

## **UNFPA Response to the Crisis of the Occupied Palestine Territory**

### **Background**

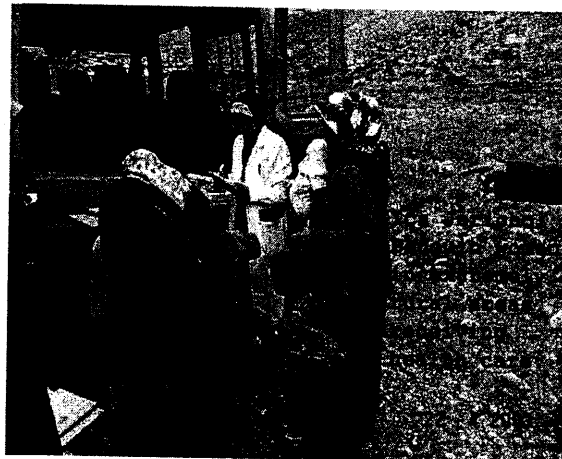
The Occupied Palestinian Territory (OPT) is in reality two geographically and politically isolated areas constituted by the West Bank and Gaza Strip. The Israeli occupation of the Palestinian Territories and consequent Intifada or uprising in September 2000, has caused the population of nearly 3.5 million people to be adversely affected in terms of access to services and overall health status, including psychosocial well-being, especially among girls and young women.

The erection of a separation wall by the Israelis throughout the West Bank and Gaza Strip will further isolate some 71 communities in the West Bank and large portions of an already burdened and overcrowded Gaza Strip. These communities have become entrapped in enclaves between the nine-meter concrete wall and the borders with Israel that require nearly impossible to obtain special permits to cross. There are already 793 checkpoints and other barriers (OCHA, March 2004) in the OPT that hinder access and restrict movement between villages, towns and refugee camps. Thus, implications for access to appropriate and effective mechanisms that will ensure reproductive health care to the Palestinian population are manifold. Births at the checkpoints, maternal mortality and morbidity and a range of other complications are expected as a result of the wall.

One of the most pernicious implications of the

occupation has been a major increase in unemployment and a loss of income that can be allocated to the health care system. In many cases women have also suddenly become heads of households because the men have been detained for long periods of time with no compensation to families. Experience elsewhere in the world indicates that emergency situations such as the one that Palestinians are now going through are highly disruptive of family life and community structure. They also tend to create major differences in the ways in which people see reproductive and sexual health and how they behave. Chronic exposure to highly stressful situations and the unpredictability of schooling, work, family life, displacement, loss of place and status call for new coping skills. The need for emotional support in these settings also takes on a different imperative and new patterns of human sexuality have been observed everywhere where people are confronted with these conditions, including those related to STI transmission.

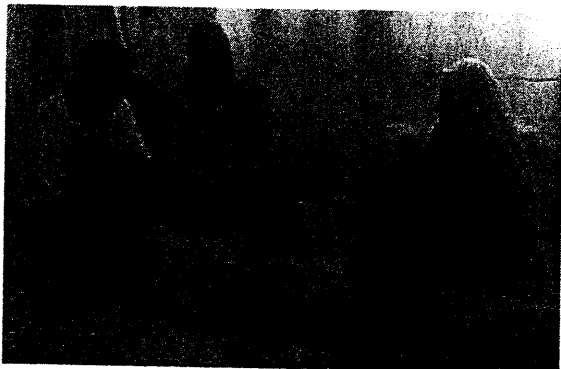
Furthermore, some groups that have been traditionally difficult to reach have become even more excluded from the health development process and their reproductive health has been especially neglected. Bedouin populations are one of those groups and in Jordan Valley this has become especially serious.



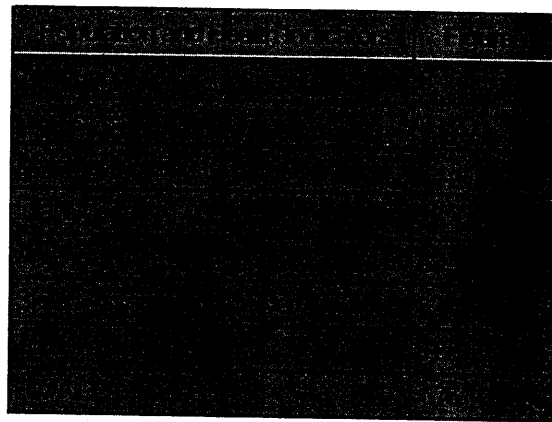
where children and youth from 0-24 years make up 66.7% of the population in OPT and adolescents between 10-19 years constitute a full 23%. Children's and adolescents' lives, behaviour and attitudes have changed dramatically since the onset of the current conflict. This is evident both in regard to the 573 children killed and over 9000 injured since September 2000 as well as in the psychological distress found among adolescents.

The resulting psychosocial situation among adolescents is even worse, with manifestations in emotional problems such as headaches, sleeping disorders, violent acts and loss of appetite and increasing their vulnerability to aggression, rebellion, risk-taking behaviour, helplessness, frustration and withdrawal (Palestinian Central Bureau of Statistics, Canaan Institute, Ministry of Social Affairs). Despite the additional needs of adolescents exacerbated by the current political situation, issues of concern for adolescents continue to be typical on-going unmet needs that are related to the physiological and psychosocial changes happening during adolescence.

#### **UNFPA in the Occupied Palestine Territory**



The UNFPA Country Office in the OPT has been actively working to alleviate the current adverse health crisis resulting from the continued political and social unrest, coupled with economic decline. In addition to its



\* Source of information, Annual Report 2003

planned activities, the OPT is seeking to intervene on a number of critical levels that would reduce the reproductive mortality and morbidity of the population by addressing the reproductive health and rights of the Palestinian society in this time of need.

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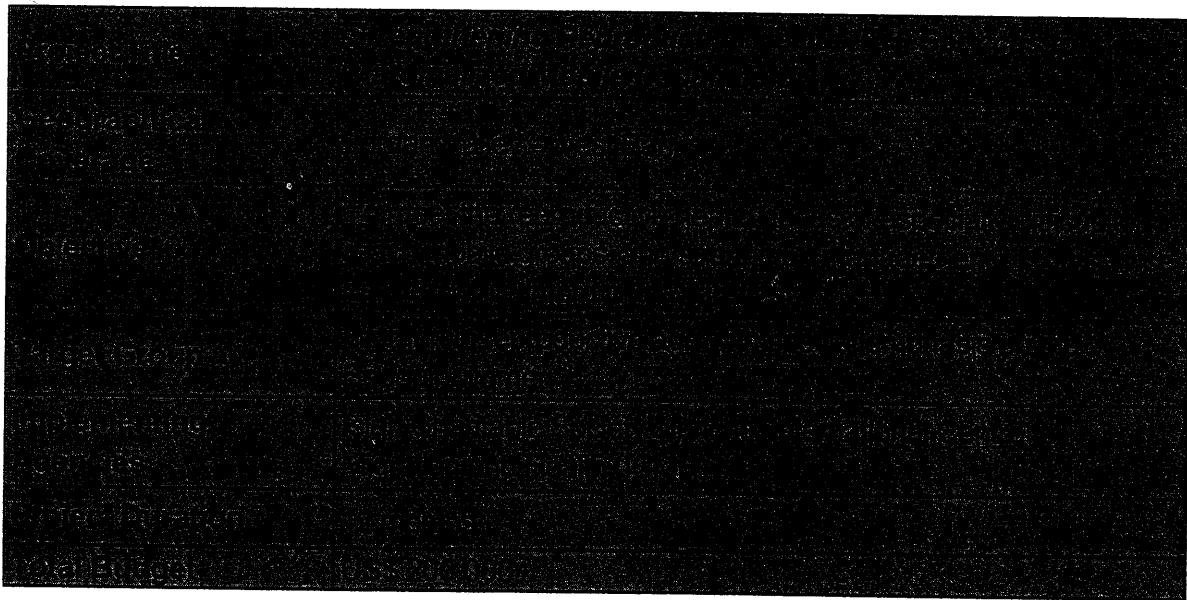
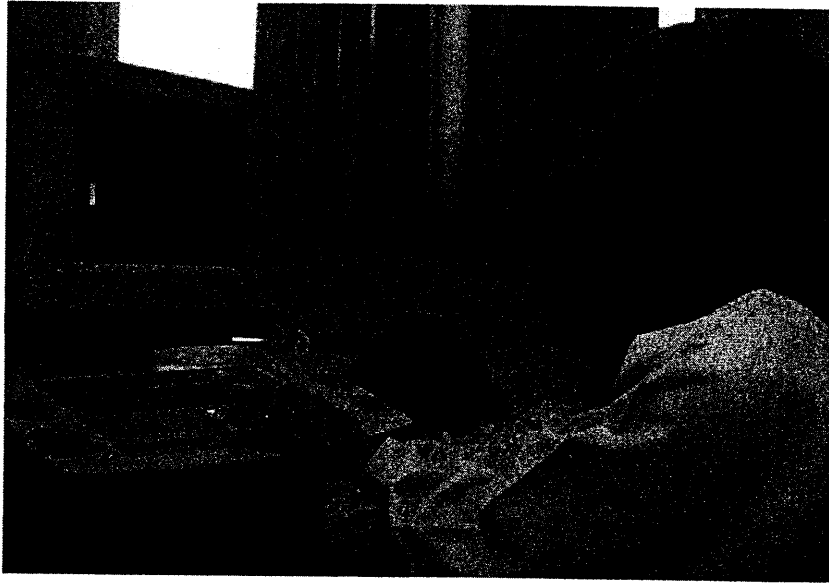
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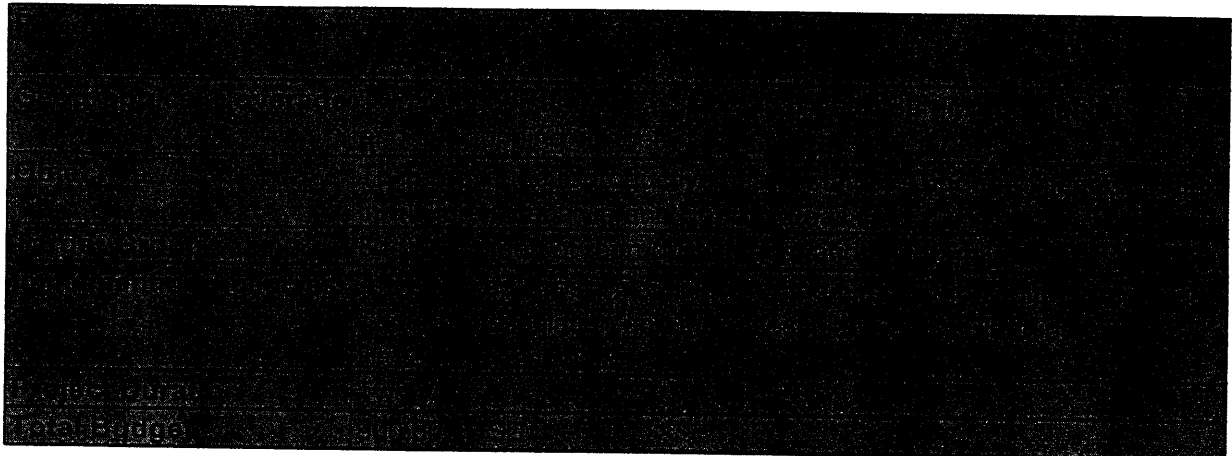
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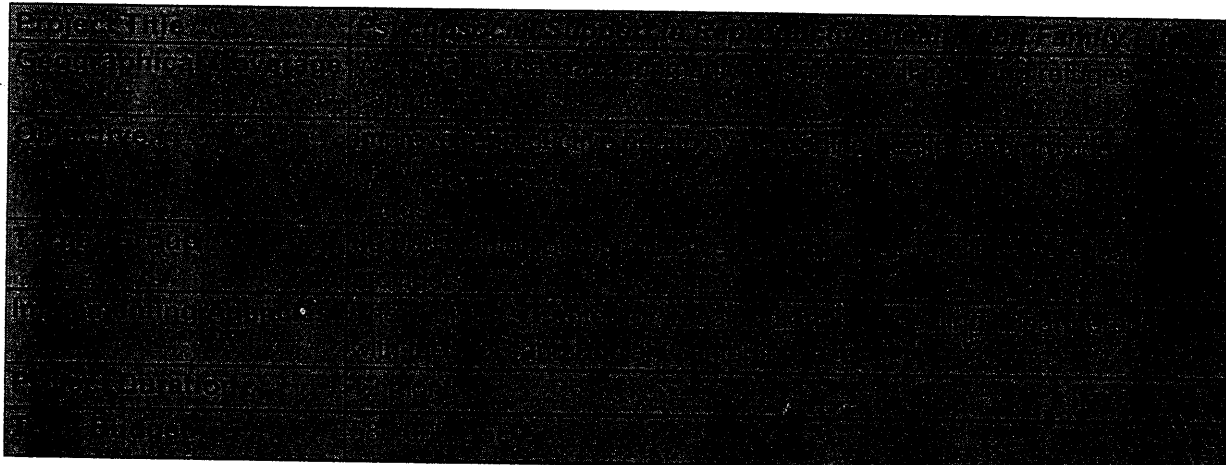
## UNFPA Project Proposals for the Consolidated Appeal Process of 2004



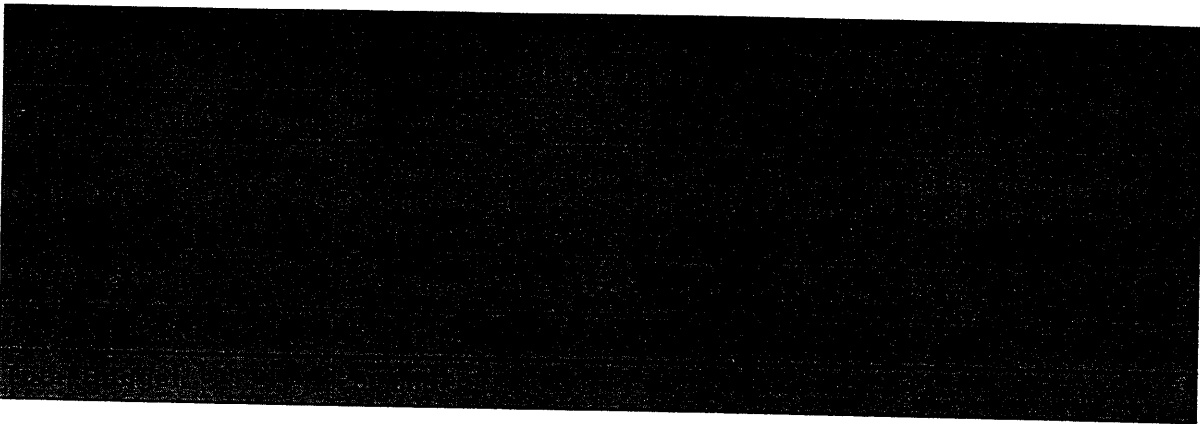
**Project Description:** The project will improve the health status of the Bedouin community by making reproductive health services available and accessible using innovative outreach techniques. These services will include family planning, early detection of most common types of cancers, early detection and treatment of RTIs/ STIs. It will also include upgrading knowledge and skills of health providers on the newly integrated services. The project will also include rehabilitation of service delivery points, furnishing and equipping SDPs and improving reporting. Periodic assessments will be undertaken of needs and factors affecting service delivery.



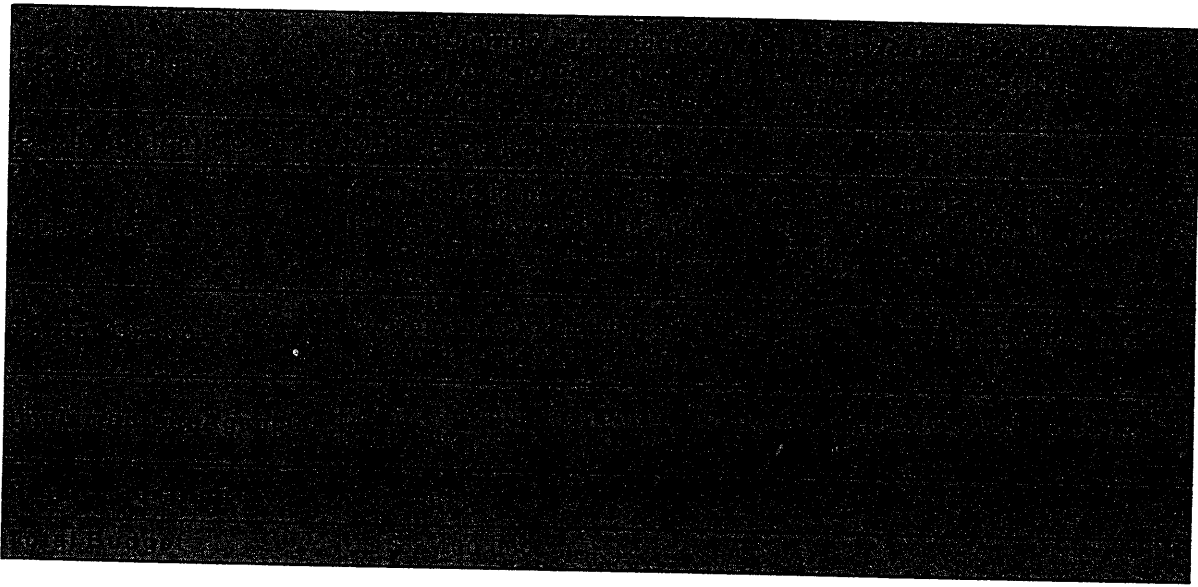
**Project Description:** Programmes that were providing legal, health and social services to Palestinian women have been suspended, often with infrastructure destroyed. This already vulnerable population has become increasingly displaced and otherwise affected by the results of military hostilities. Vulnerability is compounded by soaring unemployment and poverty rates. Thus, their health and well-being are becoming issues for increased concern. In response, three model women's centers, supported by UNFPA in the Jabalia and El Bureij refugee camps in Gaza and Hebron in the West Bank have continued their provision of essential clinical reproductive health services for women in these areas. The centers also provide psycho-social counseling and support to traumatized women and their families; a critical concern under the prevailing political crisis.



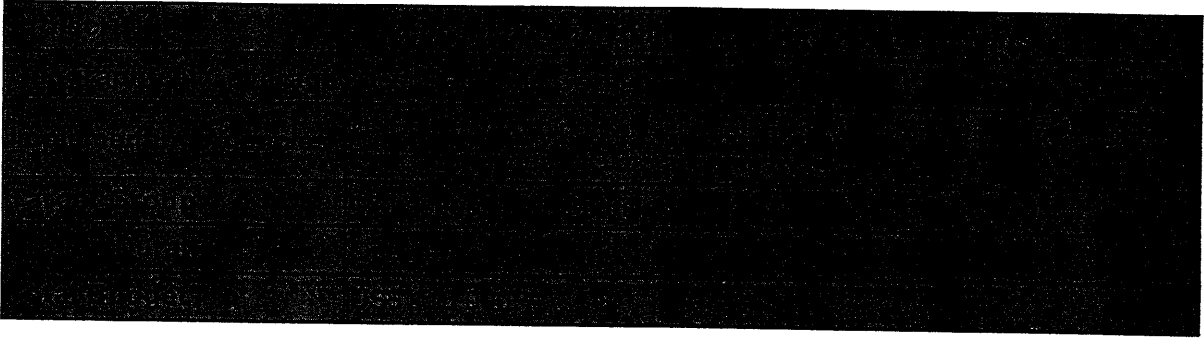
**Project Description:** During the course of 2004 UNFPA and its partners will develop in-service training for physicians, nurses, midwives on new techniques for RH counselling and the integration of other women's concerns such as family/gender-based violence and legal aspects of women's health within the larger RH care system. Special care will be given to ensuring the impact of humanitarian crisis on family life and women's reproductive health is fully understood and made a part of day-to-day management of reproductive health. There will be follow-up supervision and quality assurance, including assessment of skills and hands-application by trainees of new knowledge. Six supervisors (2 in Gaza, 2 in Hebron, 2 in Jenin and Nablus) will serve as permanent support coaches to the trainees. In order to facilitate RH and other counselling some PHC facilities will be up-graded to permit greater privacy and confidentiality.



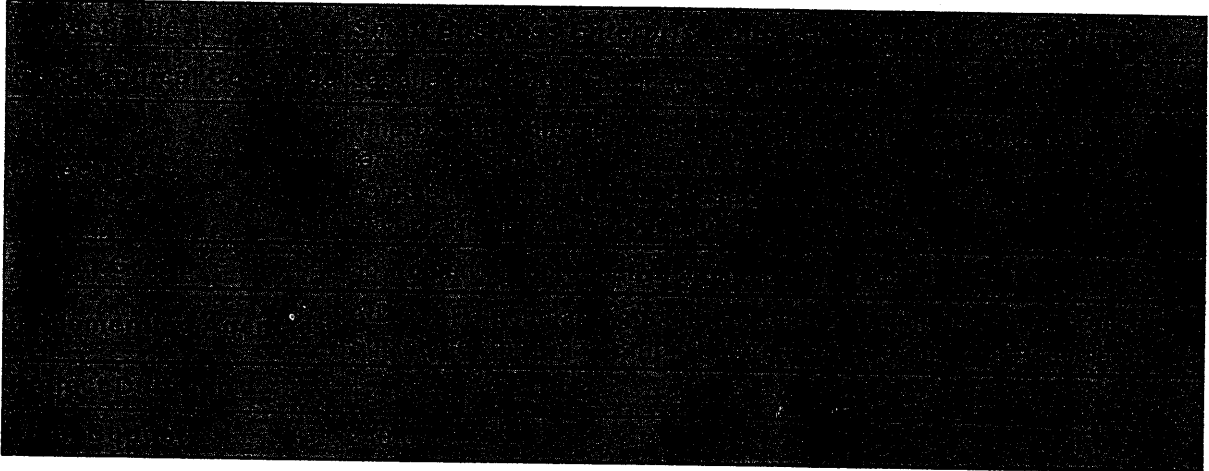
**Project Description:** UNFPA and its partners will make a rapid assessment of the sexually transmitted infections situation, giving special reference to high-risk age-groups and people in high-risk situations. This will be followed by the formulation of PHC guidelines on the diagnosis, management, referral and reporting of STIs and the development of a public education programme adapted to the cultural pre-requisites of the population. Building on this, an emergency training programme will be put in place to train at least 200 PHC staff in diagnosis, management, referral and reporting.



**Project Description:** Over the course of 2004 UNFPA and the Ministry of Health will assess the current commodity situation, identify problems such as forecasting and planning, procurement and warehousing, management and distribution. They will ensure supplies and train staff so that a comprehensive and well managed logistics system can be in place by the end of 2004. Guidelines will be prepared and a reporting system will be set up between all main health facilities, regional centres and central level.



**Project Description:** School counselors will be trained and equipped with skills to detect signs of psychological distress and enhance their abilities to provide the required support to students in distress. This will be achieved through conducting training of trainers workshops in the West Bank and Gaza for 40 schools counselors. With close supervision from experts, the trainers will conduct 4 workshops for other 80 school counselors. MoE will ensure to continue the training courses for other counselors after the project duration. Furthermore, different IEC materials will be developed and printed to support the counselors' activities in the field, and different media channels, especially local television and radio stations, will be used to inform other influential groups e.g. parents and teachers on ways to deal with students in distress.



**Project Description:** UNFPA and its partners will identify poor women eligible for loans/ grants of \$2000 for small business development and training in business management. The grants will be conditional on male members of the household being involved in the business to maintain positive gender dynamics within the family. Women and men will also be eligible for psychosocial support provided by women's centers in El-Bureij and Jabalyia and can access reproductive health services at these centres free of charge to grant/loan recipients and their families if recipients comply with grant regulations (training, payback scheme, counseling).