



**Near East Council of Churches Committee for Refugees Work
(NECCCRW)**

Department of Service to Palestinian Refugees

DSPR/Gaza Area

Progress Report

1st Quarter

January 1st through March 31st 2017

June 2017

Preface:

This document is the NECC first quarter report for the year 2017, a joint coordinated and elaborated work organized by NECC-Gaza staff in full cooperation between all centers and departments.

The purpose of this quarter report is to give comprehensive information on NECC programs implementation during first quarter of year 2017 (for period covering 1st January till 31st March), highlighting and summarizing the achievements that have been realized with regards to the stipulated and intended goals considering the different aspects of context in the Palestinian territories mainly in the Gaza Strip.

Given the long experience in Gaza context, NECC became a leading organization operating in the fields of health, economic empowerment, psychosocial support, advocacy and community development in Gaza. Since its establishment in 1952, NECC has been implementing different programs to cohesively respond to the needs of its community.

During its dedicatedly continuous work, NECC is accumulating much more experience and gaining more success in the delivery of its program for the favor of its identified beneficiaries without any regard to gender, age, religion, political and/or racial issues.

Acknowledgement

This work has not come into reality without the full commitment, dedication and cooperation of those wonderful people who have exerted continuous and valuable efforts to bring the success to NECC different implemented programs.

The NECC staff, beneficiaries themselves, partners, donors and all parts of the local community have participated each in its important role into the successful delivery of our work; providing efforts, time and resources deemed essential.

Thus, our deep thanks and gratitude goes to those beloved ones accompanied with our warm regards of happiness and prosperity of life to each person of them.

With respect

NECC/DSPR-Gaza

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List of Abbreviations:

| | |
|----------------|---|
| <i>AEI</i> | <i>Ard El Insan Organization</i> |
| <i>ACT</i> | <i>Action of Churches Together</i> |
| <i>ANC</i> | <i>Antenatal Care</i> |
| <i>CBO</i> | <i>Community Based Organization</i> |
| <i>CPWG</i> | <i>Child Protection Working Group</i> |
| <i>DSPR</i> | <i>Department of Services for Palestinian Refugees</i> |
| <i>EU</i> | <i>European Union</i> |
| <i>EME</i> | <i>Embrace the Middle East</i> |
| <i>GAD-7</i> | <i>Generalized Anxiety Disorder</i> |
| <i>GCMHP</i> | <i>Gaza Community Mental Health Psychosocial Support</i> |
| <i>HB</i> | <i>Hemoglobin</i> |
| <i>HAP</i> | <i>Humanitarian Accountability Partnership</i> |
| <i>HHs</i> | <i>Households</i> |
| <i>IUD</i> | <i>Intra Uterine Device</i> |
| <i>MOH</i> | <i>Ministry of Health</i> |
| <i>MOL</i> | <i>Ministry of Labor</i> |
| <i>NCA</i> | <i>Norwegian Church Aid</i> |
| <i>NECC</i> | <i>Near East Council of Churches</i> |
| <i>NECCCRW</i> | <i>Near East Council of Churches for Refugees Work</i> |
| <i>NGOs</i> | <i>Non-Governmental Organizations</i> |
| <i>OCHA</i> | <i>The United Nations Office for the Coordination of Humanitarian Affairs</i> |
| <i>PCBS</i> | <i>Palestine Central Bureau of Statistics</i> |
| <i>PHC</i> | <i>Primary Health Care</i> |
| <i>PHQ</i> | <i>Patent Health Questionnaire</i> |
| <i>PMP</i> | <i>Pontifical Mission for Palestine</i> |
| <i>PSS</i> | <i>Psychosocial Support</i> |
| <i>SDQ</i> | <i>Strength and Difficulties Questionnaire</i> |
| <i>TOT</i> | <i>Training of Trainers</i> |
| <i>TVET</i> | <i>Technical Vocational Education and Training</i> |
| <i>UNICEF</i> | <i>United Nations Children's Fund</i> |
| <i>UNRWA</i> | <i>United Nations Relief and Works Agency for Palestine Refugees in the Near East</i> |
| <i>VTC</i> | <i>Vocational Training Centers</i> |
| <i>VTP</i> | <i>Vocational Training Program</i> |
| <i>WHO</i> | <i>World Health Organization</i> |

Executive Summary

This Progress Report is covering first 3 months of programs implementation during 2017, summarizing achievements in relation to the specified goals in the picture of the deteriorated political and socio-economic situations in the Gaza Strip.

The report consists of 4 main parts; the first is pertaining major highlights on the first quarter implementation pathway of the diversified programs the NECC is running, while the second part is introducing NECC organization and its vision, mission and scope of work in the time that the third part is including the different activities took place in the determined period in relevance with the NECC stated indicators.

And finally the fourth part is focusing on the cross-cutting issues induced by situational, environmental and organizational context for NECC delivery of services and programs.

In that pathway, the next part is summarizing the different indicators of NECC services delivery during the determined reporting period crossing all NECC programs and centers.

1. Highlights on first quarter achievements:

Regarding Access to Primary Health Care and Medication, the number of newly registered families during this reporting period has reached **637** families, while the number of the total families benefitted from NECC PHC clinics during this period was **7416** families.

The number of new pregnant women was **614** distributed as following: 259 in Shijaia, 185 in Darraj and 170 in Rafah with total of 1422 pregnant women who were already registered and followed up during the reporting period. Furthermore, the number of deliveries reported in our catchments areas during this reporting period was 462 deliveries. At least 70% of the delivered women received quality postnatal care three times after delivery. In terms of family planning, the number of women who received family planning services during this reporting period was **727** women: 304 at Shijaia, 349 at Darraj and 74 cases in Rafah (target 1000 women per year).

Additionally, the number of newly registered children in this reporting period has reached **992** in the different areas (Shijaia 401; Darraj, 307; Rafah 284), this is also could reflect an increased demand for the services. The total number of children attending the well-baby clinic has increased and reached **6836** cases distributed among clinics as follows; Shijaia 3980; Darraj 2359 and Rafah 1497 with total Well-baby visits reached **8802**.

The number of patients above 6 years old as cases examined by doctors has been **3266** while **3497** children under 6 years were examined by doctors and received treatment. The number of cases examined by dentists and received dental care services had reached **2099** distributed as Shijaia 774; Darraj 629 and Rafah 696. The total laboratory tests that were performed inside the three family care centers during this reporting period have reached **6820** distributed as Shijaia 2911; Darraj 2384 and Rafah 1525. The total number of health education sessions provided to all categories was **523** sessions for 9375 participants.

Lectures, trainings, and information events on various topics implemented inside NECC clinics afternoon twice per week named “afternoon activities” where 72 women benefited from embroidery, wool making courses, hair dress making and others during the reporting period.

With regards to the **Technical Vocational and Educational Training (TVET) program**, during the reporting period, a total of **211** originally enrolled trainees including male and female, continued to receive high quality vocational training skills in the designated fields of carpentry/furniture making, welding and metals work, aluminum work, refrigeration and air conditioning, general electricity and motor rewinding, secretarial studies and advanced dressmaking. Where about **21.3%** out of those trainees are females and the rest of **78.7%** are almost males.

Some major changes have been realized into the TVET provision at NECC schemed as reducing periods of study for some professions from three to two years in addition to the launching of the profession of refrigeration and air conditioning.

Regarding **psychosocial support program**; **739** children who attended the three family care centers or kindergartens located in the three served areas received PSS activities either, group sessions or counseling or recreational activities while **1313** mothers and women received PSS either group sessions, individual counseling, group counseling or consultation. Additionally, **155** TVET students received PSS.

1.1. Summary of key findings in reference to log frame

During the reporting period, NECC succeeded to sustain the provision of its programs and services to the targeted beneficiaries as planned. **The table (1) below summarizes the main achievements in numbers.**

| Indicator | Q1 | % of achievement |
|---|-------|------------------|
| At least 95% of pregnant women in targeted locality received timely ANC at least 4 visits | 99.5% | Achieved |
| At least 70% of women in targeted locality received timely quality post natal care at least twice. | 76.7% | Achieved |
| 1,200 new pregnant women registered for ANC annually | 614 | 51% |
| 7000 antenatal care visits made annually | 4477 | 64% |
| 1,800 pregnant women received follow up visits, newly registered and on-going | 1553 | 86.2% |
| 1600 postnatal care visits conducted annually | 1294 | 81% |
| 12,000 children registered at the well-baby clinic and screened for anaemia and anthropometric measurements | 6836 | 57% |
| 25,000 well baby visits were conducted annually | 8802 | 35.2% |
| 7,000 sick children up to 6 years old received medical examination and treatment | 3497 | 50% |
| 1000 partners received reproductive health services and awareness | 727 | 72.7% |
| Over 4,000 women, children and adults in targeted areas receive dental care annually | 2099 | 52.4% |

| | | |
|---|------|----------|
| Over 4,000 patients examined, tested and received treatment | 3266 | 81.6% |
| 1500 children received psychosocial support | 739 | 49.2% |
| 3000 mothers/women participated in psychosocial support activities | 1313 | 44% |
| 200 women attending afternoon activities received psychosocial support | 72 | 36% |
| A total of 117 students receive training in carpentry/furniture making, welding and metals, Aluminum work and refrigeration and air conditioning annually | 117 | Achieved |
| A total of 48 students new and old receive training in electricity skills | 49 | Achieved |
| A total of 20 students receive training in secretary study | 21 | Achieved |
| A total of 15 students receive training in Advanced dressmaking | 24 | Achieved |
| At least 60 educational loans provided to students to complete their study at Palestinian universities | 1 | 1.66% |
| 1 to 2 policy/advocacy issues resulted in improving justices and economic status | 1 | 50% |
| 4 initiatives implemented with local communities | 1 | 25% |
| 10 visits paid by relevant internationals | 6 | 60% |

2. Introduction to NECC Organization:

2.1 Description of NECCCRW and its programs

NECCCRW Brief:

Near East Council of churches Committee for Refugees Work (NECCCRW)-the Gaza Area Committee is part of the Department of Service to the Palestine Refugees (DSPR). The DSPR is a department of the Middle East Council of Churches. NECCCRW Gaza is an integral part of the Palestinian Society and culture and operates with support from the churches, ecumenical and secular organizations. NECCCRW Gaza Committee was founded in 1952 launching a humanitarian program to assist Palestinians who took refuge in the Gaza Strip following the establishment of Israel in 1948. NECCCRW has focused then on the provision of humanitarian aid and contributing to an overall improvement in living conditions and to poverty alleviation. Its work has rested on respecting the humanity and dignity of those whom it helps and on adherence to clear transparency and accountability standards.

NECC supports the Palestinian people through six key areas: Health (Maternal and Child Primary Health Care), Technical Vocational Education and training (Empowering Youth Economic Status), Educational Loans for university students, Psychosocial Support for children, mothers, and students to cope with the negative impact of Gaza Violence, Emergency Relief projects including

cash Relief and Job Creation initiatives, Advocacy policies and activities shared with the community, and community Development program.

NECCCRW Vision:

Department of Service to Palestinian Refugees of the Middle East Council of Churches vision is of an empowered pluralist Palestinian society which guarantees equal opportunities for all its members and vulnerable communities based on the ideals of justice, equality of rights, opportunities and freedom.

NECCCRW Mission:

DSPR is an Ecumenical Church Related Organization in the Middle East Region. It reflects the Christian core values in its Witness and Diakonia in partnership with local and global actors, to foster and advance socio-economic conditions of Palestinians and the marginalized through active contribution to improve living conditions, though providing health, education, environmental, economic, social and humanitarian programs with the realization of basic human right.

2.2 Overview on NECC Programs Description

1. Provision of Quality Primary Health Care services:

The main objective of **NECC Gaza's health program is to provide high quality primary health care services** in poor, overpopulated, and remote areas that have inadequate or no health services. NECCCRW Gaza offers preventive and curative free of charge services, with a focus on mother and child health care and education towards health and environmental promotion.

The package incorporates antenatal and postnatal care for pregnant women, and a Well-Baby services to follow up children's development until the age of six years. Dental services for mothers and children, health education, home visits, dermatology clinic, physical examination, laboratory testing, medication, psychosocial support interventions, malnutrition and anaemia program, and family planning services are also included.

Two family health care centres in the areas of Shijaia and Darraj serve each a poor community of approximately 100, 000, and 75,000 people respectively, where existing provision of medical services is inadequate. In the rural area of Rafah, in Kherbet El Adas, where provision of medical services is non-existent by other providers, NECCCRW Gaza serves a population of approximately 20,000 at its third centre.

The centres have medical stocks and a laboratory, thus operating independently. However, high-risk patients and patients with special needs are referred to specialized clinics.

2. Psychosocial support:

NECC's psychosocial program started after 2008 war on Gaza called by Israel "Cast Lead Operation", and continues till now; it targets the whole family especially women, mothers and their children. The program focused on the Palestinian families through the health centers, vocational training centers, secretarial center, advanced dressmaking center and NECC staff in cooperation and coordination with relevant organizations.

3. Livelihood and Economic Development (TVET Program):

NECC is contributing to the economic development of Gaza through its Vocational Training Centres (VTCs) that are located in Gaza City and El-Qarara Village south the Gaza Strip. Male Vocational Training Centre of Carpentry and Furniture Making/Metal works and welding is located in Shijaia province in Gaza City, while the other centre of Electricity and Motor Rewinding is located in the village of El-Qarara, 25 KMs South of Gaza City.

Women VTC's of Secretary Studies and Advanced Dressmaking is located in the NECC main building in Rimal, Gaza City.

These vocational training centres are serving different target beneficiaries therefore, the selection criteria for the VTCs trainees differ according to the subject of the training course, i.e. women applying for the secretarial course should have completed 12 years of schooling and have a high school certificate while women applying for advanced dressmaking course should at least know how to read and write, while men applying for carpentry, metal welding and aluminium should be aged between 14-16 years, and known as school drop-outs, and men applying for electricity course should have completed 10 years of schooling and are between 16-23 years old.

For selecting target groups, NECC-Gaza ensures to select those who come from deprived families and have the highest needs. NECC Technical Vocational Educational Training (TVET) centres provide its services to a total of approximately 205 trainees per annum.

4. Educational Loans:

Through this program, NECC is promoting university education by helping needy students to complete their education. By providing interest-free loans to those students, they can pay university fees that can be renewed every academic year.

5. Emergency Relief:

NECC launched its welfare and Relief program since 1952 and continued till now to provide assistance to needy people. The program aims at providing emergency assistance to alleviate the impact of emergency situations when deemed necessary. It also helps to target Palestinians to attain cash for work "temporary jobs" and/or cash relief for one time to secure food, medicine, daily needs, health and psychosocial support (PSS).

6. Advocacy Program:

This program is concerned with promoting social justice, empowering communities and advocating the rights of civilians particularly refugees to live in dignity, respected human rights, ensuring access to health and education services and so on. NECC works at two fronts; internally promoting an empowerment culture and externally advocating the rights of the Palestinians at the national forums.

7. **Others:**

❖ **Community Development Program**

NECC enables communities to implement projects aimed at improving the conditions of their environment. It assists other NGOs in implementing projects through giving the support for providing facilities and supplies towards the implementation of minor infrastructural projects. It also promotes youth activities, schools and kindergartens through the provision of products manufactured by VTC trainees and graduates.

❖ **Self-Help Program**

The Sewing Cooperative: Graduates of the Dressmaking Center jointly operate a self-supporting, income generating cooperative producing anything from children's clothes to wedding gowns.

The Self-Help Sewing Center: Women, mostly widowed and often the sole income generators of their families, work for NECCCRW sewing pieces for internal use (uniforms, curtains ...etc.) and external distribution.

2.3 *Context (socio-political, health, economic, environmental...)*

The humanitarian context of Gaza strip is unique amongst today's humanitarian crises and remains directly tied to the impact of prolonged occupation, a protracted protection crisis continues. The first challenge is the continuing need for protection measures for at least 2 million Palestinians experiencing, or at risk of, conflict and violence, displacement and denial of access to livelihoods, among other threats.

The Second, is the need to ensure delivery of essential services such as water and health care for the most acutely vulnerable households, currently denied or restricted in access.

And third is the need to support vulnerable households to better cope with the prolonged nature of the humanitarian crisis and the recurrent cycle of shocks, natural and manmade. These dynamics are significantly magnified in the Gaza context by the ten-year long blockade, imposed by Israel citing security concerns after the takeover of Gaza by Hamas, and three major escalations of hostilities in six years: combined these factors have devastated public infrastructure, disrupted the delivery of basic services and undermined already vulnerable living conditions¹.

¹ Humanitarian Needs Overview 2017, occupied Palestinian territory

The blockade and three major escalations of hostilities in the last six years have inflicted large-scale destruction on Gaza's economy, productive assets and infrastructure. A chronic energy crisis, with power outages reaching 12-16 hours a day, also impairs service delivery, students' educational outcomes, the functioning of hospitals and medical equipment and the operation of more than 280 water and wastewater facilities.

While in any healthy economy, energy underpins industrial processes and economic growth, Gaza faces electricity blackouts 12 hours. During summer and winter peaks the scarce electricity supply is increasingly rationed to 4 hours during day time. The available power supply shortage has affected vital services such as hospitals, clinics, and water supplies. **(World Bank, 2016).**

In Gaza, there are around 60,000 deliveries every year, 160 delivery every day. Children in need for health services from the moment of delivery till they reach the age of six. Despite the fact that most deliveries in Gaza occur in hospitals, new born care and post-natal care remain questionable.

In 2015, UNRWA estimated that the Infant Mortality Rate (IMR) has increased for the first time in the last decades to around 22/1,000 live births in the GS; around 74% of them die in the first 28 days after delivery; mostly within the first 6 days of life. In 2016, a validation study was performed which confirmed the earlier study. Unlike most other countries, for more than a decade, the IMR hasn't been reduced; in fact it has increased.

Children's mortality particularly IMR is regarded as an index which reflects the overall performance of the health system, and the deteriorated socioeconomic situation.

The under-5 mortality rate dropped to 14.9 and infant mortality rate decreased to 12.6 per 1000 live births. Vaccination coverage is close to 100%. Most women receive antenatal care and 99.7% of registered newborns are delivered in hospitals. Nevertheless, the decline in under-5 mortality did not achieve Millennium Development Goal 4, which aimed to reach below 14 child deaths per 1000 live births. Although the maternal mortality rate is better than the regional average, it remains higher than the target rate. **(WHO, 2016).**

Regarding disability, the total number of persons with disability in the GS was found to be 40379 (2.85%) of the population excluding mental-related disability; of them, 36% are children less than 18 years. Today, using the Washington Group's narrow definition, 1.5% of Palestinian children have a disability, 1.8% for boys and 1.3% for girls, 1.6% in the West Bank and 1.4% in Gaza².

The prevalence of disability is higher among the youth population. The most common form of childhood disability is mobility-related, followed by cognitive delays, communication issues, vision difficulties, hearing difficulties and then problems with remembering and concentrating. While most disabilities are

² Palestinian Bureau of Statistics & MOSA, *Disability Survey in Palestine: Main Findings*, (Ramallah, 2011).

either congenital, or driven in part by the high rates of consanguineous marriage (146 cases³), or the result of a birth injury or illness, a substantial proportion are caused by the ongoing political conflict.

The health system in the occupied Palestinian territory is operating under severe pressure due to rapid population growth, lack of economic opportunities and adequate financial resources, shortages in basic supplies and the inherent limitations of occupation or blockade. The coordination and collaboration challenges between the West Bank and Gaza Strip are further impediments for efficient health sector planning and management. **(WHO, 2016)**

Around 70% of children aged 6-12 months suffer from anemia. Also, around 75% of Gaza children were either suffering from Vitamin A deficiencies or at the border line representing a serious public health problem. Malnutrition is not only a medical disorder; rather, it is a multi-factorial issue that has political, social and contextual dimensions. The reasons for such deteriorated nutritional status in Gaza is mainly attributed to poverty resulting from the occupation policies, poor socioeconomic situation as a result of the blockade, limited access to food, bad quality cookware (aluminium smuggled through tunnels), deterioration of sanitary and environmental conditions and many others. With the deterioration in the livelihood conditions, the level of malnutrition has significantly increased.

Youth linked many problems to the economic situation: domestic violence, low educational attainment, inadequate socialization, insufficient recreational activities, and dysfunctional relationships between adolescents and their parents. Lack of electricity and other basic services or infrastructure also create many stressors among youth. At school, male youth experience violence, while in the home, girls were more exposed to domestic abuse than their male peers. The closure and repeated Israeli military operations have traumatized many people who have high levels of post-traumatic stress disorder (PTSD), with chronic symptoms including high levels of anxiety and psychosomatic reactions.

Young people in the Gaza Strip suffer from PTSD and other forms of anxiety, depression, attention deficit disorder, conduct disorders, increased violence, and loss of hope, bad memories, nightmares and bed-wetting.⁴

Thus NECC has increased the number of patients seen every day and succeeded in integration the psychosocial services into primary health services. During 2015, UNRWA-wide data showed that 13.4% of pregnant women were classified as high risk, while 27.7% were considered alert risk. Further studies are needed to ascertain how, and by whom, high risk pregnancies are managed and to evaluate the effectiveness of management of these cases. Women themselves have insufficient knowledge/awareness of important danger signs.

Antenatal care is widely recognized as a critical component of the maternal and child health. It comprises a set of prevention and management interventions that aim to identify and modify risks to a woman's health or pregnancy outcome.

³ Irdah, M. M., Consanguinity profile in the Gaza Strip of Palestine: Large-scale community-based study, *European Journal of Medical Genetics*, 57(2), pp. 90–94, 2014.

⁴ "Ministry of Health, Health Sector Strategic Plan: Gaza Governorates 2014-2018, (Palestine, 2014).

It can be broadly defined as the provision of biomedical and behavioural interventions either before or during or after pregnancy in order to optimize women's wellbeing and subsequent pregnancy outcomes.

Domestic violence against women in Palestine is regarded as an issue that should be handled by the family. The values lie behind this "culture of silence" and socio-cultural norms are built upon them. Significant achievements in addressing violence have been realized in Palestine over the last decade, with normative frameworks comprised of legislation, policies and systems addressing women, child and youth protection.

As a result, females are often forced to retreat from the public sphere and spend their leisure and recreation time at home with family. When they graduate from school, girls' lives shrink further still. While most would very much like to work outside the home⁵, gender norms see the home as women's natural domain mean that Palestinian women's labor force participation rates are amongst the lowest in the world (19% in 2014)⁶.

Poverty remains a continuous challenge in the Palestinian context, staying high at 26% and on the increase. This trend has resulted from erratic and declining economic activity, wages, and loss of employment opportunities due to the closure, reduced employment generation capacities of the public and private sectors, and restricted access to natural resources, as well as declining and unstable employment opportunities.

47.6% of Palestinians had a monthly income below the national poverty line (again with marked differences between the West Bank at 35.6% and the Gaza Strip at 67.1%). **(Gaza situation report 2016)**

The unemployment rate in Gaza Strip was 41.7% compared to 18.3% in the West Bank in the 2nd quarter 2016. And the unemployment rate for males in Palestine was 22.1% compared with 44.7% for females in the 2nd quarter 2016 **(BPCS, 2016)**.

The capacity of the Palestinian economy to cope with the size of the population and age structure, taking into consideration a high fertility rate, rapid population growth, and a young population, is governed largely by its labor market and employment.

Employability and investment in human capital (such as health and education) also play an important role in this process. Given that 60% of the land, 80% of the water, and East Jerusalem (which constitutes 15% of the Palestinian GDP) remain under Israeli control, the Palestinian economy has very limited room for growth. **(Palestinian 2030 full report, December 2016)**

NECC had implemented several relief programs to assist poor and needy populations. However, the demand is huge and a lot needs to be done to rehabilitate the unbelievable damage and to support people's resilience. Urgent interventions are needed to help people recover as well as long term interventions are needed to support the livelihood conditions and development aspects in Gaza.

⁵ World Bank, "Targeting Assessment of the Cash Transfer Program, West Bank and Gaza" Report No: ACS890, 25 June. (Washington DC, World Bank, 2012)

⁶ UN Women, *Women and the SDGs*, (2015), Available at <http://www.unwomen.org/en/news/in-focus/women> - and the SDGs/sdg-5-gender-equality; Palestinian Central Bureau of Statistics, 2015; World Bank, 2012.

It could be claimed that improvement in social and health is closely linked to economic growth and security. Any kind of economic recovery in Gaza is impossible while the blockade of Gaza remains in place. Even if it is lifted, it will take years to repair the damage and to recover the economy.

3. Major activities and achievements of NECC programs:

3.1 Health program

NECC provide a package of primary health care services, reproductive health (antenatal, postnatal, family planning), child health services (well-baby services, nutrition, pediatric clinic...) and other services to all age groups (medical examination, dermatology, dental, laboratory testing, medication, consultation, health education, home visits, etc.

Table (2): Distribution of total number of beneficiaries at NECC PHC centers disaggregated by gender and age:

| By age | Above 18 years | | Less 18 years | | Total |
|---------------------|----------------|------|---------------|------|-------|
| | M | F | M | F | |
| By gender | | | | | 13355 |
| No of beneficiaries | 312 | 3287 | 4964 | 4792 | |
| Total | 3599 | | 9756 | | |

3.1.1 Ante Natal Care (ANC)

According to the standard of antenatal care from WHO followed by NECCCRW, pregnant women are expected to visit every 4 weeks until 28 weeks of gestation, and then every 2 weeks until 36 weeks, after which weekly visits are recommended until delivery. During this reporting period, number of new pregnant women was **614** distributed as following: 259 in Shijaia , 185 in Darraj and 170 in Rafah with total of **1553** pregnant women who were already registered and followed up during the reporting period (Target 1800 pregnant women per year).

Among the new pregnant women, 188 were primigravida (30.6%). The total antenatal care visits have been reached 4477 visits (Target: 7000 ANC visits per year) as the pregnant woman should follow up monthly during her pregnancy. Accordingly **99.5%** of pregnant women followed up in ante natal care clinics at least 4 times during their pregnancy. We noticed an increase regarding ANC beneficiaries compared and this could be correlated to the high needs to reproductive health in Gaza.

The percentage of pregnant women who registered at antenatal care through the first three month of pregnancy was **88.6%**

Ultrasound (U/S) is performed according to the MOH and NECCCRW schedule 3 times during pregnancy:

- 1st from 8-10 weeks to confirm pregnancy
- 2nd from 18-22 weeks to exclude any congenital anomalies.

- 3rd from 32-36 weeks to determine the position of the fetus.

*During this quarter, the % of women received US service 3 times or more during their pregnancy period reached **89 %** while the total numbers of US scans were **1457**. there were no maternal mortality cases registered during this quarter.*

NECC has started introducing the preconception care to improve the pregnancy outcomes for both the mother and the baby. Details about this new service will be shared in the next reporting year

3.1.2 Post Natal Care (PNC)

All women who follow up for antenatal care at NECC family health care centers during pregnancy used to receive PNC three times, after delivery by NECC staff, the first visit within 72 hours, second visit within 6 days and third one within 6 weeks after delivery, the two visits should be at home while the third one could be at the center or home. During the postnatal visits, the midwife/nurse examine women and their babies to make sure that their conditions are normal, assess the psychological status of the mother and provide psychosocial support services to mothers, provide health awareness sessions pertaining to postnatal period such as breastfeeding, family planning, nutrition, baby care, danger signs, provide appropriate supplementation to women as needed such as Iron/Folic acid to anemic and even normal deliveries according to national protocol for 3 months, refer the severe or cases with complications and provide psychosocial support. Additionally they check the baby's weight and perform umbilical dressing. Also they filled a questionnaire about both mother and baby.

NECC during this quarter continue promoting of PNC with UNICEF in Shijaia, Darraj and Rafah areas. The overall objective of the project was to contribute to reduce the morbidity of the targeted pregnant women and mothers and neonates/children during postnatal period. The project aimed to increase coverage of PNC services for registered women at the postnatal period. A new project will start in June 2017.

Regarding the post natal visits, the total number of deliveries during this quarter in the three localities who were registered in ANC was **462**. NECC succeeded to provide **1294** PNC sessions/visits in three served localities as following: In Shijaia 551, Darraj 371 and Rafah 372, the sessions were provided to 462 mothers, 919 were at home and 375 at the health center.

Also **76.7%** of mothers who passed 6 weeks after delivery received 3 PNC sessions, and **81%** passed the 6 weeks after delivery without complication while 16.2% of children (81 children out of 497) during 6 weeks of their born had specific medical conditions and received appropriate treatment or referred.

Also one of the main objectives to enhance the exclusive breastfeeding, the percentage of children who are exclusively breastfed during the 6 weeks after delivery: **83.5%**.

3.1.3 Family Planning Services (FP)

Family planning services are provided at the three localities. A female gynecologist and staff nurse run the family planning clinics inside each one of the three health care centers. The family planning methods which are commonly used are: intrauterine devices (IUDs), pills, injections and male condoms. The women have a good discussion with the gynecologist in order to select the best and safe method of contraception after the medical examination and sometimes they need to discuss with their husbands and come back with the decision of both of them.

During this quarter, the number of new acceptors was 128as following: 53 in Shijaia, 43 in Darraj and 32 in Rafah. The total number of beneficiaries of Family Planning and visits disaggregated per area are shown in **table (3) below**.

| Center area | No of beneficiaries | FP Visits |
|-------------|---------------------|-----------|
| Shijaia | 304 | 432 |
| Darraj | 349 | 611 |
| Rafah | 74 | 89 |
| Total | 727 | 1132 |

The most used tool was the pills in Darraj while in Shijaia and Rafah was the male condom.

3.1.4 Well Baby Program (WB)

Well Baby program is operated in NECC twice a week in each clinic. Through this program the staff nurses provide services to children from birth to 6 years with consultation of a physician. NECC is unique in providing this service to children from 0 to 6 years. Routinely, nurses weight and measure the weight, length, head circumference and hemoglobin. These measures are plotted in growth and development chart on the computer and kept in the child's health record, through which nurses can recognize malnourished or anemic children and deal with them through enrolment in the malnutrition and anemia treatment program by follow up, counseling their mothers and home visits. This aimed at decreasing the prevalence of malnutrition and anemia among children under 5 years old and to speed up the recovery process of malnourished and anemic children in a sustainable manner.

NECC utilized a comprehensive approach that incorporates carrying out screening, identifying anemic and malnourished cases, managing the identified cases at the clinics, providing health education and counseling, provision of referral services when needed, provision of iron and enriched milk supplementation and possibly provision of social assistance through other agencies working in that field. The main activities during this quarter were as following:

- Screening **6836** children 0-6 years old attending the well-baby services as planned in accordance with the national protocols (Target 12,000 per year). Shijaia Clinic ranked first in term of the number of children seen at the well-baby services (3012).

- In total, **8802** well-baby follow up visits were performed (Annual target 25,000 well-baby sessions). During this quarter, 992 new children were assessed at the well-baby service delivery points: 401 in Shijaia, 307 in Darraj and 284 in Rafah.
- **3497** sick children have been provided with medical examination and needed medications and supplementation.
- In addition to those who joined a treatment program inside NECC premises, **41** child were referred to other facilities for more advanced management at hospitals or diagnostic centers as following: 19 from Shijaia, 18 from Darraj and 4 from Rafah
- The total number of those examined and found abnormal and enrolled in nutrition treatment programs is 441 children. The percentage of malnutrition among the attendants of the well-baby visits was distributed as following: 7.2% in Shijaia area while it was 5.8% in Darraj area; 5.8% in Rafah.
- The prevalence of anemia discovered through well baby screening ranged from 10.16. % in Rafah to 22.9% in Shijaia and 26.5% in Darraj.
 - At the well-baby clinics; health education sessions are provided to the mothers about breastfeeding, nutrition and hygiene with food demonstrations to all children in the clinics.
 - Also **3857** caregivers received **292** health education and awareness sessions about nutrition, breastfeeding, and hygiene Also, health education materials were distributed to caregivers.
 - NECC during this quarter continue managing of MAM & SAM cases with UNICEF support in Shijaia, Darraj and Rafah areas.

New project was launched by NECC with support from IMC , the aim of the project is Contributing to the reduction of children mortality and morbidity through reducing the prevalence of anaemia and malnutrition among vulnerable children under 5 years old in the targeted area, including CWDs , identify and target undiscovered anaemic and malnourished children including children with disabilities-living at Rafah-who don't present themselves for treatment at the health centre; therefore remain undiagnosed (neglected). Cases will be identified through house to house screening, measuring weight, height and haemoglobin level at households.

From 5th to the 15th of March 2017, UNICEF State of Palestine in partnership with the NGO "EDUS-Education for All" and UNICEF supported organization of the Trans disciplinary .Training on «Early Childhood Development and Early detection and intervention for children with developmental delays and disabilities "for 16 SOP's government representatives and service providers.

The training was conducted in the NGO EDUS's training center in **Sarajevo**, and the policy makers and service providers from health, education and social protection sectors form SOP improved knowledge and competencies on topics like early childhood development, assessment of child development, creation of individual service plans, and provision of early intervention services for families with young children with developmental delays and disabilities.

EDUS with UNICEF BiH, supported by the BiH government has developed an innovative model of a system for early childhood detection (ECD) and intervention (ECI) in order to recognize children at risk

and with developmental delays and disorders as early as possible and introduce services that will enable them to catch up with their typically developing peers and prevent in many cases life-long disability and exclusion.

The main objectives of this trans disciplinary training were to support government of SOP to create a system of early detection and intervention in their country and implement the priorities defined under the National ECD and ECI strategy 2017-2022, as well as to provide professionals with a diversified knowledge and competencies training in how to use standardized instruments for harmonized “whole child” assessments and interventions in ECD and ECI particularly focusing on most vulnerable families with young children with developmental delays and disabilities. One of the participants of this training was from NGO Near East Council of Churches Gaza (NECC) which consider as a partner with UNICEF. Thus this approach is very important because Palestine endorsed the National ECD and ECI Strategy 2017-2022 and one of the key priority is introduction of the early detection of children with developmental delays and disability and intervention services.

3.1.5 Dental Clinic

All clinics of NECC Gaza are equipped with fixed Dental units and a Mobile Dental Clinic that provide routine dental services – such as check-up, filling, extraction, scaling 4 days a week. During this quarter, **2099** patients (annual target 4000) were examined by a dentist at the clinics distributed as following: **774** in Shijaia, **629** in Darraj and **696** in Rafah, also **491** children were screened during well baby program (target 700 child per year), **487** pregnant women were screened during antenatal care for their dental care (target 1200 pregnant women per year).

Table (4): Distribution of NECC Dental Clinic by Type of Activity & locality

| District | No. of Visits | Treatment | Composite Fillings | Amalgam Fillings | Teeth extractions | Teeth scaling | Follow up visit |
|----------|---------------|-----------|--------------------|------------------|-------------------|---------------|-----------------|
| Shijaia | 699 | 285 | - | 181 | 26 | 27 | 168 |
| Darraj | 630 | 414 | | 125 | 76 | 16 | 108 |
| Rafah | 608 | 342 | 1 | 115 | 92 | 22 | 83 |

3.1.6 General Clinic/Medical examination

The number of patients above 6 years old as cases examined by doctors has been reached 3266 cases including those attended dermatology clinic. NECC launched the dermatology services at the three health centers since March 2015; a dermatologist is attending the centers one day per week except Shijaia two days per week. The

During this reporting period, **9665** SMS were sent to clients which were effective and well-perceived by them in addition to **2913** SMS that were sent to bring back defaulters (in total 12,578). The use of SMS has contributed to the reduction of the number of defaulters.

service is highly appreciated by the community due to high demand and prevalence of skin diseases.

The dermatologist examines 50 patients per day. The total number of patients seen during this quarter at dermatology clinic was 1955 including adults, children and pregnant women.

Below the table shows the distribution of all clients who were examined by doctors and received treatment by category and center during the reporting period (the table mention number of visits not cases, it means that the patient may receive the service more than once during the year).

Table (5): Distribution of all clients who were examined by doctors by category and center

| Target group | Shijaia | Darraj | Rafah | Total |
|----------------------|---------|--------|-------|-------|
| Less than 6years old | 3677 | 3222 | 2301 | 9200 |
| Pregnant women | 1068 | 673 | 535 | 2276 |
| Above 6 years old | 701 | 516 | 668 | 1885 |
| Dermatology clinic | 1037 | 445 | 440 | 1922 |
| Total | 6483 | 4856 | 3944 | 15283 |

3.1.7 Health Education

Health education is any combination of learning experiences designed to help individuals and communities improve their health, by increasing their knowledge or influencing their attitudes and behaviors. Health education is a tool of health promotion: the two should not be separate.

NECC staff conducts health education sessions for women attending family health care centers. To promote healthy practices, health education is provided to families particularly to caregivers. Health education is provided based on the needs of families.

Achieved in this reporting period: NECC continued to intensify its efforts in health education and in increasing awareness of the concerned population in topics related to hygiene, breast feeding, environment, etc... The total number of health education sessions provided to all categories was **523** for **5823** participants. The main subjects of health education were nutrition, hygiene practices, child health care, pregnant women care, infectious diseases, newborn care, child protection, breast feeding, and complementary feeding. Also health education materials were distributed either inside the centers or at home visits.

To further enhance the effectiveness of health education, NECC used a set of pre-test post-test questions for a sample of attendants in health education sessions. Questionnaires were analyzed and measures were taken accordingly.

3.1.8 Home Visits

Home visits are a part of health services provided by NECC to the community either for PNC, bringing defaulters and special cases. During this quarter approximately **1053** home visits (annual target 1500)

were conducted by NECC to beneficiaries inside their houses. The main cause of home visits is to check the health of mothers, newborns, patient/case inside the house, the purpose of not coming if defaulter, to check the improvement of the case and feedback if referred cases.

3.1.9 Referral System

One of the success factors for NECC health program was the coordination and the integration with the relevant health providers such as the MOH hospitals, Thalassemia association and AEI which provided back up referral sites. NECC referred 67 cases to relevant sites as needed.

During the reporting period; 54 referral cases including 41 children, 10 pregnant women, 2 adults were referred for more investigation or because they had complications. The following table shows the referral sites;

Table (6): Referral sites during the reporting period:

| Referral system | Shijaia | Darraj | Rafah | Total |
|------------------------|---------|--------|-------|-------|
| Thalassemia center | 4 | 6 | - | 10 |
| MOH or other hospitals | 17 | 22 | 4 | 43 |
| MOH clinics | - | 1 | - | 1 |
| Total | 21 | 29 | 4 | 54 |

Actually NECC received feedback from the referred cases to decide how to continue with them the treatment. For those referred to Thalassemia center, NECC received results of electrophoresis for all the cases and NECC give the results to the mother and explained the status of her child exactly.

3.1.10 Laboratory Services

A laboratory is based in each one of the clinics. The following tests are carried out:

1. Hematological tests:
2. Urine and stool analysis tests.
3. Biochemistry tests.
4. Pregnancy test.

Other unavailable tests are usually referred to be performed outside NECC to MOH, Thalassemia association and Ahli Arab Hospital. NECC has a coordination system with the mentioned places.

The number of laboratory tests performed during this quarter have reached **6820** distributed as Shijaia **2911**; Darraj **2384** and Rafah **1525**. Unlike other health organizations in Gaza, the available strategic storage of laboratory kits needed for the lab services helped NECC to continue the provision of the needed lab services despite the closure.

Table (7): Distribution of lab tests

| Type Of Lab Tests | Shijaia | Darraj | Rafah | Total |
|-------------------|---------|--------|-------|-------|
| Blood tests | 1334 | 1164 | 797 | 3295 |
| Urine | 1303 | 981 | 636 | 2920 |
| Stool | 224 | 221 | 87 | 532 |

| | | | | |
|----------------------------------|------|------|------|------|
| Pregnancy Test (Urine Sample) | 50 | 18 | 5 | 73 |
| Total | 2911 | 2384 | 1525 | 6820 |

3.1.11 Pharmacy Services

There is a small pharmacy operated by an Assistant Pharmacist at each of three clinics with a number of medicines (approximately 120 items), complying with WHO standards and approved by the NECC medical sub-committee. The main lists of the medications include those needed for pregnant women and children as Iron supplements, multivitamins , antibiotics, anti-allergic, skin ointments and creams, antifungal oral gel, ovules and vaginal creams, antipyretic, anti-cough, analgesics, anti-helminthes, etc.

Only prescriptions of the clinic medical doctors are dispensed to the patients of the particular center. Medicines are mostly made and supplied directly by pharmaceutical companies in the West Bank and Gaza. Stocks are replenished from the main “warehouse” under the supervision of a pharmacist twice a month while the balance of medicines at each clinic covers a period of six weeks and the balance of medicines at the main store covers 12 months as the replenishment of dispensed medications replenished every 6 months through tenders. Additionally, NECC has computerized information system for the medications that facilitate and organize the work inside the main store and the pharmacies, a network connect the three pharmacies with the main office and the main store for more monitoring and supervision, regular meetings also conducted by the health programs coordinator with the pharmacist assistants, the pharmacist responsible of the medical store and the doctors.

NECC succeeded in securing the availability of the required medicines throughout this quarter by having stocks of medicines in each center and in the main store. However, some delay happened due to the tight closure.

UPA thankfully agreed to support NECC in terms of purchasing medication for the year 2017; also ANERA continues providing NECC medical store with in-kind donations (medicines and medical supplies), IMC also supported NECC in terms of offering drugs and medical supplies to be dispended during emergency. In addition to NECC regular partners who continue supporting the purchasing of medication to patients. During this quarter the number of prescriptions dispensed to patients reached 16,047 in the three localities.

Table (8) No. of Prescriptions dispensed per area

| Clinic | No. of prescriptions |
|---------|----------------------|
| Shijaia | 6117 |
| Darraj | 5933 |
| Rafah | 3997 |
| Total | 16,047 |

3.2 Psychosocial Support Program

The psychosocial component of NECC health program is consistent with the NECC mission, strategies, and objectives. The overall objective of the program is to promote the psychosocial status of the served community particularly women and children.

The program focuses on the Palestinian families attending the health centers, vocational training centers, secretarial center, advanced dressmaking center and NECC staff in cooperation and coordination with relevant organizations.

Given the fact that an increase in the number of children with psychosocial problems leads to an increase in demand for psychosocial services; the continued occupation and political instability constitute a major source of anxiety for young people. *UNFPA and Higher Council for Youth and Sports, Status of Youth in Palestine, (2014)*. In Gaza, youth reported fear of death, injury, war, and loss of work.

At the personal level, economic hardship represents the major source of anxiety (higher among males (29%) than females (15%)), followed by labour and family-related issues⁷. Of the compounded psychosocial vulnerabilities facing youth and adolescents, economic hardships have the greatest influence on deteriorating their psychological status.⁸ Youth linked many problems to the economic situation: domestic violence, low educational attainment, inadequate socialization, insufficient recreational activities, and dysfunctional relationships between adolescents and their parents. Lack of electricity and other basic services or infrastructure also create many stressors among youth. At school, male youth experience violence, while in the home, girls were more exposed to domestic abuse than their male peers. The closure and repeated Israeli military operations have traumatized many people who have high levels of post-traumatic stress disorder (PTSD), with chronic symptoms including high levels of anxiety and psychosomatic reactions.⁹ Young people in the Gaza Strip suffer from PTSD and other forms of anxiety, depression, and attention deficit disorder, conduct disorders, increased violence, loss of hope, bad memories, nightmares and bed-wetting.¹⁰

Cases with mild mental health problems were managed by the nurse or nurse-midwife, while those with moderate to severe problems were referred to the counselor for longer term management. Very severe and complex cases were referred to specialized psychiatric centers.

The integration of mental health within PHC added value to psychosocial support program through adopting standardized measures which include measures of psychosocial wellbeing, mental health and beneficiary satisfaction with services and service providers such as pre and post (SDQ¹¹) for children and

⁷ Ibid.

⁸ Abu-Hamad, B., Jones, N., Bayoumi, N. Al, & Samuels, F. *Mental health and psychosocial service provision for adolescent girls in post conflict settings: The case of the Gaza Strip*, Gaza, 2015

⁹ Ibid.

¹⁰ Ministry of Health, *Health Sector Strategic Plan: Gaza Governorates 2014-2018*, (Palestine 2014).

¹¹ SDQ: strength and development questionnaire.

parents, (PHQ¹²) and (GAD¹³) for PHC screened cases, (CRIES-8¹⁴) for PTSD children cases and (PCL) for PTSD¹⁵ adults (Edinburgh scale) for post natal depression cases.

It's worth mentioning that NECC has developed a management information system for psychosocial support program to get more accurate data, analysis and statistics.

Table (9): Main psychosocial support program achievements during the reporting period.

| Activities and target groups | Shijaia | Darraaj | Rafah | Total |
|--|--|-----------------------------------|------------------------------------|------------------------------------|
| School children (6-15) years targeted through problem solving approach | 100 children | 84 children | 53 children | 273 children |
| Kindergarten children serve through cognitive behavioral therapy | 185 children | 60 children | 125 children | 370 children |
| Individual counselling for school children | 7 children | 3 children | 3 children | 13 children |
| Individual counselling for women /mothers | 19 women/mother | 47 women/mothers | 5 women/mothers | 71 women/mothers |
| Family counselling for mothers with children suffer from psychological disorders | 26 Family counselling | 20 Family counselling | 8 Family counselling | 54 Family counselling |
| Psycho education sessions for PHC beneficiaries | 7 sessions for 195 women/mothers | 19 sessions for 632 women/mothers | 13 sessions for 250 women /mothers | 39 sessions for 1077 women/mothers |
| General psychosocial consultations | 54 consultations | 120 consultations | 40 consultations | 214 consultations |
| Group counselling for mothers and or/women with similar psychological problems | 0 mothers/women | 30 mothers/women | 0 mothers/women | 30 women/mothers |
| Screening and detection of mental health problem in PHC patients managed by health staff | 18 mild cases from PHC who screened and detected , received guided self help 315 EPDS scale filled for postnatal cases to detect postnatal depression , 10 were discovered complained of depression that's mean 3.1% were suffered from depression during postpartum period | | | |

¹² PHQ: patient health questionnaire.

¹³ GAD: Generalized anxiety disorder.

¹⁴ CRIES-8: Children impact of Event scale.

¹⁵ PTSD: Post traumatic stress disorders.

3.3 TVET Program

The TVET program is overly aimed at enlarging the prospects for work and employment for the Palestinian youth in Gaza Strip in order to contribute to enhancing their economic and livelihoods conditions given the unprecedented unemployment rate among youth (triggering about 60%).

In direct response to the community needs and labour market demand and as part of its strategic plan, NECC is consistently committed in approaching its vocational training program through providing quality TVET service based on competency based approach which is relying on transforming skills into work.

With regards to TVET Program, NECC runs four vocational training centres offering seven vocations/trades: two centres for male students (with four courses to select from) and two for female students (with two courses to select from), as follows:

1. **The Gaza City Vocational Training Centre (Gaza City VTC)** offers multiple-period vocational training courses that target disadvantaged boys aged 14-16 years old who have dropped out of school. They can choose to train either in (I) Carpentry and Furniture making (Diploma for two years), (II) Metal and Welding works (Diploma for two years) or (III) Aluminium works (Diploma for one year) or (IIIV) Refrigeration and Air conditioning (Diploma for two years).
2. **The Vocational Training Centre at El-Qarara (south of the Gaza Strip)** provides a two-years Diploma course in general electricity skills and motor and transformer rewinding that is offered to young men aged 16-23 who finished grade ten of school .
3. **The Secretarial studies and English Language Centre** offers a one year intensive Diploma in secretarial studies to young women who have finished their secondary studies (High School grade or locally known: Tawjihi).
4. **The Advanced Dress Making Centre** offers a one year Diploma course in tailoring provided to young women.

During the reporting period (January – March 2017), **246** students (**201 males** and **45 female** students) received training through NECC-VTC's. The total figure of 246 youth includes the following:

- ▶ **35** male students were graduated (20 Carpentry, 15 Welding and Metals) from the program in January 2017.
- ▶ **63** of second-year trainees continued their training at Gaza Shijaia (38 students) and El-Qarara VTC's (25 students) for males respectively.
- ▶ **148** of first-year students (103 males, 45 females) enrolled out of totally 369 who applied for the 2016-2017 scholastic year (in September 2016).

The table (10) below shows the distribution of the students of Gaza VTCs and VTC of El-Qarara during the reporting period:

| # | Program | Duration (Year) | Graduates (2017) | Current Enrolment | | Total number of existing students (March 2017) |
|---|---|--------------------|---------------------|----------------------|-------------------|--|
| | | | | 1 st Y | 2 nd Y | |
| 1 | Carpentry and Furniture Making | 2 | 20 | 25 | 22 | 47 |
| 2 | Metal and Welding Works | 2 | 15 | 18 | 16 | 34 |
| 3 | Aluminum Works | 1 | - | 17 | - | 17 (*) |
| 4 | HVAC | 2 | - | 19 | - | 19 (*) |
| 5 | General Electricity and Motor Rewinding | 2 | - | 24 | 25 | 49 |
| - | Sub-total (males) | | 35 | 103 | 63 | 166 |
| 6 | Secretary and English Language | 1 | - | 21 | - | 21 |
| 7 | Advanced Dressmaking | 1 | - | 24 | - | 24 |
| - | Sub-total (females) | | 0 | 45 | - | 45 |
| - | Total | | 35 | 148 | 63 | 211 |

- (*): This scholastic year (2016-2017) is the first year for commencing vocations of Aluminum works (separately from Welding) and HVAC¹⁶.
- The "last 3rd Year class" students (carpentry and welding at Shijaia VTC) were graduated in January 2017 after doing their external training and final exams. NECC has shifted to the 2-year period courses from this scholastic year and on.

This scholastic year will be as a pilot in the TVET provision pathway, at the end of the year there will be evaluation measures being taken including soliciting feedback from all concerned stakeholders such as students, graduates, instructors and trainers, supervisors and labor market representatives in order to further strengthen this course. This will be a very supportive and prominent best practice measure aimed at its end lines to likely achieve a robust, unique and suitable curricula modules in accordance with the labor market demands and requirements.

3.3.1 AutoCAD approaching and training:

In a related context on the outcome level, in terms of the curricula development, a new approach was commenced as of inserting the CAD software learning inside the TVET delivery for students in the "industrial" professions/trades of carpentry, metals and welding and electricity starting from the current scholastic year and on. Giving the knowledge of CAD software to our students inside the designated VTCs will open wider horizons for them to better understand the architecture of the industrial

¹⁶ HVAC: heating, ventilation and air conditioning.

products/exercises and afterwards, providing them with skills and practices to likely getting easier to enter the labor market and get jobs based on the industrial background they gain.

As well, NECC has applied for a proposal to GIZ through their EU funded program aiming at the provision of a full-equipped computer lab at Shijaia VTC; the proposal was approved by GIZ and we are currently in the preparation phase.

In cooperation with Palestinian Federation of Industries (PFI) and the private sector entities, the NECC trainees who graduated late 2016 had been placed in various offices, companies and workshops for a period of six-eight weeks to undertake external training with follow-up made by the social workers and NECC-TVET instructors and supervisors. The trainees were distributed to those workshops and companies on the basis of the professions and trades they follow. This external on-the-job training is an integral part of students' curricula that they have to finish before they graduate and get their certifications from NECC vocational centres.

In terms of the new professions/trades offered by NECC-TVET program, the following paragraph gives background information about the new context and updates regarding the program:

- ▶ According to GIZ¹⁷ and Ministry of Labour conditions, the training period for a person to become officially qualified in carpentry or metals works is optimum to be two years so accordingly, the training period for this diploma at NECC-VTCs was reduced from three years to two years.
- ▶ Likewise in terms of GIZ and MoL conditions, the Aluminium department was separated from welding and metals so, Aluminium works became a separate profession with a one year training program.
- ▶ Starting from December 2016 a new vocational training diploma in HVAC was commenced in partnership with GIZ through EU funding program for TVET in Palestine. The diploma is similarly for a total period of two years including external on-job training. Now NECC has one group studying at the first year, there will be a second group joining in next September.
- ▶ This diploma is mainly specialized in heating and cooling systems, air conditioning and refrigeration implications; the 1st year will be focusing on refrigerators while the 2nd year will be focusing on heating and cooling systems especially air conditioners.
- ▶ Note: the numbers of enrolled students in all professions/trades are illustrated in table (18) – p 26.

NECC is striving to link graduates with the labour market. In that endeavour, NECC provides support to graduates through market connections, skills-upgrade courses, and occasionally job creation initiatives and small grants in cooperation and partnership with a various network of organizations.

NECC realized good records **with regards to livelihood improvement for the TVET graduates** through the different initiatives it has been engaged in for benefit of the graduates quietly on the short-term level. However, still there is a need for assessing and tracking the longer term outcomes those initiatives have impacted on the different aspects of socioeconomic context of the graduates and their families' lives. We are planning to approach new techniques for doing this longer term tracking in the soon future.

¹⁷ GIZ: German Technical Cooperation Agency.

In line with the on-job training initiatives, NECC commenced an on-the-job training project funded by Caritas France targeting 50 NECC ex-graduates from the last three years (2014-16) including an equal amount of graduates from each of trades of carpentry, welding, electricity, dressmaking and secretary (10 beneficiaries from each of the five trades). The project started in December 1st, and will be lasting until May 30th, 2017.

Additionally, NECC was involved in a co-partnered on-the-job training project led by Islamic Relief lasting for four months starting from October 2016 and lasted until February 2017. Among the approximately 550 beneficiaries of the whole project including both university and TVET graduates, graduates of NECC trainings comprise a significant portion as 82 NECC ex-graduates from the last three scholastic years (2014-15-16) have been involved in this valuable opportunity. A group of the NECC beneficiaries under this project have been placed at NECC different premises including clinics (for paramedical university graduates) and VTCs for TVET graduates of course.

Alongside the on-job-training course, in addition to the daily work experience the beneficiaries have been receiving a group of public lectures including important topics such as career counseling, work ethics, gender, entrepreneurship and others.

3.3.2 Curricula Development:

- During reporting period, NECC continued and finalized the process of updating NECC-TVET curricula for the five identified professions as GIZ recruited local and international experts to work on curricula development with NECC trainers based on the “complex tasks approach CTA”. The expert and NECC trainers worked in full cooperation with the consultants to develop and update the curricula. It is worth mentioning that this year will be a pilot for the curricula.
- It is worth mentioning that NECC is comprehensively developing and upgrading its TVET training techniques. In that context, CTA is standing for an approach utilizing social, personal, behavioral and technical skills and knowledge of a trainee in the process of training and response to clients and service demanders.

Currently, the training curricula of refrigeration and air conditioning is being developed in cooperation between NECC trainers and GIZ experts and consultants on the basis of the CTA approach similarly as the other already developed professions/trades.

3.3.3 3rd TVET Week:

- Adhering to its slogan “TVET Now”, The 3rd TVET-Week event highlighted the coherent and valuable approach of TVET in the Gaza Strip introducing new TVET programmes to the community and enhancing the community acceptance to such kind of education and improve its image as a pillar for partnership and employment for youth in the Palestinian community.
- The TVET-Week ceremony that was held at the Shalihat Resorts on Gaza beach was run under the auspice of Minister of Labour and in partnership between the German Technical Cooperation GIZ, the Islamic Relief in Palestine and the Belgian Technical cooperation BTC where TVET institutes included NECC, ministry of labor VTCs, University College of Applied Sciences, Palestine Technical College -

Deir al Balah, Abdel-Mo'ty Rayyes Vocational Secondary Girls School, Deir al Balah Industrial Secondary School and others participated in this important ceremony.

- Valued speeches from the honoured EU, GIZ, Islamic Relief and BTC guests mentioned the stages of their support to TVET institutions in Palestine in General and particularly Gaza Strip and asserted on their commitment in continuing their support to the Palestinians in all aspects and further support to TVET sector in the upcoming period.
- The speeches were followed by exciting shows included Dabka and Funny Sketch where the opening of the booths took place after the guests' speeches.
- NECC booth included works prepared by NECC-VTCs students particularly from dressmaking, electricity and aluminium where the students themselves were in the booth welcoming audience and representing their professions.
- A promo film was conducted keeping pace on the different professions that TVET institutes are providing through the EU support, the promo film was broadcasted along the TVET Week.



Representatives participating in the ceremony



TVET Week reception



Minister of Labor opening the ceremony



NECC students participating in reception

3.3.4 Relations and Networking:

NECC has been involved in a comprehensive network joining all TVET providing institutions in the Gaza Strip. The network is including TVET organizers and accreditors such as Ministry of Labor considering that it is the governmental party that gives the due certifications for our vocational diplomas.

3.3.5 LET-Council¹⁸:

NECC-TVET Program Participated in all the meetings that were held for purpose of the LET Council formation, establishment and enforcement late 2015.

- It is worth mentioning that NECC is a member in 2 subcommittees of the LET-Council which are TVET Capacity Building and Donor Funding.



LET Council is a body gathering all TVET stakeholders (governmental ministries, TVET provider institutes including universities and colleges, NGOs, industrial schools, donors and TVET supporters, etc.). It is aiming at the development of TVET environment and conditions in order to upgrade its abilities towards enhancing youth employability.

As well, the network is including donors of TVET sector in Gaza Strip such as GIZ, Islamic Relief and Belgian Cooperation (BTC) and so many others.

Form other related side, the NECC TVET program has been operating with the full cooperation and integration of the private sector in the whole process; NECC has signed cooperation agreements with Palestinian Federation of Industries “PFI”, and the Palestine Federation of Trade Union “PFTU” in order to support the trainees and approach the outdoor training for them within the workshops following the PFI and PFTU.

¹⁸ LET-Council: Local Employment & TVET Council.

Practically, NECC runs continuous coordination work with those strategic partners in conducting shared capacity building programs, networking and share experience meetings in fields of job creation opportunities, employability interventions and TVET weeks and exhibitions.

- NECC is coordinating as well with training provider institutions from the private sector such as "INJAZ Palestine" in order to conduct training courses for benefit of our VTC trainees in several topics; many courses were conducted by their trainers regarding topics like "my path to professionalism" at our female VTCs and "Be an Entrepreneur" at the male VTCs.

3.3.6 Capacity building courses for TVET staff:

Under the Mennonite partnered project, NECC TVET program conducted a training course entitled "Capacity Building of TVET Staff in Topics of Entrepreneurship and Effective Communication" targeting about 17 NECC staff of TVET Program, tackling main topics of:

- Entrepreneurship; and its applications for TVET students and graduates.
- Neuro-Linguistic Programming; and its reflections in TVET service delivery as well as the communication between trainers and students.
- Body Language; and how to make use of its philosophy, concepts and practices in the scholastic life and life in general.

The training course took place in the period 1st - 4th February 2017 and targeted all NECC-VTCs trainers and supervisors. The course was totally counted for 12 hours on three training days.



TVET staff participating in the course



Training course of "Entrepreneurship and effective communication"



The trainer during the training course



TVET staff participation in the training course



During the training course



During the training course

3.3.7 NECC & Caritas France partnered project:

The project of "Access to Employment for NECC-TVET youth graduates in Gaza Strip" which has been running in partnership with Caritas France (Secure Catholique) starting from November 2016 and lasting until May 2017; the total period of project is eight months including six months of employment for the graduates (from December 2016 to May 2017).

Targeting 50 graduates; 30 are males from the trades/professions of carpentry and furniture making, welding and metals and general electricity as of 10 per each trade as well, 20 females representing those girls who graduated from VTCs¹⁹ of dressmaking and secretary similarly 10 per each profession.

Aimed at alleviating the worsening economic situations in the Gaza Strip especially among Palestinian youth residing Gaza through providing groups of them with temporary job opportunities as well as integrating them into the local labour market.

¹⁹ VTC: Vocational Training Center.

50 youth beneficiaries divided into 30 males and 20 females holding certificates of NECC vocational training diploma who graduated within the last three years of 2014, 2015 and 2016 were selected as project beneficiaries.

In general, all employer organizations expressed their satisfaction on that NECC cooperated with them through this project as well, their satisfaction about the employed applicants whom they have gusted.

Included in the employment course, the project included – as one of its activities- the conducting of 5 workshops with the beneficiaries where in experts were approached to deliver the life-skills workshops pertinent to topics such as work ethics, entrepreneurship, people with disabilities and work accidents and practical approaches of training. During the reporting period, 3 workshops were conducted out of the 5 workshops.



Workshop entitled "work ethics"



Workshop entitled "work ethics"



Entrepreneurship concepts workshop



Entrepreneurship concepts workshop



Entrepreneurial skills workshop



Entrepreneurial skills workshop

3.3.8 Training program with INJAZ Palestine:

In cooperation with “INJAZ Palestine”, the training program of “my path to professionalism” was held starting from January and lasted for 7 lectures through January and February targeting the female students of secretary and dressmaking departments.

The students experienced new approaches of their life, life skills and how to plan for future.



"My path to professionalism" training for female secretary students



"My path to professionalism" training for female secretary students

3.3.9 “First-aid” training:

In cooperation with the Ambulance and Emergency Unit of MoH, two “First Aid” training courses were conducted targeting VTC female students (two professions of dressmaking and secretary) in separate.



The courses took place in January (for dressmaking) and February 2017 (for secretary); 4 training days during 2 weeks for each group, and was followed by a completion ceremony where the course trainer and MoH representatives participated and honoured in the ceremony.

3.4 Educational Loans Program

Youth and family bread-winners lack proper and adequate job opportunities to support their families and afford education expenses due to the economic situation in Gaza. The students want to improve their knowledge but they cannot afford for the educational expense, they need to find financial aid. Thus NECC continued the implementation of this program for the academic year 2016-2017 to provide educational loans to needy students with zero interest in order to help them complete their university study.

For the reporting period (Jan-March) in the academic year 2016-2017, one masters-degree university student received application and returned back the full eligible application for loans, he received loan within this given reporting period.

See **table (11)** below which shows the numbers of loans granted.

| Education/loan | Bachelor | | | Master | | | Total | | |
|----------------|----------|--------|-------|--------|--------|-------|-------|--------|-------|
| | Male | Female | Total | Male | Female | Total | Male | Female | Total |
| New loan | - | - | - | - | - | - | - | - | 0 |
| Renew loan | - | - | - | 1 | - | 1 | 1 | - | 1 |
| Total | - | - | - | 1 | - | 1 | 1 | - | 1 |

It is noticed from the table that the number of new loan receivables was declined in the reporting period (1st semester of 2017); we think it is attributed to many reasons:

- Bad economic situations which makes the receivable unable to repay the loan.
- Cutting on PNA employees' salaries.
- The difficulty that faced by applicant for loan to bring three guarantors for the loan.

It is worth mentioning that the educational loans program is very distinguished and has a high impact on the lives of receivables as it is providing a source of funding for their university study they can hardly secure from other places.

The beneficiary students are coming from all local universities of Gaza Strip (Islamic University, Al-Azhar, Al Quds Open University, etc.) and their majors are distributed in all specialties (humanitarian studies, politics, arts, languages, and etc.). As well, it provides a hope for poor university students to get access to complete their university education locally and without paying any profits.

3.5 Job Creation

Latterly in late 2016, Two Job Creation projects were carried out and benefited a total number of **132** beneficiaries from TVET program graduates:

- ▶ First, funded by Caritas France, the NECC conducted a job creation project for 6 months period targeting 50 selected graduates whom graduated from NECC-VTCs in the last three years of 2014-15-16.

The project started on 1st of December 2015 and will be lasting till 31st May 2016; the selected beneficiaries were selected out of the applicants previously applied, a selected group of NECC-TVET unemployed graduates. The selected candidates were 50; of which 30 were males and 20 were females, meaning that they were 10 from each profession of carpentry, welding, electricity, dressmaking and secretary.

Stating selection criteria, the NECC carried out a full process of advertising, receiving applications and selecting the winners.

The table (12) below shows the distribution of the NECC-Caritas France job-creation project applicants on the local labor market:

| # | Organization | No of beneficiaries |
|---|----------------------|---------------------|
| 1 | Vocational workshops | 18 |
| 2 | NECC premises | 1 |
| 3 | Companies | 9 |
| 4 | Ministries | 3 |
| 5 | Factories | 1 |
| 6 | Ateles | 3 |
| 7 | NGOs | 12 |
| 8 | University Colleges | 2 |
| 9 | Hospitals | 1 |
| - | Total | 50 |

- ▶ Second, through cooperation with Islamic Relief - Palestine (IRPAL), the NECC has been running a Job Creation project starting from October 2015 and will be lasting till the mid of April 2016.

The project aimed at alleviating the worsening economic situations in the Gaza Strip especially among Palestinian youth residing Gaza through providing selected groups of NECC-TVET graduates with temporary job opportunities as well as integrating them into the local labor market. This project patch targeted about 82 youth beneficiaries distributed on all NECC-TVET professions similarly.



Follow-up visit to a dressmaking Job-Creation beneficiary



Follow-up visit to a secretary Job-Creation beneficiary



Follow-up visit to a secretary Job-Creation beneficiary



Follow-up visit to a dressmaking Job-Creation beneficiary



Follow-up visit to an aluminum Job-Creation beneficiary



Follow-up visit to a secretary Job-Creation beneficiary



Follow-up visit to a dressmaking Job-Creation beneficiary



Follow-up visit to a welding Job-Creation beneficiary

3.6 Advocacy program

As was aforementioned in TVET program part, NECC participated in 3rd TVET Week event, in order to raise awareness on youth employability promotion and advocate their important and effective role in the community development through TVET approach; the event took place in the period 24-27th of April.

NECC continued to collaborate and coordinate for the visits of international partners to Gaza Strip including visits to NECC various programs. The number of delegations representing many different organizations hosted during this reporting period was 8. It is worth noting that there was difficulty for visitor to get permits to enter Gaza through Erez crossing.

4. Cross cutting issues:

4.1 Human resources

It is worth illustrating the human resources at NECC. The total NECC Staff is approximately 86 staff. These committed people work in fields such as administration, fundraising, communications, human resources, finance, information technology, health education, and customer service.

The breakdown of human resources by category is illustrated below in the table below. The total NECC Staff during the reporting period is approximately **127** staff members. These committed people work in fields such as administration, fundraising, communications, human resources, finance, information technology, health, and education service. **Table (13)** below declares the human resources of NECC.

| NECC Programs staff | Male | Female | Total |
|-------------------------------------|------|--------|-------|
| Number of full-time staff | 44 | 42 | 86 |
| Number of part-time staff | 22 | 11 | 33 |
| Number of other staff ²⁰ | 1 | 7 | 8 |
| Total number | 67 | 60 | 127 |

4.2 Capacity building and trainings

Capacity building is an ongoing process through which individuals, groups, organizations and societies enhance their ability to identify and meet development challenges. NECC role is to facilitate learning. This is partially accomplished by providing resources and training, but is most effectively done with a partner.

During this reporting period, **11 days** of different trainings were attended by NECC staff for capacity building. The trainings were conducted by different national and international organizations at different locations within Gaza Strip.

Table (14): Main trainings and workshops attended by NECC for capacity building from 1st January-31st March 2017:

| # | Training/workshop Subject | Participants | No. of days | Trainer / Organizer | Period | Place |
|---|---|--------------------------------|-------------|---------------------|---------|------------------|
| 1 | LET Council: CVET projects launched by EU | 1 NECC staff: TVET coordinator | 1 | GIZ/Gaza | January | GIZ/Gaza |
| 2 | Basic Life | 2 NECC staff (pharmacists) | 1 | Jozour organization | January | Al-Mashtal hotel |

²⁰ Volunteers

| | | | | | | |
|----|--|---------------------------------|---|------------------------|----------|------------------------|
| 3 | CPWG | 1 NECC staff: PSS coordinator | 1 | UNICEF | January | UNICEF |
| 4 | Persons with disability | 26 NECC staff from all programs | 1 | NECC | January | NECC |
| 5 | Enhance work with protection cluster | 1 NECC staff: clinic supervisor | 1 | UN Women | January | UN Women |
| 6 | GBV | 1 NECC staff: clinic supervisor | 1 | IMC | January | IMC |
| 7 | Pre Conception Care | 2 NECC staff: health program | 1 | Ministry of Health MoH | | MoH |
| 8 | Learning situations | 2 NECC staff: TVET program | 1 | GIZ | February | Light House Restaurant |
| 9 | Consultation meeting | NECC executive director | 1 | UNICEF | March | UNICEF |
| 10 | Initial gender assessment/analysis methodology and tools for engagement and feedback. | 1 NECC staff: health program | 1 | IMC | | Al-Mathaf hotel |
| 11 | “Psychological First Aid and Referral including Mental Health Assessment and PTSD Recognition” | 1 NECC staff: PSS program | 1 | IMC | | Al-Salam Restaurant |

It is worth noting that NECC staff used to attend all monthly meetings of Health Nutrition sector, MHPSS, Child Protection Clusters, Family Planning Committee as well as TVET Partner Meetings.

4.3 Gender

Gender equality and female empowerment are now universally recognized as core development objectives, fundamental for the realization of human rights, and key to effective and sustainable development outcomes. NECC-Gaza considers gender equality as a cross-cutting issue and over the years members have endeavored to promote gender sensitive approaches to development and humanitarian assistance.

NECC is still committed deeply to gender equality through its Gender Equality Policy. The NECC Gender Policy focuses on the principles of promoting gender balance in staffing and representation, promoting gender equality in access to health quality system, PSS and promoting gender equality in socio-economic empowerment.

Recent trends show that labor force participation has remained almost constant for males but increased significantly among females, rising 70% from 2001 to 2014 for those 25-54 years of age. Many males and females who are willing to work cannot access the labor market. This is especially true for youth aged 15-24, for whom the unemployment rate was 41% and for women, with 39% unemployment. **(Palestinian 2030 full report)**

During the reporting period, NECC has strived to create gender parity in the hiring of men and women to NECC in terms of both quantity of both sexes and also the types of positions they fill - The executive director and his assistant are males, otherwise there is balance between male and female throughout the organizational hierarchy; e.g. the head of the Health department is female, whereas the head of the TVET department is male. Currently, 47.3% of NECC staff is females and 52.7% are males.

One of NECC main core values is to serve people irrespective of their faith, color, gender, political affiliation or geographical locality. Approximately 60% of beneficiaries are females, recognizing the important role women play as caregivers within the household. PSS program targets equally children from both genders without any kind of discrimination. The NECC health program offers health services through general clinics equally to males and females; no intentional discrimination was practiced in relation to gender or any kind of discrimination.

Additionally, NECC provides equitable opportunities for male and female students in its TVET offered trades to develop their career in order to be able to more easily get decent job employment opportunities. The new enrolled female students' percentage is 28% and 72% for males the increase of male percentage could be explained by the fact that NECC runs five TVET professions for males versus two professions for females.

4.4 Supervision, Monitoring and Evaluation

Monitoring and evaluation are very important to follow implementation and outputs systematically, measure the effectiveness, and identify the most valuable and efficient use of resources. The NECC enjoys a very committed, dedicated and effective management; each center has a supervisor, and the three supervisors are well-trained have good managerial skills. At the main office level, the NECC Executive Director and the Health Program Coordinator monitor and supervise the implementation of the health program closely.

Monitoring supports NECC staff and management to comply with their scope of work and to timely meet objectives. Monitoring helps NECC tracking the progress of activities and achievement made in reference to the concerned and relevant indicators of objectives.

In consistence with that, NECC constantly monitor the implementation of its interventions through performing a clear action plan, effective reporting system, supervisory visits, staff meetings on a regular basis, beneficiaries and clients perspectives through questionnaires and checklists.

NECC programmers coordinators supervise the overall progress of the programs and revise the strategic approach in cooperation with the Technical Consultants, based on information provided by the staff in

the field and submit the information to the coordinators. At the field level, a supervisor inside each health center overall manage the field work.

The technical consultant oversight the implementation and focus on covering the monitoring and expert role. The Executive Director of the NECC provides oversight supervision and strategic direction to the programs operations, while the senior accountant do the monitoring for the financial issues and follow up in coordination with the executive managers and the programs coordinators.

For more monitoring to PSS program, NECC is developing with support of Act for Peace a web service/program in order to add PSS to MHIS that is used inside the health centers and is in processing to develop a management information system for TVET program.

Health facility assessment and Emergency Preparedness Readiness (EPR) assessment were conducted by IMC team to identify needs and priorities of NECC clinics and to assess the preparedness of NECC to any upcoming disaster in order to support NECC with emergency medicines and supplies to be used during emergency times.

NECC is currently considering the findings of the field monitoring report shared by Act for Peace and will be discussed in the upcoming proposed activities

The technical consultant trained the key staff about balanced score card, and how to develop indicators. Regarding TVET program; TVET program is utilizing a group of evaluation forms for the aim of assessing the performance and progress within the educational and training process/cycle tackling all inputs. The whole educational process is being continuously assessed; evaluation forms are being used to evaluate trainers, curricula, tools and equipment, physical environment including safety measures and etc.

4.5 Communication and Coordination

Coordination with other organizations depends on the nature of the activity undertaken. In NECC, ongoing coordination and cooperation with UNRWA, the Ministry of Health, Ministry of Labor, UNICEF, Private sector, NGO's and CBO's is part of our work and its implementation.

Within the context of the Palestinian healthcare system, as it has four main providers: the MoH, UNRWA, non-governmental organizations, and private for-profit providers. Coordination is extremely important as it improves the efficiency of operations by avoiding overlapping efforts and duplication of work. Also, coordination among health service providers increases the quality of services, patient satisfaction, and prevents wastage of resources. Thus, it is substantially important that NECC fully coordinate services with other providers, in particular the two main providers: MoH and UNRWA

- In the Primary Family Health Care Centers, NECC has good coordination with Ministry of health to get license of the family care centers for the New Year and to provide the legal coverage of the programs operations.

- Coordination with WHO in terms of attending Health nutrition cluster regular meetings held monthly to share updates, experiences and knowledge.
- MOH provides advanced diagnostic and therapeutic interventions even hospitalization to complicated cases referred from NECC health centers.
- Coordination with the local and international organizations takes place as much as possible to obtain drugs, humanitarian assistance and other assistive modalities. For example NECC contacted ANERA for in kind donation of medication.
- Coordination with preschools and CBOs to provide outreach health education activities and PSS activities at these organizations.
- Coordination with the Thalassemia Society to do hemoglobin electrophoresis for cases that didn't show improvement in hemoglobin level.
- Coordination with nutrition sectorial committee organized by UNICEF.
- Referring severe cases with mental disorders identified at NECC centers to MOH/Department of mental health.
- NECC TVET program is being running with the full cooperation and integration of the private sector in the whole process; NECC has signed cooperation agreements with Palestinian Federation of Industries "PFI" the Palestine Federation of Trade Union "PFTU" in order to support the trainees and approach the outdoor training for them within the workshops fulfilling the PFI and PFTU. During the reporting period: 80 external workshops and 5 local institutions in Gaza from private sectors received trainees from NECC as a part of the practical training of TVET program or benefitted from NECC VTC's.
- Practically, NECC runs continuous coordination work with those strategic partners in conducting shared capacity building programs, networking and share experience meetings in fields of job creation and employability interventions and TVET weeks and exhibitions.
- NECC is coordinating as well with training provider institutions such as Injaz Palestine in order to conduct training courses for our VTC trainees in several topic; many courses were conducted by their trainers in favorite of our trainees in titles like "my path to professionalism" at our Shijaia VTC and "Be Entrepreneur" at Qarara VTC.
- In a similar approach, NECC organized one specialized training courses targeting a group of our Qarara-VTC and Shijaia students in "Advanced Electronics" in cooperation with a specialized company in this field in Gaza.

External relations and communication:

- NECC implemented all its programs activities in accordance with the local protocols of MOH either for MCH care, nutrition, PSS.
- On the partnership level, NECC continues partnership with UNICEF to promote postnatal care to mothers and newborns by receiving at least three PNC sessions two at home and one at the health center, and management of moderate and severe acute malnourished cases.

- Additionally NECC succeeded to get approval from EME to get a fund to promote the antenatal care program through focusing more on high risk pregnancies and starting provision of preconception care at NECC centers.
- A proposal was submitted by NECC and accepted by IMC for the 2016-2017 years entitled "Promoting nutritional status, of vulnerable children under 5 years in Rafah area". This may continue as a part of 5-years USAID-funded project: Envision Gaza 2020: Health Matters, starting from 2016 till 2020..
- Regarding TVET, NECC is running its TVET program in full engagement and partnership with all related stakeholders; on the governmental level, Ministry of Labor is accrediting our TVET trades annually and certifying our vocational training diploma provided to our TVET graduates once graduated.
- New proposal was submitted to **DCA-NCA** for TVET program funded by NORAD.
- New proposal was submitted to **DCA-NCA** for health program including nutrition
- NECC in cooperation and partnership with "Secure Catholique France" prepared a joint proposal in the topic of economic empowerment for NECC –TVET graduates planned to take place in period 2017-2020.
- In the prospect of our partnership with Islamic Relief, the NECC has recently ended a job creation project with Islamic Relief.
- On the civil society level, NECC is securing strategic and sustained relationships with TVET providing institutes, NGOs, colleges and universities etc.
- NECC has a membership in the in the LET-Council; a framework gathering all TVET providers and stakeholders in Gaza Strip (and one in the West Bank) currently led by GIZ with a general coordinator elected and introduced by the participant institutions and conjoining 4 sub-committees, NECC is a member in two of them (Sub committees of TVET capacity building and donor funding).
- On the other hand, NECC is running its TVET program with the full cooperation and integration of the private sector in the whole process so that NECC has signed cooperation agreements with Palestinian Federation of Industries "PFI" the Palestine Federation of Trade Union "PFTU".
- The relationship is compassing issues of cooperation in encountering barriers that hampering the implementation of the program and accessing it into the labor market and approaching the outdoor training for NECC students within the workshops fulfilling the PFI and PFTU.
- As well, the NECC is initially considering the labor market needs when it intends to either open the new TVET professions or develop its current curricula and that's why it convened with all stakeholders including labor market while currently developing the training curricula.
- Moreover, NECC has good coordination with private sector in terms of external practical training for TVET students and graduates, also in terms of job creation projects when implemented NECC contacts the private sector. It is worth adding that NECC is well trusted and asked regularly from

the private sector to nominate graduates from its centers in order to work in private companies, workshops, etc.

4.6 Policies

NECC is still committed to its child protection policy, code of conduct, gender policy, and Anti-fraud policy. NECC staff continued the mainstreaming of child safeguarding, through providing sessions and distributing brochures and booklets to the beneficiaries at the health centers and TVET-VTCs as well.

It is worth mentioning that NECC counsellors keep an eye on child protection during conducting any of PSS activities/interventions to detect any child abuse case even no formal reporting about them. During contracting with service providers, NECC signed all contactors to NECC policies and keep on its commitment.

4.7 Current problems and constraints

Donor support has significantly declined in recent years and, naturally, aid cannot sustainably make up for adequate private investment, constrained by weak investor confidence due to the ongoing restrictions and the lack of political progress which severely affects resilience and improving livelihoods.

With the ongoing conflict everywhere in the Middle East, there is donor's shift to other areas like Syria, Libya and refugees in Lebanon and Jordan. This has tightened the ability of many NGOs to serve beneficiaries. Also, UNRWA faces shortage of resources which affects their programs targeting refugees. **(OCHA, 2015)**

During this reporting period, the number of displaced people staying in collective centers (shelters) has been gradually decreasing, and currently UNRWA has closed all its sponsored shelters. Still many people are displaced and living with relatives and friends, in tents or caravans. Plans to rebuild and rehabilitate demolished households in Gaza are still on paper and many people who lost their houses are still living in temporary unhealthy residential places including from areas served by NECC.

As a result, the exposure of those people to health risks has increased including the spread of communicable diseases, increased food insecurity, nutritional related disorders, wide spread of psychosocial issues and spread of sanitary related conditions which increased the burden on NECC clinics and increased demand at our facilities because other facilities (especially MOH) were affected by the siege or directly targeted during the war. Also, the economic pressure on families has decreased their ability to contribute to medical fees.

Difficulties in securing and delivering the needed equipment and disposables due the tight restrictions on the entrance of goods, materials, supplies...to Gaza.

The unavailability of the raw materials in the local market that was greatly affected by the tight closure, even the available commodities are purchased with double prices. NECC has good strategy in maintaining stock of materials to be used, however NECC faced a real challenge to get funds for that.

Due to frequent power cuts, NECC consumption of fuel needed for electricity generators was constantly increasing and still. The availability of fuel in the local market and its high prices remain a challenge. However, NECC maintained adequate strategic stock of fuel even this was not anticipated.

Frequent electricity cuts that exceed 20 hours per day especially in winter storms and cold weather affected negatively all Gaza people life including the provision of health services. As the electric generators at NECC health centers capacity didn't meet the needed electricity for the centers.

NECC faced some problems in procurement of some materials such as wood of certain thickness as well as some equipment needed for electricity training.

- Continue the partnership with UNICEF in terms of a new project for PNC promotion in the three served areas
- New proposal was submitted to **DCA-NCA** for TVET program as a part of Joint Country Program funded by NORAD, the project was approved.
- New proposal was submitted to **DCA-NCA** for the project of "Mother and child health care including nutrition services and psychosocial support".
- Continue partnership with International Medical Corps (**IMC**) in 2016 -2017 as a part of a 5 years project "Gaza 2020: Health Matters"/USAID fund. It aims to strengthen the primary health care services, nutrition services, secondary health care and emergency preparedness in Gaza.
- NECC in cooperation and partnership with **Secure Catholique France** prepared a joint proposal in the topic of economic empowerment for NECC -TVET graduates planned to take place in 2016-2019, the project was approved and will be launched in July 2017.
- Developing new strategic plan for the next 5 years 2017-2021.
- Developing fund raising strategy for NECC.
- Strengthening communication and networking to secure fund.

5. Success Stories

5.1 From health program

▶ **Story 1**

The lady/ Yasmeen Emad Abu Tawela was born in 1998. She is a pregnant woman for the first time and she used to follow Shijaia Clinic for antenatal care. Yasmeen is a young lady she is 18 years old which encourage clinic `staff to provide her services and advice.

In the first visit she followed her pregnancy and she was good. During her visit the hemoglobin analysis was 11.7 and the Urine analysis was 2-3.

On 5/04/2016 she was in the ninth month of pregnancy and the hemoglobin result was 11 gm/dl. Everything is normal in which the staff provides services, guidance, help and care. In 13/05/2016 she had got her baby named "Ali".

On 16/05/2016 The NECC Clinic made a home visit to see Yasmeen and her baby for reassurance. The baby's weight was 3.2 kg, his height was 50 cm, his head circumference was 33 and his body temperature was 37.

The mother also made some analyses like Random blood sugar (RBS) which was 116, Blood pressure was 90/60 and body temperature was 37 but the hemoglobin was 7g/dl. This result made the nurse repeat the analysis to approve it because there is a difference between the hemoglobin analyses. The lady hasn't experience any health problems, and the family doesn't notice any problem. So, the NECC provides her iron, vitamins medicine and guides her to go to the hospital when she doesn't feel well.

The NECC Clinic called the lady to know if she go to the hospital. Indeed she went there, she was suffer from postpartum bleeding and she got the appropriate care there.

In 09/05/2016 The NECC visited the lady to provide the appropriate services, guidance, and to give her some brochures about anemia and its effects.

The hemoglobin result was 8.5 and we can notice improvement, the baby is feeding well and there are no problems. Finally, the lady said that she is thankful for the NECC Clinic services, saving their lives, and attending visits in appropriate times. Thanks God for their guidance and referring me to the hospital.

5.2 From TVET program

▶ Story 2

Mohammed Nizar Al-Abadla, 25 years old describes the impact of his study and graduation from the General Electricity and Motor Rewinding program at El-Qarara VTC.

I was graduated from El-Qarara VTC in October 2016, I am 25 years old and live with a family consisted of 7 persons in our owned house in township of El-Qarara in Khanyounis area to the south of Gaza Strip.

My father is a farmer, he is the solely breadwinner who fulfills the family needs as he is gaining income resulted by farming the land that our family owns.

I have three male brothers; one is older than me and the other two are younger and at schools, the older brother is in working-age now but unfortunately not working.

Actually, I enrolled El-Qarara VTC for a main strive of learning the trade/profession of general electricity as I like this profession since I was young.

During the 2-year training period in the center, I learned a lot about house networks and supplies, control systems as well as motors and transformers rewinding.

My instructors and trainers were very helpful and supportive, they did not hesitate to answer all our questions and inquiries about the scope of electricity work.

Really, this 2-year training program was very useful and full of technical and professional information as well as in terms of the behavior and attitudes perceptions with which I learned a lot in dealing with peers, clients and relations in general.

Most recently, I was so lucky to gain a temporary job under a partnership project between NECC and the Islamic Relief, I have been selected and placed at El-Qarara VTC to do this on-job training.

I have spent my placement assisting El-Qarara VTC supervisor, and his colleagues in doing daily works in terms of logistics, training and some of admin duties where I gain knowledge every day.

Really I am very glad to work in such a position and I hope in the future to build my life through work and to assist my brothers and the family as a whole in securing its basic needs and live with my beloved persons in independence and dignity.



Mohammed is currently working at El-Qarara VTC as a beneficiary of the current Job-Creation project

6. Photo Gallery

Health program









End of report..

Thanks and gratitude..

NECCCRW – DSPR/Gaza Area Committee