Humanitarian Access
SCORE Report: Gaza – the first six months
Survey on the Coverage, Operational Reach, and Effectiveness of Humanitarian Aid
Under a multiyear research programme supported by USAID’s Bureau for Humanitarian Assistance (USAID/BHA), Humanitarian Outcomes studies how aid reaches people in hard-to-access emergency contexts. In partnership with GeoPoll, the project conducts remote telephone surveys of crisis-affected people on their perceptions of the effectiveness of the aid response and the access challenges in their areas. Combined with key informant interviews with humanitarian responders and other contextual research, data from the Survey on Coverage, Operational Reach, and Effectiveness (SCORE) helps to identify the humanitarian providers and practices that have achieved the greatest presence and coverage in difficult environments.

This SCORE report presents findings from a mobile telephone survey of 810 people in Gaza conducted by GeoPoll for Humanitarian Outcomes 4–17 February 2024. The survey reached 487 men and 323 women across all 5 governorates in Gaza, with a majority (70%) reached in Rafah, due to the mass displacement. Humanitarian Outcomes researchers also conducted remote interviews with 21 key informants from humanitarian organisations and donor governments.

Full survey results and additional information on the SCORE research methodology, including an interactive dashboard of response data, are available at [www.humanitarianoutcomes.org/projects/core](http://www.humanitarianoutcomes.org/projects/core)

### Abbreviations and Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>COGAT</td>
<td>Coordination of Government Activities in the Territories</td>
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<td>CRS</td>
<td>Catholic Relief Services</td>
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<td>ICRC</td>
<td>International Committee of the Red Cross</td>
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<td>IDF</td>
<td>Israeli Defence Forces</td>
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<td>IHL</td>
<td>international humanitarian law</td>
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<td>MSF</td>
<td>Médecins Sans Frontières</td>
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<td>OCHA</td>
<td>UN Office for the Coordination of Humanitarian Affairs</td>
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<td>UAE</td>
<td>United Arab Emirates</td>
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<td>UNRWA</td>
<td>United Nations Relief Works Agency for Palestine Refugees in the Near East</td>
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<td>WCK</td>
<td>World Central Kitchen</td>
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<td>WFP</td>
<td>World Food Programme</td>
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<td>WHO</td>
<td>World Health Organization</td>
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Beyond the cost in human lives and suffering, and the instability it brings to the wider region, the war in Gaza has had serious repercussions for international humanitarian law (IHL) and norms around humanitarian access.

Since the beginning of the current conflict, precipitated by the attack on Israel by Hamas on 7 October 2023 and followed by a major military offensive by Israel, humanitarian aid for civilians entering Gaza has been far less than what is needed, with hardly any of it reaching the north. Tight restrictions on aid goods, equipment, and personnel allowed to cross into Gaza have severely limited operational capacity for distribution, and there is no protected operational space for humanitarian efforts. The more than 30,000 civilian deaths have included over 150 aid workers, an unprecedented number for a single context in such a short period. The mounting scarcity, desperation, and the breakdown of civil order have meant that the small amount of aid coming into Gaza on trucks is often seized before it can be distributed in a safe and principled way. People are now struggling to meet basic survival needs, with the first deaths of children from acute dehydration and malnutrition reported in early March 2024.1

The telephone survey of Gaza residents conducted for this report in mid-February found the following.

- Less than 30% of respondents in the north had received any aid at all since the crisis began.
- The aid being delivered is mainly in the form of food and is insufficient. Most aid recipients said the aid they received did not meet their priority needs and only 3% of people who received help said it was in the form of medical aid or clean water.
- The UN agency, UNRWA, remains the lynchpin of aid delivery in Gaza, cited by respondents as by far the most present and effective aid provider. The recent defunding of UNRWA by its largest donor, the US, threatens to remove the main mechanism for distribution of critical goods and services.
- Other aid providers that were (less often but repeatedly) named were the Ministry of Social Development, the Palestinian Red Crescent Society, World Food Programme (WFP), UNICEF, International Red Cross and Red Crescent Movement members, the Palestinian NGO MA’AN, and a very small number of international NGOs. In all, fewer than 10 international NGOs have managed direct operations in Gaza since the war began.
- People blame authorities on both sides of the conflict for hindering humanitarian aid. While the Israeli border restrictions were named as the biggest obstacle to aid coming in, in terms of their own ability to access the aid inside Gaza, the second largest obstacle according to respondents (after distance) was “local officials took or blocked the aid”. A plurality of commenters reported corruption, diversion, and favouritism in distributions, with many remarking on seeing aid for sale in local markets.

The Gaza crisis presents enormous challenges to humanitarian access in all conceivable respects: major collateral violence from ongoing hostilities, generalised crime and disorder, heavy logistical constraints, extreme political sensitivities, and bureaucratic blockages. Advocacy and diplomatic efforts to secure ceasefires, facilitate humanitarian operations, and allow for more aid into Gaza have been intensive and ongoing, but so far yielded very little result. As yet unable to exert pressure sufficient to improve humanitarian access, the US government has attempted workarounds such as airdrops – an extremely risky and suboptimal measure considered a last-resort option for aid – and is currently planning for an offshore delivery platform.

Alongside the ‘Western’, UN-led humanitarian response has been a substantial response from states, civil society, and the private sector in the Arab world. Gazans themselves are doing what they can to help each other with community-based efforts and networks of support, but displacements and increasingly diminishing resources have debilitated these efforts. Trauma, fear, bereavement, and fatigue have naturally also exacted a heavy toll on aid workers in Gaza.

More than other armed conflicts in recent memory, humanitarians fear the implications of the Gaza crisis on future adherence to IHL and the ability of aid organisations to negotiate access based on these principles and norms. More immediately, however, they warn that without massive upscaling of aid operations allowed to take place, the humanitarian and health workers in Gaza that have struggled to meet the needs of the civilian population will be unable to continue, leading to an even greater calamity.
Percentage of people who received any aid since October 2023

Gaza survey on coverage, operational reach, and effectiveness, February 2024, N=810
The current conflict began on 7 October 2023, when Hamas armed raiders killed over 1,200 Israelis and foreign nationals and abducted a large number of hostages, of whom an estimated 134 were still being held in Gaza 5 months later. In response, Israel launched a major campaign of aerial bombardment against the territory, followed on 27 October by a large-scale ground invasion.

Armed conflict between Israel and Hamas has occurred several times since Israel withdrew from the territory in 2005. However, the scale, intensity, and humanitarian impacts of the current war are unprecedented, with an estimated 30,000 people now dead and 70% of homes destroyed.

The integration of Hamas forces in civilian neighbourhoods and facilities has meant that targeting by the Israeli Defence Forces (IDF) is functionally equivalent to wholesale, indiscriminate destruction. As many have observed, there is no place in Gaza that is safe for civilians, including hospitals and schools. The combination of heavy munitions deployed in urban settings with extreme population density and lack of egress for refugees amounts to a critical humanitarian disaster affecting an already vulnerable, aid-dependent, and psychologically stressed population. Approximately 300,000 Palestinians in northern Gaza have been cut off from almost all humanitarian assistance. According to the UN, around 576,000 people (25% of the population) are “one step away from famine.”

A brief humanitarian pause lasted from 24 November to 1 December 2023. Since then, Israeli military operations have expanded into southern Gaza leading to further destruction and displacement. The population of Gaza has been pushed southward, with a majority now in Rafah, the southernmost governorate, and the location of the main crossing point for humanitarian aid coming through Egypt. The telephone survey sample directly reflects the massive displacement (Figure 1), estimated at over 1.7 million people (more than 75% of the population). Many people have been displaced multiple times, and each displacement to a new area makes it more difficult to secure the means of survival.

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5 The previous Israeli occupation, 15 years of blockade and movement restrictions and numerous military operations in Gaza, meant that living conditions were dire even before 7 October 2023, with 80% of Gazans estimated to be dependent on aid and two thirds living in poverty, with inadequate access to clean water and impeded access to health services. (UN Conference on Trade and Development (UNCTAD). (2023). Developments in the economy of the Occupied Palestinian Territory. https://unctad.org/system/files/official-document/tdbex74d2_en.pdf; OCHA (2023). Humanitarian needs overview, Occupied Palestinian Territory, 2023. https://www.ochaopt.org/sites/default/files/HNO_2023.pdf
Many of the displaced are living in extremely overcrowded and unsanitary conditions in public shelters and informal sites. Water and sanitation assessments have reported that, on average, 340 people share one toilet, and 1,290 people share one shower.\(^8\)

An epidemiological study commissioned by the UK Humanitarian Innovation Hub projected dire mortality outcomes from both the direct and secondary health impacts of the war. In the worst case scenario (escalation of the war), the model projects 74,290 excess deaths in the absence of any epidemics, and 85,750 excess deaths if an outbreak does occur.\(^9\)

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In the survey sample of 810 people, 793 survey respondents (98%) said they were in need of aid. Since the crisis began, 67% of respondents reported having received some aid, while 33% had not received any. Responses also showed that the chances of accessing aid were a good deal higher in the southern governorates of Khan Yunis and Rafah, where the crossing points are located, illustrating how little aid is reaching the north, because of operational challenges and insufficient volume (Figure 2).

Figure 2: Need vs. receipt of aid, by governorate

Operational presence inside Gaza

Since the beginning of the current conflict, the international aid presence in Gaza has been very small. While 24 international NGOs are supporting programme activities inside Gaza, fewer than half of them have a ground presence themselves. The main operational UN agencies (apart from UNRWA, which essentially functions as a local, major service provider) are WFP (food aid and logistics), UNICEF (water, medicines, and other emergency supplies), and World Health Organization, WHO (hospital support). Major donor governments’ defunding of UNRWA, after some of its staff members were alleged to be involved in the Hamas attack on Israel, threatens the principal conduit for assistance.

When asked to name the most present and effective humanitarian providers, survey responses underscored the critical importance of UNRWA to the aid efforts (Figure 3), followed to a much lesser degree by the local authorities (Ministry of Social Development). Other actors making an impact were members of the International Red Cross and Red Crescent Movement (specifically the Palestine Red Crescent Society, the Red Crescent Society of the United Arab Emirates (UAE), and the International Committee of the Red Cross (ICRC) and the local NGO, MA’AN Development Center. The international NGOs cited by at least 10 respondents for their presence and effectiveness inside Gaza were ‘CHF’ (now Global Communities but still referred to by respondents by its former acronym), Catholic Relief Services (CRS), World Central Kitchen (WCK), and Médecins Sans Frontières (MSF).
The United Nations Office for the Coordination of Humanitarian Affairs (OCHA) and operational aid agency situation reports provide fewer details about the Arab world response, but it is clear from interviews and survey responses that states like Qatar, UAE, and Jordan are playing prominent roles in aid efforts. The extent to which remittances and diaspora support to individuals and organisations in Gaza has been able to continue and what role they are playing in people’s survival efforts are also unclear.

As one interviewee noted, unlike in other response contexts where the international presence can be bloated and intrusive – crowding out local actors while absorbing much of the funding – in the case of Gaza, local actors are overwhelmed and in need of much more external support. Going by the principle that humanitarian response should be “as local as possible and as international as necessary”, they emphasised this benchmark was far from being met.

**Defunding of UNRWA**

Before the current conflict erupted, UNRWA had 13,000 staff in Gaza working in civil sector roles such as education and health services. Around 3,000 emergency operations staff are still actively working, making UNRWA by far the largest employer of aid workers, with a workforce larger than that of all the other humanitarian missions combined. It also maintains the logistical backbone for operations with its health centres, and its schools and other facilities serving as shelters and aid distribution hubs.

The decision by the US government and some other humanitarian donors thereby threatens to undermine the greater part of aid operations – already inadequate – that are taking place in Gaza. Recognising this, 19 international NGOs supporting programmes in Gaza issued a joint statement urging the restoration of funding, insisting, “The work of UNRWA cannot be replaced by other agencies.” Regional-level donor representatives also recognise the indispensability of UNRWA at the current time and were said to be discussing potential options between them for filling the gap.
Indicators of impeded access

Humanitarian Outcomes’ past research on aid operations in insecure and access-constrained environments has noted a correlation between the lack of secure humanitarian access and the proportion of assistance that is direct food delivery.\(^{10}\) While food is almost always the most prominent form of aid as measured in funding and numbers of recipients, its proportion rises relative to other kinds of aid (such as health and sanitation assistance) the more challenging the operating environment. This is because food deliveries are relatively straightforward logistical operations, not requiring a sustained programming presence, significant staff inputs, or technical expertise. In Gaza, compared to other hard-to-access emergencies reviewed under this research programme, the percentage of survey respondents receiving food relative to any other form of aid is notably high (98% of aid recipients got food while only 12% or less received anything else (Figure 4)).

As is often the case in these environments, the people that managed to access aid mostly reported that it did not meet their most urgent needs (Figure 5).

The intensity of the violence and severity of the humanitarian conditions in Gaza stand out amid other recent hard-to-access aid contexts for the disparity between the scale of needs and the size of the response (Figure 6).

Figure 6: Scale of crisis vs. response in Gaza and other access-constrained humanitarian emergencies

Source: OCHA, OCHA FTS, IOM, CCCM Cluster, Humanitarian Outcomes Aid Worker Security Database, CIIM Yemen, Tigray War Project (Ghent University)
Aid blocked at the border

Humanitarian agencies and donor governments are amassing aid supplies on the Egypt side of Rafah crossing, but very limited amounts are being cleared to enter Gaza by the Israeli authorities. At the end of February, WFP, which leads the logistics cluster for the coordinated humanitarian response, reported a “huge backlog of approximately 1,500 UN/ international NGOs trucks with the life-saving assistance... waiting to be manifested and dispatched to Gaza”.11

Citing dual use concerns, Israel imposes prolonged and cumbersome administrative procedures for clearing aid goods to enter Gaza, with unpredictable outcomes. Strict screening procedures mean that it takes up to a month for supplies to enter Gaza and if even a single item in a shipment is rejected the entire cargo is returned to Egypt.12 There is no official list of restricted items, but interviewees report that shipments have been denied for containing “anything other than food or medicine,” including “anything made of metal or wood” (such as poles needed for tents), hard-toe work boots, animal fodder, and critical items such as fuel and communications equipment. Medical aid organisations have consistently been denied the import of power generators, water purifiers, solar panels, and other hospital necessities.

The latest updates show continuing severe blockages in getting supplies into Gaza with an average of 99 trucks per day entering in February – a decline on previous months and way below the target of 500 per day. Openings of both the Kerem Shalom and Rafah crossing have been inconsistent, movement of goods across the border hugely delayed by inspection processes, and large amounts of perishable goods have spoiled before they could be delivered.13

Civil disorder

Once on the Gaza side of the border, the aid deliveries are imperilled by the absence of law and order at the crossing point. IDF attacks on Palestinian policemen led to the withdrawal of all law enforcement presence from the area. Consequently, many trucks carrying aid have been stopped, sometimes violently, and their contents seized – either by criminal gangs or groups of desperate residents.14 The lack of security at the crossings has meant that 1,491 fewer trucks entered Gaza in February than in the previous month.15

Deliveries able to get further into Gaza often cannot reach their intended destination for offloading and orderly distribution. Instead, people in dire need will surround the vehicles and empty them in what humanitarian workers have termed “spontaneous self-distribution”. On 20 February, WFP announced it had temporarily ceased food deliveries to northern Gaza, after incidents where...
Crowds blocked and surrounded the convoys, one case resulting in the beating of a driver.\textsuperscript{16} The latest WFP situation report notes that deliveries are paused “until conditions are in place that allow for safe distributions”.\textsuperscript{17}

**Collateral violence and failures of deconfliction**

It goes without saying that a major reason why the international humanitarian footprint in Gaza is so small is the ongoing major military offensive and high risk to personnel, along with the general civilian population (Figure 7). UNRWA has recorded 335 conflict-related incidents impacting UNRWA premises since 7 October 2023, and estimates that over 4,000 internally displaced people seeking safety in UNRWA shelters have been killed.\textsuperscript{18}

**Figure 7: Civilian fatalities, 7 October 2023 to February 2024**

![Figure 7: Civilian fatalities, 7 October 2023 to February 2024](source: Armed Conflict Location & Event Data Project (ACLED). www.acleddata.com)

Collateral violence has impacted other agencies and international NGOs as well, despite their diligent and daily efforts at deconfliction, repeatedly notifying the IDF and Israeli civilian interlocutors of their movements and the locations of their static facilities. An airstrike by the Israeli military on 18 January 2024 landed just outside an NGO residence causing injuries and forcing an evacuation of international members of the emergency medical team.\textsuperscript{19} This despite the coordinates of the residence and the whereabouts of its inhabitants being reported daily for deconfliction purposes. Many other collateral impacts and close calls have been reported as well. MSF notes that, “Since the war began, our medical teams and patients have been forced to evacuate nine different health facilities in Gaza, after coming under fire from tanks, artillery, fighter jets, snipers, and ground troops, or after being subject to an evacuation order. Medical staff and patients have been arrested, abused, and killed.”\textsuperscript{20}


\textsuperscript{18} UNRWA (2024, 24 March).


The dysfunction of deconfliction efforts was noted in a UK parliament committee report stating plainly that it “is not working, and aid workers have been killed and injured in their duties”. OCHA likewise decried the attacks on humanitarians’ deconflicted compounds, saying they “degrade confidence in the deconfliction system”. Underscoring that point, several humanitarians interviewed for this report expressed deep scepticism that the strikes were purely accidental.

**Violence affecting aid workers**

Aid worker fatalities in Gaza are the highest yet recorded in a single context over a six-month period, according to the Aid Worker Security Database (AWSD). While the majority of fatalities were part of the general collateral violence affecting civilians (i.e. people killed in bombardments while at home as opposed to on the job), these unprecedented numbers can nevertheless be viewed as a metric of conflict intensity and indicator of the lack of protected space for humanitarian efforts and other civilians.

From the beginning of hostilities in October 2023 through February 2024, at least 189 aid workers have been killed in Gaza. This toll includes 162 UN staff, from 4 different agencies, and 14 staff and volunteers of the Palestine Red Crescent Society. In addition, OCHA has reported the deaths of at least 340 health workers, 47 Civil Defence workers, and 130 journalists.

All fatalities currently recorded in the AWSD are of national staff members. An even greater number of aid workers sustained injuries, but the complexity and severity of the conflict impedes accurate reporting of these figures, as organisations face challenges in tracking and confirming the wellbeing of their staff members in Gaza.

**Logistical, bureaucratic, and communication impediments**

In addition to insecurity challenges, aid deliveries to the north of Gaza have been thwarted by denials of access by the Israeli authorities. OCHA reported that a “dramatic increase in the rate of denials by the Israeli military of access to areas to the north of Wadi Gaza...meant that only 7 of 29 planned missions were carried out”. Such denials echoed the administrative hurdles of bringing aid into Gaza, which some NGOs described as an almost “malicious bureaucracy”, which saw trucks turned back for carrying just one perceived dual use item (although it was not explained what that one item was, or why it was rejected).

The destruction of telecommunications infrastructure and the cut-off of electricity had led to several blackouts and continuing communication challenges for the general public and aid agencies alike. People have been unable to contact ambulances, emergency hotlines, or family and relatives, or to access critical life-saving information such as secure evacuation routes and timely security updates. Constant network outages and restrictions on satellite phones and radios make it hard for aid agency staff to communicate with their staff, coordinate movements, and manage security risks. Humanitarian coordinators also lack a reliable direct line of communication to IDF officials in Gaza, so time-sensitive

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22. OCHA. (2024, 6 March). *Humanitarian access snapshot - Gaza Strip, end-February 2024.* [https://www.ochaopt.org/content/humanitarian-access-snapshot-gaza-strip-end-february-2024](https://www.ochaopt.org/content/humanitarian-access-snapshot-gaza-strip-end-february-2024)
23. Verification of 2023 incident data is still ongoing and these numbers are expected to change.
25. Ibid.
26. Ibid.
messages about security and route-planning have to be relayed through the body responsible for
civil-military coordination, Coordination of Government Activities in the Territories (COGAT).28

Affected people’s perspectives: Diversion, corruption, and lawlessness
hindering access to aid

Out of the 810 Gazans surveyed for this report, 369 (219 men and 150 women) chose to provide
open-ended comments on the aid presence in their area and the main challenges to aid as they saw
them. Many mentioned the blockade and insufficient quantities of aid coming into Gaza, as well as
the problems of large numbers of displaced people converging in a few locations, which makes fair
distribution hugely challenging. However, a plurality of commenters (110, 41%) mentioned issues with
diversion and corruption interfering with the ethical distribution of aid. Large numbers spoke of
authorities exercising favouritism and nepotism in determining who received aid, and aid being stolen
for sale on the market. The below are some typical comments collected by the survey.

- “[Obstacles are] due to the distribution of aid to those who do not need it as much as we do. Being
displaced from Gaza to Rafah, we are not allowed to take aid, whether food or clothing; all are
stolen by those in charge.”

- “Humanitarian aid [goods] are distributed only among relatives and acquaintances through
favouritism and nepotism, and they are sold in the market at fantasy prices; we cannot afford
them now.”

- “Lack of trust in the official distributing the aids because he takes them all for himself and sells
them in the market.”

- “No aid comes at all, and no one asks about us. We need a lot of food and household items,
which are stolen by those in charge. There is no institution now doing its job.”

- “There is a lot of exploitation and favouritism, even the food items are sold at high prices.”

- “Nothing of the aid reaches us; it is stolen and sold in the markets.”

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28 “The Coordination of Government Activities in the Territories (COGAT) implements the government’s civilian policy within the
territories of Judea and Samaria and towards the Gaza Strip. COGAT is responsible for implementing the civilian policy within
Judea and Samaria and towards the Gaza Strip, in coordination and cooperation with officials from defense and government
Corruption concerns also emerged in the main survey responses. When asked what they saw as the main obstacle to their accessing aid, most people said it was not being distributed close enough to where they were, and the second largest number of respondents said “local officials took or blocked the aid”. (Figure 8).

Figure 8: Are people in your current area unable to access assistance for any of the following reasons?

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Aid is distributed too far away</td>
<td>50%</td>
</tr>
<tr>
<td>Local officials took or blocked the aid</td>
<td>42%</td>
</tr>
<tr>
<td>It is unsafe for people to access aid</td>
<td>38%</td>
</tr>
<tr>
<td>Military took or blocked the aid</td>
<td>19%</td>
</tr>
<tr>
<td>I don’t know</td>
<td>11%</td>
</tr>
<tr>
<td>No difficulty receiving aid</td>
<td>9%</td>
</tr>
</tbody>
</table>

Data from Gaza survey on coverage, operational reach, and effectiveness, February 2024. www.humanitarianoutcomes.org/projects/core

A reverberating blow to international humanitarian law and norms of access

Much has already been written on the execution of the war itself, and the extraordinary toll on civilians that amounts to collective punishment for the heinous acts (also perpetrated on civilians) by Hamas forces. There is no question that “Israel’s choices of methods and means of warfare have caused a humanitarian catastrophe.”

Humanitarian action, as conceived and organised in the modern international system, is concerned with mitigating the catastrophe, rather than resolving the causes of it – that is a task for state actors. For humanitarian actors to do their job, however, requires that warring parties take some meaningful steps to meeting their obligations under IHL, which stipulates:

The Parties to the conflict shall allow and facilitate rapid and unimpeded passage of all relief consignments, equipment and personnel.

- Geneva Conventions, Additional Protocol I, Article 70.2

Personnel participating in relief operations shall be respected and protected.

- Geneva Conventions, Additional Protocol I, Article 71.2

Although in every armed conflict one can find examples of IHL being violated and impediments to humanitarian access, the current war in Gaza strikes many observers within the humanitarian sector as uniquely damaging to the normative framework under which they work. Apart from the severe limitations on relief goods allowed to pass into Gaza, three factors in particular seem to contribute to this impression: the repeated military strikes on aid convoys despite deconfliction measures; the adversarial tone and critical public statements by the Israeli government vis-à-vis the aid response; and the acquiescence (albeit over concerns and objections) of the US and other major powers.

The aid system has had very limited traction with the Israeli government in efforts at advocacy and humanitarian diplomacy to increase humanitarian access. Repeated calls at every level to reduce restrictions at crossing points, to open more crossing points, to allow more vitally needed aid and commercial traffic into Gaza, to respect IHL, and to fulfil legal responsibilities as an occupying power to facilitate aid access, have not resulted in meaningful improvements. Some analysts warn that the failure of coordinated advocacy and diplomacy towards a lasting ceasefire, or meaningful increases in humanitarian access or respect for international humanitarian and human rights laws, are leading to a global erosion of trust in the Western-led international humanitarian system. Such a loss of trust and faith in its legitimacy could undermine the ability of humanitarian organisations to negotiate access to people in need long into the future.

The clear bravery and dedication of the humanitarian aid workers and health staff in Gaza who have continued working under increasingly impossible conditions is noteworthy. The fact that health facilities have been able to continue to operate even as medical staff run out of basic supplies and equipment such as morphine and tourniquets, and must reuse bandage materials, is a testament to these providers. Interviewees warn though that many are nearing the limits of human endurance, are exhausted and overwhelmed, and that among all the other needs, mental health support to staff will be critical. International organisations supporting these workers must focus on their duty of care and find ways to provide mental health and security risk management support and training to staff, possibly through remote means, to the extent possible.

As is always the case in humanitarian crises, there have also been strong local and community-led responses through existing networks of solidarity and care. People have shared increasingly meagre resources, supported each other with first aid, transport, efforts to find shelter and to access diminishing local resources such as locally-sourced produce. Aid agencies with pre-existing partnerships with local organisations have been able to support some of these efforts. For example, Christian Aid was able to support a local agricultural development association to work with local farmers to provide food packages to needy people from local produce. Again, however important, there will be limits as to what such efforts can achieve as local markets become increasingly limited, people become repeatedly displaced, and as local responders become increasingly exhausted. Anera (an international NGO working

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Prospects for the near future and some positive practice examples

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in Palestine (West Bank and Gaza), Lebanon and Jordan) has been able to keep operating in the north based on a commitment to localisation and our well-established roots within the community. A team of 4 staff in the north have been able since February to provide 20,000 meals daily to families in Jabalia. Procuring food locally from vendors, the team coordinates meal preparation at a Jabalia kitchen, where families come daily and collect their food. World Central Kitchen has supported local people to set up 60 community kitchens, each of which has the capacity to produce around 2,000 meals per day. World Central Kitchen provides equipment and food supplies.

Perhaps surprisingly, it has continued to be possible to support people with humanitarian cash grants. ATMs and mobile money payment systems have continued to operate, reaching over 160,000 households with an emergency cash grant they were able to use for food, medicines, water, hygiene, bedding, and transportation. If goods are to continue to be available in markets, cash support needs to be complemented by scaled up in-kind assistance and, critically, by the resumption of commercial traffic into Gaza.

In terms of the weeks and months ahead, the humanitarian system remains in a holding pattern, unsure how to plan for an uncertain next phase. “We have no set plans” said a UN interviewee, “We are working off contingencies of contingencies.” One donor agency remarked, “Right now we are focused on making sure that the foundation for a response at scale are in place for when there is a pause in hostilities.”

A massive scale-up of the humanitarian response is urgently needed – ideally through a permanent ceasefire and major humanitarian and reconstruction assistance – but absent that, through a meaningful shift in the conduct of hostilities and the facilitation of humanitarian access. Restrictions on aid and commercial traffic must be loosened so more goods can reach Gaza through more crossings. Airdrops and sea corridors may help at the margins, but what is really needed is a huge scale-up in aid and commercial deliveries through land crossings. More visas should be approved and communications allowed so that aid can be more safely and effectively delivered. The funding freeze on UNRWA by some donors should be lifted, and the response more fully funded overall. All parties to the conflict must reinforce and respect the deconfliction system, and do more to protect and facilitate efforts to get desperately needed aid to people in Gaza.
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OCHA. (2024, 6 March). *Humanitarian access snapshot - Gaza Strip, end-February 2024*. https://www.ochaopt.org/content/humanitarian-access-snapshot-gaza-strip-end-february-2024


