



The Palestinian Counseling Center

**A Rapid Assessment of the Needs of 14 Marginalized Areas in the
West Bank during the COVID-19 Pandemic**

May 2020

This paper reports the results of a needs assessment carried out by the Palestinian Counseling Center (PCC) in 14 areas in the West Bank, Jerusalem, and Area C: Silwan, Al-Issawiya, Al-Tur, Kafr Aqab, Qalandia, Beit Sakarya, Beita, Duma, Qaryout, Jayyous, Qalqilya, Alfasayel, and Alzbaidat. The PCC collected information about the 14 areas included in the needs assessment in order to identify the priorities of the populations and contribute to building sector plans to meet their needs. The necessity of this needs assessment arose from the spread of the COVID-19 pandemic, which led to a declaration of a state of emergency on 5 March 2020 and a total lockdown on 22 March. This has affected the income of over 453 thousand families who may not be able to meet their basic needs if the lockdown continues, with daily-wage workers and workers in Israel being the most vulnerable in this situation.

14 phone interviews were conducted with Community Based Organization (CBO) representatives in the target areas. The needs of each area were collected at multiple levels, including health, mental health, environmental, and educational needs.

Summary of Findings

See Annex 1 for details of each region's need

✚ The results indicates that the residents of the regions have new, emergent needs resulting from the spread of the COVID-19 virus pandemic. In addition, there are needs that existed before the emergency, especially among the communities living in the Jordan Valley, such as Alzbaidat and Alfasayel. Often these needs intersect, leaving the most marginalized areas and the poorest families the most affected and vulnerable in the event of the wider spread of the pandemic and the continued deterioration of the economic situation.

✚ Each area is unique in terms of the currently available services and resources, needs, and number of economically disadvantaged families. Therefore, it is necessary to tailor the interventions for the unique situation of each region.

✚ The occupation contributes to the escalation of the current crisis directly through repeated army raids and political arrests. The occupation also contributes indirectly through the imposition of dangerous environmental conditions in Area C, which lacks the basic health essentials of safe drinking water, sewage disposal, cleaning and garbage collection services, and infrastructure.

✚ Despite the many challenges, the assessment shows the emergence of community efforts in the form of emergency committees and volunteers aimed at meeting the needs of the population. This grassroots organization ranges from garbage collection to the provision of food and disinfectants. Most of these emergency responses, however, do not address the psychosocial needs of the residents.

Conclusions Related to Specific Areas of Need:

- ✓ **Health needs:** Many regions lack health services and resources such as ambulances, stockpiles of medications, and medical teams. This poses a risk in the event of an increase in the number

of COVID-19 infections. This was especially noticeable in the Jordan Valley and Qalqilya governorate (Qaryout, Duma, Hableh, Jayyous, Alfasayel, Alzbaidat, Qalqilya, Beit Sakarya), while the areas of Jerusalem Governorate do not face this problem.

- ✓ **Mental health needs:** The needs assessment demonstrates that the pandemic and state of emergency affects the mental health of individuals of all age groups and the family as a whole. This is a result of the deteriorating economic situation and the inability of parents to meet the basic needs of the family. The presence of all family members inside the home leads to tension between the family members and familial conflict. These stressors are exacerbated by the general fear of contracting the virus. Furthermore, the occupation continues its repressive practices, especially in Al-Issawiya, which increases tension and fear. These pressures are manifested in the form of excessive movement and violence among children, while the youth resort to risky behaviors to cope with the free time resulting from the interruption of schooling.
- ✓ **The availability of psychosocial services in the area:** Alzbaidat, Alfasayel, Qaryout and Beita have the least access to psychosocial services, as there are no mental health providers in the area. In Silwan and Al-Issawiya, there are some mental health professionals living in the area and phone consultations are available. In Kufr Aqab, Qalqilya and Jayyous, there are many counselors and counseling students who are not working at the moment and in Kufr Aqab, Qalqilya and Silwan, students expressed their readiness and availability to volunteer to provide psychosocial services. While emergency committees play an important role in providing relief and material aid, their services do not include psychosocial support.
- ✓ **Water needs:** The water situation was not affected as a result of the pandemic, with the exception of the inability of some families in Silwan (50 families), Duma, and Beit Sakarya to pay water bills. This is a priority of work due to the importance of providing clean water to the population.
- ✓ **Environmental needs:** There is a disparity in environmental needs between the regions. The most polluted are in Area C. Residents of Alzbaidat, Alfasayel, and Qaryout are at risk of diseases due to the lack of proper sanitation infrastructure. Kufr Aqab has a shortage of garbage disposal vehicles and workers, which may contribute to the spread of the pandemic among the population. Most areas have volunteer committees that assist with garbage collection and disposal, disinfection, and meeting some of household needs of residents. The findings show that poor families in need of food supplies also require cleaning and disinfectant products to protect themselves from infection, with the highest need being in Alzbaidat and Alfasayel.
- ✓ **Housing Needs:** Most areas suffer from overpopulation due to the lack of space for expansion (Silwan, al Issawiya, AlTur, Qalandia, Kufr Aqab and Beit Sakarya) or by occupation-related ban on construction (Alfasayel and Alzbaidat). Overpopulation increases the risk of infection and creates familial tensions through confining family members in close quarters.
- ✓ **Source of income:** Most professions and primary income sources in all the regions have been affected by the state of emergency. Some areas of work are still available for women and men, including agriculture, manufacturing, food processing, grocery, governmental employment,

and livestock. Food prices remained the same in most areas, with the exception of Alzbaidat, Alfasayel, and Beit Sakarya, where there was a noticeable increase in prices.

- ✓ **Protection:** In the vast majority of areas, cases of violence and abuse were reported, especially against children and women. Tragically, during the interview process, one girl died as a result of violence in Alfasayel. Increased violence can be linked to increased economic and psychosocial pressures and hardships faced by families and residents of the areas. Available protection mechanisms vary greatly between the areas: in Jerusalem areas under the jurisdiction of the Jerusalem municipality, NGOs and neighborhood committees provide the protection, while in areas that are under the control of the Palestinian Authority, residents mainly resort to the police in cases of violence. Additionally, clans and popular committees play a major role in providing protection in areas such as Qalandia and Altur. In areas such as Beita and Kufr Aqab, which lack protection mechanisms, this is priority area of work in the light of the increase in the cases of violence and abuse resulting from psychological and economical stressors.
- ✓ **Coordination of provision of needs:** The results show that all the areas have neighborhood and emergency committees that coordinate and meet some of the residents' needs, except for the Alfasayel and Alzbaidat, where the local council takes on this role.
- ✓ **Education:** The educational process has been greatly affected by the pandemic and the state of emergency as students at all levels are learning remotely through the Internet and computers. The CBOs in some areas are helping families get accustomed to online learning by sending instructions using texts and brochures. Distance learning creates major barriers for economically disadvantaged households which lack the necessary technology to continue learning online. In Beit Sakarya and Alzbaidat, there are additional problems related to internet access as the available networks are weak and keep disconnecting. It is necessary to find alternative ways to educate low-income children who do not have access to devices or to provide them with the necessary devices and internet access. This is important especially because even in normal circumstances, this group of students is often disadvantaged academically and the current situation may widen the learning and achievement gap between them and more materially privileged students.

Recommendations

- ✓ Provide phone counseling to all age groups, as psychological and social pressures are high. This need is higher for women who need information on how to deal with stress, their children, and husbands. Currently, these services are only available in Jayyous, Alisaweyyeh, and Silwan.
- ✓ Provide recreational activities for children and adolescents to reduce feelings of boredom and stress.

- ✓ Utilize the availability of local counseling/mental health students and professionals by recruiting them to provide telephone consultations in their areas (especially in Jayyous, Qalqilya, and Kufr Aqab, where there is availability and interest in volunteering).
- ✓ Assist families in Silwan, Beit Sakarya and Duma in paying their water bills.
- ✓ Provide poor families in all the areas with food and cleaning/disinfectant supplies.
- ✓ Protection is one of the priorities in areas without protection (Kufr Aqab and Beita), as it is expected that the level of violence will increase during the emergency period as a result of the increased psychological and economic pressures, especially against women and children.
- ✓ Emergency and neighborhood committees are present in most regions and can be important resources for organizations seeking to provide interventions. In Alfasayel and Alzbaidat, coordination efforts should be with the local councils because there are no emergency committees there.
- ✓ It is necessary to find alternative ways to educate children, who have no access to devices or the internet; both of which are necessary to take part in the online learning provided by MoE as an alternative to classroom schooling. This is critical so that these children do not fall behind their peers academically.
- ✓ Provide separate housing for workers in Kafr Aqab, Qalandia, Alisaweyyeh and Silwan.

Introduction

This paper reports the results of a needs assessment carried out by the Palestinian Counseling Center (PCC) in 14 areas in the West Bank, Jerusalem and Area C, in Silwan, Al-Issawiya, Al-Tur, Kafr Aqab, Qalandia, Beit Sakarya, Beita, Duma, Qaryout, Jayyous, Qalqilya Alfasayel, and Alzbaidat.

The necessity of this needs assessment arose from the spread of the COVID-19 pandemic that has affected countries worldwide including Palestine, prompting the Palestinian government to declare a state of emergency since 5 March 2020. This led to restrictions on movement between governances, suspension of formal education and turning to online education, restrictions on public gatherings and events, and mandatory quarantine on those travelling into the country. This turned into a total lockdown throughout the West Bank, allowing only essential services to continue to operate, as of 22 March.

The outbreak of the COVID-19 virus has had serious global economic repercussions as countries reduced trade relations to a minimum to prevent the spread of the virus. This is catastrophic for a country like Occupied Palestine that has no control over its borders and whose economy is mainly dependent on foreign aid and assistance. With the closure of the military barriers and checkpoints across the Occupied Palestinian Territories, thousands of families who depend on work inside of Israel have lost their main source of income. Additionally, private business owners, thousands of tourism workers, and those who receive wages on a daily basis have also stopped working. The Palestinian Central Bureau of Statistics estimated in a press statement that over 453,000 workers were affected and about 100,000 enterprises stopped working in Palestine.¹ If the lockdown continues for more than two months, thousands of families will no longer be able to meet their basic needs. This will lead to food insecurity and lack of health supplies, putting these families at an increased risk of contracting COVID-19. The expected scenario for the upcoming period is a major disturbance in daily life, an increase in the level of unemployment, loss of income for a large proportion of families, food insecurity, and the emergence of psychological and social problems.

The needs of each area were collected at multiple levels, including health, mental health, environmental, and educational needs using phone interviews with CBO representatives from the target areas.

Goals of the Needs Assessment:

- 1- To obtain information about the basic needs of Palestinian families in the targeted areas during the state of emergency following the spread of the COVID-19 epidemic.
- 2- To assist community-based organizations (CBO) in developing and crystallizing response intervention plans.
- 3- To direct intervention plans towards the needs of the local populations in the target areas.
- 4- To contribute, in cooperation with various institutions and sectors, to meeting the needs of the populations in the areas targeted by this needs assessment.

¹ http://www.pcbs.gov.ps/portals/_pcbs/PressRelease/Press_Ar_13-4-2020-lab.pdf

Methodology

Selection of the Areas: The areas of Silwan, Al-Issawiya, Al-Tur, Kafr Aqab, Qalandia, Beit Sakarya, Beita, Duma, Qaryout, Jayyous, Qalqilya, Alfasayel, and Alzbaidat were targeted in this needs assessment. The areas were selected based on their high levels of vulnerability and PCC's access to them:

Many of these areas are classified as Area C, meaning that they are under the jurisdiction of the Israeli occupation and the Palestinian Authority is prohibited from providing services. However, the Israeli authorities neglect these areas and restrict local development, leading to severe shortages in basic services and infrastructure. As for areas not classified as Area C, populations there are subjected to political violence from settlers, checkpoints, and confiscation of land to settlements. Regions located in Jerusalem inside the Wall (such as Al-Tur and Silwan) receive minimal services and funding from the Jerusalem municipality and are constantly subjected to police brutality and home demolitions.

A second factor taken into account when selecting the areas was PCC's ability to reach them and provide services there in the future, either directly or indirectly through local partners such as CBOs.

Data Collection Procedure: The research team consisted of 5 PCC counselors who have previously worked in the target areas or have contacts there. Each team member conducted 2-3 interviews with CBO representative over the phone.

In total, 14 phone interviews were conducted with CBO representatives from each area. The interviews lasted between 1 and 1.5 hours. CBO representatives were chosen because they have extensive knowledge of the area and its needs due to working there for years, and because often they are residents of the areas themselves. Additionally, most are in the local emergency committees and would be able to answer all of the interview questions.

Interview Protocol: The interview protocol was developed by reviewing literature on collecting data in emergency and crisis situations (find attached in Appendix 2). The interview consisted of 3 sections, as follows:

1. The first section collected preliminary information about the organization and the person participating in the research.
2. The second section contained open-ended and closed-ended questions that collected information on the living conditions, available services, and the needs of the population as follows:
 - Collect general information about each region, such as location, political situation, population, income rate, etc.
 - Identify the party that provides the area with health services and learning about the health needs of the population.

- Identify the psychological and social problems that the people of the region observe or hear about.
- Learn about the environmental situation, sanitation infrastructure, which party is responsible for waste disposal. And provision of clean drinking water. Additionally, identify the availability of disinfectants and cleaning products and the number of families in need of those items.
- Obtain information about the food situation, the sources of food, and its availability in the different regions.
- Obtain information about livelihoods and what areas of work are still available for the population in order to identify the most affected sectors economically.
- Identify protection and coordination mechanisms: levels of violence during the emergency and the how the CBOs respond to them.
- Determine which party is responsible for coordinating and managing residents' immediate needs, the party to contact in cases of emergency, and the names of institutions currently providing services in the area.
- Gather information about education and the responsible party for education in the region. Learn what measures are taken to continue education at the present time, the needs in education, and gather information about the financial status of the CBOs.

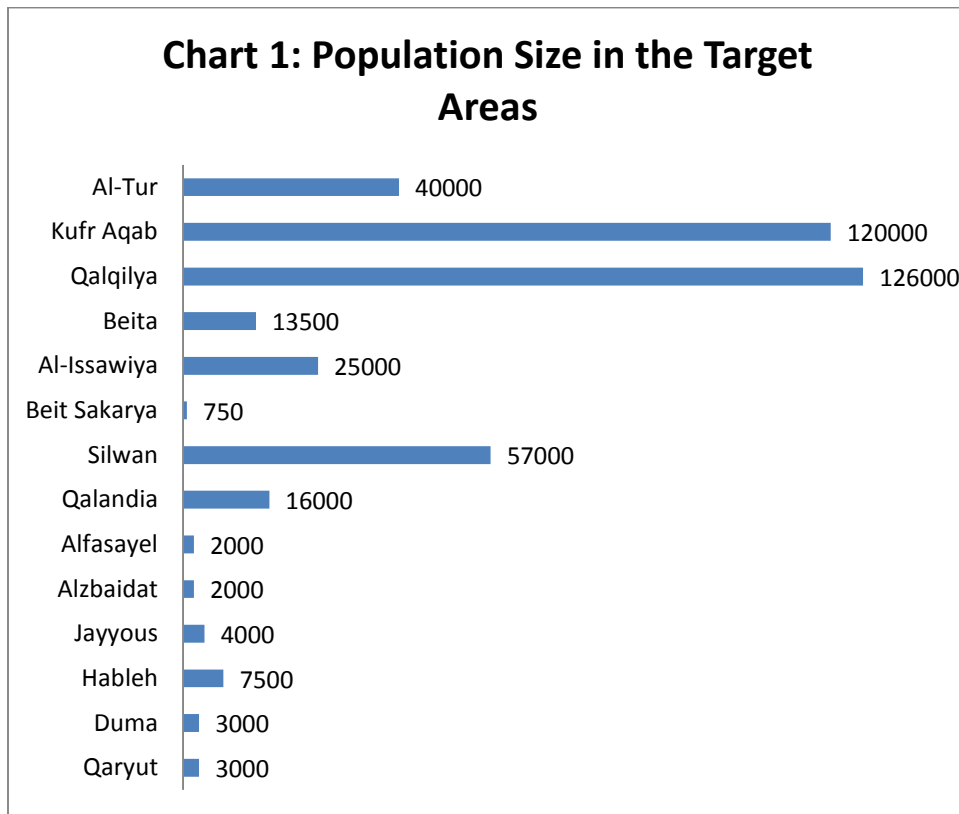
3. The Third section contains general open-ended questions that aim to assess the most important needs of children, women, and families in the areas.

Analysis: The team compiled the interview transcripts from each region in one table. For example, the participants' answers to the questions related to psychological services in each region were grouped together to make the analysis easier. The answers to each of the previously mentioned fields were summarized and any common issue needs, and difficulties were identified. Finally, the answers of the last section (open-ended questions) were summarized in a table (*see Appendix 1*) where the needs of each of the regions were separated in order to facilitate building an intervention plan and meeting the specific needs of each of the regions.

Results

See Annex 1 for details of each region's need

- The preliminary results indicated that the population of the targeted areas ranged between 750 (Beit Sakarya) and 126,000 (Qalqilya), and the following chart shows more accurately the population as obtained from the CBO representatives interviewed:



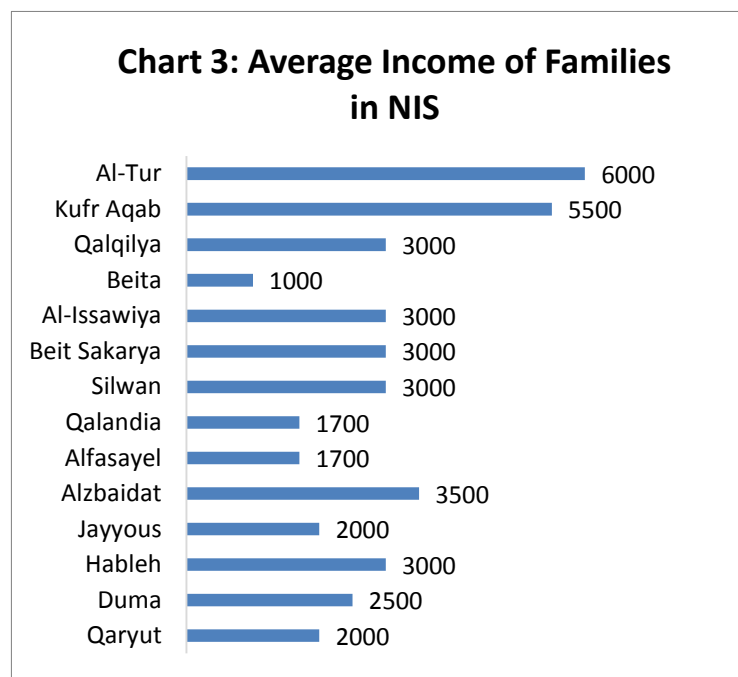
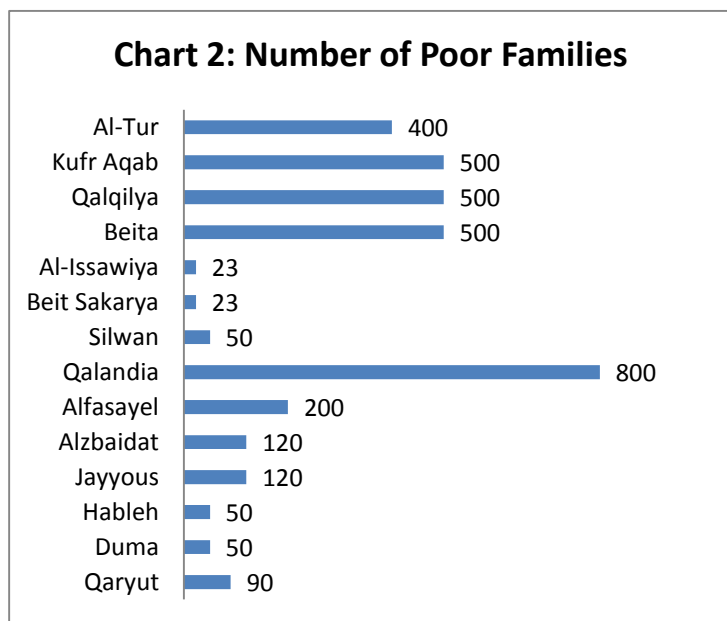
- The average size of families in most regions is between 5-7 members, while in Alfasayel most families have 12 individuals.

- The ratio of males to females in most regions was 55% female to 45% male.

- The number of poor families ranged from 800 families in Qalandia camp to 23 families in Beit Sakarya and Al-Issawiya (see chart 2). These numbers are according to the CBO officials' estimates. These numbers include families who cannot meet basic needs such as food, special needs for children (milk/diapers), or housing needs (for example, sterilizers/electricity/water).

- The average income ranged between 6,000 shekels and 1,000 shekels. (See Figure 3)

- 11 of the regions are considered rural areas and 4 urban areas.



➤ **Health**

- The results indicate that 9 regions are affiliated with the Palestinian Ministry of Health in receiving health services, 3 regions are affiliated with the Israeli Ministry of Health, and two regions are affiliated with UNRWA.

- 6% of the population suffers from chronic diseases and 15% of the population is elderly.

- The results indicate that Alfasayel and Alzbaidat do not have nearby hospitals; the nearest hospital is the Jericho hospital, which is 55 km from the areas

- Most areas have pharmacies except Beit Sakarya, where there are no pharmacies and the available clinic is small and does not have medical staff on a daily basis.

- Qaryout and Duma are areas that suffer from neglect in the provision of health services, and even the available services are simple and do not meet all residents' needs. There is only one or two nurses in the clinic and the doctor works once a week. There is not laboratory, no medical follow-ups and often shortage in medications.

- As for the number of recorded cases of COVID-19, at the date of data collection, there were 47 cases in Silwan and 4 in Qalqilya.

- With regard to the availability of ambulances, the results indicate that there is no ambulance in the following areas: Qaryut, Duma, Hableh, Jayyous, Alfasayel, Alzbaidat. They transport patients in their own cars.

- Qaryut, Duma, Hableh, Jayyous, Alfasayel, Alzbaidat, and Qalqilya lack medicine stockpiles.

➤ **Mental Health**

- Most of the interviewees expressed that social and economic conditions have become more difficult due to an increase in unemployment and in the number of families with no source of income. This has a direct impact on the family, leading to heightened tension and anxiety in family relations.

- There is a high level of anxiety among the adult group. Fears of illness or the contraction of the coronavirus by a family member are high.

- With regard to children, some families have noticed an increase in excessive movement in their children, violence between siblings, and in some regions, academic setbacks. The state of emergency and the lack of devices and internet needed to continue education will negatively affect children's educational performance.

- Some areas such as Issawiya are still subjected to violence from the occupation, thus adding an additional layer of fear. There is an increased fear of the virus and increased tension with the escalation of attacks from the occupation. The children in the area are constantly subjected to traumatizing events, such as political violence and house demolitions, among many others.

- Adolescents face increased psychological pressures and feelings of boredom due to the free time they now have since schools closed. In Alzbaidat and Alfasayel, where the youth already had a lot of free time before the pandemic, this was exacerbated by the emergency situation, leaving the parents concerned for their children's wellbeing. In Qaryut and Duma, parents noticed an increase in impulsive, violent, and dangerous behaviors amongst youth.

- Some participants mentioned more familial problems and tensions as a result of staying confined together for long periods of time.

- Women consider the lack of basic needs for the family one of the most important issues that negatively affect their mental health, and they believe the availability of these resources will make them feel comfortable and safe.

- Women need telephone counseling services that help them obtain information to deal with stress and deal with their children and husbands.

- As for the elderly, most of the participants expressed that they have a lot of free time, leading to feelings of boredom.

➤ **Availability of Psychosocial Services**

- The results indicate that psychosocial services are not available in most regions. The results of the interviews showed that people in Qaryut, Duma, Hableh, Jayyous, Alfasayel Alzbaidat and Beit Sakarya had to travel long distances in order to obtain psychological support services even in normal nonemergency conditions.

- Participants confirmed in the interviews that there is a need to provide telephone-counseling services for all age groups, as psychological and social pressures are increasing.

➤ **The availability of psychological and social counselors**

- There are some areas where there are no specialists or psychological counselors, namely Alzbaidat, Alfasayel, Qaryut, and Beita.

- In Silwan, it was found that there are 4 psychologists and 34 students studying in universities who can volunteer if asked. Telephone consultations are available to the population as a means of psychological and social support. In Al-Issawiya, 4 psychologists are available from the area; in addition, phone consultations are available to the residents. In Jayyous, there are 4 psychologists from the area, and in Kafr Aqab it is possible to create a psychological support team consisting of 45 mental health professionals.

➤ **Sources of Support**

- Many areas have emergency committees, which were considered by the participants as source of support in light of the current crisis, which offer material assistance and relief efforts but do not offer psychosocial support for families.

- Many school counselors communicate with the families and CBOs to provide them with support.

- There are some areas, such as Alfasayel and Alzbaidat, that do not have psychosocial services.

- Some areas, such as Al-Tur, rely on organizations that execute programs in the area by referring people to these organizations. They also contact the PCC to receive phone consultations when needed.

➤ **Water-Related Needs**

- Participants in all the areas indicated that there are no issues with the water supply during this period, as there are no changes in the availability of water.

- Participants in Duma, Alfasayel, Alzbaidat, and Beit Sakarya indicated that they mostly face issues with the water supply in the summer rather than in the winter.

- In Silwan specifically, there is an inability to pay water bills. There are 50 families that require assistance in paying the bills. There is also a need to provide poor families in Duma and Beit Sakarya with money to recharge their water supply, in addition to providing regular maintenance of the available water networks.

- There is a need to increase the water supply in the summer in some areas such as Duma.

- In some areas there is a need to provide water tanks, connect the wells to electricity, sterilize the wells, and provide an artesian well, in addition to a need for electric water pumps and wells that collect rainwater.

➤ **Environmental Situation**

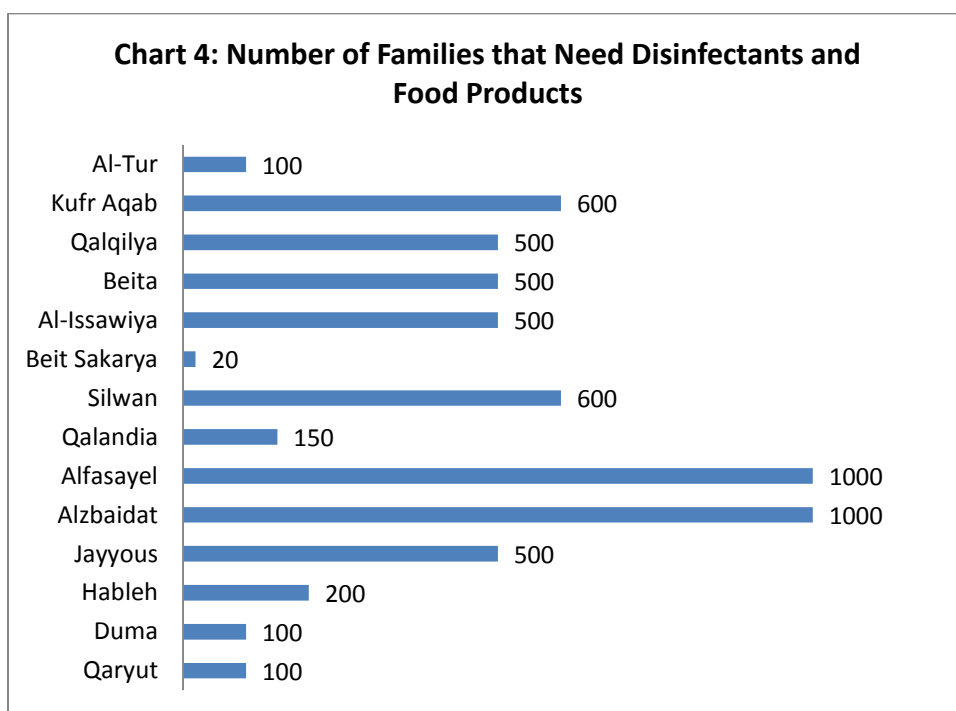
- There is a disparity in the environmental needs of the residents of the regions. Some areas, such as Alzbaidat, Alfasayel, Duma, and Qaryut, suffer from pollution due to the lack of a proper sewage

system. Residents of these areas resort to cesspits, which make the area more susceptible to diseases with the spread of insects such as mosquitoes. Kafr Aqab lacks garbage collection workers and trucks.

- The UNRWA is responsible for maintaining hygiene and waste disposal in refugee camps, in addition to the efforts of local committees in disinfection and cleaning.

- Most of the participants indicated that there are committees of volunteers that help with in getting rid of garbage, disinfecting the areas, and responding to the needs of the residents of the regions.

- The number of families that need disinfectants and cleaning materials ranges between 20 and 1,000 families, with the lowest number of families in Beit Sakarya and the highest in Alzbaidat and Alfasayel. The results also indicated that these families also need food products, as they suffer from long-term poverty or loss of income due to the lockdown.



➤ Food-Related Needs

- The regions have grocery stores where food products can be purchased and there is no shortage of food supplies. Residents may lack access to food in the case that they face long-term poverty or loss of income due to lockdown. (See chart 4 for number of families in need of food products)

- Some committees in the regions, as well as some CBOs, collect donations and distribute them to families in need.

• **Housing Situation**

- In areas such as Silwan, Issawiya, Al-Tur, Qalandia, Kufr Aqab, and Beit Sakarya, houses are crowded due to the lack of space to expand or to the lack of house permits. There is a need to supply separate housing for workers in these areas.

- Qaryut, Duma, Beita, and Qalqilya do not face housing problems and there is no need to provide housing areas for workers.

- Alfasayel and Alzbaidat need housing since building and development is banned by the Israeli occupation.

➤ **Sources of Income**

- In Alfasayel, Alzbaidat, and Beit Sakarya, available work for men and women is agriculture. Moreover, there is a noticeable increase in food prices. In addition, the most economically affected sector is agriculture. These areas need projects focusing on processing of the agricultural products.

- As for Qalqilya, the areas of work that are still available for women and men are in food and agricultural production and the production of cleaning products. There is no increase in food prices. Shops, workers, craftsmen, and transportation are the most affected sectors. We recommend implementing projects that provides products that are not available or in shortage due to the lockdown.

- As for Jayyous and Hableh, sources of income are grocery and food stores, agriculture, and government employment. Food prices in these areas have remained the same. The most affected sectors are agriculture and trade. Residents of these areas can possibly participate in volunteer projects.

- As for Duma, Beita, and Qaryut, available work is in agriculture and livestock. These workers are the most affected from the pandemic. Farming is minimal in the area and so is food processing. There are currently projects to build greenhouses, restore land, grow crops, and raise livestock, in particular sheep. These are all projects in which the locals can take part in.

- As for Kufr Aqab, Qalandia, and Altur, the only available fields of work are in grocery and food stores. All sectors, except the food supply sector, have been affected by the pandemic.

➤ **Protection Needs**

- In Silwan, Issawiya, Beita, and Beit Sakarya: CBO representatives observed an increase in violence between people and in particular against women and children. Mada Center and the Yad Wahedah institution provide assistance through the referral of the identified cases to specialized organizations and neighborhood committees such as the Silwan Clans Association, since the Israeli police neglects residents of these areas and discriminates against them. As for Beita, cases of violence are solved individually and there aren't any protection mechanisms in the area.

- In Qalqilya cases of violence were reported against women, children, and individuals with COVID-19. When cases of violence are identified, the Qalqilya police and the Family Protection Center are contacted. The volunteer committees of the Fatah movement also provide protection.

- Beta, Beit Sakarya, and Al-Issawiya are in need of protection from settler attacks, as there are almost daily attacks targeting the residents.

- As for the Alfasayel area, the results showed that there is violence and abuse of a particularly high level against women. Tragically, a girl died as a result of the violence two weeks before the interview. As for Alzbaidat, violence against children is the most visible type of violence.

- In Altur, no cases of violence are being reported, but if any cases of violence are identified the PCC is contacted for assistance. Protection is provided in these areas by the clans and there are currently no protection-related needs in this area.

- In Qalandiya, there are cases of violence in general and against children and women in particular. When cases are identified, the center refers them to the partner. The local popular committees also get involved in protection.

- As for Kufr Aqab, cases of violence are being monitored by Jcan center. If any cases are identified, Jcan center gets in contact with the Ministry of Health and the Ministry of Social Development. The area lacks parties that provide needed protection to victims.

➤ **Coordination of Provision of Resources**

- The results indicate that all areas, except Alfasayel and Alzbaidat, have neighborhood and emergency committees that coordinate and provide the necessary needs for the residents. As for Alfasayel and Alzbaidat, the region's council is the party responsible for the coordination.

➤ **Education**

- The results indicated that the educational process was greatly affected by the pandemic and the state of emergency. Students at all levels are learning remotely through the use of Internet and computers.

- CBOs in all of the areas indicated that there is a need for to provide children who have no access to technology in low-income households with devices and internet to enable them to continue their education through online learning.

- Participants in Beit Sakarya and Alzbaidat indicated that in addition to needing computers, better internet is needed as the internet network there is weak and disconnects often.

- The education needs in the Jayyous region were related to providing equipment for children. There were also needs related to the maintenance, restoration, and rehabilitation of schools, for example the expansion of the Jayyous Girls Secondary School.

- In Qalqilya, the UNRWA and the Ministry of Education are responsible for education. The measures being taken to continue education at the present time are to broadcast electronic lessons for students of all academic levels and having electronic worksheets. The area needs free internet services for the residents, as well as electronic devices to facilitate remote learning. CBOs in the area are instructing families on remote learning through messages, pamphlets, and public announcements.

See Annex 1 for details of each region's need

Challenges

5 of the 14 areas that participated in the needs assessment already had a needs assessment done by the UNDP, but the assessment was limited to the CBOs and did not include the needs of the residents and the society; therefore, this needs assessment is considered the first to be done in most of the targeted areas.

The needs identified by this study are all based on the opinions, knowledge and experience of CBO representatives. This is meant to be a rapid needs assessment during times of emergency.

Annex 1: The specific needs of each area as indicated by the residents (open questions)

Area	Residents Needs			
	Families/Area in general	Children	Women	Adolescence/Youth
Silwan	Providing disinfectants and detergents for 600 families. Educating families about the impact of violence on children and women. Assisting families in coping with	Providing children with devices for remote learning – especially to 50 families who are in need. Providing 500 families with toys.	Providing women with phone consultations to assist them in dealing with their children and stress.	De-stress activities and psychosocial support

	stress and using their time well.			
Alzbaidat	<p>Providing work opportunities.</p> <p>detergents and Disinfectants materials.</p> <p>Food supplies.</p>	<p>The need for a safe space for the children to play.</p> <p>Providing devices for education and remote learning.</p>	<p>Provision of activities that target women.</p> <p>Providing women with phone consultations to assist them in handling their children and stress.</p>	<p>The need to provide space for the youth.</p> <p>Assisting them in utilizing their free time and energy positively</p> <p>Providing entertainment and sport activities compatible with their ages.</p>
Jayyous	<p>Providing detergents and disinfectant materials.</p> <p>Conducting maintenance, restoration and rehabilitation work at schools, especially the Jayyous Girls Secondary School</p> <p>Families in need of financial aid and in kind assistance and job opportunities</p> <p>There are 50 families that need to be provided with</p>	<p>Rehabilitation and development of a park for children, as there is no place to play.</p> <p>Providing educational activities for the children.</p>	<p>Small income-generating projects such as - preserving and storing vegetables- an Arabic bakery</p> <p>Providing them with educational and awareness raising lectures.</p> <p>Women empowerment and self-care programs</p>	<p>Establishing a cultural and social center for youth.</p> <p>Targeting the youth through awareness programs.</p>

	<p>water. water tanks, and sterilization material to clean the water wells.</p> <p>Providing support to families that suffer from violence.</p>			
Hableh	<p>Disinfectants.</p> <p>Projects for families that suffer from domestic violence.</p> <p>Provide financial support for poor families so they can meet their basic needs.</p>	<p>Devices for remote learning.</p> <p>Stress-release and recreational activities for children.</p> <p>Child protection programs</p>	<p>De-stressing/ awareness groups.</p> <p>Providing them with phone consultations to assist them in handling their children and stress.</p>	<p>Utilizing free time.</p> <p>Youth-empowerment program.</p> <p>Finding job opportunities.</p>
Douma	<p>Protective suits for the volunteers, and face masks for the residents.</p> <p>Projects for families that suffer from domestic violence.</p> <p>Disinfectants and cleaning supplies.</p> <p>Food supplies.</p> <p>Awareness raising</p>	<p>Providing them with psychological support services, and entertainment services.</p> <p>Providing an educational advancement program, to assist children who have learning difficulties.</p> <p>Providing programs that educate them on protection.</p>	<p>Women empowerment and self-care programs</p> <p>Providing programs that deal with daily life stress.</p>	<p>Financial assistance.</p> <p>Job opportunities.</p> <p>Psychological programs to reduce violence.</p>

	<p>Pamphlets and materials on how to cope during the quarantine.</p> <p>Improving health services.</p> <p>Improving infrastructure</p> <p>Providing poor families with financial support to pay water bills.</p> <p>Regular maintenance of water.</p>			
Qaryout	<p>Food supplies.</p> <p>Providing families with protection, support, and ways to deal with the quarantine.</p> <p>Providing financial support, and new job opportunities.</p> <p>Providing volunteers with protective gear, and</p>	<p>Providing an educational advancement program, to assist children who have learning difficulties.</p> <p>Providing programs that educate them on protection.</p>	<p>De-stressing.</p> <p>Providing programs that teach the women how to cope with pressure and violence.</p>	<p>How to utilize free time.</p> <p>Life-skills promotion.</p>

	<p>masks to the residents.</p> <p>Disinfectants.</p> <p>Pamphlets that raise awareness on how to deal with the quarantine.</p> <p>Improving medical services.</p> <p>Improving infrastructure</p>			
Alfasayel	<p>Providing families with food supplies</p> <p>Providing disinfectant and cleaning materials</p> <p>Improving infrastructure to reduce pollution.</p>	Locations that provide entertainment and education.	<p>Micro-enterprises for women.</p> <p>Awareness programs.</p> <p>Providing them with phone consultation to know how to deal with stress and self-care.</p>	<p>Providing locations for the youth to hangout, such as coffee shops, community clubs, and parks.</p> <p>Providing work opportunities.</p> <p>Life-skills program.</p>
Qalandiya	<p>500 families need financial aid or food supplies</p> <p>150 families need disinfectants</p> <p>Elderly need stress-management and stress-</p>	<p>Toys, stories, electronic devices for children to enable online learning</p> <p>Intervening with children survivors of violence and neglect</p>	Psychological consultations.	Toys, novels and psychological support to deal with boredom

	<p>relief activities</p> <p>The area needs cellphones and internet to help with emergency coordination</p> <p>Need to provide housing in general and housing for workers in Israel so they can self-quarantine</p>			
Beit Sakarya	<p>Food supplies.</p> <p>Disinfectant and cleaning products.</p> <p>Internet services.</p> <p>A pharmacy that serves the area.</p>	<p>Devices for remote learning.</p> <p>Educational games.</p> <p>Stories and books to help in dealing with the quarantine.</p>	<p>Communication through Social media.</p> <p>Empowerment groups, dealing with stress.</p> <p>Providing them with phones.</p> <p>Providing them with women necessities.</p> <p>Providing those who need with psychological support.</p>	<p>Support through the constant provision of the youth program.</p> <p>Focusing on psychological support.</p> <p>Providing suitable activities for their ages.</p> <p>Providing a library and books.</p>
Al-Issawiya	<p>150 families need food supplies (poverty rate</p>	<p>Provide children with psychological interventions to deal with traumatic stress</p>	<p>Intervention with women survivors of violence and abuse</p>	

	<p>is 70% in this area)</p> <p>Hundreds of families need disinfectants</p> <p>There is a need for an ambulance, improving infrastructure and stockpile of medications</p> <p>Provide the elderly with interventions to deal with traumatic stress resulting from police violence in this area</p> <p>Need to provide housing for workers in Israel so they can self-quarantine</p> <p>Continuation of coordination and receiving feedback from program managers in the area.</p>	<p>resulting from police violence in this area</p> <p>Assisting children survivors of abuse and neglect (possible through child-protection programs)</p> <p>Providing devices to facilitate remote learning for families that have no devices and training on the use of the devices.</p>		
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<p>Al-Tur</p>	<p>100 families that need disinfectants and financial aid.</p> <p>Provide the elderly with interventions to deal with violence</p>	<p>Follow up with parents' committees and schools about education</p> <p>Many parents reported that children have excessive movement and there is a need to help parents deal with this issue and provide stress release and recreational activities for children</p>		<p>There is a need to assist the youth to address their risky and impulsive behaviors (youth empowerment programs)</p>
<p>Kufr Aqab</p>	<p>The area does not have protection and referral mechanisms for women and children subjected to violence – there is a need to form protection committees</p> <p>60,000 families need disinfectants</p> <p>Need garbage collection trucks and workers</p> <p>Need to provide housing for workers in Israel so they can self-quarantine</p>	<p>Toys.</p> <p>Provide devices for remote learning for families that have no devices and training on the use of the devices</p> <p>Need child-protection groups to teach children self-protection skills from violence and abuse</p>	<p>Women empowerment and GBV groups</p>	<p>Ways to utilize free time.</p>

<p>Qalqilya</p>	<p>There is violence against individuals who tested positive for COVID-19 and there is a need to raise awareness in the community about this to reduce fear and negative attitudes towards the patients</p>	<p>Needs related to psychological support and de-stressing.</p> <p>Need child-protection groups to teach children self-protection skills from violence and abuse</p> <p>Provide free internet and devices for children in need to facilitate online learning</p>	<p>Needs related to psychological support and de-stressing. Especially for women who lost their jobs.</p> <p>Support women survivors of violence through women empowerment and GBV groups</p>	<p>Psychological support and de-stressing.</p> <p>Financial support or job opportunities.</p>
<p>Beita</p>	<p>There is a need for better communication between the CBO and the emergency committee and local council to improve emergency coordination</p> <p>The area needs protection from settler attacks</p> <p>Funding is needed to form violence protection mechanisms as there are none in the area at the moment (need to form</p>	<p>Providing devices for remote learning to 100 families. Supporting children.</p> <p>100 computer devices for children who have no access to computers to facilitate online learning</p> <p>Need child-protection groups to teach children self-protection skills from violence and abuse.</p>	<p>Income-generating projects for women such as home-gardens</p> <p>Support women survivors of violence through women empowerment and GBV groups.</p>	<p>Provide youth empowerment programs for youth</p>

	<p>protection committees)</p> <p>Need for mental health services as there are no mental health professionals in the area</p> <p>500 families need financial aid or food supplies</p> <p>Over 500 families need disinfectants and cleaning materials.</p> <p>20 families have no access to water and need wells to collect rain water.</p>			
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Annex 2: Interview Protocol

الجزء الأول: المعلومات الأولية		A
	التاريخ	1.
	اسم المنطقة	2.
	اسم معبئ الاستثمار	3.
	المؤسسة القاعدية التي يتم العمل معها	4.
	اسم الشخص التي تمت مقابلته	5.
	عمل الشخص التي تمت مقابلته	6.
	المستوى الأكاديمي	7.
لا	نعم	هل يوجد فحص احتياج مقامت به مؤسسات حديثا للمنطقة
		9. اذا كانت الاجابة نعم نرجو الاشارة الى اسم المؤسسة طلب نسخة من فحص الاحتياج

الجزء الثاني (وضع السكان)		B
	ما هو عدد السكان الإجمالي للمنطقة " حسب اخر تعداد او سجلات المنطقة	10.
	ما هو معدل حجم الاسر في منطقتكم أي عدد افراد الاسرة؟	11.
	نسبة النساء من الرجال.	12.
	نسبة او عدد المسنين فوق 65 عاما	13.
	نسبة او عدد الأشخاص الذين يعانون من امراض مزمنة كالسكري، السرطان، ..امراض قلب، امراض تنفس، الخ	14.
	نسبة او عدد الاسر الفقيرة.	15.
	معدل دخل الاسرة او افراد؟	16.
	هل المنطقة ريفية ام حضرية؟	17.
بالنسبة للرجال	ما هي اكثر المهن السائدة في المنطقة	18.
بالنسبة للنساء		

الجزء الثالث: (الوضع الصحي)		C
	من هي الجهة المسؤولة عن تزايد الخدمات الصحية في المنطقة؟	19.
	ما هو أقرب مستشفى وكم يبعد؟	20.
لا	نعم	هل توجد لديكم صيدليات؟
اذا كانت الاجابة نعم نرجو ذكر عددها ()		21.
	هل يوجد لديكم مخزون من الادوية؟	22.

23.	ما هو عدد الأشخاص المصابين بالكرونا	
24.	ما هو عدد الأشخاص الذين يتلقون العلاج نتيجة الكرونا	
25.	اين يتلقون العلاج	
26.	عدد الأشخاص الذين توفوا نتيجة الكرونا	
27.	هل من الأشخاص المصابين لها او له دور أساسي في المنطقة (رئيسي بلدية، أعضاء مجلس بلدي او قروي، طبيب المنطقة، وزير، الخ..)	نعم لا
28.	عدد النساء الحوامل	
29.	هل يوجد لديكم اسعاف بالمنطقة؟	نعم لا اذكر لمن تابع
30.	ها توجد لديكم سيارات أخرى لنقل المرضى؟	نعم لا اذكر عددها
31.	هل توجد لديكم إمكانيات لمعالجة وللتخلص من الجثث اما الإنسانية او الحيوانية؟	
32.	ما هي الجهات التي توزع ادوية في منطقتكم؟	

C	الجزء الرابع : (الصحة النفسية)	
33	ما هو عدد الأشخاص الذين يعانون من مشاكل نفسية في منطقتكم؟	
34	هل تم تنفيذ ابحاث او فحص احتياجات نفسية في منطقتكم	
35	ما هي اكثر الصعوبات والمشاكل النفسية التي تلاحظونها على السكان وتفصيلها الى فئات الاطفال المراهقين البالغين وكبار السن	
36	هل يوجد مراكز او خدمات نفسية قريبة من المنطقة	نعم لا
37	اذا احتاجو استشارات نفسية لمن يتوجهو	
38	هل هناك اخصائيين نفسيين او مرشدين اجتماعيين في المنطقة	نعم لا اذا كانت الاجابة نعم نرجو ذكر العدد
39	هل يوجد في المنطقة طلبة جامعيين يدرسون احد التخصصات النفسية الاجتماعية كم عددهم وهل يستطيعون التطوع اذا طلب منهم معرفة معلومات اكثر عنهم	
40	ما هي ابرز مصادر الدعم النفسي الاجتماعي الموجودة في المنطقة (وسائل اماكن مختار ؟؟؟ العائلة)	
41	هل هناك اشخاص يعانون من امراض نفسية مزمنة وتحتاج ادوية	
42	اين يتابع المرضى النفسيين الموجودين في المنطقة	

D	الجزء الخامس : (وضع الماء)	
43	ما هو المصدر الرئيسي للمياه في منطقتكم؟	
44	من هي الجهة المسؤولة عن تزويد المياه.	
45	كيف كان وضع المياه قبل الكرونا؟	
46	هل تأثر تزويد المنطقة بالمياه نتيجة الكرونا؟	

47	كم عدد الناس الذين لا توجد لديهم مياه؟	
48	هل هناك احتياجات أخرى لها علاقة بالمياه؟	

E	الجزء الخامس : (الوضع البيئي الأساسي والبنى التحتية)	
49	من هي الجهة المسؤولة عن التخلص من الفضلات؟	
50	من هي الجهة المسؤولة عن معالجة المجاري؟	
51	كيف تتخلصون من الفضلات والمجاري الآن؟	
52	هل هناك اثار او اعراض تلوث بيئية؟	لا نعم
53	من المسؤول عن التعقيم العام في منطقتكم؟	
54	هل تم تعقيم المنطقة؟	لا نعم
55	كم مرة ومتى؟	
56	هل توجد لديكم كميات كافية من المعقمات على مستوى المنطقة؟	لا نعم
57	هل توجد لدى الاسر معقمات ومواد تنظيف كافية؟	لا نعم
58	ما هو عدد الاسر الذين لا توجد لديهم مواد تنظيف او معقمات؟	
59	من يوزع المعقمات ومواد التنظيف في منطقتكم؟	
60	هل هناك احتياجات لها علاقة بالفضلات والمجاري؟	لا نعم اذا كانت الاجابة نعم نرجو ذكر ما هي الاحتياجات

F	الجزء السادس : (وضع الغذاء)	
61	ما هو المصدر الرئيسي للغذاء في منطقتكم قبل الكورونا؟	
62	هل قل ام زاد استهلاك الغذاء الان؟	
63	ما هي الأماكن المزودة بالأكل والغذاء الان؟	
64	هل يوجد لديكم مخزون من الغذاء؟	
65	كم يكفي؟	لا نعم
66	هل لديكم إمكانية لشراء او / والوصول للغذاء؟ عدد الاسر التي تحتاج مساعدة في الوقت الحالي	
67	من يوزع الغذاء في منطقتكم؟	
68	من ينسق موضوع توزيع الغذاء في منطقتكم؟	

G	الجزء السابع : (المسكن)	
69	هل هناك نقص في أماكن السكن في منطقتكم؟	
70	لماذا؟	
71	هل هناك حاجة لتوفير أماكن سكن للعمال في منطقتكم؟	

	الجزء الثامن : (سبل العيش)	H
	ما هي مجالات العمل التي ما زالت متاحة للنساء والرجال في منطقتكم؟	72
	هل تشهدون زيادة في أسعار الغذاء؟	73
	ما هي أكثر القطاعات الاقتصادية تضررا في منطقتكم؟	74
	ما هو وضع القطاع الزراعي في منطقتكم؟	75
	ما هو وضع التصنيع الغذائي في منطقتكم؟	76
	هل هناك إمكانيات لعمل أي نوع من أنواع المشاريع في منطقتكم في الوقت الحالي؟	77

	الجزء التاسع : (الحماية)	I
	هل تعلمون او ترصدون حالات عنف وإساءة بشكل عام؟	78
	هل تعلمون او ترصدون حالات عنف وإساءة ضد النساء؟	79
	هل تعلمون او ترصدون حالات عنف وإساءة ضد الأطفال؟	80
	هل تعلمون او ترصدون حالات عنف وإساءة او تمييز ضد مصابي الكورونا او اسرهم؟	81
	في مثل هذه الحالات بمن تتصلون للمساعدة؟	82
	من هي الجهات، المؤسسات او الافراد الذين يوفرن الحماية في منطقتكم؟	83
	هل هناك اية احتياجات لها علاقة بالحماية في الوقت الحالي؟	84

	الجزء العاشر : (التنسيق والتنظيم)	J
	من هو المسؤول عن تنسيق وإدارة الاحتياجات في الوقت الحالي في منطقتكم؟	85
	بمن تتصلون في حالات الطوارئ؟	86
	ما هي الاحتياجات لتحسين تنسيق المساعدات	87
	اسماء المؤسسات التي تقدم خدمات بالمنطقة	88

	الجزء الحادي عشر : (التعليم)	k
	من هي الجهة المسؤولة عن التعليم في منطقتكم؟	89
	ما هي الإجراءات المتخذة من قبلهم للاستمرار في التعليم في الوقت الحالي؟	90
	ما هي الاحتياجات في التعليم؟	91
	الدور الذي تقومون به بالوقت الحالي والجهات التي يتم التعاون معها	92

L	الجزء الثاني عشر : (لوضع المالي)	
93	هل المؤسسة مسجلة بشكل قانوني ؟	نعم لا إذا كانت الاجابة نعم : مكان وتاريخ التسجيل:
94	هل يوجد مصادر تمويل للمؤسسة ؟	نعم لا إذا كانت الاجابة نعم ، اذكر مصادر التمويل:
95	هل يوجد موظفين في المؤسسة ؟	نعم لا إذا كانت الاجابة نعم ، اذكر اهم الوظائف :
96	هل يوجد لدى المؤسسة دليل سياسات وإجراءات مالي وأداري ؟	نعم لا
97	هل يوجد لدى المؤسسة دليل سياسات وإجراءات للمشتريات؟	نعم لا
98	هل يوجد لدى المؤسسة دليل سياسات وإجراءات لإدارة الموارد البشرية ؟	نعم لا
99	هل يوجد للمؤسسة حساب بنكي ؟	نعم لا
100	من المخول بتوقيع شيكات المؤسسة ؟	
101	هل يتم تدقيق حسابات المؤسسة بشكل سنوي ؟	نعم لا إذا كانت الاجابة نعم: تحديد تاريخ اخر تقرير مدقق اسم المدقق

102 هل هناك احتياجات تعتقدون انها ضرورية وغير متوفرة في هذه الفترة

1- للأطفال

2- النساء

3- الشباب