

UNICEF HUMANITARIAN ACTION

OCCUPIED PALESTINIAN

TERRITORY

DONOR UPDATE 8 DECEMBER 2005

- **To date, some US\$ 15.9 million for 2005 has been received. An additional US\$ 2.5 million is urgently needed for health services, educational and psychosocial support.**

1. ISSUES FOR CHILDREN

More than three months have passed since the Israeli withdrawal from the Gaza Strip and four northern West Bank settlements. Most recently, political agreements have been made that will positively affect the daily lives of Palestinians, but the effect of these has yet to materialize in Gaza and the West Bank. The average Palestinian child is still subject to the adverse effects of closures, disruption of school, and deteriorating living standards due to a continuous economic decline. This seriously affects both the economic and social fabric of Palestinian society – including the right to education, play, health and nutrition. Students in cities such as Jenin are particularly vulnerable to losing classroom time due to curfews.

The ongoing violence, as well as the impact of distressing events from the past five years, means children continue to be vulnerable. The chronic anxiety undermines self-esteem and feelings of loss of control due to the erosion of households' coping mechanisms adversely affect family relationships. The violence in homes and schools is an issue of increasing concern and closely linked with the surrounding pressures stemming from the external environment.

Overall, the situation in West Bank and Gaza remains fragile. In Gaza, live fire from Israeli positions and air attacks put children at significant risk. Sporadic sonic booms have had an impact on children by keeping them awake at night and making them fearful. With half of the 1.3 million residents of Gaza under the age of 18 years and three quarters of all households having at least one child in school, daily events there affect children in an immediate and significant manner.

A few key statistics highlight the issues affecting children:

- Some 2,800 children die every year from mainly preventable diseases; in Gaza, this number has increased by some 15% due to growing neonatal mortality.
- Malnutrition remains high at 10%, and the risk of malnutrition for very young children is increasing.
- Fewer children start school each year, and the quality of education is slipping.
- Since January 2005, a total of 52 children have been killed due to the conflict and some 300 children are in detention.
- 1/3 of children have experienced violence and 1/5 of children have experienced violence primarily in their home environment.
- 1/3 of families indicate that their child suffers from at least one symptom of psychosocial distress.
- 1/4 of families report that their children have behavioral problems such as difficulty concentrating in school, aggressive behavior or withdrawal.

HEALTH AND NUTRITION

Chronic malnutrition (stunting) in children under five has increased to almost 10%, with children in the Gaza strip most affected. Thus 50,000 children are malnourished. The burden of malnutrition is mostly carried by children 12-23 months old – more than 15% of them are malnourished at this critical period, making them vulnerable after the end of the infant period.

New data from the Demographic and Health Survey (DHS) shows that about eight percent of children have low birth weight (below 2,500 g). Disaggregated data shows that the stagnation of the infant mortality rate is due mainly to slow progress or worsening of neonatal mortality rates. This is most notable in Gaza, where over the last four years neonatal mortality has increased by 25% (in Gaza). The figures have equally worsened in the rural and urban areas but decreased in the camps.

Basic equipment for maternal and newborn health is lacking, and families and communities are insufficiently equipped with the necessary knowledge to prevent and manage the most common childhood diseases. Current practices in clinics and hospitals do not make sufficient use of cost-effective interventions for mothers and newborns in order to increase their chances of survival and healthy growth. Recent hospital surveys show that due to disruptions in the safe water and sanitation systems, intra-hospital infections are threatening newborns.

An integrated strategy to manage common childhood illnesses, one which includes psychosocial care for young children, is key to ensuring the health and wellbeing of Palestinian children.

Emergency and development interventions, such as the emergency measles immunization campaign conducted in 2004, together with the improvement of management and logistics of vaccines, has improved the immune protection of Palestinian children against measles, from less than two-thirds before the campaign, to almost 98% in 2005. However, to ensure the control of main vaccine-preventable diseases, there is still a need for mop-up immunization against polio, as well as to introduce new vaccines, i.e. against Haemophilus Influenzae B which causes most of the severe morbidity and mortality among very young children.

EDUCATION

The major issue of concern is to ensure full access to education services and to guarantee that high-quality learning is provided in a child-friendly environment. Access to education continues to be challenged by restrictions of movement, in particular for the teachers. The quality of education is showing signs of decline and in the worst affected areas, the learning achievements for students are deteriorating. Dropping out of students is now an issue that needs to be looked at. Few children have the opportunity to experience a child-friendly learning environment with safe spaces and opportunities for sports and recreation. In addition, children lack educational materials and schools lack good teaching aids. While the child-friendly school concept is being promoted throughout oPt, the concept is challenged in particular in confrontational areas. In these areas it is necessary to adapt the child-friendly school concept to learners' needs, and to link it with psychosocial and child protection services while ensuring outreach to local communities.

ADOLESCENTS

Adolescents have limited opportunities to play and exercise in areas safe for them. Nearly half of the children in West Bank and Gaza spend very limited time on extra-curricular activities like sports or playing outdoors. Overall, young Palestinians spent their spare time at home and few girls enjoy opportunities to interact with peers outside their homes. Violence in the lives of adolescents is on the increase – both at home and in school. There is now, more than ever, a need to create safe and friendly spaces to foster opportunities for play and exercise.

CHILD PROTECTION AND PSYCHOSOCIAL WELLBEING

Although general levels of violence have decreased in 2005, the situation in the West Bank and Gaza remained tense, even after the disengagement period. After the Israeli withdrawal from Gaza and the withdrawal of four settlements from the West Bank, children in Gaza are not exposed to military incursions and house demolitions as they were earlier. More than ever, children need sustained psychosocial support in order to return to normalcy. The withdrawal will inevitably give rise to new expectations for youth, which, if they are not fulfilled, might in turn increase their frustration. In a changing environment, they need new outlets and to be fully involved in the improvement of the lives of their communities. The threat of unexploded ordinance (UXO) has become an issue of greater concern within the last few months. This is due to the fact that children have access to areas they previously could not reach.

2. ACTION FOR CHILDREN

UNICEF's humanitarian action is based on our core commitments for children and focuses on child survival, nutrition, ensuring that children are able to continue learning despite schooling being disrupted, and to catch up once schooling resumes. Children receive psychosocial support after the occurrence of violent events and receive follow-up support for themselves and their caregivers. Safe spaces are created for children and adolescents to meet with their peers and to enjoy recreational and sports activities.

In the West Bank, UNICEF focuses on five main areas: Jenin, Tulkarem, Qalqiliya, Nablus and Hebron. In the Gaza Strip the focus is on three flashpoints: Rafah, Khan Younis and Northern Gaza. In addition, three other areas (Al Mawasi, Siafa and Al Ma'Ani) are of key concern because of their isolation. The UNICEF zonal offices in Jenin, Tulkarem, Nablus, Hebron, Rafah and Gaza ensure assessment, swift response and monitoring of humanitarian assistance. UNICEF has a total of 11 international and 59 national staff on the ground in OPT.

HEALTH AND NUTRITION

With a view towards ensuring that no child is left behind, UNICEF is providing routine and emergency immunization for the nine major vaccine-preventable diseases. Through the Ministry of Health, UNRWA and NGOs, routine immunization services have been extended to half a million children under the age of 5 as well as to 100,000 girls in schools. This has brought the coverage rates beyond 90 per cent. Due to an outbreak of mumps and rubella, an immunization campaign for measles, mumps and rubella was commenced in May reaching more than 653,000 children between 6-18 years in all the 10 districts of the West Bank. The remaining 600,000 children in Gaza will receive their injection in November. Furthermore, 80,000 children were immunized against Polio in two rounds in April and May in order that oPt can remain Polio free. Given that the region has seen several outbreaks of Polio, this intervention is crucial. UNICEF has secured the full procurement of vaccines and vaccine-related supplies for the year 2006. Also, all the necessary micronutrient supplements for 6 months of 2006 have been ordered

In the lead-up to the Gaza disengagement, medical care was ensured for some 10,000 people in isolated enclaves. During almost two months of closures, eight fully equipped medical teams were supported by UNICEF, providing stand-by, round-the-clock medical care. About 60 volunteers were trained in first aid procedures and facilitation of community awareness sessions in hygiene promotion and breastfeeding. Safe water supplies, generators and other non-food items were provided. In addition, Emergency Health Kits for 210,000 people for one month, midwifery sets and obstetric care kits, and 1,250 Safe Water Kits for 6,000 families were distributed.

With a view towards helping health care workers recognize and treat signs of psychosocial distress in children, a training of trainers was undertaken for 30 health professionals in Gaza and the West Bank. This means that for the first time, when a child enters a clinic, he or she will not only be examined for physical health problems but also for signs of distress. More than 400 health workers were trained on early detection of health problems and improved management of health facilities.

Equipment for upgrading 150 MCH clinics for implementing better quality child health and prenatal care has been ordered. 50 clinics will also benefit from equipments for health education and awareness. Also, full equipment for 4 new clinics in Gaza and 2 new clinics in West Bank has been ordered. Procurement for upgrading the cold chain is in preparation.

EDUCATION

As a result of the Gaza disengagement, schools in former confrontational areas such as Al-Mawasi, where schools have been separated by years of enclosure, are for the first time being provided with a comprehensive education package that seeks to deliver services to 10 schools with approximately 5,000 students and 600 teachers. The services include teacher training on curriculum, evaluation, and remedial education, as well as sports equipment, computers, school-in-a-box, science lab equipment, and library furniture and books.

Remedial education activities are crucial for ensuring that children are able to continue the learning process when they are not able to reach school and, at the same time, will be able to catch up once they are able to return to school. One element of these activities is to provide children at risk of not reaching school with a colourful folder that supplements the textbooks in Math, Arabic, English and Science. This year alone, 120,000 children have received these Remedial Education Folders and a total of 4,800 CD-ROM copies have been distributed to supplement the books. Some 200 schools in West Bank and Gaza Strip are involved in this project.

UNICEF continues to focus on improving the quality of education and securing a child-friendly learning environment. To improve the quality of education, there has been a renewed focus on teacher training. Teachers are key to making school a rich place for learning. In the training, teachers examine their own ways of teaching and revisit how children learn, and see how else they can improve their performance. A national study is currently being conducted among 7,000 teachers in order to identify teacher training needs, which will assist in the future design of training modules and will assist in the developing of a national teacher training strategy. The assessment focuses on teachers of Arabic and Math for grades 1-4 and 5-7. It covers the areas of teaching methodologies, use of teaching aids and technology, planning, structure of content and curriculum implementation, assessment and evaluation and classroom management.

Building on what teachers are already doing well, the training workshops will help them to learn other ways of making schools interesting and child-friendly. UNICEF, through the teacher training project, gives high priority to promoting child-centered, gender-sensitive teaching/learning processes in the classroom, which will lead to better learning outcomes for both girls and boys. Above all, this means supporting teachers - through better training, periodic upgrading, in-class support and supervision - to manage a classroom learning environment in which children are encouraged to solve problems, think critically, gain self confidence, ask questions, learn together and achieve. Currently 520 teachers in 30 pilot schools are undergoing training on these new methodologies.

ADOLESCENTS

To provide opportunities for children and adolescents to spend free time in play, recreation and social activities, UNICEF has helped local municipalities to establish 26 safe play areas in Gaza, and nine in the West Bank, 20 of which are provided with suitable outdoor play equipment. Children and adolescents find outlets for their stress and frustration in these areas through regular structured group activities offered by trained animators and volunteers from the local community. During October and November, around 600 such activities have been conducted with the participation of at least 200 children and adolescents in each activity. Preparation for establishing 13 new safe play areas in towns and villages affected by the barrier continues in terms of ground leveling, procurement of outdoor play equipment and training of animators on children's rights.

To give adolescents in oPt opportunities to live and develop under normalcy and participate in the well-being of their communities, 256 elected members of 8 child municipal councils in the West Bank and Gaza, who have been trained to assess children and adolescent needs in their communities, are now implementing small projects in their cities that reach out to around 20,000 adolescents to try to get them involved in cultural, sports or awareness-raising activities on issues affecting adolescents' lives and well-being.

CHILD PROTECTION AND PSYCHOSOCIAL WELL-BEING

Twelve psychosocial emergency teams are currently operating: seven in the West Bank and five in Gaza, covering 12 out of 15 districts. Three of these (Bethlehem, Ramallah and Qalqiliya) were established in July 2005. Since January, 49,156 children have participated in activities aimed at reinforcing their capacity to protect themselves and to cope with violence. Out of these, 27,328 children have been reached in Gaza between August and November only, reflecting the intensification of activities during and after the disengagement, as well as the expansion of activities to adolescents. Home and hospital visits have been carried out to child victims of violence and their families. Children who have been identified during the activities as in need of further support have been referred to specialized agencies. A festival involving all participating children is organized as a way to conclude the process; a total of eight festivals have been organized in Gaza so far. Each team has been provided with five recreational kits, containing both indoor and outdoor materials to carry out activities with children. In parallel, since January, 24,605 caregivers have been equipped with skills on how to support their children in distress and how to promote a harmonious family environment, as well as on how to deal with their own stress. 15 shows have taken place in the communities in order to reinforce the message of the sessions and encourage discussion between children and their parents.

In the run-up to the Israeli disengagement from Gaza in late summer, all teams were reinforced with volunteers (graduate students). They have been trained and will continue to work with the teams in the future. In the West Bank, they have been mostly selected from the villages under potential closures and curfews, ensuring presence in these locations at all times. In light of the changing situation on the ground, the teams have gradually introduced the issues of domestic violence and abuse in their sessions with both children and parents. Psychosocial teams have proven an appropriate and effective entry point to tackle violence in general. Also, adolescents are being trained for peer support and integrated as a back up to the teams.

In cooperation with the National Mine Action Committee (NMAC), the Palestinian Red Crescent Society, the Palestinian Broadcasting Corporation and EUCOPPS, and with support from the Government of Canada, UNICEF has launched a mine risk education campaign. Special attention is given to raising the awareness of children and their communities in high risk areas. Educational materials have been distributed in communities and in schools; TV programmes are shown nationally and regionally in the West Bank and Gaza. Children internalize the messages through the development of animated films, art competitions, theatre plays with children having leading parts and the development of games and catchy tunes. Since June 2005, approximately 60,000 children have been reached by the messages in Gaza and in the West Bank.

3. 2005 APPEAL REQUIREMENTS AND SUPPORT RECEIVED

As part of the 2005 Consolidated Appeal for oPt, UNICEF requested US\$ 14.2 million to provide humanitarian relief to the affected children and women in oPt. This amount has been increased as a result of programme assessments in Gaza following the disengagement with an additional requirement of US\$ 4.2 million. Total appeal requirement is now US\$ 18.4 million. To date, some **US\$ 15.9 million** has been received as follows:

Table 1: CONTRIBUTIONS TO 2005 APPEAL BY DONOR AS OF 08 DECEMBER 2005	
Donor	Funds Received (US\$)
Canada	4,065,050
Japan	3,185,440
Netherlands	1,800,000
Spain	1,201,920
Sweden	711,250
European Commission Humanitarian Aid Department (ECHO).	602,410
German NatCom	367,077
Italian NatCom	361,446
Spanish NatCom	236,895
Norway	445,104
New Zealand	346,020
UK NatCom	1,030,444
Saudi Committee for Relief of Palestinian People 1,600,000 (**)	1,600,000
Total (*)	15,953,056

(*) Government of Austria provided some US\$ 352,781 for Psychosocial support in late 2004 for activities in 2005, this amount is not included in the funding figures but the funding needs have been adjusted accordingly.

(**) Out of a total pipeline contribution of US\$ 3.6 million People for health and education activities from the Saudi Committee for Relief of Palestinian.

Further details of the emergency programme can be obtained either by visiting the UNICEF OPT website at www.unicef.org/opt or from:

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