





PALESTINE

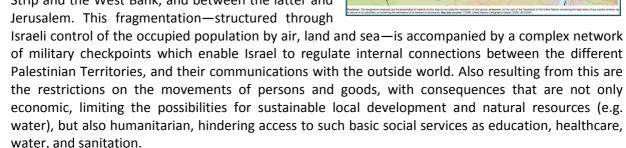
ANNUAL OPERATING PLAN 2014

1. BACKGROUND

Palestine and the refugee population living in Jordan, Syria and Lebanon constitute a special case in the area of development cooperation and humanitarian assistance, since its shortages and other problems have dragged on for decades and originate, for the most part, in the prolonged Israeli occupation, the blockade of the Gaza Strip and internal political division in Palestine. These circumstances have generated a prolonged crisis with a highly vulnerable Palestinian population in need of humanitarian assistance, besides impeding normal political, social and economic development in the territory.

In spite of the international diplomatic efforts to contribute to achieving a resolution of the conflict between Israelis and Palestinians, or the possibility of forming a Palestinian government of national unity, the humanitarian situation is worsening. The Palestinian crisis could be defined as a human rights crisis with humanitarian consequences, as reflected in different ways.

Fragmentation of Palestine, both between the Gaza Strip and the West Bank, and between the latter and Jerusalem. This fragmentation—structured through



The expulsion of the Palestinian population from their places of residence, through the confiscation of land, restrictions on private property, and demolitions of houses and other infrastructures. This strategy has led to the forced displacement of the occupied population, denial of residence permits, impediments to family reunification, an increase in food insecurity, and a steady deterioration in their livelihood.









• Discretionary detentions and impunity in the face of abuses by the Israeli forces and the collective of settlers in the East Jerusalem and the West Bank. These practices have had a psychosocial impact on the entire population, such as stress and post-traumatic syndromes.

GENERAL AND HUMANITARIAN INFORMATION ¹	
Population under Israeli occupation:	4.42 million (1.7 million in Gaza and 2.72 million in the West Bank) (2.3 million men and 2.1 million women) (40% are younger than 15)
1.9 million require humanitarian aid ²	1.09 million are refugees 802,000 are non-refugees
4,937 displaced persons ³	2.2 million refugees live in the affected areas ⁴
Human Development Index 2013	110 (0.67)
Refugee population (includes direct family members)	2.2 million
ECHO Crisis Index	3 (out of 3)
ECHO Vulnerability Index	2 (out of 3)

2. VULNERABLE POPULATIONS

- Gaza Strip. The socio-economic situation along the 400 km of the Gaza Strip is precarious, both due to the very high density of the population—of which no less than 75% is considered to be refugees—and to scarce resources, high levels of unemployment and difficulties on the part of the local authorities to attend to their basic needs. As a result, approximately 80% of households depend on international aid. The health sector situation is very precarious, and access to water and sanitation is limited. The construction of major infrastructures (e.g. a desalination plant) and their sustainability is conditioned by the dynamic of the conflict, with the destruction or suspension of fuel supplies⁵. This general framework of vulnerability and humanitarian needs has become more acute after the closure of a great many of the tunnels joining Egypt and Gaza, and which supplied the Gaza Strip with fuel and building materials, among others. The most vulnerable collectives are those who continue to live in restricted areas, farmers and fishermen, unemployed young people, and people living below the extreme poverty threshold.
- Area C of the West Bank and East Jerusalem. The socio-economic situation in this area stems from the territorial fragmentation and frequent closures of internal passes, demolitions, and expulsions. The Bedouin population, shepherds and farmers in Area C—both those living permanently in this area and those who own lands there but reside in Areas A and B—are the groups most affected by displacement



¹ UNHCR and AECID Humanitarian Action Office (OAH).

²OCHA. *Humanitarian needs overview* 2014

³As a result of demolitions in Area C and East Jerusalem from 2008 until September 2013. Source: UNOCHA 2013.

⁴ OCHA considers an affected population to be those persons subjected to constant violations based on international humanitarian law, and human rights, in all their forms: threats to life, liberty and safety, population subjected to forced displacement, erosion of livelihood and impossibility of access to buying basic products and services, etc.

⁵UNCAP 2013.

and destruction of means of livelihood⁶. These groups, which live in the area to the west of the wall, H2 Hebron and the refugee camps, are the collectives in the worst situation of vulnerability.

• Palestine. As noteworthy cross-cutting elements in Palestine—considering that 1.9 million of the Palestinian population require humanitarian assistance (of whom 1.09 million are refugees⁷)—the groups considered extremely vulnerable are children and adolescents, persons with disabilities, the elderly and women heads of households.

3. MAIN HUMANITARIAN NEEDS

The main humanitarian needs identified by sector are as follows:



Protection. The need for protection in Palestine is directly associated with the Israeli occupation policies, which violate International Humanitarian Law (IHL) and have caused protection crises with humanitarian consequences again and again. The principal needs stem from the impact of forced evictions and demolitions of Palestinian housing, the destruction of means of subsistence, restrictions of movement that affect access to basic services, land and resources, and daily violence against the Palestinian population and

their property. These obstacles produce shortages and restrict access to basic services such as health, education, livelihood, and water.



Water, Sanitation and Hygiene (WASH). At least 1 million people in Palestine have access to a minimum level of 60 litres/person/day. In Gaza, the situation in this area represents a major public health problem. Approximately 90% of water from the local aquifer is not suitable for domestic use. There is over-exploitation of the coastal aquifer and infiltration of wastewater. The Gaza population is forced to acquire water at high (even exorbitant) prices from private vendors. In Area C, a great many communities are not connected to a

functioning water system. Israeli restrictions on the Palestinian population's access to such resources as water and land, the impossibility of building the necessary infrastructure (due to a lack of Israeli permits) continue to hinder access to water. Added to this are frequent damage to the water cisterns and storage tanks.



Health. In Gaza, the public health system is marked by a scarcity of qualified professionals, lack of medicine and medical equipment, which is estimated to affect 1.6 million people. Moreover, emergency preparedness capacity is very limited. On the West Bank, normal operations of the local health services and the Palestine population's capacity to reach health centres conveniently and safely is interrupted by different circumstances, such as violent actions by settlers, harassment and intimidation, and other restrictions on their

movements imposed by Israeli controls. Furthermore, the derivation of patients from the Gaza Strip to Egypt and Israel is also affected by restrictions on movement.







⁶UNCAP 2013.

⁷ OCHA. *Humanitarian Needs Overview* 2014.



Food and Nutrition Security. Despite the fact that in Palestine there is not a food crisis, 34% of the Palestine population is not able to obtain basic food products, or deal with their household expenses.⁸ This is a problem of access to food, not of its availability. According to the SELFSEC report, 57% of households in Gaza suffer from food insecurity due to the blockade imposed by Israel, whilst 14% are at risk.

Other Areas:



Gender. Whilst the male population is more exposed to the risks involving physical safety and lack of empowerment because they cannot provide a safe refuge for their families, women and girls suffer psychosocial trauma due to the death, injury or detention of family members, as well as the accumulation of high stress levels from such experiences as night-time incursion, indiscriminate detentions, and settlers' violence. The role of women in the home as care providers is affected by the limited availability of services and

resources. The caretaking tasks assigned mainly to women, boys and girls is limited by the scarcity of water, which increases the burden of care. Moreover, the lack of sanitation facilities also affects the safety, privacy and dignity of the female population. A rise in malnutrition among pregnant and lactating women has been detected, as a result of changes in food consumption patterns. The levels of gender violence, in its different forms—including sexual violence, domestic violence, early marriage and political violence—have been worsened by the effects of the prolonged crisis of protection.

4. CHALLENGES

- Access and Safety. The access restrictions, placed both by Israeli forces and by local authorities, on the movements of humanitarian personnel and products are recurrent in the Gaza Strip, which conditions access, limits response effectiveness, and makes humanitarian assistance more expensive.
- Coordination. The large number of stakeholders and agencies involved makes it necessary to constantly map out actions and interventions to avoid duplicating efforts, as well as to enable humanitarian actions and other actions benefiting the vulnerable population. Lastly, it is essential to coordinate interventions with the United Nations through its Office for the Coordination of Humanitarian Affairs (OCHA) and the European Union, through ECHO, and with Israeli and Palestinian authorities to address the impact of restrictions on movements of people, the destruction and confiscation of goods financed by the international community, limitations on access to victims, or the detention of humanitarian personnel.
- Complementarity. The actions of the AECID Humanitarian Action Office (OAH) will promote a quality
 response among humanitarian and development actors, seeking complementarity, especially in such
 sectors as Protection, Food Security, and WASH.



⁸ SELFSEC 2013.

5. SPANISH RESPONSE 2014

In line with the Fourth Master Plan for Spanish Cooperation 2013-16, the OAH will contribute to providing a quality humanitarian response (Strategic Guideline 7). The reduction of inequalities and vulnerability to extreme poverty and to crises will be given special attention (Strategic Guideline 2). Priority will also be given to an approach promoting systems of social cohesion and provision of basic social services (Strategic Guideline 4) and to promoting women's rights and gender equality (Strategic Guideline 5). Thus, a response is offered based on humanitarian needs, prioritising interventions on behalf of **vulnerable populations**, such as children and adolescents, persons with disabilities, the elderly and women heads of households being the extremely vulnerable groups, in these priority intervention areas: **Gaza**, **Area C** (the West Bank) and **East Jerusalem**. Likewise, humanitarian efforts will be channelled through partnership with specialised humanitarian actors, based on their operational, technical and economic capacities, giving priority to the network of specialised humanitarian partners in the UN system, and the International Committee of the Red Cross (ICRC). In addition, AECID will try to support mechanisms and organisations that enable a **rapid response to emergencies**. It will also **support humanitarian response coordination**.

Continuing the lines of action launched in previous years, AECID's OAH will allocate 1.7 million euros in 2014, focusing on the following intervention areas:

In the area of **Protection**—following the strategies of the United Nations as well as those of the EU for Palestine—interventions will be supported that promote the protection of victims and civil infrastructures, and the application of IHL, especially concerning the protection of civilians under occupation.

Regarding WASH in Gaza, social protection will be promoted, facilitating access to basic water, sanitation and hygiene services for vulnerable people, focusing on households rather than major infrastructure policies.

As regards Food Security and Livelihoods, AECID will continue to support projects with a resilient social protection approach that use cash transfer tools for food purchases. This type of instrument enables diet diversification, improving food security while also promoting the local economy by involving small local producers as suppliers, facilitating their insertion into the local market. In addition, they use a rights-based approach, by preserving dignity, strengthening autonomy, and empowering the beneficiaries by offering them flexibility to decide for themselves which food products to buy, which also results in lowering the level of tension within households.

In **Gender**, in line with the Fourth Master Plan, AECID will try to support initiatives that integrate a gender perspective, both in a cross-cutting and a specific manner, in order to promote gender equality and the rights of Palestinian women.





