

## HIGHLIGHTS

- In March, active cases in the oPt rise by nearly half; active cases in Gaza more than triple.
- Significant rise in patients in intensive care units and in those requiring mechanical ventilation.
- The Palestinian authorities vaccinated over 70,000 people by end of March, including 8,000 with both doses.

## COVID-19 CASES IN OPT

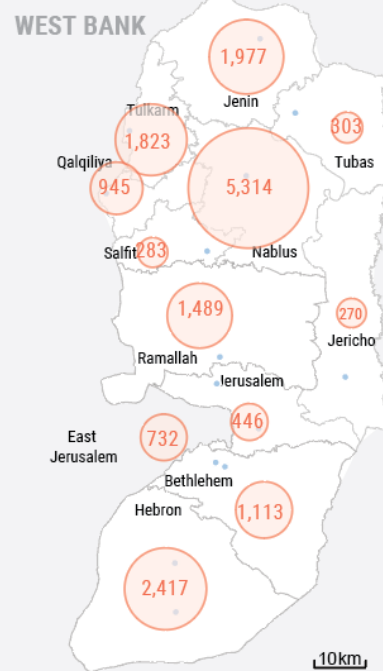
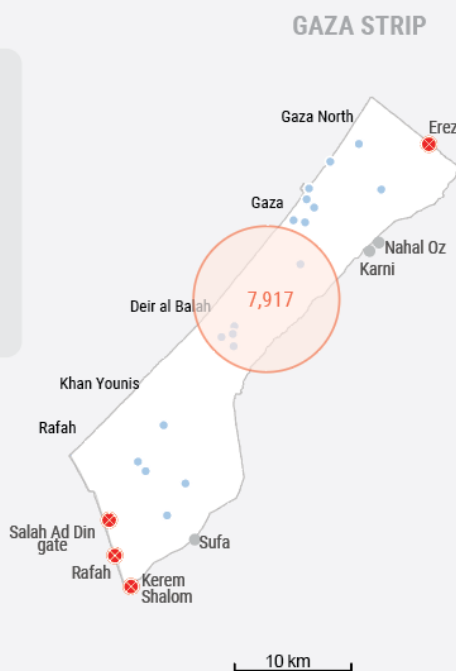
**270,878** CONFIRMED CASES

**25,029** ACTIVE CASES

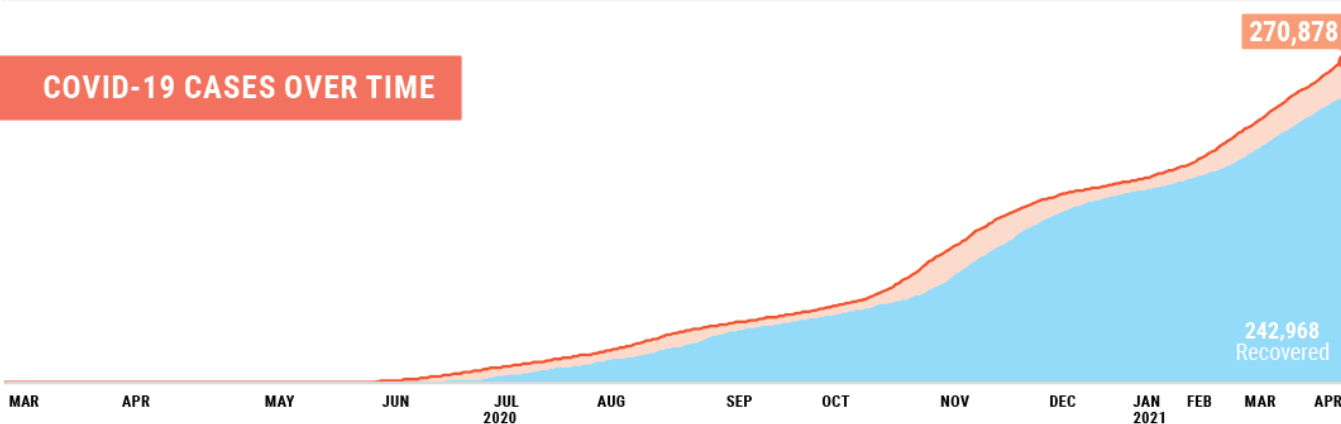
**242,968** RECOVERED

**2,881** DEATHS

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



## COVID-19 CASES OVER TIME



<b>25,029</b>	<b>270,878</b>	<b>2,881</b>	<b>209</b>
<b>Active Cases</b>	<b>Cumulative Cases</b>	<b>Fatalities</b>	<b>Patients in ICUs</b>

## SITUATION OVERVIEW

March witnessed a 48 per cent increase in active COVID-19 cases in the oPt, with 62,529 additional Palestinians testing positive, and 53,814 people recovering, according to the Palestinian Ministry of Health (MoH). The cumulative number of cases is 270,878, with 242,968 people recovered from the virus. The number of patients in intensive care units (ICU) increased significantly from 117 at the end of February to 209, with those requiring mechanical ventilation rising from 26 to 68.

A total of 622 people died during March, compared with 274 in February, bringing to 2,881 the cumulative number of fatalities due to the virus: 2,270 in the West Bank, including East Jerusalem, and 611 in the Gaza Strip. The Case Fatality Rate (CFR), the proportion of deaths among confirmed cases, remains at 1.1 per cent in the oPt, the same as in Jordan, compared with 0.75 in Israel and 5.9 per cent in Egypt.

In the West Bank, including East Jerusalem, there was a 13 per cent increase overall in cases in March, from 15,199 to 17,122. After a 61 per cent decline in February compared with the previous month, active cases in Gaza surged by 356 per cent (from 1,737 to 7,917). By the end of the month, Gaza accounted for 32 per cent of all active cases in the oPt, compared with 10 per cent at the end of February. In the West Bank, the Nablus governorate registered 21 per cent of all active cases in the oPt, followed by Hebron (10 per cent), Jenin (eight per cent), and Tulkarm (seven per cent).

On 30 March, health authorities in Gaza confirmed the first cases of the new variant B.1.1.7, first identified in the UK, which is also known to be responsible for the recent increase in cases in the West Bank. In both West Bank and Gaza, the surge has led to the re-introduction of various levels of restriction (see below).

### Vaccines

By end-March, some 272,440 vaccines had arrived in the oPt (excluding East Jerusalem), including 100,000 Sinopharm vaccines donated by China, and 70,000 Sputnik V vaccines, 60,000 of which were donated by the United Arab Emirates and designated for Gaza.

The first vaccines procured through the Gavi COVAX AMC Facility, comprising 37,400 doses of Pfizer BioNTech and 24,000 doses of Oxford-AstraZenica, arrived in mid-March. A total of approximately 400,000 Oxford-AstraZenica vaccines are expected to arrive in stages by June through the COVAX mechanism. Through COVAX, the Palestinian Authority (PA) is eligible to receive donor-funded vaccines for up to 20 per cent of its population and has applied for more doses to cover an additional 40 per cent of the population on a self-financing basis. On 30 March, a further 25,000 AstraZeneca vaccines arrived from India, the first consignments of vaccines out of a total of two million which have been purchased by the PA. (See *Vaccine Tracking* chart below).

The Palestinian National COVID-19 Vaccination Campaign began on 21 March, initially prioritizing medical staff at government and private hospitals, patients with kidney and cancer conditions, and the elderly. In the West Bank, those above 75 years of age and the immediate family members of Palestinian prisoners in Israeli custody are targeted in the first stage. In Gaza, those above 55 years of age have already been prioritized.

In total, over 70,000 people have received their first vaccination in the oPt, with about 8,000 receiving both doses. However, the reluctance of many, including medical staff, to be vaccinated remains a key concern.

Israel is continuing its vaccination programme, which is also available to Palestinians in East Jerusalem, and ranks first globally for [per capita vaccinations](#), with over fifty per cent of the population fully vaccinated. On 7 March, the Israeli government began vaccinating over 120,000 Palestinians without Israeli residency, who are employed in Israel or in Israeli settlements. Reportedly, over 105,000 of these workers received their first dose over a two-week period in March.

A number of Israeli, Palestinian and international health and human rights organizations, as well as Israeli health officials, have [called on](#) the Israeli authorities to ensure that vaccines are equally and fairly provided to Palestinians living under occupation in the West Bank and Gaza.

## Vaccine Tracking

Status	Vaccine	No. of doses	Source	Notes
<b>Arrived: (272,440 doses in total)</b>	Moderna	2,000	IL	Donation
	Sputnik V	10,000	RU,	Donation – 2,000 doses were sent to Gaza
		60,000	UAE	Donation to Gaza only. Last shipment of 40,000 doses arrived 12-Mar-2021
	AZ SK Bio	24,000	COVAX	<b>First shipment (1 of 3) 24,000 doses arrived 16 March 2021:</b> WB-14,400; Gaza – 9,600
	Pfizer	37,440	COVAX	<b>Arrived 17 Mar 2021.</b> The shipment is split to be delivered to Nablus (25,740 d) and Gaza (11,700 d)
	Sinopharm	100,000	China	<b>Donation arrived 29 Mar 2021.</b> delivered to Nablus Cold Store.
	AZ SII	25,000	PA MoH	<b>Arrived 30 Mar 2021 - PA Bilateral purchase from AZ - Serum Institute of India</b>
<b>In pipeline: COVAX</b>	AZ SKBio	Up to 240,000 -405,000 doses	COVAX	ETA Mar to June 2021 in several batches. 168,000 doses are expected to arrive until May 2021. Second shipment 31,200 doses expected end March: WB – 18,700, Gaza – 12,500 Third shipment 112,800 doses expected end April 2021: WB – 67,700, Gaza – 45,100 According to COVAX – delays expected
	Pfizer	102,960	COVAX	To be delivered most likely end of Q2, up to 8 weeks after signing the PO
<b>In pipeline: Donation</b>	Sinopharm	25,000	Jordan	Bilateral donation from Jordanian private company
	Sputnik V	50,000	RU	Under negotiation
<b>In pipeline: Bilateral Deals</b>	AZ-Russia	2,000,000	PA purchase	In process
	Pfizer	100,000	PA purchase	To be finalized. No additional information
	Sputnik V	100,000	PA purchase	Under negotiation
		<b>Total</b>	<b>West Bank</b>	<b>Gaza</b>
<b>Vaccinated</b>		73,964	52,449	21,515
<b>Vaccinated with two doses</b>		7,978	4,069	3,909

## West Bank

Despite a slowdown in the increase in active cases by the end of the month, the WHO risk assessment remains very high for the West Bank. The healthcare system is struggling to handle the high numbers of hospital admissions and patients on ventilators. By end-March, COVID-19 designated hospitals remained near their full capacity, with 97 per cent of occupancy for hospital beds and 100 per cent of occupancy for ICUs.

During the month, the PA has placed numerous localities under a full closure for varying periods, including all governorates for a five-day period from 15 March. On 21 March, the PA implemented new measures to remain in effect until 3 April, which allowed for the opening of businesses, cafes and restaurants at 30 per cent capacity between 06:00 and 19:00 during weekdays. On Fridays and Saturdays, all shops, businesses and restaurants remain closed. Schools remain closed, except for Grade 12 *Tawjihi* (final high-school exams) classes. The PA has prohibited

Palestinians from moving between governorates or in and out of East Jerusalem, with some exceptions, including medical personnel, essential goods and food.

On 25 March, public sector doctors went on strike across the West Bank with the Palestinian Doctors Syndicate only working at minimum capacity in COVID-19 treatment centres on emergency cases, in maternity wards and for haemodialysis and cancer patients. The number of confirmed cases witnessed a slight decline during the strike, resulting in the PA seeking help from military medical corps for testing in Nablus, Jenin, and Tulkarm governorates.

Palestinian workers with valid permits are allowed to enter Israel through the designated checkpoints. Israeli police are monitoring unofficial routes and openings, but workers are still entering Israel through breaches in the Barrier. Allenby Bridge re-opened on 21 February, with maximum 1,000 travellers allowed to enter daily from Jordan to the West Bank, and maximum 500 travellers per day allowed to exit to Jordan.

Citing the lack of building permits, during March, the Israeli authorities demolished or confiscated at least 60 Palestinian-owned structures in the West Bank, including East Jerusalem, displacing at least 81 people, including 40 children, and otherwise affected the livelihoods, or access to services, of nearly 200 others. Of the structures targeted during March, 44 were in Area C, including eighteen structures that had been provided as humanitarian assistance. About 50 per cent were confiscated, a practice that has been on the rise in recent years. The percentage of structures confiscated, out of all structures targeted (demolished and confiscated) increased from about eight per cent in 2016, to 30 per cent in 2020, and stood at 64 per cent by end-March 2021.

### Gaza Strip

In Gaza, 10,410 new COVID-19 cases were recorded in March, with the number of active cases increasing by over 350 per cent. There was also a significant increase in the daily positivity rates, with figures of between 21 and 29 per cent recorded during the last week of the month. The cumulative caseload since the start of the pandemic is 65,588. Sixty-one people died in March, compared with 28 in February, bringing the overall death toll to 611 in total.

By end-March, 199 out of 540 beds dedicated for COVID-19 patients were occupied, a rate of 37 per cent. According to the local authorities, 199 people were in isolation in the designated hospitals, compared with 51 people at the end of February. Another 8,527 people were in home isolation and 13,016 in home quarantine, compared with 1,688 and 5,254 people, respectively, at the end of February. Despite the surge, the Ministry of Social Development has reported that the local authorities do not foresee the reopening of isolation or quarantine facilities other than designated hospitals, at this stage.

In response to the increasing number of active cases, the local authorities imposed new restrictions, including a night curfew from 21:00 to 07:00, starting on 27 March. The authorities also reinforced the closure of public markets and the prohibition on wedding and funeral ceremonies in the streets, as well as stricter public health measures indoors. Working hours for civil servants are also reduced from 4 April.

On 30 March, UNRWA shut down five schools in Gaza due to detected cases of COVID-19 among teachers and students. As of 6 April, all UNRWA schools in Gaza are closed for one week, with pupils reverting to the distance learning approach.

For an interactive map of isolation and quarantine facilities in Gaza see the [OCHA website](#).

The Rafah crossing with Egypt remains open, with 7,332 entries and 6,195 exits recorded during the month. The entry of goods continued from Israel through the Israeli Kerem Shalom Crossing with, as it did via the Rafah Crossing with Egypt. On a daily average, since the beginning of 2021, about 80 Palestinians have entered Gaza through the Erez Crossing on working days.

## COORDINATION

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Responses to COVID-19 related needs during 2021 have been mainstreamed in virtually all humanitarian activities planned for the year and included in the [2021 Humanitarian Response Plan](#) for the oPt. The Plan requires US\$417 million in order to deliver assistance to 1.8 million Palestinians in the Gaza Strip and West Bank, including East Jerusalem.

### Coordination Forums

In early February, it was agreed that the Inter-Agency COVID-19 Task Force, led by the Resident/Humanitarian Coordinator (RC/HC), would be convened on an 'as needed' basis and that response to COVID-19 should be incorporated into the key strategic decision making fora of the Humanitarian Country Team and the Humanitarian Country Team Plus Meetings as well as the UN Country Team as a standing agenda item. If there is a significant change in the context demanding a specific response, an *ad hoc* Task Force Meeting will be convened. In the meantime, the sub national Inter-Cluster Coordination Groups in both Gaza and the West Bank, continue to convene regularly, to coordinate the implementation of various responses to the crisis.

### Access

In March, the RC/HC's Access Coordination Unit (ACU) did not need to facilitate movement between East Jerusalem and the remainder of the West Bank, as was the case previously. Since 17 February, following negotiation by the ACU, Israeli coordination has not been required for critical Palestinian staff from East Jerusalem, holding Israeli residency, to enter Areas A and B.

In March, the ACU facilitated 40 UN and diplomatic missions into and out of Gaza. The Israeli authorities gradually started issuing permits for Gaza ID holders, including UN national staff members, to leave Gaza. UN agencies have requested permits for over 160 national staff, and just over 40 staff members had received their permits by the end of the month.

International UN, and especially INGO, personnel continued to face difficulties or were unable to enter Israel, due to the airport closure since 26 January. In March, only three INGO staff members were coordinated to enter through Allenby Bridge. The ACU continues to negotiate with the Israeli authorities regarding the reopening of crossings to international staff without conditions.

### Procurement

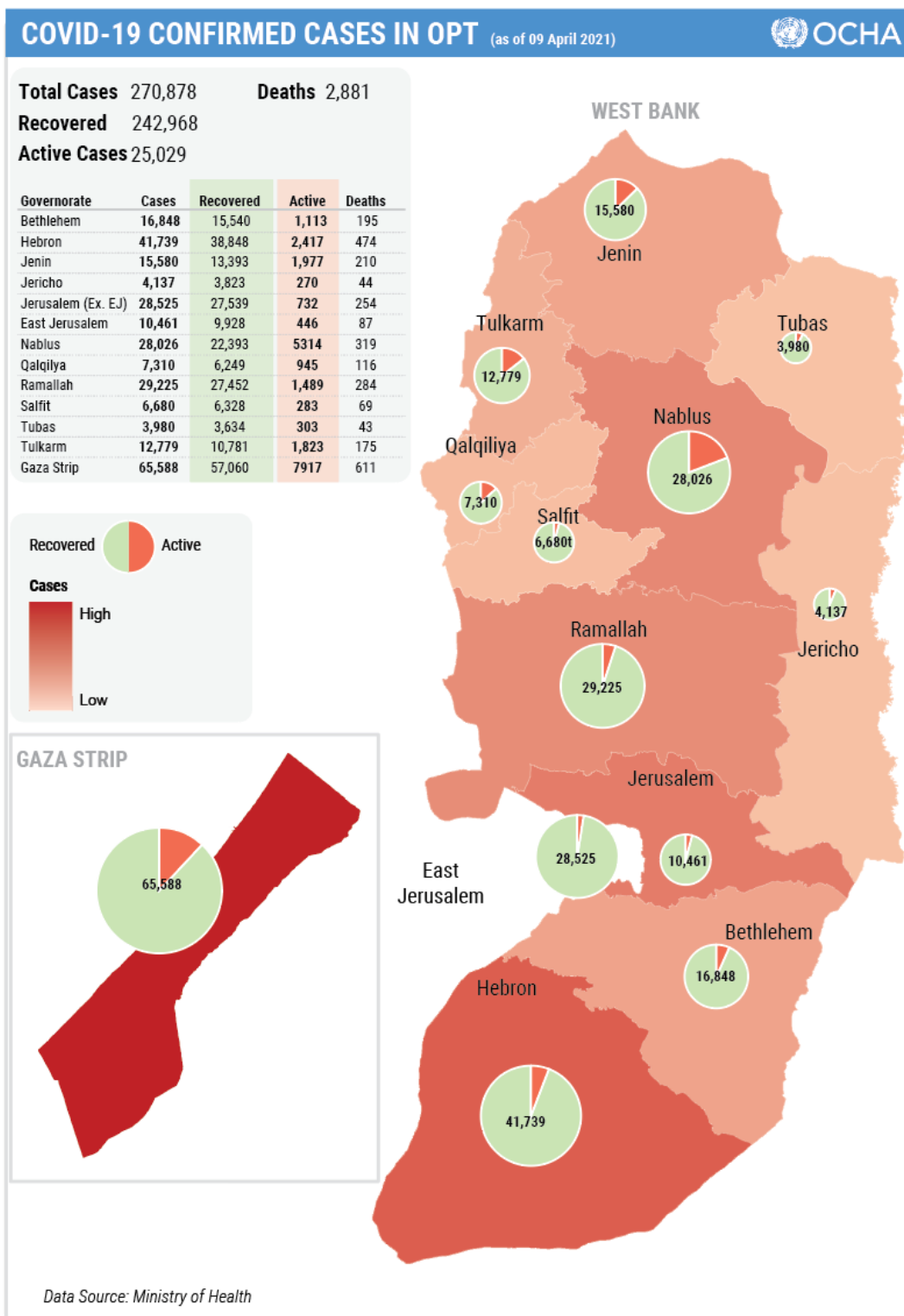
The Health Cluster is tracking the procurement and delivery of critical medical supplies by cluster partners against the immediate needs identified in the COVID-19 Inter-Agency Response Plan, and subsequently included in the 2021 Humanitarian Response Plan. The table below highlights the availability and gaps regarding the most important medical items needed. All partners are encouraged to subscribe and submit their requests for procurement of medical supplies for laboratory testing, case management and infection prevention and control through WHO's global COVID-19 response coordination portal.

## Supplies Tracking:

<b>Supply Category</b>	<b>Item / Unit</b>	<b>Estimated Qty (as per IA Response)</b>	<b>Delivered</b>	<b>Pipeline</b>	<b>Current Gap</b>
<b>Case Management</b>	Patient Beds	500	<b>60</b>	<b>204</b>	<b>236</b>
<b>Infection Prevention and Control (IPC)</b>	Surgical Mask	4,000,000	<b>530,400</b>	<b>594,050</b>	<b>2,875,550</b>
	N-95 Respirator	300,000	<b>7,000</b>	75,880	<b>217,120</b>
	Surgical gloves	8,000,000	<b>1,332,000</b>	<b>2,594,022</b>	<b>4,073,978</b>
<b>Laboratory Testing</b>	COVID-19 PCR Tests	300,000	<b>90,440</b>	4,800	<b>204,760</b>
	COVID-19 Rapid Antigen Tests	1,500,000	<b>100,000</b>	<b>150,000</b>	<b>1,250,000</b>
	Swabs / Medium, sample collection	1,500,000	<b>150,000</b>	50,100	<b>1,299,900</b>
	RNA Extraction Kits (2000/Kit)	700	<b>99</b>		<b>601</b>

## Risk Communication and Community Engagement

The national Risk Communication and Community Engagement (RCCE) campaign continues to target media outlets and governorates with COVID-19 messaging, aimed at promoting adherence to public health measures, including face covering, hand-washing, physical distancing, and avoiding mass gatherings. In addition, following the roll-out of the mass vaccination campaign, the focus of RCCE messaging has broadened to include information about vaccines and the importance of vaccination, in an effort to increase demand for vaccination on the part of the population. Messaging continues to be conducted via the distribution of brochures, text messaging, daily radio advertising and sharing of influencer videos. RCCE materials are [available online](#).



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

[OCHA COVID-19 DEDICATED WEBPAGE](#)

[DETAILED LIST OF ACTIVITIES BY CLUSTER](#)