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Situation Report

Humanitarian Crisis in Palestine

Country:	Palestine ▾
Emergency type:	Conflict ▾
Start Date of Crisis:	Oct 7, 2023
Date Issued:	Mar 6, 2025
Covering Period:	Feb 1, 2025 to Feb 28, 2025
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KEY FIGURES

 <p>49,337 Fatalities¹ 48,405 in Gaza 932 in West Bank</p>	 <p>118,535 Injuries¹ 111,835 in Gaza 6,700 in West Bank</p>	 <p>~1.9M Internally displaced² 1.9M in Gaza (90% of population) 40,000+ in West Bank</p>	 <p>1.36M+ Women of reproductive age³ 545,000+ in Gaza 820,000+ in West Bank</p>	 <p>123,000 Estimated pregnant women³ 50,000 in Gaza 73,000 in West Bank</p>
 <p>12,000+ Expected deliveries in the next month³ 4,000 in Gaza 8,000 in West Bank</p>	 <p>19 of 36 Hospitals in Gaza² partially functional</p>	 <p>63 of 145 Primary health care centres in the Gaza Strip² are partially functional</p>	 <p>1.2M Youth aged 18-29⁴ 470,000 in Gaza 730,000 in West Bank</p>	

¹ Palestinian Ministry of Health - 04 March 2025

² [OCHA Reported Impact Snapshot - Gaza Strip - 04 March 2025](#)

³ [MISP calculation](#)

⁴ Palestinian Central Bureau of Statistics

HIGHLIGHTS

- **Aid blockade; worsening crisis for women and girls:** The Israeli government's aid restrictions are depriving women and girls of life-saving supplies, violating international humanitarian law and jeopardizing critical progress made since the ceasefire.
- **Dire living conditions putting lives at risk:** With the destruction of homes and infrastructure, over 1.13 million Palestinian families are living in unsafe and makeshift living conditions, surrounded by uncollected waste and running sewage, exposing women and children to diseases, including hepatitis, gastroenteritis and respiratory infections, worsening health complications and exacerbating protection risks. Seven newborns reportedly died in February due to freezing temperatures and a lack of shelter, warm clothes and access to medical care.
- **Gender-based violence (GBV) surging amid overcrowding and poverty:** The breakdown of community safety nets and economic desperation have fueled an increase in sexual exploitation, as displaced women struggle to secure food, warmth, and shelter. Multiple families are cohabiting in cramped, unsafe spaces and shelters, with no privacy, security or gender-segregated sanitation facilities, increasing tensions, stress and the risks of GBV. Female-headed households, widows and adolescent girls are particularly vulnerable. Gender-based violence services are severely constrained as needs rise, with limited safe spaces, inadequate psychosocial support and the fear of stigma preventing survivors from seeking help.
- **Reproductive health services remain limited:** More health facilities are now providing reproductive health services, but staff shortages, supply gaps, and damaged infrastructure continue to restrict access. Pregnant women are struggling to reach facilities that are operating due to unaffordable transportation and unsafe roads.
- **West Bank crisis deepening:** Escalating military operations, settler violence and severe movement restrictions are driving mass displacement and crippling access to healthcare. Ambulances are blocked at checkpoints, hospitals are struggling to function and 73,000 pregnant women are facing barriers to maternal care which could prove life-threatening.
- **UNFPA expanding vital support for women and girls:** In February, UNFPA intensified its response, delivering sexual and reproductive health, protection and shelter assistance to 140,000 women and girls in Palestine.

SITUATION OVERVIEW

- The reproductive health crisis in Gaza is deepening, with only 13 hospitals and four field hospitals providing maternity care—all of which are overwhelmed, understaffed, and critically short on supplies. More than 500,000 women lack access to family planning, treatment for sexually transmitted infections (STIs) and postnatal care, while 50,000 pregnant women are struggling to access antenatal care, safe delivery services and postnatal support.
- Many women sleep fully clothed out of fear, and some go days without changing or managing their menstrual hygiene due to the lack of privacy, clean water and sanitary products. At least 690,000 women and girls lack access to essential hygiene items, exposing them to infections and worsening health conditions.
- Malnutrition is rising among pregnant and breastfeeding women, increasing the risks of low birth weight, stillbirths and maternal mortality. Many women deliver in unhygienic conditions, without skilled birth attendants, pain relief, or access to emergency obstetric care. Infection control is nearly impossible, with water infrastructure damaged or destroyed and an acute lack of medical supplies, putting mothers and newborns at extreme risk.
- The psychological toll of displacement, violence, and extreme hardship is devastating, with soaring levels of trauma, anxiety, and post-traumatic stress disorder (PTSD). Many widows and female-headed households now carry the burden of caregiving alone, often sacrificing their own health and well-being to protect their families.

- The displacement of over 40,000 Palestinians in the north of the West Bank has left women and girls increasingly vulnerable to GBV and exploitation, as insecure shelters and economic hardship compound their risks. Meanwhile, the destruction of homes, schools, and livelihoods has fueled a worsening mental health crisis, particularly among displaced women and girls. Education disruptions for 806,000 students, especially girls, are further increasing risks of school dropouts, early marriage and long-term instability.

UNFPA RESPONSE

In February 2025, UNFPA scaled up the delivery of life-saving SRH and GBV prevention, mitigation, and response services across Palestine.

- Over **80,000 people** received SRH services, including maternal health care, emergency obstetric and neonatal care, and reproductive health supplies. In Gaza, UNFPA expanded maternity services, strengthened primary healthcare centres, scaled up the distribution of medical equipment and supplies, and began rehabilitating four health facilities to restore reproductive and maternal health services. In the West Bank, UNFPA deployed mobile teams and midwives to reach displaced and marginalized communities and activated minimum initial service package (MISP) focal points to support safe deliveries for women affected by military operations, movement restrictions and mass displacement.
- Over **38,000 individuals** benefited from GBV prevention and response services, including psychosocial support, case management and risk mitigation efforts. UNFPA expanded and supported women and girls’ safe spaces and shelters, distributed dignity kits and winter supplies, and provided cash assistance to women at risk. Gender-based violence response mechanisms were strengthened with expanded access to mental health and protection services.
- Over **22,000 adolescents and youth** were supported through education, mental health programmes, community engagement, and awareness initiatives. UNFPA distributed volunteer and adolescents kits, expanded psychosocial support services and strengthened youth-led protection and health awareness activities across Palestine.

RESULTS SNAPSHOTS



80,000

People reached with **SRH services**



38

Health facilities (*primary health care, medical points, field hospitals, and hospitals*) supported



60,000

People reached with **GBV prevention, mitigation, and response activities**



16














Women and girls’ safe spaces supported, including 2 shelters








Gaza Strip



176

Inter-agency reproductive health kits distributed to 18 health facilities and service delivery points across Northern, Central, and Southern Gaza, with sufficient medical supplies to support 35,850 SRH services, including 5,000 deliveries, in the next three months.

	25	Fetal doppler devices delivered to the Palestine Medical Relief Society (PMRS) and UNRWA primary healthcare centres to support antenatal care, fetal monitoring and safer pregnancies.
	6	Containerized maternal health units provided basic and comprehensive emergency obstetric and neonatal care in the Middle Area and Khan Younis, supporting over 1,000 safe deliveries.
	2,670	Postpartum kits , containing essential hygiene and care items for mothers and newborns, distributed to new mothers in shelters and at hospitals.
	105,810	Winter supplies and clothes distributed to 12,000 women and girls, including pajamas, scarves, thermal undergarments, winter boots, sweaters, pants, petroleum jelly for skincare, detergent, loofahs, bath towels, and baby powder.
	37	High performance tents (24m ²) distributed to health and GBV partners as makeshift PHC centres and women and girls' safe spaces, expanding maternal health and GBV response services to thousands of women and girls.
	10	Women and girls' safe spaces supported to reach 10,000 women and girls with GBV risk mitigation, prevention, and response services, including MHPSS, case management and information sessions.
	42,158	Dignity and menstrual hygiene management (MHM) kits distributed to women and girls.
	4,800	Kits distributed to adolescents, including clothes, hygiene supplies, stationary, and recreational materials to support well-being and daily needs amid the ongoing crisis.
	3,400	Volunteer kits distributed to young volunteers, including clothing, hygiene supplies, stationery, batteries and chargers, recreational items, and essential materials to support their efforts in assisting communities.
	7,850	Adolescents and youth were supported through educational classes, workshops on hygiene, reproductive health initiatives, and psychosocial first aid.
	1,435	Youth received psychosocial first aid through the Shubak Al Shabab helpline and the Mostashari application .
West Bank		
	5	UNFPA-supported mobile clinics delivered SRH and GBV services to marginalized communities in Area C and internally displaced people in the West Bank, including a dedicated clinic supporting displaced populations in Jenin and Tulkarm.
	12	Electrical delivery beds and cardiotocography machines delivered to MoH facilities to strengthen maternal care.

	10	Midwives recruited to support deliveries at MoH emergency centres.
	16	MISP focal points activated and equipped with reproductive health kits across all West Bank districts, ensuring effective coordination for safe deliveries in obstetric emergency cases.
	485	Women in Jenin and Tulkarm received cash and voucher assistance (CVA) to address their immediate needs and protect them from exploitation and violence.
	2,000	Dignity kits distributed to displaced women and girls in Jenin and Tulkarm, containing menstrual pads and essential hygiene items.
	6	Women and girls' safe spaces reached 4,500 women and girls with GBV risk mitigation, prevention, and response services, including MHPSS, case management and information sessions.
	1,830	Vulnerable community members reached through youth-led initiatives focused on protection and health awareness, carried out by 44 UNFPA-supported Youth Local Councils.
	2,155	Adolescents and youth in 15 marginalized locations across the West Bank and East Jerusalem reached through the Y-Peer Caravan, raising awareness on health and protection.

COORDINATION MECHANISMS

Gender-based Violence:

UNFPA leads and coordinates the GBV Area of Responsibility (AoR), overseeing sub-national clusters in Palestine to strengthen GBV response efforts. In Gaza, the AoR updated service mapping, referral pathways, and engaged partners in standardizing emergency case management. In the West Bank, coordination was reinforced through meetings with the Ministry of Social Development (MoSD), with follow-ups planned with MoSD and the Ministry of Women's Affairs (MoWA) to enhance GBV response. The AoR integrated GBV risks and response measures into the West Bank Protection Analysis Update and the Inter-Agency Response and Contingency Plan, ensuring GBV remains central to protection efforts. Partners also contributed to an ongoing IDP needs assessment and participated in MHPSS capacity building to enhance survivor-centred support and inter-cluster coordination.

Sexual and reproductive health:

UNFPA continues to lead the Sexual and Reproductive Health Working Group (SRHWG) under the Health Cluster, ensuring coordinated and scaled up SRH service delivery following the ceasefire. Efforts focused on service mapping updates, strengthening youth-friendly SRH services, and progressing the SRH dashboard for the Ministry of Health (MoH) in Gaza, with a validation meeting held and training ongoing for all SRH partners. The maternal health impact study is ongoing despite challenges from population displacement. UNFPA remains actively engaged in Health Cluster coordination in Gaza and the West Bank, supporting SRH service planning, data systems, and emergency preparedness.

Adolescents and youth

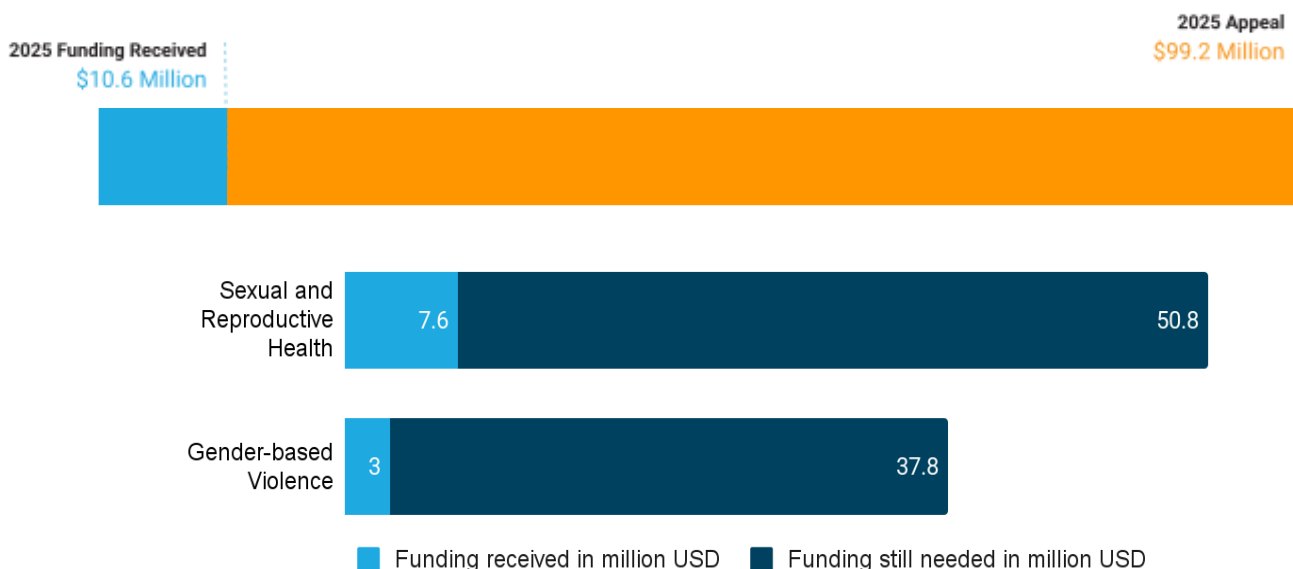
UNFPA leads the adolescent and youth health emergency response and advocacy through the Palestinian Adolescent Health Coalition and the United Nations Youth Group (UNYTG), while integrating youth needs into the humanitarian response via the Global Compact of Young People in Humanitarian Action Task Force on the Humanitarian Situation in Palestine.

Other working groups

UNFPA leads the Mobile Clinic Working Group, redirecting services to vulnerable locations in the West Bank to address accessibility challenges. Additionally, UNFPA actively participates in the Gaza and West Bank Cash Working Groups and the Gaza Multipurpose Cash Assistance Group.

FUNDING STATUS

As part of the 2025 Occupied Palestinian Territory (OPT) Flash Appeal, UNFPA is requesting **\$99.2 million** for its operational response to address ongoing and emerging needs. As of Feb 2025, UNFPA has received **\$10.6 million**. An additional **\$88.6 million** is urgently needed to fully support UNFPA's operational response through December 2025.



We extend our heartfelt appreciation to all partners and supporters whose contributions have been instrumental in facilitating UNFPA's humanitarian response, particularly in assisting Palestinian women, girls, and youth.

* List of UNFPA donors who have supported UNFPA's response since the beginning of the war (2023-2025)

