



unrwa  
الأونروا

# updated unrwa flash appeal for the covid-19 response

march-july 2020



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## About UNRWA

UNRWA is a United Nations agency established by the General Assembly in 1949 and is mandated to provide assistance and protection to a population of some 5.6 million registered Palestine refugees. Its mission is to help Palestine refugees in Jordan, Lebanon, Syria, West Bank and the Gaza Strip to achieve their full potential in human development, pending a just solution to their plight. UNRWA services encompass education, health care, relief and social services, camp infrastructure and improvement, microfinance and emergency assistance. UNRWA is funded almost entirely by voluntary contributions.

**Cover Photo:** UNRWA student in the West Bank fills supplementary papers that she receives from teachers in remote and hard to reach areas so that she can continue studying. © 2020 UNRWA Photo

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# 1. situation overview

The COVID-19 pandemic is an unprecedented global public health crisis. As of 5 May, there have been more than 3.5 million confirmed cases around the world and 245,150 deaths reported to the World Health Organization.<sup>1</sup> Almost all countries have now been affected, including the five fields of UNRWA operation, i.e. Gaza, Jordan, Lebanon, Syria and West Bank, including East Jerusalem, and neighbouring countries (see Box 1, below).

Many nations with advanced health systems have struggled to cope with the spread of the virus, with demands for treatment and the need for testing often outstripping supply. Those with weaker systems are far less well equipped to respond and could quickly be overwhelmed if the disease follows the same trajectory as it has in countries already affected. In many of UNRWA's fields of operation, the disease is placing additional strain on already overstretched and underfunded health systems. Whilst there have not yet been major outbreaks reported within Palestine refugee communities, the risk of escalation and rapid spread remains high in all fields. At the same time, the economic impact has been devastating and continues to worsen.

UNRWA launched its first COVID-19 flash appeal on 17 March, seeking US\$14.1 million to respond to immediate health and hygiene impacts of the pandemic.

In response to the evolution of the pandemic across the Agency's fields of operation and the health and

socio-economic impacts on Palestine refugees, UNRWA has revised and expanded its COVID-19 flash appeal. The initial appeal focused primarily on the immediate and direct health and hygiene consequences of the pandemic. This update provides a revised assessment of, and response to, needs in the areas of health, hospitalization, water, sanitation and hygiene and education for a further three months. In addition, as the socio-economic consequences of the public health crisis become increasingly apparent, the Agency is expanding its response to include cash and food assistance for vulnerable populations. This covers existing caseloads whose needs have increased and others who have been pushed into poverty.

The appeal does not address the wider economic or social impacts of the crisis but serves as a bridge to the longer term recovery and stabilization planning and programming that will be required.

We underscore for all of our partners that the urgent activities presented in this appeal can only be implemented if the Agency's Programme Budget receives contributions in the amount required to sustain operations for the duration of this appeal.

Through this revised flash appeal, UNRWA requires US\$ 93.4 million to cover its COVID-19-related humanitarian operations from March-July. This appeal supersedes the original appeal issued on 17 March 2020.

## Case numbers and deaths by UNRWA field of operation, as at 6 May 2020

**Jordan:** 471 confirmed cases; 9 deaths;  
4 confirmed cases amongst Palestine refugees

**Lebanon:** 741 confirmed cases; 25 deaths;  
7 confirmed cases amongst Palestine refugees

**Syria:** 44 confirmed cases; 3 deaths; 0 confirmed cases amongst Palestine refugees

**West Bank, including East Jerusalem:** 354 confirmed cases; 2 deaths; 34 confirmed cases amongst Palestine refugees

**Gaza Strip:** 17 confirmed cases; 0 deaths; 15 confirmed cases amongst Palestine refugees



## 2. socio-economic impacts of the covid-19 pandemic

The COVID-19 pandemic has brought major social, economic and financial shocks, with major long term consequences. It has precipitated the rapid slide of the world economy into a major recession, described by the IMF on 14 April as the worst for nearly a century.<sup>2</sup> Entire sectors have essentially shut down, upending markets, disrupting supply chains and causing commodity prices to plummet. With oil prices at historic lows, the United Nations Economic and Social Commission for Western Asia (ESCWA) has estimated that the Arab region may see a drop in gross domestic product of US\$42 billion this year and total job losses of 1.7 million. The economic slowdown caused by the virus is expected to force wages down and also decrease the flow of remittances, which is an important source of income across all UNRWA fields of operation.<sup>3</sup>

Quarantine and social distancing measures enforced by governments to mitigate and suppress the spread of the virus are having severe impacts on lives and livelihoods, leading to significant increases in unemployment and leaving over one billion children out of school.<sup>4</sup> Over 540,000 children and youth who study in UNRWA schools and vocational training centres across the region have been unable to attend school since mid-March.

Across the world, the crisis is exacerbating pre-existing vulnerabilities. The poor, those lacking access to basic social protection, dependent on informal employment or living in densely populated areas are particularly at risk, as are refugees, displaced persons and those living in fragile and conflict affected states. This includes many Palestine refugees registered with UNRWA in Gaza, Jordan, Lebanon, Syria and the West Bank, including East Jerusalem, who are some of the most vulnerable populations in the Middle East region. They do not have the financial means to absorb the financial shocks created by the COVID-19 pandemic and cope with prolonged periods of lockdown, with potentially catastrophic consequences for their physical, social and economic well-being.

Rates of poverty within the Palestine refugee popul-

ation – often associated with bad health outcomes – are high, as is joblessness. Many of those who do work are employed in the informal sector and rely on daily labour and casual work to secure their minimum food requirements and living expenses. They are in immediate danger of having their livelihoods destroyed. Families with high dependency ratios, including those with children, elderly and headed by females or persons with disability, are particularly at risk, as they are more likely than others to suffer from poverty or other forms of deprivation. Housing conditions amongst Palestine refugees are also typically poor, with many shelters overcrowded and lacking the space to isolate sick family members. Refugees who do not enjoy full citizenship status in host countries face the additional risk of being excluded from public support programmes.

COVID-19 also represents a serious threat to populations already facing humanitarian stress. At the start of 2020, around 1.8 million Palestine refugees (almost one-third of the total registered population) were in receipt of humanitarian aid or social welfare assistance provided by UNRWA. This includes one million refugees living under blockade in Gaza, close to half a million affected by the Syria conflict – inside the country, as well as in Lebanon and Jordan – and around a quarter of a million abject poor across the five fields of UNRWA operation, who are unable to meet their basic food needs.

The pandemic is also resulting in an increase in the protection threats facing groups with multiple overlapping vulnerabilities. This includes persons with disabilities, those at risk of domestic and intimate partner violence and the elderly, as well as those lacking civil documentation. The risk of sexual exploitation and abuse may have also increased, as evidenced in other crisis situations. Confinement, restrictions on movement and isolation impact on these groups in different ways, such as through reduced access to services, loss of income, increased distress, anxiety and psychosocial needs.



*A Palestine refugee receives care at the UNRWA Jerusalem health centre. © 2020 UNRWA Photo by Louise Wateridge*

### **A snapshot of poverty amongst Palestine refugees**

In **Syria**, an UNRWA survey conducted in 2017/18 found that 74 per cent of Palestine refugees live on less than US\$ 2 per person per day, rising to 91 per cent without cash assistance provided by UNRWA. One in four families are female headed and one in five headed by an elderly person. These groups are largely dependent on humanitarian aid with no means to generate income. Among those employed, almost half do not have a fixed income, and rely on daily paid or casual labour in the informal economy.

In **Lebanon**, poverty rates amongst Palestine refugees are expected to have increased considerably from the 65 per cent recorded in 2015.<sup>5</sup> Since 2019, employment in the informal sector, on which most Palestine refugees depend, has been curtailed due to new legal requirements, whilst the deep economic crisis that is engulfing the country is further impacting on the economic situation of the population.

In **Gaza**, over half the population live below the poverty line and one in three are in deep poverty and unable to meet their minimum requirements of food, clothing and housing.<sup>6</sup> The equivalent rates in the West Bank are 14 per cent and six per cent respectively. The labour market in both Gaza and West Bank is already severely constrained, due to blockade and occupation, with many working informally. Employment has been further impacted by increased access restrictions.

In **Jordan**, official poverty has been estimated at 16 per cent.<sup>7</sup> According to a survey conducted by FAFO in 2013,<sup>8</sup> the incidence of poverty amongst Palestine refugees in Jordan was twice the national average in Palestine refugee camps. At that time, poverty in camps was 30.9 per cent, rising to 53.1 per cent in Jerash camp, which is inhabited by so-called “ex-Gazans”, i.e. Palestine refugees who fled Gaza to Jordan during the 1967 hostilities and who do not hold Jordanian citizenship.

## 3. the agency's immediate response

Following preparedness plans developed in February with technical input from WHO, in early March 2020, UNRWA made a number of adjustments to services across all fields of operation. These changes are designed to mitigate the spread of the virus whilst allowing for the safe delivery of critical and lifesaving assistance.

Personal Protective Equipment (PPE) has been distributed to thousands of front line health staff; triage systems have been introduced in all health centres (HCs) to screen patients with respiratory symptoms and minimize contact with others; non-critical health services have been suspended and telemedicine procedures introduced to reduce footfall at clinics. In Jordan, the only field where UNRWA health centres closed for a period of time, clinics are now slowly re-opening for some essential services (e.g. vaccination) in line with national instructions. Whilst clinics were closed, the Agency delivered life-saving drugs directly to the homes of patients with Non-Communicable Diseases (NCD), maintaining access to vital medicines.

To avoid any additional public health hazard, sanitation works and solid waste collection have continued in all Palestine refugee camps, with enhanced protective measures for sanitation workers.

Cash and food assistance programmes for the most vulnerable have been maintained in all fields. This includes those supported under regular (Social Safety Net) and emergency appeal-funded programmes, who number around 1.8 million. In Gaza, where UNRWA provides food aid to one million Palestine refugees each quarter, house-to-house deliveries are taking place, to avoid staff and beneficiaries gathering at crowded distribution centres. Measures to enforce social distancing and improve cleanliness and hygiene have also been introduced at cash and food distribution centres in Syria. Funding has also been made available for cash distributions for approximately 400,000 add-

itional Palestine refugees in Jordan, Lebanon and the West Bank, who fall outside of government assistance programmes.

In order to ensure to the fullest extent possible the continuity of education to 533,342 students enrolled in UNRWA schools and 8,270 young people in Technical Vocational Education and Training (TVET) centres, the UNRWA Education in Emergencies (EiE) approach, developed over the last nine years in response to conflicts in Syria and Gaza, has been reconceptualised to meet the specific challenges of the COVID-19 crisis. This approach has a number of key areas, all of which remain relevant in the COVID crisis: self-learning, psychosocial support, health and safety, TVET, and monitoring and evaluation.

The Agency is ensuring that protection principles are mainstreamed and integrated in the response, and that special attention is paid to the needs of the most vulnerable. Initiatives to raise awareness on and prevent gender-based violence (GBV) have been launched across all fields; hotlines and remote modalities for Mental Health and Psychosocial Support (MHPSS) services and referral of protection cases have been also set up so that Palestine refugees can continue to seek appropriate support whilst social distancing measures remain in force. The Agency has also reviewed guidance from the Inter-Agency Standing Committee on Protection from Sexual Exploitation and Abuse (PSEA) in the context of COVID-19, which will inform the response. UNRWA continues to engage with the refugee community to raise awareness on COVID-19, promote proper hygiene practices and highlight the importance of social distancing as a preventive measure to contain the outbreak.



## 4. response strategy

The Agency's response to the COVID-19 pandemic is guided by the humanitarian principles of humanity, neutrality, impartiality and independence.

The Agency is crucial to the public health system in all of its fields of operation and will continue to align its response with national plans. Host governments have emphasized the need for UNRWA to play a strong, active role in preventing the possible spread of COVID-19 among the refugee population and addressing related needs resulting from the health crisis.

UNRWA also continues to actively participate in humanitarian coordination mechanisms in all fields and at the regional level for the 3RP response to the Syria crisis. The requirements set out in this appeal are informed by the field-level inter-agency humanitarian appeals led by OCHA and WHO, and are reflected in the May 2020 update of the Global Humanitarian Response Plan. As a member of the UN Sustainable Development Group, the Agency is also committed to aligning its response with that of the wider UN development system.

Activities included in this appeal are additional to requirements included in the Agency's 2020 emer-

gency appeals for the oPt and Syria regional crisis.<sup>10</sup>

Through this appeal UNRWA seeks funding for immediate needs to cover continued running of essential primary health, education and water and sanitation activities and also for relief assistance to mitigate the socio-economic hardship created by the pandemic.

Under this Appeal, the Agency is also seeking funding to address **needs that will arise in the event of a severe outbreak of COVID-19**. These include additional hospitalization costs and COVID-19 testing in Lebanon, where Palestine refugees do not have access to national health systems and setting up and running isolation centres in Lebanon and Jordan. Funds for these activities will only be used as the situation requires and, if necessary, redirected to other interventions in the appeal.

A narrative report on activities funded through this appeal will be produced within six months of the end of the flash appeal period.



UNRWA al-Zawaidah Distribution Centre in Gaza. © 2020 UNRWA Photo by Khalil Adwan

## 5. strategic objectives

The UNRWA response is guided by the following strategic objectives:

### **Strategic Objective 1: Contain the spread of COVID-19 and decrease morbidity**

- Prevent further transmission of COVID-19 and protect front line staff through the promotion of proper hygiene and cleaning practices, social distancing, triage and PPE at UNRWA Health Centres
- Ensure that Palestine refugees affected by COVID-19 have access to adequate health facilities and treatment
- Support for care of Palestine refugees with COVID-19 as required, through home care and the adaptation and management of isolation facilities, and support for quarantine centres
- Ensure that Palestine refugees continue to have access to primary health care through The Agency's health system and that essential medicines remain available throughout the crisis, with delivery systems adapted as required
- Support the secondary and tertiary health care needs of Palestine refugees, including through increased hospitalization care for vulnerable groups
- Ensure that sanitation, hygiene and waste management services continue in Palestine refugee camps to avoid additional public health hazards

**Strategic Objective 2: Ensure that Palestine refugees are able to meet their basic needs, mitigating a further deterioration in their humanitarian and socio-economic conditions, with a particular focus on the most vulnerable**

- Support vulnerable households' capacity to meet their requirements for food and other needs, through cash and food assistance

- Adapt delivery modalities for delivery of food and cash assistance to mitigate the risk to beneficiaries

### **Strategic Objective 3: Palestine refugees continue to access quality, inclusive and equitable education within the context of the COVID-19 crisis**

- Ensure that UNRWA schools and TVET students continue learning through the availability of quality self-learning materials, and support to parents and teachers to manage the self-learning process
- Support the psychosocial (PSS) well-being of children and students through the development of specific PSS resources and the availability of PSS counsellors
- Continue to raise students' awareness of health and hygiene behaviours to help prevent the transmission of COVID-19
- Ensure that, in case of any school re-opening, proper hygiene and health practices remain in place in all UNRWA educational installations, and that installations are deep-cleaned and disinfected
- Further strengthen the Monitoring and Evaluation of the Education COVID-19 response.

### **Strategic Objective 4: Ensure that Palestine refugees are protected from the most severe impacts of the pandemic**

- Ensure protection is mainstreamed throughout the response

## 6. priority interventions

The UNRWA response includes the following priority interventions:

### Health

UNRWA runs 141 primary health centres in Gaza, Jordan, Lebanon, Syria and the West Bank, including East Jerusalem, and one hospital, in Qalqilya in the West Bank. The Agency's health services are crucial to the public health system in all fields of operation: in 2019 they provided an estimated 8.5 million patient consultations for around three million Palestine refugees.

Health workers are on the front line of the response to the outbreak and are exposed to hazards that increase their risk of infection. Strengthening preparedness at UNRWA health centres to ensure that staff are equipped to assess suspected cases is critical for their safety and that of Palestine refugee patients. To help UNRWA health services continue to provide primary health services and respond to COVID-19, four areas of focus have been identified that need immediate support:

**Personal Protective Equipment (PPE).** UNRWA health centres continue to provide essential primary health care to patients, including those with respiratory symptoms. PPE, including masks, eye protectors, gowns and gloves, is needed for 3,000 UNRWA health workers, and patients visiting health centre displaying respiratory symptoms, as per WHO recommendations. The Agency is committed to rational use of PPE, as current global and local stockpiles are insufficient to meet requirements, and is providing different types of PPE to different staff categories, based on risk exposure. The Agency will also maintain enhanced hygiene and disinfection practices at its health centres to reduce the risk of transmission of COVID-19. A small quantity of PPE will also be made available for UNRWA Headquarters to ensure safe return to the office, should the situation allow and telecommuting is discontinued

**Provision of medication.** Before the COVID-19 crisis, UNRWA was providing one-month of chronic

medication to NCD patients. Larger quantities of m medications are now being made available - up to three months' needs - to reduce visits to health centres for at-risk patients. In Jordan, where health centres (HCs) have been closed for a period in line with government directives, home delivery mechanisms have been introduced. While the HCs are slowly re-opening, following the relaxation of some of the lockdown measures introduced by the Government, home delivery of medications will continue until further notice, to avoid increased visits at the HCs.

Procurement practices are also under review, due to ongoing movement restrictions affecting transportation and borders as well as export restrictions. These have increased the risk of delay and potential stock out of medicines normally sourced from international markets. Local procurement will be used as needed; where medicines are not available in the local market, air freight may be needed (instead of sea freight) to expedite delivery from international suppliers, which could result in additional costs. In Gaza and Lebanon, where the risk of potential supply chains is highest, the Agency is planning to procure additional quantities of essential medicines to avoid stock outs.

**Hospitalization.** The UNRWA hospitalization support programme provides financial support to Palestine refugees who are otherwise unable to access secondary and tertiary health care without incurring catastrophic health expenditures. The Agency has contracts with national service providers in all fields to provide care at subsidized cost. With national health systems currently completely focused on COVID-19, additional funding is required for hospitalization support in Gaza, Jordan, Syria and Lebanon, to ensure continued access to secondary and tertiary care. In Lebanon, where Palestine refugees are not eligible for national health services, the costs of testing and treatment for Palestine refugees infected with COVID-19 will also be supported. Funds will be used on an as-needed basis.



*UNRWA is door-to-door distribution of medicine and telehealth support is provided via helplines in Syria. © 2020 UNRWA Photo*

**Isolation and quarantine centres.** In anticipation of potential widespread outbreaks and support of national response plans, UNRWA is preparing to support quarantine and isolation centres in some fields, as outlined below. In all cases, centres will be implemented in compliance with WHO and national authority regulations, and funds used on an as-needed basis.

- In **Lebanon**, in partnership with Médecins Sans Frontières (MSF), UNRWA is preparing to set up and manage an isolation centre to treat patients with mild or moderate symptoms of COVID-19 at its Siblin training centre.
- In **Gaza**, UNRWA will provide PPE kits and essential medicines to quarantine centres run by the Ministry of Health (MoH) that are used to isolate Palestine refugees returning to Gaza from other locations who cannot be safely quarantined at home.
- In the **West Bank**, UNRWA will ensure that Palestine refugees who need to self-quarantine at home have sufficient hygiene supplies, and, if needed will provide support to community run quarantine centres in Palestine refugee camps, including non-food items (NFIs), hygiene materials and cash for food.
- In **Jordan**, a provision for the establishment of an isolation centre in partnership with specialized actors has been included in this appeal, should hospitals become overwhelmed.

### **Water, Sanitation and Hygiene**

UNRWA will ensure that sanitation works continue in refugee camps in all fields, with adequate protection made for sanitation labourers. In some fields, the Agency will look to hire additional staff, to handle increased generation of household waste whilst families are isolated. In Syria and for Palestine refugees in King Abdullah Park (KAP) in Jordan, UNRWA will also provide hygiene kits for the most vulnerable as an additional measure to ensure proper hygiene practices and reduce the risk of transmission, as per inter-agency plans for these locations.

### **Cash and Food Assistance**

In order to mitigate a further deterioration in the humanitarian situation of vulnerable Palestine refugees, UNRWA is seeking funds to expand relief assistance across its fields of operation, targeted at the most vulnerable. This includes: (1) supplementary support for populations already in receipt of assistance, either through the regular Social Safety Net Programme or the Emergency Appeals for the occupied Palestinian Territory and Syria Regional Crisis, and (2) assistance for additional caseloads in Lebanon, Jordan and West Bank, including East Jerusalem, who fall outside of government assistance programmes, as follows:

- In **Gaza**, funding will support the continued implementation of house-to-house delivery of food parcels and for a buffer stock to reduce the risk of pipeline breaks. One-off cash assistance will also be provided to 15,000 of the most vulnerable households.
- In the **West Bank**, food vouchers and in-kind food parcels for most vulnerable refugees whose food security has been negatively affected by movement restrictions and loss of employment.
- In **Syria**, top-up cash assistance for 418,000 Palestine refugees already receiving assistance through the UNRWA Syria Regional Crisis Response.
- In **Lebanon**, cash assistance for all Palestine refugees in the country, including Palestinian refugees from Syria, and other persons eligible for UNRWA services. In total an estimated 285,000 persons will be assisted.
- In **Jordan**, cash assistance for around 113,000 Palestine refugees, comprising vulnerable categories of ex-Gazans, as well as Palestinian refugees from Syria and Iraq.



A young Palestine refugee receives information on healthy practices during the COVID-19 pandemic at the Damascus Training Centre. © 2020 UNRWA Photo

## Education

In line with host government directives, all UNRWA schools and Technical Vocational Education and Training (TVET) centres have been closed since mid-March in all five fields, impacting 533,342 UNRWA pupils (49.8 per cent girls), 8,270 youth at TVET centres and 1,840 university students.

The Agency has extensive experience of delivering education in emergency situations, gained over the past seventy years in a region buffeted by crises. UNRWA has a renowned Education in Emergencies (EiE) approach, which forms the basis of its response to the educational impacts of COVID-19. Five areas of focus have been identified which will continue to frame the response, as follows:

- **Continuity through Self-Learning:** Self-learning is a key modality to teach children when they cannot physically reach their schools. Over the past nine years, UNRWA has developed a range of student materials – text, online, and video – collectively known as its Self-Learning Programme (SLP), as well as guidance for educators. Priorities for the flash appeal period include development of Field specific self-learning materials, ensuring accessibility to self-learning materials for students and families with limited access to internet, electronic devices, and electricity cuts.

- **Psychosocial Support:** Children, youth and education staff face new and additional types of stress during this period. UNRWA has always emphasised face-to-face support and social interaction with peers as key dimensions of its psychosocial support. In conditions where such approaches

are no longer possible, new models are being used. School counsellors continue to support the psychosocial needs of students through alternative means of communication.

- **Health and Hygiene Safety:** UNRWA is raising student awareness on health and hygiene to help prevent the transmission of COVID-19, actively engaging students to develop and share their own messages, and planning for additional hygiene and sanitation measures needed for when educational institutions reopen.

- **Technical and Vocational Education and Training (TVET):** TVET students will benefit from the online delivery of the TVET programme by accessing soft copies of self-learning materials and website links to relevant resources for the theoretical and practical elements of their courses. The Agency is working to identify suitable and quality self-learning materials and overcome challenges faced by students in accessing these resources.

- **Monitoring and Evaluation (M&E):** An indicator framework for M&E of the delivery of education in the COVID-19 crisis and for measuring the impact of the EiE approaches and initiatives will be developed, using the existing EiE Bank of Indicators.<sup>11</sup> The UNRWA EiE Bank of Indicators is available on the UNRWA website.<sup>12</sup>

The Agency's response under these five strands will be adapted to any changes in circumstances, including Ministry of Education directives related to the physical reopening of schools or summer catch-up classes during the period covered by the flash appeal.

## Protection

As noted above, the COVID-19 pandemic is resulting in a rise in the vulnerabilities of Palestine refugees, particularly for the most vulnerable. Protection teams are engaging with communities, assessing vulnerabilities and monitoring access to services, with a special focus on the most vulnerable groups. Outreach materials will be developed and distributed alongside other services (delivery of food and medicines, self-learning programmes) to explain referral pathways and available hotlines, raise awareness and reduce reliance on negative coping mechanisms, including child marriage, child labour and unsafe labour.

Mental health and psychosocial support (MHPSS) and counselling services will be maintained through

remote modalities. Communication with communities will be supported through dedicated hotlines to provide information on available services and phone credits and data for GBV focal points to address GBV, child protection and domestic violence cases, including those faced by persons with disabilities. Assistance will primarily be provided remotely; however, clinics will remain open and social workers be assigned to serve the most urgent cases directly when possible.

In some fields, dedicated budget lines have been identified for protection, whereas in others protection activities are integrated into other sectors.

### Staff care activities in times of COVID-19

UNRWA has one of the largest workforces of any UN agency in the world, with the majority of staff - doctors, nurses, teachers and sanitation workers – engaged in front line delivery and performing critical duties during the crisis. The Agency recognises the sudden changes staff are experiencing in their external and work environments, including changes to working practices, and the stress that this creates, on professional and personal levels.

With most staff working remotely as a result of the pandemic, additional psychosocial support is needed as they adapt to a new working environment and emergency context. As a result the following activities are ongoing:

- Group staff care sessions for international staff held online and led by a team of clinical psychologists;
- Videos and support materials developed by the team of clinical psychologists shared in Arabic with area staff in online forums and a Q&A mechanism;
- One on one counseling service for international staff provided by a team of clinical psychologists;
- One on one counseling service for area staff provided by teams of area staff counsellors in all fields supervised by the team of clinical psychologists;
- Professional Peer Support Groups regularly held online at field level.

The objective of the group sessions and materials shared online is to provide staff with psychosocial support and coping strategies that could be of use to them during this time. In addition, individual counselling is being provided to respond to any psychological difficulties, stress or well-being concerns which may be related to work or impacting work. These activities are a whole systems approach and are a continuation and broadening of ongoing staff care programmes at UNRWA, which target all staff.

## 7. financial requirements

| Programme interventions                  | Gaza              | Jordan            | Lebanon           | Syria             | West Bank        | HQ             | Total             |
|--|-------------------|-------------------|-------------------|-------------------|------------------|----------------|-------------------|
| Health                                   | 6,257,345         | 868,825           | 10,240,869        | 825,114           | 1,787,160        | 44,400         | 20,023,713        |
| Hospitalization                          | 2,553,000         | 133,200           | 10,093,660        | 222,000           | 0                | 0              | 13,001,860        |
| Education in Emergencies                 | 646,353           | 754,772           | 845,197           | 422,135           | 323,971          | 0              | 2,992,428         |
| Sanitation, Hygiene and Waste Management | 222,000           | 592,407           | 558,868           | 1,550,388         | 1,278,093        | 0              | 4,201,756         |
| Cash and food assistance                 | 4,280,737         | 13,119,395        | 19,281,280        | 13,919,400        | 2,064,305        | 0              | 52,665,117        |
| Protection                               | 21,978            | 140,332           | 66,851            | 46,463            | 0                | 0              | 275,624           |
| Risk Communication                       | 0                 | 0                 | 0                 | 0                 | 0                | 206,793        | 206,793           |
| Monitoring and Evaluation                | 0                 | 0                 | 0                 | 0                 | 0                | 66,600         | 66,600            |
| <b>Total (US\$)</b>                      | <b>13,981,413</b> | <b>15,608,931</b> | <b>41,086,725</b> | <b>16,985,500</b> | <b>5,453,529</b> | <b>317,793</b> | <b>93,433,891</b> |

**Note:** Financial requirements include 11 per cent indirect support costs.



# 8. field interventions

## Syria

### **Strategic Objective 1: Contain the spread of COVID-19 and decrease morbidity**

#### **Health**

UNRWA will provide 430 frontline health staff with PPE, including medical masks, eye protector, gowns and gloves, ensure adequate supplies of soap and alcohol-based hand rub at health centres and also increase cleaning and disinfection of health centres. PPEs, sanitization materials and disinfectants will also be provided to other frontline staff, including guards, distribution workers and other dealing directly with beneficiaries.

To minimize the risk of transmission for the most vulnerable, and to decrease patient flow in health centres, UNRWA is delivering medications directly to vulnerable Palestine refugees, including the elderly, chronic disease patients and others who require special assistance. The Agency estimates that it will reach up to 8,000 refugees with this support over the flash appeal period.

Provision is also made to meet the hospital costs of up to 1,000 at-risk Palestine refugees, at an estimated average cost of US\$ 200 per patient. This will be used either in case of an outbreak of COVID-19 amongst Palestine refugees, or in the event of a surge in hospitalization needs and referrals for other secondary and tertiary treatments once movement restrictions are eased.

#### **Water and Sanitation**

To avoid additional public health hazards, funding is needed to maintain sanitation and solid waste management services in the ten accessible Palestine refugee camps in Syria. This requires the continued availability of equipment, including compactors and tractors and additional sanitation labourers, in the event that the existing workforce needs to be reinforced or is unable to work due to sickness or movement restrictions. All sanitation labourers will receive the necessary PPE.

UNRWA will also distribute hygiene kits specifically addressing needs related to COVID-19 to approximately 39,000 at-risk households, including those headed by older persons, headed by persons with disabilities and households with persons with disabilities, in line with inter-agency plans.

### **Strategic Objective 2: Ensure that Palestine refugees are able to meet their basic needs, mitigating a further deterioration in their humanitarian and socio-economic conditions, with a particular focus on the most vulnerable**

#### **Cash assistance**

Preventive measures introduced by the Government of Syria to mitigate the risk of spread of COVID-19 include curfews and shuttering of all but critical businesses. These measures are having direct and immediate impacts on the lives of Palestine refugees, who were already facing high levels of humanitarian need. Two thirds of the Palestine refugee population in Syria has been internally displaced since the start of the conflict, and 40 percent remain displaced.

UNRWA is already providing approximately 418,000 Palestine refugees in Syria with emergency cash assistance to support them in meeting their basic needs, including food and rent costs.<sup>13</sup> The current ban on public transport is causing many Palestine refugees to incur additional costs, including to collect the cash and food assistance provided by UNRWA. This is compounded by increases in prices of basic commodities and a scarcity of some items, including eggs, milk, cheese and legumes, as well as the continued devaluation of the Syrian pound.

In order to mitigate the additional socio-economic hardship caused by the current COVID-19 crisis, on top of almost universal poverty, through this flash appeal the Agency will provide an additional one-off cash allowance of US\$30 per person to all Palestine refugees in Syria.



A young UNRWA student in Syria completes a distance learning English assignment. © 2020 UNRWA Photo

### **Strategic Objective 3: Palestine refugees continue to access quality, inclusive and equitable education within the context of the COVID-19 crisis**

#### **Education in Emergencies**

During the 2019 – 20 academic year, UNRWA is providing education to 50,143 students in Syria at 103 schools and technical and vocational courses to 1,271 youth at the UNRWA Damascus Training Centre. As all educational institutions are now closed, the Agency is using its EiE approach to ensure – to the fullest extent possible – that Palestine refugee children and youth can continue to learn, through its Self-Learning Programme and online training, including the provision of psychosocial support to students, and a focus on health and hygiene. Self-Learning Materials (SLMs) are being made available to all students, primarily online. Given the recent decision of the Government of Syria to terminate the ongoing scholastic year for students in transitional classes, UNRWA will focus on ensuring that Palestine refugee students in ninth grade are adequately supported through the remaining period of schooling and in preparation for exams.

To ensure equitable access, and given the socio-economic vulnerabilities of Palestine refugee families in Syria, the Agency will cover internet connection costs for 9th grade and TVET students; where there are connectivity issues, hard copies of SLMs will be delivered. Tablets will be purchased for approximately 100 most vulnerable TVET trainees, to allow them to participate in the Agency's online programmes. Internet access will also be provided to UNRWA teachers and instructors as they continue to deliver education services while working remotely, so that they can support children and youth with online learning. Further work is needed to strengthen the student support system around the use of SLMs as well as student assessment.

The Agency PSS counsellors will provide Palestine refugee children and youth with group counselling sessions, primarily via instant messaging platforms, as well as individual sessions by phone when needed. Communication costs of PSS counsellors will also be covered.

Deep cleaning and disinfection of all 103 schools and training centres is planned ahead of reopening. Enhanced hygiene practices will also be introduced, through procurement and distribution of hygiene and sanitization items as well as continuing hygiene education for students and staff.

### **Strategic Objective 4: Ensure that Palestine refugees are protected from the most severe impacts of the pandemic**

The vast majority of Palestine refugees in Syria live in overcrowded camps or remain in displacement and are particularly vulnerable to the risk of contracting COVID-19 in case of a widespread outbreak. UNRWA will raise awareness and provide information on measures to contain and prevent COVID-19; this will be done using a range of different methods, including online platforms (e.g. Facebook and WhatsApp), as well as embedding awareness messages in regular UNRWA activities, such as emergency distribution, health services and through the self-learning programme. Awareness will also be raised on the risks of negative coping mechanisms, such as early marriage and child labour, as well as on explosive hazards, which may pose increased risks to those turning to unsafe labour practices (e.g. work in contaminated locations, collection of scrap metal). Community campaigns will be accompanied by sign language. Older persons registered with UNRWA will receive phone calls from a network of the Agency's support staff with basic information and advice on COVID-19.

Helpline and referral services will be strengthened to ensure provision of accurate and up-to-date information on UNRWA services as required. The Agency will ensure that existing protection cases continue to receive support, including case management and referrals. Assistance will primarily be provided remotely (telephone, WhatsApp); however, the most urgent cases, including GBV and child protection cases, will be served directly at UNRWA health centres, which remain open. The UNRWA-supported Family Support Offices will also continue to operate through remote modalities to provide ongoing legal advice to refugees, including on civil documentation issues.

UNRWA will ensure the needs of persons with disabilities are met throughout the crisis. In response to the suspension of in-person rehabilitation and educational services at Community Based Organisations, the Agency will work with rehabilitation specialists to continue to provide necessary assistance via telephone and through online sessions. UNRWA will also ensure prosthetic devices continue to reach to those in need through a door-to-door system. Approximately 180 children with severe disabilities, who are unable to enroll in UNRWA schools, and their families will also be provided with specific learning tools and toys normally used in the rehabilitation facilities, targeting children with partial hearing impairment, and children with articulation problems amongst others.

PSS counselling and support will be provided through a network of Relief and Social Services, Health and Education staff. This service will reach over 10,000 older persons and 5,000 persons with disabilities, amongst others. UNRWA will also roll out online protection training courses to equip front-line staff with increased knowledge on safe provision of protective services during the response.

## Lebanon

### **Strategic Objective 1: Contain the spread of COVID-19 and decrease morbidity**

#### **Health**

UNRWA will provide PPE kits to 348 health staff and maintain enhanced cleaning and disinfection at HCs. Telephone appointment systems will remain in place to reduce footfall at clinics. In the event of disruptions to global medical supply chains, the Agency will look to procure essential items from the local market to avoid any stock out.

The Agency is also seeking funds for increased hospitalization support, as Palestine refugees in Lebanon are not covered by the national health system. Support will be provided in line with Agency policy.<sup>14</sup> Planning figures are based on the scenarios used in the National Health Strategy, which assume an infection rate of 10 per cent, implying a caseload of 25,700 Palestine refugees, of whom 15 per cent will become sufficiently symptomatic and seek medical care. Whilst the vast majority (80 per cent)

of these cases will be mild/moderate (80 per cent), 15 per cent will be severe, and five per cent critical, needed care in Intensive Care Units. Provision is made to cover the costs of severe and critical cases, applying current negotiated rates with contracted hospitals, which may increase if the pandemic spreads. Funds will be used on an as needed basis.

The Agency is making plans to establish an isolation centre at the Agency's Technical and Vocational Education Training Centre in Siblin, in partnership with Médecins Sans Frontières (MSF). This will be used to treat patients exhibiting mild to moderate symptoms of COVID-19, when isolation at home is not possible, for example due to overcrowding. The centre will operate in compliance with WHO and national authority guidelines. Other UNRWA installations at camp level have also been identified that can be turned into medical isolation centres as and when needed.

#### **Water and Sanitation**

To ensure that sanitation services can be provided safely, additional PPE kits will be procured and distributed to sanitation staff, including those working in isolation centres who collect municipal and infectious waste. The Agency will also ensure that equipment and vehicles for solid waste management continue to operate and are properly maintained, to avoid any disruption in operations.

Fuel will be provided to operate generators at water plants in camps to ensure an uninterrupted supply of water to Palestine refugees for washing and cleaning, as well as maintenance as appropriate. Funds are also needed for the treatment of medical waste and for fees for special disposal of the infectious waste generated in isolation facilities.

### **Strategic Objective 2: Ensure that Palestine refugees are able to meet their basic needs, mitigating a further deterioration in their humanitarian and socio-economic conditions, with a particular focus on the most vulnerable**

#### **Cash Assistance**

The COVID-19 emergency has come at a time when Lebanon is already struggling with a collapsed eco-

nomy and financial systems, salary cuts, high rates of unemployment, a major decline in the value of local currency against the US dollar and the closure of hundreds of businesses. The COVID-19 crisis has exacerbated the impact of the pre-existing severe economic crisis facing the country, with particularly harsh impacts on Palestine refugees, who are already amongst the most vulnerable communities in the country and ill-equipped to deal with economic shocks.

Lebanon also hosts 27,700 Palestinian Refugees from Syria (PRS), who live in conditions of vulnerability, high poverty and marginalization, due to their uncertain legal status and lack of access to basic services and other forms of assistance than those provided by UNRWA.

To mitigate the additional socio-economic hardship created by the current crisis, UNRWA plans to provide emergency cash assistance to PRL and PRS in the form of:

- One round of cash assistance to all 285,000 Palestine refugees and persons eligible for UNRWA

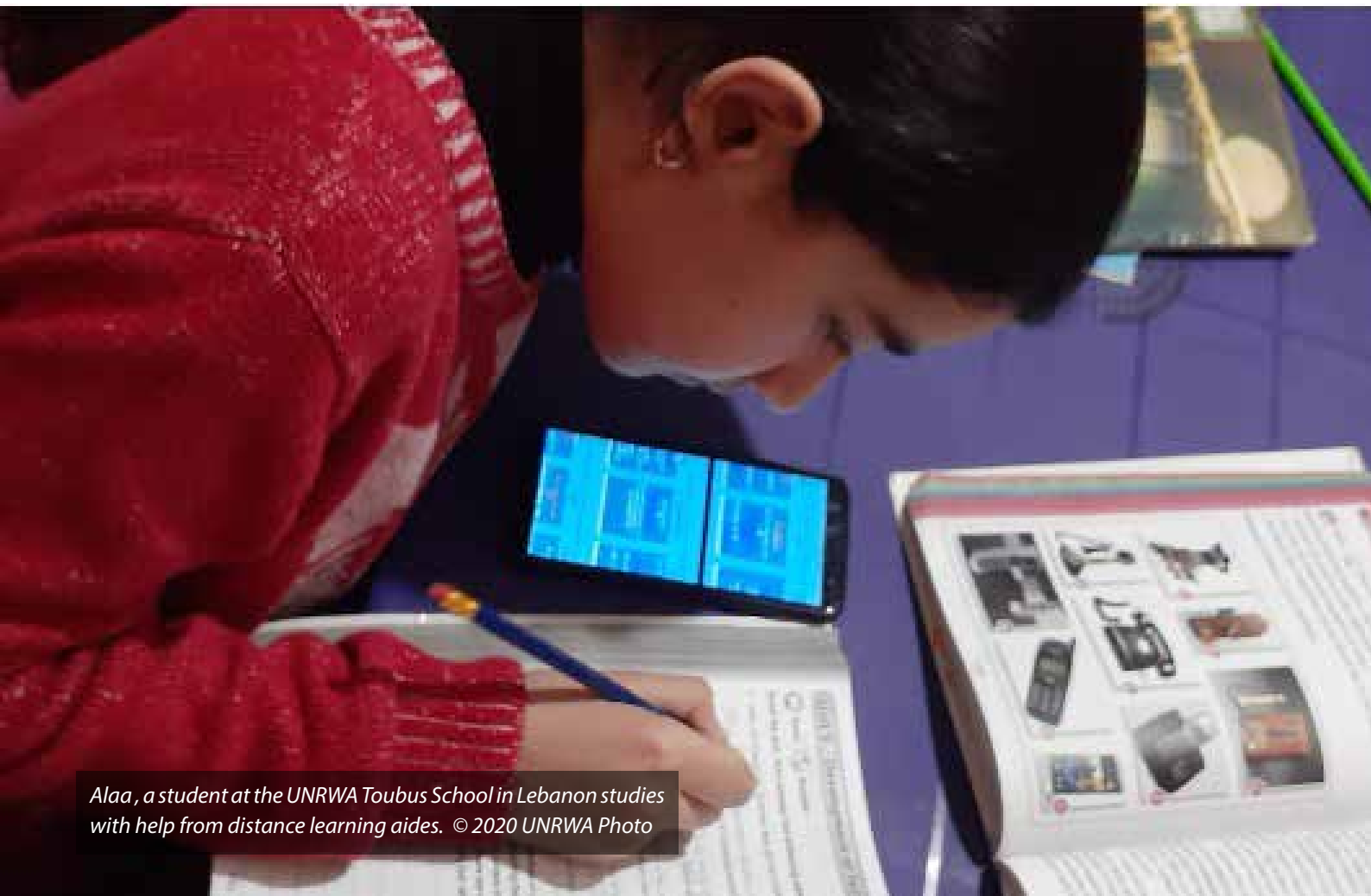
services currently residing in Lebanon: PRS and social safety net programme (SSNP) populations will receive a top-up to equal a transfer value of US\$ 35, whilst the remainder of the caseload will receive a transfer of US\$35 per person. This will cover an estimated 40 per cent of minimum food requirements.

- One full round of cash assistance of US\$ 35 to all 285,000 Palestine refugees and persons eligible for UNRWA services.

Two laptops are also required so that registration staff can access the Agency's registration database remotely to ensure that all eligible persons can receive their assistance.

**Strategic Objective 3: Palestine refugees continue to access quality, inclusive and equitable education within the context of the COVID-19 crisis**

UNRWA has activated its SLP for the 36,817 pupils who normally study in the Agency's 65 schools in Lebanon. Core subjects across all grade levels have been adapted to focus on key competencies.



*Alaa, a student at the UNRWA Toubus School in Lebanon studies with help from distance learning aides. © 2020 UNRWA Photo*

Through social media platforms, self-learning materials are being widely used by students and caregivers across all grades and core subjects. Guides for teachers, parents and caregivers have also been developed to support self-study.

Under this appeal, UNRWA will ensure that self-learning materials are available to UNRWA students, with a special focus on those who have reported difficulties with internet connection and hardware. Support to the psychosocial (PSS) well-being of children and students will continue through specific PSS resources developed to address the impact of COVID-19, and existing school counsellors (SC) will provide individual counselling sessions and group support remotely. In addition, 313 students in UNRWA TVET centres will be supported with tools to continue their education (e.g. drawing tools for trainees on construction courses), and devices to improve their access and participation in on-line learning.

When schools reopen, the Agency will ensure proper hygiene and health practices are in place at all UNRWA schools and that installations are deep-

cleaned and disinfected. The educational activities in this appeal have been designed in line with the recent announcement by the Ministry of Education and Higher Education (MEHE) that grades 9-12 will potentially resume on 25 May, with the remaining grades returning to school shortly thereafter. However, if the COVID-19 lockdown measures in Lebanon continue to be applied in the coming months, there is a possibility that there will be a continued need for education activities to be delivered remotely.

**Strategic Objective 4: Ensure that Palestine refugees are protected from the most severe impacts of the pandemic**

Protection principles are being mainstreamed across the Agency's COVID-19 response plans in Lebanon. This includes key messaging to vulnerable groups (especially older persons and persons with disabilities) as well as in the planning and operation of quarantine and isolation centres.

Under this appeal, protection monitoring, case documentation and referrals, legal counselling and



*Omar Abu Saleh, a mechanic at UNRWA Logistics Department volunteers with the sanitation team to keep Talbiyeh camp clean. © 2020 UNRWA Photo*

assessment of emergency protection cash assistance will continue through phone and online channels, wherever possible. Using existing women's committees, the Agency will also implement an outreach and messaging strategy targeting women and girls on the impact of COVID-19, aimed at mitigating increased risks related to Gender Based Violence (GBV) and Child Protection (CP). Dedicated rooms will be set up in four Women Programme Association Centres to provide remote case management and PSS support for GBV survivors, in anticipation of a potential rise in GBV cases.

In the event that the Siblin isolation centre starts to operate, the Agency will provide one-off support with onboarding items to residents, including items suggested as part of MHPSS support activities (e.g. exercise mats, reading materials, notebook and pens).

## Jordan

### **Strategic Objective 1: Contain the spread of COVID-19 and decrease morbidity**

#### **Health**

In order to further reduce the risk of virus transmission, while maintaining essential services and assistance, additional PPE kits, and hygiene and sanitation materials are needed for the Agency's frontline staff, including 666 health staff. As of the end of April, the Government of Jordan has partially relaxed some of the restrictive measures in place since the onset of the outbreak. In line with Government instructions UNRWA HCs are slowly resuming services after a period of full closure. In order to ensure the safety of staff and patients visiting the HCs, UNRWA will procure additional masks and gloves at all health facilities for patients who may not have their own protective items. UNRWA will continue to deliver essential medications to patients through house to house deliveries as needed, to limit the number of visitors to health centres.

The national health-care system is currently entirely focused on curbing the spread of the virus and processing of other medical conditions is delayed. Should the pressure on the national system continue to increase, this delay may become critical for some cases, requiring additional support for secondary and tertiary health-care for cases that cannot be treated at national hospitals. In anticipation of these

needs, a provision for increased hospitalization support has been included in this appeal to cover approximately 1,200 admissions, at an estimated cost of US\$ 100 per admission.

Additional health assistance will be provided to PRS residing in KAP,<sup>15</sup> in light of their particular vulnerability and exposure to protection risks, due to the difficult living conditions and movement restrictions they face. Hygiene items will be distributed and training on triage and case management protocols conducted at health facilities in KAP for personnel from the Jordan Health Aid Society (JHAS), who are providing the services.

To prepare for a potential surge in the number of confirmed cases, UNRWA is currently liaising with the Ministry of Health (MOH) and potential partners, including MSF, on planning to establish an isolation centre for mild to moderate cases of COVID-19 who can no longer be treated in overloaded national hospitals or self-quarantine or receive treatment at home.

#### **Water and Sanitation**

UNRWA will ensure that daily solid waste operations and environmental health services are sustained in the ten Palestine refugee camps in Jordan, which are characterized by over-crowdedness and high levels of poverty. Essential minimum requirements, include the provision of daily collection, transportation and disposal of refuse from the camps to governmental dumping sites, as well as PPE for UNRWA sanitation labourers. Additional sanitation labourers will be hired to ensure continued service provision.

### **Strategic Objective 2. Ensure that Palestine refugees are able to meet their basic needs, mitigating a further deterioration in their humanitarian and socio-economic conditions, with a particular focus on the most vulnerable**

#### **Cash Assistance**

In Jordan, most Palestine refugees hold Jordanian citizenship and have access to assistance provided by the Jordanian Government (e.g. National Aid Fund). However, those without Jordanian citizenship or facing legal status issues are particularly vulnerable and are excluded from such services.

and are excluded from such services.

This includes the following groups:

- Palestinians who left Gaza to Jordan in the aftermath of the June 1967 hostilities, known as “ex-Gazans”. They number around 166,076 people, of whom 9,158 are enrolled on the UNRWA SSNP and receive US\$ 125 per person per annum.
- PRS in Jordan, estimated to be around 17,500 individuals, for whom UNRWA is the main, and often, sole service provider. More than 90 per cent of PRS in Jordan are identified as vulnerable and, therefore, are eligible for quarterly cash assistance distributed by UNRWA and funded through the Agency’s Syria Regional Crisis Response.
- Palestine Refugees from Iraq (PRI) who were admitted into Jordan in 2003 through a royal decree. At present, 35 PRI families (157 persons) reside inside and outside Palestine refugee camps in Jordan and face severe economic restrictions, including on employment and income generating activities.

Ex-Gazans, PRS and PRI are ineligible for Government of Jordan-led initiatives for the most vulnerable populations affected by COVID-19, and are at risk of slipping into further poverty and vulnerability. To mitigate this risk, UNRWA plans to provide relief assistance to these vulnerable populations, with a focus on families with children under five; female headed households; households headed by an elderly person; and/ or households with one or more persons with disabilities among the family members.

Cash will be provided as follows:

- Ex-Gazans households in the categories above who are not enrolled in the UNRWA SSNP and PRI (87,059 persons, 24,322 families) will be provided with one-time cash-based transfers of US\$ 100 (JOD 71) per person to cover their basic needs for three months;
- Ex-Gazans already receiving support under the SSNP (9,158 persons) will be provided with top-up assistance of US\$ 31.25 to equal the US\$ 100 value transferred to the rest of the ex-Gazan population group;
- All 17,500 PRS in Jordan will also receive one-time cash support of US\$ 100 (JOD 71), to help cover

help cover their basic needs for three months.

Amounts above are aligned with the value of assistance being provided by the Government of Jordan (GoJ) through national social security systems, including the National Aid Fund (NAF).

UNRWA in Jordan conducted a remote rapid impact assessment at the end of April 2020 to better understand the effectiveness of its services during the pandemic. The findings are being reviewed alongside the results of recommendations from a recently-completed Real Time Evaluation exercise recently conducted, as part of the field’s efforts to provide a rapid and effective response to the unprecedented emergency.

### **Strategic Objective 3. Palestine refugees continue to access quality, inclusive and equitable education within the context of the COVID-19 crisis**

In Jordan, UNRWA operates 169 schools for 118,296 Palestine refugee students, including Palestine refugees from Syria, as well as two vocational training centres for 3,081 Palestine refugee youth and a teacher training facility with 1,200 students.

To mitigate the impact of school closures, the Government of Jordan has set up educational applications and platforms that schools and teachers can use to reach students remotely and limit the disruption of education. Access has been extended to UNRWA education staff and students. However, given the challenging socio-economic conditions of the most vulnerable Palestine refugees, many UNRWA students lack access to technology or good internet connectivity, creating a major obstacle for ensuring children’s right to quality education and negatively impacting learning outcomes.

Through this appeal, UNRWA will ensure that most vulnerable Palestine refugees at the Agency’s schools and vocational training centres have adequate and uninterrupted access to digital distance learning platforms through the provision of internet bundles. Furthermore, provision of information and communication technology tools (tablets) to bridge the digital gap and guarantee continuous access to remote learning, will be piloted for 400 of the most vulnerable school-aged children (e.g. Palestine refugee children under the SSN programme, ex-Gazans and PRS).



Prior to any re-opening of schools and educational institutions, UNRWA will conduct deep cleaning and disinfection of its premises and ensure that proper hygiene and health practices are implemented among students and staff, through the provision of hand sanitizer, soaps and disinfectants.

#### **Strategic Objective 4. Ensure protection is mainstreamed throughout the response**

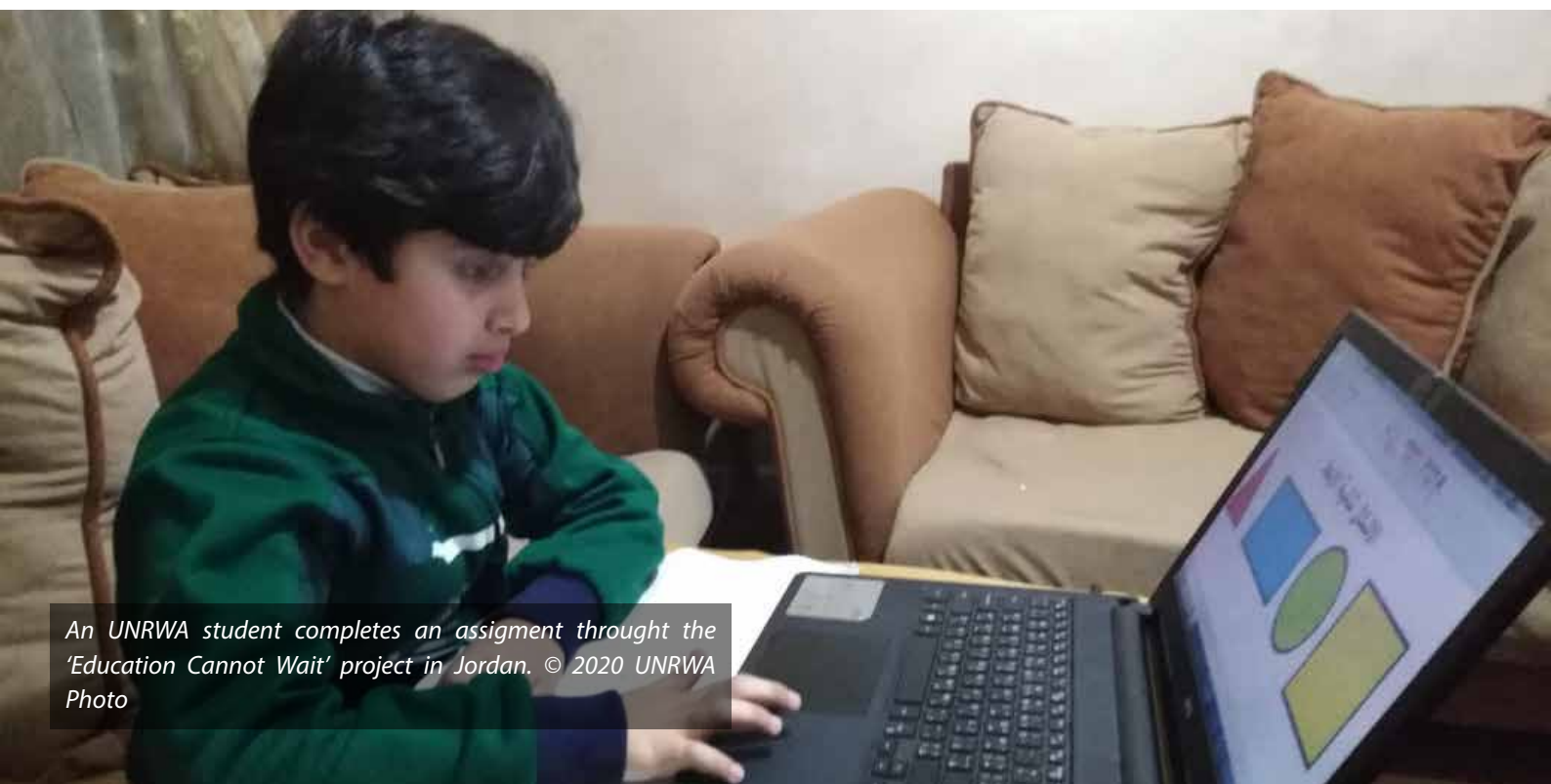
Under the current situation, particularly vulnerable Palestine refugees, including women and children, persons with disabilities, persons with legal documentation issues<sup>16</sup> and children are further exposed to heightened protection-related risks, including sexual and gender-based violence (SGBV), and isolation. Greater difficulties in accessing health services, as well as increased burdens and separation from caregivers, due to movement restrictions and quarantine, negatively affect the wellbeing of all, and particularly of persons with disabilities. Possible food shortages and limited supplies, induced by long periods of lockdown, can also increase vulnerabilities and lead to negative coping strategies, thereby increasing protection risks. The enforcement of isolation measures also limits access to information and contributes to psychological distress.

UNRWA will guarantee mainstreaming and integration of protection principles and needs in its response. A central emergency hotline will be esta-

blished to collect and channel all queries received from persons of concern, comprising but not limited to requests for psycho-social support (PSS), assistance with cases of gender-based violence (GBV) and/or child protection, general enquiries. Frontline staff will also maintain active communication channels, including emergency hotline for the identification and management of protection cases, and to ensure uninterrupted and available referral paths. Front line staff, including social workers and GBV focal points, will be provided with mobile phone bundles to respond to individuals' concerns and requests, and to help monitor their well-being and communicate key information on, hygiene and sanitation, and available referral pathways. Messages will be crafted in an inclusive and accessible way, to reach persons with disabilities, in particular those usually.

Targeted support will also be provided to Palestine refugee children and youth with disabilities who would normally attend UNRWA-supported CBRCs, through on-line/virtual support on inclusive education.

MHPSS and counselling will also be available through hotlines and other remote modalities (e.g. social media platforms, Whatsapp groups) to continue supporting Palestine refugees' wellbeing and address possible psychosocial challenges due to the protracted isolation and the lack of social interactions.



*An UNRWA student completes an assignment through the 'Education Cannot Wait' project in Jordan. © 2020 UNRWA Photo*

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attending community-based rehabilitation centres (CBRCs), persons under 16 and the elderly.

Targeted support will also be provided to Palestine refugee children and youth with disabilities who would normally attend UNRWA-supported CBRCs, through on-line/virtual support, including counselling and access to training.

MHPSS and counselling will also be available through hotlines and other remote modalities (e.g. social media platforms, WhatsApp groups) to continue supporting Palestine refugees' wellbeing and address possible psychosocial challenges due to the protracted isolation and the lack of social interactions.

#### **Gaza**

#### **Strategic Objective 1: Contain the spread of COVID-19 and decrease morbidity**

##### **Health**

Currently all 22 UNRWA HCs in Gaza are open, and to reduce the risk of transmission of COVID-19, 12 triage centres have been set up in school premises, seeking to divert anyone with respiratory symptoms from entering clinics. To ensure the occupational safety of health staff and to protect beneficiaries, under this appeal UNRWA will continue to procure PPEs 986 for health staff, in accordance with WHO recommendations. Soap and alcohol-based hand rub will continue to be available at clinics, and increased cleaning and disinfection will be maintained as important measures to reduce the risk of transmission of COVID-19.

In addition, as the national public health system is diverting capacity to COVID-19 cases, it is anticipated that Palestine refugees may face challenges in accessing hospital care at Ministry of Health (MoH) facilities, resulting in increased demand on the UNRWA hospitalization programme for non-COVID cases. To respond to urgent and semi-urgent surgical cases, a provision for further hospitalization support is included in this appeal to cover up to 6,500 urgent admissions at private hospitals. To avoid any shortages in essential medicines due to possible disruptions in the global supply chain, shortages in

essential UNRWA has already started to procure some essential drugs from the local market, and will continue to secure the necessary quantities through this modality in the coming months, as appropriate.

As part of the Agency's support to the national health response plans in the containment phase, UNRWA, in coordination with the oPt health cluster, plans to provide medicines and PPE to quarantine centres run by the MoH. In addition, PPE will be provided to Palestine refugees with specific vulnerabilities and/or at risk of exposure through contacts in case of outbreak.

In the event of a widespread outbreak of COVID-19 in Gaza, UNRWA will contribute to the collective response through the extension of essential primary health care services to non-refugees, thereby freeing resources from the public health sector. This will be done through a tele-medicine approach, including using the telephone hotlines already launched for the current clientele. Planning is in place for small teams of medical personnel to advise remotely and, where necessary, undertake home delivery of some life-saving (non-COVID related) medicines.

### **Water and Sanitation**

To avoid additional public health hazards, the Agency will maintain sanitation and solid waste management services in Palestine refugee camps. This will be done by ensuring the continued availability of equipment, including compactors and tractors, and through hiring of additional sanitation workers as needed. Sanitation labourers will be provided with the necessary PPE as per WHO recommendations.

**Strategic Objective 2. Ensure that Palestine refugees are able to meet their basic needs, mitigating a further deterioration in their humanitarian and socio-economic conditions, with a particular focus on the most vulnerable**

### **Food and Cash Assistance**

The food assistance provided every quarter by UNRWA is a lifeline for one million Palestine refugees in Gaza. To protect the health and safety of eligible Palestine refugees whilst completing first quarter 2020 distributions, UNRWA introduced a new food distribution modality using door-to-door home de-

livery, to avoid crowding at distribution centres and reduce the risk of transmission. The Agency's ten distribution centres are still being used for packing of food parcels and as a first loading point, but delivery of food parcels has been outsourced under the supervision of coordination from UNRWA teams. Health, protection and quality assurance were driving principles of the newly adapted modality, including through a strong public communication strategy and monitoring and evaluation system. Feedback from Palestine refugees on this service is being collected from specialized relief and social services staff.

Under this appeal, UNRWA will ensure that the home-to-home distribution food distribution modality is rolled out for as long as necessary during the COVID-19 emergency.

In addition, amidst fears of disruptions to global food supply chains as a result of COVID-19 crisis, UNRWA plans to advance stocks of 5,000 metric tons of flour in support of the procured food commodities planned for the second quarter 2020 food distribution round. This represents 20 per cent of the total quantity of flour needed for the full round.

In order to mitigate the additional socio-economic hardship created by the COVID-19 crisis, the Agency will also provide a one-off unconditional cash transfer of US\$40 per person to 15,000 extremely vulnerable Palestine refugee households to help cover their essential needs. The targeted population has been determined using a weighted system of all vulnerable groups including female-headed households, household headed by older persons, persons with disability, persons with chronic diseases, orphans and large families.

**Strategic Objective 3. Palestine refugees continue to access quality, inclusive and equitable education within the context of the COVID-19 crisis**

### **Education in Emergencies**

UNRWA in Gaza provides basic education to 282,360 students at 276 schools and technical vocational training to 1,945 young people. While schools and TVET centres remain closed, the Agency is ensuring



UNRWA health staff in Syria continue to provide health care, including delivery of medication and vaccinations. © 2020 UNRWA Photo

that students and youth can continue to access education using its EiE approach.

Funding mobilized under this appeal will allow the Agency to continue to develop and disseminate self-learning materials, for students and families who suffer from electricity rationing and have limited internet access. Where possible, semi-professional elements of TVET will continue through self-learning materials and website links to relevant resources. Psychosocial support will be provided by School Counsellors through alternative means of communication, including via telephone and through UNRWA online platforms to address new challenges created by the COVID-19 crisis. UNRWA will also continue to strengthen awareness messages to students on preventing the transmission of COVID-19 and actively engage them in developing and sharing their own messages. Deep cleaning and disinfection of all 276 schools and two training centres is also planned ahead of reopening.

#### **Strategic Objective 4. Ensure protection is mainstreamed throughout the response**

The social isolation and exclusion caused by lockdown, movement restrictions and physical distancing measures, including suspension of education activities, can exacerbate stress and anxiety and increase the risks of domestic violence, child abuse and GBV. In response, UNRWA will ensure that legal advice and counselling services remain available during the emergency. Legal Assistance Counselors working closely with the Protection and Relief and Social Services programmes will provide the needed legal advice via telephone to vulnerable and at-risk individuals. These consultations will address GBV, physical assault, child abuse, SEA, denial of resources, early/forced marriage, child protection, divorce and custody issues. Cases will be documented and tracked using disaggregated data; the analysis will inform future interventions to at-risk populations.

#### **West Bank**

#### **Strategic Objective 1: Contain the spread of COVID-19 and decrease morbidity**

##### **Health**

UNRWA will ensure that appropriate preparedness

and response measures remain in place at Agency health centres in the West Bank, to ensure critical services can be discharged safely and in the event of a surge in health care needs. The Agency will continue to operate all of its 43 primary health centres and health points, including East Jerusalem, and its hospital in Qalqilya. As part of the efforts to improve the triage system, a health advice line will be maintained through this appeal, to provide Palestine refugees with guidance on the steps to follow in case of symptoms.

Under this appeal, PPEs will be provided to 524 health staff, to ensure the safety of staff and refugees; soap and alcohol-based hand rub will also be available in all health centres and increased cleaning and disinfection activities will be conducted. To ensure continuity of operations at the Agency's health centres, 61 extra temporary medical and other staff will be hired to maintain a rotation schedule. In the event of a COVID-19 case affecting any health staff, this will ensure that the facility can be re-opened and operated by another team as soon as it has been decontaminated.

According to Palestinian Authority (PA) regulations, all Palestinian workers returning to the West Bank need to self-quarantine for 14 days. Considering overcrowding in camps and the poor conditions of Palestine refugee shelters, many will not be in a position to quarantine at home in a safe way for themselves and for their families. To ensure dignified reception conditions of returning Palestinian refugee workers, in line with humanitarian standards and basic protection principles, UNRWA plans to support the MoH by assisting families who lack sufficient hygiene supplies. If the number of people requiring quarantine in MoH quarantine centres exceeds the space currently available, the Agency will provide support to impromptu centres established by communities in the 19 Palestine refugee camps, through non-food items, hygiene material and cash for food.

##### **Water and Sanitation**

Environmental health teams will maintain solid waste management services in all camps for the duration of the outbreak and will perform supplementary emergency environmental health tasks (sewerage/water testing) to prevent additional public health

hazards. Supplementary daily paid sanitation labourers as well as drivers of compactors/tractors will be hired to ensure that sanitation, hygiene and waste management services continue at all times in all camps. Sanitation campaigns will also be conducted in all camps. Compactors will be repaired to avoid any disruption in the provision of services. Additional cleaning of UNRWA installations and offices will be conducted to reduce the risk of transmission of the pandemic.

**Strategic Objective 2. Ensure that Palestine refugees are able to meet their basic needs, mitigating a further deterioration in their humanitarian and socio-economic conditions, with a particular focus on the most vulnerable**

#### **Cash and Food Assistance**

Regulations implemented by the Palestinian and Israeli authorities to contain the COVID-19 outbreak have progressively limited movements into and within the West Bank. Movement restrictions and prolonged lockdown are resulting in a loss of employment opportunities, with a negative impact on the livelihoods of the most vulnerable Palestine refugees. Through this appeal, UNRWA plans to mitigate deteriorating food insecurity among 23,000 vulnerable Palestine refugee households (approximately 110,400 individuals) through the provision of electronic food vouchers and food baskets for families in home quarantine. Priority will be given to female-headed households, the elderly, families with members with chronic diseases and families with members with disabilities. These are families who are not benefitting from additional assistance being provided by the Ministry of Social Development.

UNRWA will continue to distribute in-kind food parcels to 37,000 persons – almost all of them refugees - from Bedouin communities who are particularly vulnerable and face protection concerns, as part of its regular emergency appeal. In order to ensure the safety of the distribution process, PPE will be procured for distribution workers. A provision for cash-for-food to up to 19 quarantine centres set up by the community in Palestine refugee camps has also been included in this flash appeal.

**Strategic Objective 3. Palestine refugees continue to access quality, inclusive and equitable education within the context of the COVID-19 crisis**

#### **Education in Emergencies**

UNRWA will ensure continuity of learning for 45,726 students in its 96 schools and 1,708 trainees in two training centres in the West Bank through the development and dissemination of add material in support of student self-study of their own textbooks. This is in line with the Agency EiE approach. To ensure remote monitoring and e-learning, additional sim cards and laptops will be purchased for UNRWA education staff. To support the mental health and psychosocial well-being of school-aged children, education games will be designed and distributed to approximately 20,000 students between the first and fourth grades. Should school re-open during the flash appeal period, additional supply of hygiene items and proper disinfection will be ensured at all schools and vocational training centres.

**Strategic Objective 4. Ensure protection is mainstreamed throughout the response**

WBFO has established a hotline to provide psychosocial first aid as well as referrals to refugees in need of psychosocial support. The psychological first aid (PFA) hotline involves humane, supportive and practical help to persons suffering serious crisis events. This entails use of the three main principles of PFA: Look, Listen and Link. The PFA hotline gives a framework for supporting people in ways that respect their dignity, culture and abilities. It also ensures that refugees seeking assistance to meet essential needs such as food, support to children, health, concerns of domestic violence, GBV cases, child or general protection, education, disability or elderly service etc. are referred to the appropriate services through UNRWA existing programmes or externally to partner organizations or host government. Between 26 March and 27 April, WBFO has received close to 500 calls from all over the West Bank from refugees and non-refugees living inside and outside camps. All callers were provided with PFA and were linked to services accordingly.



*Jihad, an UNRWA Protection and Neutrality Officer distributes medication and performs protection check-ins in Rashayda village, West Bank. © 2020 UNRWA Photo*

## Headquarters

### Risk Communication and Community Engagement

Providing updated information to Palestine refugees and promoting awareness on actions required to mitigate the risk of infection is crucial to contain the spread of COVID-19. Many Palestine refugees live in overcrowded camps where it may be more difficult to comply with stay-at-home and social distancing recommendations. There is a need to increase health awareness within the community, to support behavioural change and increase adherence to preventive measures to limit the transmission of COVID-19.

In order to enhance risk communication and community engagement, UNRWA, in close coordination with Palestine refugee committees, will select 25 youths per camp in each field of operations, who will be trained in communication messages reinforcing preventive measures and hygiene practices. Mobilization activities will take place twice a week over a period of three months, and will also contribute to empower youth through supporting their community to gain increased awareness about COVID-19, protecting themselves and others. Communication materials will be developed, produced, and provided by UNRWA health programme in each field. Mentoring and on-site supervision will be managed by UNRWA area offices and camp improvement committees. UNRWA staff from education, health, and relief and

social services will also be engaged in training and mentoring, ensuring the proper implementation of the process.

Risk communication activities will target people in public places, including those in crowds where physical distancing may be compromised. Group sessions with no more than 10 participants, keeping proper physical distance, will also be conducted in open spaces as an additional way to raise awareness on COVID-19. Through these activities, tailored messages and health education on COVID-19 will be provided, including frequent hand hygiene practice, cough etiquette, physical distancing and infection prevention.

### Monitoring and Evaluation

UNRWA will evaluate activities delivered under this appeal through a dedicated external evaluation.

### Health

Should conditions allow, UNRWA will discontinue full telecommuting working modalities and will plan for a gradual return to its headquarter offices in a safe manner. To ensure that health standards are met the Agency will procure additional PPE for staff in direct contact with the public at HQ premises (Amman, Jerusalem, Gaza) and Representative Offices (Brussels, Cairo, New York, Washington), and will ensure the continued availability of hygiene and sanitation items in these locations.



*UNRWA staff at Kalandia refugee camp carry out sanitation and sterilization measures in the streets of the camp.*

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# footnotes

- 1 <https://covid19.who.int/>
- 2 <https://blogs.imf.org/2020/04/14/the-great-lockdown-worst-economic-downturn-since-the-great-depression/>
- 3 <https://www.unescwa.org/sites/www.unescwa.org/files/escwa-covid-19-economic-cost-arab-region-en.pdf>
- 4 <https://en.unesco.org/covid19/educationresponse/globalcoalition>
- 5 <https://www.unrwa.org/newsroom/press-releases/aub-and-unrwa-launch-survey-socioeconomic-status-palestine-refugees-lebanon>
- 6 <https://www.unrwa.org/newsroom/press-releases/aub-and-unrwa-launch-survey-socioeconomic-status-palestine-refugees-lebanon>
- 7 <https://reliefweb.int/sites/reliefweb.int/files/resources/Summary%20English.pdf>
- 8 <https://www.unrwa.org/resources/reports/insights-socio-economic-conditions-palestinian-refugees-jordan>
- 9 UNRWA Emergency Appeals for the oPt and the Syria Regional crisis can be found at <https://www.unrwa.org/resources/emergency-appeals/2020-opt-emergency-appeal> and <https://www.unrwa.org/resources/emergency-appeals/2020-syria-regional-crisis-emergency-appeal>
- 10 UNRWA Emergency Appeals for the oPt and the Syria Regional crisis can be found at <https://www.unrwa.org/resources/emergency-appeals/2020-opt-emergency-appeal> and <https://www.unrwa.org/resources/emergency-appeals/2020-syria-regional-crisis-emergency-appeal>
- 11 These were developed in 2019 with input from other UN agencies and key partners
- 12 [https://www.unrwa.org/sites/default/files/eie\\_indicator\\_bank\\_-\\_november\\_2019.pdf](https://www.unrwa.org/sites/default/files/eie_indicator_bank_-_november_2019.pdf)
- 13 <https://www.unrwa.org/resources/emergency-appeals/2020-syria-regional-crisis-emergency-appeal>
- 14 Ninety per cent of the costs of testing and treatment for Palestine refugees infected with COVID-19 will be provided by UNRWA with the remainder covered through a subsidy from the Palestinian embassy.
- 15 King Abdullah Park is a closed reception and holding facility in the north of Jordan that has been used since October 2016 to replace a similar facility known as Cyber City. At the time of writing, 509 individuals (PRS and Syrians) whose mobility is very restricted, resided in this facility.



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وكالة الأمم المتحدة لإغاثة وتشغيل  
اللاجئين الفلسطينيين في الشرق الأدنى