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In June, UNICEF installed 26 high-performance tents in Central and Southern Gaza, enabling 4,680 more children to access regular learning in safe and supportive environments through rotational shifts.

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Humanitarian Situation Report No. 40

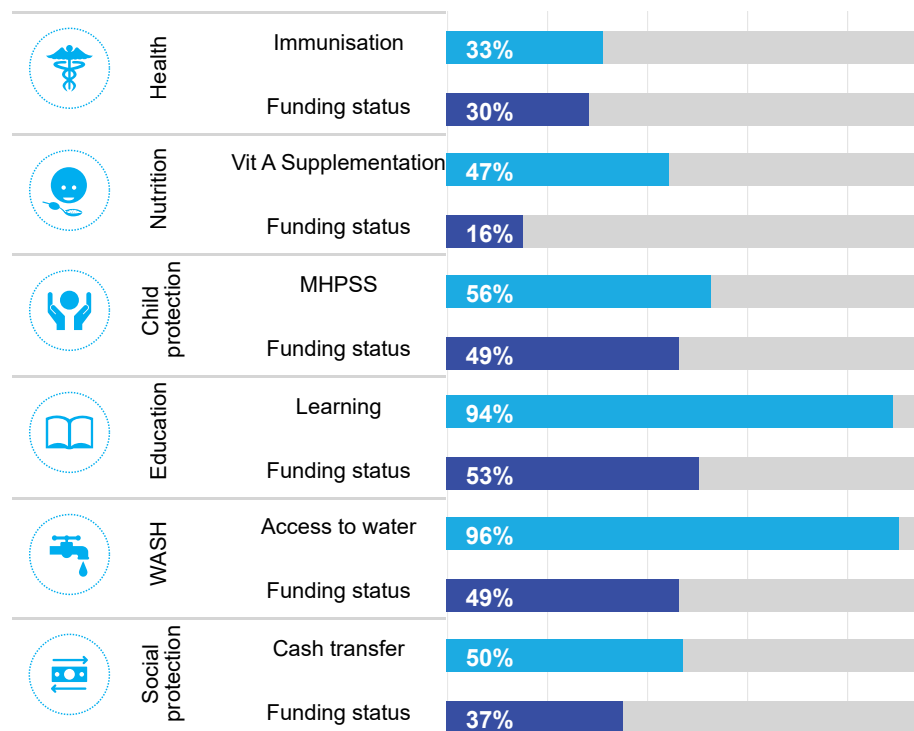
Reporting Period
1 January to 30 June
2025

State of Palestine

HIGHLIGHTS¹

- Malnutrition rates in Gaza have risen since hostilities resumed in March and an 11-week blockade halted both humanitarian aid and commercial access, demonstrating the life-saving impact of sustained aid delivery.
- With 95 per cent of schools damaged or destroyed, 658,000 children have been out of school for nearly two years, marking one of the most severe education crises.
- In Gaza, only 2,000 hospital beds remain for over 2 million people, while the West Bank has recorded 739 attacks on healthcare facilities.
- Food prices in Gaza are 150–700 per cent higher than pre-conflict levels, with essential items largely unavailable.
- Child fatalities in the West Bank have increased by 180 per cent since October 2023 with 170 children killed, the highest number in decades.
- UNICEF requires US\$ 463.8 million to meet urgent humanitarian needs but is only 35 per cent funded, leaving a critical 65 per cent gap as conditions deteriorate.

UNICEF RESPONSE AND FUNDING STATUS*



SITUATION IN NUMBERS



1,700,000
Children in need of humanitarian assistance²



3,300,000
People in need of humanitarian assistance³

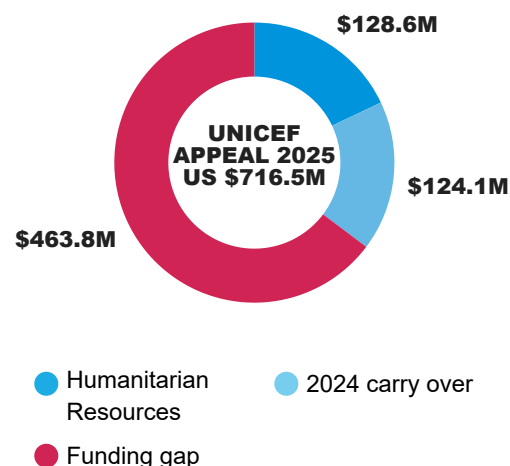


1,939,232
People displaced (Gaza Strip & West Bank)⁴



588
School buildings affected (Gaza Strip & West Bank)⁵

FUNDING STATUS (IN US\$)**



** Funding available includes: funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors

* UNICEF response % is only for the indicator, the funding status is for the entire sector.

FUNDING OVERVIEW AND PARTNERSHIPS

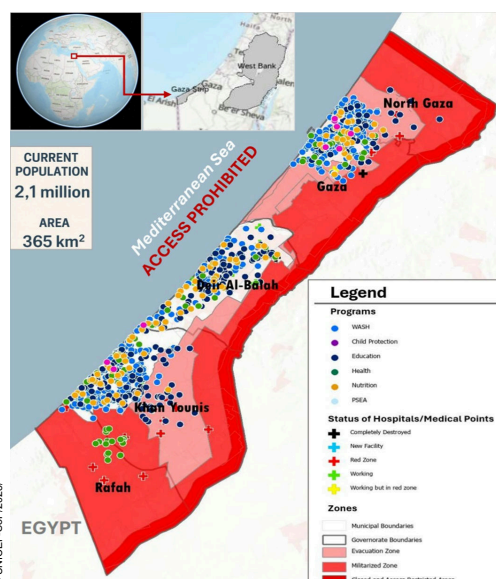
An Inter-Agency Flash Appeal⁶ was issued on 11 December 2024 and outlined the need for US\$ 4 billion⁷ to assist 3 million people, 2.1 million in the Gaza Strip and 900,000 in the West Bank including East Jerusalem, through December 2025.⁸ Aligned with this appeal, UNICEF's Humanitarian Action for Children (HAC) appeal⁹ seeks US\$ 716.5 million to meet the urgent needs of children and their families. As of now, only 35 per cent of the appeal is funded. UNICEF urgently requires an additional US\$ 463.8 million to scale up life-saving assistance.

Flexible funding enables UNICEF to adapt to the evolving realities on the ground to respond promptly and more effectively to prioritise life-saving assistance to children and their families where it is most needed. Without adequate funding, children are at a greater risk of malnutrition, at risk of not being reunified with their families, and at risk of not being able to access essential services, including safe water and health care.

UNICEF benefited from the Global Humanitarian Thematic Funding from Denmark, Germany, the Netherlands, Sweden and UNICEF national committees, which enabled UNICEF to respond with agility to the acute and fast-evolving needs of the most vulnerable children and their families.

UNICEF sincerely thanks its partners for their valuable and timely contributions, including the governments of Australia, Canada, Croatia, Denmark, Japan, Kuwait, Malta, New Zealand, Republic of Korea, Saudi Arabia, Sweden, the United Kingdom, as well as the European Union, European Civil Protection and Humanitarian Aid Operations (ECHO), Gavi – the Vaccine Alliance, and the OCHA Country-based Pooled Fund. Through UNICEF National Committees, UNICEF is grateful for the assistance provided by the peoples of Australia, Austria, Belgium, Canada, Denmark, Finland, France, Germany, Hungary, Iceland, Ireland, Italy, Japan, Luxembourg, the Netherlands, New Zealand, Poland, Portugal, the Republic of Korea, Slovenia, Spain, Sweden, Switzerland, Türkiye, the United Kingdom and the United States. UNICEF would also like to thank UNICEF private sector fundraising efforts in Algeria, Argentina, Bahrain, Belarus, Chile, Croatia, Egypt, Greece, Jordan, Kazakhstan, Kuwait, Malaysia, Morocco, Philippines, Oman, Qatar, Saudi Arabia, Singapore, Thailand, United Arab Emirates and UNICEF Goodwill Ambassador Tetsuko Kuroyanagi.¹⁰

SITUATION OVERVIEW AND HUMANITARIAN NEEDS¹¹



UNICEF response across the Gaza Strip as of June 2025, in the areas of WASH (blue dots), Child Protection (purple), Education (dark blue), Health (green), Nutrition (orange), and PSEA (light blue).

Gaza Strip

Over the past six months, humanitarian conditions in the Gaza Strip have fluctuated dramatically, shaped by the implementation and subsequent breakdown of the ceasefire agreement. Following the dire conditions in December 2024, a temporary respite was observed during the January-March ceasefire. However, conditions deteriorated significantly after hostilities resumed and intensified from 18 March onward. Market conditions deteriorated catastrophically after hostilities resumed in March. Food prices rose by 150 to 700 per cent compared to pre-conflict levels.¹²

The situation has markedly worsened since the resumption of hostilities. Child protection workers have been forced to operate on foot due to fuel shortages, delaying urgent missions and placing unaccompanied, separated and other vulnerable children at heightened risk. At least 17,000 children are estimated to be separated from their families or unaccompanied. Between March and June 2025, child fatalities and injuries have drastically increased, with nearly all of Gaza's 1.1 million children now in need of mental health and psychosocial support. Since January 2025, 107 aid workers were reported killed, bringing the total to 479 since October 2023.

As of 11 June, at least 734 attacks on health facilities have been recorded, affecting 125 health facilities, including damage to 34 hospitals and 188 ambulances.¹³ Fuel shortages forced many to operate on limited shifts, severely restricting emergency and overnight care. Strikes, medical supply shortages, and staff gaps continue to push the system toward collapse.

Malnutrition rates fluctuated significantly during this period. During the January–March ceasefire, child acute malnutrition fell to 2.7 per cent in February, down from 17 per cent in late 2024, and a real risk of famine remains.¹⁴ During the brief ceasefire, child acute malnutrition rates dropped to 2.7 per cent in February 2025 from peaks of 17 per cent in late 2024. However, following the siege and renewed hostilities in March, rates began rising again. Between January and June 2025, at least 19,089 children aged 6 to 59 months were admitted for treatment of acute malnutrition – an average of over 100 children per day. At least 66 children have died from malnutrition-related causes since October 2023.¹⁵

In the first half of 2025, the healthcare sector in Gaza saw a

devastating increase in attacks and displacements, and a shrinking space for the delivery of lifesaving healthcare. By the end of June, none of the 38 hospitals in Gaza were fully operational, with 22 (58 per cent) out of 38 no longer operational. Bed capacity was reduced from 3,500 to 1,685, a 53 per cent reduction, and newborn bed capacity was at 50 per cent, denying an estimated 2,500 infants critical newborn care.

Of the 157 primary healthcare facilities, 61 per cent (96 facilities) were non-operational due to damage, displacement, or lack of fuel. None of the 61 functioning facilities could provide full services due to severe shortages, with a 53 per cent deficit in medications and 65 per cent zero-stock rate for medical consumables. A total of 4,700 amputations were recorded, with children accounting for over a third of cases, while 18,500 injuries require rehabilitation and long-term treatment, including 4,370 that require assistive and supportive devices. Of 15,087 patients requiring medical evacuation, only 2,423 were approved in the first half of 2025.

Availability and distribution of safe drinking water has been significantly impacted due to fuel shortages, lack of spare parts, insecurity, and inaccessibility of WASH facilities. Over 75 per cent of households reported declining access to water over the past month, with per capita water availability below half the minimum humanitarian standard of 15 litres per person per day. More than 85 per cent of water and sanitation facilities and assets have been completely or partially out of service.¹⁶

The fourth round of the polio vaccination campaign was suspended due to lack of approval for vaccine delivery. In parallel, routine immunisation efforts were disrupted by stockouts of the rotavirus, diphtheria-tetanus (DT), and diphtheria-tetanus-pertussis (DTP) vaccines, leaving an estimated 100,000 children completely or partially deprived of essential childhood vaccinations.

The education system remains entirely non-functional. Over 95 per cent of school buildings have been damaged, with 88.8 per cent requiring full reconstruction or major repairs. Around 658,000 school-aged children remain without access to formal education. The resumption of hostilities on 18 March halted all efforts to resume learning during the brief ceasefire.

As of 30 June, over 56,600 Palestinians, including at least 17,121 children and 10,328 women, have been reported killed. As many as 6,315 fatalities, including at least 1,564 children, were recorded since the ceasefire ended on 18 March 2025. Additionally, more than 134,105 Palestinians were reported injured, including more than 40,231 children, many of whom have life-changing injuries.¹⁷ Humanitarian workers also continue to face deadly risks, with 479 reported fatalities.¹⁸

During June, the “Gaza Humanitarian Foundation” (GHF) distributed food at four sites in the central and southern Gaza Strip. Insecurity at the sites, which are located in areas under displacement orders, and along access routes led to at least 400 reported fatalities and thousands of injuries among people seeking aid, with dozens of children among those killed.

West Bank including East Jerusalem

The humanitarian situation in the West Bank deteriorated significantly in the first half of 2025, particularly after the launch of Operation Iron Wall on 21 January. Intensified military operations, increased settler violence, and forced displacement have sharply escalated risks to Palestinians, especially children. Since 7 October 2023, more than 6,600 Palestinians, including nearly 2,850 children, have been displaced due to home demolitions by military operations, in addition to 32,608 individuals displaced by Operation Iron Wall, including 14,241 children.

Child rights and child protection risks have intensified dramatically.

Between 7 October 2023 and 30 June 2025, 213 children were killed in conflict-related incidents compared with 78 in the 21 months preceding – an increase of 173 per cent. According to OCHA, in the first six months of 2025, at least 148 Palestinians were reported killed by Israeli forces. Israeli settlers injured 350 Palestinians (including at least 22 children)¹⁹ in the first half of 2025, with an average of four settler violence incidents recorded per day. Over 200 students are at risk of losing access to education following community displacements and school demolition orders.²⁰

Children across the West Bank, including East Jerusalem, remain at high risk of grave violations and threats to their physical and mental well-being due to militarised operations, movement restrictions, and settler violence. Between January and June 2025, 31 Palestinian children were killed – 74 per cent by live ammunition and 23 per cent in airstrikes – mostly in Jenin, Nablus, and Tubas. One Palestinian child also died in Israeli detention. From 7 October 2023 to 30 June 2025, more than 950 Palestinians were killed.²¹ In the same period, 213 Palestinian and 3 Israeli children were killed in conflict-related incidents in the West Bank. Over 1,630 Palestinian children were injured, 46 per cent by live ammunition.

From January 2024 to May 2025, OCHA documented more than 2,074 settler attacks against Palestinians, particularly near settlement outposts.²² Of the 849 movement obstacles established by Israeli forces, one-third are road gates – often closed – limiting access to health, education, and livelihoods. These restrictions are frequently imposed without warning and intensify following security incidents.²³

The West Bank is facing growing food insecurity driven by economic hardship and access restrictions. Weakened purchasing power has undermined households’ ability to maintain adequate nutrition.²⁴ Agricultural and herding communities were particularly impacted by movement restrictions, settler violence, and demolitions.

The health crisis has worsened since January 2025, with escalating violence and stricter movement restrictions impeding access to healthcare. Between 7 October 2023 and 28 June 2025, 844 attacks on healthcare were reported, affecting 65 facilities, 24 mobile clinics, and 554 ambulances and resulting in 31 fatalities and 168 injuries. Nearly half of health attacks involve the use of force against medical facilities, personnel, or vehicles. Only 11 per cent of primary healthcare centres and 70 per cent of hospitals with inpatient capacity are fully functional.

WASH services have been severely disrupted by ongoing militarized operations. Systematic demolitions have targeted water and sanitation infrastructure, with nearly one in five structures demolished in the Jordan Valley being water and sanitation facilities.

Education has been severely disrupted for students in nearly 100 schools, with teachers and students unable to attend classes safely. Since 21 January 2025, ongoing violence has forced the closure of 13 UNRWA schools in the northern West Bank, preventing more than 5,000 children from attending classes. On 8 May, Israeli forces enforced a closure of six UNRWA schools in East Jerusalem, forcing over 550 children out of their schools.

Reported Casualties and Abductions in Israel

Israeli authorities report that some 1,200 Israelis and foreign nationals were killed in the attacks of 7 October 2023, including 37 children and more than 7,500 people were reported injured. More than 250 people, including 36 children, were abducted from Israel into the Gaza Strip, of whom 202 were released or returned, including 34 children released in 2023 and two children whose remains were returned in February 2025.

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

Health

Gaza Strip

Against the backdrop of a highly challenging situation of available health services and supplies, UNICEF and its partners have done everything possible during the first six months of 2025 to ensure uninterrupted healthcare delivery support. UNICEF expanded partnerships and increased health facilities and medical points by 18, operationalised two newborn care intensive units (NICUs), increased mobile teams from 7 to 10, installed solar direct drive refrigerators and solar panels on 97 per cent of all immunisation-providing facilities and delivered essential medical supplies to target facilities.

During the reporting period, 298,205 children (118,246 girls, 124,083 boys) and women (55,878) accessed primary health care in UNICEF-supported facilities, while 18,922 children (9,133 girls and 9,789 boys) benefited from integrated management of childhood illnesses services at the community level.

With the increased number of disabled children, 44 girls and 42 boys were assessed and provided with specialized medical care. A total of 2,487 newborns (1,134 girls and 1,353 boys) were admitted to UNICEF-supported newborn care units. For maternal health, 11,157 pregnant women attended antenatal care, and 2,001 mothers received postnatal care within two days of childbirth. As many as 482 girls and 272 boys with disabilities were provided with rehabilitation sessions. To ensure quality care, 285 frontline healthcare workers (172 men and 113 women) received training on health responses. UNICEF will continue to focus on strengthening routine immunisation, supporting PHCs, expanding mobile teams as needed, ensuring the functioning of neonatal intensive care units and initiating support of paediatric intensive care units, supporting and expanding rehabilitation services, along with extensive supply support.

West Bank including East Jerusalem

During the first six months of 2025, UNICEF continued supporting the Ministry of Health in the West Bank with urgent emergency medical consumables and supplies, based on the needs of the MoH. The medical consumables included disposables, medical consumables, Newborn Kits, Acute Watery Diarrhoea (AWD), and Interagency Emergency Health Kit (IEHK), were delivered to MoH main warehouse in Nablus. The MoH has then been dispatching to the peripheral facilities based on the needs of the Primary Health Care clinics and hospitals, mainly in nine areas in the West Bank, including East Jerusalem, Ramallah, Jenin, Tulkarem, Nablus, Hebron, Tubas, Salfit, and Jericho.

As of the end of June, a total of 278,610 people, including newborns, children under 5 and women, benefited from the delivered supplies across the West Bank's nine governorates, where over 14 primary health care directorate facilities and seven hospitals were reached with these supplies.

Moreover, UNICEF supported the delivery of essential routine vaccines and immunisation devices to the MoH to ensure the continuity of immunisation services for children up to five years old. A total of six vaccine shipments – including pentavalent (PENTA), tetanus-diphtheria (Td), diphtheria-tetanus-pertussis (DTP), inactivated poliovirus (IPV), bivalent oral poliovirus (bOPV), and hepatitis B vaccines – were delivered to the Ministry of Health (MoH). These are expected to benefit no fewer than 90,000 infants.

As part of strengthening the emergency preparedness at Primary

Health Care (PHC) clinics, UNICEF, in coordination with the Ministry of Health, assessed 30 clinics in North, Central and South of the West Bank, in terms of their readiness to respond to emergencies, quality of services provided and needs. Each facility was visited and assessed through a detailed evaluation process based on specific selection criteria and scoring to identify and prioritise facilities most in need of intervention. As a result, eight clinics were selected as priority sites for upcoming rehabilitation. These planned upgrades aim at improving the physical conditions and service readiness of the targeted clinics, ultimately contributing to enhanced access and quality services for children and caregivers once implemented.

In parallel, UNICEF supported the delivery of two Oxygen Plants to two hospitals in the West Bank; the Turkish hospital in Tubas and Al Muhtaseb Hospital in Hebron, to ensure a sustainable supply of medical oxygen and enhance these hospitals' ability to respond to emergencies and provide continuous care for patients with critical conditions. Additionally, UNICEF supported 585 community members and healthcare providers (70 per cent male, 30 per cent female) from 30 different communities within the West Bank, who were trained on preparedness and response to earthquakes, outbreaks, and emergency response through the Palestinian Civil Defence and a local NGO partner.

Furthermore, UNICEF continues to support the introduction of 3D technology for the printing of prosthetics for children. The program plans to invest in training programs to equip staff with the technical expertise and knowledge required to operate the Prosthetics Program effectively. UNICEF is supporting the partner in providing affordable and accessible comprehensive community-based rehabilitation services that include rehabilitation sessions, assistive devices, assistive technology, prosthetics and orthotics and medical consumables for children with disabilities within the West Bank and Gaza. To date, in the West Bank, some 268 children with delayed development and disabilities have been identified, reached and intervened with.

Nutrition

Gaza Strip

In the first half of 2025, 506,509 screenings (253,931 girls and 252,578 boys) for acute malnutrition were conducted among children aged 6–59 months. As part of the early detection and treatment of malnutrition, screenings are conducted routinely. A total of 16,817 cases of children (9,902 girls and 6,915 boys) with moderate acute malnutrition and 2,607 cases of children (1,489 girls and 1,118 boys) with severe acute malnutrition were treated in UNICEF-supported health facilities and nutrition sites. UNICEF has observed a higher prevalence of acute malnutrition among girls compared to boys, with a concerning ratio of nearly 1.5 girls affected for every boy. A further assessment is planned to verify this trend and identify any underlying gender-related factors. Additionally, of the 1,015 screenings conducted among children less than 6 months, 94 cases were identified as having a risk of poor growth and development and admitted for inpatient care. Furthermore, 147,387 screenings were conducted among Pregnant Breastfeeding Women (PBW), and a total of 1,192 cases of PBW were enrolled in nutrition programmes. Cases of wasting, both moderate and severe, have increased each month since the blockade of humanitarian aid began in March. Food access and diversity are at a record low since the conflict began.

UNICEF and the Nutrition Cluster supported the establishment of 323 nutrition service delivery points across Gaza. As of the latest update, 170 sites remain fully operational, while 102 are temporarily non-operational due to security constraints, and 51 have been permanently closed due to population displacement. To ensure continued access to life-saving nutrition services, UNICEF deployed nine mobile teams, providing critical support to vulnerable

populations in hard-to-reach locations in Gaza.

UNICEF worked closely with the MoH, the Cluster, and its partners to prepare for a SMART survey during the ceasefire period. However, the collapse of the ceasefire and unresolved issues related to estimating local population catchment areas prevented safe implementation. Discussions have since resumed in anticipation of a renewed ceasefire.

UNICEF provided training for 330 health workers on the Community-based Management of Acute Malnutrition (CMAM), orientation for 313 community health workers on CMAM, and conducted training for 337 health workers and volunteers on collecting anthropometric measurements. Conducting training remains difficult due to insecurity and the requirement for face-to-face modality during training.

A total of 15,564 pregnant and breastfeeding mothers and caregivers of children <24 months were reached with individual counselling, and 2,587 children (1,335 girls and 1,252 boys) less than 6 months of age were enrolled and provided with Ready to Use Infant Formula (RUIF),²⁵ in line with the Breast Milk Substitutes (BMS) guidelines of the State of Palestine, following counselling. As many as 183 health workers were trained on Infant and Young Child Feeding (IYCF). Ongoing displacement continues to hinder access to antenatal (ANC) and postnatal (PNC) care services. As a malnutrition prevention measure, a total of 110,684 sets of jars of Ready to Use Complementary Food (RUCF), equivalent to 332,052 jars, sufficient to cover 1,845 children 6-23 months of age for 2 months, were distributed. With more than 75 per cent of children only eating food from less than two food groups, RUCF has become a lifeline for children in the Gaza Strip. Additionally, 2,763,000 sachets of Lipid-based Nutrition Supplements – Small Quantity (LNS SQ), enough to provide supplementation for 92,100 children for a month, and 20,131 children 6-59 months received packets of fortified high energy biscuits. Similarly, 9,144 sachets of LNS-SQ, enough to supplement 305 pregnant and breastfeeding women for 1 month, and 65,988 packets of fortified biscuits, sufficient for 1,100 pregnant and breastfeeding women for a month were also distributed.

A total of 91,784 children 6-59 months (44,931 girls and 46,853 boys) were provided with vitamin A supplementation. Additionally, 43,112 pregnant and breastfeeding women received micronutrient supplement including Multiple Micronutrient Supplement (9,721 PBW) and Iron folic acid (33,391 PBW).

Three UNICEF field monitors conducted 851 monitoring visits to different health facilities. Supporting supervision and on-the-job training were provided during these monitoring visits.

West Bank including East Jerusalem

UNICEF supported MoH in conducting a Vitamin A awareness campaign targeting 89 health professionals and community workers to increase vitamin A intake among children under five in the West Bank. In addition, with UNICEF support, 44,425 children in the West Bank were reached with vitamin A capsules in March and April before the in-country stockout.

UNICEF enrolled 10 schools as part of phase 3 of the Nutrition Friendly School Initiative (NFSI), benefitting 2,656 school-age children (721 boys and 1,935 girls), including 59 children under the age of 6 years from three schools, and 153 teachers. This initiative aims to utilise the school environment to improve nutrition and healthy habits among school-age children and adolescents. Launched in partnership with the Ministries of Education and Higher Education (MoEHE) and the Ministry of Health (MoH), the initiative embeds nutrition education, regular screenings, healthy food policies, and physical activity into both curricula and school culture. NFSI addresses both undernutrition (such as anaemia) and rising obesity, reflecting a proactive approach to the double burden of malnutrition.

An Infant Young Child Feeding in Emergency (IYCF-E) training was conducted with the support of UNICEF, aiming to refresh the approaches, policies, interventions and treatment. The training took place online, with the attendance of 88 participants (89 per cent females, 11 per cent males), from MoH, UNRWA, and other NGOs and INGOs in the West Bank. The participants were from all 11 governorates within the West Bank.

UNICEF compiled, cleaned, and analysed data from the MoH-operated nutrition surveillance system, which tracks the nutritional status of children between the ages of 12 and 15 months, at the MoH Directorate level. The analysis revealed that, although the acute malnutrition levels are low, it is slightly deteriorating compared to the 2024 levels. Jericho Directorate is worst affected by acute malnutrition, with 4 per cent of children between 12-15 months acutely malnourished, followed by North Hebron Directorate (2.2 per cent). Stunting prevalence is the highest in Hebron Directorate (23.9 per cent), followed by Yatta Directorate (16.8 per cent) among children 12-15 months. UNICEF is working closely with the Ministry of Health and key partners to design and operationalize appropriate nutrition interventions, in response the emerging needs identified through surveillance. This includes plans to establish or strengthen community-based management of acute malnutrition (CMAM) services, building local capacity and ensuring that technical guidance is in place to support prevention, early detection and treatment of wasting.

Water, Sanitation and Hygiene (WASH)

Gaza Strip

In the first half of 2025, UNICEF and its partners continued delivering life-saving WASH services across the Gaza Strip, despite severe operational constraints, including damaged infrastructure,²⁶ fuel shortages, and restricted humanitarian access. Working with the Palestinian Water Authority and Coastal Municipal Water Utility, UNICEF ensured access to safe water for over 1.5 million people, including more than 600,000 children.²⁷ This included the provision of six litres of potable water and nine litres of domestic water per person per day, in an effort to meet the bare minimum humanitarian standards.²⁸ These efforts were supported through water trucking, construction of filling points, and operation and rehabilitation of desalination plants and wells. A total of 15 private desalination plants were contracted to supply subsidised potable water to UNICEF and 21 other WASH Cluster partners, which was distributed free of charge to approximately 400,000 displaced people and returnees. To sustain critical operations, UNICEF provided over 3 million litres of fuel through the UN mechanism²⁹ to support water trucking, desalination plants, and municipal wells. It should be noted though that this quantity is dramatically insufficient to the amount that is required.³⁰ In addition, UNICEF distributed chlorine and anti-scalant chemicals to maintain water safety.

However, the water supply situation remained precarious. The Mekorot pipeline supplying north Gaza from Israel has had repeated damages and repairs, frequently being out of service for more than 10 days. When Mekorot north is not functioning, potable water availability plummets to 2-3 litres per person per day. The Mekorot water pipeline supplying central Gaza has been out of service since mid-February, with requests for repairs repeatedly denied, making central Gaza completely dependent for its potable water on the desalination plants in middle and south Gaza. These plants however had to reduce production significantly since March 2025, when the power supply to the Southern Gaza Desalination Plant (SGDP) was cut, and fuel for generators did not enter Gaza anymore and had to be rationed. The SGDP reduced production from 18,000 cubic meter per day to only 1,000 – 2,000 cubic meter per day, and potable water availability in the central and southern areas decreased by 65 per

cent. Also, the bulk of the water available is from brackish groundwater wells, and unsuitable for drinking.³¹ Disparities in access persisted, particularly in newly accessible areas such as Jabalya, Beit Hanoun, and Rafah, where water availability barely met minimum humanitarian standards.

In parallel, UNICEF maintained essential sanitation and hygiene services. These included the rehabilitation of wastewater networks and pumping stations in Nuseirat, Deir Al Balah, Gaza city, and Khan Younis, the construction of mobile latrines, and the provision of solid waste primary collection and disposal services in 17 municipalities, engaging more than 1,000 workers. Hygiene promotion and cleaning services were carried out in 48 Palestinian Authority shelters in Gaza City and Khan Younis, reaching over 40,000 internally displaced persons, including 20,000 children. In Khan Younis, after IDPs left the camps during the cease fire, 2,200 family latrines were decommissioned to prevent environmental contamination. Despite the closure of border crossings and the resulting supply chain disruptions since March, UNICEF distributed over 2.1 million WASH items between January and May. These included hygiene kits, more than 1.5 million soap bars, sanitary pads, jerrycans, tarpaulins, and adult diapers.

UNICEF also worked closely with the Education and Health programmes to ensure that WASH support was integrated in these programmes. Joint assessments were conducted in 60 schools and Temporary Learning Spaces (TLSs), with rehabilitation initiated in 20 schools and 12 TLSs. WASH improvements were also carried out in 15 TLSs and 14 health centres, benefiting over 300,000 people, including patients and medical staff. On 28 May, UNICEF and partners marked Menstrual Hygiene Day with awareness sessions for women and girls, consultations with men in TLSs, health centres, and shelters, and the distribution of sanitary pads, soap, and jerrycans. Information, education, and communication materials, social media cards, and videos were also widely disseminated.

Community engagement and capacity building were central to UNICEF's approach. In 25 shelters across Gaza and Khan Younis, 216 cleaners and hygiene promoters were engaged through cash-incentivised work, benefiting 3,466 families, or 17,838 individuals. Additionally, 150 workers involved in water trucking and WASH service delivery were trained on the Prevention of Sexual Exploitation and Abuse (PSEA) and safeguarding. More than 20,000 Information, Education, and Communication (IEC) materials were distributed to raise awareness about hygiene practices, waterborne and skin diseases, and the safe use of water and sanitation facilities.

Nevertheless, the WASH response faced significant challenges. Damage to critical infrastructure, including the Mekorot water pipeline and desalination plants, and lack of spare parts, electricity, fuel and chemicals continued to hinder water production. Fuel and chemical shortages threatened the sustainability of safe water provision, with chlorine stocks projected to run out by mid-August. Restricted humanitarian access further limited the entry of essential WASH supplies, and disparities in service delivery remained, particularly in newly accessible and underserved areas.

West Bank including East Jerusalem

During the first six months of 2025, UNICEF continued to enhance access to safe drinking water and improve water infrastructure for vulnerable communities across the West Bank. Since January 2025, UNICEF has distributed a total of 48,000 litres of chlorine, benefiting an estimated 496,000 people. To strengthen the emergency water supply, UNICEF provided the Palestinian Water Authority with one 10 m³ tanker truck and five 4 m³ tanker trucks, benefiting over 200,000 people during emergencies and seasonal shortages.

Water supply and distribution of essential hygiene supplies through UNICEF with partners continued. In Tubas, water trucking continued,

delivering around 2,624 m³ of water to over 400 people in need with approximately 80 litres per person per day. In Jenin, Tulkarem and Nur Shams camps 1,550 family hygiene kits were provided to affected families, benefitting 7,750 people, including 3,177 Children. In Jenin Eastern neighbourhood and Al Far'a Camp in Tubas, 186 polyethylene (PE) tanks were distributed, benefiting 930 people. The programme provided maintenance tool kits and spare parts to Tulkarem WASH service providers and Far'a refugee camp in Tubas as part of the emergency response. The kits included strong plastic (high-density polyethylene) pipes, as well as steel pipes, along with valves and connectors, to help repair and maintain the water systems.

In the An-Najada area of South Hebron (Masafer Yatta), UNICEF, through implementing partners, supported the construction of new water supply networks totalling 6 km of pipe, aiming to serve approximately 556 people. Emergency infrastructure rehabilitation work commenced on a 12-inch water pipeline in Tulkarem, expected to serve approximately 17,000 people, and on the rehabilitation and expansion of the wastewater network in Jenin, set to benefit around 15,000 people, including seven schools and public facilities. Both projects are scheduled for completion by August 2025.

Child Protection

Gaza Strip

In the first half of 2025, UNICEF and its partners worked tirelessly, and across sectors, to identify, protect and find solutions for war-affected and forcibly displaced children and caregivers amid renewed hostilities, mass population movements and the further deterioration of the protection environment in the Gaza Strip. UNICEF provided 4,794 at-risk children (2,263 girls) with individual case management, promoting access to critical and lifesaving social services and assistance to include emergency cash and NFIs, assistive devices, shelter, civil documentation, family tracing and reunification, family-based alternative care, nutritional support and medical care.

To promote the mental health and well-being of children and caregivers, UNICEF provided multi-layered support to include mobile family and community-based supports to help children manage stress and anxiety, build social connections and promote positive coping skills, and where possible, structured and focused psychosocial support interventions to include individual and group counselling. UNICEF reached 122,860 children (69,878 girls) and 39,689 caregivers (30,024 women) with community-based mental health and psychosocial support.

To prevent and respond to emerging protection risks facing children, 21,166 children (10,749 girls) and 443,741 caregivers (229,983 women) were supported with messaging and awareness-raising activities to address emerging protection risks, including family separation, as well as promote child mental health and psychosocial well-being. An additional 91,636 children (47,161 girls) and 460,551 caregivers (234,946 women)³² were reached with messaging and community engagement activities aimed at reducing the risk of child injury or death from unexploded ordnances (UXOs) and explosive remnants of war (ERWs).

West Bank including East Jerusalem

Between January and June 2025, UNICEF and its partners reached 42,987 individuals in the West Bank with child protection services, including 24,483 children (10,800 boys and 13,683 girls) and 18,504 adults (7,586 men and 10,918 women). Of these, 60 per cent of those reached were from the most vulnerable communities in Nablus, Jenin, Qalqiliya, Tubas and Tulkarem governorates.

Mental health and psychosocial support (MHPSS) remained a core component of the response, reaching 31,694 people, including

17,724 children (7,803 boys and 9,921 girls) and 14,139 adults (6,640 men and 7,499 women). Individual case management services were provided to 586 children (298 boys and 288 girls), ensuring tailored support for those at risk. Legal support services were extended to 547 children in the West Bank, including East Jerusalem.

To strengthen community-based prevention 1,831 individuals, 912 children (591 girls) and 919 caregivers, participated in child protection awareness-raising activities. Moreover, during the reporting period, the need for Explosive Ordnance Risk Education (EORE) increased significantly due to a rise in militarised operations by Israeli forces, clashes, and the heightened risk of Improvised Explosive Devices (IEDs). The increased military training activities in Palestinian civilian areas have further exacerbated this risk. In response, UNICEF reached 25,571 individuals, including 19,920 children and 5,651 caregivers, with EORE awareness-raising sessions. Education materials, such as leaflets and interactive games, were distributed during psychological first aid (PFA) activities and group sessions conducted in the affected areas, particularly areas designated as firing zone areas in the Northern West Bank as well as in camps, border areas such as the Jordan Valley, and training areas for Israeli forces as in the case of some communities located in Southern areas of the West Bank.

Education

Gaza Strip

Over the last six months, the provision of regular teaching and learning has continued to be extremely challenging in the Gaza Strip. At the start of the year, UNICEF supported 153 centres that enrolled 99,379 children (50 per cent girls) with teaching and learning activities at least three times a week. The relative stability that came with the ceasefire allowed UNICEF to assess 96 sites in all seven governorates of the Gaza Strip, with the focal points from the Ministry of Education and Higher Education, and templates were prepared to allow engineers to assess for light rehabilitation. Concurrently, population movement led to the closure of 23 per cent of learning centres. By the end of March, the situation was improving, and 59,441 boys and 61,308 girls were reached through UNICEF interventions. With the end of the ceasefire and constant displacement orders, many learning centres were subsequently closed, and as land became increasingly inaccessible spaces became limited and enrolment decreased. Despite this, UNICEF has identified several learning centres in the South and the North that have now been expanded with the pitching of additional tents to increase enrolment. By the end of June, 68 learning centres were suspended. However, UNICEF is still able to support 103 centres reaching 57,000 children with regular teaching and learning.

West Bank including East Jerusalem

Safe access to learning was very challenging since the start of 2025, as students were preparing to start their second semester of school. Ongoing militarised operations, particularly in the northern West Bank, resulted in the loss of 19-50 learning days, variably to 50,000 children in Tulkarem and Jenin. UNICEF continued to support during the first six months of 2025, as 22,681 children (11,567 girls, 11,114 boys) received individual stationery kits delivered in 142 schools in hot spot areas. In community and school settings, 18,068 children (10,118 girls, 7,950 boys) received education-related recreational activities and learning support in hot spot areas in the West Bank. Activities included leadership skills for adolescent girls and boys, remedial education at least twice a week for children in grades 1-9, education-related recreational activities, reading campaigns, and in-depth pathways to education-centred psychosocial support.

1,285 adolescent protection and care packages were distributed to adolescent girls in hotspot areas in the West Bank, while 11,454

children with disabilities enrolled in public school were identified with needs for inclusive education services and assistive devices to be retained in learning.

Social Protection

Gaza Strip Humanitarian Cash Transfers

UNICEF continued to deliver digital humanitarian cash assistance through e-wallets in the Gaza Strip, prioritizing the most vulnerable families with children, such as pregnant and breastfeeding women, families with an adult or child with disability, children with severe acute malnutrition, children at risk of exploitation or abuse, children without parental care, injured and prematurely born children among others. Monthly market and post-distribution monitoring – with a total of 1826 interviews with vendors and shop owners and 2,770 surveys with recipients – showed that, irrespective of extreme access constraints, limited goods availability, and soaring prices, humanitarian cash assistance delivered digitally remained a vital lifeline for many extremely vulnerable families with children. The humanitarian cash assistance enables these families to prioritise and access their basic needs, which are still available in the formal and informal market, and has been constantly reported by these families as their preferred assistance modality.

In the first half of 2025, a total of 61,361 families in the Gaza Strip were assisted through different UNICEF humanitarian cash assistance programmes, reaching 421,102 individuals, of whom 220,909 were children, 23,061 were persons with disabilities, and 30,635 were female-headed households (FHHH). Approximately 13 per cent of these families also received a second round of humanitarian cash assistance.

Of the total assisted, 59,834 families (comprising 412,681 individuals, including 216,887 children, 22,996 persons with disabilities, and 30,178 FHHHs) received humanitarian Multipurpose Cash Assistance (MPCA). Disability cash top-up was provided to 4,869 families with a child/adult with a disability, covering 41,428 individuals – 21,671 of whom were children, 6,673 persons with disabilities, and 1,819 FHHHs. For the nutrition top-up, 6,431 families with pregnant and breastfeeding women were supported, reaching 33,350 individuals, including 17,349 children, 537 persons with disabilities, and 5,267 FHHHs. As many as 15 children with severe acute malnutrition were received as referrals and supported with MPCA and a nutrition top-up.

Frontline volunteers for basic service provision in the Gaza Strip

Restoring essential services for children and their families amidst active conflict is a key priority for UNICEF. During the first half of 2025, more than 9,600 workers received their incentive payments across various sectors, including: 4,762 in the education sector, (with 4,182 based in the Gaza Strip and 580 based in West bank), 2,843 in health, 395 in nutrition, nine under M&E, 149 in PSEA, 1,427 in Social and Behaviour Change (SBC), 24 in Social Protection (SP) and 561 in WASH, all providing multi-sectoral lifesaving services across the Gaza strip and West Bank. The service provided included water, sanitation, and hygiene (WASH), health, education, nutrition, immunisation and other basic services. The incentive work payments were processed through innovative solutions such as digital e-wallets, thereby enabling and sustaining continued lifesaving service provision.

Humanitarian Cash Transfers in the West Bank

In the first half of 2025, the crisis continued to spread and to intensify. The humanitarian situation continued to deteriorate, and the needs continued to grow. The humanitarian cash transfer response continued scaling up gradually and responded to needs in a timely manner. A total of 8,940 people received multi-purpose cash

assistance from UNICEF, including 4,833 children and 163 people with disabilities from 1,632 families. Markets in the West Bank continue to be functional and accessible irrespective of the deepening crisis, hence enabling affected vulnerable families to prioritise and access their basic needs.

Accountability to Affected People (AAP) and Prevention of Sexual Exploitation and Abuse (PSEA)

Accountability to Affected People

During the first half of 2025, the ongoing emergency in the State of Palestine severely disrupted essential services, including electricity, internet, and communication systems. These disruptions heightened the urgency for communities to access critical information and voice concerns or complaints about services and aid. In response, UNICEF focused on putting accountability frameworks into action by promoting transparent information sharing and developing its feedback mechanisms. This included a joint hotline and chatbot with WFP, highlighting interagency coordination and partnership efforts. These channels are integrated with frequently asked questions and answers to enhance information provision and instant closure of the feedback loop. Within the reporting period, UNICEF received 92,580 pieces of feedback from 72,789 people from the joint hotline. From January to June 2025, most cases each month were reported in Khan Younis, with Deir al-Balah consistently recording the second highest number of cases. For each month, the majority of cases were from males and one: 93 per cent of cases were closed on the spot by agents. To ensure community participation in programme decisions, the Kits that Fit approach³³ was integrated into emergency kit procurement processes, specifically with the adolescent care and protection package. Community feedback led to the direct implementation of requested supplies.

To enhance information provision of programmes, pre-recorded messages informed communities of ongoing campaigns, including polio vaccination and routine immunisation, reaching 10,796 individuals and 48,056 callers, respectively. The joint chatbot introduced two new conversation flows to improve information delivery about programmes, specifically focusing on health, nutrition, and routine immunisation. These flows guide where to access services and address common questions.

Prevention of Sexual Exploitation and Abuse

Following the Gaza ceasefire at the end of 2024, UNICEF and the Protection Cluster launched an initiative to integrate PSEA and safeguarding into humanitarian action and aid distribution sites. Mobile Protection Teams reached 454,767 people with awareness messages and visited 170 distribution sites, directly engaging 5,800 beneficiaries. The PSEA Network trained 219 youth volunteers (50 per cent female) and engaged 60 other trained community volunteers to identify risks, share safeguarding information, and provide support including psychological first aid. Volunteers also joined the crowds moving across the Gaza Strip and distributed water, snacks, and provided support and psychological first aid (PFA) to children and families on the move. Key lessons learned included the need for effective communication, gender balance among aid workers, and improved queue management to ensure fair access. Mobile Protection Teams identified protection risks, referred individuals to specialized services, and shared vital information on complaint mechanisms and beneficiary rights, fostering a safer, more dignified distribution process.

In the West Bank, UNICEF's PSEA partners deployed mobile teams in all governorates to deliver MHPSS and comprehensive assistance, including financial and material aid. Multi-Purpose Cash

Assistance (MPCA), food parcels and children's winter clothing – prioritizing those from remote areas and herding communities - were distributed to affected families in Jenin and Jenin Camp and Tulkarem.

The Digital Campaign of SANAD (Arabic for “support”)³⁴ saw significant growth in January, with an 81 per cent increase in audience engagement and a 25 per cent increase in net followers compared to 2024, following the ceasefire announcement in Gaza. SANAD focused on ceasefire messaging, awareness on unaccompanied and/or separated children (UASC), Explosive Ordnance Risk Education (EORE), and emergency helplines, in coordination with clusters and working groups. The campaign continued publishing safeguarding and PSEA messages, promoting a victim-centred approach, community engagement and accountability, and access to community-based reporting channels. In partnership with protection clusters, SANAD developed joint messaging to improve access to humanitarian and protection services, especially in Gaza. New Information, Education, and Communication (IEC) materials targeting children, youth, safeguarding volunteers, and humanitarian workers were created, supporting PSEA focal points and mobilizing over 250 youth volunteers trained in safeguarding and PSEA.

UNICEF provides humanitarian cash transfers prioritizing the most vulnerable, integrating PSEA messaging into SMS notifications. This ensures 99,045 girls, 103,224 boys, 19,852 women, and 39,384 men in Gaza have safe, accessible channels to report Sexual Exploitation and Abuse (SEA). In the West Bank, 129,500 women and 70,500 men access safe reporting via the SANAD platform and social media.

UNICEF strengthened community feedback mechanisms, enabling around 41,000 individuals across the West Bank and Gaza to access protection services promptly and with quality support. Through the PSEA Network, UNICEF maintains a survivor-centred approach via a free, confidential 24/7 helpline (164), upscaled since October 2024, focusing on Gaza in 2025. The helpline provides mental health support, suicide and addiction interventions, and referrals for food, cash, medical, and legal services.

Since February 2025, UNICEF partners have expanded protection services in the West Bank, offering case management, MHPSS, legal aid, food parcels, cash assistance, and NFIs. Between January and June 2025, referrals and protection services reached over 33,000 people in Gaza and nearly 7,600 in the West Bank, including 2,501 girls, 1,195 boys, 15,080 women, and 14,349 men in Gaza and 1,306 girls, 1,090 boys, 2,859 women and 2,347 men in the West Bank.

UNICEF is intensifying awareness raising and community mobilization on PSEA and safeguarding by conducting sessions on SEA risks and reporting channels through 200 trained safeguarding volunteers across Gaza. Additionally, the SANAD social media platforms reached approximately 1.3 million people in Gaza and 1.1 million in the West Bank.

Capacity-building efforts for UNICEF partners and related personnel continued, with over 25 training sessions held between January and June 2025. These sessions trained 124 men and 155 women, including volunteers, UN staff, and CSO personnel in Gaza and the West Bank.

Social and Behaviour Change (SBC)

Gaza Strip

In the first half of 2025, SBC activities in the Gaza Strip focused on risk communication, social mobilization, and community engagement to raise awareness about ongoing risks amid displacement and humanitarian crisis and promote positive behaviours. Efforts were

coordinated closely with Health and Nutrition, WASH, and Child Protection sections.

To support the third national Polio Vaccination Campaign, 1,388 mobilizers were deployed, 150,000 brochures distributed, and 8,000 banners and posters placed. Messaging via radio, social media, and Telegram reached 2.32 million people, contributing to a refusal rate of just 0.0002 per cent. Trust in mobilizers was high, with 86 per cent of families citing them as a primary source of information.

Routine immunization was supported by 30 trained mobilizers with medical backgrounds. From 5 May to 30 June, 936 religious leaders and 4,195 community and school leaders were engaged. Outreach activities reached around 136,000 people (72,000 female, 64,000 male). As a result, 1,741 children missing vaccines were identified and 27 zero-dose children caught up. Four radio spots aired daily, reaching 810,000 people. Additionally, 10,000 brochures and 300 posters directed families to vaccination sites.

Following the ceasefire earlier this year, messages on EORE, prevention of child separation, MUAC screening, and hygiene promotion, including safe decommissioning of latrines, handling of dead bodies, and communicable diseases, reached an average of 300,000 people per message across platforms including social media, radio, Telegram, and SMS. Additionally, a total of 28 Community Led-Initiatives (CLIs) reached nearly 13,000 people through small group and interpersonal sessions. Hygiene promotion was further supported with IEC materials (flyers, posters, job aids), interpersonal communication training, and tools for data collection and behaviour monitoring.

Winterization messaging on flood safety, fire hazards, and hypothermia reached over 400,000 people, including 22,000 households with pregnant and breastfeeding women.

Additional messages on aid distribution, fuel, and water shortages were disseminated. All messaging was informed by insights from the Social and Community Listening (SCL) platforms and field-tested to monitor public sentiment and counter misinformation.

West Bank, including East Jerusalem

In the first half of 2025, a Training of Trainers (ToT) on Risk Communication and Community Engagement (RCCE) was delivered to 60 frontline workers (39 women, 21 men) across the West Bank. The training built capacity to communicate public health risks and engage communities in emergency preparedness and response. A cascade training planned for July 2025 aims to reach an additional 350 frontline workers.

To support RCCE efforts, a coordination mechanism led by the Ministry of Health and supported by UNICEF was activated to implement the ToT, coordinate cascading trainings, and ensure sustained follow-up of RCCE initiatives at institutional and community levels.

A comprehensive RCCE assessment is underway to identify key behaviours, risk perceptions, communication preferences, and community engagement patterns across the West Bank. It explores knowledge, attitudes, and practices related to emergency health behaviours such as vaccination and handwashing, as well as trusted communication channels, misinformation trends, and barriers to engagement. Findings will inform behavioural monitoring, guide tailored RCCE interventions, and support the Ministry of Health's media engagement plan and RCCE strategy.

Supply and Logistics

Between January and June 2025, UNICEF delivered critical humanitarian supplies across the Gaza Strip despite escalating insecurity and access restrictions. Since the October 2023 escalation, over 2,000 trucks carrying supplies valued at more than

US\$ 90 million have been delivered, a sharp decline from pre-conflict levels when over 500 trucks entered Gaza daily.

During the initial ceasefire period from 19 January to 1 March, UNICEF scaled up its logistics operations, bringing in nearly 1,000 trucks through multiple corridors. Supplies were distributed from warehouses in both the north and south of Gaza, supporting the delivery of essential items including water, hygiene kits, nutrition, and winter clothing. At the time, UNICEF maintained a strong pipeline of nearly 1,000 trucks filled with life-saving supplies.

However, from 2 March onwards, no humanitarian goods were permitted to enter Gaza. UNICEF's warehouses began to run critically low, and key items such as 30 neonatal ventilators remained stuck outside the Strip. Access to existing stock also became increasingly difficult. The Muraj warehouse in Rafah, now located within an expanded evacuation zone, was largely inaccessible, with only one visit permitted in April. Even then, looting risks prevented the transport of most supplies.

UNICEF operated four other warehouses in Deir Al Balah and Gaza City, but shrinking safe zones, fuel shortages, and infrastructure damage severely constrained operations. By May, the southern Gaza warehouse, holding 70 truckloads, was inaccessible due to military activity, with security concerns and limited storage capacity hampering humanitarian efforts.

HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY

UNICEF is an active member of the UN Country Team and the Humanitarian Country Team and closely coordinates with other organisations and partners, including women-led organisations. As the Cluster Lead Agency, UNICEF leads coordination and information management for three Clusters and one Area of Responsibility in the Gaza Strip and the West Bank, including East Jerusalem, and reports on collective Cluster achievements.

The **WASH Cluster**, led by UNICEF, continues to coordinate a strategic, timely, and effective humanitarian WASH response with 90 partner agencies and affiliates actively engaged. An overview of the WASH response indicators for the sector can be found [here](#), and the quarterly reports [here](#).

In the Gaza Strip, the WASH partners have delivered drinking water within the ranges of 22.8 m³ for 1,134,291 beneficiaries (in May) to a high point of 15.2 m³ serving 1,819,470 individuals in March. At the end of the ceasefire, in March, partners were distributing to more people in a wider set of locations but getting less drinking water per capita.³⁵ In quarter two, 42 reporting partners were trucking drinking water to 2,913 water points, an increase from quarter one of 34 partners and 2,230 water points, indicating the renewed pressure on the population to access drinking water. A similar dynamic is evident in the delivery of domestic water.³⁶

The [rapid WASH assessment](#) conducted in January indicated that 65 per cent of the population are unable to access 6 litres of drinking water per day, and 45 per cent are unable to access 9 litres of domestic water per day.

WASH partners have distributed [a range of kits and items for household](#), personal and camp hygiene and cleaning kits.³⁷ Solid waste management continues across Gaza with the management of [temporary dump sites](#) such as the UNICEF-supported Al Amal site, while the two landfill sites remain inaccessible.³⁸ In sanitation WASH partners are supporting household latrines in makeshift sites and conducting repairs in designated shelters and classrooms adapted to IDP camps, as outlined in the [technical briefing note](#).³⁹

In the West Bank, the WASH Cluster launched the [Water and](#)

[Sanitation for Health Facility Improvement Tool \(WASH FIT\)](#) , through which partners assessed WASH conditions and needs in 29 hospitals.⁴⁰ In the first half of 2025, WASH partners reached 163,369 people across the West Bank through a wide range of interventions.⁴¹

UNICEF leads the **Nutrition Cluster** , coordinating 28 nutrition partners to ensure a cohesive and strategic nutrition response. Through its leadership of the Nutrition Cluster, UNICEF has been instrumental in aligning partners around priority geographic areas and harmonized intervention packages.⁴² The Cluster has also played a critical role in coordinating field-level partner deconfliction in light of recurring displacements and access constraints .

The latest achievements of the response is available [here](#) . In the first half of 2025, nutrition cluster partners screened 85,000 to 115,000 children per month, equivalent to reaching every child in a quarter. More than 23,000 children with acute malnutrition, including over 3000 with severe acute malnutrition, were treated in the last 6 months, making 38 per cent coverage of the cluster target.⁴³

In early May, the Nutrition Cluster, jointly with the Food Security Sector, conducted an [Integrated Phase Classification \(IPC\)](#) for acute food security and acute malnutrition. Despite the significant challenges for nutrition programme implementation, i.e., blockades, restricted access, security threats, and looting, the Cluster has worked with partners to adapt delivery mechanisms, including prepositioning supplies, modifying distribution modalities, and expanding the use of mobile outreach where feasible.

The nutrition response in the State of Palestine continues to adapt amid a rapidly evolving humanitarian context.⁴⁴

The **Education Cluster** , co-led by UNICEF and Save the Children, coordinates with 40 education partners. In the first half of 2025, the Education Cluster supported 378,891 learners through various priority interventions. These efforts aimed to ensure continuity of learning and to address the cyclical trauma experienced by children and youths after 21 months of conflict. The interventions were carried out by 52 partners, including 27 national NGOs.

Key interventions included establishing 626 Temporary Learning Spaces (TLSs), providing safe and structured learning environments for 240,678 learners. Additionally, the Cluster facilitated the distribution of essential learning supplies to 166,000 students. It supplied assistive devices to 598 children with disabilities, improving their access to and participation in educational activities. Furthermore, 315,000 students were supported in accessing a distance learning programme, which expanded their educational opportunities given the limited availability of in-person learning.

To support children's emotional well-being, structured play activities and Mental Health and Psychosocial Support (MHPSS) services were also provided, reaching 127,500 learners and helping to reduce psychological distress in a safe and nurturing environment.⁴⁵

Meanwhile, attacks and incidents affecting school facilities continued, with 92 incidents recorded in the first half of 2025 that resulted in civilian casualties, including children seeking refuge in these spaces, and caused further damage to already fragile infrastructure. The entry restrictions on educational supplies, including during the ceasefire period, further limited partners' ability to provide quality education at scale.⁴⁶

During the first six months of 2025, the Education partners reached 4,718 displaced and host-community children with psychosocial support activities promoting social-emotional learning through art, sports, storytelling, and other gender-responsive, resilience-building methods.⁴⁷

UNICEF continued to lead the **Child Protection Area of Responsibility (CP AoR)** . The latest achievements from the

response can be found on the [updated interactive response dashboard](#) . The [Child Protection Referral Pathways system](#) is regularly updated to support coordination, referrals, and service mapping. In the first half of 2025, 58 CP AoR partners reached 1.75 million individuals across Gaza and the West Bank, including East Jerusalem. In Gaza, 55 CP AoR partners reached over 1.68 million individuals with critical, life-saving child protection services. This includes 639,041 children (53 per cent girls) and 1,048,086 caregivers (54 per cent women). Among the children reached, 10,133 children with disabilities, roughly 1 in every 63 children, accessed child protection services tailored to their unique needs, from MHPSS and case management to alternative care, family tracing, and specialised rehabilitation. Still, disability inclusion remains a significant gap due to inaccessible infrastructure, a lack of assistive devices, and a shortage of trained personnel.⁴⁸

In the West Bank, 16 Child Protection AoR partners reached 65,841 individuals, including 53,598 children (52 per cent girls) and 12,243 caregivers (69 per cent women). Among the children reached, 970 had disabilities. A total of 43,920 children (52 per cent girls) received MHPSS services, including group-based activities, psychological first aid, and one-on-one counselling. While 339 children benefited from legal assistance, including support with birth registration. Parenting programs reached 9,397 caregivers (66 per cent women), promoting positive parenting and psychosocial well-being. Case management services reached 1,306 children (51 per cent girls), including 79 with disabilities, and 230 children (45 per cent girls) were referred to specialised services.⁴⁹

To strengthen service delivery and enhance coordination, the Child Protection Area of Responsibility (CP AoR) continues to provide technical support and roll out essential guidance tools, including the Emergency Case Management Guidance (aligned with CPIMS+), Remote Case Management protocols, Data Protection Protocols, and standard operating procedures (SoPs) for preventing and responding to child survivors of GBV. Building on a [comprehensive capacity gap analysis](#) conducted across Gaza and the West Bank, the [CP AoR developed a targeted capacity-building plan](#) . During the reporting period, multiple joint trainings were conducted in collaboration with the Education Cluster, WASH, Site Management and GBV AoR to strengthen safe identification and referral pathways.⁵⁰

However, while child protection partners continue to scale up their life-saving interventions, they face **increasingly severe operational and protection challenges** .^{51 52}

UNICEF participates in the **Gender-Based Violence Area of Responsibility (GBV AoR)**, coordinated by UNFPA, and in the **Legal Task Force** . The Child Protection AoR and the GBV AoR have jointly established a **Prevention and Care for Child Survivors Task Force** , of which UNICEF is a member. UNICEF also participates in the **Explosive Ordnance Risk Education – Conflict Preparedness and Protection Technical Working Group (EORE-CPP TWG)** under the Mine Action (MA) AoR.

In addition, an **EORE-CPP Technical Working Group** dedicated to the West Bank was established by UNICEF in late 2024 in response to emerging needs. UNICEF and then the CPAoR co-chaired the group with UNMAS until mid-April 2025, after which the group moved under the Mine Action AoR. UNICEF continues to contribute actively as a participating member.

UNICEF continues to actively participate in the **Health Cluster** , including through technical working groups, mainly the Sexual Reproductive Health Working Group, the Health Services Delivery Group, the Rehabilitation Working Group, and the Inter-Cluster MHPSS Technical Working Group.

UNICEF also co-leads the **Risk Communications and Community**

Engagement (RCCE) Technical Working Group, which is organised in collaboration with WHO and OCHA.

Additionally, UNICEF supports the **Inter-Agency Network for the PSEA** and participates in the **AAP Working Group**, which is coordinated by OCHA. Furthermore, UNICEF actively engages in the regional and national **Gender in Humanitarian Action (GIHA) Working Group**, which is coordinated by UN Women and OCHA, and contributes to gender equality, inclusive programming, as well as preparedness and response. UNICEF continues to participate in key recovery activities, including the Rapid Damage Needs Assessment.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA



Mais, lost her father in the war, he couldn't keep his promise to get her a new hearing aid; UNICEF stepped in to help Mais. UNICEF has managed to deliver 148 hearing aids to the most needed children.

In the Gaza Strip, conditions continue to worsen. For more than two months, humanitarian assistance has been blocked from reaching over two million Palestinians – as bombardment, malnutrition, dehydration, and disease continue unabated.

Despite the blockade, UNICEF has managed to deliver 148 hearing aids inside that had entered during the ceasefire. This support is just a fraction of the estimated 10,000 children with hearing loss. About 5,000 of those are experiencing severe hearing loss, often the result of war injuries and a lack of functioning health care.

Utilizing flexible humanitarian funding UNICEF procured those hearing aids while continuing to advocate for increased humanitarian access to the Gaza Strip to deliver them and other types of assistance. With hearing aids and batteries scarce due to market shortages, almost all of Gaza's hearing-impaired children are left to live in extremely dangerous conditions without these critical devices.

Reem, 13, and Abdelaziz Al-Hattab, 10, are both living with chronic calcium deficiency, a condition that impairs their hearing and sight.

"Throughout the war, the suffering has been immense," says their mother. "I have five children, and four of them have calcium deficiency – they rely on hearing aids to hear."

"The war made everything harder. I was terrified of their safety. During the bombings, I would call out to them, but they couldn't hear me. We had to flee our home many times. In one displacement, we became separated; in another, I called to my daughter Hala – she was right beside me – but she didn't hear me. The stress of that moment made me dizzy."

UNICEF was able to outfit the boy and girl with assistive hearing devices that can save their lives in these terrifying conditions.

"Mais's father had promised her a new device, but he was killed during the war before he could fulfil that promise," says the mother of nine-year-old Mais Shannan. "Now Mais finally has her hearing aid – and she can hear me again."

Step by step, this joint effort is helping Gaza's children regain their ability to hear, learn, and reconnect with the world around them.

A short video clip about the delivery of the critical hearing aids is available at <https://www.unicef.org/sop/stories/unicef-delivers-critical-hearing-aids-gaza-children>

Much more needs to be done. To respond to the situation for children in the State of Palestine, UNICEF is calling for the following:

Gaza Strip:

- We call for an immediate ceasefire, the unconditional release of the remaining hostages, and end to all attacks on children and violations their rights - especially their fundamental right to life. There have been over 50,000 reported child casualties since 7 October 2023 (at least 17,000 killed and around 34,000 injured) although actual numbers may be higher.
- We call on all countries and stakeholders with influence over the parties to conflict to use their leverage to reinstate the ceasefire and support a just and lasting political solution.
- We call for an end to grave violations: the killing and maiming of children, attacks on schools and hospitals, and the denial of humanitarian access, including attacks on humanitarian workers, are grave violations against children and must cease immediately.
- All parties must uphold their obligations under international humanitarian law, including the protection of civilians and the infrastructure they rely on, the provision of humanitarian aid, and the protection of aid workers. All parties are legally bound to adhere to the principles of distinction, proportionality, necessity, and humanity in the conduct of hostilities.
- Humanitarian aid must enter at scale, along with the mass influx of commercial goods and supplies. Essential services must be reconnected, supported and sustained. Markets must be invigorated, and commercial supplies including fresh produce must enter Gaza. The banking sector must also be reestablished.
- Until Gaza's health care system can handle all needs, we call for medical evacuations at speed and at scale, with the guarantee that all evacuated patients and their carers can return to Gaza. Electricity must be restored to ensure children can access clean water and sanitation, which is essential for their health and survival.
- UN personnel and UN premises must be protected at all times. The population in Gaza relies on the UN for lifesaving assistance: the UN is an essential lifeline at the time of utter tragedy and devastation, and to constrain this lifeline is to further attack those who depend on it.

West Bank, including East Jerusalem:

- We call for all parties to end the escalating violence in the West Bank, including East Jerusalem, particularly in the north of the West Bank, as it has devastating impacts on children and their families, not least to children's right to life.
- Children across the West Bank, including East Jerusalem, must have full, safe access to education and services, and be protected from any violence as well as movement and access restrictions.

- The Israeli Forces to immediately cease use of explosive weapons and airstrikes and other tactics more characteristic of armed conflict. These have a devastating effect especially in densely populated areas – with children repeatedly killed or injured in such attacks the past 19 months.
- The Israeli Forces to immediately cease the demolition of homes and roads, and other civilian infrastructure. Such demolitions leave vital infrastructure severely damaged and have largely disrupted essential supplies like water and electricity, as well as access to hospitals.

Media links:

- [This week, UNICEF delivered health kits, pediatric drugs & newborn supplies to Al Awda Hosp.](#)
- [Eline is 10. She survived after her home was bombed. She emerges from the rubble with a message.](#)
- [More than 50k children reportedly killed or injured in Gaza since October 2023.](#)
- [In Jenin RC UNICEF and Australia delivered +100 Polyethylene tanks to households.](#)
- [Osama, 5, was once a healthy child. The recovery of children like Osama is possible only...](#)
- [“A Question Mark Hangs Over Gaza” now live online. UNICEF and ECHO take you into the heart of Gaza.](#)
- [Human Interest Story: UNICEF acts swiftly during ceasefire to address the needs of Gaza’s children.](#)
- [Human Interest Story: Kamal Adwan Hospital- From Hope to Ruin and Back Again.](#)
- [Human Interest Story: Life hangs tenuously in the balance in the Gaza Strip.](#)
- [Human Interest Story: Renewed attacks leave Gaza’s children in cascading crises.](#)
- [Human Interest Story: Lives changed forever by war in Gaza.](#)
- [Human Interest Story: UNICEF delivers critical hearing aids to Gaza children.](#)
- [Statement: Humanitarian access improves quality of polio vaccination campaign in the Gaza Strip.](#)
- [Press Release: With stoppage of humanitarian aid deliveries into the Gaza Strip, UNICEF warns of s](#)
- [Statement: Statement by UNICEF Executive Director Catherine Russell on the attacks in Gaza.](#)
- [Press Release: At least 322 children reportedly killed in Gaza following breakdown of ceasefire.](#)
- [Press Release: Risk of famine for children across Gaza, new report says.](#)
- [Statement: ‘Unimaginable horrors’: more than 50k children reportedly killed or injured in Gaza.](#)

- [Press Release: More than 5,000 children diagnosed with malnutrition in the Gaza Strip in May.](#)

- [More than 586,000 children in Gaza have been vaccinated against polio in just four days.](#)

HAC APPEALS AND SITREPS

- State of Palestine Appeals
<https://www.unicef.org/appeals/state-of-palestine>
- State of Palestine Situation Reports
<https://www.unicef.org/appeals/state-of-palestine/situation-reports>
- All Humanitarian Action for Children Appeals
<https://www.unicef.org/appeals>
- All Situation Reports
<https://www.unicef.org/appeals/situation-reports>

NEXT SITREP: JULY 2025 SITUATION REPORT (SCHEDULED FOR THE SECOND HALF OF AUGUST 2025).

ANNEX A - PROGRAMME RESULTS

Consolidated Programme Results

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2025 targets	Total results	Progress*	2025 targets	Total results	Progress*
Health (including public health emergencies)								
Children and women accessing primary health care in UNICEF-supported facilities	Total	-	893,333	427,735 ⁵³	▲ 48%	-	-	-
	Girls	-	-	150,014	-	-	-	-
	Boys	-	-	155,195	-	-	-	-
	Women	-	-	122,526	-	-	-	-
Children 0-11 months receiving pentavalent 3 vaccine	Total	-	180,000	59,034 ⁵⁴	▲ 33%	-	-	-
	Girls	-	-	-	-	-	-	-
	Boys	-	-	-	-	-	-	-
Nutrition								
Children 6-59 months with severe acute malnutrition admitted for treatment	Total	10,807	10,807	2,607	▲ 24%	12,487	3,133 ⁵⁵	▲ 25%
	Girls	-	-	1,489	-	-	1,693	-
	Boys	-	-	1,118	-	-	1,440	-
Children 6-59 months with moderate wasting admitted for treatment	Total	48,033	48,033	16,817	▲ 35%	48,033	19,684	▲ 41%
	Girls	-	-	9,902	-	-	10,739	-
	Boys	-	-	6,915	-	-	8,945	-
Children 6-59 months receiving vitamin A supplementation	Total	706,270	290,678	136,209 ⁵⁶	▲ 47%	290,678	136,209	▲ 47%
	Girls	-	-	67,090	-	-	67,090	-
	Boys	-	-	69,119	-	-	69,119	-
Children 6-59 months receiving High Energy Biscuits	Total	290,678	290,678	20,131 ⁵⁷	▲ 7%	290,678	85,501 ⁵⁸	▲ 29%
Children 6-59 receiving micronutrient powder	Total	290,678	145,340	10,343 ⁵⁹	▲ 7%	155,460	18,851	▲ 12%
	Girls	-	-	4,908	-	-	9,176	-
	Boys	-	-	5,435	-	-	9,675	-
Pregnant women receiving preventative iron supplementation	Total	149,843	149,843	43,112 ⁶⁰	▲ 29%	160,279	43,112 ⁶¹	▲ 27%
Child protection, GBViE and PSEA								

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2025 targets	Total results	Progress*	2025 targets	Total results	Progress*
Children, adolescents and caregivers accessing community-based mental health and psychosocial support	Total	-	349,788	194,412	▲ 56%	884,000	363,394	▲ 41%
	Girls	-	-	79,799	-	-	155,550	-
	Boys	-	-	60,785	-	-	131,223	-
	Women	-	-	37,523	-	-	58,326	-
	Men	-	-	16,305	-	-	18,295	-
	Boys with disabilities	-	-	765	-	-	-	-
	Girls with disabilities	-	-	745	-	-	-	-
Children who have received individual case management	Total	-	10,600	5,380	▲ 51%	27,500	10,607	▲ 39%
	Girls	-	-	2,551	-	-	5,467	-
	Boys	-	-	2,829	-	-	5,140	-
	Boys with disabilities	-	-	324	-	-	-	-
	Girls with disability	-	-	241	-	-	-	-
Children and caregivers provided with landmine or other explosive weapons prevention	Total	-	538,000	577,738	▲ 107%	660,000	692,251	▲ 105%
	Girls	-	-	58,471	-	-	88,517	-
	Boys	-	-	53,085	-	-	78,570	-
	Women	-	-	237,850	-	-	277,872	-
	Men	-	-	228,332	-	-	247,292	-
	Boys with disabilities	-	-	51	-	-	-	-
	Girls with disabilities	-	-	70	-	-	-	-
Children and caregivers reached by MHPSS messages and awareness activities on child protection risks	Total	-	858,000	466,738	▲ 54%	1.5 million	509,668	▲ 35%
	Girls	-	-	11,340	-	-	23,777	-
	Boys	-	-	10,738	-	-	20,787	-
	Women	-	-	230,797	-	-	245,829	-
	Men	-	-	213,863	-	-	219,275	-

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2025 targets	Total results	Progress*	2025 targets	Total results	Progress*
	Boys with disabilities	-	-	20	-	-	-	-
	Girls with disabilities	-	-	33	-	-	-	-
Education								
Children accessing formal or non-formal education, including early learning	Total	-	170,000	160,382 ⁶²	▲ 94%	339,004	249,437	▲ 74%
	Girls	-	85,000	84,254	▲ 99%	168,892	133,605	▲ 79%
	Boys	-	85,000	76,127	▲ 90%	170,112	115,832	▲ 68%
Children receiving individual learning materials	Total	-	270,000	133,501 ⁶³	▲ 49%	614,507	175,305	▲ 29%
	Girls	-	134,874	68,229	▲ 51%	306,463	90,713	▲ 30%
	Boys	-	135,126	65,272	▲ 48%	308,044	84,592	▲ 27%
Affected school children are provided with gender-responsive recreational activities and materials for their wellbeing	Total	-	174,740	144,336	▲ 83%	482,756	264,885	▲ 55%
	Girls	-	86,408	76,585	▲ 89%	240,824	143,036	▲ 59%
	Boys	-	88,332	67,750	▲ 77%	241,932	121,849	▲ 50%
Water, sanitation and hygiene								
People accessing a sufficient quantity and quality of water for drinking and domestic needs	Total	-	2.1 million	2 million ⁶⁴	▲ 96%	2.1 million	1.8 million	▲ 89%
People reached with critical WASH supplies	Total	-	1.4 million	910,745	▲ 65%	1.4 million	1.1 million	▲ 79%
People benefitting from improved access to sanitation and hygiene services	Total	-	1 million	837,361	▲ 84%	1 million	836,809	▲ 84%
Social protection								
People reached with humanitarian cash transfers through UNICEF response	Total	-	765,000	380,300	▲ 50%	-	-	-
Households with children with disabilities reached by disability cash top-ups	Total	-	21,000	4,869	▲ 23%	-	-	-
Cross-sectoral (HCT, SBC, RCCE and AAP)								
People sharing their concerns and asking questions through established feedback mechanisms	Total	-	550,000	72,789	▲ 13%	-	-	-
	Female	-	-	-	-	-	-	-
	Male	-	-	-	-	-	-	-

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2025 targets	Total results	Progress*	2025 targets	Total results	Progress*
People reached through messaging on prevention of harmful practices and health related risks and access to services	Total	-	645,340	913,010	▲ 141%	-	-	-
People with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected population ⁶⁵	Total	-	765,000	467,607	▲ 61%	-	-	-
	Girls	-	-	101,586	-	-	-	-
	Boys	-	-	105,870	-	-	-	-
	Women	-	-	150,021	-	-	-	-
	Men	-	-	110,130	-	-	-	-

*Progress in the reporting period 1 January to 30 June 2025

ANNEX B — FUNDING STATUS

Consolidated funding by sector

		Funding available		Funding gap	
Sector	Requirements ⁶⁶	Humanitarian resources received in 2025	Resources available from 2024 (carry over)	Funding gap (US\$)	Funding gap (%)
Health	123,800,000	17,961,532	18,590,424	87,248,044	70%
Nutrition	182,320,000	16,929,477	12,621,976	152,768,547	84%
Education	55,400,000	22,732,592	6,852,336	25,815,072	47%
Social protection	150,000,000	33,303,917	22,708,836	93,987,247	63%
Cluster coordination	5,220,000	1,992,420	1,025,340	2,202,240	42%
Water, sanitation, and hygiene (WASH)	157,500,000	22,144,388	54,645,354	80,710,258	51%
Child Protection, GBViE and PSEA	37,000,000	10,728,485	7,326,145	18,945,370	51%
Cross-sectoral	5,300,000 ⁶⁷	2,800,419	368,919	2,130,662	40%
Total	716,540,000	128,593,230	124,139,330	463,807,440	65%

Funding available - funding available in the current appeal year to respond in line with the current HAC appeal.
Humanitarian resources– humanitarian funding commitments received from donors in the current appeal year.
Resources available from 2024 (carry over)– funding received in the previous appeal year that is available to respond in line with the current HAC appeal

Who to contact for further information:

ENDNOTES

1. The Occupied Palestinian Territory (OPT) encompasses the West Bank, East Jerusalem, and the Gaza Strip. References to the State of Palestine, or to specific geographic areas of the OPT within this situation report, do not imply any alternative recognition or determination as to the status of the OPT and its integral parts.
2. The total number of children in need is estimated based on the demographic ratio of children, which is 46.9 per cent (1,078,700 children) in the Gaza Strip and 47.6 per cent (476,000 children) in the West Bank (source: Palestinian Central Bureau of Statistics (PCBS) and OCHA), applied to the 2.3 million people in need in Gaza and 1 million people in need in the West Bank, respectively. Nearly half of them, 49 per cent, are girls.
3. Of the 3.3 million people in need, 2.1 million are in the Gaza Strip (entire population) and 1.2 million are in the West Bank, including East Jerusalem. Source: Inter-Agency Flash Appeal for the Occupied Palestinian Territories, issued on 11 December 2024 covering January-December 2025, <https://www.ochaopt.org/content/flash-appeal-occupied-palestinian-territory-2025>.
4. The number of 1,939,232 people displaced in the Gaza Strip and the West Bank consists of 1,900,000 people who are displaced in the Gaza Strip (United Nations estimate), and 39,232 people who are displaced in the West Bank. The figure for the West Bank includes two components: (1) 6,624 individuals displaced due to demolitions since 7 October 2023, including 2,848 children (OCHA, as of 12 June 2025); and (2) 32,608 individuals displaced because of the Israeli "Iron Wall" operation, including 14,241 children. The latter figure is based on displacement data recorded by UNRWA among the registered refugee population from Jenin, Tulkarem, and Nur Shams camps (as of 12 June 2025).
5. The number of 588 affected school buildings consist of 538 school buildings in the Gaza Strip (95.4 per cent), and up to 50 affected school buildings in the West Bank. In detail: For the West Bank, between January and May 2025, the Education Cluster documented 46 education-related incidents (by Israeli forces or settlers) resulting in property damage to schools. This is in addition to four sealing incidents targeting schools. In the Gaza Strip, the number of 538 school buildings that sustained damage amounts to 95.4 per cent of all 564 school buildings in the Gaza Strip. Their level of damage varies between the damage classifications "Direct hit" (406 school buildings), "Damaged" (95 school buildings), and "Likely damaged" (37 school buildings). Not included in this figure is the classification "Possible damage" (10 school buildings). The status of the remaining 16 school buildings in the Gaza Strip is currently not known. Source: Verification of damages to schools based on proximity to damaged sites, update #9, May 2025, by the Education Cluster, Save the Children, and UNICEF, <https://reliefweb.int/report/occupied-palestinian-territory/verification-damages-schools-based-proximity-damaged-sites-gaza-occupied-palestinian-territory-update-9-may-2025>.
6. Inter-Agency Flash Appeal for the Occupied Palestinian Territories, issued on 11 December 2024, covering January-December 2025, <https://www.ochaopt.org/content/flash-appeal-occupied-palestinian-territory-2025>. The previous Inter-Agency Flash Appeal was issued on 17 April 2024, covering April-December 2024, <https://www.ochaopt.org/content/flash-appeal-occupied-palestinian-territory-2024>.
7. The original estimate of US\$6.6 billion, which was previously referred to in this publication, reflects the full anticipated funding required to meet the humanitarian needs of 3.3 million people in the Gaza Strip and the West Bank, including East Jerusalem. However, due to severe operational constraints – including access restrictions, impediments to aid delivery, and increasing challenges to humanitarian space – the 2025 Flash Appeal requests an adjusted amount of US\$4.1 billion. This figure reflects what humanitarian actors anticipate they can realistically implement under the given conditions. For the full explanation, see: Inter-Agency Flash Appeal for the Occupied Palestinian Territories, issued on 11 December 2024 covering January-December 2025, <https://www.ochaopt.org/content/flash-appeal-occupied-palestinian-territory-2025>.
8. The numbers stated here refer to the people who are targeted to receive humanitarian aid. These numbers of "people targeted" differ from the numbers of "people in need", the latter amount to 3.3 million across the occupied Palestinian territories (Gaza Strip: the entire population of 2.1 million, West Bank: 1.2 million). "People in need" refers to those who are affected by the crisis and require humanitarian assistance. "People targeted" refers to the number of people that is planned to realistically be reached with the given capacity and expected resources.
9. The latest UNICEF Humanitarian Action for Children (HAC) appeal for the State of Palestine (6 December 2024) covers January to December 2025, <https://www.unicef.org/appeals/state-of-palestine#download>.
10. In 2025, UNICEF has received US\$2 million from the internal Emergency Programme Fund and exceptionally US\$ 10 million from an internal capital loan both of which will need to be replenished – these loans are not reflected in the funding received.
11. Only activities with available GPS coordinates are represented on the map. The boundaries and names shown, and the designations used on this map, do not imply official endorsement or acceptance by the United Nations. The map does not necessarily represent features at their true scale.
12. Key items such as dairy, eggs, fruit, and meat disappeared entirely. Shops are operating with less than 40 per cent of stock capacity, with supplies expected to last only one to two weeks.
13. WHO EMRO, Emergency Situation Update, Issue 61, 30 June 2025, https://www.emro.who.int/images/stories/palestine/Sitrep_61.pdf.
14. According to the IPC Acute Food Insecurity Snapshot for the Gaza Strip (April–September 2025), 22% of the population – approximately 469,500 people – are experiencing Catastrophic conditions (IPC Phase 5), with famine increasingly likely if humanitarian access remains restricted. The entire population is classified in Crisis or worse (IPC Phase 3+). See: IPC Gaza Strip Snapshot, July 2025, <https://www.ipcinfo.org/ipc-country-analysis/details-map/en/c/1159596/>.
15. UNICEF: "More than 5,000 children diagnosed with malnutrition in the Gaza Strip in May", 20 June 2025, <https://www.unicef.org/sop/press-releases/more-5000-children-diagnosed-malnutrition-gaza-strip-may-0>.
16. Rates of water-borne diseases have surged, with diarrhoea cases doubling to 59,000 in the first quarter of 2025, with 53 per cent affecting children under five. Since the start of the year, 254,000 respiratory infections and 728 meningitis cases were recorded, 92 per cent of them viral.
17. As reported by the Palestinian Ministry of Health covering the period between 7 October 2023 and 30 June 2025.
18. The number of humanitarian aid workers killed is provided by OCHA as of 2 July 2025, <https://www.ochaopt.org/content/reported-impact-snapshot-gaza-strip-2-july-2025>.
19. The source of this data (OCHA) does not consistently disaggregate injuries by age. Over 100 cases are categorized as "unknown" with regard to whether the injured person is a child or an adult. As a result, the reported number of injured children likely underrepresents the actual impact on children.
20. Figure reflects the latest available estimate as of 30 June. Due to the fluid nature of school closures, roadblocks, and access restrictions in the West Bank, the actual number may vary day to day and may not reflect long-term or permanent disruptions.
21. West Bank Monthly Snapshot - Casualties, Property Damage and Displacement, May 2025, OCHA, <https://www.ochaopt.org/content/west-bank-monthly-snapshot-casualties-property-damage-and-displacement-may-2025>.
22. West Bank Monthly Snapshot - Casualties, Property Damage and Displacement, May 2025, OCHA, <https://www.ochaopt.org/content/west-bank-monthly-snapshot-casualties-property-damage-and-displacement-may-2025>.
23. OCHA, Movement and access update in the West Bank for May, 27 May 2025, <https://www.ochaopt.org/content/movement-and-access-update-west-bank-may-2025>.
24. The economy contracted by 28 per cent in 2024, with the construction sector declining by 38 per cent and unemployment rising to 35 per cent – double the pre-war rate. Especially in areas affected by ongoing military operations, weakened purchasing power has undermined households' ability to maintain adequate nutrition.

25. UNICEF is committed to supporting mothers to exclusively breastfeed their infants up to 6 months of age and to continue breastfeeding to age 2 and beyond with appropriate complementary foods. In exceptional circumstances, UNICEF agrees to the use of breastmilk substitutes, as some infants are not breastfed or only partially breastfed during emergencies.
26. Water losses are estimated at 60-70 per cent because of the scale of destruction of the water network and the inefficiencies of water trucking.
27. Number of people accessing water at some point in time during the reporting period.
28. As per globally established standards adopted by the humanitarian community, laid out in the Sphere Handbook, the minimum quantity of water required in emergency settings is 15 litres per person per day. This includes water for drinking, cooking, and basic hygiene. Of this, at least 3-5 litres should be safe drinking water. The standard also emphasizes equitable access, proximity (ideally within 500 metres of households), and reliability of supply. In acute emergencies, where full standards cannot be met immediately, a phased approach is recommended, prioritizing drinking and cooking needs first. Source: Sphere Handbook 2018, "Water Supply, Sanitation and Hygiene Promotion" chapter, <https://handbook.spherestandards.org/en/sphere/>.
29. Through a signed agreement with UNOPS, UNICEF receives fuel to support water service providers in the operation of water and wastewater systems. UNICEF refunds UNOPS for the fuel. This is a UN-wide mechanism agreed upon by all parties.
30. UN News: "No fuel, no aid, no escape: UN agencies warn of looming collapse in Gaza", 12 July 2025, <https://news.un.org/en/story/2025/07/1165383>.
31. Water losses are estimated at 60-70 per cent because of the scale of destruction of the water network and the inefficiencies of water trucking.
32. The reported achievement exceeds 100 per cent of the original target (115 per cent) due to the expanded reach of mass awareness messaging, which significantly increased community engagement and uptake.
33. The "Kits that Fit" initiative by UNICEF aims to deliver emergency kits tailored to the specific needs of affected populations, supplied as locally as possible, and continuously reviewed to ensure they are fit for purpose. This approach addresses the challenge of generic, globally procured kits that may not meet the unique needs of different communities. By incorporating feedback mechanisms, such as digital channels and face-to-face consultations, UNICEF ensures that the kits are responsive to the needs of the most vulnerable, including children and families in low-resource contexts and amid humanitarian emergencies. The initiative also emphasizes local procurement to enhance supply chain resilience, reduce wastage, and support local markets. The project has been piloted in various countries, including Kenya, Palestine, Ukraine, and Türkiye, with positive outcomes in terms of community engagement and kit customization.
34. The SANAD Network is a shared public platform where Palestinian civil society organizations, UN agencies and international NGOs unite their voices and efforts towards strengthening Protection from Sexual Exploitation and Abuse (PSEA). SANAD engages especially with children, women, youth, and people with disabilities. One activity are Risk Communications and Community Engagement (RCCE) interventions to raise awareness for the prevention of violence. Community members across the West Bank and the Gaza Strip can receive mental health support or submit an official complaint of any physical or verbal abuse perpetrated by an aid worker via WhatsApp +972 59 404 021, via e-mail at optconfidential@un.org, or by calling the free hotline 164 of the partner organisation SAWA.
35. In May and June, with the constraints on fuel availability increasing, the Cluster received only 25 per cent of the required amount to provide all WASH services, resulting in increased pumping hours for accessible wells, and greater emphasis on drinking water over domestic water or solid waste management and sewage pumping. The cluster lead developed subsidy mechanisms of providing fuel for private sector water producers and private households to supply drinking and domestic water respectively, continued to operate during the period, but with some limitations due to the fuel availability crisis.
36. Water production continues, as in 2024, with water supplies from 100-120 groundwater wells, some with brackish water desalination plants (<https://drive.google.com/file/d/1IKWSE7tB0P-RTUZJD19k5j3VaMkqBWBj/view>) to facilitate drinking water access. The Southern Gaza seawater desalination plant lost the electricity supply in February, which reduced its drinking water production drastically (to 15 per cent) and significantly increased the diesel required to operate it. The Mekorot water supply pipelines have incurred repeated damages and repairs through the last six months to Bani Suhaila in the south and Al Mentar in the north, each repair requiring several coordination approvals and taking days to weeks to complete. The Bani Saeed Mekorot water supply pipeline has not operated since January and access to repair is denied, losing 12,000,000 litres per day of drinking water in the middle area of Gaza.
37. The results from the reporting period show a significant increase in February (410,000 benefited from complete kits) and March (190,000 benefited from complete kits), compared to January (110,000 benefited from the completed kit), April (40,000), May (10,000), and June (0). The surge and decline directly correlate with the ceasefire and access of materials, indicating the sector is capable of delivering a vastly superior level than what is permitted to enter. The LTM reports indicate a high level of soap ownership in March and April, as high as 90 per cent, but declining rapidly to 70 per cent in June. In juxtaposition to this, the surveillance data from WHO indicate a steady rise in waterborne diseases (Acute Watery Diarrhoea, Bloody Diarrhoea, Acute Jaundice Syndrome, see https://drive.google.com/file/d/1O8yffDOpLxvE_ix3db6BOO5dBnZ1gBd/view) to the point in late June when 39 per cent of non-trauma consultations are now preventable waterborne diseases.
38. Through the period, nine WASH partners have collected 3,536 m³ of solid waste with the support of 365 workers, serving 3,344 sites, 185 schools and seven humanitarian service delivery points. During the ceasefire, it was not possible to decongest the temporary dump sites, and by the end of June, all sites were full to overflowing, machinery was mainly non-operational due to a lack of parts, and limited medical waste management was able to take place. UNICEF took leadership of the South Gaza primary waste collection in Q2.
39. Following the ceasefire a guidance on decommissioning latrines was developed and piloting of a "self-build" of latrines was conducted. Overall, the sanitation response suffers from de-prioritization and restrictions on materials to enter.
40. In response to the large-scale militarized operation in the northern West Bank, the Cluster also conducted multiple damage assessments and participated in a multi-sectoral needs assessment (<https://drive.google.com/file/d/1lkzCzYfxMN4OgXxR-1F-pfpEbEk9k1q/view?usp=sharing>) across 11 IDP collective centres in Jenin and Tulkarem, identifying key gaps, challenges, and service delivery concerns to inform the response. Following the displacement of nearly 40,000 individuals from camps in the northern West Bank, the WASH Cluster collaborated with the Shelter Cluster and Food Security Sector (FSS) to carry out a joint household-level assessment, surveying more than 3,000 households. The results of this assessment are currently being finalized for release.
41. To improve access to water for 158,008 individuals, partners installed 714 storage tanks, installed or rehabilitated 116,218 meters of water networks, distributed 18,112 m³ of water, and supplied 18,400 litres of chlorine. Nine service providers also received operation and maintenance kits, and six trainings were conducted. In hygiene, 4,963 kits were distributed, benefiting over 25,000 people. Sanitation support reached nearly 40,000 people through the installation of 445 latrines, 4,125 meters of sewer lines, and operation and maintenance support to four service providers. Solid waste interventions supported over 50,000 individuals, with the collection of 483 tons of waste and the distribution of 1,097 containers. Hygiene promotion efforts, including four community sessions, reached 90 people. Additionally, six health care facilities and three schools benefited from WASH infrastructural upgrades.
42. Monthly MUAC measurements analyses have been used to triangulate partner screening data and flag hotspots for targeted support and advocacy, ensuring that the response remains adaptive and evidence driven.
43. While this reflects significant progress, additional efforts are underway to expand access and close the remaining coverage gap. In May and June, more than 5 per cent of screened children were found to be acutely malnourished, up from around 2 per cent in February during the ceasefire – a clear indication of the deterioration of the situation and underscoring the urgency of scale-up efforts.
44. In Gaza, the focus remains on life-saving interventions under conditions of extreme access constraints, rising malnutrition, and widespread displacement. In the West Bank, efforts are centered on prevention, building local capacity and surveillance. Continued coordination, flexible programming, and sustained support will be essential to meet growing needs and maintain service delivery across both contexts.
45. However, cyclical displacement orders have significantly disrupted the education response. Between 1 January and 30 June, 327 Temporary Learning Spaces (TLSs) were forced to close, affecting approximately 127,072 enrolled learners and 3,610 teachers. While some TLSs closed temporarily, others were permanently shut down or destroyed during military operations that often follow displacement orders.

46. Additionally, severe fuel shortages, especially in the second quarter, affected partners' capacity to supervise activities, reduced the use of generators needed to power devices, and disrupted group activities that depend on electronic tools, such as loudspeakers. Compounding these challenges, the lack of electronic devices, inability to charge equipment, and poor internet connectivity severely limited learners' access to distance learning opportunities. Meanwhile, funding shortfalls led to the closure of 161 TLSs, as partners were unable to sustain operations. Additionally, the majority of teachers continue to work voluntarily without incentives, significantly affecting their morale, motivation, and long-term engagement in the response.

47. Children at high risk of psychological distress received individualised support through one-on-one sessions. Seven awareness sessions targeting parents, caregivers, and education staff benefited 112 participants across Jenin, Tulkarem, and Tubas. Remedial education focused on literacy, numeracy, and cognitive skills was provided to 8,759 children. Additionally, 9,380 displaced children received learning, recreational, and stationery kits, which were distributed through 25 schools and 12 community-based organisations. In Jenin and Tubas, 29 teachers received training to support children with disabilities, including those with autism and learning difficulties, and 29 shadow teachers were recruited to assist in classrooms. Displaced children face additional barriers, including overcrowding in alternative schools, shortages of supplies, and safety concerns. Access the full report here: <https://reliefweb.int/node/4160869>.

48. Despite immense challenges, including ongoing bombardment, repeated displacement, and the collapse of public services, child protection partners have delivered a wide range of responses. Over 216,000 children (55 per cent girls) reached with structured mental health and psychosocial support (MHPSS) activities. These included group-based sessions, individual counselling, psychological first aid (PFA), art therapy, and drama-based healing, all aimed at helping children and families cope with displacement, loss, and ongoing violence. 58,752 caregivers (76 per cent women) also provided with positive parenting sessions to strengthen emotional bonds and promote child wellbeing under extreme pressure. Child protection case management reached 8,780 children (4,516 girls; 4,264 boys), including unaccompanied and/or separated children (UASC), children with disabilities (731), and survivors of GBV. In parallel, 652 children (including 9 with disabilities) were supported through emergency alternative care, while 1,274 children (635 girls; 639 boys) were successfully reunified with their families. Cash-for child protection assistance reached 8,220 children (4,252 girls; 3,968 boys), and 1,018 caregivers (569 women; 449 men), helping prevent family separation and mitigate protection risks amid severe economic hardship. Additionally, 1,637 children and caregivers benefited from emergency non-food items, and 3,383 children (including 181 children with disabilities) received legal assistance, including birth registration support. Community-level protection and prevention efforts continue to scale up: 165,899 children (53 per cent girls) and 523,921 caregivers (53 per cent women) received Explosive Ordnance Risk Education (EORE), building awareness of how to avoid injury and death from explosive threats. An additional 497,621 individuals (19,146 girls, 17,320 boys, 242,748 women, and 218,407 men) were reached with community sessions on child protection risks.

49. In addition, winter clothing kits were distributed to 749 children (48 per cent girls), and 61 children (59 per cent boys) with conflict-related injuries or disabilities received assistive devices or rehabilitation. Prevention and awareness efforts engaged 7,613 individuals, including 6,041 children (57 per cent girls) and 1,572 adults (84 per cent women), in sessions addressing gender-based violence, family separation, and other protection risks. EORE reached 1,708 individuals, including 927 children (64 per cent girls) and 781 adults (83 per cent women). Additionally, 2,726 recreational kits were distributed to support children's emotional recovery and resilience. To strengthen systems, 68 caseworkers were trained in emergency case management, 321 protection staff participated in well-being sessions, and 98 education, WASH, and state actors received training on child protection and MHPSS approaches.

50. As many as 26 caseworkers participated in specialised training on child protection case management in partnership with UNICEF, enhancing adherence to inter-agency standards. A five-day joint training brought together 33 CP and GBV caseworkers to support child survivors of GBV, co-led by the CP AoR, GBV AoR, UNICEF, and the International Rescue Committee (IRC). Additionally, 27 participants completed a three-day Training of Trainers on positive parenting. The CP AoR conducted a three-day CPIMS+ training for 165 case workers across Gaza and the West Bank. In the West Bank, 65 frontline workers received training on MHPSS under the "Talk to Me" initiative, and 27 trainers were prepared to promote positive parenting. To strengthen intersectoral collaboration, the CP AoR led Safe Identification and Referral trainings for 30 WASH actors, 20 Site Management staff, and 43 Education sector personnel.

51. Despite ongoing efforts to scale up and coordinate essential child protection services across Gaza and the West Bank, the CP AoR continues to face a critical funding shortfall that puts these life-saving interventions at risk. As of mid-year, only 7.5 per cent of the \$121.2 million appeal for Gaza has been met, and just 12.8 per cent of the \$16.84 million required for the West Bank has been secured. This leaves a combined funding shortfall of nearly \$127 million, threatening the continuity of life-saving child protection services for most vulnerable children and their families.

52. Fuel shortages and extensive insecurity are crippling the ability to reach children in need, follow up on critical protection cases, and respond to urgent referrals. In many areas, services are being delivered on foot under dangerous conditions, as vehicles can no longer operate. Safe spaces for children remain destroyed, looted, or inaccessible. The situation is particularly dire for children without parental care. Both residential and kinship-based alternative care arrangements are stretched beyond capacity, struggling to meet even the most basic needs. Food, clean water, and support for children with disabilities are critically lacking. Malnutrition is on the rise, and the absence of inclusive services only deepens the protection risks faced by children.

53. Of the total, 129,530 are attributed to the West Bank.

54. 41,320 for WB and 37,25 for Gaza Strip.

55. Nutrition cluster's March result has not been finalized. It is applicable to all Nutrition indicators.

56. This includes 44,425 children who received vitamin A in the West Bank since the beginning of 2025 (Females: 22,159, and Males: 22,266).

57. The current result reflects the highest number of beneficiaries reached with High Energy Biscuits during the period from January to June.

58. High Energy Biscuit (HEB) distribution is not an activity that is done by the Nutrition Cluster.

59. The current result reflects the highest number of children reached with Micronutrient Powder during the period from January to June.

60. The supplementation includes iron and multiple micronutrients (MMNs) to address micronutrient deficiencies and reduce the risk of anaemia among pregnant and breastfeeding women (PBW).

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62. This result is currently under review. Due to the fluid and volatile operational context in the Gaza Strip, the delivery and reach of educational services are subject to constant change. As a result, the reported figure may not reflect the situation on the ground in full. Efforts are ongoing to verify and refine the data in line with consistent data verification and the prevention of double-counting.

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64. The calculation method for WASH is cumulative for the first half of the year (mid-year reporting period), whereas for the WASH Cluster, it reflects the maximum monthly figure within that period.

65. PSEA indicator is placed under cross-sectoral results as for UNICEF State of Palestine Office, PSEA unit is separated from Child Protection as an independent cross-sectoral unit.

66. While the 2025 emergency appeal shows a decrease in the number of people to be reached, the financial ask has increased. This is due to a prioritized targeting approach adopted by the clusters and UNICEF. The 2025 response is designed to balance vertical and horizontal expansion – intensifying support for those most affected (vertical expansion) while maintaining essential services across the broader affected population (horizontal expansion). This approach allows for more sustained, comprehensive assistance over an extended period, ensuring continuity of services to better address the evolving needs of vulnerable communities.

67. The cross-sectoral budget line item covers risk communication and community engagement, accountability to affected populations, protection from sexual exploitation and abuse, gender and disability. The budget for social and behaviour change, however, is mainstreamed across the various programmatic sectors, as is the budget for programme monitoring and emergency preparedness.