Palestine
Risk of famine in pockets of the Gaza Strip

CRISIS OVERVIEW

People in Gaza are facing extreme challenges in meeting their basic needs, including food, because of significant access constraints stemming from insecurity. At the same time, these constraints are preventing humanitarian responders from reaching the affected population. On 29 February 2024, Israeli forces killed over 110 Gazans and injured more than 750 as people swarmed around humanitarian trucks, seeking food assistance, in northern Gaza, which has been largely inaccessible since the hostilities started (CNN 29/02/2024). Lack of food access and availability are degrading social cohesion and pushing people to resort to potentially harmful coping strategies, increasing protection risks. Specific population groups, such as pregnant women and children, are at risk of starvation and diseases, which may result in preventable deaths given the weakened state of their bodies from malnutrition and the absence of health and nutrition care (AJ 23/12/2023; Yang et al. 28/02/2008).

On 26 February, humanitarian responders reported a shortage of food for distribution, while some reported that existing stocks would last for only two days (OCHA 26/02/2024). The prolonged closure of the Karam Abu Salem/Kerem Shalom border crossing, the main commercial goods crossing between Israel and Gaza located in southern Gaza, and the severely constrained access through the Rafah Crossing, the southernmost post of exit bordering Egypt, are significantly obstructing humanitarian operations in Gaza (France 24 19/02/2024; BBC 02/11/2023). These disruptions, compounded by frequent rejections of goods and lengthy border delays, seriously challenge essential aid delivery (IOM 23/02/2024).

Responders have been using airdrops to deliver assistance to Gazans. On 2 March 2024, the US military air-dropped over 38,000 meals along the coastline of Gaza, as part of a series of airdrops in coordination with Jordan’s air force (Al Jazeera 02/03/2024). The Jordanian military had previously used airdrops to deliver food parcels and medical supplies (Reuters 27/02/2024; Washington Post 29/02/2024). That said, the quantities delivered by airdrops remain insufficient to meet the large scale of needs of Gazans. Airdrops are also not conducted in coordination with local responders and often do not consider safe distribution. In some cases, packages have landed in the sea, spoiling food and other assistance included (Al Jazeera 28/02/2024).

Following the attack on Israel by the Palestinian group Hamas on 7 October 2023, Israel initiated a military campaign in the Gaza Strip. The military intervention, characterised by heavy bombardments and ground operations, coupled with a siege, has led to the displacement of at least 75% of the population in Gaza to the south and significant shortages of essential supplies, such as food, safe drinking water, and medical supplies (OCHA 27/02/2024; IOM 23/02/2024). The Israeli forces’ ground operations have led many IDPs to experience multiple displacement. In Rafah, IDPs are seeking shelter in makeshift tents deprived of basic needs and services.

As at 1 March 2024, the hostilities had resulted in the deaths of nearly 30,000 people in Gaza and widespread destruction, including of agricultural infrastructure. Israeli forces had also affected more than 60% of Palestinian homes in Gaza, destroying more than 70,000 and damaging more than 290,000 (OCHA 01/03/2024; OHCHR 16/01/2024). They had also caused the loss of arable land. Infrastructure destruction, including agricultural system disruptions, reduces food availability. Infrastructure damage also hinders humanitarian organisations from reaching those in need, compounding the crisis and aggravating food scarcity. Prior to 7 October, Gaza was already vulnerable to food insecurity as a result of longstanding structural poverty and economic difficulties stemming from a 16-year Israeli blockade on the strip (UNSC 27/02/2024).

CRISIS IMPACTS

Food security

The latest IPC report projected that between 8 December 2023 and 7 February 2024, the entire population of Gaza, estimated at 2.3 million, would face high acute food insecurity classified as Crisis (IPC Phase 3) or worse levels. This is the highest share of people globally that IPC has ever classified as facing high acute food insecurity levels. About half of the population or 1.17 million people were classified to face Emergency (IPC Phase 4) levels, while more than 500,000, representing at least one in four households, would face Catastrophe (IPC Phase 5) conditions (IPC 21/12/2023).

According to the UN, as at 16 January 2024, among the global population facing “famine or catastrophic hunger”, 80% were within Gaza (OHCHR 16/01/2024). According to WFP, nine out of ten people in Gaza skipped meals for prolonged periods between 7 October and 23 December 2023. As at 19 February 2024, 95% of households were limiting meals and portion sizes, with 64% of households eating only one meal per day. 95% of households restricted the amount of food available for adults to ensure children had enough food to eat (UNICEF 19/02/2024). As at 5 February, food insecurity assessments showed households grinding animal feed to make flour (Anera 05/02/2024).
According to the UN, since the start of the Israeli forces’ ground operations in Gaza in October 2023, Gazans’ access to farmlands and the Red Sea has been blocked. The Israeli forces have also destroyed approximately 22% of agricultural land, including orchards, greenhouses and farmland, in northern Gaza, and 70% of Gaza’s fishing fleet. These access restrictions and the destruction of farmlands and fishing fleets are expected to continue worsening the food insecurity situation in Gaza in the long term (OHCHR 16/01/2024).

From the reopening of the Rafah Crossing for humanitarian cargo on 21 October 2023 to 27 February 2024, more than 12,000 trucks crossed into Gaza. Before 7 October 2023, more than 60,000 trucks would have entered Gaza during an equivalent period (AJ 02/12/2023). According to the Ministry of Health, on 29 February 2024, more than 100 people died in northern Gaza after Israeli forces opened fire at crowds who had gathered around humanitarian trucks in the hope of getting food (CNN 29/02/2024).

Before the hostilities, people in Gaza relied heavily on humanitarian food aid, constituting 48% of their total consumption (AOAV 19/02/2024). The incapacity to locally produce food and extensive disruptions to commercial access into Gaza, with only a handful of trucks entering the enclave since 7 October 2023, are severely hampering the Gaza Strip’s commercial sector. This has resulted in diminished reserves, the scarcity of commodities in markets, and escalating prices, which all contribute to resource-based competition and social tensions. The disturbance to livelihoods has aggravated the food insecurity situation (UNSC 27/02/2024).

**Nutrition**

According to nutrition assessments conducted at health facilities and shelters in northern Gaza in January 2024, approximately 16% of children under two were acutely malnourished. Among them, close to 3% suffered from severe acute malnutrition, placing them at significant risk of medical complications and death. A screening for mid upper arm circumference revealed that the global acute malnutrition rate among children aged 6–24 months was 15.59%, while severe acute malnutrition rate was 2.85% (Nutrition Cluster 18/02/2024). According to assessments in southern Gaza, specifically in Rafah, where aid was more available, 5% of children under two were acutely malnourished (UNICEF 19/02/2024; Guardian 27/02/2024). As at March 1, 10 children had died of malnutrition and dehydration (OCHA 01/03/2024).

The lack of access to nutritious food is leading affected people to take cheap, calorie-dense options, often lacking essential vitamins and minerals. This poor-quality diet weakens the immune system and increases susceptibility to infections, chronic diseases, and malnutrition. Malnutrition, particularly in children, can lead to stunted growth and cognitive development, which can impair learning capacity (IRC 06/10/2022).

**ANTICIPATED IMPACTS**

According to WFP and other humanitarian responders, the risk of “imminent famine” is particularly high in pockets of northern Gaza, which was still cut off from access from the south and received very little food assistance as at 26 February 2024 (UNSC 27/02/2024; Reuters 23/01/2024). In the first two weeks of January, Israeli authorities denied access to approximately 76% of the 29 humanitarian aid missions planned for northern Gaza, significantly decreasing the number of permitted missions from the previous month (OCHA 06/02/2024). If the conflict continues, needs, particularly for food, are likely to rise, driving more people into higher acute food insecurity and famine-like conditions (Brookings 22/02/2024).

Israeli forces have announced their intention to start ground operations in Rafah if Hamas’ Israeli hostages are not freed by Ramadan (around 9 March), which will lead to additional multiple displacement and significant casualties, as Rafah is densely populated (UNSC 22/02/2024; MSF 21/02/2024). As at 27 February, negotiations continued about a 40-day humanitarian truce during the Ramadan period to allow for a prisoner exchange (AJ 27/02/2024). It is unclear whether the truce will see an increase in humanitarian access as well.

Commercial imports are yet to resume since the reopening of borders on 21 October 2023. The limited availability of fuel for operations and the growing number of areas with active fighting will likely keep markets closed, worsening food access and availability. The inaccessibility of essential medical care, vaccinations, and preventative measures will lead to a rise in illnesses, including chronic conditions, infectious diseases, and malnutrition-related illnesses (IPC 21/12/2024).

On 20 February 2024, WFP suspended aid delivery to northern Gaza as a result of the safety and humanitarian movement restrictions imposed by Israeli ground operation teams (WFP 20/02/2024). This decision is likely to further increase food insecurity among the population in northern Gaza since WFP supplies the majority of food to this area. According to projections by the London School of Hygiene and Tropical Medicine, if the conflict continues through August, between 80–100% of the population in Gaza will completely depend on humanitarian assistance to meet their food needs. The projections also indicate that even in a ceasefire scenario, a significant number of additional people would die as it will take a long time to reestablish WASH and health facilities, rebuild shelters, and address existing malnutrition rates in Gaza (AOAV 19/02/2024).
COMPOUNDING FACTORS

Health

According to WHO, between 7 October 2023 and 12 February 2024, there were 378 reported healthcare-related attacks across Gaza, affecting 98 health facilities and 98 ambulances (WHO 12/02/2024). Israel continues to allege that Hamas operates within hospitals, but Palestinian authorities and medical professionals have disputed these claims. Israeli forces have continued to conduct raids and bombardments of healthcare facilities amid medical supply shortages and restrictions on what supplies can enter medical facilities (UN 28/02/2024). As at 1 March, more than 8,000 patients were on the waiting list for medical referral abroad (OCHA 01/03/2024).

As at 27 February, only 12 hospitals were partially functional (6 out of the 24 total in the north and 6 out of 12 in southern Gaza), with only three functional field hospitals (UN 28/02/2024; OCHA 27/02/2024; WHO 24/01/2024). On 25 February, the Gazan Ministry of Health stated that hospitals in northern Gaza, including Al Ahli Arab Hospital, were running out of fuel. The lack of power has led Al Ahli Arab Hospital to manage to perform only 13 operations per day and run at 30% capacity (OCHA 26/02/2024).

Conflict is particularly affecting maternal healthcare. Newborn deaths are on the rise, as mothers are unable to attend prenatal or postnatal check-ups. Frequent bombings and anxiety have, according to paediatric specialists, also led to premature births. Shortages in medical supplies, medicine, and electricity have resulted in four or five newborns having to share one incubator (UNFPA 23/02/2024). In Rafah, because of overcrowding and medical supply shortages, more than 77 newborn babies were sharing 20 incubators as at 28 February. The destruction of health facilities disrupts critical services, leading to increased maternal and child mortality rates (OCHA 26/02/2024; UN 28/02/2024).

As at 21 February, significant increases in communicable diseases and conditions, such as diarrhoea and acute respiratory infections, were reported in the overcrowded UNRWA shelters hosting almost 1.4 million displaced people (MSF 21/02/2024).

Food insecurity and the lack of access to affordable, nutritious food result in nutritional deficiencies, leading to malnutrition and compromised immunity, making individuals more susceptible to diseases and other negative health impacts. Children experiencing food insecurity are particularly vulnerable, as malnutrition weakens their immune systems and exposes them to the risk of diseases, stunted growth, and cognitive impairment (WHO 01/03/2024; Dlamini et al. 24/01/2023; Dean et al. 18/03/2020).

WASH

As at 1 March, only one out of three water pipelines coming from Israel was operational, and it was working at only 47% of its full capacity. 83% of groundwater wells were not operating, and all wastewater treatment systems were out of order. The situation is exposing the majority of Gazans to waterborne and vector-borne diseases (OCHA 01/03/2024).

As at 18 February, approximately 81% of households did not have access to safe water, with less than 1L available per person per day. This falls short of the recommended quantity for emergencies of a minimum of 3L per person per day, while the standard for overall usage for drinking, washing, and cooking is 15L per person per day (Nutrition Cluster 18/02/2024; UNICEF 19/02/2024). As at December 2023, some Palestinians had to walk more than 3km to fetch 1gal (3.7L) of water (AJ 21/02/2024).

According to projections by the London School of Hygiene and Tropical Medicine, if the conflict continues through August 2024, Gazans will only have 3–6L of water per person per day for domestic use compared to the recommended 15L. This will increase the consumption of unsafe water, triggering waterborne diseases, worsening food insecurity levels, and increasing malnutrition cases (AOAV 19/02/2024).

HUMANITARIAN RESPONSE

Humanitarian access constraints

Physical and bureaucratic impediments still limit entry into Gaza. Demonstrations by Israeli protesters are resulting in the sporadic closure of the Kerem Shalom border crossing, while the Rafah Crossing is subject to many bureaucratic requirements and has been operating at reduced and inconsistent rates (OCHA 26/02/2024). Even with the necessary permits from relevant authorities in Israel and Egypt, humanitarian responders face significant physical access constraints that pose security risks and the threat of harm to their staff, sites, and assets. As at 1 March 161 UN staff, 340 health workers, 47 civil defence forces, and 130 journalists had died from the conflict (OCHA 01/03/2024).

Between 1 January and 15 February 2024, the Israeli military denied access to 51% of aid missions planned for northern Gaza and 25% of those planned for the areas requiring coordination in southern Gaza (OCHA 01/03/2024). Distribution throughout Gaza remains difficult because of hostilities, the interception of convoys by desperately hungry crowds, destroyed roads, and other challenges, with unverified reports of Hamas operatives attacking trucks carrying aid (ToI 17/02/2024; Brookings 22/02/2024).
Limited access to electricity, fuel, and telecommunication services also continue to impede the humanitarian response. Fuel shortages across Gaza affect food aid distribution to displaced people. Intermittent electricity also means that the population is not able to cook and has put flour mills out of operation (AJ 17/11/2023; MAP UK 03/01/2024).

**Funding and response capacity**

As at 26 February, approximately USD 906 million (74% of the requested amount in the Flash Appeal) had been disbursed, including about USD 616 million (98%) out of the USD 629 million requested for October–December 2023 and USD 291 million (48%) out of the USD 600 million requested for January–March 2024 (OCHA 26/02/2024, CHA 06/02/2024; OCHA accessed 09/02/2024).

As at 26 February, the occupied Palestinian territory Humanitarian Fund and the Central Emergency Relief Fund had funded more than 94 active projects, totalling about USD 88 million since 7 October 2023 (OCHA 26/02/2024).

Between 19–25 February 2024, 18 organisations were engaged in providing food assistance across the Gaza Strip, with around 1.7 million people being reached with food assistance at least once. Rafah governorate received about 45% of the total food assistance, followed by Deir al-Balah (24%), Khan Younis (15%), and northern Gaza 15% (OCHA 26/02/2024).

As at 1 March, following allegations by Israel of UNRWA staff involvement in the 7 October attacks, over 20 prominent donors had suspended over USD 450 million of financial support to the UN agency. Consequently, UNRWA, the principal humanitarian entity operating in Gaza, has transitioned its focus towards emergency programming, only prioritising rapid assistance delivery (AJ 17/02/2024; HelpAge 01/03/2024; Washington Post 03/03/2024). On 1 March, the European Union announced it would disburse USD 54 million to UNRWA. Additionally, it has increased its emergency support allocation by USD 73 million to USD 135 million (EU 01/03/2024).