BEFORE THE SESSION, I FELT POWERLESS. I STILL FEEL HEARTBROKEN AND EMOTIONALLY IMBALANCED. FINDING SOMEONE TO GIVE ME THE ADVICE ON HOW TO HANDLE MY UNCERTAINTIES AND ANXIETIES WAS VERY HELPFUL.

— Rana, a GBV service provider who participated in an MHPSS session organized by UNFPA

TOTAL FUNDS REQUIRED*
US$ 5.1 MILLION

Following the ceasefire agreed on Friday 21 May, the grave impact of the hostilities is becoming clear. Some 242 Palestinians were killed, including at least 66 children and 38 women, and at least 1948 people were wounded. At least 3,222 families (over 16,600 people) saw their homes damaged, according to the Ministry of Social Development. The health system in Gaza, already overwhelmed by many years of blockade of Gaza, and by the longstanding COVID-19 pandemic, is significantly overstretched. Nine hospitals were partially damaged and 19 health clinics were damaged in the hostilities, including one that sustained severe damage.

In the West Bank, tensions remain high. Some 27 Palestinians have been killed including one woman and four children. More than 6800 people have been injured. New cases of physical attacks, harassment and prevention of access for healthcare workers, paramedics and ambulances are reported.

As in other humanitarian crises, women and girls bear the brunt of these hostilities, placing their lives, dignity and well-being at risk. There are currently 87,000 pregnant women in Gaza and in vulnerable areas of the West Bank. Around 29,000 women will give birth over the next 3 months, and require access to essential healthcare services. Meanwhile, the risk of gender-based violence, including harmful coping mechanisms such as child marriage, often increase during crises, further endangering the lives and well-being of women and girls.
There are currently around 87,000 pregnant women in Gaza and vulnerable areas of the West Bank. An estimated 29,000 women will give birth over the next 3 months in these areas.

In Gaza, of the estimated 16,500 expected deliveries in Gaza over the next three months, around 2,500 pregnant women will experience complications, many of whom will require an emergency C-section. The immediate priority is to ensure safe delivery for these women and their babies.

The key objective is to ensure the continuity of essential sexual and reproductive health services, including safe delivery, pregnancy care, and family planning. This includes:

- Ensuring the continuation of essential sexual and reproductive health services, including for safe delivery, pregnancy care, and family planning. This, in turn, requires:
  - Procuring essential supplies for safe pregnancy and delivery
  - Deploying emergency medical teams in Gaza and supporting mobile clinics in the West Bank to reach communities facing access issues due to escalations
- Conducting risk communication on danger signs in pregnancies and when / where to seek services
- Provision of cash and voucher assistance for pregnant and lactating women.

In my 26 years as a social worker, I have helped thousands, especially women and girls. This time, I needed help.

— Family Therapist and Social Worker at Aisha Association for Women and Child Protection, who participated in an MHPSS session organized by UNFPA
CONFLICT PUTS women AND GIRLS AT higher RISK OF GENDER-BASED VIOLENCE INCLUDING INTIMATE PARTNER VIOLENCE. MOST GBV OFFICE-BASED AND IN-PERSON SERVICES IN THE GAZA STRIP, SUCH AS LEGAL AID, GBV CASE MANAGEMENT AND PSS HAVE BEEN SUSPENDED AS WELL AS OTHER COMMUNITY EDUCATION/AWARENESS RAISING ACTIVITIES.

GENDER-BASED VIOLENCE & MHPSS

It is essential to ensure continuity of essential GBV response services such as MHPSS and health services; many such services are currently suspended, and the two main shelters in Gaza were closed during the bombardment, with GBV survivors sent home, hence facing a double protection challenge. Other GBV services, such as the Safe Space in the Jabalia refugee camp, were damaged by shelling. Many women and girls require essential supplies and unconditional cash/voucher assistance. Most GBV office-based and in-person services in the Gaza Strip, such as legal aid, GBV case management and PSS have been suspended as well as other community education/awareness raising activities.

RESPONSE NEEDS

Existing GBV survivors, displaced women and girls - whether at shelters or with extended family - and vulnerable women and girls are facing significant protection concerns, and will require assistance. Priority needs include:

- Providing dignity kits containing essential hygiene and menstrual management items, protection information and PPE to women and girls who have been displaced.
- Providing cash and voucher assistance for women at risk of GBV, especially IDPs, and vulnerable women such as women with disabilities, elderly women and breast cancer patients in host families and communities.
- Providing integrated protection support to IDPs and vulnerable women and girls, including updated referral pathways and protection information and GBV detection and referral through sustained availability of multi sectoral GBV services.
- In-person and remote MHPSS, including group sessions, for both SRH and GBV service providers and for youth volunteer leaders.
- Conducting an assessment on the impact of hostilities on GBV survivors and vulnerable women and girls.

Photography by Ahmad Zaqout

“OUR FAMILY WAS FORCED TO EVACUATE. MY DAUGHTER SHAIMIA’S MENTAL HEALTH DETERIORATED. SHE REFUSES TO EAT AND DOES NOT INTERACT WITH FAMILY MEMBERS.”

— Mother of Shaima, a 17 year old girl in Gaza
YOUTH AND ADOLESCENTS

There are 1.14 million young people in Palestine. Youth make up 22% of the population in the Gaza Strip and 23% in the West Bank. The crisis has heightened risks and exacerbated the vulnerabilities of young people in Gaza and East Jerusalem, in particular. There are high rates of anxiety, depression, and post-traumatic stress disorder, which may increase high-risk behaviour including violence, drug use, and suicide.

RESPONSE NEEDS

- Trauma has increased the need for mental health and psychosocial support (MHPSS) in Gaza and in East Jerusalem. There is a need to mitigate the long-term negative mental health impacts that the hostilities incur on youth in Gaza.
- Young people should be included in the response as active participants and not only as beneficiaries: volunteer efforts aimed at supporting clean-up efforts and basic psychosocial support are empowering youth and engaging them in safe and meaningful ways.

ADOLESCENT GIRLS FACE A WIDE ARRAY OF PROTECTION RISKS THAT USUALLY ACCOMPANY THEM THROUGHOUT THE COURSE OF THEIR LIVES. THESE INCLUDE DENIAL OF EDUCATION AND OPPORTUNITIES, FAMILY VIOLENCE, FORCED AND SERIAL MARRIAGES, SEXUAL EXPLOITATION AND VIOLENCE, AMONG OTHERS.

I FEEL INSECURE WHILE TRAVELLING BETWEEN CITIES, AS A RESULT OF THE PRACTICES AND ASSAULT OF SETTLERS ON THE HIGHWAYS. THIS HIGHLY AFFECTED MY WORK AS A VOLUNTEER AND AS AN ACTIVIST.

— Nadine, Ramallah, West Bank
BUILDING LIFELINES

- GBV and SRHR service providers, as well as youth volunteer leaders, are benefitting from on-going psychosocial support provided by UNFPA. To date 60 service providers have benefitted from such support; an additional 10 sessions are planned.

- Assessments are underway to ascertain the impact of the hostilities at the service delivery level (health including SRH, GBV/MHPSS); emergency service directories in Gaza are being updated through the GBV Sub-Cluster.

- 1000 Dignity kits are being distributed in Gaza City and in the South and Middle areas of Gaza. An additional 1500 dignity kits are being procured and will be distributed in the coming weeks. Kits include essential hygiene and protection items, as well as information on hotlines for GBV services and PSEA.

- UNFPA is scaling up cash and voucher assistance (CVA) provided through an existing partnership with WFP. In the immediate term, an additional 500 women in shelters and in host communities will receive multi-purpose cash in the amount of $200.

- UNFPA is providing support to essential sexual and reproductive health services, including mobile teams to undertake home visits in Gaza, and mobile clinics to reach remote communities in the West Bank.

- Procurement of essential sexual and reproductive health supplies and medication such as maternal health drugs is underway.

- Over 150 young volunteers are active in humanitarian first response and have joined the Gaza municipality in its “We will Rebuild Gaza” campaign. Activities include street cleaning and basic psychosocial support by trained volunteers, to women and children at shelters in Gaza. Youth peer helpers are also engaged in distributing food packages to 100 affected families in shelter schools, and conducting a needs assessment for rehabilitation work for damaged houses and public playgrounds through the national campaign “Solidarity with your People.”

FUNDING NEEDS

UNFPA Palestine’s initial needs estimates amount to $5,100,000 to provide immediate life-saving SRH and GBV services.

Through UNFPA internal resources, as well as generous contributions from donors (including the Government of Canada and the Palestine Humanitarian Pooled Fund), UNFPA has to date mobilized $2,770,000 for its response. UNFPA is deeply grateful to our donors for their contributions to the health and protection of Palestinian women and girls.

FOR MORE INFORMATION

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Photography by Ahmad Zaqout