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Damages in Handicap International partner organization Society of Physically Handicapped People premises in Gaza, June 2014

Healing the Wounds



Handicap International and partners' Gaza Emergency Response Action Report, March 2015.

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Acronyms

| | |
|--------|--|
| CDC | Centre de Crise – Ministère des Affaires Etrangères - France |
| DFID | Department for International Development - UK |
| HI | Handicap International |
| IDPs | Internally Displaced Persons |
| NFI | Non-Food item |
| PwDs | Persons with Disabilities |
| PwIs | Persons with injuries |
| RRA | Region Rhône-Alpes - France |
| UKIETR | UK International Emergency Trauma Register |
| UNRWA | United Nations Relief and Works Agency for Palestine Refugees in the Near East |
| UXO | Unexploded Ordnance |
| WASH | Water, Sanitation and Hygiene |

Gaza Strip population was exposed to a long term & acute military operation which lasted for 51 days during summer 2014. The whole population was affected in one way or another.

At least 1,473 Palestinian civilians were killed, including 501 children and 257 women. Many fatalities involved multiple family members, with at least 142 Palestinian families having three or more members killed in the same incident, for a total of 739 fatalities. According to the Palestinian Ministry of Health, over 11,100 Palestinians, including 3,374 children and 2,088 women, were injured¹.



This crisis has also resulted in **displacing more than 500,000 persons** who were forced to leave their homes searching for a secured place to protect themselves and their families from bombardment.

UNRWA has opened shelters at their schools to accommodate these internal displaced persons (IDPs). On the 26th of August an open-ended ceasefire was announced. IDPs started to return back homes if still not destroyed; many those whose houses were totally destroyed are still being hosted in shelters of UNRWA.



At the height of the conflict an estimated 500,000 people – twenty-eight percent of the population – were internally displaced in UNRWA schools designated as emergency shelters, government schools and informal shelters, and with host families².

Persons with disabilities (PwDs) are one of the most vulnerable groups in time of crisis, mostly marginalized and neglected to access emergency services. Handicap International³ supported by DFID, CDC, and RRA has launched an emergency response action in partnership with **4 disability service providers** to meet the urgent needs of the most vulnerable groups affected by the crisis across Gaza Strip. Partners are: **Baitona Society for community development** in North Gaza, **Palestine Avenir for Childhood Foundation** in Gaza City; **The National Society for Rehabilitation** in Middle Area and in Khan Younis;

and **Society for Physically Handicapped People** in Rafah.

The project duration was from August 2014 till end of February 2015; **a total of 6,475 vulnerable persons affected by the war in Gaza benefitted from HI and partners' emergency response action.** HI donated 648 mobility assistive devices, NFI and therapeutic materials to the hospitals during the war time to be distributed to Pwls according to their needs. Immediately after the ceasefire announcement HI supported the partners in the five governorates to provide multidisciplinary rehabilitation services including: physiotherapy, occupational therapy, psychosocial support, nursing and dressing, referrals to other services, in addition to assistive devices and non-food items distribution. **A total of 27,696 multidisciplinary rehabilitation sessions were provided, 2,578 mobility assistive devices and 3,975 NFI were distributed to the most vulnerable persons affected by the crisis.** Technical support and trainings were delivered to partners' outreach teams by UKIETR team to ensure quality rehabilitation services in support to persons with disabilities and persons with injuries. **97.22% of the respondents reported their overall satisfaction with the services.**



This report will shed the light on the emergency response action services delivered to the different beneficiaries.

¹ Gaza Crisis Appeal Report – OCHA September 2014.

² Gaza Crisis Appeal Report – OCHA September 2014.

³ A humanitarian aid organization working alongside people with disabilities and vulnerable population, taking action and bearing witness in order to respond to their essential needs, improve their living conditions and promote respect for their dignity and fundamental rights.

For more information, please contact Handicap International Head of Mission in Palestine Guillaume Zerr

Email: gzerr@hi-me.org

Telephone: +972 (0) 26261691

Fax: +972 (0) 26261665



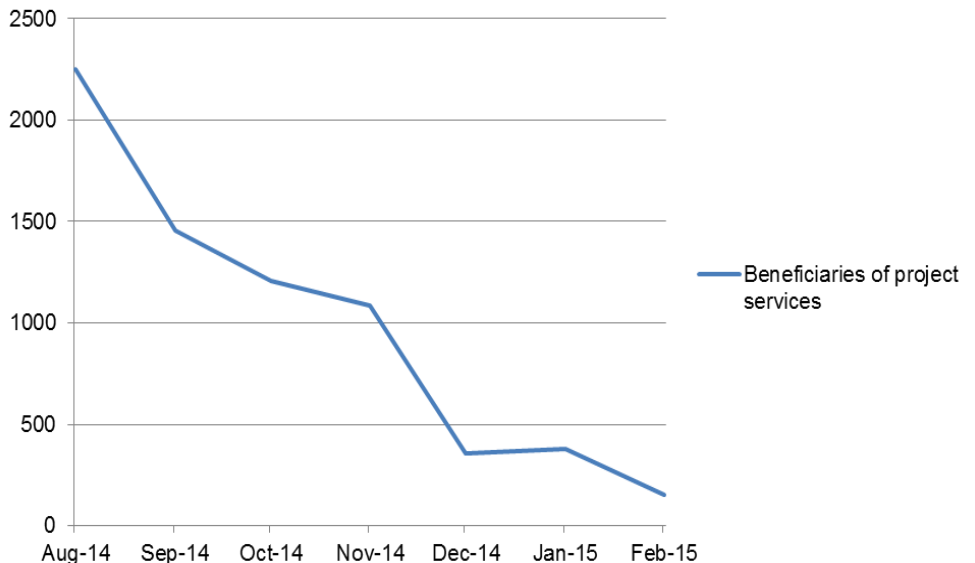
Response Beneficiaries in Gaza

Identification Phase

This graph indicates the **number of beneficiaries identified per month** during the emergency response project duration (August 2014 – Feb 2015).

In total **6,475 most vulnerable persons were identified**, assessed and supported.

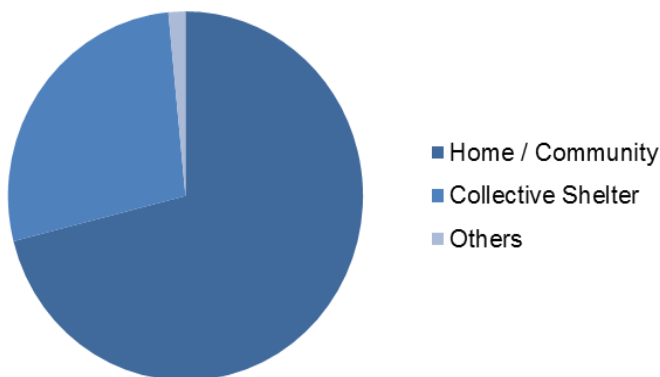
HI and partners did put a particular focus on early identification of potential beneficiaries in the early stages of the response, which explains the decreasing figures per month following this essential initial phase of identification.



Identification Place and Modalities

Partners' rehabilitation outreach teams conducted field screening at the beginning of the intervention to identify vulnerable persons affected by the crisis; Handicap International and its partners coordinated with stakeholders to facilitate teams' intervention inside shelter locations.

Those who have been identified at the community level were either at their own homes or hosted by other family members after being displaced.



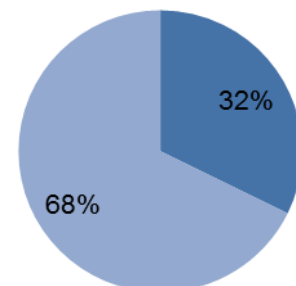
- 77% of project beneficiaries were identified by outreach teams through their field work.
- 14 % of beneficiaries registered their details and needs in partners' location for support and follow up by outreach teams.
- 9 % of beneficiaries were referred to partners' teams follow up by other organizations for support and follow up.

Vulnerability of Beneficiaries

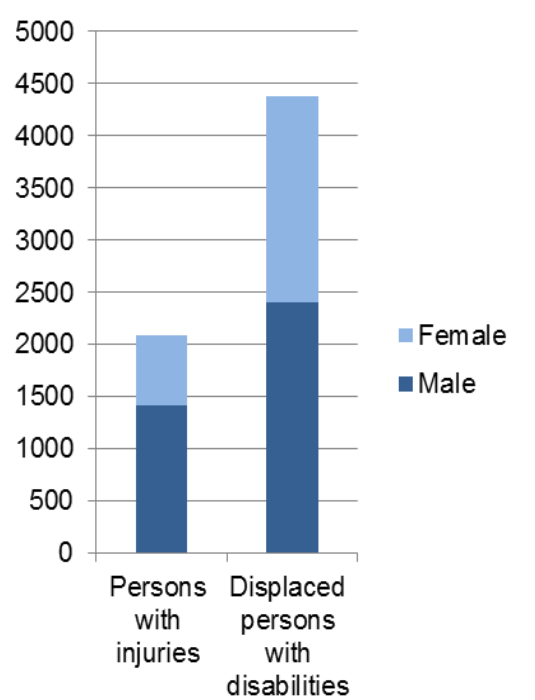
Services were provided to two main vulnerable groups identified as the most in need groups for the proposed services; **persons with injuries** and to **displaced persons with disabilities** in the five governorates of Gaza Strip.

- **2,090 persons with injuries** benefited from response services (679 female and 1,411 male).
- **4,385 persons with disabilities** were supported (1,986 female and 2,399 male).

- Persons with injuries
- Displaced persons with disabilities

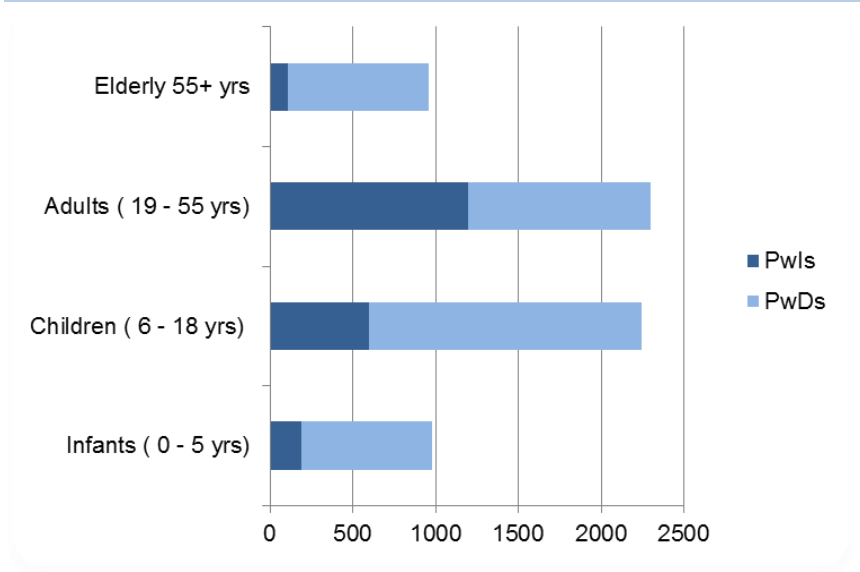


Beneficiaries Gender

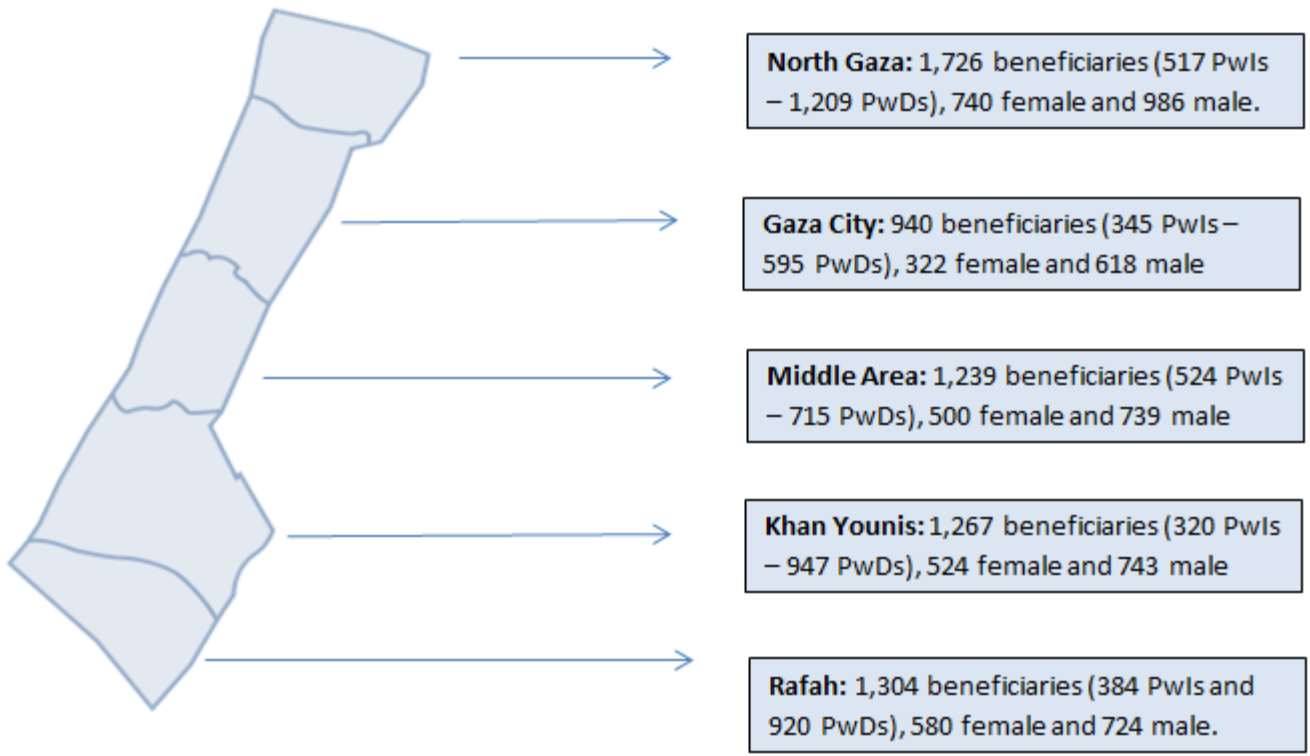


While the ratio between female and male for displaced PwDs seems coherent with overall Gaza population statistics, an **important majority of supported persons with injuries were male.**

Beneficiaries Age Groups



Geographical Coverage



General Overview of beneficiaries identified needs and demands

Like other groups affected by the crisis, people with disabilities and people with injuries lacked equal access to emergency specialized and basic services.

Needed specialized services included multidisciplinary rehabilitation services, assistive devices, non-food items, and health care services. The mostly demanded basic needs included access to clean drinking water, food, shelter, protection, and education.

The needs and demands of persons with disabilities are usually not properly included in the services' providers agenda of intervention.

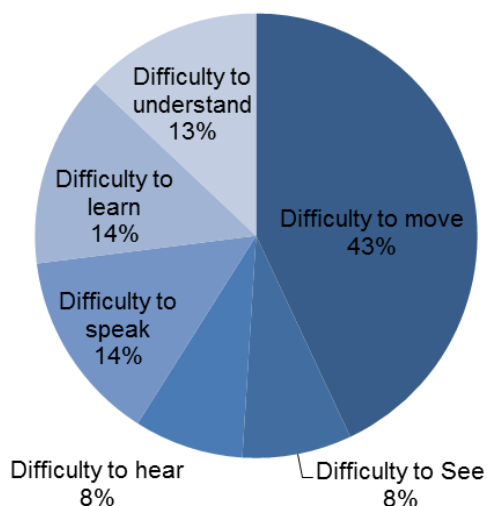
In Gaza and recently few INGO and Palestinian NGOs started to allocate some support to people with disabilities through coordinating directly with disability service providers to ensure disability integration as a cross cutting issue in their intervention.

HI tried to promote the inclusion of people with disabilities into other stakeholders' emergency response actions on equal foot with other target groups. However lack of physical, informational and geographical accessibility of services providers are constraining people with disabilities equal access to services.

78% of displaced persons with disabilities reported their lack of access to basic needs during emergency and post emergency period, while 48% of them reported lack of access to specialized services they needed.



Beneficiaries Functional difficulties



Cause / origin of difficulty

| Cause / origin of difficulty | Beneficiaries |
|------------------------------|---------------|
| From birth | 2,774 |
| Bombing | 2,042 |
| Illness | 927 |
| Old age | 413 |
| Accident | 303 |
| Other | 74 |
| Burn | 52 |
| Gunshot | 43 |
| Mine/UXO | 7 |

48.89% of beneficiaries have multiple functional difficulties and **51.11%** have one type of functional difficulty.

100% of persons with injuries who benefitted from project services were injured during summer 2014 crisis.

It is expected that **148** out of **2,090** injured persons will suffer from **permanent disabilities due to physical impairments** (spinal cord injuries, amputation, brain injuries, multiple fracture, and peripheral nerve injuries).

137 out of **2,090** injured persons are expected to suffer from **permanent disabilities due to sensorial impairments** (difficulties to hear, to see, and to speak).

Beneficiaries' personal factors

| Factors related to personal factors of functional limitations or risk of functional limitation | Male | Female | Total |
|--|-------|--------|-------|
| Person with injury | 1,411 | 679 | 2,090 |
| Person with disability | 2,399 | 1,986 | 4,385 |
| Older person with functional limitations (> 55 years old) | 216 | 330 | 546 |
| Person with chronic disease with functional limitation | 144 | 176 | 320 |
| Person with serious medical conditions | 92 | 85 | 177 |
| Pregnant woman (> 7 months) | 0 | 2 | 2 |

Type of injuries

Out of **2,090** injured persons, some had one type of injury and others had more than one type of injury.

| Beneficiaries type of injuries | Fracture | Paralysis | Spinal Cord Injury | Peripheral nerve injury | Stroke/ brain injury |
|--------------------------------|----------|-----------|--------------------|-------------------------|----------------------|
| | 743 | 30 | 25 | 149 | 21 |
| Beneficiaries type of injuries | Wound/s | Deformity | Amputation | Burn | |
| | 1420 | 9 | 102 | 25 | |

Project Services

Multidisciplinary Rehabilitation Services

Handicap International supported **4 partners in 5 governorates** of Gaza Strip to mobilize **outreach teams** to provide multidisciplinary rehabilitation services including:

- **physical therapy** sessions
- **occupational therapy** sessions
- **psychosocial support**
- **nursing** and dressing sessions
- **referrals** to access other needed specialized and basic services.

27,696 multidisciplinary sessions were provided to **4,880 beneficiaries**.



Improving access of vulnerable groups to other services through Referral Networks

HI has been supporting the referral mechanisms amongst services providers since 2009 in Gaza Strip to ensure persons with disabilities have an improved access to specialized and basic services in Gaza.

4,747 affected persons had access to other services through partners' referrals and coordination mechanisms.

Emergency response partners were supported to strengthen their coordination and networking with additional services providers after the crisis in Gaza; particularly joining more basic services providers besides specialized disability services providers in order to meet the increased needs of affected population in the five governorates.

A **monthly referral network meeting is being conducted in each governorate** where members are exchanging information on available services of each; enabling referrals opportunities for persons with disabilities and other vulnerable groups to improve their access to available services, and as well coordinating their efforts together to avoid duplication in services provision.

HI partners are the coordinators of the referral network in each governorate. The Referral network members are representing the multi-stakeholders working in the disability field like disability service provider, basic service provider, disabled people organization, international aid organization and others. North Gaza network is joining 14



members representing the different stakeholders, 32 members in Gaza City network, and in Middle Gaza 27 members, in Khan Younis 14 members and in Rafah 29 members.

HI updated the mapping of available specialized and basic services and service providers in October 2015, and disseminated information to people with disabilities and their families through radio messages and through printed leaflets.

6,378 persons were referred to access other needed services after assessment by HI and partners' teams.

Referrals follow up reports indicated that **74.42% of referrals conducted were successful as beneficiaries reported receipt of the services they were referred to including:**

- Medical assessment and hospitalized services
- NFI
- Hygiene kits
- Food packages
- School Uniforms
- Education
- Shelter
- WASH
- Psychological support
- Assistive devices
- Awareness raising
- Rehabilitation follow up after discharge.

Mapping brochure of services providers in Rafah. For more information on disability services providers visit www.abwab.ps
 The *abwab* website was initially designed to allow service providers in the Gaza Strip to provide PwDs with information on their services. The website was launched in January 2011 as a pilot experience with accessible information for PwDs, especially for persons with visual impairment.

Needs based distribution of mobility assistive devices and non-food items

Partners' occupational therapists were assessing each individual needs of assistive devices, distribution of all devices was based on **actual assessment**, followed by **training to beneficiaries** on how to use the device/s and **follow up** to facilitate and **ensure progress and improved autonomy** in practicing the activities of daily life.

2,578 assistive devices were distributed to **2,476** beneficiaries according to their identified needs including wheel chairs, pairs of elbow crutches, pairs of auxiliary crutches, walkers, canes & sticks, toilet wheel chairs , anti-bed sores mattresses, catheters.



Non-food items distribution

First and by priority beneficiaries were referred to existing large-scale NFI distribution services. However **when then was no possibility to refer to other services specialized in large-scale NFI services, HI directly provided NFIs.**

Based on beneficiaries needs, non-food items were purchased and distributed to beneficiaries of the project through the partners' teams. Items included **diapers** and **wound dressing kits.**

3,078 beneficiaries received **3,975 NFIs.**



Psychosocial support services

Psychosocial support individual and group sessions were conducted to project beneficiaries to prevent post traumatic symptoms disorder and to reduce their acute stress and fears after the crisis.

10 psychologists were recruited within partners' teams to provide these services with the technical support and supervision of HI.

948 beneficiaries participated to **1,595 group therapy sessions**, and **2,149 beneficiaries** received **7,226 individual support sessions.**

Some recreational activities were conducted to children and their families.

100% of the beneficiaries of psychological support services reported a **decreased stress level** through the pre and post stress reduction measurement tool applied with them.



Project challenges

One of the main challenges faced by Handicap International and its partners was the **lack of assistive devices availability in the Gaza local market**; HI had to purchase the needed assistive devices from West Bank. This challenge caused a delay in distribution of assistive devices to identified beneficiaries during the initial period of the project.

Considering the short time of the project intervention and the **huge long term needs for rehabilitation services of beneficiaries**; HI and partners teams included the training to families and/or caregivers on basic daily functional exercises to PwDs before being discharged from services. The goal was to ensure **a minimum acquired capacity to provide daily follow up and support to beneficiaries upon discharge**.

However, many of the supported beneficiaries are still in dire need of direct services and HI is currently searching for funding opportunity to ensure the acute remaining needs are being met.

Beneficiaries' evaluation of project services

A rapid satisfaction survey was included in the general assessment form applied with beneficiaries to **measure their satisfaction and the impact of services on improving their own situation**.

- **97.22% of the respondents reported their overall satisfaction with the services received.**¹
- **96.41% of respondents confirmed services were received in a timely manner.**²
- **96.90% of respondents thought the services received were matching their needs.**³

¹ More precisely, 1.74% reported being unsatisfied, 1.03% being partially unsatisfied, 31.31% partially satisfied, and 65.91% satisfied.

² More precisely, 2.09% reported being unsatisfied, 1.50% being partially unsatisfied, 35.93% partially satisfied, and 60.48% satisfied.

³ More precisely, 1.97% reported being unsatisfied, 1.13% being partially unsatisfied, 37.81% partially satisfied, and 59.10% satisfied.

This survey, based on **self-reporting by beneficiaries**, was conducted at the **time of discharge** of the beneficiaries, and, as such, does not evaluate long-term impact of the intervention but rather the short-term one.

Beneficiaries answered the 3 questions (overall satisfaction, timeliness and relevance of the intervention) on a scale from 0 to 10 (10 being fully satisfied). Unsatisfied beneficiaries scored from 0 to 2, partially unsatisfied from 3 to 4, partially satisfied from 5 to 7, and satisfied from 8 to 10.

HI and partners believe that the beneficiaries satisfaction level reported is quite **higher than expected** for the following reasons:

- Beneficiaries of the project were **highly satisfied for receiving multi-disciplinary rehabilitation services**.
- The project intervention was developed with a **rights-based approach**.
- The **quality of the services** provided established strong ties and confidence between beneficiaries and field teams.
- **The referral system in place** and its role in ensuring their improved access to other needed services.
- **The positive communication by outreach teams** with beneficiaries.
- **Involving the families in the rehabilitation process**, and training them on basic follow up exercises maximized their interests in teams' services and ensured some kind of **sustainability to the intervention**, despite limitations in that regard.
- The **user-centered approach** applied by teams during their intervention; particularly considering beneficiaries and their families' priorities and objectives in their intervention and therapeutic plans enabled improved participation and commitment from all sides towards the planned objectives realization.

Monitoring and evaluation tools applied through the project also concluded the following impacts on beneficiaries:

- **80% of multidisciplinary functional rehabilitation services' beneficiaries improved participation in practicing their daily activities of life.**
- **100% of psychological support services' beneficiaries reported a reduced stress level due to their participation to the sessions.**
- **An increased access to other needed services through coordination, mainstreaming and referrals; 76.80% of persons referred (4,677) received the services they were referred for.**

Conclusion

HI is **committed to the beneficiaries** and will work tirelessly to ensure **services support continuity** to project beneficiaries according to their needs.

HI will continue **supporting the inclusion of persons with disabilities** and enhance their effective participation.

HI will **update its emergency response plan** and be better prepared.

HI is **proud of its partners and their teams' support and project achievements** during and after the last crisis, which alleviated suffering of those most in need.

HI is **grateful to its donors** for their support, reactivity, and flexibility.

UKIETR teams indicated that over the course of the project, **major improvements have been noted in clinical assessment and in the treatment of complex trauma cases**. Post-tests following workshops have consistently revealed significant changes in team confidence in managing complex trauma.



Donors

This project was funded by the **Rapid Response Facility from the UK Government (DFID)**, the **Centre de Crise** (French Ministry of Foreign Affairs), and **Region Rhône-Alpes**.

Views reflected in this report are Handicap International's ones.

