



RESPONSIVENESS OF THE PALESTINIAN NATIONAL CASH TRANSFER PROGRAMME TO SHIFTING VULNERABILITIES IN THE GAZA STRIP

DR. NADER SAID-FOQAHA, MARIAM BARGHOUTI,
SAMER SAID AND BRADEN THUE

The deteriorating situation in Gaza means increasingly difficult conditions for the population, a majority of whom are already dependent on assistance to survive and who are now running out of coping strategies. In addition, newly vulnerable groups are emerging who in normal times would be productive members of society – fishers, farmers, merchants, new graduates and even government employees. The Palestinian National Cash Transfer Programme (PNCTP) and other assistance programmes are bridging the poverty gap to some extent, but are not adequate to meet increasing demand. This study looks into responsiveness and the effectiveness of the PNCTP and other programmes and explores options for extending their reach in supporting vulnerable families in Gaza.

Oxfam Research Reports are written to share research results, to contribute to public debate and to invite feedback on development and humanitarian policy and practice. They do not necessarily reflect Oxfam policy positions. The views expressed are those of the author and not necessarily those of Oxfam.

A
W
R
A
D



مركز العالم العربي للتحقيق والتنمية
Arab World For Research & Development



OXFAM

CONTENTS

List of Figures and tables	4
Abbreviations	5
Preface: The Gaza Strip – Context and Aims of the Research	6
Summary	8
Research Findings	9
Recommendations for the Palestinian Authority	10
Recommendations for donors and INGOs	11
1 Introduction and Context	12
1.1 Introduction	12
1.2 Contextual Background (Poverty and Unemployment)	13
2 Analysis of Results (Measures of Living Conditions).....	14
2.1 Household Characteristics	14
2.2 Living conditions	17
2.3 Community Relations	19
2.4 Life and future prospects	20
2.5 Sources of Income	20
2.6 Coping strategies	23
3 Measures of Vulnerability in the Gaza Strip	25
3.1 Objective measures.....	25
3.2 Subjective measures	27
4 Shifting Criteria of Vulnerability	30
4.1 Vulnerability shifting confirmed	30
4.2 Socio-economic variables contributing to vulnerability	32
4.3 Groups at risk	33
5 PNCTP and Other Assistance Providers	36
5.1 The PNCTP	36
5.2 Recipients of UNRWA Assistance	38
2 Responsiveness of the Palestinian National Cash Transfer Programme to Shifting Vulnerabilities in the Gaza Strip	

5.3 Other Sources of assistance (Primarily WFP).....	39
5.4 Emergency Assistance and Urgent Needs	41

6 Conclusions and Recommendations 43

6.1 Conclusions.....	43
6.2 Recommendations	47
Bibliography	50
Annex 1: Research Methodology.....	52
Notes.....	54
Acknowledgements	57
Oxfam	58

LIST OF FIGURES AND TABLES

Figure 1: Characteristics of poor and vulnerable families

Figure 2: Community characteristics

Figure 3: Availability of electricity each month (hours per day, 2019–20)

Figure 4: Sources of income for poor and vulnerable households

Figure 5: Percentage of HHHs resorting to the sale of household items

Figure 6: Sources of support in times of adversity

Figure 7: Declining employment and increasing dependence on assistance (percentage change from 2017 to 2019)

Figure 8: Families resorting to borrowing (percentage increase from 2017 to 2019)

Figure 9: Assessment of risk/vulnerability in terms of livelihood indicators (2019/2020)

Figure 10: PNCTP participants, classified by number of years of inclusion

Figure 11: Effectiveness of the PNCTP in bridging the poverty gap

Figure 12: Highly urgent needs, as assessed by households

Table 1: Poverty among individuals before and after receiving assistance, 2017

Table 2: Intersection between sources of assistance, by source, recipient status and gender of HHH

Table A1: Sample distribution – recipient status, governorate and gender of HHH

Table A2: Key informant interviewees

ABBREVIATIONS

ARA	Access Restricted Area
AWRAD	Arab World for Research and Development
CBO	Community-based organization
EU	European Union
FGD	Focus group discussion
FHHH	Female-headed household
GBV	Gender-based violence
GDP	Gross domestic product
GMR	Great March of Return
GNDI	Gross national domestic income
HH	Household
HHH	Head of household
ILS	Israeli shekel
INGO	International non-governmental organization
KII	Key informant interview
MHHH	Male-headed household
MoSD	Ministry of Social Development
NGO	Non-governmental organization
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
OPT	Occupied Palestinian Territory
PA	Palestinian Authority
PCBS	Palestinian Central Bureau of Statistics
PMTF	Proxy means testing formula
PNCTP	Palestinian National Cash Transfer Programme
UNRWA	United Nations Relief and Works Agency for Palestine Refugees in the Near East
WFP	World Food Programme

PREFACE: THE GAZA STRIP – CONTEXT AND AIMS OF THE RESEARCH

Political context

Shaped by almost 53 years of Israeli occupation and 13 years of ongoing blockade and torn by political divide between the de facto ruling government run by Hamas and the Ramallah-based Palestinian Authority (PA), the Gaza Strip is bearing the brunt of a protracted humanitarian crisis, in which the vast majority of the population are in need of humanitarian assistance.¹ The ongoing illegal Israeli blockade has the most severe impact on the situation in Gaza Strip due to the imposed restrictions on people's and goods' access and movement. The development of many sectors has been crippled with the imposed restrictions on a wide range of items that are treated as dual use. Over the years this has led to severe collapse of systems and progressing de-development, and the crippling of different service sectors. Furthermore, export and import restrictions severely limit the access to national and international markets leading to further weakening of many other sectors, such as farming, fishing and industry, which has contributed to severely increased unemployment rates. With such constraints and a weak economy, there have been dramatic increases in food insecurity and the level of poverty. As this crisis goes on, new layers of vulnerability appear due to the impacts of various socio-political realities, including ongoing political divisions between the PA and Hamas, salary cuts imposed by the PA, increased numbers of injuries from the Great March of Return (GMR) protests since 2018, continued electricity cuts and lack of water infrastructure and significantly reduced donor assistance.

Socio-economic conditions

Unemployment in Gaza reached 45.1% in the third quarter of 2019, with rates of 39% among males, 66.4% among females and more than 61.7% among young people (15–29 years old).² Poverty rates have soared to 53% and the rate of food insecurity to 68%.³ The deepening of the crisis in Gaza is linked to a significant shortfall in donor assistance to the Occupied Palestinian Territory (OPT). Early in 2019, the PA decided to cut the salaries of public employees in the Gaza Strip, which has had a negative impact on the purchasing power of households and a loss of cash being injected into local markets. While the economic and humanitarian crisis in Gaza is worsening, its nature is also changing, and the definition of who is deemed vulnerable is shifting. As different sectors are affected and systems approach collapse, new segments of the population who were not previously vulnerable, such as government employees and merchants, are now severely affected, with new layers of vulnerability emerging.

Coping mechanisms

With this increase in levels and types of vulnerability, households are resorting to negative coping strategies, such as restricting one's expenditure on basic needs or even having to prioritize between basic needs, such as food vs medicine, and continuously borrowing money or food in order to survive. According to Oxfam's Post-Crisis Market Analysis (August 2018), the average debt among households was then between ILS 2,000 and ILS 5,000 (US\$540–1,360), against an approximate average monthly income of ILS 410 (\$120).⁴ This indicates high levels of household vulnerability and increased dependence on unsuitable coping mechanisms, which is also associated with high levels of risk. Adding to the crisis, households face long hours of electricity cuts and a lack of access to safe drinking water, which forces them to allocate some

6 Responsiveness of the Palestinian National Cash Transfer Programme to Shifting Vulnerabilities in the Gaza Strip

of their financial resources to securing alternatives to cover daily needs, especially essential commodities like drinking water.

The Palestinian National Cash Transfer Programme

Vulnerable families in Gaza rely heavily on both humanitarian assistance and support from the Palestinian Ministry of Social Development (MoSD), which manages the national social protection system, including the Palestinian National Cash Transfer Programme (PNCPT). According to the MoSD, the aim of the PNCPT is to enhance participants' ability to meet their basic needs.⁵ It is designed to target families living below the extreme⁶ poverty line and those living between the extreme poverty line and the national poverty line.⁷ It reaches more than 119,000 families (41% of the total targeted), of whom 74,000 live in the Gaza Strip. The targeted families receive four payments each year (one every three months), at an overall annual cost of ILS 536m (approximately \$148m). The selection of families for targeting depends on a proxy means testing formula (PMTF), which estimates the welfare of the applicant household. Based on different factors and the specificities of each household, those eligible receive between ILS 750 and ILS 1,800 each quarter to cover 50% of the household poverty gap.⁸ This is meant to bridge the gap between the family's existing standard of living, measured by their level of expenditure, and the OPT national poverty line for family consumption. According to the World Bank's *Implementation Completion and Results Report* (2018), 50% of the cost of the PNCPT is covered by the World Bank and the European Union (EU), with the remainder covered by the PA.⁹ The same report indicates that the overall efficacy of the programme is substantial and that the targeting accuracy of the PMTF accurately identifies 70% of cases, with a 20% exclusion and inclusion error rate. According to the MoSD's PNCPT database; 218,518 persons are registered to receive assistance; however, in 2018 only 49.7% of them had actually received such assistance, due to lack of availability of needed funds.

Overall objectives of the study

The objective of this study was to investigate changes in the levels and types of vulnerabilities in Gaza, while also investigating the efficiency of the MoSD's PNCPT in responding to and overcoming vulnerabilities, by focusing on the programme's targeting criteria and its effectiveness in achieving its overall objectives. The results of the study are intended to inform specific audiences such as the donor community, including the EU and the World Bank, and humanitarian actors about the design of the PNCPT and ways of providing better assistance to Gaza. The research also provides civil society actors with data to help their advocacy work at national and international levels. The study contributes to the overall design of risk management and poverty reduction strategies as they pertain to the PNCPT and expands the scope of poverty analysis by identifying sections of the community that are in danger of falling into poverty or extreme poverty in the future, and reflects on the responsiveness of the PNCPT to emerging needs and vulnerable groups in Gaza. Finally, it provides recommendations for donors, the international community and the PA, and de facto Palestinian authorities on how to reduce the likelihood of vulnerable people falling into poverty and on ways of helping to increase the resilience of vulnerable people and help them to rise out of poverty.

7 Responsiveness of the Palestinian National Cash Transfer Programme to Shifting Vulnerabilities in the Gaza Strip

SUMMARY

This study explores the shifting nature of vulnerabilities in the Gaza Strip and the operation of the Palestinian National Cash Transfer Programme (PNCTP). Gaza is experiencing a deep and long-running humanitarian crisis, and shapes and forms of vulnerability are now changing, though with no real prospect of improvement in the situation of families living there. While previous measurements of vulnerability focused on factors such as income, economic disparities, dynamics of poverty and specific shocks, Gaza is now witnessing changes in its socio-economic situation and the emergence of new vulnerable groups such as farmers, merchants, recent graduates and, increasingly, female-headed households. This study therefore concentrates on socio-political dimensions of life in Gaza, gendered considerations and new layers of vulnerability including disabilities, psychosocial problems, and people injured due to the Great March of Return protests, and finally an assessment of household realities between 2017 and 2020.

By collecting quantitative and qualitative data, the research has been able to illustrate that, for the communities and households surveyed, there are serious implications for the sustenance of life in Gaza, especially in light of deteriorating living standards. The research took a mixed-methods approach using a household survey, focus group discussions (FGDs), in-depth interviews with relevant actors and experts, a review of cash transfer data from the Ministry of Social Development (MoSD) and a review of general literature on Gaza. The analysis is not limited to the survey results of the reality experienced by families in Gaza, but also takes into account their own perceptions and the social attitudes of households. It also explores the intersection between the individual, the household, the community and various organizations as well as different geographical locations across Gaza in order to capture a more accurate picture of reality on the ground.

Demographics of the Gaza Strip

The Gaza Strip consists of 365 sq km of coastal land and is home to two million Palestinians, of whom 1.5 million – three-quarters – have been identified as being in need of humanitarian assistance. The humanitarian and economic crisis in Gaza is shaped by the ongoing Israeli occupation and illegal blockade, which has left the region facing serious structural problems, including high levels of unemployment, poverty and food insecurity. More than half of Gaza's population – almost 1.01 million people, including 400,000 children – are living below the poverty line, and around 62% of households are severely or moderately food-insecure. Given the current situation, psychosocial distress and mental disorders are affecting both adults and children, with 22% of the population identified as being in need of mental health and psychosocial support. Furthermore, the deteriorating economy and the loss of social fabric have led to an increase in the risk of gender-based violence (GBV) and to families adopting negative coping strategies. Adolescent girls in particular face multifaceted vulnerabilities related to economic deterioration and lack of access to services, which lead to severe impacts such as early marriage.¹⁰

Surveyed households

The research surveyed 600 households that were identified as being poor and vulnerable. Participants were selected from the MoSD database and included households benefiting from the PNCTP, households on the programme's waiting list and households that had either been removed from the programme's list of beneficiaries or had applied but had had their application rejected. These families were identified as being among the categories most affected by the overall deterioration of the situation in Gaza and by the different shocks that have occurred in the past few years. They are also among the categories dependent on humanitarian assistance,

or who have to seek support from their extended families or the community if they cannot access this, in addition to resorting to negative coping strategies, such as going into debt, in order to access basic needs such as food, water and healthcare.

RESEARCH FINDINGS

Main findings

The main findings of the research confirm the overall deterioration of the situation in the Gaza Strip as a result of the various crises affecting its population. Many groups who in a normal setting would be actively taking part in the economy were found instead to be vulnerable and at risk. These groups include farmers and fishers, merchants and contractors, women and girls, employees of the Palestinian Authority (PA), injured and disabled persons, new graduates and households where people have medical problems but cannot get referrals for treatment. At present, these groups are left with no choice but to seek humanitarian assistance.

In addition to the deteriorating economic situation, many indicators show a deterioration in the social fabric and community support. The surveyed households were found to be dependent on debt and borrowing from family members and other members of the community, which leaves them feeling disempowered and humiliated in relation to their peers and other segments of society. In terms of family and community support, it was found that just 34% of the households surveyed felt that they were supported (emotionally and socially) within their families and communities, while 39% felt that way only to a certain extent and 27% did not feel supported at all. At the same time, just 9.6% of households felt secure about the future, while 21.4% felt secure to some extent and 69% did not feel secure; more male-headed households reported feeling insecure about the future (70.8%) than female-headed households (66%). Moreover, just 16.7% of the households surveyed said that they felt happy with their lives, while 27.8% felt happy to some extent and 55.5% were unhappy. More female-headed households reported being unhappy than male-headed households (58.7% vs 50.8%).

Findings on the PNCTP

The research shows that **a vast majority of the new poor are young, have higher levels of education and are qualified to be part of the labour force**. In addition, households that have applied within the past two years but are still on the MoSD waiting list tend to rely more on productive resources as a source of income, with at least 25% of their income derived from such sources, compared with 11% for PNCTP recipient households. More households on the waiting list (85%) are nuclear families, compared with 71% of denied/removed families and 65% of recipient families. By contrast, there are more extended families among participating households (30.3%) than among the denied/removed households (22.5%) and households on the waiting list (13%). This might reflect changes in eligibility criteria that favour larger (extended) families over smaller (nuclear) families. PNCTP participant families tend to be larger than others, with an average household size of 7.15 people, compared with 6.64 for denied/removed families and 6.2 for waiting list families.

The findings of the study confirm that **measurements of vulnerability**, used by the PNCTP specifically but also humanitarian assistance programmes generally, **are insufficient as they are based on material possessions and levels of income**. They also assume sporadic shocks and a functioning market. However, as the study shows, this ignores vulnerable groups who atypically come from better-off backgrounds. These groups are increasingly becoming dependent on aid to meet their daily needs due to increased unemployment, shrinking opportunities for participation in the workforce, fear of future risks and shocks and the depletion of coping mechanisms.

In terms of responsiveness, although the PNCTP's broad inclusion mechanisms appear already to be accommodating vulnerable groups, it does not explicitly set out in its documents or account for in its selection criteria the nature of shifting vulnerabilities and the new poor. The poor management of data collection by the de facto authorities in Gaza, a lack of accountability regarding decision-making on inclusion and exclusion, the conflicted role of employees of the PA and the de facto authorities in Gaza and the limited management and oversight of the PNCTP in Gaza by the PA in the West Bank are all barriers to shifting vulnerabilities in the Strip being cohesively, collaboratively and effectively identified and addressed. Further, there appear to be high degrees of ambiguity in both data collection and entry.

The **PNCTP does not fully account for gender, disability, old age or the multidimensional socio-political factors affecting vulnerable groups** beyond the social variables it is currently using. This could be mitigated if the MoSD implemented a future version that determined allocations for persons with disabilities and elderly people based on a rights-based approach, in which they would be automatically eligible for social security benefits. This would not only preserve the dignity of these citizens but would also lead to more effective utilization of limited financial and human resources.

There also appear to be **overlaps in the beneficiaries of various cash, in-kind, humanitarian and developmental assistance mechanisms**, due to the fragmentary nature of different governmental and developmental structures. The findings on sources of income imply that the PA's actions to remove households from its beneficiary list are likely justified by those households' objective indicators, such as better income and assets. However, while new applicants appear to be poorer than those who have been rejected or removed, they seem to be better able to access sources of assistance, and so their applications must be carefully reviewed.

The ability of the PNCTP to alleviate poverty is limited. In the survey, 76% of participating households reported that it covers the extreme poverty gap by 30% or less, while 24% reported that it covered the gap by more than 30% (but less than 70%). The most recent consumption data (2017) from the Palestinian Central Bureau of Statistics (PCBS) indicate that 29.2% of individuals in the OPT and 53% in the Gaza Strip are living below the poverty line even when the value of the assistance they receive is taken into account. When assistance is taken out, poverty percentages increase to 33% overall and 59.8% in the Gaza Strip. Assuming that in the absence of assistance other factors remain unchanged, it can be concluded that assistance reduces poverty overall by 11.5%, and by 11.4% in the Gaza Strip, while extreme poverty rates are reduced by 20% (from 21% before assistance to 16.8% with assistance).

RECOMMENDATIONS FOR THE PALESTINIAN AUTHORITY

The findings presented in this study allow for a rethinking of vulnerability generally and also for a refocusing of the PNCTP's criteria for targeting households and participants. It is hoped that they will help to prevent the number of vulnerable groups from growing further and will enhance resilience and empowerment among Gaza's Palestinian population. This requires **major, and possibly drastic, steps to be taken to consolidate all forms of assistance into a single unified mechanism**, with a unified supervisory role for all the major actors, including the MoSD, UNRWA, WFP and possibly other national and international NGOs. All taxes collected by the Palestinian authorities must be devoted to this consolidated mechanism. This could be achieved with pressure and clear proposals from the international community, including the UN and the EU. The PA and the de facto authorities in Gaza must make it a priority to fulfil their duties towards their staff by making full and regular salary payments. This requires them to reassess their priorities and to shift allocations to social assistance, even within their limited budgets. The political system must take responsibility for providing the MoSD with higher levels of budget

allocations to enable it to meet the increasing demands. This study also calls for an expansion of eligibility criteria for the current assistance programmes in order to respond to the real shifts in vulnerability that are occurring and the newly emerging vulnerable groups.

The study found that the PNCTP has already been responding to these changes (even if inadvertently) through the assistance it allocates to vulnerable groups and increasingly through its de facto inclusion on the PNCTP lists of families suffering from extreme poverty. This implies that the MoSD and **donors to the PNCTP (including the EU and the World Bank) must change its eligibility criteria to reflect new realities and accommodate the characteristics of newly added cases in Gaza.** This must be combined with accountability mechanisms to ensure that people are receiving the assistance to which they are entitled given existing levels of cronyism and nepotism, especially based on partisan lines. This might require empowering civil society organizations (CSOs) that work as watchdogs on government action, especially those working with poor and marginalized people. In addition, the capacity of MoSD staff in Gaza must be sufficient to deal with the increasing level and complexity of demands. The quality of expertise is patchy: experienced staff with the PA government have extensive capacities and skills regarding the PNCTP and its requirements, but new staff of the de facto authorities in Gaza have very limited capacities. The government and donors must find a sustainable mechanism to build the capacity of all staff members and to harmonize their work without delay.

RECOMMENDATIONS FOR DONORS AND INGOs

Donors and INGOs must support improvements on the level of collective agency in Gaza by advocating for more space for freedoms and rights of expression and association, work by CSOs, media and an open market. This must be accompanied by the involvement of poor and marginalized members of the community in setting priorities, planning and advocating in any appropriate form. The international community and the ruling authorities need to consider the situation in Gaza as a chronic and human-made humanitarian crisis. This implies that a humanitarian assistance regime should take precedence over all other forms of aid. In addition, humanitarian agencies and donors need to break away from traditional funding models that are no longer sufficient for the complex and protracted crisis that Gaza faces. They must be more willing and able to adapt and to innovate their way out of problems. Increases in the allocation of humanitarian assistance in all its forms must be accompanied by improved coverage. This also requires the collection of early warning data and predictive analytics, while establishing thresholds for pre-agreed automatic funding. However, as long as the blockade continues, humanitarian needs will rise and thus increases in humanitarian assistance might have to be made. However, even when the ongoing humanitarian focus will most likely push donors to prioritize humanitarian aid, they should look into possibilities of establishing nexus-driven aid assistance approaches in order to deliver aid more effectively.

1 INTRODUCTION AND CONTEXT

1.1 INTRODUCTION

This research report examines the root causes and the impacts of various factors on types and levels of vulnerability in Gaza, including external factors such as the various measures imposed by the Israeli authorities and the blockade of Gaza, and internal factors such as intra-Palestinian political divisions. The study investigates the efficiency of the Palestinian National Cash Transfer Programme (PNCTP) and the adequacy of its targeting mechanisms. In its design, the study utilizes both quantitative and qualitative research methods, including relevant information on vulnerability and several analytical tools and techniques for identifying vulnerability. These include basic quantitative descriptive statistics obtained through a survey of 600 households in Gaza, comprising 300 who are on the PNCTP's lists and 300 who have either been denied assistance or are new applicants on the waiting list. It also makes use of qualitative information obtained from focus group discussions (FGDs), including participants' own perceptions of their situation, and information from key informant interviews (KIIs). The analysis involves quantitative and qualitative identification of newly vulnerable groups and descriptive statistics from the Palestinian Central Bureau of Statistics (PCBS) and other assessments and mappings of vulnerability in Gaza (and also provides a comparative base for the analysis). Finally, the analysis of vulnerability at the household level is complemented by a brief review of macro-level shocks that have affected Gaza and are likely to affect poverty levels in the future.

This analysis of vulnerability contributes to the work being done by key stakeholders on extreme vulnerability and resilience in protracted crises. A comprehensive understanding of the links between shifting vulnerabilities and poverty in Gaza will provide an informed basis for policy making, programming and interventions designed to alleviate poverty, strengthen resilience and address vulnerability. The analysis also reflects on gaps in targeting, responsiveness, governance and gender sensitivity in the PNCTP in Gaza, as well as on such gaps in the work of other public and informal actors or international non-governmental organizations (NGOs) and United Nations agencies.

This study complements an earlier assessment by Oxfam, *Participatory Vulnerability Analysis in the North of the Gaza Strip* (2019),¹¹ and the Social Protection Floor brief, written by Oxfam. Both build on existing frameworks of poverty and vulnerability indicators and stress the multidimensional nature of these problems in Gaza. They add a new perspective to previous analysis and conceptualizations of vulnerability in Gaza: within this framework, it is important to emphasize that a focus on shifting vulnerabilities requires the identification of new sources of vulnerability and new groups of vulnerable people. This study therefore goes beyond current and traditional considerations of poverty and vulnerability to cover a larger pool of vulnerable households. Its key research questions include the following:

- Are current social assistance regimes (with all their different mechanisms) aligned with the new criteria of shifting vulnerabilities and with newly vulnerable groups?
- Is the current situation leading to greater dependence, or is it a window of opportunity that could lead to more self-reliance?
- What are the indicators of vulnerability and how are they reflected in the various spaces within Gaza?
- Is the PNCTP able to accommodate new groups and adjust to the needs of beneficiaries?
- What are the potential risks and future shocks that may lead to the emergence of further newly vulnerable groups in Gaza?

12 Responsiveness of the Palestinian National Cash Transfer Programme to Shifting Vulnerabilities in the Gaza Strip

1.2 CONTEXTUAL BACKGROUND (POVERTY AND UNEMPLOYMENT)

The protracted humanitarian crisis in Gaza, coupled with new socio-economic factors such as cuts made by the Palestinian Authority (PA) to the salaries of public employees¹² and declining donor assistance to the Occupied Palestinian Territory (OPT), is creating new layers of vulnerability that have seen people resorting to debt and borrowing as well as being forced to prioritize expenditure between their daily basic needs. Gaza suffers from high levels of poverty and vulnerability to poverty, inadequate social safety nets and a dysfunctional economy and markets. Its gross domestic product (GDP) per capita has fallen, from **\$2,328 in 1994 to \$1,731 in 2016 and to \$1,458 in 2018** (at constant 2015 prices). Similarly, gross national disposable income (GNDI) has fallen, from \$2,659 million in 1994 to \$3,851m in 2016, and to \$3,496m in 2018 (again, at constant 2015 prices). GNDI per capita has fallen too, from \$3,012 in 1994 to \$2,106 in 2016, and to \$1,809 in 2018 (at constant 2015 prices). The population has also **doubled between 1994 and 2019, from just under one million people to just under two million**. Per capita consumption has decreased, though total consumption has increased. However, **total savings in Gaza have declined at an alarming rate, from \$307m in 1994 and \$423m in 2016 to \$145m in 2018**.¹³

In 1995 the average household in Gaza was composed of eight members and it spent \$550 on food consumption every month (using 2017 constant prices). This level of expenditure has declined significantly: PCBS data show that in 2017 the average household was composed of 6.1 members, but it spent \$284 on food consumption every month. Regarding general expenses, the average monthly per capita expenditure in 2017 was 17% lower than in 2011. This decrease is seen both before and after accounting for inflation, which highlights the troubling trend of deteriorating living standards in Gaza.¹⁴

Over half of the population in Gaza are living below the poverty line and over one-third are living below the extreme poverty line, meaning that they are unable to meet their minimum requirements for food, clothing and housing. The PCBS defined the 2017 threshold of poverty as living on less than ILS 2,470 (\$716) per month and that of extreme poverty as less than ILS 1,974 (\$572) for a family of five (2 adults and 3 children). In 2017, 53% of individuals (980,500 in total) and 31% of individuals (573,500) in Gaza fell into these categories, respectively.¹⁵ **More than 70% of the population are registered as refugees** with the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA), **and over one million of those registered with UNRWA are classified as living in poverty and in need of food assistance**.¹⁶ Assistance programming in Gaza has been found to reduce extreme poverty rates by eight percentage points, from 42% to 34%, and poverty rates by seven percentage points, from 60% to 53%.¹⁷

Additionally, **1.6 million people in Gaza are in need of humanitarian assistance, 1.1 million of whom are refugees. In terms of food security, about 1.19 million people are moderately to severely food insecure**. Severe limitations in access to water and poor wastewater treatment give rise to key concerns regarding public health and environmental threats. All two million people in Gaza are negatively affected by the ongoing lack of resources and over 1.4 million have immediate needs in the WASH sector. Similarly, about 1.2 million people lack access to quality health services.¹⁸ Overall, the response to the humanitarian needs in the Strip had been affected by sharp decrease in funding trends, including the US administration cuts of funds to UNRWA.¹⁹

13 Responsiveness of the Palestinian National Cash Transfer Programme to Shifting Vulnerabilities in the Gaza Strip

2 ANALYSIS OF RESULTS (MEASURES OF LIVING CONDITIONS)

This section analyses the quantitative data obtained from the household survey, conducted November-December 2019, and the PNCTP along with the qualitative data derived from the FGDs and KIIs. It highlights the characteristics of poor and vulnerable households (HHs) in Gaza; this includes their living conditions as measured by an assortment of indicators, including demographics such as family size and age distribution, economy, health, education and access to water and electricity, among others. It also provides indicators on family and community cohesion and integration.

2.1 HOUSEHOLD CHARACTERISTICS

The survey paints a fairly detailed picture of the characteristics of the families targeted by the household survey – including PNCTP participants, families rejected for PNCTP assistance and those on the waiting list – and the specific cohorts considered to be most vulnerable.

Family composition: 70% of the surveyed families are nuclear, while one-quarter are extended families. As many as 5% of HHs have just one member. Compared with the rest of the population in Gaza, it is disproportionately common for the targeted HHs to be living in extended family arrangements (25% in the sample compared with 10.2% in the general population) than in a nuclear family (69% vs 84.7% for the general population).

Female-headed households (FHHs): The targeted HHs have a much higher proportion of FHHs than in the general population. PCBS data from 2017 show that 8.7% of HHs in Gaza overall are headed by women (i.e., mother, daughter or grandmother),²⁰ while for the targeted HHs the figure is 21.2%. The rest of the targeted HHs (78.8%) are headed by a male family member (MHHs).

Family size: The average family size of the targeted HHs is 6.82 members, which is higher than the average of 5.6 members for all HHs in Gaza. On average, families are composed of 3.38 males and 3.45 females, which is in line with national trends. The smallest family is composed of one member and the largest is composed of 22 members living in the same household.²¹ 42% of households have had at least one birth in the past five years, while 58% have not. Only 11% of the targeted households have had one or more deaths of a family member in the past five years.

Dependency ratio: The dependency ratio²² among the targeted HHs, at 72.4%, is lower than the average for the Gaza Strip, which is 79.9%. This is mainly due to the prevalence of one- and two-member families (10.8% combined). In addition, a large percentage of heads of HHs (HHHs) among those targeted are either single people (4.7%) or widows (14.5%). Children under the age of 15 comprise 37.5% of targeted HH members, compared with 41.6% among the overall Gaza population. HH members in the 15–64 age group comprise 58% of the total, and older members (65 and over) comprise 4.5% (compared with 3% overall). 10% of HH members surveyed are children under the age of five, 27% are aged 5–14, 58% are aged 15–64 and the remaining 5% are 65 or older.

Education: 26.8% of HHs have at least one family member with a university degree (18.3% have one member, 6% two members, 1.8% three members and less than 1% have four or more

14 Responsiveness of the Palestinian National Cash Transfer Programme to Shifting Vulnerabilities in the Gaza Strip

members). In contrast, 24.7% have at least one family member who is illiterate (18.3% one member, 3% two members, 2.3% three members and 1% four members). The rate of illiteracy among members of the surveyed HHs is 8.6% overall,²³ much higher than the national rate of 3.0%.

Box 1: Families in Gaza – qualitative insights

The FGDs and the KIIs reveal vital insights that have a bearing on the shifting vulnerabilities of Palestinian HHs in Gaza. The growing role of the extended family is highlighted in the following testimony:

‘The typical Gaza family is receding, leaving much space for varied forms of families. On the one hand you have families that are coming together again; nuclear families are going back to extended families, as that is the viable arrangement for many HHs – it is less expensive and more cost-effective. In addition, large households attract more assistance. This is reinforcing a patriarchal system where women and men have less independence, but then leading to more violence as the male head of household is losing his power as he is unable to provide for everyone.’ (Gender and development expert, Gaza)

Youth are resorting to early marriage as a response to unemployment and as a strategy to obtain assistance:

‘Some very young men are going into marriage as there isn’t really much else to do; but they also think that they will be better qualified to receive micro-credit and assistance. This is leading to early marriage for both genders.’ (NGO representative, Gaza)

The increasing impact of vulnerability is reflected in further deterioration of the lives of men as well as women:

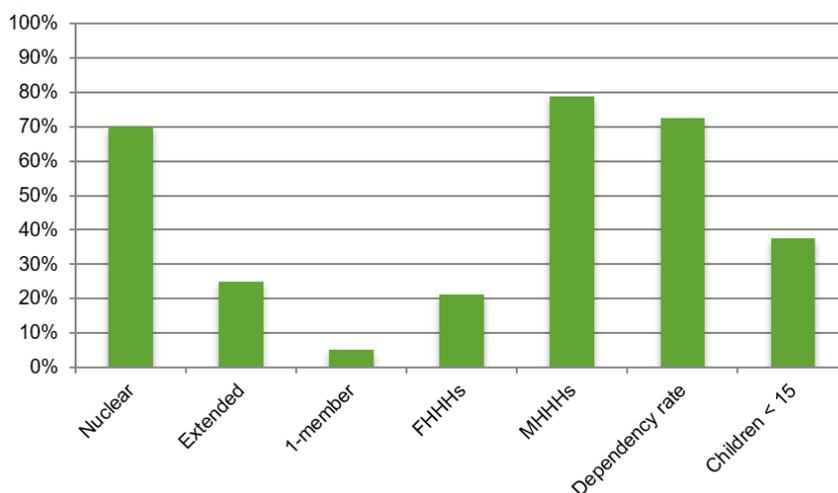
‘My husband sits around the house and in the yard; he goes back and forth to the mosque; he has lost his motivation for life. People think that my taking responsibility and having to do work is empowering; it isn’t. I am always exhausted and without any real loving support.’ (FGD participant, female, 48)

‘My husband left to go to Norway. He got there illegally and now he is a refugee; he can barely support himself. I have four children to support. I work here and there, with very little income, but many commitments.’ (FGD participant, female, 38)

Families are finding new ways to increase their level of eligibility for assistance:

‘I am working in a government job, but getting only 40% of my very small salary. I am married with three children. For us to make ends meet, we pretend to be separated and my wife gets assistance as an abandoned woman.’ (FGD participant, male, 34)

Figure 1: Characteristics of poor and vulnerable families



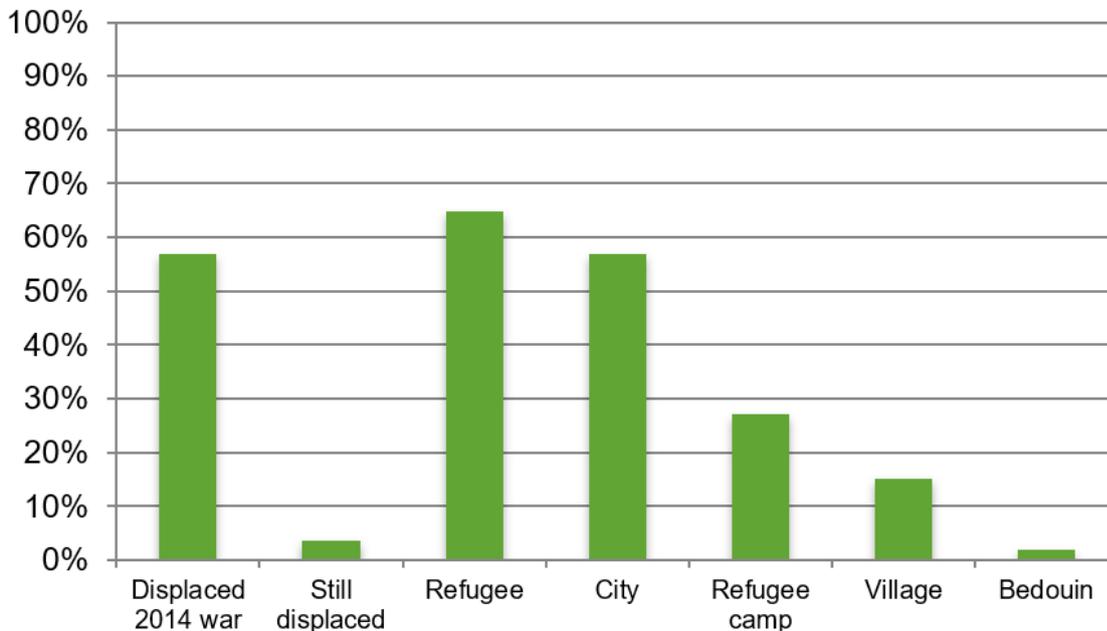
Type of community: Most of the families targeted by the survey reside in a city (57%). 27% of the sample HHs are located in refugee camps, with 15% in villages and the remaining 2% living in Bedouin or scattered communities.

Refugee status: 64.7% of all targeted HHs are refugees (62.3% registered and 2.5% non-registered). This is in proportion to the overall numbers of refugees in Gaza (66.1%).

Displacement: The majority of targeted HHs (57.0%) were displaced as a result of the 2014 escalation during Operation Protective Edge²⁴. Of those displaced, 86.5% had returned to their original homes after they were reconstructed or renovated (either partially or completely), 7.4% now live in a new house and 6.1% are still displaced.

Residency outside of Gaza: 15% of the targeted HHs report that they have at least one family member residing outside of Gaza. The majority of these are living in Arab countries (63.3%), while 27.8% reside in foreign countries and 7.8% in the West Bank. Only 1.1% of HHs have family members residing in Israel. Only 2.5% of households report receiving any form of remittance from relatives living outside of Gaza, and (as discussed later) remittances form less than 1% of average household income.

Figure 2: Community characteristics



Box 2: Target households (participant and non-participant families)

As indicated above, the survey targeted current participants of the PNCTP, households that have been denied assistance or removed from the PNCTP lists, and those on the waiting list. The data reveal the following indicative results:

- The vast majority of HHs on the waiting list (85%) are nuclear families, compared with 71% of denied/removed families and only 65% of current participant families. In contrast, there are more extended families among participating HHs (30.3% of the total) than among denied/removed HHs (22.5%) and HHs on the waiting list (13%). This might be because one of the primary eligibility criteria favours larger (extended) families rather than smaller (nuclear) families.
- PNCTP participant families tend to be larger than other families, with their average HH size being 7.15 members compared with 6.64 members for denied/removed families and 6.2 for waiting list families.

2.2 LIVING CONDITIONS

Housing

- 14.3% of the HHs live in dwellings with one or two rooms, while the majority (55%) live in homes with 3-4 rooms. 21.7% live in homes that have five rooms or more. 80.8% of HHs share a common entrance with other families, while only 19.2% have their own entrance.
- 87.4% of the sample HHs live in homes built from cement/blocks, while 11.5% live in homes built from metal sheets and 1.2% live in huts or tents.
- The majority of families live in sub-standard housing conditions, with as many as 59.3% facing problems with rain and wind during the winter. Noise is a major problem for HHs, with as many as 63.7% complaining about noise levels in their neighbourhood. In addition, 53.7% say that they do not have full privacy. 12.5% cook inside the house but not in a separate kitchen, and 1% have to cook outside of the house; the remaining (86.5%) have a separate indoor kitchen.
- HHs on the waiting list report the lowest quality of housing, with 43% stating that their housing is sub-standard, compared with 40% of participant HHs and 20% of denied/removed HHs.

Water sources

- Only 2.3% of HHs have access to piped drinking water, while 83.7% have to buy drinking water from private vendors, including private desalination plants. Others depend on public/community desalination plants (5.7%), while 8.3% rely on drinking water provided by family and community charitable projects.
- 5.7% of families have to physically fetch water. Mostly this is done by boys and young men (58.8%), followed by fathers (17.6%) and mothers (8.8%).
- 46.8% of HHs are satisfied with the drinking water available to them, while 26% are somewhat satisfied and 7.2% are dissatisfied.
- For water used for domestic purposes, 16.5% are satisfied, 43.7% are somewhat satisfied and 39.8% are dissatisfied. As many as 72.3% of HHs suffer shortages of water for domestic use. More PNCTP beneficiary HHs and waiting list HHs (75% and 72% respectively) report water shortages than denied/removed HHs (68%).

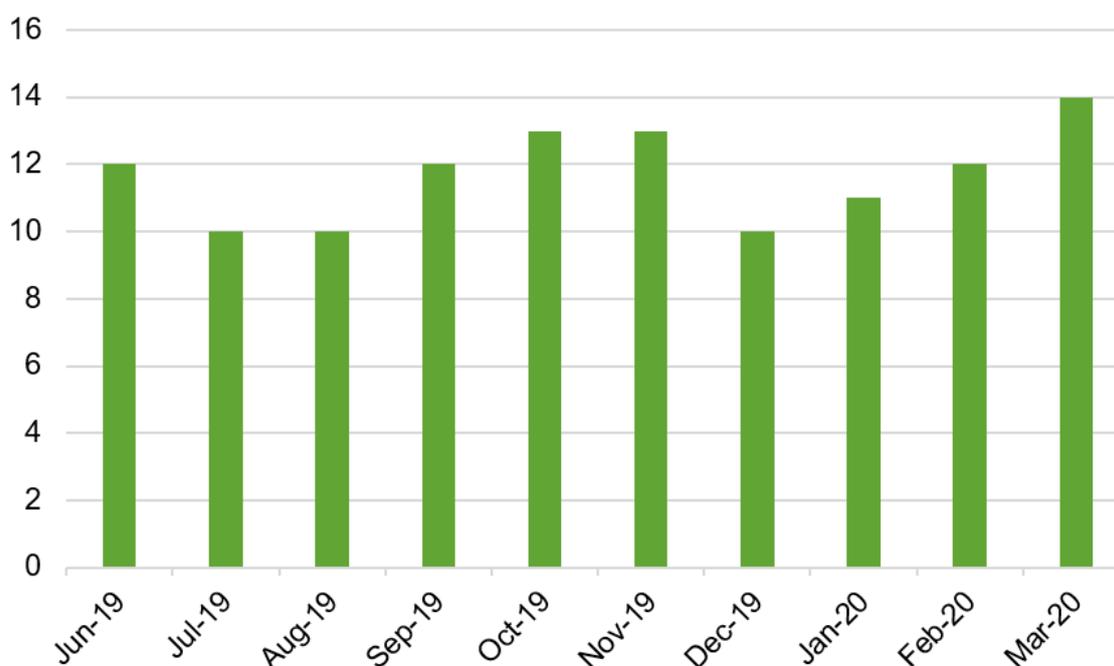
Wastewater services

88.2% of HHs are connected to a public sewerage system, while 11.8% are not. Among HHs that are connected, 19.1% pay for the service while 80.9% do not.

Electricity

- All HHs are connected to the electricity grid, but the grid is available for only 10 hours per day on average (in the week before the survey). Many HHs have to rely on other sources for an average of 14 hours each day. This is broadly consistent with recent OCHA data on connectivity to the grid.²⁵
- Only 27.7% of HHs pay for electricity from the grid, while 19.8% pay for power from other sources. The remaining HHs do not pay for electricity.
- Due to the unreliability of the electricity supply, the vast majority of families have to consume food products from day to day, though 15.8% store food some of the time and 3.3% do so all the time. HHs have to adjust when they perform household chores (washing dishes and clothes, cooking) to coincide with the times that electricity is available. 63% of HHs are affected in this way all the time, and 32.5% are frequently affected.

Figure 3: Availability of electricity each month (hours per day, 2019–20)



Data Source: OCHA (2020).²⁶

Health conditions (physical and psychological)

- While 91.8% of HHs have health insurance, 8.2% do not. The vast majority of insured families are insured via the PA government, while 4.5% have private insurance and 2.5% have insurance from UNRWA. FHHs have higher levels of health insurance (95.1%) than MHHs (89.6%). Families' place of residence, in terms of proximity to Access Restricted Areas (ARAs)¹, is not correlated with having health insurance. Non-refugee HHs report slightly higher levels of health insurance than refugee HHs (94% vs 91%). PNCTP participant HHs report the highest level of insurance (96%), followed by HHs on the waiting list (91%) and denied/removed HHs (86%).

- A significant 24.7% of the targeted HHs have a person with a disability in their families. Of these families, 79.1% have one member with a disability, 16.9% have two members and 4.1% have three or more members with a disability. MHHs and FHHs report the same levels of disability within the family. Refugee HHs, however, report higher levels of disability than non-refugee HHs (26.5% vs 21.2%). Place of residence in terms of proximity to ARAs is not correlated with having disabled family members.
- The majority of families (61.3%) have at least one member who suffers from a chronic disease (e.g., diabetes, high blood pressure, kidney failure, cancer). MHHs and FHHs report the same levels of chronic disease. Interestingly, HHs living far away from ARAs report the highest levels of chronic disease (64%), compared with HHs living in areas somewhat close to ARAs (59%) and in ARAs (53%). Refugee HHs report slightly higher levels of chronic disease than non-refugee HHs (62.5% vs 60%). PNCTP participant HHs report the highest level of chronic disease (67%), compared with 59% for HHs on the waiting list and 54% for denied/removed HHs.
- 55.2% of families report having at least one member who suffers from general exhaustion. Another 38% of HHs report having members who have chronic headaches, and 30% report depression. In addition, 26.7% report having at least one family member who suffers from irritability (nervousness, anger, nightmares). In general, the gender of the HHH is not significantly correlated to reporting emotional and psychological pressures, except for reporting on irritability/nervousness and sleep deprivation, where MHHs show slightly higher rates than FHHs (27.5% vs 25.4%). Generally, HHs living in ARAs report higher levels of irritability, nervousness, headaches and depression than those in other areas. Refugee HHs also report more of these problems than non-refugee HHs. The highest rates of irritability/nervousness are reported among HHs on the waiting list (30%) and PNCTP participant HHs (28%), compared with 22% for denied/removed HHs.
- As for the quality of health services received by the family, 16.8% overall are satisfied while 49.7% are somewhat satisfied and 33.5% are dissatisfied.

The majority of targeted HHs report that none of their members smoke, but 21.8% report having one smoker in the HH and 5.9% report more than one smoker, making a total of 27.3% of HHs who report having a smoking member.

2.3 COMMUNITY RELATIONS

Belonging²⁷

Most target respondents (55%) feel that they belong to their communities to a large extent, and 27% feel that they belong to some extent. However, 18% do not feel that they belong to their communities. Feelings of belonging are most commonly expressed by households headed by men and by male respondents. About 83% of MHHs say that they belong to their community (to some extent or to a large extent), while 76% of FHHs express the same sentiment.

Throughout the qualitative research, however, respondents mention increasing isolation and diminishing relationships of trust between community members, as pressure to make ends meet tests their morale and strains social relations. Especially susceptible to feelings of isolation are young women and youth. Youth express increasing scepticism about governing authorities providing services and care to segments of society. Young women note an increase in domestic violence and a lack of opportunities for social mobility. As a result, they report an increased number of early marriages amongst girls, and feelings of powerlessness to provide promising futures for Palestinian children in Gaza. Moreover, given the widespread dependence on debt and borrowing from family members and other members of the community, individuals are expressing feelings of disempowerment and humiliation in the face of their peers and other segments of society. Such expressions mark a deterioration in social cohesion and relationships amongst community members.

19 Responsiveness of the Palestinian National Cash Transfer Programme to Shifting Vulnerabilities in the Gaza Strip

Perceptions of support

Approximately one-third (34%) of respondents feel that they are supported (emotionally and socially) within their families and communities. In contrast, 39% feel that way only to some extent, and 27% do not feel supported.

Social cohesion

36.3% of respondents feel that relations in their communities are cohesive, 37.8% feel that they are cohesive to some extent, and 25.9% do not feel that relations in their communities are cohesive.

2.4 LIFE AND FUTURE PROSPECTS

Feelings of happiness

Only 16.7% of respondents report that they are happy with their lives, while 27.8% report being happy only to some extent. On the other hand, 55.5% are unhappy: 20.7% are somewhat unhappy and 34.8% are very unhappy. More FHHs report unhappiness than MHHs (58.7% vs 50.8%). Living in proximity to ARAs and having refugee status appear to have no influence on reported levels of happiness.

Feelings of security

A small percentage of respondents (9.6%) state that they feel secure about the future, while 21.4% feel secure to some extent. However, 69% do not feel secure about the future. More MHHs reported feeling insecure about the future (70.8%) than FHHs (66%). Proximity to ARAs and refugee status are not significantly correlated to feeling secure. The highest levels of insecurity about the future are found among HHs on the waiting list (73%), followed by PNCTP participants (69%) and HHs that have been denied/removed (62%).

Social mobility

When asked about future prospects of mobility for their children, only 12.3% of families believe that their children have sufficient opportunities for social mobility, and 20.7% believe that they have opportunities for mobility to some extent. Two-thirds of respondents (66.7%), however, believe that their children have no opportunities for future social mobility.

2.5 SOURCES OF INCOME

Respondents were asked to provide a percentage distribution of all household sources of income. This section is based on their answers.

Dependence on assistance

Donations and assistance from various institutional sources (government, NGOs, other international and regional actors) comprise the majority of income (60%) for the HHs surveyed. 61.7% of families report that 50% or more of their income derives from donations or assistance, 15.2% report that between 20% and 50% comes from such sources, and 4.8% depend on donations for less than 20% of their income. 18.5% say that donations do not comprise any part of their income. Among recipients of MoSD assistance, 51% rely wholly on assistance as a source of income and 86% rely on it for 50% or more of their income. More PNCTP applicants on the waiting list report being dependent on assistance than HHs that have been rejected or removed from MoSD lists. 21% of new applicants rely wholly on assistance

and 41% rely on assistance for 50% or more for their income. By contrast, 15% of the denied/removed HHs rely wholly on assistance and 22% rely on assistance for 50% or more of their income.

Private business

The second most important component of household income is private business, which comprises 7.6% of HH income for all HHs. However, only 15.8% of HHs rely on private business as a source of income, with 7.7% depending on it for 50% or more of their income and 8.1% for less than 50%.

Individual assistance

On average, 5.9% of HHs' income is derived from assistance provided by individual philanthropists. 12.8% of HHs report that part of their income is derived from individual philanthropists; for 4% of HHs this type of assistance comprises 50% or more of their income, and for 8.8% less than 50%.

Agriculture

On average, 5.8% of HHs' income is derived from agricultural production and farming. 12.8% of HHs report that part of their income is derived from agriculture; for 5.2% of HHs agriculture comprises 50% or more of their income, and for 7.6% it comprises less than 50%.

Government work

Income from government work accounts for 5.7% of HHs' income (3.3% PA government and 2.4% from de facto authorities in Gaza). 3.5% of HHs depend on work from the PA government for 50% or more of their income, and 2.7% depend on work from the de facto authorities in Gaza for 50% or more of their income.

Retirement compensation/pension

On average, 4.1% of HHs' income is derived from retirement pensions, retirement funds and/or end-of-service allocations. 6.2% of HHs report that part of their income is derived from retirement funds; for 5.3% of HHs this type of income comprises 50% or more of their income, and for 0.9% it comprises less than 50%.

Work in the private sector

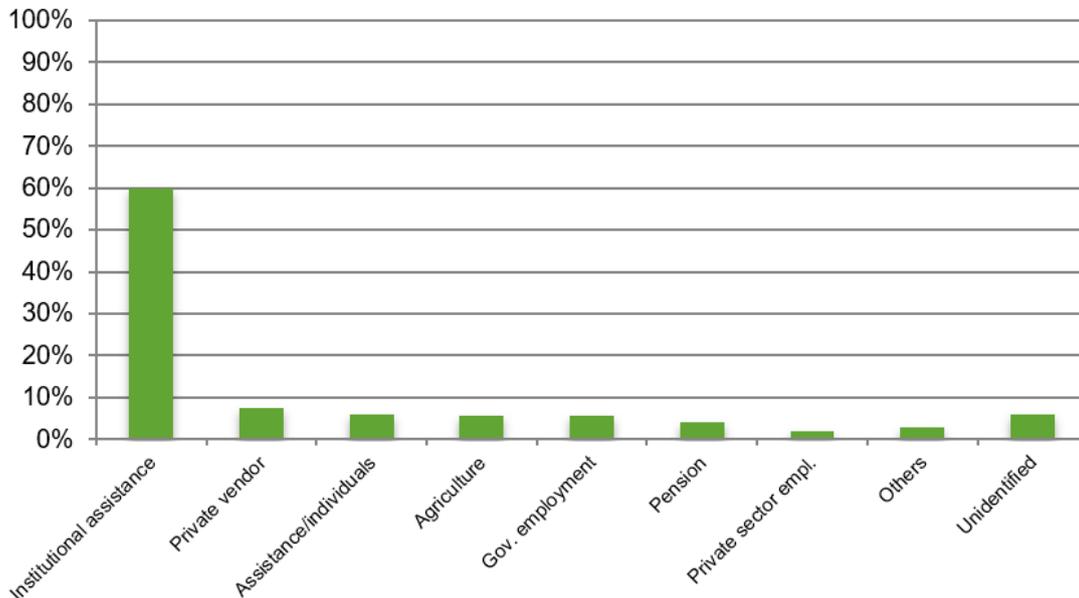
Income from private sector jobs constitutes 2.1% of HHs' income. 2.5% of HHs depend on such jobs for 50% or more of their income, and just 0.5% depend on it for less than 50% of their income.

Several sources each account for 1% or less of HH income: selling animals or household products, remittances from relatives residing outside of Gaza, jobs with NGOs or donor institutions, work in Israel, property leasing and property shareholding. Other miscellaneous informal sources mentioned by respondents in the FGDs together account for 6% of total HH income.

Comparing sources of income by sampling category (MoSD beneficiaries, removed/rejected cases, applicants on the waiting list) reveals that removed/rejected HHs have more reliable sources of income than MoSD participants and those on the waiting list. For example, of the removed/rejected HHs, 12% depend on PA government jobs and 8% on jobs from the de facto authorities in Gaza for income, compared with fewer than 1% among MoSD beneficiaries and applicants on the waiting list. In addition, of the removed/rejected HHs, 7% rely on private sector employment, 7.5% on retirement pensions and 2.5% on remittances, compared with, respectively, 1%, 6.7% and 0.7% among MoSD beneficiaries and 3%, 2% and 0% among

applicants on the waiting list. 61.5% of removed/rejected cases depend on assistance from institutions, as do 76% of applicants on the waiting list. In addition, levels of reliance on assistance from individuals are higher among applicants on the waiting list (23%) than among those who have been removed from MoSD lists (13%) and MoSD beneficiaries (9.7%).

Figure 4: Sources of income for poor and vulnerable households



Box 3: Further insights on sources of income (gender, ARA and refugee status)

Gender of HHH: Reliance on agriculture and agricultural production as a source of income is correlated with the gender of the HHH, with FHHs reporting higher levels of reliance on agriculture (15.7%) than MHHs (8.6%). In addition, 7.1% of FHHs say that income generated from agriculture comprises 50% or more of their income, compared with 2.4% of MHHs. FHHs show much higher levels of reliance on assistance and donations than MHHs. While 84.8% of FHHs and 79.8% of MHHs rely to some degree on assistance and donations, 40.2% of FHHs rely fully on this as their sole source of income, compared with 29.8% of MHHs.

Proximity to ARAs: Proximity to ARAs does not seem to have any significant effect on sources of income. 71.6% of HHs who live in close proximity to or in ARAs rely fully on assistance for 50% or more of their income, but the same is true of 75.8% of those who live far away from ARAs. HHs who live in areas somewhat close to ARAs show the least reliance on assistance, with 53% depending on it fully for 50% or more of their income. Reliance on agriculture as a source of income in ARAs is generally lower for the targeted HHs, with 3.8% saying that they depend on it for 50% or more of their income, compared with 5.3% in areas that are somewhat close and 5.4% in regions that are further away. This might be due to the restrictions on accessing agricultural land, as well as risks associated with agricultural activities in ARAs.

Refugee status: Many more refugee HHs (87.7%) rely on assistance as a source of income than non-refugee HHs (69.2%). 36% of refugee HHs rely fully on assistance as a source of income, compared with 31% of non-refugee HHs. Non-refugee HHs show more reliance on agriculture as a source of income than refugee HHs (17% vs 10.5%), with 6.2% of non-refugee families relying on agricultural activities for 50% or more of their income compared with 4.3% of refugee families.

2.6 COPING STRATEGIES

Among the coping strategies adopted by the HHs surveyed are the sale of assets, sale of durable goods, seeking financial support from different sources, a tendency to return to extended family formations, resorting to debt and changing consumption habits by reducing their intake of vegetables, fruits and other fresh products. This section provides an overview of these strategies.

Sale of assets and household items

Due to prolonged closure and the de-development of economic activity and market systems, for years a majority of people have been selling assets and durable goods. Although a majority used to save money, this trend of savings has been reversed and most people have now depleted their savings and are in debt. The trend of borrowing is starting to be seen in wealthier groups, leading them to sell their land, while simultaneously continuing to hit poorer groups, leading them to sell durable goods and household items. Since 2017, 2% of HHs have had to sell land. At present, 6.3% of HHs own land. More of the HHs that have been denied assistance or removed from lists report owning land (11%) than PNCTP recipient HHs (4.3%) and waiting list HHs (3%). This is also indicative of the fact that those admitted to the PNCTP have already depleted all their assets.

16.8% of HHs have sold a house (fully or partially), and 4% have sold a car. In addition, 1.2% have sold a tuk-tuk (vehicle), 1.2% livestock, 14.3% a TV set, 3.5% a computer, 14.7% a refrigerator, 14.3% a washing machine, 3% a dryer and 14.7% a smartphone. MHHs and FHHs show the same patterns of coping when it comes to the sale of household items. HHs living in close proximity to or within ARAs report higher levels of selling household items as a means of coping than other HHs (25% have sold a TV set compared with 5.7% of HHs that are close to ARAs to some extent and 11.4% in far-away areas). Non-refugee HHs sell household items to cope with adversity more frequently than refugee HHs (17% have sold a TV set compared with 13% of refugee HHs; 19% have sold a refrigerator compared with 13% among refugee HHs).

One-fifth of the denied/removed HHs have had to sell a house (fully or partially), compared with 14.3% of participant HHs and 18% of waiting list HHs. In addition, 18% of the waiting list HHs have had to sell a TV set, while 13% of recipient HHs and 15% of denied/removed HHs have had to do the same. Similarly, 17% of waiting list HHs have had to sell a refrigerator, while 15% of recipient HHs and 14% of denied/removed HHs have done the same.

Seeking support in the event of adversity

When facing a financial problem, the majority of HHs resort to informal sources. In total, 69.7% say that they resort to other family members and 21% resort to friends and neighbours. By contrast, 2.5% resort to local NGOs or community-based organizations (CBOs), 1% to local councils or refugee committees and fewer than 1% say that they resort to international organizations such as UNRWA. 4.8% resort to other sources such as political parties or support from individual Palestinians outside of Gaza.

Figure 5: Percentage of HHs resorting to the sale of household items

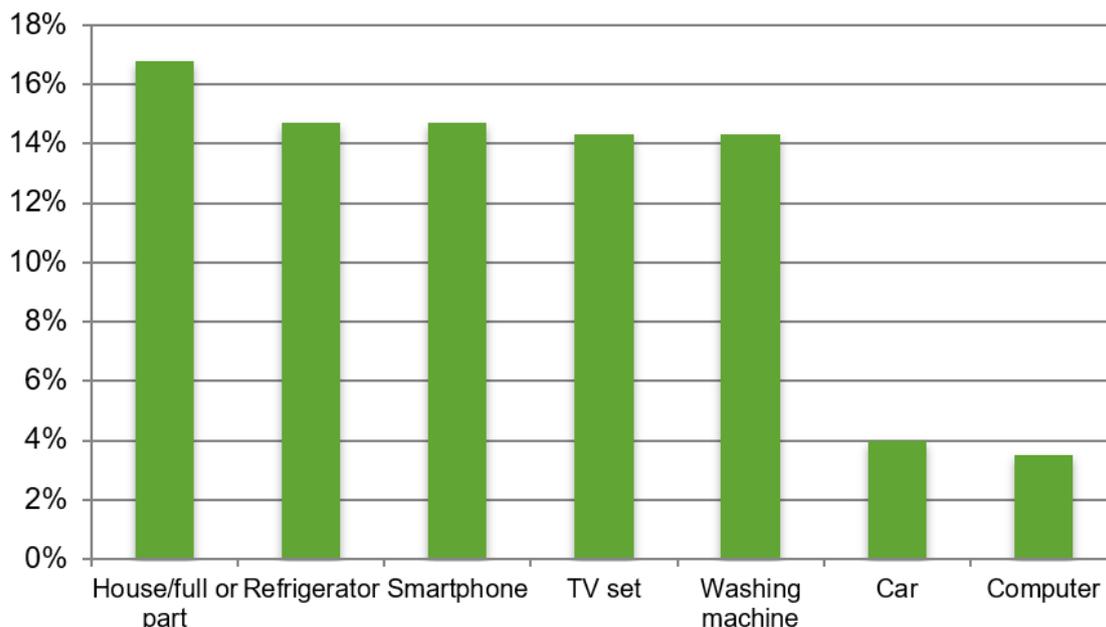
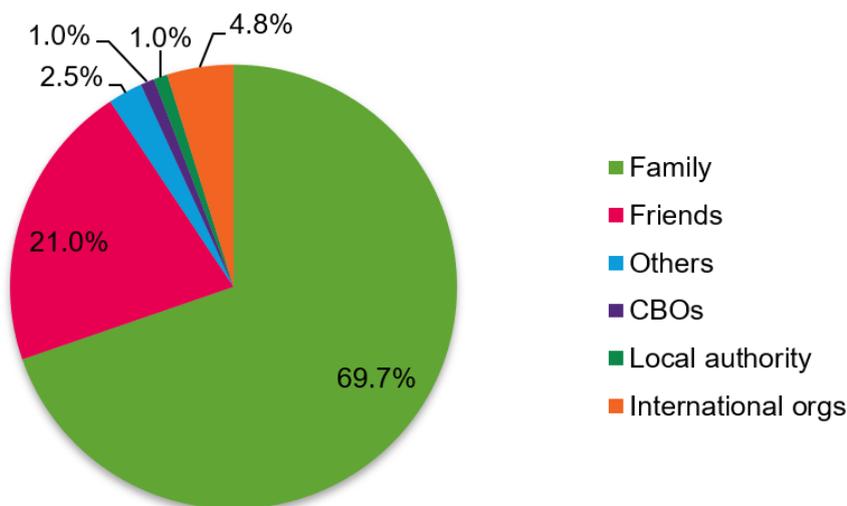


Figure 6: Sources of support in times of adversity



Fewer MoSD beneficiaries (65%) have access to family support in times of need than new applicants (72%) and HHs removed from MoSD lists (76%). MHHs and FHHs show the same patterns of coping by resorting to their extended families, but more MHHs resort to friends and neighbours than FHHs (23.6% vs 17.2%). In contrast, FHHs resort to unidentified sources of support more than MHHs (7.4% vs 3.7%). Some of these sources were indicated in the FGDs and include seeking support from philanthropic sources with which recipients have no prior connection (which was referred to as a form of beggary), working in the homes of wealthier families and collaborating with other women to form savings groups. FHHs also reported a slightly higher rate of seeking support from CBOs than MHHs (3.3% vs 1.2%). In general, living in an ARA is not correlated with seeking support from any of these various sources. However, HHs living in somewhat close proximity to ARAs rely slightly more on CBOs than their counterparts living within ARAs and in far-away areas. Refugee and non-refugee HHs show similar patterns in seeking support in times of need.

3 MEASURES OF VULNERABILITY IN THE GAZA STRIP

The study shows how the economic and humanitarian crisis in the Gaza Strip is deepening at a disproportionate rate. This has implications for the nature of vulnerability, and subsequently for who is at risk. This section describes the shifts observed in vulnerability, while Section 4 describes various measures of vulnerability that have shifted among the households targeted in the study. The first set of considerations in this section (3.1) is based on empirical (objective) measures of work, income, spending and debt, comparing the status of households in 2017 and 2019. The second set (section 3.2) is based on subjective measures of personal assessment regarding households' situation in 2019 compared with what they believe their future prospects to be in 2020.²⁸ Qualitative data are then used to identify potentially new vulnerable groups.

3.1 OBJECTIVE MEASURES

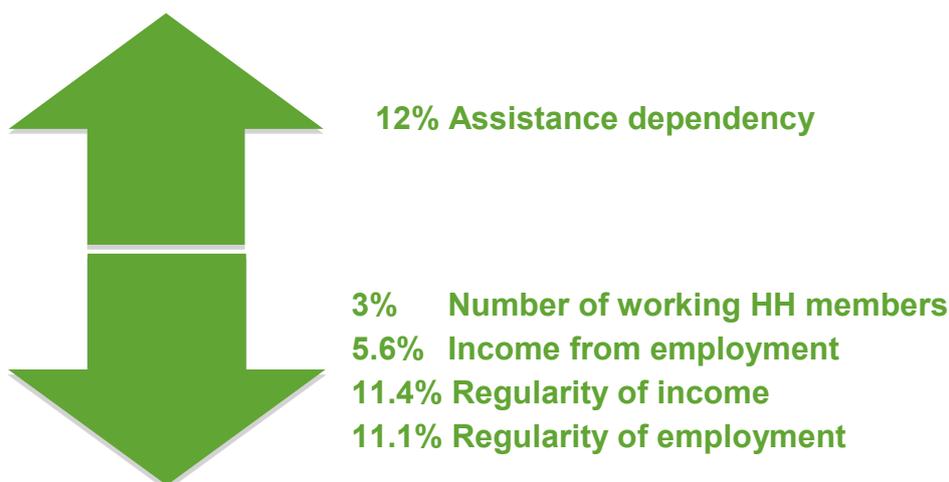
3.1.1 Work and income

In total, 52.5% of families report that they had at least one working family member in 2017, while 47.5% had no working member. The reported rate of working had declined by 2.8% by 2019. The following data analysis provides further insights into the complex nature of work and income vulnerability of the targeted households.

- The average number of working members per family has declined across all families from 0.65 to 0.63.
- The average number of male working members per family for all families has declined from 0.60 to 0.57. The average number for females (0.05) is significantly smaller and has not changed from 2017 to 2019. It is estimated that, of all working family members, the percentage of working females is approximately 7.7%. This has not changed in the years considered in this study.
- The average reported total monthly HH income from all sources has declined slightly, from ILS 760 (\$220) in 2017 to ILS 753 (\$218) in 2019.
- More significant is the decline in income generated from formal and informal work – from ILS 375 (\$109) to ILS 354 (\$103), a fall of 5.6%. In addition, the percentage of HHs reporting income from work has fallen from 59% in 2017 to 56% in 2019.
- The results show that assistance has played a compensatory role within this decline, keeping total income stable to a large extent. Income from all sources of assistance increased from ILS 384 (\$111) in 2017 to ILS 429 (\$124) in 2019, indicating an increase of 12% in dependence on assistance. The percentage of families reporting that they receive assistance has increased from 87% to 88.5%.
- As for regularity of work for family members, 30.6% say that in 2017 it was regular or somewhat regular, while 69.4% say that it was irregular or irregular to some extent. A much higher percentage (77.1%) report that work is irregular in 2019, an increase of 7.7 percentage points.
- The same negative change is seen in reports on the regularity of income, with 64.5% reporting irregular income in 2017, increasing to 71.9% in 2019.

25 Responsiveness of the Palestinian National Cash Transfer Programme to Shifting Vulnerabilities in the Gaza Strip

Figure 7: Declining employment and increasing dependence on assistance (percentage change from 2017 to 2019)

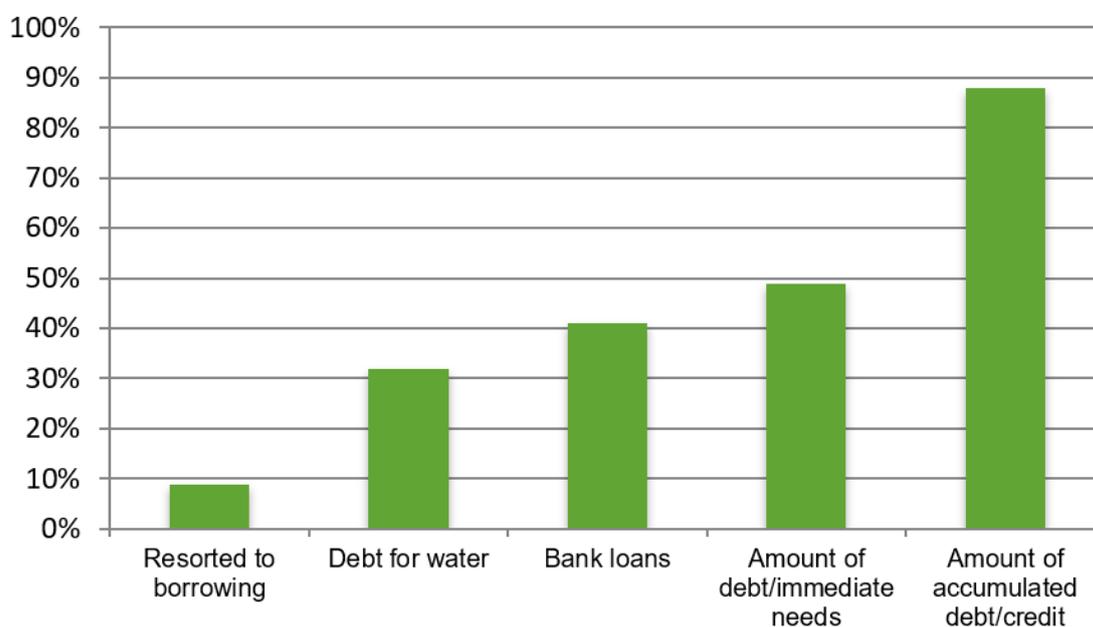


3.1.2 Spending and borrowing

- Each month, the average family spent ILS 29 (\$8.50) on water in 2017 and 2019.
- For 2017, 72.5% of target families reported borrowing in the form of debt or credit. This has increased to 81.3% of HHs in 2019. This indicates an overall increase in hardship faced by all households in Gaza. There are also relatively higher levels of increased hardship among removed HHs who are increasingly relying on borrowing. Among MoSD beneficiaries, the percentage of HHs reporting borrowing has increased from 76.3% in 2017 to 83% in 2019. Among new applicants for MoSD assistance, the percentage of HHs reporting borrowing has increased from 75% to 81%. The largest increase is among HHs removed from the MoSD lists, up from 69% in 2017 to 78%, possibly due to their removal from MoSD assistance lists. The removal of HHs from MoSD lists and other general factors in Gaza and their contribution to the relatively higher levels of hardship could not be assessed by the present research.
- The amount of total debt/credit per HH from all sources in order to meet immediate spending needs has increased from ILS 5,639 (\$1,634) in 2017 to ILS 8,043 (\$2,331) in 2019, a rise of 43%.
- Much of the borrowing has been spent on food, as the monthly debt for food has increased from ILS 348 (\$111) in 2017 to ILS 460 (\$133) in 2019. Debt for food comprised 74% of annual debt in 2017 and 69% in 2019. As many as 75% of HHs borrowed in order to buy food in 2019, increasing by 8 points from 67% in 2017.
- Debt for water has also increased, from a monthly average of ILS 125 (\$36) in 2017 to ILS 165 (\$48) in 2019.
- No significant change was seen for debt used to obtain health services, with the monthly average for this kind of debt being around ILS 171 (\$50) in both 2017 and 2019.
- While much of the borrowing is in the form of debt, some of it is also in the form of credit from banks and credit institutions. The average monthly credit has increased from ILS 816 (\$237) in 2017 to ILS 1,147 (\$332) in 2019. Fewer than 6% of HHs report that they borrowed from banks and financial institutions in both years.
- The amount of accumulated debt has surged in the past few years, with the reported average of debt per family increasing from ILS 10,256 (\$2,973) in 2017 to ILS 12,547 (\$3,637) in 2018, and to ILS 19,236 (\$5,576) in 2019. Noticeably, over the past three years, the proportion of families with debt exceeding ILS 50,000 (\$14,493) has increased – 3% of HHs in 2017, 3.3% in 2018 and 4.3% in 2019.
- HHs resorted to seeking assistance from private individuals on average 4.8 times during 2017, compared with 6.05 times during 2019, an increase of 25%.

- Spending and debt are also related to an increase in the number of children under 15, which has increased on average from 2.04 in 2017 to 2.21 in 2019, and which indicates an increase in the dependency rate.

Figure 8: Families resorting to borrowing (percentage increase from 2017 to 2019)



3.2 SUBJECTIVE MEASURES

The survey measured the assessment of heads of HHs with regards to various aspects relating to their current living conditions and the potential for change in the year ahead. In general, the results show the following trends in respondents' expectations for 2020:

- Deterioration of living conditions is at a maximum and conditions could not be worse.
- Most coping strategies have been exhausted.
- Basic needs (e.g., food assistance) will continue to increase.
- A risk of exposure to chronic diseases is reported by 87% of HHs for 2019 and 2020.

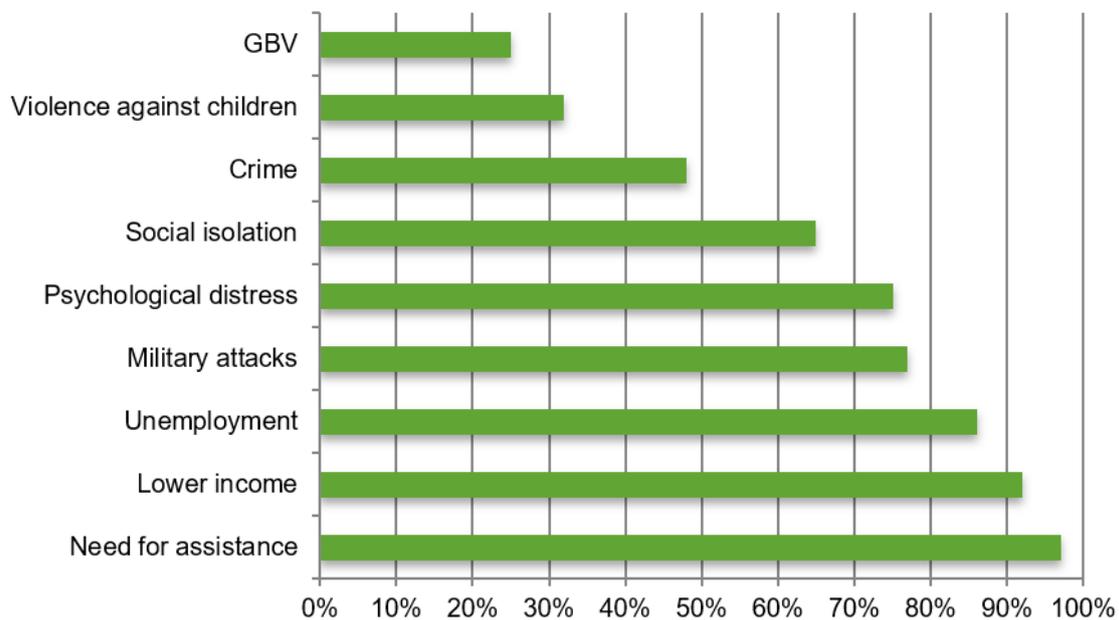
3.2.1 Deterioration of living conditions is at a maximum

- 86% of HHs report vulnerability to the risk of unemployment (at any level) for 2019, and this remains the same for 2020. The highest levels of vulnerability to unemployment in 2019 are reported by PNCTP beneficiaries (84%) and HHs on the waiting list (83%), compared with denied/removed HHs (71%). The same pattern is seen when assessing the potential irregularity of work for 2020.
- 92% of HHs report vulnerability to losing income for 2019, and the same level is reported for 2020. Again, PNCTP HHs and those on the waiting list exhibit the same patterns (with 90% of each group reporting income vulnerability in 2019), compared with 80% among denied/removed HHs. More HHs on the waiting list report potential income vulnerability in 2020, at 92%, compared with 90% among PNCTP HHs and 80% of denied/removed HHs.
- 92% of HHs report vulnerability to irregularity of income for 2019 and the same level is reported for 2020.
- 75% of HHs report vulnerability to a member becoming disabled for both 2019 and 2020. This indicates that a large majority feel vulnerable to deteriorating health conditions and

access to services, as well as vulnerability to injuries leading to disabilities due to the conflict.

- 75% of HHs report family members being vulnerable to emotional and psychological distress for both 2019 and 2020.
- 35% of HHs report vulnerability in terms of the availability of pension entitlements for 2019 and 2020.²⁹
- 25% of HHs report vulnerability to GBV for 2019 and 2020. The highest vulnerability to GBV is reported by HHs on the PNCTP waiting list, at 29%, compared with 26% among PNCTP recipient HHs and 25% among denied/removed HHs.
- 32% of HHs report vulnerability to violence against children for 2019 and 2020.
- 97% of HHs perceive a risk of needing seasonal assistance for 2019 and 2020.
- 97% of HHs perceive a risk of needing regular assistance for 2019 and 2020. 76% feel that this is a high risk for 2019, and 82% for 2020. All surveyed groups report the need for regular assistance, but slightly more HHs on the waiting list do so, at 97%, compared with 94% of PNCTP participant HHs and 88% of denied/removed HHs.
- 77% of HHs perceive a risk of exposure to Israeli attacks for 2019 and 2020. This is felt by HHs regardless of their proximity to borders.
- 48% of HHs perceive a risk of exposure to criminal acts for 2019 and 2020.
- 65% of HHs report a risk of isolation from the rest of the community for 2019 and 2020 (for both male and female members). The same pattern applies to family members' participation in community affairs.

Figure 9: Assessment of risk/vulnerability in terms of livelihood indicators (2019/2020)



3.2.2 Coping strategies have been exhausted

- 92% of HHs report vulnerability in terms of being able to obtain cash assistance from different sources including the MoSD and humanitarian actors for 2019, and 90% report the same risk for 2020.
- 90% report vulnerability in being able to obtain in-kind assistance for 2019 and 2020.
- 50% report vulnerability in being able to obtain credit for 2019 and 2020.

- 86% report vulnerability in being able to obtain goods or services through debt for 2019 and 2020.
- 92% report the risk of being unable to obtain medication for 2019 and 2020.
- 90% report vulnerability in being able to obtain health services for 2019 and 2020.
- 92% report a risk of being unable to obtain medication for 2019 and 2020.
- 62% report a risk of being unable to obtain services and support for HH members with a disability for 2019 and 2020.

Box 4: Coping strategies exhausted

In addition to the quantitative data, qualitative data confirm the increasing depletion of coping strategies for poor and vulnerable people. Poverty is increasingly being seen among economically active individuals as a result of unemployment, partial employment or low pay:

'The poor and vulnerable have exhausted their sources of support; more and more are working in more jobs that are extremely low-paying; they are competing for a limited number of jobs and assistance sources. They experimented with working on their small [patches of] land to produce items that end up being very cheap in the market, due to low purchasing power in Gaza, and it becomes unfeasible for them to work in agriculture.' (FGD participant, expert group)

The data also confirm that HHs are resorting to the sale of assets and to borrowing:

'We have sold my wife's dowry gold; we have no more to sell.' (FGD participant, male, poor)

'I have resorted to all credit institutions and I have borrowed from them to start my business, but it was a failure. Now, I am trying to get more credit to pay for the current debt, but no institution will give more money.' (FGD participant, male, vulnerable)

Social solidarity has also reached a saturation point, with families and CBOs no longer able to assist each other:

'I used to resort to my family (parents) and neighbours to pay for basic needs; now all of them refuse. They say that they are also poor and need assistance.' (FGD participant, female, poor)

'I continuously go to local CBOs asking for assistance; now they know me too well and they find any excuse to tell me that I am not qualified.' (FGD participant, female, poor)

'My family paid for my education, and now they expect me to take care of their needs; but I can't as I have served as a volunteer in so many NGOs, but no job was ever offered to me. I feel used.' (FGD participant, female, poor)

4 SHIFTING CRITERIA OF VULNERABILITY

This section provides further analysis of the results as they relate to three key questions:

- Is vulnerability shifting, and how?
- Who are the vulnerable and the new poor?
- What is the role of the PNCTP and other assistance regimes in dealing with vulnerability?

4.1 VULNERABILITY SHIFTING CONFIRMED

The survey results, along with analysis of the qualitative data and the PNCTP data files of participating HHs, HHs denied/removed from PNCTP lists and HHs on the waiting list, reveal shifts in vulnerability, and hence increased poverty and risk of poverty, among Gaza's population. Indications of these shifts include the following:

- According to official sources in MoSD, the number of PNCTP participant HHs increased from 23,000 in 2013 to 77,000 in 2019.
- According to official sources in MoSD, the number of new applications for PNCTP benefits increased progressively between 2013 and 2019.
- The percentage of HHs receiving emergency assistance increased from 60% in 2017 to 63% in 2019.
- For 2017, 72.5% of target families report borrowing in the form of either debt or credit. This has increased to 81.3% of HHs in 2019.
- The amount of total debt/credit per HH from all sources to meet immediate spending needs increased by 43% from 2017 to 2019; much of the debt was spent on food and drinking water. Furthermore, the amount of accumulated debt has surged over the past few years.
- HHs resorted to seeking assistance from private individuals an average of 4.8 times in 2017, compared with 6.05 in 2019, a 25% increase.
- Spending and debt are also related to an increase in the number of children under 15, which increased from 2.04 on average in 2017 to 2.21 in 2019, indicating an increase in the dependency rate.
- 75% of HHs believe that they are at high risk of poverty in 2019; the percent increases to 82% when asked about their expectation for 2020.
- In 2019, 60% of HHs report that they are unable to buy food items from stores using debt; 66% believe that this will still be the case in 2020.
- 56% of HHs believe that they are currently exposed to the risk of food shortages; 63% believe that this is a high risk in 2020.
- 62% report that they are currently forced to buy food items from cheaper sources; 68% believe that this is a high risk in 2020.
- 63% believe that being forced to use frozen and canned food items is a high risk in 2019; 66% view this as a high risk in 2020.
- The belief that they need urgent assistance from relatives residing outside of Gaza has risen from 57% of HHs in 2017 to 60% in 2018, and 65% in 2019.

The qualitative data reveal both new factors and existing ones that have worsened, exacerbating vulnerability for different groups (see Box 5).

Box 5: New vulnerabilities and groups at risk

'Most Palestinians in Gaza are vulnerable to poverty due to the tightening blockade. They are trapped in an economic system that is not conducive to production and income generation. With the limited use and utility of productive resources and the high unemployment rate, especially among youth, groups that are assumed to be well-off are facing the dangers of poverty. These groups include small farmers, small vendors and fishers. At this point in Gaza, it is more rational for many households to seek assistance than the lower-paying income generated from work. But most households must use both: they must work for limited pay and make up the rest from other assistance sources. This is influencing the culture of poverty and dependency on assistance sources. For some households, a male qualified for marriage is increasingly defined as someone who is receiving assistance from the MoSD or other sources; he is deemed to be better qualified than a male working for a very low and irregular wage.' (Key expert, INGO)

'It used to be that poverty existed among the unemployed and those with low incomes. Now, new factors have been introduced [affecting new groups], including full-time workers such as PA and the staff of the de facto authorities in Gaza. They suffer from lower wages and irregular payments, while they still have significant commitments such as loans, house payments and student tuition. Others include betrothed women who are divorced before entering into marriage and women who are not married, living with their families but not eligible for any type of assistance. In addition, women who have become heads of households as a result of their husbands migrating but still in limbo in host countries must be considered. Children who face violence and are forced to work are also not recognized as being qualified for assistance and are unable to apply for any type of help. Another group that has moved into the ranks of poverty is businessmen who have gone bankrupt because of the economic crisis and are unable to pay their many debts, leading to imprisonment, and leaving the household in dire need.' (Female, gender expert)

'The PA's actions have increased the levels of vulnerability and poverty. The PNCTP is already covering less than 30% of poor HHs; the rest are not only vulnerable but they have already entered the ranks of the poor. The payment of only part of the salary, cutting off salaries from many PA staff members in Gaza, the new retirement rules for Gaza [financed retirement], which means PA staff receive only 60% of their original salaries, and the removal of hundreds of cases (more than 5,000) by the Ministry of Finance, are all leading to higher levels of vulnerability and poverty. The vulnerable also include betrothed women divorced before marriage, households with a breadwinner who works in a low-paying job, households with members who have a chronic disease and an increasing number of households with members who have psychological and mental challenges or members who are addicted to drugs.' (Expert, West Bank)

'The policies of the de facto authorities in Gaza are not conducive to economic growth and development. Their export and import policies, as well as discriminatory policies in terms of distribution of land, subsidies, external funding and investment opportunities, are all leading to the demise of small businesses, small farmers and fishers. In contrast, there is no room for advocacy with the government given the limitations placed on civil society or to influence positive change on behalf of those who are victims of these policies.' (Development expert, Gaza)

4.2 SOCIO-ECONOMIC VARIABLES CONTRIBUTING TO VULNERABILITY

Vulnerability was measured based on the highest level of relative (negative) movement in relation to various livelihood and empowerment indicators. This was done in order to distinguish vulnerability from chronic poverty. The data show that the people most vulnerable to the changing context are groups that, traditionally, have not been on the PNCTP list of beneficiaries, as indicated by analysis of the survey results and the households that have recently applied for assistance and remain on the MoSD waiting list. MHHs are increasingly vulnerable: due to the extreme unemployment rates, 71% of HHs on the PNCTP waiting list are male-headed, compared with 62% of HHs receiving PNCTP assistance. FHHs comprised 50% of the listed (or updated) cases at the end of 2014 and 37.8% of cases in 2015 and thereafter, while MHHs comprised 50% of the listed (or updated) cases at the end of 2014 and 62.2% of cases in 2015 and thereafter. HHs on the waiting list tend to be more educated: PNCTP participant HHs have an average of 0.31 members with a BA degree, but HHs on the waiting list have 0.40 members. Participant HHs also report a rate of illiteracy corresponding to 0.44 members on average, while HHs on the waiting list report a rate of 0.22.

HHs on the waiting list tend to be younger and smaller in size

22.1% of PNCTP recipient HHs are reported to be headed by a member who is 40 years old or younger, but the rate for HHs on the waiting list is more than double, at 48.8%. The average age of PNCTP recipient HHHs is 52, while that of HHHs on the waiting lists is 43.5. In addition, the average size of PNCTP participant HHs is 6.1 members, while the average family size for HHs on the waiting list is 5.52, which reflects the overall rate for the population of Gaza. 13% of PNCTP participant HHs have more than 10 members, but only 3% of HHs on the waiting list. One-member HHs receiving PNCTP assistance comprise 9.3% of the total, but the rate is lower among HHs on the waiting list, at 4.2%.

HHs on the waiting list tend to have lower rates of disability and chronic disease

While almost one-third of PNCTP HHs report having at least one family member with a disability, only 21.5% of HHs on the waiting list report the same. The average number of persons with disabilities in PNCTP HHs is 1.28, compared with 1.09 in HHs on the waiting list. The same pattern applies to reporting of chronic diseases. This is in part due to the presence of more older family members in PNCTP HHs than in HHs on the waiting list. The data show that while 29.2% of HHHs in PNCTP HHs are aged 60 or over, the rate is 18.9% for HHs on the waiting list. The number of HHs with reported illness has increased over time. Analysis of PNCTP records shows that the reporting of illness of the HHH (or difficult economic conditions but with at least one male family member in the HH) has increased, with available data on new or updated cases after 2015 showing a 40% rate of illness or economic difficulties (with an adult family member), compared with 20% before 2015.

Non-refugee HHs are increasingly at risk

While refugee HHs continue to suffer protracted vulnerability and relatively harsher living conditions, non-refugee HHs also report increasing levels of vulnerability. For example, both refugee and non-refugee HHs report similar levels of reliance on assistance as a source of income, with 61% in both groups relying on assistance for 50% or more of their total income. The increasing vulnerability of non-refugee HHs comes despite higher levels of reported reliance on agriculture as a source of income. 17% of non-refugee HHs rely on agriculture as a source of income compared with 10% of refugee HHs, with 6.2% of non-refugee HHs being 50% or more reliant. In spite of this, more non-refugee HHs have had to sell household items (19% have sold a refrigerator compared with 13% of refugee HHs). In addition, more non-refugee HHs assess their dwellings as being sub-standard (45%) than refugee HHs (39%), and

54% of non-refugee HHs assess the quality of water used for drinking as sub-standard, compared with 42% of refugee HHs.

4.3 GROUPS AT RISK

Any future interventions must take into consideration the nuances among newly vulnerable groups, and this section distinguishes these groups by further exploring the dynamics that have put them in such a precarious position. It aims to capture the characteristics that distinguish them from the usual definition of 'poverty' and their modes of coping and engagement with cash programmes, as well as the risks and uncertainties that they may potentially experience and which may diminish the quality of their lives. While the household is the main unit of analysis in defining poverty, an initial examination highlights the need to also observe the individual as a unit of analysis within the household. This individual-level analysis attempts to capture the needs of individual actors in the home, such as women and mothers, elders, children, and so on, and is in contrast to household-level interventions or changes to the collective often seen historically, such as unions or social movements (e.g., the Intifadas). A relational analysis of the collective, the household and the individual helps to reveal the dynamic and multidimensional nature of shifting vulnerabilities in the contextual reality of the 52-year-long occupation and the direly urgent situation caused by the blockade.

Adding to this, new vulnerable groups are emerging across the social spectrum. Such groups may initially appear not to meet the standard definitions of poverty in terms of their household and material possessions. However, other criteria – such as inability to gain access to medical assistance or to meet basic needs such as food – put these groups, who are already affected by the deepening humanitarian crisis facing the wider society, in a vulnerable position. Within this overall analysis of vulnerability based on socio-demographic factors, specific groups are at high risk, and these are explored below.

Fishers: The increased restrictions imposed upon fishers in Gaza, such as the reduction in fishing limits to six nautical miles from shore, has left them constrained.³⁰ This is further compounded by the risk of injuries and shooting incidents, which increased in 2018. This leaves households that rely on fishing for income in a constant state of uncertainty, with the challenges pushing them to reconsider their involvement in the trade. Moreover, the general lack of economic security in Gaza has resulted in a reduction in the purchase of fish, as households turn to other more sustainable and long-lasting nutritional products. This has seen a big fall in the number of fishers, as they pursue other opportunities. It also adds to rising unemployment rates and dependency on aid for families relying on this trade.

Farmers: For those in the agriculture sector, the lack of infrastructure in Gaza – such as access to electricity³¹ and clean water³² – brings added pressures. Farmers are therefore resorting to new strategies that focus more on short-term cultivation of vegetables (as opposed to fruit/nut trees, livestock, or slow-growth produce) in order to maximize the chances of being able to send them to market rather than risk potential losses due to a lack of resources or bombing by Israel. This has further hampered the ability of farmers to create a sustainable strategy for nurturing long-term production and investing in crops with a high risk of loss. Moreover, the reality of the siege of Gaza means that import and export opportunities for farmers have been reduced. This not only leads to price fluctuations but also curbs their ability to maximize utilization of their land, especially for those situated near buffer zones and areas susceptible to the risk of heavy bombardment. This leads to increased vulnerability for households who are dependent on farming for income and sustenance. As of 2019, only 4.3% of households were employed in the fishing, agriculture and forestry sector. Given this reality, farmers and landowners are having to rely on aid through various means, such as applying for a multitude of conditional grants and projects focused on income generation for farmers and local landowners.

Merchants and contractors: For merchants and contractors in the Gaza Strip, the economic insecurity of the general population often means that they are unable to pay for products upfront. The systemic debt system upon which households now depend leaves merchants in a vulnerable situation, often having to wait to collect debts because consumers are unable to pay for products immediately, with no set timeline for when they will be able to pay back what is owed. Merchants then become unable to maintain their shops and businesses because they are unable to purchase new products and continue operating in the market. Further, the bartering and bargaining systems that households and individuals have devised in order to meet their daily needs leave merchants and contractors without a consistent flow of income. On top of this, the reality of *dhimam maliyyeh*, or 'receivables financing' (where, as borrowers, merchants and contractors are unable to repay the lender), creates instability in household economic security. Under judicial regulations, those who are unable to meet their loan repayments are imprisoned. This distorts the market in the Gaza Strip and discourages merchants and contractors from pursuing business opportunities, thus further limiting trade and employment opportunities.

Women and girls: Early marriage is prevalent in the OPT: in Gaza, three out of 10 marriages involve girls under the age of 18.³³ This reality is compounded by the ongoing siege and the financial pressures on families when it comes to caring for their children.³⁴ With more women heading households, the local wage gap, which favours male participants in the labour force,³⁵ puts FHHs in an even more vulnerable situation. This coupled with the increase of people injured in political violence such as in the Great March of Return (GMR) in 2018–19³⁶ has brought FHHs to the forefront. However, the socio-economic situation, combined with the psychological effects of the siege and political strife, makes FHHs more vulnerable. While women are attempting to join the labour force, persistent issues such as GBV,³⁷ early marriage, wage gaps and lack of geographical space are constraining the coping abilities of FHHs.

Government employees: The increase in political strife between Palestinian political factions, namely Hamas and the PA, has seen government employees bear the brunt of the consequences. In 2018 and 2019, thousands of PA employees experienced cuts in their salaries, based on geographic and political divisions.³⁸ This leaves their families in a vulnerable situation, with a heightened risk of poverty due to the lack of other employment opportunities in Gaza. Almost 62,000 PA employees in Gaza have seen their salaries cut by 30–35%, and thousands more have been forced into early retirement. This puts economic pressure on households that have relied on this flow of income. As a result, families have had to turn to humanitarian aid and monetary assistance in order to meet their daily needs, such as nutrition and education.

Injured and disabled persons: Before the blockade was imposed, many Palestinians in Gaza – mostly males – relied on labour work such as construction. Further, half of employment in Gaza was previously in the services sector. Increased numbers of injuries and disabled persons with no proper access to medical services have added to employment insecurity,³⁹ and 46.3% of those who were in the labour force are now unemployed.⁴⁰ It should be noted that most people in the workforce are 20–40 years of age. As of 2019, the construction sector employed only 3.2% of the workforce in the Strip.⁴¹

New graduates: As recent graduates struggle to find jobs and financial security, unemployment rates continue to rise. New graduates in the social sciences, business and education fields have the highest unemployment rates. As a coping strategy, new graduates take various employment opportunities that do not necessarily match their field. In order to cope financially, new graduates manage by borrowing from family members, searching for work opportunities outside their realm of study or turning to aid and assistance mechanisms. The continued siege and the politically motivated obstruction of freedom of speech and expression mean that those in the social sciences experience further impediments to safely pursuing work opportunities.

Households lacking access to specialized medical care: With increased restrictions on referrals for those who require medical attention, families are progressively becoming more vulnerable. Lack of medical access, and the decreasing number of exit permits issued by Israel,

34 Responsiveness of the Palestinian National Cash Transfer Programme to Shifting Vulnerabilities in the Gaza Strip

mean that people with illnesses are unable to get treatment or to recover properly. In 2017, the Ministry of Health in Ramallah restricted health referrals from the Strip, affecting hundreds of patients.⁴² This has left households needing to cover their own medical expenses, which creates excess financial burdens on individuals and families. Further, the lack of proper medical care in Gaza means that there is an increased risk of falling ill due to the generally dire humanitarian situation. Those who are designated head of households and who fall ill are further stressed by their inability to meet daily needs, on top of their attempts to seek medical attention. Potential future attacks on Gaza's medical facilities, as well as a protraction of the current situation in the health sector, put both current and future patients at risk. This aggravates the whole situation of vulnerable households who are already struggling with the socio-economic realities of daily life in Gaza, now and in the future.

5 PNCTP AND OTHER ASSISTANCE PROVIDERS

This section provides analysis and insight on the various assistance mechanisms that exist in Gaza. It addresses issues of inclusion, the role of assistance in alleviating the poverty gap and recipients' satisfaction with assistance.

5.1 THE PNCTP

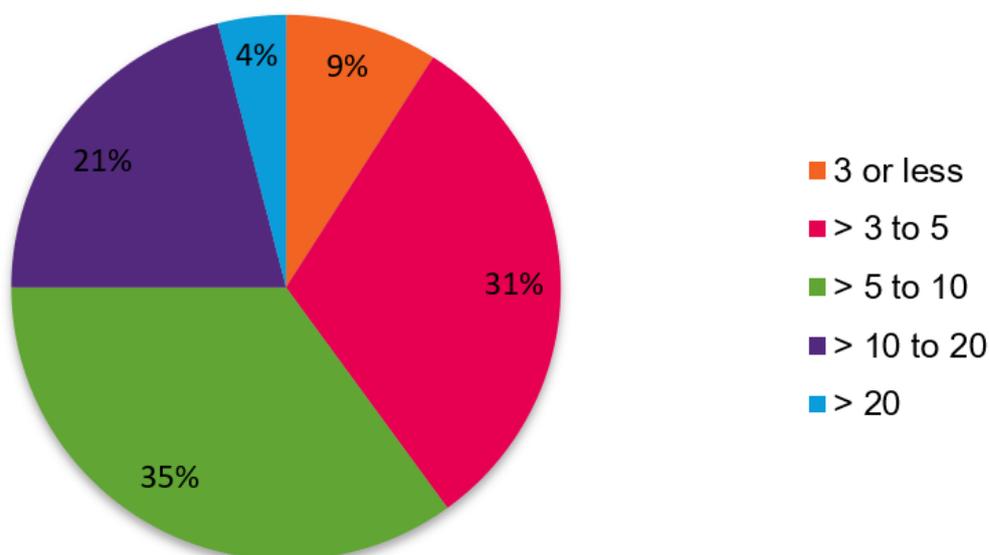
The households targeted by the survey were selected from PNCTP lists of those who currently receive assistance (of any type, cash or in-kind) from the MoSD, who have been receiving assistance but have recently been denied or removed from the MoSD lists, and others who are current applicants for MoSD assistance. 60% of the targeted HHs report that they have received MoSD assistance at some point during the past five years, while 40% have not.

Of the HHs that reported not receiving assistance:

- 28% used to receive assistance but were removed from the MoSD lists;
- 27% have applied, but are still on the waiting list;
- 18% applied, but were denied for reasons of ineligibility;
- 17% have never applied for MoSD assistance;
- 10% have no information on the status of their application.

Analysis of the survey results for recipients of MoSD assistance reveals that 40% of beneficiaries were added during the past five years, 35.5% were added 6–10 years ago and 25% were on the MoSD list more than 10 years ago.

Figure 10: PNCTP recipients, classified by number of years of inclusion



When asked to evaluate the MoSD assistance they had received, respondents provided the following insights:

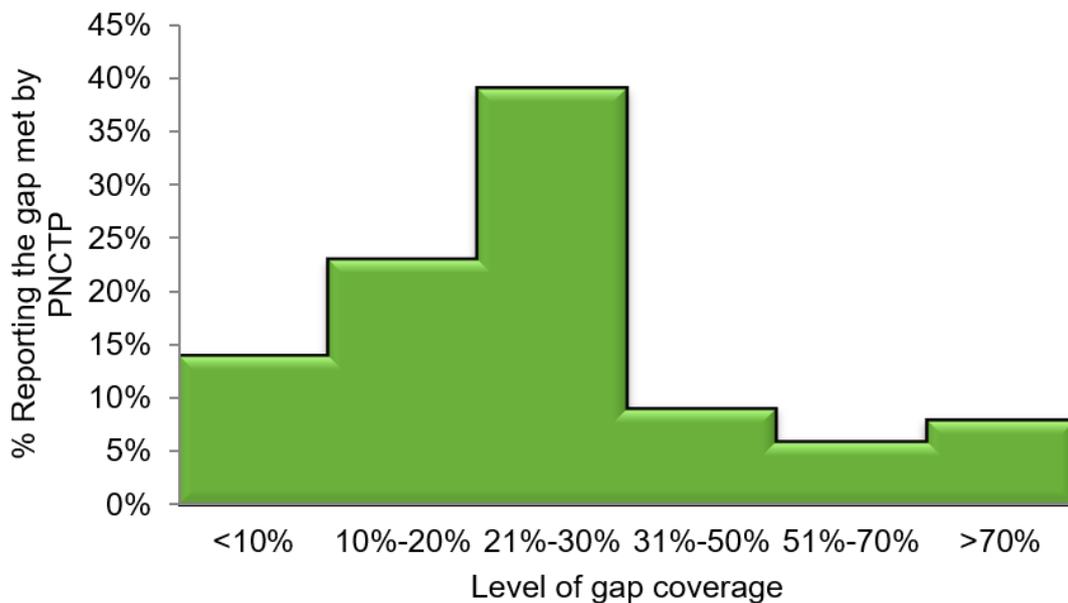
- 53% view the assistance as irregular, while 31% view it as somewhat regular and 16% as regular.
- 51% are dissatisfied with the adequacy of the assistance received, while 31% are somewhat satisfied and 17% are satisfied.

Asked to list their reasons for dissatisfaction, recipients gave the following reasons (ranked in order):

- Irregularity of assistance (53%);
- Amount of assistance (46%);
- Complex process for obtaining assistance (1%).

As for the contribution of MoSD assistance in helping families to reach the extreme poverty line of ILS 1,974 (\$572) for monthly needs, 76% report that the assistance meets 30% or less of that amount, while 15% report that it meets more than 30% but not more than 70% of the income needed. Figure 11 shows the reported amounts of PNCTP assistance and the degree to which it bridges the extreme poverty gap.⁴³

Figure 11: Effectiveness of the PNCTP in bridging the poverty gap



The amount of assistance that beneficiary HHs report receiving in the most recent round of distribution before the survey (August 2019) can be divided as follows:

- Lowest tier: 34% of recipient HHs reported receiving ILS 750 (\$217) or less.
- Middle tier: 33% reported receiving more than ILS 750 (\$217) but less than ILS 1,750 (\$507).
- 33% reported receiving between ILS 1,750 (\$507) and ILS 1,800 (\$522).

Slightly more MHHs (61.1%) report receiving MoSD assistance than FHHs (59%), though more MHHs evaluate the regularity and sufficiency of MoSD assistance negatively than FHHs. More HHs in ARAs receive MoSD assistance (66% of HHs) than in other areas (59%), but they are less satisfied with the assistance than HHs in other areas. 57.9% of refugee HHs report receiving assistance from the MoSD, compared with 64.2% of non-refugees; levels of satisfaction with MoSD assistance are the same among refugees and non-refugees. These findings correspond largely with the MoSD's own reporting.⁴⁴

Box 6: MoSD assistance – vital statistics

The MoSD's PNCTP database shows that 218,518 persons are registered to receive assistance; however, in 2018 only 49.7% of them had actually received such assistance, which was 1% less than in 2017. In 2018, the MoSD made four quarterly payments amounting to a total of ILS 518,400,000 (\$15,026,087), the last of which reached 110,272 HHs. This declined in 2018, when the MoSD was able to make only three of four scheduled payments to a lower number of HHs (the last payment reached 108,545 HHs), amounting to ILS 369,017,000 (\$106,961,449). This was due mainly to the fiscal crisis in the PA due to Israel withholding taxes and lower levels of international and regional funding.

Of the MoSD beneficiaries, 66% are in Gaza and 34% in the West Bank. According to MoSD statistics, its assistance reaches 72% of HHs living below the extreme poverty line but only 47% of HHs below the national poverty line. 84.5% of participant HHs suffer from extreme poverty, while 8.3% are between the extreme poverty line and the national poverty line and, finally, 7.2% are above the national poverty line. These last two groups are not eligible according to the proxy means testing formula (PMTF), yet are deemed to be suffering from poverty and hardship by social workers and MoSD regional offices.

There is a big difference between the number of participating HHs in each region, with 71,219 HHs in Gaza and 37,326 in the West Bank. The probability that a registered HH in Gaza will be benefiting from MoSD assistance is double that for a West Bank HH: two-thirds (66.6%) of PNCTP-registered HHs in Gaza receive assistance, compared with one-third (33.3%) of such HHs in the West Bank. The number of participating HHs in Gaza has trebled since 2007, and the total assistance disbursed annually has grown from ILS 130,000,000 (\$37,681,160) in 2007 to ILS 370,000,000 (\$107,246,377) in 2018.

Source: MoSD. (2019). *Annual Statistical Report for 2018*.⁴⁵

5.2 RECIPIENTS OF UNRWA ASSISTANCE

The majority of HHs surveyed – 62% – report receiving assistance (of any type, cash or in-kind) from UNRWA – slightly more than from the MoSD. 38% do not receive any type of assistance from UNRWA; among these HHs, the main reason for this (more than 94%) is that they have never applied, likely because they are primarily non-refugee HHs and thus ineligible for UNRWA assistance. As for the rest, 2.6% used to receive assistance from UNRWA but were later removed from the lists, 1.7% have applied but are still waiting and 1.3% have applied and have been rejected.

In terms of number of years of receiving UNRWA assistance, the survey findings are the following:

- 12% of recipient HHs have only been added to UNRWA lists in the past three years.
- 6.7% of recipient HHs have received UNRWA assistance for 4–5 years.
- 23.3% have received UNRWA assistance for 6–10 years.
- 40.3% have received UNRWA assistance for 11–20 years.
- 11.8% have received UNRWA assistance for more than 20 years.

HH dependency on UNRWA assistance is generally longer than for MoSD support, with more than 52.1% of UNRWA recipients being on the lists for more than 10 years, compared with 25% of MoSD recipients. Similarly, 18.7% of UNRWA beneficiaries have been on the lists for five years or less compared with 40% of MoSD beneficiaries.

When asked to evaluate UNRWA's assistance, recipients provide a more positive evaluation of its regularity and adequacy compared with that of the MoSD.

- Fewer than 1% view UNRWA assistance as irregular, compared with 53% for MoSD recipients; 20% view UNRWA assistance as somewhat regular and 79% as regular.
- 15% are dissatisfied with the adequacy of assistance received from UNRWA, compared with 51% of MoSD recipients; 24% are somewhat satisfied and 61% are satisfied.

Asked to prioritize reasons for dissatisfaction, the vast majority (93%) cited the insufficiency of UNRWA assistance as their number one reason, while only 7% cited irregularity as their top reason (this was the opposite of views expressed by the recipients of MoSD assistance, who gave irregularity as their key reason for dissatisfaction).

A comparison of the amounts that UNRWA and MoSD recipients report receiving shows that the MoSD's assistance contributes to filling the poverty gap much more than UNRWA's. On the contribution of UNRWA assistance in helping families to reach the poverty line of ILS 1,974 (\$527) for monthly needs, the following results were reported:

- For 52% of HHs, UNRWA assistance covers less than 10% of the poverty gap (compared with 14% for MoSD assistance).
- For 36.4% of HHs, UNRWA assistance covers 10–20% of the poverty gap (MoSD: 23%).
- For 5.7% of HHs, UNRWA assistance covers 21–30% of the poverty gap (MoSD: 39%).
- For 4.3% of HHs, UNRWA assistance covers 31–50% of the poverty gap (MoSD: 23%).
- For 1.4% of HHs, UNRWA assistance covers more than 50% of the poverty gap (MoSD: 14%).

Slightly more MHHs report receiving UNRWA assistance (62.7%) than FHHs (61%). Fewer HHs in ARAs and nearby communities (58.5% and 51% respectively) receive UNRWA assistance than HHs in far-away areas (68.6%). This might be due to the rural nature of ARAs and nearby areas, while most refugees and refugee camps are concentrated in the centre of Gaza and the coastal area. No non-refugee HHs report receiving assistance from UNRWA, while 95.4% of refugee HHs⁴⁶ receive such assistance.

5.3 OTHER SOURCES OF ASSISTANCE (PRIMARILY WFP)

24.3% of the surveyed HHs report that they receive assistance (of any type, cash or in-kind) from sources other than the MoSD and UNRWA, mainly from the World Food Programme (WFP) (see Box 7), while the remainder report that they do not. The main reason for not receiving assistance from other sources (more than 73%) is that HHs have never applied for it. Of other HHs not receiving such assistance, 12% have applied but were rejected and 10% have applied but do not know the status of their application. The rest have either been removed from assistance lists or are on a waiting list.

In terms of the number of years of receiving assistance from other sources, according to the survey, HHs report that these sources have largely provided assistance recently compared with UNRWA and the MoSD:

- 43% of recipients of assistance from other sources report receiving support for the past three years only (compared with 12% for UNRWA assistance and 9% for the MoSD).
- 15.5% report receiving such assistance for the past 4–5 years.
- 31.6% report receiving such assistance for 6–10 years.
- Fewer than 10% report receiving such assistance for 11–20 years.

58.5% of those receiving assistance from other sources report that it has been received for five years or less, compared with 40% for the MoSD and 18.7% for UNRWA.

When asked to evaluate these other sources of assistance, recipients gave a more positive evaluation of their regularity and sufficiency compared with recipients of MoSD assistance, but they were less satisfied than UNRWA recipients:

- 21.2% view the assistance as irregular, while 20.5% view it as somewhat regular and 58.2% as regular.
- 31% are dissatisfied with the adequacy of assistance received from other sources, while 29.5% are somewhat satisfied and 39.5% are satisfied.

When asked to prioritize their reasons for dissatisfaction, 55.6% cited insufficiency of the amount of assistance received as their number one reason, while 33.3% cited irregularity as their top reason. Notably, 11.1% cited the complex process for obtaining such assistance as their number one reason for dissatisfaction. As for the role of this type of assistance in filling the poverty gap, the data show that it is less effective compared with MoSD and UNRWA assistance:

- For 48% of HHHs, assistance from sources other than the MoSD and UNRWA covers less than 10% of the poverty gap.
- Another 37.7% report that this type of assistance covers 10–20% of the poverty gap.
- For 7.9% of HHHs, assistance from other sources covers 21–30% of the poverty gap.
- For 2.1% of HHHs, assistance from other sources covers 31–50% of the poverty gap.
- For 4.3% of HHHs, assistance from other sources covers more than 50% of the poverty gap.

MHHHs and FHHHs report similar levels of assistance from other sources, but MHHHs tend to be more dissatisfied with the regularity and sufficiency of this support than FHHHs. More HHHs in communities close to ARAs report receiving this kind of support (32%), compared with HHHs in ARAs (24.5%) and far-away communities (19.6%). The primary focus of support of other sources is on non-refugee HHHs, with 52.4% reporting that they receive such support, compared with 9.1% of refugee HHHs. This is primarily because the WFP assistance programme targets the non-refugee population, while UNRWA focuses on refugees. WFP was mentioned by FGD participants as their primary source of support, other than the MoSD and UNRWA.

Box 7: WFP food assistance

In 2018, 27,958 MoSD recipient HHHs also benefited from WFP food distributions, with 39% of HHHs in the West Bank and 61% in Gaza. This represents a significant decline from 43,483 recipient HHHs in 2017. This decline is due to lower financial allocations for the programme. Currently, WFP assistance reaches around 160,000 recipients (32,978 households), of which around 51,000 (10,748 HHHs) are in the West Bank and around 109,000 (22,230 HHHs) in Gaza. Around 49.7% of recipients are boys and men, and 50.3% are girls and women. Households headed by women comprise around 35% of the total. ⁴⁷

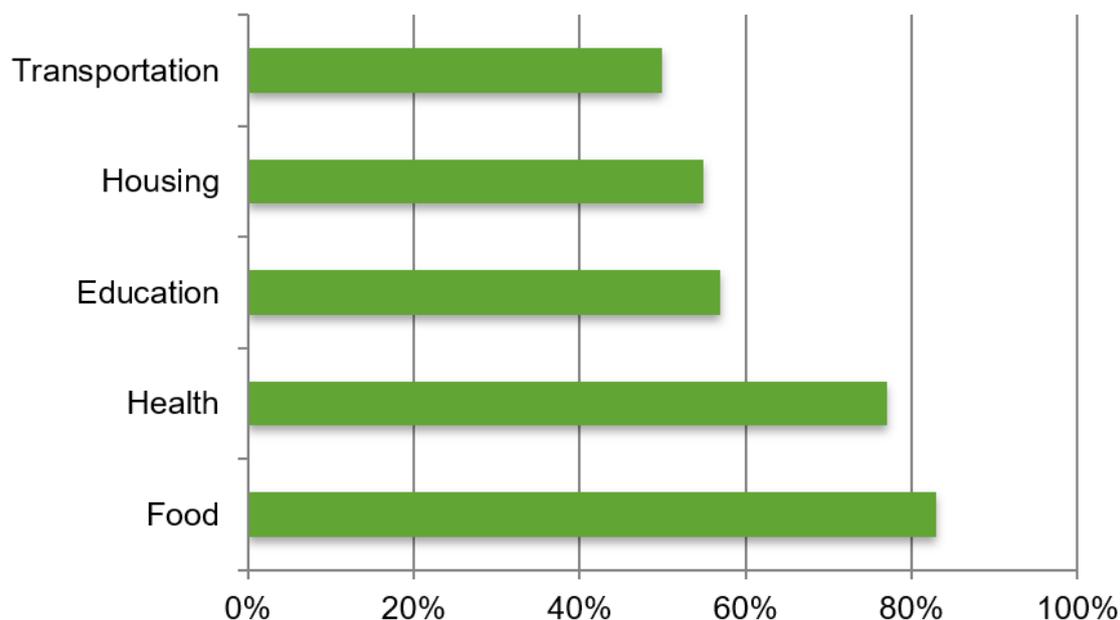
5.4 EMERGENCY ASSISTANCE AND URGENT NEEDS

Levels of reported emergency assistance have been fairly consistent over the past three years. In 2017, 60% of HHs received emergency assistance (either frequently, often or rarely), and the same level was reported for 2018. In 2019, the level increased slightly to 63%. FHHs have a relatively higher level of access to emergency assistance than MHHs. In 2017, 61.5% of FHHs and 57.8% of MHHs reported receiving emergency assistance, while in 2019 the figures were 65.7% and 59% respectively. The focus of emergency assistance is on communities who live close to ARAs, where 75.7% of HHs report receiving such assistance in 2019, compared with 50.9% in ARA communities and 57.2% in far-away communities. Refugee HHs receive emergency assistance at a much higher rate than non-refugee HHs – 62% vs 19% in 2019.

The survey data show that the highest rate of emergency assistance targeting is among HHs on the PNCTP waiting list, with 74% receiving emergency assistance at least once during 2019, compared with 66% of PNCTP participating HHs (which are already eligible for various types of assistance conditional on PNCTP inclusion). The HHs least targeted by emergency assistance are those who have been denied/removed from PNCTP benefits (53%).

HHs were asked to assess their urgent needs at the present time. 97.3% said that they needed food, 83% of them urgently. Urgent need for food is slightly higher among FHHs (84.4%) than MHHs (81.5%), and higher in ARAs (90.6%) than in other areas (82%). Refugee HHs also report higher levels of urgent need for food (85.5%) than non-refugee HHs (77.4%). PNCTP HHs need food most urgently (88%), followed by HHs on the waiting list (82%) and denied/removed HHs (76%). Figure 12 shows a list of needs based on their degree of urgency.

Figure 12: Highly urgent needs, as assessed by households



The rest of this section details the vulnerabilities and needs that HHs expressed as being urgent at the present time and which pose additional risk of need in the future:

- 95% of HHs feel that they are currently exposed to poverty and that this will continue in 2020, but the perception that poverty is a high risk increases from 75% in 2019 to 82% in 2020. Perceptions of vulnerability to poverty are highest among HHs on the waiting list, with

92% saying that they are vulnerable to poverty in 2019, rising to 98% for 2020. Of PNCTP participating HHs, 93% report vulnerability in 2019 and 96% for 2020. Of denied/removed HHs, 81% report vulnerability in 2019 and 85% in 2020.

- 91% report vulnerability in terms of being able to buy food items from stores through debt for both 2019 and 2020, with 60% assessing this risk as high for 2019 and 66% for 2020. Perceptions of vulnerability in terms of buying food show the biggest increase among HHs on the waiting list, rising from 76% for 2019 to 83% for 2020, an increase of nine points compared with a three-point increase for PNCTP HHs and denied/removed HHs. The same patterns are seen in HHs' perceptions of storekeepers' willingness to sell food items on the basis of debt.
- 92% feel that they are currently exposed to the risk of food shortages and will continue to be exposed in 2020; the perception that this is a high risk increases from 56% in 2019 to 63% in 2020. More FHHHs (58.4%) fear a high risk of food shortages than MHHHs (52.9%) in 2019, and the same pattern is seen in their expectations for 2020 – 67.1% of FHHHs compared with 56.6% of MHHHs. More HHs residing in ARAs (60.4%) feel that they are at high risk of food shortages than HHs living in areas near ARAs (59%) and far-away HHs (53.7%). Similarly, more refugee HHs (58.2%) feel that they are at high risk of food shortages than non-refugees (50.9%), but both groups have worse expectations for 2020, with 67.3% of refugee HHs feeling insecure and 53.8% of non-refugee HHs. Perceived vulnerability to food shortages is highest among HHs on the waiting list, increasing by nine points from 2019 to 2020, compared with increases of three points for PNCTP beneficiaries and seven for denied/removed HHs (from 71% to 78%).
- 93% of HHs feel that they are currently forced to buy food items from cheaper sources (open marketplaces as opposed to supermarkets or shops) and that this will continue in 2020; however, the perception that this is a high risk increases from 62% in 2019 to 68% in 2020. This changing nature of markets has impacts on HHs that are not located in central areas, as these markets may be out of the way and hard for them to reach. Further, this has a gender aspect, as women and youth may be less able to navigate these markets due to a lack of price regulation, access and physical issues, and overcrowding.
- Families recognize the need for fresh food items. However, the data show that 89% feel that they are currently forced to use frozen and canned food items and will still have to do so in 2020; the perception that this is a high risk increases from 63% in 2019 to 66% in 2020.
- The belief that HHs need assistance urgently from relatives residing outside of Gaza has risen, from 57% in 2017 to 60% in 2018 and 65% in 2019.

6 CONCLUSIONS AND RECOMMENDATIONS

This section sets out a number of overarching conclusions relating to the research questions as they pertain to new and unfolding factors leading to shifts in vulnerability, newly vulnerable groups and the responsiveness of the PNCTP. It provides insights on the concept and measurement of vulnerability in the context of Gaza, de facto inclusion and exclusion of vulnerable people and their levels of dependency, and other concluding remarks. It also provides a number of recommendations for improving the performance of assistance providers and other humanitarian and development actors.

6.1 CONCLUSIONS

Measuring vulnerability as a conceptual and empirical challenge

Preliminary research on Gaza, through a combination of focus groups and in-depth interviews, highlights a shift in what constitutes a vulnerable group. This presents challenges in the multidimensional nature of shifting vulnerabilities, with new and previously unexpected groups emerging in the context of relationships between the collective, the household and the individual. Currently, the PNCTP's measurements of poverty are based primarily on income and material considerations and the productive role of different groups. However, an empirical examination of shifting vulnerabilities calls for an analysis of new factors. This needs to be performed on both the objective and the subjective levels and over time, rather than being based on specific events. The new groups, it is initially found, do not fit neatly with existing equations for measuring poverty but rather require fresh conceptualizations of vulnerability. Further, current operational procedures appear to reinforce coping mechanisms rather than moving towards transformation.

Vulnerability despite productive sources

As outlined in the analysis sections, the vast majority of the new poor are young, with higher levels of education, and would normally be considered part of the labour force. In addition, HHs on the PNCTP waiting list tend to depend more on productive resources for income, with at least 25% of their income being derived from such sources (including private business, which comprises 9.25% of their income, along with land and work for the government), compared with 11% for PNCTP beneficiary HHs.

Atypical of poverty, exposed to vulnerability

All the indicators show that those who are newly poor and vulnerable originate disproportionately from groups that in normal circumstances are considered well-to-do, with sufficient education, assets and physical ability to be productive. The common themes in the quantitative and qualitative data that explain their vulnerability are unemployment and distorted market dynamics, as described earlier. The problems faced by these groups are structural and, for them, resorting to or becoming dependent on assistance is an anomaly. Even with many coping mechanisms (including micro-credit, small businesses, assistance from relatives, the sale of assets, etc.), the newly vulnerable are no longer able to cope: their coping strategies are exhausted, and they have ever fewer choices. The bulk of the evidence in this study shows that risks, uncertainties and poverty indicators are all increasing.

A highly fragmented and conflicted governance system

In its responsiveness and broad inclusion mechanisms, the PNCTP appears to already be accommodating these vulnerable groups, even if this is not explicitly articulated in its mandate by accounting for the nature of shifting vulnerabilities and the new poor in its selection criteria. Inadequacies in the system of governance in Gaza regarding data collection, unaccountable decision-making on inclusion and exclusion, the conflicted role of employees of the PA and the de facto authorities in Gaza and the limited management and oversight of the PNCTP in Gaza by West Bank authorities create barriers to addressing shifting vulnerabilities in Gaza in a cohesive, collaborative and effective way. Further, there appears to be a high degree of ambiguity in both data collection and data entry. The PNCTP does not fully account for gender, disability, old age or the multidimensional socio-political factors affecting newly vulnerable groups beyond its own definitions. This could be mitigated by implementation of the MoSD's future vision of determining allocations for persons with a disability and elderly people based on a rights-based approach, where they will automatically be eligible for social security benefits.⁴⁸ This will not only preserve the dignity of these citizens but also will lead to more effective utilization of financial and human resources. Moreover, there appears to be a degree of overlap in recipients of various cash, in-kind, humanitarian and development assistance mechanisms due to the fragmented nature of different governmental and developmental structures. Finally, the survey results on sources of income imply that the PA's actions to remove households from its beneficiary lists are likely to be justified by objective indicators (e.g., levels of employment in the PA, the de facto authorities in Gaza and the private sector). At the same time, while new applicants appear to be poorer than those who have been removed or rejected, they seem to have higher levels of access to sources of assistance, and so their applications must be reviewed carefully.

Consolidating dependency through (skewed) coping mechanisms

Exiting development frameworks consist largely of coping mechanisms which are leading both to more dependency on aid and to reinforcing normalization of dependency on the occupation and fostering a welfare-dependent culture. This further hinders sustainable development and growth, while stripping collective agency and fixating on individual benefits. The consequences of this on the social fabric of Palestinians in Gaza can be observed in increased social dislocation, family disintegration and problematic relations between beneficiaries of monetary aid and excluded categories.

The newly vulnerable (at risk with shifting thresholds)

New vulnerable groups are emerging across the social spectrum: they include fishers, farmers, merchants, contractors, landowners, female-headed households, disabled persons, government employees, people injured because of political violence (i.e., those injured during the GMR) and people who are sick but who cannot get a medical referral. While these groups may not appear to meet the poverty criteria in terms of household and material possessions, other criteria, such as their inability to access medical assistance or to acquire basic needs such as food, put them in a vulnerable position in the midst of a deepening humanitarian crisis.

Poverty alleviation and responsiveness of the PNCTP

An aggregate analysis of the 'poverty trap', reinforcement of the welfare culture in Gaza, the inability to build sustainable development support for resilience, and the fractured social fabric, as well as a reconsideration of the complex, dynamic and multi-layered experience of shifting vulnerabilities in the Strip, necessitate a re-evaluation of the new categories emerging, beyond existing definitions of the poverty gap. While the PNCTP estimates the poverty gap⁴⁹ in order to guide its efforts to overcome it, dependence on aid continues to increase disproportionately in Gaza. While the MoSD and the PCBS set the monthly poverty gap at ILS 366 (\$106) per capita, 35% of the beneficiary population live on between ILS 183 (\$53) and ILS 471 (\$137) per capita per month and almost 39% live on less than ILS 183 (\$53). Across beneficiaries, 94.1% of

44 Responsiveness of the Palestinian National Cash Transfer Programme to Shifting Vulnerabilities in the Gaza Strip

recipients of UNRWA assistance and 93.6% of those receiving assistance from other sources report that such assistance covers the poverty gap by 30% or less, compared with 76% among MoSD recipients. According to the survey, for 24% of recipients MoSD assistance covers the poverty gap by more than 30% (but less than 70%), compared with 5.9% of UNRWA recipients and 6.4% of beneficiaries of other sources of assistance. The most recent consumption data from the PCBS (2018) indicate that 29.2% of individuals in Palestine were below the poverty line even when the value of assistance was included, with a higher rate of 53% in Gaza. When assistance was taken out, the poverty percentage increased to 33% (59.8% in Gaza). Assuming that other factors remain unchanged in the absence of assistance, it can be concluded that assistance reduced poverty levels by 11.5% (11.4% in Gaza), and extreme poverty rates were reduced by 20% (from 21% before assistance to 16.8% with assistance).⁵⁰

Table 1: Poverty among Individuals before and after receiving assistance, 2017

Region	Poverty		Extreme poverty	
	Before receiving assistance	After receiving assistance	Before receiving assistance	After receiving assistance
West Bank	15.6%	13.9%	7.3%	5.8%
Gaza Strip	59.8%	53.0%	42.3%	33.8%
Occupied Palestinian Territory	33.0%	29.2%	21.0	16.8%

MoSD, 2019.

This means that, despite its intentions, the PNCTP is not covering the poverty gap. Still, as newly vulnerable groups are not yet being taken into consideration, coupled with a lack of coordination and comprehensive criteria and lists of beneficiaries, those receiving PNCTP support appear to be better accommodated than those who are not. The PNCTP's shortcomings are exacerbated by the fact that it does not account for former labour workers who have been unemployed for years as a result of the blockade; nor does it consider the rapidly changing individualization and disintegration of family structures or changing gender dynamics.

The data indicate that the PNCTP has been accommodating new vulnerabilities and newly vulnerable groups to some degree. Although no changes have been made to the system, realities on the ground have forced their way in. The increase in numbers and the reported leniency in data collection have allowed social workers and data analysts to play a significant role in allowing for the economic hardships faced by households, even within the present system. Assistance appears to be designed to serve those suffering extreme poverty; however, vulnerability and chronic poverty are not the same. The new groups seen in the deteriorating situation in Gaza require a new programme rather than strict and static measures of poverty. The system's responsiveness to objective and subjective economic and socio-political factors and the compensatory system being used in light of declining salaries, injured persons and increased unemployment rates do not fully take account of the nuances of vulnerability. Subsequently, discourse on development and self-reliance takes an individualized rather than collective approach of hope, absorption and adaptation. In terms of consumption, the way the system deals with poverty does not properly acknowledge the severity of shifting vulnerabilities in Gaza. A study of the structural causes and a rethink of the criteria for PNCTP participants are therefore necessary. Rather than stretch the population of Gaza further with coping mechanisms, a deeper understanding of the newly vulnerable groups would allow for the development of greater empowerment and agency.

Gender considerations when viewing vulnerability

FHHs are exposed to higher levels of poverty and unemployment than their male counterparts. FHHs rely more on assistance and donations: 40% rely entirely on assistance compared with 30% of MHHs. More FHHs rely on two sources of assistance or more than MHHs (60% vs 40%). They make up a disproportionate number of PNCTP and other vulnerable HHs (i.e., new applicants) at 21.2% compared with 8.7% for the overall population in Gaza. Reported levels of social isolation are higher among FHHs than MHHs, though both assess the future risk of isolation equally. FHHs report higher levels of insecurity about the future than MHHs, and also higher levels of unhappiness. Seeking assistance is a further burden on women, as they are pushed by their families to lead the search for assistance from both formal and informal sources. They are also encouraged by formal providers (government, international organizations and CBOs) to apply for assistance, as women are perceived to be more eligible for receiving assistance. The burden shouldered by women is compounded by injuries and disabilities resulting from the conflict, the unemployed status of male family members and emotional stress caused by continuing economic and social pressures, as well as increasing levels of drug use (especially among males).

This multiplicity of evidence shows that, in many ways, the PNCTP is already accommodating some of the shocks resulting from shifting vulnerabilities and the emergence of newly poor groups, albeit inadvertently. More people are enrolling in the PNCTP who would not previously have been considered poor but who have recently been exposed to vulnerabilities that have pushed them towards the assistance lists. This is compounded by an element of duplication in caseloads, where people are receiving assistance from more than one source. As Table 2 shows, 92.4% of current PNCTP participants receive assistance from at least two regular sources. Of these, 64% receive assistance from the MoSD and UNRWA, and 23% from the MoSD and other regular sources, primarily WFP. Some 5.4% receive regular assistance from all three sources.

Table 2: Intersection between sources of assistance, by source, recipient status and gender of HHH

Sources	% of all surveyed HHHs	% of PNCTP participants (past five years)	Sources of emergency assistance	Removed from PNCTP	% of current PNCTP participants	MHHs	FHHs
Three sources	3.2%	6.4%	1.4%	1%	5.4%	84%	16%
MoSD + UNRWA	33%	66%	49%	2%	64%	60.5%	39.5%
MoSD + other (WFP)	13%	26%	12%	3%	23%	55.1%	44.9%
UNRWA + WFP	1.7%	0%	1.2%	0%	0%	40%	60%
From two sources or more (total)	50.9%	98.40%	63.60%	6%	92.4%	60%	40%

Designing future interventions

Progress towards development in the Gaza Strip remains an unlikely scenario. There is no political solution in sight for the Palestinian–Israeli conflict and no signs of the occupation ending or of internal political divisions being resolved. Still, some actions might be useful in terms of improving the assistance regime in general and the PNCTP in particular. The UN has already declared Gaza to be unliveable by 2020, with no evidence in sight of any improvement in the limitations imposed by the structural, political and economic constraints. This means that all forms of individual, household, community and even international coping mechanisms have been exhausted to the extent that any further resources might be unavailable in the future given the local, regional and international political situation and its negative impact on aid to Gaza. At the same time, development- and market-based interventions in Gaza seem to be edging closer to becoming livelihoods and disguised assistance programmes, providing sustained assistance to compensate groups who own assets and who traditionally would not be eligible for cash-based assistance. Existing assistance programmes, especially the key ones of the PNCTP, UNRWA and WFP, are clearly not expecting any increase in budgets. Rather they are facing, and will continue to face, extreme financial and other political stresses. The stress on these programmes, especially the PNCTP, has reached a tipping point, with limited or no room to accommodate additional demands for any sustained and regular programming. The study also shows that the PNCTP, intentionally or unintentionally, has to a large extent already been accommodating the increasing and changing demands of new groups in Gaza as the system has become a hybrid one, with beneficiaries who are suffering extreme levels of poverty and those newly vulnerable. Under such limitations and pressures, any future programming might risk being redundant and difficult to implement if the current political and economic regime remains unchanged.

6.2 RECOMMENDATIONS

A protracted crisis and escalation of the conflict, with other shocks, will only worsen the situation and its impact on Palestinian families in the Gaza Strip. This scenario might involve human-made shocks such as the escalation of conflict, continued restrictions of movements of people and goods and increases in human and structural casualties. This scenario assumes natural population growth and a continued deterioration in livelihoods, health conditions and water and electricity supplies and the depletion of other essential infrastructure and services. If this happens, poverty and unemployment rates will continue to skyrocket, leading to an unprecedented dependency rate with ensuing social problems, including violence, crime and psychosocial issues.

The following recommendations are made for donors and the international community:

- The international community and the Palestinian governing bodies must consider Gaza as a chronic, human-made and ongoing humanitarian crisis. This implies that a humanitarian rights-based assistance regime should take precedence over all other forms of aid. If this happens, the following actions are also relevant. Humanitarian agencies and donors need to break away from traditional funding models that are no longer adequate for the complex and protracted crisis that Gaza faces. They must increase their efforts to adapt and innovate their way out of problems. An increase in allocation of all forms of humanitarian assistance must be accompanied by improved coverage in consideration of the multidimensional nature of poverty and vulnerability. For as long as Gaza remains under the current conditions, increases in humanitarian assistance will remain critical. Meanwhile donors should look into more durable ways to deliver aid in Gaza.
- While conditions in Gaza are generally predictable if the current situation continues, humanitarian support must go beyond responding to additional crises, such as armed

conflict, and provide aid even earlier with anticipatory financing. This requires the collection of early warning data and predictive analytics, while linking thresholds to the triggering of pre-agreed automatic funding.⁵¹

- While not fully dismissing market-based approaches in Gaza, other modalities must be considered. These include further development of more systemic and permanent approaches which incorporate other types of social responsibility. This has limited potential from within Gaza itself, but must rely on Palestinian and other philanthropic sources in the West Bank, Israel and around the world.
- Major and possibly drastic steps must be taken to consolidate all forms of assistance into one unified mechanism, with a unified supervisory role for all the major actors, including the MoSD, UNRWA, WFP and possibly other international and national NGOs. The unified mechanism will ensure that vulnerable groups' needs are addressed holistically through a more unified and improved mechanism. This will also ensure more accountability of actors towards the people they assist.
- An in-depth assessment of livelihoods and development programmes that are implemented in Gaza must be carried out in order to understand the sustainability of their impact in the longer term, aside from immediate humanitarian relief. More consideration must be given to the different characteristics of targeted groups, with transparent modalities that conform with international humanitarian standards and that ensure the reduction of aid dependency.
- Actors who are providing explicitly political or partisan assistance must be held accountable by exerting further pressure on them through international, regional and possibly people-based actions.
- The international community, including the UN and the EU, must pressure the Palestinian governing bodies and offer clear proposals to ensure that all taxes they collect be devoted to the proposed consolidated mechanism.
- Donors and INGOs must help improve the level of collective agency in Gaza by advocating for more space for freedoms and rights of expression, association, civil society work and media. This must be coupled with involving poor and marginalized people in setting priorities, planning and advocating in any appropriate form, including the creation of pro-poor advocacy groups.
- Donors and INGOs must advocate for economic policies in Gaza that are rights-based, pro-poor and are free of partisan considerations and use of the political system to increase wealth for some groups at the expense of others. This applies to all economic fields but in particular to agriculture, livestock and poultry production and the export and import policies in general of the governing regime.

The following recommendations are made for the PA and the de facto Palestinian authorities:

- The PA and the de facto Palestinian authorities must make it a priority to fulfil their duties towards government staff in the form of full and regular salary payments. This requires them to reassess their priorities and shift allocations to social assistance, even within their limited budgets. The political system must provide the MoSD with higher levels of budget allocations in order for it to meet increasing demands.
- The eligibility criteria of the current assistance programmes must be expanded to respond to real shifts in vulnerability and to newly emerging vulnerable groups. This study finds that the PNCTP has increasingly been responding to these changes through the assistance allocated to vulnerable groups and through de facto inclusion in the PNCTP lists of such groups who are suffering from extreme poverty. This de facto inclusion implies that the MoSD and its PNCTP donors – the World Bank and the EU – must change the eligibility criteria to reflect the new reality and accommodate the characteristics of newly added cases in Gaza.

- This must be coupled with accountability mechanisms to ensure that eligible people are receiving assistance in line with humanitarian core principles given the current levels of cronyism and nepotism, especially based on partisan lines. This might require the empowerment of CSOs that work as watchdogs on government work, especially those that work with poor and marginalized people.
- The Palestinian authorities should look beyond aspects of vulnerability related solely to poverty and livelihood difficulties and explore social vulnerabilities such as GBV and protection concerns and should try to respond to them adequately through different programmes and interventions.
- Using better measurements of poverty, such as multidimensional poverty analysis, would be a desirable step towards understanding the complexity of vulnerabilities. However, the MoSD would need to be more flexible in integrating and facilitating different responses that could be tailored more to addressing different needs beyond cash. This would enhance efforts towards establishing a better social protection system.
- In addition, the capacity of MoSD staff in Gaza must be aligned with increasing and ever more complicated demands. The quality of institutional expertise is patchy at present, with PA government staff having extensive capacities and skills with the PNCTP and its requirements, while new staff of the de facto authorities in Gaza have very limited experience and capacities. The government and donors must find a sustained mechanism to build the capacity of all staff and to harmonize their work without delay to ensure that humanitarian assistance mechanisms meet international humanitarian quality standards.
- This study shows that there are similar patterns between humanitarian assistance and interventions that advocate for pro-poor rights-based economic policies. If that is the case, the design, planning and implementation of such interventions must be more harmonized and more transparent, and must conform to international humanitarian standards. An independent assessment of livelihoods- and development-based programming in Gaza must be carried out to explore further the results of this research (possibly by Oxfam). Key questions that must be answered include: do these interventions amount to another form of humanitarian assistance that does not really support sustained livelihoods, independence and employment? Do targeted groups show real differences in their levels and types of vulnerability to shocks? Are these interventions really tackling the causes of poverty and correcting a distorted market-based approach?

BIBLIOGRAPHY

- Al-Haq. (2018). *Legal Implications of Salary Cuts by the Palestinian Authority in the Gaza Strip*. <http://www.alhaq.org/advocacy/6220.html>
- Al Mezan Center for Human Rights. (2019). *Al Mezan Warns of Continued Cuts of Salaries of Public Sector Employees*. <http://mezan.org/en/post/23368>
- Gisha – Legal Center for Freedom of Movement. (2018). *The Gaza electricity crisis – FAQs*. http://gisha.org/UserFiles/File/publications/Electricity_FAQ/Electricity_FAQ_EN.pdf
- OCHA. (2018). *Addressing gender-based violence in the Gaza Strip*. <https://www.ochaopt.org/content/addressing-gender-based-violence-gaza-strip>
- OCHA. (2018). *Humanitarian Needs Overview 2019*. UN Office for the Coordination of Humanitarian Affairs https://www.ochaopt.org/sites/default/files/humanitarian_needs_overview_2019.pdf
- OCHA. (2018). *Gaza Strip electricity supply*. <https://www.ochaopt.org/page/gaza-strip-electricity-supply>
- OCHA. (2018). *The Monthly Humanitarian Bulletin: Addressing gender-based violence in the Gaza Strip*. <https://www.ochaopt.org/content/addressing-gender-based-violence-gaza-strip>
- OCHA. (2019). *Humanitarian Needs Overview 2020*. https://www.ochaopt.org/sites/default/files/hno_2020-final.pdf
- OCHA. (2019). *Israel expands fishing limits to 12 nautical miles amidst a rise in protection concerns*. <https://www.ochaopt.org/content/israel-expands-fishing-limits-12-nautical-miles-amidst-rise-protection-concerns>
- OCHA. (2019). *The Monthly Humanitarian Bulletin: Israel expands fishing limits to 12 nautical miles amidst a rise in protection concerns*. <https://www.ochaopt.org/content/israel-expands-fishing-limits-12-nautical-miles-amidst-rise-protection-concerns>
- OCHA. (2020). *Gaza Strip electricity supply*. <https://www.ochaopt.org/page/gaza-strip-electricity-supply>
- ODI/UNICEF. (2014). *Effects of the Palestinian National Cash Transfer Programme on Children and Adolescents: A mixed methods analysis*. <https://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/8936.pdf>
- Oxfam. (2018). *The Crisis is Now: A Pre-Crisis Market Analysis of Credit, Mattresses and Drinking Water in the Gaza Strip*. Emergency Market Mapping and Analysis Toolkit (EMMA). <https://www.emma-toolkit.org/report/crisis-now-pre-crisis-market-analysis-credit-mattresses-and-drinking-water-gaza-strip>
- Oxfam. (2019). *Participatory Vulnerability Analysis in the North of the Gaza Strip*. <https://oxfamilibrary.openrepository.com/bitstream/10546/620627/4/rr-participatory-vulnerability-analysis-gaza-050319-en.pdf>
- Palestinian Central Bureau of Statistics (PCBS). (2016). *Major National Accounts Variables in Palestine 1994–2016*. http://www.pcbs.gov.ps/Portals/Rainbow/Documents/E.NA_Constant-2015.htm
- PCBS. (2018). *Levels of Living in Palestine, 2017*. <http://www.pcbs.gov.ps/post.aspx?lang=en&ItemID=3115#>
- PCBS. (2018). *Press Report on the Levels of Living in Palestine: Expenditure, Consumption and Poverty*. http://www.pcbs.gov.ps/portals_pcbs/PressRelease/Press_En_15-4-2018-liv-en.pdf

ANNEX 1: RESEARCH METHODOLOGY

The study was conducted using the following methods and tools.

Desk review: Arab World for Research and Development (AWRAD), a research, consulting, and development firm based in the OPT, conducted a desk and literature review. The desk review covered essential project documents including the Social Protection Floor (SPF) and PNCTP annual World Bank evaluation and audit reports, as well as EU evaluations of its contributions to social allowances under the PNCTP. It also conducted a review of literature which allowed the team to gain an understanding of existing research and the availability of data and data sources, as well as debates and experiences from other countries in the region. AWRAD used the knowledge gained from the literature review to inform the conceptualization of the study, measures of vulnerability and detailed methodology, which will be submitted in an inception report. The cited documents cover concepts, theories and measures of vulnerability, as well as documents that assess the PNCTP and tackle its context and implications in the OPT in general and Gaza in particular.

Analysis of PNCTP database: The AWRAD team obtained a systematic sample of the different PNCTP records, including 3,000 participant household (HH) cases, 2,000 denied/removed cases and 1,000 cases of HHs on the waiting list. The team conducted a thorough analysis of the actual data. The overall technical quality of the data was evident, as the majority of the records for Gaza had been updated or cases added recently. For example, 22% of the participant cases were updated/added in 2019, and 46% updated/added in 2018. In total, 97.6% had been updated/added in 2015 or later. The data available for analysis had limited completeness in terms of summarizing the main eligibility criteria, but there were sufficient explanations to help in the analysis. In addition, the available data included the gender of the head of household (HHH), their age, the number of elderly persons in the household and its address.

The survey questionnaire: A survey of 600 poor and vulnerable households was carried out in November-December 2019, utilizing the MoSD's PNCTP database as the sampling framework. A total of 6,000 cases were selected from three lists: 3,000 HHs that are currently receiving MoSD assistance (chronic and still vulnerable to further poverty), 1,000 HHs that have applied within the past two years but are still on the waiting list, and 2,000 HHs that have been denied assistance or have recently been removed from MoSD beneficiary lists. MoSD experts selected the sampling frame from the overall list, based on a systematic interval that was agreed with the research team (dividing the total number on the list and the needed sampling frame). For the purposes of the survey, the sample included 300 HHs receiving MOSD assistance and 300 that were not; these are either on the waiting list (100) or have been denied/removed (200). The final sample was selected on a systematic basis with a fixed interval of 10 used to guarantee randomness and representation. Table A1 provides some basic characteristics of the representative sample.

Table A1: Sample distribution – recipient status, governorate and gender of HHH

Governorate	Recipient	Denied/removed	Waiting list	MHHHs	FHHHs	Total
Jabalya	61	43	12	75	41	116
Gaza	85	66	37	122	66	188
Deir Al Balah	48	33	16	62	35	97
Khan Yunis	62	35	27	80	44	124

Rafah	44	23	8	48	27	75
Total	300	200	100	387	213	600

Key informant interviews (KIIs)

The research team interviewed 21 key experts knowledgeable in the fields of poverty, poverty alleviation, economic development, social protection, social assistance and cash transfer programming.

Table A2: Key informant interviewees

#	Institution/specialization	Region
1	Deputy Minister, MoSD	Ramallah
2	MoSD Employees	Ramallah
6	MoSD, Management Committee	Gaza
7	MoSD, Management Committee	Gaza
8	OCHA	Gaza
9	Technical Assistant (EU-ECHO)	Jerusalem
10	Food Security Sector (FSS) Coordinator	Jerusalem
11	FCC Operations Coordinator	Gaza
12	Humanitarian Programme Manager, Islamic Relief	Gaza
13	Agriculture/Development Expert, PARC	Gaza
14	Vulnerability Analysis and Mapping Officer, WFP	Jerusalem
15	Gaza Policy and Programme Officer, WFP	Gaza
16	Programme Manager, Oxfam	Gaza
17	Ex-PA employee, MoSD	Gaza
18	Office Manager, Office of the European Union Representative (West Bank and Gaza Strip, UNRWA)	Gaza
19	UN Women	Gaza
20	Economic Justice Lead , Oxfam	Gaza
21	Gender and Protection Officer, Oxfam	Gaza

FGD with experts: AWRAD organized a focus group discussion with experts knowledgeable about the situation in Gaza and who work in the fields of humanitarian assistance and development interventions. This was organized to ensure an in-depth and common understanding of the complex internal and external contextual factors and root causes that influence collective, household and individual vulnerability in Gaza. The FGD was also organized to discuss and agree on the most salient elements for an appropriate conceptualization of vulnerability in the context of Gaza and to draw up a list of metrics that would illuminate shifting vulnerabilities. In addition, the FGD helped to validate the metrics used in the questionnaire and the adequacy of the explanatory variables.

FGDs with people in poor and vulnerable groups: AWRAD organized two FGDs with 45 members of poor households that already receive assistance or are on waiting lists and groups that are becoming increasingly vulnerable (small farmers, unemployed graduates, PA employees, households that used to receive assistance from formal sources, etc.).

NOTES

- ¹ UN Office for the Coordination of Humanitarian Affairs (OCHA). (2018). *Humanitarian Needs Overview 2019*. https://www.ochaopt.org/sites/default/files/humanitarian_needs_overview_2019.pdf
- ² Palestinian Central Bureau of Statistics (PCBS). (2019). *Labour Force Survey (July–September, 2019) Round (Q3/2019)*. http://www.pcbs.gov.ps/portals/_pcbs/PressRelease/Press_En_7-11-2019-LF-en.pdf
- ³ OCHA. (2018). *Humanitarian Needs Overview 2019*, op. cit.
- ⁴ Oxfam (2018). *The Crisis is Now: A Pre-Crisis Market Analysis of Credit, Mattresses and Drinking Water in the Gaza Strip*. Emergency Market Mapping and Analysis Toolkit (EMMA). <https://www.emma-toolkit.org/report/crisis-now-pre-crisis-market-analysis-credit-mattresses-and-drinking-water-gaza-strip>
- ⁵ Ministry of Social Development (MoSD). (2019). *PNCTP Overview* <http://www.mosa.pna.ps/ar/content/%D8%A7%D9%84%D9%85%D8%B3%D8%A7%D8%B9%D8%AF%D8%A7%D8%AA-%D8%A7%D9%84%D9%86%D9%82%D8%AF%D9%8A%D8%A9>
- ⁶ The PCBS uses the term ‘deep’ poverty instead of ‘extreme’ poverty. We have opted to use ‘extreme’ in this document as it is the more widely used term.
- ⁷ The PCBS defined the 2017 threshold of poverty as living on less than ILS 2,470 (\$716) per month and that of extreme poverty as less than ILS 1,974 (\$572) for a family of five (2 adults and 3 children). PCBS. (2018). *Poverty Profile in Palestine, 2017*. http://www.pcbs.gov.ps/Document/pdf/txt_e_poverty2017.pdf?date=16_4_2018_2
- ⁸ ODI/UNICEF. (2014). *Effects of the Palestinian National Cash Transfer on Children and Adolescents: A mixed methods analysis*. <https://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/8936.pdf>
- ⁹ World Bank (2018). *Implementation Completion and Results Report*. <http://documents.banquemondiale.org/curated/fr/956861548367051492/pdf/icr00004569-01172019-636835320701496841.pdf>
- ¹⁰ In recent years there have been a growing number of campaigns to tackle the problem of under-age marriage. However, in 2015 around 23.7% of all marriages in Gaza involved people under the age of 18, and 30% of women were under the age of 18. UNRWA. (2017). *Girls Not Brides: Ending Child Marriage in Gaza*. <https://www.unrwa.org/newsroom/features/girls-not-brides-ending-child-marriage-gaza>
- ¹¹ Oxfam. (2019). *Participatory Vulnerability Analysis in the North of the Gaza Strip*. <https://oxfamilibrary.openrepository.com/bitstream/10546/620627/4/rr-participatory-vulnerability-analysis-gaza-050319-en.pdf>
- ¹² Al Mezan Center for Human Rights. (2019). *Al Mezan Warns of Continued Cuts of Salaries of Public Sector Employees*. <http://mezan.org/en/post/23368/Al+Mezan+Warns+of+Continued+Cuts+of+Salaries+of+Public+Sector+Employees>
- ¹³ PCBS. (2019). *Major National Accounts Variables in Palestine 1994–2018*. http://www.pcbs.gov.ps/Portals/_Rainbow/Documents/E_Na_accounts_2014_2015_constant.html (See spreadsheet download.)
- ¹⁴ PCBS. (2018). *Levels of Living in Palestine, 2017*. <http://www.pcbs.gov.ps/post.aspx?lang=en&ItemID=3115#>
- ¹⁵ PCBS. (2018). *Poverty Profile in Palestine, 2017*. http://www.pcbs.gov.ps/Document/pdf/txt_e_poverty2017.pdf?date=16_4_2018_2
- ¹⁶ OCHA. (2018). *Humanitarian Needs Overview 2019*, op. cit.
- 54 Responsiveness of the Palestinian National Cash Transfer Programme to Shifting Vulnerabilities in the Gaza Strip

- ¹⁷ PCBS. (2018). *Poverty Profile in Palestine, 2017*. op. cit.
- ¹⁸ OCHA. (2018). *Humanitarian Needs Overview 2019*. op. cit.
- ¹⁹ <https://www.ochaopt.org/content/humanitarian-funding-donations-record-low>
- ²⁰ PCBS. (2018). *Poverty Profile in Palestine, 2017*. op. cit.
- ²¹ Consistent with PCBS's definition, a household is defined as one person or a group of persons with or without a family relationship, who live in the same housing unit, share meals and make joint provision for food and other essentials for living. This sample was extracted from MoSD lists of PNCTP participants, waiting lists and lists detailing those removed or rejected.
- ²² Number of dependents per 100 persons of working age (as defined by the PCBS).
- ²³ PCBS. (2018). *On the Eve of International Literacy Day, 8th September*. Press release. <http://www.pcbs.gov.ps/post.aspx?lang=en&ItemID=3237#>. The illiteracy rate is based on calculations for household members who are 15 years of age or older.
- ²⁴ Operation Protective Edge was the most recent military operation of the GoI into Gaza in which more than 1,500 civilians in Gaza, and six in Israel, have been killed. Over 100,000 Palestinians were left homeless and vital civilian infrastructure worth billions of dollars has been destroyed in Gaza.
- ²⁵ OCHA. (2020). *Gaza Strip electricity supply*. <https://www.ochaopt.org/page/gaza-strip-electricity-supply>
- ²⁶ Ibid.
- ²⁷ Belonging was defined as the opposite of social isolation within a community – the feeling that you are part of a community which accepts you, and you feel responsibility towards its welfare.
- ²⁸ The base/comparison years were determined as 2017 and 2019 for objective measures of vulnerability, allowing for sufficient time for change and also ensuring the highest level of recall and hence accuracy of information. The subjective measures focused on comparing the perceived present reality with future prospects. For this, respondents were asked to assess their present reality (2019) and their future reality (2020).
- ²⁹ The vast majority of households do not have any pension income, as indicated in the previous sections.
- ³⁰ As of February 2019, Israel expanded the limit to 12 nautical miles; however, this applies only to the middle area of the Gazan coast, and is still less than the 20 nautical miles agreed on by the Oslo Accords. For more, see OCHA. (2019). *Israel expands fishing limits to 12 nautical miles amidst a rise in protection concerns*. <https://www.ochaopt.org/content/israel-expands-fishing-limits-12-nautical-miles-amidst-rise-protection-concerns>
- ³¹ Gisha – Legal Center for Freedom of Movement. (2018). *The Gaza electricity crisis – FAQs*. http://gisha.org/UserFiles/File/publications/Electricity_FAQ/Electricity_FAQ_EN.pdf. For an expanded brief on the electricity situation in Gaza, see OCHA. (n.d.). *Gaza Strip electricity supply*, op. cit.
- ³² UNCT. (2017). *Gaza Ten Years Later*. https://unsco.unmissions.org/sites/default/files/gaza_10_years_later_-_11_july_2017.pdf
- ³³ In recent years there have been a growing number of campaigns to tackle the problem of under-age marriage. However, in 2015 around 23.7% of all marriages in Gaza involved people under the age of 18, and 30% of women were under the age of 18. UNRWA. (2017). *Girls Not Brides: Ending Child Marriage in Gaza*. <https://www.unrwa.org/newsroom/features/girls-not-brides-ending-child-marriage-gaza>
- ³⁴ UNFPA. (2016). *Child Marriage in the Occupied Palestinian Territory*. <https://palestine.unfpa.org/sites/default/files/pub-pdf/Early%20Marriage%20Advocacy%20Paper%20-%2029%2011%202016.pdf>
- ³⁵ PCBS. (2018). *On the Eve of International Women's Day*. http://www.pcbs.gov.ps/portals/_pcbs/PressRelease/Press_En_7-3-20148-women-en.PDF

³⁶ More than 29,000 Palestinians were injured in the GMR. UNRWA. (2019). *Gaza's "Great March of Return" One Year On: Impact on Palestine refugees and UNRWA services*. https://www.unrwa.org/sites/default/files/content/resources/gaza_gmr_one_year_on_report_eng_final.pdf

³⁷ OCHA. (2018). *Addressing gender-based violence in the Gaza Strip*. <https://www.ochaopt.org/content/addressing-gender-based-violence-gaza-strip>

³⁸ CSOs have argued against such measures on the basis of discrimination. See Mezan Center for Human Rights. (2019). *Al Mezan Warns of Continued Cuts of Salaries of Public Sector Employees*, op. cit.; and Al-Haq. (2018). *Legal Implications of Salary Cuts by the Palestinian Authority in the Gaza Strip*. <http://www.alhaq.org/advocacy/6220.html>

³⁹ PCBS. (2019). *The Labour Force Survey Results of Third Quarter (July–September 2019) Round*. <http://www.pcbs.gov.ps/post.aspx?lang=en&ItemID=3595>

⁴⁰ PCBS. (2019). *Labour Force Survey (January–March 2019) Round (Q1/2019)*. http://www.pcbs.gov.ps/portals/_pcbs/PressRelease/Press_En_18-7-2019-labour-e.pdf

⁴¹ Ibid.

⁴² Palestinian Centre for Human Rights. (2017). *Minimizing Medical Referrals Abroad Jeopardizes Patients' Lives*. <https://pchgaza.org/en/?p=9231>

⁴³ Much of the reported value of MoSD assistance in filling the poverty gap is subjective, as no household receives more than ILS 600 (\$174) per month, which covers about one-third of the shortfall.

⁴⁴ MoSD. (2019). *Annual Statistical Report for 2018*. Hard copy.

⁴⁵ Ibid.

⁴⁶ These are all families registered with UNRWA.

⁴⁷ MoSD. (2019). *Annual Statistical Report for 2018*. op. cit.

⁴⁸ This vision was expressed in a KII by the Deputy Minister of the MoSD

⁴⁹ PCBS defines the Poverty Gap as the: The volume of the total gap existing between the income of the poor and poverty line (the total amount needed to promote the consumption levels of the poor to reach poverty line). http://www.pcbs.gov.ps/portals/_pcbs/PressRelease/Press_En_15-4-2018-liv-en.pdf

⁵⁰ PCBS, 2018. *Press Report on the Levels of Living in Palestine: Expenditure, Consumption and Poverty*. http://www.pcbs.gov.ps/portals/_pcbs/PressRelease/Press_En_15-4-2018-liv-en.pdf and MOSD, 2019, *Statistical Report*.

⁵¹ For more on this model, see World Economic Forum. (2019). *3 ways to fix the way we fund humanitarian relief*. <https://www.weforum.org/agenda/2019/01/three-ways-to-fix-humanitarian-funding/>

ACKNOWLEDGEMENTS

This research was conducted by Arab World for Research and Development (AWRAD) and its research team: Dr. Nader Said-Foqahaa, Mariam Barghouti, Samer Said, Braden Thue and Ashraf Jerjawi. It is part of a project designed and implemented by Oxfam and its partner MA'AN Development Center with the aim of addressing food insecurity and protection needs in vulnerable communities in the Gaza Strip. We would like to thank AWRAD and its research team, the Oxfam team in OPT and Oxfam partners. We would also like to thank the experts who contributed to this research with their experience and insights, specifically the Ministry of Social Development, which cooperated with Oxfam and AWRAD team, provided essential support and shared the needed data and information for the implementation of this research. The contributions of the representatives of the following institutions were invaluable to the research: Office of the European Union Representative, EU-ECHO, WFP, The Food Security Cluster, Islamic Relief, OCHA, PARC, and UN Women.

Most of all, we would like to thank all the families that were willing to provide us with their time and experience. In addition, the insights provided by all participants in the focus groups are highly appreciated.

This research was made possible by funding from the Belgian Directorate-General for Development Cooperation and Humanitarian Aid (DGD).

Oxfam Research Reports

Oxfam Research Reports are written to share research results, to contribute to public debate and to invite feedback on development and humanitarian policy and practice. They do not necessarily reflect Oxfam policy positions. The views expressed are those of the author and not necessarily those of Oxfam.

For more information, or to comment on this report, email Laila.Barhoum@oxfam.org

© Oxfam International May 2020

This publication is copyright but the text may be used free of charge for the purposes of advocacy, campaigning, education, and research, provided that the source is acknowledged in full. The copyright holder requests that all such use be registered with them for impact assessment purposes. For copying in any other circumstances, or for re-use in other publications, or for translation or adaptation, permission must be secured and a fee may be charged. Email policyandpractice@oxfam.org.uk

The information in this publication is correct at the time of going to press.

Published by Oxfam GB for Oxfam International under ISBN 978-1-78748-610-2 in May 2020.
Oxfam GB, Oxfam House, John Smith Drive, Cowley, Oxford, OX4 2JY, UK.

OXFAM

Oxfam is an international confederation of 20 organizations networked together in more than 90 countries, as part of a global movement for change, to build a future free from the injustice of poverty. Please write to any of the agencies for further information, or visit www.oxfam.org

Oxfam America (www.oxfamamerica.org)
Oxfam Australia (www.oxfam.org.au)
Oxfam-in-Belgium (www.oxfamsol.be)
Oxfam Brasil (www.oxfam.org.br)
Oxfam Canada (www.oxfam.ca)
Oxfam France (www.oxfamfrance.org)
Oxfam Germany (www.oxfam.de)
Oxfam GB (www.oxfam.org.uk)
Oxfam Hong Kong (www.oxfam.org.hk)
Oxfam IBIS (Denmark) (www.oxfamibis.dk)

Oxfam India (www.oxfamindia.org)
Oxfam Intermón (Spain) (www.oxfamintermon.org)
Oxfam Ireland (www.oxfamireland.org)
Oxfam Italy (www.oxfamitalia.org)
Oxfam Mexico (www.oxfammexico.org)
Oxfam New Zealand (www.oxfam.org.nz)
Oxfam Novib (Netherlands) (www.oxfamnovib.nl)
Oxfam Québec (www.oxfam.qc.ca)
Oxfam South Africa (www.oxfam.org.za)
KEDV (Turkey) (<https://www.kedv.org.tr/>)

www.oxfam.org

