency planning and response, and multilateral development planning and programming. Thirdly, coordination with Palestinian nationally led efforts to enhance community and national capacity, including national authorities' participation in regional cooperation efforts will also be enhanced. UNRWA, a leading responder during emergencies, plays an integral role in preparedness and coordinated emergency response.

HCT Advocacy Working Group

A dedicated HCT Advocacy Working Group continues to serve as the main subsidiary body coordinating advocacy across the HCT. It sets the goals and develops the plan for the advocacy agenda using International Humanitarian Law and International Human Rights Law as a framework.

The Advocacy Working Group chaired by OCHA, includes representatives from each of the Clusters, UN agencies, and the main NGO coordinating bodies. It meets monthly and reports regularly to the HC and the HCT.

Humanitarian funding to support priority interventions

In 2017, the emergency pooled fund for the oPt, the oPt Humanitarian Fund (oPt HF), will be aligned to support the delivery of strategic humanitarian responses identified under the 2017 HRP while retaining the flexibility to allocate funds to unforeseen events or special requirements.

The oPt HF aims to ensure that humanitarian needs are addressed in a collaborative manner, fostering cooperation and coordination within and between clusters and humanitarian organizations. As such, the oPt HF will contribute to improving needs assessments, enhancing the HRP as the strategic planning document for humanitarian action, strengthening coordination mechanisms, in particular the cluster system, and improving accountability through an enhanced monitoring and reporting framework. Interventions supported by the oPt HF are to be consistent with the core humanitarian principles of humanity, neutrality, impartiality and independence.

In order to make a significant impact, the oPt HF should reach an appropriate scale equivalent to 15 % of the funding requirements of HRP. Therefore the annual fundraising targets for the fund will be gradually increased to reach to the 15 % mark by 2019.

In addition, the Central Emergency Response Fund (CERF) is made available in times of crisis such as during the three major escalations in hostilities in Gaza in 2014, 2012 and 2008-09.

GUIDE TO GIVING

CONTRIBUTING TO THE HUMANITARIAN RESPONSE PLAN



To consult the oPt Humanitarian Needs Overview (HNO), Humanitarian Response Plan (HRP) and monitoring reports, and to link up with organizations participating to the plan through the clusters, please visit:

<https://www.humanitarianresponse.info/en/operations/occupied-palestinian-territory>

DONATING THROUGH THE CENTRAL EMERGENCY RESPONSE FUND (CERF)



CERF provides rapid initial funding for life-saving actions at the onset of emergencies and for poorly funded, essential humanitarian operations in protracted crises around the world. The OCHA managed CERF receives voluntary contributions from various donors – mainly governments, but also private companies, foundations, charities and individuals – which are combined into a single fund.

CERF also provides funding to the world's most neglected crises. When a disaster fades from the headlines, or never makes the headlines, it is much harder to raise funds. The need for help, however, is no less significant.

In an average year, CERF allocates approximately \$450 million to humanitarian operations in some 50 different countries.

Find out more about the CERF and how to donate by visiting the CERF website:

www.unocha.org/cerf/our-donors/how-donate

DONATING THROUGH THE COUNTRY HUMANITARIAN FUND



The Humanitarian Fund (HF) in the oPt is a country-based pooled fund (CBPF). CBPFs are multi-donor humanitarian financing instruments established by the Emergency Relief Coordinator (ERC) and managed by OCHA at the country level under the leadership of the Humanitarian Coordinator (HC), with the support of the Review Board. In addition, an Advisory Board provides general policy and strategy guidance on the overall oPt HF process and priorities. Members of the oPt HF Advisory Board include the donors to the fund and representatives of national and international NGOs and UN agencies.

Find out more about the HF in the oPt by visiting the oPt HF website:

<http://www.ochaopt.org/content/opt-humanitarian-fund>

For information on how to make a contribution, please contact Saad Abdel-Haq, HPF manager:

abdel-haq@un.org

IN-KIND RELIEF AID



The United Nations urges donors to make cash rather than in-kind donations, for maximum speed and flexibility, and to ensure the aid materials that are most needed are the ones delivered. If you can make only in-kind contributions in response to disasters and emergencies, please contact: logik@un.org

REGISTERING AND RECOGNIZING YOUR CONTRIBUTIONS



OCHA manages the Financial Tracking Service (FTS), which records all reported humanitarian contributions (cash, in-kind, multilateral and bilateral) to emergencies. Its purpose is to give credit and visibility to donors for their generosity and to show the total amount of funding and expose gaps in humanitarian plans. Please report yours to FTS, either by email to fts@un.org or through the online contribution report form at <http://fts.unocha.org>

PART III: ANNEXES



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OBJECTIVES, INDICATORS & TARGETS

Strategic Objective 1 (SO1): Protect the rights of Palestinians under occupation in accordance with IHL and IHRL

INDICATOR	IN NEED	BASELINE	TARGET	DATA SOURCE/ COLLECTION METHOD(S)	ORGANIZATION(S) RESPONSIBLE FOR DATA COLLECTION	FREQUENCY
# of households subject to demolition and eviction orders in the West Bank including East Jerusalem that are not displaced (during the reporting period) due to legal assistance	100%	95%	100%	Legal Task Force	NRC for Protection cluster	Quarterly
# of education staff equipped with appropriate skills for monitoring and reporting of education-related violations	1,075	500	627 (Female: 248 Male: 379)	Source: MoEHE Collection method: MoEHE reports, cluster tracking matrix	Education cluster	Quarterly
Functional referral system in place that includes multi-sectoral services (health, psychosocial, legal and security) for GBV survivors	Gaza: Yes WB: Yes	Gaza: partial WB: partial	Gaza: Yes WB: Yes	UNFPA/UNW internal reports	UNFPA/UNW	Annual
Statements by third states advocating respect for international humanitarian law and international human rights law in the oPt	NA	3	5	OCHA Advocacy Working Group tracking matrix	OCHA/ Advocacy Working Group	Twice a year
Index to measure protection risk of acutely vulnerable communities (Area C)	NA	OCHA PoC database/ demolition online system	Improved protection environment	Triangulated sources and field assessments	OCHA	As required

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Strategic Objective 2 (SO2): Ensure acutely-vulnerable Palestinians under occupation in Gaza and the West Bank have access to essential services

Indicator	In need	Baseline	Target	Data source/collection method(s)	organization(s) responsible for data collection	Frequency
# of people who face obstacles in accessing basic health care who are provided with primary health services	266,453	266,453	266,453	Health and Nutrition Cluster partners	Health and Nutrition Cluster	Quarterly
# of vulnerable households living in upgraded/ repaired housing units in accordance with minimum shelter standards	19,185	NA	7,700	4Ws	Shelter and NFIs Cluster	Quarterly
# of schoolchildren and teachers in vulnerable communities benefiting from protective presence/ accompaniment to school	6,900 (Female: 40% Male: 60%)	4,800 (Female: 40% Male: 60%)	6,760 (Female: 40% Male: 60%)	Data source: MoEHE Collection method: cluster tracking matrix	UNICEF	Quarterly
# of acutely vulnerable Palestinians with access to drinking water	732,000	NA	518,000	WASH partners, 4Ws system	WASH cluster	Quarterly
# of acutely vulnerable Palestinians are ensured access to improved sanitation services	600,000	NA	358,000	WASH partners, 4W system	WASH cluster	Quarterly
# of critical service delivery areas – based on cluster sectors – included in the National Disaster Management Strategy or National Preparedness Plan	6	0	6	OCHA/PMO	OCHA	As Required
Index to measure access and movement restrictions (Gaza)	NA	tbd	Improved access and movement	Gaza crossings database	Access Coordination Unit (ACU)/ OCHA	Monthly

Strategic Objective 3 (SO3): Strengthen the ability of acutely-vulnerable Palestinian households to cope with protracted threats and shocks

INDICATOR	IN NEED	BASELINE	TARGET	DATA SOURCE/ COLLECTION METHOD(S)	ORGANIZATION(S) RESPONSIBLE FOR DATA COLLECTION	FREQUENCY
Prevalence of moderate or severe food insecurity in the population, based on the Food Insecurity Experience Scale (FIES)	NA	27%	Stable or decrease	FIES survey	FSS	Biennial
Food insecurity level in oPt	27% of HHs or of individuals aged 15 or more	27%	Stable or decrease	Prevalence of moderate&severe	FSS	Annual
food insecurity in the population, based on:	10,300	NA	10,300 10% FHH	4Ws	Shelter and NFIs cluster	Quarterly
1. SEFSec survey (% of HHs)	21,540	NA	20,050	4Ws	Shelter and NFIs cluster	Quarterly
2. Food Insecurity Experience Scale (FIES) survey (% of individuals aged 15 or more)	FSS	Annual	85%	ACTED	Consortium partners	Monthly (Quarterly update for the ICCG)
# of communities with strengthened capacity to respond in emergencies through first aid training	150	30	70	Reports from Health and Nutrition Cluster partners	Health and Nutrition cluster	Quarterly
# of students and school staff benefiting from PSS services	247,944 (Female: 49% Male: 51%)	108,000	192,260 (Female: 94,987 Male: 97,973)	Data Source: school vulnerability matrix and Child Protection WG Data Collection Methods: cluster tracking matrix, MoEHE and UNRWA reports	Education cluster	Twice a year
# of children and caregivers receiving structured psychosocial support and child protection services	NA	NA	294,542	Programme Reports 5W matrix	Child Protection	Quarterly
# of updated Inter-Agency Contingency Plans (National and Gaza)	2	2	2	OCHA & Clusters	OCHA	Once a year
# of aligned cluster contingency plans updated and aligned with oPt Risk Assessment	6	2	6	OCHA & Clusters	OCHA	Once a year
# cluster contingency plans shared and discussed with the National Disaster Risk Management (DRM) Team and/or cluster focal points	Total pop, or total affected pop, depending on PA or HRP perspective	1-2	6	Triangulation OCHA, Cluster leads and National DRM Team.	OCHA	Twice a year
# of shelters equipped and able to be used in emergencies in the Gaza Strip	120	58	62	IDPWG/Gaza ICCG	Shelter and NFIs cluster	Quarterly

PROTECTION



ACTIVITY	LINK WITH STRATEGIC OBJECTIVE	INDICATORS	NEEDS	BASELINE	TARGET
Monitoring and documentation of violations, focused on IHL violations and conflict-related violence including grave violations affecting children and support to CBOs to strengthen their capacity to undertake monitoring and documentation for the purposes of increased accountability	SO 1	# of incidents of grave violations against children monitored and documented	NA	2003 (End September Figure) NA	
Provision of legal aid (legal counselling and representation) to those seeking accountability for HR/IHL violations including ISF and settler violence, those at risk of demolitions, forced evictions and displacement, those at risk of revocation of residency rights, IDPs in Gaza and those affected by the conflict in Gaza, people affected by access restrictions in Gaza and the West Bank, children arrested and detained and survivors of GBV	SO 1	# of people affected by recent conflict in Gaza that receive legal counselling in relation to land ownership, civil documentation, women's property and inheritance rights	NA		5,237 (2,096 women, 2,783 men, 208 boys, 150 girls)
	SO 1	# of people subject to demolition/eviction orders provided with legal support	4,068 (3,283 males, 785 females)	1,500 (1,125 males, 375 females)	2,265 (2,074 males, 191 females)
	SO 1	# of women and men who receive information on their rights and how to access legal services	3,989 (2,509 males, 1,480 females)	443 (279 males, 164 females)	1,909 (1,156 males, 753 females)
	SO 1	# of GBV survivors who access legal assistance	NA	367	1,500
Advocacy initiatives that aim to enhance accountability for violations of HRL and IHL.	SO 1	# of field briefings raising protection concerns to diplomats	NA	200	200
ERW survey and clearance and ERW risk education in Gaza to determine the extent of ERW contamination and risk (survey), recovery and removal of ERW (clearance) and provide information to mitigate the risks posed by ERW exposure (risk education) including targeted interventions to children.	SO 1	# of civilian sites cleared of ERW risk/hazard (deep buried unexploded munitions)	77 + sites	17 sites cleared in 2016	37 sites cleared
	SO 1	# of people who receive ERW risk education (including children)	251,802	150,126	175,000 (22% women, 14% men, 32% boys and 32% girls)
	SO 1	% of requests for ERW risk assessment and risk mitigation for reconstruction activities completed	100%	100% (92 of 92 in 2016)	100% of all requests for risk assessment and EOD support completed
Protective presence and accompaniment of individuals (including children) in communities exposed to settler violence and ISF presence	SO 1	# of communities benefiting from regular protective presence	NA	160	225
Psychosocial and child protection response. Child protection activities include age and gender sensitive counselling, family support and child/parent interaction programs, life-skills programs, youth-led protection initiatives and programs aimed at supporting children who have been separated from their caregivers	SO 1	# of children benefiting from structured psychosocial support and child protection interventions including life skills programs	264,814	157,079	170,000 (50% boys and 50% girls)
	SO 1	# of children benefiting from individual case management	20,055	3,817 (End September)	6,000 (50% boys and 50% girls)
	SO 1	# of adults who receive structured psychosocial support	158,052	73,832 (Baseline end Sept - this includes PSS, as well as awareness raising on children's rights, including protection of children)	75,000 (70% women & 30% men)
	SO 1	# of GBV survivors who receive psychosocial services	NA	532	16,000
Awareness raising activities designed to reduce risk of GBV	SO 1	# of people who attend GBV awareness raising sessions or receive information on GBV services	NA	16,469	36,000 (40% women, 21% men, 25% boys and 14% girls)
Support health facilities to respond to GBV survivors	SO 1	Functional referral system in place that includes multi-sectoral services	Yes	Partial	Yes

FOOD SECURITY

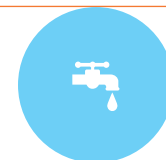


ACTIVITY	LINK WITH STRATEGIC OBJECTIVE	INDICATORS	NEEDS	BASELINE	TARGET
Rehabilitation and provision of productive assets and essential infrastructure for farmers, herders breeders, fishers, and small scale food processors including promotion of technical capacities and small scale production units, and using the BBB (Build-Back Better) approach for increased resilience	SO 3	# of beneficiaries receiving agricultural inputs and services (disaggregated by sex, governorate, Area A-B / C, E,J)			359,225 F:176,880 M:182,345
	SO 3	# of beneficiaries supported through livestock/dairy (ruminants, poultry)			83,137
	SO 3	# of fishers benefiting from equipment rehabilitation or distribution			7,139
	SO 3	# of beneficiaries supported through beekeeping			399
	SO 3	# of dunums made productive or with improved production capacity (full and partial land rehabilitation, piping and irrigation system, seeds and seedlings distribution, etc....)			67,184
	SO 3	# green houses rehabilitated			2,375
	SO 3	km of agricultural roads rehabilitated			179
	SO 3	# of water wells rehabilitated			75
	SO 3	km of water carrier lines rehab or provided			101
	SO 3	m3 of water storage rehabilitated/provided (e.g.: tanks, ponds, reservoirs, cisterns)			173,449
	SO 3	# of animal sheds rehabilitated			3,973
	SO 3	# of animal head distributed			5,830
	SO 3	Tones of fodders distributed			2,772
	SO 3	kW of alternative power supply systems			208
	SO 3	m2 of home garden rehabilitated/established			372,700
Increase sourcing of quality food from local food producers	SO 3	# of producers (small and medium scale producers) supported			3,588
	SO 3	Tonnage of food items purchased from local producers			10,780
Direct access to food	SO 3	# of beneficiaries (disaggregated by sex, governorate, Area A-B / C, E,J) receiving food in kind			1,194,448 F: 587,981 M:606,467
	SO 3	# of beneficiaries (disaggregated by sex, governorate, Area A-B / C, E,J) receiving food vouchers			255,480 F:128,585 M:126,895
Cash based support	SO 3	# of individuals (disaggregated by sex, governorate, Area A-B / C, E,J) benefiting from CfW			145,500 F:63,072 M:82,428
	SO 3	# of individuals (disaggregated by sex, governorate, Area A-B / C, E,J) benefiting from other conditional cash support			6,696 F:3,353 M:3,343
	SO 3	# of individuals (disaggregated by sex, governorate, Area A-B / C, E,J) benefiting from other unconditional cash support			7,235 F: 3,232 M: 4,003

SHELTER



ACTIVITY	LINK WITH STRATEGIC OBJECTIVE	INDICATORS	NEEDS	BASELINE	TARGET
Protection of acutely-vulnerable groups through repair and upgrading of substandard or damaged shelters - Upgrading of substandard or damaged shelters	SO 2, 3	# of households assisted to improve substandard units	West Bank: 7,500 Gaza Strip: 4,725	0	West Bank: 1,000 Gaza Strip: 1,750
Protection of acutely-vulnerable groups through repair and upgrading of substandard or damaged shelters - Repair of conflict-damaged shelters	SO 2, 3	# of households assisted to repair damaged units	Gaza Strip: 6,700	0	Gaza Strip: 5,020
Emergency and transitional shelter response to conflict, demolitions or natural hazards - Transitional Shelter Cash Assistance for IDPs including Syrian refugee families	SO 3	# of IDPs families received TSCA per month	Gaza Strip: 10,300	0	Gaza Strip: 10,300
Emergency and transitional shelter response to conflict, demolitions or natural hazards - Demolition response	SO 3	% of households assisted after demolition or damage	West Bank: 740 (estimate)	0	100%
Emergency and transitional shelter response to conflict, demolitions or natural hazards - Emergency NFI or shelter response to flooding, winter or summer weather	SO 3	# of households provided with winterization/ summarization assistance #/% of households assisted after natural disaster with emergency shelter/NFIs	West Bank: 800 Gaza Strip: 9,700	0	West Bank 650 Gaza Strip: 9,100
Contingency planning and preparedness measures - Stockpile preparation and replenishment	SO 3	# of individuals able to be provided with emergency shelter/NFIs	West Bank: 10,000 Gaza Strip: 600,000	West Bank: 3,000 Gaza Strip: 130,000	West Bank: 6,000 Gaza Strip: 200,000
	SO 3	# of households supported with training and tools for self-recovery	West Bank: 900	0	West Bank: 275
Contingency planning and preparedness measures - Designated Emergency Shelters(DES) upgrading and preparedness	SO 3	# of DES provided with adaptation support	Gaza Strip: 70	0	Gaza Strip: 62
Contingency planning and preparedness measures - Contingency planning review, updating and systems strengthening	SO 3	Cluster contingency plan in place and updated for West Bank and Gaza		1	2



WATER, SANITATION AND HYGENE (WASH)

ACTIVITY	LINK WITH STRATEGIC OBJECTIVE	INDICATORS	NEEDS	BASE-LINE	TARGET
Ensure sufficient sectoral coordination capacity at the national level	SO 1, 2, 3	# of meetings organized	12		12
	SO 3	# of capacity-building events organized	4		4
	SO 3	Dedicated coordination capacity in place	Yes	No	Yes
	SO 3	Dedicated information management capacity in place	Yes	No	Yes
Ensure an appropriate WASH response to demolitions in Area C, and Seam Zones in the West Bank	SO 1, 2, 3	% of demolition incidents receiving a WASH response	100%	50%	100%
Ensure access to basic WASH services for households and institutions in water scarce communities in Area C and East Jerusalem	SO 2	# people served with minimum drinking water supplies	35,000		35,000
	SO 2	# people served with minimum drinking water supplies	150,000		53,000
	SO 2,3	# of people with household water treatment	150,000		6,500
	SO 2,3	# of people with improved access to sanitation	10,000		1,000
	SO 2,3	# of people receiving hygiene material support			5,500
	SO 2,3	# of people reached with hygiene promotion	150,000		30,000
	SO 2,3	# of schools with improved access to / facilities for water and sanitation			30
Ensure capacity of service providers in the self-management of water scarcity in Area C	SO 3	# of LGUs with capacity for self-management of water scarcity			9
Ensure maintenance of existing levels of essential WASH services in the Gaza Strip	SO 2	Quantity of fuel supplied to service providers to ensure water, wastewater and solid waste services	100%		100%
Ensure basic WASH services for conflict-affected, un- or under-served and vulnerable populations and institutions in the Gaza Strip	SO 2	# people served with minimum drinking water supplies	195,000		68,000
	SO 2,3	# people with improved access to domestic water	190,000		53,000
	SO 2,3	# of people with improved access to sanitation	205,000		120,000
	SO 2	# of people receiving hygiene material support	315,000		14,000
	SO 2	# of people reached with hygiene promotion	1,090,000		133,000
	SO 2,3	# of schools with improved access to / facilities for water and sanitation	141		63
Ensure an appropriate WASH preparedness and response to floods in the Gaza strip	SO 3	# of municipal response plans updated / established	25		12
	SO 2,3	# of locations where flood prevention / response activities undertaken	>200		36
Ensure WASH capacity to respond to future shocks in the Gaza Strip	SO 3	# of public / private service providers prepared and capacitated to respond	130		20

HEALTH AND NUTRITION



ACTIVITY	LINK WITH STRATEGIC OBJECTIVE	INDICATORS	NEEDS	BASELINE	TARGET
Provision of mobile health services to people who face obstacles in accessing basic healthcare including physical rehabilitation for People with disabilities (PWDs)	SO 2	# of refugees and non-refugees in underserved communities in Area C benefitting from mobile clinic services	168,443 (Women: 57,981 Children<5: 31,365 Elderly: 9,410 Adult: 74,097 PWD:500)	168,443 (Women: 57,981 Children<5: 31,365 Elderly: 9,410 Adult: 74,097 PWD:500)	
Provision of emergency preparedness at the acutely vulnerable and conflict prone communities in?	SO 2	# of people served by emergency preparedness	37,000		37,000
		# of communities in East Jerusalem receiving mental health or emergency services	5		5
Provision of Primary Health Services (PHC) to vulnerable communities/ people in in Gaza (particularly at area of Atta Habeb, Khazaa and Johr Deek due to the destruction of PHC during the 2014 Gaza conflict)	SO 2	# of patients in communities with totally destroyed PHCs	80,000		80,000 (M: 40,800 F: 39,200 Children:13,600)
Identify and treat children with severe and moderate nutrition problems in Gaza	SO 2	# children treated from moderate and severe malnutrition	4,000		4,000
Provision of lifesaving neonatal and postnatal services to pregnant women, neonates and children in Gaza	SO 2	# of pregnant women and neonates and children receiving lifesaving healthcare services	150,000 (Children:100,000 Women: 50,000)		150,000 (Children:100,000 Women: 50,000)
Identify and provide appropriate support to persons with disabilities in Gaza	SO 2	# people with disabilities and their family members receive appropriate support	8750 (Female: 4,300 Male: 4,450)		
Strengthen the capacity of PHC and front line health providers, and communities on management of mass casualties, rescue and first aid, trauma care and referral to higher levels of health care in West Bank and Gaza	SO 3	# of health workers trained in trauma and/or emergency management	500		500
	SO 3	# of community members trained on first aid			1,500
	SO 1,2,3	# of trained health workers on detection and referral of GBV cases	300		150
	SO 1	# of treated and referred GBV cases of protection organizations	NA		100



EDUCATION

ACTIVITY	LINK WITH STRATEGIC OBJECTIVE	INDICATORS	NEEDS	BASELINE	TARGET
Strengthen reporting on education-related violations across Gaza and the West Bank, particularly in all East Jerusalem schools and improve communication with schools/communities on data usage and accountability	SO 1	# of education staff trained on monitoring and communication of education related violations	1,075	500	627 (Female: 248 Male: 379)
	SO 1	% increase in reporting education related violations in East Jerusalem	N/A	N/A	10%
Support legal action within Israeli courts, European courts, the ICC and others to protect schools and access to education, and support awareness raising of legal rights, channels to report violations and sources of legal aid	SO 1	# of people benefiting from legal aid or awareness raising	4,874	0	3,915 (Female: 2,241 Male: 1,674)
Strengthen advocacy and communication (including dialogue with national authorities and media outreach) on protecting schools from attack and ensuring access to education for all Palestinian children	SO 1	# of advocacy initiatives, media stories and/or dialogue sessions undertaken to increase protection of schools from attack	N/A	0	24
Provide material support (e.g. caravans, tents, stationary, fuel, winterization materials and security cameras) to vulnerable schools in West Bank including East Jerusalem and Gaza	SO 2	# of children and teachers benefiting from the provision of material support to schools	472,319 (Female: 49% Male: 51%)	105,000	292,852 (Female: 146,340 Male: 146,512)
Ensure basic educational services are available and accessible to unserved/ underserved communities in West Bank including East Jerusalem and Gaza through school rehabilitation and additional learning spaces	SO 2	# of children and teachers benefiting from school rehabilitation/adaptation/ winterization and/or additional learning spaces	86,225	18,000	19,805 (Female: 10,112 Male: 9,693)
	SO 2	# of children benefiting from provision of assistive devices	2,800	476	1,209 (Female: 602 Male: 607)
Provide school transportation to students enrolled in restricted access schools in East Jerusalem and Area C	SO 2	# of students benefiting from school transportation in Area C and East Jerusalem	768 Female: 50% Male: 50%)	500	100 (Female: 50 Male: 50)
Expand protective presence and accompaniment around schools and checkpoints in vulnerable communities	SO 2	# of school children and teachers benefiting from protective presence	6,900 (Female: 40% Male: 60%)	4800	4,700 (60% males, 40% females)
Strengthen MOEHE capacity to coordinate humanitarian response through contingency planning at the MOEHE, and Directorates' level and support schools in Gaza, East Jerusalem and Area C to mitigate risks through DRR planning	SO 3	# of education staff trained on strengthening emergency preparedness and response	13,000	2,900	11,170 (Female: 6,067 Male: 5,401)
	SO 3	# of MoEHE national contingency plans developed	1	0	1
	SO 3	# of schools that developed DRR plans	250	35	160
Provide psychosocial support in Education (including extra-curricular activities) to students and vulnerable school staff, and catch up classes to students suffering from home arrest, injury or ex-detainees	SO 3	# of students and school staff benefiting from psychosocial support services and extra-curricular activities	247,944 (Female: 49% Male: 51%)	108,000	192,260 (Female: 94,987 Male: 97,973)
	SO 3	# of students benefiting from catch up classes	80,104	51,589	66,984 (33,295F, 33,689M)

1. Activity contributes to strengthening capacities for the Education sector at all levels to report, document and advocate on education-related violations across the Gaza Strip, West Bank and East Jerusalem (this also related to UNDAF SO 1 Output 2; can we say good example of humanitarian and development synergy?).
2. ARA teachers and West Bank teacher included.
3. Ibid.
4. Based on the winter flood risk assessment conducted by WASH cluster in 2015 and data on schools at flood risk validated by MoEHE and UNRWA. Moreover, MoEHE indicated that there are some schools in need of winter proof.
5. Education cluster members with the support from Handicap International (HI) and based on HI survey in 2015, they expected 4 children are in need of assistive devices in each school including KG.
6. Students received assistive devices in PA schools in 2015/2016 academic year.



COORDINATION AND SUPPORT SERVICES

ACTIVITY	INDICATORS	NEEDS	BASELINE	TARGET
HCT takes decisions to improve humanitarian assistance in the oPt	% of HCT and donor decisions Grand Bargain commitments		N/A	80%
	% of HCT decisions implemented by HCT and clusters		80%	90%
Ensure the cluster coordination architecture is fit for purpose	Clusters transition plans developed			2
	HCT supporting seamless transition and closer collaboration with national partners			NA
Timely production of humanitarian analytical products that support strategic response planning and HCT advocacy, including the HNO	Frequency of updates on geographic and thematic humanitarian snapshots produced, on country-wide dashboards and snapshots; other relevant analysis		Ad hoc	Quarterly
	Humanitarian profile updated for the oPt (including cluster specific gender data and needs analysis)		No	Yes
Regular monitoring by clusters on progress against HRP agreed objectives and indicators	Frequency clusters report on progress towards sector objectives/targets using established monitoring framework		Quarterly	Quarterly
Ensure further gender mainstreaming in the HRP	% of total budget of funded projects that have the gender marker code 2B (principal objective)		2%	2%
	% of number of HRP gender focused projects disaggregated by 2A and 2B		90%	90%
Strengthened preparedness measures within existing coordination mechanisms and stockpiles to ensure needs arising from sudden emergencies are addressed in a timely and predictable manner	Cluster winter plans are in place		In place and ready to use	In place and updated twice a year
	oPt contingency plans are in place		Gaza is in place	West Bank is in place oPt is in place
	Frequency of oPt IACP and stockpiling matrix updated		Twice a year	Twice a year
	Frequency of HCT emergency simulations		Once a year	Once a year
	Workshop DES mainstreaming/checklist on protection of women in DES during and after emergency and contingency plan			
Strategically use HF in a timely manner to support humanitarian action	% of pooled funding resources directed to HRP top priority projects		85%	85%
	% of HF funds allocated to national partners or to projects in partnership with a national partner		75%	75%
	% increase HF donor contributions to the pool fund		2016 %	2017 % projection
Strengthen advocacy and communication policy	# of HCT Advocacy Working Group meetings		12	12
	# of joint or coordinated HCT advocacy events		8	8

PARTICIPATING ORGANIZATIONS & FUNDING REQUIREMENTS

ORGANIZATIONS	REQUIRE- MENT (US\$)
United Nations Relief and Works Agency for Palestine Refugees in the Near East	282,184,162
World Food Programme	56,705,650
United Nations Children's Fund	24,545,907
Norwegian Refugee Council	24,215,444
Food & Agriculture Organization of the United Nations	20,468,887
ACF - Spain	11,256,426
Gruppo Volontariato Civile	7,687,451
Mercy Corps	6,897,938
United Nations Development Programme	6,897,548
Office for the Coordination of Humanitarian Affairs	6,448,152
Save the Children	5,565,928
OXFAM GB	5,033,198
CARE International	4,996,468
Agency for Technical Cooperation and Development	4,834,031
We Effect	4,710,875
Union of Agricultural Work Committees	4,620,750
Première Urgence - Aide Médicale Internationale	3,803,375
Economic & Social Development Centre of Palestine	3,425,451
United Nations Mine Action Service	3,173,227
NGO Development Center	2,915,000
World Vision International	2,847,644
Oxfam Italia	2,846,015
Handicap International	2,643,767
Palestinian Agricultural Relief Committees	2,543,710
United Nations Human Settlements Programme (UN-HABITAT)	2,321,900
United Nations Educational, Scientific and Cultural Organization	2,263,751
Islamic Relief Worldwide	2,073,688
Palestinian Housing Council	1,912,250
Development and Peace	1,910,000
ACT Alliance / DanChurchAid	1,887,460
World Health Organization	1,869,465
Save Youth Future Society	1,585,494
MA'AN Development Center	1,513,046
Médecins du Monde France	1,244,958
United Nations Population Fund	1,236,600
ACT Alliance / Diakonia, Sweden	1,236,090
Medico International	1,200,000
Palestinian Farmers' Union	1,063,687
Medical Aid for Palestinians	982,201
United Nations Entity for Gender Equality and the Empowerment of Women	957,398
Comitato Internazionale per lo Sviluppo dei Popoli	947,000
Norwegian People's Aid	881,012
Al-Ahleya Association for the development of palm and dates	816,000
Fundación Alianza por Los Derechos, la Igualdad y la Solidaridad Internacional	792,800
Palestinian Youth Union	789,534
Community Training Centre and Crisis Management	786,400
Office of the High Commissioner for Human Rights	751,553
Al Najd Developmental Forum	740,850
Cooperazione E Sviluppo - CESVI	627,850
Tomoooh Association for Skills Development	585,450
OXFAM Netherlands (NOVIB)	577,014
Arab Agronomist Association	565,632
Terre des Hommes - Lausanne	559,700

ACT Alliance / Finn Church Aid	548,543
OVERSEAS-Onlus	540,207
St. John Eye Hospital	532,454
Nova - Centre per la Innovació Social / NOVACT	485,520
Almanal Society for Developing the Rural Women	473,760
Palestinian Al Nakheel Association for Progress and Development	439,700
Center for Mind Body Medicine	434,828
Tamer Institute for Community Education	434,454
War Child Holland	400,500
The Society of Women Graduates in Gaza strip	398,050
Health Work Committees	342,650
Rabbis for Human Rights	318,580
Union of Health Work Committees	299,100
Gaza Community Mental Health Programme	292,556
Asamblea De Cooperacion Por La Paz	254,423
Roles for Social Change Association	254,200
Ard El Insan Palestinian Benevolent Association	250,000
Yesh Din	250,000
Palestinian Working Women's Society for Development	248,538
Fares Al Arab for Development and Charity Works	235,760
B'Tselem - the Israeli Information Center for Human Rights in the Occupied Territories	227,883
Palestinian Farmers Association	224,000
Médecins du Monde Suisse	211,902
The Palestinian Early Childhood Education Programs	211,800
Medicos del Mundo	211,455
Wefaq Society for Women and Child Care	209,000
Rebuilding Alliance	198,134
Women's Affairs Center	191,646
Psycho Social Counselling Center for Women	190,960
Civic Coalition for Palestinian Rights in Jerusalem	187,500
Spafford Children's Center	178,179
Community Media Center	169,501
Palestinian Center for Human Rights	162,327
Center for Women's Legal Research and Consulting	140,000
Treatment and Rehabilitation Centre	125,787
AFKAR for Educational and Cultural Development	104,419
Center for the Defence of the Individual	103,405
Public Committee Against Torture in Israel	102,300
Palestine Save the Children Foundation	69,635
The National Society for Democracy and Law	27,200
Total	\$ 547M

WHAT IF?

...WE FAIL TO RESPOND

CHILDREN IN GAZA AND WEST BANK WILL NOT RECEIVE NEEDED CHILD PROTECTION AND PSYCHOSOCIAL SUPPORT SERVICES

Palestinian children are growing up with a deep sense of hopelessness and insecurity about their future. Family and community-based support and psychosocial interventions are urgently needed to prevent the progression of psychosocial distress to mental health disorders, and to strengthen the ability of families to support children and young people. With one in four children in Gaza needing psychosocial support, the lack of support for child-protection interventions will mean that families with complex problems will not receive the support and referrals they need.

THE SITUATION OF 1.65 MILLION FOOD INSECURE PALESTINIANS WILL FURTHER DETERIORATE

1.65 million Palestinians are currently considered food insecure. If we are not able to deliver food and livelihoods assistance to these people, food insecurity could increase, livelihoods could be irreversibly lost, and families will turn to negative coping mechanism, such as reducing their food intake, selling productive assets or reducing expenditure on basics like education and health, in order to try to keep their heads above water.

EDUCATION WILL CONTINUE TO BE AFFECTED BY CONFLICT AND OCCUPATION WITHOUT MITIGATION

Without adequate protective measures and protective presence activities, material support, as well as advocacy, reporting and legal and psychosocial support, Palestinian school children will continue to risk unacceptable attacks on their access to education. In the West Bank children's education is affected for example by military activities, including military incursions onto school grounds. In Gaza, school children suffer from a range of humanitarian challenges, including continuous power outages, overcrowded schooling conditions and limited hours of instruction.

IDPS IN GAZA WILL CONTINUE TO LIVE IN PRECARIOUS HOUSING CONDITIONS

Without funding for transitional solutions such as cash to rent homes or repair their damaged houses, around 60,000 IDPs in Gaza will continue to live in precarious and risky conditions including unrepaired damaged houses, caravans, tents and makeshift shelters. In the absence of durable solutions, the 2016-2017 winter will increase the vulnerability of these people, affecting their physical and mental health and wellbeing.

AROUND 1.7 MILLION PEOPLE COULD BE EXPOSED TO PUBLIC HEALTH RISKS DUE TO UNSAFE WATER

Without funding for interventions to provide clean and safe water, up to 1 million people in Gaza could be exposed to severe public health risks, including an outbreak of waterborne diseases. In the West Bank, the destruction of essential WASH infrastructure has led to displacement, increased poverty, and also an increased risk of disease and illness.

VULNERABLE PEOPLE WILL BE DENIED BASIC HEALTHCARE

If we fail to respond, over 200,000 people particularly children under 5, pregnant women and the elderly will be denied the right to basic primary healthcare services. Essential services in hospitals such as paediatric units and obstetric and gynecology departments will face partial or full closure due to power shortages and the chronic shortages of medical supplies and lifesaving drugs may lead life-long disabilities that would have been preventable. In the West Bank, lack of funding could lead to the discontinuation of primary health mobile services for 43 communities in Area C due to the physical barriers they face on a daily basis. Lastly, without these critical health services, the ability to detect and adequately respond to any potential infectious disease outbreak would be at risk.

This document is produced on behalf of the Humanitarian Country Team and partners.

This document provides the Humanitarian Country Team's shared understanding of the crisis, including the most pressing humanitarian needs, and reflects its joint humanitarian response planning.

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