

Occupied Palestinian Territory (oPt): Gaza

Photo: Hakim Abu Karsh. Remnants of a family home in Beit Hanoun, severely damaged during the May 2021 escalation.

1. REPORT SUMMARY

This protection analysis update (PAU) focuses on risks and threats across the Gaza Strip, January-June 2022. (It does not reflect the impact of the August 2022 hostilities.) It explains the impact on the population, the protection responses, challenges and recommendations. (There is a separate protection analysis for the West Bank and East Jerusalem.) The priority protection risks in Gaza are:

- **General protection and human rights concerns**
 - Killing/injuries and excessive force
 - Restrictions on freedom of movement and impediments to access to services, resources, humanitarian assistance, opportunities
 - Infringements on freedom of expression and peaceful assembly
 - Arbitrary arrests, detention and torture or ill-treatment
- **Internal displacement**
 - Active hostilities/ escalations of violence
 - Evictions
- **Psychosocial distress and deterioration in mental health**
 - Conflict-related violence/ prolonged periods of tension
 - Physical assault or abuse
 - Psychological or emotional abuse
- **Child protection threats and grave violations against children**
 - Violence against children in the home, school, and community
 - Exploitation and neglect
 - Negative coping mechanisms
- **Specific protection risks for women and girls**
 - Gender-based Violence (GBV) in all its forms
 - Child, early and forced marriage (CEFM)
 - Lack of access to services (including safe shelter)
- **Explosive remnants of War**

¹ Based on 15%, the WHO global figure on the world's population living with some form of disability

Methodology

The analysis is guided by the Global Protection Cluster's Protection Analytical Framework, which seeks to identify threats, their impact on the population and capacities available to mitigate these. It is compiled using secondary data and analysis from Areas of Responsibility and partners, and situation reports from OCHA and UN Human Rights Office (OHCHR).

This PAU will be updated twice a year, with additional in-depth protection analysis by the Protection Cluster and its Areas of Responsibility (AoRs): GBV Sub-Cluster (GBV SC), Child Protection and Mental Health and Psychosocial Support Working Group (CP/MHPSS AoR), Mine Action (MA) and the Legal Task Force (LTF).

Limitations

Repetitive escalations of violence and the COVID-19 pandemic have stalled and interfered with efforts to gather in-depth, reliable data. Pending results of needs assessments, updated analysis of threats, impact and capacity, as well as responses to address these, will be provided on a regular basis.

A new 5Ws System for the occupied Palestinian territory (oPt), which is currently in development, will harmonize and standardize systems for collecting, managing, analyzing and using data.

People in Need (PiN) Gaza: 988,282

Children		Adults		Over 65	
Boys	Girls	Men	Women	Men 65+	Women 65+
253,078	246,109	462,588	234,523	13,519	12,989
499,187		462,588		26,507	
Persons with Disabilities ¹ : 148,242					
Total PiN: 988,282					

2. CONTEXT OVERVIEW

Palestinians in the occupied Palestinian territory (oPt) face increasing and disproportionate impacts of a deteriorating humanitarian and security situation. This leads to increased civilian casualties and protection risks, deprivation of freedom of movement and displacement. In 2022 protection risks continue to deepen and become more severe.

Protracted protection crisis

Protection needs in Gaza are driven by a protracted protection crisis with most Palestinians struggling to meet basic needs and live in dignity. The region is marked by 55 years of Israeli military occupation, including a military blockade of Gaza since 2008 affecting all aspects of life. It is also marked by violations of international law (IL) and lack of accountability by both Israel and Gaza de facto authorities, unresolved internal Palestinian political divisions and recurrent hostilities between Israel and Palestinian armed groups, notably four major escalations in 14 years, as well as the Great March of Return (2018-19) – a series of weekly demonstrations at the Gaza-Israel border that led to the death and injury of thousands of Palestinians.

The protracted protection crisis means that about 1.32 million Palestinians across Gaza experience or are at risk of conflict, violence and forcible displacement/transfer and are in need of humanitarian assistance.²

According to the latest calculation of People in Need (PiN) and severity ranking based on both the 2021 oPt Multi-sectoral Needs Assessment (MSNA) and other available data from protection contextual indicators and indicators specific to each Area of Responsibility (AoR), an estimated

988,000 people across the Gaza Strip are in need of protection and humanitarian assistance.

In addition to long term exposure to violence and conflict, socio-economic stressors related to the blockade and the effects of the COVID-19 pandemic have taken a toll on the mental health of Palestinians, and MHPSS services continue to be over-stretched and unable to meet increasing needs.

Israel

In Gaza, Israel as occupying power continues to violate its responsibility to ensure basic needs, including through the enforcement of its ongoing military blockade – which may amount to collective punishment.³ Now in its 15th year, the blockade imposes dependence and heavily restricts access and movement of people and goods in and out of Gaza limiting Palestinians from accessing basic services, quality health care, aid, resources, livelihoods, housing, opportunities, legal documentation and justice. Combined these limitations aggravate suffering of civilians, degrade living conditions and hamper infrastructure development, economic recovery and employment growth. The result of the above listed factors is the near collapse of Gaza's economy, as well as its separation from the rest of the Palestinian economy. Gaza has one of the world's highest unemployment rates (47% peaking among youth at 60%⁴), and more than half of its population lives below the poverty line, including 400,000 children.⁵ Nearly half the population rely on food aid and there is severe shortages of medicine and medical supplies, energy, fuel resources and other necessary operational needs⁶. Many chronic diseases cannot be treated in Gaza and patients are often delayed or prevented by Israeli authorities from traveling to other parts of the oPt or abroad to receive medical care and face great challenges in doing so, due to a cumbersome exit permit system imposed by Israel. Some die while waiting to travel for potentially life-saving care.

² OCHA, Humanitarian Needs Overview 2022, occupied Palestinian territory (oPt)

³ A/76/333, para. 36; A/75/336 para. 24; A/74/468, para. 22; A/73/420 para. 7.

⁴ According to the PCBS report for the first quarter of 2022:
<https://www.pcbs.gov.ps/post.aspx?lang=en&ItemID=4232>

⁵ https://unctad.org/system/files/official-document/a75d310_en_1.pdf

⁶ OCHA 2020

Further, the majority of the population has no access to safe water, or a proper sewage system and prolonged electricity blackouts, of up to 12 hours a day, and internet disconnection continue.

Inside Gaza, Israel continues unilaterally declaring access restriction in specific area,⁷ thereby closing off access to an estimated 25% of farmland and an established 15-20% of farmers are unable to irrigate crops due to restrictions. Common ways Israeli Forces (IF) enforce restrictions include regular use of live ammunition towards Palestinian farmers, the levelling of farmland and damage to property with bulldozers, the spraying of herbicides in the vicinity of the perimeter fence (including using substances deemed hazardous for human health and the crops)⁸ and the manipulation of natural water flows into Gaza causing floods. Israel also intermittent reduces or completely closes the fishing zone. Along the Gaza coast, the Israeli Navy continues to enforce unilaterally imposed access restrictions, shoot at and use water cannons on Gaza fishermen while conducting patrol operations,⁹ mostly within the authorized fishing zones. In 2022, the Israeli Navy arrested significantly more fishers (41 as at early June 2022, as opposed to 11 in total in 2021) and confiscated their fishing boats, seriously impacting the livelihood of many. The situation in the restricted areas on land and at sea raises serious human rights concerns for people who reside there or who are dependent on those areas for livelihoods (fishermen, farmers, shepherds or rubble collectors) and remain vulnerable to threats to life and security, arbitrary arrest and detention, loss of livelihoods, restricted access to services and potential displacement. Communications by Israeli authorities about the scope of the access restrictions on land and at sea remain inconsistent and therefore arbitrary.¹⁰

Israel also engages in repetitive rounds of violence and conflict with armed groups in Gaza, the most recent in May 2021 – which resulted in the killing

and serious injury of Palestinians and raises concerns about violations of International Humanitarian Law (IHL). A total 261 Palestinians were killed (including 67 children)¹¹ and more than 2,200 (including 685 children and 480 women) were injured and maimed in Gaza. An estimated \$380million in damages occurred to core infrastructure, as well as \$190 million in economic losses, and according to Palestinian Ministry of Agriculture, losses in agriculture surpassing \$200 million. Similar to previous escalations of violence, a culture of impunity vis a vis lack of progress and transparency on accountability for possible violations of international law persist. Escalations in violence as well as the ongoing blockade have contributed to dramatic declines in mental health and psychosocial wellbeing including of children, young people and their caregivers.¹²

Government of State of Palestine and Gaza de facto authorities

Practices of both the Government of the State of Palestine and Gaza de facto authorities continue to adversely impact the rights and wellbeing of Palestinians. This includes the long-standing intra-Palestinian divide, which among other things reduces the opportunity for institutions in Gaza to deliver basic services. Further, Palestine's economy is enduring a long running fiscal crisis and there is a dire economic outlook. Among the many adverse impacts has been the inability of the Government of Palestine to fully meet some of its obligations such as financial aid to more than 110,000 poor families of which 80,000 are in Gaza, who rely on quarterly 1700-1800

⁷ The extent of the land restricted area may vary. Up to 300 metres from the Israel-Gaza fence is considered a no-go zone and up to 1,500 metres a high-risk area.

⁸ A/72/565, para. 34, A/73/420, para 44. See, also <https://forensic-architecture.org/investigation/herbicide-warfare-in-gaza/>

⁹A/75/336, para. 38.

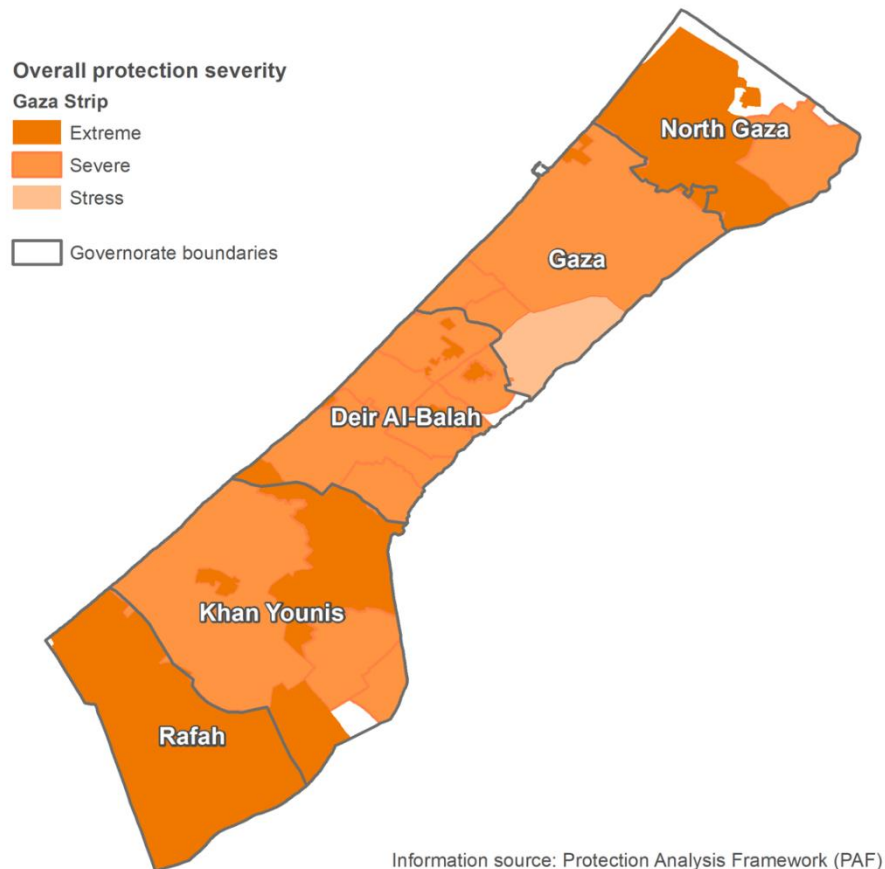
¹⁰ A/73/420, para. 45.

¹¹ HNO 2022 and SRSG 2021 Children and Armed Conflict, June 2022

¹² <https://resourcecentre.savethechildren.net/document/trapped-the-impact-of-15-years-of-blockade-on-the-mental-health-of-gazas-children/>

GAZA PAU Severity Map – May 2022

Protection Cluster - Overall Gaza Protection severity map



Information source: Protection Analysis Framework (PAF)

Baseline data: OCHA oPt

¹³ <https://www.un.org/unispal/document/action-by-un-system-and-intergovernmental-organizations-relevant-to-the-question-of-palestine-may-2022-monthly-bulletin/>
<https://socialprotection.org/discover/programmes/palestinian-national-cash-transfer-programme-pnctp>

Killings/injuries and excessive use of force

Since the beginning of the year 12 people have been injured by Explosive Remnants of War (ERW), including seven children (six boys and one girl) and four men were injured including one seriously with live ammunition allegedly by Gaza de facto authorities during demolition of an illegally built structure (further details under Risk 2 Internal Displacement).

OHCHR monitoring shows that outside major escalations in conflict farmers and fishers in the ARA and those living close to the fence dividing Gaza and Israel are most often at risk and routinely subjected to Israeli military attacks while carrying out essential livelihood activities.

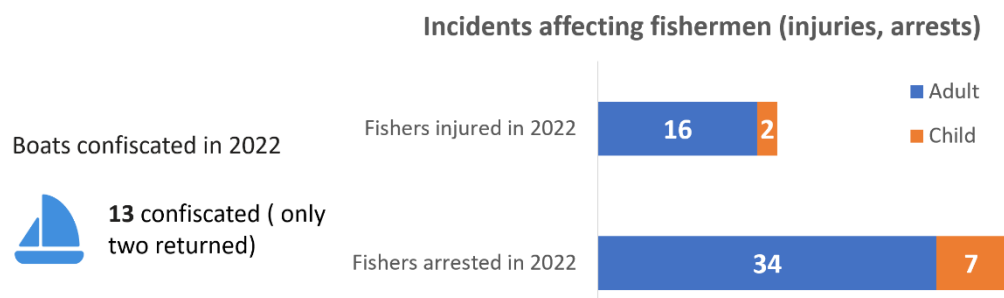
Since the beginning of 2022, the Israeli navy arrested and injured an increasing number of fishermen along Gaza's coastline. In less than 6 months, Israel carried out 152 attacks against fishermen, resulting in 18 fishermen injured with rubber coated metal bullets including three children and 41 arrested, including six children¹⁵ – almost quadruple numbers for the whole of 2021 (in 2021 only 11 fishermen were arrested). Of the 41 fishermen arrested all except five, who are still in detention, were released the same day or the following day, suggesting no clear threat to Israel's national security. The incidents happened while fishermen were sailing within the permitted fishing zone (2 to 15 nautical miles) off Gaza's coast, exacerbating uncertainty fishermen routinely experience about movement rules at sea. Further, in most cases fishing boats and fishing gear is either damaged or confiscated. A single boat can impact the livelihoods and food of up to 20 families. OHCHR reporting shows that since the beginning of the year a total 13 fishing boats were confiscated. Often fishing boats are damaged or mostly not returned.¹⁶

¹⁴ https://www.eeas.europa.eu/palestine/eu-projects-palestine_en?s=206

¹⁵ OHCHR, Al Mezan Center for Human Rights

¹⁶ Since the beginning of the year only two boats out of 13 confiscated were returned on 2 June 2022

Incidents affecting fishermen January-June 2022



Farmers tending crops in the ARA are also at risk of military activities. In particular, farmers risk being shot or injured by live ammunition, rubber-coated metal bullets or with tear gas by IF who patrol the area and routinely enter the ARA to bulldoze, level land and aerial spray herbicides. While no casualties were reported so far this year, at the end of 2021 (December), five farmers including a 17-year-old were injured by live fire while tending crops. Such incidents are rarely if ever investigated and continue to inhibit the development of Gaza's agricultural sector. IF also rarely provide warning of their activities in the ARA to protect farmers and their livelihoods and avert risks of injury and damages to property.

Further, while no major escalations occurred so far this year in Gaza, a year after the May 2021 conflict recovery is painstakingly slow. Much civilian infrastructure damaged during intense shelling and airstrikes including hospitals, health and education services is still recovering from fundamental damages (originally ten hospitals, 22 Primary Health Centres (PHCs)

¹⁷ A/HRC/49/25, A/HRC/46/22, A/HRC/43/21, A/HRC/40/43

¹⁸ A/HRC/49/25. The Palestinian Centre for Human Rights reported having submitted 57 criminal complaints to the Military Attorney General of Israel and 295 civil complaints to the compensation office of the Ministry of Defense of Israel in relation to incidents involving the killing of 101 Palestinians and the injury of another 100 during the hostilities in May 2021. According to the Palestinian Centre for Human Rights, the Military Advocate General of Israel had indicated that, to

including the complete destruction of one PHC, 186 public, private, and UNRWA education facilities, and 80 kindergartens were impacted).

Impunity and lack of transparency on investigations by Israeli authorities remain of utmost concern,¹⁷ including possible violations of IHL in the context of hostilities, during past escalations as well as the widespread use of lethal force by IF in the context of the Great March of Return demonstrations at the Israel-Gaza border during 2018-2019. Despite numerous incidents documented by OHCHR during May 2021 escalation where Israeli attacks caused significant civilian casualties and damages to civilian objects and may have violated international law principles, as of 31 October 2021 no criminal investigations had been opened into the conduct of Israeli forces.¹⁸ Similarly, no information is available publicly or to OHCHR on any steps taken by the State of Palestine or the Gaza de facto authorities to investigate alleged violations of IL by Palestinian armed groups during the May 2021 hostilities.¹⁹ The duty to investigate such incidents is an important element in the protection afforded to the right to life and liberty.²⁰ In the rare cases where there are investigations resulting in criminal charges they are often incommensurate with the gravity of the conduct.²¹

Restrictions on movement and impediments to access to services, humanitarian assistance

Continued restrictions on patients needing to exit Gaza to obtain essential and often life-saving medical care in Israel or West Bank, as well as the movement of essential medical equipment and supplies into Gaza, remain of grave concern. Challenges include denial or repeated delays by Israel approving exit permit for patients and their companions and the PA and

date, 11 of those complaints had been referred for further examination to the General Staff Mechanism for Fact-Finding Assessments, established in 2014.

¹⁹ Ibid.

²⁰ Human Rights Committee, general comment No. 36 (2018), para. 27; and Minnesota Protocol on the Investigation of Potentially Unlawful Death

²¹ A/75/336, para. 9; A/HRC/40/43, paras. 19–21; and A/HRC/46/22, para. 16.

Gaza de facto authorities complicated and long-winded procedures for referring patients from Gaza to medical treatment in West Bank and East Jerusalem hospitals. In the first six months of 2022, 63% of patient permit applications to cross Erez for treatment in the West Bank and East Jerusalem were approved (similar to the annual approval rate for 2021). In June 2022, men aged 18 to 40 had the lowest approval rate (43% approved June 2022) while women over 60 had the highest approval rate (76%).²² A total 0.8% of patient permit applications were denied outright in the first six months of 2022, including 13 children under 18. Tragically and all too often patients die while waiting for permits. In the period 2008-2021 more 839 patients died while waiting for permits.²³ Since the beginning of the year, OHCHR documented four patients including three children, who died while waiting to obtain Israeli permits to exit Gaza for medical care in Israel and the West Bank or later were refused admission by West Bank hospitals. In one case an 18-month-old girl diagnosed with a treatable illness died due to Israel's repeatedly delay issuing a permit for the girl and her companion to Jerusalem.²⁴ Further, permit delays have also led to complications that permanently affect patients' lives and restrictions on movement of health staff has a detrimental effect on professional development and technical knowledge that affects service quality and treatment.^{25, 26}

Another concerning trend are security blocks, and in some cases arrest and detention, of Palestinians at crossing points with valid Israeli issued medical access, merchant or worker permits. In 2022, while no patient or companion has been arrested or detained there were 58 security interrogations of patients as a prerequisite to permit application. In June

alone 23 patients were called for security interrogations.²⁷ Further, in 2022 Israel (COGAT) increased the quota of permits for Palestinian labourers (from Gaza) to work in Israel to 15,500²⁸ expected to increase to 20,000. For Palestinians from Gaza this can translate into a salary 3-4 times higher than they can make in Gaza. While Israel agreed to allow additional 8,000 workers from Gaza in the Israeli construction and agriculture sectors there have been several instances of workers detained, interrogated and denied access to Israel while attempting to cross Erez.

Israeli control of Palestinian population registry and the 'Separation Policy'

Israel continued to use its control over the movement of people and of the Palestinian population registry to maintain the separation between Gaza and the West Bank,²⁹ which is part of a policy publicly acknowledged and implemented by Israeli authorities since Hamas took over Gaza in 2007.³⁰ This policy impacts people's access to economic and social rights and imposes discriminatory and arbitrary restrictions on family unifications between Palestinians from different parts of the oPt. It also affects women in particular³¹ and prevents most Palestinians from Gaza reaching the West Bank, dramatically affecting about a third of Gaza residents with relatives in the West Bank, including East Jerusalem. Family visits do not represent an accepted criterion for obtaining an exit permit from Gaza.³² The Citizenship and Entry into Israel Law (Temporary Order) passed in the Knesset in March 2022, which, in line with longstanding prior policies, includes a provision

²² Data provided by WHO oPt, 2022

²³ <http://www.emro.who.int/opt/news/15-years-of-blockade-and-health-in-gaza.html>

²⁴ WHO Health Access Monthly Report, April 2022

²⁵ <http://mezan.org/en/uploads/files/16552750921901.pdf>

²⁶ http://www.emro.who.int/images/stories/palestine/documents/who_right_to_health_2018_web-final.pdf?ua=1&ua=1

²⁷ Data provided by WHO oPt 2022; WHO Health Access Monthly Report, June 2022

²⁸ As at 12 July 2022

²⁹ A/73/420, para. 25; and A/HRC/34/38, paras. 62–68.

³⁰ Response by the Deputy Minister of Defense to a parliamentary question in 2014, see https://gisha.org/userfiles/File/HiddenMessages/parliamentary_question/galon/Danon_response_to_parliamentary_question_on_movement_of_goods.pdf. See also excerpts from the State's response in Israel, High Court of Justice, Azza Izzat and Others v. Minister of Defence, Case No. HCJ 495/12, Judgment, 16 August 2012, para. 26. Available at www.gisha.org/UserFiles/File/LegalDocuments/495-12/495-12-Excerpts-from-state-response-16.08.12.pdf.

³¹ (A/75/336, paras. 27–28 and A/HRC/46/63, para. 44)

³² A/73/420, para. 25.

barring men under 35 and women under 25 who marry an Israeli citizen from receiving a residency license or permit.

Provision of this law raises concern of arbitrary interference with private and family life on discriminatory grounds. In its review of Israel's compliance with the International Covenant on Civil and Political Rights, the UN Human Rights Committee has called for the law to be revoked. Other human rights treaty bodies have also noted the restrictions are incompatible with obligations under International Human Rights law (IHRL), including the International Covenant on Economic, Social and Cultural Rights; International Convention on Elimination of Racial Discrimination; and the Convention on the Elimination of all Forms of Discrimination Against Women.

Israeli authorities justify these policies on security grounds. Human rights organizations believe they also serve broader political goals, including deepening the isolation of Gaza for punitive purposes, severing connections between Gaza and the West Bank and eroding prospects of territorial contiguity.³³ Human rights organizations have documented cases where West Bank residents wishing to temporarily relocate to Gaza for family purposes are forced to waive their right to return to the West Bank. The imposition of bans on travel within the oPt raises concerns regarding Palestinians' freedom of movement. In addition, refusing to allow West Bank residents living in Gaza to return to their homes may amount to their forcible transfer, which is prohibited under IHL.

³³ See https://gisha.org/UserFiles/File/publications/Area_G/From_Separation_to_Annexation_2020_EN.pdf; and Diamond Eitan and Bashi Sari, *Separating Land, Separating People: Legal Analysis of Access Restrictions between Gaza and the West Bank* (Tel Aviv, Gisha, 2015)

³⁴ Following the start of the second Intifada in September 2000, Israel completely froze approval of family unification applications and the issuance of visitor permits, both of which enable Palestinians to be in the registry, and receive IDs. Since then, the only family unifications approved were done so pursuant to "political gestures" on the part of the Israeli government and are approved are granted not as a matter of legal right, but as a "special benevolent act". The exact number of Palestinians

Another long-standing issue for many Palestinians are those who are unregistered in Israel's population registry, and therefore have no Palestinian identification, which continues to inhibit access to services inside and outside Gaza. More than 250,000 Palestinians not physically present in the oPt at the time of the population census, in addition to Palestinians born abroad since the census, were excluded from the Population Registry and were not granted residency in the territory. The Population Registry is one of series of bureaucratic hurdles by Israel controlling who is "legally resident" there and who may receive official Palestinian identification cards as well as Palestinian passports issued by the Government of the State of Palestine since 1995. While occasional IDs are granted the application process is unreliable and based on ad hoc goodwill gestures by Israel towards the PA.³⁴ As a political gesture, up to June, Israel earlier this year added a few hundred people to the census who have or will receive IDs.³⁵ Further, even without citizenship status, Palestinians should not be arbitrarily restricted freedom of movement within the oPt.³⁶

Arbitrary arrests, detention, and ill-treatment

Concerns about arbitrary arrests, detention and ill-treatment by Israeli authorities persist including those noted above of fishermen in the ARA who are arrested, transferred to Israel and interrogated before release without conviction, and Palestinian workers with Israeli issued work permits detained while crossing Erez.

Also of concern are the suspected arbitrary arrests, detention, and ill-treatment, possibly amounting to torture, of Palestinians by the Gaza de

without valid identity documentation is unknown. In the Gaza Strip, the Ministry of the Interior issued about 12,500 "temporary" Palestinian identity cards to individuals who are resident in Gaza but not included in the Population Registry. The affected population in Gaza, however, is likely to be much higher. For the source: check Undocumented and Stateless: <https://www.nrc.no/globalassets/pdf/reports/undocumented-and-stateless.pdf>

³⁵ A further 3000 names were approved in July 2022

³⁶ Article 12 ICCPR

facto authorities, who are held sometimes for extended periods of time without charge or conviction or based on vague charges such as ‘undermining national security’ and often prevented from family visits and legal access. Recent findings of the UN Committee Against Torture stated receiving consistent reports that people in custody in facilities run by security forces and intelligence services in the Gaza Strip are tortured and ill-treated. These measures are often enforced against people perceived to be affiliated with political opposition factions, journalists, local activists and human rights defenders, thus violating their right to freedom of expression, assembly and participation. OHCHR monitoring points to widespread allegations of ill-treatment, possibly amounting to torture, in Gaza detention facilities.³⁷ For example, in June this year, a man with diabetes, arrested for drug trafficking in November 2021, died while in custody without charge.³⁸ As with these cases, little information is made public about steps taken by the Gaza de facto authorities to investigate these cases. Recent findings of the UN Committee Against Torture received consistent reports that people in custody violate international human rights norms and standards that the Gaza de facto authorities, as authorities exercising government-like functions in the Gaza Strip, are obliged to respect.

Israel’s pattern of imposing prolonged detention of Palestinians without compelling evidence to elicit admissions of guilt continues. An emblematic case is the conviction of former World Vision Gaza director Mohammed Al Halabi after more than six years of detention, notwithstanding serious concerns about the lack of credible evidence against him. The trial against Al Halabi is marred by serious violations of Israel’s obligation to respect his right to a fair trial and due process. These include restricted communication with his lawyer, inadequate time and obstacles to prepare his defense, use of secret evidence of which neither he nor his lawyer had access to, limited access to evidence and extensive closed door hearings, attempts at

extraction of confessions through ill-treatment and torture and the failure to try him without undue delay. A deprivation of liberty is associated to such grave violations of due process and fair trial rights could be considered arbitrary in nature and contravening Israel’s human rights obligations under Article 9 and 14 of International Covenant on Civil and Political Rights (ICCPR).

Death penalty

Since the beginning of the year courts in Gaza have imposed or upheld 19 death sentences, including six issued or upheld by military courts

Having ratified the 2nd optional Protocol to the Covenant on Civil and Political Rights, Palestine is obliged to end the death penalty in all of its territory, including Gaza. Of major concern are adherence to fair trial guarantees in Gaza, including trying civilians in military courts. Also of concern is the degree to which the Government of the State of Palestine acts within its power to bring the situation in Gaza into compliance with Palestine’s international legal obligations.

The death penalty is associated with social stigma, particularly those convicted of collaborating with Israel, which leaves their families and relatives vulnerable to abuse and discrimination.

Lack of freedom of association, peaceful assembly and freedom of opinion and expression

Israel, and organizations close to Israeli authorities, continued accusations and stigmatizing statements to discredit civil society actors and discourage support and international funding for their work. Published reports accuse human rights organizations of being “anti-Semitic” or tied to “terrorism”,

³⁷ A/HRC/46/63, paras. 62–63

³⁸ According to ICHR, on 11 June, 44-year-old Rafah man died allegedly of a heart attack while detained and without charge after being arrested by the civil police on 1 November 2021 for drugs

trafficking. When his health deteriorated, the man, suffering diabetes, was transferred to Al Shifa hospital in early June.

the latter on the basis of their supposed affiliation to Palestinian political parties rather than specific criminal activity. Still in place is Israel's designation of six Palestinian organizations providing critical services such as legal and health support to Palestinian communities. The six are accused of diverting funds to the Popular Front for the Liberation of Palestine – allegations that continue to severely affected their ability of the to receive financial resources, which is an integral part of the right to freedom of association.

In 2021 Gaza's banks reportedly froze the bank accounts of 80 non-government organizations (NGOs), who provide crucial services in health, protection and other humanitarian services in Gaza. The freeze was imposed pending the completion of registration procedures with the Government of the State of Palestine in addition to long standing registrations already made with the Gaza de facto authorities after Gaza's political split in 2007. Most NGOs have since complied with the new rules, however some still await PA security clearance.

Risk 1.1: Operational context

Although it is a year since the May 2021 conflict, as with many other escalations, the aftermath has seriously affected civilian lives and recovery in Gaza. Many of those injured continue struggling, including more than 68 people who acquired long-term disability. There is a ballooning health and mental health burden affecting all sectors of the population. Much damaged infrastructure is yet to be cleared, rebuilt or repaired.

As with all previous escalations, most survivors have been denied Israeli justice due to several substantial, procedural, and practical obstacles (e.g., movement restrictions, the condition to deposit a financial guarantee by the

victim, the amendment n. 8 to Israeli civil tort law excluding Palestinians from claiming civil remedies for State caused damages as citizens of an 'enemy territory'³⁹). Survivors appeal for accountability for suspected violations of international law to human rights organizations but there is no current information about any meaningful accountability steps taken by the Israeli authorities for possible violations of IHL during the May 2021 escalation.

A welcome development has been increased work permit quotas for Gaza's laborers and the entry of some items previously classified as a "dual use" into Gaza, including fishing spare parts, and some medical equipment, including CT and X-ray, pending the preservation of calm in Gaza.⁴⁰

However, a chronic humanitarian crisis continues in Gaza and compounding this, since April 2022 Israel continues to curtail access to the West Bank and condition it to continued calm in Gaza.

Risk 1.2: Partner responses and capacities

Monitoring, documentation and advocacy by legal services in the Gaza focuses on international humanitarian law and human rights law violations and conflict-related violence. Advocacy oriented towards accountability and respect of IHL and IHRL remains central to the Protection Cluster response.

Partners are responding to the increasing demand for legal aid as the frequency of suspected violations related to arrests and detentions, excessive use of force and access restrictions increases. Legal support and consultation is provided to Palestinian children, youth, families/caregivers and human rights defenders detained, targeting those affected by, or at risk of, violations of their right to life, liberty and physical integrity; arrest and

³⁹ On 5 July 2022, the Israeli Supreme Court, rejected an appeal demanding that the State of Israel pay tort compensation damages for the shooting and serious injury of 15-year-old Palestinian Attiya Nabaheen in 2014 in Gaza, upholding the legality of Amendment No. 8 of Israel's Civil Wrongs Law

excluding Palestinians in Gaza from receiving remedies for state caused damages as citizens of an 'enemy territory', while emphasizing how domestic law overrides international law

⁴⁰ [Facebook](#)

ill-treatment. Priority groups and issues include children; people affected by access restrictions in general; survivors of Gender-based Violence (GBV).

Risk 1.3: Humanitarian needs and gaps

- Increased documentation, reporting and advocacy
- Widespread legal support services including legal advice, awareness, representations and litigation
- More thematic legal awareness sessions, tailored legal counselling sessions and paralegal services, individual legal representation and class-action litigation for Palestinians affected by Israel's separation policy

Protection Risk 2: Internal displacement

Gaza suffers a chronic shortage of adequate housing and consequently thousands of people live in substandard, damaged and makeshift shelters. A combination of population growth, constraints on housing development and conflict all contribute to chronic shortages of housing and increasing levels of displacement.

Key Protection Figures

Overall housing shortage in Gaza: 120,000 units

Housing units needed for yearly population growth: 14,000

Palestinians internally displaced: 7,250 Palestinians

⁴¹ Multi-sectoral Needs Assessment (MSNA) 2021

⁴² <https://sheltercluster.org/palestine/documents/one-year-after-conflict-may2021-shelter-cluster-dashboard>

⁴³ MSNA 2021

Palestinians living in critical shelter conditions: 54,000^{41 42}

Palestinians at risk of eviction: 5,000 households

Active hostilities / escalations of violence

Since 2008 and following subsequent escalations until May 2021 more than 17,000 housing units were destroyed and 20,000 were damaged leaving a third of Palestinians displaced many of whom were already registered refugees. Up to 14% of those surveyed in Gaza reported living in critical shelter conditions (damaged buildings, tents, collective shelters, containers, makeshift and unfinished buildings)⁴³.

The May 2021 escalation deepened the risk of displacement with more than 1,600 housing units destroyed or severely damaged and an estimated 59,000 housing units sustained some degree of damage.⁴⁴ Today, more than 7,250 people whose homes were damaged during the conflict are still internally displaced due to stalled reconstruction efforts and rising material costs. Only 1% of homes have been repaired/ rebuilt, a while a further 1,000 have been funded works are yet to start.⁴⁵ About 550 housing units in multi-story buildings remain unfunded. Those displaced from their homes or villages feel less secure than those who were not displaced, indicating a correlation between displacement and feelings about safety. The feeling of being unsafe is highly prevalent in the North Gaza and Gaza governorates,

⁴⁴ OCHA Situation Report #9, Response to the escalation in the oPt, August 2021. <https://www.ochaopt.org/content/responseescalation-opt-situation-report-no-9-august-2021>

⁴⁵ <https://sheltercluster.org/palestine/documents/one-year-after-conflict-may2021-shelter-cluster-dashboard>

consistent with how the Gaza Strip was impacted during the May 2021 escalation.⁴⁶

Particularly concerning is the impact on vulnerable people and families. Households that are more impacted by war are at higher risk of poverty than those unaffected or with slight impact and an increase in their need for assistance. Further, after the May 2021 conflict, one study found female-headed households reported a higher rate of displacement (88%) than male-headed households (77%) and women report a slightly lower rate of resorting to shelters than men and tend to stay closer to home than men or remain in their damaged home.⁴⁷ Displacement also leads to a number of other risks and threats including barriers to accessing clean water posing serious health risks especially to children, the elderly, those with chronic illness and pregnant/ lactating women.

Households with persons with disabilities are disproportionately impacted by displacement. Households with completely damaged homes are likely to announce changes in the psychosocial conditions of their members.⁴⁸

Evictions

Protection partners observed several incidents of evictions this period including one in Rafah and more recently in Beit Lahia. Concerns surround the process of eviction and legality. In a recent eviction in Um El Nasser village in Beit Lahia, during a clash between Gaza security forces and local residents protesting against a demolition of a house deemed illegally built on public land, four men were shot allegedly with live ammunition. In another case affecting a community in Rafah, families were evicted without

warning to make way for expansion works to the Rafah crossing. Families were not provided with sufficient warning and opportunity to object or seek recourse and immediately following an eviction, alternative livable shelter arrangements comparable or superior to the original housing. The incident raises serious concerns about the right to housing and protection from forced displacement regardless of ownership status and without discrimination.⁴⁹ It also raises concern about the use force.

Risk 2.1: Operational context

In Gaza there are multiple challenges to addressing chronic gaps in housing, including access to affordable construction materials which need the permission of either Israel or Egypt to enter via one of two goods crossings. After May 2021 conflict Israel closed its crossing at Kerem Shalom for several months. In the first quarter 2022 construction, fuel and other goods entering Gaza had either returned to or continued to exceed levels prior to May 2021 with basic construction materials making up a third of all imports. Israel also continued to enforce restrictions on goods deemed to have dual civilian and military use, greatly delaying or prohibiting many materials needed for reconstruction work. Additionally, there is up to USD20 million funding shortages for building materials affecting 1800 families (10,000 people). However of major concern are fluctuations in local market prices including steel which trebled in price. This affected local construction work and created a gap between original and actual cost estimates which particularly affected families who received grants to rebuild their damaged homes.

⁴⁶ Save the Children and War Child Holland Gaza Needs Assessment March 2022

⁴⁷ UN Women, Multi-sectoral Needs Assessment in Gaza, 2022

⁴⁸ UN Women, Multi-sectoral Needs Assessment in Gaza, 2022

⁴⁹ UDHR 25, ICESCR 11. UN Committee on Economic, Social and Cultural Rights General Comment no7 notes that "justifiable and permissible evictions are evictions that do not result in homelessness or violate other rights of affected persons and that meet certain procedural standards ...including include substantive justification, consultation on alternatives, provision of due process to affected

persons, the right to alternative accommodation and non-discrimination. Furthermore, the former Special Rapporteur on Adequate Housing has described the standards that development-based evictions must satisfy, to avoid constituting forced evictions and displacement and thus to avoid violating international law. These standards include the exploration of alternative strategies that do not create displacement, prohibiting the infliction of homelessness and the provision of adequate notice for pending evictions.

Risk 2.2: Partner responses and capacities

Protection partners working with shelter partners support vulnerable families with dignity kits for women and recreational kits for children as well as applicable child protection and Mental Health and Psychosocial Support Services (MHPSS) for vulnerable groups. Mine Action partners provide clearance of damaged sites near and in residential areas and Explosive Remnants of War (ERW) awareness and risk education. Legal partners provide legal counselling and/ or assistance for reconstruction and eviction cases and worked with displaced families to recover/ replace lost documents (as mentioned above).

Risk 2.3: Humanitarian needs and gaps

- More than 1000 families remain displaced due to a funding gap for reconstruction of homes in multi-story buildings
- MHPSS services for families who are still displaced
- Dignity and recreational kits for women and children who are still displaced

Protection Risk 3: Psychological distress and deterioration in mental health

The oPt has one of the highest burdens of mental health issues and psychological disorders in the Eastern Mediterranean Region, with 54% of Palestinian boys and 47% of Palestinian girls (aged 6 to 12 years) presenting emotional and/or behavioural disorders.⁵⁰

In general the need for MHPSS services in Gaza is on the rise. The ongoing blockade in the Gaza Strip, the exposure to trauma and violence as a result of the continuous Israeli hostilities and wars, as well as poverty,

unemployment and dependency on outside aid, have a significant effect on the mental health and have contributed to high psychological distress.⁵¹

Protection partners have further identified violence within Palestinian families and communities, including domestic violence, harsh corporal punishment in homes and schools, sexual abuse, early marriage, and child labor as additional key drivers of the rising need for MHPSS.

Further, the long-term devastating effects of the COVID-19 pandemic and its toll on the mental health situation of individuals remains, brought on by social isolation, health-related fears, stigma, discrimination and the loss of family members. It moreover highlighted pre-existing challenges in mental health provision and hindered access to essential health services. People with pre-existing mental health conditions were at risk of experiencing an increase of stress and anxiety and difficulties in accessing services, information or medicine. Similar to other countries, pressures and struggles due to the pandemic created tension in families which resulted in a continued increase in domestic violence against women and children.⁵²

Conflict-related violence/ prolonged periods of tension

Exposure to violence including decades of conflict and the ongoing military occupation hinder the development of Palestinian communities, greatly increasing the vulnerability of children, women and the disabled and causes severe and chronic mental health problems.⁵³ Recent studies show the political situation and insecurity, including the aftermath of escalations of violence, have a significant impact upon mental health and psychological well-being and often lead to a spike in deterioration of mental health. The fear for life, loss of loved ones, physical injuries and wide-spread damage and destruction significantly increases the risk of psychological distress and mental disorders. In the aftermath of the May 2021 escalation cluster partners providing MHPSS services reported major spikes in calls to helplines. SAWA, a major provider of emergency psychosocial counselling

⁵⁰ ESCWA socio-economic situation Report 2019, p. 23.

⁵¹ Assessment of MHPSS interventions in the West Bank and Gaza Strip, UNFPA, August 2021

⁵² Assessment of MHPSS interventions in the West Bank and Gaza Strip, UNFPA, August 2021

⁵³ Save the Children and War Child Holland, Gaza Needs Assessment March 2022

24 hours daily registered a near doubling of calls in May 2021 after the escalation (compared to the first quarter 2021).⁵⁴

At risk groups

At risk groups such as those who have suffered from internal displacement, children, persons with disabilities and GBV survivors are at greater risk of psychological distress.⁵⁵ Furthermore, those with pre-existing mental health and psychological trauma and illness risk relapsing⁵⁶ and those on the frontline in health care or in caring roles responding to the intense and ongoing levels of need risk burn-out and work-related stress due to shortages in human resources and an overburdened and under funded health system.⁵⁷

The 2022 HNO estimated that some 678,000 children (345,800 boys, 332,200 girls) across the oPt are in need of child protection and MHPSS services, including 122,000 in need of focused nonspecialized support or specialized services.

According to recent assessments by partners, measuring psychological distress and deterioration in mental health for both children and caregivers, found that the overall situation to be “alarming” and in need of immediate action.

A Save the Children study (2022) on the impact of blockade on the psychosocial wellbeing of children showed alarming trends when comparing the 2018 and 2022 studies. Notable was that children are experiencing higher levels of emotional distress (average increase from 55% to 80%) exhibited in concerning behaviors such as bed-wetting (79% in 2022 compared to 53% in 2018) and are less likely to find positive ways to cope with their situation and have lower levels of resilience.

A joint study recently released by War Child Holland and Save the Children (2022) showed the negative impact of the crises on the wellbeing of families, where 38% of respondents did not feel safe even 48 days after the escalation, particularly those displaced during the escalation especially in Gaza and North Gaza areas. The assessment also showed that at least 78% of surveyed adult respondents said they experienced signs of distress and observable changes in their own mood or behavior. This includes sadness, struggling with relationships, agitation, social withdrawal, anxiety, fear, panic attacks, inability to relax and being worried. Also, about 79% of respondents’ children showed signs of distress and observable changes in behavior. Interestingly, 87% of respondents whose children show signs of distress were themselves showing signs of distress and changes in mood or behavior, reflecting the strong correlation between caregivers’ distress and children’s psychosocial difficulties. This is primarily due to the caregivers’ mental health issues, which hinder their ability to respond to their dependents’ needs, especially children. The study also reflected that despite the high demand for services, only 9.4% of respondents’ children received MHPSS services due to the paucity of available services.

The need for social protection, including social assistance, intensified as result of the May 2021 war. As much as 76 per cent of households believe that they are at a higher risk of poverty now than before the May 2021 war, while 23 per cent believe that the risk of becoming poor is the same as before the war (noting that the risk continues to be high just as it was before the war). The assessment concurs with previous studies indicating a correlation between exposure to military attacks and risk of poverty. A total 87% of respondents in completely demolished homes reported higher risk of poverty.⁵⁸

The overall situation in Gaza has a disproportionate impact on the mental health of persons with disabilities, one of the most marginalized groups in

⁵⁴ SAWA Annual 2021 Fact Sheet

⁵⁵ HNO 2022, page 32

⁵⁶ Various, including <https://www.sciencedirect.com/science/article/pii/S0883941721000686>

⁵⁷ Various, including Assessment of MHPSS interventions in the West Bank and Gaza Strip, UNFPA August 2021

⁵⁸ UN Women Multi-sectoral Needs Assessment 2022

Palestinian society who not only face institutional and attitudinal barriers accessing MHPSS services but are at greater risk of violence, stigma and discrimination. This has led to increasing risk of poor mental health, stress, anxiety and depression. For children with disability, families report more security concerns and barriers.⁵⁹

The situation for Palestinian girls and women is characterized by overlapping vulnerabilities linked to threats of violence, poverty, discriminations due to legal and sociocultural norms, and low access services which result in harmful practices, including child marriage. Despite there being a higher prevalence of mental health disorders for girls and women than for boys and men, there is a higher percentage of male mental health service users⁶⁰ - owing to the higher stigma for women around mental health⁶¹, who additionally often require the permission of family members to access mental health service.⁶²

Physical assault or abuse and psychosocial/ emotional abuse

Following the May 2021 escalation, women unanimously reported the need for psychosocial support for themselves and their children. Shortly after the escalation, many mothers reported that their children have lost their ability to speak and have experienced bedwetting, while their sleeping cycle was heavily compromised.⁶³ In 2022, children still experience high rates of mental distress, including significant risks of post-traumatic stress disorder (PTSD), depression, anxiety, behavioral problems, and attention deficit hyperactivity disorder, as well as functional impairment. Psychological distress among children is widespread and chronic. An estimated 678,000 children are in need of mental health and psychosocial support across oPt, more than half (53%) of all children in Gaza.⁶⁴ According to Sawa May 2022 newsletter⁶⁵, calls related to suicide ideation have increased from January to May 2022 by 56%. Sawa also reported an increase in MHPSS counseling

50% when compared to May 2021, indicating that the impact of the May 2021 escalation on the mental health of Palestinians still holds, where children and youth expressing their trauma from the bombardment one year later.

A rapid needs assessment conducted by Humanity and Inclusion and disability partners (16-23 May 2022) identified nearly 800 persons with disabilities and injuries in need of assistance including mobility and support devices as well as non-food items and cash support.

In Gaza, 12 UNICEF supported Family Centres, 30 outreach sites and 10 Save the Children supported Resilience Centres, are an integral part of the referral pathways and address protection, resilience and psychosocial needs via face to face and services for vulnerable children and their caregivers. Service providers and partners continue to report significant mental health distress. Frontline workers who are also directly affected are being pushed to the limits, leaving some unable to resume work or at risk of being overloaded. There remains a need for scale-up of all in person and remote MHPSS services for children, families and service, with partners reporting a large volume of calls to partner hotlines. In 2022, Sawa documented 9,698 remote counseling sessions through their hotlines (5,847 males), 70% of calls originated from Gaza.

The constant risk and fear of new outbreaks of violent conflict remains a major source of stress for children, young people and adults in Gaza. Coping with this and the effects of regular exposure to violence requires sustained psychosocial and psychological support. This stress is exacerbated by the rising sense of hopelessness and lack of opportunities for young people to

⁵⁹ Assessment of MHPSS interventions in the West Bank and Gaza Strip, UNFPA, August 2021

⁶⁰ Mental Health Unit- MoH 2020

⁶¹ Assessment of MHPSS interventions in the West Bank and Gaza Strip, UNFPA, August 2021

⁶² Which is not easily granted due to stigmatization and fear for the reputation of women

⁶³ Escalation of hostilities and unrest in the OPT, Flash Appeal, May 2021

⁶⁴ UN Women Assessment 2022 and GBV SC Assessment, June 2021

⁶⁵ Calculated according to the child protection model applied to the 2021 MSNA data, using the common indicators and severity scales adopted at country level

⁶⁶ Sawa Factsheet, May 2022

develop and progress in life, with 60 percent of youth (aged 15-24) unemployed in Gaza.

Risk 3.1: Operational context

The capacity to respond to the increased psychological distress is limited and is adversely affected by major shortages in specialized personnel and drugs, as well as funding gaps affecting the sustainability of existing specialized services.

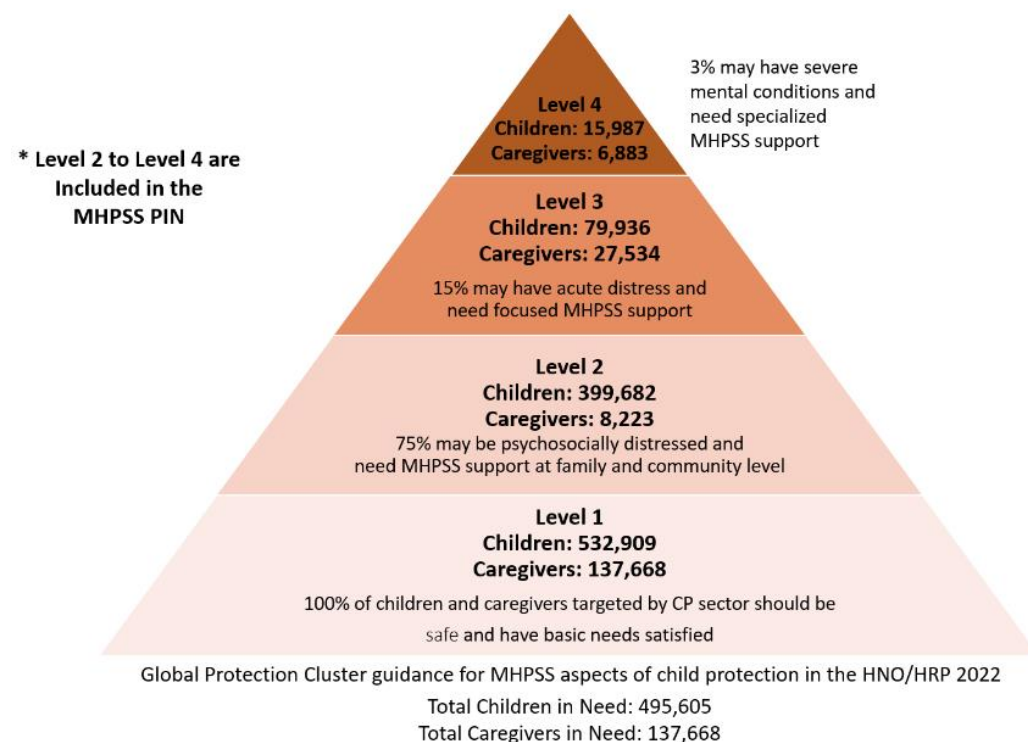
The Palestinian Ministry of Health (MoH) is the main provider of primary health care in the oPt, however in Gaza the Ministry only accounts for about a third of 160 primary health clinics⁶⁷ (WHO 2019b) with UNRWA playing a more essential role.⁶⁸ The health system is suffering from major shortages in specialised personnel, specialised facilities and the availability of drugs, exacerbated by a longstanding challenge of integrating mental healthcare into essential health services. Mental health is underfunded in the health care system (physical lifesaving activities are instead prioritized during crises) and MoH not able to deal with the growing issue, including specialised services for people with severe mental health disorders.⁶⁹

While Level 1 and 2 of MHPSS services of the IASC Intervention Pyramid are available across all governorates of the Gaza Strip. While Level 3 non-focused specialised services and Level 4 specialised mental health services are being offered by the Gaza Community Mental Health Programme (GCMHP) and the MoH, these fail to answer the high demand (Child Protection Working Group 2019).⁷⁰

Further, Family Centres are underfunded with USD1.3million budget gap end of 2021 and an estimated 63% of people with disability lacking access

to MHPSS services and an estimated 137,000 caregivers in need of MHPSS services.⁷¹ Despite this high demand for services, just over 10% of Palestinian children in Gaza in need after the May 2021 escalation received MHPSS services by the end of March 2022, according to the reporting by the Child Protection Area of Responsibility (CP AoR).

Gaza Strip - Children and caregivers in need of mental health and psychosocial support services



⁶⁷ WHO (2019b) Health conditions in the occupied Palestinian territory, including east Jerusalem, and in the occupied Syrian Golan. Report by the Director-General, A72/33. Available at: https://apps.who.int/gb/ebwha/pdf_files/WHA72/A72_33-en.pdf

⁶⁸ Assessment of MHPSS interventions in the West Bank and Gaza Strip, UNFPA, August 2021

⁶⁹ Ibid

⁷⁰ Ibid

⁷¹ OCHA, Humanitarian Needs Overview oPt 2022

In Gaza, there are currently 92 trained PSS counsellors, but these are not sufficient to meet the need.⁷² A social welfare mapping assessment in 2020 identified 503 social welfare staff in the Ministry of Education (MoE), 601 in UNRWA, 238 in the Ministry of Social Development (MoSD) and 34 in the Ministry of Health.

A welcome development is the MoSD's National Social Protection Registry funded by the World Bank and currently under development, which aims to expand support to vulnerable families, beyond the original poverty-related payments, to comprehensive case management and referral services, including referrals to the private sector.

Risk 3.2: Partner responses and capacities

MHPSS services under the Protection Cluster are coordinated with the Health and Education Clusters. Inter-sectoral MHPSS activities for children, including those with distress symptoms and exposed to violence, and caregivers (particularly males) including psychological first aid, structured psychosocial support through age and gender-appropriate individual or group interventions, suicide and para-suicide prevention, supportive parenting programming, clinical mental health and psychosocial services targeting beneficiaries with severe symptoms through the support of mental health professionals. Provision of MHPSS services to adults and youth including structured psychosocial and awareness sessions to increase resilience using positive coping mechanisms. Key actors train and support service providers on MHPSS guidelines and MHPSS skills such as psychological first aid, problem solving, active listening, detection and referrals including referrals to mental health specialized service providers.

In the ongoing context of COVID-19, partners continue to provide both in-person and remote services to enhance availability, accessibility, and continuity of specialized services for mental health support. Partners

promote mental health and psychosocial well-being among staff, frontline workers and volunteers through training and awareness sessions in self-care, conducted both in person and remotely.

Risk 3.3: Humanitarian needs and gaps

- Mass scale-up of Mental Health and Psychosocial Support (MHPSS) is needed to respond to the mental health crisis: from psychological first aid, structured psychosocial support, suicide prevention, case management, clinical mental health services. Scale up requires inter-sectoral mobilization, including collaboration with education to ensure early identification and referral
- Increase MHPSS for children, GBV survivors, persons with disabilities and caregivers
- Strengthen MHPSS and wellbeing activities for service providers
- MHPSS interventions to strengthen coping mechanisms and resilience of children affected by violence
- Integration of MHPSS into all health centres and humanitarian strategies
- Coordinated funding for MHPSS

Protection risk 4: Child protection threats and grave violations against children

Children in particular face significant protection risks and rights violations in Gaza. They are continually exposed to conflict-related violence such as injury, violence in the home, school and community, economic hardship, disruptions to education, learning and robbed of opportunities to grow and develop socially. There are also insufficient safe areas and playgrounds for children to play and interact with other children. Such ongoing instability

⁷² <https://www.ochaopt.org/content/escalation-gaza-strip-west-bank-and-israel-flash-update-9-covering-1200-18-may-1200-19-may>

and uncertainty has a profound impact on mental health and has left many with feelings of hopelessness and insecurity. In the past year, the protection risks for children have become more severe compounded by COVID-19 measures and intense rounds of conflict-related violence and movement restrictions.

Direct threats of violence against children (in the home, school and community) including abuse and neglect

Children need a nurturing environment to grow into resilient and healthy adults. However, exposure to violence, death, human suffering, displacement and the dire economic and social conditions in Gaza have a dire impact on children as well as parents' and caregivers' capacity to cope and to foster a nurturing, safe and healthy environment for children. Across the oPt children experience high levels of violence at home, with 90% of children facing some form of violent discipline at home (92.3% boys and 97.9% girls).⁷³ This includes 28.5% of children in Gaza subject to physical violence from their caregivers. Over one in five children (20.1%) experience severe physical punishment. A total 87.5% experience psychological aggression and only 7.4% received non-violent discipline. Children from the poorest households are more than twice as likely to experience severe physical punishment (29.9%) than those from wealthier households (11.4%), and about 77.6% of the children violently disciplined were between 3-9 years of age. Children with disabilities are three to four times more likely to experience all forms of violence, and three times more likely to experience sexual violence.⁷⁴

⁷³ Multi-Indicator Cluster Survey (MICS) 2019-2020, Palestine Central Bureau of Statistics, 2021, Chapter 9.2. The figure includes any form of physical discipline as well as psychological aggression

⁷⁴ Multi-Indicator Cluster Survey (MICS) 2019-2020, Palestine Central Bureau of Statistics, 2021

⁷⁵ Save the Children and War Child Holland Gaza Needs Assessment March 2022

Negative coping strategies including school drop-out, child labor, children in conflict with the law

Pressure in families, which has increased with job losses, cramped home living conditions and socio-economic pressures compounds risks for children. There is a significant erosion of family coping mechanisms especially marginalized and those in precarious socio-economic situation⁷⁵ and a deterioration in services impacting children's wellbeing, learning and development.

Across the oPt, it is estimated that 3% of children aged 10 to 17 are engaged in child labor. An estimated 7.6% of Palestinian children in Gaza aged 5-11 (12% boys) were involved in economic activities for at least an hour the week of. And 11.9% aged 12-14 years were involved in economic activities less than 14 hours a week. The percentage goes up to an average 16.9 for children aged 15-17 (28% boys) working 43 hours during the week of the study.⁷⁶ In households living in poverty, the pandemic has increased pressure on boys to work and generate income, and exposed girls to additional burdens associated with domestic work and caregiver duties. At the same time, it is estimated that 15% of children aged 5-17 are working including in hazardous labor with boys twice as likely as girls to be engaged in child labor and six times as likely to be working in hazardous conditions.⁷⁷ This does not only expose children to life and injury threats, but also to many other child protection concerns including verbal and physical abuse, sexual violence and neglect. Having said that, girls are more likely to be married off earlier than boys in Gaza. Women aged 14-49 were surveyed in 2019, and 2.3% were married before the age of 15, while 24.4% were married before the age of 18.

⁷⁶ Multi-Indicator Cluster Survey 2019-2020 (MICS), Palestine Central Bureau of Statistics, 2021

⁷⁷ MICS 2021. 9.6% of boys across the OPT are estimated to be involved in child labour as defined in the MICS, compared to 4.8% of girls. Meanwhile, 8.7% of boys are estimated to be working under hazardous conditions, compared to 1.4% of girls

One of the most serious consequences of the recent conflict/ escalation has been students dropping out of school. Children who were physically injured, particularly those who developed a permanent disability, may opt to no longer attend school owing to their injury. Other factors also play into the decision to leave school.

In 2021 31% of households in Gaza interviewed as part of the 2021 Multi-Sectoral Needs Assessment (MSNA) reported having difficulties meeting essential education needs (such as tuition fees, books) due to financial reasons, in the 30 days prior to the data collection. In 2022, these challenges are compounded by longer term effects of escalations in violence and effects of COVID-19.

An estimated 558,250 school aged children (312,620 girls) across Palestine will be in need of humanitarian assistance to access education in 2022. The main drivers of education-related vulnerabilities include attacks on schools, movement restrictions, insufficient and/ or inadequate school infrastructure and poverty. These factors undermine the quality of education, generate protection concerns and contribute to early school dropout.

In conflict environments, good parenting, relationships with teachers, social networks, and healthcare systems are also affected by trauma and toxic stress and may become less protective or even harmful. Children also become at higher risk of developing learning disabilities leading to higher risks of school drop-out.⁷⁸

About 25% of the households with school-aged children interviewed as part of the 2021 MSNA reported that psychosocial support was not available at the school for children. For the remaining households – which reported that psychosocial support was available at schools, only 19.4% in Gaza said that school staff were adequately trained in psychosocial support.

Risk 4.1: Operational context

The protracted protection crisis in the oPt and continued deterioration of the humanitarian situation and significant gaps in funding Protection and MHPSS programmes remains a major operational challenges. During escalations, infrastructure damage alongside recurrent electricity cuts and internet disconnection across Gaza is undermining outreach and remote service modalities. There is also a lack of sustainable jobs, especially for counselors and psychologists due to lack of long-term funding, placing additional burden on child protection and MHPSS service providers. Operational issues related to safety, security, and movement of frontline workers constrain opportunities to provide life-saving services, including protection and MHPSS services. And insufficient service providers to cover the child protection and MHPSS needs, linked to the lack of clear referral mechanisms to the health sector.

Risk 4.2: Partner responses and capacities

In response to the escalation of hostilities in the Gaza Strip in May 2021, the Governorate Protection Focal Points supported by UNICEF and Save the Children and in coordination with the Child Protection Area of Responsibility (CP AoR), Protection Cluster and Ministry of Social Development (MoSD), conducted home and assessment visits to affected families, providing Psychological First Aid (PFA) services, identify the CP and MHPSS needs of children and refer to required service providers.

Child Protection AoR partners provided vulnerable children and their families affected by May 2021 escalation and the ongoing protracted crisis in the Gaza Strip with phone counselling, psychosocial support activities, child/parent interaction activities, life skills activities and inclusive multi-sectoral responses of child protection services, including specialized individual child protection case management.

⁷⁸ Samara M, Hammuda S, Vostanis P, El-Khodary B, Al-Dewik N. Children's prolonged exposure to the toxic stress of war trauma in the Middle East BMJ 2020; 371 :m3155 doi:10.1136/bmj.m3155

To strengthen families' capacity to prevent violence at home, caregivers, attended positive parenting and awareness raising sessions. Moreover, partners reached children and caregivers with risk-educational sessions on Explosive Remnants of War (ERW).

Risk 4.3: Humanitarian needs and gaps

- In case of any emerging emergency, scale-up of in-person and remote Mental Health and Psychosocial Support (MHPSS) services for children, families and frontline service providers
- Increase structured psychosocial support and specialized mental health services for children and caregivers with a focus on the family centered approach. More children in Gaza are being referred to CP AoR partners, as they display symptoms of distress
- Integrate MHPSS services in the Health and Education Systems (PHCs, clinics, and schools)
- Increase child protection services, including specialized individual case management, for vulnerable children impacted by conflict related and domestic violence, including children with disabilities, ensuring linkages to the National Social Protection System led by MoSD
- Increase and develop community level protection programmes and initiatives aimed at detecting and protecting children at risk of conflict-related violence and violence at home, in collaboration with the existed Local Community Committees supported by CP AoR partners within identified vulnerable areas across the Gaza Strip, such as Community Committees among UNICEF supported Family Centers and Save the Children supported Resilience Centers
- Documenting child rights violations
- Increase Youth-led Protection initiatives and other programmes aimed at supporting vulnerable children and adolescents and reducing negative coping mechanisms, especially for those children affected by conflict and domestic violence

- Establish sustainable child friendly spaces and playgrounds, as well as non-structured psychosocial support and recreational activities for children, particularly during summer holidays
- Coordinate development and review of guidelines and tools on child protection case management with Ministry of Social Development in alignment with the National Case Management and Referral System
- Strengthen the coordination and collaboration in the contingency planning/preparedness and response during and after any emergency to provide complementarity, inter-sectoral and comprehensive interventions among all Child Protection, MHPSS service providers, UN Agencies/Clusters, and line ministries
- Identify MHPSS capacities and capacity building needs and provide trainings for teachers, counselors and caregivers, such as PFA, self-care and supervision

Protection risk 5: Specific risks facing women and girls –Gender Based Violence (GBV) in Gaza

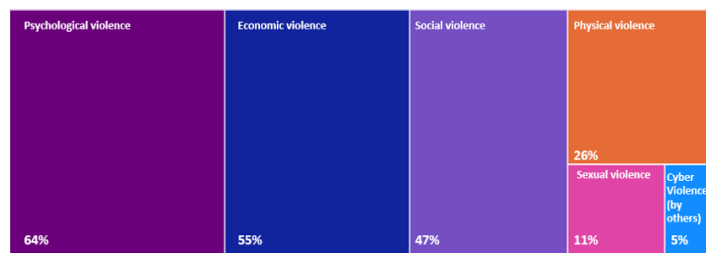
Risks of violence and discrimination for women in Palestine, including domestic violence, intimate partner violence, sexual abuse and child/forced marriage continue unabated. The combined effects of Israeli occupation and Palestine's patriarchal culture shape and drive gender inequality and any improvements remain hampered by ongoing rounds of violence and conflict the most recent the devastating May 2021 conflict.⁷⁹ According to UN Women study⁸⁰, majority of women surveyed (90%) believe tension within the community and home increased in the aftermath of the May 2021 escalation. In addition to general protection afforded to woman as civilians, IHL provides that the specific protection, health and assistance

⁷⁹ <https://palestine.unfpa.org/en/gender-based-violence>

⁸⁰ UN Women Multi-sectoral Needs Assessment in Gaza, 2022

needs of women must be respected and contains provisions to address specific conflict-related forms of violence against women.⁸¹

38% of women in Gaza currently married or ever married (18-64 years) have experienced at least one a form of violence by their husbands in the 12 months preceding the survey (2019)



The Protection Cluster and GBV-Sub Cluster produced a thematic Protection Analysis Update on protection issues affecting women and girls in March 2022 which provides additional details and data to the below, including on most at-risk groups and the impacts of COVID-19 on shelter, access to justice, women and girls with disabilities and stigma⁸².

Gender-based violence (GBV)

GBV is a major protection risk in the oPt, with visible impacts in 2021 and increasing demand for services. Women and girls in oPt face widespread and varied risks of GBV throughout their lives, exacerbated by conflict, displacement and movement restrictions.⁸³ In the oPt women are four times more likely to experience intimate partner violence and often have no option but to rely on their abuser limiting their ability to build resilience and access services.

In Gaza life-saving GBV services are extremely limited and access is further restricted by stigma and discrimination – with the result that those who experience GBV are not able to access quality, timely care and support to recover.

No comprehensive law dealing with discrimination against women exists in the oPt.⁸⁴ Moreover, the political and legal fragmentation between West Bank, Gaza, and East Jerusalem in itself poses a major obstacle to the protection of women and girls. At present, no laws specifically criminalize GBV such as femicide, domestic violence, and sexual harassment, abuse, and assault.⁸⁵

In 2019, the Palestinian Central Bureau of Statistics (PCBS) conducted the latest survey on violence,⁸⁶ according to which, 29% (married or previously married) women in Gaza between the ages of 18-64 experienced violence in the 12 months preceding the survey.⁸⁷ The main coping mechanism remains keeping silent. Better disaggregated data is needed on women and girls with disabilities who are often more vulnerable and at a higher risk of being exposed to all forms of GBV.

⁸¹ For example IV GC, Article 27 (protection against sexual violence)

⁸² oPt Protection Cluster | [Protection Analysis Update](#) – Protection issues affecting women and girls, March 2022

⁸³ The SAWA Hotline reported a 70 per cent increase in calls after the beginning of COVID-lockdowns. This helpline operates in all of the oPt and provides support and assistance, primary social and psychological counseling for women, children, and men who have been exposed to various forms of violence and abuse

⁸⁴ CEDAW, Concluding observations on the initial report of the State of Palestine, CEDAW/C/PSE/CO/1, para. 10.

⁸⁵ Femicide is the intentional killing of women or girls because of their gender

⁸⁶ PCBS (2019), [Preliminary results of the violence survey in the Palestinian Society](#).

⁸⁷ However, methodological flaws in the PCBS survey have been identified which do not allow for a reliable comparison. Moreover, the survey does not include child, early and forced marriage as a form of GBV

When it comes to femicide, there are no official statistics on the prevalence and the issue is vastly underreported. However, femicide is increasing.⁸⁸ Recent annual reports by the UN High Commissioner for Human Rights on the situation in the oPt, reports that leniency and biased judicial practice contributes to social acceptance of crimes of femicides.⁸⁹

Ongoing violence in Gaza, has had a negative impact on caregivers' ability to meet basic needs of the family, which may lead to GBV, including intimate partner violence and violence against children.⁹⁰ Forced internal displacement of people further increases the threat of GBV as women and girls outside of their homes are more vulnerable.

A study undertaken by UNFPA in 2019 showed that women and girls with disabilities are the most vulnerable to all kinds of violence and higher levels of marginalization.⁹¹ Their vulnerability is heightened by limited awareness, low educational attainment and educational exclusion, lack of resources and dependence on others, who may lack adequate support or resources themselves.

According to a rapid needs assessment by UNFPA, an estimated 10% of women and girls suffer long term disabilities since the May 2021 conflict. Furthermore, 101 women were widowed. An estimated 17,700 women and girls were internally displaced and exposed to increased GBV risks and psychological violence during the escalation the following weeks⁹². There

has been a rise in calls related to GBV incidents and three gender related killings were reported in the span of one month directly following the end of the escalation. Women and girls with disabilities are particularly vulnerable and at risk from all forms of violence and abuse, including sexual assault.⁹³

Furthermore, women who lack or are denied access to legal and social protection services (such as shelters) include those who are already vulnerable such as women with disabilities, women accused of murder or other offences, or those who have involvement with drugs, selling sex or collaboration with Israeli authorities.⁹⁴ For women LGBTIQ, access is not always denied but certainly restricted, either directly or not being able to identify themselves as such due to security concerns.

Child, early and forced marriage (CEFM)

One of the forms of GBV that poses particularly high risks for adolescent girls is early and forced marriage.⁹⁵ According to the strategy for addressing CEFM,⁹⁶ the prevalence of child marriages in Palestine is at 24% of all marriages.⁹⁷ Although in general CEFM seems to be declining,⁹⁸ an increase has been identified in certain areas, particularly parts of Gaza. Recommendations have been made to the Palestinian Central Bureau of Statistics (PCBS) to provide an update on CEFM prevalence based on the raw data, which was obtained as part of the 2019 violence survey. In Gaza,

⁸⁸ [WCLAC, "Parallel Follow-up Report Prepared by the Women's Center for Legal Aid and Counselling \(WCLAC\) and the Palestinian Non-Governmental Organizations Forum to Combat Violence Against Women \(Al Muntada\)", 2020, p. 6](#)

⁸⁹ A/HRC/46/63, para. 32

⁹⁰ Terre des hommes Foundation 2021: Rapid Needs Assessment in the Gaza Strip and West Bank including East Jerusalem

⁹¹ UNFPA (2019), [Women and girls with disabilities: Needs of survivors of gender-based violence and services offered to them](#), pp. 5-6.

⁹² Assessing the urgent needs of women and girls after the May 2021 offensive in Gaza, UNFPA 2021

⁹³ Zakaria Alsallout and Abeer Joma'a 2021: Gender based violence and disability inclusion

⁹⁴ Gender Justice Report, p. 14.

⁹⁵ Since the amendment of the Personal Status Law on 21 October 2019, the minimum age of marriage is 18 for all (in West Bank). However, Article 5 allows sharia courts and other religious

authorities to grant exceptions to the minimum age of marriage. In Gaza, the minimum legal age for marriage remains 17 for girls and 18 for boys. However a girl can marry at the age of 14 if a judge approves it as being in the child's interest.

⁹⁶ Wadi, A. (2020), Strategy for addressing CEFM in the West Bank and Gaza.

⁹⁷ In the Arab region, on average, one in five women are married before the age of 18. See UNFPA (2019), State of the World Population. Furthermore, in nearly 10% of marriages both spouses are under the age of 18 years old. See Report of the Special Rapporteur on violence against women, its causes and consequences, on her mission to the Occupied Palestinian Territory/State of Palestine, [A/HRC/35/30/Add.2](#), 8 June 2017, para. 39

⁹⁸ 15% among women aged 20-24 in 2014 and approximately 11% in 2017. See PCBS (2014), Palestinian Multiple Indicator Cluster Survey and PCBS (2017), The Population, Housing and Establishment Census

three out of 10 women were married before the age of 18.⁹⁹ Poor families in Access Restricted Areas (such as Khan Younis and Rafah), refugees and internally displaced people (IDP) are identified as communities where high rates of child/early marriage have been recorded. Also concerning is the tendency to prevent married girls from attending school and completing their education.¹⁰⁰

Lack of access to services (eg. safe shelter, comprehensive case management, legal aid)

In Gaza, there is a lack of specialized services and qualified, skilled, trained staff especially to deal with trauma of ongoing violence. Noteworthy is the persistent gap in safe shelter options for women and girls, including those with special needs. Currently two centers/shelters provide reintegration support to women victims and survivors of GBV and multi-sectoral services such as GBV case management, psychosocial counselling, legal counselling and court representation, vocational training and skill development. They also provide overnight stay. However they are not sufficient to meet increasing needs and do not operate during emergencies (escalation and pandemic) as there are no clear contingency plans during emergencies. They also have restricted admission criteria and do not provide shelter for all women including people with disabilities and women who were accused or convicted of any crime.

On access to justice women and girls experience multiple layers of discrimination and violence due to the Israeli occupation and internal factors such as religion and tradition. Violation of their rights affect marriage/divorce, child custody, reproductive health and domestic violence, access to education, and economic rights, including the right to decent work and to inherit and control land and other productive resources. Making the rule of law a reality for women poses challenges at every stage: from inadequate and gender-biased legal frameworks, to ineffective

implementation of laws and constitutional guarantees; from lack of accountability/oversight systems to gender-blind budgets and infrastructures. The justice system often breaks down for women due to insufficient capacity within the justice and security sectors, discriminatory attitudes of service providers and lack of consideration about the socio-political barriers women experience.¹⁰¹

Risk 5.1: Operational context

The capacity to respond to the threats has been weakened by the conflict. During the hostilities, GBV in-person services, such as legal aid, PSS, GBV case management, and other community education/awareness raising activities were suspended. All governmental institutions were closed, including the safe shelter facility and the women's detention facility. The shelter and female detention facility have subsequently reopened, but in the meantime, GBV survivors have been exposed to further harm whilst being forced to remain at home and in precarious domestic situations. Several GBV service providers, including frontline workers, have been directly affected by the bombardments, some have lost family members, and others have been displaced. For girls under 18 years of age who are still displaced there is a continued need to facilitate their access to psychosocial support services, to feel safe and have access to private spaces. There is a high need for legal aid for GBV survivors. Furthermore, widowed women need free representation, consultation and legal assistance in obtaining identity documents that were lost due to destruction of houses or while taking refuge, in addition to support with issues related to inheritance and the custody of children.

⁹⁹ Compared to two out of ten women in the West Bank. See PCBS (2014), Palestinian Multiple Indicator Cluster Survey

¹⁰⁰ GBV SC and Child Protection AoR, Strategy for Addressing Child/ Early/Forced Marriage in the West Bank and Gaza, February 2020

¹⁰¹ UN Women Women's Access to Justice Fact Sheet

Risk 5.2: Partner responses and capacities

To address the specific needs of women and girls within the humanitarian context in the oPt, the GBV SC is enhancing and supporting provision of multi-sectoral face-to-face and remote services, including case management, psychosocial support, cash and voucher assistance, dignity kits, legal aid, emergency medical care (through coordination and referral), and outreach around these services. Through the GBV SC, plans are in place for organizations to work collectively in 2022 to build national capacity in case management.

In 2022, GBV actors will focus on expanding service delivery and offering high quality multi-sectoral services for the most vulnerable groups, especially women and girls with disabilities, groups excluded or restricted from access to shelters, and female-headed households. They will work closely with other Clusters, in particular CP/MHPSS WG and Health Cluster, and continue to use health and psychosocial support services as the best entry point for GBV survivors to access care and support.

Humanitarian needs and gaps

- High need for high quality provision of multi-sectoral face-to-face and remote specialized services, including case management and referral, sheltering services, legal aid and representation, psychosocial support (including to frontline workers), cash and voucher assistance, dignity kits, legal aid, emergency medical care (through coordination and referral), and outreach to empower GBV survivors to access specialized care and support.
- Increased focus on internally displaced women and girls, with provision of dignity kits, protection information, and cash and voucher assistance for GBV survivors as part of GBV case management.
- Development of a contingency plan to respond to GBV during emergencies. The National Referral System sets out procedures during normal times, yet it is crucial to have a Standard Operating Procedure (SOP) for emergencies, aligned with the National Referral System.

- Need for updated Referral Pathways and Standard Operating Procedures, aligned with the expected updated National Referral System, inclusive of both Prevention of Sexual Abuse and Exploitation protocols and women and girls with disabilities.
- Need for GBV mainstreaming in the humanitarian response by increasing coordination on GBV among the Humanitarian Clusters, and strengthening national and community-based systems that prevent and mitigate GBV.
- Need for specialized services in community and a shortage of qualified, trained skilled staff to deal with the trauma of ongoing violence, which assesses the ability of the affected women, girls and GBV survivors to meet their basic needs and access the essential services such as health, MHPSS, legal.

Key Protection Figures (January – June 2022)

Palestinians killed/ injured: 12 Palestinians injured, including 7 children (6 boys, 1 girl)

UXO: 6 deep buried bombs still to be cleared (from May 2021 conflict)

Protection risk 6: Explosive Remnants of War in Gaza

The May 2021 conflict has left Gaza severely contaminated with explosive remnants of war (ERW), explosive ordnance. A year after the escalation, out of 16 deep buried bombs (DBB) that were located in Gaza in 2021, 10 were cleared and 6 DBB/ unexploded ordnances are still buried in the rubble of damaged buildings or in farmland posing immediate risks to Palestinians, hindering safe movement, humanitarian access and access to basic services.

Men are more vulnerable to life loss and injuries due to their larger engagement in the public sphere, including participation in the provision of first response services, construction work and scrap metal collection. Concurrently, children are particularly vulnerable due to their curious nature and tendency to explore their environments; since May 2021 escalation, 77% of the reported ERW victims are children¹⁰². Internal displaced persons are more vulnerable because they are in locations that are less familiar to them. Furthermore, they may not have the same access to the normal lines of communication within the community, which might share ERW locations when they are identified.

There is an urgent need for life saving mine action intervention, including emergency ERW risk assessments, Explosive Ordnance Disposal (EOD) responses, and ERW risk and Conflict Preparedness and Protection (CPP) messaging remain priority.

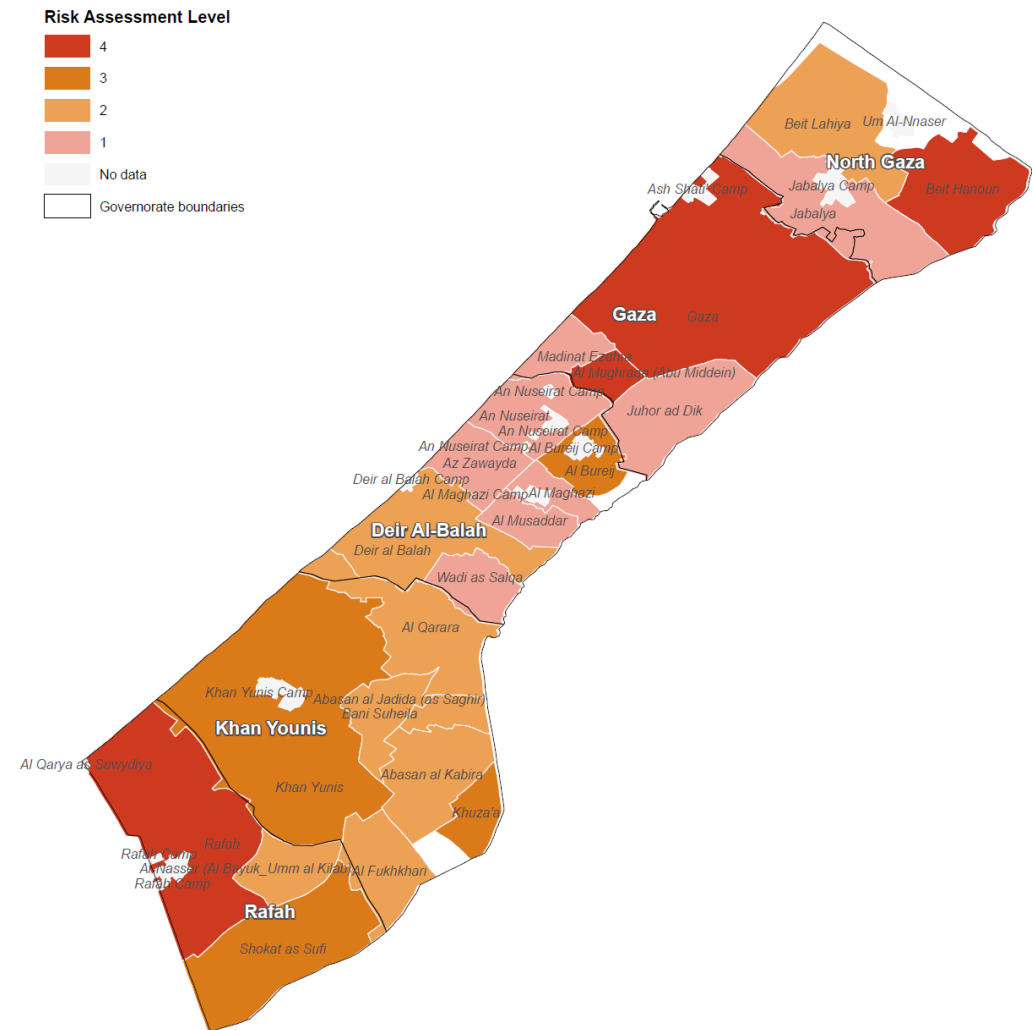
Humanitarian actors and the general population must receive risk education to reduce the risk from ERW if/when it is encountered. Even before the recent escalation in Gaza Mine Action partners noted a considerable decrease in sensitization about ERW contamination and the pressing need for intervention.

The capacity for mine action remains a major challenge, and there are access restrictions on EOD equipment and provision of training to the local EOD responders. UNMAS delivers clearance liaison and rendering safe and excavation of DBB, as well as support for future rubble removal and reconstruction projects.

Risk 6.1: Operational context

During the military escalation in Gaza in May 2021, an estimated 258 buildings, comprising 1,042 housing and commercial units, were destroyed,

Protection cluster (oPt) - ERW risk assesment by minicipalities



¹⁰² UNMAS 2022

and 769 units severely damaged or rendered uninhabitable. IF launched an estimated 4,223 strikes via air, sea and land. A sizable proportion of items discharged did not explode on impact and remain on the ground, in some cases deeply buried, posing an immediate threat to life. With an estimated failure rate at 10%, the conflict has left a dangerous explosive legacy in the area. The ERW lie in agricultural areas and amongst the rubble, thus precluding the delivery of humanitarian aid, inhibiting safe movement, and curtailing recovery and development initiatives.

With the ceasefire holding, UN agencies and humanitarian partners must accelerate their emergency response. In order to do this safely and effectively, rapid explosive risk assessments at sites of operation and routes of passage are needed to ensure partner operations are not disrupted by ERW. The new contamination caused by the May 2021 escalation, in addition to historic ERW contamination from previous conflicts, has increased the need for a concerted effort to mitigate the threats posed by these explosive hazards through EOD – including the removal of DBB, risk assessments, and explosive ordnance risk education (EORE) along with the CPP messages.

Risk 6.2: Partner responses and capacities

One million people need Mine Action services in 2022. In response to these needs, UNMAS cleared 10 DBB sites out of 16 in addition to carrying out 76 risk assessments to various UN humanitarian projects sites. A total 34,368 people received EORE and CPP sessions by UNMAS, NPA, UNICEF and Save the Children since the beginning of 2022. In the same reporting period, 12 ERW injuries, of which seven are children, were recorded due to ERW.

Risks 6.3: Humanitarian needs and gaps

- Rapid explosive risk assessments at sites of operation and routes of passage to ensure safe access for humanitarian partners
- Clearance of deep buried bombs

- Widespread EOD risk education and CPP messaging

4. RESPONSE AND CHALLENGES

The Protection Cluster seeks to address the most urgent protection concerns in Gaza identified through the MSNA analysis, and extensive research and documentation carried out by protection partners. The most urgent needs range from the ongoing human rights and IHL concerns arising from military occupation, and ongoing escalations of violence and tension, to those driven by longstanding Israeli policies and practices, or caused by compounded risks associated with deteriorating living standards and COVID-19. The Protection Cluster Objectives in the oPt HRP 2022 are as follows:

- ❖ **Objective 1:** Increased respect for International Humanitarian Law (IHL) and International Human Rights Law (IHRL) and accountability for violations
- ❖ **Objective 2:** Ensuring protection response mechanisms are in place to prevent and mitigate the compounded risks arising from the occupation and conflict related violence, and the impacts of COVID19

The Protection Cluster and the GBV, CP/MHPSS and LTF AoRs work closely with partners and authorities, enhancing their capacity to ensure inclusion of those in need of protection. Across the various responses, the cluster has prioritized the inclusion of persons with disability. Protection Mainstreaming interventions particularly aim at bolstering meaningful access for persons with disabilities, and with a focus on introducing effective safeguards to protect people against stigma and discrimination across the humanitarian response. For the 2022 HRP, the Protection Cluster and its partners made efforts to address accessibility barriers, including developing a disability inclusion checklist. Some remote work modalities, adapted to the ongoing constraints caused by the COVID-19 pandemic continues in line with global minimum standards.

The Protection Cluster prioritizes interventions that address protection risks arising from the threats described above which have intensified and continue unabated over the past year. As underscored by persistent escalations in violence and use of force resulting in injuries and killings and arbitrary arrests and detention.

Movement and access restrictions of both people and goods in and out of Gaza continues to undermine access to basic services, health care, economic and social development as well as hinder the ability of protection organizations to provide support.

Combined these factors have dire consequences on mental health of all Palestinians and GBV and child protection concerns overloading protection services. Particularly impacted are women, children and persons living with disabilities, forcing vulnerable households to adopt negative coping strategies and increasing burdens on female headed households in particular

Disability Inclusion: There is an urgent need to provide technical support on disability inclusion to all humanitarian partners, specialized responses for persons with disabilities and inclusive messaging and awareness raising materials.

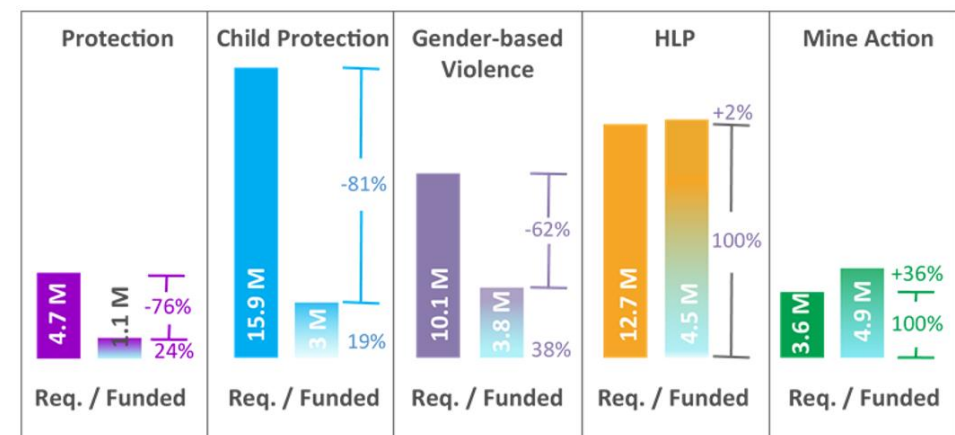
5. Funding data

The 2022 Humanitarian Response Plan aims to support the most vulnerable people in Gaza and West Bank. In Gaza the focus is multi-dimensional protection risks. Humanitarian organizations are already carrying out some of the work. However, there are persistent funding gaps in protection services, notably:

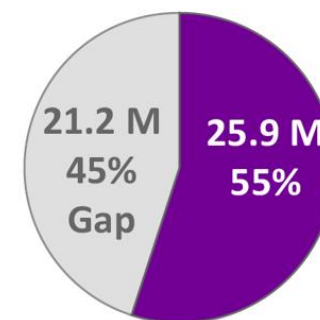
- MHPSS, notably advanced MHPSS services for remote communities and vulnerable groups;

- GBV services including adequate sheltering services for women and girl survivors of GBV;
- Child Protection Interventions;
- Clearance of DBB and EOD risk education and CPP messaging.

| HRP 2022 | Protection Cluster Funding Requirements vs Funds Received (as of June 2022)



Protection Cluster Requirement 47 Million



6. RECOMMENDATIONS

Protection Risk 1: General Protection and Human Rights risks, in particular deterioration in physical well-being due to violence and conflict

- End all practices that amount to collective punishment: Immediately end the blockade of Gaza, remove hurdles including quotas and restrictions on people and products entering/ exiting Gaza – any restrictions on freedom of movement must be in accordance with international law.
- Both Israeli and Palestinian authorities have a responsibility to calm all violence, both in words and actions, protect civilians and ensure accountability for all violations of international law.
- Israel as the occupying power is responsible for the safety and security of the Palestinian population and must ensure the protection of all Palestinian civilians.
- End culture of impunity and hold duty bearers accountable for all human rights violations - Israel must undertake thorough, independent, impartial and prompt investigations into all instances of possible excessive use of force, and those responsible for any violations must be held to account.
- When use of force is necessary, it must comply fully with international human rights laws: the use of firearms is allowed in extremely limited circumstances, namely in self-defence or defence of others from an imminent threat of death or serious injury, and as a last resort. Even when strictly necessary, force must be used in a manner which minimizes harm and preserves life.
- Allow safe and consistent access to farming and fishing, including refraining from levelling and herbicide spraying, use of lethal force on land and at sea to enforce restrictions, and confiscation of fishing boats.

- All duty bearers must end arbitrary arrests and detention and ensure the rights of detainees are respected, including all fair trial guarantees.

Protection Risk 2: Internal displacement

- Everyone should be able to live in safety and dignity.
- The forcible eviction of Palestinians from their homes in Gaza raises a range of human rights concerns and also heightens their risk of forcible transfer – a grave breach of the fourth Geneva Convention and a war crime
- Palestinians from Gaza, whether married to spouses from West Bank, East Jerusalem, Israel, or abroad are entitled to live together as one cohesive familial unit, without the constant threat of separation.

Protection Risk 3: Psychosocial distress and deterioration in mental well-being

- Ensure availability of in-person and remote specialized MHPSS services to both children, caregivers, and frontline service providers.
- Prioritize funding for community based MHPSS services.
- Develop remote MHPSS service provision guidance, as well as invest in existing hotlines, considering any emerging escalation or emergency, including pandemics, such as COVID-19
- Provide self-care and supervision services to MHPSS frontline service providers.
Ensure contingency planning and response is well-coordinated among all relevant actors, with clear inter-sectoral pathways

Protection Risk 4: Child protection threats/ Grave violations against children

- Children are bearing the brunt of these massive hostilities. Everyone has a responsibility to protect children from violence

- IF must refrain from using violence against children and particular care should be taken to protect children from any form of violence.
- Prioritize funding for the child protection programming for children affected by conflict-related violence”.
- Provide integrated and holistic protection and inter-sectoral support to vulnerable families including cash support.

Protection Risk 5: Specific protection risks facing women and girls

- Establish a national network for the protection of women and girls in times of conflict, to provide specialized, equipped shelters responsive to the needs of women, girls, persons with disabilities, and LGBTQI+ persons in accordance with Security Council Resolution 1325 and international laws and conventions on the protection of women and girls in conflict areas.
- Review of government plans and interventions during an emergency, specifically the Rapid Response Plan for the social sector
- Endorsement and effective enforcement of the Family Protection Bill, to prevent and combat GBV in all its forms and to protect and ensure that women and girls can fully enjoy their human rights. Immediately repeal discriminatory legislation, in consultation with national GBV actors and civil society, to ensure full and adequate protection of women and girls.
- Ensure **equal and non-discriminatory access** to specialized services for GBV survivors, including WGWDs and LGBTQI+ persons, including sheltering, legal and judicial services guided by GBV Minimum Standards
- Increase the availability and accessibility of life-saving highly specialized services for GBV survivors, including promoting community awareness about how and where to access services.
- Enhance the capacity of service providers to provide high quality GBV protection services.

Protection Risk 6: Explosive remnants of war in Gaza

- Maintain a mine action presence to respond to ERW in and around humanitarian premises to ensure the safe and secure delivery of life-saving and emergency assistance for personnel and beneficiaries during and after conflict.
- Continuous delivery of EORE and CPP messages to the affected communities in Gaza to increase capacity for personal safety before, during, and after conflict