



## **Humanitarian Response Report in the Gaza Strip Since the Ceasefire Agreement (9 October 2025 – 28 February 2026)**

### **Section One: General Humanitarian Situation**

Since the announcement of the ceasefire on 9 October 2025, the humanitarian situation in the Gaza Strip has witnessed a relative decrease in the intensity of military attacks; however, they have not ceased completely. Security incidents and various targeting operations continue to be recorded on an almost daily basis. According to available data up to 28 February 2026, the total number of fatalities reached (648 martyrs), while the total number of injuries amounted to more than (1,700) since the ceasefire came into effect, reflecting the fragility of the security situation and the ongoing risks threatening civilian lives.

Shelling and direct targeting of civilians in several areas have also continued, alongside the systematic demolition of residential complexes within what is known as the Yellow Line, exacerbating human and material losses and contributing to the continuous deterioration of humanitarian conditions despite the ceasefire. These practices have led to renewed waves of forced displacement, expanded destruction in residential neighborhoods, and increased pressure on shelters and already damaged infrastructure.

Although the ceasefire has provided limited space for enhancing humanitarian access, the population's basic needs remain extremely high, particularly in shelter, food security, water and sanitation, and healthcare. This is due to the limited quantity of aid allowed into the Strip compared to actual needs, irregular supply flows, and the continued restrictions on movement and on certain items classified by occupation forces as dual-use materials.

Within such a context, the role of national humanitarian actors—foremost among them the Palestinian Red Crescent Society (PRCS)—remains critical in ensuring the continuity of essential services, responding to emergency needs, and strengthening coordination and partnership mechanisms during the ceasefire period. These efforts help alleviate the suffering of the most affected groups and lay the groundwork for a more effective humanitarian response in the coming phase.

### **Section Two: Operational Status of PRCS Branches and Facilities**

The operational readiness of PRCS branches and facilities has been significantly affected due to severe damage to infrastructure, direct targeting, and the location of several facilities within areas under Israeli military control.



**Rafah Governorate:** The PRCS branch has remained out of service since 31 March 2025 following evacuation orders issued by occupying forces for the entire Rafah Governorate.

**North Gaza Governorate:** The PRCS branch has been out of service since 18 May 2025 due to its location within areas under Israeli military control, preventing its reactivation to date.

Conversely, some health facilities have continued operating despite significant damage.

**In Gaza Governorate,** Al-Quds Medical Complex, located in Gaza City, is operating partially. Al-Quds Hospital has resumed partial services due to the severe damage it sustained and the difficulty of restoring all departments at this stage, while the Moroccan Hospital remains completely out of service due to extensive damage (the hospital was constructed after the 2014 war).

Meanwhile, **Al-Saraya Field Hospital** continues to provide services at full operational capacity and currently serves as the main hospital for Gaza and North Gaza Governorates in areas outside Israeli military control.

**In Khan Younis Governorate,** Al-Amal Medical Complex, including Al-Amal Hospital, operates at full capacity despite having sustained significant damage that previously affected operations. This follows PRCS's successful reactivation of all hospital facilities on 15 April 2024. The College buildings and Amal City operate partially due to damage sustained. In addition, Al Noor City headquarters (PRCS administrative headquarters) has also resumed partial operations due to substantial damage to the building.

As part of enhancing specialized healthcare services, PRCS established **the Rehabilitation Medical Hospital** with a capacity of 72 beds, as a qualitative addition. It is currently the only specialized rehabilitation hospital operating in southern Gaza, providing critical services to the injured and persons with disabilities resulting from injuries.

**In the Central Governorate,** the PRCS branch continues to deliver services fully, without significant interruption, despite ongoing operational challenges.

**In southern Gaza,** Al-Mawasi Field Hospital operates at full capacity, with the addition of a new space designated as a medical evacuation hospital to facilitate patient travel outside Gaza and improve medical evacuation procedures.

Additionally, PRCS operates **18 clinics and medical points** providing primary healthcare services across all Gaza governorates, and manages **seven active IDPs shelters** hosting approximately 350 displaced families.



### Section Three: Human Resources and Logistical Capacities

Since the announcement of the ceasefire, PRCS has continued to carry out its humanitarian mandate through a workforce estimated at approximately **2,500 staff and volunteers** working across healthcare, relief, logistics, and administrative sectors throughout the Gaza Strip, despite ongoing security challenges and increasing operational pressures. Furthermore, dozens of local community committees have supported PRCS efforts by providing field-level assistance in distributions, shelter management, and outreach to the most vulnerable and marginalized groups.

From a logistical perspective, PRCS operations rely on **30 administrative vehicles** to support coordination and field movement, in addition to **53 ambulances** dedicated to emergency response and medical evacuation. However, the operational readiness of these vehicles has been consistently affected by severe fuel shortages and difficulties in securing spare parts and maintenance materials.

Vehicles frequently experience downtime due to fuel depletion and technical malfunctions, negatively impacting response times for emergency incidents and limiting the ability to cover all areas efficiently, particularly in light of ongoing daily incidents and the increasing demand for ambulance and medical transport services.

With regard to central warehouses, they continue to operate only partially due to substantial damage.

Despite these operational constraints, field teams continue to perform their duties with a high level of efficiency by managing available resources flexibly, reallocating operational vehicles according to response priorities, and ensuring the continuity of humanitarian service delivery at the minimum feasible level of readiness.



## Section Four: Summary of Humanitarian and Relief Response Since the Ceasefire

Since the ceasefire entered into force, PRCS has continued implementing humanitarian interventions across all Gaza governorates, relying on its network of operational branches and centers and in cooperation with partners to ensure the continuity of life-saving services and alleviate the suffering of affected populations.

### 1. Health and Emergency Medical Services

Emergency Medical Services (EMS) teams and medical teams at hospitals have continued responding to daily incidents and delivering essential care to the injured and patients.

Services	Number of beneficiaries
EMS services	30,556
Medical Evacuation	353
Hospitals (5)	616,959

### 2. Primary Healthcare

PRCS operates 18 clinics and medical points across all governorates, contributing to reducing pressure on hospitals and ensuring continuity of essential primary healthcare services. During the reporting period, **the number of beneficiaries was 570,301.**

### 3. Water, Sanitation, and Hygiene (WASH)

PRCS rehabilitated and restarted **(9)** water purification plants with a production capacity of up to 30 cubic meters per day per plant after intermittent shutdowns. These plants have helped provide safe drinking water to affected communities amid the deterioration of public water infrastructure.

The number of beneficiaries reached approximately 18,000 people per month, bringing the total number of beneficiaries during the reporting period to around 90,000 people. In addition, hundreds of water containers were distributed to affected families in various areas across the Gaza Strip.

### 4. Relief and Shelter

PRCS continues managing seven IDPs centers hosting approximately 350 displaced families, alongside implementing relief assistance distributions based on clear humanitarian priorities ensuring access for the most vulnerable groups. Around (62,088) families benefited from the relief assistance (food parcels, meals and tarps).



## 5. PSP, rehabilitation and social services

Services	Number of beneficiaries
Mental Health & psychosocial support	124,841
Rehabilitation	15,140
Community Work	479,321
Landmine Awareness	204,572

### Section Five: Logistics Response and Volume of Actual Aid Access

Based on logistics tracking data since the ceasefire began, **10,237 aid pallets** were dispatched to Gaza. However, PRCS was only able to receive and process approximately **3,290 pallets** (around 32%). More than half of the shipments were returned due to restrictions on aid entry, non-approval of certain items, or operational factors beyond PRCS's control.

Accordingly, operational activities and distribution relied solely on quantities actually received and were directed according to strict humanitarian priorities toward the most vulnerable households, displaced families in tents and shelters, and life-saving sectors such as food, health, WASH, and non-food items.

This reality reflects that the scale of humanitarian response has been constrained by access limitations and operational restrictions, not by PRCS's capacity for implementation or field presence. PRCS has maintained its human and institutional readiness and would be able to scale up response should regular and sustainable humanitarian access be ensured.

The irregular flow of aid also posed additional challenges in advance planning, stock management, and distribution continuity, requiring a flexible resource management approach and periodic reprioritization based on evolving field needs.

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