

FLASH APPEAL

OCCUPIED PALESTINIAN TERRITORY

2023 HUMANITARIAN
PROGRAMME CYCLE
October – December 2023

FIRST REVISION
NOVEMBER 2023



PHOTO ON COVER:

Sheikh Redwan Neighborhood / Gaza city, 8 October 2023.
Photo: Bashar Taleb

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At a glance

PEOPLE IN NEED



3.1M

PEOPLE TARGETED



2.7M

REQUIREMENTS (US\$)



1.2Bn






























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Sources: ESRI, OCHA, OSM, UNGIS.

	PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
GAZA	2.2M	2.2M	1.1Bn
WEST BANK	0.9M	0.5M	95.4M











































Total people targeted and funding required

by cluster

CLUSTER	FUNDING REQUIREMENTS	TARGETED PEOPLE
Food Security 	303.8M 	2.34M 
Health and Nutrition 	227.5M 	2.5M 
Shelter and Non-Food Items 	209.2M 	1.4M 
Water, Sanitation and Hygiene 	148.6M 	2.5M 
Education 	114.5M 	0.53M 
Multi-purpose Cash Assistance 	101.1M 	1.15M 
Protection including AoRs 	50.6M 	1.4M 
Coordination and Support Services 	61.9M 	-
Logistics 	11.2M 	-
Emergency Telecommunications 	0.8M 	-

People targeted and funding required

by cluster distributed by area

CLUSTER	FUNDING REQUIREMENTS		TARGETED PEOPLE	
	Gaza	West Bank	Gaza	West Bank
Food Security 	284.3M 	19.5M 	2.2M 	0.14M 
Health and Nutrition 	212.7M 	14.8M 	2M 	0.5M 
Shelter and Non-Food Items 	203.9M 	5.3M 	1.4M 	0.01M 
Water, Sanitation and Hygiene 	139.1M 	9.5M 	2.2M 	0.32M 
Education 	105.1M 	9.4M 	0.48M 	0.05M 
Multi-purpose Cash Assistance 	97.9M 	3.2M 	1.11M 	0.04M 
Protection including AoRs 	35.4M 	15.2M 	1.1M 	0.1M 
Coordination and Support Services 	43.3M 	18.6M 	-	-
Logistics 	11.2M 	-	-	-
Emergency Telecommunications 	0.8M 	-	-	-



GAZA, OCCUPIED PALESTINIAN TERRITORY

Flames and smoke billow during Israeli strikes in Gaza. 19 October 2023
Photo: WHO

Introduction

This is the first update of the Flash Appeal for the Occupied Palestinian Territory (OPT), originally published on 12 October 2023. It identifies a financial requirement of approximately US\$1.2 billion to meet critical needs for 2.7 million people across the OPT, the 2.2 million population of the Gaza Strip and 500,000 from the West Bank, including East Jerusalem from October – 31 December 2023. It outlines the minimum to prevent further loss of life considering the ongoing siege and bombardment of Gaza and the escalating situation in the West Bank. UNRWA's requirements are included.

For humanitarian actors to implement this plan the following operational conditions must change:

- Humanitarian actors must have safe and sustained access to all people in need, across the Gaza Strip and the West Bank, including East Jerusalem.
- Sufficient quantities of fuel must be made available for humanitarian operations.
- The flow of humanitarian assistance into Gaza must drastically increase.
- Funding must be timely and flexible to allow humanitarian actors to adapt programming to a highly dynamic context.

The magnitude of this response and operational constraints are beyond what has been seen before in the OPT and in other contexts. Coupled with typical lag times between commitment and receipt and expenditure of funds means we do not expect to see full implementation of the plan by the end of 2023. Outstanding response priorities will be rolled into the 2024 Humanitarian Response Plan or appeal extension.

For Gaza, the appeal replaces the 2023 HRP as regular emergency programming cannot continue, and the situation requires new operational frameworks and modalities. For the West Bank, the appeal complements the plans outlined in the 2023 HRP.

Crisis overview

The 2023 Humanitarian Response Plan (HRP) identified 2.1 million Palestinians as requiring assistance in the OPT, where humanitarian needs have been primarily driven by the protracted Israeli military occupation, 16 years of the Gaza blockade, internal Palestinian political divisions, and recurrent hostilities between Israeli security forces and Palestinian armed groups. This represented 58 per cent of Gaza residents and one quarter of West Bank residents. Since 7 October 2023, the situation in Gaza has changed dramatically and is directly affecting the West Bank.

Gaza

On 7 October 2023, Palestinian armed groups in Gaza launched more than 3,500 missiles and rockets towards Israel and breached the perimeter fence of Gaza in multiple locations. Members of armed groups entered Israeli towns, communities, and military facilities near the Gaza Strip, killing and capturing members of Israeli forces and civilians. The Israeli military declared a "state of war alert" and began striking targets in the Gaza Strip.

Israeli authorities have confirmed that the 7 October attack is the deadliest in Israel in decades, about 1,400 Israelis and foreign nationals, including women, children, and older people, were killed in Israel by members of Palestinian armed groups. According to the Israeli Ministry of Health, at least 5,400 people were injured, the vast majority on 7 October. Two hundred forty-two Israelis were taken hostage and are being held captive in Gaza, including women, 30 children, older people, foreign nationals, and Israeli forces, according to media reports.

The United Nations has repeatedly and continues to condemn these horrific attacks and calls for the immediate and unconditional release of those held in Gaza.

Israeli forces responded with air strikes and on 9 October the Government of Israel ordered a “total siege” on Gaza, cutting off water and electricity connections. Between 8 October and 5 November, at least 9,488 Palestinians including 3,900 children and 2,430 women, were killed and 24,173 injured, according to the Gaza Ministry of Health. Another 2,000 are reported missing in Gaza, including 1,250 children. Most are presumed to be trapped under rubble. By way of comparison, an estimated 9,000 civilians have been killed in six months of war in Sudan and approximately 9,700 civilians in Ukraine since 24 February 2022 when the Russian Federation invaded Ukraine.

The first trucks carrying humanitarian assistance were permitted in on 21 October and the response to date has been limited throughout Gaza due to both insecurity and access constraints. **The humanitarian community has not been able to keep pace with the scale and depth of needs, and the mounting sense of desperation is increasing security risks and contributing to a breakdown of law and order.** Impediments imposed by the parties have prevented humanitarians from reaching a large portion of the population of Gaza, particularly in areas in the north, and from securing entry of sufficient humanitarian aid into Gaza. Some Cash and Voucher Assistance (CVA) has been delivered across the Gaza Strip, amid increasing operational challenges, but only for the most essential needs of a fraction of those affected. The situation is driving some elements of the population to looting, including of UN installations, to obtain basic life-saving commodities.

Israeli orders to evacuate north and central Gaza to areas in south Gaza amid the ongoing military operations have resulted in the displacement of more than two-thirds of the entire population of Gaza. The UN estimates approximately 1.5 million people in Gaza, approximately half women and children, have been internally displaced. Half of these IDPs are sheltering in 149 UNRWA facilities, most of which are at nearly four times their capacity. Others are sheltering in hospitals, mosques, churches, schools and public buildings, and the remainder with host families. Some are simply living on the streets, often

close to UN installations in the hopes of being given some protection.

The Government of Israel continues to warn people to evacuate from the north but there is nowhere to accommodate new arrivals; nowhere safe to go. In the north and Gaza City, an estimated 160,000 IDPs are housed in 57 UNRWA facilities even though UNRWA is no longer able to provide services in these areas. There is no current accurate information on their needs and conditions since the first Israeli evacuation order on 13 October.

The massive displacement has also been driven by the loss of homes and extensive damage to residential structures. More than half of the housing stock has been totally destroyed or damaged, including 35,000 units which are now uninhabitable. Priority will need to be given to rubble renewal.

Half of the 1.5 million IDPs are sheltering in 149 UNRWA facilities, most of which are at nearly four times their capacity. Others are sheltering in 221,000 hospitals, mosques, churches, schools and public buildings, and the remainder with host families. Some are simply living on the streets, often close to UN installations in the hopes of being given some protection. The Government of Israel continues to warn people to evacuate from the north but there is nowhere to accommodate new arrivals; nowhere safe to go. An estimated 160,000 IDPs are housed in 57 UNRWA facilities in the north and in Gaza city although UNRWA is no longer able to provide services in those areas. There is no current accurate information on their needs and conditions since the first Israeli evacuation order on 13 October.

Destruction of basic infrastructure has made life unbearable in Gaza and severely disrupted critical services. Since 11 October, Gaza has been under a full electricity blackout, following Israel’s halt of its electricity and fuel supply to Gaza, which triggered the shutdown of Gaza’s sole power plant. This has forced essential service infrastructure to rely on backup generators, which are limited by the scarcity of fuel in Gaza. Damage to cell towers has severely inhibited internet and communications, preventing effective communications with communities about assistance. Complete disruptions of communications and internet

services, including satellite connections, have three times been imposed by Israel, creating panic and severely disrupting access to essential services and humanitarian efforts.

Health facilities are overwhelmed, and medical stocks are in short supply as hospitals and health care are increasingly targeted by attacks. WHO has documented 102 attacks on health care damaging 39 health-care facilities and 31 ambulances. Nearly half of the 35 hospitals with inpatient capacities and 71 per cent of all primary care facilities across Gaza are not functioning due to damage or lack of fuel, including 74 per cent of those located in Gaza City and 92 per cent of those in north Gaza. All operating hospitals and clinics are affected by the severe fuel shortages, leading to stringent rationing.

The inability to access potable water is driving people to rely on unhealthy water sources. The unsanitary conditions across Gaza, especially in heavily overcrowded IDP locations and the lack of availability of basic personal and domestic hygiene items, create a high-risk environment for public health. Of particular concern is an outbreak of infectious acute watery diarrhea (AWD); reports of escalating diarrhea cases, upper respiratory infections and skin diseases are already common. Since the onset of the bombardment the water utility is only able to operate half of the groundwater wells, when fuel is available, and the drinking water sources have been closed or intermittently operated. Damage from strikes has severely impacted the ability to distribute water and no viable operation of water production is taking place north of Wadi Gaza, forcing distribution to rely on trucking when fuel is available, or animal transportation to critical IDP and host population centres. Sanitation and solid waste management is currently extremely limited, sewage overflow is reported in many areas adding to the public health risk across Gaza.

Gaza's food system has been stretched to the breaking point. More than half of the population of Gaza has been experiencing acute food insecurity since 2022, according to FAO. Food production has virtually halted as fishers cannot access the sea, farms are suffering huge damages, farmers cannot access

the fields safely, and animals cannot be fed. Food value chains and markets are being disrupted by the decline of production, halt to imports, depletion of productive inputs, and impossibility to move goods safely. Estimations of essential food commodities in the market are calculated in days, and security often inhibits transfer to shops. Hours-long queues are reported in front of the limited bakeries that remain operational, where people are exposed to airstrikes.

Nowhere is safe in Gaza. More than 625,000 children and adolescents in Gaza have been without access to education or safe spaces since 7 October. More than half of all school buildings have been damaged. These facilities, including those run by UNRWA, have in cases sustained direct hits. Children comprise more than half the population of Gaza and have been impacted disproportionately. Prior to the hostilities, Gaza already bore a heavy mental health burden, particularly among children. The level of toxic stress under which children and young people live is having a clear and significant impact on their psychosocial well-being.

West Bank

While attention since 7 October has primarily been focused on Gaza, the situation in the West Bank has been deteriorating and becoming increasingly volatile. Before 7 October, the UN recorded three "settler related incidents" a day – up from two each day in 2022 and one in 2021. Since 7 October, the average number of settler related incidents per day stands at eight. The level of intensity and brutality has also intensified, with reports of elevated use of live ammunition by settlers, arson, physical assaults, threats, blocking community entrances and attacks on Palestinian communities. Israeli settler violence has increased and includes the use of live ammunition, threats, the blocking of community entrances and attacks on Palestinian communities. Direct threats and violence by Israeli settlers against Palestinians are causing displacement and further aggravating an already coercive environment in Area C. Within two weeks, 111 households, comprising 905 people, including 356 children, were displaced from more than 15 different communities in the West Bank due to Israeli settler violence. This accounts for almost 55 per cent of all settler-related displacements since 2022.

The olive harvest season in the West Bank will largely be lost due to fear to venture into the fields.

Excessive force is being reported in relation to the increased number of Israeli military operations, clashes between Palestinians and Israeli forces, and in response to Palestinian protests and demonstrations. This has resulted in fatalities, injuries and a high number of arrests in the West Bank. The escalation in the West Bank has been marked by the utilization of airstrikes, drone strikes, and off-shoulder missiles on refugee camps which are densely populated urban areas. Since 7 October, 136 Palestinians, including 43 children, have been killed by Israeli forces (124) or settlers (eight). A total of 2,300 Palestinians, including 241 children, have been injured by Israeli forces, the majority of which occurred in the context of demonstrations.

Severe access restrictions have been imposed throughout the West Bank, including East Jerusalem.

These restrictions are particularly severe in areas near Israeli settlements and in the seam zone, isolating Palestinian communities and severely limiting their access to essential services including health and education. Access measures have also manifested in revoked access rights, as workers and traders with valid permits, are prevented from entering Israel and East Jerusalem through any checkpoints, this includes national staff members of humanitarian organizations.

By constraining movement and reducing the presence of humanitarians providing assistance, the closures are contributing to an increased coercive environment, and making it increasingly challenging to provide essential assistance to respond, exacerbating protection issues.

The full closure of the West Bank prevents an estimated 200,000 Palestinian workers from entering Israel, which will deprive the West Bank economy an estimated NIS 1.5 to two billion monthly. At the same time, clearance revenues from Israel to the Palestinian Authority are expected to drop significantly in October and November 2023, jeopardizing the Palestinian Authority's ability to pay salaries. The private sector in the West Bank is estimated to be working at 50 per cent capacity and trade with Israel or outside Palestine, which accounted for one-third

of the GDP of the West Bank economy, is lost. As a result, an increasing economic hardship in the West Bank is already prompting demand for humanitarian assistance and essential services among vulnerable and marginalized communities.

Intersectional impacts

The humanitarian consequences of the ongoing hostilities are exacerbating gender specific and intersectional risks and vulnerabilities. For example, the gender, age, disability, and minority status of a person play a key role in determining how they are affected by war and conflict, including their capacities, access to resources, and coping strategies. As of 2 November 2023, more than two thirds of the fatalities in Gaza are women and children. And, as the conflict unfolds, there are thousands of older people of both sexes confronting the impact of war, isolated and alone.

UN Women estimates that 735,000 women and girls have already been displaced from their homes in Gaza.¹ Internal displacement often creates gender related protection concerns. Internally displaced women are being disproportionately affected by the loss of livelihoods, housing, and land, placing them in a position of elevated protection risks. They have expressed an acute sense of vulnerability in relation to the safety and security needs of both themselves and their female family members. For some this is linked to the loss or separation from their male head of family; for many more the lack of dignified and safe bathing or latrine facilities has resulted in increased protection and health risks. Due to the large-scale destruction of homes, families are where possible also staying with host families, but the majority are in overcrowded shelters. Coupled with lack of food, water, and privacy, this has resulted in increased stress levels between families, parents and their children, and husbands and wives, creating increased child protection and GBV risks. It is also expected that the prolonged

electricity cuts and scarcity of water and cooking gas have already increased the domestic burdens for women, resulting in further pressure on their coping mechanisms that are already at breaking point.

Persons with disabilities in Gaza are also uniquely impacted and described difficulties in fleeing attacks, especially in the absence of effective warnings, as well as from the heavy destruction which made it particularly difficult to escape using their wheelchairs and other assistive devices. The lack of electricity has meant that elevators have not been functioning, making it effectively impossible for people with certain physical disabilities who live in high-rise buildings to leave their homes.² Older women, particularly those with disabilities, are likely to face the highest level of negligence and violence.

According to analysis undertaken by women-led organizations in similar situations, women who are internally displaced perceive access to food and clean water as top priorities. They emphasize the need for food security and nutrition interventions that meet the needs of different family members including pregnant and lactating women, women and girls with disabilities, older people, and children. Women also highlight the need for livelihood interventions, most immediately through unconditional cash assistance that is seen as essential to support women IDPs attend to urgent needs of their families. Non-food items (NFIs) and dignity kits that are gender and age sensitive and consider the needs of all including female adolescents, has been cited as critical. Unanimously and in previous escalations, women report the need for psychosocial assistance for themselves and their children. Many mothers have reported in the past that their children have lost their ability to speak and have experienced bed-wetting, while their sleeping cycle is also heavily compromised.

Securing easy access for women and girls to comprehensive health services, including sexual and reproductive health services is of key importance.

There are around 540,000 women of reproductive age in Gaza, among whom 50,000 are currently pregnant, and over 5,500 women are expected to deliver in the next month; at least 825 (15 per cent) of whom are expected to experience a complication requiring

emergency obstetric care. With lack of clean water and adequate sanitation facilities, pregnant and lactating women, as well as women who have recently given birth, face elevated threats; they also have higher daily water and caloric intake requirements. For women and girls, among them a quarter million adolescent girls aged 10-19, the destruction of washing facilities or the reliance on shared community facilities, can also generate issues related to privacy, increased safety risks, and menstrual hygiene concerns with risks linked to reproductive health and urinary tract infections. There has been reporting that some women in Gaza have resorted to hormonal pills to delay their menstruation. Providing specific responses to protect families from the spread of contagious diseases in host communities and designated emergency shelters - and making medicine and services available for IDPs with equitable access for men and women also remain key priorities. GBV prevention and response activities continue to be critical services. Following the agreed upon GBV case management standard operating procedures (SOPs) and referral pathways, GBV-related services will prioritize those most at risk such as IDP women and children, female widows, female and male child orphans, female adolescents, and women and girls with disabilities.

GBV prevention and response activities and services are critical, both to the pre-existing case load as well as to new cases. Following the agreed upon GBV case management standard operating procedures (SOPs) and referral pathways, GBV services should prioritize those most at risk such as IDP women and children, female widows, female and male child orphans, female adolescents, and women and girls with disabilities.

The crisis has also resulted in increased number of women who are now “new widows” and in the number of households headed by women. In the OPT, widowed women lack protection in accessing rights to child custody and guardianship, as well as control over inheritance from a deceased spouse. In contrast, female headed households in the OPT are eligible for permanent social safety nets, however minimal.

Civilian men, particularly young men, remain more vulnerable to loss of life and injuries during the hostilities. They are more engaged in the public sphere

and participate in providing first response services (at times on the scene) and support their communities. Men and boys face higher threats when it comes to the risks of the Explosive Remnants of War (ERW).

Ongoing assessments

The Flash Appeal response strategy is based on an adapted version of the Inter-Agency Contingency Plans (IACP) for Gaza and the West Bank. It builds upon the 2023 Humanitarian Needs Overview (HNO) and comprehensive Multi-Sectoral Needs Assessment (MSNA), as well as on information from UN Agencies and partners on the ground, including UNRWA staff who have continued to provide essential services in the Gaza Strip.

The situation is unfolding rapidly, and staff continue to have limited access to communication and restricted movement due to the ongoing hostilities and insecurity. A Needs Assessment and Analysis Group was established under the Assessment and Information Management Working Group (AIMWG), which currently focuses on Secondary Data Review. Subject to improvement in the security situation, OCHA aims to conduct inter-cluster/agency needs assessments in collaboration with Cluster Coordinators in complement with cluster-specific assessments. Assessment will aim to evaluate the severity and scale of humanitarian needs in the Gaza Strip. In cooperation with UNOSAT, OCHA plans to collect and analyse high-resolution satellite imagery to identify and quantify damage to urban and agricultural areas.

Operational assumptions

The plan is based on a set of operational assumptions which assume changes to the current operating environment. Since the significant intensification of the conflict between Palestinian armed groups and Israel on 7 October, nearly a complete siege has been put in place around Gaza. Communications via cellphone, internet and satellite connection is intermittent and, at times, Gaza is in a complete communications blackout. Response to date has been extremely challenged throughout Gaza due to insecurity and access challenges. UNRWA, supported by some Agencies, has made extraordinary efforts to provide life-saving assistance to hundreds of thousands of displaced people. The humanitarian response has been further challenged due to the reduced operational capacities of many UN agencies and NGOs partners following the necessity to find safety in the southern part of the Strip.

Humanitarian actors must have safe and sustained access to all people in need, across the Gaza Strip and the West Bank.

The ongoing airstrikes and ground invasion of Gaza has made the north of Gaza nearly inaccessible to humanitarian actors, limiting the provision of humanitarian assistance and resulting in partial knowledge of the scope and scale of needs. Severe access and movement restrictions imposed by Israeli forces, including for humanitarian actors, has virtually cut off areas of the West Bank and inhibited the provision of assistance, access to basic services, and the ability to restock required supplies.

Sufficient quantities of fuel must be made available to allow for humanitarian operations to function. At the time of writing, humanitarian operations have been significantly constraint, and could be forced to halt, due to lack of fuel. Without fuel and in the absence of energy on which to rely, the already limited existing services such as hospitals, desalination plants, water

and wastewater pumps, bakeries, garbage collection among others will collapse. Without fuel humanitarian organizations will also be unable to deliver assistance.

The flow of humanitarian assistance into Gaza must be increased. At the time of writing, the sole means of entry and exit to Gaza is via Egypt. Through humanitarian negotiations with the parties, agreements have been reached on minimal humanitarian exceptions to the total siege. This has included the opening of two water pipelines (not reaching the North), a limited number of aid convoys reaching Gaza through Rafah, based on a mechanism agreed by Egypt and Israel for the verification of the cargo and the distribution of assistance within Gaza by the UN and humanitarian partners. The revised Flash Appeal assumes that Israel will enable the movement of more supplies into Gaza, including fuel, by approving an increased number of trucks to arrive in Gaza and by facilitating the expedited verification / inspection process and it assumes continued cooperation with the Egyptian authorities and the Egyptian Red Crescent to progressively increase humanitarian supplies.

Response strategy

Response priority

The main response priority is to scale the humanitarian response to address the current level of needs across OPT. The revised appeal contains activities to meet immediate life-saving humanitarian needs until the end of the year. Focus will be on supporting existing structures, services, and capacities where feasible. Repair, rehabilitation and/or livelihoods activities are only included where they have been deemed more cost effective, feasible and appropriate. Early recovery and reconstruction considerations are anticipated to be reflected in subsequent plans when the situation allows and following damage assessments.

Response approaches

Humanitarians will employ a set of strategies, based on the planning assumptions, operational capacity, and access realities, to scale up and prioritize the life-saving assistance for the period 1 October until 31 December 2023.

The humanitarian community in the OPT aims to uphold commitments to the centrality of protection through protection mainstreaming, accountability to affected populations and monitoring of the protection environment. Protection serves as the foundation for the overall response which will be inclusive and gender-responsive with a specific focus on gender-based violence (GBV). A gender and intersectional lens will be applied, with historically marginalized and vulnerable groups taken into specific consideration.

The response will put communities at the centre. Partners under this appeal will work to further scale accountability to affected people (AAP); communications with communities (CwC); support prevention of sexual exploitation and abuse (PSEA) through the Sawa hotline and activities focused on sensitization, training, monitoring; and support civil society organizations to re-group and re-build, particularly those that are women and youth led/focused.

The ultimate responsibility for the provision of relief to the population impacted by a humanitarian crisis rest with the Government that controls the affected territory. The OPT Flash Appeal addresses gaps in the fulfilment of those responsibilities while seeking to work in coordination with efforts made to alleviate humanitarian needs and enhance the rights of the affected population.

Making assistance accessible to all people in need in Gaza including delivering in the hard-to-reach areas in Gaza: The humanitarian community will continue to scale up assistance and aid people in need, wherever they are. As the humanitarian community strives to address humanitarian needs across the Gaza Strip, also to avoid creating pull factors to certain areas, the strategy includes the re-establishment of a humanitarian presence in central and north Gaza,

negotiations for additional access points to Gaza and prioritizing aid to currently accessible areas. Given the severity of needs in hard-to-reach areas such as in the north of Gaza, humanitarian partners have exerted specific efforts to reach these locations, utilizing the Humanitarian Notification System to inform parties to the conflict of their planned movements and operations.³ The humanitarian community will continue to negotiate access for convoys with relief items to people in areas that are currently inaccessible. To operate effectively and meet the needs of the wounded and sick, the facilitation of movement of medical staff and ambulances, as well as necessary medical supplies and fuel, will be required. Field hospitals will be established but these cannot replace the existing capacity of the health system which needs to be reinforced through deployment of additional medical capacity to existing hospitals. Access to emergency nutrition interventions will be scaled up including blanket supplementary feeding, infant and young child feeding, micronutrient supplements, and treatment of severe acute malnutrition.

Responding to the displaced families inside and outside emergency shelters, including with host communities in Gaza: The scale of displacement has overwhelmed existing resources, leaving many vulnerable families without access to necessities, including food, clean water, and electricity in Gaza. The destruction has severely disrupted the food supply chains in Gaza and families face acute food shortages. The response approach includes multi-purpose cash (MPC) and sectoral cash assistance in areas where it is feasible and appropriate. Where cash assistance is not possible, in-kind assistance (e.g., food rations and NFI kits) will be provided, or households will be supported by vouchers for relief items. Emergency supply of water includes piped water supply, the provision of bottled water, trucked water, temporary communal water tanks and collection points, household jerry cans and point of use water treatment to ensure safe storage. Household and individual hygiene kits are provided to IDP and host families, and Designated Emergency Shelter (DES) and other UNRWA premises and Communal Centres are supported with cleaning kits, and women's needs for appropriate menstrual hygiene management. In addition, partners will provide

other assistance, including protection services, to displaced and non-displaced people, including women, children, people with disabilities, older persons, both survivors and those at risk of gender-based violence, and undocumented people.

Ensuring winterization and winter-specific activities are prioritized: Critical winterization activities aimed at providing access to warm, safe, and dignified living conditions for displaced and non-displaced people will be prioritized. Winterization includes the distribution of NFIs, clothes, and emergency shelter materials to provide covered living space, including in outdoor areas within UNRWA facilities, and through self-built IDP shelters, protection or extension of host family dwellings, and winterized family tents to facilitate urban self-settlement on or near damaged property, as well as protection and sealing-off of damaged housing units. Provision of essential elements to DES aim at ensuring minimum adequate services for IDPs, including showers, mobile latrines, and partitions for privacy and one-off cash re-integration assistance for families unable to return to destroyed or uninhabitable houses. For the West Bank, provision of shelter solutions for displaced families includes cash reintegration packages as well as temporary shelters.

Committing to put people, gender equality, and protection at the centre of the humanitarian response: Ensuring that humanitarian assistance in Gaza and the West Bank, including East Jerusalem, addresses the different needs of women, men, girls, and boys in vulnerable situations and from different marginalized groups. Each cluster has ensured that their proposed activities are principled, realistic, and feasible, as well as suitable and accessible for all gender and age groups. This will include measures to enhance AAP, PSEA, improve information sharing and risk mitigation for GBV linked to the humanitarian response. Communication about all forms of gender-based violence, including conflict-related sexual violence and human trafficking. Humanitarians will strive to ensure that the response is gender and age-sensitive and sex-, age- and disability-disaggregated data is routinely collected. Protection is promoted through all aspects of humanitarian programming.

Operational capacity

The coordination system has identified over 70 partners capable of delivering humanitarian assistance in Gaza and the West Bank during the current situation. Additional partners may join response efforts, depending on how the operational environment and access evolve. Within the OPT, there is a significant presence of national organizations, which make up 50 per cent of the total organizations currently providing humanitarian aid. Additionally, more than 20 international NGOs and 17 UN agencies have operational capacity within the OPT.

Response monitoring

The UN and its humanitarian partners are thoroughly committed to transparent, principled, and efficient aid operations. Humanitarian partners will continue to monitor the response implemented under this Flash Appeal to ensure that it is timely, efficient, fit-for-purpose, at the required scale, and accountable to people impacted by the hostilities.

As part of the revision of the Flash Appeal, clusters have reviewed and updated activities proposed in the first iteration of the Flash Appeal. Indicators to measure progress towards cluster targets are currently under development.

Overall progress against the Flash Appeal—including gaps and challenges—will be discussed regularly by the Jerusalem Crisis Management Team (JCMT). Members of the Humanitarian Country Team Plus will be kept abreast of the current response. The operational presence of partners, activity achievements, and gaps in the response will be monitored by the National Inter-Cluster Coordination Group (NICCG) and reported to the JCMT.

Tracking of funding going towards the Flash Appeal will be reported through the OCHA Financial Tracking Service.

Various information products and analyses are currently being produced on a regular basis to provide updates on the needs and response, including daily Flash Updates, Humanitarian Response Snapshots and Dashboards to report on the status of humanitarian needs, response, and gaps, as well as funding and funding gaps.

Costing

Under the leadership of the Humanitarian Country Team (HCT), the National Inter-Cluster Coordination Group (NICCG) launched a two-year pilot transition to unit-based costing (UBC) in 2023 for the 2024 HRP. The revised Flash Appeal draws upon the work done by the NICCG and partners and employs a UBC methodology. Further, efforts will be made to ensure that the humanitarian response is aligned with humanitarian-development collaboration and its linkages to peace efforts.



GAZA, OCCUPIED PALESTINIAN TERRITORY

Many families were displaced to UNRWA school in Rafah city, southern the Gaza Strip to take shelter during the escalation. 2 November 2023.
Photo: UNICEF

Priority needs and response

Health and Nutrition



REQUIREMENTS (US\$)	NUMBER PEOPLE TARGETED	NUMBER OF IMPLEMENTING PARTNERS
\$227.6M	2.5M	31

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Priority humanitarian needs

- Trauma and emergency health-care services including early post-operative rehabilitation for thousands of injured.
- Procurement of trauma and emergency care drugs, medical disposables, laboratory supplies, medical kits, and equipment which are in critical shortage which is hindering case management.
- Electricity or fuel supplies at key hospitals and for ambulance services to continue providing life-saving services.
- Access to essential primary and secondary health-care services to the general affected population, especially women, children, chronic illness patients and survivors of GBV. Approximately 64 per cent (46/72) of primary health care facilities and 34 per cent (12/35) of hospitals in Gaza are not functioning whilst 29 communities in West Bank have not had access to mobile clinics due to checkpoint closures and movement restrictions.
- Existing health-care facilities have various degrees of operation due to damage, security concerns and fuel shortage as a result most are operating beyond capacity thus the need for additional bed capacity and human resources. Disrupted disease surveillance, lack of adequate water and sanitation, overcrowded shelters pose significant risk of outbreaks of infections, including the vaccine-preventable diseases.

- Mental health and psychosocial support to the highly traumatized population, amongst them to the frontline health workers, including provision of psychotropic medicines for those suffering from mental health disorders.
- Fragile nutrition situation of infants, young children, and pregnant and lactating women (PLWs) is under extreme threat of worsening due to shock, stress and deteriorating access to food, water, essential lifesaving services and positive feeding practices.
- Access to essential prevention, early detection, and treatment of malnutrition services to children under five years and pregnant and lactating women in Gaza and West Bank. Given the suspension of services, these children and women face an increased risk of malnutrition, disease, and death.

Planned response

- Maximize and support the service delivery capacity of existing pre-hospital, hospital, and post-hospital trauma case management of the injured through procurement of emergency and critical care drugs, medical disposables, laboratory supplies, medical kits, equipment, and workforce. Complement the existing capacity with the deployment of selective Emergency Medical Teams allocated to key hospitals and establish three field hospitals. Provide early access to multidisciplinary post-operative care and rehabilitation services for the injured including limb reconstruction and assistive devices.

- Provide fuel to key hospitals, primary health-care centres, and ambulance services to ensure that they can maintain access to essential services, in the absence of electricity reconnection.
- Replenishment of prepositioned supplies is also needed in the West Bank where movement restrictions are routinely put in place during military operations and other similar incidents. As the logistical challenges of accessing Gaza are ever present it is important to support emergency preparedness by immediately replenishing depleted prepositioned supplies.
- Ensure undisrupted access to basic health-care services for isolated communities in the West Bank.
- Maximize and support the existing capacity and provision of essential primary and secondary health-care services including treatment of adult and childhood illnesses, management of non-communicable diseases, preventive, and curative nutrition interventions, sexual and reproductive health, maternal, newborn and child health services and clinical management of GBV survivors. Referral pathways must be reestablished; medical evacuations must be initiated and specialty medical referral outside the Gaza Strip be resumed.
- Put in place measures in place to scale-up early warning alert and response, surveillance, diagnostic and response capacity for communicable diseases. Address health promotion and infectious disease prevention needs.
- Provide mental health and psychosocial support to the general population including the health-care workers and GBV survivors as well as provide psychotropic medicines to those with mental health disorders.
- Provide nutrition counselling and support to caregivers of infants and young children on feeding and care, including providing breastmilk substitutes to children in need as per international guidelines.
- Provide micronutrient supplementation to children under five years including vitamin A supplementation, multiple micronutrient powders and lipid-based supplements and multiple micronutrient supplements to pregnant and breastfeeding women.
- Provide life-saving early detection and treatment to children with severe wasting and moderate wasting (who are also at high risk) with ready-to-use therapeutic foods (RUTF).
- Establish linkages with the cash or voucher assistance interventions to improve access to nutritious foods for young children and pregnant and breastfeeding women during the first 1,000 days.

Response approach

- The Health Cluster will coordinate thirty-one partners in providing critically needed life-saving humanitarian health response in Gaza and the West Bank.
- The priority needs and response activities have been identified based on information from the service providers and the partners.
- There will be regular monitoring of supplies being delivered to the service providers to keep track of gaps and adapt the response strategy accordingly.
- The main modality of response is through service delivery (48 per cent), followed by in-kind donations (21 per cent).
- Determinants of health and nutrition are inter-sectoral and as such the Health Cluster will engage with all the clusters to ensure comprehensive addressing of humanitarian issues affecting the health and nutrition status of the affected population.

Food Security



REQUIREMENTS (US\$)

NUMBER PEOPLE TARGETED

NUMBER OF IMPLEMENTING PARTNERS

\$303.8M

2.34M

16

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Priority humanitarian needs

- The scale of displacement has overwhelmed existing resources, leaving many vulnerable families without access to basic necessities, including food, clean water and electricity.
- The destruction has severely disrupted the food supply chains in Gaza. Families face acute food shortages. The lack of food is raising alarming concerns, demanding immediate action.
- Despite the existing difficulties, addressing the basic nutritional needs of the population is crucial and cannot be delayed. Emergency food assistance is needed to cover around 2.3 million people.
- The agricultural sector has been hugely damaged. The destruction of farms, livestock, and food storage facilities, severely affecting the agri-food system and the possibility of internal production. Urgent support is needed to help farmers and herders rebuild their lives, prevent further losses of animals, and restore production of perishable, nutritious food. This support can provide essential resources to restart farming/herding and fisheries activities and restore dignity.

Planned response

Gaza

- Scale-up provision of food assistance to the affected population; ensuring food availability is not only a fundamental humanitarian requirement but also a moral obligation essential for safeguarding the basic well-being and dignity of the individuals and communities affected by the ongoing conflict.

- Deliver essential inputs crucial for the survival of animals and to initiate the revival of agricultural, pastoral, and fisheries productions. These measures are paramount for reinstating the supply of essential nutritious foods, such as fresh vegetables, eggs, meat, and dairy. It is crucial to acknowledge that the food value chain has experienced substantial disruption owing to the adverse impact of the ongoing conflict.
- Provide essential support to the Gaza displaced labourers in the West Bank through cash assistance and food in-kind.

West Bank

- Provide food assistance to vulnerable populations and households with limited access to food, to prevent severe food insecurity and malnutrition.
- Deliver assistance to small-scale farmers and herders, to enhance agricultural productivity and promote sustainable food production.

Response approach

- The Food Security Sector operates through a coordinated effort involving numerous humanitarian partners, UN Agencies, local authorities, and local/international organizations. Regular sector meetings are held to strategize and coordinate priority needs and response activities to ensure a cohesive response. The Food Security Sector works with distributors and trusted partners to ensure the timely delivery of food-in-kind. Priority is given to high-energy supplies, including fortified food items, and canned food to address immediate nutritional needs among vulnerable populations. High-energy, nutrient-dense food items is prioritized to meet the immediate needs of children, pregnant women, and older persons, who are particularly vulnerable during crises.

- Feasibility of responses is assessed based on a combination of factors, including available resources, logistical capabilities, and the severity of food scarcity. We work closely with partners on the ground to gather accurate data, considering population size, dietary needs, and existing food stocks. Assumptions are continuously reviewed and adjusted based on real-time data to ensure the appropriateness of our response options. Response options are adapted based on changing circumstances and emerging needs.
- Food Security Cluster partners consist of UN Agencies and national and international NGOs

experienced in humanitarian assistance. These partners bring diverse skills and resources, enabling us to respond effectively. The main modality of the FSS response is through food in-kind (76 per cent), food voucher (12 per cent), livelihood support (10 per cent) and cash (2 per cent). Intersectoral collaboration is fundamental to FSS approach. Determinants of food security and nutrition are closely related to Health, Water, and Shelter, as such the Sector will engage with other clusters to ensure and to address a holistic approach ensuring a comprehensive response.



Protection

including Protection Areas of Responsibility (AoRs)

REQUIREMENTS (US\$)	NUMBER PEOPLE TARGETED	NUMBER OF IMPLEMENTING PARTNERS
\$50.5M	1.4M	40

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Priority humanitarian needs

In Gaza, the compounded effects of Israeli airstrikes, forced displacement, high concentration of IDPs arriving to shelters and host communities, and denial of access to services has led to the following protection risks:

- Family Separation.
- Presence of explosive ordnance.
- Loss of limbs and life.
- Gender-based violence.
- Intimidation, humiliation, forced isolation, and/or harassment.
- Discrimination and denied access to services.
- Abuse or exploitation of most vulnerable groups.
- Conflict and tension amongst the population.
- Destruction of livelihood or personal property.
- Psychosocial and emotional distress.
- Conflict and tension amongst the population.
- Denial of access to information.
- Restrictions to access resources, including freedom of movement.
- Relocation of civilian population without their will and consent.
- Deliberate deprivation of services.

For the West Bank, priority protection risks include:

- Risk of forcible transfer.
- Gender-based violence.
- Destruction of livelihood or personal property.
- Psychosocial and emotional distress.
- Restrictions to access resources, including freedom of movement.

- Arbitrary arrest and detention; ill-treatment.
- Excessive use of force.

Planned response

Protection partners in Gaza, including local NGOs on the ground, have always been and will remain the backbone of protection responses. However, these are the very same people who are being injured, displaced, separated, traumatized, and are grieving for their loved ones. Communication with partners is unreliable at best and non-existent in some cases. In these conditions, the protection cluster is forced to prioritize the most immediate, lifesaving and time critical responses possible within the current constraints. At the same time, the Protection Cluster, AoRs, and protection partners have identified an approach to ensure the most critical protection activities can continue or be established; these cannot await a ceasefire of the securing of unhindered humanitarian access. It is comprised of the following components be rolled with immediate effect where feasible and scaled up as relevant when security and access improve, and appropriate levels of aid can be delivered.

- **Risk mitigation measures:** Including communication campaigns avoid further harm to families, vulnerable groups, and children, during primary response and distribution. This includes Explosive Ordinance Risk Education, preventing family separation, MHPSS self-care, GBV risk mitigation and PSEA communications among others.
- **Tracing and reunification:** Establish an emergency, responsive and timely identification, documentation, tracing, and reunification of missing persons and respond to unaccompanied or separated children.

- **Material assistance:** Provision of primary material assistance to address critical protection needs and ensure timely support to most vulnerable groups. Examples include protection specific NFIs (winterization for children e.g.), adaptive devices for people with disabilities and dignity kits.
- **Protection responders and individual assistance:** Emergency protection responders responding wherever possible to pre-existing caseloads, identifying and resolving critical protection problems (including exclusion from humanitarian aid) within their immediate vicinity (inside or outside shelters) and providing information and links to assistance or services wherever they exist. This work can expand alongside activities of other sectors including distributions when access improves. This work does not replace the need for emergency specialist services to be established as soon as possible to address acute and complex GBV and Child Protection cases.
- **Community response mechanism:** Establishing community response mechanisms and providing support to existing community-led initiatives emerging on the ground. This includes pre-existing networks that are forming and providing real-time support, sharing critical information about available services and emerging structures that provide neighbourhood level responses especially in areas where key humanitarian actors are no longer operational (for example in the facilities in Gaza City and north Gaza where UNRWA is no longer able to provide services). It also includes community child protection responses, and safe spaces.
- **Monitoring, documentation, and advocacy:** Monitoring and documentation of violations of IHL/IHRL, including grave violations against children; advocacy.
- **GBV response services for survivors, and those who are at risk of GBV via virtual/remote MHPSS, counselling, hotlines, legal support, case management, safe spaces in shelters, and awareness raising.**
- **Support for GBV frontline workers.**
- **Procurement and provision of dignity kits for women and girls, including those with a disability.**
- **Cash assistance for host community and complex / high risk cases in formal and informal shelters.**
- **West Bank: resourcing local women's organizations in anticipation of increased demand for GBV response services and deteriorating access.**

Child Protection

- Interventions in line with Pillar Three and Pillar Four of the CPMS 2019, adapting modalities to the context:
- Comprehensive Case management, including awareness raising and MHPSS.
- Community Based Child Protection Interventions through identification and referrals.
- System Strengthening for Child Protection through integrating child protection into other sectors.
- Aid for Child Protection: Winterization-Clothing and Recreational Kits.

Mine Action

- Explosive Ordnance Risk Education.
- Rapid ERW risk assessments at UN and humanitarian sites and routes to ensure safe access for UN and humanitarian partners.
- Clearance of deep buried bombs.

Legal Task force (Housing, Land and Property)

- Preventing forcible transfer driven by settler violence and other elements of the coercive environment in the West Bank, through a comprehensive Legal Aid Emergency Relief Package.
- Re-activation of the Legal Aid Taskforce (LTF) in Gaza, to coordinate the provision of legal information, counselling and assistance, including collaborative dispute resolution mechanisms and legal advocacy on a wide range of subjects, including civil, travel, family law/guardianship and other documentation, legal protection of children and housing, land and property issues.

Across these areas and response modalities, Protection AoRs will implement activities in the West Bank and Gaza, including:

GBV

- Re-mapping of emergency GBV service providers and referral pathways, linking to case management systems in the West Bank to enable the most acute and complex GBV cases presenting.

Facilitation of technical support to Shelter/WASH and Protection (including site management / development) sectors and other counterparts on HLP rights and related issues.

Response approach

- The protection response model builds on modalities for protection delivery (protection integration, community-led self-protection) which have been shown to be effective in emergencies with similar characteristics, while scaling up and expanding activities that have shown to work on the ground in Gaza during the first weeks of the crisis. They also seek to improve the reach and impact of other humanitarian assistance to ensure the most vulnerable people are reached, and that through observation and initial monitoring, a more nuanced understanding of needs can be built. In both the West Bank and Gaza, the emergency response will rely increasingly on remote modalities, cash for protection, in-kind and community-based interventions over the initial phases of the crisis.
- The protection response relies on the expertise and networks of partners (including local NGOs, particularly women and youth focused) which have proven to be remarkably resilient despite overwhelming challenges and constraints. Partners are already applying the wealth of experience and skills available, to shift from traditional protection service provision to the above-described response.
- The feasibility of the cash and in-kind components of the response will depend on the continued access to goods, and on a gradual increase in humanitarian aid flowing into Gaza. A further deterioration of the humanitarian situation will impact partners and their staff directly – this represents a significant risk to continued operations.

Water, Sanitation and Hygiene (WASH)



REQUIREMENTS (US\$)

NUMBER PEOPLE TARGETED

NUMBER OF IMPLEMENTING PARTNERS

\$148.6M

2.5M

42

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Priority humanitarian needs

- The combined impact of destruction of water and sanitation infrastructure, loss of energy or power, collapse of the market and mass displacement have resulted in an acute public health crisis for residents of Gaza.
- Provision of sufficient quantities and quality of water for consumption, cooking, and hygiene. This requires operations of all WASH services be salvaged by conducting emergency repairs and extend services to populations isolated from WASH services.
- Advocacy for the recovery of power and the supply of fuel to operate critical infrastructure, improve sanitary conditions and ensure overall basic service delivery.
- Emergency repair of water and sanitation infrastructure from household to communal levels to ensure basic service delivery. Including establishment of communal water points and safe household storage.
- Supply of family personal hygiene items and communal cleaning kits with appropriate messaging.
- Increase in available latrine, shower, and domestic water point facilities for IDPs and host families in dense population circumstances.
- Immediate removal of fecal sludge and solid waste from populated areas and appropriate treatment/disposal.

Planned response

- Operation of critical and serviceable water production, treatment, and distribution infrastructure. Including supply of relevant chemicals and water quality testing. With the water utility and private sector providers.
- Operation of critical and serviceable pumped wastewater treatment and storm drainage infrastructure.
- Emergency repair and/or replacement of critical infrastructure to bypass damages through the supply of construction materials and equipment.
- Emergency supply of bottled water and trucked water to IDP and host communities, including the provision of temporary communal water tanks and collection points and household jerry cans and point of use water treatment to ensure safe storage.
- Supply of household hygiene kits for IDPs and host families and the supply of institution level (DES, Communal Centres) cleaning kits in locations of high population concentration.
- Hygiene promotion and awareness raising campaigns to support program activities.
- Operational of critical waste management services including solid waste and sludge collection and disposal as appropriate.
- West Bank: Responding to new IDP centres and damage to large scale public infrastructure including sewage and water networks servicing communities and refugee camps such as Nur Shams and Jenin, as necessary. Prepositioning of critical life-saving commodities as described above.

Response approach

- The WASH Cluster will coordinate sixty partners in providing critically needed life-saving humanitarian WASH response in Gaza and the West Bank. The priority needs and response activities have been identified based on information from the service providers and the partners.
- There will be regular monitoring of services and supplies being delivered to keep track of gaps and adapt the response strategy accordingly.
- The main method of response is through service delivery (70 per cent) and followed by in-kind donations (21 per cent).
- The WASH cluster has developed guidance and standards that will be reviewed for the current context in a participatory manner to streamline assistance packages.
- Close coordination will be maintained with Health, Shelter, Protection on key inter-cluster risks and response requirements, WASH will provide support to other clusters as necessary.

Shelter and Non-Food Items



REQUIREMENTS (US\$)

NUMBER PEOPLE TARGETED

NUMBER OF IMPLEMENTING PARTNERS

\$209.2M

1.4M

28

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Priority humanitarian needs

- Essential NFI support for the over 1.4m people who are internally displaced, of which over 700,000 are in increasingly overcrowded UNRWA schools, over 220,000 in other public buildings, and over 550,000 staying with host families or seeking cover in non-residential structures. Displaced populations need access to clothing and bedding, cooking and washing sets to be able to meet their everyday basic needs.
- Immediate protection and covered living space to reduce risk of exposure to winter weather for vulnerable populations. As of end October, over 32,000 housing units have been destroyed, leaving over 150,000 people with no home to return to. Emergency shelter materials are needed to provide cover for people sleeping in the open, to extend covered living space for host families and create protected spaces inside yards. A further 200,000 housing units have sustained damage and require emergency sealing-off or winterization assistance.
- Decongestion and improved protection in overcrowded designated emergency shelters and other collective centres. Many collective centres are acutely beyond their maximum capacity, yet more IDPs continue to arrive. Most collective centres are not equipped with the necessary infrastructure and services to maintain dignity and privacy of IDPs, and overcrowding increases protection and health concerns, including increased risk of GBV and spread of infectious diseases. There is a need to decongest centres where possible by providing shelter materials to facilitate return and increase services within the shelters to improve standards.

- Support to Gaza workers stranded in the West Bank who lack essential NFIs and clothing to access goods to meet their basic personal needs available in the local markets.
- Protection of forcibly displaced communities in Area C.

Planned response

- Distribute essential household NFIs including bedding sets, kitchen sets and washing sets to displaced populations in collective centres, host families and self-settled urban displacement.
- Distribute emergency shelter materials to increase covered living space, including in yards, self-built shelters, and protection or extension of host family dwellings.
- Distribute winterized family tents to facilitate urban self-settlement on/near site of damaged property including integrated NFI package.
- Seal-off/winterization of damaged properties, and conditional cash support for immediate light damage repair.
- Provide essential elements to DES to ensure minimum adequate services for IDPs, including but not limited to showers, mobile latrines, and partitions for privacy.
- Distribute one-off cash assistance for re-integration for families unable to return to destroyed or uninhabitable houses.
- Distribute one-off cash assistance for NFIs and personal belongings (\$400/person) to Gazans displaced in the West Bank.
- Provide shelter solutions for displaced families in the West Bank including cash reintegration package.

Response approach

- The Shelter Cluster will coordinate 28 partners in providing critical humanitarian shelter support in Gaza and the West Bank.
- Due to lack of availability in the market, initial distribution of NFIs is anticipated to be in-kind. The cluster will monitor the availability of materials in the local economy closely and aim to support local procurement as soon as possible.
- The planned response assumes that it remains feasible to provide shelter assistance in place, including the potential to return to damaged properties, sufficient access to and identification of populations in need, and an adequate level of security and protection for humanitarian actors.
- The cluster has provided guidance on standardized kits and relevant target groups to streamline assistance packages. Regular monitoring of distributions and targeting will take place to identify gaps and outstanding needs and to inform the ongoing response strategy.
- Partner capacity to respond will be determined in part by the availability of funding, ability to import aid items through Rafah and operational access. Close coordination with PRCS and key stakeholders will be maintained to facilitate wide distribution and engagement in the response that recognizes and supports both local and international cluster partners.
- Close coordination will also be maintained with the WASH Cluster for household and collective centre level sanitation support, Protection partners on the distribution and tracking of clothing and dignity kits, and Education on the use of schools as shelters.

Education



REQUIREMENTS (US\$)

NUMBER PEOPLE TARGETED

NUMBER OF IMPLEMENTING PARTNERS

\$114.5M

0.53M

15

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Priority humanitarian needs

- Access to education and safe space for 625,000 children in Gaza who have been without since 7 October.
- Safe access to education in areas of the West Bank, including East Jerusalem. On a daily average, 150-200 schools are not operational due to the movement restrictions, settler violence, and fear of harassment in route to/from school, insecurity due to Israeli forces military operations and/or armed confrontations with Palestinians. Many of these schools are in Area C, and East Jerusalem and in remote areas where children face many challenges accessing distance learning. The education cluster is verifying hundreds of education-related incidents that took place in the West Bank including East Jerusalem in the last month including weapon firing, detention of students or school staff, settler attacks, and delays and harassment on the way to school.
- MHPSS interventions and safe spaces to address stress and trauma.
- Assistive devices and other disability-specific support.

Planned response

- Psychosocial support to school-aged children and/or teachers/other educational personnel.
- Recreational activities for school-aged children and/or teachers/other educational personnel.
- Emergency education learning supplies/teaching equipment, recreational kits/stationery, school bag, and school uniforms to children and educational staff.

- Awareness sessions including risk education, protection, and referral for school-aged children and/or educational personnel and/or parents.
- Temporary Learning Spaces (TLSs) in and around the IDPs shelters.
- Learning support sessions for school-aged children in schools or TLSs.
- Provide assistive devices to school-aged children with disabilities to access inclusive learning and recreational activities.
- Reconstruct and rehabilitate damaged educational facilities.
- Prepare large scale distance learning programs including off-line and on-line platforms to be activated once electricity and connectivity are restored.

Response approach

- Education cluster partners in Gaza, including local NGOs on the ground, have historically led the education responses in Gaza. These are now the same people who are being injured, displaced, separated, traumatized, and are grieving for their loved ones. Communication with partners is challenging inside Gaza and especially in the North. A few partners in Gaza are now operational and have already started implementation of recreational activities in school shelters. The Education Cluster is mapping and coordinating partners' capacities and responses and activated the Education Cluster Assessment Team (ECAT) to rapidly deploy to undertake an in-depth sectoral assessment once the situation allows.
- The Education Cluster is coordinating all partners to support children's wellbeing and learning needs.
- The priority needs and response activities have been identified by the cluster key partners based

on available data and information.

- Close coordination will be maintained with Protection and CP AoR on key inter-cluster risks and response requirements for children.
- Education Cluster partners' key priority in the coming three months is to be able to provide MHPSS and recreational interventions to all

children in Gaza. In parallel partners will be setting up temporary learning spaces to offer formal education in coordination with UNRWA and MoE in these spaces.

- As soon as the situation allows, cleaning and rehabilitation of schools will start.

Multi-Purpose Cash Assistance (MPCA)



REQUIREMENTS (US\$)	NUMBER PEOPLE TARGETED	NUMBER OF IMPLEMENTING PARTNERS
\$101.1M	1.15M	14

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Priority humanitarian needs

- Ensure households (HHs) in Gaza affected by the conflict have capacities to meet their most essential basic needs which were significantly impacted by displacement and/or loss of livelihoods, as they see fit.
- Support HHs affected by conflict in the West Bank because of settler violence, military operation, forcible transfer, and increasingly coercive environment, to meet their urgent basic needs as they prioritize them.

Planned response

- Distribute two rounds of Emergency MPCA (754 NIS) to all affected HHs in Gaza to meet their most urgent basic needs.
- Distribute one to three rounds of Emergency MPCA (1,640 NIS) to all affected HHs in the West Bank to meet their most urgent basic needs.

Response approach

In Gaza, the provision of Emergency MPCA is coordinated through the Cash Working Group (CWG), with the following characteristics:

- Identification of beneficiaries is performed through four sources of lists. Lists management and cross-checking is consolidated through a centralized system which deduplicates and shares names. The system is managed by the CWG.
- Distribution takes place through active Financial Service Providers (FSPs) that performs checks and screening as per internal regulations ahead of the distributions. Liquidity is not considered an issue at the Gaza level.
- Assistance is designed in line with CWG standards, i.e., 754 NIS per family. The value is based on Survival Minimum Expenditure Basket calculations and endorsed by the Gaza CWG.
- The provision of cash assistance, including not only MPCA, is strictly connected to the functionality of markets. Responding agencies within the CWG strive to collect and analysis market data, relying as well on the work conducted by WFP, as well as from external actors.

Logistics



REQUIREMENTS (US\$)	NUMBER PEOPLE TARGETED	NUMBER OF IMPLEMENTING PARTNERS
\$11.2M	N/A	N/A

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Priority needs

- Logistics coordination and information-sharing to increase operational efficiency.
- Enhanced coordination with relevant authorities.
- Guidance on customs procedures for humanitarian response agencies.
- Access to urgent and critical common logistics services, including warehousing, transport and to enable the ongoing movement of relief supplies, including in Egypt around the Al Arish and Rafah areas of operation and inside of Gaza.
- Cargo consolidation at designated points of reception in Egypt for all incoming international cargo.

Planned response

With the support of WFP as lead agency, the Logistics Cluster will support UNRWA and the Egyptian and Palestinian Red Crescent societies to deliver assistance on behalf of the humanitarian community by providing equipment, services, and expertise to augment the logistics capabilities of the service providing organisations. Complementary logistics services may also be provided to humanitarian partners for the consolidation of relief items. The following critical activities have been identified:

- Coordination and information management.
- Logistics Augmentation and Services to augment national and partner capacity to increase efficiency, mitigate bottlenecks, avoid duplication of efforts, and supplement the response. Access permitting, the following activities and services may be provided at no cost to the user, or on a partial/full cost-recovery basis, depending on the availability

of funds, for a duration of three months.

- Consolidate and provide temporary storage for upstream cargo awaiting onward distribution to Gaza, located in Port Said.
- Augment the capacity of the Egyptian Red Crescent (ERC) through the provision of:
 - Logistics equipment - including temporary warehousing, handling equipment, and temperature-controlled storage, to enhance storage capacity and consolidate cargo at ERC-managed logistics hubs in Al-Arish and Ismailia.
 - Support equipment - including temporary office and accommodation facilities for ERC responders in Al-Arish.
 - Staff - with humanitarian logistics coordination expertise embedded within the ERC coordination centre.
 - Road transport capacity - from Ismailia to Al-Arish, and onwards via Nitzana to Rafah entry point.
 - Dedicated systems - for ERC to track the humanitarian assistance being transported .
- Augment the Palestinian Red Crescent Society (PRCS) transport capacity from Rafah entry point to delivery points inside Gaza.
- Augment the temporary storage capacity of the PRCS inside Gaza to accommodate incoming humanitarian assistance.
- Roll out of dedicated systems to track humanitarian assistance from entry into Gaza to first point of offload. This will facilitate partners' ability to report on their own delivery and distribution activities, but not replace their responsibility for doing so.

Response approach

- Facilitate access to necessary and reliable logistics services, information related to logistics capacities, and to augment the logistics capacity of relief actors to enable a timely and uninterrupted supply of life-saving relief items to affected populations in Gaza.
- Strengthen coordination efforts amongst partners, address common logistics challenges in Gaza, Israel, Egypt, and Jordan and facilitate regional coordination cargo border crossing facilitation, as well as to inform operational decision-making and improve the effectiveness of the logistics response.
- In collaboration with partners and donors, coordinate information on the incoming cargo that will need to be consolidated; and facilitate access to donor funded strategic airlifts to Al-Arish international airport from international origin points; and if required, consolidated ocean transport to Egyptian ports.

Emergency Telecommunications



REQUIREMENTS (US\$)	NUMBER PEOPLE TARGETED	NUMBER OF IMPLEMENTING PARTNERS
\$800K	N/A	5

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Priority needs

- Based on information received from local actors, landlines, GSM, and Very High Frequency (VHF) radio networks were down across Gaza Strip on 27 and 28 October. Some of the access was restored on 29 October but Mobile Network Operators (MNOs) have reported that the remaining networks, if not already damaged, are expected to run out of fuel. This impending blackout is already severely impacting the affected populations and humanitarian efforts. Several UN agencies lost communication with their staff based in Gaza for 48 hours and there are fears that similar challenges will be faced in the near future.
- Independent and reliable shared communications services for humanitarian organizations operating in Gaza to support their delivery efforts and their safety.
- Shared access to reliable Internet connectivity in key locations from where most humanitarians are operating, secure communications back up through radio communications coverage in Gaza, as well as helpdesk support to users. Power is expected to be a major concern with existing limited access to fuel—therefore, alternative solutions such as solar power needs to be factored into any equipment setup.

Planned response

To effectively respond to the needs of the humanitarian response in Gaza, the Emergency Telecommunications Cluster (ETC) is being activated. The ETC has set up coordination with global partners and key local actors to support the provision and access to safe and reliable inter-agency Information Communication and Technology (ICT) services in key locations. The ETC plans to deliver services in a staged approach, pending access and authorization.

This includes:

- Coordinate partners involved to avoid duplication of efforts including discussions with authorities on importation/authorization, providers, and requirements for a cost-effective response.
- Share timely information and communicate about ICT requirements and availability of services across the humanitarian community to support decision-making and foster collaboration.
- Provide access to shared connectivity services in up to three common operational areas in Gaza and/or humanitarian hubs identified, where feasible and access granted.
- Support the restoration of the security communications network through radio communications for UN staff operating in Gaza.
- Support humanitarian organizations in delivering life-saving information regarding humanitarian assistance to affected population.
- Provide helpdesk support in locations with ETC services.
- Set up services that are pending safe access for staffing and equipment, and authorization granted to import and use ICT equipment.

Response approach

- Provide ETC coordination and information management through dedicated staff and by engaging with the local ICT Working Groups members, as well as any key local actors including national service providers and global partners that can enable the provision of services.
- Conduct needs and technical assessments to prioritize locations to be provided with services.
- Obtain the necessary ICT equipment and tools in the most rapid way by relying on local and global partners' capacity, as well as local and global suppliers.
- Any provision of services is to be carried out in close collaboration and coordination with local humanitarian actors, local services providers, and with local authorities to avoid any duplication of efforts and to enable safe access.

Coordination and Support Services



REQUIREMENTS (US\$)	NUMBER PEOPLE TARGETED	NUMBER OF IMPLEMENTING PARTNERS
\$61.9M	N/A	13

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Coordination and Access

Priority needs

- Strengthened cluster, areas of responsibility, and inter-agency coordination capacity to ensure implementation of a principled, timely, effective, and efficient humanitarian operational response effective monitoring, analysis and reporting of the highly complex and ongoing crisis where access is limited, and communications are challenged. The current situation has overwhelmed existing coordination capacity.
- Enhanced coordinated advocacy with all duty holders for respect for International Humanitarian Law, the protection of civilians (including relief workers) and civilian facilities, and humanitarian access.
- Enhanced coordination on logistics to address the challenges resulting from the complete closure of Gaza.
- Coordinated multi-sectoral needs assessments will be required to rapidly assess the scale and magnitude of needs once the security situation allows.
- Enhanced civil-military coordination mechanisms to facilitate efficient flow of aid and streamline the consolidation, safe transport, and delivery of

humanitarian supplies through border crossings into Gaza.

- There is urgent need for UNRWA to expand its emergency operations and services in Gaza required to address the needs of Palestine refugees and facilitate UNRWA's operation including risk assessments, neutrality, information tracking, M&E activities, guarding and security measures, surge staffing.

Planned response

- Coordinate multi-sectoral needs assessment and collect and analyse high-resolution satellite imagery to identify and quantify damage to urban and agricultural areas to obtain robust data to humanitarian and development organizations to inform allocation of resources efficiently, plan reconstruction efforts, and advocate for the recovery needs of the affected Gaza Strip communities.
- Increase efforts to negotiate and secure safe humanitarian access in Gaza and the West Bank.
- Establishment of logistics cluster.
- Enhanced civil-military coordination mechanisms to facilitate efficient flow of aid and streamline the consolidation, safe transport, and delivery of humanitarian supplies through border crossings into Gaza.
- Enhanced UNRWA capacity to address the critical situation in Gaza and West Bank.

Accountability to Affected People, Protection Against Sexual Abuse and Exploitation, and Community Engagement

Priority needs

- Delivery of coordinated and harmonized community engagement practices and tools to achieve effective and accountable humanitarian action through Risk Communication and Community Engagement (RCCE) and PSEA and AAP activities.
- Given the heightened needs in the Gaza Strip compounded by very limited entry of aid there is heightened risk of acts of wrongdoing in the context of the delivery humanitarian aid. For the same reasons it is paramount that the limited amounts of aid entering are informed by people's needs, and that humanitarian responses and programs design, implementation and adjustments are responsive to information channeled from the affected community. This is also true for the West Bank where developments have also led to the rise and proliferation of protection risks.
- Reinforce community networks for PSEA mainstreaming with a focus on survivor centred practices and receive, process and refer claims on behalf of the humanitarian community.
- Mitigate risk of SEA in high-risk groups through a cash for protection scheme and promote safety and protection practices and health seeking behaviors among families and children through interpersonal and group communication approaches, and targeted digital media and mass media message dissemination.
- Reinforce PSEA network to advocate for survivor's centred practices in assistance and investigations through humanitarian actors and connected to the humanitarian response.
- Develop CFM common classification system, intake-specific referral protocols, SOPs, service directory, and FAQs for swift feedback closure.
- Support Hotline Operators: Provide training and tools to specialized hotline operators for prompt AAP intake closure, proper documentation, and automated referrals.
- Field Missions and Capacity Building: Organize field missions to engage with vulnerable groups, collect feedback.
- Promote safety and protection practices and health seeking behaviors among families and children through interpersonal and group communication approaches, and targeted digital media and mass media message dissemination, to respond and complement sectorial/cluster objectives and needs. The specific content, messaging and approaches will be guided by evidence and data collected from the communities through surveys and rapid assessments as well as through ongoing social listening efforts.
- Develop awareness raising materials on the rights of beneficiaries, code of conduct of humanitarian workers and available complaints and feedback mechanism channels.
- Launch the new visual identity if the PSEA Network: SANAD and make PSEA and safeguarding content available to all affected population in coordination with the RCCE.
- Support safeguarding networks connected to communities at risk of SEA; provide training in safeguarding and complement their activities with supplies and referrals for the cash program of severe protection cases.
- Advocate for actionable practices for risk mitigation in SEA, child safeguarding and survivor's centred approach among humanitarian actors
- Support survivor's centred practices and minimum operating standards on PSEA for free toll numbers and service providers operating remotely; support the development of business continuation plans adapted to the current situation.

Planned response

- Establish Inter-Agency CFM: Create a comprehensive inter-agency Community Feedback Mechanism (CFM) to handle AAP intake, ensuring continuous operation. Enhance a local hotline and communication channel for efficient AAP intake processing.

Response approach

- The RCCE Working Group coordinates with all clusters and thematic coordinators and specialists to advise on the most appropriate communication and community engagement approaches for reaching out affected populations.
- The RCCE and AAP Coordinators will liaise with the Assessments and Information Management Working Group (AIM) to collect data on knowledge and priority behaviors, to guide interventions as well as monitor shifts in knowledge, attitudes, and practices.
- Scaling up capacities to provide guidance on the preparation of relevant and appropriate communication materials and resources for delivering results-driven community engagement activities for behavior change.
- The PSEA Coordinator will liaise with RCCE and AAP for complementarity in content development and community outreach; with the Protection cluster and AoRs for survivors centred practices and assistance; and with the cluster system to support mainstreaming of PSEA and safeguarding minimum operating standards embedded in the provision of services (in person and remotely).

End notes

1. [Facts and figures: Women and girls during the war in Gaza | UN Women – Headquarters](#) - Updated as of 4 November 2023
2. reliefweb.int/report/occupied-palestinian-territory/gaza-israeli-attacks-blockade-devastating-people-disabilities
3. The notification is a complementary set of information for military planners to mitigate the risk of attacks and incidental effects of attacks under IHL. The notification is voluntary and is intended to help promote the safety and security of humanitarian locations, activities, and personnel.

FLASH APPEAL
OCCUPIED PALESTINIAN
TERRITORIES

ISSUED NOVEMBER 2023