



# COVID-19 in Palestine

A Lockdown Within a Lockdown



**Anera Reports**  
on the ground in the Middle East

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The COVID-19 pandemic is a scourge that spares no society, rich or poor. Palestine is no exception. But Palestine's precarious situation makes treating the virus and stemming its spread much more difficult.

Inadequate healthcare, water and sanitation infrastructure, and resources limit Palestine's ability to prevent the spread of COVID-19. The World Health Organization reports that in the past two years, COVID-19 has infected more than 500,000 people and killed more than 5,000 in the Palestinian territories, as of early 2022.

This report looks at the spread of COVID-19 in Palestine and what is being done to combat the pandemic.

## A LOCKDOWN WITHIN A LOCKDOWN: COVID STRIKES PALESTINE

The first cases of COVID-19 in Palestine were reported on March 5, 2020, when the ministry of health confirmed seven tourists tested positive in Bethlehem, West Bank. The Palestinian government declared a complete ban on tourists entering Palestine on March 22, 2020, and implemented a state of emergency. In Gaza, where a 14-year old blockade already sharply limited movement in and out of the territory, isolation protocols for travelers held the spread of COVID at bay for some months. Health authorities detected the first cases of community transmission within Gaza in August 2020.



The spread of the virus among communities in the West Bank and Gaza meant closing schools, universities, mosques, and churches. These closures intended to contain transmission, coupled with the preexisting blockade of Gaza by Israel and Egypt, created what Palestinians have described as a “lockdown within a lockdown.” In a society where families often rely heavily on each other for social support and solidarity, and where many large families live in small dwellings, social distancing and quarantining can be particularly challenging. **Life in Palestine, already precarious, was turned upside down by the pandemic.**

COVID-19's impact has gone beyond direct victims of the virus. It has affected most every Palestinian physically, mentally and economically. Unsurprisingly, the economically vulnerable have been hit the hardest. One study assessing the psychological impact of the pandemic found that Palestinian children from low-income families reported higher levels of stress, depression and anxiety than their wealthier peers. However, regardless of income, the overwhelming majority of students in Gaza reported moderate to severe levels of anxiety and depression.<sup>1</sup>

### COVID's Impact on Palestinian Society

Living conditions in the West Bank and Gaza were already bad before the pandemic.

**Nearly 15 years of closure have constricted Gaza's economy and led to a lack of resources, from building materials and spare parts to food and medicine.**

Poverty and overcrowding in long-standing refugee camps across Palestine add to the medical crisis and economic collapse exacerbated by the COVID-19 pandemic. Some 19 refugee camps in the West Bank and East Jerusalem are home to more than 240,000 Palestinians who live in buildings constructed ad hoc over the past 70 years. Many Palestinian buildings cannot be expanded, improved, or rebuilt due to property restrictions that force them to remain in unsuitable conditions. In Jerusalem's Old City, buildings intended for single families now house multiple generations. That raises the risk of community transmission and infection and makes self-isolation at home difficult.

What happens when a pandemic hits a place that has been declared virtually unlivable? With a population density of 13,000 people per square kilometer in Gaza, poverty and overcrowding affect the ability of Gazans to practice safety measures, like physical distancing, that could mitigate the spread of COVID-19. The May 2021 bombings forced 113,000 Palestinians into overcrowded areas of temporary refuge such as schools, hospitals, or relatives' homes. The bombardment followed a 60% surge of COVID-19 cases in Gaza the month before and it also made the delivery of vaccines impossible for 11 days.<sup>2</sup> By June, Gaza accounted for fully 90% of active cases in Palestine.<sup>3</sup>

The direct impact of COVID on public health in densely populated and under-resourced places like Gaza and in refugee camps worldwide has been somewhat less catastrophic than many initially feared. The relative youth of these populations has likely played a role in limiting mortality.<sup>21</sup>

*Throughout the pandemic, Anera has been delivering hot meals to families, like this one in Beit Lahia, who were quarantining with COVID-19.*



## Palestine's Economy Takes a Hit

Lockdown measures meant to stem the spread of infection had an unintended impact on the already struggling economy in Palestine. Within one month of identifying the first COVID-19 cases in Palestine, revenues collected from trade, tourism, and money transfers dropped to their lowest levels in nearly 20 years. The deleterious impact of the pandemic and the occupation on the economy made 2020 the worst year for the Palestinian people in over two decades. Palestine lost more than 121,000 jobs in 2020-2021. In tourism alone, authorities estimate COVID-19 has led to more than \$1 billion in losses. Sixty-two percent of Palestinian families report a decline in their income as a result of the pandemic. The coronavirus has disrupted economies worldwide. But unlike governing bodies in many other nations, Palestinian authorities were unable to implement emergency financial policies to help sustain people and businesses.<sup>4</sup>

Revenues collected from trade, tourism, and money transfers dropped to their lowest levels in **20 years**

**In Gaza, many small employers have gone out of business due to the restrictions and closures that have been implemented.**

A November 2021 World Bank report stated that economic activity in the West Bank had begun to pick up, but restrictions on the movement of people and goods continue to significantly limit economic growth. In Gaza, the May 2021 bombings prevented any substantial economic recovery. Gazans continue to face deteriorating social conditions and high unemployment. Nearly half of Gaza's workforce is without a job. And nearly 60 percent of Gazans live in poverty – an estimated 16 percent increase from four years ago, driven by the pandemic and the May 2021 conflict.<sup>5</sup>



Anera's Women Can program in Palestine helps women entrepreneurs, who are heads of their households, to start or grow small businesses. With funding from IRUSA, Anera provides equipment, training and mentoring to help these business owners every step of the way. This is a training session that Anera held – outdoors, because of COVID – in Ramallah in February 2021.

## The Challenges Palestinian Women Face in COVID Times

COVID-19 has disproportionately affected Palestinian women, who already suffered from economic hardship before the pandemic. Loss of income and financial strain has led to increased domestic violence, depression, and poor living conditions.<sup>6</sup> In Palestine, as is true globally, public health studies indicate that COVID has been particularly harmful to the mental health of women and girls.<sup>7</sup>

Palestinian women already faced some of the highest rates of unemployment in the region. Now they face more gender-based discrimination and higher unemployment rates as job opportunities have dried up during COVID. Many women who were previously breadwinners lost their positions and now increasingly depend on humanitarian aid to provide for their families.<sup>8</sup> One-third of women-headed families in the West Bank and half of women-headed families in Gaza are food insecure.<sup>9</sup>

**Palestinian women make up a substantial portion of the workforce in healthcare and have been on the frontline of the pandemic.** They continue to carry the burden of caring for their communities while seeking to protect their own families from the disease. The International Women's Institute surveyed families in the West Bank in 2020 and reported that these factors led to a rise in mental health issues – such as anxiety, depression and PTSD – gender-based violence, and domestic abuse.

“We have just escaped the hell of airstrikes to find the hell of COVID-19 at our doors.”

– Dr. Yasser Abu Jamei  
Director, Gaza Community Mental Health Program <sup>22</sup>

In May 2021, Gaza suffered 11 straight days of intensive bombings that exacerbated already terrible economic conditions from COVID and nearly 15 years of blockade.



Portion of the wall separating the West Bank from Israel. In the best of times, this barrier stifles the Palestinian economy. Combined with COVID, the situation has grown much worse.



## Medical Sector Struggles to Cope With COVID Amid Conflict

The Palestinian public health system does not have the resources or capacity to serve a large population in need of medical care. In rural communities only the most basic healthcare services are available, leaving many Palestinians with minimal access to doctors, hospitals and treatment options.

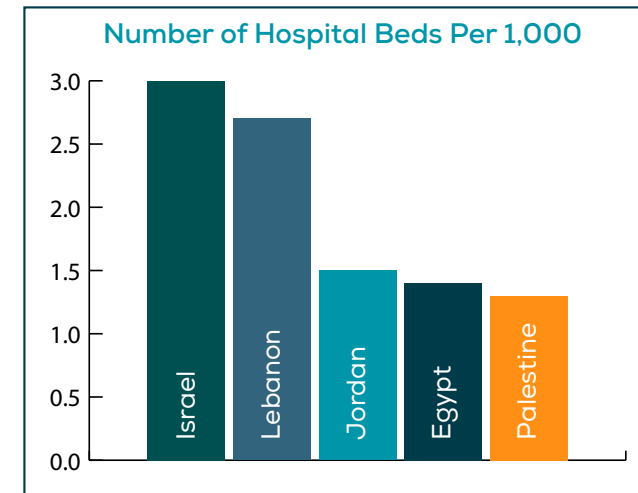
Palestine also faces a scarcity of medical professionals. Specialty fields such as neurology, oncology, pediatric surgery and psychiatry suffer heavy personnel shortages. In part, shortages arise because doctors who want to specialize in these fields must leave Palestine for training and often do not return once their education is complete.

Electricity and water shortages also impede Palestine's healthcare system in providing care for patients. Power in both Gaza and the West Bank can be intermittent and unpredictable, making it difficult to operate equipment and store medicines. The lack of running water leads to challenges in maintaining sanitary medical facilities, especially in Gaza. High levels of salt in municipal water supplies make it unusable for the cleaning and maintenance of equipment in hospitals and clinics. Healthcare facilities therefore spend scarce funds to have water delivered.

The chronic conflict and the ever present threat of violence do not spare healthcare professionals, leading UN OCHA to call Palestine "one of the most dangerous places in the world to be a health worker." Northern Gaza's only vaccination center was seriously damaged during the May 2021 bombardment. Aside from the damage to healthcare infrastructure sustained in Gaza during the bombardment, one bomb raid killed the physician leading the COVID response at Shifa Hospital, the largest medical facility in the territory. He was not the only healthcare worker in Gaza killed during the escalation. The conflict also affected pandemic response in the West Bank, when a COVID quarantine center in Hebron was demolished in July 2021.<sup>10</sup>

Another struggle has been the lack of proper protective gear for health workers. **Early in the pandemic, as COVID spread, only one out of ten healthcare workers had proper isolation gowns.** Nearly all healthcare workers lacked access to N95 respirators, eye protection, or face shields. More than two-thirds of medical materials, laboratory products and blood bank supplies were out of stock.<sup>11</sup> Palestine's healthcare system lacked respirators for the more severe cases. Currently, there are only 10 respirators for every 100,000 citizens in the West Bank, compared to 50 for every 100,000 citizens in Israel. Gaza only has four respirators for every 100,000 people.<sup>12</sup> Palestine also has limited cold storage facilities for medicines like Pfizer's BioNTech vaccine that requires storage at very cold temperatures.

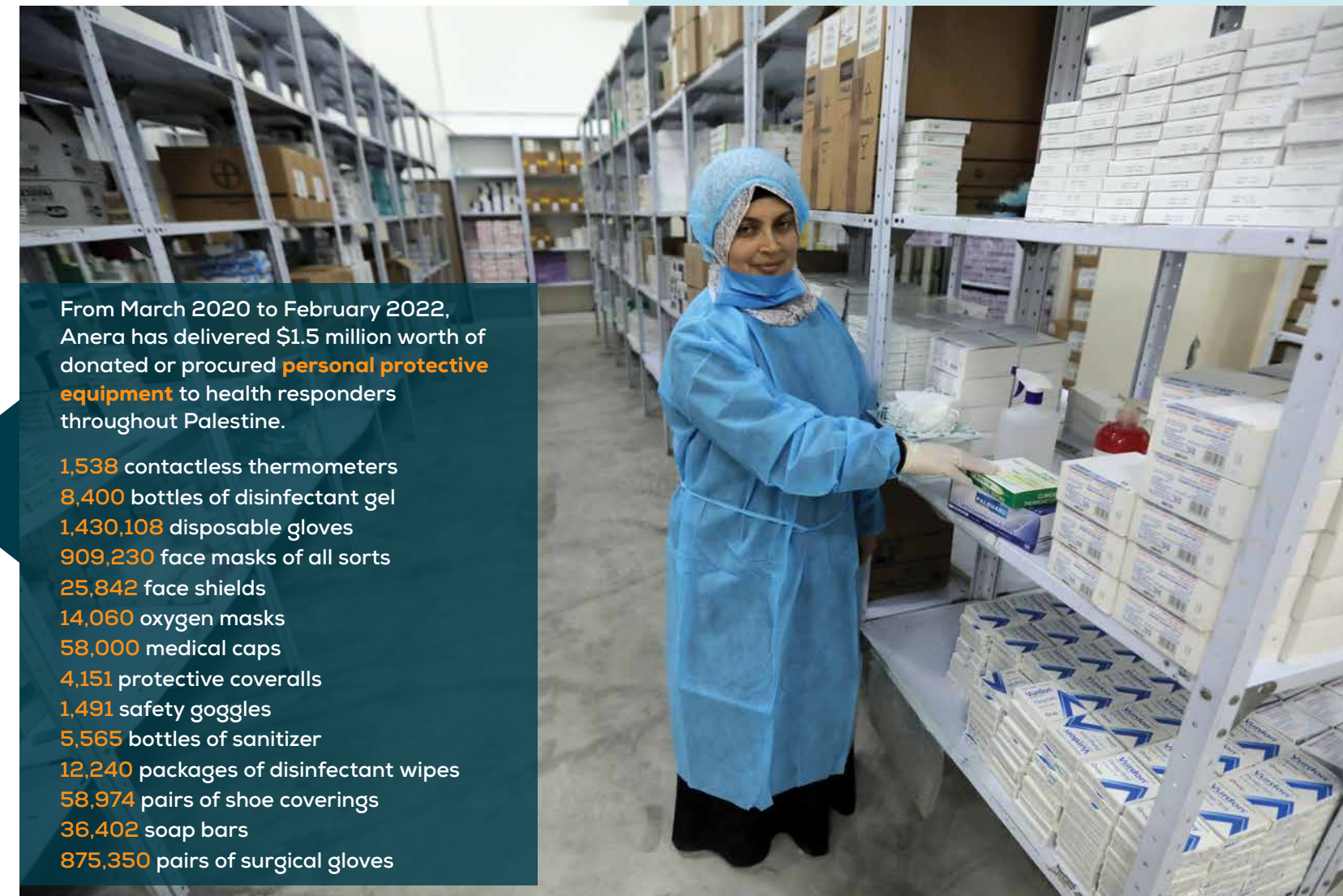
Palestine's health ministry frequently runs out of testing kits. Each time that happens, the ministry has to rely on international aid. But there are rarely enough kits to fill the gaps. The May 2021 violence damaged the Rimal health clinic, the only COVID-19 testing center in Gaza, leaving it inoperable for three days. Positive cases went undetected for those days at a time when people were crowding in shelters, creating an increased risk of exposure.



Sources: The World Bank, Palestinian Central Bureau of Statistics

"This escalation comes at a time when our hospitals are suffering from the COVID situation, which increases their needs for all medicines and medical supplies. In addition, the ICU rooms were almost full with COVID patients, so according to the Ministry of Health officials, if the escalation continues for a few days, it could completely overwhelm the health system in Gaza."

- Ahmad Al Najjar  
Anera Medical Donations Program Officer in Gaza



As Safa Howar (above), Gaza's Al Quds Hospital warehouse manager, stocked the shelves with PPE from Anera in July 2020, she commented that "we are using 10 times more of these protective items than in normal times. As much as possible, we are trying to follow all of the protective measures, but there are times when medical gloves and masks are missing from local stores."





**WB** **Medical shipments** | ongoing  
**GZ** Anera has **delivered 53 shipments of medical aid for Gaza and 37 shipments for the West Bank since March 2020**. Our deliveries support hospitals and clinics that serve underprivileged families. Each shipment contains scores of different kinds of medicines and healthcare supplies, like PPE (see previous page) and chronic disease medications, at the top of the most needed supplies list in medical facilities across Palestine.



**GZ** **Food parcels** | Ramadan 2020  
**GZ** Anera distributed Ramadan food parcels to **3,552 Gaza families** with no source of income. Also included was fresh produce purchased from local family farms in Gaza that Anera supported with greenhouses.

**GZ** **Face mask production** | Oct.-Nov. 2020  
**GZ** Anera hired 8 women at the Cooperative Society for Saving and Lending (CSSL) women's center to sew **90,000 comfortable and reusable face masks**. The salaries helped the women — all primary breadwinners — to support their families. Masks went to families who couldn't afford to buy them.

**WB** **Food vouchers** | Oct. 2020, Apr. 2021 & 2022  
**GZ** In the midst of high poverty rates, Anera delivered vouchers two times in the space of six months to **7,825 Gazan families**, helping them buy the food and household items they needed. Fourteen Gaza grocery stores participated. Again, during Ramadan 2022, Anera will distribute 6,888 vouchers in Gaza, and — for the first time — 1,890 in the West Bank.



**GZ** **Hot meals** | Jan. to June 2021  
**GZ** Anera employed dozens of women from the CSSL women's center to prepare hot meals for families under COVID quarantine. The women, with some help from local restaurants, also made **108,000 meals** for families displaced by the May 2021 bombings. Anera purchased the produce for the meals from 30 local farmers.



## Anera's COVID Reponse in Palestine

Anera's work in Palestine addresses many of the challenges outlined in this report. While Anera delivers relief, we also invest in job creation, infrastructure, education, livelihoods and longer-term food security, so communities are prepared to survive and overcome the challenges each new crisis brings. Use this key to guide you through our programs and the impact they have had.

- WB** West Bank
- GZ** Gaza
- health & relief
- livelihoods
- food
- women's empowerment
- water

## Addressing acute needs

## Delivering long-term development

**GZ** **Building family farms**  
**GZ** On **59 home rooftops and 112 family plots** of land in Gaza, Anera has installed water-smart greenhouses since the pandemic began. Anera provides training on best practices for planting and expanding yields as well as saplings to jumpstart first harvests.



**GZ** **Breakfasts for preschoolers**  
**GZ** Anera is delivering healthy, fresh breakfasts to **1,428 Gaza preschoolers every school day** in a way that encourages sustainable, long-term community partnerships among farming families, working women and schools. We employ women chefs to make the food, buy the produce from local farmers, and deliver food that improves children's health and mental development.



**GZ** **Water accessibility**  
**GZ** Anera's water infrastructure work in Gaza has continued unabated since COVID has struck the region. Our work includes installation of **9 reverse osmosis systems** on healthcare facilities and community centers. These efficient systems turn Gaza's contaminated groundwater into clean water for drinking and use in treating patients. Anera has also installed **5 community water networks** and **5 sanitation networks that link to 9,250 family homes; rehabilitated 4 water wells that serve 13,600 families; and built 3 stormwater management systems that serve 36,000 families.**



**WB** **Supporting women entrepreneurs**  
**GZ** Anera's Women Can program is supporting **113 women-headed families in the West Bank and 30 in Gaza**. Anera helps this vulnerable population to generate their own income by providing training in business management and the tools to operate in their chosen professions.



## COVID Vaccinations Stymied by Slow Start and Misinformation

Palestine is responding to the pandemic as best it can. As of December 2021, the Palestinian Authority authorized COVID-19 vaccinations for all Palestinians over the age of 12. Four out of ten eligible Palestinians over 12 have been fully vaccinated. But the distribution of vaccines is uneven. Reuters News Agency's COVID Tracker reports that **more than 72% of Palestinians in the West Bank were fully vaccinated by the end of 2021 but only 28% of Gazans were fully vaccinated.**

Gaza and the West Bank did not receive their first shipment of vaccines until February 2021, nearly two months after the beginning of Israel's vaccine rollout. The Palestinian Authority (PA) secured a shipment of 2,000 doses of the Russian Sputnik V vaccine for frontline healthcare workers in Gaza, but it was delayed from entering Gaza due to Israeli concerns that the vaccines would go to Hamas officials. Only on February 17th did Israel allow the vaccines into Gaza. One month later, Palestine received its first shipment of vaccines from the World Health Organization's COVAX program, containing 38,000 doses of the Pfizer BioNTech vaccine, one-third of which went to Gaza. A June 2021 arrangement between Israel and the PA for one million vaccine doses collapsed amid public criticism.<sup>13</sup>

In August, COVAX provided 600,000 doses for Gaza and the West Bank. And at the end of 2021, COVAX delivered another substantial shipment of vaccines (453,600 doses) to Palestine. In late January 2022, the United Arab Emirates provided 1 million doses of Sputnik V to Gaza — the single largest consignment of vaccines to the territory thus far.<sup>14</sup>

## Vaccine Hesitancy Becomes a Bigger Problem Than Availability

By late summer 2021, vaccine supplies in Palestine improved and concern began to shift to the issue of vaccine hesitancy. At the end of August, the health ministry mandated that every person reporting to work in an office or attending school and university must be vaccinated. To encourage vaccinations, the ministry created a raffle system making any Palestinian over the age of 50 who got vaccinated eligible to win \$200, with 10 winners chosen daily. The raffle led to a surge in vaccinations, with more Palestinians getting vaccinated in the week after the program was implemented than in the previous six months. The same program in Gaza met with similar results.

And still, the rate of fully vaccinated individuals in Palestine remains relatively low. Public opinion polls conducted in 2021 indicate that a substantial percentage of Palestinians in the West Bank and Gaza (35% in June, declining to 24% in September and December) report that they and their families are unwilling to be vaccinated against COVID-19.<sup>15</sup> The spread of misinformation on social media and WhatsApp groups has led to distrust and feelings of futility surrounding the vaccine.

Suha Gadeon, a 41-year-old Bethlehem professional worried about reputed health side effects like blood clots. Others put credence in more outlandish internet rumors, suggesting that it could harm fertility or alter personalities.<sup>16</sup> Issa Abu Huleil, a 53-year-old produce vendor in Jerusalem's Old City, told the New York Times in August 2021, that he “read online that people will die two years after they take the vaccine.”<sup>17</sup>

Others express a sense of fatalism about COVID. Speaking from Gaza City where her mother is hospitalized with the virus, a Palestinian woman named Sana told Al Jazeera that she and her family have refused vaccination. “The health ministry says it is beneficial but other people say it is not. Getting coronavirus is inevitable.”<sup>18</sup>

Maya Humaid, a social media influencer in Gaza, says “There's a lot of people who don't believe the virus even exists, and live on fatalism. After the war in May, people have generally relaxed precautionary measures such as wearing masks. They say, ‘we didn't die in the war, so how are we going to die from a virus?’”

One survey conducted in late 2020 and early 2021 found that a majority of healthcare workers in Palestine had concerns about the vaccine, with about 60% expecting it would lead to significant and long-term side-effects. Fully 55% feared the vaccine actually presented a risk of contracting COVID-19. While these concerns may well have diminished as more has become known about the vaccines, this initial hesitancy among healthcare professionals, whose attitudes have a significant influence on the public they serve, do indicate the challenges that were already present at the outset of the vaccination effort.<sup>19</sup>

There are other barriers that contribute to low vaccination turnout. In the West Bank common difficulties include a lack of transportation, roadblocks and checkpoints. The elderly and families living in rural areas are particularly vulnerable since many are homebound or have to travel some distance to get the vaccines. In Gaza, the effects of the May 2021 bombardment have combined with economic hardships to push the coronavirus down on the list of many residents' concerns.

In late 2020 and early 2021, a majority of healthcare workers in Palestine had concerns about the vaccine.

“There's a lot of people who don't believe the virus even exists, and live on fatalism. After the war in May, people have generally relaxed precautionary measures such as wearing masks. They say, ‘we didn't die in the war, so how are we going to die from a virus?’”

– Maya Humaid, social media influencer in Gaza

## THE INTERNATIONAL RESPONSE TO PALESTINE'S COVID CRISIS

The residents of the West Bank and Gaza cannot overcome this latest health crisis on their own. The international community must help by providing vaccines, other medicines and the resources to use them.

Although slow to roll out, larger quantities of COVAX vaccines are now reaching Palestine. Much more, however, must be done to accelerate the vaccination drive. The rate of vaccinations in Palestine has slowed, even as case loads reached new highs in early 2022, fueled by the highly infectious omicron variant. As Médecins Sans Frontières noted in October 2021, “high-income countries are hoarding an estimated 870 million excess doses” while vaccine drives in many lower-income countries languish.<sup>20</sup> A two-track approach must couple public outreach and incentives to overcome vaccine skepticism with greater international support to ensure vaccine supplies adequately meet demand.

The United Nations has had a major role in responding to the crisis. In March 2020, the Humanitarian Country Team in the Occupied Palestinian Territory released its Inter-Agency COVID-19 Response Plan to all humanitarian committees outlining how to respond to the immediate public health and humanitarian needs in the West Bank, East Jerusalem, and Gaza.

The effort raised and mobilized \$41.9 million USD to meet local needs.<sup>21</sup> UNRWA, which strictly serves refugee communities in Palestine, launched a \$94.6 million COVID-19 program with a special focus on health, cash assistance and education. UNRWA was able to help fund several programs aimed at education for Palestinian children as well as one-time cash payments.

The World Health Organization and UNICEF have helped to coordinate the international response. Along with Anera, other international organizations involved in COVID response include the International Committee of the Red Cross, the French-based Agency for Technical Cooperation and Development, Care International, Catholic Relief Services, International Medical Corp, the UK-based Medical Aid for Palestinians, Médecins du Monde, Médecins Sans Frontières, Physicians for Human Rights - Israel, Taawon, and World Vision. All groups assisting Palestine's public health efforts understand the key to success is sustainability. And that relies on strengthening a community's ability to respond to crises.

Some 44% of Palestinians have received at least one dose of a COVID vaccine. The vaccination campaign in the West Bank has now reached a substantial percentage of the population, which should help blunt the lethality of the ongoing pandemic there. The situation in Gaza, though, remains more precarious. At the current pace, it will be many months at least until Palestine achieves the target of a 70% vaccination rate. Booster shots add a still more distant benchmark.

COVID-19 will continue to impact many aspects of life in Palestine even if it is brought under control through adherence to health protocols. The country must rely on expanding



*Anera paid Heba and other women from local partner, the Cooperative Society for Saving and Lending, to make 90,000 face masks for distribution in their Gaza communities.*

vaccine use and other health and safety precautions to relieve the pressures of the pandemic, especially in the face of new strains of the virus.

International assistance must directly bolster COVID response by supporting information and awareness campaigns that debunk myths and validate the science and public health behind vaccinations. Depending on the ongoing rates of infections and hospitalizations, and the uptake of recently delivered vaccines, the international community may also need to more fully prioritize increasing supplies of vaccines, testing kits, PPE, and medical equipment like ventilators and oxygen. Additionally, work must increase to strengthen the overall capacity of the health sector. Strengthening Palestinians' access to primary care providers is a longer term but essential component, as family doctors are often among the most persuasive and trusted voices for vaccination to reach patients.

Just as vital is a concerted international effort to make large and lasting improvements to the Palestinian economy. The economic devastation wrought by the pandemic and years of closure is just as punishing for vulnerable families as the virus, and threatens to do lasting damage to people's prospects if greater investments are not made.

Palestinians remain resilient but are growing tired of needing so much resilience. They need more resources and support from the international community to move beyond COVID-19 and build a strong, flourishing economy.





# اللقاح كرمالنا



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## Palestinian Refugees in Lebanon in COVID Times

Refugees from Palestine have resided in Lebanon for over 70 years and have always experienced high rates of poverty, unemployment and overcrowding. COVID-19 has hit their vulnerable camps and communities hard.

Palestinian refugees are integral to Anera's work in Lebanon. During the pandemic, students from our vocational education classes in cooking, construction, plumbing, nursing and other trades employed their new skills, while earning an income, to help their neighbors.

These inspiring, young change-makers, with their Lebanese and Syrian peers, worked together to sew **1.6 million face masks**, make **95,000 hot meals** for vulnerable or quarantining families, build and equip **one COVID isolation center**, and conduct coronavirus safety and awareness campaigns. Some **55% of Lebanon's Palestinian refugees who have had their vaccines came through Anera's vaccine mobilization activities** across five camps.



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### **ABOUT ANERA'S ON-THE-GROUND SERIES**

The Anera on-the-ground series is designed to add a humanitarian voice to the story of life in the Middle East. With data from Anera's professional staff, people who live and work in the communities they serve, and with over 50 years of experience in the region, Anera has a unique opportunity to build a fuller understanding of what life is like for families struggling to survive within an atmosphere of severe political strife and daily turmoil.