



covid-19 response summary

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This COVID-19 Response Summary was developed by the Department of Planning, UNRWA Headquarters, Amman.

About UNRWA

UNRWA is a United Nations agency established by the General Assembly in 1949 and is mandated to provide assistance and protection to a population of some 5.6 million registered Palestine refugees. Its mission is to help Palestine refugees in Jordan, Lebanon, Syria, West Bank and the Gaza Strip to achieve their full human development potential pending a just solution to their plight. The Agency's services encompass education, health care, relief and social services, camp infrastructure and improvement, microfinance and emergency assistance. UNRWA is funded almost entirely by voluntary contributions.

Cover photo: UNRWA medical staff outside the COVID-19 triage centre at Beach Camp Boys' Preparatory School "A", Gaza.

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introduction

This report summarizes the main activities carried out by UNRWA in response to the COVID-19 pandemic between March and June 2020, which have been reported in weekly and later fortnightly updates since April.

Since the beginning of the outbreak, the Agency has shown flexibility and innovation in rapidly reprogramming its interventions and introducing new initiatives as part of its COVID-19 response to ensure continued service delivery in conditions of safety for staff and beneficiaries. Some of these interventions are:

- Triage of patients in health centres, telemedicine hotlines and appointment systems to reduce foot traffic in health facilities
- Home deliveries of medicines for patients with non-communicable diseases (NCD) in some Fields
- Home deliveries of food parcels in Gaza and for families in the West Bank in home isolation
- Phone hotlines in all five Field offices to enable Palestine refugees to access information on Agency services
- Scale up of cash and food distribution programmes to mitigate the additional socio-economic hardship caused by COVID-19
- Activation of the Education in Emergencies (EiE) programme where nearly 92 per cent of UNRWA students were able to use self-learning resources during school closures
- Camp disinfection activities to augment the Agency's environmental health services

UNRWA also undertook a major procurement of personal protective equipment (PPE), including 1.3 million medical masks and 3.24 million gloves to protect health workers and other front line staff against the spread of COVID-19.

The Agency's COVID-19 response has been operating under extremely difficult circumstances. Palestine refugees are among the most vulnerable communities in the region, particularly in the context of nearly ten years of conflict and a growing financial crisis in Syria, an economic crisis in Lebanon, chronic impoverishment and blockade in Gaza and an increasingly tense political environment in the West Bank as a result of Israel's new annexation plan.

The COVID-19 infection rate has varied across the five Fields, with relatively low morbidity compared with other countries in the Middle East North Africa (MENA) region. Different lockdown movement restrictions and quarantine measures continue to reflect the ever-changing epidemiological situation across the five Fields and the Agency's response remains agile to adapt to those restrictions. However, in June, the West Bank reported a new increase in COVID-19 cases, with Palestine refugees and UNRWA staff and services affected amid growing concerns for public health. A rising number of cases was also reported in Lebanon and Syria.

Between March to June 2020, most Agency offices were closed and the majority of staff worked remotely from home until mid-June, with the exception of a small number of front line field staff who ensured that minimal services were maintained and the most vulnerable refugees were supported. Support for nearly 30,000 staff to help them cope with front line and remote working has been provided through counselling services.

In order to effectively maintain essential services UNRWA worked closely with host government authorities, especially with their ministries of health and education, and has supported their quarantine operations in Lebanon, the West Bank and Gaza. The Agency has also closely coordinated with the World Health Organization (WHO) and other UN agencies, Red Cross and Red Crescent Societies, NGOs and community based organizations (CBOs). UNRWA continues to participate in UN Country Team (UNCT) coordination processes in all five Fields and has provided input into OCHA's COVID-19 Global Humanitarian Response Plan (GHRP). In addition, field staff have coordinated activities with other UN Agencies and NGO partners in a number of Clusters and sector working groups and are collaborating with the many thousands of parents who have been helping their children with distance learning.

To respond to the most urgent health and non-health needs arising from the COVID-19 emergency, UNRWA launched a US\$ 93.4 million Flash Appeal covering the period March-July 2020. As of 15 July, the appeal remains at 56 per cent funded. Of the US\$ 130 million raised at the UNRWA Extraordinary Virtual Ministerial Pledging Conference on 23 June, US\$ 19.5 million has been earmarked for the COVID-19 response.



health

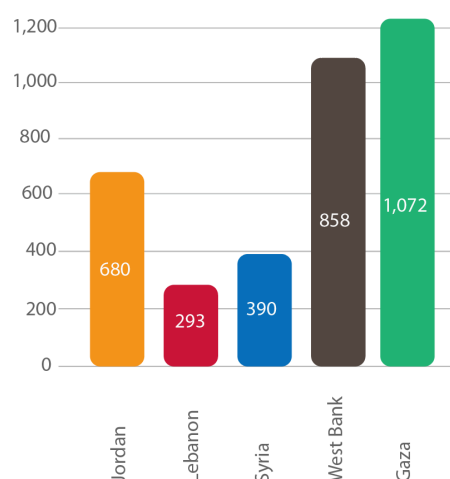
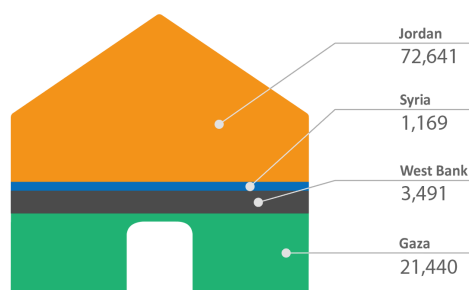
UNRWA acted quickly by establishing a Health Department COVID taskforce in late January 2020 in line with WHO's technical guidelines and in consultation with host governments' ministries of health. With 3,298 health staff operating 141 health facilities across five Fields for over three million Palestine refugees who access the services, the Agency was able to adapt to local lockdown conditions to continue providing essential primary health care services.

Highlights

- Personal Protective Equipment (PPE) procurement started on 29 February, and early action was taken to train staff on the safe use of this equipment (including face masks, eye protectors/face-shields, gowns and gloves) and on infection prevention guidelines and protocols. Stocks were procured to cover two to three months' supply for frontline health workers in Jordan, Lebanon, Syria and the West Bank and for six months' supply for Gaza. Procuring sufficient PPE supplies of good quality required proved challenging in the face of global shortages and limited local alternatives and as ongoing procurement to build up a larger stock as a preparedness measure depends on funding.
- Home deliveries of two to three months' supplies of medications for elderly patients and patients with non-communicable diseases (NCDs), such as diabetes and hypertension, were carried out on a large-scale and the procurement of medicines was also accelerated. The new home delivery initiative (in Jordan, Syria, the West Bank and Gaza) provided a lifeline for refugees most at risk of contracting the virus – the elderly, people with disabilities and those suffering from NCDs. Distribution targets on the whole were met, although coverage was less in some areas, such as Muzeirib and Jilin villages in Dera'a governorate in southern Syria, due to ongoing conflict and access restrictions. The e-Health (electronic health information system) that UNRWA built in-house has proven to be critical in facilitating this initiative.
- Most health facilities remained opened but with reduced services, which resulted in an overall reduction of 50-60 per cent in patient visits. A triage system to screen patients with respiratory symptoms was established in all health centres in early March to minimize the contact between these patients and others, and to reduce the risk of potential transmission of respiratory diseases, and in particular COVID-19, among those seeking health care. Appointment systems were introduced in most health centres using hotlines to reduce foot traffic and over-crowding when health centres resumed more services in June.
- Toll-free hotline services (telemedicine) provided refugees with an important link to health staff, and in particular to

doctors who offered medical consultations over the phone and carried out home visits for emergency cases. UNRWA ensured that healthcare providers responding to hotline phone calls were trained on how to receive and manage gender-based violence (GBV) cases. Additional support was made available by providing psychological first aid (PFA), referral to specialized GBV and protection services and information sharing on other UNRWA services.

- In Lebanon, the Agency supported the establishment of two isolation centres, one in Sammouh School in Ein El Hilweh camp and a 96-bed facility in the Siblin Training Centre (STC) near Saida, both in partnership with Médecins Sans Frontières (MSF). At the STC Isolation Centre, trained UNRWA staff provide operational and logistical support, including all laundry, food and cleaning requirements, while MSF supports the management of the facility and maintains a permanent presence of medical and nursing staff on site to ensure the proper monitoring of patients and timely referral of complex cases.
- In Gaza, triage stations were set up in 18 UNRWA schools near to the health centres and four within the health centres. Setting up triage in schools, which have been closed since March and have more space than health centres, enabled the UNRWA health programme to ensure social distancing and the safety of healthcare staff and patients.
- Community mobilization campaigns involving volunteers, camp committees and Imams from local mosques were organized to disseminate information on COVID-19 and the importance of preventive measures such as hand washing and social distancing.
- Anecdotal evidence suggests that mitigation measures in the health centres and the professionalism and dedication of health staff contributed to an increased awareness in the refugee communities of the seriousness of the COVID-19 pandemic.
- Field health programmes adapted as best they could to movement restrictions – in the West Bank between governorates (due to the lockdown), in Dera'a province governorate in Syria (conflict-related) and in Jordan (due to the curfew and difficulties in initially obtaining permits). Movement restrictions led to staffing difficulties in a few health centres and staff rotations were operating in some Fields.
- In addition to issuing [a daily health sitrep](#) throughout the crisis with the latest epidemiological figures, the Health Department published in June a supplement to its 2019 annual report on the 'First 100 days and beyond – the UNRWA health response to COVID-19 pandemic', which is available [here](#).

Figure 1: Number of UNRWA health workers receiving personal protective equipment**Figure 2: Number of NCD patients receiving home delivery of medication**

voices from the field

UNRWA senior staff nurse Georgette is part of a dedicated team in Syria who made sure Palestine refugees in Homs stayed safe and healthy. "We have always worked as a strong team but during COVID-19 we have realized even more how much we have to count on each other. Titles or grades are not important anymore. All of us have contributed to the COVID-19 response. It was my initiative to deliver medicines to Palestine refugees who live in the countryside, up to 50 km away from Homs, and everybody has supported me with this."

Khalida el Shareef, an elderly refugee living in Homs camp, said the presence of UNRWA had been very reassuring for her. "We have grown up in and with UNRWA, it is part of us and has always supported us, even during the most difficult times. They called me and brought medicine to my home and even when I have to visit the health centre I feel safe and well taken care of."



education

The COVID-19 pandemic led to the closure of all UNRWA schools and education institutions in the five Fields from mid-March in line with host government decisions. A total of 709 schools, eight vocational/educational training centres (VTC) and two teacher training facilities were closed affecting 533,342 school students, 8,270 VTC trainees and 1,840 university students as well as 20,146 education staff. To ensure learning continuity, the Agency's Education in Emergencies (EiE) approach was adapted to respond to the impacts of the pandemic and focused on five key strands: Self Learning, Psychosocial Support (PSS), Safety and Security – Health and Hygiene issues, Technical Vocational Education Training (TVET) and Monitoring and Evaluation (M&E).

Key to the reconceptualization, and to achieving a positive balance between Agency coherence and Field contextualization in the education response, was collaboration and communication. In this respect an HQ COVID-19 EiE Task Force – led by the Director of Education (DE) with technical leads for each strand – was established with weekly or twice weekly substantive meetings held with the five Field Office Chiefs of Education. The HQ Task Force worked in different ways to ensure that the educational support it provided to the Fields was useful and appropriate – sometimes leading, sometimes following and sometimes working alongside. Another key part of the approach was that the meetings, and their outcomes, were well documented and regularly reviewed to ensure that no action points or ideas were lost.

With the 2019/2020 school year ending in May 2020, the Education Programme has worked on consolidating the lessons learned from the lockdown into guides, materials and documentation. It has also started working on the modalities for Catch Up and Back to School with a focus on adherence to the key principles of social distancing and healthy practices, and is advocating for and developing detailed plans that combine face-to-face and remote learning modalities.

Highlights

- The main achievements of the five strands can be summarized as follows:

1. **Self-Learning:** Field specific Self-Learning Materials (SLM) were developed based on existing materials and the use of wrap-around guidance to also support students to self-study using their textbooks. The HQ Curriculum Team developed five criteria to review and provide substantive feedback – written and oral – on target grade, subject(s), nature of the approach, accessibility of printed/online/DVD materials, teacher support, neutrality, and student assessments. The team is currently working on the UNRWA Guide to Developing SLM, which will draw on examples from all Fields on key elements of self-study material to support children's learning and contribute to their well-being.

2. **Psychosocial Support (PSS):** Providing PSS support was a new challenge given that school counsellors could not carry out face-to-face counselling and children could not come together for recreational activities. HQ Education established an Agency-wide sub-group of school counsellors and education health advisers to determine how best to support children through this crisis. A resource guide, "Supporting Students during the COVID-19 Crisis: A Guide to Learning, Health, Safety and Psychosocial Resources", was developed and provides a range of relevant global PSS and health and child protection resources from various sources in English and Arabic. The first version of this guide was circulated to the Fields in March 2020, and the development of the second version is ongoing with updated resources and a chapter on games and activities.

3. **Health Safety and Hygiene:** Focus during the lockdown was on ways to raise students' awareness of transmission prevention of COVID-19 through sharing messages and posters and a short animated video using the Human Rights, Conflict Resolution and Tolerance (HRCRT) approach where school parliaments worked with members of health committees to raise awareness to protect their local communities. A drawing and writing event on COVID-19 prevention was also organized. HQ Education is currently developing a "COVID-19 Prevention, Health Education, Cleaning and Disinfection Protocol for Educational Institutions Re-opening", to support Field plans for reopening healthy and safe education Institutions.

4. **TVET:** The TVET emergency response focused on access to, and the development of, remote learning, addressing PSS needs and monitoring and evaluation practices for students in higher education. "Ethical Guidelines for the Development of TVET Self-Learning Materials" was developed to ensure that the TVET self-learning materials fully conform to the core values of neutrality, subject appropriateness, confidentiality, privacy and copyrights. The Fields were also provided with a template to support them in developing an Emergency Response Plan.

5. **Monitoring and Evaluation (M&E):** This has included reviewing the existing Common Monitoring Framework indicators to determine how these would be reported on in the COVID-19 crisis; reviewing the existing EiE Bank of Indicators (launched in 2019 with input from other UN agencies and key partners) to determine which indicators were appropriate for the COVID-19 crisis; and, more crucially with the Fields, looking at how the Fields' COVID-19 education approaches were working as they were being rolled out. Studies were undertaken on students' access and hours of student and parent engagement. Building on Field studies, but taking an Agency-wide approach, HQ Education has undertaken three main studies:

i. Reviews of existing technological tools, with the HQ Information Management and Technology Department (IMTD) taking the lead and Education defining the parameters.

ii. A phone survey with (randomly selected) parents of 1,828 Basic Education students to assess the extent of students' access to technology and self-learning materials across all five Fields (May 2020).

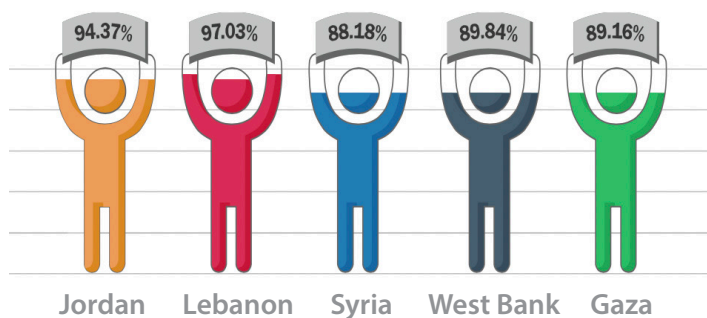
iii. An Agency-wide assessment of teacher support to students during school closure (currently ongoing).

• The UNRWA Education Programme was part of, and contributed to, the global, regional and, in some cases, the national discourse on the education impact and policy implications of COVID-19 – as panelists in several Webinars organized by UNESCO, the International Network for Education in Emergencies (INEE) and others. And, through participating in the weekly regional Inter-Agency group with UNESCO, UNICEF, WFP, UNHCR and the World Bank, it has supported the development of a Regional Framework for Back to School in the MENA region and actively contributed to the two regional forums and is now engaged in the planning of a third with the World Bank lead on learning loss and a proposed Ministerial meeting.

Figure 3: Number of pupils and students affected by school/VTC closures



Figure 4: Percentage of students who used any self-learning resources during COVID-19 school closures (parent-reported)





Omar Ramzi, Grade 6 student, with his drawing for the UNRWA "Protect Yourself" art competition. Azmi Mufti Elementary Boys School, Irbid, Jordan. © 2020 UNRWA Photo

voices from the field

Seven hundred creative young students in Jordan participated in an UNRWA art competition, "Protect Yourself", to spread awareness of COVID-19 and to show children ways to protect themselves and those around them with the help of simple tools and skills. Omar Ramzi, a Grade 6 student at UNRWA's Azmi Mufti Elementary Boys School in Irbid, jumped to the challenge created by the lockdown and the difficulties of not meeting friends and not being in school. "I love drawing," said Omar. "It's my way to support my friends and siblings to encourage them to stick to the rules of wearing masks and social distancing. We used to spend a lot of time at home after the closure of our schools and it was hard to get used to this new life. Drawing was the only way I could express my feelings, fears, and frustrations," he said.

Sheikh Ahmad Al-Khatib, age 88, lives in Neirab camp in Aleppo with his wife and son who is blind. Sheikh Ahmad is an ex-teacher and Imam and has been giving private lessons to Palestine refugee students on a voluntary basis as a service to his community. "Today I see UNRWA schools opening again for children in Grade 9 to prepare for their exams. I encourage all students to study hard. I advise the children of this generation to learn as much as they can since knowledge and science are important in life and cannot be taken away by any conflict or pandemic. Education is the most important treasure we have and UNRWA provides this unique opportunity."

Maryam Ibrahim, age 15, lives with her family in a partially destroyed house in the Ein el Tal camp in Aleppo. "When the schools closed because of COVID-19 I was very worried that I wouldn't be able to follow the distance learning. In our house we don't have electricity and my family can't afford expensive Internet costs. I was very thankful when UNRWA brought print outs of all the learning materials to my home and stayed in contact with me to make sure I was able to follow the classes remotely. Studying is very important for me. I'm in Grade 9 now and I would like to become an artist like my sister who is a student at the Faculty of Fine Arts. Her beautiful drawings on the walls of our house make it a nice place, despite the damage and destruction."



relief & social services

Relief and Social Services Programme offices were closed throughout the lockdowns and regular social work interventions suspended in all five Fields. This has proved exceptionally challenging for RSS staff who are tasked with supporting the most vulnerable refugees, particularly refugees with disabilities, the elderly and families registered with the Social Safety Net Programme (SSNP).

Highlights

- Phone hotlines were established in all five Field offices to enable refugees to phone in for information on Agency services. Hotline operators were trained on how to manage distress calls and offer basic information. The Palestinian Counselling Centre provided hotline training to social workers and counsellors in the West Bank and Gaza and the School of Social Work at St Joseph University carried out training for staff in Lebanon and Syria.
 - Social workers followed-up individual cases through phone calls and WhatsApp to provide health, hygiene and nutrition advice and to give support and information on emergency services. This remote follow-up was particularly important for the large number of elderly refugees living alone without family support in Syria where numbers are high as a result of 10 years of conflict. Social workers have also been providing remote psychosocial support services (PSS) via phone calls, including to individuals facing sexual and gender based violence (SGBV) and child protection issues, and a PSS first aid hotline was set up in the West Bank.
 - Support for refugees with disabilities has included establishing a support system for children and their families and providing prosthetic and other assistive devices through home deliveries or through community-based organizations (CBOs), as in Syria. Toys were delivered to children in the Rehabilitation Centre for the Visually Impaired (RCVI) in Gaza. Deliveries of diapers and urine bags (West Bank) and hygiene kits for children (Gaza) were also carried out.
 - A new home delivery of food baskets was started in Gaza in April to mitigate community transmission of the virus, especially critical given Gaza's high population density. From March to 30 June, 213,545 families in Gaza (over one million individual refugees) received their basic food supplies through home deliveries. This is a major achievement and the largest single food distribution effort the Agency has undertaken. Monitoring and evaluation teams have been contacting families for feedback.
 - UNRWA field staff, including teachers and sanitation labourers, have volunteered with food packing and home deliveries. Where distribution centres have remained open safety measures have been put in place to fast track procedures to maintain social distancing and avoid crowding.
- In the West Bank, in addition to distributing food vouchers to vulnerable refugees as part of its COVID-19 relief response, the Agency ensured that isolated Bedouin and other herder communities were supported and, in coordination with WFP, continued to distribute food parcels to remote communities. Food and non-food items (NFIs) were also delivered to families under quarantine in the West Bank and Ramadan suhoor food baskets were provided to a small number of the most vulnerable families in Gaza in May.
- Eligible ex-Gazan refugees in Jerash camp (Jordan) have been provided with emergency cash payments, as have eligible Palestinian refugees from Syria (PRS) and Iraq (PRI) in Lebanon and Jordan.
 - In Lebanon, UNRWA provided cash assistance to 302,824 persons registered with UNRWA in an effort to mitigate the double crisis affecting Palestine refugees stemming from Lebanon's severe financial, political and economic crisis as well as the impact of COVID-19 confinement measures.
 - In Syria, 379,074 Palestine refugees (116,854 households) received cash assistance to mitigate the additional socio-economic hardship due to COVID-19.
 - In response to in-person registration services being temporarily suspended a new on-line registration system was established to enable refugees to directly update their own personal files. The on-line registration system, which went live on 7 June, is in its pilot phase and the Agency aims to continue this system although refugees who are registering for the first time will still need to do so in person (registration offices started to reopen in June).
 - The sudden changes to the working and personal environments staff are experiencing are inevitably stressful and staff care support has been set up as a result. A confidential individual counselling service is available to all staff upon request to provide additional support with issues arising from the COVID-19 crisis.

Figure 5: Number of refugees who received their food assistance through home deliveries

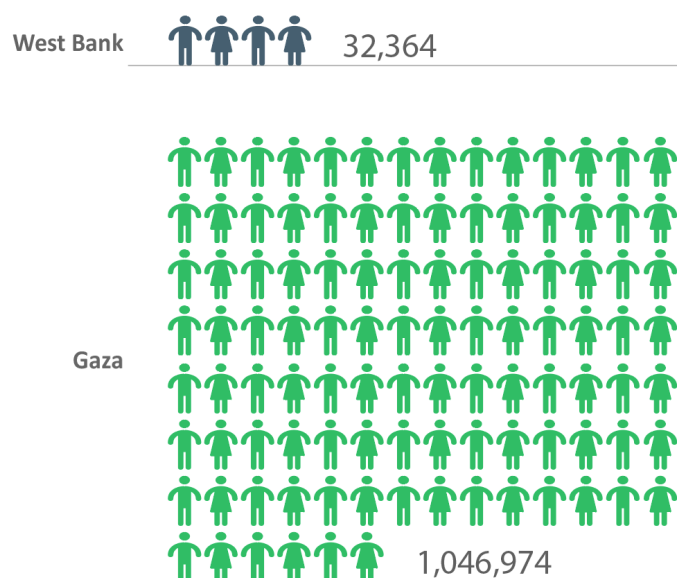


Figure 6: Number of Palestine refugees receiving cash assistance to mitigate additional socio-economic hardship due to COVID-19

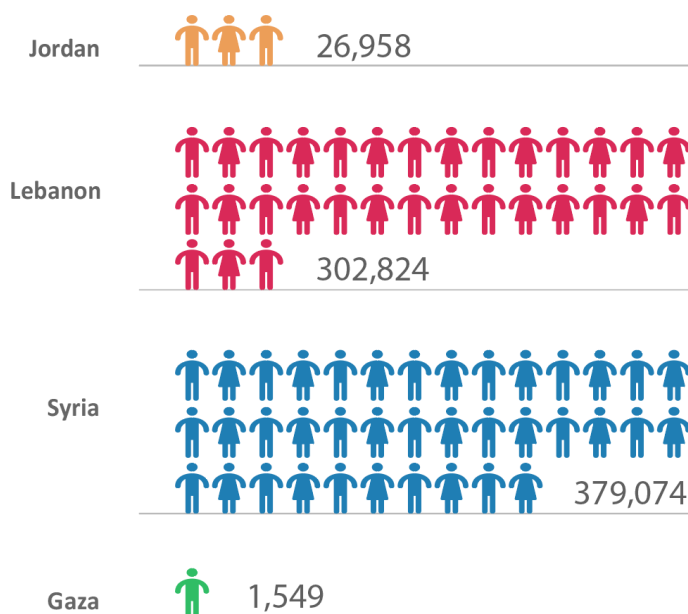


Figure 7: Number of Palestine refugees receiving food vouchers (West Bank only)





voices from the field

In the Jenin area in the North West Bank, 281 quarantined refugee and non-refugee families were provided with food and hygiene parcels. In the town of Barta'a, which is cut off behind the West Bank Barrier in "Area C", a refugee woman and her three children were infected with COVID-19 and quarantined in June. The Palestinian Authority (PA) Ministry of Health (MoH) was unable to reach the area due to Israeli security restrictions and UNRWA was the only agency able to gain access to support this family and others. Coordination with preventive medicine teams and the MoH played a major role in identifying home-quarantined families, saving time, effort and credibility in the targeting of households. Food and hygiene parcels were distributed to the home-quarantined families by social workers provided with protection and prevention tools in coordination and cooperation with the emergency committees at the locations.

Wafa Nahal, a 53-year-old widow bringing up three children in Beach camp in Gaza, said: "I am a cancer patient and I was worried about going to the distribution centre to get food assistance. Thanks to UNRWA for bringing my parcel to my home. I feel that they protected me."



protection

Due to lockdowns/curfew and movement restrictions all in-person protection monitoring and direct community engagement activities were temporarily suspended between March and May and all new case documentation and referrals were carried out remotely. Existing protection cases continued to receive support through remote case management and referrals to other UNRWA services and external partners. Identification and reporting of cases of child abuse, neglect, violence, or exploitation has proved challenging, particularly with the closure of schools and other facilities. Reported cases

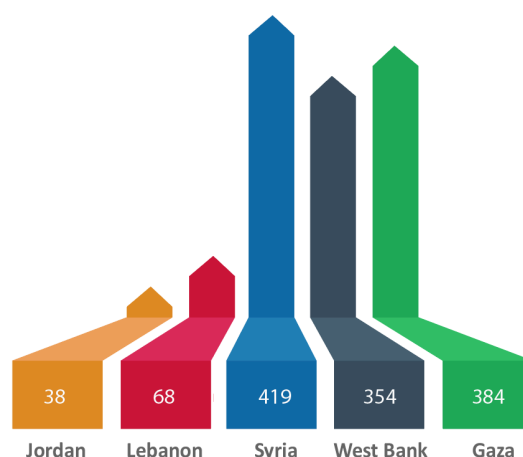
of gender-based violence (GBV) have varied between the Fields and protection responses have depended on the existing capacity of established referral pathways and networks that could provide support under such restrictive movement conditions. Measures were gradually undertaken to ensure adequate assistance to survivors and included enhancing coordination, updating information on available services and their modalities, and informing communities.

Highlights

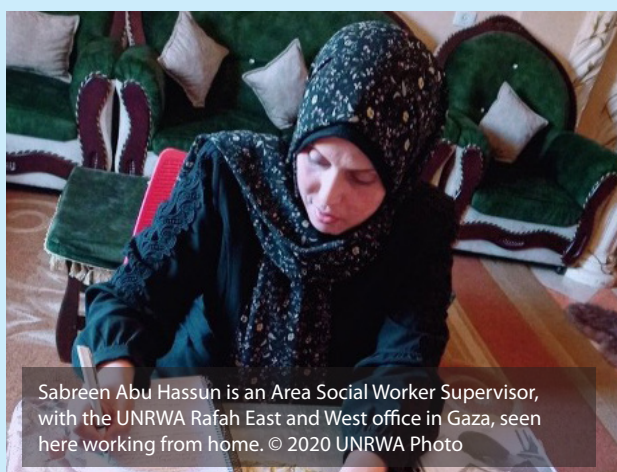
- Protection principles were mainstreamed into Field COVID-19 response plans, including by targeting key messaging to vulnerable groups and communities. The HQ Protection Division provided Field protection teams with guidance on disability inclusion, protection mainstreaming and integrating a gender lens, including for GBV, into the COVID-19 response. Support was also provided on communication to communities on available services for GBV survivors; updating the GBV referral pathways and existing data collection modalities; and mitigating the risks of cyber-bullying. Support to the Health Programme on addressing GBV during the pandemic focused on developing perception surveys among staff and communities on the increase in GBV as well as assessing the existing capacity in UNRWA health centres and knowledge about available GBV related services for Palestine refugees. The HQ Protection Division also coordinated programme and Field reports and activities mapping on COVID-19 that were submitted to the Executive Office of the UN Secretary-General.
- In addition to the issuance of an Agency-wide guidance on disability inclusion in the context of COVID-19, Field offices received individualized support to ensure tailored activities to address the needs and rights of persons with disabilities.
- The AVAC (Addressing Violence Against Children) coordinator worked through the COVID-19 Education in Emergencies (EiE) response to support an Agency-wide team of education staff overseeing the delivery of psychosocial support (PSS) and guidance and counseling, ensuring a safeguarding lens was in place for remote learning and education technology. An Agency-wide campaign around Staying Safe Online was designed with inputs from each field office. This will run from mid-August across all five Fields and includes the development of an animation, a series of three radio broadcasts in Gaza, the development of podcasts in Lebanon and a social media campaign across a range of social media platforms.
- Protection and Neutrality (PN) teams in the five Fields engaged with communities and provided support to other Agency programmes making sure that vulnerabilities were addressed and protection standards upheld. PN teams supported the activation of RSS hotlines in Syria, participated in the design and planning of the COVID-19 Isolation Centre at the STC in Lebanon, coordinated the real-time evaluation of the COVID-19 response in Syria, and developed a quality assurance framework to ensure protection is mainstreamed in the COVID-19 response in Gaza.
- Engaging with and reaching out to communities was key to reducing vulnerabilities. A psychological first aid hotline was established by the West Bank PN Unit to provide PSS and practical help to refugees suffering from serious crisis events.

Refugees seeking assistance on a range of issues – from not having enough food for their families to needing support for children with disabilities or elderly relatives, or with concerns around GBV, child or general protection – were referred to the Agency's existing services or to partner organizations or host authorities. The unit also maintained communications with 22 vulnerable communities to monitor and assess urgent needs and to support programme responses. Of particular concern were refugees with limited or no access to health services in 'Seam Zone' locations between the West Bank Barrier and the Green Line. In Syria, emergency response teams were established in each area and camp and protection contacts were shared with frontline staff and refugees.

- Outreach materials were developed and distributed alongside the delivery of food and medicines to explain referral pathways and available hotlines, raise awareness, and to advocate for a reduction in reliance on negative coping mechanisms, including child marriage, child labour and unsafe labour. For example in Jordan the PN Unit collaborated with school counsellors to develop an outreach plan for students and supported its partner Ruwwad Al Tanmeya to create an online group for parents that focuses on raising awareness about child labour.
- PN teams in the five Fields coordinated and supported the response to GBV. They set up GBV hotlines in Jordan and coordinated with national organizations and GBV/Protection clusters to facilitate referrals of GBV survivors and their access to services in Jordan and Lebanon. In Syria, UNRWA-supported Family Support Offices provided remote advice and support with legal issues, including on civil documentation, and were reopened part-time in April to provide case management and legal advice to GBV survivors. In Lebanon, the PN team prepared an outreach and messaging strategy targetting women and girls to mitigate the increased risks during the pandemic related to domestic violence and violence against children. Dedicated rooms were set up in four Agency-supported Women's Programme Association Centres to provide remote case management and PSS support for GBV survivors.

Figure 8: Number of GBV survivors assisted

voices from the field



Sabreen Abu Hassun is an Area Social Worker Supervisor, with the UNRWA Rafah East and West office in Gaza, seen here working from home. © 2020 UNRWA Photo

Psychosocial support (PSS) interventions in Gaza are provided via hotlines staffed five days a week, from 7.30 a.m. to 3.00 p.m., by Area Social Work Supervisors (ASWS) and their teams of social workers. "We conduct interviews and home visits to high risk and critical cases taking into consideration precautionary and safety procedures for beneficiaries and staff members in order to provide urgent interventions within 24 hours", said Sabreen Abu Hassun, the ASWS for Rafah East and West offices. "Working through the hotlines is a challenge for clients and staff. We build a confidential and professional relationship by applying active listening skills and showing empathy to encourage clients to interact. For example, a critical protection case of a 7-year-old boy was referred to the RSSP by one of the UNRWA programmes. We provided urgent intervention for both

the child and the family, including by assessing the risk level, conducting a case conference, meeting the child and his family, and coordinating follow-up with UNRWA programmes and the Ministry of Social Development. This case is still active and receiving PSS.



infrastructure & camp improvement

Environmental health operations continued throughout the lockdowns/curfews in all 58 recognized Palestine refugee camps and in many informal gatherings, especially in Syria, in cooperation and coordination with host authorities to enable staff to travel between locations. Sanitation services, including the cleaning and disinfection of streets and alleyways in the camps, solid waste collection and disposal, and the washing of garbage containers were all carried out. These services were increased during Ramadan in May. Daily spraying of diluted chlorine was undertaken to disinfect Agency facilities that remained open, such as health centres and sanitation offices, and food distribution trucks, compactors and other equipment were also disinfected along with areas surrounding solid waste containers.

Highlights

- Over 400 additional daily-paid sanitation labourers were hired across all Field offices, as well as some drivers in Gaza, utilizing project funds to fill existing gaps and to cover extra workloads. All sanitation labourers were provided with PPEs and COVID-19 prevention guidelines for safe work practices were put in place.
- Additional water supplies were provided in Gaza through the operation of nine water wells in three camps (Khan Younis, Rafah and Jabalia) to supply water to around 18,800 refugee households. In Syria, maintenance of sewerage networks was carried out in Neirab and Dera'a camps along with maintenance works for a water submersible pump at Sbeineh camp.

- ICIP teams worked on several projects to enable existing Agency installations to be utilized for the COVID-19 response. In Lebanon, Siblin Training Centre (STC) and Sammouh School were modified to accommodate temporary COVID-19 isolation centres and work is in progress to rehabilitate the old Palestine Red Crescent Society (PRCS) hospital in El-Buss camp. Eighteen schools and four health centres in Gaza were adapted and equipped for use as COVID-19 medical points. An additional 27 schools in Gaza were modified for use as distribution centres.

- Planned assessments on refugee shelters for upcoming repair and rehabilitation projects were unable to go ahead due to the lockdowns and most construction activities, including ongoing shelter construction, ceased in March. Some ongoing shelter repair was able to continue to completion in Lebanon, Gaza and the West Bank.

- Having health and safety protocols in place enabled construction work to resume without delay in Jordan, Lebanon

Syria and the West Bank once lockdown restrictions were gradually lifted from mid-May onwards. Contractors are committed to completing the ICIP COVID-19 Safety Plan checklist on a daily basis and site engineers are reporting on compliance to ICIP management.

- Limited work was able to resume in Jordan on Zohour Health Centre, Zohour School, Amman New Camp School and Zarqa Health Centre. By mid-June, limited shelter rehabilitation, installation management and infrastructure work had resumed in Lebanon with 30 per cent on-site staff capacity. Work on the Beit Ula Girls' School in the West Bank was temporarily suspended at the end of June due to COVID-19 cases in the area. Community development projects for the rehabilitation of roads and sewerage networks restarted in the West Bank in May in Jalazone, Kalandia and Aqbat Jabr camps, however works were suspended following the lockdown in early July in response to a new wave of COVID-19.

Figure 9: Number of Palestine refugee camps benefitting from continued and increased regular solid waste and/or water supply management services

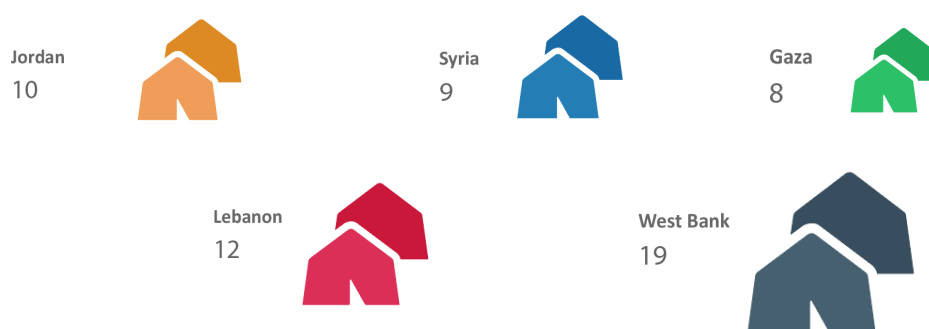
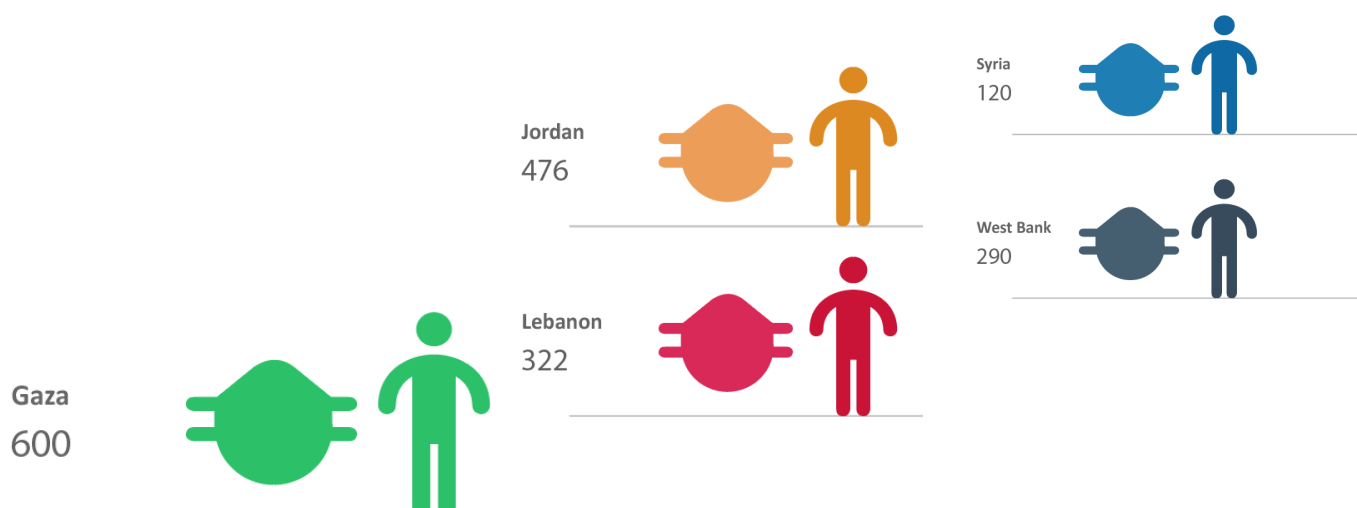


Figure 10: Number of sanitation labourers receiving personal protective equipment





UNRWA COVID-19 Isolation Centre in the Agency's Siblin Vocational Training Centre (STC) in Lebanon. © 2020 UNRWA Photo

voices from the field

Suleiman, a cleaner for 37 years at STC, is now cleaning the Siblin Isolation Centre. "Serving my community during this epidemic makes me feel proud. I am now on loan to do cleaning in this isolation centre. I was serving students and now I will be serving patients. I received training on infection prevention and control measures so that I can protect myself and my family from any infection from the virus."



microfinance

The UNRWA microfinance programme, operating in Jordan, Syria, Gaza and the West Bank, was providing loans to 44,152 clients when credit operations were suspended in March 2020. These loans provide sustainable income-generating opportunities for refugees and other poor and marginalized groups. With local economies shut down, and given the growing financial difficulties most clients were facing, loan repayments were deferred during April and May in Jordan, Syria and Gaza and in the West Bank for three months up to June. No new loans were processed during this period up to 31 May. This has proved exceptionally challenging for the Microfinance Department (MD) in terms of losing income from operations taking into account that the programme is self-financing and covers operational costs from the income earned on interest.

Highlights

- All microfinance branches in the four Fields (eight in Jordan, four in Syria, eight in the West Bank and three in Gaza) were closed, as was the MD at HQ in Jerusalem. Staff continued to work remotely from home on a number of projects and loan officers kept in touch with clients to ask about their wellbeing and provide business counselling and follow-up on plans for future loan disbursements. Branch offices continued to receive repayments from clients able to repay their loans and processed loan clearances for clients who were closing their loans.
- Communicating with staff was done through e-mail, social media and telephones to monitor staff wellbeing and to disseminate information and guidance. Work plans were developed for all organizational units to ensure staff accountability on their tasks and actions taken.
- A number of working teams were assigned to mitigate the impact of the COVID-19 lockdown by finalizing projects, including: solving all technical requirements; implementing loan deferments for MD's outstanding portfolio as of 31 March 2020; revising the MD business plan to reflect the deferment period when loans were not disbursed (April and May) and calculating the expected loan disbursement up to the end of 2020; developing programme operational and financial manuals, training materials and finalizing inputs for the annual report. The operation team continued to monitor developments in the four Fields to provide updated information on the most affected sectors of local economies in preparation for the resumption of operations.

• The senior management team has been working on identifying MD's future role in development initiatives and is developing interventions to support and improve the livelihoods of poor and marginalized groups through economic empowerment and self-reliance as part of the regional initiatives for economic recovery after the COVID-19 crisis ends.

• On 31 May, MD in Gaza reopened its three branches full-time with staff working on a rotational basis. MD branches in the other Fields were gradually opened through June and the collection of payments, loan disbursements and low profile lending activities resumed on 1 June.

voices from the field

One of MD's successful clients, Amna Abu Nada, lives in Zaytoun neighborhood in Gaza City and is a peddler who sells clothes in street markets. Amna joined the programme in 2004, and since then has received 22 Women Household Credit (WHC) loans. The last loan, worth US\$ 500, is still active. Amna said: "During the current pandemic crisis, the UNRWA MD thankfully deferred two loan repayments for April and May and this helped me keep my business capital. Thanks for the MD team for asking about our wellbeing and providing guidance on following the precautionary measures during such difficult times."

Figure 11: Microfinance loans disbursed in June 2020

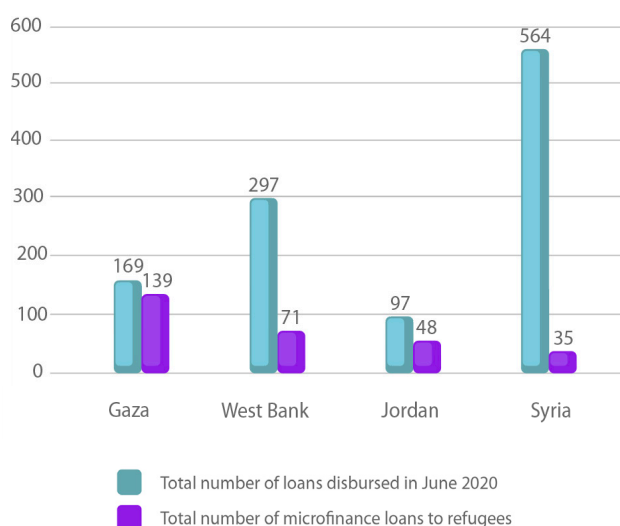
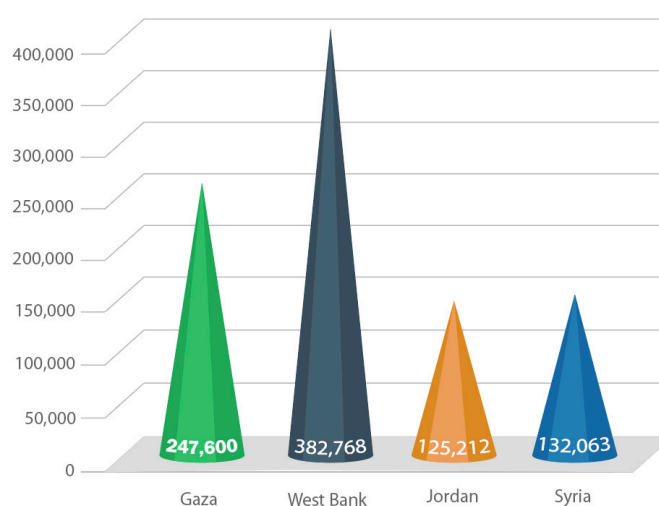
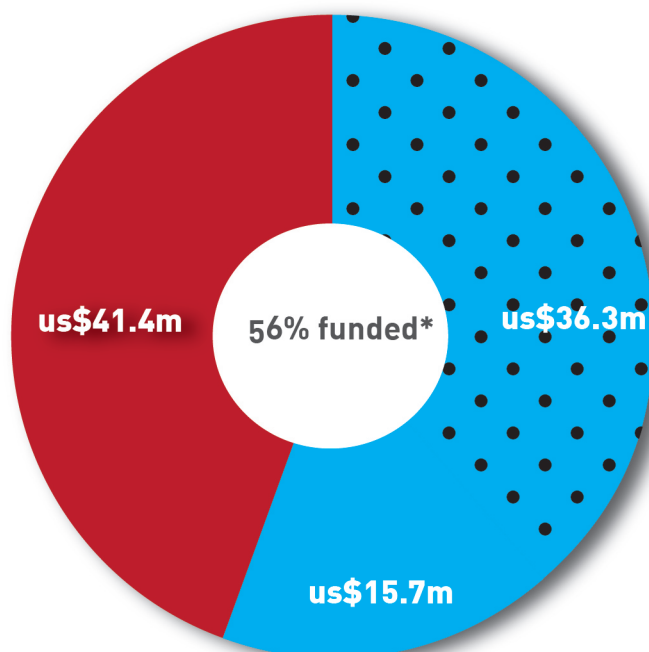


Figure 12: Total value of microfinance loans (in US\$)



covid-19 flash appeal funding status



us\$93.4 million
current requirement

 actual funding gap

 received funds

 confirmed pledges (not disbursed)

* Percentage of confirmed, non-disbursed pledges and received funds against the annual requirement

** Confirmed pledges for the COVID19 Flash Appeal include US\$ 2.6 million in funds re-allocated from prior pledges

Projects Portal: US\$ 39 million have been received for 2020 priority projects (US\$ 6 m) and other project funding (US\$ 33 m).

New pledges announced at the **UNRWA Extraordinary Ministerial Pledging Conference** on 23 June 2020 are being reflected when contribution agreements are in place and funds have been received.

*** As of 15 June 2020



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