

# Gaza Humanitarian Response Update | 13-19 May 2024

20 May 2024

Period: 13-19 May 2024

The information below is provided on a weekly basis by Clusters and select Technical Working Groups operating in the occupied Palestinian territory (oPt). It is updated throughout the week to reflect new content. For an overview of priority needs and activities by cluster, please see the [Flash Appeal](#) released on 17 April covering the period from April through December 2024.

## HEALTH

### Response

- The Health Cluster has operationalized the Rafah incursion contingency plan that was developed in March 2024, which has enabled the continuity of health services in southern Gaza governorates.
- As part of its preparedness measures, WHO safeguarded supplies and equipment in hospitals within and near the evacuation blocks. Medicines, equipment, and supplies have been relocated from the Indonesian field hospital, Al Kuwaiti Hospital, and El-Emirati Maternity Hospital to Nasser Hospital.
- WHO set up a 2,300-m<sup>2</sup> warehouse in Deir al Balah, to which supplies were relocated from the WHO Rafah warehouse, health partners' warehouses, and hospitals. In addition, the 65-m<sup>2</sup> cold room warehouse contains supplies from IMC, PUI, and UNFPA.
- On 13 May, the Health Cluster conducted a mission to North Gaza, delivering 11,000 litres of fuel, medicines, and medical supplies to Kamal Adwan and Al Awda Hospitals to ensure the continuity of health services in the north.

### Challenges

- With over 800,000 already displaced from Rafah, people have been relocating to areas lacking basic necessities such as water and food. This dire situation is likely to result in a surge of communicable diseases, including skin rashes, diarrhoea, and hepatitis A, as well as malnutrition.
- Fuel shortages persist, negatively affecting health interventions at hospitals and primary healthcare facilities.
- Continuous hostilities across the Gaza Strip and issuance of evacuation orders pose significant barriers to accessing healthcare service points.
- Essential sexual and reproductive health services in Gaza are severely limited, as only a few hospitals remain partially operational following multiple attacks on healthcare.
- Continued closure of Rafah Crossing will place additional constraints on health service delivery.

## Nutrition

### Response

- Despite manifold challenges, partners continue to conduct Mid-Upper Arm Circumference (MUAC) screenings in shelters and healthcare facilities. Since mid-January, 87,743 children aged 6-59 months have been screened for malnutrition, of whom 6,820 have been diagnosed with acute malnutrition, including 5,224 with Moderate Acute Malnutrition (MAM), and 1,596 with Severe Acute Malnutrition (SAM). These children are currently receiving treatment in line with the simplified protocols.
- Since 1 May, WFP and its partners have reached 60,000 children under the age of five and pregnant and breastfeeding women (PBW) with a 15-day allocation of Lipid-based Nutrient Supplements (LNS-MQ) for the prevention of malnutrition.
- Nutrition Cluster partners have increased their services in Al Mawasi, Khan Younis, Deir al Balah and Gaza city and have been tracking displaced staff and community volunteers to ensure continued service delivery in areas hosting newly displaced people.
- In North Gaza, Juzoor has set up 15 nutrition service centers in shelters, with 32 staff members screening over 1,900 children and managing 90 identified cases of malnutrition since the beginning of May.

- So far in May, 4,907 caregivers of children under the age of two, including PBW, received sensitization sessions on Infant and Young Child Feeding Practices in Emergencies (IYCF-E). A total of 16 Mother-Baby Areas for the promotion of IYCF-E have been set up by various partners in Gaza city while almost 400 mother-to-mother support groups have been established. Save the Children (SCI) has opened a site in Deir al Balah, which provides nutrition screening, treatment and referral, as well as group counselling, one-on-one counselling and peer support groups.
- WHO partners and Ministry of Health (MoH) continue to offer stabilization services at four health facilities (two in Rafah, one in Gaza city and one in North Gaza) for children suffering from SAM with complications, with support from WHO. However, WHO and MoH are planning to relocate services from the stabilization centre at Tall as Sultan Health Center in Rafah to Nasser Medical Complex in Khan Younis due its currently limited functionality following the displacement of health workers. An additional stabilization centre is being set up by the International Medical Corps, with support from WHO, in Deir al Balah, which will bring the total number of stabilization sites to five.
- UNICEF has provided partners with nutrition supplies estimated to cover requirements for two months. UNICEF also continues to strengthen the capacity of health workers, community volunteers and partners' staff to sustain and scale-up the delivery of nutrition services.



### Challenges

- Limited access to Gaza city and North Gaza has hindered plans by UNRWA to start nutrition services at four medical points.
- Access constraints across Gaza continue to hamper the early detection of children and women requiring nutrition services and the scale-up of operational presence and needed support.
- The delivery of nutrition services has been severely disrupted by the military incursion in Rafah and North Gaza and resulted displacement. In Rafah, WFP partners have lost access to 101 distribution points for malnutrition prevention activities and nine UNRWA nutrition sites have been similarly affected or closed.
- Despite redeployment efforts, the limited number of partners present in Khan Younis is insufficient to address the increased need for nutrition services following the large-scale displacement to the area, heightening the risk of inadequate or no follow-up on the cases of children under treatment.



## Shelter and Non-Food Items (NFIs)



### Response

- Mapping shelter stocks and response activities to identify gaps and sharing with partners an updated guidance on prioritization.



### Challenges

- No remaining stocks of shelter materials inside Gaza. The shelter cluster partners continue to advocate for greater access to Gaza for trucks carrying shelter items.
- Very low remaining stocks of fuel, for distribution of shelter and non-food items by cluster partners.
- The rapid, large-scale population movement out of Rafah and the fluidity of the situation more generally.
- Households' own lack of access to transport for carrying shelter items.
- Lack of safe identified locations for shelters.



## Water, Sanitation and Hygiene (WASH)



### Response

- The WASH Cluster, in coordination with infrastructure operators, local authorities and key partners, is mapping and identifying the primary water and sewage services in locations hosting displaced people.
- The Cluster is prioritizing the repair and upgrade of water and sanitation systems in Deir al Balah and Khan Younis governorates to increase coverage, including the rehabilitation of pumping stations, water wells, and water connections.



### Challenges

- Limited fuel availability to support water production, treatment, distribution, and solid waste management removal and disposal.
- There is a shortage of hygiene kits and water containers for households to collect and store water, which are especially critical in light of the ongoing large-scale displacement.

- Waste transfer stations and landfills are no longer accessible, necessitating urgent action to upgrade temporary dumping sites.



## Protection



### Response

- **Child Protection:** In response to the large-scale displacement of people and frontline workers, child protection mobile teams continue to provide psycho-social support and raise awareness on key child protection concerns, particularly in Rafah and Deir al Balah. (See [here for data on the response](#).)
- **Gender-Based Violence (GBV):** Despite displacement, GBV actors are striving to continue service provision without interruption and efforts are ongoing to distribute available hygiene kits to women and girls. The mapping of available support services by partners who were forced to relocate is being updated, including those related to Sexual and Reproductive Health and the Clinical Management of Rape (CMR). A list of active kitchens has also been compiled and disseminated in support of internally displaced persons (IDPs), especially female-headed households.
- **Mine Action:** Efforts continue to deploy additional Explosive Ordnance Disposal (EOD) officers to Gaza and, where access permits, conduct Explosive Hazard Assessments (EHAs); deliver Explosive Ordnance Risk Education (EORE) and Conflict Preparedness and Protection (CPP) sessions in Rafah and Deir al Balah; undertake EORE campaigns via radio and flyers; and map suspected unexploded ordnance and high-risk areas. The integration of mine action into the management of debris, when circumstances on the ground will allow, is currently in the planning phase.



### Challenges

- Evacuation orders have forced Protection Cluster actors to relocate their services; many providers and their families have been displaced themselves, resulting in a limited presence of frontline staff in Al Mawasi, where there is a high population density. This has also negatively affected the re-establishment of GBV referrals and services, with partners reporting a lack of tents in Khan Younis and Deir al Balah and exorbitant rent costs. Transportation costs have similarly increased, heightening the cost for accessing services, including for women and girls.
- Cash shortages are hindering the encashment of Cash and Voucher Assistance (CVA) by some recipients; this is negatively affecting living conditions, increasing the risk of exposure to violence or exploitation for women and girls, and hindering the ability of partners to pay local service providers and staff salaries.
- The abrupt interruption in the entry of fuel has nearly halted the implementation, monitoring and coordination of Cluster activities, and has posed an additional challenge for people forcefully displaced from Rafah to Deir al Balah and Khan Younis.
- Frequent interruptions of internet and communications services as well as damage to key infrastructure continue to curtail mobility and operations. Some partners reported having already lost communication with their teams for several days in the north, especially in Jabalyia.
- Logistic and security constraints continue to hamper the creation of safe spaces for confidential GBV case management activities, such as safe houses/shelters for high-risk cases and CMR, and the implementation of alternative care options for unaccompanied children.
- Denial of entry of critical items, such as mine action supplies, sanitary pads, dignity and menstrual health management kits for women and girls, as well as recreational materials for children. These supplies are absent or extremely limited on the local market and, when available, they have been subjected to soaring prices. The closure of the Rafah Crossing is also impeding the entry/exit of international humanitarian workers.
- Administrative hurdles, such as registration of organizational entities and delayed provision of visas.



## Logistics



### Response

- On 17 May, the eighth direct convoy, comprising 43 trucks of food, nutrition, and medical supplies provided by three partners, was dispatched from Amman via the Jordan Corridor and entered northern Gaza through Erez West Crossing. A ninth direct convoy is currently on hold as access to the Erez West Crossing has been compromised by a recent evacuation order issued by Israeli forces. Meanwhile, a convoy of five trucks carrying key equipment, which were dispatched from Jordan on 30 April through the Amman-Aqaba-Nuweiba-Al Arish-Kerem Shalom-Rafah route, is still awaiting entry into Gaza in Al Arish, Egypt.
- The Logistics Cluster is in the process of setting up a new warehouse in Deir al Balah (1,700 square metres) for common storage by humanitarian actors.
- As of 12 May, the pipeline forecast for the next three months stood at 315,440 metric tons (MT) of humanitarian aid, including 206,899 MT through the Egypt corridor, 41,499 MT through the Jordan corridor, 36,229 MT exclusively of flour

from the Ashdod port, 7,800 MT through the maritime corridor from Cyprus, and an additional 23,013 MT of cargo that are yet to be allocated to a specific corridor.



## Challenges

- Since 7 May, the Logistics Cluster has been unable to access and assess its common storage facility in Rafah, facilitate storage services or operate the cargo notification system in support of humanitarian actors.
- The overall deterioration in the security situation has either severely hampered or completely halted the movement of aid workers and humanitarian relief items into and across the Gaza Strip.
- Infrastructural damage, access and security challenges, lengthy checkpoint clearance procedures, lack of logistical supplies, assets, and spare parts, as well as insufficient fuel supplies to sustain essential operations and services, continue to limit storage and transport capacity within Gaza.
- The absence of a regular schedule for convoys travelling directly from Amman to Gaza prevents effective planning and a timely and reliable flow of aid via the Jordan Corridor.
- Lack of consistent, real-time cargo visibility along the transportation routes. Moreover, uncertainty around the opening of additional entry points is undermining effective cargo and international procurement planning.



## Emergency Telecommunications (ETC)



### Response

- The 30 pre-approved Very High Frequency (VHF) digital radios and four solar kits imported from WFP FITTEST warehouse in Dubai were cleared by Israeli customs authorities with facilitation from UNDP and handed over to UNDSS on 14 May. The VHF radios, donated by the ETC Cluster to UNDSS, will serve as alternative secure communications platforms for humanitarian responders in Gaza.
- Thanks to new funding, the ETC is initiating the procurement and import of priority ICT equipment and seeking approval from the Israeli authorities.
- For more information on ETC activities, please visit: Palestine: [Conflict | Emergency Telecommunications Cluster \(ETC\) \(etcluster.org\)](https://etcluster.org).



### Challenges

- Only 23 per cent of the US\$1.8 million requested in the oPt [Flash Appeal](#) launched on 17 April has been received, following the receipt of a \$415,000-grant from a WFP donor on 13 May. Urgent funding is needed to address critical life-saving communication efforts in Gaza until 31 December 2024.
- Due to escalating hostilities, damaged infrastructure and fuel shortages, local Mobile Network Operators (MNOs) and Internet Service Providers (ISPs) are experiencing network outages. Insecurity and prevailing conditions are also preventing the conduct of repairs and rendering it difficult to maintain network functionality. Networks are now operating only at 40-50 per cent of available capacity.
- The import of telecommunications equipment into Gaza remains lengthy and extremely challenging. Only 20 satellite phones, four VHF repeaters, four solar powered solutions and 50 VHF handheld radios have been approved by the Israeli authorities since 7 October 2023.
- An improvement in security conditions is required for the ETC Cluster to dispatch newly received ICT equipment to Gaza.
- There is an urgent need to establish a joint operational hub in Deir al Balah where humanitarian responders may access common internet services and coordinate and plan humanitarian missions to northern Gaza.

Protection against sexual abuse and exploitation (PSEA) remains a cross-cutting priority for all clusters. Aid distribution must be delivered with dignity and respect. Any wrongdoing can be reported through SAWA toll-free number 164. SAWA will assist and provide services free of charge and with the utmost confidentiality.