

occupied Palestinian territory 2018 (part of 2018-2020 HRP)

Appealing Agency	WORLD VISION JERUSALEM WEST BANK GAZA (WV JWG)
Project Title	Improving lifesaving health ,nutrition and psychosocial services of vulnerable mothers and children in area C in West Bank
Project Code	OPT-18/H/116091
Sector/Cluster	Health and Nutrition Cluster
Refugee project	No
Objectives	<p>The overall objective is: “To improve the health of vulnerable mothers and children in Area C in Hebron, Bethlehem and Nablus through community preventive nutrition intervention and Psychosocial support services.”</p> <p>The specific objectives:</p> <ul style="list-style-type: none"> • Mothers’ behaviors on infant and young child feeding and caring practices are improved • Mental health and psychosocial services are provided to venerable mothers and to vulnerable children at schools <p>The project responds to SO2, where vulnerable children, mothers and caregivers including children with special needs in 25 localities in area C will be targeted through an integrated health household and community interventions.</p> <p>Activities will contribute to first cluster objective “Ensure the availability, accessibility, acceptability and equality of essential lifesaving health services to vulnerable communities in Gaza and the West Bank.” The selected interventions will be implemented at two levels; school and community; using a multi-disciplinary health approach. WV community health workers, and MOH service providers will join their efforts for optimal outcomes.</p> <p>At community level, WV community health workers will work with mothers to change behaviors and practices mainly in infant care such as breast feeding practices, complementary feeding, supplement intake and recognition of danger signs, and providing psychosocial support to mothers showing signs of distress. In partnership with MoH, child friendly clinic approach for infant and young child caring and feeding practices will be integrated at the field level.</p> <p>At school level, psychological first aid interventions will be done through training of teachers to provide assistance to affected children. Extracurricular activities will be done at school level to overcome psychological stress of affected children.</p> <p>The project will ensure proper utilization of health and mental health services provided by different partners, mainly the MOH.</p>
Beneficiaries	<p>Total: 10,938 Female: 5,854 Male: 5,084 Children (under 18): 10,075 Adult (18-59): 863 Host communities: 25</p>
Implementing Partners	Palestinian counseling center-civil defense
Project Duration	Jan 2018 - Dec 2018
Current Funds Requested	\$480,869
Location	Projects covering just West Bank
Priority / Category	NOT SPECIFIED
Gender Marker Code	2b - The principal purpose of the project is to advance gender equality
Contact Details	Hana Rabadi, hana_rabadi@wvi.org, +972(0)599252818

Cash transfer programming	Is any part of this project cash transfer programming (including vouchers)?	No
	Conditionality:	
	Restrictions:	
	Estimated percentage of project requirements to be used for cash/vouchers:	0

Needs

Since 1975 WV has been working in area C using community participatory approach. In 2017 WV conducted an assessment for 25 area C communities in Bethlehem, Nablus and Yatta. The following methodologies were employed:

- Quantitative assessment through household survey for a sample of 523 on; Mothers Knowledge, attitudes and practices on issues related to maternal, newborn and child health and nutrition critical issues, and on Mental health for mothers. The 2 studies were conducted in cooperation with consultants from Al Quds University, covering all villages targeted under WV program, where 70% of these villages fall in Area C and will be covered under this project.
- Data base from WV health interventions in the targeted communities in Area C and data collected from WV trained community health workers
- Review data available at MoH on topics including anemia prevalence among mothers and children, supplementation availability and others.
- Review data available at MoE on number of affected students, availability of counselors, students with disabilities.

WV assessment on psychosocial needs for school children . The selected areas are specified as the most in need due to limited interventions from organizations and PA. Number of these villages, mainly in Hebron, are either adjacent to settlements or by bass roads that makes access to health services difficult mainly during political escalation, closure of roads, demolition orders and other Israeli regimes, where 12 life threatening incidents in Nablus targeted areas had been recorded, 2 of them lead to death due to inability of the patients to get timely and appropriate care. Access to essential health services is very limited, from the 25 assessed communities only 4 have access to structured health facilities and others through mobile clinics with extremely limited services. Such limitation contributes little knowledge and poor practices on issues related to mother care, poor infant and young child feeding (IYCF) and new born caring practices.

In Bethlehem; exclusive breastfeeding is practiced by only 12%, only 2.6% are practicing the correct management during diarrhea, 70% of the mothers are not giving their children iron supplements on regular basis and 63% are not giving Vit A,D regularly. In yatta 45.6% of mothers are not taking folic acid, only 4.8 % followed proper correct management during diarrhea among children. In Nablus 34% of mother are not taking iron, folate on regular basis, and around 50% are not giving their infant Vit A D. Anemia prevalence among mothers and children in all the targeted areas is high, among children it's 29.1% in Bethlehem, 34.8% in Hebron and 24% in Nablus whereas among mothers it's 29.6% in Bethlehem and 21.6% in Hebron and 34% in Nablus .

The majority of the interviewed mothers mentioned that they were not aware of maternal and infants danger signs and don't seek any care once these signs appear. They also mentioned introducing unappropriated complementary meals and at very early age.

Mental health services are lacking, assessment showed 5.6% of pregnant mothers reported having suicidal thoughts during the last two weeks of data collection. Also a total of 195 women had an Edinburgh Postnatal Depression Scale score >10 contributing a crude prevalence rate of 37.3%.

69% of the surveyed students showed psychological and social problems that negatively impact their academic performances. 22% of the male students and 24% of the female students mentioned that they don't feel safe even inside homes. 45% of the male students and 45% of the female students mentioned that they are experiencing physical violence from their peers at schools. Violence affects both boys and girls psychologically, but often in different ways. Interventions will be focusing on mothers and children including female CHWs ,intervention at the school level will include both males and females students

Activities or outputs

Output 1.1.: Mothers' behaviors on infant and young child feeding and caring practices are improved

29 CHWs, who have been trained by the MoH , will target 700 mother and their children at the household level using a social and behavioral communication change approach (an evidence based approach that was tested by WV and published in Lancet this year) , the trained CHWs will visit the mothers and address issues mainly related to infant care such as breast feeding , complementary feeding practices, assuring the supplement intake, recognition of any danger signs. Those community health workers will be the linkages between their communities and the service providers, and they will assure proper utilization and timely referral of mothers to the services All the identified children with disabilities will be given a priority (estimate number of CWD 40 out of the 700 according to the data collected from village councils)

In cooperation with the MoH enrichment of infant and young child caring and feeding practices will be strengthened at the community level through establishing Child friendly clinics in 9 health facilities. Those facilities will be rehabilitated and supported with needed tools and supplies to enhance the services offered for the children in Area C especially children with disabilities (CWD). Furthermore the selected 9 health facilities will be assessed, to identify the exact interventions to make such facilities disability friendly, this will include but not limited to infrastructure , provision of special tools and equipment's (HCI will be consulted) .

1.1.1 29 CHWs will conduct home visits (2 visits /month /households)

1.1.2 Establish 9 child friendly clinics health clinics and support them with tools/supplies

1.1.3 Rehabilitate health facilities to be easily accessed by CWDs;

1.1.4 Conduct advanced training for the CHWs and the health providers on the special nutritional and caring needs for children with disabilities.

Output1.2: Teachers, children and mothers' psychosocial status is enhanced

Psychological first aid (PFA) training will be done in partnership with the Palestinian counseling center (PCC), which is a registered health NGO in 2004 by the Palestinian Ministry of Interior and has an extensive experience in providing PFA and mental health counseling and training services. World Vision has also certified trainers -national and regional staff and was one of the partners who worked with WHO in preparing the PFA manual- who will provide needed support to PCC. PCC, in coordination with WV, will do follow up especially at school level.

The training will be provided to school counselors and community health workers in partnership with PCC. The activity is to equip them with skills needed to deal with affected children. 29 teachers will receive an intensive training by PCC and WV trainers. Extracurricular related activities will be designed to help provide students with essential skills to increase their resilience. Counselors and Community health workers will be equipped with techniques and comprehensive tool kit to sustain interventions. For critical identified cases, a referral mechanism will be developed and activated

1.2.1 Train 29 male and female teachers and counselors on PFA.

1.2.2 Conduct extracurricular PFA related activities in targeted schools

1.2.3Train 54 CHW and service providers on mental health and PFA

1.2.4 Activate referral mechanisms

Active community participation and engagement in the implementation and monitoring will be ensured and maintained as a way to ensure the quality of work and draw lesson learnt for future interventions as part of the 3 years developmental plan. The 3 years developmental plan will be adjusted based on the needs drawn from the field and recommendations received from communities and partners. Scale up of activities will be discussed and taken into consideration while preparing the second year of intervention.

Indicators and targets

The project will target as direct beneficiaries:

Objective 1: To improve the health of Vulnerable mothers and children in Area C in Hebron, Bethlehem and Nablus through community preventive nutrition intervention and Psychosocial support services.

Output 1.1.: Mothers' behaviors on infant and young child feeding and caring practices are improved

- 29 female community health workers will be provided with advanced skills and will target mothers at the household level
- 700 mothers and their children (700 child at least 40 of them are CWD) will be provided with consultations on infant and young child feeding and caring practices at the household level
- 1400 visits (2 visits for each household /month) will be conducted on monthly basis
- 9 health facilities (Nahalin, Jurish-Jalud-Madama-Karma-An Najada-, Khalet Salih-Ad Derat-Osarin) will be provided with the needed tools and equipment to initiate and activate child friendly clinic and disability friendly(areas where agreed upon with the MoH/nutrition department)

Output1.2: Teachers, children and mothers' psychosocial status is enhanced

- 93(male and female) of school counselors and community health workers who were trained on mental health and have improved skills on mental health case management
- 9375 students (males = 4671 –females 4704) including 208 with disabilities (data collected from the MoE including number of disabilities), those children are located in 29 schools (10 Nablus 13 Bethlehem, 16 Hebron)

The action will establish strong monitoring and learning mechanisms to assess and track progress against program objectives. The monitoring of the action will be conducted in accordance with existing WV JWG monitoring systems under the local responsibility of the field team in close liaison with the country office (Jerusalem) and partners. To improve the monitoring process at the results' level, a Detailed Monitoring Plan (DMP) will be developed, which details all monitoring tools and monitoring time frames. Monitoring tools will be developed taking into consideration age and gender aspects. Tools will include Observation report, clinics observation report, baseline and end line of trainees to measure demonstration of knowledge, attendance sheets of trainees.

The action monitoring approach will follow key principals:

- 1 Joint monitoring practices through collaboration with the implementing partner, communities and MoH, MoE . WV has strong relationships with the action's stakeholders creating a foundation for shared responsibilities and accountability in M&E tasks.
- 2 World Vision field team and in coordination with community members and project partners will be oriented on using the monitoring tools. It's worth mentioning some of the action monitoring tools builds on existing monitoring mechanisms aiming at strengthening them and achieving better impact.
- 3 Progress reports will be regularly collected on weekly basis and shared with key stakeholders including communities.
- 4 WV team will follow up with the training and extracurricular program in cooperation with implementing partner and MoH to ensure quality implementation of all activities.
- 5 End of project report will be shared with cluster and partners

Indicator	Project target
-----------	----------------

World Vision Jerusalem West Bank Gaza(WV JWG)	
Original BUDGET items	\$
Staff and other personnel costs	69,100
Direct inputs and services to beneficiaries	350,000
General Operating and other running costs	34,550
Indirect/overhead costs (6%)	27,219
Total	480,869

World Vision Jerusalem West Bank Gaza(WV JWG)	
Current BUDGET items	\$
Staff and other personnel costs	69,100
Direct inputs and services to beneficiaries	350,000
General Operating and other running costs	34,550
Indirect/overhead costs (6%)	27,219
Total	480,869