

Situation Overview

As of 11 April, a total of 268 Palestinians have been confirmed to have COVID-19, 255 in the West Bank and 13 in the Gaza Strip. In response to outbreak of COVID-19 in the occupied Palestinian territory (oPt), the Palestinian Authority (PA) declared a state of emergency and both the PA and the de facto authorities (DFA) in Gaza introduced measures to impede the spread of the virus. Measures include closure of borders and crossings; restrictions on movement, gatherings and assembling; closure of educational facilities, non-essential business and services, touristic and religious areas and markets; curfews; and home quarantine and compulsory quarantine sites.

Since 15 March 2020, anyone entering Gaza is required to enter into compulsory quarantine for 14 days, extended to 21 days since 28 March. As of 11 April there are 17 quarantine sites in Gaza with 632 people in quarantine, 60.4% male, 39.6% female and 8.3% are children. In the West Bank, following the Prime Minister's request for Palestinian workers in Israel (estimated 45,000 people) to return home, an estimated 27 quarantine sites (formal and informal) have been established. All those who return are subject to quarantine for 14 days. The situation on this issue remains fluid at the time of this SitRep.



Newly constructed compulsory quarantine site Gaza
photo Smart Media

Operational constraints

Severe restrictions on movement throughout the West Bank (including East Jerusalem) and Gaza have significantly curtailed protection related service provision. This includes an almost total absence of face-to-face interaction and access to life-saving gender-based violence and child protection services. Shelters for women operated by authorities in Bethlehem and in Gaza no longer accept new cases. The girls' shelter in Beit Jala is operating in emergency mode with limited staff presence, and is unable to respond to new cases of violence against children. In the West Bank, there has been a complete withdrawal of international protective presence actors and a noticeable absence of humanitarian actors in communities, increasing exposure and vulnerability of communities to violations including settler violence, arbitrary detention and demolitions. Legal aid providers have had to suspend activities involving in-person interaction, including 'walk in clients' for counselling and paralegal services.

Protection concerns



Cluster partners report a further deterioration in **mental health and psychosocial wellbeing** (MHPSS) of the protected population as the COVID-19 pandemic creates many additional stress factors (including social isolation, health-related fears, loss of livelihoods, and stigma and discrimination) and aggravates pre-existing protection concerns including gender-based violence and issues around child protection.



Information suggests increases in **gender-based violence** (GBV) and violence against children due to heightened tension in the household with fears about the virus, food insecurity, increased poverty, overcrowding and quarantine measures. Several GBV service providers in the oPt report an increase in the number of GBV cases, and calls to hotlines have reached quarterly averages within weeks. For women, recently released from Gaza prisons, there are concerns that some are returning to live with extended families in potentially difficult and hostile environments, without adequate protection measures in place and challenges for partners to conduct outreach to the households.



Broader **child protection** (CP) risks have increased with the closure of schools and disruption of work at childcare or family centres across the oPt. In Gaza, there is a chronic lack of safe places and recreational areas for children. The disruptions and related mental health stressors increase risks to children such as anxiety, trauma, psychosocial relapse and risks of increased violence in the home.



Residents of **refugee camps** and other densely-populated areas have serious difficulty practicing social distancing and adequate hygiene and thus have a higher risk of contagion. Quarantine measures add further stress in homes that are overcrowded and in poor condition.



In **quarantine sites**, protection risks increase for those already vulnerable including for women and children at risk of violence, and people with disabilities and special needs. Those in formal quarantine in Gaza, where the quarantine duration has been extended to 21 days, express concerns about their families being left behind without any breadwinner/caregiver or being separated from their children.



Existing barriers to access services for **persons with disabilities** are being further exacerbated by COVID19 movement restrictions. Rapidly opened quarantine sites raise real concerns about accessibility, reasonable accommodation and access to health services for persons with disabilities.



For vulnerable groups, lack of **access to information** is a concern, as well as their capacity to understand the information to ensure effective participation through the various measures in place to respond to the pandemic including persons with disabilities, the elderly and people in the Access Restricted Area of Gaza.

Existing protection **concerns related to the occupying power** continue and are in some instances exacerbated by the COVID 19 pandemic. These include:

- Concerns over the adequacy of measures to protect the right to health of Palestinian detainees in Israeli detention, including a failure to release detainees to reduce crowding. Restrictions on detainees' abilities to contact family and lawyers form another protection concern.
- Concerns over ISF operations and arrests, including of children, in the West Bank including East Jerusalem, and inconsistent protection measures by the ISF to avoid spreading infection during these operations.
- A spike in settler violence in the West Bank in the context of a lockdown imposed by the Palestinian Authority, and concerns that by not abiding by movement restrictions, settlers could be spreading the virus.
- Continuing demolitions that displace people and undermine efforts to contain the virus.

Protection Cluster Response

- GBV, CP and MHPSS providers are adapting their modalities to remote delivery, providing psychological consultations, expanding toll-free helpline services and rolling-out social media, radio and TV awareness campaigns, remote remedial education and recreational activities for children including to remote communities.
- The GBV sub-cluster established an emergency GBV service directory and disseminated COVID-19 GBV messages in dignity kits and on social media, radio, and TV. A Google Drive with Gender and GBV material for the COVID-19 response has been established (available [here](#)). In an example of an immediate protection response, GBV partners have arranged an apartment for a woman released from a shelter. Partners undertake daily follow-up calls with female and juvenile detainees, released on home leave as a result of the crisis.
- \$300,000 secured from the Humanitarian Fund for GBV / CP responses in Gaza quarantine sites includes distribution of dignity kits, recreational kits for children, cash protection, referral training for frontline staff.
- A cluster member established a MoU with DFAs to provide remote psychosocial support and GBV counselling to families in quarantine sites and developed a tool to collect disaggregated data and vulnerability information from arrivals into Gaza to inform appropriate services for people entering compulsory quarantine sites.
- Across the West Bank, organizations have provided psychosocial support to hundreds of families, including support to children and managing stress linked to COVID-19. CBO partners in East Jerusalem work as part of local emergency teams providing CP/MHPSS interventions for children exposed to increasing ISF violence.
- Scale up of the Legal Taskforce advocacy with Israel on suspending demolitions in Area C; legal and family access to Palestinian prisoners including minors, protection from settler violence; health access in seam zones.
- Mine Action partners developed and distribute messaging on COVID 19 prevention and awareness. ERW Risk Education activities now include basic COVID-19 awareness messaging, and a poster is being circulated.

This report is consolidated by the Protection Cluster oPt based on preliminary information and is subject to change based on further verification.