

17,000 children are unaccompanied or separated* from their families in Gaza, as estimated by UNICEF. Each child carries a tragic story of loss and grief. Children are traveling alone from place to place, crossing checkpoints, at risk of starvation, not able to access supplies or services and actors feel at a loss for how to handle the gravity, of constant and enormous needs.

Separation from family members is a highly distressing event that has lasting harmful impacts on child development. Unaccompanied and separated children (UASC) are at a higher risk of experiencing grief, depression, and isolation — factors that expose them to further risks and violations.

Such risks underscore the critical importance of identifying UASC and tracing their primary caregivers and families as soon as possible after separation. The longer a child is separated, the more their exposure to risks heightens.

*Providing an accurate number of UASC and orphans inside the Gaza Strip is extremely challenging given constant insecurity, multiple displacements, and rapidly evolving situations for children, their families, and frontline workers. However, it is estimated that at least 17,000 children are UASC based on global trends of at least 1% of displaced populations to be UASC.

We feel afraid of the bombings. Our dad is not with us right now and we might not be able to see him again - Amir (12 years old) and Farah (9 years old) **, siblings in Rafah.

**Names of children were changed to respect their confidentiality and protect their identity.

Situation in Numbers



2.2 MillionTotal Population



Over 1.7 Million
Internally Displaced



1 MillionChildren Affected





People Reported Killed (estimated 70% are women & children)



74,188***
People Reported Injured
(estimated 70% are
women & children)



17,000*estimated Unaccompanied and Separated Children



378 Attacks on Health



386 ****
Attacks on Schools
(80% of total number)

Child Protection Response



384

Unaccompanied and separated children have been identified and registered, between January and February 2024 and are now receiving support in shelters or other alternative care arrangements.

Capacity Strengthening

More than 50 Child Protection caseworkers and 600 non-child protection actors have received orientation sessions on the new identification and registration mechanisms of UASC.

Identification and Registration of Unaccompanied and Separated Children

Identifying and registering unaccompanied children in different community settings, including informing families and frontline humanitarian workers on how to report cases.

Providing Temporary Care Arrangements for Unaccompanied and Separated Children

Providing safe temporary alternative care arrangements in Rafah and seeking to expand and diversify alternative care options.

Preventing Family Separation

Distribution of child identity bracelets and delivery of awareness-raising activities for children and caregivers in shelters and communities to prevent and respond to family separation.

Family Tracing and Reunification

Facilitating family tracing and reunification with humanitarian stakeholders.

Provision of Tailored Support

Providing tailored support for families caring for separated children, including multipurpose cash assistance and Mental Health and Psychosocial Support (MHPSS) face-to-face and remotely.

Caring for Injured children

Providing support for children who are medically evacuated and ensuring they are accompanied by a family member or trusted caregiver.

Severe Operational Constraints

- High insecurity jeopardizing the capacity of partners to be fully operational and provide the needed support to UASC including safe spaces for alternative care.
- Inability to provide urgent and safe temporary alternative care arrangements, due to physically and resource-exhausted families.
 - Limited presence and capacity of partners to deliver in-person and specialised child protection, including MHPSS care services across the different levels of care. Many of the child protection actors have been impacted, displaced and lost operational footprint.
- 7 Overstretched health personnel and facilities hindering the prompt registration and referral of UASC and medical evacuations for injured children.

- Lack of fuel and damaged roads, which inhibit movement for identification and support for UASC and family reunification.
- Delay in the humanitarian coordination and response due to communication blackout.
- for entry. Essential logistical equipment and basic commodities from the private sector face constraints to enter. These add an extra burden on assisting basic needs to UASC and supporting alternative care options.
- Extremely limited presence of mandated CP authorities, unable to issue legal documentation for children, and identify durable solutions for UASC.

Implementation of Security Council Resolution and immediate humanitarian ceasefire

Increased, sustained, safe, and unimpeded humanitarian access.

Fuel Supply for Protection actors

To provide transportation for child protection teams, power for water provision and ensure lighting at night. Out of the limited fuel currently entering Gaza, Child Protection partners are not prioritised to receive it.

Increase funding for child protection actors

To scale up the provision of Identification, Documentation, Tracking and Reunification activities, provide supported (IDTR) alternative care arrangements, and Mental Health and Psychosocial Support.

Protection in the receiving country for unaccompanied children medically evacuated through:

- Family tracing;
- Appointment of legal guardian for unaccompanied children;
- Conducting Best Interest Determination to identify the most suitable temporary alternative care option unaccompanied children; and
- Providing integrated medical, social, psychological and legal services to children and their family members throughout hospitalization and upon discharge.

End to attacks on schools and hospitals

These must be protected as safe spaces for injured children and safe temporary shelters and family based-care options unaccompanied and other affected children.

Fully functioning communication networks

To allow coordination for the referral and follow up of cases.

Ensure all steps for medical evacuations (by private and humanitarian entities) are well coordinated and fully respond to the Best Interests of the Child, including:

- Actions taken from intake to hospital discharge and follow up;
- Ensuring medically evacuated children are accompanied by at least one caregiver and their right to return is guaranteed; and
- tracking Robust and information management of these children.

Facilitate the entry of humanitarian aid & critical items for UASC

Immediate lifting of restrictions on essential humanitarian items is necessary for the repair and operation of child protection actors to scale up the UASC response and deliver basic needs for UASC and children placed in alternative care facilities.

I fear Rafah's invasion, and bombing of the children's village, which is the only refuge for them. I am afraid we'll be unable to provide the required services, especially for children and women, in the event of displacement, loss of family, relatives, and children -Ebraheem. Case Worker in Rafah.



