

# **Update/Alert**

## **Occupied Palestinian Territory (OPT)**

## Response to continued IDPs humanitarian challenges in Gaza and the West Bank

Amman, April 20, 2017

## Brief description of the emergency and impact

The impact of the ten-year long blockade on Gaza has been exacerbated by the almost continuous closure by Egypt of the Rafah passenger crossing point since October 2014, confining the vast majority of the 2 million Palestinians to Gaza. No major new displacement was recorded in Gaza during 2017, but an estimated 95,000 internally displace people -IDPs- (the majority United Nations Relief and Works Agency - UNRWA registered refugees) remain homeless as a result of the 2014 hostilities of whom 78,000 continue to need temporary support. (Gaza Situation Report 2016)

UNRWA estimates that the Infant Mortality Rate (IMR) has increased for the first time in the last decades to around 22/1,000 live births in the Gaza Strip. The under 5 years old mortality rate is around 26 per 1000 live births, the main causes of death of children were injuries, congenital anomalies and infectious diseases.

Around 70% of children aged 6-12 months suffer from anemia. Also, around 75% of Gaza children are either suffering from Vitamin "A" deficiencies or at the border line representing a serious public health problem. The reasons for such deteriorated nutritional status in Gaza is mainly attributed to poverty resulting from the occupation policies, poor socioeconomic situation as a result of the blockade and, limited access to food. With the deterioration in the livelihood conditions, the level of malnutrition has significantly increased. During 2016, UNRWA wide data showed that 13.4% of pregnant women were classified as high risk, while 27.7% were considered alert risk. (Palestine 2030 full report - 2016).

The unemployment rate in Gaza Strip was 41.7% compared with 18.3% in the West Bank in the 2<sup>nd</sup> quarter of 2016. The unemployment rate for males in Palestine was 22.1% compared with 44.7% for females in the 2<sup>nd</sup> quarter 2016. (Palestinian Bureau of Statistics – PCBS - 2016).

Around 80% of families in the Gaza Strip currently depend on humanitarian aid. A total of 50% of the labour force in the Gaza Strip were jobless during the year 2015, deep poverty fluctuates now ranging between 20-32% while the poverty rate is being zoomed up to around 80% of the total population as reported in the study of Palestinian Bureau of Statistics (PCBS) 2016 report. With increased vulnerability, the demand for the Near East Council of Churches NECC/DSPR services has also increased. The long standing Palestinian question which remains unresolved to this very day means Palestinian residents in the West Bank and Gaza must subsist in very rudimentary living conditions.

### Why is an ACT response needed?

ACT Alliance Palestine Forum will continue providing crucial health, education and livelihood support. Existing national systems are overwhelmed and unable to rapidly respond to increasing needs.

Poverty remains a continuous challenge in the Palestinian context, it is staying high and is on the increase. This has resulted from unpredictable and declining economic activity, low wages, loss of employment opportunities due to the closure, reduced employment generation capacities of the public





and private sectors, and restricted access to natural resources. Almost 47% of households in Gaza suffer from moderate or severe food insecurity. More than 70% of Gaza's population receives some form of international aid, the bulk of which is food assistance. (Gaza Strip: The Humanitarian Impact of the Blockade, November, 2016- OCHA Report.

The target group is mainly composed of children and their caregivers residing in the communities of Shijaia, Darraj and Kherbet Al Adas of Gaza Strip. The three health care centers serve Palestinian families who are marginalized, and needy; while focusing on the most vulnerable groups of the population namely children and women. DSPR-NECC Family Health Care centers are based in densely-populated areas where over 80% presently live below the poverty line, low employment, limited service provision and economic, political and social uncertainty. Many people remain displaced and are living with relatives and friends, in tents or caravans. The exposure of these people to health risks has increased including the spread of communicable diseases, coupled with increased food insecurity, nutritional related disorders, wide spread psychosocial issues and spread of sanitation related conditions which increased the burden on DSPR/NECC clinics and increased demand to DSPR- NECC services.

In the West Bank, according to a recent food security survey conducted by Food Security Cluster in 2014; the rates of unemployment in rural areas and area "C" have reached 22 % and up to 25 % of households in the West Bank are considered food insecure. Livelihoods are undermined by restrictions on access to natural resources, services, and stable and efficient markets. Access restrictions to land, water and commerce which are direct consequences of the occupation have led to a lack of economic access to food and employment, particularly for vulnerable communities in Area C displacement and protection are main issues facing the population not only in Area C of the West Bank, but also Palestinians living in East Jerusalem

#### 3. National and international response

As a result, more than 70% of the population now depends on various forms of aid from international and national organizations. The APF Forum will coordinate its efforts to respond to the growing needs, especially in the Gaza Strip and support those under constant threat of displacement and food insecurity in the West Bank.

ACT Palestine Forum (APF) is in the process of finalizing its emergency preparedness and response plan (EPRP), which was done in consultation with local national implementing members on the ground. This EPRP will guide the forum during such emergency situations.

#### 4. **ACT Alliance Response**

ACT Palestine Forum is meeting regularly to build a coordinated response with all its members and their local partners. This alert was developed based on a coordinated effort between the APF members and upon consulting with their local partners. The requesting and implementing ACT member of this response is the DSPR - NECC.

#### 5. Planned activities

The ACT Palestine Forum (APF), through its members, are planning to support the needlest people in: access to primary health care; educational opportunities; psychosocial support; and cash grant in Gaza as well as in the West Bank, Area C. The response will also include agriculture intervention through enhancing access to land and water in rural area "C", and green-houses. All APF response will be coordinated and supported by APF Coordinator and partners.

#### 6. **Constraints**





Constraints include: closure of crossings, unavailability of supplies in the local market, lack of fuel, lack of medicine and medical supplies, donors shift of focus to other countries like Syria, Libya and refugees in Lebanon and Jordan. This has tightened the ability of many non-governmental organisatins to serve beneficiaries.

Any funding indication or pledge should be communicated to the Head of Finance and Administration, Line Hempel (Line.Hempel@actalliance.org) and Senior Finance Officer, Lorenzo Correa (Lorenzo.Correa@actalliance.org).

## For further information please contact:

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