



Near East Council of Churches (NECC)
Department of Service to Palestinian Refugees DSPR/Gaza
Area

Progress Report

January 1st through September 30th 2017

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Preface:

This document is the NECC quarterly report for the third quarter of 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 report is to give comprehensive information on NECC programs implementation during third quarter of year 2017 (for period from 1st January till 30th September); 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.

Without doubt, the NECC health and educational programs were designed to support the most vulnerable among this at-risk population affected by the difficult contextual factors prevailing in Gaza. During a time when the official authorities struggled to meet the needs of its population, particularly those related to health, social, and economical issues, the NECC contributed to addressing service gaps. The provided assistance is in line with the international standards and filled an important gap in this regard.

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.

It's our pride and pleasure to express our gratitude to all experts who are timely guidance, and constant support to accomplish the brilliant work.

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:

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

Executive Summary

This Progress Report is covering 9 months of programs implementation during 2017, summarizing achievements in relation to the stipulated 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 second quarter achievements:

Regarding Access to Primary Health Care and Medication, the number of newly registered families has reached **2136** families, while the numbers of the total families benefitted from NECC PHC clinics during this reporting period were **10,323** families.

The number of new pregnant women was **1652** distributed as following: 707 in Shijaia, 505 in Darraj and 440 in Rafah with total of **2566** 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 **1311** deliveries. 74% of the delivered women received quality postnatal care three times after delivery and **85% of those** women passed postpartum period safely without complication.

In terms of family planning, the number of women who received family planning services during this reporting period was **1175** women: 471 at Shijaia, 574 at Darraj and 130 cases in Rafah (target 1000 women per year). The most used tool was the male condoms in Rafah and Shijaia, Pills in Darraj.

Additionally, **2776** new children were assessed at the well-baby service delivery points in the different areas (Shijaia 1100; Darraj, 839; Rafah 837), **10845** children attended the well-baby services and have been screened in accordance with the national well baby protocols, the cases distributed among clinics as follows; Shijaia 4668; Darraj 3663 and Rafah 2514 with total Well-baby visits reached **25245**.

The number of patients above 6 years old as cases examined by doctors has been 8480 while 6548 children under 6 years were examined by doctors and received treatment. The number of cases examined by dentists and received dental care services reached **5659** distributed as; Shijaia 2083, Darraj 1852 and Rafah 1724.

The total laboratory tests that were performed inside the three family care centers during this reporting period have reached **22712** distributed as; Shijaia 10212, Darraj 7903 and Rafah 44597.

With regards to health education, the total number of health education sessions provided to all categories was 1305 sessions for 29,708 participants.

Lectures, trainings, and information events on various topics implemented inside NECC clinics afternoon twice per week named “afternoon activities”, while **183** 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 **224** 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, aluminum works, general electricity and motor rewinding, secretarial studies and advanced dressmaking. Where about **22.7%** out of those trainees are females and the rest of **77.3%** are males.

Regarding **psychosocial support program**; **1549** 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 **3838** mothers and women received PSS either group sessions, individual counseling, group counseling or consultation. Additionally, **160** 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	The main achievement	% of achievement
At least 95% of pregnant women in targeted locality received timely ANC at least 4 visits	99%	Achieved
At least 70% of women in targeted locality received timely quality post-natal care at least twice.	74 %	Achieved
1,200 new pregnant women registered for ANC annually	1652	Achieved
7000 antenatal care visits made annually	14,060	Achieved
1,800 pregnant women received follow up visits, newly registered and on-going	2566	Achieved
1600 postnatal care visits conducted annually	3395	Achieved
12,000 children registered at the well-baby clinic and screened for anaemia and anthropometric measurements	10854	90%
25,000 well baby visits were conducted annually	25245	Achieved
7,000 sick children up to 6 years old received medical examination and treatment	6548	93%
1000 partners received reproductive health services and awareness	1175	Achieved
Over 4,000 women, children and adults in targeted areas receive dental care annually	5659	Achieved
Over 4,000 patients examined, tested and received treatment	8480	Achieved
2000 children received psychosocial support	1549	77.5%
3000 mothers/women participated in psychosocial support activities	3838	Achieved
200 women attending afternoon activities received psychosocial support	151	75.5%

A total of 117 students receive training in carpentry/furniture making, welding and metals, Aluminum work and refrigeration and air conditioning annually	133	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	16	26%
1 to 2 policy/advocacy issues resulted in improving justices and economic status	1	50%

2. Introduction to NECC Organization:

2.1 Description of NECCRW and its programs

NECCRW Brief:

Near East Council of churches Committee for Refugees Work (NECCRW)-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. NECCRW Gaza is an integral part of the Palestinian Society and culture and operates with support from the churches, ecumenical and secular organizations. NECCRW 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. NECCRW 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.

NECCRW 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.

NECCRW 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 preconception, 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.

NECC operates three family health care centers in the Gaza Strip. These three centers are located in El Daraj, Shijaia, and Rafah. The three centers serve a population of 80,000, 100,000, and 20,000 in Daraj, Shijaia, and Rafah, respectively. The NECC's health program offers a comprehensive package of health services, with a particular focus on primary health care services. The bundle of the provided services including essential maternal and child health (MCH) services such as antenatal care (ANC), postnatal care, health education, family planning, well-baby care, psychosocial services, home visits, treatment for malnourished children, and dental services. Additionally, the NECC health program offers laboratory testing and medication.

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-Qararah 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-Qararah, 25 KMs South of Gaza City.

Women VTC's of Secretary Studies and Advanced Dressmaking is located in the NECC main building in Remal, 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...)

Palestinians continue to need humanitarian health services across the opt, particularly in Gaza, where needs have substantially increased in the past year, but also in vulnerable locations and communities in the West Bank. In Gaza, due to the deterioration of the electricity supply over the course of 2017, elective surgeries are being delayed to reserve energy for emergency cases, diagnostic services are put on hold, and Ministry of Health (MoH) primary healthcare (PHC) facilities are at risk of closure. Compounding the electricity crisis is the shortage in medical supplies and continuing access restrictions on the referral of patients in need of life-saving healthcare outside Gaza. Gaza's already overburdened and under-resourced health sector is now on the brink of collapse as essential medicines run out and there is a continuous loss of healthcare staff.

An estimated 1,630 206 million people are in need of humanitarian health interventions across the oPt. The majority of these are people in Gaza, with over 1,226,500 people in need, of whom over 900,000 are refugees (73%). Of the total population in need in Gaza 677,485 (55%), are female, and over 583,814 are children (Humanitarian needs overview, 2017).

In Gaza hospitals, electricity shortages and the lack of drugs and medical disposables are life threatening, particularly for non-communicable disease and emergency patients. Electricity shortages are directly affecting the 14 hospitals, two health facilities, 49 PHC clinics and 22 UNRWA PHC centres, in addition to the refrigeration of blood and vaccine storage in MoH healthcare facilities. 200,000 patients across the Gaza Strip suffering from chronic diseases are furthermore severely impacted by drug shortages disrupting their treatment. In addition, 350,000 emergency and trauma cases risk death or disability due to shortages in essential life-saving drugs in the emergency departments. The gap in availability of essential life-saving drugs has reached a critical threshold of 40% in September 2017, the highest figure since 2014.

The blockade on Gaza will enter its 11th year in 2017. The heavy restrictions on the movement of people and goods in and out of Gaza, in addition to the three consecutive conflicts and the internal political divide, have not only crushed the enclave's formerly trade-based economy, they are also heavily responsible for the sky-rocketing unemployment rates, extreme poverty, food insecurity and contribute to depression, hopelessness and confinement. The blockade also creates high additional costs for humanitarian organizations operating in Gaza Strip, reducing already scarce funds for humanitarian interventions. **(OCHA, 2017).**

Access to treatment for patients referred outside of Gaza and the West Bank is furthermore becoming increasingly restricted. The number of patients seeking permits to access healthcare outside the Gaza Strip has more than doubled since 2012, but approval rates through the Israeli-controlled Erez crossing are dramatically declining, from 92.5% in 2012 to 62.1% in 2016, to 55% in August 2017. The impact of these restrictions can be life-threatening; in the first half of 2017, 12 deaths were reported as a direct result of the permit regime. Every year, 20,000 patients from Gaza are affected by the permit regime.

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. Antenatal care is widely recognized as a critical component of the maternal and child health, Women themselves have insufficient knowledge/awareness of important danger signs. UNRWA-wide data showed that 13.4% of pregnant women were classified as high risk, while 27.7% were considered alert risk. **(UNFPA, 2016)**.

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.

Congenital anomalies have increased from 4 per 1000 births in 2006 to 7 per 1000 births in 2009 and to more than 14 in 2012. That increase may be attributed to the environmental pollution with toxic and carcinogenic metals from the ammunition used in the bombing of Gaza by the Israeli army during invasions and military.

In Gaza, neonates and children under the age of five are vulnerable and need essential health services. In Gaza, 10,000 neonates every year are vulnerable and in need of transfer to nursery and neonatal intensive care units for specialised life-saving treatment¹. In addition, children under five are prone to chronic malnutrition and require treatment and follow-up to prevent impaired physical growth and cognitive development. Approximately 140,000 children under five need essential humanitarian interventions every year².

According to Palestinian Central Bureau of Statistics **(PCBS, 2017)**, the unemployment rate in Gaza stood at 41.1 percent, one of the highest rates worldwide. High unemployment contributes to making people increasingly vulnerable to food insecurity and seriously diminishes their ability to resist economic shocks. It also robs people of the opportunity to provide for themselves and their families thus affecting their sense of dignity and self-worth.

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.

¹ MoH, Annual Report of Hospitals. According to the MOH report in 2015, 25% of pregnant women are classified as high risk, therefore through a twelve - month period, 80,000 pregnant of which, 25% are high risk and 12.5% will result in neonatal cases needing special treatment,

² Health Cluster internal monitoring of cases at key nutritional centres, 2017

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.³

Gaza's only power plant has run out of fuel, leaving 2 million residents of the coastal enclave with only four hours of electricity a day in what the UN cautions could be the tipping point to making Gaza "unliveable."(CNN). The current crisis of electricity cut has serious implications on the health, water and sanitation sectors which have a cumulative impact on the overall humanitarian situation.

The electricity crisis in Gaza has also impacted on the health and well-being of people with disability (PWDs) and the elderly. Since the deterioration of the Gaza energy crisis, the situation of PWDs who depend on electrical medical equipment has deteriorated,⁴ and an estimated total 44,000 PWDs face challenges in accessing treatment.⁵ In addition, 92,500 elderly persons are suffering social isolation and neglect leading to rapid deterioration in their health, and increased trauma incidents

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).**

Electricity cuts resulted in a decrease in water supply at the household due to inability of HHs to pump water to roof tanks and subsequently this negatively affected the sanitary conditions at HHs. The risk of hygiene related diseases is now higher.

The crisis has left Gaza's two million residents living much of their lives in the dark, that impose the adverse impact on their psychological status.

Due to hot weather and lack of adequate refrigeration, food at shops, supermarkets and houses is easily spoiled. This has both financial and psychological adverse impacts.

For several weeks, Gaza's are supplied with less than half of their usual electricity supply (8 hours daily) currently barely 2-3 hours a day – with no signs that this cut will be alleviating anytime soon, fueling distress and frustration among the population. For several years, Gaza's power alternates on eight-hour cycles, with generators providing electricity to those that can afford it in the down times. But lately, there has been only two to three hours of electricity supply a day in total.

³ “Ministry of Health, Health Sector Strategic Plan: Gaza Governorates 2014-2018, (Palestine, 2014).

⁴ PNGO Factsheet, The impact of power outages on people with disabilities in the Gaza Strip, 2017.

⁵ Palestinian Medical Relief Society and National Society for Rehabilitation assessment, 2016. According to Handicap International, the second leading cause of death among PWDs is stroke caused by the lack of timely rehabilitation interventions. Handicap International, Participatory Situational Analysis Report on access of people with disabilities to rehabilitation, livelihood and social services in the Gaza Strip, June 2017

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, etc.) 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
By gender	M	F	M	F	
No of beneficiaries	851	6004	7561	7574	21,990
Total	6855		15135		

3.1.1 Preconception & Ante Natal Care (ANC)

To achieve further reduction in infant and maternal mortality, recently NECC introduced a Preconception Care (PCC) Program in January 2017 which supported by **(EMBRACE the Middle East)**, as an important component of the maternal health care and was fully integrated within the primary health care system. The aim of preconception care is to prepare women of reproductive age to enter pregnancy in an optimal health status. Women are assessed for risk factors, screened for hypertension, diabetes mellitus, and anemia, oral health diseases, given folic acid supplementation to prevent congenital malformation – in particular neural tube defects - and are provided with medical care where relevant. Through the reporting period **1510** of women were registered in preconception care and received preconception care services.

With regards to Antenatal care, 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 1652 distributed as following: 707 in Shijaia, 505 in Darraj and 440 in Rafah with total of **2566** pregnant women who were already registered

and followed up during the reporting period. Furthermore, the number of deliveries reported in our catchments areas during the reporting period (Target 1800 pregnant women per year).

Among the new pregnant women, 368 were primigravida (31%). The total antenatal care visits have been reached 14,060 visits (Target: 7000 ANC visits per year) as the pregnant woman should be follow up monthly during her pregnancy.

Accordingly, 99% of pregnant women followed up in ante natal care clinics at least 4 times during their pregnancy. We noticed an increase regarding ANC number of beneficiaries compared and this could be correlated to the high needs to reproductive health in Gaza as mentioned before by Health Nutrition Cluster especially antenatal care, the increase was noticed in the three localities.

Also, Gynecologists referred 66 complicated pregnant women to hospitals.

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 84.3% while the total numbers of US scans were 4436.

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 at home. During the postnatal visits, the midwife/nurse examine women and their babies to make sure that their health 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 August 2017.

Regarding the postnatal visits, the total number of deliveries during this quarter in the three localities who were registered in ANC was **1311** deliveries.

74% of the delivered women received quality postnatal care three times after delivery and 85% of those women passed postpartum period safely without complication.

NECC succeeded to provide **3395** PNC sessions/visits in three served localities as following: In Shijaia 1094, Darraj 780 and Rafah 493, the sessions were provided to 1311 mothers, 2367 were at home and 1028 at the health center.

13.3% of newborn 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: **88%**.



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 counseling session 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.

During this reporting period, the number of new acceptors was 289 as following: 110 in Shijaia, 109 in Darraj and 70 in Rafah.

Table (3): The total number of beneficiaries of Family Planning and visits disaggregated per area:

Center area	No of beneficiaries	FP Visits
Shijaia	471	1273
Darraj	574	1884
Rafah	130	261
Total	1175	3418

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

However, NECC is facing the problem in getting of all FP tools except condom from UNFPA through MOH as usual. Accordingly, NECC was obliged to procure the available tools from the local market.

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 included growth and development data are calculating according to Z score 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 is aiming 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 the reporting period were as following:

10854 children attended the well-baby services and have been screened in accordance with the national well baby protocols (Annual target 12,000). Similar to the past year, Shijaia Clinic ranked first in term of the number of children seen at the well-baby services (4668).

- The number of the achieved well-baby follow up visits is 25,245, which is higher than the anticipated target of providing 12,000 well-baby sessions (annual target 25000). The achieved number of well-baby sessions this year is close to the number achieved in the past year for the same reporting period.
- During this reporting period, 2776 new children were assessed at the well-baby service



delivery points. Interestingly, Rafah Clinic served more new cases than what was reported earlier, possibly, due to the ongoing outreach nutritional screening program, the project was launched by NECC with support from IMC.

- The total number of those examined children and found abnormal (malnourished and anaemic) and enrolled in treatment programs is 1558. Shijaia clinic has showed the highest number of sick children during this reporting period, the percentage of malnutrition among the attendants of the well-baby visits was around 11.12% in Shijaia area while it was 9.4% in Darraj area; the prevalence in Rafah was 11.1%. These figures are close to what was reported in the past year. The prevalence of anaemia was higher as it ranged from 22.37% in Darraj to 17.3% in Rafah (in Shijaia, 21.9%)- the past year figures for the same reporting period were 34.3% in Darraj, 14.8% in Rafah and 17.49% in Shijaia. It's worth mentioning that **United Church of Canada** supported NECC in medications needed for the treatment of anemic, malnourished and sick children, this support used to complement an ongoing program supported by the Embrace the Middle East.
- In addition to those who were enrolled in the treatment program inside NECC premises, 78 were referred to other facilities for more advanced management at hospitals or diagnostic centres.
- At least, 6810 caregivers received health education and awareness sessions about nutrition. The mostly commonly delivered health education method was lecture (458 ones with 6810 attendants).
- NECC regularly assesses the impact of health education through studying the change in the epidemiology of diseases was noticed. The change in the epidemiology of hygiene related diseases indicated a reduction in infectious Diseases and parasites this gives clear evidence about the effectiveness of the health education provided at NECC. Also, pre-test post-test questionnaires on nutritional practices and hygiene were administered during this reporting period. The analysis shows that the level of knowledge among ladies regarding the nutritional practices is high at the pre-test and even higher at the post-test assessment. However, NECC developed a new questionnaire to assess the impact of education sessions which will be used in the coming reporting period.



3.1.5 Dental Clinic

All clinics of NECC Gaza are equipped with fixed dental units that provide routine dental services in addition to mobile dental clinic through which we conducted our outreach activities to the community including TVET students and other governmental CBOs (e.g. elder people and etc.) – such as check-up, filling, extraction and scaling 4 days a week. During this reporting period, **5659**



patients (annual target 4000) were examined by a dentist at the clinics distributed as following: Shijaia 2083, Darraj 1852 and Rafah 1724 also 1212 children were screened during well baby program (target 700 child per year), 1564 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	1833	792	0	447	88	83	441
Darraj	2075	1296	0	461	242	77	372
Rafah	1682	975	1	301	237	88	245

3.1.6 General Clinic/Medical examination

The number of patients above 6 years old as cases examined by doctors has been reached **8480** cases including those attended dermatology clinic. The dermatology services still provided at the three health centers since March 2015; a dermatologist is attending the centers one day per week except Shijaia so as two days per week. The service is highly appreciated by the community due to the 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 **6240** including adults, children and pregnant women.

Below 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	10,578	9,618	7,401	27597
Pregnant women	3,537	2,174	1,621	7332
Above 6 years old	2247	1587	1,668	5502
Total	16,362	13,379	10,690	40,431

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 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 nutrition, preconception care hygiene, breast feeding, child protection, environment, etc... The total number of health education sessions provided to all categories was **1520** health awareness sessions for 29,708 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, complementary feeding etc. Also, health education materials were distributed either inside the centers or at home visits. NECC used diversity of health education methods including lectures, sessions, food demonstration, watching educational films or videos on Smart board.

To further enhance the effectiveness of health education, NECC used a set of pre-test and post-test questions for a sample of attendants in health education sessions. Questionnaires were analyzed and measures were taken accordingly, the various tools for conducting health education sessions as audiovisual tools were used for more focusing on health, environmental, and social issues.

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 reporting period, approximately **2717** home visits (annual target is 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 becoming a defaulter, to check the improvement of the case and collect 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 179 cases to relevant sites as needed.

During the reporting period; 109 children, 70 pregnant women and 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	10	11	5	26
MOH or other hospitals	76	57	14	147
MOH clinics	1	5	-	6

Total	87	73	19	179
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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 22712 distributed as; Shijaia 10212, Darraj 7903 and Rafah 4597, we add to them **501** HB tests for the children screened and followed up for malnutrition or anemia with hemocus portable machine to have a total of **23,213** tests. 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	4761	3922	2311	10994
Urine	4495	3194	1954	9643
Stool	748	713	301	1762
Pregnancy Test (Urine Sample)	208	74	31	313
Total	10212	7903	4597	22712

3.1.11 Pharmacy Services

NECC offers preventive and curative services free of charge, with a focus on mother and child health care and education towards health and environmental awareness (hygiene, vaccination, etc.). Accordingly, 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-helminths, 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 which facilitates and organizes the work inside the main store and the pharmacies, a network connects the three pharmacies with the main office and the main store for more monitoring and supervision,

NECC succeeded in securing the availability of the required medicines throughout this period 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) in addition to NECC regular partners who continue supporting the purchasing of medication to patients. During this reporting period, the number of prescriptions dispensed to patients reached 49,449 in the three localities.

Table (8) No. of Prescriptions dispensed per area

Clinic	No. of prescriptions
Shijaia	18886
Darraj	17948
Rafah	12615
Total	49449

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 increasing the number of children with psychosocial problems, leads to an increase in demand for psychosocial services; NECC is responding by increasing supplies and the capacity in the provision of psychosocial services through strengthening the provision of psychosocial services to vulnerable localities. A recent study conducted on the psychosocial services in Shijaja area showed that the population of the area are in desperate need for these services especially after being exposed to severe psychological traumas. The study flags the importance of implementing high quality psychosocial services.

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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 labor and family-related issues⁶. Of the compounded psychosocial vulnerabilities facing youth and adolescents, economic hardships have the greatest influence on deteriorating their psychological status.⁷ 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.⁸ 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.⁹

NECC teams have incorporated the psychosocial support services into the regular practice and routine services; however, some complicated cases require specialized psychosocial support sessions such as individual or group counseling sessions, stress management session, play therapy, and behavioral, cognitive therapy and so on, this needs to be provided by specialized counselors.

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 centres.

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 (SDQ¹⁰) for children and parents, (PHQ¹¹) and (GAD¹²) for PHC screened cases, (CRIES-8¹³) for PTSD children cases and (PCL) for PTSD¹⁴ adults (Edinburgh scale) for post-natal depression cases.

It's worth mentioning that NECC has developed a management information system for psychosocial

⁶ Ibid.

⁷ 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

⁸ Ibid.

⁹ Ministry of Health, Health Sector Strategic Plan: Gaza Governorates 2014-2018, (Palestine 2014).

¹⁰ SDQ: Strength and Development Questionnaire.

¹¹ PHQ: Patient Health Questionnaire.

¹² GAD: Generalized Anxiety Disorder.

¹³ CRIES-8: Children Impact of EVENT Scale.

¹⁴ PTSD: Post Traumatic Stress Disorders.

support program to get more accurate data, analysis and statistics. This application was used by the health staff after training on it.

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

Activities and target groups	Shijaia	Darraj	Rafah	Total
School children (6-15) years targeted through problem solving approach	260 children	249 children	218 children	727 children
Kindergarten children serve through cognitive behavioral therapy	245 children	175 children	265 children	685 children
Individual counselling for school children	18 children	16 children	16 children	50 children
Individual counselling for women/mothers	51	143	14	208 women/mothers
Family counselling for mothers with children suffer from psychological disorders	61	72	24	157 mothers
Psycho education sessions for PHC beneficiaries	25 sessions for 640 women	64 sessions for 2141 women	46 sessions for 925 women	135 sessions for 3706 women
General psychosocial consultations	208	338	142	688
Group counselling for mothers and or/women with similar psychological problems	36 mothers/women	38 mothers/women	10 mothers/women	84 mothers/women
Screening and detection of mental health problem in PHC patients managed by health staff	73 mild cases from PHC were screened and detected, received guided self-help while 806 EPDS scale filled for postnatal cases to detect postnatal depression, 63 were discovered complained of depression that's mean 7.8% were suffered from depression during postpartum period.			

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 more than 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 five 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 – September 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 (21 Carpentry, 14 Welding and Metals) from the program in January 2017. In addition, **55** male students were graduated from Shijaia VTC in July (22 carpentry, 16 welding and metals, 17 Aluminum).
- ▶ **63** of second-year trainees continued their training at Gaza Shijaia (38 students) and El-Qarara VTC's (25 students) for males respectively. The 25 students of 2nd-year at El-Qarara will be graduated next November.
- ▶ **45** female students were graduated from the Secretary and Dressmaking departments (21 secretary and 24 dressmaking).

- ▶ 138 first-year students (87 males, 51 females) were enrolled out of totally 397 who applied for the 2017-2018 scholastic year (in September 2017).
- ▶ A number of students will be enrolled in the General Electricity and HVAC department in November 2017 and recorded duly. More details are illustrated in the next table.

The table (10) below shows the distribution of the students during the reporting period:

#	Program	Duration (Year)	Graduates (2017)	Current Enrolment		Total number of existing students (March 2017)
				1st Y	2nd Y	
1	Carpentry and Furniture Making	2	43 (21+22)	26	25	51
2	Metal and Welding Works	2	30 (14+16)	18	18	36
3	Aluminum Works	1	17	19	-	19 (*)
4	HVAC	2	-	-	18	18 (*)
5	General Electricity and Motor Rewinding	2	-	24	25	49
-	Sub-total (males)		90	87	86	173
6	Secretary and English Language	1	21	27	-	27
7	Advanced Dressmaking	1	24	24	-	24
-	Sub-total (females)		45	51	-	51
-	Total		135	138	86	224

- (*): This scholastic year (2016-2017) was the first year for commencing vocations of Aluminum works (separately from Welding) and HVAC¹⁵.
- The "last 3rd Year class" students (from carpentry and welding departments 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.
- A number of new students will enroll the program in general electricity and HVAC starting from next November.

This scholastic year went as a pilot in the TVET provision pathway, there will be evaluation measures being undertaken in the next year 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

¹⁵ HVAC: Heating, Ventilation and Air Conditioning.

aimed at its end lines to likely achieve a robust, unique and suitable curricula module 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 pertinent to inserting the CAD software learning inside the TVET curricula being delivered to 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 products/exercises and afterwards, possessing skills and practices necessary for them 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 for establishing the lab. The computer lab will be installed in the new scholastic year which will be starting in September 2017.

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 conditions of GIZ¹⁶ and Ministry of Labor, 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 Aluminum department was separated from welding and metals so, Aluminum works became a separate profession with a one-year training program.
- ▶ In December 2017, a new class student (approx. 20) will be enrolling the HVAC diploma which was commenced starting from December 2016, the 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 training. The group currently studying at the first year, will be examined and upgraded to the 2nd-year level in next December.
- ▶ The HVAC diploma is mainly specialized in heating and cooling systems, air conditioning and refrigeration implications; the 1st year was 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 TVET professions/trades are illustrated in table (11) – page 27.

NECC is striving to link graduates with the labor market. In that endeavor, NECC provides support to graduates after issuance of their certification through providing market connections, skills-upgrade

¹⁶ GIZ: German Technical Cooperation Agency.

courses, and occasionally job creation initiatives and small grants in cooperation and partnership with a various network of organizations.



Training in carpentry department



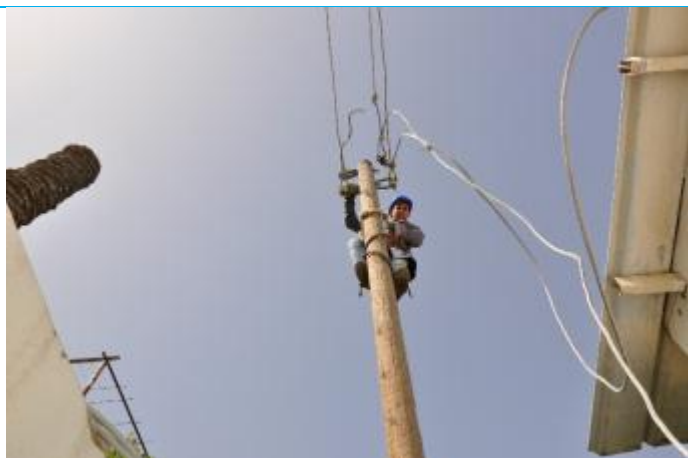
Training in welding and metals



Training in dressmaking



Training in aluminum



Training in electricity



Training in electricity



Training in secretary



Training in secretary

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 that 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.

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 (2014-2016) including an equal number of graduates from each of trades of carpentry, welding, electricity, dressmaking and secretary of dressmaking and secretary) in separate (10 beneficiaries from each of the five trades).

The project started in December 1st, 2016, and lasted until May 30th, 2017 where the graduated were placed in the local labor market institutions including companies, governmental organizations, NGOs and private "industrial" workshops.

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 93 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 commenced the process of updating NECC-TVET curricula for the identified curricula of new profession of HVAC 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 to develop and update the curricula. It is worth mentioning that this year will be a pilot for the new HVAC curricula after being validated and accredited.

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.

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 by introducing new TVET programs 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 given the tense economic circumstances.

The 3rd TVET-Week ceremony was held at the Shalihat Resorts on Gaza beach under the auspice of Minister of Labor 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 UCAS, Palestine Technical College - Deir al Balah (Polytechnic), Abdel-Mo'ty Rayyes Vocational Secondary Girls School, Deir al Balah Industrial Secondary School and other institutions participated in this important ceremony.

Valued speeches from the honored Minister, 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 aluminum 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.

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.

In cooperation with Palestinian Federation of Industries (PFI) and the private sector entities, the NECC trainees who were graduated in August 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 training is an integral part of students' curricula that they have to finish before they graduate and get their certifications from NECC vocational centers.

Practically, NECC runs continuous coordination work with those strategic partners in the field of conducting joined 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" where which our students (both males and females) are actively participating.



INJAZ Training at Secretary department



INJAZ Training at Secretary department

3.3.5 3.3.5 LET-Council¹⁷:

LET Council is a supervisory consultative entity joining all TVET players in the Gaza Strip including representatives of TVET organizers and accreditors (ministries of labor and education), universities and applied sciences colleges, donors and supporters like GIZ and Islamic Relief, NGOs such as NECC.

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

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.

As well, NECC has been in contact with a group of alumni from the USA general consulate training program of entrepreneurship, the next step will be the implementation of a comprehensive group of workshops in this concern for benefit of our VTC students facilitated by those alumni entrepreneurs.

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.
- ▶ Criteria for preparing good examinations.

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.

Another training program will be conducted in favor of our trainers and TVET staff early 2018.

3.4 Educational Loans Program

¹⁷ LET-Council: Local Employment & TVET Council.

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 university academic year 2017-2018 to provide educational loans to needy students with zero interest in order to help them complete their university study.

For this reporting period (Jan-September) in the academic year 2016-2017 and 2017-2018, 13 university students received applications thereof, 77 bachelors (4 in the 2nd semester 2016-2017 and 73 in the 1st semester 2017-2018), 24 masters (4 in the 2nd semester 2016-2017 and 21 in the 1st semester 2017-2018) and one for PHD while 43 Bachelor students (3 in the 2nd semester 2016-2017 and 40 in the 1st semester 2017-2018) in addition to 12 Master’s degree students (3 in the 2nd semester 2016-2017 and 9 in the 1st semester 2017-2018) and one PHD student (in the 1st semester 2017-2018) returned back their full eligible applications for loans out of them, 16 applicants have actually received loans within this given reporting period.

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

Education loan	Bachelor			Master			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
New loan	1	1	2	-	1	1	1	2	3
Renew loan	2	9	11	2	-	2	4	9	13
Total	3	10	13	2	1	3	5	11	16

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 (sciences, 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

NECC has implemented a group of job creation initiatives in partnership and cooperation with many organizations as will be detailed latterly:

3.5.1 NECC/Secure Catholique - Caritas France (SCCF) Partnered Project:

The project of "Access to Employment for NECC-TVET youth graduates in Gaza Strip" which was run in partnership with Caritas France (Secure Catholique) starting from November 2016 and lasted until May

2017; the total period of project is eight months including six months of actual employment for the selected group of 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 VTCs¹⁸ 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.

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.

In the employment course, the project included – as one of its activities- the conducting of 5 workshops with the beneficiaries in-where 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. All 5 workshops were conducted; 3 workshops were conducted out of the 5 workshops in the 2017 first quarter and the rest 2 workshops in the second quarter.

NECC has merely finished the employment course in May and formally the whole project in June, the final report was duly prepared, submitted and finalized late September 2017.

3.5.2 Project of “Support Access to Employment for TVET Graduates in Gaza Strip 2017-2020”:

After finishing the latterly mentioned short-term project with SCCF, NECC has immediately been involved in the project of “Support Access to Employment for TVET Graduates in Gaza Strip 2017-2020” starting from July given that the project will last till end of June 2020.

The designated project has been running in partnership and co-fund from AFD and Secure Catholique Caritas France (SCCF).

The project is conjoining diversified group of activities including on-job-training for 250 TVET graduates from NECC centers, business management training for 150 graduates, grants for starting-up small businesses for selected group of trainees and other activities.

The first cycle of on-job-training has started in July 2017 targeting 50 TVET graduates from professions of carpentry, metals and welding, aluminum, general electricity, dressmaking and secretary equally divided (10 graduates per each) where the latter selected graduates were place in the local labor market

¹⁸ VTC: Vocational Training Center.

organizations including NGOs, governmental entities, private workshops, companies, colleges and so forth.

Photos for the follow-up of graduates in their job places.



Applying for the job creation opportunity



Applying for the job creation opportunity



Follow-up visit by the social worker



Follow-up visit by the social worker



Follow-up visit by the supervisor (dressmaking)



Follow-up visit by the supervisor (secretary)

3.6 Construct a 2-floor building at El-Qarara VTC

By a generous donation from Pontifical Mission in Palestine (PMP) and in cooperation with Municipality of El-Qarara and the engineering consulting company, the NECC finished the implementation of project of "Capacity Building for NECC-El Qarara Vocational Training Centre / Renovating and Extending the Current Premises of the Centre" which included mainly the construction of a 2-floor building in the backyard space of El-Qarara VTC as an extension designated for the provision of TVET training especially in solar energy.

In addition to that, the new structure will be expanding the current program being provided by allowing an increase in the number of students in-training at the VTC by ultimate percent of 20%.

Approaching an engineering consulting company and soliciting due approvals form the municipality, the project was started in May and finished all its activities in mid-November 2017 including demolition and removal of remnants and rubbles, the reinforced concrete works, finishing works such as plastering, tiling, painting, marbles and etc.

The new building will be put in service starting form commencing the new scholastic year at El-Qarara VTC starting from next November, the ground floor will be used as a solar lab for training while the 1st floor will be used as a training hall for the 2nd year class students.



Foundations and column necks



Ground beams



Concrete ground



Concrete ceiling and building bricks



The new building was constructed



Finishing works



Interior painting works finished



External view for the constructed building

3.7 Advocacy program

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.

As well, NECC is intensively existed in the meetings held under the Local Employment and TVET (LET-Council) as it has membership in two sub-committees of TVET Capacity Building and Donor Funding.

Those important committees are administering policies and roadmaps for the planning, delivery and development of TVET programs in the Gaza Strip given the largely-diversified entities of TVET providers encompassed by the committees such as ministries (Labor, Education, etc.), TVET providing institutes, NGOs, and private sector representatives namely federation of industries, ICT, and chambers of commerce.

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 21. 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 full-time staff is approximately 86 staff members. 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 in the table below.

Table (12) 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 Volunteers	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, **102 days** of different trainings, workshops and meetings 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 (13): Main trainings and workshops attended by NECC for capacity building from 1st January-30th September 2017:

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.

#	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
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	January	MoH

8	Prepare learning situations of curricula	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	March	Al-Mathaf hotel
11	“Psychological First Aid and Referral including Mental Health Assessment and PTSD Recognition”	1 NECC staff: PSS program	1	IMC	March	Al-Salam Restaurant
12	“Psychological First Aid and Referral including Mental Health Assessment and PTSD Recognition”	PSS staff	3	IMC	April	Al-Salam Restaurant
13	“Psychological First Aid and Referral including Mental Health Assessment and PTSD Recognition”	PSS staff	3	IMC	April	Al-Salam Restaurant
14	“Psychological First Aid and Referral including Mental Health Assessment and PTSD Recognition”	PSS staff	3	IMC	May	Al-Salam Restaurant
15	Human resource management	Management staff	2	IMC	April	Roots restaurant
16	Financial Management	Finance staff	2	IMC	April	Roots restaurant
17	Strategic planning	Programs coordinators	2	IMC	April	Roots restaurant
18	Logistics management	Management staff	3	IMC	April	Roots restaurant
19	Fundraising training	Programs coordinators	2	IMC	May	Roots restaurant
20	Meal System	Health staff	3	IMC	May	Roots restaurant
21	Needs assessment for TVET	TVET supervisor	1	IRADA center for TVET	March	Al-Mashtal hotel

22	Early childhood development and early detection and intervention for children with developmental delays and disabilities	Health staff	1	UNICEF	March	UNICEF
23	USG Compliance and Mission Order 21 requirements	4 NECC staff	1	IMC	March	Al-Mathaf restaurant
24	Curriculum Assessment Workshop	4 TVET staff	1	GIZ	March	Light House Restaurant
25	MHPSS meeting	Health staff	1	UNICEF	March	UNICEF
26	TOT training for care givers of young children	PSS staff	1	UNICEF	April	UNICEF
27	Gender workshop	Clinics supervisor	1	IMC	April	IMC
28	Gender training follow-up	Clinics supervisor	2	IMC	April	IMC
29	CPWG	1 NECC staff: clinics supervisor	1	UNICEF	April	UNICEF
30	Drugs usage orientation	2 NECC drugs store staff	1	IMC	April	IMC
31	Early childhood development and early detection and intervention for children with developmental delays and disabilities	3 NECC staff	5	UNICEF	April-May	UNICEF
32	Reproductive health protocol	1 Health staff	1	MoH	May	MoH
33	Infection Prevention and Control Quality Improvement Collaborative Approach workshop	1 Health staff	1	IMC	May	AL Mashtal hotel
34	Meeting on Overall health situation in Gaza Strip	1 Health staff	1	MOH	May	Al Rimal clinic
35	Maternal mortality	1 Health staff	1	MOH	May	Al Rimal clinic
36	CPWG meeting	1 Health staff	1	UNICEF	May	UNICEF

37	MHPSS meeting	1 Health staff	1	UNICEF	May	UNICEF
38	Curriculum Assessment Workshop	3 TVET staff	1	GIZ	May	Light House Restaurant
39	Discuss projects of graduates	TVET supervisor	1	University College of Applied Sciences (UCAS)	June	UCAS
40	Discuss mechanisms of cooperation between MoH and NGOs	1 Health staff	1	MOH	June	Al Rimal clinic
41	Meeting of national committee for health education	1 Health staff	1	MOH	June	Al-Sheikh Radwan clinic
42	1 st meeting of steering committee	1 Health staff	1	MOH	June	Al Rimal clinic
43	CPWG meeting	1 Health staff	1	UNICEF	June	UNICEF
44	Procurement Program Training	2 finance and procurement staff	2	DCA-NCA	July	Laterna restaurant
45	Orientation session about inventory management system	1 NECC staff	2	IMC	July	MercyCorps
46	"Orientation to Protection Guidelines"	Clinic supervisor	2	IMC	July	Al-Mathaf restaurant
47	"Orientation to Protection Guidelines"	1 PSS staff	2	IMC	July	Al-Mathaf restaurant
48	IPC collaborative approach meeting workshop	2 health staff	1	IMC	July	AL Mashtal hotel
49	Kick off workshop - MFA grant	2 programs and finance staff	1	DCA-NCA	July	Laterna restaurant
50	Fraud Awareness	1 finance staff	2	IMC	July	Al-Mathaf restaurant
51	MHPSS WG meeting	Clinic supervisor	1	UNICEF	July	UNICEF
52	Presenting success stories of maternity department at Al-Shifa hospital	2 health staff	1	MoH	July	Al-Salam Restaurant
53	CPWG WG Meeting	Clinic supervisor	1	UNICEF	July	UNICEF
54	LET Council-capacity building committee	TVET Coordinator	1	LET Council	July	Federation of Industries

	meeting					
55	Request for application RFA	2 programs and finance staff	1	IMC	August	IMC
56	Study day	Clinic supervisor	1	MoH	August	MoH
57	PHC Health Records: Situation and Challenges	1 health staff	1	DCA-NCA	August	Laterna restaurant
58	Committee meeting: partnership between health cluster and NGOs	1 health staff	1	MoH	August	MoH
59	First Aid Training	2 PSS staff	2	IMC	August	AL Mashtal hotel
60	ICS Training	1 health staff	1	IMC	August	IMC
61	ICS Training	1 TVET staff	1	IMC	August	IMC
62	Strategic analysis and planning	1 TVET staff	1	LET Council	August	Level-up restaurant
63	Committee meeting: partnership between health cluster and NGOs	1 health staff	1	MoH	August	MoH
64	“Standardized Process for developing TVET Curricula” training	1 TVET staff and 1 volunteer	7	Islamic Relief	August	Origano restaurant
65	Graduation ceremony	1 PSS staff	1	Al-Erada specialized center for autism disorders	August	Palestinian Bar of Lawyers
66	Curriculum Assessment Workshop	4 TVET staff	1	GIZ	August	Light House Restaurant
67	PSS training	3 PSS staff	2	Mercy Corps	September	Al-Mathaf restaurant
68	Health Humanitarian Needs Overview (HNO)	1 health staff	1	WHO	September	Light House Restaurant
69	MHPSS WG meeting	Clinic supervisor	1	UNICEF	September	UNICEF
70	Committee meeting: partnership between health cluster and NGOs	1 health staff	1	MoH	September	MoH

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. 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. **(UNFPA, 2016)**

Gender Mainstreaming is a globally accepted strategy for promoting gender equality. Mainstreaming is not an end in itself but a strategy, an approach, a means to achieve the goal of gender equality. Mainstreaming involves ensuring that gender perspectives and attention to the goal of gender equality are central to all activities - policy development, research, advocacy/ dialogue, legislation, resource allocation, and planning, implementation and monitoring of programs and projects. NECC is still committed deeply in gender equality policy. It focuses on the principles of promoting gender balance in staffing and representation, access to health quality system and socio-economic empowerment.

In reflection to this constituency, NECC has strived to create gender parity in the hiring of men and women to NECC. 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 61% of beneficiaries at health centers are females, recognizing the important role the women play as caregivers within the household. PSS program targets equally children from both genders without any kind of discrimination.

In TVET program, NECC is targeting males and females in special professions appropriate to their nature and qualifications in full consideration to the prevailing culture.

Additionally, NECC provides equal opportunities for male and female as students to develop their career to be able to hire decent job employment opportunity.

4.4 Supervision, Monitoring and Evaluation

In the absence of effective monitoring and evaluation, it would be difficult to know whether the intended results are being achieved as planned, what corrective actions may be needed to ensure delivery of the intended results, and whether initiatives are making positive contributions or not

Monitoring supports the NECC staff and management to comply with their scope of work and to timely meet their 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 (monthly and periodic narrative and financial reports), supervisory visits, staff meetings on a regular basis, beneficiaries and clients perspectives through questionnaires and checklists.

NECC programs 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 clinic and TVET center overall manage the field work.

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 in addition to develop a management information system for TVET program and train most TVET staff on how to use it

The technical consultant oversees 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 accountants do the monitoring for the financial issues of the projects and follow up in coordination with the executive managers and the programs coordinators.

An evaluation conducted by DSPR to assess the organizational structure and culture of DSPR and review decision making processes at the central and area levels regarding personnel management, financial management and project cycle management (including PME + learning), and their subsequent influence on program quality

The technical consultant trained the key staff about balanced score card as monitoring tool for the organization, and develop indicators for management, financial, health and TVET program.

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 topics; 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 early detection of children with developmental delays and early intervention.
- 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 to start provision of preconception care at NECC centers.
- New partnership with United church of Canada in terms of supporting NECC in treatment of malnourished, anemic and sick children.
- A new partnership with IMC for the project of nutritional screening in Rafah area of the year 2016-2017 entitled "Promoting nutritional status, of vulnerable children under 5 years in Rafah area". This is 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 approved by DCA-NCA for TVET program funded by NORAD.
- New proposal was approved by DCA-NCA for Health program
- 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
- 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 *Current problems and constraints*

- Political conflict and security concerns. Current Problems in Gaza are not new “Acute on Top of Chronic.
- Deteriorated livelihood conditions of the population; emergence of health, psychosocial and poverty associated problems.
- Financial resources largely depend on external aid
- Shortage of essential drugs list as a result of blockade and movement restriction.

- Increased number of beneficiaries at the three NECC health Clinics. This made more load on NECC administration and staff to cover all cases and to provide medications.
- Restriction in referrals.
- Difficulties in securing the needed equipment and disposables, and raw materials due to the tight closure and closed borders. Palestinians have little control over their resources and borders.
- Electricity cuts for more than 18 hours, and its impact on Social services especially health, education, Livelihood conditions, and Water –quantity and quality, and psychosocial status.
- 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.

4.7 Future plan for next reporting period

1. Continue the partnership with UNICEF in terms of a new project for PNC promotion in the three served areas
2. Continue provision of preconception care as new approach of the maternal health care and was fully integrated within the primary health care system with support from EME.
3. A proposal was submitted to **DCA-NCA and approved** for the project of “Mother and child health care including nutrition services and psychosocial support”.
 - Continue partnership with **IMC** health Program 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.
4. NECC in cooperation and partnership with **Secure Catholique – Caritas France** prepared a joint proposal in the topic of economic empowerment for NECC –TVET graduates planned to take place in 2017-2020, the project was approved and launched in July 2017.
5. Developing new strategic plan for the next 5 years 2017-2021.
6. Developing fund raising strategy for NECC.
7. Strengthening communication and networking to secure fund.

4.8 Success Stories

Stories from health program

Success story 1

This is the story of Nakhala family which lives in Darraj area, a high densely populated area with around 80,000 inhabitants. Mohammad Haider Nakhala, 20 months old male child lives with his families

composed from 2 children, the parent in addition to other members of the extended family. In total, the house accommodates 13 persons. The house contains two rooms, poorly ventilated, humid, walls are dirty with many cracks. The area is known as Jolani area, one of the poorest areas in Darraj. Houses are close each to the other with no spaces between the houses. Sun rarely reaches the inside of the house. Streets are very narrow; sewage system is not effective with frequent overflow. The entire area is not clean with collections of garbage everywhere. In addition, water supply and electricity supply are irregular which adds to their vulnerability. The house at which Nakhala family lives contains two rooms and small kitchen. The house also contains the basic furniture but these are in good shape including TV, refrigerator, and washing machine. Simple furniture is also available at the household.

The father of the child is 24 years old, holding a diploma in secretary. He is unemployed and never worked in his career. Occasionally he works in carrying construction stuff and has no regular source of income. Because he is poor, he tends not to interact with people and to isolate himself. He only visits his close family member and his sister. He thinks that socialization costs money, he can't afford that.

The mother (Mona) has completed her secondary education and then married when she was around 17 years old. She got high grade in secondary school (80%) but her father refused to allow for her to join the university. Her father thinks that girls ultimately should marry and that is the fate for them therefore education is worthless for them. The mother married in 2009 immediately after the war, she wasn't happy as two of their relatives were killed in that war, so the wedding party was simple-low profile wedding.

The mother continued, because of poverty I don't participate in social events and I isolate myself. She said I am not able to secure food for my family, therefore socialization is not a priority. The mother added, sometimes for several weeks I stay in my parent house in order to get feed my children-my husband is unable to secure food for us.

Because of the stress, the mother developed psychosocial problems. This adds further to her isolation and vulnerability. She said my husband and family are supportive to me and they try to help me but my situation was bad. I approached the NECC counsellors who tried to help me through debriefing sessions and psychological support. Then, they referred me to the Gaza community mental health and I am receiving now medication which helps me. My condition is better now than before, but I am concerned of visiting people and I feel embarrassed from even visiting my family.

The mother (Mona) knew about the NECC from her mother. Her mum used to seek NECC health services for more than 20 years. When her children were young, she used to bring them to NECC to receive services and now she advises her children who became fathers and mothers to seek services at the organization. Mona visited NECC when she was pregnant and continued after that.

Late in 2016, Mona visited Darraj centre and opened a file for her family. The team at the well-baby clinic assessed the anthropometric measurements of the child (Mohammad). The measurement shows that the child suffers from moderate wasting and moderate underweight which means he has been exposed to acute nutritional deficiencies or illnesses. Full investigation was conducted the child to exclude any

other medical conditions. The mother was given advices about breast feeding as the child was 5 months of age. During that period, the counsellors at NECC also provided the mother with psychosocial sessions. In Jan 2017, the team discovered that the child is also anaemic as his haemoglobin was 9.4 gm. Complete investigations were performed to identify any associated illnesses. The following were given to the child

- Health education, awareness and brochures about anaemia, malnutrition, child nutrition and supplementation.
- Appropriate breast-feeding practices.
- Feeding practices.
- Nutritious food.
- Iron supplementations.
- Multivitamins.
- Plumpy supplement-provided by UNICEF as nutritional supplementation.

In February 2017, the mother visited the clinic according to the schedule and the examination reveals that child haemoglobin level is 11, which is normal. However, still underweight and wasting didn't improve.

In addition to the provided health education sessions, the team organized individual counselling session to Mona which included 24 diet recall. The 24-diet recall was as follows:

Morning	Midday	Evening
8 am Milk with cookies	1 pm plumpy nut	9pm Homos
9,30 am iron supplementation	2 pm rice and potato-without meat	9pm Tea with food
11 am eggs	Tea after lunch	9,30 Iron supplementations with milk (in the bottle)

The discussion with the mother shows that there are inappropriate nutritional habits as follows

- Giving tea with food
- Giving tea with milk
- Timing of administering iron was inappropriate

The mother was given concentrated instructions about these issues. The medication was also continued with shifting the iron does from the therapeutic does to the prophylactic does which is provided to replenish the iron storage in the body.

The follow up visits continued as recommended, once monthly. In April 2017, the NECC measure the anthropometric readings of the child and found that the wasting has improved but still underweight continued. In May 2017, all the abnormal readings were fixed and the child return to normal growth standard both in anaemia and malnutrition.

The mother has been given further advices about how to keep the child healthy through appropriate follow up, appropriate eating practices and providing the child with nutritious diets. The mother is very thankful to NECC for providing well-baby services.

Story 2

This the story of lady Fida'a Sukkar who was born in 1998, she finished her secondary school and she has got married for one year to Kamal Sukkar, who is 20 years old, Kamal is unemployed and does not have any solid financial source except a little amount that comes from his family.

Fida'a lives with her husband's family in one house, where Fida'a and her husband along with husband's mother, father, sisters, and brothers live all together in one house at Al Shijaia area. The house made of concrete, is composed of two rooms, kitchen, bathroom and living room.

Fida'a knew about the NECC health care center when she went there, through her visit to the clinic with her mother, who attended the general clinic seeking medical treatment, also she noticed the declaration in the clinic about preconception care, while she was listening to health education session entitled the importance of preconception-care for women.

Fida'a found herself in the program's target group and enrolled in the program as she had never had a pregnancy and was married a year ago.

On 03/04/2017 it was the first visit to Fida'a to NECC clinic, the staff nurse opened the file for her, took her family, medical, reproductive and life style history, in addition to screening tests included weight, height, blood pressure, Random blood sugar and blood test for Hb level as well as breast examination.

The staff nurse found that Fida'a didn't have any reproductive, or hereditary diseases, as her history is free from any diseases, and also wasn't exposed to abortion before. Her measures were as below:

First Visit 3/4/2017	
Weight	65Kg
Height	161 Cm
HB	9.5 mg/dl
Blood Pressure	100/60
Blood sugar	85 mg/dl

Fida'a is consulted by gynecologist doctor in NECC clinic for physical examination thus, from the screening tests, Fida'a is clearly suffered from anemia.

She received Ferregol tablet and Folic acid supplement, and the staff nurse at this time provided her with intensive health instruction, and counseling about nutrition routines, healthy and low-cost food, also she presented brochures about that, plus explanation on its details to her, about personal hygiene, hygiene practices, and preventive measures. Staff nurse asked about the daily diet. Fida'a replied that she usually depends only on supplying the house of essential needs of food from her brother in low. Her mother is also the vegetables and fruits supporter and once a week meat.

The next visit was on 20/04/2017: Fida'a was followed up for some investigation, like examination of Random blood sugar which was 90mg/dl, Bp 100/60, menstrual period and its regularity, thus all

investigations were normal, the staff nurse focused more on health and nutritional education for Fida'a, and gave her next appointment date.

On the third visits on 25/05/2017:

All investigation was carried out for Fida'a, her HB level was 11.2gm/dl, the staff nurse emphasized on advice and guidance for Fida'a to take folic acid and to be committed to health instructions as her HB level become in normal range.

On the next visit, 01/06/2017:

Fida'a attended to the clinic, complained of absence of menstrual cycle, the investigation and lab tests were provided for her including pregnancy test, it was a surprising result revealed that Fida'a is pregnant, and she enrolled in NECC antenatal care program to continue her follow up. She was given education on care and nutrition during pregnancy. She also received suitable medical care and health services.

Fida'a and her husband thanked the NECC clinic for their special follow-up and care and priceless advice. Fida'a felt very pleased about the knowledge she gained, the courtesy relation that shown by the staff, and good communication, and respects, "I do appreciate NECC clinic efforts and support, I fully satisfied with high quality of NECC health services", Fida'a said.

She wished that she would able to live in her own house with her husband and to get her new baby safely.

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 advice.

Note: the lady refused to share her photo.

Success story 3

Mohammed Al-Ju'aidi, 26 years describes the impact of his enrolment at the General Electricity and Motor Rewinding program at El-Qarara VTC.

I am a graduate of El-Qarara VTC which is belonging to NECC in the southern area of the Gaza Strip. I live with my family at El-Burajj Refugee Camp middle the Gaza Strip, the family is consisting of 11 members. My father is an electricity technician currently working on irregular basis in his profession while he is the responsible and the solely breadwinner for the family considering that I have a brother and a sister studying at the university now.

Within my studying at El-Qarara VTC, I have been learning new things every day and every minute, I knew new friendships and I am learning a lot from my instructors and colleagues.

Recently, I did my external training for 6 weeks at a local workshop in my neighborhood, expiring new techniques and teachings, inspiring new world was behind my cognition.

Currently, I have been selected to be benefiting from the new project of “Access to employment for TVET graduates in Gaza Strip” in partnership with Secure Catholique – Caritas France (SCCF) and I did my job-placement course at a famous electrical factory in Gaza Strip.

This will be a prominent step in my life in general as well as easier inclusion in the labor market and getting a decent work afterwards allowing me to stand in support to my family.



Mohammed (pointed by arrow) is receiving training on transformers



El-Qarara Supervisor (on the right) is providing training to Mohammed and his companions

NECC is so grateful to all partners and donors who supported the provision of our programs to the vulnerable groups in Gaza.