

# ANNUAL REPORT OF THE HUMANITARIAN/RESIDENT COORDINATOR ON THE USE OF CERF GRANTS

Country	Occupied Palestinian Territory
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## I. Executive Summary

Since the beginning of 2006, political, economic and social conditions have deteriorated sharply for Palestinians in the occupied Palestinian territory (oPt). A political impasse has taken hold, characterised by economic and military pressure by Israel, including the withholding of Palestinian customs revenues, increasing divisions within the Palestinian Authority, and the diversion of direct international assistance away from key Palestinian Authority institutions. The residual effects of the PA fiscal crisis, and the split between the Gaza Strip and the West Bank, have also worsened the human development indicators for Palestinians in the oPt. The root causes of the humanitarian and protection crisis in the oPt remain valid as expressed in the Consolidated Appeal Process (CAP). Some expressions of these root causes, such as Israeli-Palestinian violence, increased restrictions on Palestinian movement, road usage restrictions and Barrier expansion have intensified.

Ordinary Palestinians have been the main victims of this crisis. Poverty rates stand at 65.8 percent and continue to rise<sup>1</sup>. The dramatic increase in poverty is linked to a corresponding increase in food insecurity and vulnerability in terms of non food needs. Food insecurity rose by 13 percent in 2006. In June 2006, a Food and Agriculture Organization (FAO)/ World Food Programme (WFP) assessment estimated almost two million, or 49 percent, of all Palestinians were food insecure. Since that time, almost the entire population of Gaza is relying on donor assistance. The United Nations Relief and Words Agency for Palestine Refugees (UNRWA) and WFP together provide food assistance to about 1.3 million of the Gaza Strip's 1.5 million inhabitants. Vulnerability was similarly high in other sectors. Thus, in this Central Emergency Response Fund (CERF) package from the Under Funded window, Funds were requested for projects in Food, Health, Water and Psychosocial support services. Together, these projects were seen to address the most pressing needs and ensure a well-rounded humanitarian response.

Response to the worsening humanitarian situation in most of the sectors has largely been via support of the basic services infrastructure and strengthening the sustainability of livelihoods. Many of the projects with such aims do not fit the 'life saving' mandate of the CERF. Thus, many of the projects in the CAP though judged to be a priority by the humanitarian community in the oPt, have not been proposed for funding.

The Consolidated Appeal for 2007, which sought some \$426 million, reflects the increased pressures borne by the Palestinian economy and society as a result of the renewed crisis and deepening uncertainties about the immediate future. By itself, the Appeal will not resolve the structural aspects and root causes of the unfolding crisis.

<sup>&</sup>lt;sup>1</sup> According to Palestinian Central Bureau of Statistics (PCBS) data on poverty rates, using income data – 2<sup>nd</sup> quarter 2006.

Total amount of humanitarian funding required and received (per reporting year)	Required: \$ 426,000,000 Received: \$ 272,000,000			
Total amount of CERF funding received by funding window	Rapid Response: Underfunded: Grand Total:	\$ 2,525,949 \$ 3,626,188.05 \$ 6,152,137.05		
Total amount of CERF funding for direct UN agency/IOM implementation and total amount forwarded to implementing partners	• 07-CEF-026 \$201,588 • 07-RWA-003 \$2,324,361 • 07-RWA-013 \$1,000,000 • 07-WHO-043 \$2,000,000 • 07-CEF-056 \$476,188.05 • 07-FEM-001 \$150,000  Total UN agencies/IOM: \$ Total implementing partners: \$			
Approximate total number of beneficiaries reached with	Total	under 5 years of age	Female (If available)	Male (If available)
CERF funding (disaggregated by sex/age if possible)	> 4,567,726	786	> 770	
Geographic areas of implementation	Gaza, West Bank			

## II. Coordination and Partnership-building

## (a) <u>Decision Making Process:</u>

## Rapid Response projects

The decision by the United Nations Country Team (UNCT) to request CERF funds was triggered by needs identified through assessments by UNICEF and UNRWA. The Office for the Coordination of Humanitarian Affairs (OCHA) facilitated the decision-making process, supporting the Humanitarian Coordinator via consultations with the respective sectors and a review of CAP funding levels and allocation prioritization.

**UNRWA Shelter project:** In response to the kidnapping of an Israeli soldier in July 2006, Israel significantly stepped up its military operations in the northern sector of the Gaza Strip. The northern part of the Gaza Strip was subject to daily artillery bombardment and missile strikes supported by regular incursions by ground forces on search and arrest operations over a six month period. The impact of these operations on civilian infrastructure was significant and UNRWA identified over 200 shelters requiring repair and 110 shelters needing to be entirely rebuilt. As a result of prevailing economic conditions in the Gaza Strip, it was clear from UNRWA's assessment that families affected would not have sufficient means to do the repairs from their own resources.

**UNICEF Psychosocial support project:** Children in Gaza have been adversely affected by the ongoing conflict. This is manifested in a range of stress related symptoms. Increasing numbers of children are requiring more and more psychosocial services. According to a November 2006 Palestinian Public Perceptions Survey, 60 percent of respondents felt that levels of stress among children had risen. A 2006 Palestinian Bureau of Statistics report showed that 48.5 percent of mothers expressed a concern that at least one of their children had been exposed to violent events during the previous year. CERF funding was sought to allow for an immediate expansion of the UNICEF-supported psychosocial teams, both in terms of the number of the people reached and the depth of the interventions, in order to mitigate the risks of leaving long-lasting, detrimental imprint on children's healthy development.

#### **Underfunded projects**

In August 2007, the Humanitarian Coordination Team (HCT) was invited to apply for the CERF-Underfunded Emergency grant in different sectors. In accordance with the strict humanitarian character of the CERF funding, the UNCT proposed four priority projects from the CAP which were either completely unfunded or underfunded in order to enable coverage of key humanitarian services in sectors with the most acute needs: health, water, food and psychosocial support.

WHO Health project: The conflict between Fatah and Hamas in Gaza in June 2007 caused a further deterioration of the Ministry of Health (MoH's) ability to provide medical services. One key outcome of the conflict was a political and administrative split between Gaza and the West Bank. Prior to the split, procurement of pharmaceuticals for the oPt was coordinated from Gaza. The West Bank-based Ministry of Health effectively faced two new challenges: re-establishing a procurement system, now in the West Bank; and ensuring deliveries to Gaza from the West Bank. The MoH informed the World Health Organization (WHO) that its stocks of essential drugs were decreasing. At the time, all drug procurement was undertaken by the World Bank, but its capacity for a swift response was insufficient. About one-fourth of all essential drugs were unavailable since the beginning of 2007. Following an urgent plea from the Ministry of Health (MoH), procurement needs were assessed in close collaboration with MoH technical officers. In September 2007, a needs assessment was carried out based on MoH information about which drugs would run out within three months. CERF funding was deemed critical to ensure that essential drugs were available at the central and district level, through effective selection, procurement and distribution.

**UNICEF Water project:** Hebron is one of the poorest areas of the West Bank; it suffers from acute water shortages and worsening food security indicators. All public resources are controlled by the Israeli national water company Mekorot. Local families rely mainly on rainwater harvesting cisterns for the collection of water as well as purchasing trucked water to meet the balance of their needs. The price of trucked water in the area has doubled in the last five years reaching 20-30 NIS/m3. This is primarily due to a general lack of filing points, IDF-imposed closures and poor road conditions. This elevated water price and a very weak household economy pressured many families to decrease their water consumption to as low as 15 l/c/d (the absolute minimum required for survival in a refugee situation according to the internationally recognized SPHERE standards). The direct result of the situation and the poor primary health care coverage in the area led to a reported high occurrence of diarrhoea. An improvement of the rainwater harvesting cisterns in the area would provide more autonomy to the households and help them access regular and sufficient supplies of clean water.

**UNRWA Food project:** Following the outbreak of internal violence in the Gaza Strip in June 2007, the population became even more dependent on food assistance to meet basic daily calorie needs. Over 860,000 of the one million refugees in Gaza were thereafter dependent on UNRWA's food assistance to survive. Prior to CERF funding, UNRWA did not have the resources to provide animal protein in the round of emergency food distribution following the June 2007 internal violence. The UNCT felt that the inclusion of protein in emergency food packages was critical.

**UNIFEM Psychosocial project:** Between May and June 2007, the conflict took a particularly violent turn, with intra Palestinian violence increasing. Internal violence alone resulted in the deaths of 188 Palestinians in the Gaza Strip and the injury of 840 between mid May and end June 2007. This represents a threefold increase in the number of Palestinians killed as a result of internal violence compared with May 2006. In light of the decreasing psychosocial well being of Gazans associated with the increased escalation of violence, UNIFEM's proposal to run a series of activities to focus on providing a protective environment for both children and parents was judged necessary.

#### (b) Coordination

The humanitarian community regularly convened coordination meetings throughout 2007 to discuss concerns, response plans and strategies.

The CERF process almost immediately followed the Mid Year Review (MYR) of the CAP. The MYR was a comprehensive consultative process among Inter- Agency standing committee (IASC) agencies in the field. It was felt by the HCT that there was no need to repeat the consultation process for the CERF.

## (c) Partnerships

UNICEF's implementing partner for its psychosocial support project, the Palestinian Centre for Democracy and Conflict Resolution (PCDCR), is an NGO with many years of operational experience and has been implementing psychosocial activities in partnership with UNICEF since 2003. PCDCR has five psychosocial teams situated across the Gaza Strip which ensured a comprehensive emergency response that covered all geographical areas. PCDCR is well established within the communities in which they work thus giving them an in-depth understanding of the local situation and the ability to respond immediately with outreach activities following heightened emergencies. Being situated within the local community also improved sustained networking with other professionals and organizations who continued to refer children and families to the different teams.

UNICEF implemented its water project jointly with Action against Hunger (ACF) and Palestinian Hydrology Group (PHG). ACF supervised the construction, PHG conducted the monitoring and UNICEF supported the awareness raising aspects.

Two organizations from the Gaza Strip (PCDCR and Gaza Community Mental Health Programme (GCMHP)) and one from the West Bank (Sawa) implemented UNIFEM's psychosocial support project. Since two of the three organizations are working in Gaza and that complementary services were offered through the help line services, coordination meetings were held and facilitated by UNIFEM staff in Gaza, supporting the practice of referral of cases between organizations, upon needs. Furthermore, in the attempt to strengthen the networking among organizations providing services for women and girls victims of violence, UNIFEM started to link all three implementing partners, through the use of video-conference, for sharing information about the services provided and the applied methodology, with particular reference to the collection of data, and to exchange experiences and compare approaches toward the most difficult cases encountered. All three partnerships proved effective for the achievement of the expected results. Cooperation among the implementing partners avoided overlapping of work, ensured the referral of cases and allowed for the creation of a consistent method of data collection. Positive feedback was received from the organizations, all of them willing to continue the project.

The Palestinian Ministry of Health (MoH) was the key partner for WHO's health project. Information collected through the ongoing monitoring of drug availability at the central drug stores (CDS) enabled the forecasting of imminent needs. WHO, in collaboration with health sector partners, established a pipeline matrix displaying information about procurements by the main actors in the pharmaceutical sector.

## **III. Implementation & Results**

## Rapid Response projects

## **UNICEF Psychosocial support project**

The project had measurable impact on children and a total of 82 percent of children participating in evaluation focus groups reported that they felt better able to protect themselves and cope with violence. When asked specific questions regarding self-protection techniques, 85 percent of children answered correctly indicating that knowledge has been acquired. Concerning the sessions in general, numerous children commented that they appreciated having a venue where they could express themselves freely. In the communities most affected by violence, some 10,625 children attended structured psychosocial activities focusing on better equipping them to protect themselves and to cope with violence. About 1,650 children directly affected by violence received in-depth counselling. Some 10,500 parents/caregivers (mostly women) who attended sensitization sessions received knowledge and skills which better equipped them to support and protect children. Caregivers participating in sessions completed pre and post session questionnaires and results showed that 88 percent of parents felt better able to protect their

children. Some 72 percent of parents felt better able to deal with the problems children raised. When asked to what extent the sessions had an impact on their ability to deal with their children, a total of 68 percent caregivers reported that they felt 'very strong' and a further 28 percent reported as feeling 'strong'.

## **UNRWA Shelter project**

UNRWA has been able to implement only part of its project: 34 shelters out of 107 have been reconstructed and 16 shelters out of 207 repaired. Following the tightened closure of Gaza's border crossings by Israel and severe restrictions of access of goods (to only basic foods and medicines), work on all UNRWA construction projects has ground to a halt. When the access restrictions are eased, and when construction materials are again available on the local market, that is when UNRWA will exert every possible effort with contractors to increase the rate of implementation as far as possible.

## Underfunded projects

## WHO Health project

On 10 October 2007, the Palestinian Ministry of Health provided WHO with a list of 114 essential drugs which would be depleted within three months. CERF funding enabled these drugs to be procured by WHO and delivered. The timely delivery of essential drugs ensured that life-saving treatments were available to Palestinians in the West Bank and Gaza.

#### **UNICEF Water project**

This project intervention helped to increase and improve access to sufficient clean water and ensure high quality of the water in the cisterns as well as help the community to better manage and chlorinate their facilities thereby reducing health risks and disease outbreaks. With the funds provided, a total of 4,625 beneficiaries (620 families) benefited from the project: 3,767 beneficiaries (504 households) in 13 communities in south Hebron; 858 beneficiaries (116 households) in 12 communities the Front Line and Eastern Villages Cluster and communities in the Ar Ramadin Cluster. Clean potable water was provided through the construction of 91 new rainwater harvesting systems and storage cisterns; and rehabilitation and cleaning of 26 rainwater harvesting systems and storage cisterns in 12 communities in southern Hebron Governorate. Furthermore, ten mobile water tanks were provided to serve about 35 displaced families within the same area.

#### **UNIFEM Psychosocial support project**

With the CERF funding, UNIFEM was able to provide assistance to women by providing a toll free line service available associated with free calls from landline or even mobile. Professional team where hired to respond and provide advice to female callers. UNIFEM was able to train women (graduates) to work as educators to implement the group counselling workshops in addition to awareness campaigns implemented for 770 women. Moreover, the capacity of volunteers strengthens in an intensive 85 hour training course held to strengthen the capacity of 18 hotlines volunteers. 4,306 children and women callers benefited from services provided by the child hotline. Women of all areas called the Child hotline with regards to their children. Finally the project was able to establish a referral network services central West bank composed of relevant organizations, community resources, clinics and healthcares facilities, leaders and groups.

#### **UNRWA Food project**

By the end of 2007 the Agency had reached 97.2 percent of the targeted beneficiaries of 860,000 with rations of luncheon meat. In total 160,941 families (775,026 persons) under the emergency food aid programme and 12,767 special hardship families (60,014 persons) under the regular food aid programme received assistance (total = 835,040 persons). The CERF contribution covered the total cost of including luncheon meat in the third round and part of the fourth round of distribution under the 2007 Emergency Appeal and the first round under 2007/2008 regular programme.

#### (a) Monitoring and evaluation

**UNRWA Shelter project**: Repair and reconstruction activities take place under the direct control of UNRWA's Field Engineering and Construction Services Office in Gaza. Beneficiary families were preassessed for the purposes of this grant. Detailed damage assessments were compiled on each shelter and damages categorized according to scale. Works were tendered according to the Agency's regular

procedures and the performance of the contractors monitored through regular reporting and site visits by FECSO. FECSO assesses finished works as complete and signs off on the contracts.

**UNICEF Psychosocial support project:** UNICEF established a monitoring mission to monitor activities implemented using various kinds of assessment tools. At the end of the project, an evaluation team conducted an evaluation mission to assess and report on what was achieved.

**WHO Health project:** WHO conducted regular visits to district pharmacies and peripheral health facilities in order to monitor shortages and assess their impact on health care delivery. This enabled WHO to identify arising problems in the distribution, and to respond accordingly.

**UNIFEM Psychosocial support project:** UNIFEM gathered information from the three implementing organizations providing services through the toll-free Help-Lines monitoring the number of phone calls received, types of cases / problems, area of the callers, sex, follow up to cases etc. Regular meetings were held by UNIFEM staff with the implementing partners in order to ensure proper coordination, cooperation and referral among the three service providers. In discussions with caregivers it became evident that they were not always able to reach the location of sessions or PCDCR's centres, often due to lack of finances. This was resolved by having more activities in remote areas as well as opening counselling spots functioning on certain days and hours with local CBO's in rural and remote areas.

**UNICEF Water project:** PHG conducted the monitoring of the project. 381 water samples in 23 communities were taken and analyzed for quality and safety. The results show that 138 sample out of 381 was outside the accepted standards for fecal Coliform bacteria. For nitrates, there were 47 samples exceeding the 50 mg/l standard value and were therefore nitrate unsafe. More than 600 household heads were trained on water testing and chlorine tablet use, to ensure that the water being consumed were of good quality.

(b) Initiatives Complemented CERF funded Projects

WHO: The CERF-funded project complemented the funds received from ECHO and Spain.

**UNICEF:** ACF-Spain was already implementing a food security and water programme response in southern Hebron with the following activities:

- Constructing rainwater harvesting systems and storage cisterns
- Rehabilitating and cleaning rainwater harvesting systems and storage cisterns
- Providing safe and clean water (water trucking)
- Rehabilitation and construction of pipelines and construction of filling points

**UNICEF** also supports the Palestinian Centre for Democracy and Conflict Resolution (PCDCR) in their work through Socio-legal defence centres (SLDC). In the SLDC children and their parents have access to social and legal advice as well as a telephone hotline where professionals are able to provide advice to those that can not reach the five centres. PCDCR also conducts emergency visits to homes and hospitals, visiting children that have been directly affected by the armed conflict.

#### IV. Lessons learned

#### **UNRWA**

The shelter proposal was the first ever CERF award made to UNRWA. The system was new to the Agency and the application submitted directly to the CERF Secretariat in response to a Flash Appeal issued in mid November 2006. Due to a double-funding situation, the original application was withdrawn and re-submitted for a broader geographical area. The flexibility shown by CERF was greatly appreciated. For the food application, this was part of a broader initiative involving a number of sister agencies. In this latter case, internal coordination was good, ably facilitated by UNOCHA in Jerusalem. In both cases, the turnaround of the request was impressively fast in New York.

#### UNICEF

In discussions with caregivers it became evident that they were always able to reach the location of sessions or PCDCR's centres, often due to lack of finances. This was resolved by having more activities in remote areas as well as opening counselling spots functioning on certain days and hours with local CBOs in rural and remote areas.

#### **WHO**

As agreed and appropriate, it is the Palestinian Ministry of Health which states which drugs it needs. However, assessments of these needs are based on shortages. Advance planning of needs relies exclusively on seasonal records of consumption. As a result, requests for pharmaceuticals are made only when their delivery is already becoming urgent. This could be averted if the MoH were able to implement a more sophisticated system to forecast needs.

Internal WHO procedures for procurement have been made more flexible over the course of the project. More procurement is now to be made directly by the Jerusalem WHO office, to streamline management of suppliers and deliveries.

#### UNICEF

There is a need for more attention to be put on chlorination training. Solutions need to be found to overcome the resistance of some beneficiaries to chlorinate their cisterns. Also, water quality can be assured through ensuring full participation of the community leaders and household heads to mitigate potential pollution at the point of consumption. A need for documentation for political advocacy and social mobilization is important in addition to early engagement of the Municipal and PWA is essential for successful and sustainable programming.

#### UNIFEM

Some cases have had difficulties in coming in person to get specialized services because their families prevent them form getting psychosocial help. The continuous electricity cut-offs in the Gaza Strip disrupted the phone counselling sessions. In many cases, the phone counsellors had to handle the calls in candle-lit conditions. The help line counsellors received several harassment calls, particularly during the evening shift. Most of these calls were simply pranks, carried out by youth. The telephone devices available and used are not comfortable for extended periods of time. The Jawwal<sup>2</sup> network coverage is weak, which resulted in disruption in the counselling sessions.

There are only two Palestinian TV stations that reach Gaza. GCMHP deals with Palestinian national TV, which due to the last political conflict does not exist in Gaza any more in term of staff and representatives. Thus, there was a technical problem in negotiating with the Hamas-endorsed TV station in the Gaza Strip, regarding the timing and prices of TV spots. As a result, the TV spots were abandoned. Sawa Child Hotline had originally planned to expand their database and services to the Gaza Strip in 2007. However, due to some technical difficulties, the hotline could only become accessible from the beginning of 2008.

## IV. Lessons Learned:

The toll free help lines both in the West Bank and the Gaza Strip fill a very important niche in efforts to protect victims of violence. In the absence of proper protective measures, particularly in times of conflict and distress, such as what is being experienced by the majority of the Palestinian population at the moment, it is very important to allow individuals a safe space where they can speak anonymously with professionals about their problems and gradually gain confidence to seek specialized services.

More coordination efforts need to be exerted between organizations that offer psychosocial support to create a safety net approach for particularly vulnerable women and children.

The toll-free lines need to be supported by parallel psychosocial services through house visits and mobile clinics to facilitate outreach to communities living in marginalized areas.

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<sup>&</sup>lt;sup>2</sup> The primary mobile phone network in the oPt

## V. Results

Sector/ Cluster	CERF projects per sector (Add project nr and title)	Amount disbursed (\$)	Number of Beneficiaries (by sex/age)	Implementing Partners	Expected Results/Outcomes	Actual results and improvements for the target beneficiaries
Shelter	07-RWA-003 "Emergency Shelter Repair and Reconstruction in Northern Gaza"	2,324,361	310 Palestine refugee families	None	<ul> <li>Ensure that refugees have adequate safe shelter</li> <li>Damage inflicted by Israeli army activity is made good</li> </ul>	<ul> <li>Reconstruction of 107 shelters: 34 shelters have been contracted, 12 percent implementation rate – \$53,405 actual expenditure out of a total of \$1,702,195, to which \$30,000 should be added for works recently completed but not yet paid for.</li> <li>Repair of 207 shelters: 16 shelters contracted. 9 shelters completed. 7 shelters 15 percent completed. \$44,618 actual expenditures out of a total of \$372,082.</li> </ul>
Food Aid	07-RWA-056 Emergency Food Aid	1,000,000	160,941 families (775,026 persons) under the emergency food aid programme and 12,767 special hardship families (60,014 persons) under the regular food aid programme received assistance (total = 835,040 persons)	None	<ul> <li>Ensure that refugees are provided with a protein supplement to enhance their existing ration</li> <li>Provide a boost to local private sector suppliers</li> </ul>	<ul> <li>Goods procured locally</li> <li>Food distributed.</li> <li>Nutritional status of refugees temporarily enhanced.</li> </ul>
Health	07-WHO-043 "Procuring essential drugs for Palestinian Ministry of Health"	2,000,000	3,700,000	Palestinian Ministry of Health	Reliable access to essential drugs for the Palestinian population Increased ability for the Ministry of Health to foresee and preempt shortages Increased capacity for rational use of drugs	Procurement of essential drugs at central and district level in the occupied Palestinian territories  Supported access to essential drugs for Palestinians in West Bank and Gaza.
Water and Sanitation	07-CEF-056 "Emergency response to alleviate the lack of access to Safe water in the South west	476,188.05	4,625 Palestinian People and 35 displaced people residing in Qassa	ACF-Spain. (Action Against Hunger)	Increased access to safe water for 620 families Increased water supply per person per day from 6 litres to 15 litres	<ul> <li>4,625 people (620 families) have access to safe water</li> <li>91 new rainwater harvesting cisterns constructed and 26 cisterns and storage facilities rehabilitated</li> <li>Improve quantity of water supplied to the</li> </ul>

	isolated areas of Hebron"				Improved water management and quality at the household level	affected population from 6 litres/ day/person to 13 litres/day/person for 3,767 people in the South of Hebron governorate  Water quality and facility management by 600 household heads ensured through skills transfer and knowledge empowerment schemes
Psychosocial	oPt-07/H26A&B (CAP Flash Appeal Project code) – 07-CEF-026 'Psychosocial Emergency Intervention for Supporting Children and Families in Gaza"	201,588	10,625 Children under 18 10,500 parents and caregivers	The Palestinian Centre for Democracy and Conflict Resolution (PCDCR)	Children participating in evaluation focus groups feel better able to protect themselves and cope with violence. Parents are better equipped with skills to support and protect children problems children raise Caregivers are better to deal with the affected children.	<ul> <li>82 percent of children that participated in evaluation focus groups reported that they felt better able to protect themselves and cope with violence.88 percent of parents felt better able to protect their children</li> <li>72 percent of parents felt better able to deal with the problems children raised</li> <li>68 percent caregivers reported that they felt very able to deal with the affected children</li> </ul>
	07-FEM-001 "Fourteen psychosocial teams for family outreach and seven pilot socio-legal defence centres" (Supporting the toll-free help lines for women and children)	150,000	Beneficiaries from the Awareness Raising sessions: 770 women (PCDCR);  Beneficiaries from the support services provided through the Help Lines: approximately 30 per day (PCDCR); 25 per day (GCMHP); 4,306 as of December 2007 (SAWA) (mostly women and children)	The Palestinian Centre for Democracy and Conflict Resolution (PCDCR), The Gaza Community Mental Health Programme (GCMHP) and SAWA - All The Women Together Today and Tomorrow	More stable family environment for vulnerable families, where both children and parents are better able to prevent and cope with violence	For PCDCR:  -Extended toll-free line service period: the toll free line services were extended for additional eight hours, for a total of 14 hours, on a daily basis, broken into two shifts (from 8 a.m. to 10 p.m). The toll free line services were also made available to the Southern area of the Gaza Strip (a particularly marginalized area) through a call transfer system that transfers phone calls to the counselling team. Additional staff were recruited to provide the needed services (please refer the Employment of professional team section below for details).  - Free Calls from telephones or mobiles: For the first time, callers could call the toll-free line at no cost to them from Jawwal (mobile phones) and land lines. The idea was to support many female and male callers, who find it difficult to call the toll free line from land lines under the observation of their family members and/or spouses. This was the result of negotiations, where the NGO paid an extra sum of money to the Jawwal Company for this option.  -Employment of professional team: The help line already had two trained counsellors who worked before the project started for one shift. Two trained psychosocial, with the necessary experience and skills, were hired to strengthen the team. A total of four (two male and two female) counsellors address an average of 30 incoming calls each day during the morning and afternoon shifts. Most callers either receive coaching through the telephone or are referred to psychosocial support centres or to GCMHP (partner in this project) psychiatric clinics.

			women (graduates in Psychology) were tra work as educators to implement the group counselling workshops. The training include training on violence against women, its cau- forms and methods of protection. It also indifferent psychosocial problems that are cu- widespread in the Gaza Strip. The training place in the PCDCR during the period from January 2008 until 24 January 2008.
			Raised awareness of women: Awareness 770 women was raised during 25 sessions the 150 awareness sessions planned, in all governorates of the Gaza Strip. The works included topics such as violence against whow to benefit from the toll free line service prevailing psychosocial problems.
			For GCMHP:  Extended toll free line service period: T free line services were extended for addition hours, for a total of 12 hours, on a daily ba broken into two shifts (from 8 a.m. to 8 p.m addition to two existing phone counsellors, cover the morning shifts, three counsellors recruited to support the evening shifts. As case of PCDCR, phone counsellors are the point of contact for callers and either provided counselling through the telephone or, if near feer cases to GCMHP psychiatric clinics.
			Free Calls from telephones or mobiles: line run by PCDCR, callers now can, for th time, call the toll free line at no cost from n phones (Jawwal) as well as from land lines from mobile phones enables greater accesservices.
			Employment and capacity building of professional team: Five (two male and th female) phone counsellors were trained or psychosocial support and toll free line tech including providing psychosocial guidance phone and referral of cases to GCMHP psyclinics, as agreed in the coordination meet (mentioned below). The line receives, on a 25 thirty-minute calls per day.
			Improved coordination of services: Sinc GCMHP and PCDCR are implementing pathis projects and provide similar services, spsychosocial support to individuals, particular women, through the help lines, coordination cooperation efforts were exerted to guarant complementary, holistic intervention and maximization of the resources as well as to replication and overlapping while implementary.

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	Three <u>coordination meetings</u> were conducted between the PCDCR and GCMHP, and facilitated by UNIFEM, to discuss:
	<ul> <li>Project approach and planned activities</li> <li>Media coverage (means, locations, layouts, etc.)</li> </ul>
	Work mechanisms and cases (number, frequency)
	<ul> <li>Challenges and achievements</li> <li>Referral mechanisms: PCDCR's psychosocial cases requiring support beyond the help line will be referred to GCMHP psychiatric clinics.</li> </ul>
	SAWA: Capacity of volunteers strengthened: An intensive
	85-hour training course, held in Ramallah, strengthened the capacity of 18 hotline volunteers
	(12 males and 6 females) to address, or direct, the concerns of individuals calling the Child Hotline. The volunteers cover three-hour shifts on the telephone
	in their capacities as trained counsellors. This entails providing crisis counselling and support over the
	phone, explaining potential next steps that can be taken (e.g. legal and psychological) and finding appropriate referrals for callers. Staffing of the
	hotline has been arranged based on weekly shifts.
	Reaching more children and women: 4,306 callers benefited from appropriate services provided by the Child Hotline, as of December 2007, and the
	numbers appear to be on the rise on a weekly basis. Forty-five cases have required follow-up through
	various frameworks. External factors – ranging from incursions, violence within the family or academic stress – have been topics of conversation. Women
	of all ages call the Child Hotline regularly with regards to their children. Others call on issues
	directly affecting them, in which case Child Hotline counsellors apply their skills from intensive training to deal with the women's concerns. Alternatively,
	they refer the callers to Sawa Women's Line, located in Jerusalem, for additional support. The Child
	Hotline operated 40 hours per week from the Ramallah offices, using the toll-free phone number 121 that was previously donated by PalTel. <sup>4</sup>
	Establishing a referral network services: The Sawa team worked on building a referral network of
	support services in and around Ramallah, composed of relevant organizations, community resources,
	clinics and healthcare facilities, leaders and groups. As with the experience with Sawa's Women's Helpline, the purpose of this was to ensure that all
	relevant organizations in the area are aware of the

	new Child Hotline, and would be willing to partner with Sawa in this new venture. Some 30 organizations – including NGOs and Palestinian Authority ministries –were approached and information compiled on contact details and services of each partner organization.
	MEDIA: In order to introduce the activities of the toll-free lines to the public and to achieve more publicity of the line usage and services for both males and females who suffer from psychosocial problems, various forms of media were utilized including radio spots, newspaper advertisements, billboards, flyers and stickers, posters/handouts, and web campaign through alwatanvoice website  (www.alwatanvoice.com) (samples of material produced given in Section VI).

## VI. CERF IN ACTION: Success stories

#### **UNIFEM Psychosocial support project:**

Case #1

#### Complaint:

At the end of November, a 20-year old female called the 121 children's line, telling the counsellor that she is having hysterical attacks and blackouts, which last between a quarter and half an hour. She claimed to have been raped during one of these blackouts. When she called, she was feeling very confused and lost, and she had made several unsuccessful suicide attempts. She was afraid that her family might kill her if they knew about the situation, and she didn't know where to turn as she had lost trust in everyone. **Intervention:** 

The staff or Sawa listened to her and tried to make her feel secure, and they gave her a lot of space to let all her feelings and thoughts out, and to communicate with her. Over the course of many conversations, she revealed that she was pregnant, and with her consent, the staff began to arrange visits to local clinics for appropriate tests. Two days before the scheduled appointment with the doctor, she miscarried.

The family discovered that their daughter had been raped and she was in fear of her life. The Sawa counsellors stayed in contact with her and checked in with her daily, providing her with support. She was encouraged to contact them when she felt in clear and present danger and/or if she felt suicidal. She did call the help line when she next felt suicidal and the counsellors were able to calm her down. They are still in touch with her, supporting her and providing counselling to help her overcome her crisis.

## **UNICEF Psychosocial support project:**

## UNICEF: Recent violence in Gaza leaves many young people shaken



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With his school bag over his shoulder, a boy walks cautiously through a scene of recent intra-Palestinian fighting in Gaza.

#### By Amy Bennett

NEW YORK, USA, 19 June 2007 – The recent intra-Palestinian violence in the Gaza Strip left many young people traumatized and unable to carry out their daily activities. Last week's clashes between Hamas and Fatah killed more than 110 people and injured another 500.

Families cowered in their homes, unable to venture out, many without electricity and water. Young people were left with nothing to do but wait and hope, disappointed over the cancellation of summer plans and the uncertainty that is now a part of their lives.

"Last week, life wasn't going that well," recalled Julie, 17, one of several Palestinian youths who spoke to UNICEF Radio about their ordeal. "They were continuously shooting for five days," she continued. "The situation was really bad. Nobody was able to get out of the house, not even able to get near a window."

## 'Fighting in the streets'

Bombs did extensive damage to the electricity network in Gaza, and many people lost power in their homes. The outage also interrupted sewage and water-supply services.

Fear was most deeply felt by civilians near the areas where fighting was most intense.

"The last week was awful. It was a nightmare," said Chris, 13. "There was conflict near our house, and everywhere we heard the clashes. We couldn't leave our house.

"We went in the bathroom and we stayed there for the whole day. When it was time to sleep, we slept on the ground, because we were afraid of bullets coming into our house," he noted.

"It was a mess," reported Mustafa, another teenager. "It was all masked men fighting in the streets. They just threw the bombs and many, many houses here got attacked for nothing. Many civilians died, just walking in the streets or while they were in their homes."

## Final exams disrupted for many

Mustafa and other students who were taking their Tawjihi exams (secondary-school matriculation finals) amidst the crisis were under considerable stress. Some did not do as well as they had hoped, while others missed the tests entirely. Still, some 24,000 students sat their exams each day.

"It was really hard for me to concentrate on my studies with all this shooting and fighting on the other side," said Yaffa, 18.

Added Mustafa: "I had to miss one of my exams. We didn't leave our home for a few days."

Despite these challenges, both Mustafa and Yaffa hope their test scores will help them get into the universities they choose.

#### Relief aid from UNICEF

In the aftermath of last week's violence, UNICEF is planning to ship much-needed vaccines to Gaza. Hospitals there have been hard hit; they still lack vascular surgery kits, blood units, X-ray films, sutures, lab supplies and orthopedic casts. Many essential drugs are running out.

UNICEF is also planning to provide 50,000 litters of diesel fuel through its partner, the Coastal Municipalities Water Utility, while the provision of fuel through regular channels is restored.

And psychosocial counselling teams have resumed their work in Gaza through a partnership between UNICEF and local non-governmental organizations. The teams are currently screening children in the most affected areas to identify those who require the most attention.

#### Living with fear and uncertainty

In the meantime, young people like Julie, Chris, Mustafa and Yaffa must live with the trauma they have endured, and face an uncertain future.

"We are afraid that electricity and water will stop," said Chris. "We are afraid that there is no money, and no food that will enter Gaza because all the borders with countries that support Gaza are closed. Last summer, the same thing happened.

"I am afraid to go out, and so are my friends in Gaza, because we are afraid that the conflicts will resume," he explained.

"Every time I hope that they will get everything fixed," lamented Julie, "they turn back to fighting, again and again, over and over. They never stop."

## Water:

## Construction of cisterns in:

## A. Wadi Shajneh - Besim



#### B. Khibet Salamah areas:



#### Rehabilitation of cisterns in Wadi Ben Saleh area

Engineers entered each cistern and identified all the problems. Unless other problems were detected the rehabilitation consisted of removing the old damaged and decayed plaster and replacing it with new layers of plaster and adding strengthening / bonding materials. The cisterns were then painted with approved Sika Top Seal materials.



## CERF Funding by Country (2007) - Project Detail Palestinian territory, occupied (01-01-2007 to 29-09-2007)

Agency	Agency Project	Sector	Window*	Approved Amount US\$ / Date	Disbursement Date
WFP	Assistance to the destitute within the PRRO 10387.1 operation (08-WFP-035)	Food	RR	2,499,998 03-04-2007	23-04-2007
UNRWA	Emergency Food Assistance, West Bank (08-RWA-001)	Food	RR	2,488,366 03-04-2007	21-04-2007
Total				4,988,364	

<sup>\*</sup> RR - Rapid Response; UFE - Underfunded Emergency

## **List of Acronyms:**

ACF- Action against Hunger

**CAP- Consolidated Appeal Process** 

CDS -central drug stores

CERF- Central Emergency Response Fund

FAO- Food and Agriculture Organization

GCMHP- Gaza Community Mental Health Programme

**HCT- Humanitarian Coordination Team** 

IASC- Inter- Agency standing committee

MOH – Ministry of Health

OCHA- Office for the Coordination of Humanitarian Affairs

**OPT- Occupied Palestinian Territory** 

PCBS- Palestinian Central Bureau of Statistics

PCDCR -Palestinian Centre for Democracy and Conflict Resolution

PHG- Palestinian Hydrology Group

SLDC -Socio-legal defense centres

**UNCT- United Nations Country Team** 

UNICEF- United Nations Children's Fund

UNIFEM- United Nations Development fund for Women

UNRWA- United Nations Relief and Words Agency for Palestine Refugees in the Near East

WFP- World Food Programme

WHO- World Health Organization