



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

ANNUAL REPORT
2020





Near East Council of Churches Committee for Refugee Work (NECCCRW) ▶ Annual Report 2020

"I always Pray with Joy because of your partnerships ..., being confident of this who began a good work will carry it on to completion"

(Philippians 1:4-6)





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Preface

Since the establishment of NECC in 1952, it believes that good health is incredibly important to achieve social and economic development. Thus, to improve the health status, education, livelihood and economic development of Palestinians and to improve the quality of services provided, the NECC launched Health and TEVT Program to strengthen the quality of health, psychosocial, education, and vocational services in various sections in order to maximize resources and improve the type of care provided.

This document is the NECC Annual report, 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 the year 2020 (for period covering 1st January till 31th December), highlighting and summarizing the achievements that have been realized with regards to the stipulated and intended goals considering the different aspects of context in the Palestinian territories mainly in the Gaza Strip.

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

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





Acknowledgement

Management is getting things done by people. Done properly, within the Available time and resources (Aspin wall, 1998).

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.

Many thanks go to Palestinian people for their perseverance, patience, tolerance, co-operation, support and long-term commitment to health, and Education program sat the individual, family and community levels.

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 love...

NECC/DSPR-Gaza



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List of abbreviations:

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



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Gaza Area Committee



Dr. Maher Essa Ayyad
Chairman of NECC/DSPR Gaza Area Committee.

- Consultant Surgeon.
- Medical Director of Ahli Arab Hospital.



Dr. Sami Elias Manneh
Vice Chairman of NECC/DSPR Gaza Area Committee.

- Master Degree in Pediatrics – Cairo – University 1986.
- Ex. Head of Pediatric Section - Al Naser Hospital – MOH - Gaza.



Samir Saliba Saba
- Treasurer at NECC/DSPR Gaza Area Committee.

- Retired accountant.



Dr. Sohail Anton El Madbak
Delegate of NECC/DSPR Gaza Area Committee.

- Consultant General Surgery.
- Dean of Faculty of Medicine– Al Azhar University, Gaza.



Suheil Tarazi
- Alternate of NECC/DSPR Gaza Area Committee.

- Business Development Manager (Education & English) at British Council.
- Master in Information Systems - Kingston University, London in 1994.
- Chairperson to the Board of Directors of the YMCA, Gaza.



Dr. Bishara AlKhoury
Member of NECC/DSPR Gaza Area Committee.

- Doctor of Technical and Natural Sciences / Informatics.
- Executive Director General of the Government Computer Center (GCC) Ministry of Planning and International Cooperation.



Hossam Rafiq Farah
Member of NECC/DSPR Gaza Area Committee.

- Palestine Real Estate Investment Company (PRICO) Acting Gaza Area Manager.
- Member of YMCA – Gaza committee.



Mr. Nazez Habashi
Member of NECC/DSPR Gaza Area Committee.
Retired Debuty HeadMaster.



Dr. Issa Michel Frangieh
Member of NECC/DSPR Gaza Area Committee.

- Physician.
- Geriatric Care – Diploma.
- Retired General practitioner PNA-Ministry of Health.



Emad Wafa Al Sayegh
Member of NECC/DSPR Gaza Area Committee.

- Mechanical Engineer at Wafa T. El Sayegh Company.
- Member of the board of directors of YMCA.
- Member of the Greek Orthodox Church.



Dr. Elias Arteen
Member of NECC/DSPR Gaza Area Committee.

- FRCS (UK).
- Consultant General.
- Colorectal Surgery and Assistant Professor, Faculty of Medicine, Al Azhar Univ., Gaza.



Ms. Suhaila Tarazi
Member of NECC/DSPR Gaza Area Committee.

- Director of Ahli Arab Hospital.



Foreword

The Gaza Strip is a tinny place between Israel and Egypt, home to more than 2 million people packed into one of the world's most densely populated areas. The majority of Gazans are refugees (66%), most of whom were forcibly displaced in 1948 from nearby cities and villages following the Arab-Israeli conflict of 1948, which erupted in the immediate aftermath of the creation of Israel.

Once a thriving center of culture, education and tourism, over the past two decades Gaza has witnessed a cycle of military incursions and international violations by Israel. Expropriation of land has created a condition of dispossession that has further compromised Palestinians' abilities to withstand the deliberate de-development strategy pursued by Israel, through punitive economic and military policies. Israel still has overall sovereignty of Gaza, controlling its borders, economy, movement of goods and people, electricity, communications and security – the key aspects of Palestinians' lives. In Gaza, nearly 42 per cent of refugees live in one of eight camps operated by the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA).



Because Gaza's population continues to increase annually at a rate of around 3%, young people aged 0-19 account for over 50% of the Gazan population and youth bulge is among the highest in the world. While, the PCBS reported a population density of 5,500 people per square kilometer, in the camps it could reach around 70,000. The typical Gazan household is composed of 5.7 people. According to a recent population analysis (UNFPA, 2016), the Gaza population will reach 5 million in 2050 years.

Since 1948, the Palestinian people have experienced many clashes with Israel, including three recent consecutive wars on Gaza (2008/2009, 2012 and 2014) and multiple confrontations between Israeli forces and Palestinian fighters. These conflicts have all contributed to loss of life, land and livelihoods, driving further displacement. This has weakened social networks, increased incidence of psychological and emotional difficulties, and exacerbated poor housing and sanitation. It has also led to high poverty levels (more than 60 per cent of Gazans are poor or extremely poor) and high unemployment rates (around 70 per cent among youth and women). According to the World Bank, the war in 2014 alone resulted in the destruction of 160,000 homes, displacing more than 500,000 Gazan residents.

Since 2006, Gaza's gross domestic product has been cut by more than half, with the World Bank estimating that its gross domestic product (GDP) should be four times larger today than it is. Indeed, Gaza's real GDP is only a couple of percentage points higher than it was in 1994 – even though the population has increased by an estimated 240%. Due to this combination of depressed economic growth and rising population, the GDP per capita in Gaza was only around \$1,000 in 2020, an amount 74% below 1994 levels, and real per capita income in Gaza has fallen by more than 34%. The reduction in GDP in 2020 is around 6%, mostly attributed to Covid-19 pandemic and its associated lockdown measures.



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Since the start of the second Palestinian intifada in 2000, the Gaza Strip has suffered a process of increasing economic and political isolation, which culminated in the imposition of a land, air and sea blockade by Israel in 2006 which continues till now. This further intensified in 2007 in the immediate aftermath of Hamas' takeover of the Strip. The blockade comprises stringent restrictions on the movement of people, goods and services in and out of Gaza, including the complete closure of border crossings for a number of days. Despite the partial lifting of import bans in 2010, together with other measures aimed at relaxing restrictions, the blockade is still in force today, permeating every aspect of daily life for the entire population. Recently, the lockdown measures have further complicated the situation and resulted in further constraints as explained later.

The United Nations (UN) and other agencies have repeatedly called the blockade a 'protracted human dignity crisis' and a 'collective punishment', in clear violation of international humanitarian law (UN OCHA, 2009). Within the same context, the electricity supply to the Gaza Strip in 2020 remained irregular with power supply of 6-8 hours daily. The same applies to water supply which is supplied 12 hours per week. The protracted occupation by Israel, which is punctuated by repeated conflicts and coupled with severe restrictions on the movement of both people and goods, has resulted in highly fragmented and distorted local economies which are overwhelmingly dependent on external aid.

In July 2018, the Israeli Knesset passed the "Pay for Slay" bill into law, stating that Israel will deduct the amount of money that the Palestinian Authority gives to the political prisoners and their families from the taxes and tariffs Israel collects for the authority. This came into effect in February 2019 and continued throughout 2020. The Palestinian authority refused to receive the collected money after deduction and insisted that all the collected money should be provided without any deductions. As a result, the PA is facing severe financial crisis including inability to procure drugs, equipment and pay employees' salaries which affects the provision of health services in both the West bank and Gaza. This has further complicated the situation in the already exhausted Gazan's context.

In 2017, the USA decided to recognize Jerusalem as the capital of Israel. Since that decision, many Palestinians were killed or injured through the Great March of Return which took place every Friday and continued throughout the year 2019. These demonstrations were suspended in 2020 but still the consequences are still noticeable which leaves hundreds of people with disabilities and amputations. Not only that, the American Administration decided to cut financial support to the Palestinians including to the UNRWA (more than \$ USA 300 million) which serves Palestinian refugees. This cut negatively affected UNRWA services in 2020 particularly health, sanitation and education.

As a result of the compounded vulnerabilities describe above, there is more spread of infectious diseases, poverty related diseases particularly malnutrition and diarrheal diseases, as well as diseases related to chronic stress including psychosocial diseases and non-communicable diseases like cardiovascular, hypertension, diabetes and cancer. The maternal mortality rate reported in the past two years (2020) are particularly high 30 per 100,000 while it was 22 in 2018 and 10 in 2017.

Humanitarian assistance continues to be essential for approximately 80% of Gaza's population. Operated through the Ministry of Social Affairs, the Palestinian National Cash Transfer Program helps the most impoverished Palestinians – about 76,000 households in Gaza in addition to the UNRWA provided emergency food and non-food items – on an ad hoc basis – to about 1 million extremely poor refugees' beneficiaries.



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With regard to health, health determinants like peace, economic growth and safe environment are negatively affected by the protracted conflict in Gaza, with 14 years of blockade and economic hardship, which has resulted in increased vulnerability and ill-health among Gazans, particularly women and children. The chronic stress that people in the Gaza Strip face, means the area is experiencing an 'epidemiological transition' with wide spread of non-communicable diseases including heart disease, cancer, hypertension and cardiovascular diseases, and diabetes. In addition, infectious diseases resulted from poverty and bad sanitary conditions such as diarrhea, meningitis, hepatitis, parasitic infestation are constantly increasing. Also, anemia, malnutrition, smoking and drug abuse are at an escalating trend.

Covid-19 pandemic was an additional stressor that affected all life aspects for Gazans. On 5 March 2020, immediately after the first reported cases of COVID-19 in the West Bank, the President of the State of Palestine declared a state of emergency in the Palestinian territories, closing schools and other education facilities, restaurants, cafes, hotels, markets, wedding halls and religious places in both the Gaza Strip and the West Bank. Lockdown measures included periods of 24-hour curfews, sometimes for several weeks, and as of December 2020 night curfews, restrictions on movement within and across governorates, and strict penalties for those who do not adhere to social distancing policies. COVID-19 measures have also included redeploying resources to combat the pandemic, including closure of some primary health centers (UNFPA, 2020).

Even before the first cases of COVID-19 were reported in Palestine, there were serious concerns about how to tackle the virus, especially in Gaza, which is one of the most vulnerable and densely populated areas of the world and has suffered from the negative repercussions of 14 years of a strict international blockade and deliberate de-development. COVID-19 has compounded the dire economic conditions in Gaza, which were moving from bad to worse before the pandemic, according to the latest UNCTAD report on its assistance to the Palestinian people. High poverty and unemployment rates had persisted and GDP per capita declined for the third consecutive year as the Palestinian economy continued to slide in 2020. The West Bank registered its lowest growth rate since 2012 (1.15%), while Gaza's growth was virtually zero as it failed to rebound from the previous GDP contractions. The measures imposed by Israel, decline in donor support, and the ensuing poor economic performance, have resulted in a significant deterioration of socio-economic conditions in Palestine.

During the pandemic, households who reported needing to see a healthcare provider since the pandemic began, 20% of the total sample – more than one in five (23%) noted that they had not been able see a healthcare provider because of the pandemic and associated restrictions. Likewise, 31% of the households who reported needing a medication were unable to access it. Rates of hunger reported were significantly high in Gaza, where 40% of children adolescents noted that they had experienced hunger in the past month and 27% of Gazan children said this had been aggravated by the pandemic. A recent research showed that 9% of Gaza children may be experiencing moderate-to-severe depression, 19% are experiencing moderate-to-severe anxiety. Almost half of the children (49%) agreed that household stress had increased since the onset of the pandemic. In terms of drug use, 28% of young people thought that marijuana consumption had increased in their community, and 18% thought that young people of the same age and gender had increased their use of illicit drugs.



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In practice, the virus has followed different trajectories in Gaza and the West Bank, with the first case of COVID-19 in Gaza not reported until 23 August 2020. Since the beginning of the pandemic, as of end of December 2020, 38,137 cases have been reported in Gaza. The total number of deaths in Gaza 333 (case fatality is around 1%). The number of tests done is around 245,000 tests with a positively rate around 16% which reached to 35% during the peak of the first wave in Gaza. Although there are plans to Palestine started a COVID-19 vaccination program, till the end of the year the vaccination hasn't started.

MOH increased the high dependency and ICU bed capacity to 240 beds: 200 at COVID-19 assigned health facilities (European Gaza Hospital and Turkish hospital) and 40 in other hospitals (Shifa, Al Aqsa, Indonesian and Nasir hospital). The high dependency and ICU occupancy rate reached 100% in December 2020.

To alleviate Gazans' suffering, humanitarian and development actors including DSPR/Gaza are strongly committed to support people and reduce their vulnerabilities therefore has increased their level of support. During this reporting period, NECC had implemented several health, social and relief programs to assist poor and needy populations. NECC implemented many health, psychosocial and educational programs including TEVT. The paragraphs below give an overview of key achievements of the year 2020 which are detailed in this report. However, the demand is huge and a lot needs to be done to help people recover as well as long term interventions are needed to support the livelihood conditions and development aspects in Gaza.

At the health program, in 2020, around 18,263 families were intensely served, mostly women and children and received more than one aspect of the NECC comprehensive primary health care package, 76% of those beneficiaries are children and 58% are females. In addition to this number, those who served through the psychosocial program (benefiting around 4087), and our health education activities benefited more than 28,751 persons. NECC provided integrated health care to beneficiaries including health services, medications, lab investigations, psychosocial support and health education. The report provided rich details about the services provided to the needy populations and the positive impacts of these services. This year, around 14,591 lab tests were performed. Moreover, we served 10,629 children at the well-baby program, among them 2563 are newly registered children. 432 new women were registered at preconception care and received appropriate preconception care while 783 women attended preconception for one follow up visit and, 1657 women had preconception follow up visits which revealed how much the women get benefit from this service in total, 2218 pregnant women were served by our antenatal care program, among them 1573 are newly pregnant women. Family planning services were provided to 673 beneficiaries. Our general clinics served 2570 patients older than 6 years and 7098 patients younger than that who were examined by the doctor and treated for various diseases. In addition, our dental health program served 3811 cases.

At the vocational training front, NECC offers training in different professions and crafts including carpentry, metal work and welding, aluminum work, heating and air conditioning, general electricity, solar energy, advanced dressmaking, secretary and office management and recently in early 2020 launched a new program in multimedia and graphics design.

NECC continues developing the vocational training program and added new changes such as curriculum development, upgrading of equipment, expanding the training in solar energy, introducing AutoCAD engineering computerized software in training and introducing new diploma in multimedia and graphics design for female youth in Gaza.



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Also, in the year 2020, NECC continued the implementation of our large employment multi-year project which connects training with employment. In 2020, in total, 276 trainees were enrolled in the NECC vocational training program (195 males and 81 females) with an increase in number of students resulted from adding the new diploma of multimedia and graphics design.

Moreover, 162 trainees completed their training and graduated from the TEVT program in late the year 2020. In addition to TEVT, in 2020, the educational loans program supported 54 students who renewed financial support to continue their studies at the Palestinian universities at different specialties.

Finally, NECC is committed to continue and even increase its support to the vulnerable people in Gaza, however, the demand is much higher than the current capacity of the organization. NECC/DSPR needs more resources to be able to serve the needy population. It is worth pointing that any kind of economic recovery in Gaza is impossible while the blockade of Gaza remains in place. Even if it is lifted, it will take years to repair the damage and to recover the economy.

Extensive thanks to our partners' valuable support that enabled NECC to sustain the provision of health, educational and other services to our beneficiaries. With the kind support we received from partners, we succeeded to mitigate or at least to cope with the conditions associated with the ongoing conflict. Again, I would like to express my thanks and appreciations to all partners, donors, the World and Middle East Council of Churches, the Chairman and members, and the Executive Director of MECC/DSPR for their stand and unlimited support provided to Gaza Area program in solidarity with our people. I seize this opportunity to extend my heartfelt thanks and appreciation to the Chairman and Members of Gaza Area Committee for their devotion, valuable support and cooperation which enabled in the development and sustainability of the program reflected into the interest of the people especially during this critical era of our history.

Last but not least, I extend extensive thanks and acknowledgement to my sisters and brothers, the staff of NECCCRW's family at various positions for their commitment and hard work in rendering the services to the needy people under harsh conditions.

"The effect of JUSTICE will be PEACE,

And the result of

RIGHTEOUSNESS, SECURITY AND TRUST Forever"

"Isaiah 32:17"

Dr. Issa Tarazi

Executive Director

May 2021



Report Overview

The NECC Annual Report provides a comprehensive overview of NECC activities over the past year; covering the activities of the various NECC departments and 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 introducing NECC organization and its vision, mission and scope of work in addition to the context analysis, the second part is including the different activities took place in the determined period in relevance with the NECC stated indicators while the third part is focusing on the cross-cutting issues induced by situational, environmental and organizational context for NECC delivery of services and programs in addition to the future plan, sustainability, lessons learned and risk analysis. And finally, the fourth part includes annexes with success stories

Executive Summary

Effort is important, but knowing where to make an effort in the life, for vulnerable, and in relationship with others makes all the difference.

"Knowing is not enough; we must apply. Willing is not enough; we must do."

In this pathway, the next part is summarizing the efforts exerted by NECC over the year 2020 outlining different indicators of NECC service delivery during the determined reporting period crossing all NECC programs and centers.

With regards to health program, the 2020 annual Report of the NECC health program highlights the remarkable gains in some activities and delay in achieving some activities, including the detailed health statistics achieved by NECC, that clearly indicate the core health services that offered by NECC contributing in reducing mother and child deaths, infectious and communicable disease transmission, and achieving more than 50 per cent recovery rate among anemic and malnourished rates. Given the fact that the NECC centers in the Gaza Strip provide a wide range of services including maternal and child services, care of communicable diseases, and other preventive and curative services, this program contributed to the overall development through its impact on achieving three out of the eight Sustainable Development Goals (SDGs): Ensure healthy lives and promote well-being for all at all ages (SDG3), including improve maternal health and combating major diseases. Achieve gender equality and empower all women and girls (SDG5).

Palestinians continue to need humanitarian health services across the opt, particularly in Gaza, where needs have substantially increased in the past years, particularly in vulnerable locations and communities.



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NECC has contributed to sizeable health gains for Palestinian people since the beginning of its operations in 1952. NECC continues to provide quality health services to fulfil the health needs of vulnerable people, and it strongly relies on partnerships with donors, partners and other stakeholders.

Introduction:

The next paragraph describes the NECCCRW background, vision, mission, Goals, core values, and outlines the NECC various programs.

NECC Organization Background:

NECCCRW Brief:

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

Its work has rested on respecting the humanity and dignity of those whom it helps and on adherence to clear transparency and accountability standards. NECC supports the Palestinian people through six key areas: Health (Maternal and Child Primary Health Care), Technical Vocational Education and training (Empowering Youth Economic Status), Educational Loans for university students, Psychosocial Support for children, mothers, and students to cope with the negative impact of Gaza Violence, Emergency Relief projects including cash Relief and Job Creation initiatives, Advocacy policies and activities shared with the community, and community Development program.

NECCCRW has been focusing then on the provision of humanitarian aid and contributing to an overall improvement in living conditions and to poverty alleviation. Sectoral emphasis has been focused on various sectors particularly Health, Education, Vocational Training, Relief work where social casework support is offered to needy families in the form of cash or other assistance, Community Development and Advocacy. In addition, some more rehabilitative distributions are conducted, providing medical aids (prosthetic devices, wheel chairs, etc.). The needs and problems of Palestinians in the different geographical areas where DSPR operates vary considerably.



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NECC is an independent non-governmental organization. It is governed by Gaza Area Committee, which is composed of 12 members of both gender and is appointed by head of churches from their respective families forming the four members of the Middle East Council of Churches on equal church family representation.

It is the supreme organ of the NECC, which meets bimonthly to ensure effective operational performance, legal and regularly compliance, and implementation of long-term strategic plan. Management is directly responsible to the Executive Director for all administrative matters, including finance, supervised by the governing board.

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 rights

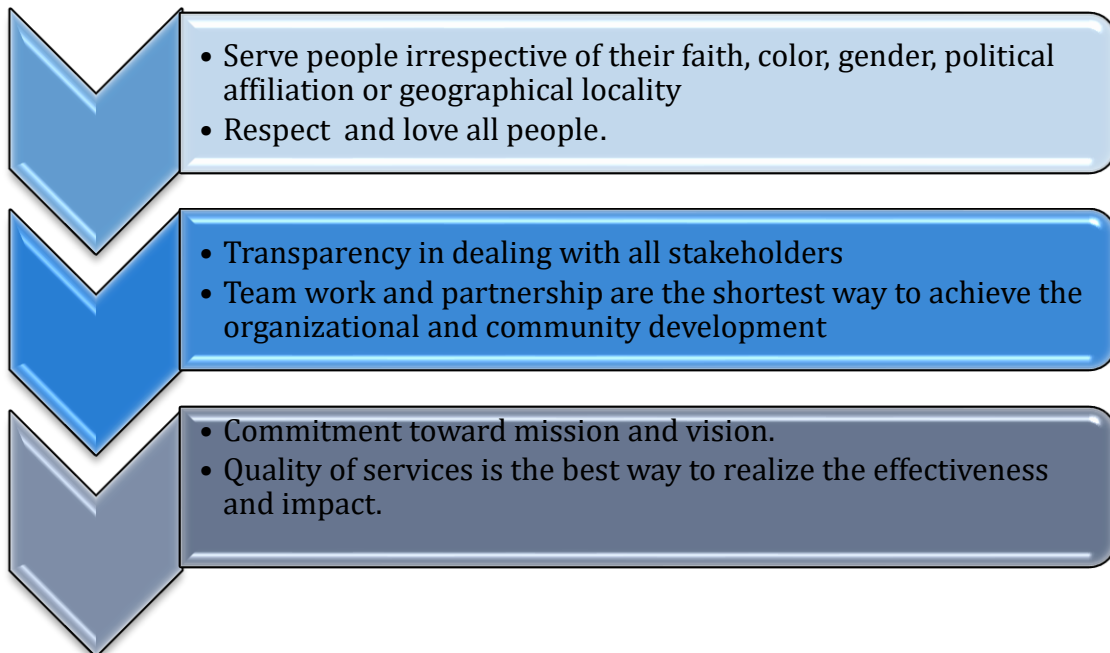


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NECCCRW Goals:

1. Provide and maintain primary healthcare services to enhance the wellbeing of Palestinian mothers and children.
2. Provide professional skills training and access to education to empower marginalized Palestinian youth to improve their own economic conditions.
3. Provide emergency assistance to alleviate the impact of emergency humanitarian situations when required.
4. Mobilize and empower Palestinian and other relevant communities to seek just and equal social and economic rights for Palestinians.

NECC-CRW Core Values:





1. Overview on NECC Programs and Services:

❖ Provision of Quality Primary Health Care services:

Health is a broad social concept that is difficult to precisely define or even to measure, though determinants for health for any population include peace, security, economy, income, education, democracy, equity, women empowerment, safe and healthy environment, appropriate nutrition and so on.

Good Health confers on a person or groups freedom from illness - and the ability to realize one's potential. Health is therefore best understood as the crucial basis for defining a person's sense of wellbeing. The health of populations is a distinct key issue in public policy discourse in every mature society often determining the deployment of huge society.

Thus, to improve the health status of Palestinians and to improve the quality of health care services, the NECC launched Gaza Health Program in 1952. The overall objective of the Gaza Health Program is to improve and to promote the health and the wellbeing of Palestinian people, particularly women and children and 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.

NECC operates three family health care centers in the Gaza Strip. These three centers are located in El Daraj, Shajaia, and Rafah. The three family health centers serve a population of 85,000, 125,000, and 16,000 in Daraj, Shajaia, 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 includes essential maternal and child health services such as antenatal care, postnatal care, health education, family planning, well-baby care, psychosocial services, home visits, treatment for malnourished and anemic children, and dental services. Additionally, the NECC health program offers laboratory testing and medication.

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

To avoid duplication of services and to ensure best use of scarce resources, since launching the health program, the NECC enjoys high level of cooperation and coordination with other health providers including the Ministry of Health (MoH) and other relevant organizations. The NECC health services are considered as the complementarily services for poor marginalized people.

The overall objective of the NECC Health Program is to improve and to promote the health of Palestinian people, in particular women and children.



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❖ **Livelihood and Economic Development (TVET Program):**

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

While women VTC's of Secretary studies, Advanced Dressmaking and Multimedia and Graphics Design are located in the NECC main building in Remal, Gaza City.

These vocational training centers 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 and multimedia and graphics design courses 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 aluminum should be aged between 14-16 years, and known as school drop-outs, and men applying for electricity and air conditioning courses 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) centers provide its services to a total of approximately 270 trainees per annum.

❖ **Psychosocial support:**

Since April 2009, as a response to 2008-2009 war, and in order to support mothers' and children's mental health and psychosocial well-being within such complex context, the NECC has started to provide psychosocial support program across the three NECC centers with the aim of improving the level of mental health of children and women beneficiaries. 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 NECC psychosocial program offers diverse services including psychosocial support, emotional support and debriefing, recreational activities, and individual and group counseling. The counselors use various counseling techniques such as: the mind and body, cognitive behavioral interventions, individual and group counseling, seminars, home visits, and community-based education through awareness programs for mothers. The program focused on the Palestinian families through the health centres, vocational training centres, secretarial centre, advanced dressmaking centre and NECC staff in cooperation and coordination with relevant organizations.

❖ **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.



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❖ **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).

❖ **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.

❖ **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.



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Gaza Context:

Description (socio-political, health, economic and, environmental) - change from last year:

Palestinians in Gaza are 'locked in', denied free access to the remainder of the occupied Palestinian territory and the outside world. Movement restrictions imposed by Israel since the early 1990's and intensified in June 2007.

The isolation of Gaza has been exacerbated by restrictions imposed by the Egyptian authorities on its single passengers crossing Rafah. (OCHA situation report, 2020).

Since the 2014 hostilities, conditions in the Gaza Strip are looking increasingly grim. Under an Israeli-imposed of 13- years of blockade, access to key resources has also been stifled, with disastrous humanitarian and economic consequences. Therefore, conditions in the Gaza Strip limit development and economic opportunity for the local population, and further the prolonged closure of the Rafah Border Crossing continue to hamper economic and social development.

The Gaza strip in particular, is characterized by a protracted crisis with humanitarian consequences, affecting people who are already vulnerable. A majority of the people in Gaza rely on humanitarian aid for survival.

Years of conflict and blockade have left 80 per cent of the population dependent on international assistance. The economy and its capacity to create jobs have been devastated, resulting in the impoverishment and de-development of a highly skilled and well-educated society.

In 2020, the average unemployment rate has reached over 50 per cent, one of the highest in the world, according to the World Bank. (UNRWA report, 2020).

The OCHA Humanitarian Needs Overview (HNO) 2020 documented that the level of food insecurity is alarmingly high, revealing the long-term impact of the disruptive shocks of recent years, where an estimated 68% of households are severely or moderately food insecure. Pregnant and lactating women are malnourished, unable to continue infant and young child feeding (IYCF) practices, which then causes acute malnutrition and disease prevalence in babies and toddlers, the pandemic has also pushed a greater number of households into poverty and food insecurity.

Access to clean water and electricity remains at crisis level and impacts nearly every aspect of life in Gaza. Clean water is unavailable for 95 per cent of the population, and, availability of electricity improved only recently, increasing from 4-5 hours per day in the past months to up to 12 hours per day electricity cut.

However, ongoing power shortage has severely impacted the availability of essential services, particularly health, water and sanitation services, and continues to undermine Gaza's fragile economy, particularly the manufacturing and agriculture sectors.



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Children under 5-years of age remain highly vulnerable to neonatal mortality, developmental delays and disabilities. Although the maternal mortality ratio (MMR) has reduced to 20 per 100,000 livebirths (MICS, 2014), every fourth pregnant woman in the State of Palestine is considered high-risk and requires specialized health care during pregnancy (14,000 cases annually). Some 22 children die out of 1,000 live births (Gaza: 24 deaths per 1,000 live births; West Bank: 20 deaths per 1,000 live births).

This situation comes amid chronic shortages of medical supplies in Gaza's health sector. More than 46% of essential drugs and 28% of medical disposables are at Zero stock, meaning there is less than one month's supply on the shelves. Additionally, the risk of escalation in military confrontations with Israel remains high.

In Gaza, 2020, even before Gaza reported its first cases of covid-19 on 22 March (among returnees to Gaza), there were serious concerns about how to tackle the virus in one of the most vulnerable and densely populated areas on the globe, where social distancing is hard to implement, the economy is already precarious, and in a context that has suffered from the negative repercussions of 14 years of a strict international blockade and deliberate de-development. With the declaration of a 'state of emergency' in the Palestinian territories on 5 March after the first reported cases of covid-19 in the West Bank, Palestinian authorities decided to close schools and education facilities, restaurants, cafes, hotels, markets, wedding halls and religious places and to modify the schedule for providing health services in Gaza including closing most of MOH clinic. All the cases reported in Gaza from 21st of March till 23rd of August were among travellers returning back to Gaza. On August 24th, the first cases of community transmission were reported and the number of cases started to increase reaching around 1000 cases daily. The total number of confirmed cases till the end of the 2020 is 41264, the total number of deaths 375. Then, complete lockdown was imposed and all the PHC centres and non-emergency health care services were suspended in Gaza for almost 7 weeks. Then, the lockdown measures were lessened and services provision resumed but hasn't been scaled up to the pre-Covid-19 level.

NECC follows strictly the instructions of the Ministry of Health and the UN agencies and took measures to reduce the chances of spread of the virus among the beneficiaries and the staff of the organization. NECC strategy focused on continuing serving the population in such a critical period, meanwhile protecting beneficiaries and staff. The following has been decided at our health program and our partners have been informed about these changes.

- Reducing waiting time to the minimum, trying to treat each client as quick as possible, meanwhile maintain quality and safety
- Changing the flow of patients in the clinics to reduce the possibilities of infection transmission. For example, beneficiaries with no medical conditions should follow a track that is different from the sick people
- Teaching staff about extra measures to protect clients and themselves



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- Providing our staff with protective devices like gowns, masks, antiseptics
- Training the staff on providing consultation over the phone.
- Activating free hotlines

Regarding services, NECC rescheduled the services as follows:

- Preconception care; to be provided every two months, distribute folic acid for two months instead of one month
- Antenatal care visits; high risk cases, follow up monthly or refer to hospital as needed
- Antenatal care visits for normal cases; once every two months-give supplements for two months
- Well-baby (anaemic and malnourished children), follow up every two months, giving medications for two months instead of one month
- Well-baby for normal children over six months, reduce frequency of visit by duplicating the interval between visits, like those who should come monthly, should come every two months
- Family planning, providing the service and family planning methods for two months, instead of monthly or biweekly
- General clinic, doing triage and then sort patients accordingly into different categories and manage accordingly
- Psychosocial, group sessions should not include more than 5 persons, utilize more individual therapy and counselling
- Dental, treat patients with acute conditions (like infection, extraction), cases who requires repetitive visits such as scaling are suspended
- Health education focus should be more on individual sessions, group sessions to be avoided as much as possible, increase provision of educational materials
- Post-natal home visit suspended
- Launch out mobile health services through hotline and phone consultation

NECC informed beneficiaries about the changes in the service provision through public advertisements and through sending SMS.



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Highlights on progress achievements:

The report summarizes the activities of Near East Council of churches during the year 2020.

*Regarding Access to Primary Health Care and Medication, the number of newly registered families during this reporting period has reached **1,053** families, while the number of the total families benefitted from NECC PHC clinics during this period was **9,659** beneficiaries .and the total number of beneficiaries was **18,263 (58%)** of them are females.*

***432 new** women were registered at preconception care and received appropriate preconception care while **783** women attended preconception for one follow up visit and, **1,657** women had preconception follow up visits, that revealed how much the women get benefit from this project and they are in need for this service, (anticipated target is 1000),*

*For Antenatal care the number of new registered pregnant was **1,573** distributed as following:*

797 in Shijaia, 557 in Darraj and 219 in Rafah, of them 112 women who received preconception care become pregnant and enrolled at NECC antenatal care program during the reporting period.

1328 pregnant women out of 1573 pregnant received antenatal care services during the first trimester according to national protocol, that's mean 84.4% received the ANC in the first trimester.

NECC encourages pregnant women to receive their first antenatal registration assessment as early as possible, and to have at least four antenatal care visits throughout their pregnancy according to the antenatal national protocol, and to promote early detection and management of risk factors and complications.

*So far, the number of women who were already registered and followed up during the reporting period was **2218**, the anticipated target of providing (annual target is 2000). while the number of antenatal care visits was **8131**.*

85.5% of pregnant women in targeted locality received timely ANC at least 4 visits, which is less than the usually achieved figures in the past year. This reduction is attributed to COVID -19 pandemic situation, and closure of NECC clinics for around 6 weeks during the strict lockdown period in Gaza late in August 2020 and rescheduling the Antenatal care to minimize social contact and increasing the interval between pregnant visits to NECC antenatal care clinics, and provides appointments every 2 months to the pregnant instead of monthly appointment.

Furthermore, 44.2% of anemic pregnant were improved or fully recovered.

2127 sick pregnant examined by the doctor and received appropriate treatment.

*For postnatal care,**902** delivered women received postnatal care during this reporting period.*

53.4% of delivered women received timely quality postnatal care three times, and 75.2% of delivered women received timely quality post-natal care at least twice, and this program was suspended because of COVID-19 pandemic since March 2020, as NECC used alternative solution that to provide E- counselling, and consultation by phone for postpartum mothers.



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808 newborns (431M & 377 F) received care during postnatal care.

90.2% of those women passed postpartum period safely without any complication.

For the family planning program, 673 women benefited from family planning services during this period, (the anticipated target is 1000), but due to COVID-19 Pandemic, we provide the service and family planning methods for two months, instead of monthly or biweekly

*For well-baby- program, the number of newly registered children in this reporting period has reached **2563** Shajaia received the highest number of new children at the well-baby service delivery points (1073) followed by Daraj (768) and Rafah (722), this is also could reflect an increased demand for the services.*

In 2020, due to Covid-19 pandemic and the lockdown measures, 10,629 children were screened and received 19,278 well baby visits (target is to screen 12,000), which is less than the usually achieved figures in the past year. This reduction is attributed to closure of NECC clinics for around 6 weeks during the strict lockdown period in Gaza late in August 2020 and rescheduling the well-baby services to minimize social contract and increasing the interval between children visits to NECC well baby clinics.

Among the screened children, 1035 were found anaemic or malnourished and subsequently enrolled in the treatment program. The prevalence of anaemia and malnutrition were high especially in the last two quarters of the year (in Shajaia the prevalence of malnutrition was 14% and in Darraj the prevalence of anaemia was 35%), possibly as a result of deterioration of the livelihood conditions as a result of Covid-19 and the decrease access to health services. In total, 10,070 lab tests were done and 15,222 bottles of medications were dispensed to sick children.

Around 80% of anaemic children were recovered completely from anaemia within the recommended 3 months of treatment. Similarly, the recovery rate among wasted children was very high, nearly 90%. Among children with underweight, the recovery rate was somewhat less around 70%. Because stunting took longer time to recover, nearly 60% of stunted children had recovered within the recommended 4 months of treatment.

*The number of patients above 6 years old as cases examined by doctors has been **2570** while **7098** children under 6 years were examined by doctors and received treatment*

*The number of cases examined by dentists and received dental care services had reached **3811**.*

For health education, the number of health education sessions at this reporting period was 1301 sessions for 28,751 participants.

Regarding psychosocial support program; 545 school children attended the three family care centers received psychosocial support activities 447 kindergartens children. Psychosocial support activities provided either, group sessions or counseling or recreational activities while 2878 mothers and women received PSS either group sessions, individual counseling, group counseling or consultation. Additionally, consultations over phone (E-counseling) conducted to 128 children, and 89 mothers, this because of COVID-19 pandemic and it's spread among locals.



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With regards to the **Technical Vocational and Educational Training (TVET) program**, during the reporting period, a total of 276 enrolled trainees including male and female, continued to receive high quality vocational training skills in the designated fields of carpentry/furniture making, welding and metals work, aluminum work, refrigeration and air conditioning, general electricity and motor rewinding, secretarial studies, advanced dressmaking and graphics design and multimedia. Where about **29.3%** out of those trainees are females and the rest of **70.7%** are almost males.

Some major changes have been realized into the TVET program represented in launching new training program in graphics design and multimedia for youth girls in Gaza Strip starting from January 2020.

Additionally, **306 TVET students** received PSS.

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.**

Annual Indicator	Annual Achieved	% of achievement
At least 95% of pregnant women in targeted locality received timely ANC at least 4 visits	85.5% %	Almost Achieved
At least 70% of women in targeted locality received timely quality post-natal care at least twice.	75.2%	Achieved
1,200 new pregnant women registered for ANC annually	1,573	Achieved
7,000 antenatal care visits made annually	8,131	Achieved
1,800 pregnant women received follow up visits, newly registered and on-going	2,218	Achieved
1,600 postnatal care visits conducted annually	1,079	67% achieved Suspended because of COVID-19 pandemic
12,000 children registered at the well-baby clinic and screened for anaemia and anthropometric measurements	10,629	Almost Achieved
25,000 well baby visits were conducted annually	19,278	77% Achieved
7,000 sick children up to 6 years old received medical examination and treatment	7,098	Achieved
1,000 couples received reproductive health services and awareness	673	Almost Achieved



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Annual Indicator	Annual Achieved	% of achievement
Over 4,000 women, children and adults in targeted areas receive dental care annually	3,811	Almost Achieved
Over 4,000 patients examined, tested and received treatment	2,570	Limit the number of patients to prevent spread of COVID-19 infection and to keep social distance
2000 children received psychosocial support	1,120	Focus more on individual counselling rather than group sessions, and also the group consists of 5 children
3,000 mothers/women participated in psychosocial support activities	2,967	Almost Achieved
A total of 117 students receive training in carpentry/furniture making, welding and metals, Aluminum work and refrigeration and air conditioning annually	131	Achieved
A total of 48 students new and old receive training in electricity skills	64	Achieved
A total of 20 students receive training in secretary study	29	Achieved
A total of 15 students receive training in Advanced dressmaking	23	Achieved
At least 60 educational loans provided to students to complete their study at Palestinian universities	54	90%
1 to 2 policy/advocacy issues resulted in improving justices and economic status	2	100%
4 initiatives implemented with local communities	3	100%
10 visits paid by relevant internationals	5	Achieved

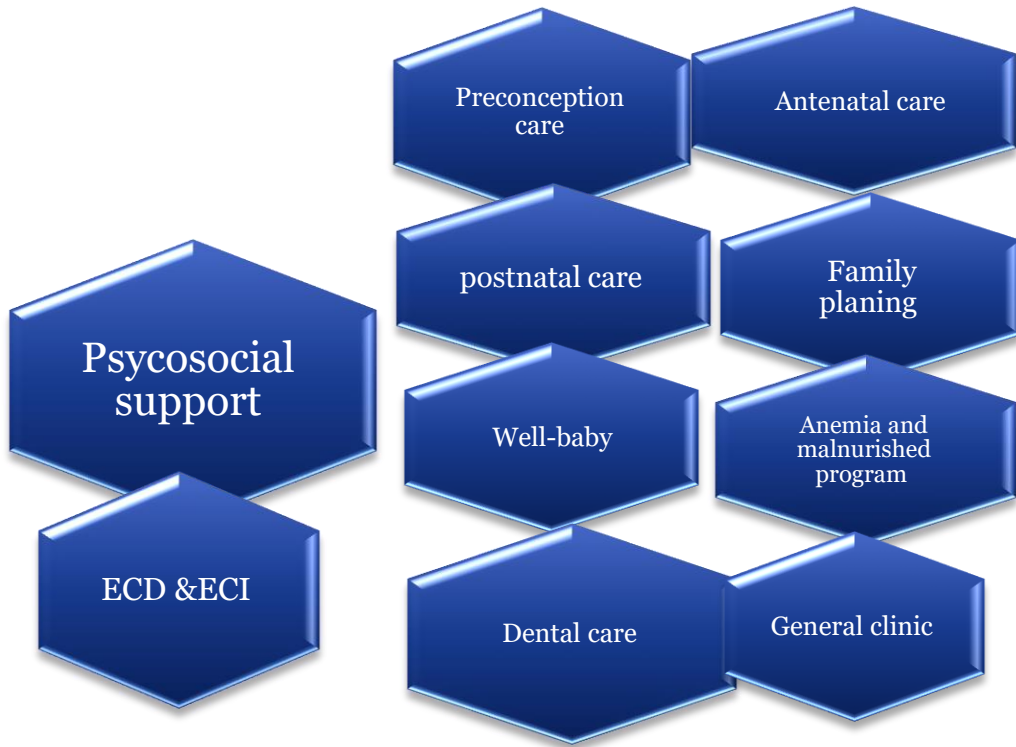


1.1 NECC HEALTH PROGRAM





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Health Program

Strategic Objective 1: Provide and maintain primary healthcare services to enhance the wellbeing of Palestinian mothers and children.

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 includes essential maternal and child health (MCH) services such as preconception care, 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.

The overall objective of the NECC Health Program is to improve and to promote the health of Palestinian people, in particular women and children. Additionally, the program has the following specific objectives:

To reduce the prevalence of malnutrition and anemia among children under 5 years through a targeted nutritional program.

To contribute to promoting the psychosocial well-being of the Palestinian population through support to traumatized patients/persons particularly women and children. During this reporting year, the three clinics offer health services to beneficiaries, including 11,522 families in the three marginalized areas.

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

By age	More 18 years		Less 18 years		Total
	M	F	M	F	
No of beneficiaries	409	4078	7113	6663	18,263
Total	4,487		13,776		
%	24%		76%		

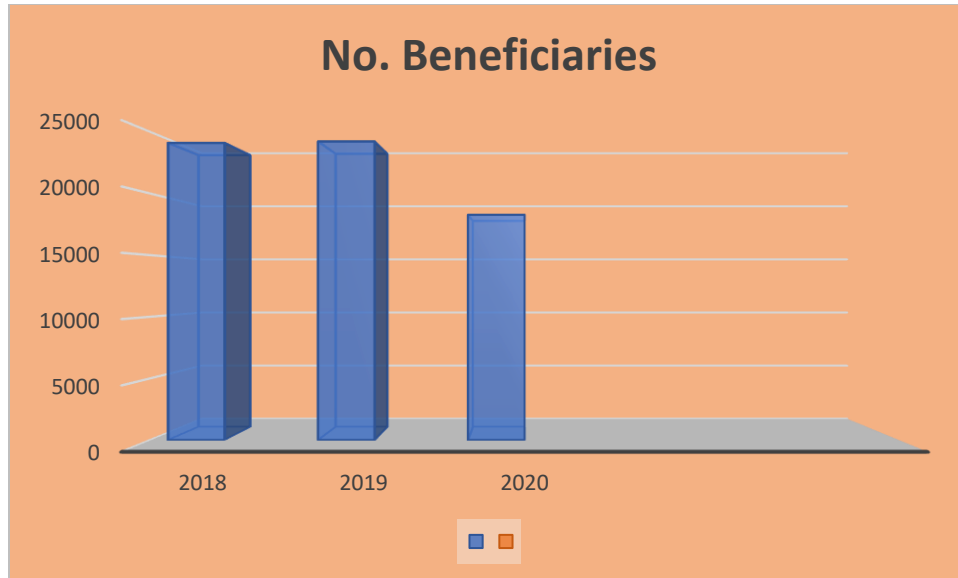
*Percentage of females among beneficiaries 58%.

*Percentage of males among beneficiaries is 42%.

*Percentage of people with disability among beneficiaries 1.6%.



Figure (1) below shows the comparison of number of beneficiaries as cases among the previous three years:



The figure indicates that there is decrease in beneficiaries for year 2020, and this because of COVID -19 pandemic, and restrictions, and curfew happened because spread of COVID-19 among locals, and increase the prevalence of infected people.

1.1.1 Preconception care

NECC launched Preconception Care (PCC) program in 2017 as an important component of the maternal health care and was fully integrated within the primary health care system.

The main goal of the programme is to protect and promote the health of Palestinian women, children and families by providing preconception, pre-natal, post-natal and family planning services that complement each other and are fully integrated within the NECC strategy.

The program is congruent with SDGs aiming to reduce maternal mortality rate and infant mortality rate in primary health care activities, and to prevent and detect any deviation from the normal pattern of pregnancy by maintaining a regular system of health care monitoring and supervision.

This approach is designed to strengthen the provision of high-quality antenatal care services at the NECC primary health care premises. Already NECC provides ANC services but the challenge is to promote the provision of timely, high quality ANC care according to the approved national protocols including early booking and registration, introducing the preconception care (counselling and Folic Acid supplementation), and to promote appropriate nutritional status of pregnant women through appropriate counselling, supplementation and follow up.



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Mothers' knowledge about pregnancy its antecedents and consequences are limited and requires further reinforcement especially knowledge about danger signs of pregnancy, labor and post-partum affecting mothers and fetus/infant.

This program aims at improving the health status, and reducing behaviors, individual and environmental factors that contribute to poor maternal and child health outcomes. Its ultimate aim is to improve maternal and child health, in both the short and long term.

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, 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.

Preconception care services became an integral component of NECC health program and services and were operational and fully implemented at NECC clinics. The preconception care program is now part of the maternal health care and fully integrated within the NECC primary health care system, through this program, NECC achieved the followings:

- 432 new women were registered at preconception care and received appropriate preconception care while 783 women attended preconception for one follow up visit and, 1657 women had preconception follow up visits which revealed how much the women get benefit from this project and they are in need for this service. (Anticipated target is 1000).
- Out of those who followed at preconception care, 134 women were newly married, 287 women have had children before, 144 had abortion before, and 87 women were followed previously at NECC family planning program.
- 730 women attended preconception care received folic acid supplementation.
- Number of women who screened and found anemic was 550 and they received appropriate treatment,
- 336 women found with more than health problem. and, 27 women were classified as high risk.
- 2974 women received health education and awareness sessions about nutrition, preconception care, and hygiene practices particularly during COVID-19 pandemic, the most commonly delivered health education method was lecture, and educational films on smart board, psychosocial support sessions about stress management, gender-based violence, and after that,
- through the pandemic, the health education was more concern on individual counselling, and focus on hygiene practices, and precaution procedures.
- 90.2% of those women passed postpartum period safely without any complication.
- It's worth mentioning that the prevalence of congenital anomalies reduced by 50% in comparison to the previous year.



1.1.2 Antenatal Care (ANC)

Indicators: At least 95% of pregnant women in targeted localities receive timely ANC of at least four visits, and at least 70% of women in targeted localities receive timely quality postnatal care at least twice.

No. of women with high-risk pregnancy during 2020 at NECC clinics was **198** cases (5.5 % of all new pregnant women).

As the NECC health program log frame, this outcome will be achieved by providing pregnant women with at least four timely ANC visits, offering timely and quality postnatal care, and improving women's overall knowledge of nutrition, hygiene, reproductive health and best practices.

ANC care provides incredibly important opportunities for pregnant women with a wide range of interventions including treatment, education, counselling, screening, and promoting the well-being of the mother and fetus. ANC is effective when sought early, and when followed with quality care that continues until delivery.



The NECC three health centers adopted the MOH-ANC protocols for follow up visits. These protocols are in line with the WHO protocols. According to the ANC protocol, each pregnant woman may have ANC visits on the following schedule: (1) every month, from the first through the end of the sixth month of pregnancy (the first 28 weeks), (2) every three weeks in the seventh and eighth months (from week 28 to week 36), and (3) every week in the ninth month (from week 36 until birth).

The schedule of ANC visits enables the three NECC centers to offer a continuum care that is accessible and of high quality, but because of Covid19 pandemic, NECC rescheduled its health services provided and also limited the visits to beneficiaries.

The main achievements of antenatal are as follows:

- 1573 new registered pregnant, 797 in Shijaia, 557 in Darraj and 219 in Rafah, of them 112 women who received preconception care become pregnant and enrolled at NECC antenatal care program during the reporting period. of them 112 women who received preconception care become pregnant and enrolled at NECC antenatal care program during the reporting period.
- NECC encourages pregnant women to receive their first antenatal registration assessment as early as possible, and to have at least four antenatal care visits throughout their pregnancy according to the antenatal national protocol, and to promote early detection and management of risk factors and complications.
- **1573 new** pregnant were registered and received appropriate antenatal services according to ANC protocol, of them **636** women were primigravida.
-



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- The number of women who were already registered and followed up during the reporting period was **2218**, the anticipated target of providing (annual target is 2000). while the number of antenatal care visits was **8131**, and because of COVID-19 pandemic NECC rescheduled, the antenatal care program for follow up visits for normal cases became once every two months and to give supplements for two months.
- **1328** pregnant women out of **1573** pregnant received antenatal care services during the first trimester according to national protocol, that's mean **84.4%** received the ANC in the first trimester.
- **85.5%** of pregnant women in targeted locality received timely ANC at least 4 visits, in the previous years this indicator was 98.1% of pregnant received ANC at least 4 visits, and this indicator impacted due to COVID -19 situation, and provides appointments every 2 months to the pregnant.
- Folic acid supplementation is provided to all pregnant women, **912** pregnant women have received Folic Acid during first trimester of pregnancy according to national protocol to be prevented from having congenital anomalies.
- **2050 pregnant** have got ultrasound services three times during pregnancy.
- **1268 pregnant** women received 5 laboratory tests during their pregnancy.
- The total number of those pregnant examined and found anaemic and enrolled in treatment programs was **1073 women out of 1475**, which means that 72.7% of pregnant women were having anaemia.
- **44.2%** of anaemic pregnant were improved or fully recovered.
- **2127 sick** pregnant examined by the doctor and received appropriate treatment.
- **53.4%** of delivered women received timely quality postnatal care three times, but this program was suspended because of COVID-19 19 pandemic since March 2020, however, all pregnant women received postnatal care at least twice and also, they received E-counselling by phone and, **808** newborns (431M & 377 F) received care during postnatal care.

There is no registration of maternal mortality at NECC health clinics in the year 2020, which revealed the high quality of care.

The referred cases of pregnant women during the reporting period were 33 complicated cases of pregnant women who referred 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 2020, 2050 pregnant have got ultrasound services three times during pregnancy.

1.1.3 Post Natal Care (PNC)

Postnatal care is the core medical care that every healthy woman and healthy baby should be offered during the first 6-8 weeks after the birth.



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In the Gaza Strip, postnatal health care has been a neglected aspect of women's health care, in which the main health providers UNRWA and the MoH do not offer systematic postnatal care services.

Currently, UNRWA health centers conduct postnatal care in the first week after delivery when newly delivered women visit a health center to immunize their babies. This is also the case in the MoH centers. Both the MoH and UNRWA conduct home visits only for high-risk cases.

The postnatal care provided by the NECC health program is among few systematic, well-organized postnatal care services in the Gaza Strip that includes home visits to all newly delivered women. In brief, the NECC postnatal services targets all delivered women who attended ANC services in the three health centers through providing home visits.

Ideally, the first home visits should be within the first 72 hours, the second home visits will be within 7 days after delivery; and the third one will be within the 42 days after delivery. During home visits, the health professionals, mostly midwives, conduct physical examinations including a uterine and abdominal examination, checking blood pressure and assessing breastfeeding practices. With regard to newborn care, health professionals check the umbilical cord, conduct a physical examination, and check for any health problems.

In terms of visiting the NECC centers, during the home visits, NECC health professionals advise women to come to the center and register their babies in the well-baby clinic, preferably within 30 days after delivery.

In the year 2020, this activity was suspended since first cases of covid-19 on 22 March (among returnees to Gaza), there were serious concerns about how to tackle the virus in one of the most vulnerable and densely populated areas on the globe, where social distancing is hard to implement, so NECC response was to launch out mobile health services through hotline and phone consultations.

According to the program log frame, at least 70% of women in targeted localities receive timely postnatal care. So, this indicator along the lines of ANC services has been achieved and the percentage of women who had postnatal care outweighed the desirable.

- 902 delivered women received postnatal care during this reporting period.
- 53.4% of delivered women received timely quality postnatal care three times,
- 75.2% of delivered women received timely quality post-natal care at least twice.

Women who follow up for antenatal care at NECC family health care centers during pregnancy used to receive PNC three times, two at home and third one either at home after delivery by NECC staff, or could be at the center, but this year, the program of postnatal home visit was suspended because of COVID-19 pandemic since March 2020, and its spread later among the community.

During the postnatal visits, the midwife/nurse provide psychosocial support services to mothers, provide health awareness sessions pertaining to postnatal period such as breastfeeding, family planning, nutrition, baby care, danger signs and hygiene, 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.



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Additionally, they check the baby's weight and perform umbilical dressing. Also, they filled a questionnaire about both mother and baby.

NECC during 2020 continue the promoting of PNC project with support from UNICEF. The overall objective of the project is to contribute to reduce the morbidity of the targeted pregnant women/mothers and neonates/children at the postnatal period in addition to increase national capacity in terms of ECD, and ECI. The project aimed to increase coverage of PNC services for registered women at the postnatal period. The project started in March with higher coverage including Shijaia, Darraj and Rafah areas.

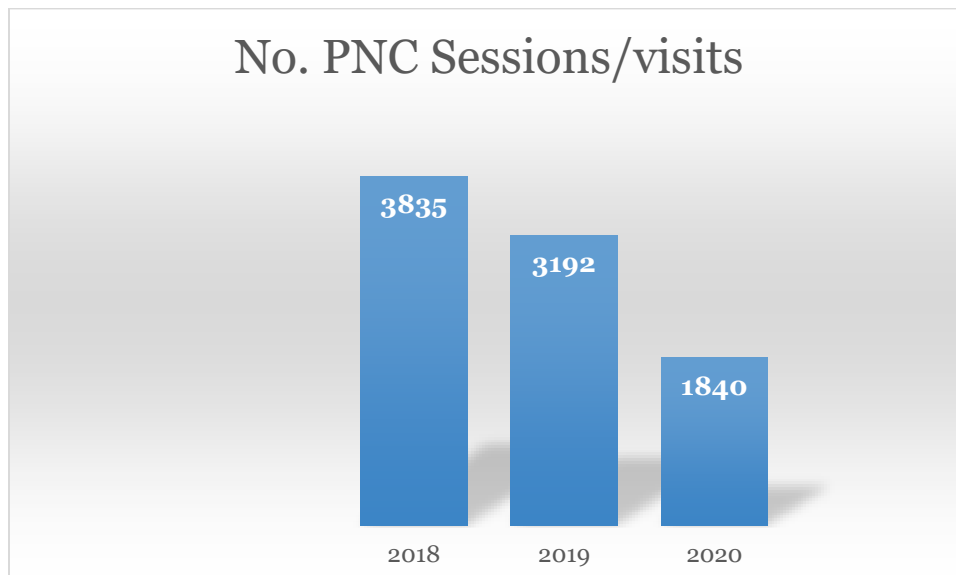
The project is aiming to increase coverage of PNC services for registered women at the postnatal period to reach 1000 women and their babies per year in all areas through appropriate assessment, care provision, counseling and health education to safely pass the postnatal period.

The NECC postnatal program involves conducting home visits to all newly delivered women, mostly in the first 72hours after delivery, and second one through seven days after delivery, and the third one is after 42 days. Contrary to the NECC postnatal program, UNRWA and MOH postnatal programs involve visiting only defaulters and high-risk pregnancy cases.

Regarding the post-natal visits, the total number of deliveries during 2020 in the three localities who were registered in ANC was **1840** home visits were performed to **902 mothers**.

NECC achieved 1840 PNC sessions/visits in three served localities it was 3192 in 2019, 3835 in 2018, 4719 in 2017), and this decrease in the postnatal visits was due to COVID-19 pandemic, and it's spread among locals, restrictions, and lockdown announced by MOI, and MOH. The total number of PNC sessions/visits were 1840, out of them 534 at home and 1306 at three health clinics.

Figure (2) below shows the comparison of number of PNC sessions/visits were conducted among the previous three years:





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This figure above revealed that there is decrease in PNC home visits, as this activity was suspended because of COVID-19 pandemic, to prevent cross infection.

- **53.4%** of delivered women received timely quality postnatal care three times.
- **75.2%** of delivered women received timely quality post-natal care at least twice, and this program was suspended because of COVID-19 pandemic since March 2020.
- **90.2% of those** women passed postpartum period safely without any complication, while 5.8% of children during 6 weeks of their born had specific medical conditions and received appropriate treatment and recovered.

All pregnant women received postnatal care at least twice and also, they received E- counselling by phone and, **808** newborns (431M & 377 F) received care during postnatal care.

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 was **73%**.

Regarding the psychosocial support provided during postpartum period.

NECC team assess all the mothers after delivery using Edinburgh scale, any mother discovered to be abnormal is assessed using PHQ for depression and GAD-7 for anxiety. During this reporting period 520 mothers were screened by Edinburgh scale during the postpartum period, distributed as following: 317 in Shijaia, 178 mothers in Darraj and 25 in Rafah, among them 26 were abnormal that's mean 8.2% of postnatal cases suffered from depression or anxiety and they received Psychosocial support services provided by NECC psychosocial counselors.

Actually, NECC has a psychosocial counselor in each clinic in addition to the well-trained health staff on mental health disorders and psychological support.

NECC will continue provision of PNC to all mothers and babies in the three targeted areas with more focus on the new issues which NECC learned through the current project cycle with UNICEF such as danger signs for neonates, health education on newborn care and family Planning tools: Advantages, and disadvantages, anemia among deliveries, health promotion on neonatal care, Additionally NECC still used an android program for home visits/outreach activities especially postnatal care for accurate date and saving information.

It is worth mentioning that NECC launched free hotlines consultations, mobile services for medical consultations, and E-counseling.



1.1.4 Family Planning Services (FP)

High fertility rates are associated with poverty, increased rates of infant and under-five child mortality, reduced female labor force participation, and low school enrollment for children. In order to achieve the above outcomes. The NECC family planning clinics offer free family planning methods and counseling. Family planning services at NECC were launched at family health care center in Darraj in 1995 upon the request of the local community.



In 2002, family planning services were extended to Family Health Care Centre in Shajaia and in 2014 the family planning program was run in Rafah, this was upon the community needs and request. A female gynecologist and staff nurse run the family planning clinics inside each one of the three health care centers. The family planning methods which are commonly used are: intrauterine devices (IUDs), pills, injections and male condoms. The women have a good discussion with the gynecologist in order to select the best and safe method of contraception after the medical examination and sometimes they need to discuss with their husbands and come back with the decision of both of them.

During 2020, the number of new acceptors was 79, (**365 in 2019**, 284 in 2018 and 391 in 2017). Beneficiaries of Family Planning and visits disaggregated per area are shown in **table (3) below**.

673 women benefited from family planning services during this period, (the anticipated target is 1000), but due to COVID-19 Pandemic, we provide the service and family planning methods for two months, instead of monthly or biweekly.

Area	No of beneficiaries	FP Visits
Shijaia	230	406
Darraj	373	1021
Rafah	70	185
Total	673	1612

Table (4) below shows the distribution of acceptors of contraceptives disaggregated per locality and year of reporting:

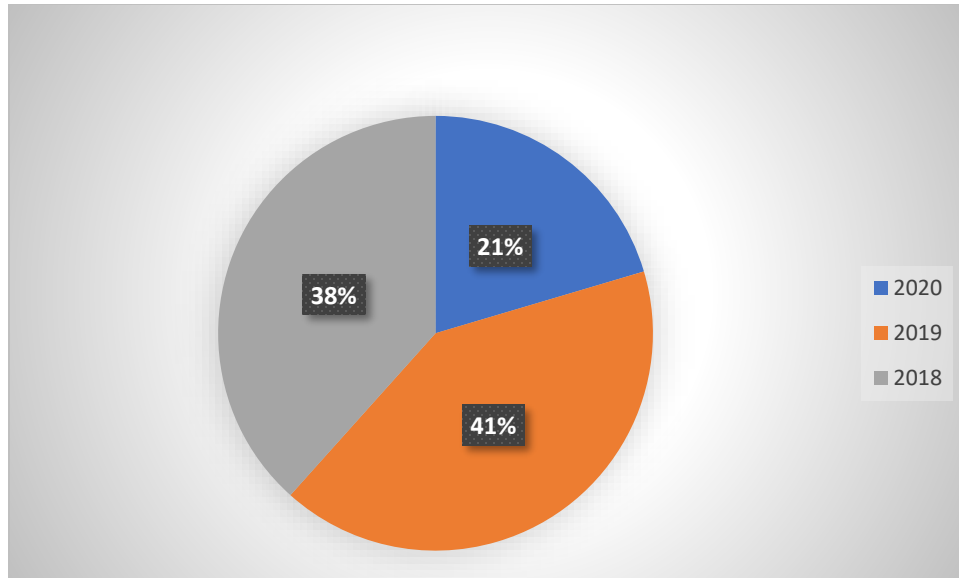
Center area	2018	2019	2020
Shijaia	505	548	230
Darraj	642	670	373
Rafah	118	141	70
Total	1265	1359	673



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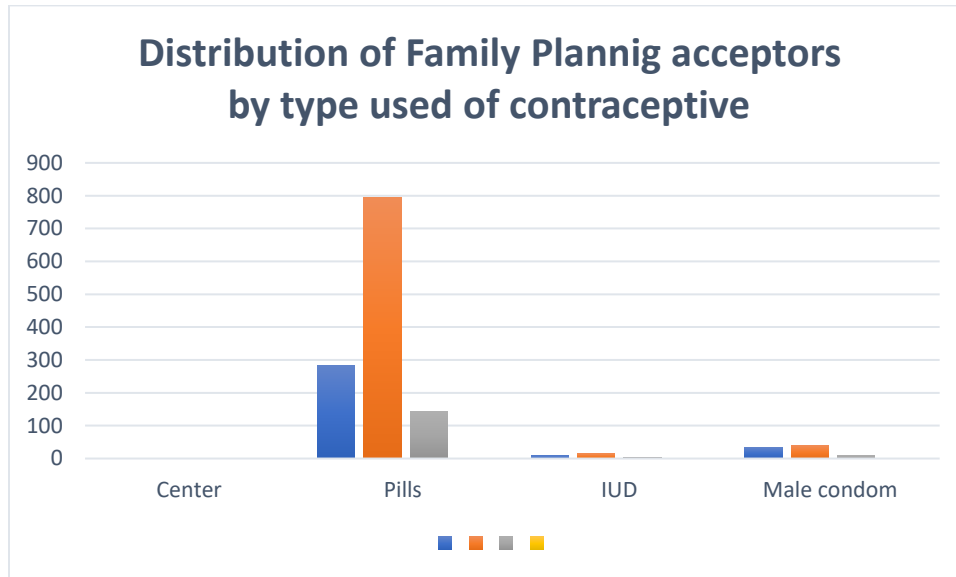
It was noticed an increase in percentage of beneficiaries benefited from FP services among the last three years as in the following **figure (3)**:



The **table (5)** below showed the distribution of Acceptors by Type of Contraceptive in NECC Family Planning clinics by locality:

Center	Pills	IUD	Male condom
Shijaia	284	9	35
Darraj	794	16	41
Rafah	143	3	10

The most used tool was the pills in the three localities with male condoms ranked second and IUD third one. The **figure (4)** below illustrated the distribution of family planning acceptors by the type used of contraceptives.



1.1.5 Well Baby Program (WB)

Well-baby services are integral part of NECC health program designed to provide health care for children 0-6 years. Children received quality well-baby services according to the Palestinian protocols. The rhythm of visits is inversely correlating with age, where younger children are being visited more frequently. At well-baby visits, children anthropometric measurement, weight and height are measured and also their haemoglobin level is being assessed.

The general condition of children is also assessed. Children showing delay in growth and development in reference to the standard growth milestones are recognized and enrolled in treatment programs. Health education is also provided and the mother and they receive instructions about the subsequent follow up visits. Mothers who don't adhere to the follow up program are contacted and encouraged to follow up regularly.



The aim of well- baby program is to contribute to the promotion of child health through early detection of abnormalities in growth and development particularly in nutritional parameters, reducing the prevalence of malnutrition and anemia among children in the vulnerable areas of the Gaza Strip served by the NECC clinics; thus, reducing mortality and morbidity resulted from nutritional deficiencies and their co-morbidities among children under 6 years.

The program has been designed to strengthen the provision of high-quality well-baby services at the NECC primary health care premises. Quality well-baby services are important to monitor and promote child health status particularly in monitoring any growth deviation from the normal milestones allowing for early detection and early intervention.



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Well-baby services to children under 6 years old are important as these services are provided at a critical age in the human life cycle where most of body and mind functions develop.

Most health providers in Gaza link well-baby services to immunization services and usually after the completion of the immunization schedule well-baby services are practically not provided.

Therefore, the demand for high quality well-baby services in Gaza is high. During the screening activity, children weight, height and haemoglobin are assessed in reference to the standard measurements. Children with below -2 Z-score are regarded as malnourished and therefore join the treatment program. Also, anaemic children with haemoglobin level below 11 are enrolled in the treatment program.



Briefly, the treatment program includes identifying the underlying causes of malnutrition and anaemia, treating infections and worm infestations, giving iron supplementation, providing instructions about malnutrition and anaemia, monitoring the change in growth measurement, provision of therapeutic formulas and if needed referral services for cases that don't respond to treatment. Typically, the treatment program of anaemic children consumes around 3 months and for the malnourished children it consumes around 4 months.

NECC rigorous monitoring system played a vital role in ensuring that the activities are implemented properly according to the work plan. In 2019, NECC clinics has achieved the following;

In 2020, despite the Covid-19 pandemic and the lockdown measures, 10,629 children were screened and received 19,278 well baby visits which is less than the usually achieved figures in the past year. This reduction is attributed to closure of NECC clinics for around 6 weeks during the strict lockdown period in Gaza late in August 2020 and rescheduling the well-baby services to minimize social contact and increasing the interval between children visits to NECC well baby clinics.

Among the screened children, 1035 were found anaemic or malnourished and subsequently enrolled in the treatment program. The prevalence of anaemia and malnutrition were high especially in the last two quarters of the year (in Shajaiia the prevalence of malnutrition was 14% and in Darraj the prevalence of anaemia was 35%), possibly as a result of deterioration of the livelihood conditions as a result of Covid-19 and the decrease access to health services. In total, 10,070 lab tests were done and 15,222 bottles of medications were dispensed to sick children, 43 children were referred to advanced centres. To improve their appropriate knowledge and healthy nutrition practices 11,016 caregivers attended health education sessions and 101 received individualized counselling sessions. NECC assessment of the impact of health education was positive as we recorded improvement in the level of knowledge and appropriate practices as evident in the pre post assessments.



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The impact of enrolment in the treatment program on the health status of malnourished and anaemic children at NECC was positive. Around 80% of anaemic children were recovered completely from anaemia within the recommended 3 months of treatment. Similarly, the recovery rate among wasted children was very high, nearly 90%. Among children with underweight, the recovery rate was somewhat less around 70%. Because stunting took longer time to recover, nearly 60% of stunted children had recovered within the recommended 4 months of treatment. The others are still under treatment. 18 NECC staff attended 17 training days on issues related to child health including early childhood development, new trends in managing malnutrition and anaemia, provision of nutritional services during Covid-19, and child protection.

The training activities reported this quarter is less than the past years due to restrictions on gathering to minimize social contact. During 2019, our database shows that 25596 children with medical problems presented to NECC clinics (other than well baby clinic) and registered at the NECC database. Those were examined and among them, 24852 required medical treatment. In total, 4523 lab tests were performed to those children presenting to NECC clinics with medical condition. In total, 41,670 prescriptions were issued to treat sick children. The total number of those examined and found abnormal and enrolled in treatment programs is 1942 while it was 1557 in 2017. This reflects an increase by 25% possibly due to the higher number of screened children and the deterioration of economic situation in Gaza which results in nutritional problems among children. Thanks to United Church of Canada and Manitoba for their contribution in support the medicine and supplement for anaemic and malnourished children in addition to our fund from our partners.

22898 lab tests were conducted to screen and follow up children at NECC three clinics. More laboratory tests were conducted during this reporting period than last years as it was 18660 in 2018, 16505 in 2017 and 10899 in 2016. As with the previous years, this reporting year (2019), the most frequently conducted test is haemoglobin level 19057 test (last year number is 15107) and stool analysis 2000 (last year number was 1834) followed by urine analysis 1375 (last year number was 1233) and complete Blood count 466 (last year number is 486).

Table (6): showed the percentage of malnutrition and Anemia among the attended Well-Baby Visits

Year	Anemia					Malnutrition				
	2016	2017	2018	2019	2020	2016	2017	2018	2019	2020
Shijaia	18.6	21.4	21.1	28	21	14.3	12.4	13.8	16	14
Darraj	28.2	21.2	22.7	24	35	10.3	10.8	9.5	9	6.4
Rafah	17.2	20.8	20.6	19	26.6	12	11.6	12.5	11.7	10.00

- Around 80% of children diagnosed as anaemic at the well-baby services recovered and returned to normal within three months of their involvement in the treatment programme.
- Around 90% of the wasted children recovered and returned to normal within 4 months of their enrolment in the programme.



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- More than 70% of children diagnosed as underweighted children are recovered and returned to normal within the recommended 4 months of their enrolment in the treatment programme.
- Around 60% of children with stunting recovered and returned to normal within the recommended 4 months of their enrolment in the treatment programme. Usually stunting which reflects long term exposure to malnutrition requires longer time to recover.
- Level of Knowledge and awareness has increased.

Reduction in infectious diseases was also observed.

Table (7): Total quantities of supplements provided to children less than 5 years during 2020:

Grand Total	
Iron	12778
Folic Acid Tab	1960

Development of Early childhood development (ECD) approach

EDUS with UNICEF BiH, supported by the **(Bosnia and Herzegovina)** BiH government has developed an innovative model of a system for early childhood detection (ECD) and intervention (ECI) in order to recognize children at risk and with developmental delays and disorders as early as possible and introduce services that will enable them to catch up with their typically developing peers and prevent in many cases life-long disability and exclusion.

The main objectives of this trans disciplinary training were to support government of SOP to create a system of early detection and intervention in their country and implement the priorities defined under the National ECD and ECI strategy 2017-2022, as well as to provide professionals with a diversified knowledge and competencies training in how to use standardized instruments for harmonized “whole child” assessments and interventions in ECD and ECI particularly focusing on most vulnerable families with young children with developmental delays and disabilities Near East Council of Churches Gaza (NECC) adopted this strategy with the support from UNICEF.

As NECC developed ECD corner in the clinic, to detect children with developmental delays and disabilities. During this reporting period **150** of children were screened according to standardized assessment tools (58 M & 92 F), 130 of children screened were found normal (47M & 83 F) and **20** children had developmental delays (11M & 9F) including cognitive, emotional, social, and communication delays.

Thus, this approach is very important because Palestine endorsed the National ECD and ECI Strategy 2017-2022 and one of the key priorities is introduction of the early detection of children with developmental delays and disability and intervention services.



1.1.6 Dental Clinic

All clinics of NECC Gaza are equipped with fixed dental units that provide routine dental services – such as check-up, filling, extraction, scaling 4 days a week. During 2020, **3811 patients** (target 4000) were examined by a dentist at the clinics distributed as following: **1608** in Shijaia, **1721** in Darraj **and 482** in Rafah.



- Because of COVID-19 pandemic, NECC decided to treat patients with dental problems to whom with acute conditions (like infection, extraction), cases who requires repetitive visits such as scaling are suspended.

927 children were screened during well baby program (target 700 child per year), **1281** pregnant women were screened during antenatal care for their dental care (target 1200 pregnant women per year).

Table (8): Yearly distribution of the dental activities

Item	2017	2018	2019	2020
No. of patients examined by dentist and received dental services	7641	7063	6779	3811
No. of children screened on well baby days	1724	1762	1789	927
No. of pregnant women screened	2062	3364	1548	1281

Table (9): Distribution of NECC Dental Clinic services by Type of Activity & locality

Type of service provided	Shajaia	Daraj	Rafah	Total
Follow up	149	137	50	336
Treatment	1582	1506	445	3533
Extraction	56	143	32	231
Amalgam fillings	53	122	44	219
Composite fillings	2	6	0	8
Scaling	18	25	3	46
Total	1860	1939	574	4373

1.1.7 General Clinic/Medical examination

Anticipated: Over 4,000 patients examined, tested and received treatment annually.



Achieved in the reporting period:

The number of patients above 6 years old as cases examined by doctors has been reached **2570 cases** including those attended dermatology clinic.

For General clinic, because of COVID-19 pandemic, NECC health centres used doing triage system and then sort patients accordingly into different categories and manage accordingly, and also used booking system in order to decrease crowdedness, maintain social distance, and prevent cross infection.



Below the table shows the distribution of all clients who were examined by doctors and received treatment by category and center during 2020 the table mention number of visits not cases, it means that the patient may receive the service more than once during the year).

Table (10): Distribution of all clients who were examined by doctors by category and center:

Target group	Shijaia	Darraj	Rafah	Total
Less than 6years old	7,651	8,526	6,601	22,778
Pregnant women	2,943	1,929	721	5,593
Above 6 years old	822	927	571	2320
Total	11416	11,382	7,893	30,691

It is obvious that above mentioned table illustrates high increase in number of beneficiaries less than 6 years compared to previous years, which is correlated to several factors: high demand and needs acute shortage of medication at MOH facilities and hard situation that Gaza passed through from blockage, high unemployment rate, poverty, and the added burden of COVID-19.

1.1.8 Health Education

Health education is an investment that has long-term positive impacts. The effect of health education is generally positive and sustainable. Through health education, community people including women and children become more aware of healthy nutritional habits and practices. The impact of adopting appropriate nutritional behaviors is long-term sustainable investment that will have long positive impacts.

Families who maintain healthy nutritional behaviors will have a better chance to have healthy and productive life. The change in knowledge and practices will sustain long and can be transferred across generations.



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Awareness is an important component of health promotions and contributes to strengthening communities' abilities to demand and support appropriate practices. Enabling communities to discover and seek appropriate care is a sustainable approach.

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 conduct health education sessions for women attending family health care centers.

To promote healthy practices, health education was provided to families particularly to caregivers. Health education is provided based on the needs of families.



Achieved in this reporting year: NECC continued to intensify its efforts in health education and in increasing awareness of the concerned population in topics related to hygiene, breast feeding, environment, child protection, GBV, disability inclusion, anger management etc...

NECC health centres also intensified awareness sessions through remote health messages, in terms of COVID-19 prevention and protective measures, health aspects and nutrition.

All NECC staff received training on COVID-19 prevention, and vaccination, as well as all the clinics provided with COVID-19 guidelines, and protocols.

Health education focus was more on individual sessions and, group sessions to be avoided as much as possible, increase provision of educational materials.

The total number of health education activities provided to all categories was **1301 sessions for 28,751 participants**. they received group sessions, demonstrations, counseling, awareness games...

Sessions were provided at the health centers and occasionally in local community-based organizations e.g., kindergartens. Participants included pregnant women, mothers, grandmothers and influential family members. Also, health education materials were distributed either inside the centers or at home visits.

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

As verified through the pre-test post-test measurements, change in the level of knowledge about malnutrition, anemia, appropriate nutritional practices among the attendants of the health education session were significant for example the analysis of our data shows that the level of



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knowledge among ladies regarding the nutritional practices is high at the pre-test and even higher at the post-test assessment in most of the items related to nutrition and hygiene practices.

For example, knowing anemia preventive practices (three key practices) has increased from 17% to 44%. Knowing the appropriate timing of giving tea to children has increased from 58% to 76%; Knowledge about the routes for parasitic infestation has increased from 68% to 83% and knowing appropriate pattern of increase in the baby weight has increased from 51% to 85%. In the second half of 2020, NECC didn't conduct pre-post-test assessment but has been resumed this year.

NECC has used a new technique as a part of health education activities using smart screen for educational films, 3 smart screens were used through conducting these films about breastfeeding, early marriage; antenatal care. The activity was appreciated by the beneficiaries, Currently, NECC monitors client satisfaction and beneficiaries' feedback is regularly solicited.

503 pre-test post-test questionnaires were administered to caregivers who received health education and findings show an improvement in the level of knowledge among the recipients of health education.

In total, 604 questionnaires were collected and the analysis which reveal high degree of satisfaction about the health services. In addition, clients' feedback is systematically monitored and usually reflects positive attitudes as the satisfaction assessments reveal that over 90% of NECC clients are satisfied. Also, beneficiaries complained about the space of the clinic, they asked for more spacious place. Moreover, beneficiaries asked for food rations, fortified biscuits and milk as because of the food insecurity.

Below some important findings from the client satisfaction questionnaire filled by beneficiaries (in second half of this year, we suspended filing this questionnaire to reduce crowdedness, but it has been resumed).

- 98% think that services they received are relevant to them.
- All believe that services they receive, resulted in positive outcomes on their children health.
- 88% reported that the contact time with doctor was more than 5 minutes, 44% reported a contact time between 10 to 15 minutes.
- 6% reported that they selected the NECC clinic because the quality of services is good, 23% because it is accessible for all, 22% because medications are available at the clinic, 22% because of the good reputation.
- 82% knew that there is a complaint system at NECC clinic; 3% made a complaint.
- 16% reported that they have been returned back home without receiving the services they came to NECC clinic to receive.
- 89% reported that the NECC staff introduced themselves to them.



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NECC regularly assesses the impact of health education through studying the change in the epidemiology of diseases. The change in the epidemiology of hygiene related diseases from the baseline showed significant improvement as follows:

- 11,117 caregivers received health education about nutrition, hygiene and sanitary measures.
- 101 caregivers received individual counselling sessions.

Caregivers received health education and awareness sessions about nutrition and practice healthy nutrition and hygienic behaviours. As verified through the pre-test post-test measurements, change in the level of knowledge about malnutrition, anaemia, appropriate nutritional practices among the attendants of the health education session. Also, the change in the epidemiology and disease pattern such as infections.

Pamphlets and educational materials were also disseminated to beneficiaries and explained to them. In addition, the effect of health education was assessed through pre-test post-test and also through studying the epidemiological diseases' pattern in the area. In total, 301 pre -post questionnaires were completed with the recipients of health education and results showed significant improvement in the level of knowledge of the beneficiaries.

NECC regularly assesses the impact of health education through studying the change in the epidemiology and hygiene related diseases.

Also, the change in the epidemiology of hygiene related diseases indicated a reduction in infectious Diseases and parasites. For example, during the same reporting period of the last year, 9% of children presented with infectious and parasitic diseases in Rafah which has been reduced to 4% during this reporting period in the same clinic. Similarly, diseases of skin and subcutaneous tissue were reported at 12% in the past year while it has been reduced to 7% this year, again for the same reporting period.

Table (11): Number of sessions disaggregated by type of health education

Item	Shijaia	Darraaj	Rafah
Health education	251	374	33
Counseling	14	10	7
Awareness Activities	443	129	40
Total	708	513	80

1.1.9 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 2020, the home visits has suspended since March 2020, and approximately 675 home visits conducted from the beginning of this year, NECC as an alternative solution launched mobile health services, and health consultations.



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(3091 home visits in 2019, 3907 in 2018, 3903 in 2017) were conducted by NECC to beneficiaries inside their houses.

Table (12): Distribution of home visits conducted through 2020

Type of home visit	Shajaia	Darraj	Rafah	Total
Deliveries (PNC) home visits	241	195	89	525
Expected deliveries	73	0	11	84
Defaulters	24	36	1	61
Abortion cases	5	0	0	5
Total Number of visits	343	231	101	675

1.1.10 Community Workers Training Courses

Community workers training target group are female students who have at least high secondary certificate. This program aims to improve the awareness, knowledge and practice of those females either in health, social, psychological, environmental issues, etc., so they can in the future do the same for their families, friends and community as a whole. The training prepares them to be health community workers.



Community training is provided at three served communities; Darraj, Shijaia and Rafah to up to 40 females trainees per year divided into two groups. Each group receives training for 4 months, 3 days per week, 4 hours per training day. The lectures are about health, social and psychosocial issues. Also, they are trained about how to give a session for a group of women even about health, social, psychosocial issues and human rights. A First aid course also provided to the community workers with cooperation of ALAwda hospital and Juzoor association. Most trainers are from NECC staff and other relevant NGO's as ATFALUNA, PCHR, etc., the number of females participated in these courses was 21 females' students in year 2020, as because of COVID-19 pandemic and restrictions and lockdown, additionally to keep social distance, so we have those students from the first half of year 2020.

1.1.11 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, and Thalassemia association which provided back up referral sites. NECC referred 210 cases to relevant sites as needed during this year.



Table (13): Referral sites during 2020

Referral system	Shijaia	Darraj	Rafah	Total
Thalassemia center	5	7	9	21
MOH or other hospitals	46	48	2	96
MOH clinics or other related clinics	3	0	-	3
Total	54	55	11	120

Actually, NECC received feedback from the referred cases to decide how to continue with them the treatment plan. 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.

1.1.12 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.



Achieved in this reporting period:

The number of laboratory tests performed in the year 2020 have reached *the total laboratory tests that were performed inside the three family care centers during this reporting period have reached **14,591 lab tests conducted, distributed*** as Shijaia **6882**; Darraj **5815** and Rafah **1894**. 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 (14): Distribution of lab tests

Type of Lab Tests	Shijaia	Darraj	Rafah	Total
Blood tests	3109	2768	789	6666
Urine	3236	2594	849	6679
Stool	478	417	224	1119
Pregnancy Test (Urine Sample)	59	36	32	127
Total	6882	5815	1894	14,591

Accuracy of tests:

Quality control is extremely important in ensuring the large number and range of testing carried out lead to appropriate follow up. The most important aspects done in NECC in internal quality control monitoring are:

- Control the instruments
- Maintenance
- Calibrations
- Capacity building of the staff

1.1.13 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

Some items were thankfully donated in kind by ANERA during 2020, i.e., family planning tools, supplement, and Folic Acid, and Multivitamins were donated by MOH.

In addition to protective materials from UNICEF.



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of medicines at each clinic covers a period of six weeks and the balance of medicines at the main store covers 12 months as the replenishment of dispensed medications replenished every 6 months through tenders.

Additionally, NECC has computerized information system for the medications that facilitate and organize the work inside the main store and the pharmacies, a network connects the three pharmacies with the main office and the main store for more monitoring and supervision, regular meetings also conducted by the health programs coordinator with the pharmacist assistants, the pharmacist responsible of the medical store and the doctors.

NECC succeeded in securing the availability of the required medicines throughout 2020 by having stocks of medicines in each center and in the main store. However, some delay happened due to the tight closure and increase in number of patients more than the anticipated especially in the harsh situations, and spread of COVID-19 among locals.

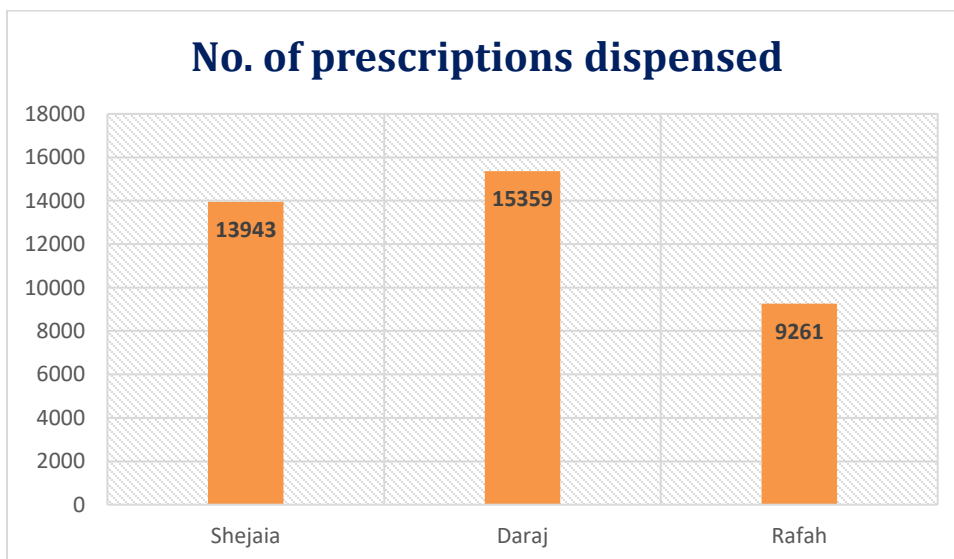
NECC purchased medication during 2020 through support also from UPA.

As revealed by the satisfaction assessments conducted routinely, the patients were very satisfied with the services and the availability of medicines at the dispensary especially that other health facilities encountered shortages in great number of medicines most of the time of the year due to the siege and embargo imposed by Israel.



During year 2020, the number of prescriptions dispensed to patients reached **38,568** in the three localities (last year 2019 figure was **70,484** prescriptions).

Figure (5) No. of Prescriptions dispensed





During this reporting period, 13985 SMS were sent to remind beneficiaries about their appointments and 5703 were sent to bring back defaulters. In the second half of 2020, NECC stopped sending SMS messages and started calling specific number of beneficiaries by phone to come at specified times, to avoid crowdedness in the clinics

1.2 Psychosocial Support Program (PSS)

Strategic objective 2: To promote the psychosocial status of the served community particularly women and children.

1.2.1 NECC ongoing psychosocial support program

As a part of NECC responsiveness to the community needs, immediately after the Israeli Operation Cast Lead on Gaza, in 2009 NECC has introduced the psychosocial support services into its health and vocational training programs. The program aims to alleviate the suffering of the Palestinian population including children, women, VTC's students and the NECC staff themselves. The NECC psychosocial support program provides individual counselling, group counselling, psych education sessions, consultations. The higher-level change achieved through the integration of psychosocial support program into primary health program, screening and detecting all clients who attended NECC clinics for any psychological problems, and manage these problems.



The program which started in 2009 continues to operate providing services to thousands of children and women who are psychosocially vulnerable. Women gain much confidence on themselves and learned how to deal positively with and to control their daily stressors. With regards to Psycho-Social Support (PSS), the psychosocial component of NECC health program is consistent with the NECC mission, strategies, and objectives, Gaza has endured multiple losses – what are called multi-traumatic losses. Accordingly, there is a widespread sense of hopelessness and powerlessness. The long-term, continuous stress experienced by many Gazans has resulted in a growing plethora of psychological difficulties. To respond, NECC developed the psychosocial support program through the integration of mental health into primary health care and additional indicators for adherence to child protection policies and code of conduct were used, as well as indicators relevant to national and local priorities.



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NECC health staff screened and identified patients with mental health problems who are attending the health centres, in order to provide them with needed support and services, and to refer the severe cases to relevant external organizations. 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. through psychosocial support program, NECC provides structured group sessions for school and kindergarten children, individual counselling, group counselling for women, family counselling, psychoeducation, stress management, detection of mental health problems in primary health care patients managed by health staff.

It's worth mentioning that NECC signed an agreement through the year 2020 in partnership with Pontifical Mission (PMP) for the project titled ""supporting of psychosocial care program for the clinics, the project targeted mothers, kindergarten children, and school children.

1.2.2 PSS Preventive Services

Appropriate PSS services are provided to the mothers/women or children attending the Family healthcare centers or the kindergartens located in the three served areas. Through the implementation of PSS activities various skills have been refine, children's concrete skills and provide an opportunity to retreat them.

Develop children's potential across a broad range of activities that stimulate mental, Physical and emotional well-being.

NECC offers preventive and curative health services to sustain and promote the health of Palestinians in the three served areas of Shijaia, Daraj and Rafah\Kherbet Al Adas.

The psychosocial activities encourage important social values such as leadership, respect and Cooperation, friendship, and creativity. Crucially, the, psychological relief for the children from the circumstances in which they live, and most importantly a chance just to be children; free of the adult-sized worries and pressures so prevalent in Gaza

The provision of psychosocial support for children at a time when needed, after the conflicts, providing an opportunity for the children of Gaza to enjoy them and learn new skills.

Table (15): The main interventions in terms of preventive services

<i>School children (6-15) years</i>	<i>Problem solving approach</i>
<i>Kindergarten children served through cognitive behavioral therapy</i>	<i>CBI for kindergartens children that suit the age of those children: expression through drawing, storytelling, coloring, playing.</i>
<i>VTC Students</i>	<i>CBI and psychosocial sessions for VTC's students.</i>
<i>Children of both age groups and VTC Students</i>	<i>Open fun days and Recreational trips.</i>



1.2.3 Counselling Services

The counselors offer various psychological services including individual and group counseling, awareness sessions for parents such as dealing with aggressive behavior, dealing with stress and traumatized cases.

The counselors use various counseling techniques such as: cognitive behavioral interventions, individual and group counseling, seminars, home visits, and community-based education through awareness programs for mothers.

Table (16): Counseling services:

<i>Service</i>	<i>Details</i>
Individual Counseling	<i>Individual counseling and/or consultations provided to the affected women/mothers.</i>
Group Counseling	<i>Group counseling provided to the women with psychosocial problems and following traumatic events.</i>
Family Counseling	<i>Family counseling for childhood behavioral and emotional problems. The mother is counseled individually or with the child. Also includes parent training for dealing with behavioral problems in children.</i>
Psychosocial consultations	<i>Mothers/women receive the consultation for the psychosocial problems related to the mothers/women themselves. Such as maltreatment of husband or the mother-in-law - severe emotional and behavioral towards their children due to the hard life, or if they have low experience on dealing with psychological problems of their children such as: Bedwetting aggressive behavior, sucking fingers, fear feelings, low school performance, jealousy, stubborn, nervousness, convergence.</i>
Home visits	<i>Home visits for specific cases: Women and children with psychosocial problems that have not improved in counseling, or did not report on their appointments are visited at home to evaluate the social conditions and promote their coping and social support.</i>
Referral	<i>Referral of more complicated and severe cases to the specialized institutions as GCMHP. For cases that require medical or specialized treatment, the NECC program refers cases to the MoH mental health centers and to Gaza Community Mental Health Program.</i>
E-counselling	<i>It is a psychosocial counselling for cases through phone, and this because of COVID-19 pandemic, and its implications on the people in Gaza.</i>

1.2.4 Monitoring and outcome assessment

- ▶ *For common mental disorders: the counselors and PHC team were utilized the guidelines for identification and management of mental health problems. These include standard quantitative*



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and qualitative tools for diagnosis and monitoring. Outcome assessment is built in the program as well as reporting procedure.

- ▶ *Child mental health: counselors were trained on the application of behavior assessment tools and child mental health questionnaires (SDQ, CRIES) which give baseline and monitoring for change.*
- ▶ *Women mental health: The PHQ9, GAD7, PCL and the stress meter are used to assess women mental health in the antenatal care. Postnatal assessment during postnatal visits depends on guidelines assessment and the utilization of the EPDS scale. Women found to have risk for mental health problems are assessed by the doctor and followed up in the center by the nurse and counselor.*

Monitoring system for psychosocial program:

- ▶ *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 (SDQ¹) for children and parents, (PHQ²) and (GAD7³) for PHC screened cases, (CRIES-8⁴) for PTSD children's cases and (PCL) for PTSD⁵ adults (Edinburgh scale) for post-natal depression cases.*
- ▶ *NECC staff screened and detected PHC patients with mental health problems and are assessed by the doctor and followed up in the center by the nurse and counselor and referred the severe cases to relevant organizations.*

Table (17): The main psychosocial support program achievements

Activities and target groups	Number of individuals reached 2020	Number of individuals reached 2019	Number of individuals reached 2018	Number of individuals reached 2017
<i>School children (6-15) years targeted through attending clinics for problem solving approach</i>	673 children	1268 children	1049 children	1001 children
<i>Kindergarten children serve through cognitive behavioral therapy</i>	447 Children	1032 children	1028 children	955 children

¹SDQ: strength and development questionnaire.

²PHQ: patient health questionnaire.

³GAD: Generalized anxiety disorder.

⁴CRIES-8: Children impact of Event scale.

⁵PTSD: Post traumatic stress disorders.



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Activities and target groups	Number of individuals reached 2020	Number of individuals reached 2019	Number of individuals reached 2018	Number of individuals reached 2017
<i>Individual counselling for school children</i>	273 children	74 children	76 children	59 children
<i>Individual counselling for women /mothers</i>	299 women/mothers	201 women/mothers	194 women/mothers	279 women/mothers
<i>Family counselling for mothers with children suffer from psychological disorders</i>	154 mothers and teachers	169 mothers and teachers	174 mothers and teachers	203 mothers
<i>Psycho education sessions for PHC beneficiaries</i>	135 sessions for 2806 Women/mothers	180 sessions for 4515 women/mothers	198 sessions for 4273 women /mothers	173 sessions for 4680 women/mothers
<i>General psychosocial consultations</i>	767	796	811	794
<i>Group counselling for mothers and or/women with similar psychological problems</i>	38 mothers/women	95 mothers /women	94 mothers/women	104 mothers /women
<i>Screening and detection of mental health problem in PHC patients</i>	<p>52 mild cases from PHC who were screened and detected, they received guided self-help by nurses/midwives.</p> <p>During this reporting period 520mothers were screened by Edinburgh scale during the postpartum period, distributed as following:317 in Shijaia, 178 mothers in Darraj and 25 in Rafah, among them 26 were abnormal that's mean 8.2% of postnatal cases suffered from depression or anxiety and they received Psychosocial support services provided by NECC psychosocial counselors.</p>			



Monitoring system for psychosocial program:

- *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 (SDQ⁶) for children and parents, (PHQ⁷) and (GAD⁸) for PHC screened cases, (CRIES-8⁹) for PTSD children cases and (PCL) for PTSD¹⁰ adults (Edinburgh scale) for post-natal depression cases.*
- *NECC staff screened and detected PHC patients with mental health problems and referred the severe cases to relevant organizations.*
- *NECC has developed database and indicators for psychosocial support program, to get accurate statistics and to save information.*

To measure the improvement rate for school children groups in all clinics at Al Darraj, Shijaia, and Rafah centers during this period the counselors conducted group sessions about problem solving approach (8 sessions per group) and used an international tool SDQ pre and post-test. A total number of children were 248 from both genders.

⁶ SDQ: strength and development questionnaire.

⁷ PHQ: patient health questionnaire.

⁸ GAD: Generalized anxiety disorder.

⁹ CRIES-8: Children impact of Event scale.

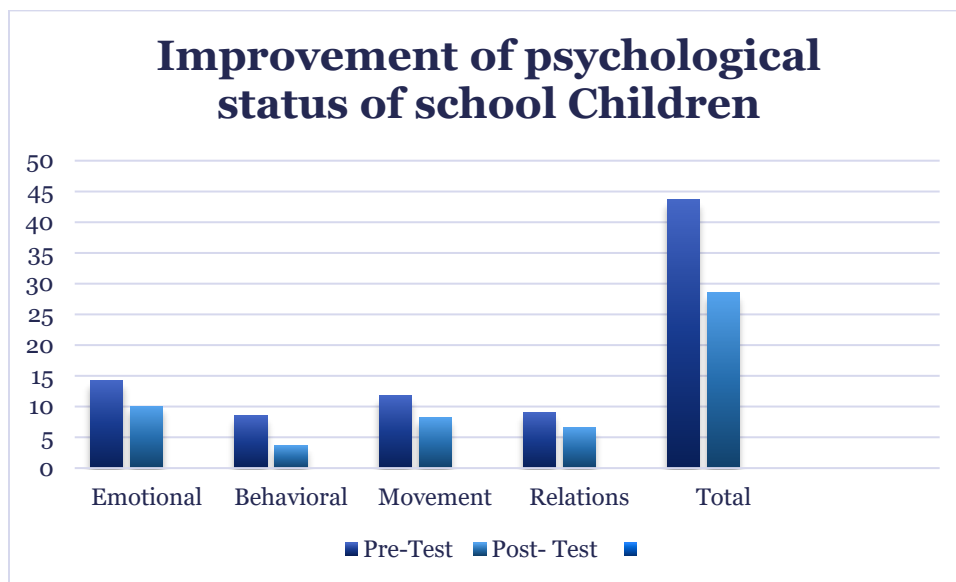
¹⁰ PTSD: Post traumatic stress disorders.



The SDQ pretest and posttest of children having some psychosocial problems using SDQ assessment tool, the results showed a significant improvement of children with psychosocial problems by 34.5% in total.

In some psychological problems for example decrease number of children who suffered from behavioral problems from 8.5% to 3.7% which revealed significant improvement by 56.4% reduction in behavioral problems. See figure (6) below.

Figure (6): *The main psychosocial support program achievements*





1.3 TVET Program:

Strategic Objective 2: Refugees and vulnerable communities can sustain themselves economically.

In consent with NECC/DSPR strategy; notably promote community economic sustainability, through practicing resilient livelihoods, NECC has been working on enhancing the youth capacities for longer term economic empowerment through promoting access to TVET for the Palestinian community.

The NECC has aggregated long experience in delivering a high quality technical and vocational education and training for the special target groups it is committed to serve who are mainly the Palestinian youth living in Gaza Strip.

The overarching aim of TVET program is enlarging the prospects for work and employment for the Palestinian youth in Gaza Strip in order to contribute to enhance their economic and livelihoods conditions given the unprecedented unemployment rate among youth which is about to be reaching 70%.

NECC is consistently committed in approaching its vocational training program through providing quality TVET programs based on competency-enhancement approach which is relying on transforming skills into work taking into consideration requirements of the local labor market.

Through TVET Program, NECC runs five vocational training centers offering eight vocations/trades: two centers for male students (providing five vocational diplomas) and three for female students (providing three diplomas), particularly:

- **The Gaza Vocational Training Centre (Gaza City VTC - Shijaia)** offers multiple-period vocational training diplomas that target disadvantaged boys aged 14-16 years old who have dropped out from school. They can choose to be trained either in (i) carpentry and furniture making (diploma for two years), (ii) metal and welding works (diploma for two years) or (iii) aluminum works (one-year diploma) or (iv) refrigeration and air conditioning (for two years) for age group between 16 and 23 years old.
- **The Vocational Training Centre at El-Qarara** (Khan Younis, south of the Gaza Strip) provides a two-year diploma in general electrician skills and motor and transformer rewinding and solar energy that is offered to young men aged 16-23 who finished their tenth grade at schools.
- **The Secretarial studies and English Language Centre** offer a one-year intensive diploma in secretarial studies to young women who have finished their secondary studies (High School grade or locally known: Tawjihi).





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- **The Advanced Dressmaking Centre** offers a one-year diploma in dressmaking provided to young women over 16 years old and marginalized women.
- **Multimedia and Graphics Design Center** offers a one-year intensive diploma to young women who have finished their Tawjihi certificate.

It is well-known that the current scholastic year (2019-2020) has started early September 2019 and was ended up in September 2020 for departments of secretary, dressmaking, carpentry, metals and welding and aluminum; and in November 2020 for general electricity and air conditioning, followed by 6-week period of external training during which the NECC-TVET students are sent to local workshops and employers' workplaces according to the trades/careers they were trained in.



During the reporting period (January – December 2020), **438** students (306 males and 132 female students) received training through NECC vocational training centers. In details:

- 162 students were graduated from the program late 2020 (111 males, 51 females).
- 91 first-year male trainees continued and upgraded at Gaza Shijaiya (57 students) and El-Qarara VTCs (34 students) for males respectively.
- 185 new students (104 males, 81 females) were enrolled and accepted out of totally 437 who applied for the 2019-2020 scholastic year (of those applicants; 325 were males and 112 were females).

The table (18) below shows **the distribution of the students of vocational training centers (VTCs) annexed to NECC** during the reporting period (January to December 2020):

#	Program	Diploma Duration (# of Years)	Graduates (2020)	Current Enrolment		Total number of existing students (December 2020)
				1st Y	2nd Y	
1	Carpentry and Furniture Making	2	21	20	19	39
2	Metal and Welding Works	2	17	16	18	34
3	Aluminum Works	1	19	16	-	16
4	HVAC	2	20	22	20	42
5	General Electricity and Solar Energy	2	34	30	34	64
-	Sub-total (males)		111	104	91	195
6	Secretary and English Language	1	28	29	-	29
7	Multimedia & GD	1	-	29	-	29
8	Advanced Dressmaking	1	23	23	-	23
-	Sub-total (females)		51	81	-	81
-	Total		162	185	91	276



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At the end of 2019-2020 scholastic year (late 2020), 162 graduates were graduated disaggregated as follows; 108 of them were graduated in July 2019 from careers of carpentry, welding and metals, aluminum, dressmaking and secretary whereas 34 graduated in November 2020 from department of electricity while 20 air-conditioning students graduated in December 2020.

29 female students were expected to graduate in late January 2021 ending their scholastic year that began in January 2020.

276 students were receiving TVET courses during 2020 divided into 1st and 2nd year classes.

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

It is worth mentioning that NECC is providing its vocational training services according to the Palestinian national qualification framework and according the periods mentioned in the framework for its certain training programs in order to provide adequate training corresponding the level of semi-skilled labor which represents level 2 in the framework.

Based on the co-partnered project with GIZ that formally ended amid of 2017, NECC has been providing vocational training programs for the different youth target groups utilizing high quality vocational curricula that have being developed and validated continuously considering the requirements of labor market.

TVET program has been piloting the new curricula being delivered at the different VTCs in order to be validated and to gauge its relevance and reliability by holding several focus group discussions and meetings with labor market entities and TVET provision institutes.

In the TVET provision pathway, at the end of the year, there was evaluation process undertaken in order to solicit feedback from all concerned stakeholders such as students, mentors and tutors, graduates, instructors and trainers, supervisors and labor market representatives in order to further strengthen these vocational training courses and create tangible improvements based on the received evaluation and feedback.

This is considered a very supportive and prominent best practice aimed at its end-lines to likely maintain robust, unique and updated curricula modules in accordance with the labor market demands and requirements.

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 on the short- and longer-term level.

Interestingly, NECC is exerting efforts for assessing and tracking the longer-term outcomes those initiatives have impacted on the different aspects of socioeconomic context of the graduates and their families' lives.



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The results of the impact surveys and assessments conducted revealed that NECC is exerting huge efforts in terms of increasing employability among TVET graduates through offering integrated package of post-graduation services notably career counseling, job search training, on-job training initiatives and most importantly and recently providing access to entrepreneurship through small-business establishment for a group of start-ups in cooperation with partner organizations such as Caritas France and Qatar Charity.

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

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

This is being done for achieving multiple objectives comes first, giving wider opportunities to those fresh and ex-graduates for practicing new work environments and learning new skills and off course generating income and concurrently enlarging NECC network of valuable partner organizations in order to prominently contribute to the community economic development for its target groups given the severely harsh economic situations in the besieged Gaza Strip.

1.3.1 AutoCAD approaching:

In a related context on the outcome level, in terms of the curricula development, a new approach has been applied notably inserting the CAD software learning inside the TVET delivery for students in the "industrial" vocations/trades of carpentry, metals and welding, aluminum, air conditioning and general electricity and solar panels.



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

In line with that concept, NECC has already provided a 120-hour specialized AutoCAD training to trainers of NECC vocational training centers, this step was followed by establishing a full-equipped computer lab for providing this sort of training to the vocational students as a latter following step.

A full-equipped computer lab at Shijaia VTC was established in 2018, NECC finished all preparations and installments of setting-up the computer lab early 2018. The computer lab was



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used for AutoCAD training and computer literacy in general during 2020 onwards by students from departments of carpentry, metal works and welding, aluminum works and general electricity and solar energy.

The computer lab has been utilized by NECC function as design center for students who have creative and innovative ideas and to do engineering drawings to implement their designs.

1.3.2 External training placements

In cooperation with Palestinian Federation of Industries (PFI) and its sub-branch federations and the several private sector entities, the NECC trainees who were about to graduate late 2020 had been placed in various offices, companies and workshops for a period of six-eight weeks to undertake external (on-the-job) training with follow-up made by the social workers and NECC-TVET instructors and supervisors.

This external training is an integral part of the training program since they have to finish it before they graduate and get their certifications from NECC vocational centers.

The trainees were distributed to those workshops and companies on the basis of the trades they were trained in.

Particularly, 162 ex-students/graduates from NECC different vocational training centers were placed at different workshops and work places according to their field of training such as carpentry workshops, welding workshops, electricity technical workshops, fashion Ateles, companies, NGOs and governmental entities to do their external training course.

The external training was followed by evaluation questionnaires and the feedback was gathered on tripartite-basis meaning that it is filled in by the supervisor, employer and the students themselves (self-assessment) as well.

The external training is used to take place after the students end their final examinations. As so, NECC-TVET accomplished the final examinations for Secretarial studies, Dressmaking, Carpentry, Metal works and Aluminum works.

This year (2020), students were sent to do their external training in June and July since the VTCs were closed due to Covid19 response procedures and after NECC was cleared about re-opening the VTCs the students were returned back to complete the examinations in August and then they were graduated in September.

While for Electricity VTC: the external training for the 1st and students were implemented in May and July 2020 while for 2nd year students it took place in April and May and the final examinations for all students were undertaken in October 2020 in a well-structured and timely organized process.

Whilst, the external training course for air conditioning (about-to-graduate) students were undertaken in April and May and the final examination were held in December 2020 in a timely-ordered term.



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The student exams were corrected and evaluated and the certificates were issued and conferred duly after the accreditation from the Ministry of Labor.

For Graphics Design students, the freelancing practical part took place in November and December 2020 while the final examinations and graduation were duly undertaken in early January 2021.

1.3.3 Follow-up assessment (2020):

NECC is used to conduct a follow-up assessment regularly on annual basis for its ex-graduates from all vocational training centers after one year of their graduation from the VTCs.

This assessment is aimed to give an oversight on the employment status of the graduates as to show whether they are working in their profession or other professions or even not working at all with giving percentages for each proportion.

It is very significant to assert on that this assessment is very critical and inevitable for NECC-TVET program management to run career professionalizing services as to be provided in order to accelerate the graduates' involvement in the local labor market in spot of the funds available.

Consequently, NECC has recently conducted the annual employment follow-up assessment (in November 2020) for graduates of year 2019. The assessment results revealed that overall, **78.8%** of all NECC-TVET graduates of the year 2019 are working either in their careers or other ones including **62.3%** (94 out of 151) who are employed or self-employed in their career only within one year of graduation, which exceeds the target of 50% of graduates from the TVET program. The figures below show the employment trends among the graduates. The **table (19)** below show the employment trends among the graduates.

Table (19): Employment rates among 2019 graduates

Profession	Number of students who graduated in 2019	# Working in their profession	% Working in their profession	Not working in profession	
				Working in other profession	Not working at all
Electricity (male)	31	20	59%	6	5
Carpentry (male)	20	14	70%	5	1
Welding and metals (male)	15	11	73%	3	1
Aluminium (male)	17	9	53%	5	3
HVAC	20	11	55%	5	4
Secretary (female)	25	11	44%	1	13
Dressmaking (female)	23	18	78%	-	5
Total - Averages	151	94	62.25%	25 (16.56%)	32 (21.19%)



The **figure (7)** below illustrates the different trends of employment among NECC graduates of the year 2019 after one year from their graduation from NECC vocational centers.

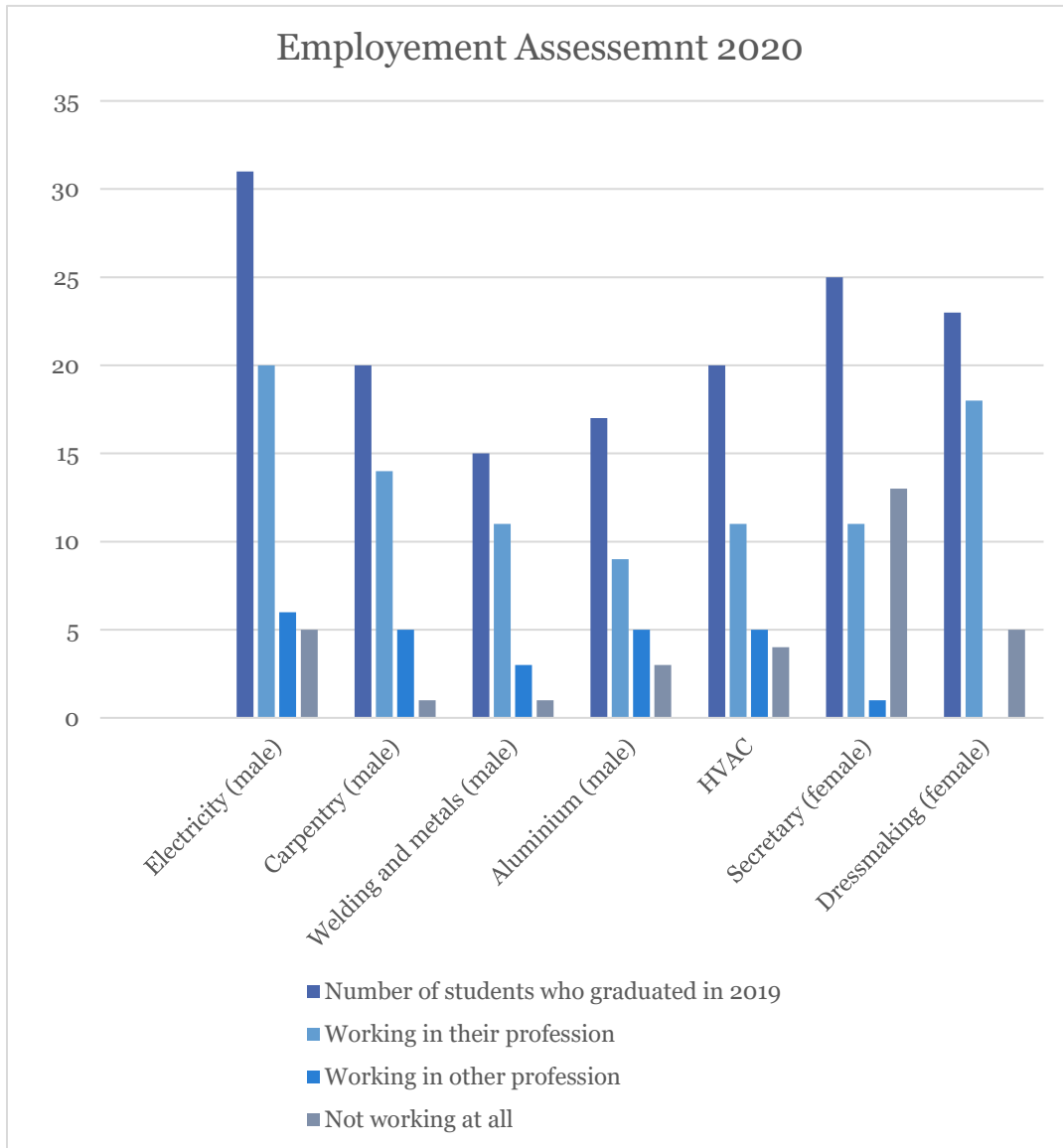


Figure (7): Employment Assessment 2020

Analysis of the results: As the graph above indicates, the employment rates among NECC-TVET graduates is over 50% (target indicator) for the seven careers graduates on one year after their graduation.

Furthermore, the 2020 employment assessment (most recently conducted) reveals a comparatively high employment rates among the TVET graduates of NECC (about 62.3%) despite the harsh economic conditions lived in Gaza.



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As well, it is shown by statistics that the number of females employed among the whole group of employed graduates is 29 out of 151 representing 19.2%, while the number of employed females among graduated females themselves is forming 60.4% (29 out of 48 graduated females) given that dressmaking is representing the main portion.

The increase of the rate is attributed to the various job creation and on-the-job training initiatives that NECC have run recently in partnership with various donors.

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.

It is worth mentioning that an evaluation took place in the period from January-February 2021 to in cooperation with Keystone evaluation experts for the purpose of evaluating the project “Access to Employment for TVET Graduates in Gaza Strip” that was undertaken in partnership with Caritas France.

The evaluation revealed among other things that, NECC is exerting strong efforts in the field of youth employment and introducing TVET as a solution for high unemployment rate among Palestinian youth which is so far app. 68% in order to alleviate poverty among TVET graduates.

Although there is progressive work being done in this field, still there is a need for NECC to conduct a comprehensive evaluation for the TVET program including all its aspects such as selection, examination, curricula, capacities, long term impact on improving livelihoods, etc.

In line with that, NECC has ended the project of “Access to Employment for TVET Graduates in Gaza Strip” in partnership with Caritas France lasted from July 2017 to December 2020.

The project included access to on-job training placements for 310 NECC ex-graduates from the different VTCs who graduated during one of the three years 2014, 2015 and 2016. The (6-month) placements were provided for an equal number of graduates from trades of carpentry, welding, electricity, dressmaking and secretary on six cycles; each one was targeting 50 beneficiaries (10 beneficiaries from each of the five trades in each cycle).

1.3.4 TVET Management Information System:

TVET program has developed a designated information management computerized system through approaching an external expert for designing and developing this program in full cooperation and consultation with the TVET vocational trainers and supervisors. The program was tested and was put in service starting from 2019 onwards.

The new MIS included all essential information for both the enrolled students and ex-graduates of all vocational careers. The new MIS in its role, helps in giving full data about TVET beneficiaries, designing and planning for the new interventions as well as in the selection of candidates to benefit from our initiatives especially on-job training, small businesses and other services.



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As well, this web-based MIS informs about all technical, social, economic, demographic data of TVET students during their study at NECC vocational centers including the modules, periods, marks and being used in preparing the marks and certificates before graduation.

This information system is basically intended to provide accurate data (in-numbers) to feed certain performance indicators in terms of education attainment and retention, satisfaction on provision of TVET-service, employability rates and etc.

1.3.5 Curricula Development:

In terms of training curricula, NECC teams acquired long experience in the curricula development processes accumulated through developing curriculum of different vocational training programs that NECC offers.

The curriculum development is basically intended in order to ensure the full matching between skills and competencies of trainees that are being enhanced through the NECC vocational training programs and those required in the labor market.

During reporting period, NECC-TVET program has been involved in developing the curricula of the most recent commenced career, Graphics Design and Multimedia, that was launched in early 2020 in cooperation and partnership with international organization specialized in education.

Through this new partnership agreement that will last until the end of 2022, a new specialized curricula were developed based on the “complex tasks approach CTA” in cooperation with external experts from technical education organization.

The vocational training expert and NECC trainers worked in full cooperation with the consultants to develop and update the curricula.

NECC is comprehensively developing and upgrading its TVET training techniques and methodologies on regular basis. In that context, NECC has been involved in applying the CTA, which is standing for an approach utilizing social, personal, methodological and technical skills and knowledge of a trainee in the process of training and response to clients and service demanders.

During the provision of the curricula, feedback sessions are used to be held regularly during scholastic year time for purpose of assessment, lessons learned and curricular development.

As well, NECC has been involved in updating the curricula of solar energy for its El-Qarara VTC in cooperation with similar institutions and TVET providers under the lead from GIZ and Islamic Relief. The new developed and adapted curricula was put in-use for benefit of NECC vocational center of El-Qarara as well as vocational centers annexed to ministry of labor and other similar vocational centers.

In addition, NECC is doing curricula development work in cooperation with relevant institutes under the umbrella of LET-Council namely; sub-committee of TVET capacity building which is mainly specialized in developing TVET programs at the member institutions including curricula development, capacity building for vocational staff and so on.



1.3.6 Inaugurating of new programs:

▶ *Multimedia & Graphics design:*

NECC has launched in late 2019 the preparations to inaugurate the new vocational training program of Multimedia and Graphics Design.

This new department undergoes in response to the Gaza community and labor market needs and is aiming to empower young females in Gaza and increase livelihoods and employment opportunities for girls in a trendy ICT-related vocational field.

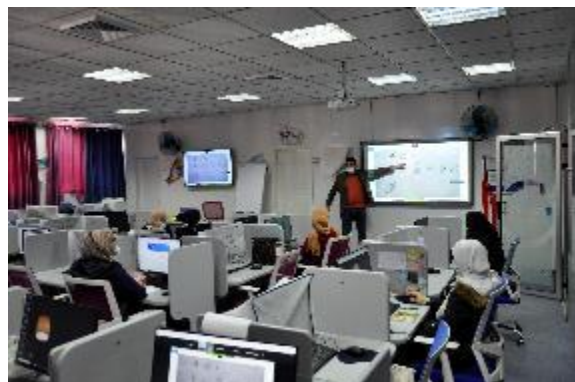
This new vocational program is a one-year diploma licensed from Ministry of Labor and targeting youth girls who finished their high school (Tawjihi) certificate and have the interest in the multimedia, graphics design and freelancing streams.

An advertisement for this new program was already published late 2019 inviting interested applicants/students to enroll the program while the entrance exam took place in late December 2019, 29 students were enrolled. Another exam was held to recruit Graphics Design & Multimedia trainers in December simultaneously.



The opening of the program was undertaken in January 2020 and an inauguration ceremony took place in February amid of inviting representatives from universities, TVET colleges, vocational training centers, private sector umbrellas, representatives from business incubators and different ministries (i.e., ministry of labor and educations) and relevant donor organizations.

NECC started the process of curricula development for this program through approaching external experts specialized in this field by publishing advertisement on employment outlets such as www.jobs.ps website and the local newspapers. The process was started with recruiting experts and holding two workshops; one is for building curricula modules and the other is for validation of these modules.



This step was followed by meetings and seminars in full proper cooperation between TVET team, the supervisor, the external experts and the GD trainers.



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1.3.7 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 regulators such as Ministry of Labor considering that it is the governmental party that gives the due certifications for NECC vocational diplomas/programs.

As well, the network involves Palestinian federation of industries (PFI) as a main local partner to NECC in delivering its TVET service to both the trainees and graduates through the coordination with PFI to place about-to-graduate trainees in work places in the local labor market in addition to providing on-job training and small enterprises.

Networking with PFI and its branch industrial unions allows NECC to place the students and graduates properly in well-established and well-functioning workplaces that have good reputation, safe work environment and skill-developing flow of work.

NECC has extended relations as well with Palestinian General Trade Unions aimed to raise awareness of TVET students and graduates in terms of labor rights, compensations, pensions, work accidents, labor laws and etc.

Additionally, NECC exploits its networks with labor market and private training institutes such as INJAZ Palestine association in the field of providing professionalizing sessions pertaining for example life skills, path to professionalism, time management among other topics.

1.3.8 LET-Council:¹¹

It is worth mentioning that NECC is a member in two subcommittees of the LET-Council which are TVET Capacity Building and Donor Funding. The main mission of these two committees is to build the capacity of TVET programs within the member organizations including NECC and exploring new potentials and prospects for funding through LET network of donors and supporting agencies.

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

NECC-TVET Program Participated in all the meetings that were held under umbrella of LET Council.

Form other related side, the NECC TVET program has been operating with 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

LET Council is a body gathering all TVET stakeholders (governmental ministries, TVET provider institutes including universities and colleges, NGOs, industrial schools, donors and TVET supporters, etc.).

It is aiming at the development of TVET environment and conditions in order to upgrade its abilities towards enhancing youth employability.

¹¹ LET-Council: Local Employment & TVET Council.



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Union “PFTU” in order to support the trainees and approach the outdoor training for them within the workplaces that are fulfilling the PFI and PFTU regulation and registration conditions.

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

NECC is coordinating as well with training provider institutions from the private sector such as training groups and TVET institutes in order to introduce training courses for benefit of our VTC trainees in several topics; many courses were conducted by their trainers regarding topics like “Be an entrepreneur” at the different VTCs.

1.3.9 Capacity building courses for TVET staff:

Many training courses were held in favor of TVET staff in many managerial, technical and interpersonal and life skills topics.

✚ “Capitalization of Experiences” workshop:

As a part of the project of “Supporting Access to Employment for TVET Graduates in Gaza Strip 2017-2020”, and following the training that was held in December 2019 for introducing this approach to the TVET program and especially the project activities, the work was continued online between the expert from Caritas France side and the Capitalization Team of NECC.



The online workshops and consultations were carried out on regular basis during the period from October to December 2020 in order to come out with lessons learned, best practices, recommendations and suggestions for improvement.

A Capitalization Team was already formed including TVET coordinator, VTC supervisors and trainers from different VTCs to carry out this new approach.

It is important mentioning that a training course in “Capitalization of Experience” topic was already conducted in the period from 9 to 13 December 2019 facilitated by an expert approached by Caritas France and SCCF representative and it was attended by all TVET team and social work department at NECC in addition to the M&E consultants.

- ▶ *The course tackled capitalization of experience; its definition, what is capitalization used for, what are motivations to capitalization, the difference between capitalization and evaluation, a group work practical exercises.*



✚ Training in developing a strategic plan for TVET program:

A strategic plan for the development of TVET program at NECC was prepared with the external evaluator's support during the second half of 2020.

The goal is to define new orientations, innovative tracks and complementary financing sources for the NECC programs related to youth training and socio-professional insertion.

The strategic plan for the development was developed late 2020 in cooperation with M&E/Capitalization consultants. It questioned many topics such as the changes made to the current TVET program delivery such as including life skills and entrepreneurship module and its functionality and validity as well as the new training in CAD engineering systems.

As well, the strategy questioned the opportunity and viability of introduce business incubator inside the vocational training centers; what sectors, what themes of businesses and so forth.

In addition to that, it is very important to mention that NECC has realized a very useful partnership with Ministry of Education as a sign of the multi-actors' concentration. This partnership was included in the strategy by giving more elaborations on new TVET programs launched by NECC (i.e., Graphics Design and Multimedia) which witnessed cooperation with different stakeholders such as Ministry of Education and UCAS in addition to the new changes made to the TVET provision such as i.e., CAD training, innovative design lab and life skills modules sensibilization.

A training course on developing the strategic plan was held on 27-28th June 2020 facilitated by the M&E consultants amid participation of all TVET staff.

The training tackled the subject of strategic plan; vision, mission, strategic goals, activities, SWOT analysis, difficulties and obstacles analysis, new potentials and horizons etc.

✚ Training program with INJAZ Palestine:

In cooperation with "INJAZ Palestine", a training program was held in February 2020 in favor of VTC students including males and females in different topics such as "my path to professionalism", "learn for life", "work ethics", "time management", "entrepreneurship" and other life skills subjects where the students experienced new approaches of life skills and how to plan for future.

This training program is an integral part of the career guidance services that NECC introduces and provides to its students and graduates as well in order to professionalize them in their careers and life skills in general aimed at enabling them to easier penetrate the work cycle.

The training program was addressing the topics of how to write CV and cover letter and how to do a job interview, leadership and time management respectively.

The training sessions were targeting the female students of secretary and dressmaking departments respectively.



1.3.10 NECC, Caritas France and AFD co-partnered project:

The co-funded project of “Access to Employment for the TVET Graduates in Gaza Strip 2017-2020” has actually started in early July 2017 and lasted until December 2020 including a no-cost extension period from July to December 2020 due to Covid19 outbreak.

The project is mainly aiming at professionalizing and developing skills of TVET graduates through on-job training placements and support towards employment, developing entrepreneurial capacity through business training and start-up as well as promoting multi-actors and partner organizations consultation on youth employability through regular coordination and reflection workshops.

As well, the project included many activities such as setting up a database for the beneficiaries of the project and developing a strategic plan for TVET program.

On-job training:

The last on-job training cycle (sixth) was run starting from December 2019 and lasted till end of May 2020 benefiting 60 beneficiaries equally distributed from departments of carpentry, welding and metals, aluminum, general electricity, secretary and dressmaking who graduated in years 2014, 2015, 2016 in addition to 2017.

Before that and since August 2017, 5 cycles of on-job training placements were held targeting about 250 graduates from the same departments so, the project provided access to on-job training placements for 310 graduates of NECC different VTCs including 124 females and 186 males.

Business Management Training:

In addition, specialized training in business creation and management was run after vocational on-job trainees finished their placement courses at the different establishments of labor market.

During the business training, the trainees were asked to provide business models for their small business projects, pass presentation jury and afterwards, the selected laureate models were given the opportunity to receive in-kind grant and place rental to start-up their small project.



Commencement of training sessions on small business management and development was already started in early 2018 and continued in 2019. Within the project, 150 graduates were trained divided into 3 batches, 50 beneficiaries per each. Each batch of 50 participants is divided into 4 sequent training groups.

Every training session included diagnosis phase (2 days) and the main phase (10 days); the diagnosis phase including the assessment of trainees, competences and motivation to business,



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pre-assessing their qualification and background to marketing, management and other business aspects.

Whilst, the second phase was devoted for developing and setting up a full-comprehensive business model. A business plan model was developed and devoted for the project and each participant was invited to develop his/her business plan as to be ready at the end of training to present it at the selection jury afterwards.

Counseling and coaching on the business plan provided by each trainee was run during the training period according to a well-scheduled plan by two experienced external small-business consultants.

Business Start-ups:

During the business training, the trainees were asked to provide business models for their small business projects, pass presentation jury and afterwards, the selected laureate models were given the opportunity to receive in-kind grant in the form of equipment, tools and raw materials in addition to place rental to start-up their small project.

During the whole project period (from July 2017 to December 2020), 60 small projects were established and until the reporting date, all those start-ups are still operating their businesses.

The 60 start-up projects are divided into 18 dressmaking businesses for females and 42 projects for male youth including 11 in welding and metal works, 15 in carpentry and furniture making, 14 in electricity and solar energy and 2 in aluminum works. **Table (19) illustrates number of established business along the project.**

Table (20): Number of small businesses established during the project

Batch/Career	Metals & welding	Carpentry & furniture making	Electricity & solar panels	Dressmaking & fashion design	Aluminum	Total
Batch #1	6	3	6	5		20
Batch #2	4	6	4	6	1	21
Batch #3	1	6	4	7	1	19
Total	11	15	14	18	2	60

Coaching of start-up businesses:

After being selected as a laureate project start-up, all small business owner received 5 coaching visits during a 1-year period from project establishment, this service was conducted by the external consultants/coaches.



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300 coaching visits to laureate business start-ups were done by business coaches/consultants including visits to project sites/locations to decide which of project sites/locations are suitable for establishing the small business project in addition to coaching on marketing, customer service, pricing and other aspects.

Another technical coaching was exerted by the vocational trainers to provide technical advice on production methods, finishing, quality and other details.



Reflection workshops:

Reflection workshops are considered the very significant added value as it represents the clear and effective consultation of pluri-actors of the project and TVET program in general.

Two new reflection workshops were conducted in 2020, one in February and another in August, for example, the reflection workshop took place in February was gathering different actors operating in the TVET and sector of youth employment in the Gaza Strip such as business and technology incubator of Islamic University, UNRWA, KIRDASH Project, ATFALUNA association for deaf people, Welfare Association in addition to new businesses from the private sector and beneficiaries from the on-job training initiatives.

The workshop gave the opportunity for participating organizations to reflect on their youth employment promotion activities recently notably job-creation initiatives.

6 reflection workshops were conducted during the project including 2 workshops in 2020.

Job search training:

Job search training is an activity used to be carried out 3-month after ending the conducted on-job training course. This activity includes providing individual and group counseling on the topic of job searching in favorite of young on-job trainees after finishing their courses.

This job search counseling was 2-day training activity; the first day was for group counseling while the next day was devoted for individual coaching.

First, the graduates were invited to an individual competency assessment where a list of questions was prepared and beneficiaries answered the questions independently.

Afterwards, the agenda included topics of how to write a cover letter and CV and how to proceed in an interview as well as how to apply for a job benefiting from the different techniques that were introduced in the training such as searching in person, follow up the job ads in newspapers and job websites such as www.jobs.ps and www.forus.ps and using OSS outlet annexed to ministry of labor.



1.4 Educational Loans Program:

Youth and household bread-winners lack proper and adequate job opportunities to support their families and afford education expenses due to the economic situation in Gaza. The students want to improve their knowledge but they cannot afford for the educational expense, they need to find financial aid. Thus, NECC continued the implementation of this program for the academic year 2019-2020 and 2020-2021 to provide educational loans to needy students with zero interest in order to help them complete their university study.

For this reporting period (Jan-December 2020) including the academic years 2019-2020 and 2020-2021, 71 university paid back their educational loans while 185 students are still paying back their loans. No new loans were dispensed during 2020.

Whereas 52 Bachelor students, in addition to 2 Master's degree students renewed their loans for the new academic year 2020/2021.

Table (21): Numbers of loans renewed from January 1st to December 31st 2020.

Year	Renewed loans			Total
	BA	Master	PHD	
2020/2021	52	2	0	54

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

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

1.5 Job Creation Program:

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

1.5.1 Project of "Supporting Access to Employment for TVET Graduates in Gaza Strip 2017-2020":

NECC finished the project of "Support Access to Employment for TVET Graduates in Gaza Strip 2017-2020" starting from July 2017 and lasting to December 2020.



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The project was in partnership and co-funded from AFD and Secure Catholique - Caritas France (SCCF).

The project is consisted of diversified group of activities including on-job-training for a total number for 250 TVET graduates from NECC centers divided into 5 cycles (50 beneficiaries per each), business management training for 150 graduates, 60 grants for starting-up small businesses for selected group of trainees and other activities.



The first cycle of on-job-training has started in mid-August 2017 targeting 50 TVET graduates from five careers of carpentry, metals and welding and aluminum, general electricity, dressmaking and secretary equally divided (10 graduates per each career) where the selected graduates were placed in the local labor market organizations including NGOs, governmental entities, private workshops, companies, colleges, schools, kindergartens, Ateles and so forth. The course lasted for 6 months till mid-February 2018.

Consequently, the second cycle of on-job training was started on March 1st and lasted until August 31st, 2018 benefiting additional 50 TVET graduates while the 3rd cycle has started on October 1st, 2018 and lasted till March 31st, 2019.

Additionally, 100 TVET graduates (cycle # 4 and # 5) finished their on-job training courses at the different work places in Gaza Strip that took place in the period from 1st May to 31st October 2019. The last cycle of on-job training (#6) was undertaken in the period from 1st December 2019 until 31st May 2020 targeting 60 beneficiaries so, the total number is 310.

The following **table (22)** illustrates the disaggregation of beneficiaries by gender and geographical distribution.

Area	No of graduates	males	females
North Gaza	51	35	16
Middle Gaza	35	23	12
South Gaza	44	42	2
Gaza	180	96	84
Total	310	196	114



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The **table (23)** below illustrates distribution of beneficiaries per employer organizations.

Governmental org.		NGOS		Private workshops and companies		Total	
Male	Female	M	F	M	F	M	F
16	19	1	44	173	57	186	124
35		45		230		310	
11.3%		14.5%		74.2%		100%	

1.5.2 Employment partnerships with different organizations:

NECC continued its partnership with different TVET and employment-support organizations such as Islamic Relief (IR Palestine) and Palestinian Fund for Employment and Social Protection (PFESP).

Through this partnership, NECC was enabled to offer access to employment for a group of TVET graduates whom were selected according to designated selection criteria to carry out internship placement courses different hosting organizations including NECC premises itself.

Furthermore, NECC has realized new partnerships with organizations operating in promoting youth employability through promoting small enterprise initiation especially for disadvantaged women in Gaza Strip.

Particularly, NECC carried out this partnership with Qatar Charity in order to help a group of graduated women from its dressmaking department to upgrade their skills and offer them sewing machines essentially required to run their own small businesses.

In that endeavor, NECC succeeded to offer this opportunity for 9 female dressmaking graduates in the year 2020. The partnership is still promising to involve more beneficiaries in the near future.

1.5.3 Self-Help Program:

Seven women at the self-support sewing department continued their work in producing garments of all kinds including TVET Youth uniform and doctors' uniform and earned monthly income of \$175 by NECC. This program assists those women to secure their livelihoods.



Youth activities and Societies:

During this reporting period, NECC continued its support to 2 local organizations and churches in addition to the NECC three primary health care centers, TVET centers and administration office to facilitate their mission in the form of subsidies made towards various items of furniture or metal work produced by trainees at our vocational training center.



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In this regard, *the following table (24) summarizes the forms of support provided to these societies in 2020.*

#	Name of society	Provided support
1	YMCA	<ul style="list-style-type: none"> Furniture Maintenance
2	Arab Orthodox Center	<ul style="list-style-type: none"> Maintenance Furniture assembly
3	NECC Head Quarter, Shijaiya and Qarara VTC	<ul style="list-style-type: none"> Maintenance for doors Wooden cupboards Steel bars for curtains Etc.
4	NECC Clinics	<ul style="list-style-type: none"> Maintenance for cupboards and air conditioners Maintenance for Doors and desks for clinic and PSS center Furniture and chair maintenance

1.6 Advocacy program

In terms of advocacy efforts, NECC participated in TVET-related events, in order to raise awareness on youth employability promotion and advocate their important and effective role in the community development through TVET approach; the events took place along 2020 and included seminars, coordination meetings, workshops and etc.

As well, NECC is actively participating in the meetings held under the Local Employment and TVET (LET-Council) as it has membership in two sub-committees namely “TVET Capacity Building” and “Donor Funding”.

Those important committees are administering policies and approaches for the planning, delivery and development of TVET programs in the Gaza Strip given the largely-diversified entities of TVET providers represented in the committees such as ministries (Labor, Education, etc.), TVET providing institutes, NGOs, and private sector representatives namely federation of industries, ICT-business incubators, 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 5. It is worth noting that there was difficulty somehow for visitor to get permits to enter Gaza through Erez crossing.

The community-based protection training that NECC health staff and community members received in December 2019 will be applied through a pilot phase in 2020 in Rafah area.

As well, NECC participated in conducting GBV awareness campaign in coordination with local CBOs at the different of Gaza Strip.



2. Overview of Major Focal Areas and Developments

NECC achieved the most of outputs and outcomes as planned during 2020 despite the deterioration of Gaza political situation at all life aspects after the wars and long years of tight blockade, and so far despite the Covid-19 pandemic and the lockdown measures, NECC clinics achieved to serve its beneficiaries.

NECC health centres intensified awareness sessions through remote health messages, in terms of COVID-19 prevention and protective measures, health aspects and nutrition.

All NECC staff received training on COVID-19 prevention, and vaccination, as well as all the clinics provided with COVID-19 guidelines, and protocols.

NECC launched free hotlines for medical and psychosocial consultations, therefore NECC provided the health and psychosocial specialists with mobile phone numbers to contact their cases, the cases can receive medical and psychosocial consultations according to their conditions.

Additionally, NECC provided the beneficiaries with Hygiene, and protective materials including Masks, and hygiene sanitizers, and hygienic materials.

It's worth mentioning that through this year NECC started new project in partnership with CCP Japan, funded by JPF the project titled” **Improvement of health and wellbeing of the vulnerable children and women in Gaza**”, and also new project started in partnership with Save the children international, titled “**Improving Maternal, Infant, Young Child and Adolescent health, and nutrition**” (MIYCAHN).

The two projects focused on mother and child health and nutrition, reproductive health and also on psychosocial support and well-being.

High satisfaction about services provided reached to more than 90% according to satisfaction questionnaire.

- NECC-TVET program is continuously attempting to allow its VTC graduates and students to get more closed to the labor market as well the skills needed for those graduates to be equipped with, in order to easier get jobs.
- Post-graduation package of services was approached to help graduates get closer to the labor market reality such as on-job training placements, career counseling, small business management training, access to small business start-up and etc.
- In 2020, a new vocational career was launched for female students in graphics design and multimedia aimed at qualifying Gaza youth girls in this IT-based field to easier penetrating labor market especially through online work.
- Inserting new approaches into the TVET provision such as gender mainstreaming and disability inclusion is on plan to take place in 2021 onwards.



3. Current problems and constraints

- Political conflict and security concerns.
- The ongoing siege imposed on the Gaza Strip since June 2006 is still contributing to the deterioration of health status and negatively affecting the provision of health services. The protracted conflict has triggered acute levels of psychosocial distress, especially among children and adolescents which also affects the nutritional status of these vulnerable categories. Although there is no official statistics, there is a noticeable increase in suicidal cases—a phenomenon that is new to the Palestinian culture. The United Nations Office for the Coordination of Humanitarian Affairs (OCHA) has repeatedly described situation as a chronic emergency and a protracted human dignity crisis.
- Difficulties in securing the needed equipment's and disposables. NECC waited long time until receiving any order due the tight restrictions on the entrance of goods, materials, supplies to Gaza, and huge demand due to COVID-19 pandemic, so NECC Coordinates with other international organizations to help in securing the needed resources
- The unavailability of the raw materials in the local market that was greatly affected by the tight closure even the available commodities are purchased with double prices. NECC has good strategy in maintaining stock of materials to be used, however NECC faced a real challenge to get funds for that.
- Electricity cuts for more than 14 hours, has impact on social services especially health, education, livelihood conditions, water—quantity and quality, and psychosocial status. NECC clinics are equipped with reliable generators for rational (limited) use during cuts. Also, NECC has already procured laptops for the use to operate work at clinics.
- NECC maintained adequate strategic stock of fuel needed for the generators' use.
- Shortage of essential drugs list lists at MOH, lead to increase burden on other health institutions, NECC maintains contingency/reserve medical supplies for emergencies and judicious use of available supplies based on need, and coordination with other international organizations to help in securing the needed resources.
- Financial deficit, and donor shift leads to deficit at NECC budget.
- NECC faced some problems in procurement of some materials such as wood of certain thickness as well as some equipment needed for electricity training motors.
- COVID-19 pandemic spread in the community added another burden to the already fragile health system, NECC Keeps contingency of protective materials, reschedule the work activities with maintain social distance, and committed to protective procedures according to protocol, develop E-counselling, and medical consultations approach in case of lockdown, and any emergency situations.



4. Cross cutting issues

- ▶ Finance
- ▶ Projects and donors
- ▶ Human Resources HRM (**adequacy, distribution, morale, shortages**)
- ▶ Training
- ▶ Quality of services
- ▶ Supervision Monitoring and evaluation
- ▶ Gender
- ▶ Environment
- ▶ Coordination
- ▶ Policies
- ▶ External relations and communication
- ▶ Community relation and client satisfaction

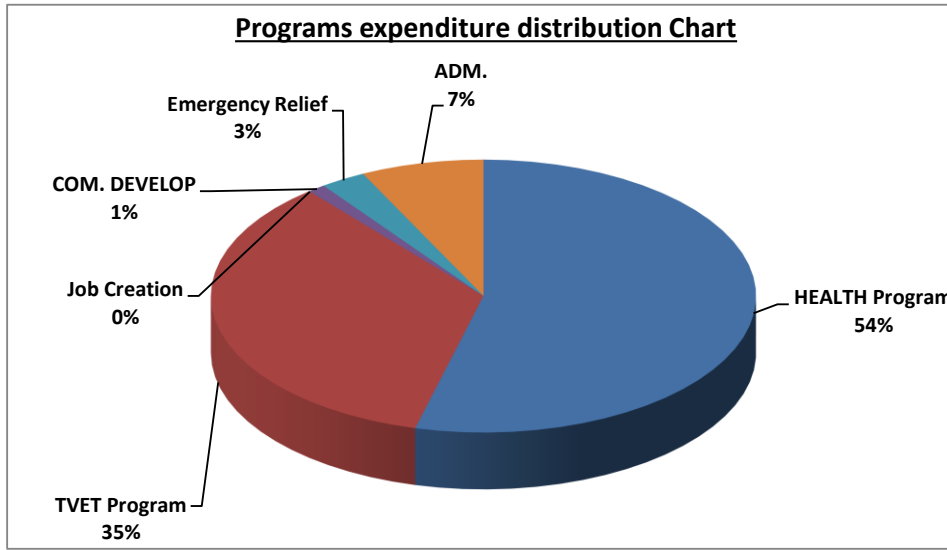


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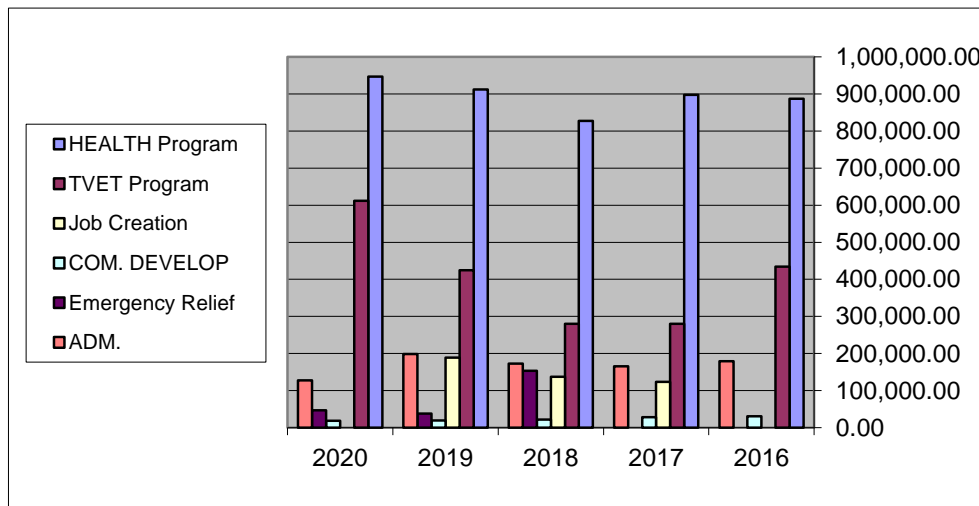
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4.1 Finance

The following chart is shows NECC programs expenditures for the year ended 2020



The following chart is comparing NECC programs expenditure over the years from 2016 to 2020





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4.2 Human Resources:

The breakdown of human resources by category is illustrated below in the table (25). The total NECC Staff during the reporting period is approximately **129** staff members. These committed people work in fields such as administration, fundraising, communications, human resources, finance, information technology, health, and customer service.

The breakdown of human resources by category is illustrated below in the table (25).

NECC Programs staff	Number of full-time staffs	Number of part-time staffs	Gender		Total
			Male	Female	
NECC employees	78	51	57	72	129
percentages	60.5%	39.5%	44.2%	55.8%	

4.3 Capacity building and training:

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, **21 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 (26): Main trainings and workshops attended by NECC for capacity building from 1st January to 31st December 2020:

#	Training/workshop Subject	Participants	No. of days	Trainer / Organizer	Period	Place
1	Preconception Care	1 NECC health staff	1	Jozoor	February	Al-Mathaf Restaurant
2	ECD committee meeting	2 NECC health staff including coordinator	1	UNICEF	March	UNICEF
3	Response to gender-based violence	1 NECC health staff	3	PRCS	March	Mazaj Restaurant
4	Covid19 prevention	1 NECC health staff	1	MOH	March	Al-Amal Orphanage Institute
5	Covid19 prevention	1 NECC health staff	1	MOH	March	PRCS



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6	Act of NGOs in West Bank and Gaza to prevent Covid19	1 NECC health staff	1	PNGO	May	PNGO
7	Covid19 response	1 NECC health staff	1	MOH	June	HRD hall
8	Preventing Covid19 infection	2 NECC health staff	1	MOH	July	HRD hall
9	PCC	1 NECC health staff	1	Jozoor	July	Via Zoom
10	Enhancing youth engagement in vocational training	1 NECC staff: TVET supervisor	1	UCAS	July	UCAS
11	Health Cluster HNO	1 NECC health staff	1	MOH and PNGO	August	Roots Restaurant
12	Activating national committee for breast feeding	1 NECC health staff	1	MOH	August	MOH clinic in Gaza
13	Developing the market least-demanded vocational careers	1 NECC staff: TVET supervisor	1	UCAS	August	UCAS
14	PCC	1 NECC health staff	2	Jozoor	November	Al Salam Restaurant
15	Workshop on project of access youth to labor market	NECC TVET Coordinator	1	Aisha Association for Women & Child	November	Heavens Hall
16	Digital protection of NGOs workers	1 NECC IT staff	1	PNGO	November	Light House restaurant
17	Health education on Covid19 pandemic	2 NECC Health staff	2	MOH	November	PRCS

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

4.4 Quality of services

- Since its establishment in 1952, the NECC is committed to improve the health status of Palestine people in the Gaza Strip. This is clearly reflected on the mission of NECC and the strategic goals. The strategic plan incorporated health intervention as a key component of intervention. The organizational capacities supported implementing this program included the availability of qualified staff, well-established centers, good procurement, financing, auditing, and logistics departments. To summarize, the health program is very responsive to the NECC capacities, and it is consistent with the work themes, mission, and strategic goals of the NECC.



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- Provision of Psychosocial Service within the Family Health Care Centers. NECC integrates psychosocial service as a core component of the Family Health Care centres. In the Gaza Strip, most psychosocial and psychiatric services are provided through vertical programs that only provide psychosocial and psychiatric services.
- In order to achieve high standard of quality in the services provided by NECCCRW's health centers, NECC monitors clients' perspectives/satisfaction and results demonstrate a very high degree of satisfaction among clients. Satisfaction assessment and community feedback enable the NECC staff to constantly monitor weaknesses and strengths in order to maintain good quality of services both in terms of quality of facts and quality of perceptions.

Interestingly, the clients' satisfaction which revealed to be very high is as validated by our internal assessment as well as by the assessments carried out by others. The satisfaction was very high regarding services provided, cleanliness, privacy and time allocated to the clients. Less satisfaction reported about waiting time mainly due early arrival of clients to our clinics. However, NECC tries to shorten the waiting time and to conduct patient flow analysis which could help in decreasing the waiting time and makes the patient flow smoother.

- With regard to beneficiaries' satisfaction with the provided services, the vast majority of the interviewed cases (more than 90%) revealed that they have received high quality services.
- Involving Community in Designing Making and Prioritizing Health Needs: Community involvement is an essence of PHC and Family Health Care. The involvement of community members to such a degree is not a common behavior of health providers in the Gaza Strip. Since launching its health program, NECC involves community members constantly in identifying community needs, prioritizing the identified needs, and implementing activities.
- During implementation of any project, women consulted about appointments related to follow up. Mothers' preferences are also considered and NECC engaged in the HAP accreditation process.
- Suggestions boxes are available at NECC. Clients are encouraged to raise their issues and regularly the organization responds to their requests. In addition, appeal and compliant system is in place. As a part of the NECC monitoring, NECC organizes focus groups discussions with beneficiaries to solicit their feedback. NECC conducts regular evaluations and client's perspectives are seriously considered in these evaluations. During the process of strategic planning, clients' perspectives and needs are considered
- For instance, during launching the nutritional program in the three-targeted areas, NECC involved community leaders in order to reach, educate, and convince people to adopting healthy habits.



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- Another example is the inclusion of family planning services to the NECC health services. Community members demanded the service; community leaders expressed the need to NECC, and NECC responded to the community need and included the service within NECC bundle of services. With no doubt, community involvement is not only value added to NECC, but it gives creditability, acceptability, and suitability of NECC provided services.
- Create Electronic Health Record and Centralized Database: In 2008, NECC health program is the first program that developed electronic health records and that fully transformed the paper-based system to electronic computerized system. Currently, UNRWA is in the process of transforming the paper-based system to electronic system.
- Offering Systematic Well-Organized Postnatal Care: NECC health program is the most successful and among the few systematic, well organized postnatal care services in the Gaza Strip. The NECC postnatal program involves conducting home visits to all newly delivered women, mostly in the first six days after delivery.
- Contrary to the NECC postnatal program, UNRWA and MoH postnatal programs involve visiting only defaulters and high-risk pregnancy cases. Also, the MoH postnatal program is not a sustainable program, it is a project funded by UNICEF with particular emphasis on child health rather than women's health.
- Providing Growth Monitoring for Children up to Six Years Old: In the Gaza Strip, the NECC health program is the only program that provides growth monitoring to children up from birth to six years old. Both UNRWA and MoH provide growth monitoring for children up to three years old.
- Applying the treatment protocols is a good tool for ensuring the quality of services
- Conducting Systematic Follow up for Beneficiaries: NECC is the only health provider that implements systematic follow up for their beneficiaries. For instance, NECC refers severe cases of anemia and malnutrition to MoH and other local organizations.
- NECC conducts systematic follow up of referred cases through home visits, and follow up with physicians at the referral organizations. Additionally, NECC conducts regular follow up that involves home visits for children suffer from anemia and malnutrition.
- NECC strategic frame focuses on mother and child health. This enabled NECC to provide quality health and psychosocial services which is vital preventive strategy.
- NECC strategic goals focus on promoting mother and child health. For instance, objective number one in the DSPR strategy document (2017-2021) "Palestinians, Palestinian refugees and displaced groups can live healthy lives", incorporates the well-baby services.
- Also, supporting child health is online with the SDG aiming to reduce child mortality rates. In addition, the national health strategy 2021 -2025 prioritize child health and flags the importance of promoting child health and well-baby services which enabled NECC to



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implement activities on line with its strategic frame work and the provided support covered essential components such as employees' salaries, drugs, screening activities.

- Currently, NECC monitors client satisfaction and beneficiaries' feedback is regularly solicited. The questionnaires were collected and the analysis reveals high degree of satisfaction about health and psychosocial services. In addition, clients' feedback is systematically monitored and usually reflects positive attitudes as the satisfaction assessments reveal that over 90% of NECC clients are satisfied.
- A new monitoring tool named balanced scorecard has been developed during 2018 which includes several technical, managerial, financial and community related indicators including client satisfaction, counselling, waiting time, and so on. The tool is now being field tested and is expected to be finalized soon.
- Check lists, and monitoring tools, to measure the quality of services provided are available.
- Monitoring, follow up and tracking indicators is essential to achieve program objectives

4.5 Supervision, Monitoring and Evaluation

Monitoring and evaluation are very important to follow implementation and outputs systematically, measure the effectiveness, and identify the most valuable and efficient use of resources.

The NECC enjoys a very committed, dedicated and effective management; each center has a supervisor, and the three supervisors are well-trained have good managerial skills. At the main office level, the NECC Executive Director and the Health Program Coordinator monitor and supervise the implementation of the health program closely.

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

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

NECC program coordinators supervise the overall progress of the programs and revise the strategic approach in cooperation with the Technical Consultants, based on information provided by the staff in the field and submit the information to the coordinators. At the field level, a supervisor inside each health center overall manages the field work.





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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 program's operations, while the senior accountant does the monitoring for the financial issues and follow up in coordination with the executive managers and the programs coordinators.

NECC executive director conducted staff meeting to discuss the new procedures, and protocol that should be used in terms of preventions of COVID-19 pandemic.

Regarding TVET program; TVET program is utilizing a group of evaluation forms for the aim of assessing the performance and progress within the educational and training process/cycle tackling all inputs.

The whole educational process is being continuously assessed; evaluation forms are being used to evaluate trainers, curricula, tools and equipment, physical environment including safety measures and etc.

4.6 Gender

NECC provides its health services to all the population regardless of their backgrounds and differences. Beneficiaries served equally in both gender without any discrimination in gender, race, and religion, Also NECC doesn't pay any attention to the political affiliation of the beneficiaries.

NECC is keen to provide services without any kind of discrimination including gender discrimination. NECC has developed gender policy and the organization staff has been trained on the policy. Also, the staff signed the policy and its implementation is being monitored).

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 year's members have endeavored to promote gender sensitive approaches to development and humanitarian assistance.

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

Also, the staff signed on the policy and its implementation is being monitored.

Children who attended the NECC clinics are almost equally distributed in reference to gender although males constituted slightly a higher non-significant proportion (51.8% males; 48.2% females).

According to the demography of the Palestinian population, for each 100 female born babies there is 107 males, however, gradually, the proportion of males decreases by age due to increased morbidities and mortalities among boys.



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NECC developed gender-based violence questionnaire in its management information system to detect any violence against women, we conducted screening to 347 women, of them 115 were exposed to violence either it was physical violence, or psychological violence, and or negligence and deprivation.

Moreover, regular participation through health and protection clusters in UNICEF in terms of GBV.

Around 60% of beneficiaries who benefited from NECC health services are females. Also, with regard to the well-baby visits, similar proportion of male versus females were served. With regard to health education.

Women are targeted in health education as they carry the burden of taking care of their children. Women are more involved in the care of children including feeding and nutrition practices. Healthy behaviour in the community is largely determined by women therefore women awareness is very important.

No differences were noticed in the prevalence of anaemia and malnutrition among males and females. Looking to the impact of the program like follow up visits and the recovery rates, shows that no gender differences were noticed, as noted below.

The project staff was balanced in terms of gender. Beneficiaries were almost equally distributed between males and females. Also, the project outcomes were observed from gender perspectives and no disparities were

Furthermore, NECC is providing the vocational and educational training for both males and females in different trades and vocations considering NECC capacity and capabilities, applicants interest and community norms and customs.

In particular, NECC provides this vocational training service for men in five careers of carpentry, welding, aluminium, general electricity and air conditioning while providing the VT service for women in two careers of advanced dressmaking and secretary and office management.

NECC attempts continuously to adhere to the community needs of introducing new careers for youth and so, providing new ideas and proposals to contribute to add new trades especially those introduced for female students as long as financial and technical capacity allows.

Additionally, NECC provides equal opportunities for male and female students in its TVET offered trades to develop their career in order to be able to more easily get decent job employment opportunities.

The new enrolled female students' percentage is 40% and 60% for males the increase of male percentage could be explained by the fact that NECC runs five TVET professions for males versus three professions for females.

It is worth mentioning that NECC developed GBV strategy and endorsed it.

Besides, NECC has maintained gender equity and equality among NECC beneficiaries especially by opening new TVET programs targeting female youth in Graphics Design & Multimedia.



4.7 Disability

92,710 Person with disabilities in Palestine, persons with disabilities in Palestine constitute 2.1% of the total population; 48% in the West Bank and 52% in Gaza Strip according to the data of the Population, Housing and Establishments Census, 2017. The mobility disability accounted for the highest proportion of disabilities; 47,109 persons with mobility disabilities constituted 51% of the total persons with disabilities.

About one fifth of persons with disabilities are children under the age of 18, 20% of persons with disabilities in Palestine are children under 18 years old. The percentage of male children was higher than that of females in the same age group, reaching 21% and 18% respectively. The percentage was more prevalent in Gaza Strip (22%) than in the West Bank (17%), according to the Population, Housing and Establishments Census, 2017.

Children with disabilities (CWDs) are one of the most marginalized and excluded groups of children. In the larger community, they are often defined and judged by what they lack, rather than what they have, they experience widespread violations of their rights that result not from the intrinsic nature of disability but from limited access to supportive services and social exclusion (UNICEF, 2013a). NECC's IT programmer added a disability icon to the Family file for each new family file or child file. During this reporting period **3** person with disability were identified to have a disability attended NECC health centres to receive health care the most common disabilities among cases was hearing, physical and mental disability.

ATFALUNA Centre for deaf and dump children conducted screening to children at NECC clinics to detect hearing disability, and those with hearing problems referred to special doctor, and other children referred to ATFALUNA centre for deaf children.

Additionally, NECC introduced early childhood development and early childhood intervention (ECD and ECI) in Shijaia clinic to detect children with developmental delays and children with disability. This approach adopted through the partnership with UNICEF, and recently new national strategy developed for this approach in participation with MOH, MOE and UNICEF.

Through this program ,**150** children were assessed for ECD among them **130** were normal and **20** children had developmental delays including cognitive, emotional, social, and communication delays, including one, cerebral palsy, down syndrome, partial blindness.

NECC is not a specialized organization for disability and the persons with disabilities attended NECC for primary health care, NECC offered for them all the needed health care with no discrimination, the physician examined them and if they needed referral to relevant organization, the physician may advise them to be referred. All staff are trained about detecting disabilities and disability inclusion.

NECC adjusted its premises to include ramps, in all health facilities, and NECC premises. NECC needs to strengthen coordination with other facilities to deals with different disabilities, and it's worth mentioning that all health staff received training on disability inclusion.



4.8 Environment

Gaza is facing a water crisis. The Coastal Aquifer groundwater level has dropped to more than 10 meters below mean sea level. The annual safe yield of the aquifer is 55–60 million cubic meters (mcm); however, approximately 160–200 mcm per year are being extracted. Only 4 per cent of the 180 mcm of water extracted annually by Gaza residents from the aquifer are potable.

Access to safe drinking water in Gaza via the public water network fell from 98.3 per cent in 2000 to only 10.5 per cent in 2014. Intensive use of agricultural pesticides, along with the inflow of sewage into the Coastal Aquifer, has resulted in nitrate concentration of 300 mg/L: six times higher than World Health Organization recommendations.

Chloride concentrations are also high. These contaminants present particular risks to children and pregnant women.

Water associated diseases account for approximately 26 per cent of childhood diseases in Gaza and are a primary cause of child morbidity.

Marine ecosystems, human health and desalination operations are impacted by largescale discharge of untreated wastewater from Gaza. The amount of untreated or partially treated sewage/wastewater that flows daily from the Gaza Strip into the Mediterranean Sea increased from 90,000 cubic meters (m³) per day in 2012 to 100,000 m³ per day in 2016 and 110,000 m³ per day in 2018.

Freshwater courses and groundwater in the West Bank and Gaza are being polluted by waste from Palestinian towns and villages, and from Israeli settlements. Untreated wastewater infiltrates into the groundwater of the Mountain Aquifer, affecting its quality: localized high concentrations of chlorides and nitrates have been identified. The Mountain Aquifer is contaminated by leaching of toxins from unregulated vehicle dismantling and e-waste industries.

Demand for water is increasing, primarily due to population growth. The annual domestic supply gap for Gaza and the West Bank is projected to be approximately 79 and 92 mcm respectively by 2030 (*state of Environment and Outlook Report for the oPt, UN 2020*).

Adequate sanitation, together with good hygiene and safe, reliable, affordable, and easily accessible water supply, are essential for good health. Widely, it is believed that improving water resources can improve health and reduce attributed death as well. In the Gaza Strip, water quality is affected by many different issues including soil/water interaction in the unsaturated zone due to recharge and return flows, mobilization of deep brines, sea water intrusion.

In the absence of other significant water resources in the Gaza Strip, the aquifer is considered the main water supply source for all kind of human usage, which is currently facing a serious challenge in terms of quantity and quality. The available water quantities for the population in the Gaza Strip are inadequate due to the over-exploitation of the natural aquifer, and the water quality falls below the accepted international guidelines for potable water, which poses a risk on the public health of about more than 1.8 million people living in the Gaza Strip.



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Environmental and political factors such as closures, incursions and the destruction of the infrastructure could explain the high incidence of infectious diseases and diarrhea. Contextual and environmental factors—such as disruption of the water infrastructure, poor quality of water, electricity cuts, lack of tools play key roles in the increasing the incidence of infectious diseases such as diarrhea.

Although the control of infectious diseases has been maintained with no reports of fatal vaccine-controllable diseases, meningitis, hepatitis, watery diarrhea, parasitic infestation, skin diseases and others are common diseases with high morbidity rates.

The spread of infectious diseases is attributed to contextual factors such as poverty, poor sanitary conditions, water and environmental pollution. Water supply through piped network reaches most homes for just a few hours every 3-5 days, and desalination plants are functioning at only 15 per cent of their full capacity.

NECC have a specific and safe protocol for disposal of the hazardous waste without affecting the environment in cooperation with the MOH.

Any project implementation is environmentally friendly and no environmental hazards were associated with the project operation. Waste management were done according to the safe standards of the MOH and in coordination with municipalities

NECC agreed with MoH on the process of handling NECC disposables in coordination with the Gaza Municipality regularly to collect and treat NECC wastes including hazardous medical wastes. The three clinics use disposable containers for sharp disposals, family planning disposals such as used IUD, swap, gloves, laboratory tubes, the disposable containers weekly sent to incinerator of MOH.

Due to COVID -19 pandemic, and its globally spread, NECC was committed to protective procedures according to MOH protocol, and WHO guidelines

ECC's-VTCs adopts the cost-effective 3R procedure where the minimal amounts of the raw materials in the centers are consumed due to the reuse of the old projects conducted by the students in the formation of new project. Small pieces of wood are used to produce architecture handcrafts.

Sawdust also is mixed with paints to be used in other projects. Wastes especially from metal, aluminum and motor rewinding workshops are recyclable (by external recyclers).

NECC implements the national infection prevention and control protocols of the MoH that includes a component about effective waste management. Also, we have checklist to ensure the proper use of the infection prevention and control protocols by the staff.

Health education sessions are conducted through the clinics with emphasis on general health and hygiene awareness principles and distributed brochures in this regards, pollution, environmental hazards, Also, printed Information, Education; Communication materials are available to support these messages and are distributed to the mothers/women who attend the three clinics.



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Moreover, NECC conducted community enlightenment and advanced courses for adult women. It is worth adding that NECC had used a management information system at all health centers since 2009 till now and the same for administration office that reduce the use of paper which also is considered as part of concerning environmental issues.

4.9 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 program's 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



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workshops fulfilling the PFI and PFTU. During the reporting period: 80 external workshops and 5 local institutions in Gaza from private sectors received trainees from NECC as a part of the practical training of TVET program or benefitted from NECC VTC's.

- Practically, NECC runs continuous coordination work with those strategic partners in conducting shared capacity building programs, networking and share experience meetings in fields of job creation and employability interventions and TVET weeks and exhibitions.
- NECC is coordinating as well with training provider institutions such as Injaz Palestine in order to conduct training courses for our VTC trainees in several topic; many courses were conducted by their trainers in favorite of our trainees in titles like “my path to professionalism” at our Shijaia VTC and “Be Entrepreneur” at Qararah VTC.
- In a similar approach, NECC organized 2 specialized training courses targeting a group of our Qarara-VTC graduates and Electrical workshop owners in cooperation with Aknan Tech. company trainers.

4.10 Policies

NECC committed to its child protection policy, code of conduct, gender policy, Anti-Fraud policy and anticorruption policy. Including sexual exploitation and harassment.

NECC staff continued the mainstreaming of child safeguarding, child abuse... through providing sessions and distributing brochures and booklets to the beneficiaries at the health centers and TVET-VTCs as well. It is worth mentioning that NECC counsellors keep an eye on child protection during conducting any of PSS activities/interventions to detect any child abuse case even no formal reporting about them.

It's worth mentioning that NECC updated child protection and child safeguarding policy, also about 3 of our psychosocial staff received training on child protection and child safeguarding in

Families' children and communities are made aware of safeguarding requirements.

During this reporting year NECC conducted 28 sessions about child protection and child abuse to 157 persons and distributed brochures to them. Clear disciplinary procedures for dealing with child safeguarding complaints were included in NECC HR Manual.

All recruitment guidance complied with for all posts -including volunteers.

Opportunities provided to staff and volunteers for child safeguarding update training.

The staff signed on the DSPR anticorruption policy, DSPR has strong internal and external monitoring and control mechanisms.

NECC programs contain both health and nutrition components which are essential human survival rights. Ensuring access to health care is a well-recognized human right principle. In particular, targeting children and addressing their needs is also an important child protection right.



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The NECC programs has been implemented in marginalized borders area and served vulnerable population including caregivers/woman. The awareness session also considered gender-based violence and protection which is congruent with the intentions of UNSCR.

When NECC contracts any vendor, new employee, or institution, they should sign on our child protection and child safeguarding policy.

Suggestion boxes, and complaint boxes are available at NECC. Clients are encouraged to raise their issues and regularly the organization responds to their requests. In addition, appeal and compliant system is in place. As a part of the NECC monitoring, NECC organizes focus group discussions with beneficiaries to solicit their feedback. NECC conducts regular evaluations and client's perspectives are seriously considered in these evaluations.

4.11 External relations and communications

NECC implemented all its programs activities in accordance with the local protocols of MOH either for MCH care, nutrition, PSS.

- On the partnership level, NECC continues partnership with UNICEF to promote postnatal care to mothers and newborns by receiving at least three PNC sessions two at home and one at the health center, and management of moderate and severe acute malnourished cases.
- New partnership with. Campaign for Palestinian children CCP, funded by Japan Platform
- Continue the project implemented with UNICEF for PNC provided to mothers and newborn and early child hood development (ECD).
- New project started in January 2020 and it finished in December 2020 supported by Pontifical Mission for provision of psychosocial services to children and mothers.
- 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 after their graduation.
- New proposal was submitted to **DCA-NCA** for TVET program funded by NORAD for 2020-2021.
- On the civil society level, NECC is securing strategic and sustained relationships with TVET providing institutes, NGOs, colleges and universities etc.
- As well, on the donor current and new partnerships level, NECC realized new partnership with a Dutch organization targeting the opening of new department of graphics design and multimedia for female youth in order to insert them in the online labor market.
- NECC was got 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



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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.
- NECC local partners were invited to participate in reflection workshops facilitated by NECC-TVET program to lead efforts in the field of youth socio-economic insertion and involvement in partnership with private sector, governmental entities, NGOs, colleges, TVET institutes and centers.

4.12 Community involvement

NECC conducts regular community meetings and involve people from the served areas and usually include women and men from different backgrounds and different characteristics. However, usually, the local community leaders are consulted about the very basic ideas of all the NECC programs and projects and their support and commitment are obtained prior to the implementation of any project.

One of the key philosophies of primary health care is community involvement and involving the community in the planning, the implementation and the evaluation of services. This approach is also supportive to the concept of shared ownership of the health services and lies at the heart of quality (client is the king).

Records and minutes of the community meetings are maintained at the NECC facilities. During community meetings various issues are discussed such as the quality of the services provided and community perceptions about them, community requests for new services, approaches to delivering services and community suggestions for improving the provided services.



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Community requests and opinions are usually discussed within the Medical Committee of the NECC and tentative decisions are taken accordingly. The MOH is actively involved and their approval/support is essential before introducing any new services as discussed in the community meetings.

During implementation of any project, women consulted about appointments related to follow up. Mothers' preferences are also considered and recently NECC is engaged in the HAP accreditation process.

Suggestions boxes are available at NECC. Clients are encouraging to raise their issues and regularly the organization responds to their requests. In addition, appeal and compliant system is in place.

As a part of the NECC monitoring, NECC organizes focus groups discussions with beneficiaries to solicit their feedback. NECC conducts regular evaluations and client's perspectives are seriously considered in these evaluations.

As a part of DSPR, NECC developed its strategy for the coming 3 years. The strategy shows that promoting child health is one of the strategic goals of NECC. Clients' perspectives and needs were considered in the developed plan.

Currently, NECC monitors client satisfaction and beneficiaries' feedback is regularly solicited. In total, 419 questionnaires were collected and the analysis reveals high degree of satisfaction about the well-baby services. In addition, clients' feedback is systematically monitored and usually reflects positive attitudes as the satisfaction assessments reveal that over 90% of NECC clients are satisfied.

Also, quarterly, the Director of NECC meets with beneficiaries and community leaders and discusses with them their needs and the relevancy of NECC to their health needs.

With regard to involvement of community leaders, the NECC involves com

munity leaders greatly. The NECC Executive Director and Health Program Coordinator conduct regular meetings with community members. The meetings serve different purposes, mainly to assess the local community needs and involve community leaders in the decision-making process. For instance, decision to include family planning services to the NECC bundle of services was a response to a need that was expressed by community leaders. The community leaders demanded more of such meetings, particularly with the NECC Executive Director.

For NECC the beneficiaries and stakeholders are consulted about the very basic ideas of NECC programs. The support and commitment of beneficiaries are obtained prior to the implementation of any project and later on obtaining the level of their satisfaction during the implementation phase through community leaders' meetings and discussions.

Beneficiaries' participation in the implementation will be ensured through soliciting feedback, involving them in the management plan and considering their perspectives through questionnaire taking in consideration gender equality as this is one of the main core values of NECC interventions without any kind of discriminations, following NECC gender policy.



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Beneficiaries' preferences will also be considered and recently NECC is engaged in the HAP accreditation process and successfully has passed the required standard for the Palestinian NGO's Code of Conduct and was granted a certificate of Compliance for one year from NDC (NGO Development Centre).

NECC conducts regular community meetings during the year in all the centers either health or TVET and involve people from the served areas and usually include women, men and TVET parents from different backgrounds and different characteristics.

In 2020, 3 community meetings were held with the participation of the Director of NECC and community leadership and beneficiaries to discuss with them their needs and the relevancy of NECC programmes to their health needs. However, because of restrictions imposed by Covid-19, NECC wasn't able to conduct the usual number of community meetings.

An opening ceremony for a new department of graphics design and multimedia was held inviting community representatives from the ministries, private sector, NGOs, TVET colleges and institutes, church representatives and etc. in order to inform about this new career introduced by NECC.

4.13 Future plan:

- Continue the provision of the current programs through support from NECC partners.
- Continue offering preventive and curative health services to sustain and promote the health and wellbeing of Palestinians in the three served areas Shijaia, Darraj and Rafah\ Kherbet Al-adas.
- Continue providing professional skills training and access to education to empower marginalized Palestinian youth to improve their own economic conditions through vocational training centers.
- NECC continues its existing efforts to mainstream gender and to further strengthen this approach.
- Develop a diversity and inclusivity plan / policy in order not to compromise the participation of specific target groups in its programs, such as PwD
- Strengthening management and monitoring system
- Provide capacity building training on fund raising and networking skills is very essential for NECC key staff.
- Develop of fund-raising strategy.
- Develop a new emergency preparedness plan in terms of Covid-19 pandemic, and conflicts.
- Starting new partnerships and projects when approved.



4.14 Sustainability

NECC programs contribute to promoting and improving the quality of health and TVET services which are critical for the survival, economically development and the wellbeing of the benefited beneficiaries at the long run. Appropriate health services promote mother and child survival and help them to sustain healthy lives at the long run. Thus, it contributes to reduction in mortality and morbidity at the short- and long-term.

NECC ensures sustainability in the programmes in the health and vocational training centres. The staff and managers are local Palestinians of both genders. NECC has been operating for decades NECC implement the programs in the health and vocational training centers. Staff and managers are local Palestinians of both genders. NECC have been operating for decades.

NECC is a well-established organization with a solid structure and strong foundation. Proposed services will continue as a part of the regular activities within NECC clinics and vocational training centers.

Given the fact that the program has different components, each component has a different degree of sustainability. This program is contributing to the long-term development of the Gaza Strip; the relationship between health and development is well known; improving health of a population is a means to the end of development.

Given the fact that the NECC health program provides a wide range of services including maternal and child services, care of communicable diseases, and other preventive and curative services, the program will have positive long-term impacts on the beneficiaries of the NECC centers and the whole community as well. Areas that will have positive improvement include reducing mortality rate among infant and under five children, improving access to reproductive health, and preventing the spread and control of many diseases, and reducing the burden from nutritional problems. Clients will keep utilizing health services of the NECC centers, eventually; this will improve the overall level of health. This overall improvement will be sustainable.

The health program contributes to improve health and wellbeing of Palestinians in the three served localities and to empower Palestinian youth in Gaza from both genders. Primary health care and PSS are critical for the survival and the wellbeing of the benefited mothers and their children at the long run. Appropriate primary health care increases the possibilities that the served beneficiaries will sustain healthy lives at the long run. Thus, it contributes to reduction in mortality and morbidity at the short- and long-term perspectives.

The provided health education helps families at the long run to develop appropriate practices in reference to crucial issues such as nutrition, hygiene, danger signs and many others. Acquiring new knowledge and adopting appropriate practices are sustainable and remain after the end of the project.

Enabling mothers to rely on themselves and to be able to sustain themselves and their newborns is a sustainable approach. Benefited communities are the most sustainable.



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To ensure continuity of care, NECC enroll served beneficiaries into its health program therefore beneficiaries will continue to receive services at NECC clinics. This will reinforce appropriate practices and behaviors. In addition, the project will help to develop the capacity of the NECC to provide quality health care and PSS. NECC will build on the success of this project and will develop sustainable appropriate practices. The project will leave skills, strategies and tools which will continue to operate despite the discontinuity of the fund through this project.

The program served a needy population and addressed an important health problem which fits within the overall health plan of the Palestinian population, through an integrated approach of services provision and strengthening communities' abilities to meet their needs. The project could be a model for the continuum of care to the women in Gaza that could be benchmarked by other organizations. The spillover effect of the project will be positive at the community front as well as at the health providers' front.

NECC was developed its curricula provided for its TVET-program students designated for the enterprise and start-up business management.

This endeavor will result more accessibility to the self-employment approach and culture and thus directing to easier attainability to employment and job opportunity.

4.15 Lessons learned

- ▶ Access to services is a serious concern affecting the protection of Palestinians in Gaza. These services have been part of NECC response and continue to be relevant. This includes vulnerable areas such as health, malnutrition, psychosocial response as well as technical vocational and education training.
- ▶ As a result of repetitive wars on Gaza strip the number of disabilities among people has increased especially among children. SoNECC intended through AfP current support to engage health staff in two-days training about disability, including, social model and disability inclusive development, NECC will mainstream the disability policy.
- ▶ Provide E-health and psychosocial counselling through free hotlines services is very effective particularly in COVID-19, and emergency situation.
- ▶ Strengthening coordination with referral sites is essential and proactive the referral system.
- ▶ Emergency preparedness plan is essential to be updated according to need assessment
- ▶ Nutritional problems remain prevalent in the Gaza Strip, as the NECC health program is contributing to reducing the prevalence of nutritional problems among Palestinians particularly children. The NECC health program emphasis on nutrition is very relevant and appropriate, thus, it is very important to continue implementing such program in the future.
- ▶ A holistic integrated approach focusing on WASH and nutrition. Such programs are useful for tackling complex multi-dimensional problems such as malnutrition much more than horizontal programs.
- ▶ NECC is unique in providing well-baby services to children till the age of 6 years. These services can be expanded to other providers such as MOH and UNRWA.



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- ▶ Provide capacity building training on fund raising and networking skills is very essential for NECC key staff.
- ▶ Contacting different donors and develop new partnerships for fund raising to avoid financial deficit.
- ▶ In order to improve the accountability, communication and coordination with stakeholders, clear
- ▶ protocols on communication and information sharing need to be established under a new external relations and communication strategy
- ▶ As NECC is running job creation opportunities occasionally, a comprehensive database for our graduates is in place; the database included their personal information such as names, ID numbers, localities, social status, economic situation as well as employment history and career development. This spread sheet should be continuously updated for any job creation intervention so that we can adopt on its ready information rather than the swift collection of information occasionally.
- ▶ Providing post-graduation services for TVET graduates is very essential in order to increase employability among those graduates through the different services provided such as on-job training placements, career counseling, job search training, business management training and etc. those services are very vital for graduates to achieve this goal of inserting them into the labor market.



4.16 Success Stories

Stories from health program

Story 1:

Mrs. Tasneem Abdullah Abu Ajwa, 23 years of age, she lives in Al Shaf, Al Shajaiya neighborhood. She follows up in the NECC antenatal care clinic. she is pregnant in the fifth month. The woman says that the system used in an emergency is good to receive and sort cases, measuring temperature and hand sanitizing and Checking on our health by asking us about any symptoms of cold, cough, wheezy chest. And putting paper on the chair written on it is reserved in order to ensure social distances, and there will be a separation between the lady and the other, and giving me the necessary treatment, iron and vitamins in this difficult time, we are unable to purchase it from outside. I thank the NECC that provide us with distinct services, especially in this emergency situation, and this is a special reason to visit this clinic and follow-up in it. My husband was previously working as a lawyer in a Law firms consulting with his friend. But with the beginning of spread of corona virus, advertising the emergency, and close the courts there is no work, no income to family from 4 members. Now I'm pregnant and I need a good healthy feeding and there is no assistance from anyone except for a purchasing voucher of 140 shekels from lawyer Association at the beginning of Ramadan. Now my husband doesn't work for two months and this led to family problems and disputes, and feeling anxious about how to provide the necessary needs for the family and my children, and how the situation is in the case of the birth of the child, and we are unable to support our children, so how the situation will be with a new child who needs clothes, pampers, milk, etc.

We pray to God to remove this black cloud from us and return to the normal life that we were living and which we did not like it in the past.

The woman says: "We were in grace, and we did not know,". Also, Mrs. Tasneem thanked the NECC health staff for their great effort on providing a high quality of services even in such difficult situation, and she has extremely appreciated the generous support from NECC partners to Palestinian women and their children.





Story 2:

This is a story of Mrs. Layla Mohammaddain with her a child Mohammed aged 13 months suffered from anaemia.

The family lives in a small part of the extended family house which is composed of three levels, where married in laws live. The nuclear family is composed of 3 people, one child and his parents. The extended family members who are living with them composed of 9 members. The couples were infertile for around 4 years, and started treatment for infertility for the mother at the age of 15 years!! The parents are relatives (cousins), married early, the mother age was 15 years only when she was married.

The house is an old building made of concrete, painted but very small. The family lives in a store around 60 Square meter, one sleep room, small hall and small kitchen, not enough for cooking and a small toilet. The house is clean but not furnished. There are some cooking facilities, small refrigerator and a washing machine. Because the family shares with the extended family cooking and living, most of the furniture items are available at the in-law's house where food is usually prepared.

The house is located in Shajaia area. The neighbourhood of Shajaia, with more than 120,000 residents, is located at the eastern border between the Gaza Strip and Israel. Its strategic location makes it more exposed to Israeli incursions. A total of 21,736 households live in 9,273 crowded buildings; refugees represent less than 25% of Shajaia's population. Average family size is 5.8, and most families (more than 61%) have children or adolescents. Shajaia is also known as a conservative community with strict socio-cultural norms and traditions. Most women marry at a young age (the median marriage age for women is under 20) and most women do not participate in the labour force.

There is widespread unemployment in Shajaia, especially among women. Shajaia was not traditionally a poor area; historically, the main sources of income were trading of clothes, working in Israel and agriculture. But since the blockade on Gaza in 2006, the main source of income is employment with government social services.

Almost all households are connected to electricity, water and sewage networks, and have basic assets such as refrigerators, cooking gas and furniture. Shajaia is served by Gaza municipality. The area came under heavy shelling in July 2014, with around 120 Palestinians killed in one day alone and thousands of houses have been demolished.

The good thing about Shajaia area, is that families are connected and they support each other, the area is clean also. The bad thing is that the house is very small, crowded, no green areas and she feels suffocated. Despite the area is quiet, she doesn't like to continue living in it.

The mother said, I have been married early, I don't interact with too many friends, my age and classmates don't deal with married women. Because I don't know many people, my social life is limited to my family cycle. I go to wedding parties, and visit people with my mother in laws. Because my husband works intermittently, we don't have enough resources to go to recreational places which are unaffordable to us.



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I have been introduced to the NECC clinic by a relative from the extended family. I followed at NECC pre conception care services in 2017, then I received the antenatal care at the same clinic when I got pregnant and continued during the post-natal care. I have been told that the quality of services at NECC is very good. I heard about the well-baby services from the NECC staff during the antenatal care sessions. The staff encouraged me to visit NECC to receive the well-baby services till my child reaches 6 years old.

I am being served by NECC for more than 3 years. I have been served by the well-baby clinic for more than 12 months. Although there is a governmental clinic near my house, I feel more comfortable at NECC also the medications are available at NECC.

I come to the NECC clinic according to the appointments given to me, the schedule of visits is related to the age of the baby. In general, I visit the clinic once monthly, but when my child or myself get sick, I do more visits. For my child Mohmmmed, I have conducted 15 visits to the NECC clinic for my child care.

The team at NECC provided me with quality health care that included the following:

- Measuring the weight, height and head circumference of my child.
- Measuring haemoglobin level.
- Giving me drugs and vitamins to improve the haemoglobin level of my child.
- Dispensing drugs when my child was sick (9 prescriptions with vitamins, iron, antibiotics, antipyretics, skin lotions).
- Doing laboratory investigations including urine, stool and blood analysis.
- Receiving health education sessions about healthy food, hygiene, normal growth and development.

My child health has been significantly improved after I visited NECC clinic. The project improved the health status of my child. My child was always sick, and we were worried. The services I received at NECC enabled me to better take care of my child and to improve his condition. My child was anaemic, but not anymore, he is healthy now. He used to have poor appetite, but now he is okay and eats healthy food. He used to eat few types of food, but now there is more diversity in his food. Also, because of anaemia, he was frequently sick, but now he is much better.

Yes, I learned too many things through my experience with this project. I learned the normal development pattern that my child should pass through. I learned what to feed him and what to avoid feeding him. Also, I learned the nutritious food that is healthy for the baby. I become more aware how to avoid diseases through better sanitation and hygiene. When my child becomes sick, I know better how to manage. For example, I don't give my child tea; i don't serve protein with yogurt, I serve him less junk food, I reduced the amount of sweat given to my children, I give him natural citrus with milk, I give him more fresh tomato. I have a schedule that I follow in feeding my baby

I hope NECC continues serving us and helping us to take care of our health and the health of our children, we do thank NECC and its supported partners.



Success story 3

This story of child Youssef Mahmoud Khudair, who was following at Al Daraj NECC well baby clinic, the child attended with his mother to NECC well baby clinic, and his body measurements were taken as follows: Weight 13.5 - Height 95.7 – and HGB 10.8g/dl

These measures revealed that the child suffer from anemia, and malnutrition, and according to national protocol followed at the clinics, the child enrolled to anemic and malnourished program at the clinic to be followed at this program.

The mother was given iron supplementation, and vitamins for her child, and health education on how to give iron, foods rich in iron and basic elements of nutrients for her child, and avoid fast food and ready meals such as chips - chocolate and juices).

The child's lab investigations including urine, stool, and a complete blood tests were done and transferred to the doctor at the clinic. Medical advice and providing iron and multivitamins to the child.

The child was given fortified biscuits, which is a wafer biscuit rich in iron and multivitamins ..



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The mother was pleased with the improvement of her child and sincerely thanked the NECC clinic and the staff for their kindness, and concerns of the children and their health, also the mother thanked the NECC partners who support NECC.



Story 4

Mrs./Nidaa Maher Hamdiya 23 years old married five years ago and she followed at NECC Shejaia health clinics of all her children, obtaining health services, and seeking medical help, in addition to Antenatal care, well baby care, family planning, health education and etc. I am now following up at NECC Shejaia clinic in my current pregnancy she said, and I am in my last month of pregnancy , and I followed at NECC clinic in antenatal care program, they provide me proper care , and gave me the needed medicines.

With these difficult situations, closure, blockades and lack of work, and resources, as we do not afford the basic requirements, especially in terms of food like vegetables and fruit, as I live with my husband's family in one room, my husband and my children, we afford to some of our basic needs through the Qatari grant which is \$100 monthly. I do thank the NECC and their supporters for providing us with excellent services and proper treatment, as I suffered from anemia, and fatigue, and they were providing me with the proper treatment needed according to my condition in terms of iron and vitamins. They give me appropriate health guidance, my health has improved, all the sincerest thanks and



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appreciation for NECC and their generous partners for their support to Palestinians mothers and children.



Story 5

Mrs. Sheerine Faisal Muhammad Hamid _ aged 22years, a mother of two children follows at NECC Al Daraj clinic, as she is pregnant, she visited the clinic frequently to follow up at antenatal care. The woman visited the clinic every month to receive health services, and during her visit, the health provider obtains blood pressure, weight, and pulse, monitors fetal heart, and laboratory tests were done for her monthly (urine and blood tests).

During her pregnancy, the woman was suffering from anemia HGB 10gm/dl, and during the follow-up, she was given iron and vitamins according to the national maternal protocol, and she was given health education and instructions.

The health education was provided to her about nutrition during pregnancy, personal hygiene, danger signs, and gestational diabetes, also the Ultrasound image is made during pregnancy, and in case she suffers from any other diseases, she attends the clinic to receive the needed treatment. During the follow-up visits and compliance with the treatment, and committed to the health instructions, the blood level of Sheerine improved and became 10.8 gm/dl.

After that, the woman gave birth to her baby, NECC health provider contacted her and provided health counseling about nutrition, breastfeeding, personal hygiene, and danger signs after



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delivery, then her husband attended to the clinic and received postpartum treatment (antibiotic - iron - vitamins - pain reliever).

The woman came after a month of delivery to the clinic in order to register her baby and follow him up in the well-baby program.

The mother was pleased with the proper, and outstanding health services provided to her and for her baby, she thanked NECC for the follow-up and caring for her during pregnancy and after childbirth, and to provide her with needed medicines during pregnancy and after childbirth, such as iron, vitamins, calcium, antibiotics, and other medicines.

The mother was very grateful to NECC and its supporters who help people in Gaza and alleviate their suffering.



Success story 6 from psychosocial support program.

The child Yousif 7years old, lives in Shijaia area, with family consisting of 9 members, his father is unemployed and his mother is housewife, the mother attended to NECC clinic seeking psychosocial consultations from psychosocial counselor because the status of her son Yousif, as her son suffers from stammer in his speech, low confidence, and self-esteem, so he exposed to bullying from others because of that, the child is always isolated, and unable to defend on his self, there are environmental factors that affect the child personality, when the mother attended the psychosocial place with her child the child refused to response, and the psychosocial counselor filled with him the SDQ assessment questionnaire, and the result was there are problems in social relations, and behavioral problems, and also emotional problems, the NECC psychosocial counselor provided psychosocial guidance for the mother on how to deal with the child, and to refer the child to speech therapist as a part of solving the problem, the psychosocial counselor provided psychosocial support sessions, and also integrated the child with the group of 5 children in the same age, and also involved the mother with treatment plan, and after 12 sessions of psychosocial support, guidance and counseling, the psychosocial counseling counselor filled post assessment questionnaire with the child, which revealed improvement in the child status, also direct observation by the mother to child behaviors revealed improvement in child psychosocial



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status, the mother thanked NECC team for these distinguished services they provided to support, and protect, vulnerable children in Gaza, and maintain their wellbeing.

Short success stories from Health

- Ibrahim, 9 months old, male from Rafah area, his siblings (3) were also served by NECC well-baby clinic. In July 2020, the doctor at the well-baby clinic noticed that the child is not responding well to sounds around him. The child has been referred to specialized centre to undergo hearing testing. Unfortunately, the child has been diagnosed as suffering from moderate hearing impairment. Besides, being supported at NECC clinic, he and his mom are enrolled in early intervention programme (SKYHI Program) which includes educating the mother how to use sign language and how to interact with her child.
- Nema a girl from Shajaia, born in September 2017, lives in a poor vulnerable extended family which contains 12 members. Her mom Ibtisam, was following during the antenatal care at NECC clinic and she has been advised to follow at the well-baby program after her delivery. The mother does all the follow up visits for all her children at the NECC clinic. When Nema's mother visited NECC in March 2020, she was anaemic, her Hg level was 8 gm. Lab investigations were done, nutritional counselling was provided, health awareness sessions and materials were provided and medications were given to her. Nema has visited the clinic in 5 times, and received appropriate care. Her haemoglobin level returned back to normal and she received three doses of prophylactic medications. After her recovery, she conducts her regular follow at NECC well-baby services.

Sarah, 38-year-old, mother of 7 children, 4 males and 3 females from Darraj area. Darraj clinic is the only site at which she receives health care for the entire of the family. The mother receives preconception care, antenatal care, postnatal care, well-baby services as well as health services when her children get sick such as influenzas, fever and diarrhoea. The mother reported that she knows what to feed her children through the health education sessions provided by NECC. She becomes more assured about the health status of her children at the regular well-baby visits. She said that the early childhood development services are also very helpful for her children development, especially the ECD corner. She said always the staff at NECC treats her nicely, the medications and lab services are always available and the team at the clinic are highly dedicated and motivated to support.



Success stories from TVET program.

Story 1: Rawan Al-Sakka

My name is Rawan Al-Sakka, I have a bachelor certificate in Media from Al-Azhar University in 2010 and a vocational diploma in secretary and office management from NECC.



My experience in studying secretary at NECC was a decisive factor for me to study another diploma in the new department of multimedia and graphics design as this new diploma is unique and new where new techniques and methodologies are utilized and the practical side is more focused on. This department indeed is going consistent with the new technologies especially online work and freelancing where I accepted new skills in this field.

I learned a lot about Adobe software and how to apply, photographing and video and using cameras, writing scenarios, and video processing using Premiere software.

In addition, I learned about logo design, publications design, printing, design packages, converting printed items to digital items, infographics, motion graphics and freelancing online work.

During the course, I was asked to take online free course in motion graphics as an activity through IDRAK website.

After the course I published my work on LinkedIn outlet <https://www.linkedin.com/in/rawan-al-saqqa>, and after that, I received a call from a client from Arab Golf asking about my experience and certificates in graphics and he connected me with his colleague. She asked me to produce 2 motion graphics (one in August 2020 and one in October), I delivered the work on time and after that I was asked to do video montage that is training kit for King Khalid University in Saudi Arabia.



Now, I am well-known for this Saudi company and I have cooperation with them and gain very satisfying income through my work.

I thank NECC and its partners for introducing this new department which is very nice and giving the opportunity for income generating and self-confidence for girls in the Gaza community.



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Story 2: Dina Zain El-Deen, graduate of the Secretary and Office Management Department

Every success starts with exhaust! I am Dina Zain El-Deen, 26 years old graduate from the Secretary and Office Management Department annexed to NECC/DSPR.

After I was graduated from Al-Aqsa University and ranked the first of my class with a bachelor degree in accounting however unfortunately, I was not hired at the university as it was used to because of the inability of the university to offer this job opportunity due to financial crisis.

Then I decided to search for short-term employment contracts for a whole year period. After that I was not succeeded to even get such temporary job opportunities due to the harsh economic situations in Gaza.

Subsequently, I decided to join the NECC secretary department in the scholastic year 2019-2020 after I passed the enrolment exam and the interview. I exerted my utmost efforts in the study and so, I hopefully graduated in September 2020 with excellent grade and ranked the first on my class.

I consider this studying opportunity at NECC secretary department one of the most beautiful chances I have ever since it acquired me skills and experiences in the computer field especially dealing with programs and software of typing and formatting documents which assisted me in getting a job opportunity in the field of typing and formatting university researches relying on online marketing outlets.

I became very professional and the big research just takes couple of days to be finalized. I remember that when I was typing my graduation research it took a month! And I paid money to get it formatted. Now I consider myself professional in such a field.

Additionally, I accepted leadership and life-skills during the training, including topics such as effective communication and dealing with people, customer service, problem solving and critical thinking and so on.

NECC provided me with an on-job training opportunity at Ma'an Development Center through a cash-for-work program. I gained special skills and experience in accounting topics, documents archiving for both papers and electronic copies and I practiced what I learned in reality.

This opportunity was offered by Ma'an center solely for NECC graduates after coordination between the two organizations through which, Ma'an requested from NECC to nominate 3-4 graduates and then Ma'an center interviewed us and selected me and my colleague to take this job opportunity.

I refer this success to NECC management and secretary department supervisor and tutors who taught me and all the success I achieved so far is from god and as a result of my passion, dedication and efforts.



Dina is working at Ma'an Development Center



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Story 3: Mohammed Soliman Abu-Rizik, 23 years describes the impact of his enrolment at the General Electricity and Motor Rewinding and solar energy program at El-Qarara VTC.

I am a graduate of El-Qarara vocational training center of general electricity and solar energy which is belonging to NECC in the southern area of the Gaza Strip (Qarara village).

I am 23 years old; I have succeeded in the high school certificate (Tawjihi) with a total grade of 60% and I graduated from El-Qarara center with 94% total average grade.

I live with my family in Khanyounis city, the family is consisting of 7 members headed by my father. My father was previously used to work on daily-wage basis but he is unemployed in the meantime, the family is receiving subsidy from the ministry of social development. I and my little brother are the solely breadwinners of the family.

I enrolled the vocational center on November 1st, 2017 and graduated after two years in October 31st, 2019 with excellent grade.

During my study at the center, I learned new knowledge and gained new competencies in the field of general electricity, automatic control applications, electric instalments, motors and transformer rewinding, solar energy applications especially solar panels and invertors and batteries among other useful things.

I already learned in the first year how to do the house instalments, introduction to solar energy applications among other topics. As well, during my enrolment, I get to know new friends whom I made good relationships with them, shared together the training in electric exercises and shared knowledge with each other.

After I finish my studying at the VTC, I received a tool box from NECC including the essential tools and equipment needed to launch my work in the electrical field.

The tools I received from NECC enabled me to work in house instalments and motors. During the last period, I got a short-term employment chance offered by UNRWA but it was ended according to Corona pandemic procedures.

My deep thanks go to my trainers and tutors who provide me with all the knowledge and practice that I need. Thanks a lot for each of them.

I am very happy with my career and I advise every person of my friends who have had no job opportunity to join vocational training diploma as to be able to find job and gain income and build a better future.

Story 4: Nader Al-Mamlouk from Metal Works and Welding department

The local market is suffering from a decrease in the purchase power in Gaza by almost 30%, resulting in a decrease in the volume of commercial activities in the markets.



Mohammed Abu-Rizik is working in the electrical workshop.



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Unemployment and poverty rates have increased by more than 10% in last two years in Gaza Strip because of the addition of new categories of poor people to unemployed labour force, such as employees and workers of closed factories and companies in addition to that there are more than 250,000 unemployed graduates from local universities.

This story casts lights on a graduate of NECC vocational center of Shijaia who has benefited from DCA/NCA project that gave him the opportunity to acquire skills and competencies in the trade/craft that he ever likes and then was given a professionalizing opportunity to get inspired and started in the self-employment steam.

Since he was a child, he has always enjoyed vocational work and has always dismantled and installed his games. In his adolescence time, he used to work in a blacksmithing workshop in the neighborhood of Shijaia, the biggest district in Gaza city.

Nader Al-Mamlouk, 24 years graduate, studied at the NECC department of Metal Works and Welding starting from 2014 and graduated in late 2016. He was very active, diligent and a very dynamic student. He worked during his studying and moved to more than one place. He was always feeling that he is restricted. "I need someone to help me breaking the chains ...", he says.

The project of "Support Access to Employment for TVET Graduates in Gaza Strip 2017 – 2020" came to create new job opportunities by supporting some graduates with 6-month on-job training placements and small business start-ups.

Nader Al-Mamlouk, a young man in his early twenties, a member in a 10-member family living in Al-Sha'af area (part of Shijaia district) east Gaza city. He was nominated to enter the project competition on small businesses. He received several training sessions on how to manage small projects technically, financially and managerially. Through the project, Nader was nominated for professionalizing six months on-job training placement.

After completing the training, Nader developed a business model for a small project named "Al-Mamlouk metal-works workshop". The project supervisors studied the model among other models provided by other applicants, selection interviews were conducted to select laureate candidates among them.



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Nader in his metal-works workshop



House gate from Nader's works

The business model provided by Nader won in the selection jury in mid-2019 and his business won to receive in-kind grant from NECC immediately. "Finally, the restrictions were broken and now I am free", Nader says.

Nader started up his metal-works workshop. He succeeded in spreading in the career market because of his competitive prices and high quality of products in addition to the project place that is located inside a very populated area in Gaza (Shijaia).

His popularity increased because of his workmanship. currently, he is able to compete those employers whom he was working for. They confirmed that he is professional and dedicated.

Now, Nader has appointed one basic worker and two assisting workers to work intermittently on daily basis with him. Nader's social and psychological condition has improved and he built a social network.

Nader is responsible for his family as a basic breadwinner because his father got retired from his work at government. He dreams to expand his project and to have more workers and open new branches in the different governorates of Gaza.

"Really, I am very pleasant to work in such a career and I hope in the future to build my life through work and to assist my brothers and family as a whole in securing their basic needs and live with my beloved persons in independence and dignity. Thanks to NECC and the partners for everything they did for me and my colleagues", Nader said.



5. Photo Gallery

Health Photos





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TVET Photos





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Annex 1:

*"I Always Pray with Joy because of your partnerships ...,
being confident of this that those who began a good work
will carry it on to completion"*

(Philippians 1:4-6)

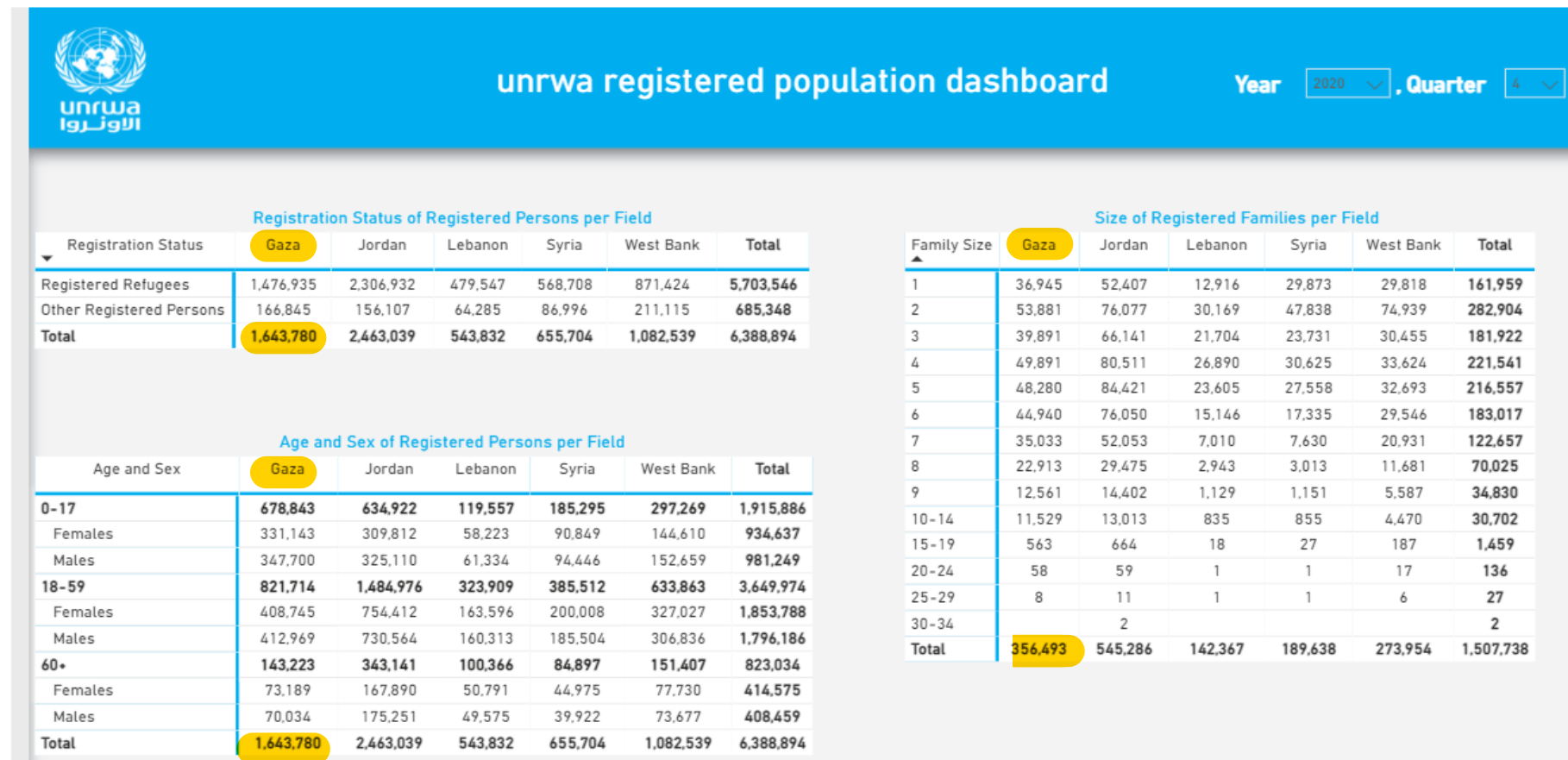
ACKNOWLEDGEMENT TO OUR SUPPORTERS:

NECCCRW's programmes have been sustained over the last six decades with the generous assistance received not only from its major partners, but also from EU and many other individuals and organizations.

Many thanks to all of them and to any supporter whom we might have missed to declare for their solidarity and support to our people which was made through MECC/DSPR in general and Gaza Area Programme in particular, who helped us in Gaza Strip to find our own limited solutions and to keep the important witness which continues to generate hope among the needy in this part of the world. We shall continue to appreciate the support of our partners who are requested to keep the active witness through their solidarity with our ecumenical programme for the service of all His people.

1. **ACT for Peace**
2. **ACT International (Action by Churches Together)**
3. **Agency of French Development (AFD)**
4. **Amos Trust**
5. **Bread for the World**
6. **CARITAS in France, Switzerland, Luxemburg & Jerusalem**
7. **Catholic Near East Welfare Association (CNEWA)**
8. **Catholic Relief Services - CRS**
9. **Campaign for the Children of Palestine (CCP Japan)**
10. **CCFD**
11. **CFOS (Canada)**
12. **Christian Aid, UK**
13. **Church in Wales, UK**
14. **Church of Sweden**
15. **Church of Scotland**
16. **Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ)**
17. **Diakonie Katastrophenhilfe**
18. **Diakonisches Werk, Germany**
19. **Diocese of Aalborg, Denmark**
20. **DanChurchAid & Norwegian Church Aid**
21. **Dutch donor**
22. **Embrace the Middle East (UK)**
23. **Evangelical Lutheran Church in America**
24. **Evangelischer Entwicklungsdienst e.V (EED), Germany**
25. **FinChurchAid**
26. **German Representative Office**
27. **Interchurch Organization for Development Cooperation (ICCO), Holland**
28. **International Medical Corps – Palestine (IMC)**
29. **KAIROS, Canada**
30. **Lutheran World Relief, USA**
31. **Mennonite Central Committee**
32. **Middle East Council of Churches**
33. **National Council of Churches, Australia & AusAid**
34. **NECEF, Canada**
35. **Pontifical Mission for Palestine**
36. **Save the Children**
37. **Secure Catholique/Caritas France (SCCF)**
38. **The Church of Scotland**
39. **The Mission Covenant Church of Sweden**
40. **Terre Des Homme**
41. **UNICEF**
42. **United Church of Canada**
43. **United Palestinien Appeal**
44. **World Council of Churches**

UNRWA REGISTERED POPULATION DASHBOARD

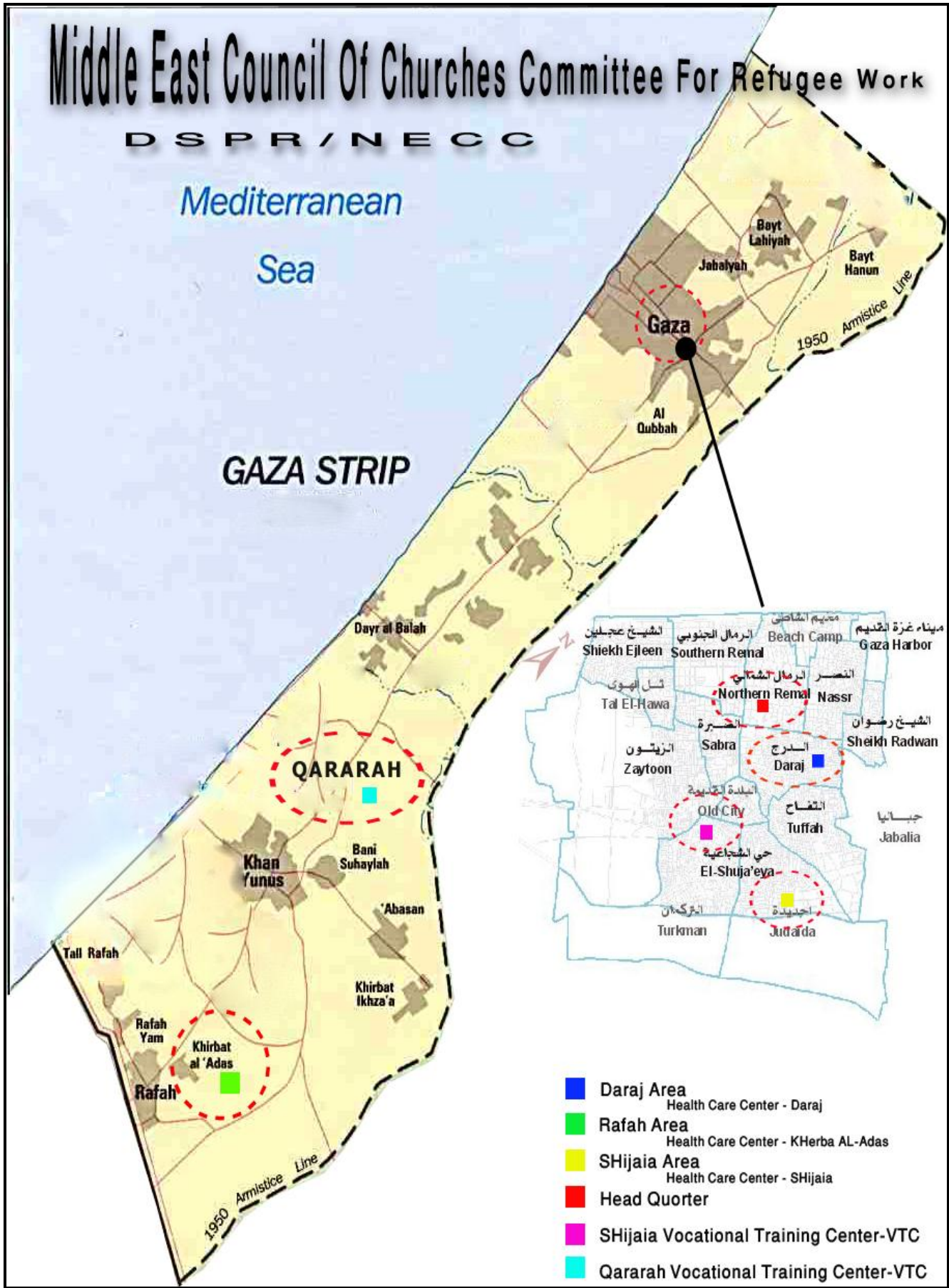


Middle East Council Of Churches Committee For Refugee Work

DSPR/NECC

Mediterranean
Sea

GAZA STRIP



- Daraj Area
Health Care Center - Daraj
- Rafah Area
Health Care Center - KHerba AL-Adas
- SHijaia Area
Health Care Center - SHijaia
- Head Quarter
- SHijaia Vocational Training Center-VTC
- Qararah Vocational Training Center-VTC