

Humanitarian Response Fund for the occupied Palestinian territories

Annual Report 2009

Function of the Humanitarian Response Fund

The Humanitarian Response Fund (HRF) for the occupied Palestinian territories was set up in August 2007. It was established to provide NGOs and the UN in-country with a rapid and flexible funding mechanism to respond to unforeseen short-term emergency needs of vulnerable communities. OCHA ensures the day-to-day management and financial administration of the HRF on behalf of the Humanitarian Coordinator. This includes selection of projects, disbursement of funds and monitoring. OCHA also ensures that required needs assessments, gaps analyses and coordination have taken place before funds are allocated.

There are two priorities for HRF funding in oPt. The first priority is to enable a rapid and flexible first response to emergencies before mainstream funding comes on line. The second priority is for the HRF to strategically fill gaps within a cluster or humanitarian response plan. This can include supporting projects for which funding is delayed or filling gaps between two funding cycles to prevent major impact on people's lives and prevent further erosion of their livelihoods. The HRF is not intended to provide core funds to programmes or to address chronic problems that could be better addressed through the CERF, CAP and recovery and development funding channels.

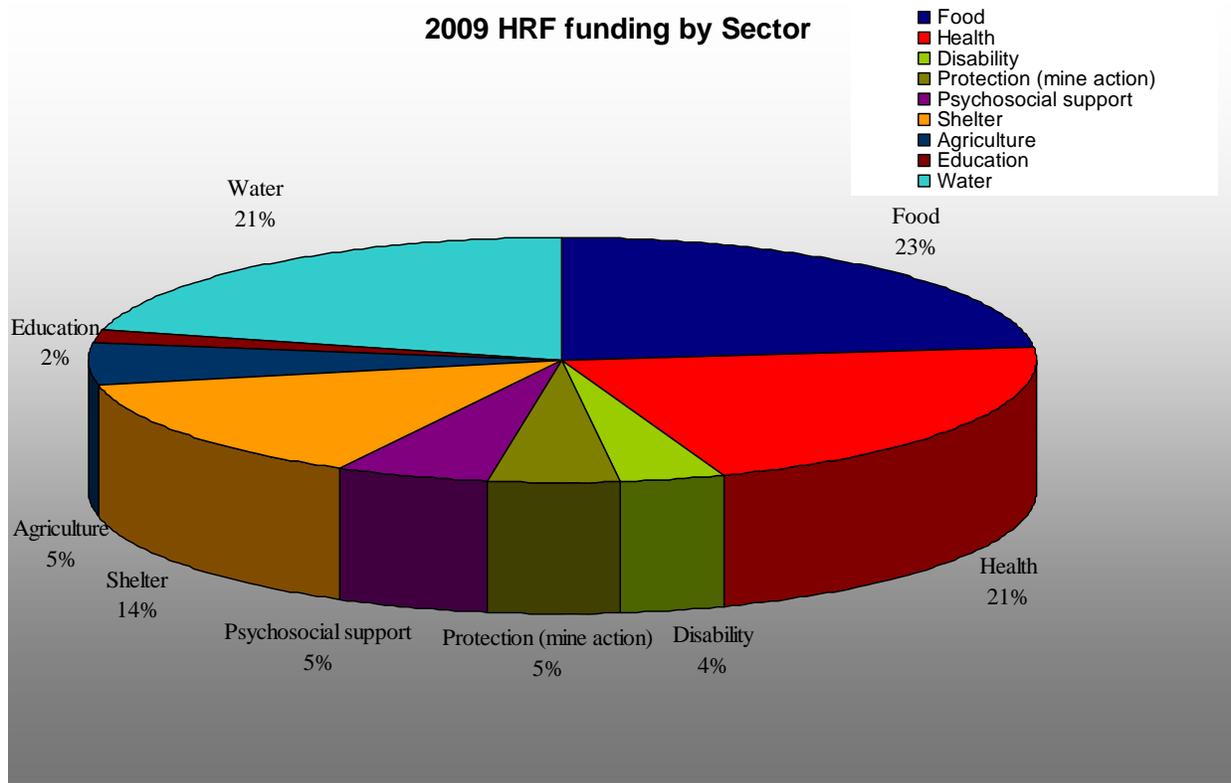
While the day-to-day management and administration of the HRF is undertaken by OCHA oPt, policy and strategic guidance comes from an Advisory Board, chaired by the UN Humanitarian Coordinator (HC) and consisting of representatives from UN agencies, National and International NGOs and the donors to the fund. The Fund currently has seven donors – Sweden, Spain, the Netherlands, Norway, Ireland, Switzerland and the UK.

The process for reviewing projects begins with OCHA and the relevant cluster lead undertaking a preliminary review of the proposal, including a technical review. If the proposal passes this stage it will be referred to the HRF Review Board (made up of UN agencies, AIDA, PNGO representatives and the relevant cluster lead) who will carry out a further review of the proposal before forwarding the proposal to the HC with their recommendation.

Overview of oPt HRF funding in 2009

The HRF supported thirty-seven projects in 2009, twenty-nine in Gaza and eight in the West Bank, with a total of \$5,424,720US in funding. This is a significant increase in terms of both number of projects and funding on the combined figures from 2007 and 2008 when sixteen projects were supported with \$2,046,861US in funding. This increase was largely due to the high levels of assistance necessary following operation Cast Lead in Gaza at the beginning of 2009. The thirty-seven projects were implemented in a number of humanitarian sectors and sub-sectors including health, water sanitation and hygiene (WASH), food security, education, disability, mine action, agriculture and livelihoods. The food security sector (23%) followed closely by health (21%) and WASH (21%) sectors received the largest proportion of the HRF funding in 2009.

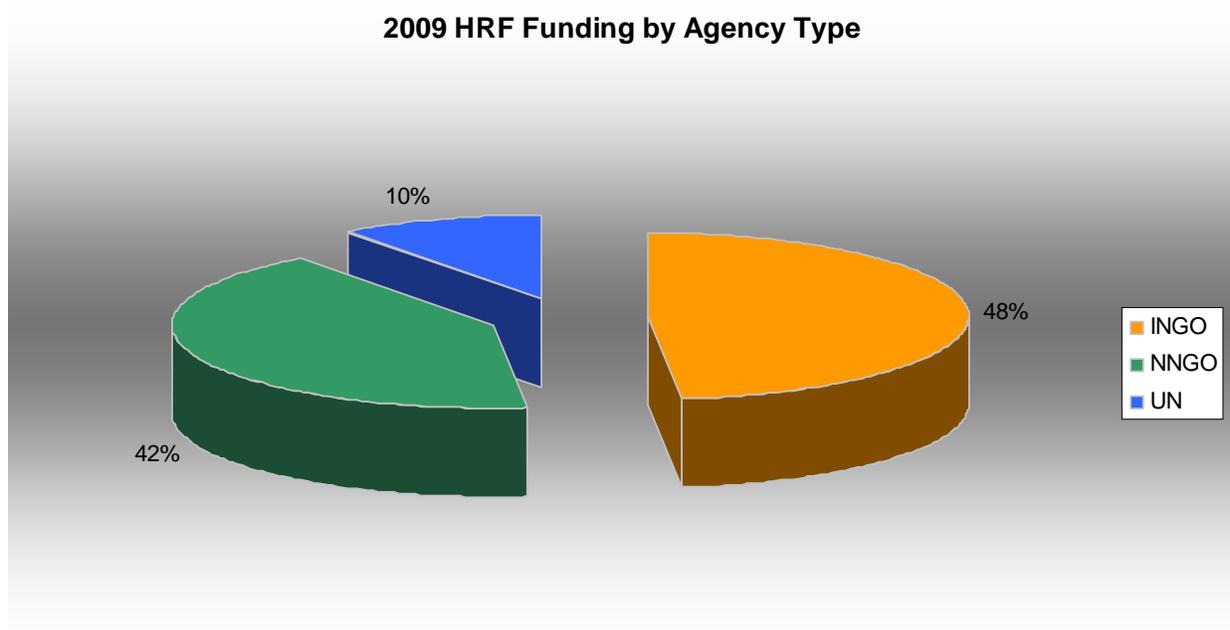
Fig 1 Table below shows the percentage split per sector of the HRF funding in 2009



In 2009, 90% of the HRF funding went to NGOs with a split of 48% going to international NGOs (INGOs) and 42% going to national NGOs (NNGOs). Restrictions on how the funding can be used in terms of direct staffing costs and the percentage which may go towards administrative costs, in addition to a prohibition on any of the funding going towards head-quarter costs, makes the HRF better suited to the types of projects NGOs implement as opposed to the UN ones. Nevertheless, UN agencies can access the fund and the HRF supported two UN projects in 2009. In addition, the UN agencies have direct access to the CERF funding mechanism in rapid responses to emergencies.

There was an increase in the number of Palestinian NGOs applying for and receiving funding from the HRF in 2009 compared to previous years. This is in part due to the work of OCHA in raising awareness of the HRF in the humanitarian community. In 2009 fifteen NNGOs received direct funding; a significant increase on the combined 2007 and 2008 figure when only three of the sixteen projects funded were directly implemented by NNGOs. In addition four NNGOs benefited from partnering with international NGOs on HRF projects and on two projects INGOs worked in partnership with local Community Based Organisations (CBOs).

Fig 2 Table showing funding split by agency type.



Donors to the oPt HRF in 2009

The oPt HRF continued to receive strong support from both Sweden and Spain, who have contributed to the HRF every year from its inception in 2007. The funding base was significantly expanded in 2009 to seven donor countries, with Norway making a contribution for the second year running, while Ireland, United Kingdom, the Netherlands and Switzerland all made their first contributions to the fund. The total funding contributed in 2009 amounted to \$10,220,802, with both Sweden and the United Kingdom making two contributions to the fund, at the beginning and the end of the year. The expanded donor base and prompt donor contributions allowed the HRF to make a significant response to the humanitarian needs emanating from the military operation in Gaza.

Since its inception in 2007 the total funds contributed to the HRF, including funding 'in the pipeline' amounts to over \$15 million.

Fig 3 Table of donor contributions to HRF since 2007

Donor	Date	pledges in US\$	HQ /Admin 3%	Funds received	Pledges status
Spain	2007	1,000,000	30000	970,000	0
Sweden	2007	1,469,496	44085	1,425,411	0
Norway	2008	713,840	21415	692,425	0
Spain	Dec-08	918,635	27559	891,076	0
Sweden	Dec-08	893,735	26812	866,923	0
Ireland	Jan-09	661,376	19841	641,534	0
United Kingdom	Feb-09	1,436,782	43103	1,393,679	0
Sweden	Feb-09	1,416,400	42492	1,373,908	0

Norway	Jul-09	778,259	23348	754,911	0
Netherlands	Jun-09	1,102,941	33088	1,069,853	0
Spain	Sep-09	719,424	21583	0	697,841
Switzerland	Oct-09	849,500	25485	824,015	0
Sweden	Dec-09	1,656,120	49684	1,606,436	0
United Kingdom	Dec-09	1,600,000	48000	1,552,000	0
Total		15,216,508	456,495	14,062,171	697,841
Projects funded to date				7,671,574	
Balance				6,390,597	
Balance with pledged funding					7,088,438

HRF: A rapid and flexible funding process?

One of the key challenges in making decisions on HRF funding is striking the balance between timely decision-making, which ensures a rapid response to an unforeseen emergency, and ensuring the quality and appropriateness of the project itself. The increase in terms of number of projects and amount of funding disbursed in 2009 put pressure on both sides of this balancing act and exposed facets of the proposal review and decision-making process which required change. These changes were incorporated in the new HRF Guidelines and include providing a clearer and more transparent project selection process, as well as bringing more definition to roles and responsibilities of the various stakeholders in the fund.

The first official step of the process is for the applicant agency to submit a project proposal, using the standard template available on OCHA oPt website¹, to the OCHA HRF team either directly or via one of the OCHA field teams or the cluster lead. In most cases the applicant agency will have already made informal contact with OCHA regarding the proposed project either submitting a concept note or through initiating an informal discussion.

The second step is for OCHA to review the proposal against the basic HRF criteria, followed by a technical review of the project involving the appropriate OCHA field office and the cluster lead relevant to the project under review. This technical review includes: a review of the capacity and expertise of the applicant agency to undertake the project; a review of the needs assessment and the appropriateness of the project itself; and, an examination of whether or not it conforms with the cluster priorities in response to the emergency. During this stage the applicant agencies are frequently asked to make a number of amendments to the proposal.

The third step is for the project to be forwarded to the HRF Review Board which consisted of representatives from UN, international and national NGOs and the HRF donors². The Review Board will review the technical aspects of the project, the agency's capacity to implement and the appropriateness of the project within the emergency response, among other things. The Review

¹ www.ochaopt.org

² Under the new HRF Guidelines the make-up of the Review Board has changed and now includes one representative each for international and national NGOs, a representative of UN agencies (currently UNICEF Deputy Representative) and the cluster lead relevant to the project proposal under review.

Board provides a non-binding recommendation to the Humanitarian Coordinator who ultimately makes the decision on whether or not to fund a project.

As soon as the Humanitarian Coordinator makes a decision this is conveyed to the applicant agency. If the decision is in support of the project, the applicant agency may begin to implement the project straight away, provided they have the reserve funds to cover the initial period until the first HRF installment is disbursed. All NGOs receive 80% of the funding request up-front in the first installment, with 20% withheld until all reporting and financial audit obligations have been satisfactorily completed. UN agencies receive 100% of funding in one installment at the beginning.

The target timeframe for the oPt HRF between a completed application being submitted and the Humanitarian Coordinator providing a decision is four to five working days. The time between this approval and the first installment being released by Finance Section in Geneva can then take up to three weeks.

An analysis of the timeframe in which decisions were taken and funding disbursed in 2009 shows that this optimum target was met, particularly in the times of greatest need, during and immediately after Israeli military operation Cast Lead. During the first two months of 2009, sixteen projects were fully processed from the proposal review stages right up to the release of the first payment of 80% of the project total.

During 2009 OCHA received ninety-six project proposals or what could be termed substantial concept notes for HRF funding, of which thirty-seven projects were supported with the remaining fifty-nine projects deemed unsuitable for HRF funding support. The processing time for projects by Finance Section in Geneva averaged over the year at 2.5 days for clearance of the MoU and 12.5 days between submission of the signed MoU and the release of the first installment of funding.

The new HRF Guidelines have introduced some changes in the governance structure which should make the project review process clearer to all involved, enhancing the transparency of the decision-making process and strengthening, as well as formalizing the cluster leads role in this process. It is hoped these changes will assist in both aspects of the balancing act, both in terms of speedy decision-making and rigorous review of projects.

Fig 4 Table of proposals funded and not funded

Sector	No. of HRF projects funded	No. of proposals for HRF not funded
Food	8	7
Health	6	7
Protection	2	9
Psychosocial	2	4
Shelter	7	11
Water	7	5
Education	1	6
Agriculture	2	2
Disability	2	-
Early Recovery	-	8
Totals	37	59

Overview of HRF projects funded in 2009 and the results and outcomes

HRF projects in West Bank

The HRF funded eight projects with a total of \$870,585 in 2009 in the West Bank. The projects can essentially be broken into three categories: those responding to winter needs in terms of shelter and winter fuel; responding to needs of returning populations; and, those responding to the need for clean water.

Winter fuel and Shelter

In January 2009 herders and Bedouin families in the West Bank, already living in a cycle of debt and poverty, were facing into a second consecutive year of severe frosts putting their coping mechanisms under considerable pressure. This came on the back of failed open field crops and drought in 2008, along with low-rainfall levels in late 2008, which impacted on the fodder and water resources which Bedouin had for their livestock³. In order to address the additional strain brought about by the winter frost the HRF endorsed and funded five projects addressing the winter needs for fuel and shelter of the Bedouin community across the West Bank for a total of \$456,817. Kerosene fuel for heaters and firewood for heating and cooking purposes, along with some plastic sheeting, were delivered to an estimated 4,411 Bedouin households across the West Bank. On average 400kg of firewood with a market price of roughly 300 NIS (695 NIS per M/T)⁴ was delivered to each household. An evaluation of one of the projects shows that this accounted for 18% of total household needs in terms of fuel for heating and cooking⁵.

A number of lessons were taken from the implementation of the frost response projects. The projects were not without their problems particularly regarding the quality and quantity of wood with one agency being required to re-distribute fire wood having initially distributed poor quality wood. Internally OCHA began to look at how prevalent the need for firewood in winter was among the Bedouin communities and whether the blanket distribution of firewood across the West Bank was actually inflating the market price for wood and making it more difficult for vulnerable families to procure their fuel requirements. In late 2009, OCHA made a decision not to initiate a winter needs response for all herder communities across the West Bank, given the experience from previous years and based on a general assessment that the needs and vulnerability were not as pronounced as in previous years. It was decided to continue to monitor the situation closely and if the winter weather became particularly severe, leaving some communities vulnerable, to initiate a targeted response.

Return of displaced populations

Towards the end of 2009, the HRF supported a project implemented by the Rural Centre for Sustainable Development (RCSD) which supported the Bir al-Idd community in the southern Hebron hills with shelter for the community and their livestock. The community targeted was granted permission, following a decision by the Israeli High Court in October, to return to their ancestral land in the southern Hebron hills after ten years of displacement. The years of displacement had left them in deep poverty and without the means to set up the basic shelters necessary for them to re-establish themselves on their lands. The HRF project provided shelters for nine families and their livestock in addition to animal fodder which also allowed the community to safeguard their livelihood as herders from the severity of winter in the south Hebron hills.

³ OCHA Humanitarian Monitor December 2008

⁴ ACTED Final Evaluation Report on HRF project HRF/OPT/0355/032

⁵ *Ibid.*

Water projects in West Bank

Lower than average rainfall in the West Bank over the last number of years has left many vulnerable communities facing conditions of drought. The HRF supported a water tanking project in southern Hebron with the Swedish Cooperative Centre (SCC) working in conjunction with a local NGO partner. The project contributed to easing the pressure on households in a number of predominantly farming communities in southern Hebron by tanking water directly to 866 households (over 6,800 people). In addition over 28,000 students across 61 schools and patients in 2 hospitals and 18 clinics also benefited from receiving water over a six week period in October and November 2009.

A common problem for remote villages in the West Bank is consistent access to safe, clean drinking water. Water often has to be tanked into areas and with the drought across the West Bank the costs of tanking in water rose prohibitively in some cases. The village of Ammouriya had relied on a local spring but it had become contaminated by sewage with tests showing that it posed a health risk to the community. The costs of tanking water to this village were high with the result that many households in the community resorted to using the contaminated spring water, putting their health at risk. The HRF supported a project implemented by the Palestinian Hydrological Group (PHG) to improve access to drinking water for Ammouriya village by connecting the village to the main water services. The project, when completed, will result in improved quality and quantity of water for the 400 people in the village, while workshops run for the community will have contributed to improved water resource management awareness and knowledge. The cost of water per household under the new system will be a quarter of the present cost of tanking the water, significantly lessening the financial strain on households in the community.

HRF projects in the Gaza Strip

The HRF funded twenty-nine projects in total in Gaza during 2009 with \$4,554,135. The vast majority of these projects emanated from humanitarian needs brought on by IDF operation Cast Lead in late 2008 and early 2009. In the month of January alone, eleven project proposals were endorsed by the Humanitarian Coordinator and processed by OCHA. This was a significant workload to get through but vital for the immediate humanitarian response needed at this time. Among the projects which were immediately supported were the supply of essential medical supplies and food and blankets for the hospitals dealing with the high numbers of casualties resulting from the Israeli “Cast Lead” military operation. HRF funding was also provided to buy fuel for the back-up water supply which was needed as a result of the frequent power outages.

Health

The health services in Gaza were already in a precarious situation prior to the Israeli “Cast Lead” military operation as a result of the blockade and internal political turmoil. Shortages in drugs and medical supplies, lack of maintenance for equipment and the health infrastructure, poorly trained health staff and a series of strikes by staff in the health sector all had a major impact on the system. During the Israeli “Cast Lead” military operation, 15 hospitals and 41 primary health care (PHC) clinics in the Strip were damaged and 29 ambulances were damaged or destroyed. Access to health care was severely restricted and hampered by security constraints with an estimated 40% of chronically ill interrupting their treatment, putting further strain on the health services following the ceasefire⁶.

The HRF funded six projects in the health sector in Gaza for a total of \$1,146,141, with five of these projects being approved and receiving the first installment of funding during the month of January.

⁶ Gaza Strip: Initial Needs Assessment 16 February 2009. WHO

Four of the projects focused on procuring medical supplies and equipment for hospitals and clinics in Gaza. Supplies were already short prior to the military operation when over 20% of items on the essential drugs list were out of stock in the Central Drug Store⁷. The following were the key results of the five projects initiated in January:

- WHO procured and delivered 25 surgical kits to 5 Ministry of Health (MoH) hospitals in January, benefiting 5,000 people in surgical interventions.
- Solidarity International (SI) provided essential medical supplies and equipment support to nine Palestinian Medical Relief Society (PMRS) clinics and one PMRS hospital which assisted with the treatment of 600 people suffering chronic illnesses.
- HRF funding supported PMRS and their 4 PHCs and 2 mobile clinics to procure medical supplies which accounted for 55% of PHC equipment over a three month period (benefiting 7098 people), 60% of lab materials (benefiting 5,275 people), 15% of assistive devices (19 people benefited) and 7% of first aid kits to trained staff (23 people benefited).
- ACP supported the two Palestinian Red Crescent Society (PRCS) hospitals with equipment for the laboratories, the ambulance services and the Gynecological Department, which were used by 30,249 people over the period of the project.
- Islamic Relief provided blankets to 810 MoH hospital patients and food for a month to 1050 patients.

The HRF also supported a project implemented by Merlin which sought to strengthen the depleted blood bank network and infrastructure working in close coordination with the MoH and the Central Blood Bank Society (CBBS), which provides 15-30% of all blood products in the Gaza Strip. The infrastructure was overloaded during and immediately after Cast Lead and, though it managed to cope with the increased demands, it required major support to continue functioning. The project improved the infrastructure of the blood bank system with the supply of laboratory and other essential materials and support, through an international consultant, in creating a coordination system in the context of Gaza. The project also supported efforts to increase the profile and community awareness of the services.

Food Security

A joint WFP/FAO food security survey in November 2009 estimates that 60.5% of households in Gaza Strip were affected by food insecurity while another 16.2% of households were vulnerable to food insecurity⁸. The report also showed a higher prevalence of food insecurity in rural areas and among the non-refugee population. The HRF funded eight projects in the food security sector in Gaza for a total of \$1,260,459 targeting non-refugee families, largely in rural areas.

The restrictions on supplies entering Gaza over the last few years but in particular during and after Cast Lead has had a particularly severe impact on the poor in Gaza who are vulnerable to food price rises and food scarcity. Approximately 10,053 non-refugee vulnerable families, predominantly coming from rural areas, received food packages from projects implemented by national and international NGOs. These projects also benefitted 1,383 farmers in the Gaza Strip by purchasing their fresh produce for the food baskets, as well as 60 Gazan families who benefitted from the cash for work involved in preparing and distributing the baskets.

One of the strong recommendations coming out of the FAO/WFP food security survey was the need for continued support for poor farmers to food insecure household programmes given the high level of food insecurity and the need for continued production of fresh foods. The HRF funded projects enhanced the coping mechanisms of beneficiary families across the projects,

⁷ *Ibid.*

⁸ Socio-economic and Food Security Survey report November 2009. FAO/WFP

improving food security in identified vulnerable households, while also providing vital support to the local agricultural economy already under pressure.

Agricultural livelihoods

The blockade and Israeli military operation Cast Lead have had a devastating impact on the agricultural livelihoods sector in the Gaza strip. The military operation resulted in an estimated \$180 million in direct damage to agriculture related infrastructure and destruction of an estimated 17% of cultivated areas⁹. During 2009 Israel further reduced the Palestinian fishing zone, from six to three nautical miles from the shore, undermining the fishing catch which is located in deeper waters and impacting on the livelihoods of an estimated 3,500 families. Meanwhile the blockade affecting imports and exports has driven up agriculture production costs, reduced productivity and prevented rehabilitation of agricultural related infrastructure.

The HRF supported two projects in the agricultural livelihoods sector for \$295,255. Relief International undertook a project in Khan Younis and Rafah areas in southern Gaza which has involved the rehabilitation of 270 dunums of land for 216 farmers from impoverished households, women headed households and households whose livelihood was affected by the war. The project has allowed the beneficiary households to preserve their livelihoods and prevent them from slipping further into poverty. The HRF also supported a project by the Agriculture and Environmental Development Society (AED) with \$114,660 to repair boats and nets of fishermen, which were damaged during operation Cast Lead. Without the support of this project the 30 beneficiary families could have permanently lost their main livelihood with dire consequences for their economic situation.

Water, Sanitation and Hygiene (WASH)

Water and sanitation services across Gaza suffer from a lack of basic maintenance and development. Of the five WASH projects the HRF funded in Gaza, three dealt primarily with sanitation and waste removal issues which were posing serious health risks to people in Gaza. A project by COOPI, an INGO, dealt with the clearance of waste in Gaza city (over 23,400 tonnes) which had been building up for a number of months due to funding constraints and industrial disputes. The project had an immediate benefit for the estimated 540,000 inhabitants of Gaza city, while COOPI also succeeded in getting ECHO on board to fund a longer term project with CMWU.

Also in January 2009, the HRF provided funding to UNRWA for one months fuel support for water and sanitation services across the Gaza Strip immediately after Cast Lead. Through assisting local public service providers, UNRWA was able to help in preventing a possible large-scale public health catastrophe in the Gaza Strip and ensure adequate water and sanitation services at a critical time.

The third project dealing with sanitation was an Action Against Hunger, Spain (ACH) project which aimed at minimizing the health hazards from a malfunctioning wastewater plant in Beit Lahia as well as preventing the infiltration of poor quality effluent into the aquifer. The project benefited 298,125 people in four communities and towns which use the plant and are located in the surrounding area by reducing the exposure and risks to wastewater flooding from the plant as well as improving the quality of the effluent and improving safety features to prevent children and animals entering the plant area. ACH drained and cleaned two of the eight lagoons in the plant which were most in need of immediate rehabilitation, while CMWU have taken over the running of the plant and will undertake further cleaning and maintenance work needed over the medium term.

⁹ UNEP, Environmental Assessment of the Gaza Strip. September 2009

The HRF supported a project by GVC in middle Gaza which involved the distribution of water tanks to houses damaged during the Israeli military operation Cast Lead and to households hosting displaced people. A total of 1,066 households (8,000 people) received water tanks and training on water storage techniques and hygiene issues. The project has improved the capacity of these vulnerable households to access a sufficient quantity and quality of water.

HRF funding has also been provided to Polish Humanitarian Organisation (PHO) to improve the sanitation system in El Satar, in partnership with CMWU, in order to prevent wastewater being released into the open and seeping into the existing water supply. The project, which will benefit 12,000 people, is due to be completed in 2010.

Shelter

The Israeli military operation Cast Lead directly affected the shelters of an estimated 325,000 Gazans, with more than 3,500 homes demolished, an estimated 3,000 homes suffering major damage and a further 53,000 homes suffering minor damages¹⁰. UNRWA have led the response to the needs in terms of shelter. In the immediate aftermath of the military intervention the HRF funded a project by Care International for \$250,000 which supported 8,000 people (approximately 1,150 families) with plastic sheeting, winter and hygiene kits. The assistance contributed to the coping mechanisms of the targeted families to get through the winter months.

Psycho-social

The Israeli military operation Cast Lead had a profound effect on the mental well-being of residents of Gaza, which is likely to be felt for years to come. The killing and injury of family members, the destruction of homes, schools, health facilities and play areas, the mass displacement and inability to find safe shelter were shocking events leaving many in need of assistance to cope with the extreme stress. As part of the response to the related needs, the HRF supported two psychosocial projects with \$289,740 in funding.

One of the projects was implemented by UNIFEM in support of a local partner SAWA providing psychosocial support, particularly aimed at women and children, via a telephone helpline. The helpline was taking up to 2,500 calls a day at its height and the HRF project, which ran for 5 months provided for the training of 15 volunteers to provide basic counseling and guidance. It is estimated that the helpline was used by 100,000 people during the timeframe which served as an important outlet for those seeking guidance and support in the aftermath of the intensive military operation. UNIFEM continued working with SAWA following the HRF project, supporting the helpline and expanding it to provide psychosocial support for women, youth and children who are victims of different types of violence and upgrading the referral mechanism and networks.

The second project related to psychosocial support in Gaza, was implemented by the Gaza Community Mental Health Programme (GCMHP) which provided professional support and treatment through medication, physiotherapy, therapeutic sessions, home visits, and sessions in schools and kindergartens. Multi disciplinary field teams through therapy sessions, medication and referrals to GCMHP clinics handled 1324 cases during the project period of which 963 involved some improvement. Teams visited schools and kindergartens providing therapy sessions to 438 children, with 46 individual sessions which strengthened children's resilience and abilities to cope and interact. Training was also provided to school counselors, improving their knowledge and techniques in dealing with children's behavioral problems. GCMHP continued with a scaled back version of the programme with funding coming from Swiss Development Cooperation and the Dutch Government.

¹⁰ oPt CAP 2010

Protection and mine action

The HRF funded two projects by the Mines Advisory Group (MAG), which come under the protection sector, for \$245,336 in funding. The projects involved the identification and removal of UXOs as well as mine awareness training. The work resulted in the clearance of 204 buildings, while 45 schools could reopen following inspection and clearance of UXOs. Six routes were also cleared and able to reopen due to the work of the MAG teams. Mine awareness training was provided to 750 people, including staff in humanitarian agencies and rubble removal teams, which allowed the rubble removal and relief efforts to proceed.

The HRF supported the MAG project in the initial stages to allow the work to begin as soon as possible. Additional funding came in from other sources to continue the vital work MAG were undertaking, however in August/September they faced a funding gap which threatened to put a halt to this work. The HRF was again able to support the project for a period of a month thanks to the facility to strategically fill gaps in funding in an emergency response plan. MAG eventually secured longer term funding to maintain the essential programme.

Education

The blockade already had placed a stress on the educational infrastructure with restricted access for goods and materials preventing necessary repairs and expansions. Overcrowding of schools was leading to many schools operating a shift system to accommodate the growing number of children. On top of this situation the military operation led to the damage of 280 schools and kindergartens with 18 facilities destroyed (including 8 kindergartens)¹¹. The HRF funded American Near East Refugee Aid (ANERA) to rehabilitate 10 kindergartens across the Gaza Strip which had been damaged in Cast Lead, repairing classrooms and playgrounds as well as rehabilitating water and sanitation systems. The result of ANERA's work is that 1,779 children can now go to Kindergarten in an environment more conducive to learning with clean and safe educational facilities, protected from the elements and clear of the visual reminders of the conflict.

Disability

The rise in household food insecurity, the devastating impact of the blockade and military operation on livelihoods and the rising unemployment all have had a particularly sharp impact on persons with disabilities (PWD) and their families and care-givers, placing added stress on their economic situations and general coping mechanisms. In the aftermath of Cast Lead, many people were left with complex injuries and permanent disabilities which put further burden on already overstretched health systems. According to Handicap International (HI) figures, of the 1,011 persons with injuries registered in the HI database, 11% reported permanent disabilities as a result of the war¹².

The HRF supported two projects focusing on the emergency humanitarian needs of people with disabilities for \$198,879. One project was implemented by the Society for Physically Handicapped People (SPHP) providing for urgent needs of PWD at a particularly vulnerable time economically for households following operation Cast Lead. SPHP provided diapers and fortified milk to 1,572 PWD over a four month period contributing to reducing the economic strain on these particularly vulnerable and poor households. Beneficiaries included those permanently disabled as a result of injuries sustained during the military operation.

The second HRF project focusing on PWD was implemented by the National Society for Rehabilitation (NSR) and focused on identifying those who sustained disabling injuries during Cast Lead and providing them with rehabilitative care and referrals to other services. NSR field teams,

¹¹ OCHA Special Focus Report August 2009, Locked In: The humanitarian impact of two years of blockade on the Gaza Strip.

¹² Handicap International 2009. Data gathered from Handicap International Disability Support Centre.

including physiotherapists, conducted home visits to 1,675 people injured during the war, undertaking needs and priority setting assessments. They identified 359 people with permanent disabilities and a further 710 who required some physiotherapy for their injuries. The field teams followed up by providing physiotherapy sessions according to the needs they identified as well as training for 171 family members of PWD to follow up on the physiotherapy exercises. The project contributed to the first stage of support for those coming to terms with the physical and mental trauma following their injuries in the war.