

### HIGHLIGHTS

- The number of active COVID-19 cases rose by over 33 per cent and exceeds 11,000; 57 more people died.
- 1,100 more cases of community transmission, and another six fatalities, reported in Gaza.
- The lockdown in Gaza is slightly eased and a night-time curfew is expected in many East Jerusalem neighbourhoods.
- The Inter-Agency Response Plan for the oPt is 45 per cent funded.

### COVID-19 CASES IN OPT

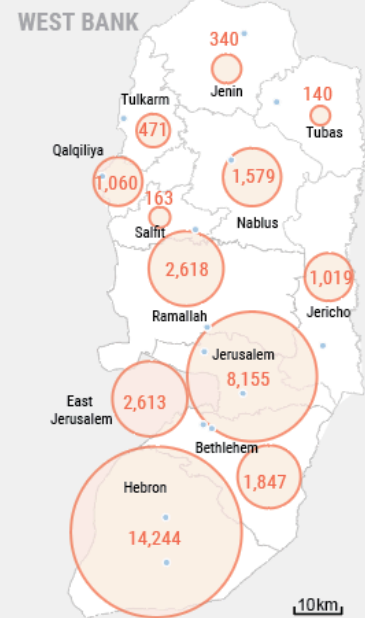
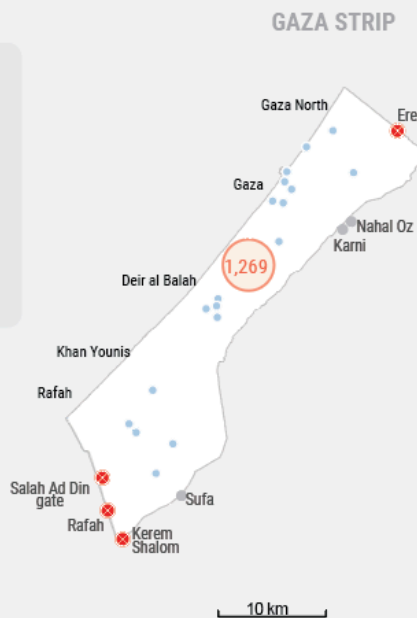
**35,518** CONFIRMED CASES

**11,077** ACTIVE CASES

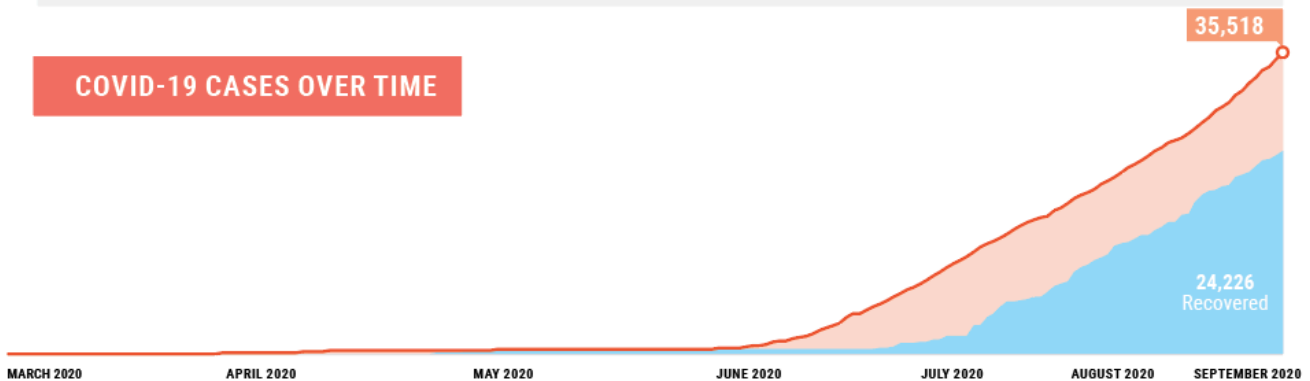
**23,508** RECOVERED

**215** DEATHS

- Active Cases
- Quarantine Centre
- ✘ Crossing Point
- Closed Crossing Point



### COVID-19 CASES OVER TIME



<b>11,077</b>	<b>215</b>	<b>300,000</b>	<b>US\$72.2 M</b>
People with COVID-19 (active cases)	Fatalities	Samples tested for COVID-19	Request for Inter-Agency Response Plan

## SITUATION OVERVIEW

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The number of Palestinians in the oPt who contracted COVID-19 and are currently active increased by over 33 per cent during the reporting period from 8,313 to 11,077. The cumulative number of cases since the start of the crisis reached 35,518 (as of 16:00, 8 September). Fifty-seven more people died during the reporting period, bringing to **215** the cumulative number of fatalities. Thirty-two patients are in intensive care units (ICU), with five requiring mechanical ventilation.

According to the Palestinian Ministry of Health (MoH), as of 3 September, 301,836 laboratory samples have been tested for COVID-19. Over 220,000 Palestinians have entered home, or facility-based quarantine, to monitor their symptoms and ensure early detection.

Over 1,100 of the 8,132 additional cases detected during the reporting period were in the Gaza Strip, where community transmission has surged since 24 August. In the West Bank, Hebron accounts for most of the active cases, with Qalqilya identified as a new hotspot. The rate of infection also remains high in East Jerusalem.

In Gaza, where approximately 600,000 pupils started the academic year on 8 August, all schools are now closed again until further notice. In the West Bank, there has been a staggered re-opening of the school year, beginning on 6 September.

### West Bank

The epicentre of the outbreak continues to be the Hebron Governorate, which accounts for forty per cent of the total cases, and 120 of the 215 fatalities. This is followed by East Jerusalem (23 per cent), the rest of the Jerusalem governorate (7.5 per cent), Ramallah (7 per cent) and Bethlehem (5 per cent).

Following a surge of cases in Qalqilya governorate, which now accounts for 3 per cent of all cases, a 72-hour closure was imposed between 17:00 on 6 September and 17:00 on 9 September. The closure applies to all facilities, except bakeries and pharmacies. Farmers may irrigate and harvest their lands between 05:00 and 10:00.

On 6 September, the new academic year began for 300,000 pupils between grades 1 and 4, utilizing an integrated education system for all schools, combining face-to-face education and distance learning, including a new TV channel, 'Palestine Education'. Since approximately 45,000 twelfth grade students returned to school on 9 August, an estimated 80 schools have temporarily closed, following confirmed COVID-19 cases among pupils or school staff.

People who were exposed to confirmed cases, and were either not tested, or tested negative, are being sent to home quarantine, as are Palestinians who enter the West Bank from Jordan or Israel. The vast majority of confirmed cases with light or mild symptoms are also being referred to home isolation. However, following the upsurge in cases in recent months and the concern of mass transmission, especially in overcrowded areas such as refugee camps, institutional isolation has been gradually re-introduced. Currently, there are three operational isolation centres on standby (in Jericho, Jenin and Nablus cities). Confirmed cases with severe symptoms are referred to a designated hospital/treatment centres, with 13 facilities currently operational.

East Jerusalem witnessed a twenty per cent increase in cases during the reporting period and has over 1,750 active cases. On 6 September, the Israeli government approved night-time curfews in some 40 cities in Israel with high infection rates, and in many Palestinian neighbourhoods in East Jerusalem, including the Old City. The curfews will be in effect every day between 19:00 and 05:00, entailing the closure of non-essential businesses and all educational institutions.

There are three designated hospitals in East Jerusalem to treat COVID-19 patients (Augusta Victoria, Al Makassed and St. Joseph), in addition to Israeli hospitals where Palestinians with Israeli residency status can be treated. A new isolation centre opened on 25 August at the Seven Arches Hotel and is so far hosting 40 confirmed cases from East Jerusalem.

Only Palestinians who coordinate with the Palestinian Ministry of Foreign Affairs are allowed to enter the West Bank from Jordan via the Allenby Crossing, and after being tested for COVID-19. Between 18 August and 7 September, there were 2,508 arrivals from Jordan.

Citing the lack of building permits, during the reporting period, the Israeli authorities demolished, forced people to demolish or seized 13 Palestinian-owned structures in Area C and East Jerusalem, displacing 44 and affecting the livelihoods or access to services of 12 others. Since the start of the pandemic, the Israeli authorities have demolished or seized, or forced people to demolish, at least 393 structures; this represents a 60 per cent increase compared with the monthly average between 2017 and 2019 (65 vs. 41). The structures demolished or seized over the past six months include 46 inhabited homes that were in place prior to the start of the crisis, leading to the displacement of 299 Palestinians.

Of continuing concern is settler violence, with physical attacks on Palestinian farmers and vandalism against Palestinian vehicles and olive trees, continuing during the reporting period.

### Gaza Strip

In Gaza, 1,117 COVID-19 cases and the six fatalities were recorded in the reporting period. Until 24 August, all cases in Gaza were detected among Palestinians who had returned through the Rafah or Erez crossings, and were fulfilling the mandatory 21-day period in quarantine centres. Community transmission since then accounts for all but 30 of the 1,171 active case. Of the total number of cases (1,269), 89 have recovered and nine have died. To date, 34,212 samples have been taken in Gaza. Health partners in Gaza report that among the positive cases, 125 are health workers.

People with symptoms are being isolated in the European Hospital (currently over 120 people), while infected medical personnel with symptoms are being isolated in the Turkish Hospital (over 30 people). A school adjacent to the European Hospital is also accommodating mild/asymptomatic cases (over 100 people). In addition, quarantine facilities are used to isolate people with none or mild symptoms who are unable to isolate themselves at home. For all other cases, home isolation is imposed. Currently, there are 8,439 individuals in home isolation or home quarantine.

The lockdown imposed on 24 August has been eased in the Middle Area, Rafah and Khan Younis governorates, as well as in some neighbourhoods of Gaza City, given the relatively low number of cases in these areas. Except for elderly people and children, movement in these areas is allowed from 07:00 to 20:00, provided that safety and prevention measures, such as the wearing of masks and physical distancing, are respected. Vehicles can move within those areas and workers are allowed to work under the same conditions. Gatherings of more than ten people indoors or more than 20 people outdoors are prohibited. Movement across governorates is also prohibited, with the exception of urgent cases. A strict curfew remains in effect in the Northern governorate and the rest of Gaza City.

Following the Qatari-brokered end to the recent escalation in Gaza, the Israeli authorities re-opened the Kerem Shalom Crossing on 1 September and the entry of fuel for the Gaza power plant resumed, with electricity provision returning to 8-12 hours per day. The Israeli authorities reinstated the fishing zone up to 15 nautical miles off the southern shore, although little activity is ongoing due to the lockdown. The Erez pedestrian crossing with Israel is closed until further notice. The movement of goods from Egypt through the Salah ad Din gate continues, as previously. Rafah Crossing continued to be closed for the movement of travellers.

### COORDINATION

The Inter-Agency COVID-19 Task Force, led by the Resident/Humanitarian Coordinator (RC/HC), as well as the Inter-Cluster Coordination Group (ICCG), continues to convene on a weekly basis, to set policies and coordinate the implementation of various responses to the crisis.

As part of efforts to put in place necessary measures that will allow key stakeholders to continue providing life-saving assistance to those in need during the Covid-19 crisis, the RC/HC has approved a 90-day extension of six existing projects supported by the oPt Humanitarian Fund for West Bank isolation centres and Gaza quarantine centres. The estimated total financial resources required to provide support across different clusters (Shelter, & non-food items, WASH, Protection) for quarantine and isolation centres amounts to around \$1.6 million. To ensure the provision of standardized services, ICCG members have conducted a joint assessment of PA/MoH isolation centres in the West Bank.

On 7 September, a senior UN team, led by the UNRWA Gaza Director, met with the Palestinian Minister of Health, Dr. Mai al-Kaila, during her visit in Gaza. The team briefed the minister about ongoing efforts to support the response to the COVID-19 crisis in Gaza. The UN team also highlighted some of the issues currently affecting the response, in particular the halt in coordination between the Palestinian and Israeli authorities on medical referrals, the lack of coordination between the Palestinian authorities in Ramallah and Gaza, and the need for more resources and support from Ramallah for the response in Gaza.

The day before, following extensive advocacy and negotiations with stakeholders, WHO initiated a temporary coordination mechanism to support Palestinian patients and companions from Gaza to apply for Israeli exit permits to access essential health services in hospitals in the West Bank and Israel. Referrals are made according to medical need, as decided by the Palestinian MoH. This temporary measure has been taken to mitigate the impact of the PA halt of coordination with the Israeli authorities, adopted since May in response to Israel's threat to annex part of the West Bank.

In the same context, the UN Country Team has continued to operate a Logistics Cluster, led by the World Food Programme (WFP), to support the procurement of supplies and the receipt of donations needed for the COVID-19 response. Its main task is to mediate between the Customs Directorate in the PA Ministry of Finance and the Israeli authorities (COGAT and the Israeli Customs Office) to ensure the approval of the documentation required to allow the shipment of imported supplies into the oPt, through the various Israeli ports of entry. The Cluster is currently processing 79 requests from UN agencies and international NGOs, of which 61 have been approved by both sides. One request is still pending PA Customs approval and 12 are pending approval by the Israeli authorities.











The Health Cluster is tracking the procurement and delivery of critical medical supplies by Cluster partners against the immediate needs identified in the COVID-19 Inter-Agency Response Plan, and in line with the State of Palestine's National Response Plan.

The table below highlights the availability and gaps regarding the top ten medical items needed.<sup>1</sup> All partners are encouraged to subscribe and submit their requests for procurement of medical supplies for laboratory testing, case management and infection prevention and control through WHO's global COVID-19 response coordination portal.

As part of the Risk Communication and Community Engagement (RCCE) plan, nearly 40 partners are distributing communications materials aimed at ensuring that the public has access to a broad range of information on how to prevent the spread of COVID-19, and to deal with misinformation, as restrictions are eased, or alternatively re-imposed, by the respective authorities. To address the sudden escalation in cases in Gaza, the campaign has broadcast radio messages daily on six channels in Gaza; and released an Emergency Media Pack with social media materials, videos, brochures and radio resources to media and NGOs in Gaza, among other measures. RCCE materials are [available online](#).

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<sup>1</sup> For a more comprehensive list, please contact the Health Cluster Coordination Team: [asaparbekov@who.int](mailto:asaparbekov@who.int) and [maroufm@who.int](mailto:maroufm@who.int).

Supply Category	Item	Estimated Response Plan needs (by unit)	Delivered	Pipeline	Current Gap
Case Management	 Ventilator, medical, invasive, adult/child	250	54	166	30
	 Patient Monitor (vital signs)	250	40	189	21
	 Oxygen Concentrator	250	15	154	81
	 ICU Hospital Beds	250	-	166	84
	 Patient Beds	400	86	214	100
Infection Prevention and Control (IPC)	 Surgical Mask	4,000,000	1,410,150	206,550	2,383,300
	 N-95 Respirator	300,000	52,748	168,380	78,872
	 Surgical gloves	8,000,000	3,534,000	1,983,800	2,482,200
Laboratory Testing	 COVID-19 PCR Tests	500,000	38,208	9,600	452,192
	 Swabs / Medium, sample collection	500,000	33,500	11,000	455,500

## FUNDING

The initial COVID-19 Inter-Agency Response Plan for the oPt, which requested \$42.4 million to support an immediate response to the crisis and the efforts led by the Government of Palestine, covered interventions through the end of June. In August, the Plan was extended until the end of 2020 and the financial requirement updated to \$ 72 million.

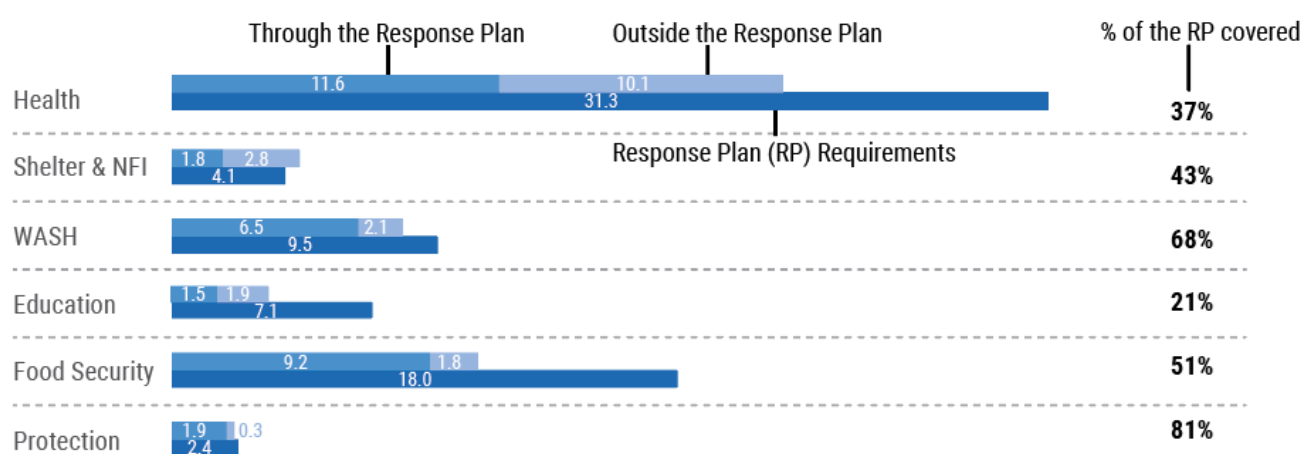
So far, \$32.5 million, or 45 per cent of the amount requested has been raised. Including resources outside the Response Plan, \$51.5 million has been mobilized in support of COVID-19 related response activities in the oPt.

During the reporting period, the only contributions received were for the WASH Cluster, from ECHO (\$476,190), World Vision International (\$304,658), USAID (\$250,000) and GIZ (\$21,105).

Following the detection of COVID-19 outside the quarantine centres in Gaza, the Health Cluster developed a *Priority Needs Paper*, which requests an additional \$5.75 million to cover supplies and interventions over the next three months in Gaza. Almost half of this amount will be allocated to scale up testing capacity, while the rest is aimed for case management equipment and infection prevention and control (IPC) items.

On 2 September, UNRWA launched a \$ 94.6 million COVID-19 Appeal to cover the emergency needs of 5.6 million registered Palestine refugees until the end of December in its five fields of operation (Gaza, West Bank, Lebanon, Syria and Jordan), with a special focus on health, cash assistance and education.

## TOTAL FUNDING FOR COVID-19 RESPONSE BY CLUSTER (IN MILLION US\$)



### DEVELOPMENTS, CONCERNS AND FUNDING STATUS BY CLUSTER

#### Health

<b>US\$31,304,992</b> Funding requirements	<b>\$11,630,052</b> Through the Response Plan	<b>37%</b> of the Response Plan covered	<b>\$10,125,602</b> Outside the Response plan	<b>\$21,755,654</b> Total Funding Received
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- The number of confirmed COVID-19 cases continue to rise, although the fatality rate remains low at 0.6 per cent.** The Health Cluster Coordination Team has updated the Inter-Agency COVID-19 Response Plan until the end of 2020, including the funding requests, which are now estimated at over \$31 million.
- In Gaza, contagion within the community remain of serious concerns due to the capacity gaps in the health system.** Health Cluster partners continue to address key priorities, including to scale-up testing and contact tracing; case management capacity; and RCCE. The protection of frontline health workers has been prioritized by ensuring adequate quantities of personal protective equipment (PPE) and the dissemination of knowledge and skills in IPC.
- More than 260,000 people have benefited from activities carried out by Health Cluster partners during the reporting period.** Partners continue to support the MoH with laboratory testing kits and supplementary equipment to conduct more than 17,000 tests in the West Bank and Gaza. A new RNA (Ribonucleic acid) extraction machine with reagents, with the capacity to conduct up to 20,000 tests, was also delivered to Gaza, to increase the testing capacity. Another 230 frontline health workers benefitted from capacity-building on IPC. Partners are working with key hospitals to scale-up their waste management capacity and improve sterilization of key medical items. Partners procured and delivered essential medical equipment for treatment of severe and critical cases, including psychological support and counselling.
- More than 30,000 persons received a minimum essential health package of services.** A life-saving Measles, Mumps, Rubella (MMR) vaccine was made available in Gaza and is estimated to benefit more than 28,000 children. In Gaza, many MoH primary healthcare centres remain closed, as staff are relocated to quarantine facilities. In the West Bank, demand for health services, including family planning, mother and child health and

nutrition, has decreased compared with last year. Hospitals continue to face challenges in providing services for pregnant women with COVID-19.

## Protection

<b>\$2,365,740</b>	<b>\$1,917,434</b>	<b>81%</b>	<b>\$305,434</b>	<b>\$2,222,868</b>
Funding requirements	Through the Response Plan	of the Response Plan covered	Outside the Response plan	Total Funding Received

- 1. Gender-Based Violence (GBV) Sub-Cluster (SC) members recorded an increase in domestic violence across the oPt in the context of the COVID-19 lockdown measures and economic crisis.**
- 2. In Gaza, frequent power outages have made the delivery of remote services, such as helplines and online support groups, more difficult.** Concerns are raised about the unavailability of recreational activities for vulnerable children and multidisciplinary services, such as counselling and psychosocial support (PSS). Partners also report an increased demand for dignity and hygiene kits, mental, sexual and reproductive health services, as well as food and non-food items.

## Education

<b>\$7,120,698</b>	<b>\$1,517,000</b>	<b>21%</b>	<b>\$1,918,746</b>	<b>\$3,435,746</b>
Funding requirements	Through the Response Plan	of the Response Plan covered	Outside the Response plan	Total Funding Received

- 1- As of 6 September, children in grades one to four have returned to schools across the West Bank.** With the support of the Education Cluster, all schools received cleaning and hygiene kits, copies of the safe schools and health protocols and related training. About 45,000 12<sup>th</sup> grade students returned to school on 9 August. Since the start of the school year, around 80 schools were either temporarily or fully closed from one to 14 days, following confirmed COVID-19 cases among pupils or school staff. The current situation is imposing additional challenges on ensuring the continuity of face-to-face education during the spread of the pandemic.
- 2- After the Ministry of Health (MoH) diagnosed the first cases of COVID-19 in the community in Gaza, the authorities announced a full closure of the Gaza Strip including all education facilities.** It is unclear when schools will reopen.
- 3- The Education Cluster is supporting the Ministry of Education (MoE) and UNRWA's plans related to distance learning, MHPSS services, IPC measures, provision of hygiene kits and rehabilitation of WASH facilities.**

## Shelter & NFI

<b>\$4,092,551</b>	<b>\$1,755,251</b>	<b>43%</b>	<b>\$2,767,382</b>	<b>\$4,522,633</b>
Funding requirements	Through the Response Plan	of the Response Plan covered	Outside the Response plan	Total Funding Received

1. **During the reporting period, Shelter Cluster partners distributed over 7,000 NFI kits, including over 3,500 COVID-19 family hygiene kits to vulnerable households lacking proper hygiene facilities in the Gaza Strip.** Another 2,850 bedding items and 700 hygiene kits were distributed to quarantined people in isolation centres.
2. **The Cluster assessed the needs and gaps of isolation centres across the West Bank.** Approximately 9,000 different NFIs are required to support 13 new isolation centres, including the three already operational. These include mattresses, blankets, pillows, and dignity kits. Cluster partners will procure the required items in coordination with UNRWA and the PA.

### Water, Sanitation and Hygiene

<b>\$9,504,052</b>	<b>\$6,478,599</b>	<b>68%</b>	<b>\$2,081,548</b>	<b>\$8,560,147</b>
Funding requirements	Through the Response Plan	of the Response Plan covered	Outside the Response plan	Total Funding Received

- 1- **The WASH Cluster reached nearly 5,000 people during the reporting period.** In the Gaza Strip, three partners delivered nearly 50,000 bottles of water to quarantine facilities. In the West Bank, more than 700 families benefited from the distribution of household hygiene kits.
- 2- **The Palestinian Water Authority (PWA) has launched a water resources' emergency maintenance and operation programme targeting its water facilities and resources across the oPt.** The programme is part of the PWA COVID-19 emergency response plan and is implemented with the financial support of Austria.
- 3- **In Gaza, the spread of COVID-19 within the community has generated additional challenges for WASH service providers.** These include the shortage of disinfection materials and PPE. WASH services in Gaza have been further undermined by the power outages.

### Food Security

<b>\$18,017,577</b>	<b>\$9,177,426</b>	<b>51%</b>	<b>\$1,777,441</b>	<b>\$10,954,867</b>
Funding requirements	Through the Response Plan	of the Response Plan covered	Outside the Response plan	Total Funding Received

- 1- **More people have become food-insecure amid an unprecedented economic crisis.** These include, among others, daily workers, taxi drivers and civil servants. According to the latest Socio-Economic and Food Security survey from 2018, there were 1.7 million food-insecure people across the oPt. Immediate food assistance and increased support to livelihoods is urgently needed.



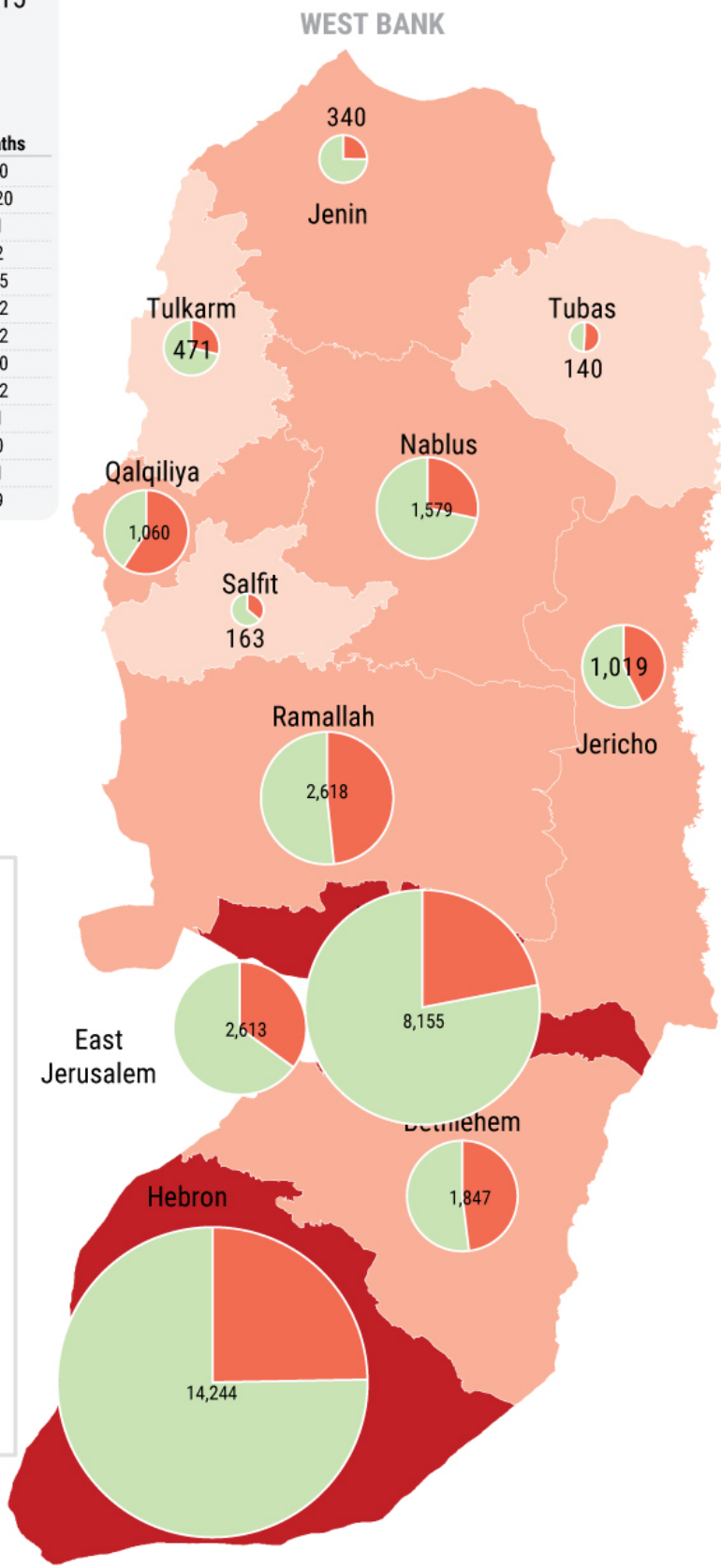
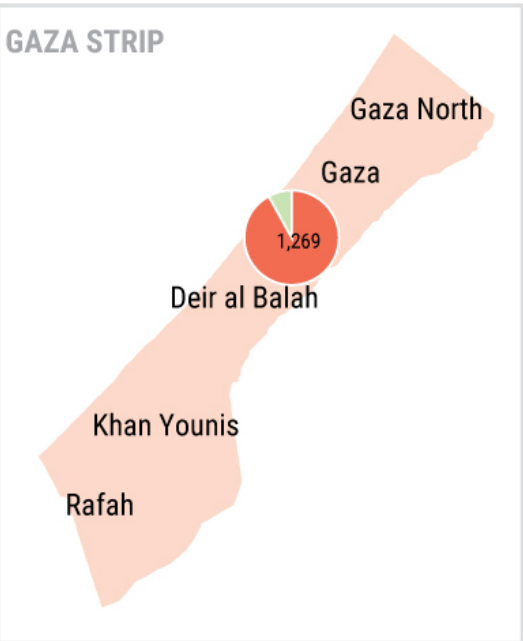
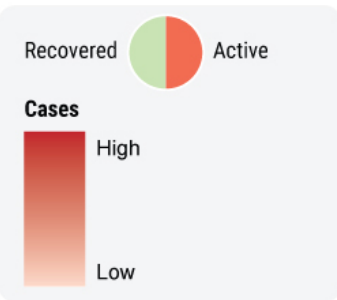
- 2- Many small-scale farmers continue to be affected.** Although markets have stabilized, undermining factors remain, including the unavailability or high costs of some production inputs and access restrictions to agricultural land and fishing areas.

# COVID-19 CONFIRMED CASES IN OPT (as of 8 September 2020)



**Total Cases** 35,518     **Deaths** 215  
**Recovered** 24,226  
**Active Cases** 11,077

Governorate	Cases	Recovered	Active	Deaths
Bethlehem	1,847	925	912	10
Hebron	14,244	10,868	3,256	120
Jenin	340	253	86	1
Jericho	1,019	642	375	2
Jerusalem (Ex. EJ)	8,155	6,447	1,683	25
East Jerusalem	2,613	1,664	937	12
Nablus	1,579	1,089	478	12
Qalqilya	1,060	446	604	10
Ramallah	2,618	1,313	1,293	12
Salfit	163	99	63	1
Tubas	140	63	77	0
Tulkarm	471	328	142	1
Gaza Strip	1,269	89	1,171	9



Data Source: Ministry of Health

## COVID-19 response funding in the oPt (through and outside the Inter-Agency Response Plan) in US\$

Cluster	Response Plan (RP) Requirements	Through the Response Plan	% of the RP covered	Outside the Response Plan	Total
Education	7,120,698	1,517,000	21%	1,918,746	3,435,746
Food_Security	18,017,577	9,177,426	51%	1,777,441	10,954,867
Health	31,304,992	11,630,052	37%	10,125,602	21,755,654
Protection	2,365,740	1,917,434	81%	305,434	2,222,868
Shelter_NFI	4,092,551	1,755,251	43%	2,767,382	4,522,633
WASH	9,504,052	6,478,599	68%	2,081,548	8,560,147
<b>Grand Total</b>	<b>72,405,610</b>	<b>32,475,761</b>	<b>45%</b>	<b>18,976,153</b>	<b>51,451,914</b>

## Total funding for COVID-19 response by donors

Donors	Through the Response Plan	Outside the Response Plan	Total in US\$
Austria		229,564	229,564
Canada	2,215,757		2,215,757
CERF	527,000		527,000
DFID	1,148,789		1,148,789
ECHO	3,720,950	6,491,000 <sup>1</sup>	10,211,950
Education Cannot Wait	555,000	1,550,000	2,105,000
Foreign Disaster Assistance (OFDA)	225,000		225,000
France	1,005,415		1,005,415
Germany	2,512,383		2,512,383
GIZ	530,471	43,000	573,471
Ireland (Irish Aid)	235,200		235,200
Islamic Relief Worldwide	307,800		307,800
Italian Agency for Development Cooperation [AICS]	152,008	10,970	162,978
Japan	878,506		878,506
Kuwait	747,500	8,252,500	9,000,000
Norway	70,000	91,083	161,083
OPT Humanitarian Fund <sup>2</sup>	6,642,564	347,768	6,990,332
Other sources <sup>3</sup>	1,461,198	180,155	1,641,353
Private Sector Fundraising	386,786		386,786
Qatar Fund for Development		562,455	562,455
Qatar Red Crescent		410,000	410,000
Save the Children <sup>4</sup>	326,435		326,435
Start fund	251,000		251,000
Sweden (SIDA)	500,000		500,000
Swiss Agency for Development and Cooperation "SDC"	1,450,000	268,000	1,718,000

UNESCO		150,000	150,000
UNFPA Humanitarian Thematic Fund	332,000		332,000
UNICEF	792,000		792,000
USAID	250,000		250,000
War Child Holland <sup>5</sup>	252,000	85,000	337,000
WFP (loan)	5,000,000		5,000,000
World Vision International		304,658	304,658
<b>Grand Total</b>	<b>\$32,475,761</b>	<b>\$18,976,153</b>	<b>\$51,451,914</b>

<sup>1</sup> Attribution to the Inter-Agency COVID-19 Response Plane under verification.

<sup>2</sup> As of today, oPt Humanitarian Fund has received generous contributions from Germany (\$13.8m), Belgium (\$4.3m), Sweden (\$2.1m) Switzerland (\$2m), Norway (\$0.9m), Iceland (\$0.4m), Ireland (\$0.3m), Korea (\$0.3m), and Cyprus (\$12,500).

<sup>3</sup> Funding contributions below \$150,000 including funding towards and outside Covid-19 Response Plan, received from: Action Aid, AECID, African Women Development Fund, AICS, Cantabria 19, Care International Emergency Fund, Christian Aid&ACPP, Denmark, DRO, EIHDR, Federal Ministry for Economic Cooperation and Development (BMZ), Fridresh Nauman Foundation, Gazze Destek (GDD), Global fund for women, Grass Roots, HEKS, Holland, ICO-UAE, International Charity Organisation, IR – Canada, IR – UK, Italy (IADC), Jerrahi Order of America, Kvinna Till Kvinna, Luxembourg government - ARDI Program, McNulty Foundation, Medico International, Mennonite Central Committee, Mixed funds (German, Italian, Spanish and Dutch), NCA, DCA, NMFA, Norwegian Representative Office to the Palestinian Authority, Nous Cims, NRC, Open Society Foundation, Oxfam, PHG, Private Donors, Rawa Funds, Representative Office of Switzerland in Ramallah, Secours Islamique France, SIDA+DFAT, StartNetwork, Suisse Cooperation, Trocare, UN Trust Fund, UNDP, United Palestinian Appeal, UNWOMEN HQ, Urgent Action Fund, WELFARE (Taawon), WHO, World Vision USA.

<sup>4</sup> This includes contributions of Save the Children individual and pooled funds.

<sup>5</sup> This includes contributions of War Child Holland and War Child Holland Head Office.

*For more information including a detailed list of activities by cluster in both Gaza and the West Bank and for detailed maps of the Quarantine Centres please visit the COVID 19 Webpage found on the OCHA Website. Please go to the OCHA Website:*

[OCHA COVID-19 DEDICATED WEBPAGE](#)  
[DETAILED MAPS OF QUARANTINE FACILITIES](#)  
[DETAILED LIST OF ACTIVITIES BY CLUSTER](#)