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SITUATION REPORT CRISIS IN PALESTINE

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KEY FIGURES

43,926 Fatalities* 43,163 in Gaza 763 in West Bank	107,810 Injuries* 101,510 in Gaza 6,300 in West Bank	~1.9M Internally displaced** 1.9M in Gaza (90% of population) 6,280 in West Bank	1.34M Women of reproductive age*** 541,567 in Gaza 797,097 in West Bank
17 OF 36 Hospitals in the Gaza Strip** are partially functional 19 hospitals are out of service.	48 OF 132 Primary health care centres in the Gaza Strip** are partially functional 84 PHC are out of service	18,000 Pregnant women*** experiencing emergency and catastrophic food insecurity 3,000 IPC Phase 5 15,000 IPC Phase 4	12,127 Expected deliveries in the next month*** 4,000 in Gaza 8,127 in West Bank

SITUATION OVERVIEW

The humanitarian situation in Gaza is catastrophic. With at least 43,000 people killed and over 101,000 injured, nearly 1.9 million people have been displaced, many repeatedly, including over 43,000 pregnant women. Each evacuation order further shatters lives, forcing families to move from one unsafe place to another. Nearly 70% of the infrastructure in Gaza is destroyed, leaving almost the entire population without food, clean water, healthcare, and/or basic shelter. The war is marked by a complete disregard for the protection of civilians and international humanitarian law (IHL).

The siege on North Gaza throughout October has cut people off from life-saving aid and left them struggling to survive. Hundreds of people have been killed, and over 70,000 people have been uprooted, with thousands trapped in areas of conflict without food, water or access to healthcare. Civilians are enduring unimaginable conditions, separated from their families and sheltering in rubble, while the wounded struggle without access to medical care.

The recent incursions into North Gaza have been characterized by attacks on hospitals in clear violation of IHL. At Kamal Adwan Hospital, Israeli forces destroyed medical equipment, and detained health workers. Patients died due to a lack of life-saving medical supplies, food and water, and four ambulances were damaged. Al Awda hospital remains inaccessible.

In north Gaza, only two out of 20 health service points and two hospitals- Kamal Adwan and Al Awda both of which provide emergency obstetric care- are still partially functioning as they struggle to operate without supplies, fuel, food or water. This will further restrict access to maternal health care for an estimated 14,000 pregnant and breastfeeding women in north Gaza.

Hunger is pervasive in Gaza, pushing the region to the brink of famine. An estimated 1.84 million people, including 42,000 pregnant women, face crisis levels of hunger (IPC 3). The markets have almost completely dried up due to a sharp decline in the entry of private commercial trucks into Gaza, which has reached its lowest level in October compared to any month since the war began. Conditions are so dire that over 3,000 pregnant women are already experiencing catastrophic levels of food insecurity (IPC5), a number that could surge to 8,000 as winter sets in. Over 15,000 pregnant women are on the verge of catastrophic levels of hunger. Without sustained aid, acute malnutrition (IPC3) is expected to affect 16,500 pregnant and breastfeeding women across Gaza in the coming months.

* Palestinian Ministry of Health - 30 October 2024
 ** OCHA Reported Impact Snapshot - Gaza Strip - 29 October 2024
 ***MISP calculation

Food insecurity is particularly impacting the well-being of vulnerable groups. A recent analysis on gender-based violence (GBV) trends by the GBV Area of Responsibility (AoR) indicates that over a quarter of cases of GBV reported in September were related to resource shortages in households, often affecting girls, women, and older women (60+). The situation is worsened by high prices in markets and a lack of basic hygiene items for women and girls, including sanitary pads.

Access to water has also become extremely challenging. Transporting water by trucks, and the resulting crowds at distribution points, have made water collection unsafe for women and girls, and nearly impossible for those with disabilities, especially if they do not have a caregiver. Many are left with no choice but to pay for water, deepening poverty and increasing vulnerability to abuse and exploitation.

The healthcare system in Gaza has nearly collapsed, with half of all hospitals out of action. Among the remaining 17 hospitals, only minimal services are available including maternity care, due to a lack of essential resources, including supplies. Attacks have severely impacted over 1,100 healthcare sites, leading to the resurgence of diseases like polio.

Sexual and reproductive health care, including postnatal and family planning services, have become severely limited for 155,000 pregnant and breastfeeding women, who face serious health risks due to a lack of prenatal and postnatal care. Complicated and high risk pregnancies linked with negative outcomes have increased, while access to safe childbirth services has dramatically decreased, especially in the North. Transportation challenges and a shortage of medical personnel have compounded the crisis. UNFPA partners report that there has been a rise in premature births and maternal deaths and many women are forced to give birth without access to medical support.

Women and girls are facing heightened risks due to overcrowded shelters and inadequate sanitation facilities. There is a rise in infections, with 25% of women experiencing skin conditions and other health issues. Menstrual hygiene has become nearly impossible to manage, as over 690,000 menstruating women lack access to basic sanitary supplies. The cost of essential items like soap has skyrocketed by 1,100%, making it impossible to keep clean and increasing women's vulnerability to violence and exploitation.

Humanitarian aid delivery to Gaza is facing severe obstacles, with repeated obstructions preventing the flow of life-saving supplies to millions in need. Essential resources such as food, shelter materials, and hygiene kits are stuck at the border, while Gaza has become the world's most dangerous region for aid workers.

The recent vote by the Israeli Parliament to ban UNRWA further threatens aid delivery for Palestinian refugees, jeopardizing the foundation of humanitarian operations in Gaza. UNRWA provides critical support in health, education, and essential services, and attempts to ban it from operating will undoubtedly exacerbate suffering and worsen conditions for those already in dire need.

UNFPA supplies have been stranded for months in trucks at the border or stockpiled in warehouses in Egypt and Amman, while urgently needed by women and girls in Gaza. Supplies include 900 inter-agency reproductive health kits, containing essential medicines and supplies for safe births and emergency obstetric care, 51 high-performance tents, to be used as safe spaces and medical points, generators, ultrasounds, patient monitors, and an additional 60,000 hygiene and dignity kits, 6,400 postpartum kits, and over 1.2 million menstrual pads.

In the West Bank and East Jerusalem, violence and existing and stepped up movement restrictions have intensified. Since October 2023, 732 Palestinians have been killed, including 715 by Israeli forces and 12 by Israeli settlers. Additionally, 1,536 settler attacks have resulted in injuries and property damage. This escalation has forced 285 Palestinian households—totaling 1,669 individuals, including 807 children—out of their homes, primarily affecting Bedouin and herding communities. Over 1,800 Palestinian structures have been demolished by Israeli authorities, displacing more than 4,600 people, nearly half of whom are children.

In October 2024, OCHA reported approximately 180 settler-related incidents across nearly 90 Palestinian communities, with 60% linked to the olive harvest season, disrupting lives and livelihoods. Palestinian's access to land is further constrained by 43 new settlement outposts established since October 2023.

Severe movement restrictions continue to hinder access to essential services, delay ambulances, and obstruct humanitarian aid. Travel between cities and villages has become increasingly perilous, compounded by shortages of water, fuel, and other necessities, making it difficult for residents to reach schools, workplaces, healthcare facilities, and families.




HUMANITARIAN RESPONSE NEEDS

- **Ensure Immediate, Sustainable, and Adequate Access to Humanitarian Aid:** Facilitate unrestricted and adequate access to humanitarian aid through all border crossings into Gaza. Remove barriers that impede the delivery and distribution of aid to ensure it effectively reaches all areas and different age and gender groups, including the northern Gaza Strip.
- **Establish Protection Systems for Women and Children:** Develop and implement protection systems focused on social support mechanisms to prevent and respond to all forms of violence against women and girls, including GBV.
- **Meet the immediate winterization needs for people in Gaza:** As winter approaches, millions of people in Gaza have no adequate shelter, no warm clothing and bedding. All barriers to bring in winterization items must be removed.
- **Ensure continuous service provision of life-saving services while contributing to the reconstruction of Gaza’s Healthcare System:** Prioritize the reconstruction and equipping of healthcare facilities, including primary healthcare clinics and hospitals, while providing mobile and semi-static structures to immediately fill gaps in service provision. Establish additional service delivery points in displacement areas, with an emphasis on improving maternal health services.
- **Replenish Essential Medical Supplies:** Ensure a continuous supply of life-saving reproductive and maternal health medicines, contraception, supplies, and equipment.
- **Secure a Reliable Fuel Supply:** Guarantee a consistent and sufficient supply of fuel for hospitals, water facilities, and other essential services to prevent the further collapse of critical infrastructure.
- **Enhance Food Security and Nutrition:** Increase the availability of fresh food and improve nutritional diversity to combat malnutrition, including the provision of micronutrients, especially for pregnant and breastfeeding women, as well as women and girl headed households. Ensure access to clean cooking stoves to support safe food preparation.
- **Provide Clean Water and Sanitation:** Ensure safe access to clean water and sanitation facilities. Water distribution/collection points must be regulated and made safe for women and girls of different abilities. Establish temporary waste disposal and recycling initiatives to prevent the spread and outbreaks of disease.
- **Distribute Essential Hygiene Items:** Supply essential hygiene items, including menstrual health products. Humanitarian aid needs to respond to women and girls’ needs, including personal hygiene and menstrual health as well as addressing risks of exploitation and abuse. Approximately 10.36 million menstrual pads are needed monthly—equivalent to 20 truckloads—to meet the needs of 690,000 women and adolescent girls of reproductive age in Gaza.
- **Expand GBV Prevention and Response Services:** Scale up life-saving services for survivors and those at risk of GBV, including providing safe, private shelters that are winter-ready and expand safe spaces for women and girls.
- **Prioritize Mental Health and Well-Being:** Provide specialized mental health and psychosocial support services (MHPSS) services for persons at risk of GBV, including survivors, to enhance their well-being and coping mechanisms.
- **Expand Assistance to Women and Girls:** Improve access to essential supplies and services to women and girls while helping to mitigate protection risks brought by lack of financial resources.
- **Scale Up Adolescents and Youth Responsive Services and Coordination:** Implement emergency education programmes, including remote learning, special tents for classroom activities, recreational activities, and awareness sessions. Equip these centres with stationery and educational supplies to support ongoing learning initiatives.


UNFPA RESPONSE


In September and October 2024, UNFPA played a crucial role in delivering essential sexual and reproductive health (SRH) and GBV prevention, risk mitigation and response services across Gaza and the West Bank. This included distributing essential equipment, medical supplies, and consumables, as well as providing basic and emergency obstetric and newborn care through containerised clinics and at the primary health care level (family planning, STIs, ANC/PNC, gynecological consultations), and through SRH teams in both formal and informal shelters. Additionally, UNFPA supported 70,000 individuals with GBV risk mitigation and protection services through 12 safe spaces for women and girls. Youth-led education initiatives reached over 3,500 women, adolescents, and children, while remote counseling services were provided to 800 youth via the UNFPA-supported Shubbak il Shabab helpline.

RESULTS SNAPSHOT


 **173 inter-agency reproductive health kits** were distributed to health partners across the north, central, and southern regions of the Gaza Strip. These kits included thousands of boxes of life-saving medicines, equipment, and consumables, supporting more than 8,000 births and 3,000 blood transfusions over a period of three months.


 **5 containerized, and well-equipped maternal health units** provided basic and comprehensive emergency obstetric and neonatal care in the Middle Area and Khan Younis.


 **1,080 vials of Anti-D and 1,400 vials of Oxytocin** were delivered to protect women and newborns from Rhesus disease and to support the prevention and management of postpartum hemorrhage.


 **2,000 women** received support to access antenatal and postnatal care (ANC and PNC) services.


 **506 comprehensive postpartum kits** were distributed to new mothers in shelters and hospitals. The kits contain essential hygiene and care items for mothers and newborns.


 **8 fetal heart detectors, 11 oxygen cylinders, and 10 pulse oximeters** were delivered to 11 emergency centers to support deliveries for pregnant women unable to reach hospital.

 **40,000 women and girls** were reached with GBV risk mitigation, prevention and response services, including MHPSS, case management, and information sessions at 6 safe spaces in the southern and central areas of the Gaza Strip.


 **5,012 women and girls** received dignity kits containing essential hygiene items.

 **30,000 women and girls** were reached with GBV prevention and response services at the 6 safe spaces in the West Bank.

 **400 women** reached with MHPSS support sessions in the northern West Bank.

 **3,532 women, adolescents, and children** were engaged by young volunteers through youth-led community initiatives in Gaza, including informal education sessions in temporary learning spaces, and awareness raising sessions on health and wellbeing, comprehensive sexual education (CSE), and cultural social initiatives in the West Bank.

 **24 frontline service providers** were trained in the clinical management of rape.

 **868 young people** received psychosocial first aid through the Shubbak il Shabab helpline and the Mostashari application.

COORDINATION

UNFPA provides strategic leadership for implementing the Minimum Initial Service Package (MISP) for SRH in Gaza. This includes advocating with key stakeholders, coordinating with interagency groups, and leading the [SRH Technical Working Group](#) within the Health Cluster. The leadership also supports coverage of life-saving services, prevents duplication among 30 member organizations, and ensures harmonization of SRH service tools and updated mapping of SRH services in a fluid context.

UNFPA also leads and coordinates the [GBV AoR](#), overseeing two sub-national clusters in the West Bank and Gaza. Key efforts during the reporting period included conducting orientation sessions for 50 non-GBV specialists in Gaza on safe identification and referral of GBV survivors, as well as regularly updating and disseminating GBV service mapping and case management referral focal points. A dedicated task force of 10 members was established with clear terms of reference. Standard Operating Procedures (SOPs) for GBV service provision during the Gaza emergency were developed, with referral focal points identified for high-risk cases. The GBV Steering Committee conducted a detailed assessment of GBV trends, survivors' coping mechanisms, and the effectiveness of available services in Gaza. Additionally, a safety audit in the West Bank assessed GBV risks for women and girls, contributing to targeted protection efforts.

UNFPA leads the adolescent and youth health emergency response and advocacy through the Palestinian Adolescent Health Coalition and the United Nations Youth Group (UNYTG). UNFPA continues to integrate youth needs into the humanitarian response by coordinating with relevant actors through the Global Compact of Young People in Humanitarian Action' Task Force on the Humanitarian Situation in Palestine.

UNFPA is an active member of the Gaza and West Bank Cash Working Groups and of the Gaza Multipurpose Cash Assistance (MPCA) Group.

UNFPA also leads the Mobile Clinic Working Group to redirect services to vulnerable locations in the West Bank and address accessibility challenges.

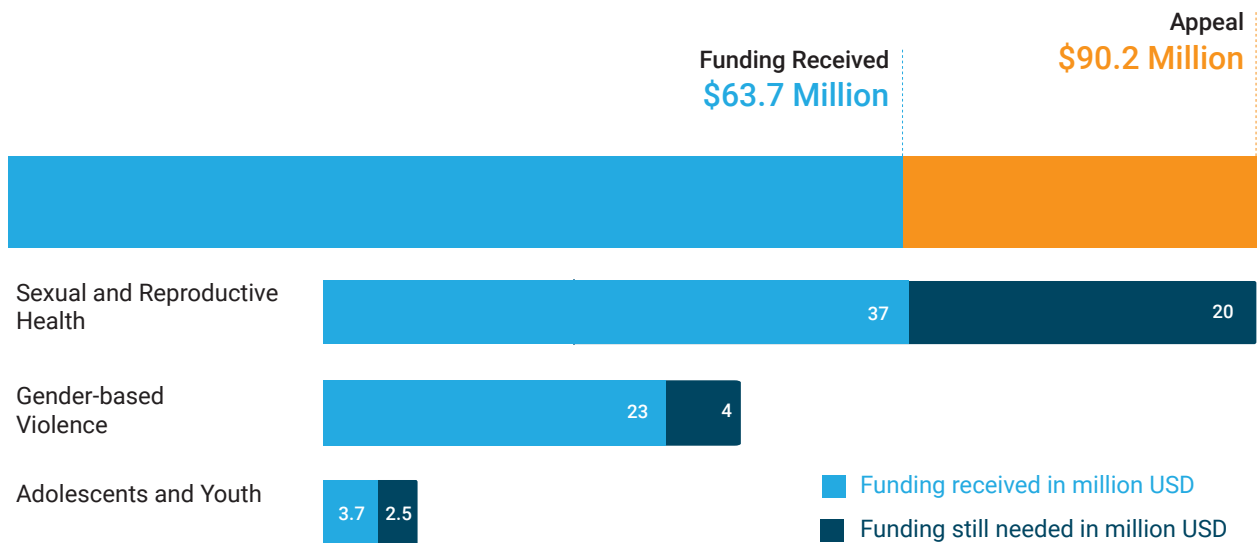
CALL TO ACTION

- **Immediate Ceasefire:** We call for an immediate and enduring ceasefire to halt the violence and protect civilians.
- **Adherence to International Humanitarian Law (IHL):** We demand full adherence by all parties to their obligations under IHL, ensuring the protection of civilians and critical infrastructure. Women and girls must have access to essentials such as food, water, shelter, hygiene, health assistance, and safety.
- **Respect for Healthcare:** We insist that the sanctity of healthcare be respected. Healthcare and humanitarian workers must be guaranteed safety, and healthcare facilities must not become battlegrounds. Healthcare workers and patients should not have to risk their lives to provide or access medical services.
- **Enabling Humanitarian Response:** We call for an enabling environment for a humanitarian response in need of massive scale-up, establishing reliable entry points for relief supplies, enhancing deconfliction mechanisms, streamlining inspection processes, and ensuring unrestricted access for critical life-saving supplies. A stable communication network is also essential to facilitate effective aid delivery.
- **Restoration of Public Order and Safety:** We demand the restoration of public order and security guarantees to ensure safe humanitarian access and that aid reaches civilians in need.
- **Rehabilitation of Essential Services:** We call for the restoration of essential services, focusing on access to clean water, healthcare, cash, rehabilitation of facilities and infrastructure, and ensuring adequate fuel supplies.



FUNDING STATUS

As part of the Occupied Palestinian Territory (OPT) Flash Appeal, UNFPA requested **90.2 million USD** for its operational response from January to December 2024. As of October 2024, UNFPA has received **63.7 million USD**. An additional **26.5 million USD** is urgently needed to fully support UNFPA's operational response through December 2024.



We extend our heartfelt appreciation to all our partners and supporters whose contributions have been instrumental in facilitating UNFPA's humanitarian response, particularly in assisting Palestinian women, girls, and youth.

