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unrwa flash appeal for the covid-19 response report

for the reporting period march to july 2020



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The development of the UNRWA Flash Appeal for the COVID-19 Response Report was facilitated by the Department of Planning, UNRWA HQ.

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 over 5.7 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 potential in human development, pending a just solution to their plight. UNRWA'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.

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Cover photo: A student in class at the UNRWA Shu'fat Girls' School, East Jerusalem. © 2020 UNRWA Photo by Kazem Abu-Khalaf

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executive summary

The COVID-19 pandemic continues to affect the health and to disrupt the lives of people across the world. As of 15 September 2020, WHO reported 29 million COVID-19 cases globally, including 926,544 deaths. In the absence of a vaccine, all countries, including those with advanced health systems, continue to be under unprecedented pressure to respond to increased demands for treatment, testing and support to citizens affected by the health and socio-economic consequences of the virus.

During the period covered by this Appeal (March-July 2020), cases of COVID-19 were reported in all UNRWA fields of operation, (see box 1), with the number of cases increasing dramatically in West Bank and Lebanon from June onwards. At the time of writing, the situation was deteriorating in all UNRWA fields. In Syria, national health response capacities, already weakened by a decade of conflict, are struggling with an increased number of cases. In Gaza, where

the strict measures imposed by the authorities had managed to contain the outbreak, the first local transmission cases were reported on 24 August and numbers have increased rapidly since then. From August onwards, COVID-19 cases were also on the rise in Jordan.

Palestine refugees in all fields have been affected by the COVID-19 pandemic. As of the end of July, there were 1,932 confirmed cases of COVID-19 among Palestine refugees in UNRWA five fields of operation; many more were also suffering the consequences of lockdowns, quarantine and movement restrictions, which further reduced their access to employment opportunities pushing them into deeper poverty and vulnerability. In line with the decisions taken by the local authorities, UNRWA educational institutions were closed in all fields of operation from March onwards, affecting a total of 533,342 school students, 8,270 Vocational Training Centres (VTC) trainees and 1,840 university students.

The UNRWA response

Since the beginning of the outbreak, UNRWA rapidly adjusted its operations to respond to the challenges created by COVID-19, ensuring the continuity of critical basic services for Palestine refugees.

During the reporting period, through this appeal, Personal Protective Equipment (PPE) was procured and distributed on a regular basis to all UNRWA frontline staff, including health, sanitation workers, and other staff providing direct services to Palestine refugees. A triage system was introduced in all UNRWA health centres to safely screen patients with respiratory symptoms and avoid contact with other patients. In-person care at health centres was limited to essential services, with other consultations provided through a telemedicine approach, in order to reduce foot traffic at clinics. A two-month supply of medications was made available to Non-Communicable Disease (NCD) patients, with a home-to-home system for the delivery of NCD medications put in place in Jordan and Syria.

Through innovative approaches, the Agency continued to respond to the additional needs created by the COVID-19 pandemic. In Lebanon, in order to support patients with mild or moderate symptoms of COVID-19 who cannot safely isolate at home, UNRWA, in partnership with Médecins Sans Frontières (MSF), set up two isolation centres, one in Sammouh School in Ein El Hilweh camp and another 96-bed facility in the Siblin Training Centre (STC) near Saida. During the reporting period, the Agency also started rehabilitation works on a hospital in el Buss camp, in Tyre, for the establishment of an additional isolation centre.

To avoid any additional health hazards, environmental health services were enhanced in all Palestine refugee camps, including solid waste management and water supply. All sanitation workers were provided with adequate PPE to perform their functions safely.

Even before the pandemic, Palestine refugees were among the most vulnerable groups in the region, facing multiple overlapping crises.

In order to alleviate the increased socio-economic hardship caused by COVID-19, UNRWA provided additional relief assistance in the form of cash and / or food across its five fields of operation. Between March and July 2020, 840,746 Palestine refugees in Syria, Lebanon, Jordan and Gaza received additional cash assistance to help them meet their basic needs and prevent additional shocks due to the loss of income opportunities and lockdowns. In the West Bank, 31,200 Palestine refugees directly affected by the socio-economic ramifications of COVID-19 (e.g. loss of job opportunities due to movement restrictions) were provided with food vouchers. In addition, 13,077 families who had to undertake home quarantine were provided with in kind food parcels.

In Gaza, in addition to providing cash assistance to more than 43,000 vulnerable refugees, UNRWA also adjusted the delivery system for its food operation to avoid a pipeline break. During the reporting period, more than one million refugees received their food parcels directly at home, avoiding overcrowding at UNRWA distribution centres and preventing the risk of contagion.

Following the closure of UNRWA educational facilities in March in response to COVID-19, to ensure the continuity of learning for students in 709 UNRWA schools and eight Technical and Vocational Education Training Centres (TVET) the Agency's Education in Emergencies (EiE) approach was adapted to respond to the impacts of the pandemic. The focus was on five key strands: Self Learning, Psychosocial Support (PSS), Safety and Security – Health and Hygiene issues, TVET and Monitoring and Evaluation. Self-learning materials (SLMs) were distributed to students in all fields through e-mail, online platforms and social media; hard copies were also printed and distributed with a special focus on students facing connectivity issues. Where schools were able to re-open (or plan to re-open in the new 2020/2021 school year), the Agency also ensured that proper cleaning and disinfection of facilities was conducted.

Mental health and psychosocial support (MHPSS) continued to be provided remotely through school counsellors, health staff and relief and social services (RSS) social workers, to help Palestine refugees cope with the additional stress created by COVID-19.

A number of protection interventions were also maintained through remote modalities, with special attention to the most vulnerable groups, including GBV survivors, older persons and persons with disabilities. Phone lines were also made available to Palestine refugees in all fields to inform them about available services and refer them to appropriate channels as needed. Referral to external partners for the provision of specialized

support also continued to the extent possible through remote modalities.

Finally, throughout its interventions, UNRWA raised awareness on COVID-19 within the Palestine refugee community, promoting preventive measures and safe health practices and combating the stigma associated with COVID-19. The response strategy rolled out through this appeal was aligned with the priorities and needs identified by the Humanitarian Country Teams (HCTs) in the different fields of UNRWA operation and was reflected in the OCHA coordinated Global Humanitarian Response Plan (GHRP) for COVID-19.

UNRWA would like to thank the many donors that supported its COVID-19 response under this Appeal. During the reporting period, the Agency received 61.7 per cent of the required funds for this appeal. This allowed for emergency services to be maintained and provided with the adequate protective equipment, and for some relief assistance to be distributed to mitigate the socio-economic consequences of the pandemic. However, underfunding prevented the Agency from meeting all needs under the relief component of the appeal. In order to continue to respond to the most urgent needs caused by COVID-19, UNRWA issued a new Appeal covering the period August to December 2020.¹ Once more, the Agency calls for the international community's support to ensure that lifesaving assistance can be provided to Palestine refugees in these extraordinarily challenging times.

Cumulative case numbers and deaths by UNRWA field of operation, as at 30 July 2020

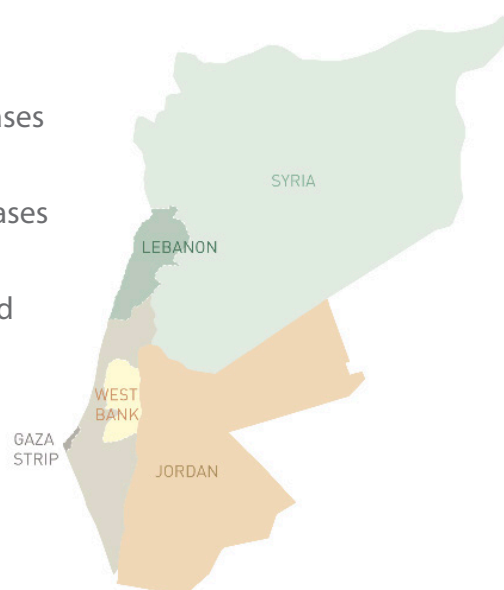
Gaza Strip: 76 confirmed cases; 1 death; 49 confirmed cases amongst Palestine refugees*

Jordan: 1,187 confirmed cases; 11 deaths; 9 confirmed cases amongst Palestine refugees*

Lebanon: 4,205 confirmed cases; 55 deaths; 54 confirmed cases amongst Palestine refugees*

Syria: 717 confirmed cases; 40 deaths; 9 confirmed cases amongst Palestine refugees*

West Bank: 11,473 confirmed cases; 80 deaths; 1,811 confirmed cases amongst Palestine refugees*



***Unofficial internal data**

funding summary: flash appeal for the covid-19 response

Table 1: Flash Appeal for the COVID-19 response funding summary by field, 01 March – 31 July 2020 (US\$)

Programme Interventions	Amount	Gaza	Jordan	Lebanon	Syria	West Bank	HQ	Total
Health	required	6,257,345	868,825	10,240,869	825,114	1,787,160	44,400	20,023,713
	received	5,861,561	815,981	3,311,230	1,159,611	2,946,775	32,559	14,127,718
	difference	395,784	52,844	6,929,639	+334,497	+1,159,615	11,841	5,895,995
Hospitalization	required	2,553,000	133,200	10,093,660	222,000	0	0	13,001,860
	received	2,256,494	0	1,064,308	0	0	0	3,320,802
	difference	296,506	133,200	9,029,352	222,000	0	0	9,681,058
Education in emergencies	required	646,353	754,772	845,197	422,135	323,971	0	2,992,428
	received	587,793	314,000	862,545	96,300	254,894	16,670	2,132,202
	difference	58,560	440,772	+17,348	325,835	69,077	+16,670	860,226
Sanitation, hygiene and waste management	required	222,000	592,407	558,868	1,550,388	1,278,093	0	4,201,756
	received	200,000	560,259	629,510	135,764	1,722,618	0	3,248,151
	difference	22,000	32,148	+70,642	1,414,624	+444,525	0	953,605
Cash and food assistance	required	4,280,737	13,119,395	19,281,280	13,919,400	2,064,305	0	52,665,117
	received	3,428,045	10,180,488	13,051,976	5,002,752	1,823,864	0	33,487,125
	difference	852,692	2,938,907	6,229,304	8,916,648	240,441	0	19,177,992
Protection	required	21,978	140,332	66,851	46,463	0	0	275,624
	received	0	122,727	0	0	16,294	0	139,021
	difference	21,978	17,605	66,851	46,463	+16,294	0	136,603
Risk communication	required	0	0	0	0	0	206,793	206,793
	received	0	0	0	0	18,870	0	18,870
	difference	0	0	0	0	+18,870	206,793	187,923
Monitoring and evaluation	required	0	0	0	0	0	66,600	66,600
	received	0	0	0	0	0	0	0
	difference	0	0	0	0	0	66,600	66,600
To be allocated		74,536		27,397	132,542	86,235		1,184,561
Total	required	13,981,413	15,608,931	41,086,725	16,985,500	5,453,529	317,793	93,433,891
	received	12,408,430	11,993,455	18,946,966	6,526,970	6,869,550	49,229	57,658,449
	difference	1,572,983	3,615,476	22,139,759	10,458,530	+1,416,021	268,564	35,775,442

syria: sector-specific interventions

Strategic objective 1: Contain the spread of COVID-19 and decrease morbidity

Health

Indicator	Actual	Target
Number of UNRWA health workers receiving PPE	435 ²	450
Number of NCD patients receiving home delivery of medicines	1,395	8,000
Number of UNRWA hospitalizations accessed by Palestine refugee patients for non-COVID-19 treatment	0 ³	1,000

UNRWA in Syria has rapidly adapted to continue to provide primary health services through its health facilities, while ensuring that preventive measures are in place to reduce the risk of COVID-19 transmission. The Agency set up a triage system at its health facilities to provide a clear patient pathway for those with respiratory symptoms. Since the onset of the COVID-19 response, 40,164 patients at UNRWA facilities in Syria have reported respiratory symptoms and have been examined following the triage care and related protocols. As of 31 July, nine confirmed COVID-19 cases had been identified within the Palestine refugee community in Syria.

As part of preparedness and preventive measures, 435 health workers (57 per cent female) at the Agency's health facilities were provided with PPE and UNRWA health centres (HCs) were equipped with increased quantities of soap and alcohol-based hand rub. Enhanced and more frequent deep cleaning and disinfection also took place to reduce the risk of transmission for both staff and patients.

In order to reduce footprint at its HCs, UNRWA in Syria also rolled out a number of measures to reduce the risk of transmissions. These included the provision of two-month

prescription to Non-Communicable Diseases (NCD) patients; door-to-door distribution of medicines to older persons with pre-existing medical conditions; the activation of a telemedicine system, enabling patients to seek support remotely; and the suspension of non-critical health care services at UNRWA health facilities.

Under this appeal, UNRWA had planned to reach 8,000 NCD patients above 60 years through door-to-door distribution of medicines. However, in order to maximize existing resources (including staff needed for the door-to-door distribution) the Agency prioritized patients above 65 years of age for this intervention. Moreover, some families decided to delegate younger members to collect medications for their elderly parents/relatives. Between March and July, the Agency reached 1,395 patients (of whom 824 were female) through door-to-door delivery of medicines.

Under this flash appeal, UNRWA did not offer hospitalization support to COVID-19 patients due to the relatively low number of confirmed cases until late June. However, this scenario is changing rapidly as of July 2020, and UNRWA may need to scale up its hospitalization interventions moving forward, to be reflected in the next reporting period.

Water and sanitation

Indicator	Actual	Target
Number of vulnerable households receiving hygiene kits	19,915	39,000
Number of Palestine refugee camps benefitting from continued regular solid waste management services	10	10
Number of sanitation labourers receiving PPE	125	120

One of the main priorities for UNRWA at the onset of the COVID-19 crisis was to maintain provision of WASH services and solid waste management in Palestine refugee camps.

The Agency provided 125 sanitation labourers deployed in all ten accessible camps (Yarmouk and Ein El-Tal remain largely destroyed and with access constraints) with the needed PPE, including masks and gloves. Garbage collection points and large areas within camps were cleared on a regular basis. Additional sanitation labourers were also hired and deployed as needed to address challenges related with movement restrictions imposed by the authorities to prevent the spread

of COVID-19. WASH targets were met despite procurement challenges, as prices of PPEs and sanitization items continued to fluctuate regularly due to soaring demand and the lack of availability of some items on the market.

To address the specific needs of vulnerable categories of Palestine refugees, UNRWA planned to distribute hygiene kits to approximately 39,000 Palestine refugee households with a focus on those headed by older persons, and families with members with disabilities. Funding was available to cover the needs of approximately 19,915 households (49,915 individuals).

Strategic objective 2: Ensure that Palestine refugees are able to meet their basic needs, mitigating a further deterioration in their humanitarian and socio-economic conditions, with a particular focus on the most vulnerable

Cash assistance

Indicator	Actual	Target
Number of vulnerable individuals (and households) receiving cash assistance to mitigate additional socio-economic hardship due to COVID-19	414,615 individuals/ 121,782 households	418,000 individuals/ 122,940 households
Total amount of cash assistance distributed through the Flash Appeal	US\$ 4,146,150	US\$ 12,540,000

Socio-economic conditions of Palestine refugees in Syria are deteriorating, due to the ongoing economic crisis and depreciation of the Syrian pound, combined with the impacts of the lockdown and other measures imposed to contain the spread of COVID-19. In order to mitigate the additional socio-economic hardship created by COVID-19 pandemic, UNRWA planned to provide US\$30 to an estimated 418,000 Palestine refugees in Syria as a top up to cash assistance provided under the UNRWA Syria regional crisis appeal.

Top up cash assistance was provided concurrently with the second round of cash distributed through the Syria regional crisis appeal, from 21 May to 30 July. Due to lack of funds the Agency was only able to provide a US\$ 10 top-up per person.⁴ During the reporting period, 414,615 Palestine refugees (52

persons with disability and 391 orphans) received this assistance.

UNRWA ensured adherence to WHO and WFP guidelines on proper hygiene and physical distancing practices and sensitized its money transfer partners on COVID-19 risk mitigation measures, including hygiene and sanitation guidelines. In order to reduce the number of in-person visits to UNRWA installations, the Agency also operated hotlines to manage queries remotely.

Due to lockdown and movement restrictions, the Agency extended its delegation system for the beneficiaries in affected areas to ensure that cash could reach beneficiaries quickly.

Strategic objective 3: Palestine refugees continue to access quality, inclusive and equitable education within the context of the COVID-19 crisis

Education in Emergencies

Indicator	Actual	Target
Percentage of students who used self-learning resources (parent-reported)	88%	80%
Percentage of TVET students participating in self-learning	87%	80%
Number of schools for which materials for improved hygiene routine have been procured in preparation for reopening	100%	100%

On 13 March, UNRWA closed its 103 schools in Syria, in line with preventive measures taken by the Ministry of Education to mitigate the spread of COVID-19. To ensure the continuity of learning, the Agency rolled out its Self-Learning Programme (SLP). Self Learning Materials (SLMs) were circulated through email and instant messaging platforms; moreover, hardcopies were provided to approximately 10,000 students in areas without internet connectivity, with for 88 per cent of students across all schools ultimately using at least one type of SLM at least once between March and May 2020. Psychosocial support services were also provided to students and teachers

remotely through group and individual sessions conducted by school counsellors over the phone and through instant messaging platforms. In line with government instructions, 58 UNRWA schools across Syria re-opened between 31 May and 13 June to provide support classes for 4,385 9th grade students in preparation for national exams. Preventative measures were applied in these schools including physical distancing, reduction in the number of students per class, sanitation of classrooms and distribution of sanitizer. UNRWA is currently undertaking steps to ensure that proper hygiene measures, including disinfecting of premises, are taken in all



103 schools run by the Agency to allow for the safe re-entry of students in September 2020. The opening of schools remains contingent on guidelines from Ministry of Education, amidst a rapid spike of COVID-19 cases in Syria in recent weeks.

As well as closing its schools, the Agency also closed its five TVET centres as a preventive measure against the spread of COVID-19. The TVET programme rolled out a distance-learning programme, which was made available to students through online platforms reaching 87 per cent of students. The TVET

programme faced challenges in reaching students who lacked access to internet or to electronic devices (mobile phone and computers). In line with the decision of the national authorities, UNRWA reopened its TVET centres on 7 June 2020. The Agency kept a number of preventive measures in place, including continuing with online delivery of curriculum whenever possible, particularly for theoretical components of courses.

Strategic objective 4: Ensure that Palestine refugees are protected from the most severe impacts of the pandemic

Protection

Indicator	Actual	Target
Number of GBV survivors assisted	449	400
Number of Palestine refugees receiving PSS counselling	4,400	3,500

In response to the COVID-19 emergency, UNRWA adapted its regular programming and modalities of service provision to ensure that protection needs of Palestine refugees continued to be identified and attended to. Eight helplines, providing information on humanitarian assistance, relief and social services, education and health were set up to allow Palestine refugees to make their queries remotely. Protection interventions were adapted including the provision of telephone-based and online psycho-social support services targeting the most vulnerable persons with a focus on older persons and persons with disabilities.

During the reporting period (March to July) a total of 449 GBV cases were identified and assisted (436 females, 13 males) by UNRWA in Syria. During the same period, a total of 4,400 Palestine refugees (1,344 males, 3,056 females) received PSS

counselling. This includes 1,468 Palestine refugee students (635 boys and 833 girls) who received PSS counseling through distant learning activities; 1,114 (283 male, 831 female) Palestine refugees who received Mental Health and Psychosocial support (MHPSS) at UNRWA clinics; and 1,818 Palestine refugees (426 male and 1,392 female) who received PSS counselling through RSS social workers. Due to lockdown and movement restrictions, many Palestine refugees were provided with PSS counselling and GBV assistance through remote modalities, including assistance and referrals via phone, UNRWA helplines and WhatsApp. When in-person assistance was provided at the UNRWA health clinics, the Agency ensured adherence to preventive measures (physical distancing, use of PPE, etc.). UNRWA prioritized outreach to vulnerable individuals and made phone calls to 10,200 older persons to check on their health status and needs.

lebanon sector-specific interventions

Strategic objective 1: Contain the spread of COVID-19 and decrease morbidity

Health

Indicator	Actual	Target
Number of UNRWA health workers receiving PPE	311 (152 male; 159 female)	301
Number of COVID-19 tests for Palestine refugees paid for by UNRWA	0 ⁵	21,000
Number of Palestine refugees using UNRWA isolation centres	10 (7 male, 3 female)	2,520
Number of UNRWA-supported hospitalizations accessed by Palestine refugee patients for COVID-19 treatment	9 (4 male, 5 female)	3,150

The UNRWA health response to the COVID-19 pandemic is aligned with the Lebanese Ministry of Public Health (MoPH) policies and protocols and with WHO recommendations. During the reporting period, the Agency continued to provide essential primary health care (PHC) services. All 27 UNRWA Health Centres continued to operate with normal working hours, and all 311 health centre staff were provided with PPE. To reduce the risk of transmission of COVID-19, additional measures were put in place, such as the establishment of dedicated phone lines to enable patients to book their appointment at HCs to avoid overcrowding. From February to May, the monthly average of daily medical consultations decreased by 57 per cent as compared to January 2020, before the introduction of COVID-19 risk mitigation measures. A triage system was also established in all HCs to safely screen patients with respiratory symptoms.

During the reporting period, UNRWA HCs continued to provide first assessments for new-borns; vaccination services for children were also maintained, upon appointment. Reproductive health services continued for high risk pregnancies and for the first assessment for new antenatal care patients.

NCD medications were distributed to cover two months of needs, while screening preventive activities, including laboratory tests, were suspended to minimize traffic at HCs.

Between March and July, UNRWA supported nine Palestine refugees with COVID-19 related hospitalization costs. Transportation for COVID-19 patients to available hospitals was provided by the Lebanese Red Cross, in coordination with the Palestine Red Crescent Society for cases inside Palestine

refugee camps. UNRWA Area Health Officers ensured that patients were managed according to health recommendations and standards. The support provided by UNRWA for the hospitalization of COVID-19 cases was complemented by a contribution from the Palestinian Embassy in Lebanon. The underachievement of the target for this intervention is due to the fact that the planned target, based on the scenario used in the National Health Strategy, assumed an infection rate of 10 per cent. However, the number of actual cases recorded amongst Palestine refugees during the reporting period was lower than forecasted. Given the increase in the number of COVID-19 cases in Lebanon as of July 2020, this figure may change in the coming months. UNRWA will continue to include a provision to support COVID-19 treatment for Palestine refugees in its appeal for August to December.

COVID-19 tests were conducted in coordination with the MoPH; as of the end of July 2020, the exact amount to be paid by UNRWA to cover these tests had not been provided yet by the MoPH.

In order to support patients with mild or moderate symptoms of COVID-19 who cannot safely isolate at home, UNRWA, in partnership with Médecins Sans Frontières (MSF), set up 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. The Agency also started rehabilitation works on a hospital in el Buss camp, in Tyre, for the establishment of an additional isolation centre. As of the end of July, there were 20 patients at STC including Palestine refugees and other nationalities.

Water and sanitation

Indicator	Actual	Target
Number of Palestine refugee camps benefitting from continued and increased regular solid waste and/or water supply management services	12	12
Number of sanitation labourers receiving PPE	450	450

The COVID-19 pandemic placed an additional strain on the environmental health services provided by UNRWA in the 12 Palestine refugee camps in Lebanon.

To avoid any additional health hazard, during the reporting period, UNRWA continued to provide WASH and solid waste management services to camps, by ensuring the adequate functioning of water wells, chlorination systems, water testing, cleaning of sewage/storm water networks, and infrastructure maintenance. In response to the COVID-19 emergency, addi-

onal sanitation labourers were hired to support solid waste collection and disposal and to conduct disinfection campaigns inside the camps. All 450 sanitation labourers were provided with PPEs including protective masks, gloves, and suits, in addition to cleaning supplies, sanitizers, and hygiene kits. Additional water pumping capacity from the water wells was also provided to support the continued implementation of essential hygiene practices in response to the COVID-19 pandemic.

UNRWA employed additional sanitation labourers to ensure continued provision of environmental health services in Palestine refugee camps across Lebanon, and help to contain the spread of COVID-19. © 2020 UNRWA Photo by Maysoun Mustafa



Strategic objective 2: Ensure that Palestine refugees are able to meet their basic needs, mitigating a further deterioration in their humanitarian and socio-economic conditions, with a particular focus on the most vulnerable

Cash assistance

Indicator	Actual	Target
Number of Palestine refugees (and households) receiving cash assistance to mitigate additional socio-economic hardship due to COVID-19	307,414 PRL (80,805 families) and 26,692 PRS (8,198 families)	229,300 PRL 27,700 PRS
Total amount of cash assistance distributed through the Flash Appeal	US\$ 13,608,210	US\$ 19,281,280

In response to the socio-economic impacts of the combined financial and economic crisis and the COVID-19 pandemic on Palestine refugees in Lebanon, UNRWA provided cash assistance to all service-eligible registered persons to mitigate further deterioration of their conditions. Both Palestine refugees in Lebanon (PRL) and Palestinian refugees from Syria (PRS) were targeted with assistance. PRL not enrolled in the UNRWA Social Safety Net (SSN) programme received the equivalent of US\$ 35 per person in Lebanese Pounds at the best preferential rate available at the time of distribution, while PRL and PRS who are receiving monthly cash assistance under ongoing programmes received respective top-up assistance to match US\$ 35 per person. The target of 257,000 was planned based on the population served by UNRWA in

2019. Disbursement of assistance started on 18 May and was on-going at the time of writing. A total of 89,003 families (334,106 persons) had received their cash assistance as of 31 July 2020. The number of assisted PRL exceeded the target by 78,114 persons. As the UNRWA registration system does not offer accurate information of in-country populations, due to its voluntary nature, it appeared that the number of Palestine refugees claiming cash assistance was larger than anticipated as a result of the discrepancy between the number of actively service-seeking persons and those on the registration system. UNRWA is now exploring the introduction of a biometric verification process to verify and authenticate all in-country populations for future interventions.



UNRWA staff in Beddawi camp, Lebanon, gather information for emergency cash assistance disbursement. © 2020 UNRWA photo by Maysoun Mustafa



UNRWA education staff distribute tablets to parents of students partaking in the Summer Self-Learning Programme in Saida, Lebanon. © 2020 UNRWA Photo by Ahmad Mahmoud

Strategic objective 3: Palestine refugees continue to access quality, inclusive and equitable education within the context of the COVID-19 crisis

Education in Emergencies

Indicator	Actual	Target
Percentage of students who used any self-learning resources during the period of COVID-19 school closures (parent-reported)	97%	70%
Percentage of TVET students participating in self-learning	80%	80%
Percentage of schools for which materials for improved hygiene routine have been procured in preparation for reopening	100%	100%

In March, UNRWA schools and the Agency TVET centre in Lebanon were closed in line with national directives. To ensure the continuity of learning for students impacted by these closures, UNRWA Lebanon Field Office (LFO) Education Programme, in alignment with the agency Education in Emergencies (EiE) strategy, made available a remote Self-Learning-Programme (SLP). In order to support families and encourage children's participation in SLP, the Agency covered the costs of internet connection fees for three months for families with two or more children enrolled in UNRWA schools. This reached 11,158 families of students enrolled in UNRWA schools and 66 families of trainees enrolled in the Agency's TVET centre.

The UNRWA LFO-Education Psychosocial Support (PSS) Programme also immediately transitioned to an online modality in order to ensure continued PSS services for children and caregivers. While online platforms may not have the same impact and effectiveness as face-to-face interaction, they allo-

wed for the provision of support to manage potential shocks and the additional stress created by the COVID-19 crisis.

An Agency-wide phone-based Parent Survey conducted in May 2020 found that 97 per cent of students had used at least one of the SLM modalities available at least once during the period of school closure between March-May 2020. However, low levels of technological access meant that many students were not able to participate consistently in remote learning. Based on school-reported records, between April and June 2020, 25,772 students (12,347 boys and 13,425 girls) out of a total student population of 36,817 (17,638 boys and 19,179 girls) participated in the SLP on a weekly basis, representing 70 per cent of all students enrolled during the scholastic year 2019/20. This figure includes 222 (141 boys and 81 girls) out of a total 971 (458 boys and 513 girls) students with disabilities.

Main barriers identified for those students who were not able to engage during the implementation of the SLP include: i)

lack of communication assistance, including smart devices and internet connectivity; ii) lack of interest and / or high levels of stress and anxiety due to the crisis. In response, between June until the first week of August, UNRWA has put in place an online summer catch-up programme and has provided communication assistance to 6,374 concerned families.

Following the closure of Siblin Training Centre (STC), UNRWA LFO activated its e-learning programme to ensure that youth had continued access to education. In coordination with UNRWA education department, UNRWA LFO Education

programme and Siblin team worked on the development and delivery of online materials to engage the students online. During the reporting period, 895 (533 boys and 362 girls) TVET students were targeted, of whom around 80 per cent (426 boys and 290 girls) actively participated to the programme.

To prepare schools for re-opening (most likely in September) in conditions of safety, UNRWA started necessary plans and procurement processes for the proper cleaning and disinfection of all 65 schools in Lebanon.

Strategic objective 4: Ensure that Palestine refugees are protected from the most severe impacts of the pandemic

Protection

Indicator	Actual	Target
Number of GBV survivors assisted	31	20
Percentage of TVET students participating in self-learning	728	850

Anecdotal reporting⁶ points to a rise in domestic violence during COVID-19, as families have been forced to remain inside cramped shelters. Many GBV survivors contacted UNRWA legal team for support, highlighting a marked increase in GBV counselling during the reporting period. Between April – June 2020, UNRWA delivered counselling for 27 cases related to GBV and divorce and assisted eight survivors; by way of comparison, 13 cases received counselling and five were assisted in the same period of 2019.

The increase in the number of reported cases is also likely due to improvements in the reporting system used by LFO, which

coordinates systematically across all UNRWA services to collect information on GBV cases. However, under-reporting is still likely to exist. To alleviate the stress and anxiety caused by COVID-19, UNRWA provided PSS services through a combination of in-person (when possible) and remote modalities. As of the end of June 2020⁷, a total of 728 persons received PSS counselling provided by UNRWA social workers, psychologists and the Family Health Team (388 women, 192 men, 91 girls, 57 boys) through in person and/or remote modalities).

jordan: sector-specific interventions

Strategic objective 1: Contain the spread of COVID-19 and decrease morbidity

Health

Indicator	Actual	Target
Number of UNRWA health workers receiving PPE	680 (270 male , 410 female)	666
Number of Palestine refugees using UNRWA isolation centres	0	1,500
Number of NCD patients receiving home delivery of medicines Number of UNRWA-supported hospitalizations accessed by Palestine refugee patients for non-COVID-19 treatment	74,798 (28,423 male, 46,375 female, 32,163 over 65 yrs)	74,798
Number of UNRWA-supported hospitalizations accessed by Palestine refugee patients for non-COVID-19 treatment	0	1,200

On 17 March, the Government of Jordan activated a number of measures to contain the spread of COVID-19, including the imposition of a curfew, closure of many business and public offices, and restriction of movements amongst others.

From the onset of the crisis, the UNRWA Health Programme in Jordan has responded to the emergency by adapting its operational modalities to the crisis and guaranteeing business continuity, while protecting the safety, health and wellbeing of the refugee community. UNRWA Family Health Teams in each health centre contacted the families they are in charge of through remote modalities to provide information and raise awareness.

As a consequence of the comprehensive lockdown, UNRWA health centres were closed on 19 March. Preventive services, including immunization, family planning and delivery of medication gradually resumed starting from 21 May, while curative services started to be provided as of 15 June. UNRWA promptly liaised with the Department of Palestinian Affairs (DPA) in order to make sure that health teams consisting of a doctor, a nurse and a pharmacist could obtain movement permits to deliver the most essential medications to patients with Non-Communicable Diseases (NCDs), to cover a prescription of at least two months. During the closure of HCs, from 28 March to 21 May, lifesaving medications were delivered to the homes of 74,798 patients including 722 PRS patients (28,423 male, 46,375 female, 32,163 over 65). UNRWA health staff together with volunteers from the community and the Jordan medical association collaborated to distribute medicine packages, by identifying eligible patients through the Agency's E-health database.

In order to protect the health and safety of frontline staff, UNRWA provided masks, gloves, face shields, eye goggles, gowns and other PPEs, along with hygiene and disinfectants to 680 health staff (270 male, 410 female) to cover needs up to the end of July 2020. Once the Government allowed resump-

tion of healthcare services and UNRWA health centres reopened, sanitizers, liquid soaps and disinfectants were also distributed and installed in all HCs.

UNRWA's health response was coordinated with the Ministry of Health (MoH) in Jordan, which holds the responsibility to formulate and implement the overall strategy for the containment of the COVID-19 outbreak, tracing of cases, PCR and serological testing, among both Jordanian nationals and refugees. At the start of the emergency, UNRWA envisaged establishing an isolation centre in order to support the MoH effort in responding to a possible spike in COVID-19 cases.

However, no specific need emerged and Palestine refugees who tested positive to the virus (nine cases) were cared for by the MoH, in coordination with the UNRWA health team. UNRWA remains an active member of the national Health Development Forum and its four working groups (Coordination and Planning, Risk Communication, Technical Support for COVID Management, and Procurement) which bring together all health partners in Jordan in support of the MoH response to COVID-19.

UNRWA also continued working with the Jordan Health Aid Society and UNHCR to provide quality health services to PRS at King Abdullah Park (KAP) and ensure infection prevention and control measures for residents.

No funding was received against the Flash Appeal to support hospitalization for non-COVID-19 cases; however, the costs associated with the admission of 867 non-COVID patients to hospital during the reporting period were covered from other sources of funding.

Water and sanitation

Indicator	Actual	Target
Number of Palestine refugee camps benefitting from continued and increased regular solid waste and/or water supply management services	10	10
Number of sanitation labourers receiving PPE	476 (male)	476

Solid waste management is one of the essential services UNRWA provides to the Palestine refugees residing in 10 Palestine refugee camps in Jordan. Refuse collection and disposal remained among the top priority interventions for the Agency's response to COVID-19, aimed at protecting the health and safety of camp residents.

From March onwards, UNRWA sanitation labourers continued to maintain environmental health services undisrupted, by removing an average of 300 MT of refuse daily and protecting over 400,000 Palestine refugees across 10 Palestine refugee camps from health hazards. The disinfection campaigns undertaken in the streets, collection points and UNRWA installations within camps, also contributed to secure a healthy and safe environment for Palestine refugees.

UNRWA ensured prevention of any interruption in its daily waste management operations in the camps through contracting 158 additional daily paid sanitation labourers to strengthen the existing workforce, and guarantee that addi-

onal needs were met, especially during the time of comprehensive lockdown, when the Agency registered an increase in refuse production: in April 2020 for example, a 15 per cent increase in waste production was recorded, compared to the same period in 2019 (from 28,924 m3 in April 2019 to 33,217 m3 in April 2020). To further support the work of frontline staff, 18 additional Solid Waste Management (SWM) vehicles, including trucks, pickups and compactors were hired, to transport refuse from the camps to municipal landfills. Sixteen of these vehicles were hired during the month of Ramadan, when high level of solid waste production occurs.

In order to protect frontline personnel involved in SWM operations, UNRWA provided all sanitation labourers (476 male) with PPEs on a regular basis. Such items included disposal masks, protective gloves, hand sanitizer, protective eye goggles, protective spraying suits, safety shoes and hygiene kits. Disinfectants and sterilizers were also made available.

Strategic objective 2: Ensure that Palestine refugees are able to meet their basic needs, mitigating a further deterioration in their humanitarian and socio-economic conditions, with a particular focus on the most vulnerable

Cash assistance

Indicator	Actual	Target
Number of Palestine refugees (and households) receiving cash assistance to mitigate additional socio-economic hardship due to COVID-19	44,612 individuals (9,841 households)	113,717 individuals / 30,630 households
Total amount of cash assistance distributed through the Flash Appeal	US\$ 2,799,489	US\$ 11,800,000

The implications of the measures enforced by the Government of Jordan (GoJ) to contain the spread of COVID-19 have been felt across all sectors of society, affecting in particular the most vulnerable and poor refugee populations and those who have lost their income. Existing poverty and unemployment have been further exacerbated by the health emergency. To mitigate the adverse socio-economic effects of the pandemic on the most vulnerable refugees, UNRWA provided cash assistance, with a focus on those who are not eligible for assistance through the government social safety net programme interventions. This applies to so-called "ex-Gazan" Palestine refugees who do not hold Jordanian nationality, as well as Palestinian refugees from Syria (PRS) and Iraq (PRI).

Priority for the COVID-19 one-time cash distribution was given in particular to inhabitants of Jerash Camp which has the highest poverty rate among Palestine refugee camps

in Jordan, with over half of the population living in poverty. However, at the time of writing, UNRWA was in the process of extending this assistance to other ex-Gazans residing outside Jerash camp, through funding received under this appeal. The planned target for this intervention is expected to be met by the end of October.

As of 31 July 2020, the following populations have benefitted from the COVID-19 related cash assistance:

- (i) **26,948 individual ex-Gazans (5,507 households)**, who received a one-time COVID-19 cash support. The majority (22,567 individuals including 6,392 women, 6,361 men, 4,790 girls, 5,024 boys) received US\$141.42 per family; the remaining 4,381 ex-Gazan individuals (1,266 women, 970 men, 1,025 girls, 1,120 boys, including 421 persons with disabilities) enrolled in the Agency's Social Safety Net

programme (SSNP) residing in Jerash camp, received a top-up of \$39.75 per person to their regular quarterly cash to reach US\$71 per person.

(ii) **156 PRI individuals** (35 families, 52 men, 49 women, 24 boys, 31 girls) residing in four areas of UNRWA operations received a one-time COVID-19 cash support of US\$ 71 per person.

(iii) **17,508 PRS** (9,125 female and 8,383 male, including 336 persons with disabilities), including 498 refugees (268 female, 230 male) residing in King Abdullah Park (KAP), received a one-time top-up of US\$ 100 per person.

Alongside the distribution of cash assistance, RSSP and emergency frontline staff also shared awareness messages via SMS to cash assistance beneficiaries to implement social distancing and risk mitigation measures when using the ATM to withdraw their cash assistance. A customized Post Distributing Monitoring (PDM) exercise will be undertaken following the completion of the COVID-19 one-time cash distribution, to assess the impact of this assistance on Palestine refugees.

As part of its contingency plan and in anticipation of a possible increase of COVID 19 cases, an e-wallets agreement is being finalized to facilitate access to cash assistance during lockdowns for refugees who have problems reaching the ATM.

Strategic objective 3: Palestine refugees continue to access quality, inclusive and equitable education within the context of the COVID-19 crisis

Education in Emergencies

Indicator	Actual	Target
Percentage of students who used any self-learning resources during the period of COVID-19 school closures (parent-reported)	94%	80%
Percentage of TVET students participating in self-learning	100%	90%
Percentage of trainees participating in self-learning in ESF/FESA	100%	90%
Percentage of schools for which materials for improved hygiene routine have been procured in preparation for reopening	100%	100%

Based on the restrictive measures enforced by the authorities, UNRWA schools, Vocational Training Centres (VTCs) and Faculty of Educational Sciences and Arts (FESA) remained closed as of mid-March. To mitigate the immediate impact of these closures, the GoJ set up open educational applications and platforms to be used by teachers and students to continue their education remotely.

Building on its existing Education in Emergencies (EiE) approach, and to ensure continuity of learning, UNRWA rolled out its Self-Learning Programme. The Agency successfully liaised with the MoE to enable education staff and students to obtain login credentials for use of the national digital platform, i.e. Noorspace, a Learning Management System (LMS) linked with MS Teams, established by the MoE.⁸ In addition, UNRWA teachers and school counsellors provided remote learning and psychosocial support via several digital platforms, including social media, to parents and students, while monitoring students' progress and engagement, providing remote individual follow-up and counselling sessions. Printed self-learning materials were also distributed.

Based on parents' reporting, the most commonly used self-learning resources were: i) direct support from educational staff through social messaging platforms such as WhatsApp and Facebook (81 per cent), and ii) printed self-learning materials (81 per cent). A total of 54 per cent of parents reported that their child used the *Darsak* government platform for online and TV-broadcasted video lessons, and only 12 per cent reported that their child used the *Noorspace*⁹ LMS. Overall, 94

per cent of students used at least one type of SLM at least once during the period of school closure (March-May 2020).

The SLP for TVET and FESA was implemented through the UNRWA platform. All instructors had access and involved students accordingly. All tests and assignments were also provided through the UNRWA platform. In order to facilitate access to online learning modalities, 1,935 students (801 male, 1,134 female) students from VTCs and FESA were provided with internet bundles. As a result, 100 per cent of VTC students participated in self-learning, for a total of 2,879 students (1,556 male, 1,323 female). Of these 2,058 attend technical courses (832 male, 1,226 female), while 821 are vocational course students, (724 male, 97 female). During the reporting period, 100 per cent of FESA students (1,117 students, 118 male, 999 female) also participated in self-learning.

For the 2020/2021 school year, which is scheduled to start on 1 September, the Agency plans introduce catch-up classes, in line with the Ministry of Higher Education's instructions, for applied and hands-on courses usually delivered as part of the TVET curricula.

Arrangements to ensure that social distancing is enforced and respected at UNRWA schools are also planned for. Improved hygiene measures for schools were also identified, including cleaning and sanitation of the educational facilities. As such, all school buildings are being provided with hygiene and disinfectant supplies in preparation for school re-opening.

Strategic objective 4: Ensure that Palestine refugees are protected from the most severe impacts of the pandemic

Protection

Indicator	Actual	Target
Number of GBV survivors assisted	89 (22 male, 67 female, 8 persons with disability)	50
Number of Palestine refugees receiving PSS counselling	65,041	81,680

During the reporting period, 89 GBV survivors (29 women, 38 girls, 8 men, 14 boys and 5 persons with disabilities) were identified and assisted by UNRWA JFO. A substantial decrease in reported GBV cases was recorded in comparison to the same period in 2019. This is partly due to the movement restrictions imposed across JFO areas of operation and the subsequent closure of UNRWA installations in the context of the COVID-19 emergency. During this period, frontline staff reached out to survivors identified prior to the COVID-19 emergency and continued providing them with PSS counselling and referring them to external partners when appropriate.

Social media platforms, text messages and public TV channels were used to disseminate information on available services. In order to improve its outreach to GBV survivors, UNRWA is exploring opportunities for partnerships with other UN Agencies and specialized local organizations to complement the services provided by the Agency.

Between March and July, Palestine refugees in Jordan also received PSS counselling both in person and remotely, as needed. Targeted PSS counselling was provided by social workers and field GBV focal points to 70 Palestine refugees (37 women, 30 girls, two boys, one man and three persons with disabilities). Further, the health programme provided in-person MHPSS support to 86 patients at UNRWA HCs (up to mid-March, when HCs were still open, and from mid-June to the end of July, once they re-opened). Remote PSS support was also provided to 1,203 patients between April and June. Moreover, during the closure of schools, 3,682 Palestine refugee children (1,389 boys, 2,293 girls), including 631 PRS students, attended counselling sessions remotely. During the reporting period, 60 social workers also provided routine follow up calls to 205 families (approximately 984 individuals per social worker) to assess the overall needs and wellbeing of Palestine refugees.



UNRWA staff receive mental health and psychosocial support training. © 2020 UNRWA Photo

gaza: sector-specific interventions

Strategic objective 1: Contain the spread of COVID-19 and decrease morbidity

Health

Indicator	Actual	Target
Number of UNRWA health workers receiving PPE	1,072	1,072
Number of Ministry of Health and/or community isolation centres supported by UNRWA with PPE, NFIs and/or other assistance	0 ¹⁰	40
Number of NCD patients receiving home delivery of medicines	19,536	19,536
Number of UNRWA-supported hospitalizations accessed by Palestine refugee patients for non-COVID-19 treatment	4,212	3,614

In response to the COVID-19 emergency, UNRWA continued providing essential primary health care through its 22 clinics across the Gaza Strip, introducing new health and safety measures to mitigate the risk of a spread of the virus. A triage system was put in place to separate patients with respiratory symptoms in all health points. Twenty-two new dedicated medical points for patients with respiratory symptoms were opened in UNRWA school buildings, contributing to reduce overcrowding in health centres, and separating patients with respiratory symptoms from other patients, thus minimizing the risk of exposure to the virus. Telemedicine was introduced through hotlines set up in all health centers to provide medical consultations and/or to book appointments for receipt of medicines, to minimize the patient footprint in UNRWA clinics and avoid crowds.

Since the identification of the first positive COVID-19 exogenous case (at a designated quarantine facility), in March 2020, all UNRWA health staff at HCs and medical points were provided with the required PPE (1,072 permanent and daily paid staff), and trained on its correct use. Training was also conducted for other frontline non-health staff such as sanitati-

on and food distribution labourers, who also received adequate PPE.

Patients at higher risk due to pre-existing health conditions and/or of older age were provided with their prescribed medications through a new home delivery service. During the reporting period, 19,536 NCD patients received medication at home.

Throughout the reporting period, UNRWA worked closely with other actors in Gaza under the oPt Health Cluster to plan and support the public health sector as part of the overall humanitarian response. In order to free resources from the public health sector to allow them to focus on quarantine and isolation centres, UNRWA has temporarily extended some essential primary health care services to identified NCD patients, including non-refugees, who otherwise receive medical care through public health facilities, which were temporarily closed to allow for redeployment of public health staff to quarantine centres.

Water and sanitation

Indicator	Actual	Target
Number of Palestine refugee camps benefitting from continued and increased regular solid waste and/or water supply management services	8	8
Number of sanitation labourers receiving PPE	600	600 ¹¹

Sanitation work continued during the COVID-19 emergency with enhanced measures to ensure the health and safety of staff. Around 220 tons of solid waste were removed each day from camps and transferred to landfills to prevent additional public health hazards. Water was provided through nine UNRWA water wells in three camps (Jabalia, Khan Younis and Rafah) where periodic water tests took place regularly. Adequate PPE was provided to all 600 sanitation labourers and front line workers on a monthly basis; in addition, a special training on hygiene practices and proper use of PPE was conducted by UNRW staff. Disinfection of sanitation offices

and water wells, in A health team to all front-line sanitation addition to sanitation trucks and tools, continued throughout the reporting period.

A team of seven environmental awareness workers at UNRWA sanitation offices in Palestine refugee camps across Gaza continued to provide awareness sessions to sanitation workers and refugees, aimed at promoting enhanced hygiene measures and disseminating risk mitigation messages. Community cooperation and support in promoting proper health practices is extremely important to prevent and mitigate the risks arising from the COVID-19 pandemic.

Strategic objective 2: Ensure that Palestine refugees are able to meet their basic needs, mitigating a further deterioration in their humanitarian and socio-economic conditions, with a particular focus on the most vulnerable

Food and cash assistance

Indicator	Actual	Target
Number of refugees who continue to receive their food assistance through the home-to-home modality	1,109,778 individuals/ 226,578 households	1,139,350 individuals / 231,120 households
Number of Palestine refugees (and households) receiving cash assistance to mitigate additional socio-economic hardship due to COVID-19	47,413 individuals/ 14,412 households	47,962 individuals / 14,412 households
Total amount of cash assistance distributed through the Flash Appeal	US\$ 1,898,425	US\$ 1,898,425

The food assistance provided by UNRWA is vital for one million Palestine refugees, at the same time contributing to wider market stability and food security in Gaza, which have been impacted by the 14-year blockade and widespread poverty. In order to continue with the provision of this vital assistance, which is funded through the Agency's emergency appeal, UNRWA introduced new operational modalities to adjust to the COVID-19 situation¹².

To ensure the health and safety of eligible Palestine refugees and avoid crowding in UNRWA distribution centres, a new door-to-door home delivery modality, was rapidly adopted to complete the first quarter of food distribution, which had started in January. While the UNRWA ten distribution centres were still used for the packing of food parcels and as dispatching points, food was delivered to Palestine refugee homes through an outsourced service under the supervision and coordination of UNRWA teams. Health, protection and quality assurance through a strong public communication strategy, and continued monitoring and evaluation, were the main principles driving the newly adapted modality. Palestine refugees' feedback on the newly introduced modality was collected on a regular basis by UNRWA RSS staff, who contacted beneficiaries on the phone and recorded their feedback on an

online system especially designed for this purpose. Home delivery continued in the second quarter of food distribution, which started around mid-June 2020, and some enhanced features were introduced based on lessons learned from the first quarter, including developing Standard Operational Procedures (SOPs); improving the online system, further enhancing the monitoring scheme and collection of feedback and complaints. During the reporting period, 226,578 households (corresponding to 1,109,778 people) received their food parcel through the new home delivery approach.

An already impoverished Palestine refugee population in Gaza face increased vulnerabilities including the loss of income generating activities as a result of the restrictions imposed due to COVID-19. In response, UNRWA provided a one-off multi-purpose cash assistance to 14,831 poor refugee families, who were identified through a weighted system of all vulnerable groups including households headed by females, older persons, persons with disability, persons with chronic diseases, orphans and large families. Based on this targeted approach, US\$ 40 per individual was distributed in July 2020 to 47,413 individuals to help them cover their essential needs during this difficult time of crisis.

Strategic objective 3: Palestine refugees continue to access quality, inclusive and equitable education within the context of the COVID-19 crisis

Education in Emergencies

Indicator	Actual	Target
Percentage of students who used self-learning resources (parent-reported)	89%	69.25%
Percentage of TVET students participating in self-learning	81%	81%
Percentage of schools for which materials for improved hygiene routine have been procured in preparation for reopening	100%	100%

To ensure the safety of children, all UNRWA schools and Technical Vocational Education and Training (TVET) centres in Gaza were closed in mid-March and remained closed until the end of the school year. Through its Education in Emergencies (EiE) approach, adjusted to the COVID-19 specific situation,

UNRWA in Gaza was able to support the continuity of learning for 282,360 students (145,867 boys, 136,493 girls) enrolled in UNRWA schools and 1,914 young people (1,203 males, 711 female) in TVET centres in Gaza.

Over the past nine years, UNRWA has developed a range of

of student materials – text, online, and video – collectively known as its Self-Learning Programme (SLP), as well as guidance for educators and parents on the use of these materials.

According to an Agency-wide parents survey conducted in Gaza by the Assessment Unit of the UNRWA Education Programme, 79.65 per cent of students relied on support from school staff via social messaging systems such as WhatsApp, 69.25 per cent of students (52.72 per cent boys, 47.28 per cent girls) used printed self-learning resources, and 46.24 per cent used UNRWA TV, and 38.50 per cent used the Interactive Learning Programme (ILP) during the period March to June 2020. Overall, 89.16 per cent of student used at least one type of SLM at least once between March and June 2020.

TVET students benefited from the online delivery of the TVET programme by accessing soft copies of self-learning materials and website links to relevant resources for the theoretical and practical elements of their courses. During the reporting period, the Education Programme with support from UNRWA HQ identified suitable and quality self-learning materials

and managed to overcome challenges faced by students in accessing these resources. As a result, 81 per cent of TVET students in Gaza (80.7 per cent males, 82.5 per cent females) participated in the self-learning process.

School Counsellors continued to support the psychosocial needs of students through alternative means of communication providing virtual support to students in close cooperation with the School Principals and Teachers. Counsellors also disseminated awareness materials targeting families and teachers, providing guidance on how to handle COVID-19 related stress and lockdowns. Individual counselling was also carried out through teleconsulting.

As an extracurricular activity and in a continuous effort for community engagement, students were invited to develop and share their own messages on risk mitigation and prevention, and planning for additional hygiene and sanitation measures needed for when educational institutions reopen. UNRWA Education Programme also continued to strengthen awareness messages to students on COVID-19 specific issues.

Strategic objective 4: Ensure that Palestine refugees are protected from the most severe impacts of the pandemic

Protection

Indicator	Actual	Target
Number of GBV survivors assisted	764	800
Number of Palestine refugees receiving PSS counselling	16,350	5,610

During COVID-19, UNRWA has strived to ensure that protection services remained available to Palestine refugees. Phone lines were made available to support Palestine refugees, to guide them through the changes in service delivery modalities and refer them to the appropriate channels as needed. The Social Services Division (SSD) of UNRWA Gaza Field Office (GFO), through its professional teams, provided remote support including addressing GBV issues and providing PSS and legal counseling.

During the reporting period, UNRWA GFO Health and RSS programmes identified and assisted 764 (720 females and 44 males) GBV cases, including four children and five persons with disabilities.

During the initial phase of the COVID-19 response, and in order to avoid crowds and minimize footprint at health centres, in-person mental health and psychosocial support services (MHPSS) were stopped at health centres and provided through remote modalities such as hotlines. This led to a decrease in the number of MHPSS patients assisted between April and May. However, as the situation evolved and with no local outbreak in Gaza during the reporting period, the health programme started the gradual resumption of some services inside the Agency's health facilities; consequently, the number of MHPSS patients approaching UNRWA increased during the months of June and July, overachieving the initially planned target. During the reporting period, 16,350 Palestine refugees received MHPSS counselling.

west bank: sector-specific interventions

Strategic objective 1: Contain the spread of COVID-19 and decrease morbidity

Health

Indicator	Actual	Target
Number of UNRWA health workers receiving PPE	636	636
Number of vulnerable households receiving hygiene kits	5,250	5,250

During the reporting period in the West Bank, UNRWA provided continuous access to health care services for Palestine refugees, while taking all steps to prevent the spread of COVID-19. All 636 health workers at UNRWA HCs (215 males and 421 females) received PPE to reduce the risk of transmission of COVID-19 while providing health services to patients attending UNRWA HCs. Health staff of all categories at area and health centre levels received training on infection prevention and control guidelines and protocols and on the proper and safe use of PPE (including N95 and surgical face masks, gowns, gloves and goggles).

In order to mitigate the risk of exposure of health centre teams to COVID-19, resulting in further patient contamination and/or service discontinuation, UNRWA in the West Bank recruited daily paid health staff (112 out of the total 636) for the implementation of a rotation system to replace teams in

cases of exposure and infection, allowing for the continuity of services. Moreover, the mechanism for medical appointments was strengthened and a triage system was applied for all outpatient visitors. Patients with respiratory symptoms were separated from other patients and managed in separate rooms.

During the reporting period, the Relief and Social Services Programme (RSSP) was able to distribute hygiene kits to 5,250 refugee families affected by COVID-19. These kits contained several essential items including soap and individual hygiene items, PPE and cleaning supplies to cover a period of two weeks, which is the standard quarantine period as per WHO recommendations. Hygiene kits were distributed to refugee households under home quarantine or with one or more individuals self-isolating at home.



An UNRWA staff member at the Am'ari Health Centre, West Bank. © 2020 UNRWA Photo

Water and sanitation

Indicator	Actual	Target
Number of Palestine refugee camps benefitting from continued and increased regular solid waste and/or water supply management services	19	19
Number of sanitation labourers receiving PPE	358	344

To prevent the spread of COVID-19 in West Bank refugee camps and ensure that camps remained a safe and clean environment, UNRWA environmental health teams conducted disinfection campaigns in all 19 camps and worked on increasing the efficiency of solid waste collection activities.

Removal of solid waste from camps continued with extra efforts to prevent solid waste accumulation. During the COVID-19 related lockdown periods an increase in the amount of solid waste produced was observed. To compensate for the increased workload, to overcome access challenges due to lockdown and to cover regular staff on sick leave or in quarantine, UNRWA hired 138 additional daily paid sanitation labourers. During the reporting period, all 358 sanitation labourers, including daily paid workers, were provided with the necessary PPE.

Some of the challenges encountered included overcoming the public stigma against wearing masks, which was mitigated by increasing awareness on the importance of this measure to prevent the infection. A second challenge was related to the risk of mechanical failure in the solid waste compactors\ tractors leading to the interruption of waste collection, which was mitigated by setting plans to re-schedule the work and hiring outsource compactors / tractors where available. The environmental health team designed several monitoring tools to ensure the proper implementation of work, which included regular visits to camps by senior staff, daily reports on the progress of activities, a WhatsApp group to facilitate communication amongst the working teams and a tracking sheet to monitor the procured materials.

Strategic objective 2: Ensure that Palestine refugees are able to meet their basic needs, mitigating a further deterioration in their humanitarian and socio-economic conditions, with a particular focus on the most vulnerable

Food and cash assistance

Indicator	Actual	Target
Number of individuals (and households) receiving food vouchers	31,200 individuals / 5,041 households	31,200 individuals / 6,000 households
Number of individuals (and households) receiving food parcels	72,444 individuals / 13,077 households	61,325 individuals / 11,150 households

Since the beginning of the outbreak, UNRWA, through its RSS programme, provided support to vulnerable individuals and households who were heavily affected by the socio-economic consequences of COVID-19, as well as those who needed to go under home quarantine and lost their source of income.

The support was provided mainly through a food assistance intervention comprised of food vouchers and food baskets. Food vouchers were provided to families in need of support to meet their basic food needs. Food baskets were preferred for those under home quarantine or living in isolated areas, with limited access to the market. As a result of the “second wave” of the COVID-19 outbreak in late June/early July in the West Bank, resulting in a high level of virus transmission, the number of households under home quarantine increased

greatly. Consequently, the Agency expanded the food basket modality, resulting in an overachievement of the target. In addition the distribution of food assistance was extended until the first two weeks of August. Overall 13,077 food baskets were distributed to needy households and 31,200 individuals received food vouchers.

To mitigate any risk of transmission of COVID-19 during the distribution of assistance, all frontline staff received PPE and clear instructions on proper hygiene and risk mitigation practices. Coordination with the authorities was also strengthened to overcome access challenges to remote communities in the context of the multiple closures in the West Bank.



Distribution of food parcels to quarantined Palestine refugee families in the West Bank. © 2020 UNRWA Photo

Strategic objective 3: Palestine refugees continue to access quality, inclusive and equitable education within the context of the COVID-19 crisis

Education in Emergencies

Indicator	Actual	Target
Percentage of students who used any self-learning resources (parent-reported)	90%	65%
Percentage of TVET students participating in self-learning	87.3%	80%
Percentage of trainees participating in self-learning in ESF/FESA	80%	80%
Percentage of schools for which materials for improved hygiene routine have been procured in preparation for reopening	100%	100%

Through the self-learning approach, UNRWA ensured continuity of learning for Palestine refugee students in its 96 schools during the whole period of school closure, from early March 2020 until the end of the school year.

The programme was able to achieve all planned targets, overachieving the target for students using self-learning resources. This shows the positive impact of using more than one channel to distribute the SLM to students. The availability of both online and printed self-learning material increased students' ability to access SLM allowing 90 per cent of students to use at least one type of SLM at least once during the period of school closures (March - May 2020). In addition to learning resources, UNRWA also circulated mental health and psychosocial support material to help children to release the pressure related to the pandemic and its consequences on their daily life. Psychosocial support services (PSS) were also provided by school counsellors to students, teachers and parents remotely through group and individual sessions conducted over the phone and over instant messaging platforms.

The education support cadre exerted many efforts to ensure the development and dissemination of self-learning materials in a timely manner, uploading them on the internet, and raising awareness through various social media platforms that targeted both students and their parents. School principals, supported by teachers, and in coordination with UNRWA Camp Service Officers, distributed the printed materials, reaching students at their homes. All students (60 per cent female and 40 per cent male), including marginalized groups and students with disabilities, received these materials.

Building on this experience, during the 2020/21 scholastic year, UNRWA is planning to use a blended approach, i.e. a combination of face-to-face education and self-learning materials. TVET will integrate face-to-face and online learning, with the face-to-face approach used for the practical courses. An online approach will be used for the Educational Science Faculty (ESF), in compliance with the instructions of the Ministry of Higher Education. A number of measures to ensure physical distancing and safe health practices in schools will also be introduced in UNRWA educational facilities.

Strategic objective 4: Ensure that Palestine refugees are protected from the most severe impacts of the pandemic

Protection

Indicator	Actual	Target
Number of GBV survivors assisted	91 (15 male, 76 female, 7 persons with disabilities)	86
Number of Palestine refugees receiving PSS counselling	2,013	1,017

During the pandemic, the RSS Child and Family Protection Programme had to adapt to the new context and find new channels to reach beneficiaries. All cases with open files were listed and prioritized according to their risk level. The cases were approached by phone and provided with the needed services. New cases were identified through the Psychosocial First Aid (PFA) Hotline and through referral from the various UNRWA programmes.

During the reporting period, 91 GBV cases were assisted, while PSS counselling services were provided to 2,013 refugees

(1,300 female, 713 male) surpassing the planned target of 1,017. This overachievement was mainly due to the increased need for PSS support that resulted from the surge in infected cases in June and July. Many actions were undertaken to achieve this result including the dissemination of information about the PFA Hotline and other available services during the distribution of hygiene kits to refugees under quarantine. In addition, flyers with information about the PFA Hotline were posted inside camps with the support of the Camp Services Committees.

A new approach, "the Quarantine Response Initiative (QRI)" was introduced in the West Bank to meet the needs of refugees under quarantine. Through this initiative, the PFA Hotline Team

conducted 681 assessment interviews, whereby all those who were interviewed were provided with PFA and then linked to other essential services according to their need.

An UNRWA staff member distributes worksheets to students for distance learning during COVID-19 related school closures. © 2020 UNRWA Photo



headquarters

Risk communication and community engagement

Indicator	Actual	Target
Number of Palestine refugee camps reached through risk communication and community engagement activities	45	58

Risk communication and community engagement (RCCE) is an essential component to increase the compliance of the community with public health measures to prevent the transmission of COVID-19. During the reporting period, UNRWA actively engaged Palestine refugee communities to provide information and raise awareness on COVID-19, including preventive measures, actions that are effective to mitigate the risk of transmission, and responsibilities of individuals to protect their communities.

Out of the planned target of 58 Palestine refugee camps, 45 were reached with structured health messages across all the fields with the exception of Syria, where efforts were limited due to the prevailing security situation. In the camps, community volunteers together with UNRWA staff carried out several initiatives to raise awareness at community level. This included psychosocial support to cope with stress, health education and awareness raising activities. For example, in Gaza, UNRWA health staff implemented a number of awareness raising and health education activities via different communication channels, mainly direct communication via

individual or group counseling, TV screens at HCs, telephone hotlines, UNRWA social media platforms, and printed materials, in addition to conveying messages during the course of home visits and the home delivery of medications to elderly and NCD patients. To increase the uptake of the health messages, these were adjusted to take into consideration different audience groups, such as children and adults, people with different health needs (e.g.: NCD patients, pregnant women), males and females, and persons with disabilities. Communication materials were developed at Headquarters and printed at field level for wider distribution to the communities and in UNRWA installations.

Despite all of the efforts undertaken, lack of awareness, mistrust, and stigma regarding COVID-19 still exist amongst Palestine refugees in the camps in some fields. This raises serious concerns and requires UNRWA to strengthen its RCCE efforts in all fields to support positive behaviour change and adherence to preventive measures to control the transmission of the virus.

Monitoring and evaluation

Indicator	Actual	Target
Number of independent evaluation reports produced on the Agency's emergency response to COVID-19	0	1

Although resources were not available to commission an external evaluation of the Agency's COVID-19 response activities, the Evaluation Division of the Department of Internal Oversight Services implemented a real time evaluation (RTE) during the second quarter that focused on field level response efforts. The RTE was designed to explore the Agency's responsiveness to the unprecedented context, to capture challenges to its response, as well as information on new approaches and innovations.

The evaluation was led by the UNRWA Evaluation Division and conducted by a team of evaluators that included external

in Jordan, the West Bank and Gaza fields, were completed between April and June 2020.

The approach was qualitative and one-to-one interviews with staff were the primary research tool. Across the three studies, 106 staff from across organizational levels were interviewed either by phone or through online platforms. A RTE report was issued for each field, highlighting unique features of their operational approach and lessons learned. Each report issued suggestions on action items to strengthen field activities.

Health at HQs

In line with host governments' regulations, UNRWA Headquarters (HQ) in Amman worked through a telecommuting modality between March and June 2020. A phased back-to-the office plan started to be implemented in June, with 100 per cent of staff returning to the office at the end of July. In order to ensure a safe working environment, UNRWA implemented a number of measures at its HQ to promote awareness about COVID-19, ensure safe health practices and physical distancing in the office premises. To this aim, UNRWA procured essential hygiene products, which were made available to staff members and visitors at UNRWA HQ as mitigation measures against the spread of the virus.

The Agency also ensured the continued availability of hand gel sanitizers in its HQ premises as well as alcohol-based spray to disinfect surfaces. PPE (e.g. masks and gloves) were also procured for staff in direct contact with the public.

In order to enhance prevention measures, when required, partitions were installed in offices to ensure physical distancing and protection from the risks of transmission of the virus. Thermometers were also procured for temperature checks of staff and visitors at the entrance of UNRWA premises. UNRWA liaison office in Cairo was also supported through the provision of PPE and thermometers.

Environmental Considerations

Throughout its COVID-19 response, UNRWA adopted a number of measures to minimize the impact on the environment, in particular in relation to the use and disposal of PPE. Based on international recommendations, UNRWA adopted the following considerations when using PPE: **i) minimize the waste production.** UNRWA recommended and followed a rational use of PPE. This included training on staff on the proper and efficient use of PPE; **ii) reuse and recycle to the extent possible.** The Agency encourage non-medical staff to use fabric reusable mask, which can be used for three to six months, instead of medical disposable masks that need to be changed every eight hours; **iii) treat waste through safe and environmental sound methods and dispose final waste in designated sites.** Only PPE used during triage and examination of suspected cases were disposed as medical waste, the rest of PPE were dealt with as ordinary waste (e.g. usually medical waste has negative environmental effects as they have to be

burnt in special incinerators). PPE used by sanitation labourers (non-hazardous waste) were disposed at domestic landfill sites, in line with national guidelines.

UNRWA also applied clear guidelines for cleaning and disinfection of health centres, schools and offices, using minimal concentration of sodium chlorite (0.1 per cent) for non-medical premises. No other chemical was used for cleaning and disinfection to avoid additional negative effects on the environment.

Finally, since March 2020, all UNRWA offices have implemented remote work and / or other smart work modalities to reduce physical presence at the Agency's premises. This has contributed to save energy, e.g. fuel for heating and electricity. The suspension in international and domestic travels has also contributed to reduce the Agency's carbon footprint.

annex 1

List of Contributors to the UNRWA COVID-19 Flash Appeal (March-July 2020)

Brazil	UNICEF
Bulgaria	UNRWA Spanish Committee
Canada	UNRWA USA National Committee
CERF	Various Private Donors
Deutsche Bank	WHO
Education Cannot Wait Fund	
European Union	
Foundation to Promote Open Society (FPOS)	
France	
Germany	
Gulf for Good	
Hasene International e.V	
Japan	
King Salman Humanitarian Aid and Relief Centre	
Kuwait Red Crescent Society	
Malta	
Monaco	
Muslim Hands	
Novo Nordisk	
OCHA	
The State of Palestine	
Saudi Arabia	
Slovakia	
Slovenia	
Spain, Andalusia Government	
Spain, Basque Government	
Spain, Catalonia Government	
Spain, Galicia Government	
Switzerland	
Tamer Family Foundation	

footnotes

1 UNRWA COVID-19 Appeal August to December can be found at <https://www.unrwa.org/resources/emergency-appeals/unrwa-covid-19-appeal-august-december-2020>

2 This figure corresponds to the total number of health staff during the reporting period

3 However, through EA funds, UNRWA continued to provide hospitalization support to 3,237 Palestine refugees.

4 The top up was provided on the regular monthly transfers of US\$ 11 (for vulnerable PRs) and US\$ 14 (for most vulnerable PRs).

5 COVID-19 tests were conducted in coordination with the MoPH; as of the end of July 2020, the exact amount to be paid by UNRWA to cover these tests had not been provided yet by the MoPH.

6 Includes focus group discussions, information from community members received by UNRWA Protection Teams, inter-agency reports on Syrian refugees in Lebanon showing an increase in violence against women and girls, statistics from UNRWA legal team.

7 Information as of the end of July is still under collection.

8 <https://darsak.gov.jo/>

9 NoorSpace is a unified electronic system for all schools to connect and organize work between teachers, students and parents through an electronic portal where information on assignments, marks, and absences are monitored and shared. <https://noorspacejo.azurewebsites.net/>.

10 This intervention was planned as part of the coordinated response led by the oPt Health Cluster. However, during the reporting period support to these centres was provided through other sources / partners and there was no request to UNRWA to step up to fill any gaps.

11 This target was wrongly calculated (3,600) and it has been corrected.

12 The costs of implementing the home delivery modality were covered by this COVID-19 Appeal.



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اللاجئين الفلسطينيين في الشرق الأدنى