

HUMANITARIAN NEEDS OVERVIEW

OPT

HUMANITARIAN
PROGRAMME CYCLE
2022

ISSUED DECEMBER 2021



About

This document is consolidated by OCHA on behalf of the Humanitarian Country Team and partners. It provides a shared understanding of the crisis, including the most pressing humanitarian need and the estimated number of people who need assistance. It represents a consolidated evidence base and helps inform joint strategic response planning. The designations employed and the presentation of material in the report do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries

PHOTO ON COVER

A photo of an internally displaced child who seeks refuge and safe shelter in Salah Eldein UNRWA school © 2021 UNRWA Photo By Mohamed Hinnawi

GENERAL DISCLAIMER:

Unless otherwise indicated, data in this document is valid as of end September 2020.

Get the latest updates



OCHA coordinates humanitarian action to ensure crisis-affected people receive the assistance and protection they need. It works to overcome obstacles that impede humanitarian assistance from reaching people affected by crises, and provides leadership in mobilizing assistance and resources on behalf of the humanitarian system.

www.ochaopt.org

twitter.com/ochaopt



Humanitarian InSight supports decision-makers by giving them access to key humanitarian data. It provides the latest verified information on needs and delivery of the humanitarian response as well as financial contributions.

hum-insight.info/plan/1059



The Financial Tracking Service (FTS) is the primary provider of continuously updated data on global humanitarian funding, and is a major contributor to strategic decision making by highlighting gaps and priorities, thus contributing to effective, efficient and principled humanitarian assistance.

fts.unocha.org/appeals/1012

Table of Contents

04	Summary of Humanitarian Needs
12	Part 1: Impact of the Crisis and Humanitarian Conditions
	Context and Drivers of the Crisis
	Scope of Analysis
	Accountability to Affected Populations
	People in Need
25	Part 3: Sectoral Analysis
	Protection
	Health and Nutrition
	Food Security
	Education
	Water, Sanitation and Hygiene
	Shelter and Non-Food Items (NFIs)
41	Part 4: Annexes
	Data Sources
	Methodology
	2021 HNO Key Figures
	People in Need by Cluster
	Acronyms
	End Notes

Summary of Humanitarian Needs

Severity of Needs*

TOTAL POPULATION

5.3M

Source: PCBS, 2022 projection

PEOPLE IN NEED

2.1M

STRESS

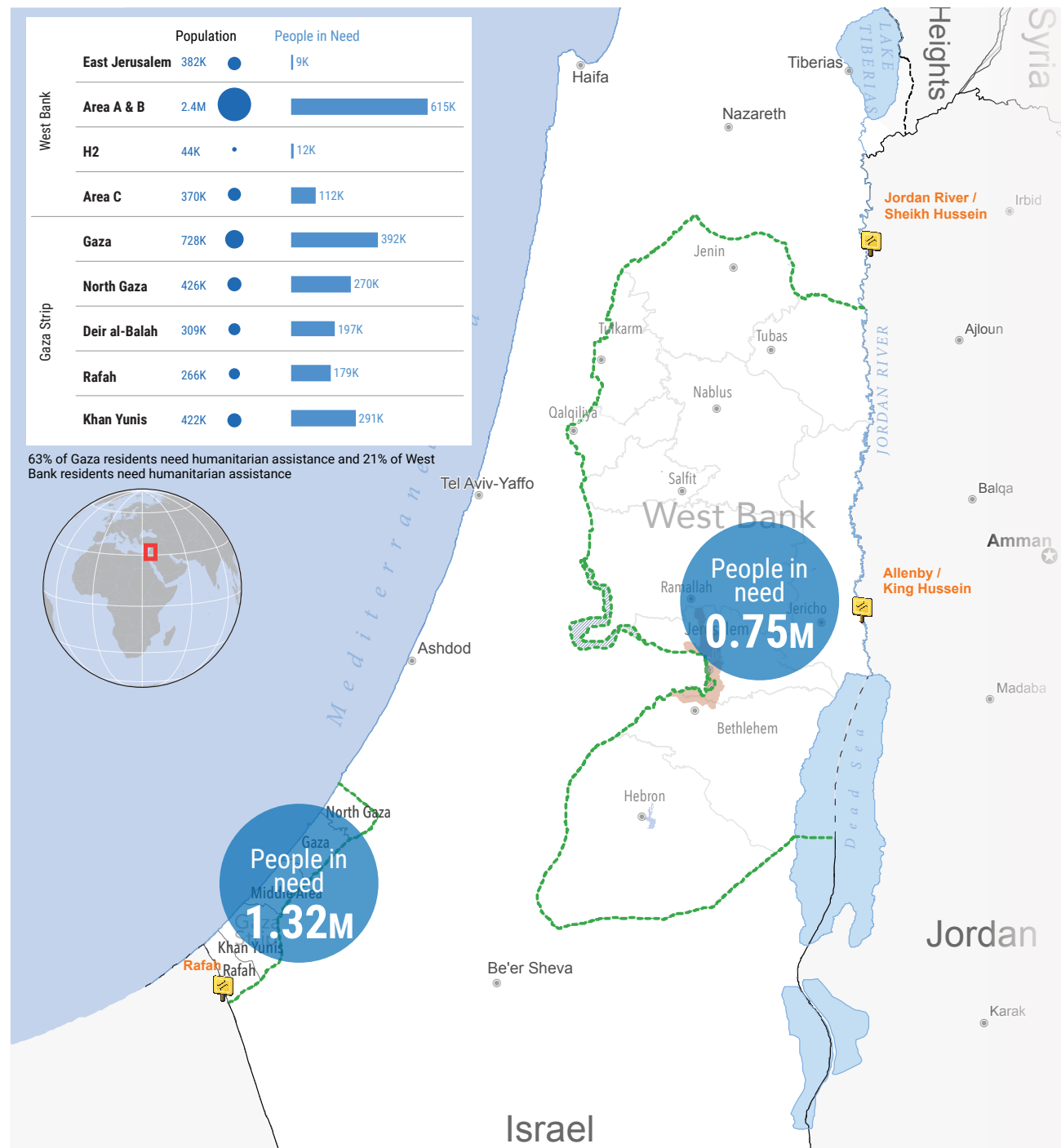
43%

SEVERE

39%

EXTREME

6%



The designations employed and the presentation of material in the report do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

*Severity of needs was calculated based on the Joint Inter-sectoral Analytical Framework (JIAF). For more information see the methodology page 58.

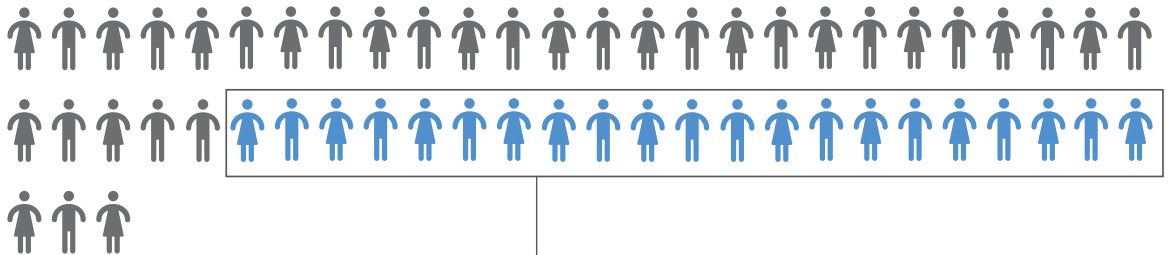
TOTAL POPULATION

5.3M

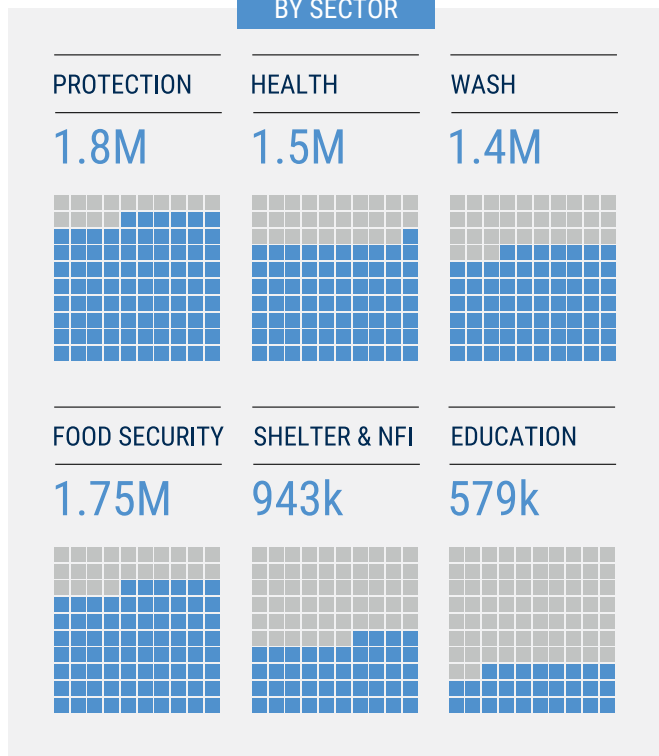


PEOPLE IN NEED

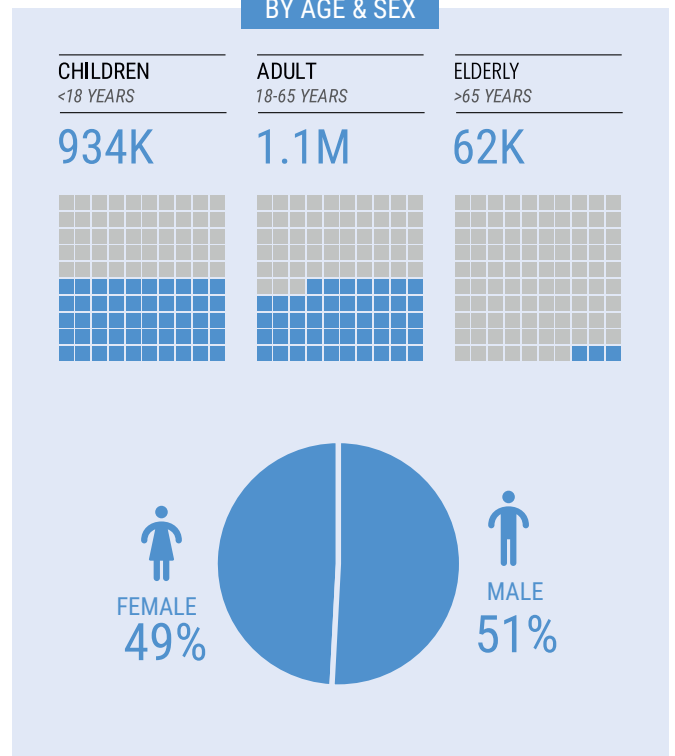
2.1M



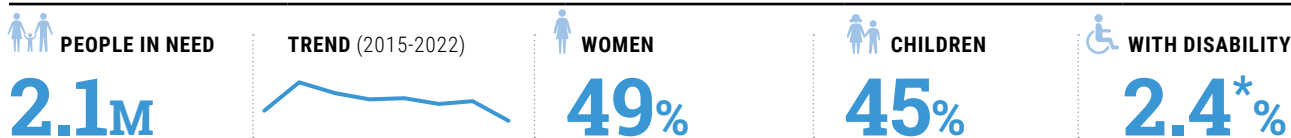
BY SECTOR



BY AGE & SEX

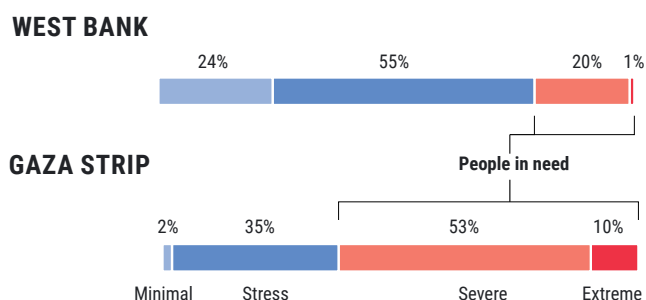


Key Findings



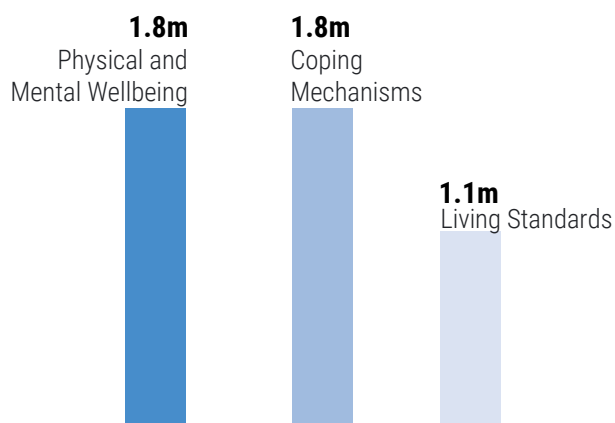
*Based on a functional definition of disability as provided by the Disability Working Group. WHO global figure states that 15% of the world's population lives with some form of disability.

PIN by Geography and Severity



According to the Multisectoral Needs Assessment (MSNA) conducted in July 2021, 63 per cent of Gaza (1.3 million) will require some form of humanitarian assistance in 2022 compared to 21 per cent of the West Bank (0.75 million).

By Humanitarian Condition



In the inter-sectoral model (see annexes), the living Standards indicators has 1.1 million PIN, followed by Physical and mental well-being by 1.8 million PIN, and the coping mechanism by 1.8 million PIN.

By Age and Gender

AGE AND GENDER	PEOPLE IN NEED	% PIN
Male 0- <18	476k	23%
Female 0- <18	458k	22%
Male 18-65	550k	27%
Female 18-65	529k	25%
Male 65+	32k	2%
Female 65+	31k	1%

By Population Groups

POPULATION GROUP	PEOPLE IN NEED
Refugees outside camps	947K
People living below the poverty level	800K
Refugees inside camps	464K
Shelter damaged (partial and major damage)	280K
Female headed households	228K
Farmers	125K
People with disabilities	50K
Internally displaced people	12.5K

Summary of Humanitarian Consequences

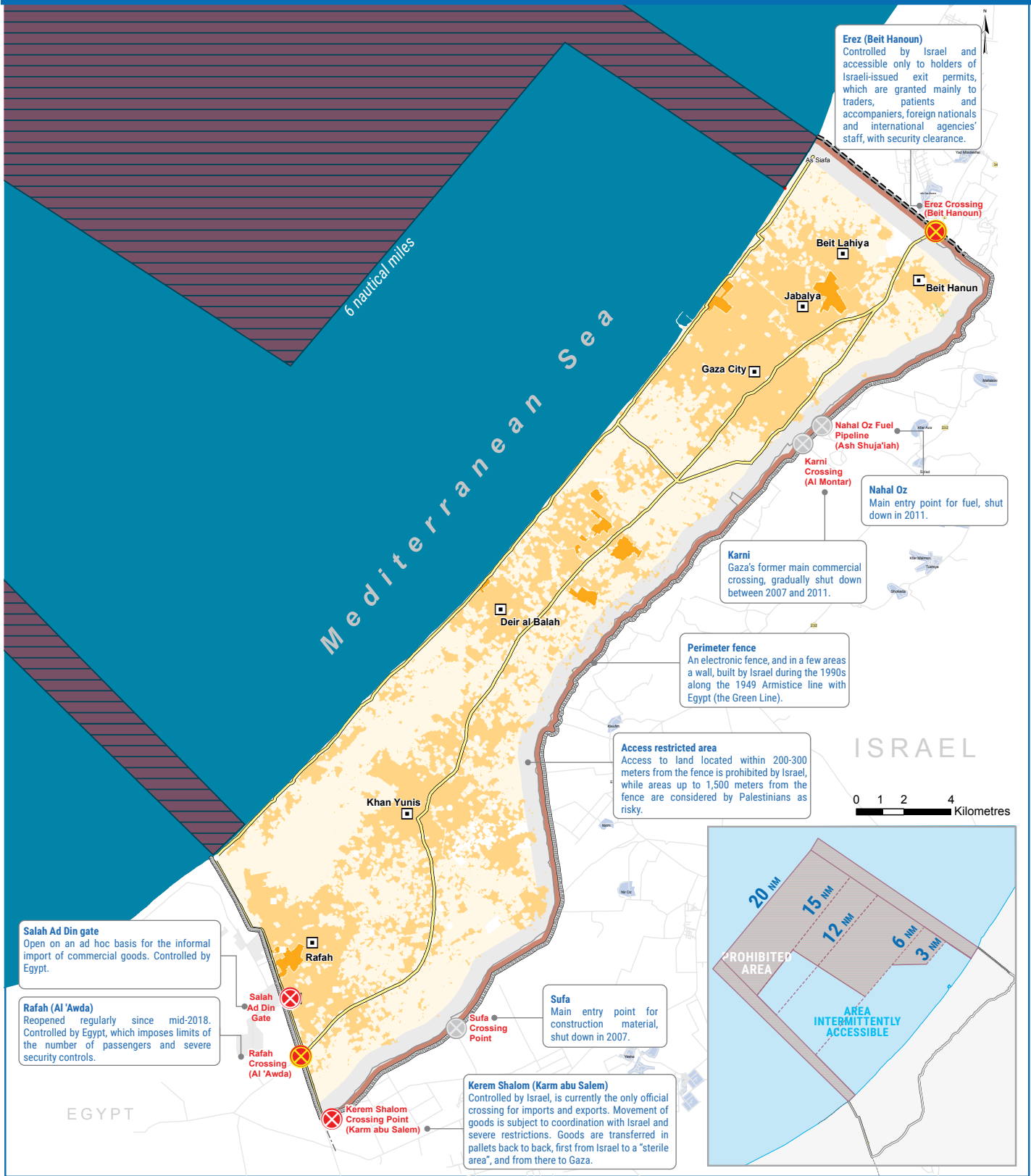
PIN by cluster and age

CLUSTER	MALE 0- <18	FEMALE 0- <18	MALE 18-65	FEMALE 18-65	MALE 65+	FEMALE 65+	TOTAL
Protection	417,435	392,152	482,369	463,453	27,829	35,650	1,818,888
Education	245,630	312,620	9,233	11,688			579,172
Health	344,250	323,400	397,800	382,200	22,950	29,400	1,500,000
Shelter	216,000	204,000	250,000	240,000	14,000	19,000	942,717
WASH	312,667	293,730	361,304	347,135	20,844	26,703	1,362,382
FSS	400,623	376,358	462,942	444,787	26,709	34,214	1,745,632
Overall Pin	476,337	447,487	550,434	528,848	31,757	40,680	2,075,542

PIN by Geography and Severity

REGION	AREA	POPULATION	MINIMAL	STRESS	SEVERE	EXTREME	CATASTROPHIC	PERCENT	PIN
Gaza Strip	Khan Yunis	422,286	1%	30%	54%	14%	0%	69%	290,971
Gaza Strip	Rafah	265,498	1%	32%	54%	14%	0%	67%	178,467
Gaza Strip	Deir al-Balah	308,765	1%	35%	56%	8%	0%	64%	197,355
Gaza Strip	North Gaza	425,530	1%	36%	56%	8%	0%	63%	269,515
Gaza Strip	Gaza	728,248	6%	40%	46%	8%	0%	54%	391,813
West Bank	Area C	369,489	8%	62%	27%	3%	0%	30%	111,482
West Bank	H2	43,731	11%	62%	27%	1%	0%	28%	12,078
West Bank	Area A & B	2,390,043	9%	66%	24%	2%	0%	26%	614,825
West Bank	East Jerusalem	381,737	68%	30%	2%	0%	0%	2%	9,035
Total		5,335,327	12%	44%	38%	6%	0%	45%	2,075,542

GAZA STRIP: CROSSINGS AND RESTRICTED AREAS



OCCUPIED WEST BANK: INCREASING FRAGMENTATION



Area C

The over 60% of the West Bank where Israel retains almost exclusive control. Over 350,000 Palestinians and over 400,000 Israeli settlers reside in Area C

Area A

The 18% of the West Bank where the Palestinian Authority has extensive law enforcement and planning powers.

Area B

The 22% of the West Bank where the Palestinian Authority has planning powers and joint law enforcement authority with Israel. Some 80% of Palestinians live in Areas A and B combined.

Settlements municipal boundaries

Cover around 10% of the West Bank where some 150 settlements were established in contravention to int'l law. These areas are off limits for Palestinian access. Some 630,000 Israelis live there

Firing zones

Cover some 18% of the West Bank and are closed for military training. Some 50 herding communities living there are at risk of expulsion.

The West Bank Barrier

Built since 2002 following wave of Palestinian attacks in Israel. Most of the route encroaches into the West Bank, in contravention to int'l law. Palestinians access is subject to a restrictive permit and coordination system.

- Constructed Barrier
- - - - - Projected; Under Construction Barrier

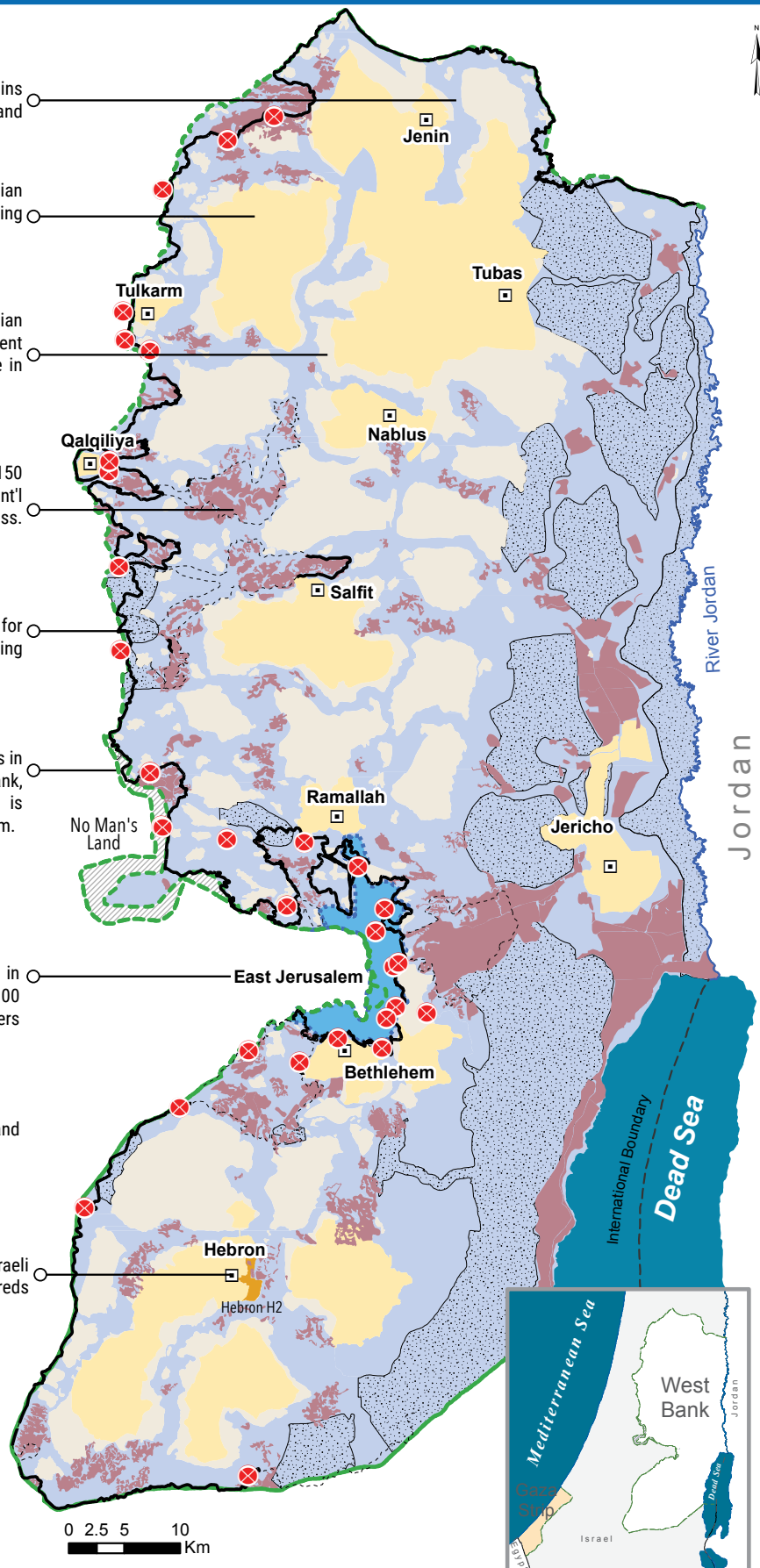
East Jerusalem

Covers 70 KM2, unilaterally annexed to Israel in contravention of international law. Over 350,000 Palestinians and more than 200,000 Israeli settlers reside there.

--- Green Line
The 1949 Armistice boundary agreed between Israel and Jordan.

Hebron city: H2

The 20% of Hebron city which remains under direct Israeli control. Some 42,000 Palestinians and a few hundreds Israeli settlers live there.



Part 1

CONTEXT AND DRIVERS OF THE CRISIS

WEST BANK

Beit Hanoun city, Hayat stands in her kitchen after her home was destroyed and inspect the damage to their homes following a ceasefire, in Beit Hanoun in the northern Gaza Strip. Photo by Shareef Sarhan \ UNDP - PAPP © 2021



1.1

Context of the Crisis

The context in the occupied Palestinian territory (oPt) remains a protracted protection crisis, where too many Palestinians struggle to meet their most basic needs and live in dignity. The crisis is characterized by more than 54 years of Israeli military occupation, lack of respect for international humanitarian and human rights law, internal Palestinian political divisions, and recurrent escalations of hostilities between Israel and Palestinian armed groups. COVID-19 has exacerbated the crises in the past two years.

This year has witnessed further deterioration in the humanitarian situation in the oPt due to:

- The most serious escalation of hostilities between Palestinian armed factions in the Gaza Strip and Israel since 2014, which has aggravated Gaza's chronic shelter, infrastructure and energy deficits.
- Movement restrictions imposed by Israel, citing security concerns, which impede the access of people and goods into and out of Gaza, hampers the implementation of infrastructure projects and delays economic recovery.
- An increase in conflict-related Palestinian casualties in the West Bank, including East Jerusalem, and in settler-related violence against Palestinians and their communities.
- The restrictive and discriminatory planning regime applied by Israel in Area C and in East Jerusalem, which continues to prevent Palestinians from addressing basic housing, livelihood and basic service needs.
- The high level of demolitions and seizures of Palestinian structures on the grounds of a lack of Israeli-required building permits.
- Imposition of physical and administrative measures which restrict humanitarian programmes, including constraints on the delivery of materials needed, and limitations on the implementation of projects that involve building, expanding or rehabilitating infrastructure in the Gaza Strip, Area C, the H2 area of Hebron and East Jerusalem.
- Restrictions imposed by Hamas in Gaza, including the imposition of taxes and audits on international NGOs and interference in NGO surveys and assessments.

On 27 May, following the ceasefire in Gaza, the Humanitarian Coordinator for the oPt, Lynn Hastings, launched the inter-agency [Flash Appeal](#), requesting \$95 million to support emergency humanitarian and early recovery responses over a three-month period. The response plan provided for a swift transition to an early recovery phase, including the rehabilitation and reconstruction of infrastructure services and networks. The Appeal complemented the \$417 million requested in the 2021 oPt Humanitarian Response Plan, covering pre-existing humanitarian needs. So far, \$87 million has been mobilized following the flash appeal of which \$66.7 million directly through the Flash Appeal and the remainder outside the Flash Appeal.

- The intra-Palestinian divide between Hamas and the Fatah-led Palestinian Authority (PA), which remains unresolved, deepening territorial fragmentation and reducing the capacity of local institutions in Gaza to deliver basic services to the population. The PA's postponement of planned Palestinian Legislative Council elections, which had been scheduled for May,¹ deepened this divide, while Palestinian security forces' crackdown on domestic protests in the West Bank, following the killing of a prominent Palestinian critic of the PA during his arrest in June, has raised serious concerns of human rights abuses.
- Intensification of the Covid-19 pandemic, with Gaza experiencing its third and the West Bank its fourth wave in 2021, overburdening the already-stretched healthcare system and aggravating socioeconomic conditions across the oPt.

- Unprecedented shortfalls in donor funding.
- The designation of six Palestinian human rights and humanitarian NGOs as ‘terror organizations’ by the Israeli authorities in late 2021. As at writing, evidence substantiating the allegations had not been provided to the United Nations.
- There have been some positive developments this year, with the Israeli authorities easing some of

the restrictions imposed on Gaza in May, including expanding the permissible fishing zone along the southern part of the Gaza coast to 15 nautical miles; issuing up to 10,000 permits for businessmen to exit Gaza; and expanding the operation of Kerem Shalom crossing for the transfer of goods and equipment. In September, steel bars entered Gaza through Israel for the first time since 2014, outside of the Gaza Reconstruction Mechanism (GRM).

GAZA STRIP

Destruction in Gaza following Israeli strike May 2021. ©Photo by UNDP



1.2

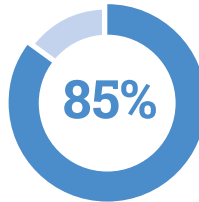
Shocks and Impacts of the Crisis

According to the Office of the High Commissioner for Human Rights (OHCHR), during the 11-day escalation in Gaza, 261 Palestinians were killed, including 67 children. Of those, 129 were civilians, 64 were members of armed groups, while the status of the others remains undetermined. Over 2,210 Palestinians were injured during the hostilities, including 685 children and 480 women. In Israel, 13 people, including one soldier and three foreign nationals, were killed during the hostilities by Palestinian rocket or other fire, and over 700 Israelis were injured. In Gaza, the threat of Explosive Remnants of War (ERW) remains, with one fatality and nine injuries reported since the end of the escalation, and unexploded ordnance remaining to be excavated and neutralized.

The local authorities in Gaza report that 1,255 houses were destroyed, 918 housing units sustained severe damage and are deemed uninhabitable, and some 50,000 houses sustained minor damage. This has aggravated the densely populated territory's chronic shortage, that is expected to exceed 120,000 units in 2022, with an annual average of 14,000 housing units needed to meet natural growth. The housing shortage has led to an increase in demand for legal aid support for affected households, including for GBV survivors and widowed women relating to issues of denial of resources, custody of children and the loss of identity documents due to destruction of houses or while taking refuge.

According to a Rapid Damage and Needs Assessment, 306 schools were damaged in addition to 63 UNRWA schools which were affected by the wear and tear of hosting IDPs. 17 health facilities² were completely destroyed, whilst the escalation resulted in losses of up to US\$380 million in physical damage and additional economic losses of \$190 million.³

The Water, Sanitation and Hygiene (WASH) Cluster reports that, during the escalation, 290 WASH facilities



of households that had their homes damaged as a result of the May hostilities had 'no capacity' to repair their homes.

Source: MSNA

were damaged or destroyed, including water wells, water pumping stations, and distribution networks⁴, constraining access to water and sanitation services for more than 1.2 million Palestinians.

Due to the limited capacities of the local authorities and Israeli restrictions on the entry of materials, key providers are still struggling to fully restore and maintain the functionality of basic services in Gaza.

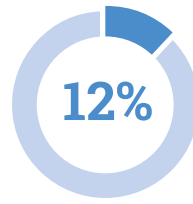
The May hostilities in Gaza were accompanied by significant unrest in the West Bank, with tensions rising in East Jerusalem since the beginning of Ramadan in mid-April, characterized by clashes and violent incidents involving Palestinians, Israeli settlers, and Israeli Forces, erupting on a daily basis.

Concerns about excessive use of force by Israeli soldiers resulting in the killing or serious injury of Palestinians, as well as lack of accountability for such violations of international law, remain. So far in 2021, 71 Palestinians have been killed by Israeli Forces using live ammunition in conflict related incidents in the West Bank, compared with 23 in 2020. In 2021, over 1,000 have been injured by live ammunition. Among these casualties were eight Palestinians killed by ammunition during ongoing protests since May against the construction of a new Israeli settlement near Beita village in Nablus, and over 4,800 injured, including 182 by live ammunition. During 2021, two Israelis have been killed, and 142 injured by Palestinians in the West Bank, including 43 members of Israeli security forces.

This year has also witnessed a high level of demolitions of Palestinian structures in Area C and East Jerusalem, including the demolition or seizure of internationally funded humanitarian projects. According to the Israeli authorities, demolition of Palestinian homes and other structures in Area C is due to the structures being erected without Israeli-issued building permits⁵. However, less than one per cent of Area C and 13 per cent of East Jerusalem have Israeli-approved plans, which allow Palestinians to apply for building permits and construct in these areas. According to data obtained by the Israeli organization Peace Now from the Israeli Civil Administration (ICA), between 2009 and 2018, only two per cent of all requests submitted by Palestinians for building permits in Area C were granted (98 out of 4,422). A similarly restrictive regime applies in East Jerusalem: according to the same source, in Jerusalem, between 1991 and 2018, only 16.5 per cent of permits were issued for Palestinians, although Palestinians comprise 38 per cent of the city's residents.⁶

Humanitarian assistance provided in Area C, some of it in response to demolitions and confiscations, has been increasingly targeted in recent years under the restrictive planning regime imposed by Israel: for example, the number of donor-funded assets demolished or confiscated has increased by over 30 per cent compared with 2020. Since 2017, over 650 donor funded structures have been demolished. Also in 2021, 328 structures, or 56 per cent of all structures targeted in Area C, have been seized with little or no prior notice, utilizing various military orders, effectively preventing the affected people from legal recourse in advance.

In this context, the homes and livelihood structures of the Bedouin community of Humsa al Bqai'a have been demolished or confiscated seven times so far in 2021, displacing 42 people. The repeated destruction of their homes and property, including assistance provided by the humanitarian community, not only affects the community's capacity to develop their livelihoods but has a profound psycho-social impact, particularly on



of HHs in the West Bank reported settler violence.

Verbal abuse or harm 57%; Menacing behaviour (e.g. threats, pointing of weaponry, firing weaponry) 44%; Obstructed access to areas in HH's vicinity (e.g. farm or pasture land) 20%.

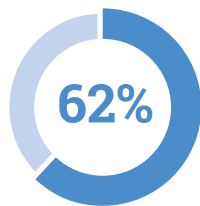
Source: MSNA

children.⁷

Demolitions represent one element of a coercive environment that leaves many Palestinians throughout the West Bank, including East Jerusalem, with no option but to leave their homes and communities. The elements of the coercive environment also includes the promotion of plans to relocate communities to urban townships; restrictions on access to natural resources; the denial of basic service infrastructure; and the lack of secure residency. These practices are often implemented against a backdrop of the establishment and expansion of Israeli settlements.

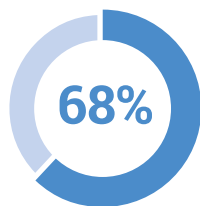
Further concerning components of the coercive environment placing Palestinians at further risk of forced displacement are continuing attacks and intimidation by Israeli settlers, carried out with impunity. In 2021, five Palestinians have been killed by settlers, and 560 injured, compared to no Palestinian fatalities by settlers in 2020 and two in 2019: Two Israeli settlers and civilians have been killed and 99 injured by Palestinians in the West Bank in 2021. The increased presence, harassment and intimidation by armed Israeli settlers in previously unaffected locations across the West Bank, have compounded security concerns for humanitarian personnel and contributed to their restricted movement and delayed delivery of responses.

Palestinian families still face the threat of forced eviction from their homes by the Israeli authorities in Sheikh Jarrah, East Jerusalem, due to court cases initiated by Israeli settler organizations. On 2 November, four of the families concerned rejected a proposal made by the Israeli High Court of Justice that would have offered them



of households report that their monthly income has decreased as a result of COVID-19, 68% of HHs in the West Bank; 53% of HHs in the Gaza Strip.

Source: MSNA



of households report an increase in debt as a result of COVID-19.

Source: MSNA

protected tenancy status, while recognizing an Israeli settler organization's ownership of the land, to which the Palestinian tenants would pay an annual leasing fee. The Israeli settler organization also reportedly had expressed reservations about the proposal. In total in East Jerusalem, at least 218 Palestinian households comprising 970 people, including 424 children, are facing eviction cases pending in Israeli courts.⁸

Also of concern is the designation of six Palestinian human rights and humanitarian NGOs as 'terror organizations' by the Israeli authorities in late 2021. In the absence of evidence substantiating the allegations, these designations risk further undermining the humanitarian community's ability to provide assistance and protection to Palestinians throughout the oPt.

The oPt witnessed an upsurge in COVID-19 cases in 2021 as a result of the Delta variant. As of end November, according to the Palestinian Ministry of Health (MoH),

about 460,000 COVID-19 cases were confirmed overall in the oPt, with 4,800 deaths and 452,000 Palestinians having recovered: this in comparison to 155,365 cases overall, 1,529 deaths and 132,818 recoveries at the end of 2020. The situation in Gaza, which has about 50 per cent of active cases, is especially concerning, due to its population density, degraded infrastructure and deteriorating living conditions. COVID-19 restrictions have also undermined access to social services across the oPt, with the greatest impact on the most vulnerable, including women and girls, the elderly, persons with disabilities, cancer patients in Gaza, Bedouin communities in Area C, households isolated by the West Bank Barrier and undocumented residents of East Jerusalem. Mental health service providers have reported a surge in cases of GBV and violence affecting women and children.

As of end-November, about 1,660,000 Palestinians have been vaccinated. Among the vaccinated, around 1,430,000 have received two doses. Along with the challenges arising from the duration of the effectiveness of vaccines, and the need for booster shots even for those fully vaccinated, data collected by the Multi-Sectoral Needs Assessment (MSNA) in July 2021 shows that 72 per cent of surveyed households in the Gaza Strip, and 45 per cent in the West Bank reported that not all members are willing to be vaccinated against COVID-19. The vast majority, 74 per cent cited 'vaccine not being safe' as the main reason for their reluctance.

Scope of Analysis

Scope of Analysis: Affected geographical areas, groups, and severity

The 2022 Humanitarian Needs Overview is informed by the first-ever oPt Multisectoral Needs Assessment (MSNA) at the household level. The MSNA followed [the Joint Intersectoral Analysis Framework \(JIAF\)](#), a global methodology endorsed by the Global Cluster Coordinators and Inter-Agency Standing Committee (IASC) (see Annex) and enabled a detailed inter-sectoral analysis of the magnitude and severity of humanitarian needs among crisis-affected population groups in the oPt. This supported the calculation of sectoral and inter-sectoral 'People in Need' and severity figures, as well as the identification of vulnerable population groups and geographic areas with the most acute needs.

The following groups were identified as most vulnerable in the oPt and integrated in the MSNA data collection and needs analysis: people living below the poverty level; Palestine refugees living in refugee camps; Palestine refugees living outside refugee camps; People with shelter damage due to the last escalation; female-headed households; small-scale farmers; People with disabilities; and internally displaced people.

In July 2021, through the MSNA, the Palestinian Central Bureau of Statistics (PCBS) surveyed 7,500 households across the oPt, required to generate a statistically representative sample of the overall population. Female respondents represented 53 per cent.

In coordination with cluster coordinators and consultation with the cluster leads, the MSNA geographic scope disaggregated to 48 areas/strata with a statistically representative needs analysis (33 localities in Gaza and 15 areas in the West Bank), as follows:

West Bank stratification:

- 11 governorates within Area C
- Area A and B
- H2 area of Hebron
- East Jerusalem
- All 19 refugee camps (as one stratum).

Gaza Strip stratification:

- 28 localities
- Five refugee camps (separate strata).

The MSNA survey developed over 250 needs indicators across all clusters, including Accountability to Affected Population (AAP) and gender indicators, with the risk of SEA addressed as part of AAP and Gender. The indicators are intended to measure people's humanitarian conditions across three sub pillars: living standards, coping mechanisms, and physical and mental wellbeing.

In August, OCHA and cluster coordinators developed the interagency needs analysis model and the clusters' needs analysis models. The models included the most representative/critical indicators and their needs thresholds on a five-level severity scale. OCHA shared the verified raw data and the preliminary findings of the MSNA with the clusters and cluster members. Cluster coordinators and information officers used the MSNA data and other datasets to generate the clusters' People in Need (PIN) and severity of needs by strata/area, demographic groups, gender, and age. The MSNA dataset was used to produce a joint intersectoral needs analysis to inform the Humanitarian Needs Overview and, subsequently, humanitarian programming/projects (see the list of indicators used in the intersectoral model below).

The MSNA was developed and implemented jointly with development partners, who will use the data to inform development assistance planning and relevant Sustainable Development Goal (SDG) targets. The joint exercise represents a further step towards the integration of a Nexus approach to needs analysis and planning in the oPt.

1.4

Humanitarian Conditions and Severity of Needs

Living standards

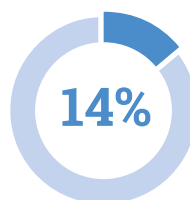
The May escalation in Gaza, increasing unrest and longstanding occupation-related policies in the West Bank and the ongoing COVID-19 epidemic have further restricted Palestinian access to essential health, education and other essential services throughout the oPt.

Access Restrictions in Gaza

In Gaza, Israel has gradually eased the access restrictions imposed at the onset of the escalation in early May. As of September, Israel has issued up to 10,000 entry permits for Gaza businesspeople, restored the permitted fishing zone to its pre-escalation limits (15km), and allowed the entry of more goods and equipment through the Kerem Shalom crossing, including construction materials and some equipment designated by Israel as “dual use” items which was requested for humanitarian infrastructure projects. The re-opening of the Egyptian-controlled Rafah Crossing with Egypt since February, closed during most of 2020 for the entry and exit of authorized travellers, has restored some connectivity with the outside world, and eased longstanding hardship for critical groups; in 2021, 11,000 crossings have been recorded in both directions per month, compared to 4,248 crossings in 2020.⁹

However, the overwhelming majority of the two million Palestinians in Gaza are still unable to access the West Bank including East Jerusalem and the rest of the world. The data shows that only a tiny minority (around 0.4 per cent) are eligible for exit permit by Israel. With only a minority eligible for exit permits via Israel, primarily patients, businesspeople and the staff of international organizations.¹⁰ Patients referred outside for medical treatment unavailable in Gaza continue to face major access constraints on exiting through the Israeli-

controlled Erez crossing. Between January and October 2021, approximately one in three patient applications from Gaza were unsuccessful, with patients denied or delayed access. Patients with long term treatment needs are only granted approvals for one appointment at a time, requiring them to apply separately for each treatment.

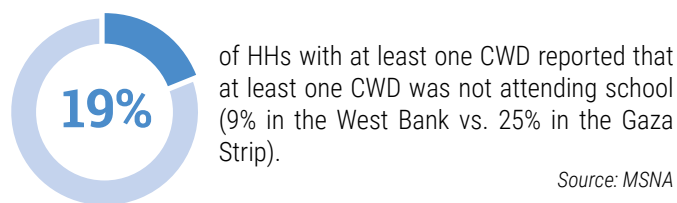


of all households reported having at least one household member with a physical and/or cognitive difficulty, among these households, 33% cannot access at least one basic service due to these physical and/or cognitive difficulties.

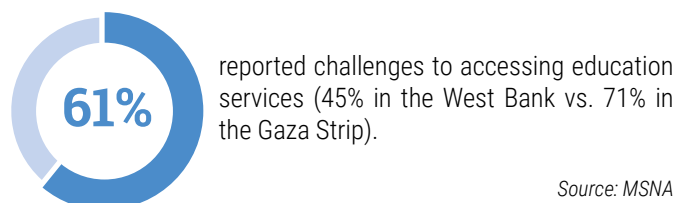
Source: MSNA

Access Restrictions in the West Bank, including into East Jerusalem

Palestinian movement in certain areas of the West Bank, including into East Jerusalem, continues to be restricted by physical and administrative measures, undermining access to basic services, as well as hindering the ability of humanitarian organizations to deliver relief. Access to health services is particularly affected in Area C, Hebron H2 and the ‘Seam Zone’ area between the Barrier and the ‘Green Line.’ The Barrier and the attendant permit regime also restrict patients who hold West Bank ID cards from accessing specialized services in the main Palestinian referral hospitals in East Jerusalem. Most patients needing referrals to access to essential health care, including to hospitals in East Jerusalem, are required by Israel to apply for permits to travel:¹¹ between January and July 2021 one in six such applications were unsuccessful. Persons with disabilities continue to face access challenges due to the lack of accessibility of some health services.



Source: MSNA



Source: MSNA

Health Care

Access to health in both the Gaza Strip and the West Bank including East Jerusalem is further compromised by the ongoing COVID-19 pandemic and related restrictions. The need for laboratory testing, case management, infection prevention, vaccination, risk communication and community engagement, continues to burden the healthcare system. Resources diverted to dealing with the pandemic have had significant impact on the delivery of other essential healthcare services, especially in the fields of gender-based violence, the management of non-communicable diseases including oncology and mental health, and sexual and reproductive health, maternal and child health, including nutrition. An estimated 445,000 Palestinians have had these services intermittently disrupted whenever there had been a surge in cases. Across the oPt, a total of 1.5 million Palestinians, two-thirds of whom in the Gaza Strip, have been identified as requiring health-related humanitarian assistance in 2022.

Access to Education

Approximately 600,000 Palestinians (56 per cent females) across the oPt, including around 13,400 Children with Disabilities (CWDs), will need humanitarian assistance to access education in 2022. Nearly 74 per cent live in the Gaza Strip and over 26 per cent in the West Bank, including East Jerusalem. Among the longstanding issues affecting access to education include insufficient and/or inadequate safe school infrastructure throughout the oPt, including East Jerusalem, and with Gaza particularly affected, with around 65 per cent of schools operating on a double-shift system. In 2021, these challenges have

been compounded by successive COVID-19 surges, which have led to the prolonged closures of schools and kindergartens, as part of the measures adopted to contain the pandemic.

The issue of access to education in Gaza has been further exacerbated by the escalation in May, which led to the early termination of the school year: in 2021 in the oPt, 1.3 million children lost at least three months of schooling, and most have not been able to engage in summer or extracurricular activities. While the Ministry of Education (MoE) and UNRWA have put in place various distance learning programmes for the current academic year, these are not fully accessible to many children, due to the lack of internet connectivity in some homes, and issues accessing printed self-learning materials. Many children with disabilities and resource room students, and children in preschools were excluded from online education.¹²

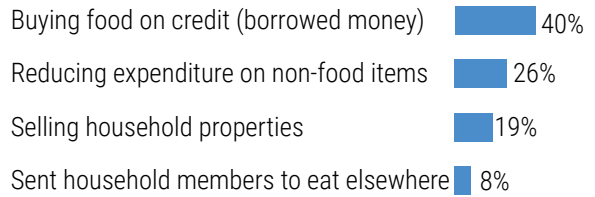
The lack of adequate, safe and accessible school infrastructure is also a major concern in vulnerable areas of the West Bank, especially in the H2 area of Hebron, Area C and East Jerusalem, driven by the restrictive and discriminatory planning regime imposed by the Israeli authorities, which prevents the construction and upgrading of schools. In annexed East Jerusalem, where the responsibility for the delivery of education lies with the Israeli authorities, there is a shortage of around 4,000 classrooms in the public system for Palestinian residents.¹³ In the West Bank, the realization of the right to education is also severely compromised due to Israeli security forces' violence and armed search operations in schools; harassment, intimidation, and settler violence perpetrated against pupils commuting to schools, which can lead to higher school dropout rates. Girls in particular face a high risk of school dropout, due to the fear of parents for their safety during the school commute. About one quarter of children aged 16-17 throughout the oPt, and five per cent of children aged between 10 and 15, are out of school (either dropped out or never enrolled). The situation is worse for children with disabilities (CWDs); 20 per cent of the people with disability in the oPt are children, of whom 46 per cent between the ages of 6-17 are not enrolled in schools.¹⁴

Water and Sanitation

Approximately 1.35 million Palestinians across the oPt are affected by public health risks associated with insufficient access to WASH services and will be in immediate need of humanitarian assistance in 2022. In Gaza, WASH infrastructure and delivery has also been impacted by recurrent conflict, as evidenced by the May escalation of hostilities, as well as the over exploitation of resources, particularly over-extraction of the coastal aquifer, Gaza’s sole water source, which is virtually depleted and has resulted in the intrusion of seawater; and restrictions on the import of ‘dual use’ WASH items. In Gaza, this leaves many Palestinians with no option but to purchase purified or desalinated water for drinking and cooking purposes, mostly from unregulated private vendors, at an average cost of NIS 30 per m³, compared to NIS 2 per m³ paid for piped water.¹⁵ An estimated 20 per cent of families cannot afford these expenses. This exacerbates their exposure to waterborne diseases (particularly acute diarrhoea among children under five) and the risk of a waterborne epidemic affecting the wider population.

In the West Bank, 600,000 Palestinians are not connected to piped water services or are poorly supplied, while 90,000 households across the oPt suffer from an acute lack of solid waste collection services or are located in the vicinity of informal and unregulated dumping sites. Over 250 schools and 180 healthcare units suffer from insufficient WASH facilities, primarily toilets, drinking and handwashing stations; overcrowding at existing facilities undermines hygiene practices, all of which

FOOD SECURITY COPING STRATEGIES

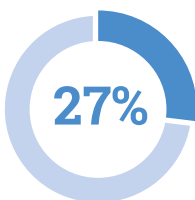


Source: MSNA

raise particular concern due to the ongoing COVID-19 pandemic. Around 94,000 Palestinians reside in low-lying areas at risk of flooding events during winter. Flooding is expected to be more frequent, because of climate change. Due to the traditional gender division of labour in Palestinian society, women and girls bear the bulk of the burden related to the shortage of WASH services.

Coping mechanisms

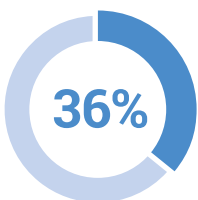
A recurrent cycle of shocks, natural and manmade, has eroded the resilience of vulnerable households to cope with the prolonged nature of the humanitarian crisis in the oPt. In Gaza, negative coping mechanisms have been aggravated by the fourth major escalation in conflict in 12 years, exacerbating pre-existing vulnerabilities and increasing already high poverty, food insecurity, and unemployment rates. Already in 2020, Gross Domestic Product (GDP) was expected to have contracted by 11.5 per cent in the oPt in 2020,¹⁶ due to the combined effect



of households report that at least one adult (18+) is unemployed and seeking work, 42% of HHs in the Gaza Strip 18% of HHs in the West Bank

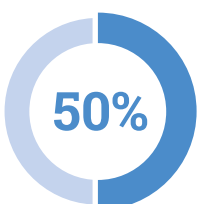
Source: MSNA

of the COVID-19 outbreak, a severe economic slowdown, and a standoff between the PA and the Government of Israel regarding clearance revenues. As a result, women and girls in particular are turning to negative coping mechanisms in response to increasing GBV prevalence and severity. Although the oPt economy is estimated to have grown by 5.4 per cent, in real terms in the first half of 2021, this improvement was completely driven by the West Bank economy, while Gaza’s economy remained almost stagnant in 2021 due to the 11-day conflict in May.¹⁷



36% of households reported that, as a result of the escalation, their typical monthly income decreased a lot. 14% households reported that their typical monthly income decreased a little.

Source: MSNA



50% of households report that the escalation had an impact on their livelihoods and assets. The most commonly reported were Temporary loss of income (32%) Increase/taking on debt (14%). No livelihood opportunities (8%) Permanent loss of income (5%).

Source: MSNA

The unemployment rate in Gaza was 44.7 per cent in the second quarter of 2021: the World Bank estimates that the May conflict has increased poverty in Gaza to 59.3 per cent in 2021, 2.3 percentage points higher than the COVID-19 induced peak in 2020, and a 16.3 percentage point increase above the 2016-2017 values.¹⁸ Between 1.3 million to two million Palestinians (26.3 to 36.7 per cent of the population) are estimated to be moderately to severely food insecure.¹⁹ In 2021, almost two out of five people are food insecure, compared to one in five in 2018.²⁰

Mental and Physical Wellbeing

In Gaza, mental health has been seriously affected by the fourth major escalation in twelve years, worsening the existing mental health crisis, particularly among children. In-person rehabilitation and psychosocial support services were suspended due to the insecurity and destruction of road networks during the escalation and the physical restrictions of fifteen months of the COVID-19 pandemic. Already prior to the escalation, there was a reported quadrupling of suicide rates, especially amongst adolescent girls,²¹ and according to some surveys 82 per cent of adolescents in Gaza reported overall poor-very poor levels of mental wellbeing.²² GBV survivors have particular needs related to psychosocial support, which are not being met; 28 per cent of households in oPt report lack of awareness of, and access to, MHPSS services in case of GBV.

For children especially, the fear for life, loss of loved ones, physical injuries and wide-scale damage and destruction during the escalation have only exacerbated the risk of psychological distress and mental disorders.

Of particular concern are the nearly 600,000 school-age children whose education was suspended in the conflict, and are now at heightened risks of injury by contamination from ERW.

In the West Bank, children and youth have also been affected by the surge in conflict-related violence. Protection Cluster partners providing remote Mental Health and Psychosocial Support (MHPSS) services registered a near 100 per cent increase in calls from East Jerusalem to its national helpline in May. In addition to the direct threat of violence, threats of settler violence have a negative impact on the mental wellbeing of children, and can contribute to negative coping mechanisms such as school dropout and child labour, reinforcing other child protection threats. However, major capacity gaps in school-based psychosocial support (PSS), particularly in the most exposed areas, have prevented the educational system from properly addressing the impact. This has resulted in an extra burden on teachers, who are often untrained to deliver PSS, and has increased the risk of long-term mental health disorders among affected children. 25 per cent of the households with school-aged children interviewed as part of the MSNA (West Bank 24.3 per cent and Gaza 25.4 per cent) reported that psychosocial support for children was not available at the school. For those who reported that psychosocial support was available at school, only 17.3 per cent (West Bank 15.7 per cent, Gaza 19.4 per cent) reported that teachers were adequately trained in PSS. In total, an estimated 678,000 children across the oPt are in need of child protection and MHPSS services.²³

1.5

People in Need

In 2022, the Humanitarian Country Team (HCT) estimates that approximately 2.1 million Palestinians across the oPt will require some form of humanitarian assistance.

People in Need by Geography

The 2022 PIN was calculated based on the first-ever household-level Multi-Sector Needs Assessment (MSNA) in the oPt, rather than on a harmonized dataset generated from the various cluster needs assessments, as was the practice in past years. This year's more precise inter sectoral estimate of needs has resulted in a slight reduction in the PIN for 2022. The reduced PIN is not indicative of a reduction in needs; on the contrary, the socio-economic situation on the ground has deteriorated in 2021, due to the sustained impact of the COVID-19 Pandemic, exacerbated by the escalation

of hostilities and unrest across the oPt in May 2021, deepening the severity of humanitarian needs.

Of the total, 64 per cent of people in need live in Gaza, and 36 per cent of people in need live in the West Bank. Within Gaza, 63 per cent of residents need humanitarian assistance, while 21 per cent of West Bank residents need humanitarian assistance.

PEOPLE IN NEED BY GEOGRAPHICAL LOCATION



Part 2

RISK ANALYSIS AND MONITORING OF SITUATION AND NEEDS

GAZA STRIP

A photo of an internally displaced child who seeks refuge and safe shelter. Beach Elem school. © 2021 UNRWA Photo By Mohamed Hinnawi



2.1

Risk Analysis

Over the next year, the context will continue to present significant risks, including ongoing violations of international humanitarian and human rights law, internal Palestinian divisions, potential escalations of hostilities between Israel and Palestinian armed groups in Gaza, the risk of possible tightening of access restrictions, and the possibility of Palestinian Authority-imposed sanctions on Gaza in the context of continuing political disagreements. The context is also likely to be characterized by the shrinking of operating space and the impact of COVID-19 which could increase dependency on humanitarian needs and deepen already existing vulnerabilities.

The INFORM Index for Risk Management assesses Palestine to be the 61st most at-risk country globally,²⁴ categorized at the medium level of risk when considering levels of exposure to hazards, vulnerability and coping capacity. The oPt is exposed to natural hazards, notably earthquakes, floods, epidemics, and forest fires. However, human-induced disasters pose a greater risk in the oPt, with high exposure to projected conflict risk.²⁵ The risk of conflict and violence is high as a result of significant humanitarian and protection challenges, including: a continuing need for protection measures for nearly 1.8 million Palestinians – around 40 per cent of the population – experiencing, or at risk of conflict and violence, forced displacement as well as the denial of access to livelihoods, leading to entrenched levels of food insecurity and inadequate access to essential services for the most vulnerable households. This situation is compounded by the impact of COVID-19, which further impacts the ability of vulnerable households to cope with the prolonged nature of the humanitarian crisis and the recurrent cycle of shocks, both natural and manmade.

Risks Related to Conflict and Violations of International Humanitarian and Human Rights Law

The humanitarian situation is especially fragile in Gaza, where more than two million Palestinians experience, or are at risk of, high levels of conflict and violence; high levels of food insecurity and unemployment; and inadequate or disrupted access to essential services, such as water, education, and health care, for the most vulnerable households. This is compounded by a limited or declining ability of vulnerable households to cope with the prolonged nature of the humanitarian crisis and the recurrent cycle of shocks, most of which are manmade. Although the weekly 'Great March of Return' (GMR) protests along the perimeter fence ceased by the end of 2019, thousands of wounded or traumatized people continue to struggle with the consequences and continue to need extensive support.

The recent military escalation in Gaza in May 2021 led to a significant deterioration in the situation and resulted in over one million people in need of urgent humanitarian support, including over 9,500 people still internally displaced. The electricity supply ranges between 12-14 hours per day, decreasing to 8-12 hours during winter and summer peaks. [The Rapid Damage and Needs Assessment](#) from June 2021 showed that, due to the May escalation of hostilities, Gaza sustained up to US\$380 million in physical damage and up to US\$190 million in economic losses. Similarly, the recent escalation led to an increase in demand for MHPSS and GBV services, with one emergency helpline reporting a 135 per cent increase in caseload in May 2021 compared to May 2020. This increase comes on top of an already high demand for these services under the strict confinement measures of the COVID-19 response. In the aftermath of the escalation, this same

helpline received an average of 23,000 calls a week for psychosocial support, counselling and requests for assistance.

In the West Bank, including East Jerusalem, Israel's direct military occupation continues, and with it the appropriation of land and resources. Standards of living, economic growth and employment prospects continue to be undermined by limitations on access to land, while freedom of movement remains restricted by a multi-layered system of administrative, bureaucratic and physical constraints imposed by Israel, citing security concerns. Access to agricultural land in areas behind the Barrier, or in the vicinity of settlements, which are subject to a permit or prior-coordination system has continued to be limited. Settlement expansion and settler violence, as well as the demolition of residential, livelihood and service infrastructure, and planned forced evictions, also continue, contributing to the coercive environment, placing many Palestinians in Area C, East Jerusalem and the Israeli-controlled part of Hebron city (H2) at risk of forcible transfer.

Risks Related to COVID-19

The West Bank is experiencing the fourth wave of the COVID-19 pandemic, and Gaza is in its third wave, with serious socioeconomic consequences. According to INFORM, the oPt is classified as having a high COVID-19 risk class and is ranked 56th for COVID-19 risk.²⁶ The impact of COVID-19 has exacerbated an already complex situation which generated new significant humanitarian challenges for 2021 which, if not addressed, will continue into 2022. These may include access restrictions imposed by the Palestinian and Israeli authorities to contain the pandemic, which heavily impacted economic activity, potentially exposing impoverished Palestinian families to deepening vulnerability and increasing the number of people requiring basic assistance due to loss of livelihoods.

Any future COVID-19 restrictions will also undermine access to social services across the oPt, with greater

impact on the most vulnerable, including the elderly, persons with disabilities (PWD), cancer patients in Gaza, Bedouin and herding communities in Area C, households isolated by the West Bank Barrier and undocumented residents of East Jerusalem. In the Gaza Strip, the health system is poorly prepared to deal with a new surge in infections. Moreover, any new restrictions will further isolate Gaza's two million residents from the external world, negatively impacting their access to livelihoods and basic services. School closures have affected 1.43 million children, and especially those who could not benefit from distance-learning. Mental health service providers also reported a surge in cases of GBV affecting women and girls, and COVID-19 related restrictions continue to exacerbate GBV risks and limit access to essential services. In all likelihood, the pandemic and related restrictive measures may remain in place to one degree or another in 2022.

Potential Implications for Humanitarian Needs in 2022

There has been a marked deterioration in the situation in 2021. Growing tensions across the West Bank, including in East Jerusalem, were a main trigger for the Gaza escalation, the most serious escalation of hostilities in Gaza since 2014, and the first-time simultaneous unrest took place across the oPt and Israel in many years. While the ceasefire has largely held, tensions remain high, with a potential scenario for further conflict in 2022. At the same time, the main factors driving the chronic humanitarian situation in Gaza are still in place, with no indication of significant improvements in 2022. While tensions in the West Bank, including East Jerusalem, have reduced, since May 2021 the context has witnessed high levels of Palestinian casualties by Israeli forces, a rise in settler violence and demolition-related displacement and the ongoing risk of eviction in East Jerusalem. It is expected that these existing challenges posed by conflicts, violations of IHL and IHRL and COVID-19, which have already increased the demand for humanitarian assistance across the oPt, are likely to continue during 2022.

2.2

Monitoring of Situation and Needs

Humanitarian actors in oPt systematically collect data to monitor the situation of the 2.1 million vulnerable Palestinians identified in the HNO, to better understand evolving humanitarian needs.

Situation Monitoring

Continuous situation monitoring of needs is conducted through the direct collection and reporting of demolition data; second-hand collection and triangulation of Protection of Civilians (PoC) data and first-hand monitoring, management and analysis of that dataset; receipt of Gaza monitoring indicators and monitoring of access of goods and people into and out of Gaza. Furthermore, monitoring efforts are also focused on addressing information gaps and challenges that

were highlighted during the HNO process, whilst also maintaining regular engagement in data collection, information management and coordination, and analysis.

In addition, clusters coordinate and undertake their specific monitoring and information analysis through their specific cluster monitoring mechanisms. Cluster partners also undertake field monitoring visits in order to monitor project implementation to ensure the projects are effectively responding to the needs; documenting response gaps; taking into consideration gender mainstreaming, disability inclusion and AAP. More information on Cluster efforts to monitoring situation and needs is found in Part 3: Sectoral Analysis.

Part 2

SECTORAL ANALYSIS

GAZA STRIP

Destruction in Gaza following Israeli strike 13 May 2021 ©Photo by Hazem Alabyad



3.1 Protection



TOTAL IN NEED	GAZA	WEST BANK	WOMEN %	CHILDREN %	ELDERLY %
1.8m	1.2m	630k	49%	37%	3%

Overview

The protracted protection crisis in the oPt means that around 1.8 million Palestinians across the oPt²⁷, 64 per cent in the Gaza Strip and 36 per cent in the West Bank, experience or are at risk of conflict, violence and displacement, including forcible transfer. The overall deepening of the severity of protection risks in the oPt has continued in 2021, exacerbated by rising socioeconomic distress in the context of the ongoing COVID-19 pandemic, as well as related movement restrictions, school closures and job losses. The priority protection risks and inherent threats identified are mutually reinforcing. Specific groups such as women, children and persons with disabilities are characterised by multiple vulnerabilities across these risks.

Priority Protection Risks & Related Needs

Marked deterioration in physical well-being, deprivation of liberty and access restrictions

The most serious escalation of hostilities between Israel and Palestinian armed groups in Gaza since the 2014 conflict took place between 10 and 21 May 2021. This followed rising tensions in the West bank including occupied East Jerusalem and the threat of evictions in Sheikh Jarrah. Subsequently there was a sharp rise in protests, clashes and arrests across the West Bank, including East Jerusalem, as well as in some communities in Israel. These events have exacerbated already severe protection needs throughout the oPt, particularly in Gaza.

PIN by geography and severity

STRATA/AREA	SEVERE	EXTREME	CATASTROPHIC	PEOPLE IN NEED
East Jerusalem	31,623	22,588	-	54,211
Area C	54,443	36,957	83	91,483
AREA A AND B	313,213	162,407	-	475,619
H2 (Hebron)	5,623	3,124	-	8,746
North Gaza	186,716	63,200	-	249,916
Gaza	224,848	106,831	-	331,678
Deir al Balah	105,341	63,696	154	169,191
Khan Yunis	157,080	98,882	-	255,963
Rafah	99,845	82,067	169	182,080
Total	1,178,731	639,751	406	1,818,888

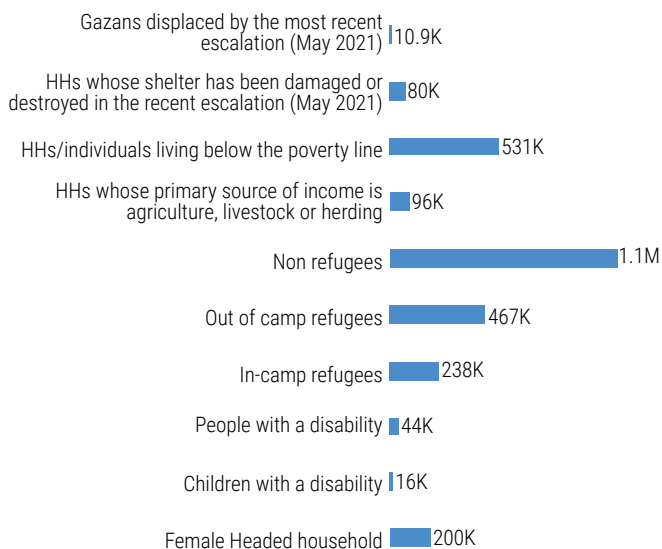
According to the Office of the High Commissioner for Human Rights (OHCHR), during the escalation in Gaza in May, 261 Palestinians were killed, including 67 children.²⁸ Of those, 130 were civilians, while the status of 67 remain undetermined. Over 2,210 Palestinians were injured during the hostilities, including 685 children and 480 women²⁹, some of whom may suffer a long-term disability that requires rehabilitation. Within three months after the ceasefire, three ERW incidents had already been reported, causing the death of a boy and injury to nine others.

At the height of the conflict, more than 113,000 displaced persons (IDPs) sought shelter and protection at UNRWA schools and hosting communities. The majority of community-based protection interventions, rehabilitation and other community service delivery activities were temporarily suspended. An estimated 17,700 women and girls were internally displaced, exposing them to increased GBV and ERW risks, as well as psychological violence during the escalation and its immediate aftermath.

In 2021, Israel’s Forces (IF) have killed 68 Palestinians, including 15 children, and injured at least 1,043 others with live ammunition, in comparison with 23 Palestinians killed and 154 injured by live ammunition in 2020. Refugee camps are particularly affected, with UNRWA statistics showing that IF operations in refugee camps are much more likely to result in live ammunition use than those outside the camp. In the last 12 months, 48 per cent of camp injuries were caused by live ammunition, compared with 14 per cent of injuries outside camps.

So far in 2021, settler violence has resulted in 420 incidents causing killing or injury or property damage.³⁰ Partners are reporting a growing number of unmet needs concerning legal aid for victims of Israeli settler violence in East Jerusalem. At least 50 human rights defenders, including seven women, were arrested between mid-April to mid-May, in the context of peaceful protests or informal religious gatherings.³¹ The IF carried out mass arbitrary arrests and unlawful detention, including of women and children, with at least 175 Palestinian children arrested in East Jerusalem since

PEOPLE IN NEED BY VULNERABLE GROUP



13 April. As a result, the number of requests to locate Palestinian children, who were taken into custody by IF without their parents being informed where they were being taken, more than doubled between April and May. Partners also recorded an increased demand for legal aid in response to the surge in suspected IHL and IHRL violations related to arrests and detentions, excessive use of force and access restrictions.

Overall, in the oPt, protection vulnerabilities continue to be driven by the longstanding Israeli occupation and the Gaza blockade, which physically and administratively restrict and interfere with freedom of movement and the ability of the conflict-affected populations to access assistance and services.

Displacement and risk of forcible transfer

Legal Aid Needs for Housing, Land and Property Rights

Households in Area C, East Jerusalem and the H2 area of Hebron city continue to face a coercive environment, placing Palestinian individuals and communities at risk of forcible transfer due to a range of longstanding Israeli policies and practices. A number of significant legal and administrative developments are taking place in the West Bank. These include efforts affecting the settlement of land title in both Area C and East Jerusalem, new building permit and access regimes in Area C and the Seam Zone, the application of policies that have led to continuing so-called ‘self-demolitions’ in East Jerusalem, and an increase in seizure and

confiscation of structures and material goods in Area C. These developments are expected to further intensify the coercive environment in 2022, impede the delivery of humanitarian assistance, and result in greater humanitarian suffering.

In Gaza, around 9,500 persons remained displaced, primarily those whose houses were destroyed during the May escalation, or so damaged as to be uninhabitable.³² According to local authorities, over 2,000 housing units were destroyed or severely damaged, and an estimated 15,000 housing units sustained some degree of damage.³³ This has led to a significant increase in demand for legal aid support for affected households, including for GBV survivors and widowed women relating to issues of denial of resources, custody of children and the loss of identity documents due to destruction of houses or while taking refuge.

Monitoring

Protection needs will be monitored and reviewed on the basis of the indicators identified in the Multi-Sector Needs Assessments which will be updated annually. The Protection Cluster will aim to fill the gaps identified in the MSNA by using other data sources such as assessments and information from service providers. The Protection Cluster will moreover coordinate joint information analysis guided by a new Protection Analytical Framework (PAF) methodology developed by the Global Protection Cluster. This methodology ensures assessments of threats, impacts and capacities on an ongoing basis using secondary data and analysis from situation reports, assessments and inputs from AoRs and partners.

Needs indicators

#	INDICATORS	SECTORS	SOURCE
1	# of Palestinians in need of HLP legal support in the West Bank	Protection	NRC database
2	# of Palestinians in need of HLP legal support in Gaza	Protection	NRC database
3	# of Palestinians in Gaza in need of legal support on access permits to West Bank	Protection	WHO Database
4	# of Palestinians internally displaced in Gaza	Protection	NRC database

Psychological distress amongst children and vulnerable groups

Child Protection and MHPSS Needs

CHILDREN IN NEED	BOYS	GIRLS
678k	345.8k	332k

During 2021, child protection needs in the oPt have been exacerbated by the continuing COVID-19 pandemic, as well as an increase in conflict-related violence in the West Bank, including East Jerusalem, and the May 2021 escalation in Gaza. Against the backdrop of multi-sectoral and household vulnerabilities contributing to child protection risks, there are considerable needs for MHPSS interventions, including specialised case management and approaches, targeting adolescents and caregivers, particularly males. The Child Protection Area of Responsibility (CP AoR) estimates that some 678,000 children (345,800 boys, 332,200 girls) across the oPt are in need of child protection and MHPSS services,³⁴ including 122,000 in need of focused non-specialized support or specialised services.³⁵ More than half (53 per cent) of all children in Gaza are in need, and 12 per cent of all children in the West Bank, including East Jerusalem. Additionally, 185,000 caregivers, including 137,000 caregivers in Gaza, are in need of various MHPSS services.³⁶

Children exposed to conflict-related violence including detentions remain a particularly vulnerable group. Between July 2020 and June 2021, Child Protection partners documented 1,465 violations, affecting nearly 7,948 children across the oPt.³⁷ During this period, 81 Palestinian children, including 23 girls and 58 boys were killed, and 1,248 reported injured, including 287 girls and 961 boys.³⁸ 67 Palestinian children were killed as a result of the May 2021 escalation in Gaza,³⁹ and another in June by an ERW.⁴⁰ In the West Bank, children and youth have also been affected by the surge in conflict-related violence. By end of September 2021, 13 children had been killed in the West Bank, higher than any year since 2016. Protection Cluster partners providing

remote MHPSS services registered a near 100 per cent increase in calls from East Jerusalem to its national helpline in May. The threat of settler violence remains high in many communities, with above average attacks recorded during the first half of 2021.⁴¹ In addition to the direct threat of violence, these threats have a negative impact on the mental wellbeing of children and can contribute to negative coping mechanisms such as school dropout and child labour, reinforcing other child protection threats.

The impact of the conflict in Gaza has worsened the existing mental health crisis. Even before the onset of hostilities, the COVID-19 pandemic had put intolerable pressure on basic services, increased household violence and coping mechanisms, and seen a reported quadrupling of suicide rates especially amongst adolescent girls.⁴² According to some surveys, 82 per cent of adolescents in Gaza reported overall poor-very poor mental well-being.⁴³ The fear for life, loss of loved ones, physical injuries and wide-scale damage and destruction during the escalation have only exacerbated the risk of psychological distress and mental disorders,⁴⁴ with rapid needs assessments conducted following the escalation highlighting distress symptoms among children.⁴⁵ The capacity to respond to these needs was already adversely affected by major shortages in specialized personnel and medication, and the May 2021 conflict directly affected many frontline workers, leaving some unable to resume work or at risk of overload.

In this context, children are particularly vulnerable to experiencing high rates of mental distress, including significant risks of post-traumatic stress disorder (PTSD), depression, anxiety, behavioural problems, and attention deficit hyperactivity disorder, as well as functional impairment. In conflict environments, good parenting, relationships with teachers, social networks, and healthcare systems are also affected by trauma and toxic stress. Vulnerable groups such as those displaced, persons with disabilities and GBV survivors are exposed to increased threats of psychological distress. For children with a disability families report more security concerns than for children without a disability and the concerns vary significantly from area to area. Adults and children with disabilities face additional barriers that

limit their access to services, placing them at additional risk. In Gaza, 63 per cent of persons with disability lack accessibility to mental health and psychosocial support services.⁴⁶ Inter-sectoral MHPSS services for children, families and service providers in Gaza are needed to protect developmental gains, respond to distress and prevent the relapse of mental health disorders. These services include psychological first aid, structured psychosocial support, suicide prevention, specialised case management, clinical mental health services, including a blend of remote and face-to-face methods. Collaboration with the Education Cluster is needed to support counselling services, early detection and referrals through schools.⁴⁷

The increase in conflict-related violence occurred amid the ongoing COVID-19 pandemic, which reportedly resulted in higher rates of violence against children and child labour, among other protection risks.⁴⁸ At the same time, school-aged children have missed out on the protective environment and socialisation opportunities afforded by in school learning, due to COVID-19 restriction measures extending over two academic years, with remote learning modalities significantly disrupting educational opportunities. According to

some surveys, 60 per cent of adolescents aged 13-19 across the oPt say their mental health has worsened during the pandemic.⁴⁹ To address the inter-related factors contributing to children's vulnerability, which may be compounded by pandemic conditions, there is a need to continue to strengthen children's access to protection and MHPSS services and prioritise multi-sector approaches.⁵⁰

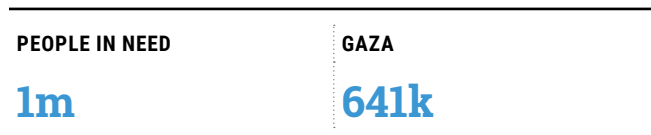
Across the oPt, children already face high levels of violence at home, with 90 per cent of children facing some form of violent discipline at home (boys 92.3 per cent girls 97.9 per cent).⁵¹ This includes 20.1 per cent of children subject to severe physical violence from their caregivers (boys 23.3 per cent, girls 16.9 per cent), with the rate in the Gaza Strip (28.5 per cent) double that of the West Bank (13.7 per cent). At the same time, across the oPt, it is estimated that 10.3 per cent of children (age 5-17) are engaged in child labour including hazardous labour,⁵² with boys twice as likely as girls to be engaged in child labour and six times as likely to be working under hazardous conditions.⁵³

Needs indicators

#	INDICATORS	SECTORS	SOURCE
1	% of HH where at least one member (SADD) is reporting signs of distress (self-diagnosed)	Protection CP	MSNA
2	% of HHs reporting safety or security concerns for girls, boys and children with disabilities (three indicators)	Protection CP	MSNA
3	% of HHs adopting coping strategies in the last 30 days to avoid threats or violent/ destructive acts by non-Palestinian communities living in their area [by type of coping strategy]	Protection CP	MSNA
4	% HH relying on stress / crisis / emergency strategies to cope with a lack of food or money to buy it	Protection CP	MSNA
5	% of HH where at least one child is reporting signs of psychosocial distress (self-diagnosed)	Protection CP	MSNA
6	% of girls / boys engaged in child labour	Protection CP	MSNA
7	% of children not attending school by sex and school-level	Protection CP	MSNA
8	% of households reporting safety concerns in relation to their childrens' education	Protection CP	MSNA
9	% of HHs whose average monthly household income per HH member was less than ___ NIS	Protection CP	MSNA
10	Average number of household members per room	Protection CP	MSNA

Specific risks facing women and girls

Gender Based Violence (GBV), including child, early, and forced marriage (CEFM)



In 2021, decades of Israeli occupation and conflict related violence, the May escalation and prevailing traditional cultural norms in Palestinian society configuring a very high gender inequality⁵⁴ compounded by the impact of the COVID-19 pandemic, has exacerbated pre-existing risks facing women and girls in the oPt. These risks include discrimination and GBV, including early/forced marriage, intimate partner/family violence, sexual harassment, rape, incest, denial of resources, psychological abuse and risk of sexual exploitation and abuse. Some ten per cent of households report that women and girls avoid areas near settlements, checkpoints, community areas and markets, and using public transportation because they feel unsafe. 31 per cent of households in the West Bank and 19 per cent in Gaza are concerned about the safety and security of girls, while 24 per cent and 17 per cent in the two areas respectively are concerned about the safety and security of women.⁵⁵ The disproportionate impact of these contextual factors on women and girls is underpinned by socio-cultural patriarchal norms, which continue to undermine women and girls’ rights.

Furthermore, COVID-19 and the May 2021 escalation in conflict resulted in an increase in reported GBV cases.⁵⁶ SAWA, an emergency helpline, reported a 135 per cent increase in caseload in May 2021 compared to May 2020.⁵⁷

The context in oPt has a detrimental impact on employment, income, and educational opportunities, forcing women and girls, including those with disabilities, to adopt negative coping strategies that expose them to further exploitation and abuse,⁵⁸ including exposure to higher risks of SEA. With COVID-19 lockdowns, gender-based cyber violence is a significant risk, particularly for women and girls who access remote GBV services online.

According to the latest available PCBS survey on violence, which predates the COVID-19 pandemic,⁵⁹ 29.4 per cent of (married or previously married) women between the ages of 18 and 64 experienced violence in the 12 months preceding the survey – 37.5 per cent in Gaza and 24.3 per cent in West Bank⁶⁰. Of those, 56.6 per cent experienced psychological violence, 17.8 per cent physical violence, 8.8 per cent sexual violence, 32.5 per cent social violence, 41.1 per cent economic violence, while eight per cent experienced the emerging issue of cyber violence.

The prevalence of child marriage within the oPt is at 24 per cent.⁶¹ Although, in general Child Early Forced Marriage (CEFM) seems to be declining,⁶² an increase has been perceived in certain areas, particularly parts of Gaza and isolated parts of Area C and East Jerusalem.

Needs indicators

#	INDICATORS	SECTORS	SOURCE
1	% HH relying on stress / crisis / emergency strategies to cope with a lack of food or money to buy it	Protection GBV	MSNA
2	% of HHs adopting coping strategies in the last 30 days to avoid threats or violent/ destructive acts by non-Palestinian communities living in their area [by type of coping strategy]	Protection GBV	MSNA
3	Are there any areas in your location that women and girls avoid because they feel unsafe? If yes, what are the areas?	Protection GBV	MSNA
4	% of HH where at least one member (children/adult) is reporting signs of distress (self-diagnosed)	Protection GBV	MSNA
5	% of HH reported women of reproductive age (12-49) with no access to specialized reproductive health services	Protection GBV	MSNA
6	% of HHs reporting awareness of medical, legal or mental health and psychosocial services in case of GBV	Protection GBV	MSNA

Women and girls with disabilities, Bedouin women, internally displaced women and women and girls living in refugee camps are particularly at risk of violence.⁶³ Being physically cut off from employment prospects and financially dependent on partners leaves them with few options for supporting themselves financially, and therefore they are more likely to marry, and not to report intimate partner violence if it means losing their only source of financial support.⁶⁴ Women and girls in communities impacted by conflict and displacement, i.e. Gaza, Area C and East Jerusalem, tend to suffer from higher incidents of GBV, including more frequent incidences of intimate partner violence, sexual abuse and exploitation, and forced marriage. These communities also tend to be characterised by limited availability and access to multi-sectoral protection services.⁶⁵ The areas with the lowest percentage of households reporting availability of PSS services in case of GBV were East Jerusalem (8.9 per cent), Gaza (31.6 per cent) and Area C (38.8 per cent). Women and girls with disabilities face additional barriers that limit their access to services, putting them at additional risk.⁶⁶ In Gaza, 58 per cent of persons with disabilities lack information about GBV prevention and response, including how and where to access relevant assistance and services during emergencies.⁶⁷

Access to GBV services – already compromised throughout the oPt by the occupation and COVID-19 restrictions - has been weakened by the recent escalation, particularly in Gaza where GBV in-person services such as legal aid, PSS, GBV case management, and other community education/awareness raising activities were suspended during the hostilities. All governmental institutions were closed, including the safe shelter facility and the women’s detention facility. The shelter and female detention facility was subsequently reopened, but in the meantime, GBV survivors were exposed to further harm whilst being forced to remain at home. For girls under 18 years of age who are still displaced, there is a continued need to facilitate access to psycho-social support services, in order to feel safe and have access to private spaces.

Explosive Remnants of War (ERW)

Mine Action Needs

PEOPLE IN NEED

1m

The recent escalation in Gaza has left severe contamination of ERW. Explosive ordnance exacerbated an already volatile living space characterized by pre-existing ERW contamination. Damage to basic infrastructure in Gaza is severely affecting the provision of electricity, piped water and essential services. Explosive ordnance which has failed to explode, and now lies buried in the rubble of damaged buildings or in farmland, poses an immediate risk to the population, hindering the delivery of humanitarian aid, inhibiting safe movement and preventing access to basic services. For the West Bank, military training sites, minefields and hotspots where demonstrations frequently occur are considered contaminated with explosive ordnance. The communities who live in and around the contaminated areas, such as Bedouins, are considered at high risk of ERW.

The issue of high ERW contamination in conflict affected areas has given rise to an urgent need for humanitarian mine action interventions. These include emergency ERW risk assessments, Explosive Ordnance Disposal (EOD) responses, and messaging to communities concerning ERW Risk and Conflict Preparedness and Protection (CPP).

Men are more vulnerable to the impact of ERW due to their larger engagement in the public sphere, including participation in the provision of first response services, construction work and scrap metal collection, and farming and fishing. In addition, children are also particularly vulnerable, as they often mistake ERW for toys while out playing. IDPs are also at high risk in areas they may not know so well, particularly in the absence of

clear communication from the host community on the potential risks.

There is an urgent need to ensure that humanitarian actors and the general population receive ERW and CPP education to reduce their risk levels in the course of their daily activities. Mine Action partners have previously noted a marked decrease in sensitisation towards ERW

contamination, highlighting the need for intervention. For example, only 19.3 per cent of households in Gaza reported the presence of members who have received information or training on the risks of ERW.

Mine action faces key challenges in implementation, including access restrictions on EOD equipment and the lack of training to local EOD responders.

Needs indicators

#	INDICATORS	SECTORS	SOURCE
1	% of HHs that received information or training on ERW in areas with prevalence of ERW	Protection	MSNA

3.2 Health and Nutrition



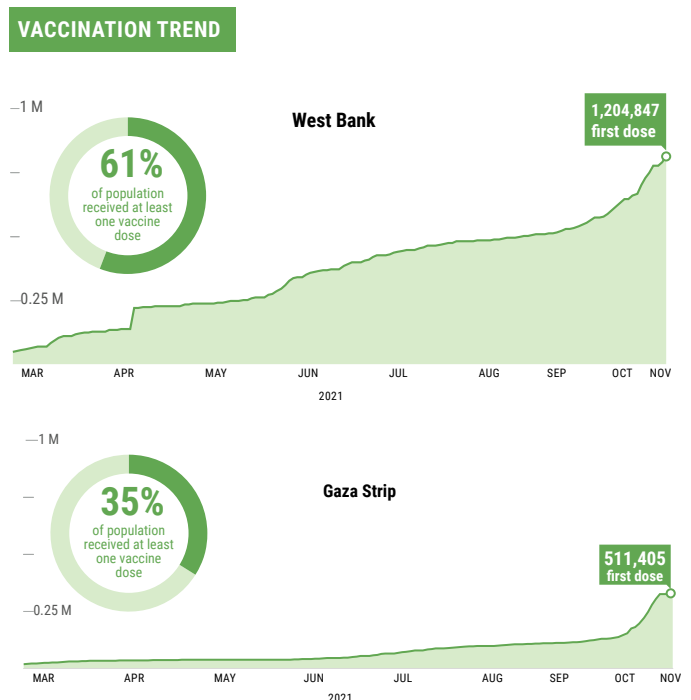
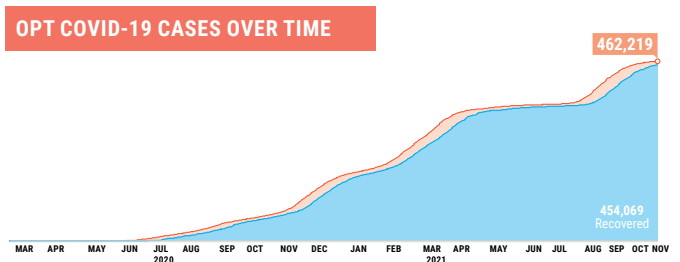
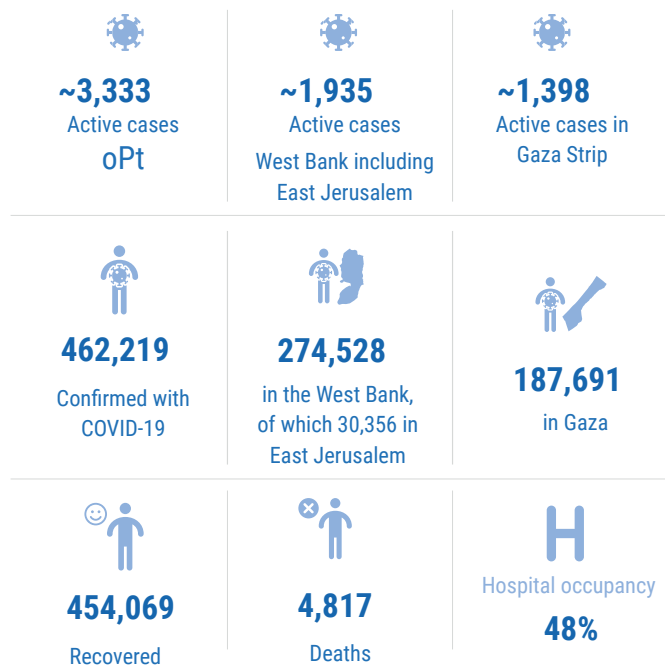
TOTAL IN NEED	GAZA	WEST BANK
1.5m	66%	33%

The Health Cluster has identified a total of 1.5 million Palestinians, two-thirds of whom in the Gaza Strip, as requiring health-related humanitarian assistance in 2022.

The ongoing COVID-19 pandemic, recurring flare-ups in violence and escalation in hostilities, access barriers, along with a weakened, overstretched, and fragile healthcare system in the Gaza Strip, the internal Palestinian political divide, and limited human and financial resources, are the main contextual factors driving humanitarian health needs in the oPt. Further key drivers include the marginalization of locations and access restrictions in the West Bank, especially in Area C, Hebron/ H2 and specific groups within East Jerusalem.

COVID-19 pandemic

The need for COVID-19 laboratory testing, case management, infection prevention, vaccination, risk communication and community engagement, remain urgent humanitarian priorities. It is anticipated that the COVID-19 caseload will continue to burden the healthcare system. Based on 2021 trends, it is estimated that the incidents rate could be on average around 78 per 1,000 to as high as 108 per 1,000.⁶⁸ Despite some significant progress made in vaccination of the Palestinian population in recent months, the coverage is still well below what would be ideal to reduce transmissions. Data collected by the MSNA in July 2021 shows that 72 per cent of surveyed households in the Gaza Strip, and 45 per cent in the West Bank reported that not all members are willing to be vaccinated against COVID-19. The vast majority (74 per cent) cited 'vaccine not being safe' as the main reason. Along with this observed vaccine hesitancy, there may be challenges arising from issues related to the duration of the effectiveness of vaccines, and the potential need for booster shots.



Access to essential health services

Almost two years of responding to the COVID-19 pandemic has had a significant impact on the delivery of other essential healthcare services, which have been intermittently disrupted whenever there have been surges in COVID-19 cases. According to the MoH 2020 Annual Report, there are about 130,000 adolescent girls, 90,000 vulnerable women and 225,000 children, including 30,000 neonates in need of the provision of sexual and reproductive healthcare, gender-based violence, obstetric and neonatal care, and emergency nutrition services.⁶⁹ About 110,000 people with non-communicable diseases, and some of these in need of palliative care remain with very limited available support, affecting especially those with cancer, diabetes, and cardiovascular disease. The MSNA found that on average 47 per cent of surveyed households in Gaza and 42 per cent in the West Bank have at least one member with chronic disease (s).

The May escalation in Gaza, East Jerusalem and the remainder of the West Bank, combined with the effects of COVID-19 have highlighted the continuous need to provide mental health and psychosocial support (MHPSS). According to a 2021 study involving 1,800 male and female adolescents (aged 13 to 19 years) on the impact of the COVID-19 pandemic on mental health of this group, there are significantly elevated rates of psychological distress compared to before

the pandemic and lockdown.⁷⁰ The results of the MSNA demonstrated that 20-38 per cent of surveyed households have at least one member showing signs of psychological distress in the 30 days before data collection in July 2021. The UN Women Gender Alert (2021) highlighted that women are disproportionately affected by the mental health situation.⁷¹

Access to trauma services

The escalation of hostilities in May 2021 and continued sporadic incidences of violence across the oPt highlight the continued need for expanded and improved trauma and emergency care in the Gaza Strip and the West Bank (including East Jerusalem). This is particularly important as more areas in the West Bank have become hotspots for clashes. To meet the immediate needs of about 65,000 people in the West Bank, it is estimated that over 800 health workers, including first responders, doctors, nurses, logistics staff, and members of vulnerable communities, need additional capacity building to better respond to sudden onset crises. According to the MoH and PRCS data, more than 16,000 people in East Jerusalem have difficulties accessing essential trauma care services, especially in Silwan, Esawiyeh, the Old City, Al Tur, and Sur Baher. In Gaza, there are an estimated 370 people in need of limb reconstruction surgeries (33 per cent are from the May Escalation while the rest are from the Great March of Return and non-conflict related injuries), and at least 600

PIN by geography and severity

STRATA/AREA	SEVERE	EXTREME	CATASTROPHIC	PEOPLE IN NEED
East Jerusalem	2,320	-	-	2,320
Area C	220,188	25,070	-	245,258
AREA A AND B	226,333	-	-	226,333
H2 (Hebron)	25,020	1,069	-	26,089
North Gaza	196,129	1,762	-	197,891
Gaza	335,654	3,015	-	338,669
Deir al Balah	142,312	1,278	-	143,590
Khan Yunis	194,634	1,748	-	196,382
Rafah	122,370	1,099	-	123,469
Total	1,464,960	35,041	-	1,500,001

need rehabilitation services. Persons with disabilities, some caused by conflict, continue to face access challenges due to their own mobility limitations or lack of adaptability of some health services. In parallel, seven MoH hospitals in Gaza need further improvement in their contingency plans and preparedness levels.

Access restrictions and barriers

Patients, their companions, health workers, and ambulances continue to face barriers to access health services throughout the oPt. Most patients needing referrals to access essential health care, including to hospitals in East Jerusalem, are required by Israel to apply for travel permits. In 2021, the WHO reported that there were over 100,000 permit applications for patients and companions from January to July; one in three patient applications from Gaza and one in six applications from the West Bank were unsuccessful.⁷²

Based on the data from the Mobile Clinics Working Group, about 150,000 Palestinians in marginalised locations in Area C, East Jerusalem, Hebron/H2 and the closed area behind the Barrier, continue to suffer from

limited, or no, access to fixed healthcare services, and are therefore in need of mobile clinic service provision.⁷³ Israel's restrictive planning system and its associated demolition orders remain a barrier to accessing health in these communities.

According to the MSNA, among the households accessing health services, 23 per cent reported facing access barriers in the three months prior to data collection that took place in July 2021. Of these, 64 per cent reported the high cost of services and medicines as a major barrier.

Incidents of attacks on health care personnel, transport, facilities, patients, and supplies, remain a concern. From January to June 2021, the WHO recorded 179 attacks, compared to 59 in the previous year.⁷⁴

Monitoring

Monitoring the availability of health resources and services during an emergency is not easy, requiring an effective monitoring mechanism in place to ensure a robust overview. Since 2018 the Health Cluster has

Needs indicators

#	INDICATORS	SECTORS	SOURCE
1	Average population per functioning health facility, by type of facility and by administrative unit	Health & Nutrition	MoH and WHO
2	Percentage households that can access primary healthcare within one hour's walk from dwellings and percentage facing access barriers when trying to access health services	Health & Nutrition	MSNA
3	Percentage of healthcare facilities that deliver essential package of health services	Health & Nutrition	MoH and WHO
4	Number of inpatient beds per 10,000 people	Health & Nutrition	MoH and WHO
5	Number of health facility with Comprehensive Emergency Obstetric Care/ 500,000 population, by administrative unit	Health & Nutrition	MoH and WHO
6	Number of health facilities that report capacity to provide advanced surgical procedures including trauma and emergency care / 500,000 population by administrative unit	Health & Nutrition	MoH and WHO
7	Percentage households reporting presence of chronic cases	Health & Nutrition	MSNA
8	Percentage of zero stock medicines out of the essential drug list	Health & Nutrition	MoH and WHO
9	Percentage of people with severe or moderate mental health disorders	Health & Nutrition	MSNA, MoH and WHO
10	Percentage of health facilities who have staff trained to identify mental disorders and to support people with mental health and psychosocial problems	Health & Nutrition	MoH and WHO
11	Incidence rate for COVID-19	Health & Nutrition	MoH
12	Case Fatality Rate (CFR) for COVID-19	Health & Nutrition	MoH

been conducting the Health Resources and Services Availability Monitoring System (HeRAMS) approach in Gaza, targeting monthly monitoring of public hospitals and primary healthcare centres, including those operated by UNRWA. In 2021, the HeRAMS was expanded to include hospitals and primary healthcare centres operated by NGOs. As the HeRAMS have proved to be an efficient tool for monitoring health resources and services availability in Gaza, the approach will be initiated in the West Bank in 2022, initially focusing on the public hospitals and primary healthcare centres.

The cluster will use its Partners Activities Reporting Platform (PARP), to collect information from partners on their response to identify remaining needs and gaps. Moreover, the cluster in coordination with the MoH Health Information Center and the Preventive Medicine Department will monitor the needs and gaps for responding to the COVID-19 pandemic.

3.4 Food Security



TOTAL IN NEED	GAZA	WEST BANK	WOMEN %	CHILDREN %	ELDERLY %
1.75m	1.3m	0.4m	49%	45%	3%

Two million Palestinians (36.7 per cent of the population) are estimated to be moderately to severely food insecure.⁷⁵ In 2021, almost two out of five people are food insecure.⁷⁶ Seventy-six per cent of those in need of humanitarian assistance are in the Gaza Strip and 24 percent in the West Bank. Eighty-two percent of those in the West Bank (about 350,000) are in Area A and B, and 11 percent are female-headed households (171,395 across the oPt). Nearly 70 per cent of those are suffering from poor access to nutritious and sufficient food (1,189,596 out of 1,758,144). In Gaza, deepening poverty and vulnerability resulting from a complex combination of factors including loss of livelihood (relating to COVID-19), non-payment of salaries, rising commodity prices and loss of homes and productive assets have plunged hundreds of thousands more into desperate circumstances, increasing the need for basic assistance (both cash and in-kind).

Israel's military occupation and its coercive environment in the West Bank and Gaza's over 14 years of blockade and recurring rounds of violence remain the root cause of food insecurity, exerting a detrimental impact on food production, food availability, and economic access. Food production is impeded through the restrictions on access to land, water, production inputs, and markets. Productive capacities and economic opportunities are constrained and limited, contributing to the high rates of unemployment and low household incomes, that intersect with poverty as the main immediate cause of food insecurity in the oPt.

The unemployment rate for the second quarter of 2021 was 44.7 per cent in the Gaza Strip and 16.9 per cent in the West Bank. Unemployment among males in Gaza reached 39 per cent and up to 64 per cent among females. In the West Bank, the rate stood at 14.3 per cent among males and 28.5 per cent among females.⁷⁷

PIN by geography and severity

STRATA/AREA	SEVERE	EXTREME	CATASTROPHIC	PEOPLE IN NEED
East Jerusalem	19,454	5,342	1	24,797
Area C	37,090	11,333	725	49,148
AREA A AND B	185,506	131,989	26,737	344,232
H2 (Hebron)	2,559	270	-	2,829
North Gaza	188,915	68,071	4,110	261,096
Gaza	322,565	115,210	6,069	443,844
Deir al Balah	138,034	50,120	3,846	192,000
Khan Yunis	188,785	68,546	5,260	262,591
Rafah	118,692	43,096	3,307	165,095
Total	1,201,600	493,977	50,055	1,745,632

About 80 per cent of households were receiving some form of social assistance already before the escalation.⁷⁸ Furthermore, MSNA findings from July 2021 indicate that 73 per cent of surveyed households in Gaza reported having received assistance of some type in the first six months of the year, while 94 per cent reported wanting to receive assistance in the future. Cash transfers are the preferred form of assistance (77 per cent), followed by food in-kind (36 per cent).

Impact of May hostilities on agricultural sector in Gaza

According to the World Bank (June 2021), the agricultural sector suffered direct damage of approximately US\$ 45 million,⁷⁹ while the Ministry of Agriculture (MoA) estimated this figure to be in the range of US\$55 million.⁸⁰ More than 27,000 dunums of orchards, vegetable crops and greenhouses, and more than 450 livestock and poultry farms were fully or partially destroyed. According to the Palestinian Ministry of Labor, more than 19,000 workers were affected by direct damage to active facilities, 37 per cent of them working in the agriculture sector.

The bombing of the largest agricultural inputs warehouse, which secured 50 to 60 per cent of agricultural inputs needs in Gaza, and the consequent destruction of the inventory of inputs and chemical fertilizers and pesticides, put the agricultural season in the Gaza Strip at risk. Exports of fresh agricultural products were suspended for over a month during and in the aftermath of the escalation, and subsequently did not resume to pre-May levels nor to the levels of the equivalent period in 2020. Fisheries continue to suffer from access limitations on fishing zones and recurrent sea closures. Continuously changing and unpredictable fishing zone limits, coupled with restrictions on the importation of essential fishing equipment, continue to affect fishers' livelihoods. Aging boats, nets, engines and other equipment are in dire need of rehabilitation or replacement.

West Bank:

Area C: Coercive environment and settler violence

Area C is the West Bank's green basket and constitutes the most significant land and natural resources for Palestinian development, including the majority of agricultural and grazing land, representing a main source of livelihood for hundreds of families, mostly Bedouin and herder communities. In Area C, demolitions of homes and productive assets, confiscations and restrictions on maintenance and rehabilitation of productive assets, as well as forcible transfers, movement restrictions, and settlement expansion and settler violence, all contribute to undermining livelihoods and standards of living.

As of September 2021, 34 per cent of the demolished structures in Area C were agricultural-related, and 36 per cent of demolition incidents affect Bedouins and herding communities⁸¹ (In addition to settler violence that poses a threat to livelihoods and lives). Bedouins in Area C are identified as the most vulnerable and at risk of forcible transfer. Notably, their traditional income-generating activities are becoming unsustainable, with even the most basic support assistance for farmers subject to increasingly stringent Israeli policies.

Pressures on these communities are compounded by the costly animal fodder and water, as well as the fact that Palestinian farmers are prohibited from drilling new wells and carrying out essential maintenance to deteriorated irrigation systems.

Area A & B

Areas A and B of the West Bank are home to 87 per cent of the West Bank population, nearly 2.4 million Palestinians. These areas face a different set of constraints that, though less severe, are impacting the food security and viability of its economy. Israeli measures like roadblocks, checkpoints, by-pass roads, and the limited accessibility to natural resources have led to reduced competitiveness of its productive entities, made it harder for businesses to be viable and impeded job creation efforts and initiatives. Areas A and B are facing a high prevalence of food insecurity similar to those prevailing in Area C (18.1 per cent) according to FIES in 2021, and a slightly higher percentage of people

in need (14.4 percent) which translates in absolute terms to more than 340,000 households in need.

Impact of COVID-19

The COVID-19 pandemic has further exacerbated the already dire humanitarian situation and hampered socio-economic development efforts. The PA's ability to maintain the National Social Safety Net (SSN) is at risk due to the inability to maintain the amount and frequency of financial support. As of September 2021, the 116,000 most vulnerable families registered under the SSN received only one round of assistance out of three. According to the MSNA, 36 per cent of households in the oPt reported members losing their job permanently or temporarily as a result of the COVID-19 outbreak. The highest percentages were recorded in East Jerusalem (50 percent), Area A and B (43 per cent) and Area C (34 per cent). 53 per cent of households in Gaza and 68 per cent in the West Bank reported a decrease in their monthly income. 68 per cent of reported an increase in debt as a result of the pandemic.

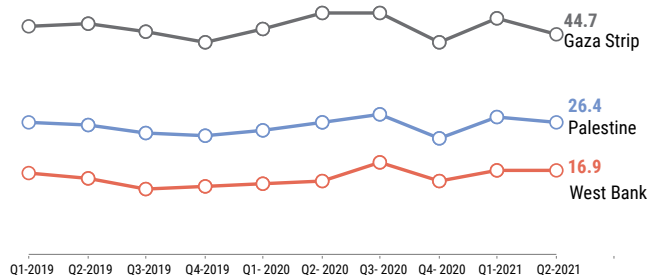
Nutrition

The nutrition situation is characterized by high rates of malnutrition driven by poverty, food insecurity, and poor dietary habits. Micronutrient deficiencies and obesity pose significant challenges to health and well-being. Extremely vulnerable groups such as female-headed households, pregnant and lactating women, and children, are at greater risk. The MSNA found that eight per cent of female-headed households, and five per cent of male-headed households have a poor and borderline food consumption score.

Negative coping mechanisms

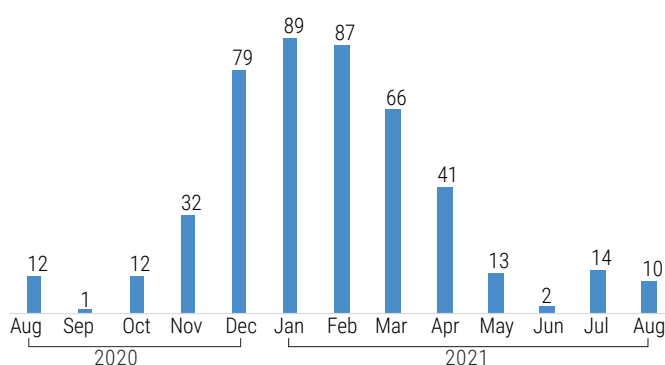
Palestinians are increasingly unable to cope with sudden shocks, manmade or in connection to natural events, such as spikes in violence, heatwaves and winter storms. These sudden shocks exacerbate the impact of already critical conditions, characterized by demolitions in the West Bank, the overall impact of the Gaza blockade including trade restrictions and persistent electricity shortages, natural and environmental hazards, and inadequate water and sanitation services.⁸² The MSNA found that food expenditure constitutes 50 per cent

UNEMPLOYMENT RATE (ICLS 19TH) BY REGION, 1ST QUARTER OF 2019 – Q2-2021.



Source: PCBS June 2021

WEEKLY AVERAGE EXPORTED TRUCKLOADS PER MONTH



Source: Gaza agricultural trade report. FAO Sept. 2021

of household income in Gaza and 48 per cent in the West Bank. Even though a relatively large number of households appear to be meeting their very basic needs, a high percentage of them are employing negative coping mechanisms (e.g. taking on debt) in order to meet those basic needs which while providing a short-term respite, only increases their medium to longer term vulnerabilities.

This HNO has focused on identifying the needs of vulnerable groups through comprehensive and deep engagement with affected communities. This has taken the form of a very participatory approach featuring extensive meetings and focus group discussions. The analysis of the available data has ensured that all gender and age groups are considered. It has also taken the form of a multisectoral analysis, to highlight sectoral interlinkages and connections, and for example the need to identify protection issues that might influence food security interventions. To understand how protection issues are affecting those people, the

analysis furthermore explored what protection risks women, men, girls and boys are exposed to, and whether they pursue any negative coping mechanisms.

Assessment tools and methodologies were adjusted to enhance the accessibility of those affected (disaggregated by sex and age) to confidential and survivor-centered reporting mechanisms, and to ensure that these groups were aware of PSEA reporting channels and complaint mechanisms.

Monitoring

Food Security Sector partners have always played an important role in providing data and improving the sector’s ability to better understand the root causes and consequences of vulnerability to food insecure conditions. More detailed and more reliable information on key food security aspects will allow for a refinement of estimates of the geographic distribution of people who are still in need.

A monitoring framework maps out and identifies what to monitor, how to interpret the results, and what information and indicators to include. The monitoring process will be participatory and inclusive. The sector will request partners to provide quarterly information on their responses, needs, and gaps in the targeted area. The sector will continue to consult the demolition and settler violence tracker system, managed by OCHA, to highlight needs and update key partners about gaps. Sector meetings strengthen coordination and complementarity among partners. Field visits and bilateral meetings with partners monitor the key challenges partners are facing, and link findings with follow-up actions for more efficient planning and implementation.

Needs indicators

#	INDICATORS	SECTORS	SOURCE
1	# of Vulnerable households are suffering from poor access to nutritious and sufficient food	Food Security Sector	MSNA survey +other assessments
2	# of Small-scale farmers, breeders, herders, and fishers are suffering from shortages of feed, inadequate production, and farming facilities	Food Security Sector	MSNA survey+ +other assessments
3	# of Marginalized and less resilient people and communities losing their livelihoods due to man-made and natural shocks.	Food Security Sector	MSNA survey ++other assessments
4	Food Insecurity Experience Scale (FIES)	Food Security Sector	MSNA and SEFSec

3.7

Education



An estimated 579,173 Palestinians (56 per cent females) across the oPt, the vast majority (96 per cent) of whom are school-age children, including around 13,398 Children with Disabilities (CWDs), will need humanitarian assistance to access education in 2022. Nearly 74 per cent live in the Gaza Strip and over 26 per cent in the West Bank, including East Jerusalem.

The main drivers of education-related vulnerabilities include attacks on schools, COVID-19 restrictions, lack of MHPSS support, insufficient and/or inadequate safe school infrastructure, and poverty. These factors undermine the quality of education, generate protection concerns and contribute to early school dropout. 31 per cent of the households interviewed as part of the MSNA in Gaza and 14 per cent in the West Bank reported having difficulties meeting essential education needs (such as tuition fees, books) due to financial reasons, in the 30 days prior to the data collection.⁸³

In 2021, these challenges have been compounded by the escalation in May and the outbreak of COVID-19, which led to the prolonged closures of schools and kindergartens, as part of the measures adopted to contain the pandemic. For the academic year 2021-2022, the PA has decided to open schools with full face-to-face learning, however it remains unclear if this decision will hold as the cases of COVID-19 continue

to rise. In the previous academic year (2020-2021), 1.3 million children lost at least three months of schooling, and most have not been able to engage in extracurricular and remedial activities. While the Ministry of Education (MoE) and UNRWA have put in place various distance learning programmes to be used in the new academic year, these are not fully accessible to many children living in homes without internet connectivity, or who could not collect the printed self-learning materials distributed by schools. Many children with disabilities, resource room students, and children in preschools were excluded from online education.⁸⁴ According to the MSNA findings, 88 per cent of households with school-aged children in Gaza, and 72 per cent in the West Bank, reported that their children were in need of catch-up programmes because of the loss of learning due to COVID-19-related school closures. In addition, four per cent of households with school-aged children reported that at least one child had dropped out of school during the pandemic year.⁸⁵

PIN by geography and severity

STRATA/AREA	SEVERE	EXTREME	CATASTROPHIC	PEOPLE IN NEED
East Jerusalem	9,661	392	0	10,053
Area C	28,366	1,407	0	29,773
AREA A AND B	92,903	-	5161.25641	98,064
H2 (Hebron)	13,275	188	0	13,463
North Gaza	81,571	25,343	0	106,914
Gaza	168,842	34,185	0	203,027
Deir al Balah	41,617	2,012	0	43,628
Khan Yunis	42,669	1,380	0	44,049
Rafah	29,902	300	0	30,201
Total	508,805	65,206	5,161	579,173

The pandemic has posed additional challenges to the education system, which is characterized by inadequate WASH facilities and hygiene kits at schools, which has impeded their safe reopening, and limited staff capacities in using new educational approaches, which include mixing face-to-face and distance learning. These factors are compounded by the continuing deterioration in overall socio-economic conditions.

During the 11-day escalation in Gaza in May, 331 educational facilities were damaged including 63 UNRWA schools that were used as Designated Emergency Shelters (DES) to host IDPs and needed minor rehabilitation. Both the Ministry of Education (MoE) and UNRWA had to terminate the academic year sooner than expected, on 3 and 10 June respectively, due to frequent electricity and internet cuts, damage to school infrastructure and difficulty in accessing schools due to damaged streets and infrastructure.⁸⁶

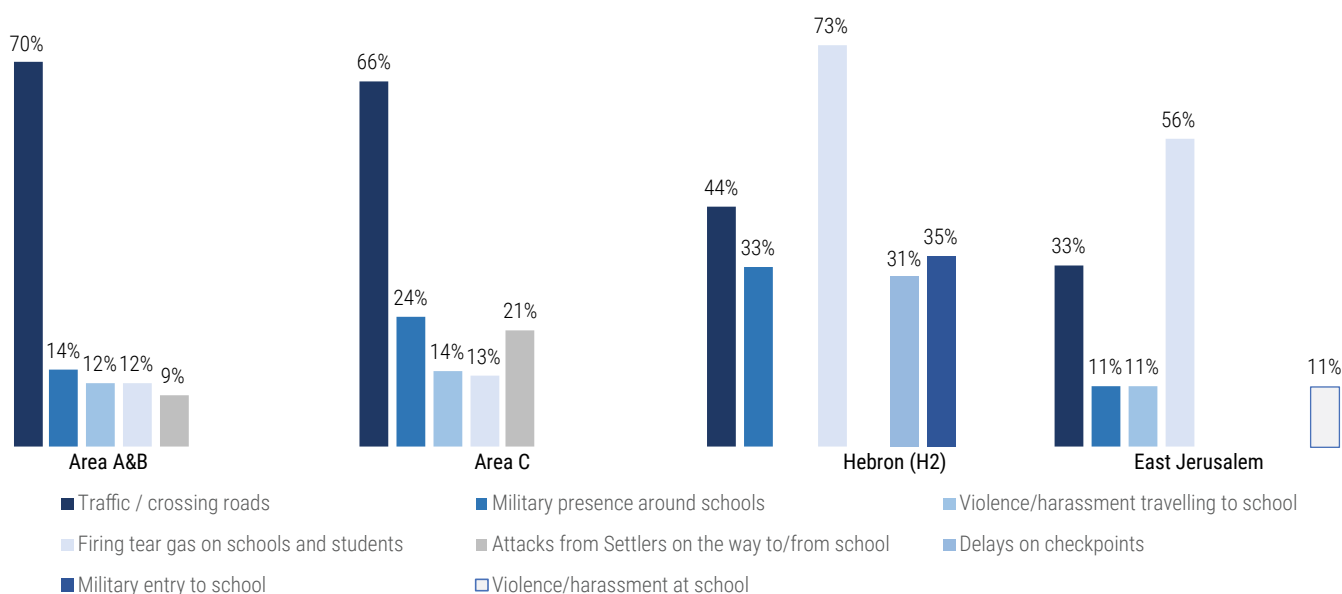
The latest escalation in Gaza posed additional challenges to the education sector, which already faces a shortage of adequate school infrastructure. To mitigate overcrowding, around 65 per cent of schools in Gaza operate on a double-shift system,

resulting in reduced hours devoted to core subjects and foundational learning. In addition, the chronic electricity deficit has serious implications for children’s rights and ability to access education, both at school and at home.

In 2020, the cluster recorded 119 education-related incidents (115 West Bank, four In Gaza) affecting 7,757 students and 615 teachers and school staff. In the first six months of 2021, in addition to the escalation that took place in May in Gaza, 40 education-related incidents were reported in the West Bank, affecting around 6,000 students and school staff (49 per cent females).⁸⁷ The incidents involved Israeli forces firing of tear gas canisters at schools, the detention of students commuting to or from schools, and their harassment and intimidation by Israeli settlers.

In addition to the 2021 escalation, there were three incidents in 2020, in which schools in Gaza were closed for several days or suffered minor damage because of Israeli airstrikes. Exposure to violence during such incidents is a key source of stress and anxiety among children, parents, and teachers, and is compounded by the fear of COVID-19 infection and the hardship generated by the related lockdowns.⁸⁸ However, major

MAIN SAFETY CONCERNS REPORTED BY HOUSEHOLDS FOR CHILDREN WHILE COMMUTING TO AND AT SCHOOLS IN THE WEST BANK DIVIDED BY AREA



capacity gaps in school-based psychosocial support (PSS), particularly in the most exposed areas, have prevented the educational system from properly addressing the impact. This has resulted in an extra burden on teachers, who are often untrained to deliver PSS, and has increased the risk of long-term mental health disorders among affected children. 25 per cent of the households with school-aged children interviewed as part of the MSNA (West Bank 24.3 per cent and Gaza 25.4 per cent) reported that psychosocial support was not available at the school. For those that reported that psychosocial support was available at school, only 17.3 per cent (West Bank 15.7 per cent, Gaza 19.4 per cent) reported that teachers were adequately trained in PSS.⁸⁹

The lack of adequate, safe and accessible school infrastructure is also a major concern in vulnerable areas of the West Bank, especially in the H2 area of Heron, Area C and East Jerusalem. This problem is driven by the restrictive and discriminatory planning regime imposed by the Israeli authorities, which prevents the construction and upgrading of schools. Those schools built, or expanded, without permits risk demolition or confiscation. Since 2019, seven schools have been partially or fully destroyed/confiscated, and 14 schools have received demolition or stop work orders. As of September 2021, a total of 54 schools have such orders pending against them, putting students at these schools at risk of losing their right to education at any moment.⁹⁰

In addition, children in Area C, H2 and East Jerusalem continue to face challenges in accessing schools, and the realisation of their right to education is also severely compromised due to ISF violence and armed search operations in schools, as well as harassment, intimidation, and settler violence while commuting to schools. Students also risk confrontation, intimidation and violence while walking past settlements or buildings occupied by settlers and can be exposed to conflict-related violence and delays, which can lead to higher school dropout rates. Some students have to walk up to 10 kilometres to get to and from school, putting their safety at risk. Girls in particular face a high risk of school dropout due to the fear of parents for their safety during the school commute. Nearly 70 per cent of households interviewed in the MSNA in the West Bank

reported safety concerns in relation to their children's access to education, particularly a military presence around schools, firing tear gas on schools and students as well as traffic/road crossing.⁹¹

In annexed East Jerusalem, where the responsibility for the delivery of education lies with the Israeli authorities, there is a shortage of at least 3,794 classrooms in the public system for Palestinian residents.⁹² Many schools operate in private residential properties, which do not meet minimal standards; nearly 60 per cent of schools lack playgrounds, libraries or science laboratories; and at least half of the schools suffer from substandard physical conditions.⁹³ Similar challenges affect schools in Area C and H2, of which at least one third do not meet the minimum standards for safe learning environments and 23 per cent have no playgrounds.⁹⁴

East Jerusalem schools are also facing increasing pressure on the part of the Israeli authorities to replace the PA curriculum with an Israeli one, compromising academic freedom and institutional autonomy, which, in the context of a longstanding occupation, are essential components of the right to education.⁹⁵

The situation is considerably worse for children with disabilities (CWDs). According to the PCBS, 20 per cent of the overall people with disability in Palestine are children, of whom 46 per cent between the ages of 6-17 are not enrolled in schools.⁹⁶ 19 per cent of households interviewed in the MSNA with at least one CWD reported that at least one was not attending school (nine per cent in the West Bank and 25 per cent in the Gaza Strip). For the rest of CWDs enrolled in education, they face a higher risk of dropout, due to gaps in adapted facilities and assistive devices at schools, inadequate transportation means, and staff capacity to accommodate their needs; 61 per cent of the households in the MSNA reported that their CWDs face challenges in accessing education services (45 per cent in the West Bank and 71 per cent in Gaza Strip).

About one quarter of children aged 16-17 throughout the oPt, and five per cent of children aged between 10 and 15, are out of school (either dropped out or never enrolled).⁹⁷ Dropout rates are higher for boys, who are expected to contribute to household income in poor

families. Early marriage, commonly used by families as a coping mechanism to reduce expenses, is the most significant cause of early dropout rates among girls, followed by protection concerns related to friction with Israeli forces and settlers.⁹⁸ According to the households interviewed in the MSNA, the main reasons for children dropping out of schools include lack of interest in continuing their education due to the myriad socio-economic and political challenges and factors (many highlighted above), COVID-19 related school closures and poverty.

Accountability to affected population (AAP) is an essential element of education needs assessments, and partners must ensure that this is built into their Education in Emergencies (EiW) programmes. While the cluster works to harmonise the response at the national level, interventions must also be contextualised to match local communities' priorities, which are gathered by field level assessments and consultations. Communities and school children take part in identifying needs and determining the most appropriate solutions, which includes providing access to safe and confidential channels for sensitive feedback and

complaints such as SEA. All cluster partners consider this type of engagement as an essential element of their accountability to affected populations measures while assessing and analysing the needs of affected people.

Monitoring

Monitoring of ongoing humanitarian needs is a critical component of planning and implementation and will therefore be carried out on either a monthly basis or at the end of each academic semester. The Education Cluster will request all partners to provide information on their responses, ongoing humanitarian needs and gaps in target areas. The cluster, through different reports and during cluster meetings, will identify gaps in response and monitor needs.

Further field monitoring visits will also be conducted by the Education cluster team, in order to monitor project implementation. A key priority of such monitoring visits will be to ensure the projects are effectively responding to the needs, documenting response gaps, and ensuring all partners are taking into consideration gender mainstreaming, disability inclusion and AAP.

Needs indicators

#	INDICATORS	SECTORS	SOURCE
1	# of Children in need of PSS	Education / Protection	UNICEF
2	# of children, teachers and other education personnel affected by violations and attacks on education facilities	Education / Protection	UNICEF
3	# of children, teachers and other education personnel affected by schools affected by demolition orders	Education / Protection	POC database
4	# of out of school children	Education	Education cluster partners
5	# of children in need of emergency school supplies (including caravans, stationary, school bags, students' kits, teaching supplies, uniforms, solar systems or fuel, winterization kits)	Education	Education cluster partners
6	# of children, teachers and other education personnel who are affected by schools that are not adequately prepared for emergencies	Education	Education cluster partners

3.3

Water, Sanitation and Hygiene (WASH)

TOTAL IN NEED	GAZA	WEST BANK	FEMALE	MALE	GIRL	BOYS
1.36m	672k	690k	668k	695k	294k	313k

Over 1.35 million Palestinians across the oPt are affected by public health risks associated with insufficient access to WASH services and will be in immediate need of humanitarian assistance in 2022.

The WASH Cluster partners' assessments and consultations, carried out between May and September 2021, identified four key issues generating peoples' vulnerabilities and need for WASH assistance: insufficient water supply to households; poor sanitation and solid waste services; limited WASH services to public facilities; and risk of flooding.

WASH needs in Gaza

In the Gaza Strip, more than 290 WASH infrastructures were affected during the May 2021 escalation, constraining access to water and sanitation services for more than 1.2 million Palestinians.⁹⁹ Due to the limited financial and technical capacities of the local authorities, and Israeli restrictions on the entry of materials, WASH service providers are still struggling to fully restore and maintain the functionality of WASH services in the Gaza

Strip. The latest escalation aggravates the already dire WASH conditions in the Strip.

According to the Palestinian Water Authority (PWA), more than 97 per cent of the coastal aquifer water is unfit for human consumption due to unsafe pumping and wastewater contamination.¹⁰⁰ The over reliance on the coastal aquifer leads to concerns over its sustainability, and raises concerns over the depletion of freshwater sources. While the vast majority of households in the Gaza Strip are connected to the network, 96 per cent of the water supplied does not meet the WHO recommended minimum standards for potable water.¹⁰¹ This forces families to purchase purified or desalinated water for drinking and cooking purposes, mostly from unregulated private vendors, at an average cost of NIS 30 per m³, compared to NIS 2 per m³ paid for piped water.¹⁰² An estimated 10 per cent of the families in the

PIN by geography and severity

STRATA/AREA	SEVERE	EXTREME	CATASTROPHIC	PEOPLE IN NEED
East Jerusalem	4,165	3,124	6,456	13,744
Area C	78,584	15,956	30,370	124,910
AREA A AND B	266,811	116,005	150,806	533,621
H2 (Hebron)	149,178	2,094	85,004	236,276
North Gaza	70,559	15,033	21,676	107,268
Gaza	48,789	3,860	8,704	61,353
Deir al Balah	11,294	2,259	4,518	18,070
Khan Yunis	148,612	12,836	24,444	185,891
Rafah	64,828	5,697	10,724	81,249
Total	842,819	176,863	342,700	1,362,382

Gaza Strip cannot afford these expenses; therefore, they rely on fetching water from public filling points using bottles and buckets, or consume unsafe water.¹⁰³ This exacerbates their exposure to waterborne diseases (particularly acute diarrhoea among children under 5) and increases the risk of a waterborne epidemic affecting the wider population.

At least 145 schools and 17 healthcare units in Gaza suffer from insufficient WASH facilities (primarily toilets, drinking and handwashing stations) to meet the standards set up by the Ministries of Education and Health.¹⁰⁴ This results in overcrowding of existing facilities and the undermining of key hygiene practices. These issues represent significant risk factors in the context of a global pandemic.

Due to power shortages and poor infrastructure, every month three million cubic meters of poorly treated wastewater is discharged into the Mediterranean Sea.¹⁰⁵ As a result, 60 per cent of Gaza's beaches are polluted, unsafe for swimming, and the coastal aquifer is further contaminated.¹⁰⁶

Almost 93,000 Palestinians reside in low-lying areas at risk of flooding events during winter, due to heavy rains and the overflow of stormwater facilities and sewage pumping stations.¹⁰⁷ Due to climate change, flooding is expected to be more frequent, causing significant losses of assets, displacement, disrupted access to livelihoods and services, and increasing risk of waterborne diseases. Women bear the brunt of the hardship in flooded homes, as they are expected to continue fulfilling their domestic duties under these adverse conditions.

Almost 90,000 households across the oPt suffer from an acute lack of solid waste collection services or are located in the vicinity of informal and unregulated dumping sites.¹⁰⁸ As a result, they are exposed to a range of health and environmental hazards, including dangerous medical or electronic waste and contamination of groundwater resources and agricultural land.

Although WASH partners and the (PWA) are making important efforts in developing the WASH sector,

their ability to upgrade, maintain and operate at full capacity more than 500 water and sanitation facilities is undermined by significant funding gaps which impact the effective operation of these facilities. WASH performance is also challenged by Israeli import restrictions on equipment and materials designated as 'dual-use items', and the poor governance of the WASH sector, due to the limited technical and financial capacities of service providers.

West Bank

In the West Bank, the restrictive planning system enforced by the Israeli authorities in Area C and East Jerusalem prevents the development, and even routine repairs and maintenance of water structures, leaving the area with inadequate WASH infrastructure (wells, cisterns, pipelines, etc.). Between January and November 2021, 60 WASH-related structures were demolished or confiscated on the grounds of a lack of building permits, which are nearly impossible to obtain.¹⁰⁹ This is aggravated by the PA's lack of sovereignty over water resources, and therefore the inability of the PWA to increase the water supply for underserved communities from the Mountain Aquifer, the main source of water for the West Bank.

More than 620,000 Palestinians in the West Bank reside in areas that are not connected to piped water services or are poorly supplied, who consequently consume less than 50 litres of water per capita per day, well below the 100 litres recommended by WHO.¹¹⁰ This undermines the hygiene practices of those families and their living conditions, especially those in Area C who depend on herding and agricultural livelihoods. More than 100 communities in Area C still rely on rainwater harvesting cisterns and trucked water to satisfy their water needs. They are challenged by high water prices that can reach more than 30 ILS/m³, and water quality issues.

Nearly 290,000 households in the oPt are not connected to any sewer system, and almost 11,300 households are discharging their sewage in adjacent streams and open areas, creating health and environmental hazards to downstream communities. About 88 per cent of these households are in the West Bank, with the remaining 12 per cent in Gaza.¹¹¹

More than 10,000 households (4,000 in the West Bank and 6,000 in Gaza) suffer limited access to adequate household sanitation facilities.¹¹² These households are adopting various coping mechanisms, including sharing latrines with other families and using shelter spaces, rather than bathrooms, for handwashing or bathing. Such practices generate privacy and protection concerns, particularly for women and girls.

At least 129 schools, and 164 healthcare units in the West Bank suffer from insufficient WASH facilities (primarily toilets, drinking and handwashing stations) to meet the standards set up by the Ministries of Education and Health.¹¹³ This results in overcrowding of existing facilities and the undermining of key hygiene practices, all of which raise concerns due to the ongoing COVID-19 pandemic.

Due to the traditional gender division of labour in Palestinian society, women and girls bear the bulk of the burden related to the shortage of WASH services. They are expected to secure the water needed for domestic consumption and care for the children's hygiene. Women and girls also have additional water needs related to their menstrual hygiene and the specific health needs of pregnant and lactating women. Children, elders and people with disabilities also struggle to adapt to the substandard household WASH facilities and water shortages.

The WASH humanitarian needs overview draws on household, institutional, community and national assessments, carried out between May and September 2021, and which involved direct communication with the affected people on their key WASH needs. Cluster partners have approached various vulnerable groups to ensure that their specific needs are reflected in the WASH humanitarian needs overview, especially those of women, children and people with disabilities.

Monitoring

Monitoring of needs is done on quarterly bases and is a critical aspect of the planning and implementation phases. The cluster requests all partners to provide information on their WASH response activities in the 4Ws information system. After that, the cluster analyses the data and generates the quarterly situation reports, maps and summary figures. Cluster meetings provide the opportunity for partners to identify gaps, challenges and discuss the overall performance of the cluster including the effectiveness of its processes.

Further field monitoring visits are also conducted by the cluster team to get a better understanding around project implementation, ensuring they are responding to priority needs and documenting response gaps. The focus of these monitoring visits is to ensure all partners are being accountable and responsive to those they serve.

Needs indicators

#	INDICATORS	SECTORS	SOURCE
1	# of people with limited access to improved WASH services due to the Israeli restrictions, attacks and blockade	WASH	OCHA
2	# of people with limited access to improved water sources for drinking and domestic purposes	WASH	MSNA
3	# of people with limited access to a sufficient quantity of water for drinking and domestic purposes	WASH	MSNA
4	# of people with limited access to improved functional and safe sanitation facilities	WASH	MSNA
5	# of people with limited access to improved sanitation services	WASH	MSNA
6	# of people with limited access to improved solid waste services	WASH	MSNA
7	# of people with inadequate access to WASH services in schools	WASH	WASH cluster assessment 2021
8	# of people with inadequate access to WASH services in health care facilities	WASH	WASH cluster assessment 2021
9	# of people affected by flooding events	WASH	MSNA
10	# of people in need of adequate WASH capacity during emergencies and shocks	WASH	MSNA, WASH cluster

3.7

Shelter and Non-Food Items (NFIs)



TOTAL IN NEED	GAZA	WEST BANK	FEMALE	MALE	GIRL	BOYS
0.94m	870k	73k	668k	695k	294k	313k

Based on the recent MSNA analysis it is estimated that 943,000 Palestinians across the oPt are in need of humanitarian assistance in 2022, specifically in order to access adequate shelter (including basic households supplies), which is indispensable to providing people with a minimum level of privacy, protection and dignity. Some 92 per cent of the people in need of assistance are in the Gaza Strip and eight per cent are in the West Bank, including East Jerusalem.

The MSNA analysis across the oPt for the vulnerable groups indicates there are over 104,000 female-headed households, 41,000 of whom live in severe and extreme shelter conditions that do not meet minimum standards for protection, privacy, covered living space, resistance to extreme weather conditions, or suffer from unrepaired damage or inadequate WASH facilities. Similarly, 23,000 people with disabilities (including 10,000 children) live in shelters with some kind of damage or defect, of whom 9,000 individuals live in severe shelter conditions.

Women and girls living in substandard, overcrowded, unsafe shelters with lack of privacy and limited access to hygiene facilities are highly exposed to the risk of gender-based violence (GBV). These conditions are likely to increase protection related concerns and consequent negative coping mechanisms such as early marriages, and greater exposure to GBV-related risks.

Gaza

Gaza is one of the most densely populated areas in the world, with 2.11 million Palestinians living in an area that is 365 km² with a population density of 5,800 per square kilometres. Gaza suffers from a chronic housing shortage of 120,000 units, with an annual average of 14,000 housing units needed to meet natural population growth.¹¹⁴

While the occupation remains a major driver of shelter needs in Gaza, the housing crisis is impacted by a combination of different factors; escalations, the

blockade and the high costs of construction, and limited economic opportunities as a result of over 14 years of Israeli restrictions on the import of building materials and equipment, the deteriorating socio-economic situation, and recurring waves of hostilities.

Based on a field assessment of 45,000 housing units in Gaza implemented by the Ministry of Public Works and Housing (MOPWH) from June to December 2019, around 21,300 inhabited housing units across Gaza were found to be substandard. This means that they do not meet the minimum requirements for adequate¹¹⁵ living space, protection from adverse weather, hygiene facilities and privacy, and require different degrees of rehabilitation. The assessment revealed that another 7,000 units were beyond repair.¹¹⁶

Based on the MSNA data, 14 per cent of the surveyed housing units in Gaza reported living in critical shelter conditions (damaged buildings, tents, collective shelter, containers, makeshift shelters, unfinished/damaged buildings). 62 per cent reported damage to their shelter (large cracks/ opening in the walls and roof, broken/ cracked windows, broken exterior doors). In addition, there are 28,000 individuals registered with Ministry of Social Development at risk of eviction for not being able to pay the rent.

According to the MSNA WASH analysis, some 130,000 people in Gaza who live in ground floors located in low depression areas, or next to sewage pumping stations, are at constant risk of flooding during the rainy season.

This is primarily due to the lack of proper storm water drainage, and limited winterization preparedness.

In the recent escalation of May 2021, 58,000 housing units were damaged or destroyed, of which 9,500 had moderate to severe damage, and 1,255 housing units were destroyed and rendered uninhabitable, leaving 9,500 people displaced. According to the MSNA, 85 per cent of households that had their homes damaged as a result of hostilities had no capacity to repair. As of September 2021, a total of 12,500 remain internally displaced, 9,500 of whom from the May escalation and 3,000 from previous escalations.

West Bank

According to the MSNA, over 73,000 Palestinians in need of shelter assistance live in the West Bank including Area C, East Jerusalem and the H2 area of Hebron city. The restrictive and discriminatory planning and zoning regime applied by Israel in Area C and East Jerusalem makes it virtually impossible for Palestinians to obtain building permits, thus impeding the development of adequate housing and infrastructure. Public (also called 'state') land is almost exclusively allocated to Israeli settlements or for military training (Area C: 30 per cent fire zones, 36 per cent state land, 14 per cent natural reserves¹¹⁷), while most of Palestinian land is

private and zoned as agricultural, where construction is severely restricted. The resulting housing deficit, alongside the risk of demolition, is a significant 'push-factor' for residents of Area C and East Jerusalem to relocate elsewhere in the West Bank.

Between January and September 2021, there was a surge in demolitions 72 per cent higher than same period of 2020, with a total of 240 residential structures demolished or confiscated (70 per cent in area C, 29 per cent in East Jerusalem and 1 per cent in area A and B), rendering 960 people, half of whom children, homeless and in need of urgent shelter assistance.¹¹⁸ In Area C alone, there are over 15,500 demolition orders pending against Palestinian structures.¹¹⁹

In East Jerusalem, the shortage in housing units and high rental costs push people to find other alternatives in nearby communities such as Bethlehem, Aanta, Ram, and Abu Dies. Moving outside of Jerusalem's municipal boundaries puts Palestinian Jerusalemites at risk of losing their residency rights. The risk of home demolition, the unaffordable housing market, and settler takeovers of Palestinian homes are key challenges facing Palestinians in East Jerusalem. Some 218 families are at risk of eviction, primarily due to court cases filed by Israeli settler organizations.

PIN by geography and severity

STRATA/AREA	SEVERE	EXTREME	CATASTROPHIC	PEOPLE IN NEED
East Jerusalem	-	6,776	-	6,776
Area C	710	19,565	-	20,276
AREA A AND B	-	45,962	-	45,962
H2 (Hebron)	-	208	-	208
North Gaza	182,283	54,228	-	236,511
Gaza	163,010	49,008	-	212,018
Deir al Balah	74,026	56,295	-	130,321
Khan Yunis	83,606	81,837	-	165,443
Rafah	56,315	68,886	-	125,202
Total	559,952	382,766	-	942,717

An assessment implemented by the West Bank Protection Consortium (WBPC) members in February 2021 found that at least 37,300 individuals in Palestinian Bedouin and herding communities in Area C live in substandard, basic shelters such as tents, metal shacks and caves, which are in need of urgent rehabilitation and upgrading.¹²⁰ Many communities in the West Bank suffer from frequent settler attacks and are in need of shelter protection measures (e.g., external fences/gates, windows, steel protection nets).

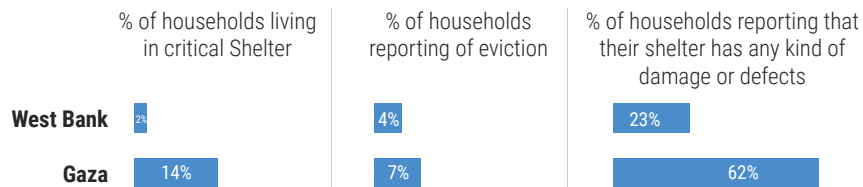
Impact of COVID-19 and Unforeseen Emergencies

The COVID-19 pandemic continues to add extra strain to shelter needs, generating added pressure for families

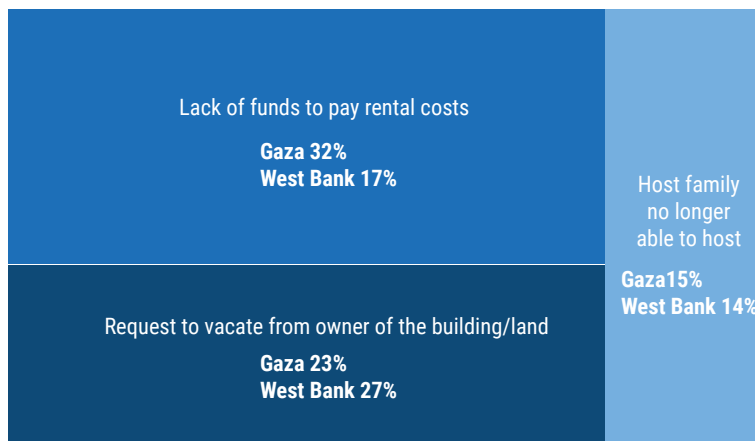
living in substandard shelters to create hygienic and appropriate living space. Members who contract the virus cannot properly isolate, thus increasing the risk of transmission. This issue requires special attention and focus from the Shelter sector.

For an effective, efficient and timely response to unexpected and frequent escalations, as well as unforeseen emergencies, it is necessary to increase partners' capacities to respond to emerging needs. This involves the stockpiling of NFIs, community capacity building, improving urban displacement settings in order to host IDPs, and maintaining the existing DES (Designated Emergency Shelter) to ensure adequate functionality at times of emergency.

Shelter Specific MSNA findings:



Reasons for Eviction Risks:



Cluster partners are encouraged to have meaningful engagement at all stages of project implementation, through interviews and focus group discussions, while respecting local culture, traditions and norms. The cluster recommends partners adopt transparent and clear complaints mechanisms, with two-way channels of communication such as emails, phone numbers and / or other context appropriate communications channels. The key principle is that affected people should have the opportunity to provide real time feedback, and to be involved in project monitoring and evaluation and overall lessons learned. Different trainings and sessions should be facilitated by the cluster for the prevention of Sexual Exploitation and Abuse (PSEA), provision of information on referral pathways and existing support services (according to the needs of partners).

Monitoring

The cluster relies on many different data sources, including field assessments conducted by the partners, the Ministry of Social Development database that keeps up to date records on families living under the poverty line; MoPWH data on the progress of construction and the expected shortage in the housing units in Gaza; as well as the new assessment of 34,000 substandard households. The cluster plans to have support from the REACH initiative to implement specific assessments for people at risk of eviction from rented homes.

Needs indicators

#	INDICATORS	SECTORS	SOURCE
1	# of people displaced	Shelter & NFIs / Protection	Shelter & NFIs partners
2	# of people displaced due to demolition	Shelter & NFIs / Protection	OCHA Demolition Database
3	# of HH in need for shelter protective materials	Shelter & NFIs / Protection	OCHA Demolition Database
4	# of people evicted or at risk of eviction due to deteriorated socio-economic situation .	Shelter & NFIs / Protection	Shelter & NFIs partners
5	# of individuals living in substandard shelters	Shelter & NFIs	Shelter & NFIs partners
6	# of individuals living in shelters un-protected from weather conditions	Shelter & NFIs	Shelter & NFIs partners
7	# individuals in need of shelter NFI support	Shelter & NFIs	Shelter & NFIs partners
8	# of individuals living in overcrowded conditions and at risk of being affected from COVID 19	Shelter & NFIs	Shelter & NFIs partners
9	#of people in need of shelter support at the onset of emergencies	Shelter & NFIs	Shelter & NFIs partners
10	# of communities in need of capacity building and awareness raising on emergency preparedness	Shelter & NFIs	Shelter & NFIs partners
11	# of Individuals able to be supported with prepositioned NFIs at the organization warehouses.	Shelter & NFIs	Shelter & NFIs partners
12	# of IDPS able to be hosted at community level	Shelter & NFIs	Shelter & NFIs partners

Part 4

ANNEXES

GAZA STRIP

Destruction following Israeli attacks on the Gaza Strip, May 2021. ©Samar Abu Elouf



Annex 1:

Data Sources

Palestinian Central Bureau of Statistics (PCBS)

The majority of the figures used for the population used in the HNO are based on PCBS population projections for 2022, based on their 2017 census. These include figures for specific vulnerable groups, as well as key geographical areas. PCBS's datasets are [available online](#).

OCHA digital services and platforms

The analysis presented throughout the HNO also makes use of a range of interactive charts, maps, and databases (Protection of Civilian, demolition, Gaza crossing movement, and access, Gaza critical indicators) developed by OCHA to support the humanitarian community's response in the oPt, all of which are [available online](#). In the last decade, OCHA has designed and implemented several online tools and services to monitor occupation violations in the oPt.

Assessments by humanitarian partners

The HNO 2021 analysis and figures are based on a thorough assessment of the humanitarian situation in the form of 53 cluster-specific assessments and four multi-cluster assessments conducted by 60 humanitarian partners during the year across various thematic and geographical areas.

As part of the clusters' needs analysis, clusters utilized secondary data to determine the needs and the Multisectoral Needs Analysis MSNA. The Secondary data were validated through focus group sessions and meetings with community leaders and affected persons. In such sessions and seminars, partners included representatives from vulnerable groups, including women, youth, and persons with disabilities. The majority of these assessments and studies have

age and sex-disaggregated data. More information about these assessments and analyses is available in an [online registry](#).

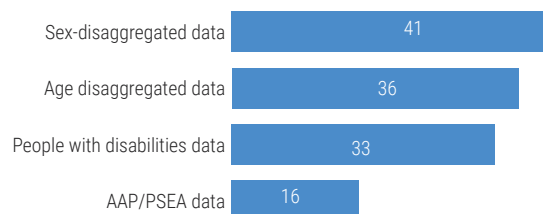
Number of assessments: 57

Partners: 60

Technique: 53 needs assessments and four multi-cluster assessments

	Gaza Strip	oPt	West Bank	Grand Total
Education	6	4	1	11
FSS	19		1	20
Health	4		1	5
Multisectoral	3	2		5
Other_Sectors	5			5
Protection	4	1		5
Shelter	2			2
WASH	1	3		4
Grand Total	44	10	3	57

57 ASSESSMENTS BY DISAGGREGATION OF DATA



Annex 2:

2021 Multisectoral Needs Assessment (MSNA)

In July 2021, the Humanitarian Country Team (HCT), supported by the Palestinian Bureau of Statistics (PCBS), surveyed a sample of 7,500 families across the occupied Palestinian territory (oPt) to understand better their living standards, coping mechanisms, and physical and mental wellbeing. The findings were used by humanitarian and development organizations to shape their interventions across Gaza and the West Bank by looking at multiple sectors holistically, including food security, health, Protection, shelter, and Education.

Background and Justification

Over the years, the humanitarian needs overview relied on harmonizing cluster-specific needs assessments. This approach has made use of very granular multisectoral data to establish linkages in sectoral needs and facilitate an inter-sectoral analysis that better highlights underlying drivers of vulnerability.

In 2020, The Humanitarian Country Team (HCT) and the donor community expressed the need for a Multisectoral Needs Analysis (MSNA) to support evidence-based planning and decision-making. The key findings of the MSNA ultimately will contribute to Grand Bargain Commitment 5 on Joint and Impartial needs Assessments, further linking the oPt response strategy with global policy priorities.

Objectives

- Directly inform the 2022 Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP) in the oPt through the provision of a comprehensive, **Multisectoral household-level dataset**;
- Provide a detailed inter-sectoral analysis of the magnitude and severity of humanitarian needs among crisis-affected population groups in the oPt to support the calculation of sectoral and inter-sectoral **People in Need (PiN) and severity figures in alignment with the JIAF methodology**
- **Identify vulnerable population groups and geographic areas with the most acute needs**
- Inform **development assistance planning and relevant SDG targets**

Geographic Scope

In coordination with Cluster Coordinators and consultation with the cluster leads, the MSNA geographic scope disaggregated to **48 areas/strata** with a statistically representative needs analysis.

West Bank: **Stratification by Oslo Area and Governorate**

- 11 governorates within Area C
- Area A&B as one single strata
- H2 as separate strata
- East Jerusalem as separate strata
- Additional strata for refugee camps

Gaza Strip: **Stratification by locality**

- 28 localities
- Five refugee camps

Vulnerable Groups

The following groups have been identified as most vulnerable and were therefore integrated into the MSNA data collection and need analysis: **people living below the poverty level; Palestine refugees living in refugee camps; Palestine refugees living in outside refugee camps; People with shelter damage due to the last escalation; female-headed households; small-scale farmers; People with disabilities; and Internally displaced people.**

Methodology and data collection

For the first time, the humanitarian country team in oPt successfully conducted a Multisectoral Needs Assessment (MSNA) at the household level. The MSNA followed [the Joint Intersectoral Analysis Framework \(JIAF\)](#), a global methodology endorsed by the Global Cluster Coordinators and IASC.

In July 2021, PCBS successfully surveyed 7,500 HHs, a minimum amount of HHs, to generate representative data across the oPt. Female respondents represented 53 percent. The MSNA survey developed over 350 needs indicators across all clusters, including AAP and gender. The indicators target the measurement of people's humanitarian conditions across three sub pillars: living standards, coping mechanisms, and physical and mental wellbeing.

The Joint Intersectoral Analysis Framework (JIAF) endorsed by the ICCG is illustrated below. The analysis and resulting narrative were structured around the five JIAF pillars.

1. **Indicators:** The 21 indicators for intersectoral PIN/severity calculation (see Table 1) were jointly selected by the Cluster Coordinators based on relevance and analytical rigor. Subject-matter experts (i.e., clusters, working groups, and thematic focal points) provided input on the significance of the indicator. OCHA, REACH Initiative, cluster Information Management Officers, and Global Cluster Lead Agencies all contributed to the process. Clusters determined the relevance of the indicators and analysis thresholds based on the following criteria:

- **Validity:** A clear relationship between the indicator and what is being measured exists.
- **Unit of analysis:** JIAF indicators can be at the household or geographic level.
- **Transparency:** Each indicator has a robust and accepted methodology/instrument attached.
- **Severity thresholds:** Each indicator has severity thresholds organized along a 5-point scale and, at a minimum, a 3-point scale, aligned with JIAF severity scale definitions and humanitarian population figures
- **Simplicity:** The indicator is easy to understand and self-explanatory.
- **Uniqueness:** The indicator should be used only once in estimating the severity of Humanitarian Conditions to avoid redundancy and overweighting a particular indicator.
- **Disaggregation:** Data by sex, age categories, disability as much as possible.

Limitations:

- Indicators from the [JIAF Indicator Reference Table](#) should use the JIAF thresholds unless

the cluster coordinator has a strong reason why the JIAF thresholds are not applicable in the oPt context.

- Cluster models indicators should apply the same threshold if they are used in the intersectoral models to ensure standardization and accuracy in humanitarian needs calculation at the intersectoral and sectoral levels.
 - The final sectoral PiNs need in all cases to be smaller than the inter-sectoral PiN.
2. **The analytical Framework for PIN and severity calculation:** The MSNA steering committee prepared the analytical Framework in the first week of August. The Framework was jointly reviewed by Cluster Coordinators on the second week of August 2021 and endorsed by the ICCG on the 30 of August. The Framework was prepared considering four elements:
- Indicators prioritized by clusters for cluster PIN/severity analysis;
 - Inclusion of cross-cutting indicators following bilateral consultations with thematic focal points (e.g., CASH working group, AAP, gender, and PSEA focal points);
 - Alignment with [global indicator reference table](#) to the maximum extent possible;
 - Technical rigor (i.e., availability of indicator and data disaggregated by strata/locality, population group, and when possible SADD and disability; thresholds development, etc.).
3. **Intersectoral PIN and severity calculation method:** oPt followed "Data Scenario A" [from 2021 JIAF guidance](#) for calculating the percentage and number of households falling under each severity class category. The REACH Initiative prepared data and provided it to OCHA for PIN and severity analysis.

In line with JIAF guidance, oPt used a "mean of 50 percent max" rule to determine the overall severity score of a household, with regular rounding. Two "critical" indicators were used, jointly selected by the MSNA steering committee and reviewed by ICCG. The PIN is the sum of individuals in severity categories 3, 4, and 5, and Acute PIN is the sum of individuals in severity categories 4 and 5.

Excel was selected and used as the most suitable tool for performing the necessary intersectoral calculations. However, more advanced tools were employed by REACH Initiative colleagues in line with their technical capacity and the datasets provided e.g., R scripting.

All relevant methodological information, Terms of Reference, plus findings are available on the [MSNA web page](#). The page includes the following documents and presentations:

- 1- [MSNA findings \(presentation in English\)](#)
- 2- [MSNA findings presentation in Arabic](#)
- 3- [Interactive Dashboard to visualize the needs indicators by Gaza and West Bank](#)
- 4- [People in Need analysis \(presentation in English\)](#)
- 5- [MSNA findings in Gaza \(presentation in English\)](#)
- 6- [Preliminary Findings \(excel\)](#)
- 7- [Raw dataset \(excel\)](#)
- 8- [MSNA terms of reference](#)

What is the Joint Intersectoral Analysis Framework

Overview of the JIAF



Annex 3:

Cluster Needs Analysis Methodology

For alignment between the intersectoral and the sector-specific estimations of PIN and severity, clusters were advised to adopt the 2021 JIAF methodology using “Data scenario A” when possible and to follow two principles:

1. Indicators common to the intersectoral analysis and cluster analysis have the same thresholds. This was done in order to ensure that an indicator was not ‘interpreted’ in two different ways and that analysis remained consistent and comparable.
2. The intersectoral PIN is used as a guiding “ceiling”

when calculating cluster PIN. When contextually appropriate, clusters aligned indicators and thresholds with the global indicators references in the JIAF Indicator Reference List. Most clusters calculated people in need and severity of needs using the JIAF methodology.

3. The indicators used by the clusters to calculate severity are listed in Table 2. Below is a summary of methodological approaches and data sources used.

Cluster	ANALYSIS METHODOLOGY	INDICATORS TO ESTIMATE PIN AND SEVERITY
Food Security Sector	<p>PIN was calculated based on the Food Insecurity Experience Scale (FIES), included in the MSNA assessment. FIES is the basis for compiling an SDG indicator (SDG 2.1.2).</p> <p>The FIES questions focus on self-reported food-related behaviors and people’s experiences in accessing food. For example, if they faced increasing difficulties in accessing food due to resource constraints? The answers to the 8 module questions are then used to create a measurement scale that covers a range of severity of food insecurity indices. These can then be compared against a comparable global scale to indicate the severity of food insecurity in the oPt.</p>	<p>The SDG thresholds were not deemed sufficient to calculate the sectoral percentage of People in Need. A modified threshold was therefore introduced into the FIES analysis to assign households to the five severity levels (none, stress, severe, extreme, catastrophic).</p> <p>These thresholds have been established under the guidance of the Food Security and Nutrition Statistics Team Leader and member of the IPC Technical Advisory Group at FAO, to correspond as closely as possible to the five phases included in the IPC Acute Food Insecurity classifications (1 Minimal/None, 2 Stressed, 3 Crisis, 4 Emergency, 5 Catastrophe/Famine).</p> <p>The PIN is the sum of those assigned to the severe, extreme, and catastrophic severity levels.</p>
Education	<p>The Education Cluster used various data sources to generate the final PIN. In addition to the data provided from the MSNA at the HH level for Education, the cluster used other data sources at the school level. (the Education Cannot Wait (ECW) Baseline Study conducted in the West Bank for a sample of schools divided in Area C, H2, and East Jerusalem. In addition, the cluster used the assessment recently conducted in Gaza in May/June 2021 for the damage in the educational facilities after the last escalation).</p> <p>The Education sectoral model used scenario A to define the needs indicators and thresholds according to the JIAF methodology. The distance learning and the need for catch-up program indicators were discarded from the PIN calculation model based on the assumption that the need for catch-up programs was based on HH perception.</p>	<p>The final severity score for each HH was computed, taking the average of the most significant four severity scores of the seven indicators kept in the model. The percentage of HH in each severity level is then calculated for each HNO strata/area and turned into population figures (multiply the percent of severity (severe, Extreme, and catastrophic) by the total population of students in each stratum)).</p> <p>The MSNA was not used to measure the needs among teachers and school staff. Other assessments by the Ministry of Education were used to generate the needs among adults.</p> <p>PIN among children with disabilities identified according to the national percentage of people with disabilities of 2.4% provided by PCBS.</p>

Protection	<p>The Protection Cluster-based its estimation of PIN on indicators from the MSNA. To define the protection cluster, ten indicators were selected covering GBV, MHPSS, Child Protection, HLP, and Mine Action. The model applies direct indicators, e.g., risk of eviction under HLP, and proxy indicators, e.g., food security coping mechanisms.</p>	<p>The indicator for food security is seen as a critical indicator in defining the PIN, as it is an effective proxy for protection needs across the sub-cluster areas. The standardized severity thresholds are aligned to the JIAF and the intersectoral model, while the indicators covering conditions specific to the oPt situation are contextualized. See the protection indicators in the intersectoral model in Annex 5.</p>
Health	<p>The Health Cluster, with assistance from the Global Health Cluster, used a PIN Calculator to estimate the number of people in need for each geographical area based on the following: access to primary, secondary, and some specialized healthcare services, the prevalence of moderate and severe mental health disorders, and exposure to communicable such as COVID-19.</p>	<p>The critically vulnerable to healthcare is identified based on the impact of lack of health services on morbidity and mortality rates. While the Gaza Strip in its entirety is considered a vulnerable area, in the West Bank, those in Area C, Hebron/H2, East Jerusalem, and the closed area behind the Barrier are considered most vulnerable. The severity rating was determined by the likelihood of death or severe morbidities, such as disability, or deterioration of physical or mental health, in the absence of health services or lack of timely response.</p>
WASH	<p>The WASH Cluster adopted the JIAF methodology in defining the WASH vulnerability in the West Bank and Gaza. The WASH vulnerability indicators in oPt were calculated against the following thematic area; access to water, sanitation, WASH in schools, and flooding.</p> <p>The WASH Cluster adopted the global WASH Cluster severity definitions.</p>	<p>The WASH Cluster relied on the MSNA data for measuring the WASH vulnerability severity of the West Bank and Gaza population.</p> <p>Other community and institutional level assessments were utilized to measure the WASH vulnerability, for example, WASH in schools and WASH in health care facilities.</p>
Shelter	<p>The number of people in need was estimated based on the MSNA 2021 results and the JIAF model. The Shelter cluster considered all HHs who fall under severe, extreme, and catastrophic severity levels as people in need. The cluster analyzed damage assessment results of the May 2021 escalation (Source Ministry of Public Work and Housing). People renting accommodations due to the May escalation were considered at high risk of eviction (Source Ministry of Social Development database.)</p>	<p>The severity identification is based on the JIAF methodology scale by using five indicators (1) percent of people living under critical shelter conditions (2) Average number of household members per room (3) percent of HHs whose shelter has any damage or defects (4) percent of households reporting damage to their current shelter as a result of the recent conflict (5) per cent of households without any capacity to repair and rehabilitate the shelter that has been damaged or destroyed. The team identified the threshold at the JIAF scale for the five indicators included in the shelter cluster needs analysis model. The cluster introduced a separate layer of severity analysis to combine the demographic groups, predominantly People with disabilities and female-headed households.</p>

Annex 1: Inter-sectoral Framework for Humanitarian Conditions Analysis

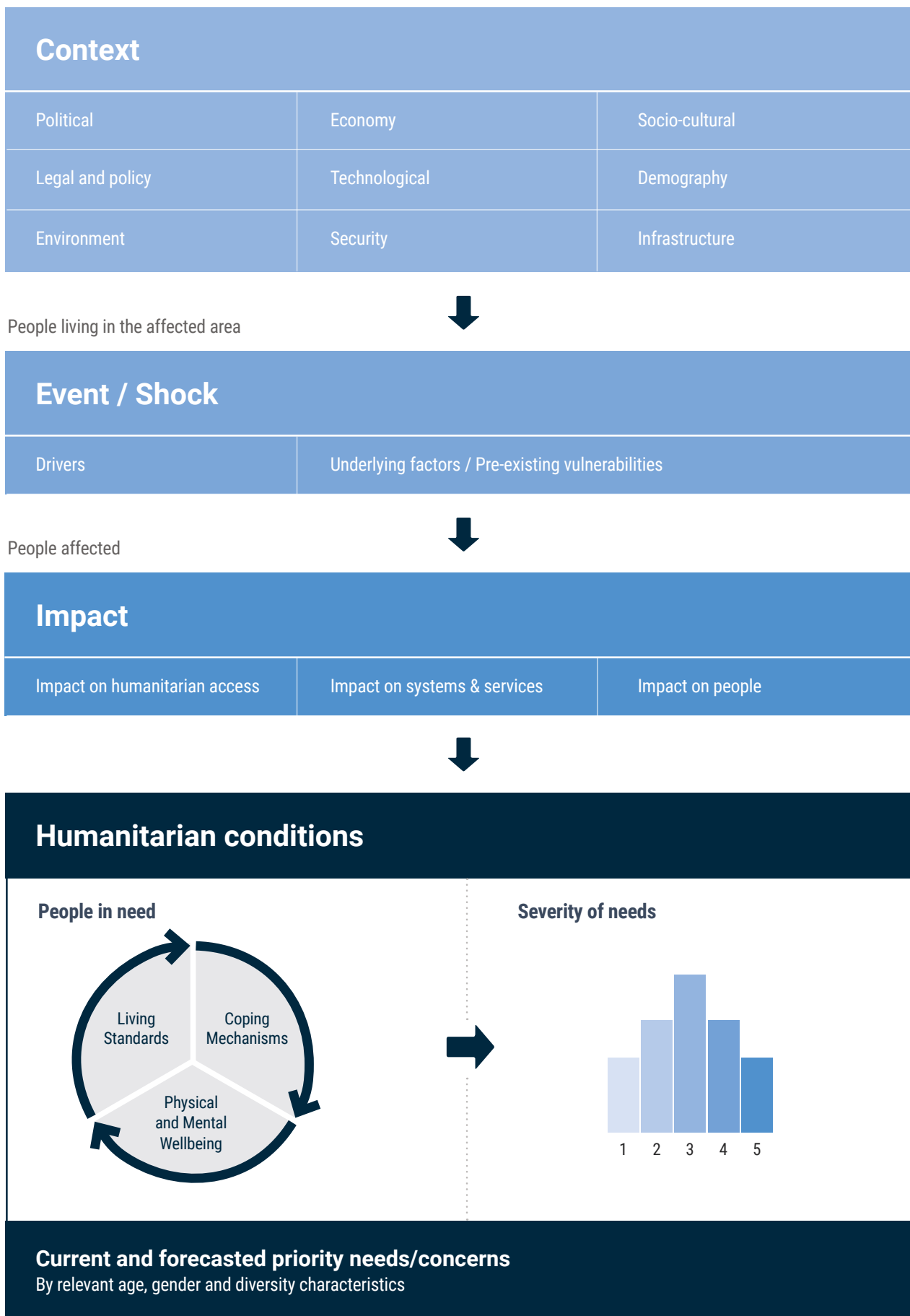
JIAF Pillars

Context	Secondary data review of general characteristics of the political, socio-cultural, attitudinal, economic, legal and policy, technological, demographic, security, public infrastructure, service delivery and environmental profile
Event/Shock	Secondary data review related to conflict and displacement, and COVID-19 as the most recent shock
Impact	Secondary data review on the impact of conflict, displacement, and COVID-19 on access, systems, and services, and people. Complemented with primary data when available.
Humanitarian conditions	Indicator-driven used to estimate the severity of need and people in need.

Sector	JIAF Categorization		INDICATORS		Severity Class				
	Subpillar	Critical Problems	oPt 2022 HNO Indicator	JIAF	None/Minimal (1)	Stress (2)	Severe (3)	Extreme (4)	Catastrophic (5)
Cross-sectoral (Disability)	Physical and Mental Wellbeing	Critical Problem 1: Humanitarian Consequences related to protection and forced displacement	% of the population identified as having disabilities (in line with the Washington Group Questions)	Yes	All domains are no difficulties	No domain is a lot of difficulties or cannot do at all, 1, 2, or 3 domains are some difficulties	No domain is cannot do at all, 1, 2, or 3 domains are a lot of difficulties OR no domain is a lot of difficulties or cannot do at all; at least 4 domains are some difficulties	No domain is cannot do at all, 1, 2, or 3 domains are a lot of difficulties OR no domain is a lot of difficulties or cannot do at all; at least 4 domains are some difficulties	At least 4 domains are cannot do all
Health	Physical and Mental Wellbeing	Critical Problem 1: Humanitarian Consequences related to protection and forced displacement	% of HH where at least one member (SADD) is reporting signs of distress (self-diagnosed)	Yes	No member showing signs of psychosocial distress	HHs with no adult member reported showing signs of psychosocial distress	HHs with no adult member reported showing signs of psychosocial distress	HHs with 1%-30% of adult members reported showing signs of psychosocial distress	HHs with 31%-60% of adult members reported showing signs of psychosocial distress
Protection	Physical and Mental Wellbeing	Critical Problem 1: Humanitarian Consequences related to protection and forced displacement	% of girls / women who avoid areas because they feel unsafe	Yes	Women and girls do not avoid any areas	Women and girls avoid one area because they feel unsafe	Women and girls avoid two areas because they feel unsafe	Women and girls avoid three areas because they feel unsafe	Women and girls avoid four or more area because they feel unsafe
Protection	Physical and Mental Wellbeing	Critical Problem 1: Humanitarian Consequences related to protection and forced displacement	% of HH reporting being at risk of eviction	Yes (thresholds adapted)	HH does not report being at risk of eviction		HH reports being at risk of eviction		
Protection	Physical and Mental Wellbeing	Critical Problem 1: Humanitarian Consequences related to protection and forced displacement	% of girls / boys engaged in child labour	Yes (thresholds adapted)	No child member of the HH engaged in child labour		One child member of the HH engaged in child labour	More than one child member of the HH engaged in child labour	All child members of the HH engaged in child labour
Education	Living Standards	Critical Problem 2: Humanitarian Consequences related to the access to essential services	% of school-aged children are out of school (dropped-out)	Yes	"HH: No school-aged children in the HH dropped out"	"HH: NA"	"HH: Some school-aged children in the HH attend school"	HH:NA	"HH: All school-aged children in the HH dropped out"
Education	Living Standards	Critical Problem 2: Humanitarian Consequences related to the access to essential services	Average time needed by school-enrolled children to access the nearest education facility (primary and secondary) / % of households reporting safety concerns in relation to their children's education	Yes	"Less than 15 minutes/ No issues are reported"	"15-29min / One issue of safety is reported"	"30-59min / Unsafe More than one issue of safety is reported"	"Over 1h / Very Unsafe At least one issue is reported"	
Education	Living Standards	Critical Problem 2: Humanitarian Consequences related to the access to essential services	% of HH school-aged children (who were previously attending school) NOT continuing teaching and learning activities remotely and in need of catch-up learning programs.	No	"All of school-aged children (who were previously attending school) continuing teaching and learning activities remotely AND reporting no need for catch-up learning programs."	"All of school-aged children (who were previously attending school) continuing teaching and learning activities remotely AND reporting Yes for the need of catch-up learning programs."	"Some/All school-aged child (who were previously attending school) Not continuing teaching and learning activities remotely AND reporting No to the need for catch-up learning programs."	"Some/All school-aged children (who were previously attending school) Not continuing teaching and learning activities remotely AND reporting Yes to catch-up learning programs"	

Food Security	Living Standards	Critical Problem 2: Humanitarian Consequences related to the access to essential services	Food Expenditure share	Yes	<50%	50-65%	65-75%	75% - 85%	> 85%
Food Security	Living Standards	Critical Problem 2: Humanitarian Consequences related to the access to essential services	Food Consumption Score	Yes	Acceptable and stable		Borderline	Poor	
Health	Living Standards	Critical Problem 2: Humanitarian Consequences related to the access to essential services	"Percentage of population that can access primary healthcare within one hour's walk from dwellings % of HHs facing access barriers when trying to access health services"	Yes (thresholds adapted)	Less than 30 minutes AND no access barriers	More than 30min AND no access barriers	Less than 30min AND facing access barriers	More than 30min AND facing access barriers	
WASH	Living Standards	Critical Problem 2: Humanitarian Consequences related to the access to essential services	% of HHs having access to a sufficient quantity of water for drinking, cooking, bathing, washing or other domestic use	Yes	Enough water for drinking, cooking, personal hygiene and other domestic purposes	Enough water for drinking AND cooking AND personal hygiene	Enough water for drinking AND EITHER cooking OR personal hygiene	Enough water for drinking BUT NOT for cooking AND personal hygiene	Not enough water for drinking
WASH	Living Standards	Critical Problem 2: Humanitarian Consequences related to the access to essential services	# of people with inadequate access to sanitation services	Yes	Connected to a communal lined drainage and to the sewage system	Covered and lined septic tank/cesspool	A hand dug hole in the ground	It drains into an open area outside of the shelter and remains stagnant	
Livelihoods	Living Standards	Critical Problem 2: Humanitarian Consequences related to the access to essential services	% HH with at least one adult (18+) unemployed and seeking work	No	No unemployment in the HH	> 0 %AND <= 40% of adults is unemployed and seeking work	> 40 %AND <= 60% of adults is unemployed and seeking work	> 60 %AND <= 80% of adults is unemployed and seeking work	> 80% of adults is unemployed and seeking work
Livelihoods	Living Standards	Critical Problem 2: Humanitarian Consequences related to the access to essential services	% of HHs whose average monthly household income per HH member was less than __ NIS	No	More than 2000 NIS per HH member per month	More than 1450 NIS per HH member per month,	Between 1450 and 700 NIS per HH member per month	Between 700 and 300 NIS per HH member per month	Less than 300 NIS per household member per month
Shelter	Living Standards	Critical Problem 2: Humanitarian Consequences related to the access to essential services	Average number of household members per room	No	<2 HH member per room	Between 2 and 4 members per room	Between 4 and 7 members per room	7 or more members per room	
Shelter	Living Standards	Critical Problem 2: Humanitarian Consequences related to the access to essential services	% of HHs whose shelter has any kind of damage or defects	No	HH reports no damages or defects	HH reports one type of damage or defect	HH reports two types of damages or defects	HH reports three types of damages or defects	HH reports more than three types of damages or defects
Cross-sectoral (AAP)	Coping Mechanisms	Critical Problem 3: Humanitarian Consequences related to resilience and recovery	"% HH satisfied with aid received % HH with access/ knowledge of complaint mechanisms "	No	Satisfied with aid and aware of complaint mechanisms	Unsatisfied with aid, but aware of complaint mechanisms	Unsatisfied with aid and not aware of complaint mechanisms		
WASH	Coping Mechanisms	Critical Problem 3: Humanitarian Consequences related to resilience and recovery	% of households reporting relying on coping strategies to adapt to a lack of water	No	HH reports having enough water	HH does not have enough water but does not employ any coping strategy	HH reports modifying hygiene practices OR relying on drinking water stored previously OR spending money usually spent on other things to cope with a lack of water	HH reports receiving water on credit or borrowing water to cope with a lack of water	HH reports reducing drinking water consumption OR drinking water usually used for cleaning or purposes other than drinking
Food Security	Coping Mechanisms	Critical Problem 3: Humanitarian Consequences related to resilience and recovery	Livelihood coping strategy (food) - 30 day recall	Yes	No stress, crisis or emergency coping observed	Stress strategies	Crisis strategies	Emergency strategies	Near exhaustion of coping capacity
Livelihoods	Living Standards	Critical Problem 3: Humanitarian Consequences related to resilience and recovery	% HH unable to afford basic needs (% HH taking on debt due to healthcare, food, education, or basic household expenditures)	No	HH does not report having any debt	HH is taking on debt to afford productive assets, major purchases, business-related expenses or clothing and NFIs	HH is taking on debt to afford weddings or building reconstruction	HH is taking on debt to afford education, basic household expenditures	HH is taking on debt to afford healthcare or food

Figure 1. **Visual representation of the JIAF conceptual framework.**



JIAF Severity Scale

SEVERITY PHASE	KEY REFERENCE OUTCOME	POTENTIAL RESPONSE OBJECTIVES
1 None / Minimal	<p>Living Standards are acceptable (taking into account the context): possibility of having some signs of deterioration and/or inadequate social basic services, possible needs for strengthening the legal framework.</p> <p>Ability to afford/meet all essential basic needs without adopting unsustainable Coping Mechanisms (such as erosion/depletion of assets).</p> <p>No or minimal/low risk of impact on Physical and Mental Wellbeing.</p>	<p>Building Resilience</p> <p>Supporting Disaster Risk Reduction</p>
2 Stress	<p>Living Standards under stress, leading to adoption of coping strategies (that reduce ability to protect or invest in livelihoods).</p> <p>Inability to afford/meet some basic needs without adopting stressed, unsustainable and/or short-term reversible Coping Mechanisms.</p> <p>Minimal impact on Physical and Mental Wellbeing (stressed Physical and Mental Wellbeing) overall.</p> <p>Possibility of having some localized/targeted incidents of violence (including human rights violations).</p>	<p>Supporting Disaster Risk Reduction</p> <p>Protecting Livelihoods</p>
3 Severe	<p>Degrading Living Standards (from usual/typical), leading to adoption of negative Coping Mechanisms with threat of irreversible harm (such as accelerated erosion/depletion of assets). Reduced access/availability of social/basic goods and services</p> <p>Inability to meet some basic needs without adopting crisis/emergency - short/medium term irreversible - Coping Mechanisms.</p> <p>Degrading Physical and Mental Wellbeing. Physical and mental harm resulting in a loss of dignity.</p>	<p>Protecting Livelihoods</p> <p>Preventing & Mitigating Risk of extreme deterioration of Humanitarian conditions</p>
4 Extreme	<p>Collapse of Living Standards, with survival based on humanitarian assistance and/or long term irreversible extreme coping strategies.</p> <p>Extreme loss/liquidation of livelihood assets that will lead to large gaps/needs in the short term.</p> <p>Widespread grave violations of human rights. Presence of irreversible harm and heightened mortality</p>	<p>Saving Lives and Livelihoods</p>
5 Catastrophic	<p>Total collapse of Living Standards</p> <p>Near/Full exhaustion of coping options.</p> <p>Last resort Coping Mechanisms/exhausted.</p> <p>Widespread mortality (CDR, U5DR) and/or irreversible harm.</p> <p>Widespread physical and mental irreversible harm leading to excess mortality.</p> <p>Widespread grave violations of human rights.</p>	<p>Reverting/Preventing Widespread death and/or Total collapse of livelihoods</p>

Acronyms

4W	Four W's (Who is Where, When, doing What)
AOR	Area Of Responsibility
ARA	Access Restricted Areas
AIMWG	Assessment and Information Management Working Group
AWD	Acute Watery Diarrhea
CERF	Central Emergency Response Fund
CWD	Children with Disabilities
DES	Designated Emergency Shelter
EiE	Education in Emergencies
EJ	East Jerusalem
ER	Early Recovery
ERW	Explosive Remnants of War
EU	European Union
FAO	Food and Agriculture Organization of the United Nations
FHH	Female Heading Households
GAM	Gender and Age Marker
GBV	Gender-based violence
GEDCO	Gaza Electricity Distribution Company
GMR	Great March of Return
H2	Hebron City
HC	Humanitarian Coordinator
HCT	Humanitarian Country Team
HeRAMS	Health Resources Availability Monitoring System
HH	Households
HNO	Humanitarian Needs Overview
HRC	Human Rights Council
HRP	Humanitarian Response Plan
HF	Humanitarian Fund for the oPt
ICCG	Inter-Cluster Coordination Group
ICRC	International Committee of the Red Cross
IDP	Internally Displaced People
IHL	International humanitarian law
IHRL	International human rights law
INGO	International non-governmental Organisation
ISF	Israel Security Forces
JMP	Joint Monitoring Programme
MCNA	Multi-Cluster Needs Assessment
MHPSS	Mental health and psychosocial services
MoE	Ministry of Education
MoEHE	Ministry of Education and Higher Education
MoH	Ministry of Health
MoLG	Ministry of Local Government
MoP	Ministry of Planning
MoSA	Ministry of Social Affairs
MoPAD	Ministry of Planning and Administrative Development
MoPWH	Ministry of Public Works and Housing
MOSD	Ministry of Social Development
NCD	Non-communicable disease
NFI	Non-Food Item
NGO	Non-Governmental Organisation
NIS	New Israeli Shekel
NM	Nautical Miles
NNGO	National NGO
NRC	Norwegian Refugee Council
OCHA	Office for the Coordination of Humanitarian Affairs
OXFAM	Oxford Committee for Famine Relief
OHCHR	Office of the High Commissioner for Human Rights
oPt	occupied Palestinian territory
PA	Palestinian Authority
PCBS	Palestinian Central Bureau of Statistics
PMR	Periodic Mid-Year Monitoring Report
PiN	People in Need
PNA	Palestinian National Authority
PNGO	Palestinian NGO network
PoC	Protection of Civilians
PPP	Purchasing Power Parity
PRCS	Palestine Red Crescent Society
PRDP	Palestinian Reconstruction and Development Plan
PSEA	Protection Against Sexual Exploitation and Abuse
PSS	Psychosocial Support
PWD	Persons with Disability
RPM	Response Planning Module
SC Res.	Security Council Resolution
SIDA	Swedish International Development Cooperation Agency
SEFSec	Socio-economic and Food Security Monitoring System
SOP	Standard Operating Procedure
SSN	Social Safety Net
TIPH	Temporary International Presence in Hebron
UN	United Nations
UN Women	United Nations Entity for Gender Equality and the Empowerment of Women
UNCT	United Nations Country Team
UNDAF	United Nations Development Analysis Framework
UNDP	United Nations Development Programme
UNDSS	United Nations Department of Safety and Security
UNEP	United Nations Environmental Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UN-HABITAT	United Nations Centre for Human Settlements
UNICEF	United Nations Children's Fund
UNMAS	United Nations Mine Action Service
UNODC	United Nations Office on Drugs and Crimes
UNOPS	United Nations Office for Project Services
UNRWA	United Nations Relief and Works Agency
UNSCO	United Nations Special Coordinator's Office
VPP	Visual Plugin Pack
WASH	Water, Sanitation and Hygiene
WASH MP	Water, Sanitation and Hygiene Monitoring Project
WB	West Bank
WBWD	West Bank Water Department
WFP	World Food Programme
WHO	World Health Organization

End Notes

1. On 6 September, the PA set 11 December as the election date for certain village councils and municipalities, with a further phase of local council elections to take place at a later date. Hamas has not responded.
2. 6 hospitals, 8 clinics, 1 health centre, and 2 laboratories.
3. The RDNA was conducted by the World Bank Group, the UN, and the European Union, in close cooperation with the Palestinian Authority (PA) and in consultation with civil society and private sector actors in Gaza. <https://reliefweb.int/report/occupied-palestinian-territory/gaza-rapid-damage-and-needs-assessment-june-2021>
4. WASH Cluster, Gaza WASH sector damage assessment 2021.
5. Between 1988 and 2014, the Israeli Civil Administration (ICA) issued over 14,000 demolition orders against Palestinian-owned structures located in Area C on these grounds. OCHA, [Under Threat: Demolition orders in Area C of the West Bank](#) (2015).
6. See at: <https://peacenow.org.il/en/jerusalem-municipal-data-reveals-stark-israeli-palestinian-discrepancy-in-construction-permits-in-jerusalem>
7. During the mass demolition incidents in February 2021, the international community visited Humsa – Al Bqai'a several times and expressed support for the residents. On 7 July, Lynn Hastings, the Humanitarian Coordinator, tweeted that "The UN and members of the international community have repeatedly called for the Israeli Government to cease unilateral actions including demolitions in the West Bank. Residents of Humsa – Al Bqai'a are a protected population; forcing them to leave their homes is contrary to the international law applicable in the West Bank." <https://www.ochaopt.org/content/humsa-al-bqaiia-flash-update-7>
8. Most of these cases are based on the application of Israeli laws that allow Jewish Israelis who owned properties in East Jerusalem prior to 1948 to reclaim their property. There is no similar law which allows Palestinians who lost property during the conflict over the years to reclaim their property. In any event, and in accordance with international law, East Jerusalem is occupied territory and Israeli law is not applicable. The transfer of the Occupying Power's civilian population into occupied territory is a violation of Article 49 of the Fourth Geneva Convention.
9. The Egyptian authorities also allow the entry of a select type of Egyptian imported goods to Gaza, including food and fuel through the Egyptian-controlled Salah Ad Din Gate. However, the entry of many other goods, including basic construction materials such as steel bars, is not permitted.
10. At the start of the second intifada in 2000, some 26,000 Palestinians crossed Erez daily.
11. Many women older than 50 years of age and men older than 55 years of age, as well as children under 13 years traveling with an approved adult, are exempted from the requirement to obtain a permit to travel – provided they are not traveling on a Saturday, before 00:80 or after 19:00.
12. Resource Room is a special education programme for a student with a disability who is registered in either a special class or regular education while in need of specialized supplementary instruction in an individual or small group setting for part of the day.
13. Ir Amim, 2020: The State of Education In East Jerusalem: Discrimination in the Backdrop of COVID-19. <https://www.ir>
14. Palestinian Central Bureau of Statistics, The International Day of Persons with Disabilities 2019. <https://www.pcbs.gov.ps/site/512/default.aspx?lang=en&ItemID=3607>
15. WASH Cluster, WASH vulnerability Mapping 2021.
16. The World Bank, Economic Report to the Ad-hoc Liaison Committee, February 2021, p.4.
17. World Bank: Economic Monitoring Report to the Ad Hoc Liaison Committee, 17 November 2021, p.4. <https://www.un.org/unispal/document/world-bank-economic-monitoring-report-to-ad-hoc-liaison-committee-ahlc-17-november-2021/>
18. Ibid. p.4.
19. Different sources cite different figures. The 26.3 per cent of the population draws on The State of Food Security and Nutrition in the World (FAO, IFAD, UNICEF, WHO, and WFP, 2021) that covers the period 2018-2020. Socio-Economic and Food Security Survey preliminary results (SEFSec - PCBS, FSS 2020) suggests that 34.5 per cent of the population moderately or severely food insecure.
20. WFP, VAM food security analysis, June 2021, [Thousands of Palestinians face food insecurity amid escalating conflict](#)
21. According to the SAWA helpline, calls reporting suicide attempts increased under COVID-19 (or 420 per cent) mainly in Gaza, which on its own counted 33 cases of girls. (NIAF 2021).
22. Impact of COVID-19 on the Psychosocial and Mental Well-being of Palestinian Adolescents, WHO and Juzoor, 2021.
23. Calculated according to the child protection model applied to the 2021 MSNA data, using the common indicators and severity scales adopted at country level.
24. INFORM Global Risk Index 2022: [INFORM - Global, open-source risk assessment for humanitarian crises and disasters \(europa.eu\)](#). For this section, Palestine and oPt are used interchangeably.
25. Ibid.
26. INFORM COVID-19 Risk Index: [INFORM Covid-19 \(europa.eu\)](#)
27. [PiN calculation based on Protection Cluster severity model](#)

28. It has been assessed that 129 of the fatalities were civilians and 64 were members of armed groups, while the status of the remaining 67 has not been determined.
29. [OCHA Situation Report #9, Response to the escalation in the oPt, August 2021. https://www.ochaopt.org/content/response-escalation-opt-situation-report-no-9-august-2021](https://www.ochaopt.org/content/response-escalation-opt-situation-report-no-9-august-2021)
30. OHCA Protection of Civilians database.
31. The majority (27) were protesting in Sheikh Jarrah. All have been released from detention, on bail and after signing conditions banning them from protesting for 30-60 days.
32. OCHA Situation Report #9, Response to the escalation in the oPt, August 2021. <https://www.ochaopt.org/content/response-escalation-opt-situation-report-no-9-august-2021>
33. OCHA Situation Report #6, Response to the escalation in the oPt, 25 June-1 July 2021. <https://www.ochaopt.org/content/response-escalation-opt-situation-report-no-6-25-june-1-july-2021>
34. Children in Need figures are calculated according to the child protection model applied to the 2021 MSNA data, using the common indicators and severity scales adopted at country level.
35. Of which 80,000 in Gaza and 22,000 in the West Bank; Calculated per CP-AoR "[Guidance for MHPSS aspects of child protection in the HNO/HRP 2021](#)" and in line with IASC MHPSS pyramid
36. Calculated per CP-AoR "[Guidance for MHPSS aspects of child protection in the HNO/HRP 2021](#)" and in line with IASC MHPSS pyramid. The estimate figures for layer 4 are based on 3% of children and 5% caregivers.
37. The six grave violations as stipulated in Security Council Resolutions on children and armed conflict include killing and maiming of children, recruitment and use of children, sexual violence against children, abduction of children, attacks against schools and hospitals and denial of humanitarian access for children.
38. OCHA Protection of civilians database, accessed 15 Sept 2021.
39. "Escalation of Hostilities and Unrest in the oPt: Flash Appeal," OCHA, 27 May 2021
40. Statement by United Nations Humanitarian and Resident Coordinator in the Occupied Palestinian Territories, Lynn Hastings, 15 August 2021
41. "Israel/OPT: UN experts warn of rising levels of Israeli settler violence in a climate of impunity", 14 April 2021.
42. According to SAWA helpline calls reporting suicide attempts increased under COVID-19 (+42 cases, or 420%) mainly in Gaza, which on its own counted 33 cases of girls (NIAF 2021).
43. Impact of COVID-19 on the Psychosocial and Mental Well-being of Palestinian Adolescents, WHO and Juzoor, 2021.
44. During May, SAWA registered 1228 calls for counselling sessions, double the number compared to May 2020. Eighty-two per cent of all the calls were by Gazans who suffered from fear and anxiety caused by the ongoing bombardment.
45. Terre des Hommes rapid needs assessment, 2021.
46. 44Accessibility to Information and Services by People with Disabilities during COVID-19, EducAid Italy, 2020 October
47. Information on PSS needs in schools is highlighted under the chapter on education needs.
48. COVID-19 Protection Needs Identification and Analysis in the State of Palestine (NIAF),CHILD PROTECTION AREA OF RESPONSIBILITY, 2020, and Impact of COVID19 on Vulnerable Children and their Families in the Gaza Strip: Summary Report, Terre des Hommes, 2020.
49. Impact of COVID-19 on the Psychosocial and Mental Well-being of Palestinian Adolescents, WHO and Juzoor, 2021
50. These are among the key findings in: COVID-19 Protection Needs Identification and Analysis in the State of Palestine (NIAF),CHILD PROTECTION AREA OF RESPONSIBILITY, 2020.
51. Multi-Indicator Cluster Survey 2019-2020 (MICS), Palestine Central Bureau of Statistics, 2021, Chapter 9.2. The figure includes any form of physical discipline as well as psychological aggression.
52. MICS, 2021, Chapter 9.3.
53. MICS, 2021. 9.6 per cent of boys across the OPT are estimated to be involved in child labour as defined in the MICS, compared to 4.8 per cent of girls. Meanwhile, 8.7 per cent of boys are estimated to be working under hazardous conditions, compared to 1.4 per cent of girls.
54. <https://palestine.unfpa.org/en/gender-based-violence>
55. oPt Multi-sectoral Needs Assessment, 2021.
56. <https://palestine.unfpa.org/en/gender-based-violence>
57. SAWA Helpline Factsheet #25, May 2021
58. Women and Girls with Disabilities: Needs of Survivors of Gender-based Violence and Services offered to them, UNFPA 2019
59. PCBS (2019), [Preliminary results of the violence survey in the Palestinian Society](#).
60. However, serious methodological flaws in the PCBS survey have been identified which do not allow for a reliable comparison. Moreover, the survey does not include child, early and forced marriage as a form of GBV.
61. In the Arab region, on average, one in five women are married before the age of 18. See UNFPA (2019), State of the World Population. Furthermore, in nearly 10 per cent of marriages both spouses are under the age of 18 years old. See Report of the Special Rapporteur on violence against women, its causes and consequences, on her mission to the Occupied Palestinian Territory/State of Palestine, A/HRC/35/30/Add.2, 8 June 2017, para. 39
62. 15 per cent among women aged 20-24 in 2014 and approximately 11 per cent in 2017. See PCBS (2014), Palestinian Multiple Indicator Cluster Survey and PCBS (2017), The Population, Housing and Establishment Census.
63. Report of the Special Rapporteur on violence against women, its causes and consequences, on her mission to the Occupied Palestinian Territory/State of Palestine, A/HRC/35/30/Add.2, p. 9
64. Ibid.
65. ESCWA socio-economic situation Report 2019, p. 24.
66. <http://www.pcbs.gov.ps/Downloads/book2532.pdf>
67. Accessibility to Information and Services by People with Disabilities during COVID-19, EducAid Italy, October 2020.
68. [MoH COVID-19 epidemiological report](#)
69. [MoH 2020 Annual Report](#)
70. [WHO and Juzoor study on the impact of COVID-19 on Palestinian adolescents](#).

71. [UN Women Gender Alert 2021](#)
72. [Health Cluster Bulletin](#)
73. [Mobile clinics 4Ws](#)
74. [Surveillance System for Attacks on healthcare](#)
75. According to the official SDG indicator 2.1.2, as reported in the latest edition of the State of Food Security and Nutrition in the World (FAO, IFAD, UNICEF, WHO, and WFP, 2021) 26.3% of the population (or about 1.3 million people) has been food insecure over the 2018-20 triennium. More recent data from the latest Socio-Economic and Food Security Survey preliminary results (SEFSec - PCBS, FSS 2020) suggests that the SDG 2.1.2 indicator for 2020 increased to 34.5 per cent of the population being moderately or severely food insecure. Even more recent FIES estimates based on the data collected as part of the MSNA survey conducted in 2021, point to a percentage of 36.7 per cent of the population (or about two million people) being moderately or severely food insecure (of which 3.4 per cent would be in the SDG 'severe' category). The national average hides large differences, with a prevalence of 16.8 per cent in the West Bank, and 57.9 per cent in the Gaza Strip.
76. WFP, VAM food security analysis, June 2021, [Thousands of Palestinians face food insecurity amid escalating conflict](#).
77. https://www.pcbs.gov.ps/portals/_pcbs/PressRelease/Press_En_8-8-2021-LFS-en.pdf
78. Gaza Rapid Damage and Needs Assessment (RDNA), June 2021, p. 4. (<https://documents1.worldbank.org/curated/en/178021624889455367/pdf/Gaza-Rapid-Damage-and-Needs-Assessment.pdf>).
79. <https://www.worldbank.org/en/country/westbankandgaza/publication/the-gaza-2021-rapid-damage-and-needs-assessment-june-2021>
80. MoA draft damages report unpublished .
81. <https://www.ochaopt.org/data/demolition>
82. <http://www.fao.org/3/cb1340en/CB1340EN.pdf>
83. OCHA Multi Sectorial Needs Assessment 2021.
84. MoE Protection and Recovery Plan, 2021.
85. OCHA Multi Sectorial Needs Assessment 2021.
86. oPt Education Cluster, July 2021: Education Cluster Report on Damage in Educational Facilities in Gaza Strip
87. oPt Education Cluster, January 2021: Education Related Incident Report in oPt in 2020.
88. Gaza Community Mental Health Programme, 2020: Impact of Corona Virus on Mental Health in Gaza.
89. OCHA Multi Sectorial Needs Assessment 2021.
90. Education Cluster report, Schools under Threat of Demolition 2020.
91. These households reported that traveling to or studying in education facilities was either unsafe or very unsafe. Road crossing may have been interpreted in the West Bank as crossing of checkpoints.
92. Ir Amim, 2020: The State of Education In East Jerusalem: Discrimination in the Backdrop of COVID-19. https://www.ir-amim.org.il/sites/default/files/Education%20in%20EJ%20Report%202020_Discrimination%20Against%20the%20Backdrop%20of%20COVID19%20sep2020.pdf
93. UNDP, 2020 :East Jerusalem schools survey.
94. Education Cannot Wait, 2019: Baseline Needs Assessment and MEAL Baseline for the Education Cannot Wait (ECW) Multi-Year Resilience Program (MYRP) for the State of Palestine.
95. In May 2017, the Israeli Cabinet approved the implementation of a five-year plan providing East Jerusalem schools with incentives to make such a shift.
96. PCBS Press Release, 2018: Persons with Disabilities in Palestine.
97. Latest available data, UNICEF State of Palestine, 2018: Out of School Children.
98. ESCWA (2019): Social and Economic Situation of Palestinian Women and Girls (July 2016 – June 2018), p. 17.
99. [WASH Cluster, Gaza WASH sector damage assessment 2021](#).
100. [Palestinian Central Bureau of Statistics. 2021. Palestinian Water Authority, 2019. Water Information System](#).
101. Palestinian Central Bureau of Statistics, 2021, MICS assessment.
102. WASH Cluster, WASH vulnerability Mapping 2021.
103. Palestinian Central Bureau of Statistics, 2021, MICS assessment.
104. WASH Cluster, WASH in institutions assessment survey 2021.
105. Gaza early warning indicators 2021.
106. Palestinian Environmental Quality Authority (EQA), Gaza shore water quality monitoring map, June 2021.
107. WASH Cluster, WASH vulnerability Mapping 2021.
108. MSNA assessment survey 2021.
109. Demolition and displacement in the West Bank database, oPt OCHA Dashboards. (<https://www.ochaopt.org/data/demolition>)
110. Water Sector Regularity Council 2021.
111. MSNA assessment survey 2021.
112. Ibid.
113. WASH Cluster, WASH in institutions assessment survey 2021.
114. <http://www.mpwh.ps/article/read/518>
115. For more information about inadequate shelter, See: <https://www.sheltercluster.org/palestine/documents/shelter-minimum-standards-repairs-and-upgradesenar-guidance-gaza>
116. Substandard shelter assessment conducted by MOPWH, announced in Jan. 2020 <http://www.mpwh.ps/article/read/518>, and data analysis by Shelter Cluster in March 2020, https://www.sheltercluster.org/sites/default/files/docs/mopwh_substandard_survey_analysis_june_2020.pdf
117. https://www.btselem.org/settlements/20140910_declaration_of_state_land_in_bethlehem_area
118. Demolition tracker, <https://www.ochaopt.org/data/demolition>
119. <https://www.ochaopt.org/page/demolition-orders-against-palestinian-structures-area-c-israeli-civil-administration-data>
120. [West Bank Protection Consortium Assessment updated in February 2021 for 160 communities in Area C](#).



www.ochaopt.org



www.humanitarianresponse.info



[@OCHAoPt](https://twitter.com/OCHAoPt)