



Alaa's older children help bathe her baby, born in wartime, with water carted from a distribution point. UNICEF supports her and more than 1 million people with cash transfers since 7 October 2023.

unicef 
for every child

Humanitarian Situation Report No. 34







Reporting Period
1 January to 31 December 2024

State of Palestine

HIGHLIGHTS¹

- After a 15-months devastating war, the humanitarian situation remains catastrophic in the Gaza Strip. Most children have lost access to quality healthcare, education, water and other vital services.
- At least 14,500 children have reportedly been killed in the Gaza Strip since 7 October 2023, representing an average of 32 children killed every day, and many more are injured, while thousands are likely under the rubble, and an estimated 17,000 children are unaccompanied and/or separated.
- UNICEF with partners ensured the provision of water for a monthly average of 1.8 million people, including over 700,000 children, across the Strip.
- In the Gaza Strip, UNICEF has reached over 1 million individuals, including 502,000 children, with humanitarian cash transfers, as well as 1.4 million beneficiaries with nutrition products.
- In the West Bank, UNICEF facilitated inclusive and safe learning opportunities for 53,780 children through summer camp activities and supported over 61,000 people with medical supplies.

UNICEF RESPONSE AND FUNDING STATUS*

	Nutrition	Wasting treatment	65%
		Funding status	34%
	Health	Polio Campaign	87%
		Funding status	41%
	WASH	Safe water access	125%
		Funding status	101%
	Child protection	MHPSS support	136%
		Funding status	145%
	Education	Recreational activities	130%
		Funding status	107%
	Social protection	Cash transfer	182%
		Funding status	142%

* UNICEF response % is only for the indicator, the funding status is for the entire sector.

SITUATION IN NUMBERS



1,554,700
Children in need of humanitarian assistance²



3,300,000
People in need of humanitarian assistance³

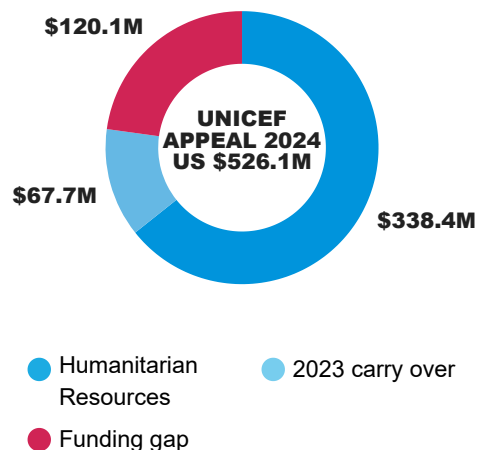


1,900,000
Internally displaced persons (90% of Gaza Strip)⁴



534
Schools in the Gaza Strip sustained damage (94.7%)⁵

FUNDING STATUS (IN US\$)**



** Funding available includes: funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors

FUNDING OVERVIEW AND PARTNERSHIPS

An Inter-Agency Flash Appeal⁶ was issued on 17 April, covering the period until the end of December 2024. This appeal estimated that US\$2.8 billion is required to address the critical needs of 3.1 million people, including 2.3 million in the Gaza Strip and 800,000 in the West Bank.⁷ UNICEF's Humanitarian Action for Children (HAC) appeal⁸, revised and aligned with the Inter-Agency Flash Appeal, is seeking \$526.1 million to cover the urgent and critical needs of children and their families across the Gaza Strip and the West Bank, including East Jerusalem. Against this updated appeal, UNICEF faced a funding shortfall of \$88.2 million (17 per cent) at the end of 2024. In order to continue to provide life-saving assistance to children and their families in 2025, UNICEF estimates that \$716.5 million in funding will be needed.

Flexible funding enables UNICEF to respond promptly and more effectively, prioritizing funding where it is most needed and enabling us to adapt to the changing reality on the ground. Without adequate funding, children are at a greater risk of malnutrition, at risk of not being reunified with their families, and at risk of not being provided with critical water and health services.

UNICEF would like to sincerely thank its partners for their valuable and timely contributions, including the governments of Austria, Australia, Canada, Croatia, Cyprus, Denmark, Estonia, France, Germany, Japan, Mauritius, New Zealand, Norway, Oman, Poland, Republic of Korea, San Marino, Spain, Sweden, Switzerland, the United Kingdom and the United States, as well as the Central Emergency Response Fund (CERF), the OCHA Country-based Pooled Fund, the European Union, Gavi - the Vaccine Alliance, and the World Bank. UNICEF thanks the UNICEF National Committees of Austria, Australia, Belgium, Canada, Denmark, Finland, France, Germany, Hungary, Iceland, Ireland, Italy, Japan, Korea, Liechtenstein, Luxembourg, Netherlands, New Zealand, Portugal, Slovenia, Spain, Sweden, Switzerland, Turkey, United Kingdom and the United States. UNICEF would also like to thank the UNICEF private sector fundraising in Argentina, Bahrain, Bangladesh, Bosnia & Herzegovina, Chile, Croatia, Egypt, Greece, Indonesia, Kazakhstan, Kuwait, Malaysia, Mexico, Morocco, Pakistan, Peru, Philippines, Romania, Oman, Qatar, Saudi Arabia, Singapore, Thailand, United Arab Emirates and Uzbekistan. UNICEF also benefited through the Global Humanitarian Thematic Funding from Denmark, Germany, the Netherlands, and Sweden, which enabled UNICEF to respond flexibly to the acute needs of the most vulnerable children and their families.⁹

But much more needs to be done. To respond to the situation for children in Israel and the State of Palestine, UNICEF is calling for:

- The immediate, safe, and unconditional **release of all abducted children**, and **an end to any grave violations against all children**, including killing and maiming children.

- **Respect and protection for civilian infrastructure** such as shelters and schools, and health, electric, water, sanitation, and telecommunications facilities, to prevent loss of civilian and children's lives, outbreaks of diseases, and to provide care to the sick and wounded. All parties to the conflict must respect international humanitarian law.

- An immediate and long-lasting **humanitarian ceasefire**.

- **Safe and unrestricted humanitarian access** to and within the Gaza Strip to reach affected populations wherever they are, including in the north. All access crossings must be opened including to sufficient fuel, materials needed to run and rehabilitate essential infrastructure, and commercial supplies. Safe movement for

humanitarian workers and supplies, including supplies for latrines for persons with mobility difficulties and assistive devices such as hearing aids, wheelchairs, crutches and prosthetics, across the Gaza Strip must be guaranteed and reliable telecommunications networks made available to coordinate response efforts.

- Urgent medical cases in the Gaza Strip to be able to **safely access critical health services or be allowed to leave**, and for injured or sick children evacuated to be accompanied by family members.

UNICEF continues to press world leaders on every occasion for an end to the violence and humanitarian access to the whole of the Gaza Strip.

SITUATION OVERVIEW AND HUMANITARIAN NEEDS

2024 has been another terrible year for children across the State of Palestine. In the Gaza Strip, at least 14,500 children have reportedly been killed since 7 October 2023, and at least 23,000 estimated injured,¹⁰ while thousands are likely under the rubble,¹¹ and an estimated 17,000 others are unaccompanied and/or separated children from their caregivers. At least 25 per cent of children who sustain injuries may experience long-term disabilities without access to rehabilitation services. In the West Bank, including East Jerusalem, in the 15 month-period following 7 October 2023, there has been a 189 per cent increase in the number of Palestinian children killed in conflict related violence compared to the preceding period (July 2022 - October 2023). More than 1,200 Palestinian children have been injured, almost half by live ammunition. Over 65 per cent of conflict-related killings and violence in the West Bank have taken place in the northern governorates of Jenin, Nablus, Qalqilya, Tubas and Tulkarem.

On 7 October 2023, 37 children were also killed in Israel and 36 children abducted into the Gaza Strip, with 34 subsequently released and the status of two Israeli children is still unknown. Three Israeli children were also killed near settlements in the West Bank in 2024.

The humanitarian situation remains catastrophic in the Gaza Strip, with more than 80.5 per cent of the territory under active or previously issued displacement orders. Children have lost access to quality healthcare, education, water, and other vital services while continuously being exposed to traumatic events with almost no specialized referral services available. Aside from death, many children are suffering injuries that can cause multiple disabilities, making them even more vulnerable. Medical evacuations of critical patients with serious medical conditions or those requiring specialized care for conflict-related injuries are still occurring, but have decreased by 94 per cent since the closure of the Rafah crossing in May 2024.

Regular attacks on civilian infrastructure, including health facilities, water wells, and networks, have crippled access to critical services. This, coupled with overcrowded and unhygienic living conditions, open sewage, and the lack of solid waste collection, has created a public health catastrophe. Waterborne diseases, including diarrhoea, Hepatitis A, and Polio, have emerged, posing a serious threat to children's lives, especially those under the age of two. The detection of Poliovirus type 2 (cVDPV2) in Gaza in July 2024, after 25 years of absence, has further intensified the health risks to children.

Persistent restrictions on the entry of humanitarian aid, commercial commodities, and access restrictions have rendered the population in Gaza acutely food insecure. All 335,000 children under five are at high risk of malnutrition.

Schools that are serving as shelters for displaced civilians have made it impossible for over 658,760 children to access regular, full-

time education. One year of classroom learning has already been lost, and education is unlikely to resume in the 2024/2025 academic year. As a result, children's education is projected to be set back by up to five years.

In the West Bank, including East Jerusalem, extensive militarized operations by Israeli forces, coupled with rising settler violence and large-scale demolitions, have significantly increased children's exposure to conflict-related violence, grave violations, and displacement, as well as impeded access to basic services.

The escalation of violence and hostilities across the State of Palestine has had an unprecedented impact on the Palestinian economy, reaching a record downturn in the first half of 2024, according to the latest official estimates by the Palestinian Central Bureau of Statistics. Real GDP in the West Bank, including East Jerusalem, and the Gaza Strip plummeted by a staggering 34 per cent in the first half of 2024, year-on-year.

Unemployment has reached 51 per cent nationwide, while it is estimated that in Gaza it stands at 80 per cent. Poverty in the State of Palestine is projected to rise to 74.3 per cent in 2024, affecting 4.1 million people, including 2.61 million people who are newly impoverished.

The ESCWA/UNDP published policy brief estimated that by the end of 2024, the Human Development Index (HDI) in the State of Palestine may fall to 0.643, a level not seen since HDI calculations began in 2004. The HDI of the Gaza Strip is projected to drop to 0.408, erasing over 20 years of progress. The HDI of the West Bank is expected to decline to 0.676, reflecting a loss of 16 years of development.¹²

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

Health

Newborns, children, and mothers in Gaza and the West Bank, including East Jerusalem, face significant challenges in accessing quality health services due to ongoing crises. In Gaza, most hospitals are non-functional, with equipment destroyed and supplies limited, leading to a 64 per cent reduction in neonatal care beds in Ministry of Health (MOH) hospitals. By the end of the year, only 18 out of 36 hospitals were partially functional. The Expanded Programme on Immunization (EPI) coverage dropped from nearly 100 per cent to below 90 per cent in a year, coinciding with the resurgence of circulating vaccine-derived poliovirus type 2 (cVDPV2) after 25 years of being polio-free.

In response, UNICEF implemented extensive emergency healthcare initiatives targeting mothers, neonates, and children under five, who are particularly vulnerable to contagious diseases and malnutrition. UNICEF supplied 44 medical facilities with essential supplies and equipment, benefiting over 585,300 people. Support was provided to 40 primary healthcare (PHC) facilities operated by MOH and other partners. These facilities offered comprehensive services such as antenatal care, postnatal care, integrated management of childhood illnesses, and treatment for acute and chronic illnesses. Seven mobile teams served restricted communities, offering antenatal care, integrated management of childhood illnesses, vaccinations, and referrals. Training for approximately 4,450 health workers on maternal and newborn health was conducted alongside the distribution of 70,000 Maternal and Child Health (MCH) handbooks to improve record-keeping.

In response to the cVDPV2 outbreak, UNICEF conducted a two-round polio vaccination campaign, administering novel oral polio vaccines to 559,161 children under ten in the first round and 556,774

in the second, achieving a 94 per cent coverage rate in both rounds. UNICEF also facilitated routine vaccination, delivering 966,300 doses, expected to protect around 134,283 children under eighteen months from vaccine-preventable diseases. To ensure proper vaccine storage and transportation, UNICEF led a cold chain assessment in Gaza to identify gaps and enhance cold chain capacities.

In the West Bank, UNICEF focused on capacity building for 527 healthcare providers on emergency care protocols and basic life support. UNICEF also provided essential medical supplies and vaccine procurement services to the MOH and UNRWA, serving over 129,200 children under five. Additionally, UNICEF enhanced infection prevention and control in targeted health facilities and introduced 3D printing for prosthetics and orthotics, alongside training for workers in this field.

More than 61,000 people were supported through UNICEF-delivered medical supplies for the MOH and UNRWA in the West Bank, with a 97 per cent achievement rate in ensuring that UNICEF-supported facilities had adequately trained staff for providing basic services.

Nutrition



In Al Mawasi, Gaza Strip, a child undergoes a nutritional screening procedure by a Mobile Health and Nutrition Team, supported and trained by UNICEF.

The escalation of hostilities in the State of Palestine since 7 October 2023 has led to an increasingly difficult nutrition situation. According to the Integrated Phase Classification (IPC) report for September - October 2024 and the projection for November 2024 - April 2025, the risk of starvation persists across the entire Gaza Strip. After over a year of conflict, the whole territory is classified in IPC Phase Four (Emergency). About 1.84 million people across the Gaza Strip are experiencing high levels of acute food insecurity, classified in IPC Phase Three (Crisis) or above, including nearly 133,000 people facing catastrophic food insecurity (IPC Phase Five) and 664,000 in IPC Phase Four (Emergency). Acute malnutrition is at severe levels (IPC Acute Malnutrition Phase Three), ten times higher than before the escalation of hostilities.

In response to this unprecedented crisis in the Gaza Strip, UNICEF developed emergency procedures and built the capacity of civil society organizations (CSOs) to scale up the humanitarian response, including Community-based Management of Acute Malnutrition (CMAM), Infant and Young Child Feeding in Emergencies (IYCF-E), and micronutrients. UNICEF delivered a range of seven lifesaving different nutrition products.

UNICEF enhanced the knowledge and skills of 500 service providers on IYCF-E services, 200 on CMAM services, and 150 health workers on managing acute malnutrition with medical complications. As a

result, 36,254 children suffering from acute malnutrition, including 6,872 with severe acute malnutrition, received lifesaving treatment, preventing them from dying due to the consequences of malnutrition.

UNICEF delivered seven different nutrition commodities, including 642,044 bottles of ready-to-use infant formula, 312,834 jars of ready-to-use complementary foods, 26,687 cartons of SQ-LNS, 140,486 cartons of high-energy biscuits, 50,000 cartons of RUTF, 18,000 bottles of multiple micronutrient supplements (MMS), and 13,000 packs of MNPs, reaching a cumulative total of 1.4 million beneficiaries. UNICEF and nutrition cluster partners conducted over half a million screenings, reaching all children below five years at least once and more than 100,000 pregnant and breastfeeding women with IYCF counselling services.

UNICEF also planned and implemented the largest ever vitamin A supplementation campaign¹³ in the Gaza Strip, targeting children aged two to ten years, integrated with the second round of the polio campaign. Of the targeted 485,205 children, 448,425 were reached, representing 92.4 per cent. Despite challenges, the campaign was also implemented in the North of Gaza, reaching 84,119 children (86 per cent of the target population).

UNICEF developed partnerships with eight civil society organizations and supported them in establishing 400 treatment sites to provide access to lifesaving nutrition services. Four mobile health and nutrition teams were deployed, including two in the North, to ensure the needs of children living in hard-to-reach areas were met. UNICEF led the Nutrition Cluster, participating in prioritization efforts at the Joint Logistics Committees and the Joint Humanitarian Operations Centre to ensure the nutrition needs of the Gaza population were prioritized and addressed. On the front line, UNICEF deployed ten extenders across all five governorates in Gaza, providing day-to-day monitoring and site supervision to improve the quality of nutrition services. The extenders successfully conducted 63 field visits and provided capacity building and on-the-spot course correction to maintain the scale and quality of UNICEF's nutrition response.

In the West Bank, UNICEF continued to promote nutrition-friendly school initiatives in collaboration with the Education Programme. Ten new schools were added to the previously supported 30, including schools with kindergartens, ensuring the integration of nutrition into early childhood development (ECD). UNICEF also provided essential medical supplies and vaccine procurement services to the MOH and UNRWA, serving over 129,200 children under five. Additionally, UNICEF enhanced infection prevention and control in targeted health facilities. More than 21,000 pregnant women received preventative iron folate or multiple micronutrient supplementation and related services. Over 3,325 cases of children aged 6-59 months with wasting were admitted for treatment, and more than 2,400 cases of children aged 6-59 months with severe wasting were also admitted for treatment.

Water, Sanitation and Hygiene (WASH)

UNICEF continued its collaboration with the Water, Sanitation, and Hygiene (WASH) cluster partners and national partners, including the Palestine Water Authority (PWA) and Coastal Municipal Water Utilities (CMWU), along with non-governmental organisations (NGOs), to address the humanitarian crisis in the Gaza Strip. As the key WASH partner, UNICEF played a crucial role in the humanitarian response, significantly improving the dire WASH situation in Gaza.

UNICEF provided over 6 million litres of fuel to operate water facilities, treatment plants, and sewage pumping stations. UNICEF also supported the rehabilitation of municipal and community sanitation facilities, repairing seven damaged systems and constructing 9,000 family latrines in Rafah, Khan Yunis, Gaza, and Deir al-Balah. Cleaning and sanitation services were also provided in

50 shelters through incentive and contractual projects. Due to massive quantities and piling of garbage and its impact on public health, UNICEF rehabilitated two dumping sites in collaboration and coordination with a local service provider, benefiting around 400,000 persons in Khan Yunis and Zawaideh municipalities.

UNICEF procured and distributed WASH supplies, including sanitary pads, jerrycans, hygiene kits, and water treatment chemicals, improving hygiene practices and preventing disease outbreaks. Monthly, an estimated average of 1.8 million people were reached with basic water services, 600,000 with sanitation services, and 900,000 with hygiene services, all within humanitarian standards to ensure dignity and protection.

Additionally, UNICEF repaired and improved WASH facilities in 49 temporary learning spaces and six hospitals benefited around 200,000 persons. To ensure sustained operation of WASH facilities amid damaged power infrastructure, UNICEF advocated for connecting the South Gaza Desalination Plant to the electrical grid, increasing its production from 3,000 to 18,000 cubic metres per day, benefiting over 600,000 people with reliable access to safe water. UNICEF also advocated for connecting the South Gaza Desalination Plant to the electrical grid, increasing its production from 3,000 to 18,000 cubic metres per day, benefiting over 600,000 people with reliable access to safe water.

UNICEF also developed and operationalised winterisation, as certain parts of the Gaza Strip are at risk of flooding and the possibility of wastewater overflow in flood-prone areas. The winterisation activities included support to service providers with three dewatering pumps, 20 desludging pumps, and contractual services to manage stormwater and wastewater effectively, mitigating flooding from sewage systems.

Social and Behaviour Change (SBC) and Community Engagement interventions were implemented, providing communities with awareness messages to prepare against disasters and winter diseases associated with poor sanitation, scattered garbage, and flash floods. Accountability to Affected Populations (AAP) and protection principles were incorporated throughout the humanitarian project phases, including the participation of women and children. To continue building the capacity of local partners on emergency and hygiene behaviours, UNICEF trained 80 staff members from NGOs and CMWU partners on monitoring water trucking, awareness, and communication tools, including key messages on Acute Watery Diarrhoea (AWD) and chickenpox.

Challenges included massive needs and continuous displacement due to recurrent evacuation orders, restricted access to people in need, and lengthy processes for the entry of WASH supplies and coordinated movement within Gaza.

Despite worsening security conditions and restricted access in the West Bank, UNICEF has been actively supporting emergency response and preparedness in the WASH sector. Over 150 different WASH items, including pumps, generators, chlorine, fuel, water and wastewater pipes, and electromechanical spare parts, have been delivered to PWA warehouses across the northern, central, and southern regions. UNICEF also supported PWA through Direct Cash Transfers (DCT) agreements for urgent operations and maintenance interventions across the West Bank, benefiting approximately 50 per cent of the population. Specifically, 78,312 litres of chlorine were provided to 25 water wells in areas such as Bethlehem, Hebron, Nablus, Tubas, Jenin, Jericho, and East Jerusalem suburbs, along with 18,445 litres of fuel for stations in Taquu and Faraa, benefitting 800,500 persons, including 122,000 directly. Overall in 2024, UNICEF has directly supported more than 877,420 people, including 640,000 indirect beneficiaries, by providing fuel and chlorine to PWA across the West Bank. This demonstrates a strong commitment to meeting urgent and long-term WASH needs despite challenging

circumstances. UNICEF also provided vital WASH infrastructure items to repair and rehabilitate damages in refugee camps. For example, in the Tulkarem refugee camps, UNICEF coordinated emergency water trucking until network damage was repaired, delivering 535 litres of water to Tulkarem camp and 145 litres to Nurshams camp. Through partner support, UNICEF distributed 350 family hygiene kits and 144 polyethylene (PE) tanks to affected people in al-Fawwar Camp.

Child Protection

As Palestinian children's safety, development, and psychological well-being were impacted by unprecedented conflict-related violence across State of Palestine, UNICEF significantly scaled up critical child protection services, in line with organizational Core Commitments for Children. While national protection and social services remained severely constrained; UNICEF and its partners accounted for over 66 per cent of the Child Protection sector's humanitarian reach.

As a primary response, UNICEF and partners provided community-based activities for children's mental health and psychosocial well-being. In Gaza, 223,395 children (47 per cent girls) received Level 3¹⁴ individual and group interventions (25,093) and structured and unstructured Level 2¹⁵ activities (198,302), along with 129,389 caregivers (57 per cent women). UNICEF distributed 4,513 recreational and 3,683 MHPSS kits to UNICEF and CP-AOR partners, to support MHPSS implementation. In the West Bank, 16,856 children (48 per cent girls) and 15,570 caregivers (59 per cent women) received psychosocial support services (Level 2 and 3). An intersectoral MHPSS strategy was developed, alongside a capacity building plan for MHPSS partners - including a TOT for 12 frontline partners in the WB who will train 540 more personnel in 2024-2025.

To respond to at-risk and complex cases, UNICEF reached 6,905 children (49 per cent girls, 95 per cent in Gaza) with individual case management and/or service referrals, prioritizing the most vulnerable children. To increase the effectiveness of case management interventions, promote family unity and/or family and community-based care arrangements, and support injured children, UNICEF provided 1,740 households, including 1,475 households caring for children with conflict-related injuries or disabilities with integrated cash assistance. Another 548 children with conflict-related injuries or physical disabilities (50 per cent girls) were reached with specialized care and support.

To reduce explosive ordnance (EO) risks, UNICEF reached 398,644 children (54 per cent girls) in Gaza with EO-related prevention risk education, scaling up the reach throughout 2024. Additionally, 120,000 EO Risk Education leaflets were distributed.

To respond to rising risks of unaccompanied and separated children (UASC) due to forced displacement and death of caregivers, UNICEF established and co-chaired the UASC Technical Working Group to provide leadership and technical expertise to the sector. The Working Group developed tools and procedures for an accountable IDTR process (Identification, Documentation, Tracing, and Reunification), transferring expertise to CP partners and UN Cluster agencies on IDTR; and maintained constructive coordination with key national and regional stakeholders. To support children's best interests and right to family unity, as provider of last resort, UNICEF provided family tracing and reunification (FTR) services for UASC, facilitating reunification of 63 children in Gaza. Family-type alternative care services have benefited 82 unaccompanied children (47 boys, 35 girls). UNICEF supported 110 families caring for UASC with integrated cash assistance, including family counselling, and case management. To mitigate the risk of separation, UNICEF distributed 400,000 child identity bracelets targeting families with

young children. In 2024, UNICEF distributed 168,725 winter items by December.

In addition, UNICEF reached approximately 820,000 individuals with child protection messages on UASC, EORE and MHPSS. In Gaza, UNICEF trained 1,493 frontliners (63 per cent women) on child protection and MHPSS approaches.

To fulfil children's right to legal identity, UNICEF facilitated issuance of birth certificates for 105 children in Gaza. UNICEF provided technical expertise to a Legal Task Force guidance on birth registration and distributed 150,000 informational leaflets.

To support and better protect children at high risk of detention, grave violations or other violence, across the State of Palestine UNICEF and its partners supported 836 children to access free legal support services; provided legal awareness sessions for 276 children and 137 caregivers and supported the reintegration of 197 with vocational training, MHPSS, remedial education, and community engagement activities.

Education



The temporary learning space Amal Malaysia was built by the community. UNICEF led the implementation to reach a minimum and equitable entitlement for 2,958 boys and girls from kindergarten to grade 12.

The education sector in the State of Palestine faced severe challenges due to ongoing conflict and economic hardship. In Gaza, all 658,760 school-aged children have been without formal education since October 7, 2023, with nearly 95 per cent of educational facilities damaged. Trauma, overcrowding, and acute shortages of essential resources further worsen the situation. In the West Bank and East Jerusalem, the education of 806,300 school-aged children is disrupted by escalating violence, restricted mobility, and military operations, and children in hotspot areas¹⁶ are increasingly affected with more interruption of school days.

Despite these immense challenges, UNICEF, in line with community requests, has ensured that education remains a priority, fostering resilience and hope for children and youth. UNICEF has collaborated with the Ministry of Education and Higher Education (MoEHE) and partners to address these issues through emergency response and resilience-building initiatives. In 2024, a total of 143,784 children were reached, including 85,471 children in the Gaza Strip (39,059 girls and 46,412 boys) through 75 Temporary Learning Spaces (TLSs), 35 community-led initiatives, and 20 schools. Additionally, 53,072 children (26,482 girls and 26,534 boys) participated in education-based recreational activities, benefiting from recreational kits in TLSs, schools, and learning centres in the Strip. 71,099 children (34,386 girls and 36,713 boys) received individual stationery kits and learning materials in TLSs, schools, and learning centres.

UNICEF also supported 58,579 Tawjihi students (32,551 girls and 26,028 boys) in the Gaza Strip to return to learning and prepare for their Tawjihi exams through digital learning provided by MoEHE and 550 volunteer MoEHE teachers from the West Bank and East Jerusalem. These students are receiving online learning support and preparations from MoEHE to sit for the next Tawjihi exams planned for June 2025, having missed their exams in the 2023/2024 school year.

UNICEF distributed 10,000 individual hygiene care kits to 10,000 females through implementing partners and women-led organizations to prevent absenteeism during their menstrual periods. Gender-disaggregated WASH facilities were also provided in the learning spaces.

To sustain operations, UNICEF provided incentive payments to 3,000 education staff, ensuring their motivation and supporting families amidst food insecurity. UNICEF trained 623 teaching staff (including 410 females) in self-care and child protection in both Gaza and the West Bank, and bridged schools with the child protection sector through the employment of 120 community social workers in Gaza and referral mechanisms.

In the West Bank, including East Jerusalem, UNICEF facilitated inclusive and safe learning opportunities for 53,780 children (including 28,230 girls and 25,550 boys) through summer camp activities, integrating educational and recreational components to support well-being and mitigate learning loss. Through partners, UNICEF supported 4,533 children (2,215 girls and 2,318 boys) with remedial education in after-school settings in schools and partner community-based organizations. Additionally, 3,479 children (1,911 girls and 1,568 boys) received education-related Mental Health and Psychosocial Support (MHPSS) and recreational activities. Partners, Community-Based Organisations (CBOs), and relevant education staff received training on the provision of remedial education (98 women and 19 men), while 99 teachers and facilitators (94 women and 5 men) received training on psychosocial first aid and MHPSS. As many as 96 children (64 girls and 32 boys) are receiving in-depth MHPSS pathways, while child protection and referral mechanisms remain operational.

Contributions to MoEHE's emergency response plan and the Gaza Rapid Damage and Needs Assessment (RDNA) ensured evidence-based strategies for rebuilding infrastructure and addressing learning loss. UNICEF's advocacy also led to significant progress in reviewing the inclusive education policy, with a 2025 review planned to ensure quality education for children with disabilities.

UNICEF's initiatives in youth skilling and engagement played an important role in fostering peace and development. By facilitating Palestine's participation in the 2024 Regional High-Level Meeting on Young People's Learning, Skilling, and Transition to Decent Work, UNICEF helped bridge gaps between education, employment, and stability. The secured government commitments to enhance coordination mechanisms for youth empowerment and skills development, particularly for girls and young women, underscore a holistic approach to building sustainable peace through inclusive development.

Social Protection

The ongoing war in Gaza throughout 2024 severely disrupted the socio-economic fabric, pushing national social protection systems to the brink. Food insecurity, malnutrition, and near-universal poverty prevailed in Gaza, while socio-economic conditions worsened in the West Bank amid increased violence. The Palestinian Authority struggled to fund programmes like the National Cash Transfer Programme (NCTP) due to a fiscal crisis driven by reduced clearance revenues, declining international budget support, and stagnant economic activity.

Despite extreme limitations and security risks, the commercial sector played an indispensable role (ranging from 4.5 to 75 per cent) in ensuring the resilience of food systems and the availability of basic goods for vulnerable families and children in Gaza. This enabled UNICEF to exponentially scale up its cash response, reaching one million unique beneficiaries, including 502,495 children, 25,134 persons with disability, and 171,987 families (966,399 people, 465,753 children, and 18,150 people with disabilities in 2024). UNICEF became the largest provider of cash transfers during the Gaza crisis, making it the largest-ever UNICEF cash response by population coverage. On average, 120,000 people received monthly cash transfers, accounting for 60 to 70 per cent of all humanitarian cash transfers in Gaza.

UNICEF's strategy prioritised vulnerable groups, including 23,203 families with pregnant or breastfeeding women, 5,724 families with disabled members, and 50,717 female-headed households. The programme also addressed over 2,000 families at risk of sexual exploitation and abuse and those caring for children without parental support.

Cash interventions supported essential services, enabling 10,000 frontline volunteers to provide water, sanitation, and hygiene (WASH), health, education, nutrition, and immunisation services to vulnerable communities in Gaza and the West Bank. This included significant contributions to the Gaza polio campaign and solid waste management efforts.

UNICEF's innovative solutions, such as digital e-wallets, enabled uninterrupted cash programming despite a severe cash liquidity crisis. Since April 2024, unprecedented cash liquidity issues have been reported in Gaza. The circulation of cash through banking systems has almost stopped, making cash a hard-to-access commodity, with fees being charged for cash out. Against this backdrop, UNICEF addressed the liquidity crisis by expanding the partnership with the Palestinian Monetary Authority, financial service providers, and the chambers of commerce accelerating the promotion of digital wallets. This created conditions for cash transfers at scale and the formation of a digital ecosystem in Gaza. As early as May 2024, UNICEF made its first humanitarian cash payment through digital e-wallets. Beneficiaries can now process transfers to other users through a USSD platform that does not require a smartphone. Despite the novelty of this modality, by the end of 2024, almost 50 per cent of respondents used digital transfers to other e-wallets, with 20 per cent using them exclusively.

A robust grievance redress mechanism (GRM) resolved or redirected 75 per cent of the 105,000 cases handled between October 2023 and October 2024, ensuring accountability and responsiveness. UNICEF used innovative tools like the RapidPro system and in-person observations to generate evidence and regularly monitor market functionality. In 2024, UNICEF conducted 13 rounds of post-distribution monitoring and collected evidence from over 16,000 respondents, informing its programming and advocacy.

Accountability to Affected Populations (AAP) and Prevention of Sexual Exploitation and Abuse (PSEA)



At the indicated locations, UNICEF provided more than 57,500 awareness sessions on safeguarding messages and safe reporting channels to over 486,700 internally displaced persons (IDPs) in 2024.

In 2024, the ongoing emergency in the State of Palestine caused significant disruptions to essential services such as electricity, internet access, and communication systems. This exacerbated the need for communities to access essential information and provide feedback and complaints regarding services and aid. UNICEF has worked on operationalizing accountability frameworks through community engagement, transparent information sharing, and feedback mechanisms to ensure that communities have direct, safe, and confidential channels for any complaints or feedback regarding UNICEF and partners' interventions in the Gaza Strip, West Bank, and East Jerusalem. This included a joint hotline and email channel. In 2024, UNICEF also launched a joint interagency chatbot, including a path for Polio and the Humanitarian Cash Transfer programme, with frequently asked questions and answers to enhance information provision. This highlights joint interagency collaboration and partnership efforts to ensure effective interagency coordination for the benefit of the communities.

UNICEF received 145,651 pieces of feedback, from 129,350 people in 2024. The governorates from which communities were calling reflected population movements. For instance, almost half of the callers were from Rafah at the beginning of the year; by June, this number was three per cent. Each month, the majority of callers were male. By December 2024, 86 per cent of calls were being resolved on the spot by the hotline. The feedback and complaints that come in through the feedback mechanism are used to inform programming and for course correction. This helps guide real-time adjustments and improvements of programmes including the cash transfer programme and emergency kit distribution, enhancing program outcomes and better meeting the needs of the affected population.

To ensure community participation in programme decisions, the Kits that Fit approach was integrated into emergency kit procurement processes. UNICEF conducted four focus group discussions with adolescent girls, revealing high satisfaction with the care and protection kits but a need for more hygiene items, better water and sanitation access, and greater involvement in decision-making. This feedback informed future kit distributions. A pre-consultation session with women-led organizations directly informed the list of items to be included in a baby box procured by the health section.

Accountability mechanisms were also established for both rounds of

UNICEF's polio vaccination campaign. Clear communication and an effective Complaint and Feedback Mechanism (CFM) allowed affected populations to ask questions, voice concerns, and access timely information on multiple aspects of the campaign. Key messages were disseminated through materials including posters, flyers, and social media messages, reinforcing the importance of participation. 41 complaints and feedback were received regarding the vaccination centres, including from individuals with disabilities. A total of 16,602 people heard a pre-recorded message during the hotline waiting line regarding the polio campaign.

Due to the ongoing crisis, communities' dependency on humanitarian aid has dramatically increased, severely impacting all the drivers of Sexual Exploitation and Abuse (SEA). The SEA system acts as a resource hub for capacity building and peer-to-peer knowledge sharing, advocating for survivor-centered practices in assistance and investigations across humanitarian efforts. UNICEF and the PSEA Network integrated SEA prevention and response in their emergency response. They expanded their helpline services for free, independent, confidential support, including MHPSS, offering referrals, endorsing 132 signatories and forming a community of practice, complementing other reporting channels and strengthening inter-agency feedback channels, including for food and cash. Through social media and mobile messaging for cash assistance recipients, the helpline reached 1.2 million individuals in Gaza and the West Bank. A PSEA Task Force was established to improve coordination, monitoring, and response to SEA issues across operational areas. UNICEF distributed 2,000 dignity kits to women and girls in Gaza and developed a cash-for-protection scheme, referring 3,581 cases in 2024. The SANAD Network¹⁷ was launched and offered community members information on safe SEA reporting channels, emergency services, child protection, and support for SEA victims. The campaign reached 1.6 million followers monthly, 70 per cent being women and the most active followers aged 20-45 years. UNICEF supported 45 grassroots initiatives in Gaza, reaching 100,000 children and their caretakers with [educational materials](#). To reinforce grassroots presence, UNICEF conducted 57,559 awareness sessions on safeguarding and safe reporting channels for 486,766 IDPs in Gaza. 20 Community-led Initiatives (CLI) supported community-driven responses to SEA and SBC, adolescents and youth-led initiatives addressing community needs while promoting safeguarding practices, reaching around 3,500 children and their caregivers. UNICEF also reviewed the Palestinian National Referral System to ensure a survivor-centred response. The PSEA Network published a [Risk Assessment Report](#) to identify and mitigate safeguarding risks, while joint risk assessments improved policies and procedures within partner organizations. The network, in collaboration with the AAP and Cash Technical Working Group, developed a risk register for the Cash User Journey, while UNICEF distributed cash awareness materials.¹⁸

Social and Behaviour Change (SBC)

In 2024, UNICEF developed a comprehensive Risk Communication and Community Engagement (RCCE) strategy for the Polio Emergency Vaccination Campaign. This involved creating and distributing contextualised polio-related communication materials through mass media, digital media, and face-to-face interactions. The campaign took place over two rounds, from early September to early November 2024. The campaign also included Vitamin A supplementation and surveillance for suspected cases of Acute Flaccid Paralysis (AFP) through social mobilisation activities.

Over 750 social mobilisers were trained and deployed to engage with communities, encouraging families to vaccinate their children and receive Vitamin A supplementation, while addressing any concerns. Social mobilisers conducted household visits, community meetings, and dialogues, reaching over a million adults, mostly

parents and caregivers. They also collaborated with community influencers, religious leaders, and local committees to ensure widespread awareness and demand for services. Their efforts were supported by Education, Information, and Communication (EIC) materials, including over 200,000 brochures, 4,000 posters, and 450 banners distributed in each round.

SMS messages about each phase of the vaccination campaign were broadcast, and Telecom providers reached out to all 1.2 million active mobile users as part of their social responsibility efforts. UNICEF also created new engagement channels, such as RapidPro-based chatbots on Telegram, WhatsApp, and SMS. Social media posts, amplified by local influencers, reached over 120,000 people on Instagram and more than 150,000 on Facebook, increasing awareness and countering disinformation. On Telegram, posts about vaccination locations reached 100,000 people per post. Additionally, radio messages were broadcast 600 times, explaining the risks of polio and emphasising the importance of vaccination, reaching 500,000 people across the Gaza Strip.

In the first half of 2024, community engagement activities aimed at improving living conditions for IDPs through promoting positive nutrition and WASH behaviours. 400 volunteers were trained in community engagement and the development of community action plans. This initiative led to the co-creation of twenty localised community action plans, implemented across twenty makeshift sites, identifying 105 challenges and solutions, benefiting 50,000 IDPs. For awareness promotion through mass media, twelve awareness messages were broadcast on FM radio, addressing topics such as WASH, health and nutrition, PSEA, social cohesion, child protection, humanitarian aid, MHPSS, and UXO and explosive remnants of war (ERW). These messages were broadcast daily for two months, reaching 500,000 people. Since the beginning of the hostilities, UNICEF has also been conducting social listening to summarise trending social media content in English and Arabic related to the situation in the State of Palestine, focusing on children, humanitarian issues, and perceptions of international organisations.

Supply and Logistics

Since 7 October 2023, UNICEF has delivered 1,700 trucks of supplies valued at over US\$ 70 million to the Gaza Strip, despite the challenging situation. Overall, compared to the incoming number of trucks before the war, this is a significant decline since previously over 500 trucks (both commercial and humanitarian) entered Gaza daily through the Kerem Shalom crossing. UNICEF humanitarian supplies included vaccines, hygiene kits, RUCF, RUTF, squatting plates, stationery kits, amoxicillin, obstetric kits, Acute Watery Diarrhoea (AWD) kits, HEB, cleaning materials, sanitary pads, bottled water, chemicals for water treatment, generators, sludge pumps, winter clothes, and tarpaulins.

In 2024, UNICEF's State of Palestine country office procured supplies and services worth US\$ 118.2 million, compared to US\$ 36.7 million in 2023. This included US\$ 3 million through Procurement Services, US\$ 170,000 through the Global Alliance for Vaccines and Immunisation (GAVI), and over US\$ 88 million for emergency response to the ongoing war in Gaza. The office maintained an inventory valued at US\$ 21 million across 17 warehouse locations in Egypt, Jordan, the West Bank, Gaza, and Ashdod, Israel.

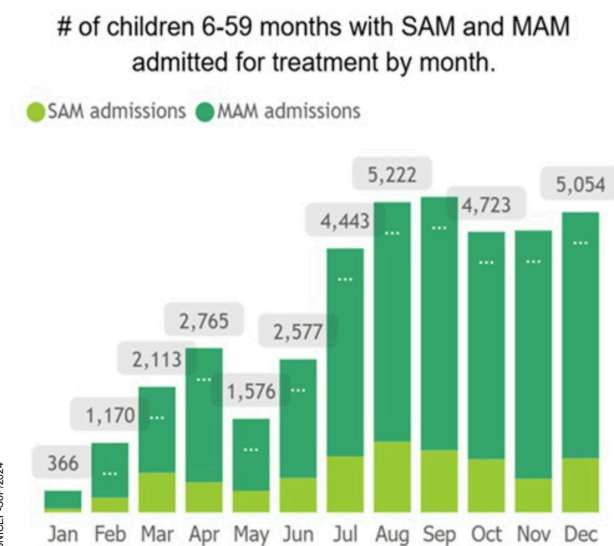
The operational challenges in Gaza are multifaceted. The suspension of commercial trucks has caused severe shortages of basic supplies, raising security concerns. Organized armed looting has intensified, resulting in significant losses of humanitarian cargo at the Kerem Shalom crossing with daily losses of 10 to 35 per cent of humanitarian cargo. There's also been an uncontrolled spike in prices for essential goods and raw materials, including rental

premises. Access limitations and restricted movement hinder supply monitoring and feedback. Israeli government restrictions on Gaza's imports further complicate matters, while poor road conditions from recent shelling made some areas inaccessible for trucks. Limited entry points, mainly Kerem Shalom and Zikim, operating at reduced capacities, worsen the situation.

Preparedness

UNICEF, given the volatile context within Palestine and in the wider MENA region, has significantly scaled-up its **preparedness efforts** throughout the year, to ensure a timely response both in-country and across borders. Putting **preparedness and contingency measures** in place before the crisis escalates is essential to UNICEF's mission and mandate as it enables delivery of timely, effective and life-saving humanitarian assistance and protection of children's rights. In this vein, worst case scenarios have been prepared for the West Bank, to mitigate the associated risks for children and to ensure adequate business continuity to deliver on UNICEF's mandate, in a potentially high-threat and severely constrained operational environment.

HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY



In 2024, 40,065 children were admitted for severe (SAM) or moderate acute malnutrition (MAM) treatment. Note: More screenings (of the total of 670,334) could occur in the year's second half.

UNICEF is an active member of the UN Country Team and the Humanitarian Country Team and closely coordinates with other organizations and partners, including women-led organisations. Note that where relevant, UNICEF, as Cluster Lead Agency, is responsible for information management of the Cluster and for sharing overall results achieved by the Cluster collectively.

The UNICEF-led **WASH Cluster** in the Gaza Strip and the West Bank has made significant progress in coordination, advocacy, and service delivery throughout the State of Palestine in 2024. With seventy-three partners across Gaza and the West Bank, the cluster improved governance through updated membership criteria and the reactivation of the Strategic Advisory Group. The cluster provided a proactive and responsive platform for national and sub-national coordination, holding over seventy-three meetings, six technical working groups¹⁹, and two task forces²⁰ to address emerging needs and operational priorities.

Key achievements include the development of critical strategic inter-agency plans such as the [West Bank Emergency Preparedness and Response Plan for 2025](#), the [Gaza Winterization Plan](#), and the [Gaza North Response Plan](#). The cluster also contributed to the Palestinian Water Authority's Early Recovery Action Plan and the

United Nations/World Bank Rapid Disaster Needs Assessment. In Gaza, significant progress was made with the reactivation and rehabilitation of Mekorot water connection points and transmission lines, provision of bulk chlorine, and upscaling of solid waste management. The rehabilitation and reactivation of the electrical feeder line to the South Gaza desalination plant, provision of standard WASH activities such as water trucking, and distribution of hygiene kits were also notable achievements. The Operation Cell, an innovative weekly coordination mechanism involving key service providers like the Palestinian Water Authority, Coastal Municipalities Water Utility, United Nations International Children's Emergency Fund (UNICEF), and other key WASH actors, played a pivotal role in managing energy and water priorities for the Gaza response.

In the West Bank, the cluster supported timely responses to multiple militarized operations by conducting over twelve needs and damage assessments, mobilizing partners, and developing tailored response plans. The rollout of the 2024 WASH/Community Vulnerability Mapping Index for over eight hundred communities has enhanced the ability to prioritise interventions. Advocacy efforts for Gaza and the West Bank included six public statements and over ten private briefing papers, focusing on supply chain challenges for hygiene items, the entry of dual-use materials into Gaza, and private-sector engagement. Donor briefings were organized regularly and cross-sectoral collaborations²¹ were pursued.

Challenges persist, including heavy restrictions and limitations on the entry of supplies into Gaza, fluctuating water supplies, limited access to affected areas, and resource constraints.

UNICEF continues to lead the **Nutrition Cluster** in the Gaza Strip and the West Bank, coordinating 22 operational partners in Gaza and four technical working groups. Notably, the Nutrition Cluster expanded its activities and number of partners in the onset of the escalation of hostilities to answer the newly observed prevalence of acute malnutrition, with a total of 22 partners, including 14 international NGOs, three national NGOs, and four UN agencies providing services in Gaza, by the end of 2024. Since January, cluster members in Gaza have made significant efforts to implement a comprehensive emergency nutrition programme, targeting the prevention, early detection, and treatment of acute malnutrition in a challenging context.

Through technical working groups, nutrition partners provided on-site and remote technical support, including deploying surge capacities to establish the programme. They developed standard operating procedures on Infant and Young Child Feeding (IYCF) and initiated innovative programmes to address the decrease in dietary diversity for children. The Community-based Management of Acute Malnutrition (CMAM) working group developed simplified protocols and interim technical guidance and training packages based on new global guidelines.

The comprehensive efforts²² of the Nutrition Cluster have helped limit the deterioration of children's nutrition status despite the hostile environment, where access to food, water, and basic health services has been compromised. Ongoing conflict and displacement have impacted families' ability to care for their children. Survey results indicate a critical situation regarding dietary diversity for children and pregnant and breastfeeding women, with long-term impacts on their well-being. Efforts to provide diversified feeding, including adequate access to safe drinking water and water for hygiene purposes, must continue from an intersectoral perspective.

In the West Bank, the cluster revitalised the nutrition thematic group in September 2024, focusing on preparedness. The cluster supports the MOH to enhance the nutrition information system and integrate nutrition into the minimum package of services in mobile clinics in Area C.

The **Education Cluster**, co-led by UNICEF, continues to seek alternatives to provide learning opportunities for war-affected children. In 2024, the Cluster implemented a phased response prioritising the provision of MHPSS and structured recreational activities along with Social and Emotional Learning (SEL) to support children's recovery from war trauma, covering a significant portion of the flash appeal targets. Additionally, 424 TLSs were established across the Gaza Strip, enabling 105,000 learners (16 per cent of the total school-age population) to access education. Community-led initiatives also grew, with over 650 mapped by the Cluster, providing opportunities to many children despite resource constraints.

However, continued attacks on education created unprecedented fear among teachers, parents, and children, especially in the last quarter of the year, with numerous incidents recorded. The lack of spaces in schools-turned-shelters required additional resources to establish learning areas.²³ Limited TLS hindered enrolment and regular attendance during winter due to harsh weather conditions and a lack of essential clothing for most children.

In the West Bank, education is hindered by systemic barriers, military operations, and settler violence. Over 782,000 students faced restricted access due to checkpoints, harassment, and home demolitions. Frequent violence against students and schools led to reduced attendance. Marginalised groups, including girls and children with disabilities, faced heightened exclusion due to unsafe commutes, lack of infrastructure, and inadequate support systems. Despite these challenges, Cluster members supported over 85 per cent of targeted learners with necessary supplies and covered half of the MHPSS targets. However, only 30 per cent of planned schools were rehabilitated. Restrictions on in-person classes and inadequate support for remedial and catch-up programmes resulted in many children missing significant learning opportunities.

UNICEF continued to lead the **Child Protection AoR** in the West Bank and the Gaza Strip, coordinating emergency responses across the Gaza Strip and the West Bank with twenty-five partners in Gaza and seventeen in the West Bank. The sector reached 1,216,450 children (53 per cent girls), 255,698 caregivers in Gaza Strip and 51,087 children (52 per cent girls), 32,389 caregivers in the West Bank with critical CP services. Throughout 2024, regular coordination meetings at national and sub-national levels provided a platform for updates and best practices in a complex environment. The CP AoR developed online service mappings and emergency referral pathways for both regions to support service delivery and avoid duplication.

To address emerging trends and provide technical support, five task forces and working groups are active within the CP AoR.²⁴ Additionally, five technical guidance documents and Standard Operating Procedures were developed to support partners and build capacity. Two case management trend analyses were produced to help partners better understand emerging needs and plan accordingly. To monitor and evaluate performance, bi-weekly 5Ws reporting was conducted throughout 2024, and dashboards were created to track response indicators and activities.²⁵

In collaboration with the Protection Cluster, the CP AoR contributed to two Protection Analysis Updates for Gaza and two for the West Bank, integrating key child protection concerns into overall protection risks. Advocacy efforts included developing and disseminating notes on UASC and family reunification, and publishing joint statements with the Protection Cluster, such as on the impact of the Rafah ground offensive. Consistent advocacy efforts were made to facilitate the entry of child protection supplies, including psychosocial support kits, winter clothes, tents, and assistive devices.

UNICEF also participates in the **Gender-Based Violence Area of Responsibility (GBV AoR)** and the **Legal Task Force**. The CP AoR and the GBV AoR have jointly established a Prevention and Care for Child Survivors Task Force, of which UNICEF is a member. UNICEF also takes part in the EORE / Conflict Preparedness and Protection (CPP) Working Group under the Mine Action (MA) AoR. In addition, an EORE-CPP Technical Working Group (TWG) dedicated to the West Bank has now been established jointly by the CP AoR and MA AoR, chaired by UNICEF, in response to the emerging needs.

UNICEF continues to actively participate in the Health Cluster, including through technical working groups, mainly the Sexual Reproductive Health Working Group, the Health Services Delivery Group, the Rehabilitation Working Group, and the Inter-Cluster MHPSS Technical Working Group.

UNICEF co-leads the RCCE technical working group jointly with WHO and OCHA. UNICEF also supports the Inter-Agency Network for the PSEA and participates in the AAP Working Group coordinated by OCHA. UNICEF also actively participates in the regional and national Gender in Humanitarian Action (GIHA) Working Group, coordinated by UN Women and OCHA, and contributes to gender equality programming and preparedness and response. UNICEF continues to engage in key recovery activities, including the Rapid Damage Needs Assessment.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA



Saja and her six-months-old daughter Sham were seen at a UNICEF-supported paediatric clinic in Deir al-Balah. There, Dr. Hadeel measured Sham's middle-upper-arm-circumference (MUAC) as part of her nutrition screening. Saja says that she has had trouble breastfeeding Sham because of her own poor nutrition and the trauma of war.

- [A moment of joy amid despair as a family in Gaza is brought back together.](#)

- [Sila, a newborn baby from #Gaza, died from the freezing cold in a tent.](#)

- [Thousands of children in #Gaza are suffering from acute malnutrition.](#)

- [Hospitals in Gaza are overwhelmed, with limited resources and lives hanging by a thread.](#)

- [Overcrowding and dire hygiene conditions in the #GazaStrip are causing diseases like chickenpox...](#)

- [Rain and cold temperatures in Gaza are making living conditions even worse for children.](#)

- [On her birthday, Qamar from Gaza lost her leg to war. Today, as she turns 7, her wish is simple, to](#)

- [Children in the West Bank live in constant fear and grief amid escalating violence...](#)

- [When I hear the sound of warplanes, I get very afraid and run to my mother." says Wahid \(7 years\).](#)

- [Countless displacement orders have pushed families in Gaza to the low-lying Al Mawasi area...](#)

- [UNICEF with partners completed the second round of the polio vaccination campaign...](#)

- [Our colleague Fairouz stayed in the north of the Gaza Strip despite the bombardment and destruction.](#)

- [Learn more about UNICEF supported STEM project in the most vulnerable areas in the West Bank](#)

- [In Gaza, more than 1,000 children are reported to have suffered a limb loss because of the bombing.](#)

- [In Jenin, in the West Bank, children in schools are deeply impacted by militarized operations.](#)

- [Since October 2023, 659,000 children couldn't attend any school in Gaza.](#)

- [In the Gaza Strip, UNICEF created temporary learning spaces helping thousands of displaced children.](#)

- [Hygiene and sanitation are major issues in the Gaza Strip. Children and families are exposed to...](#)

- [Nour believed she would never see her daughters again. UNICEF was able to finally reunite them.](#)

- [Children and their families urgently need cash assistance to access essential goods and services.](#)

HAC APPEALS AND SITREPS

- State of Palestine Appeals
<https://www.unicef.org/appeals/state-of-palestine>
- State of Palestine Situation Reports
<https://www.unicef.org/appeals/state-of-palestine/situation-reports>
- All Humanitarian Action for Children Appeals
<https://www.unicef.org/appeals>
- All Situation Reports
<https://www.unicef.org/appeals/situation-reports>

**NEXT SITREP: JANUARY 2025
SITUATION REPORT (SCHEDULED FOR
MID-FEBRUARY 2025)**

ANNEX A - PROGRAMME RESULTS

Consolidated Programme Results

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*	2024 targets	Total results	Progress*
Nutrition								
Children 6-59 months receiving micronutrient powder	Total	310,922	155,460	71,953	▲ 46%	155,460	71,953	▲ 46%
	Girls	-	-	36,017	-	-	36,017	-
	Boys	-	-	35,936	-	-	35,936	-
Children 6-59 months receiving vitamin A supplementation	Total	706,270	395,377	172,924	▲ 44%	706,270	172,924	▲ 24%
	Girls	-	-	84,528	-	-	84,528	-
	Boys	-	-	88,396	-	-	88,396	-
Pregnant women receiving preventative iron folate or multiple micronutrients supplementation and related services	Total	160,279	160,279	48,616	▲ 30%	160,279	48,616	▲ 30%
Children 6-59 months with wasting admitted for treatment ²⁶	Total	67,947	55,650 ²⁷	36,254	▲ 65%	55,650	39,341	▲ 71%
	Girls	-	26,106	20,993	▲ 80%	26,106	22,925	▲ 88%
	Boys	-	29,544	15,261	▲ 52%	29,544	16,416	▲ 56%
Children 6-59 months with severe wasting admitted for treatment	Total	-	12,487	6,872	▲ 55%	12,487	7,675	▲ 61%
	Girls	-	5,542	4,058	▲ 73%	5,542	4,530	▲ 82%
	Boys	-	6,945	2,814	▲ 41%	6,945	3,145	▲ 45%
Children 6-59 months with moderate wasting admitted for treatment	Total	-	43,163	29,382	▲ 68%	43,163	31,666	▲ 73%
	Girls	-	20,564	16,935	▲ 82%	20,564	18,395	▲ 89%
	Boys	-	22,599	12,447	▲ 55%	22,599	13,271	▲ 59%
Health (including public health emergencies)								
Children 0-11 months receiving pentavalent 3 vaccine	Total	82,637	82,637	51,200	▲ 62%	-	-	-
Children 0-11 months receiving OPV	Total	82,637	82,637	59,189	▲ 72%	-	-	-
People are supported through UNICEF-delivered medical supplies	Total	3 million	1.5 million	646,300	▲ 42%	-	-	-
	Girls	-	-	140,893	-	-	-	-
	Boys	-	-	138,308	-	-	-	-

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*	2024 targets	Total results	Progress*
	Women	-	-	166,745	-	-	-	-
	Men	-	-	200,353	-	-	-	-
Children under 10 years vaccinated through Polio vaccination campaign in Gaza	Total	640,000	640,000	559,161	▲ 87%	-	-	-
	Girls	-	-	272,062	-	-	-	-
	Boys	-	-	287,099	-	-	-	-
% of unicef supported facilities have adequate cohort staff trained for providing basic service	Total	100	100	97 ²⁸	▲ 97%	-	-	-
Water, sanitation and hygiene								
People accessing a sufficient quantity and quality of water for drinking and domestic needs	Total	3 million	2.1 million	2.6 million ^{29,30}	▲ 125%	3 million	2.3 million	▲ 76%
People reached with critical WASH supplies	Total	-	875,000 ³¹	650,897 ^{32,33}	▲ 74%	2.6 million	1.6 million	▲ 60%
People benefitting from improved access to sanitation and hygiene services	Total	-	1.2 million	994,501 ^{34,35}	▲ 86%	3 million	1.9 million	▲ 61%
Child protection, GBViE and PSEA								
Children, adolescents and caregivers accessing community-based mental health and psychosocial support	Total	1.4 million	291,000 ³⁶	395,485	▲ 136%	980,000	582,394	▲ 59%
	Girls	-	-	134,727	-	-	244,225	-
	Boys	-	-	115,799	-	-	208,056	-
	Women	-	-	84,084	-	-	135,723	-
	Men	-	-	60,875	-	-	84,887	-
People with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations	Total	2.3 million	280,419	654,415 ³⁷	▲ 233%	-	-	-
	Girls	-	-	63,691	-	-	-	-
	Boys	-	-	66,254	-	-	-	-
	Women	-	-	317,419	-	-	-	-
	Men	-	-	207,051	-	-	-	-
Children provided with landmine or other explosive weapons prevention and/or survivor assistance interventions	Total	2 million	480,000	398,644	▲ 83%	-	-	-
	Girls	-	-	214,742	-	-	-	-

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*	2024 targets	Total results	Progress*
	Boys	-	-	183,902	-	-	-	-
Children and caregivers reached by MHPSS messages and awareness activities on child protection risks	Total	1.5 million	1.1 million	820,000	▲ 78%	-	-	-
Education								
Children receiving individual learning materials ³⁸	Total	770,525	220,000 ³⁹	145,472 ^{40,41}	▲ 66%	275,000	183,175	▲ 67%
	Girls	383,816	109,604	71,220	▲ 65%	137,005	102,100	▲ 75%
	Boys	386,649	110,396	74,252	▲ 67%	137,995	81,074	▲ 59%
Affected school children are provided with gender responsive recreational activities and materials for their wellbeing	Total	770,525	85,000 ⁴²	110,331 ^{43,44}	▲ 130%	770,525	412,439	▲ 54%
	Girls	383,816	42,347	56,651	▲ 134%	383,816	224,444	▲ 58%
	Boys	386,649	42,653	53,680	▲ 126%	386,649	187,995	▲ 49%
Children accessing formal or non-formal education, including early learning	Total	770,525	60,000	143,784 ^{45,46}	▲ 240%	127,000	113,838	▲ 90%
	Girls	383,816	29,892	69,504	▲ 233%	72,390	61,717	▲ 85%
	Boys	386,649	30,108	74,280	▲ 247%	54,610	52,121	▲ 95%
Social protection								
People reached with UNICEF-funded humanitarian cash transfers	Total	1.8 million	530,000	966,399	▲ 182%	-	-	-
Households with children with disabilities reached by disability cash top-ups	Total	-	10,500	5,724 ⁴⁷	▲ 55%	-	-	-
Cross-sectoral (HCT, SBC, RCCE and AAP)								
People sharing their concerns and asking questions through established feedback mechanisms	Total	2.3 million	502,800	129,350	▲ 26%	-	-	-
People reached through messaging on prevention and access to services	Total	2 million	1 million	1.2 million ⁴⁸	▲ 120%	-	-	-

*Progress in the reporting period 1 January to 31 December 2024

ANNEX B — FUNDING STATUS

Consolidated funding by sector

Sector	Requirements	Funding available		Funding gap	
		Humanitarian resources received in 2024	Resources available from 2023 (carry over)	Funding gap (US\$)	Funding gap (%)
Health	115,781,157	37,040,348	10,262,506	68,478,302	59%
Nutrition ⁴⁹	140,467,966	34,173,199	13,881,882	92,412,884	66%
Child protection ⁵⁰	28,802,361	32,658,011	9,087,852	-	0%
Education ⁵¹	38,338,704	37,257,200	3,803,149	-	0%
WASH ⁵²	132,383,773	116,894,950	16,438,359	-	0%
Social protection ⁵³	58,489,439	71,253,413	11,802,610	-	0%
Cross-sectoral ⁵⁴	6,650,000	5,141,067	1,147,139	361,793	5%
Cluster coordination ⁵⁵	5,217,233	3,935,173	1,272,769	9,290	0%
Total	526,130,633	338,353,364	67,696,270	120,080,997	23%

Funding available - funding available in the current appeal year to respond in line with the current HAC appeal.

Humanitarian resources - humanitarian funding commitments received from donors in the current appeal year.

Resources available from 2023 (carry over) - funding received in the previous appeal year that is available to respond in line with the current HAC appeal

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ENDNOTES

1. The Occupied Palestinian Territory (OPT) encompasses the West Bank, East Jerusalem, and the Gaza Strip. References to the State of Palestine, or to specific geographic areas of the OPT within this situation report, do not imply any alternative recognition or determination as to the status of the OPT and its integral parts.
2. The total number of children in need is estimated based on the demographic ratio of children, which is 46.9 per cent (1,078,700 children) in the Gaza Strip and 47.6 per cent (476,000 children) in the West Bank (source: Palestinian Central Bureau of Statistics (PCBS) and OCHA), applied to the 2.3 million people in need in Gaza and 1 million people in need in the West Bank, respectively. 49 per cent are girls.
3. Inter-Agency Flash Appeal for the Occupied Palestinian Territories, April-December 2024: <https://www.ochaopt.org/content/flash-appeal-occupied-palestinian-territory-2024>.
4. UNRWA estimate, 31 July 2024.
5. The number of 534 school buildings that sustained damage amounts to 94.7 per cent of all 564 school buildings in the Gaza Strip. Their level of damage varies between the damage classifications "Direct hit", "Damaged" and "Likely damaged". Not included in this figure is the classification "Possible damage" (12 school buildings). The status of the remaining 18 school buildings in the Gaza Strip is currently not known. Education Cluster, 1 October 2024, <https://reliefweb.int/node/4098214>.
6. Inter-Agency Flash Appeal for the Occupied Palestinian Territories, April-December 2024: <https://www.ochaopt.org/content/flash-appeal-occupied-palestinian-territory-2024>. The previous Inter-Agency Flash Appeal was issued on 6 November covering October to December 2023, and was thereafter extended until the end of March 2024. The funding requirement of US\$2.8 billion covers only the months from April through December 2024. The requirement for the months of January to March 2024 amounts to US\$0.6 billion, resulting into a total funding requirement of \$3.4 billion for the entire year 2024.
7. The numbers stated here refer to the people who are targeted to receive humanitarian aid. These numbers differ from the numbers of people in need, which amount to 3.3 million across the occupied Palestinian territories (Gaza Strip: the entire population of 2.3 million, West Bank: 1 million). "People in need" refers to those who are affected by the crisis and require humanitarian assistance. "People targeted" refers to the specific number of people that is planned to realistically be reached with the given capacity and expected resources.
8. The latest UNICEF SoP Humanitarian Action for Children (HAC) appeal for 2024 is Revision 3 from June 2024, <https://www.unicef.org/appeals/state-of-palestine#download>.
9. UNICEF has received US\$ 8 million from the internal Emergency Programme Fund and exceptionally US\$ 10 million from an internal capital loan both of which will need to be replenished – these loans are not reflected in the funding received.
10. While data on individuals injured in the Gaza Strip is reported regularly, since April 2024, age-specific data has not been available. For planning purposes, UNICEF estimated that at least 23,000 children have sustained injuries due to the ongoing conflict. Among these, approximately 25 per cent (5,700 children) require significant rehabilitation, as their injuries are likely to result in long-term disabilities. The estimates of conflict-related injuries are current as of 15 October 2024, and the figures regarding those needing substantial rehabilitation come from the Trauma Working Group. This may not encompass children who have developed hearing or visual impairments as a result of the conflict.
11. It is reported that at least 10,000 people, among them children, are missing or under the rubble. Source: Protection Analysis Update, Occupied Palestinian Territory (oPt): Gaza, December 2024, https://globalprotectioncluster.org/sites/default/files/2025-01/pau25_protection_analysis_update_gaza_december2024_final85.pdf.
12. Gaza war: Expected socioeconomic impacts on the State of Palestine, ESCWA/UNDP policy brief, 2024, <https://www.undp.org/sites/g/files/zskgke326/files/2024-10/gaza-war-expected-socioeconomic-impacts-palestine-policy-brief-english-1.pdf>.
13. This is additional to the routine Nutrition programme/cluster Vitamin A supplementation.
14. Level 3 activities, known as Specialist Safeguarding, are intended for individuals with designated responsibilities for safeguarding within their organization. These activities involve managing complex child protection cases, which often require multi-agency collaboration and detailed case management. Advanced risk assessment skills are developed to identify and mitigate potential risks to children. Furthermore, individuals at this level provide training and supervision to other staff members on safeguarding practices, ensuring that the entire organization adheres to best practices. They also play a crucial role in developing and implementing child protection policies and procedures, ensuring a robust safeguarding framework is in place.
15. Level 2 activities, often referred to as Advanced Safeguarding, are designed for individuals who have regular or frequent contact with children. These activities focus on recognizing signs of abuse, including physical, emotional, sexual abuse, and neglect. Participants learn how to appropriately respond when a child discloses abuse, emphasizing the importance of listening skills and maintaining confidentiality. Additionally, they are trained in the procedures for reporting concerns and making referrals to child protection services. Scenario-based training is also a key component, allowing individuals to apply their knowledge in practical situations and better prepare for real-life scenarios.
16. "Hotspot areas" refers to locations affected by high levels of conflict-related violence impacting children's rights and access to services, and which are prioritized for UNICEF-supported programmes.
17. The SANAD Network is a shared public platform where Palestinian civil society organizations, UN agencies and INGOs unite their voices and efforts towards strengthening Protection from Sexual Exploitation and Abuse (PSEA). SANAD engages especially with children, women, youth, and people with disabilities. One activity are Risk Communications and Community Engagement (RCCE) interventions to raise awareness for the prevention of violence. Community members across the West Bank and the Gaza Strip can receive mental health support or submit an official complaint of any physical or verbal abuse perpetrated by an aid worker via WhatsApp +972 59 404 021, via e-mail at optconfidential@un.org, or by calling the free hotline 164 of the partner organisation SAWA. More information about SANAD can be found here online at <https://shabakatsanad.com/>, on Instagram: <https://www.instagram.com/shabakatsanad/>, on Facebook: <https://www.facebook.com/shabakatsanad/>, or on Telegram: <https://t.me/shabakatsanad>. Monthly SANAD newsletters were shared with partners in English and Arabic.
18. The cash awareness material created by UNICEF can be accessed as follows: The CASH Assistance Poster in English is being finalized at the time of this report, while information in Arabic is available here: <https://www.unicef.org/sop/ar/%D8%A7%D9%84%D8%AD%D8%B5%D9%88%D9%84-%D8%A8%D8%B4%D9%83%D9%84-%D8%A2%D9%85%D9%86-%D8%B9%D9%84%D9%89-%D8%A7%D9%84%D9%85%D8%B3%D8%A7%D8%B9%D8%AF%D8%A7%D8%AA-%D8%A7%D9%84%D9%86%D9%82%D8%AF%D9%8A%D8%A9-%D8%A7%D9%84%D8%AA%D9%8A-%D8%AA%D9%82%D8%AF%D9%85%D9%87%D8%A7-%D9%84%D9%83-%D8%A7%D9%84%D9%8A%D9%88%D9%86%D9%8A%D8%B3%D9%81%D9%82%D8%B5%D8%B5>.
19. The six technical working groups are: 1. Water Accessibility TWG, 2. Hygiene Promotion TWG, 3. WASH/IPC TWG, 4. Sanitation TWG 5. Solid Waste Management TWG, 6. Advocacy TWG.
20. The two task forces are: Gaza Solid Waste and West Bank Emergency Preparedness.
21. Cross-sectoral collaborations, such as the Infection Prevention Control Technical Working Group with the Health Cluster and the Solid Waste Task Force with the UNDP, strengthened holistic response efforts. The cluster also facilitated interagency needs and damage assessments and supported satellite tracking of WASH infrastructure damage with the UNOSAT and the World Bank.

22. By December, nutrition services were delivered at 144 supplementary feeding sites, 150 IYCF sites, 115 outpatient sites for managing wasting, and four stabilisation centres for children with severe acute malnutrition requiring hospitalisation. Additionally, 400 mother-to-mother support groups were established. A total of 39,400 children, representing 78 per cent of the cluster target, were admitted for treatment of moderate or severe acute malnutrition. However, recurring displacements, evacuation orders, civil unrest, and looting have disrupted services and led to the loss of supplies, impacting children's treatment and recovery. Nutrition partners had to adapt their programming and restart services in new locations to ensure continued provision. Despite supply challenges, the prevention programme, particularly supplementary feeding, was scaled up to deliver monthly rations to up to 135,000 children aged six to 59 months and 45,000 pregnant and breastfeeding women (PBW) in the last quarter. However, this only covers 40 per cent of children in this age group and less than 30 per cent of PBW. The cluster also established a nutrition information system to monitor malnutrition prevalence when surveys were impossible, scaling up Mid-Upper Arm Circumference (MUAC) screening. Since the beginning of the year, 657,000 screenings have been conducted, with an average of 83,000 children screened monthly since July. Additionally, phone-based data collection on key nutrition drivers, such as dietary diversity, was conducted through inter-sectoral partnerships. This information was consolidated into three nutrition vulnerability and situation analysis reports, informing the nutrition response, and one Integrated Food Security Phase Classification (IPC) acute malnutrition analysis conducted with the food security cluster. Since September, screening of PBW has also been scaled up, with 93,000 screenings conducted and 6,240 women enrolled for acute malnutrition management.
23. Restrictions on the entry of education supplies, such as tents for alternative learning spaces, limited the response scale.
24. The five task forces and working groups are: Child Protection Case Management Task Force, UASC Advisory Group, Prevention and Care for Child Survivors Task Force (joint with Gender-Based Violence AoR) in Gaza, Child Protection Supply and Logistics Task Force in Gaza, and EORE (West Bank) and Child Protection Programme Working Group (joint with Mine Action AoR) in the West Bank.
25. In addition, monthly response snapshots were shared with partners and donors to monitor implementation and identify gaps. Mid-year and third-quarter reports highlighted situation updates, challenges, human impact stories, and best practices.
26. The result indicates the number of children treated for both Moderate acute malnutrition (MAM) and Severe acute malnutrition (SAM). The following SAM and MAM indicators are sub-indicators of the total wasting result.
27. 50,450 children are in the Gaza Strip (over 7,600 with severe wasting) and 5,200 in the West Bank (over 2,400 with severe wasting).
28. 29 out of 30 facilities have been trained.
29. The Gaza result has been adjusted as the calculation for water production and provision was revised. Previously a uniform calculation was applied for all Gaza but the revised one uses parameters per governorate. Also considering fuel provision fluctuation, the aggregation method was changed from taking the maximum number of people reached to the average number of people reached in 2024. This result also includes estimated 623,500 people reached in the West Bank.
30. The figures are the final reach for 2024 in Gaza and West Bank
31. This includes 800,000 people in the Gaza Strip to be reached monthly and 75,000 people in the West Bank.
32. The minus progress is attributed to the alteration of the calculation method for Gaza. Previously adding up number of people based on the quantity of supplies was used. However, considering the current demographic status where most of the population is concentrated in the Middle Area and the South, and mostly the same population is repeatedly receiving the supplies, calculating the average is used as the calculation method by reflecting the reality on the ground.
33. The figures are the final reach for 2024 in Gaza and West Bank
34. The minus progress is attributed to the alteration of the calculation method for Gaza. Previously adding up the estimated number of people that can be supported by the services (latrine, waste water infrastructure repair, cleaning service etc.). However, considering the current demographic status where most of the population is concentrated in the Middle Area and the South, and mostly the same population is repeatedly receiving the supplies, calculating the average is used as the calculation method by reflecting the reality on the ground.
35. The figures are the final reach for 2024 in Gaza and West Bank
36. This target is reduced to represent only in-person programming. See also the indicator on children and caregivers reached by MHPSS messages and awareness activities on child protection risks. The target includes at least 1,000 children with disabilities.
37. As of November 2024, the source of data for the indicator has changed, along with revisions to the calculation methods. Between March and October 2024, we used the data provided by the hotline partner. Starting November onwards, we are using the data on redeemed cash cases from the Social Policy Section for Gaza data, and from SANAD campaign for the West Bank data. This explains the shift in numbers and any discrepancy in the flow of progress reflected.
38. Due to the misalignment between UNICEF and the Cluster's indicator description, previously the cluster result on # of children benefitted from recreational kits had been reported while UNICEF strictly reported the result of learning materials only (e.g. EiE learning kits, stationary kits) under this indicator. As the Cluster now has a separate learning material indicator fully aligned with UNICEF's, previously reported cluster recreational kits result is removed from UNICEF SitReps and retained in OCHA SitReps and Education Cluster dashboard.
39. This target is reduced as the programmatic focus has been widened to include non-formal learning.
40. The result includes 74,373 children reached in the West Bank, which have not been officially published by the cluster.
41. The programme results of UNICEF's education section are currently under review and therefore no change is reported in the HPM table in this SitRep. Consequently, the progress indicators show '0 per cent' until these figures are verified.
42. This target is reduced as the programmatic focus has been widened to include non-formal learning.
43. The result has been re-adjusted after reviewing partners' reporting and also against cluster reporting. The result includes 55,283 children reached in the West Bank.
44. The programme results of UNICEF's education section are currently under review and therefore no change is reported in the HPM table in this SitRep. Consequently, the progress indicators show '0 per cent' until these figures are verified.
45. The result includes 55,283 children reached in the West Bank. As for UNICEF's result being higher than the cluster's, some of UNICEF results have not been fully reported to the cluster, which will be reflected in the next reporting, due to implementing partners' reporting cycle.
46. The programme results of UNICEF's education section are currently under review and therefore no change is reported in the HPM table in this SitRep. Consequently, the progress indicators show '0 per cent' until these figures are verified.
47. The number of unique households was adjusted against the result reported previously through extensive data cleaning process.
48. Estimated 1.2M people were reached with Polio Vaccination Campaign related SMSs with unique phone numbers. There is a possibility that the previously reached 500K people with different promotion messaging also received the Campaign messages. Therefore, 1.2M is reported as total to avoid double counting.
49. The significant funding increase reflects the deterioration of the nutrition and food security situation, particularly in the northern part of the Gaza Strip. Both the intensity and the breadth of nutrition programming has been increased including the distribution of high energy biscuits, Lipid-Based Nutrient Supplements (LNS-SQ), Ready-to-Use Complementary Food and a cash component.

50. This amount excludes \$1,325,000 for protection from sexual exploitation and abuse, which is reflected under the cross-sectoral budget line. Interventions addressing gender-based violence in emergencies are embedded under case management, and amount to \$550,000, including gender-based responses to specific protection concerns.
51. The cost of education has increased significantly reflecting the breadth of programming.
52. The increase in funding is driven by the increased supplies and the high associated freight costs, and the continuation and scale up of wash service in targeted Internally Displaced Persons (IDPs) shelters.
53. The reduction in funding for social protection represents integration of Humanitarian Cash Transfers into sectoral programmes including WASH and nutrition.
54. The cross-sectoral funding requirement includes \$1,325,000 for protection from sexual exploitation and abuse, \$2.6M for disability inclusion and \$810,000 for Risk Communication and Community Engagement. SBC and AAP funding needs are integrated into sectoral budget lines.
55. The coordination budget covers cluster coordination costs (Nutrition Cluster: \$855,000; WASH Cluster: \$1.35 million; Education Cluster: \$778,000; and Child Protection Area of Responsibility: \$1.5 million).