

HIGHLIGHTS

- The overall number of COVID-19 cases rose by forty per cent and 45 more people died.
- First cases of community transmission reported in Gaza, leading to two fatalities.
- Complete lockdown in Gaza, amidst intensified hostilities and a significant decline in power supply.

COVID-19 CASES IN OPT

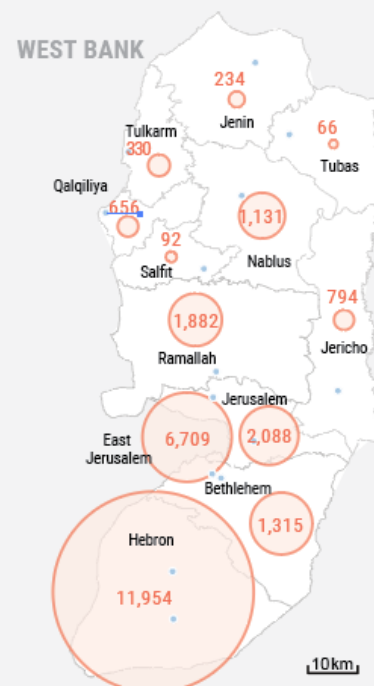
27,386 CONFIRMED CASES

8,409 ACTIVE CASES

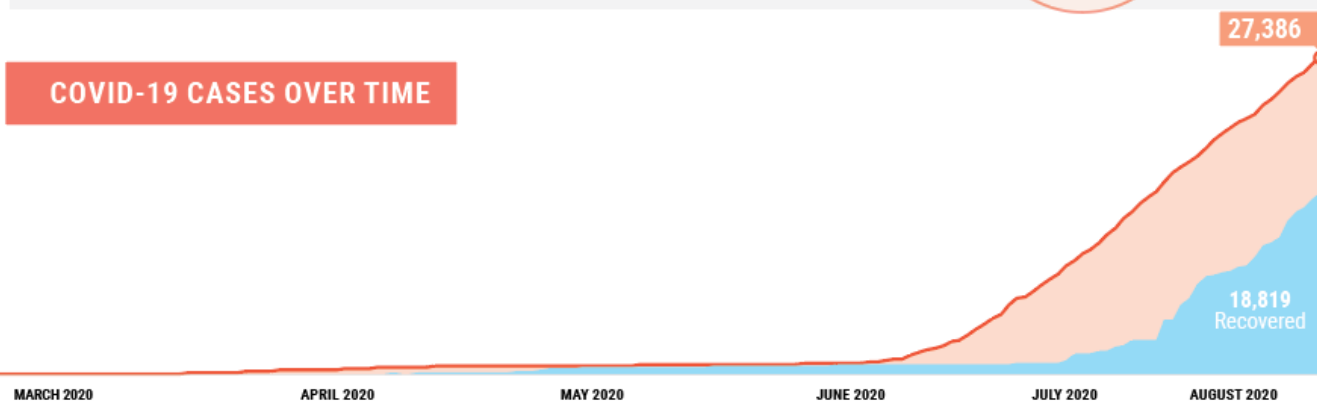
18,819 RECOVERED

158 DEATHS

- Active Cases
- Quarantine Centre
- ✘ Crossing Point
- Closed Crossing Point



COVID-19 CASES OVER TIME



8,409	266,238	20,320	US\$72.2 M
People with COVID-19 (active cases)	Samples tested for COVID-19	People in quarantine	request for Inter-Agency Response Plan

SITUATION OVERVIEW

The cumulative number of Palestinians in the oPt who have contracted COVID-19 increased by 40 per cent during the reporting period, from 19,594 on 11 August to 27,386 (as of 16:00 hrs, 28 August). The number of people who recovered also rose significantly, from 11,168 to 18,819, with the result that the number of active cases has registered only a slight increase, from 8,313 to 8,409. Forty-five more people have died, bringing to 158 the cumulative number of fatalities to date. Twenty-six patients are in intensive care units (ICU), with four requiring mechanical ventilation.

According to the Palestinian Ministry of Health (MoH), since the onset of the pandemic, over 250,000 laboratory samples have been tested for COVID-19. Over 20,000 Palestinians are in home, or facility-based quarantine, in order to monitor their symptoms and ensure early detection. (All data as of 27 August).

Almost all of the approximately 8,000 additional cases detected during the reporting period were in the West Bank (including East Jerusalem), with Hebron and East Jerusalem again accounting for most of the active cases. However, eighty new cases were detected in the Gaza Strip, which also recorded two fatalities, the first since May. In a worrying development, on 24 August, four cases were detected among members of the same family in Al Maghazi refugee camp, the first cases of COVID-19 reported outside of quarantine facilities in Gaza. Despite the imposition of a total lockdown, new cases have been detected since, the majority unrelated to the initial cluster, raising fears of community transmission. In response, the authorities in Gaza have instituted a lockdown and activated the highest phase of their COVID-19 contingency plan.

In Gaza, where approximately 600,000 pupils had started the academic year on 8 August, all schools are now closed again. In the West Bank, the Ministry of Education (MoE) is still planning to reopen schools on 6 September (except for 12th grade students who returned on 9 August), despite the closure of a number of schools due to confirmed COVID-19 cases among pupils and teachers.

West Bank

The epicentre of the outbreak continues to be the Hebron Governorate, which accounts for over forty per cent of the total cases, and 105 of the 158 fatalities. This is followed by East Jerusalem (24 per cent), the rest of the Jerusalem governorate (8 per cent), Ramallah (7 per cent) and Bethlehem (5 per cent). The governorates of Salfit, Qalqilya, Tubas, Tulkarm and Jenin continue to record low numbers of people with COVID-19.

The Palestinian Authority (PA) has ended the weekend lockdown imposed in early July, although a night time curfew from 24:00 to 07:00 remains in place. Coffee shops, restaurants, sport clubs and gyms can operate at fifty per cent capacity, subject to safety measures. The prohibition on public gatherings, including weddings and funerals remains. PA officials have indicated that a complete closure will be imposed on any locality which experiences a surge in positive cases and imposed a 48-hour closure and curfew on Al Lubban ash Sharqiya in South Nablus on 18 August, in response to more than 220 cases reported in the village.

Scores of schools, which opened in August to accommodate 12th grade students, were closed, due to confirmed COVID-19 cases among pupils and staff. Notwithstanding, the Ministry of Education (MoE) is still planning to start the new academic year for students below grade 12 on 6 September. There will be an integrated education system for all schools, combining face-to-face education and distance learning. However, many parents remain unpersuaded by the MoE's protection measures and are appealing for a postponement, or are threatening to keep children at home, especially those with underlying health issues.

People who were exposed to confirmed cases, and were either not tested, or tested negative, are being sent to home quarantine, as are Palestinians who enter the West Bank from Jordan or Israel. The vast majority of confirmed cases with light or mild symptoms are also being referred to home isolation. However, following the upsurge in cases in recent months and the concern of mass transmission, especially in overcrowded areas such as refugee camps, institutional isolation has been gradually re-introduced. Currently there are three operational isolation centres (in Jericho, Jenin and Nablus cities). Confirmed cases with severe symptoms are referred to a designated hospital/treatment centre, with 12 facilities currently operational.

The MoH has launched an electronic platform for people to access their test results within eight to 24 hours. However, people are declined to be tested after the sharing of personal information, including names, occurred via social media.

East Jerusalem witnessed a forty per cent increase in cases during the reporting period and has over 2,000 active cases. There are three designated hospitals in East Jerusalem to treat COVID-19 patients (Augusta Victoria, Al Makassed and St. Joseph's), in addition to Israeli hospitals where Palestinians who hold Jerusalem IDs can be treated. Two new drive-through testing centres opened on 17 and 18 August in Sheikh Jarrah and Jabal al Mukabbir, where people can be tested without medical referral or appointment. According to the Jerusalem Municipality, a new isolation centre opened on 25 August at the Seven Arches Hotel to receive confirmed cases from East Jerusalem. The service will be provided free of charge to those enrolled with Israeli Health Maintenance Organizations (HMOs), following a doctor's referral.

Citing the lack of building permits, during the reporting period, the Israeli authorities demolished or seized 37 Palestinian-owned structures in Area C and East Jerusalem, displacing 50 and affecting 184 others. Since the start of the pandemic, the Israeli authorities have demolished or seized, or forced people to demolish, at least 375 structures. These include 35 inhabited homes that were in place prior to the start of the crisis, leading to the displacement of 207 Palestinians.

Of continuing concern is settler violence, with physical attacks on Palestinian farmers and vandalism against Palestinian vehicles and olive trees, continuing during the reporting period.

Gaza Strip

In Gaza, 101 cases have been recorded in the reporting period, and two deaths, the first fatalities since 23 May. The number of people with COVID-19 is now 192; 117 active, 72 recovered and three deceased.

Until 24 August, all of the active cases were contained, having been detected among people who had returned to Gaza through the Rafah or Erez crossings, and were fulfilling the mandatory 21-day period in quarantine centres. These included the estimated 1,800 Palestinians who had crossed from Egypt through Rafah between 11 and 13 August, the first time the crossing had opened since 15 May. A total of 19,026 samples have been tested to date in Gaza.

On 24 August, the authorities in Gaza reported the first COVID-19 cases outside of designated quarantine centres, including in refugee camp and hospitals settings. In all, some 80 cases have been detected to date in this context, including six family members of the first detected cases, and the remainder apparently unrelated persons, raising fears of community spread.

In response, the local authorities have declared a state of emergency and enforced a lockdown, which has since been extended to 29 August. Movement inside, and between governorates, is prohibited, except for emergency services. Public and private facilities including schools, shops and work places, are closed, except for medical facilities and a select number of other critical providers, such as bakeries and water suppliers.

All active cases are being isolated at the Turkish Hospital (250 beds), which remains the priority facility for the treatment of positive COVID-19 cases, along with the Rafah Field Hospital (100 beds). The European Hospital is currently being prepared for treatment of severe COVID-19 cases, which will enhance capacity by an additional 400 beds. The transformation of two quarantine facilities in Rafah and Beit Hanoun into isolation facilities is ongoing, and eight schools are being prepared to accommodate the 900 people currently in the Rafah and Beit Hanoun facilities. In total, 2,206 people are in one of 16 quarantine facilities, which include health facilities, hotels or other designated buildings.

WHO reports that 10 ventilators and two defibrillators were delivered to Gaza this week to support the treatment of critical and severe cases. WHO/Health Cluster, in coordination with MoH, is identifying the cost of urgently required items, such as laboratory supplies/equipment and PPE, to help the health system cope with the surge in

cases. UNRWA will provide Primary Health Care (PHC) and telemedicine services to the whole population during the time-limited emergency response period, regardless of their refugee status.

The health crisis comes in the context of a serious deterioration in the security situation in Gaza since 12 August, following the launching of rockets and incendiary devices from Gaza into Israel, and Israeli airstrikes on targets in Gaza. Israel has also limited the transfer of certain goods into Gaza through the Kerem Shalom crossing and stopped all fuel deliveries. As a result, on 18 August, the Gaza Power Plant shut down completely, sharply reducing electricity provision to three-four hours per day. This is severely impacting critical infrastructure, including sewage treatment and provision of clean drinking water. Local authorities have indicated that the absence of electricity supply specifically impacts the provision of services in the quarantine facilities and the capacity of the health system to cope with the increased demands driven by COVID-19, such as the ability to detect new cases.

The Erez Crossing is closed until further notice. The movement of goods from Egypt through the Salah al Din gate continues, as previously.

COORDINATION

The Inter-Agency COVID-19 Task Force, led by the Resident/Humanitarian Coordinator (RC/HC), as well as the Inter-Cluster Coordination Group (ICCG), continues to convene on a weekly basis, to set policies and coordinate the implementation of various responses to the crisis.

Over the coming weeks, ICCG members will conduct a joint coordinated assessment of PA isolation centres in the West Bank, to ensure the provision of standardized services to confirmed COVID-19 patients. The assessment will comprise consultative meetings and potential site visits with the objective of assessing needs and gaps of these centres and determine what priority support the humanitarian community can provide.

The Health Cluster is tracking the procurement and delivery of critical medical supplies by Cluster partners against the immediate needs identified in the COVID-19 Inter-Agency Response Plan, and in line with the State of Palestine's National COVID-19 Response Plan.











As of 9 August 2020, gaps remain in the procurement and delivery of essential medical for case management of critical COVID-19 cases, such as medical ventilators, pulse oxymeters and ICU beds. There is also a need for personal protective equipment to ensure the safety of frontline health workers.

The table below highlights the availability and gaps regarding the top ten medical items needed.¹ All partners are encouraged to subscribe and submit their requests for procurement of medical supplies for laboratory testing, case management and infection prevention and control through WHO's global COVID-19 response coordination portal.

To mitigate the impact of the PA halt of coordination with the Israeli authorities on the procurement of supplies and receipt of donations needed for the COVID-19 response, the UN Country Team activated a Logistics Cluster, led by the World Food Programme (WFP). Its main task is to mediate between the Customs Directorate in the PA Ministry of Finance and the Israeli authorities (COGAT and the Israeli Customs Office) to ensure the approval of the documentation required to allow the shipment of imported supplies into the oPt, through the various Israeli ports of entry.

As part of the Risk Communication and Community Engagement (RCCE) plan, nearly 40 partners are distributing communications materials aimed at ensuring that the public has access to a broad range of information on how to prevent the spread of COVID-19, and to deal with misinformation, as restrictions are eased, or alternatively re-imposed, by the respective authorities. RCCE materials are [available online](#).

¹ For a more comprehensive list, please contact the Health Cluster Coordination Team: asaparbekov@who.int and maroufm@who.int.

SN	Item Name	Immediate Needs	Delivered	Pipeline	Remaining Gap
1	 Ventilator, medical, adult/child	150	54	166	-70
2	 Hospital Bed, for intensive care unit	150		166	-16
3	 Patient Monitor, vital signs	150	40	158	-48
4	 Oxygen concentrator, electric	150	15	130	5
5	 Patient beds	300	80	114	106
6	 Pulse oxymeter	200		250	-50
7	 Mask, surgical (box of 50)	20,000	26,123	3,139	-9,262
8	 Gloves, non-sterile (box of 100)	20,000	35,340	19,838	-35,178
9	 Real-time PCR machine	3	2		1
10	 COVID-19 testing kit (primers and probes): 96 tests each	200	398		-198

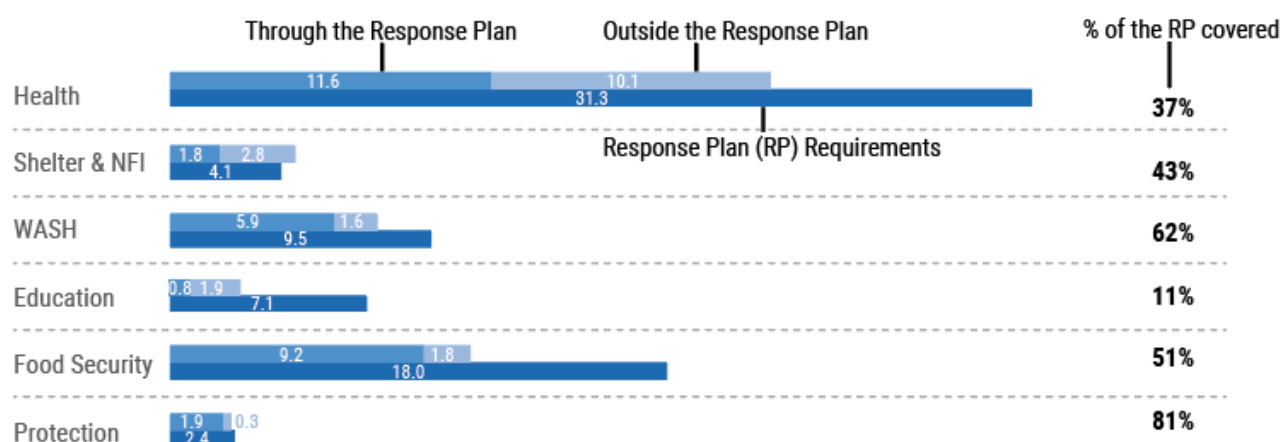
FUNDING

The initial COVID-19 Inter-Agency Response Plan for the oPt, which requested \$42.4 million to support an immediate response to the COVID-19 crisis and the efforts led by the Government of Palestine, covered interventions through the end of June. In August, the Plan was extended until the end of 2020. Due to the number of confirmed active cases being significantly higher than originally anticipated, the total requirement of the expanded plan is now US\$ 72 million.

So far, \$31.2 million, or 43 per cent of the amount requested has been raised. Including resources outside the Response Plan, 49.7 million has been mobilized in support of COVID-19 related response activities in the oPt.

During the past two weeks, the only contributions received was for the WASH Cluster, from GIZ (\$94,290), NMFA (\$11,400), Norwegian Representative Office (\$1,757) and TROCAIRE (\$2,120).

TOTAL FUNDING FOR COVID-19 RESPONSE BY CLUSTER (IN MILLION US\$)



DEVELOPMENTS, CONCERNS AND FUNDING STATUS BY CLUSTER

Health

US\$ 31,304,992	US\$ 11,630,052	37%	US\$ 10,125,602	US\$ 21,755,654
Funding requirements	Through the Response Plan	of the RP covered	Outside Response plan	Total Funding Received

- Concern about the ability of the Palestinian health system to manage the surge in COVID-19 cases.** The number of confirmed cases, and related deaths, continued to increase during the reporting period. The Health Cluster Coordination Team has worked with the Ministry of Health (MoH) and the World Health Organization (WHO) to extend the Inter-Agency COVID-19 Response Plan until the end of 2020. Health partners are requesting an estimated US\$32 million, which is an increase of \$13 million, compared to three months ago.
- In Gaza, the health authorities reported the first COVID-19 cases in the community raising serious concerns about the health system's ability to manage.** WHO is working with the health authorities to prepare the list of immediate needs to be addressed in the next three months to scale-up the COVID-19 response in Gaza. The needs include medical equipment and disposables for case management of COVID-19 patients, personal protective equipment (PPE), laboratory supplies to scale-up COVID-19 testing, support to respiratory triage centres as well as isolation and treatment centres. Challenges include delays in shipment of medical supplies, including PPE, shortages of human resources and limited compliance with public health measures.
- More than 130,000 people benefited from activities carried out by the Health Cluster partners during the reporting period.** Partners provided the Ministry of Health (MoH) with laboratory testing kits and supplementary equipment to conduct tests and over 30,000 frontline health workers benefitted from full PPE items. Partners procured and delivered essential medical equipment for the treatment of severe and critical cases of COVID-19, including ICU beds, invasive mechanical ventilators, defibrillators, supplies for oxygen therapy and patient vital signs monitors. However, global and local shortages continue to affect the delivery of essential items.
- An estimated 10,000 people received a minimum, essential health package of services,** as part of maintaining essential health services in times of COVID-19. Barriers to accessing life-saving health care remain. In Gaza, many MoH primary healthcare centres remain closed, as staff are relocated to quarantine facilities. In the West Bank,

demand for health services, including family planning, mother and child health and nutrition, has decreased compared to last year and hospitals continue to face challenges in providing services for pregnant women with COVID-19.

5. **The Risk Communication and Community Engagement (RCCE) campaign, supported by some 40 partners continues.** During the reporting period, the campaign focused on messages concerning home quarantine guidance, Gender-Based Violence (GBV) and mental health, primarily in hot-spot areas. More than 90,000 people have been directly exposed to these messages.

Protection

US\$ 2,365,000	US\$ 1,917,434	812%	US\$ 305,434	US\$ 2,222,868
Funding requirements	Through the Response Plan	of the RP covered	Outside Response plan	Total Funding Received

1. **During the reporting period, the number of children in need of individual case management who were reached through family centres, led by UNICEF and implementing partners, significantly increased from two to 89 children in Gaza.** Partners are raising concerns about the overall capacity to address an increasing number of MHPSS and child protection needs, especially in light of the recent development of new COVID-19 cases outside of quarantine centres in Gaza.
2. **In light of the recent developments, Gaza GBV Sub Cluster members continue to provide support remotely, and gather data through mobiles and hotlines.** The focus will be on social media to raise awareness of the COVID-19 response guidelines and to dispel rumours.
3. **Power outages in Gaza are compounding the impact of the lockdown on the most vulnerable households, with a disproportionate impact on women, children, and people with special needs.** Most importantly, access to water and drinking water is reduced from around 80 litres/capita /day to 20 litres/capita/day. People with Disabilities (PWDs) dependent on electricity-powered equipment are at higher risk of health complications, due to extended power outages. In addition, power outages disrupt the provision of remote counselling services since the majority of frontline staff lack adequate uninterrupted power supply systems to be fully operational.

Education

US\$ 7,120,698	US\$ 817,000	11%	US\$ 1,898,746	US\$ 2,715,746
Funding requirements	Through the Response Plan	of the RP covered	Outside Response plan	Total Funding Received

1. **In the West Bank, the Ministry of Education (MoE) plans to reopen schools on 6 September, excluding 45,000 twelfth grade students who returned to school on 9 August.** Since then, around 50 schools were either temporarily or fully closed from one to 14 days, following confirmed COVID-19 cases among pupils or school staff. The current situation is imposing additional challenges to ensuring the continuity of face-to-face education during the spread of the pandemic.
2. **The MoE in the West Bank launched its back to school plan.** The Plan seeks to ensure children's safety, protection and emotional and psychological needs; improve partnerships with all stakeholders in the education

sector; build capacity of educators and school staff to continue teaching and learning remotely; ensure the implementation of the safe schools protocol; and to provide Mental Health and Psychosocial Support (MHPSS) to students, including adequate support to children with disabilities. The MoE and MoH are also working together to update the protocol to be used by schools in case of confirmed COVID-19 cases among students and school staff. The Education Cluster is continuing to work with the MoE and URWA to support and coordinate interventions related to distance learning, MHPSS services, Infection and Protection Control measures and provision of hygiene kits and rehabilitation of WASH facilities.

- In the Gaza Strip, schools reopened on 8 August with approximately 595,000 students returning to school.** The MoE and UNRWA reopened schools, while taking into consideration global and contextualized guidance and frameworks for protective measures necessary for the safe return of students and school staff. On 24 August, the Ministry of Health (MoH) diagnosed the first cases of COVID-19 in the community in the Gaza Strip, leading to a full closure of Gaza, including of all education facilities.

Shelter & NFI

US\$ 4,092,551	US\$ 1,755,251	43%	US\$ 2,767,382	US\$ 4,522,633
Funding requirements	Through the Response Plan	% of the RP covered	Outside Response plan	Total Funding Received

- Shelter Cluster partners have continued to support vulnerable people in quarantine facilities and inadequate shelters in the Gaza Strip.** Cluster partners provided non-food items (NFIs) to all active quarantine facilities, including bedding sets, individual hygiene kits and dignity kits. During the reporting period, over 3,300 various NFI kits have been distributed to active quarantine centers in need. Arrangements to support quarantine centers with the needed NFIs in Gaza after the first confirmed COVID-19 cases in the community is ongoing.
- During the reporting period, Cluster partners distributed 2,750 COVID-19 family hygiene kits to vulnerable households lacking proper hygiene facilities.**
- The Cluster evaluated the different capacities to support isolation centres across the West Bank.** As part of the preparedness for the opening of 13 new isolation centres, of which three are already operational, 9,000 different NFIs are required, including mattresses, blankets, pillows, and dignity kits. Cluster partners will procure the required items in coordination with UNRWA and the Palestinian Authority (PA) to comply with required item specifications.

Water, Sanitation and Hygiene

US\$ 9,504,052	US\$ 5,938,409	62%	US\$ 1,590,890	US\$ 7,529,299
Funding requirements	Through the Response Plan	of the RP covered	Outside Response plan	Total Funding Received

- The WASH Cluster reached over 3,000 people during the reporting period.** In the Gaza Strip, four partners delivered over 101,000 bottles of water to quarantine facilities and over 2,000 hygiene kits to quarantine facilities. 122 households benefited from regular emptying of soak pits/septic tanks.
- As part of its COVID-19 emergency response plan, and through the Austrian Fund, the Palestinian Water Authority (PWA) has launched a water resources' emergency maintenance and operation programme to**

provide the required disinfection, operation and maintenance materials and tools for its water resources in the oPt.

3. **CMWU and WASH service providers in the Gaza Strip reported a depletion in WASH facilities' emergency fuel reserves, due to severe power shortage.** Desalination plants, wastewater treatment plants, water, and wastewater pumping stations will no longer be able to satisfy demand for services. The WASH Cluster and its partners are conducting a rapid assessment to measure the service gap and its impact on Gaza communities.

Food Security

US\$ 18,017,577	US\$ 9,117,426	51%	US\$ 1,777,441	US\$ 10,954,867
Funding requirements	Through the Response Plan	of the RP covered	Outside Response plan	Total Funding Received

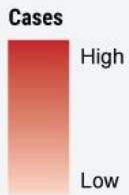
1. **The World Food Programme (WFP) is only able to maintain food assistance to beneficiaries in the West Bank and the Gaza Strip until early November 2020.** The WFP needs an additional US\$ 22.3 million to continue providing food assistance in the next six months. This includes US\$ 9.5 million to sustain assistance in response to COVID-19 until the end of January 2021. As of 1 September, all support to newly vulnerable people due to COVID-19 will cease due to funding shortages.
2. **Major agricultural inputs were available during the reporting period, but prices remained above pre-COVID-19 levels, while production capacity and earnings decreased for small producers.** Producers' capacity to cope with increased input prices, as suppliers continue to accept cash payments only, is constrained by their lack of liquidity. Producers in Gaza, who were able to access informal credit, reported facing accumulating debts. Farmers reported reducing production, as a result of reduced local consumption and overall demand.
3. **The volume of agriculture and food sales remained low compared to pre-COVID-19 levels for surveyed small-scale producers.** The closure of hotels and restaurants was a key factor in adding to the general reduction in market demand. Small farmers reported producing limited quantity of crops for direct sale to consumers or in local markets. The price, as well as sales, of poultry continued to decrease due to in consumer demand. Producers and traders related the reduced market demand to reduced household income.
4. **Market access is limited and sporadic amidst restoration of movement restriction and lockdown measures.** Producers are struggling to anticipate what markets are open and where to trade their supply.
5. **UNRWA has decided to continue its door-to-door approach in order to reach targeted beneficiaries, following confirmation of COVID-19 community transmission in the in the Gaza Strip.**
6. **The Ministry of Agriculture (MoA) activated its contingency plan to ensure that basic food needs (fresh vegetables, dairy and meat products) are met, while confirmed COVID-19 cases are recorded in Gaza.** The plan includes ensuring the availability of fresh vegetables in the local markets, as well as safe access to these products by monitoring the supply and demand chain from farmers to consumers, using distribution points in all Gaza governorates. The MoA, in coordination with the Ministry of National Economy (MoNE) set a pricing system for agricultural products, to avoid monopoly and unjustified price increases.

COVID-19 CONFIRMED CASES IN OPT (as of 28 August 2020)

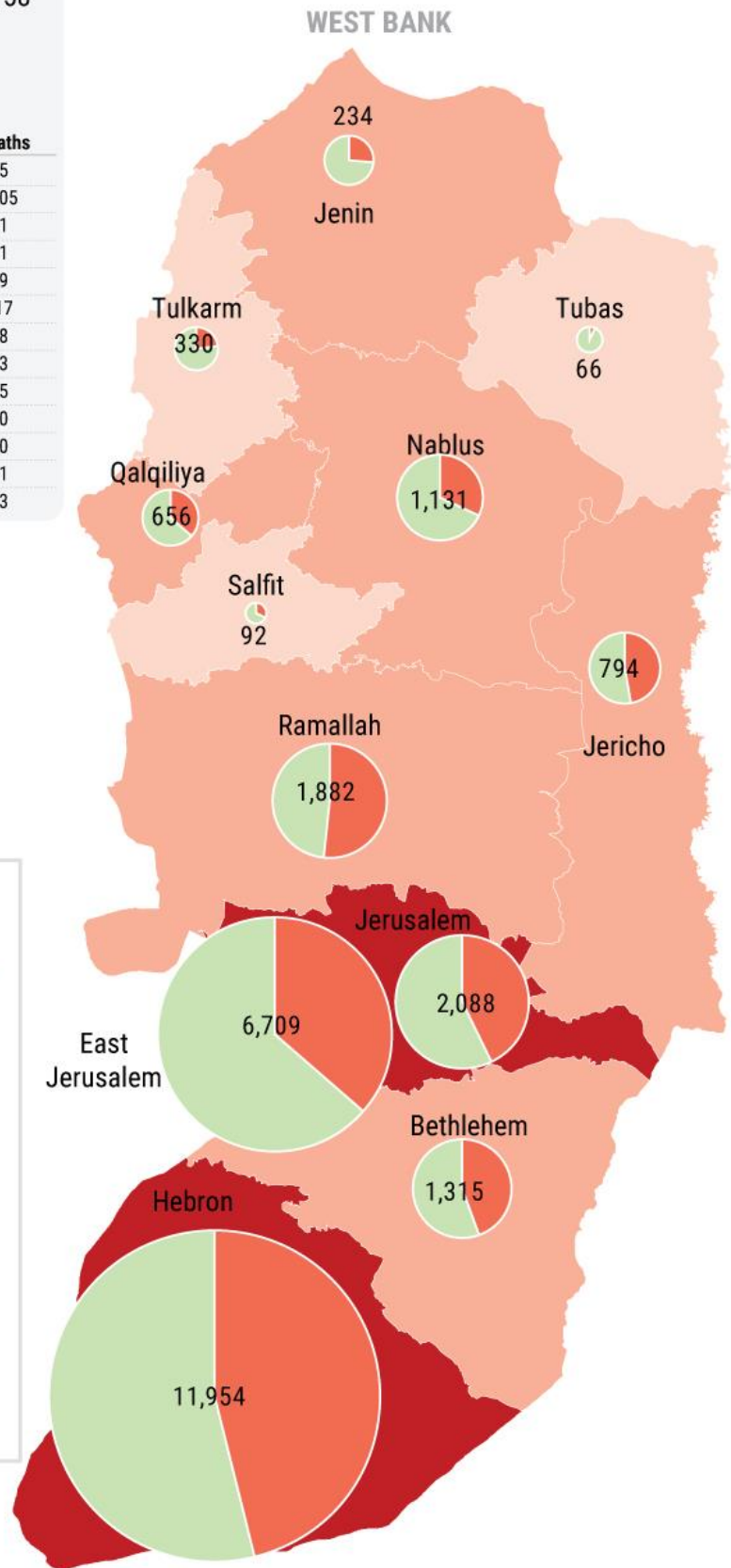


Total Cases 27,386 **Deaths** 158
Recovered 18,819
Active Cases 8,409

Governorate	Cases	Recovered	Active	Deaths
Bethlehem	1,315	872	438	5
Hebron	11,954	8,837	3,012	105
Jenin	234	211	22	1
Jericho	794	406	387	1
Jerusalem (Ex. E.J)	2,088	1,448	631	9
East Jerusalem	6,709	4,625	2,067	17
Nablus	1,131	723	400	8
Qalqilya	656	260	393	3
Ramallah	1,882	1,008	869	5
Salfit	92	55	37	0
Tubas	66	58	8	0
Tulkarm	330	244	85	1
Gaza Strip	135	72	60	3



GAZA STRIP



Data Source: Ministry of Health

COVID-19 response funding in the oPt (through and outside the Inter-Agency Response Plan) in US\$

Cluster	Response Plan (RP) Requirements	Through the Response Plan	% of the RP covered	Outside the Response Plan	Total
Education	7,120,698	817,000	11%	1,898,746	2,715,746
Food_Security	18,017,577	9,177,426	51%	1,777,441	10,954,867
Health	31,304,992	11,630,052	37%	10,125,602	21,755,654
Protection	2,365,740	1,917,434	81%	305,434	2,222,868
Shelter_NFI	4,092,551	1,755,251	43%	2,767,382	4,522,633
WASH	9,504,052	5,938,409	62%	1,590,890	7,529,299
Grand Total	72,405,610	31,235,571	43%	18,465,495	49,701,066

Total funding for COVID-19 response by donors

Donors	Through the Response Plan	Outside the Response Plan	Total in US\$
Austria		229,564	229,564
Canada	2,215,757		2,215,757
CERF	527,000		527,000
DFID	1,148,789		1,148,789
ECHO	2,730,760	6,305,000 ¹	9,035,760
Education Cannot Wait	555,000	1,550,000	2,105,000
Federal Ministry for Economic Cooperation and Development (BMZ)	112,500		112,500
Foreign Disaster Assistance (OFDA)	225,000		225,000
France	1,005,415		1,005,415
Germany	2,512,383		2,512,383
GIZ	530,471	43,000	573,471
ICO-UAE	112,640		112,640
Ireland (Irish Aid)	235,200		235,200
Islamic Relief Worldwide	307,800		307,800
Italian Agency for Development Cooperation [AICS]	152,008	10,970	162,978
Japan	878,506		878,506
Kuwait	747,500	8,252,500	9,000,000
Norway	70,000	91,083	161,083
OPT Humanitarian Fund ²	6,642,564	347,768	6,990,332
Other sources ³	1,097,538	160,155	1,257,693
Private Sector Fundraising	386,786		386,786
Qatar Fund for Development		562,455	562,455
Qatar Red Crescent		410,000	410,000
Save the Children ⁴	326,435		326,435
Start fund	251,000		251,000

Suisse Cooperation	138,520		138,520
Sweden (SIDA)	500,000		500,000
Swiss Agency for Development and Cooperation "SDC"	1,450,000	268,000	1,718,000
UNESCO		150,000	150,000
UNFPA Humanitarian Thematic Fund	332,000		332,000
UNICEF	792,000		792,000
War Child Holland⁵	252,000	85,000	337,000
WFP (loan)	5,000,000		5,000,000
Grand Total	\$31,235,571	\$18,465,495	\$49,701,066

¹ Attribution to the Inter-Agency COVID-19 Response Plan under verification.

² As of today, oPt Humanitarian Fund has received generous contributions from Germany (\$13.8m), Belgium (\$4.3m), Sweden (\$2.1m) Switzerland (\$2m), Norway (\$0.9m), Ireland (\$0.3m), Korea (\$0.3m), Iceland (\$0.2m) and Cyprus (\$12,500).

³ Funding contributions below \$100,000 including funding towards and outside Covid-19 Response Plan, received from: Action Aid, AECID, African Women Development Fund, AICS, Cantabria 19, Care International Emergency Fund, Christian Aid&ACPP, Denmark, DRO, EIHDR, Fridresh Nauman Foundation, Gazze Destek (GDD), Global fund for women, Grass Roots, HEKS, Holland, International Charity Organisation, IR – Canada, IR – UK, Italy (IADC), Jerrahi Order of America, Kvinna Till Kvinna, Luxemburg government - ARDI Program, McNulty Foundation, Medico International, Mennonite Central Committee, Mixed funds (German, Italian, Spanish and Dutch), NCA, DCA, NMFA, Nous Cims, NRC, Open Society Foundation, Oxfam, PHG, Private Donors, Rawa Funds, Representative Office of Switzerland in Ramallah, Secours Islamique France, SIDA+DFAT, StartNetwork, Trocare, UN Trust Fund, UNDP, United Palestinian Appeal, UNWOMEN HQ, Urgent Action Fund, WELFARE (Taawon), WHO, World Vision USA.

⁴ This includes contributions of Save the Children individual and pooled funds.

⁵ This includes contributions of War Child Holland and War Child Holland Head Office.

For more information including a detailed list of activities by cluster in both Gaza and the West Bank and for detailed maps of the Quarantine Centres please visit the COVID 19 Webpage found on the OCHA Website. Please go to the OCHA Website:

[OCHA COVID-19 DEDICATED WEBPAGE](#)

[DETAILED MAPS OF QUARANTINE FACILITIES](#)

[DETAILED LIST OF ACTIVITIES BY CLUSTER](#)