PALESTINE Impact of the conflict on children in the Gaza strip

OVERVIEW

The current conflict in the Gaza Strip, which started on 7 October 2023, has been the deadliest of hostilities involving the Gaza Strip and Israel (0xfam 11/01/2024; UNICEF 21/12/2023; RSF 31/10/2023). As at 28 January 2024, at least 10,000 of the 26,400 people killed since in Gaza were Palestinian children (0CHA 29/01/2024; STC 11/01/2024). As at 24 October 2023, the daily estimate of children killed or injured was 400 (UNICEF 24/10/2023).

As at 20 January 2024, almost one million children were estimated to be internally displaced within Gaza. Most were in the southern Rafah governorate bordering Egypt, currently the most populated governorate in the Gaza Strip (PRCS 15/01/2024; STC 22/12/2023; OCHA 18/01/2024). Before the current hostilities, children comprised 47% (1.1 million) of Gaza's population; since 7 October 2023, the conflict has affected nearly all of them. Children are exposed to death, injury, and the loss of family and homes, and they endure physical and psychological trauma (OCHA 14/01/2024; STC 11/01/2024). The conflict has led to the destruction of safe spaces such as schools and hospitals and the denial of humanitarian aid access, leaving children in overcrowded shelters with limited access to essential goods and services (STC 11/01/2024; UN accessed 27/12/2023). The hostilities particularly affect children under five years old, displaced children, unaccompanied and separated children (UASC), and children with disabilities or with family members with disabilities because they often are unable to flee attacks and are at high risk of abandonment, malnutrition, and trauma (ICRC 11/2022; Rotenberg et al. 10/01/2024).

TABLE OF CONTENTS

Key figures2
Priority needs of children in gaza3
Compounding factors7
Humanitarian response constraints7

KEY FINDINGS

- Exposure to violence, loss of relatives, food deprivation, and lack of water since 7 October 2023 have increased the mental health and psychosocial needs of children. Children are experiencing anxiety and sleep deprivation, among other traumas. The psychological consequences are likely to have long-term effects, such as developmental issues.
- As at 24 January 2024, nearly 1.7 million displaced people, close to 50% (850,000) of whom were children, were staying in emergency collective shelters (UNRWA and public shelters), in informal sites close to UNRWA shelters and distribution sites, and with host families (UNRWA 25/01/2024; UNICEF accessed 24/01/2024; STC 22/12/2023). Despite being UN shelters, UNRWA facilities have been attacked on multiple instances, leaving no safe spaces for children.
- The lack of shelters and safe spaces for children exposes them to violence and protection, nutrition, and health risks. Israeli forces have designated Khan Younis in southern Gaza Strip as a safe zone that Palestinians from the north were instructed to evacuate to, but military operations have also targeted these zones (AI Jazeera 24/01/2024; PBS 07/12/2023). The intense Israeli bombardments and fighting in Khan Younis and Deir al-Balah have coerced a significant number of IDPs to move further south (UNRWA 24/01/2024).
- Damage to water systems and drinking water contamination have resulted in a water shortage, putting children at high risk of dehydration and waterborne diseases. It is estimated that children only access an average of 1.5–2L of water every day, well below the recommended requirements for survival (UNICEF 20/12/2023).
- Without a ceasefire allowing for an adequate humanitarian response, children will continue to have immediate and long-term needs resulting from the hostilities.
- According to WHO, diseases have more potential to cause fatalities than direct military conflicts in the long run, as the rates of infectious diseases are soaring (NPR 26/12/2023). The cold weather, heavy rainfall, and subsequent flooding increase the risks of respiratory diseases, such as pneumonia and hypothermia, and waterborne diseases, including bacterial infections and diarrhoea, among children (UN 14/12/2023; NYT 11/12/2023).
- The number of dead, wounded, and orphaned children in Gaza increases every day, and humanitarian workers continue to lack access to granular information because of communication disruptions (0CHA 14/01/2024 and 04/01/2024; The Guardian 22/12/2023).

acaps
Thematic report
01 February 2024

About this report

Aim: this report aims to provide a holistic analysis of the impact of the conflict in the Gaza Strip on children, with consideration of immediate and long-term needs.

Scope: children's situation in the Gaza Strip was already dire before 7 October because of an Israeli-imposed blockade and other structural challenges (OCHA 25/01/2023). This report does not provide in-depth detail of the baseline situation, since the current level of hostilities and impacts are unprecedented and not comparable to the situation prior to 7 October. The report predominantly focuses on the impacts of the violence that has taken place in the strip since 7 October, particularly on children.

Methodology: the report is based on a secondary data review of public and non-public sources, supplemented with six key informant interviews with relevant stakeholders to the situation in Gaza, including operational responders and organisations specialised in certain population groups with specific needs.

Limitations: there is limited granular data on the current situation in Gaza, particularly disaggregated by age, gender, and disability. The military siege and insecurity are hindering humanitarian responders' access to the strip, constraining the response and the information landscape. As a result, there is a lack of information on specific population groups, such as children. Since 11 October, the Gaza Strip has been under an electricity and internet blackout, which, combined with insecurity-related access constraints, has resulted in data-gathering disruptions, limiting and delaying information (0CHA 26/12/2023).

KEY FIGURES

- From 2022–2023, the total population of the Gaza Strip was around 2.2 million, among whom 1,023,000 (47%) were children aged 0–18 and 880,000 (40%) were children aged 0–14 (PCBS accessed 24/01/2024; PCBS 05/04/2022).
- The Ministry of Health in Gaza estimates aerial strikes and ground operations had killed over 26,000 Palestinians, at least 10,000 of whom were children, as at 28 January 2024 (0CHA 29/01/2024; 0CHA 26/01/2024; Reuters 09/12/2023). More than 7,000 people were reported missing, including 67% of children and women, and over 64,400 Palestinians overall were injured (PCBS accessed 29/01/2024; Health Cluster and WHO 24/01/2024; OCHA 26/01/2024, 24/01/2024, Reuters 09/12/2023). The numbers of people killed and injured are likely underreported, as they only include people and bodies taken to health facilities or morgues (GA 14/12/2023).
- As at 25 January, at least 1.7 million people (almost 80% of the total population of 2.2 million), including one million children, were displaced across the Gaza Strip, some multiple times (IOM 25/01/2024; UNRWA 15/01/2024; PCBS accessed 15/01/2024; IPC 21/12/2023).
- As at January, all children under five years old in Gaza (around 335,000) were at high risk of severe malnutrition, as the risk of famine continued to increase (IPC accessed 29/01/2024; OCHA 16/01/2024). As at December 2023, at least one in four households (more than half a million people) in the Gaza Strip were facing Catastrophe (IPC Phase 5) acute food insecurity conditions, characterised by extreme food gaps and livelihood collapse. About 80% of the population were facing Emergency (IPC Phase 4) or IPC 5 conditions (OCHA 21/01/2024; IPC 21/12/2023).
- The Famine Review Committee has reported a high risk of famine in the projection period through May 2024 if the current situation persists or worsens. Continuous oversight of the conflict, humanitarian access, food security, health, WASH, nutrition, and non-trauma mortality outcomes is necessary to monitor this risk (IPC 21/12/2023).
- There are approximately 3,200 new diarrhoea cases among children under five every day, an increase of about 2,000% since the start of hostilities. Before 7 October, there was an average of 2,000 recorded diarrhoea cases among children under five per month (UNICEF 05/01/2024).
- More than 625,000 students and close to 23,000 teachers in the Gaza Strip have been affected by school closures and attacks on education since 7 October 2023. As at 23 January, over 4,500 students and 231 teachers had been killed in Gaza (0CHA 29/01/2024; ACF 24/01/2024). The 2023-2024 academic year has been suspended; this is the most extended period during which children in Gaza have been absent from school. Around 90% cent of all school buildings in Gaza are being used as shelters for IDPs and/or have sustained varying levels of damage (0CHA 29/01/2024).

PRIORITY NEEDS OF CHILDREN IN GAZA

Protection needs

Mental health and psychosocial support (MHPSS) needs

MHPSS needs among children in Gaza are high. Since 7 October 2023, most of the children in the Gaza Strip have been through traumatic events, including grief, widespread destruction, forced displacement, and severe shortages of food, water, and medicine. The absence of safe spaces and playgrounds and the closure of schools are also factors that cause mental health and psychosocial issues among children (UNICEF 24/10/2023). They are reported to be suffering from anxiety, fear, emotional withdrawal, and nightmares (KII 04/01/2024). Israel has bombed Gaza's only psychiatric hospital, and air strikes have suspended the operations of the other six community mental health clinics that work with thousands of patients across Gaza (Tribune 26/01/2024; AA 06/11/2023). Some doctors have tried to stay in contact with children via WhatsApp and identify those suffering from mass depression, mutism, bedwetting, and suicidal thoughts (Tribune 26/01/2024; HOPE 05/01/2024).

Children are likely to face long-term MHPSS needs given the lack of immediate response. It has been demonstrated that children who experience strong, frequent, and prolonged adversity, such as exposure to violence, physical abuse, or neglect, are likely to experience a toxic stress response, which can disrupt the development of the brain architecture and other organ systems and increase the risk of stress-related disease and cognitive impairment (Harvard accessed 18/01/2024; STC 30/01/2023).

The impact of the current hostilities on children's mental health is incomparable to the pre-crisis situation, as the extent of hostilities and infrastructure destruction has been unprecedented. That said, prior to 7 October, there was already a high burden of mental health issues in the Gaza Strip. A 2017 study found that approximately 54% of Palestinian boys and 46.5% of Palestinian girls aged 6–12 had emotional and behavioural disorders (TNA 18/09/2019). In 2022, Save the Children found that 80% of the children in one study showed emotional distress symptoms. About half of them there reported having contemplated suicide, and three out of five kids were self-harming (NPR 10/11/2023; STC 07/11/2023). Prior to 7 October, access to mental health support in Gaza was limited and often socially stigmatised, resulting in families and community members not prioritising MHPSS (TNA 28/03/2017 and 18/09/2019; STC accessed 28/12/2023). Children with pre-existing mental health issues can be expected to face aggravated impacts under the current context of hostilities.

Protection from violence

Map 1. Governorates with the highest number of displaced families



Source: UNRWA (accessed 28/01/2024; OCHA (accessed 16/01/2024);

As at 7 January 2024, an estimated 60% (69,000) of housing units were destroyed or uninhabitable in Gaza and over 290,000 were damaged, forcing people into displacement and to seek safety in UNRWA facilities, relatives' houses, or under the open sky in courtyards (Shelter Cluster 07/01/2024).

There are no safe spaces. UNRWA shelters are hosting more than four times the number of displaced people than their intended capacities. More than half of the population in Gaza currently live in UNRWA facilities, enduring dire and overcrowded conditions. These conditions create severe health (including mental health) and protection concerns for IDPs, with a particular impact on children (IOM 29/12/2023; UN 22/12/2023; UNRWA 27/12/2023; WHO 03/11/2023).

Despite UNRWA facilities being UN facilities, they are not protected from attacks. As at 15 January, at least 331 displaced people hosted within UNRWA shelters had been killed and 1,157 injured (UNRWA 18/01/2024).

There is a lack of safe zones. On 1 December 2023, the Israel Defense Forces released a map of Gaza divided into 623 numbered blocks indicating areas they would imminently strike, accordingly with the intention to avoid civilian casualties and indicate areas to which civilians should go to receive humanitarian aid and protection from air strikes. That said, many residents in Gaza have had little electricity or internet service, making it difficult to access the map (NPR 07/12/2023). Mawasi and neighbouring areas in southwestern Gaza, where thousands of Gazans live in challenging conditions with scattered farm fields and waterlogged dirt roads, were stipulated as safe zones for people fleeing hostilities (PBS 07/12/2023). These areas lack basic services such as running water, sanitation facilities, and humanitarian response. The makeshift shacks and tents in the area also offer inadequate protection against the winter rain (TNH 11/01/2024).

There is an increased risk of gender-based violence (GBV). There is limited current and pre-crisis GBV data disaggregated by age, making it difficult to analyse the extent of GBV needs among girls. Women and girls are likely facing increased risks of arbitrary detention and harassment. The Israel Defense Forces has been reported to have detained hundreds of Palestinians, including women taken to Yarmouk Stadium, where their veils are removed and they are searched by soldiers. Some of the women have reported enduring abuse, beatings, and harassment. As at December 2023, many of the women and girls detained remained in undisclosed locations (Euro-Med Monitor 26/12/2023; OHCHR 16/12/2023).

Children with specific protection needs

UASC: since 7 October 2023, many children have become unaccompanied or separated. An estimated 25,000 children in Gaza have lost one or both parents, with extended family caring for many (Euro-Med Monitor 09/12/2023; SOS 18/01/2024). As at 26 January 2024, there was not enough disaggregated data to distinguish between UASC and orphans. The number of UASC is likely to increase as the relatives and community members who have taken in children without or separated from their parents become unable to care and provide for them (SOS 18/01/2024). Around 40% of the people in Gaza have lost their identification cards and other documents, causing significant challenges in identifying unaccompanied minors and reuniting them with their families (UN 02/01/2024). Forced separation exposes children to various dangers and heightened risks of exploitation, neglect, and abuse. UASC, particularly in conflict contexts, are more likely to experience mental health conditions, such as post-traumatic stress disorder, depression, and anxiety (GPC 26/01/2024). UASC are also at higher risk of malnutrition, gastrointestinal infections, low vaccination coverage, and respiratory diseases (Migration Data Portal accessed 24/01/2023). Prior to 7 October 2023, 260 girls and 278 boys were in orphanages and state institutions in the Gaza Strip (CPAoR 08/11/2023).

Children with disabilities: before 7 October, 12% of Palestinian children aged 2–17 faced one or more functional limitations, while 21% of households in Gaza included at least one member with physical or mental disabilities (UNICEF 21/12/2023). 9.3% of households were found to have at least one child (between the ages of 5–17) with a disability (OCHA/REACH 07/09/2022). Children with pre-existing and new mental or physical disabilities are twice as vulnerable to protection risks as their peers since they are likely to face enormous challenges and difficulties in protecting themselves from violence and getting the help they need: assistive devices, adapted shelters, NFIs and food, healthcare and mobility access, and evacuation assistance. Many have been separated from their primary caregivers and likely do not have access to safe spaces (HI 03/11/2023; HRW 01/11/2023).

Children in detention: since 7 October, Israeli forces have detained many people, including children. There are no exact figures of the people arrested in the Gaza Strip, but boys, women, and girls are among the detainees. As at 16 December, there were approximately 140 women and girls arbitrarily detained by Israeli forces in undisclosed locations (OHCHR 16/12/2023; TNA 14/01/2024; WAFA 31/12/2023; MEE 28/12/2023). The numbers are likely higher because accurate statistics on the number of detainees from Gaza are not available. As at 2 January 2024, more than 7,000 Palestinians, mostly women and children, were missing in Gaza, and it was unknown how many of them were detained (Euro-Med Monitor 02/01/2024; TNA 04/01/2024).

Water, food, and nutrition needs

Lack of WASH services

As at 20 December 2023, 90% of the children in Gaza could not access their normal daily water intake, putting them at risk of dehydration. On average, children are estimated to access 1.5L of water or less each day, compared to the minimum standard of 3L (UNICEF 20/12/2023).

The bare minimum intake should be:

- 1.2L of water daily for children between four and eight years old
- 1.2–1.4L daily for children aged 9–13
- 1.4-1.9L daily for adolescents aged 14-18 (UNICEF 20/12/2023; Health Direct 06/2022).

The effects of dehydration are vomiting and diarrhoea, and it could have more serious consequences, such as multisystem failure and death (RCH accessed 24/01/2024; News Medical accessed 23/01/2024). Some people have resorted to drinking brackish water from agricultural wells. This practice increases pesticide and chemical exposure, affecting the health of all Gazans, including unborn and newborn infants, children, women, and men (0CHA 16/10/2023). Water contamination and poor sanitation are increasing the prevalence of waterborne diseases, such as cholera, diarrhoea, dysentery, hepatitis A, typhoid, and polio, the leading causes of death among children under five (WHO 13/09/2023; Malebatja and Mokgatle 29/12/2022).

The sanitation and hygiene situation in shelters is precarious. There was one toilet per 372 people and one shower per 4,500 people in the Gaza Strip as at 13 December 2023 (UNRWA 27/12/2023; WHO 21/12/2023). This issue particularly affects girls managing their menstrual cycles, who require adequate WASH facilities, sanitary products, and pain medication. Many of them have resorted to taking pills that delay menstruation (AI Jazeera 31/10/2023). These factors can result in a higher risk of bacterial and fungal infections, including those affecting the urinary tract and vagina (Health Cluster et al. 29/11/2023). Water access has long been limited in the Gaza Strip even before 7 October. As at December 2022, over 648,000 Gazans (around 30% of the 2.2 million population) had limited WASH access (0CHA 25/01/2023).

Further contextual information is available in ACAPS' Palestine: Water Crisis in the Gaza Strip report.

Hunger

Hunger has become the most pressing issue for people in Gaza. As at December 2023, at least one in four households (more than half a million people) in the Gaza Strip were facing IPC 5 food insecurity conditions characterised by extreme food gaps and a collapse of their livelihood. About 80% of the population in the strip were experiencing IPC 4 or IPC 5 levels characterised by extreme food gaps (WH0 21/12/2023; OCHA 22/01/2024; IPC 21/12/2023). As at 17 January 2024, around 93% of the population was facing acute food insecurity – i.e. Crisis (IPC Phase 3) or worse levels (OCHA 16/01/2024; Reuters 20/12/2023). The current hostilities have destroyed crops, food warehouses, and bakeries. The Israeli siege of Gaza has interrupted food and fuel imports, limiting the availability of essential staple foods (ActionAid 16/01/2024; HRW 01/11/2023).

Four out of five households in the northern governorates and half the displaced households in the southern governorates have reported going entire days and nights without eating, and many adults are skipping meals so children can eat (IPC 21/12/2023). Children have lost weight and have reported cases of dizziness from a lack of food (Reuters 21/12/2023).

Since the end of the humanitarian pause on 30 November 2023, only an average of 30 food trucks (out of 100) have been allowed to access the Gaza Strip daily, compared to between 150–180 food trucks (out of an average of 500 humanitarian aid trucks) entering Gaza daily prior to 7 October (IPC 21/12/2023; ActionAid 16/01/2024). The food supply level is far below the food and nutritional requirements of the whole population based on the potential kilocalories delivered in the current shipments (IPC 21/12/2023). Frequent communication disruptions, damage to infrastructure such as roads and vehicles, fuel shortages, and a lack of safety and security for aid workers have also constrained the delivery of the already limited food (ActionAid 16/01/2024).

Severe acute malnutrition

Famine thresholds for both acute malnutrition and non-trauma mortality may also be breached by 4 February 2024 (IPC 21/12/2023). As at 16 January, all under-five children (around 335,000) were at high risk of severe malnutrition as the risk of famine conditions continued to increase (0CHA 16/01/2024). As at 21 December 2023, around 7,700 children in Gaza were experiencing acute malnutrition. As at 15 January 2024, acute malnutrition, the most life-threatening form of malnutrition in children, was estimated to increase by 30% from pre-crisis conditions, affecting up to 10,000 children in Gaza. Acute malnutrition can be fatal or have long-term consequences if left untreated (UNICEF 15/01/2024; Reuters 25/01/2024; STC 21/12/2023). Reported malnutrition cases are likely to be underreported because of access and communication constraints.

The presence of long-term food insecurity also creates a risk for an entire generation to suffer from chronic malnutrition and for the occurrence of disease outbreaks (OCHA 16/01/2024; KII 12/12/2023). Malnutrition enhances children's vulnerability to mortality resulting from diseases such as diarrhoea, pneumonia, and measles, particularly in dire environments where they lack access to essential healthcare services (WHO 21/12/2023). Children who experience malnutrition are at a heightened risk of developing disabilities. Children who already live with disabilities are likely to experience a further deterioration in their mobility and developmental abilities (KII 27/12/2023). Malnutrition is also likely to increase among non-breastfed infants, who need access to formula alongside sufficient access to safe drinking water if preparation is required. Currently, children lack sufficient complementary foods and micronutrient supplements (IPC 21/12/2023).

In 2021, global acute malnutrition prevalence in under-five children was low at 0.8% (UNICEF 18/01/2021).

Health needs and healthcare access

Injuries and healthcare system capacity

As at 11 January 2024, at least 1,000 children in Gaza had lost a limb since 7 October 2023 (MEE 29/12/2023; UN 19/12/2023; STC 11/01/2024). Statistics indicate that, on average, more than ten children per day lose one of their limbs, although the number is likely higher according to local medical staff. It is also very likely that most of the amputations have been made without anaesthesia because of a lack of medical supplies, increasing both the pain and health risks of amputations (Reuters 04/01/2024; UNICEF 21/12/2023; STC 07/01/2024).

The health system is on the brink of collapse. As at 24 January 2024, 14 of the 36 hospitals in the Gaza Strip were partially operational, with seven in the south and seven in the north, and only three were undamaged (0CHA 24/01/2024; IOM 29/12/2023; CEOBS 19/03/2019; WHO 27/12/2023; The Guardian 19/01/2024). Between 7 October 2023 and 22 January 2024, WHO recorded a total of 659 attacks targeting healthcare facilities across the Gaza Strip and the West Bank (WHO accessed 22/01/2024). Infrastructure damage and insecurity make it difficult for ambulances to reach individuals requiring assistance and for the injured and sick to access health facilities (WHO 12/10/2023). Lack of water is also extremely dangerous, since not having enough water to clean medical instruments can lead to poor sanitation and hygiene practices, increasing the conditions for disease spread (UNRWA 27/12/2023; WHO 21/12/2023).

Lack of medical personnel is worsening the health situation. As at 27 December 2023, there were only 342 health staff in the Gaza Strip (UNRWA 27/12/2023). As at 29January 2024, only 12 medical doctors were still working at Al-Aqsa Hospital in Deir al-Balah, which is about

10% of the staff present before 7 October. The maternity unit at Al-Aqsa Hospital is not operational and is referring all pregnant women to Al-Awda Hospital, which is further away in Gaza governorate, putting patients at risk during travel time (OCHA 29/01/2024). Prior to 7 October, there was already a shortage of medical staff, doctors provided a daily average of 113 medical consultations, and there were only 1,016 health staff in the Gaza Strip (UNRWA accessed 22/01/2024).

Vulnerability to disease outbreaks

As at 25 January 2024, WHO had reported over 158,000 diarrhoea cases in Gaza since 7 October 2023 (OCHA 24/01/2024). As at 17 December, cases among under-five children had increased from 48,000 to 71,000 in just one week. Approximately 3,200 new diarrhoea cases among under-five children have been reported daily. Before the conflict, around 2,000 diarrhoea cases in under-five children were recorded per month. This recent climb represents an increase of about 2,000% in diarrhoea cases among under-five children (UNICEF 05/01/2024). There were no updated figures on the number of diarrhoea cases among children as at 25 January.

Thousands of people are living in extremely overcrowded conditions in shelters, increasing the risk of disease outbreaks (AI Jazeera 10/11/2023; CNN 04/12/2023). IDP collective sites have recorded over 360,000 cases of infectious diseases, such as acute respiratory infections, meningitis, jaundice, impetigo, chickenpox, and hepatitis A (UNICEF 23/12/2023; OCHA 22/12/2023; WH0 08/11/2023). Obtaining an accurate count is extremely difficult given access and communication constraints, meaning the number could be much higher. In general, disease outbreaks in Gaza pose a significant threat to children, as their weakened immune systems and lack of food render them highly vulnerable (UN 28/11/2023).

COMPOUNDING FACTORS

Winter

The winter season in the Gaza Strip is between December–March, with temperatures dropping as low as 9° C (The Guardian 14/11/2023). Temperatures may drop further during low-pressure fronts. There is a high need for mattresses, blankets, sleeping bags, winter clothing, and other winter items. Some individuals in shelters sleep directly on the floor without any mattresses or blankets. The cold in the shelters facilitates the spread of various diseases, including respiratory diseases (such as pneumonia), and hypothermia (UN 14/12/2023; NYT 11/12/2023; The Guardian 12/01/2024).

During winter, there is only an average of about two to three hours of sun, sometimes less, affecting solar-powered water stations that require at least five hours of proper sun to operate all day. Winter reduces these stations' outputs and makes it more difficult for people to get water (TNA 14/11/2023; OCHA 22/01/2024). Solar-powered water pumps convert sunlight into electricity to power them. Solar panels collect photons from sunlight to generate direct current for the motor to pump water out (HWI 27/10/2021).

HUMANITARIAN RESPONSE CONSTRAINTS

Security risks

Attacks by Israeli forces killed 403 health workers in Gaza between 7 October 2023 and 23 January 2024 (Health Workers Watch X 25/01/2024). Between 7 October and 27 January, 627 attacks hit health facilities and transportation, affecting 558 health workers (WHO accessed 27/01/2024). Between 7 October and 8 November alone, according to the Palestinian Ministry of Health, the attacks killed 192 medical personnel, including 65 nurses, 29 doctors, 24 pharmacists, 20 paramedics, 17 dentists, 14 lab technicians, 11 medical students, seven physiotherapists, three medical professors, one optometrist, and one medical engineer (AI Jazeera 23/01/2024). Between 7 October and 22 January, 241 violent incidents killed 152 UNRWA workers in Gaza and damaged 141 UNRWA installations, with some multiple incidents affecting the same location, including at least 25 incidents of military use and interference at UNRWA premises (UNRWA 24/01/2024).

Journalists have also been attacked. As at 24 January, at least 83 journalists and media workers were killed, 16 journalists were injured, three were missing, and 25 had been arrested (CPJ accessed 24/01/2024).

Extremely high access constraints

On 8 October 2023, the Israeli Government implemented a comprehensive blockade on the Gaza Strip, which involved severing water and electricity connections and shutting down all border crossings, effectively restricting movement in and out of Gaza (IOM 29/12/2023; OCHA accessed 04/01/2024). As a result, all entry points to Gaza have been blocked, allowing only a limited number of humanitarian trucks to enter from the Rafah Crossing with Egypt. The number of trucks carrying aid has been significantly inadequate in relation to the needs and overall humanitarian situation (KII 11/12/2023; ICG 09/12/2023; The Guardian 07/11/2023). As at 19 January 2024, the border crossings connecting Egypt and the Gaza Strip, Rafah and Kerem Shalom, were mostly closed for the movement of people, with only the exit of wounded people and the entry of a limited number of humanitarian trucks being allowed (0CHA 18/01/2024 and 16/01/2024; KII 11/12/2023). Intense ground operations and fighting, frequent communication disruptions, insecurity, blocked roads, and fuel scarcity pose significant challenges to humanitarian operations.

On 23 November 2023, a humanitarian truce was initiated, initially planned for four days and extended for seven days, suspending fighting and allowing for aid to flow in the Gaza Strip until 30 November. These pauses aimed to relocate civilians from northern Gaza to the south and allow the entry of humanitarian aid (AP 10/11/2023). Specifically, during these pauses, UN agencies and other stakeholders increased the amount of aid entering the Gaza Strip via the Rafah Crossing (AI Jazeera 29/11/2023). Despite these plans, no substantial progress was made during this period. According to humanitarian organisations, pauses and corridors are not sufficient to ensure humanitarian aid delivery to the people in need in Gaza (0xfam 22/11/2023; PCBS accessed 24/01/2024).

Between 1 and 25 January, 51 missions to deliver humanitarian aid were planned for the north of Wadi Gaza; however, 29 were denied access by Israel forces and only eight were fully carried out two were partially implemented and four were postponed; 87 humanitarian missions to Deir Al-Balah, of which 63% (55 missions) were facilitated and 25% (22 missions) were denied (0CHA 29/01/2024). This represents a significant deterioration when compared with December 2023, when more than 70% (13 out of 18) of planned missions to the north were successfully carried out (0CHA 14/01/2023). During the last week of December 2023, on average, only 8% of the targeted population in Gaza was reached with daily assistance (STC 10/01/2024). Before 7 October, approximately 80% of Gaza's population relied on humanitarian assistance and food subsidies from humanitarian organisations (HI 21/11/2023).

Limited response capacity

As at 24 January 2024, the security situation significantly constrained organisations working alongside children, which were unable to reach and respond to the severity of their needs. Many international humanitarian organisations cannot enter the enclave because of security constraints and are working in partnership with local responders (KII 04/01/2024). Only few operational organisations are present in the area, including UNRWA, the Red Cross and Red Crescent, Al-Haq, Al Mezan, and the Palestinian Centre for Human Rights, which have had long-term presence in Gaza (UNRWA accessed 24/01/2024; Al Haq et al. 18/01/2024). On 28 January 2024, however, at least 12 countries (including their main government donors U.S. and Germany) had cut their funding to UNRWA following allegations by Israel that 12 UNRWA staff were involved in the 7 October attacks (MEM 29/01/2024; Reuters 28/01/2024; The Guardian 28/01/2024). Defunding UNRWA will likely reduce its operational capacity further, risking the suspension of its humanitarian response in the Gaza Strip. UNRWA is currently the main responder in Gaza, and over two million people depend on the agency for survival. UNRWA runs shelters for over one million people and provides food and primary healthcare even at the height of the hostilities (OCHA 29/01/2024).

As at 22 January, child protection organisations had reached around 93,000 boys and girls mostly with awareness-raising initiatives, MHPSS for children and caregivers, and registration and alternative care for UASC (0CHA 22/01/2024).