

بذور للإنماء الصحي والاجتماعي

Juzoor for Health & Social Development



ANNUAL  
REPORT  
2015

*“A Palestinian society where all individuals enjoy Wellbeing and Health”*

Community . Capacity Enhancement . Health Policies

Community

Capacity  
Enhancement

Health Policies

# Juzoor for Health & Social Development

Is a Palestinian non-governmental organization working at the national level, dedicated to improving and promoting health as a basic human right. Juzoor (“roots” in Arabic) was established in 1996 by a group of Palestinian experts and pioneers in various fields, particularly the field of community health.

Juzoor has become a resource for Palestinian institutions through developing creative model programs in the health and social fields that can be adopted and replicated at the community and national levels.

Juzoor believes that in order to make a sustainable and lasting impact on the health of Palestinians it must contribute to the national level policy

dialogue, and help affect positive change on the macro level. Juzoor seeks to stimulate policy dialogue among stakeholders by:

- Building alliances with several national bodies that influence the formation and implementation of health and social policies.

- Networking with national and regional organizations and institutions as part of numerous consortia, forums and groups that work toward common goals.

- Participating as a co-founder of the Palestinian Health policy forum and Middle East and North Africa health policy forum.

**Continuous Professional Development (CPD)** is an important strategy for

quality improvement in the health and social sectors. Juzoor’s CPD Unit contributes to improving the performance of health and social service providers by:

- Enhancing capacity of health and social service providers in their respective fields,

tionally accredited training programs, for example the American Heart Association (AHA) Training courses (in 2012 Juzoor became the first AHA accredited Training Center in Palestine), and the American Academy of Family Physicians’ Advanced Life Support in Obstetrics (ALSO) training.

*To promote the wellbeing and health as a right for all members of Palestinian society by influencing health and social policies and creating innovative, sustainable development models*

through offering evidence-based programs that standardize skills and knowledge:

- Developing curricula, manuals, job aids and endorsed protocols for training in various health and social subjects.

- Developing strategic coalitions and relations with relevant individuals and institutions.

- Introducing and sustaining interna-

Juzoor tackles critical emerging public health issues, through **Community development** program which seeks to empower individuals and groups of people with the skills they need to effect change within their communities and connecting prevention and intervention for the individual to the level of the whole population by addressing the social determinants of health including poverty, gender equity, political dependence, socioeconomic equality and education.



# Message from the Chair of the Board

It is with great pleasure that I present to you Juzoor's Annual Report 2015. Founded in 1996, Juzoor remains at the forefront of efforts to improve the lives of all Palestinians and continues to make progress towards health and social development. Two key elements have helped us implement a successful health and social development strategy. The first is our active integration of core values into program initiatives; by ensuring that each initiative reflects our vision and mission, Juzoor remains unique in its holistic, rights-based approach to health. The second is our effective engagement with a range of stakeholders, from community health workers and health providers to Ministry of Health officials and national legislators. The breadth and depth of our work allows us to ensure that national policies reflect the needs of communities.

We have demonstrated time and again that the most successful health and social development efforts are those that actively prioritize, promote, and protect rights and empower people to make informed choices. Our three core programmatic pillars of Community Empowerment, Continuous Professional Development, and Policy Dialogue and Advocacy address health rights, empowerment, and equity through innovative, community-focused, and collaborative approaches. In all our endeavors, we strive to pave the way for health system strengthening and community empowerment, setting the pace for others rather than accepting the status quo.

We are deeply grateful for the support of our funders and partners, whose partnerships are vital to our ability to maintain high quality programs. Finally, our accomplishments were also made possible by the invaluable input and hard work of our dedicated staff and remarkable Board of Directors.



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***We are deeply grateful for the support of our funders and partners, whose partnerships are vital to our ability to maintain high quality programs.***

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Saro Nakashian  
Chair of the Board

# Letter from the Executive Director

It is with utmost pride that I present to you Juzoor's annual activities report for 2015. In the midst of political, social, and economic uncertainty, Juzoor continues to spearhead community health and social development initiatives that make a real difference in the lives of Palestinians. As this report demonstrates, Juzoor's health workforce strengthening and community empowerment programs provide much-needed access to healthcare and social development. Our organization is renowned for its unwavering dedication to the well-being of Palestinians, collaborative team dynamics, and high standards of integrity. As a consequence of these attributes, Juzoor remains a leading actor in addressing today's health and social challenges, most notably by offering technical support to other agencies involved in the provision of health services across Palestine.

Throughout 2015, Juzoor remained at the forefront of national and local health sector reform, providing technical support to the emerging health workforce and empowering communities to advocate for their right to health. Through its Community Empowerment program, Juzoor has bolstered women's awareness of their rights to reproductive health and protection from gender-based violence. Similarly, Juzoor has provided youth in vulnerable communities with a platform to voice their perception of Palestinian identity and to participate freely with one another in national dialogue. Juzoor's flagship Continuous Professional Development program continues to provide a number of internationally accredited training programs to improve the professional level of health staff and providers. Finally, noteworthy Policy Dialogue and Advocacy initiatives for 2014 included organization of the Biennial Nutrition Conference, research on risk behaviors among Palestinian youth, and establishing regional networks through the Middle East and North Africa Health Policy Forum).



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***I am confident that with continuous and steadfast support from our staff, affiliates and partners, we at Juzoor will continue to drive social and health development in Palestine.***

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Dr. Salwa Najjab  
Executive Director

A handwritten signature in black ink, appearing to read 'Salwa Najjab'.

# Juzoor at a Glance

Welcome to Juzoor's 2015 Annual Report. The following pages aim to highlight our programmatic achievements in the past year as well as to communicate to international partners and supporters our approach to improving the physical and emotional well-being of Palestinians.

Founded in 1996, Juzoor is a Palestinian non-governmental organization dedicated to improving the health and well-being of Palestinian individuals, families, and communities. The name Juzoor ('roots' in Arabic) is evidence of our commitment to addressing the underlying socioeconomic determinants of health and wellness. Our holistic approach to health promotion and disease prevention reflects our belief that health (physical, emotional, mental, and social) is a basic human right for all people.

Juzoor works on multiple levels with community-based organizations, service providers, governmental bodies, international organizations, and the community at large (particularly women, children and youth). We operate in East Jerusalem, the West Bank, and Gaza.

## COMMUNITY EMPOWERMENT

We work to raise awareness on key health and social issues, and to empower fellow Palestinians to lead healthy lives and to, in turn, support those around them. We aim to build innovative models that can be adopted and replicated locally and regionally.

## POLICY DIALOGUE AND

**ADVOCACY** We are actively engaged in policy dialogue; we advocate for policy changes on the national level, based on community needs and national indicators.

## CONTINUOUS PROFESSIONAL DEVELOPMENT

Working hand-in-hand with government entities, community-based organizations healthcare providers, and educators, Juzoor strives to build professional expertise in the health and social sectors. Acting as a bridge between local, regional and international institutions, we facilitate the transfer of knowledge and the exchange of best practices.

## **VISION**

***“A Palestinian society where  
all individuals enjoy Well-  
being and Health”***

## **MISSION**

***“To promote well-being and health as a right for all  
members of the Palestinian society by influencing  
health and social policies and creating innovative,  
sustainable development models”***



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## *Institutional Values*

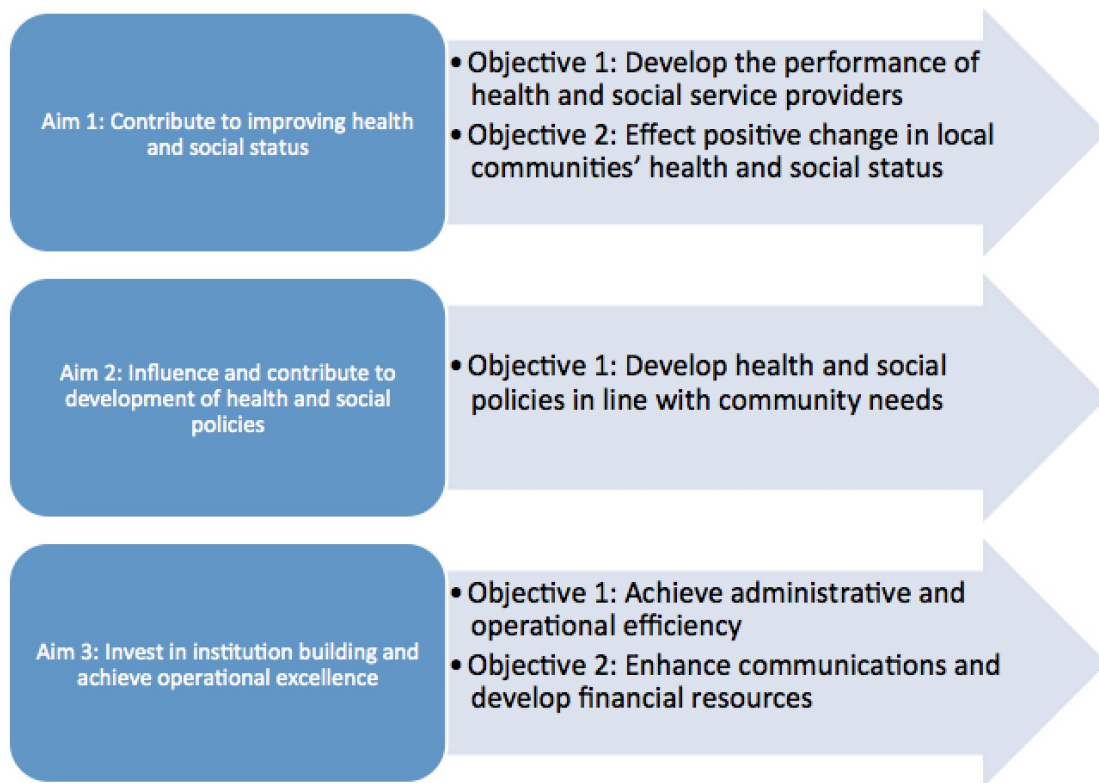
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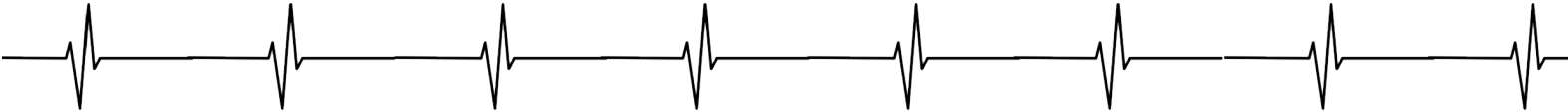
In pursuit of its mission, Juzoor endorses a set of institutional values as follows:

- Objectivity and non-bias in serving the community
- Respect for dignity and human rights
- Attachment to national aspirations and adherence to Palestinian development priorities
- Excellence and creativity
- Adoption of evidence-based, results-based methodology
- Learning from international and regional experiences
- Culture of respect and acceptance of others
- Belief in partnership at the community and institutional levels
- Independence, progressive ideology, and social justice

# Strategic Goals

Juzoor strategic objectives outlined in the figure below:





# PROGRAMS

## 1. CONTINUOUS PROFESSIONAL DEVELOPMENT (CPD)



# CONTINUOUS PROFESSIONAL DEVELOPMENT (CPD)

## OVERVIEW

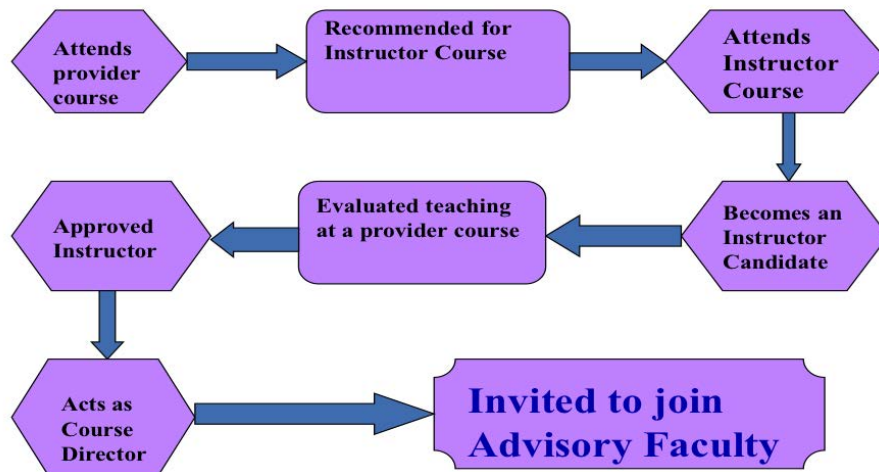
A cadre of health professionals trained in the latest evidence-based methods and practices is a key component of a well-functioning health system, one that is adaptable to meet the needs of the population. In line with Juzoor’s belief that an effective health system is one that can adapt to meet the needs of the population, the Continuous Professional Development (CPD) Unit was established in 2003 as a strategic instrument to improve health and social services in Palestine. CPD contributes to performance improvement of health providers through standardizing skills according to evidence-based guidelines and practices, improving access to high quality care, and facilitating interactions and dialogue between Palestinian health providers. Over the last decade, Juzoor has focused on implementing a number of activities in CPD to upgrade the knowledge base and to improve the technical skills and performance of providers in various service settings throughout Palestine. Juzoor’s philosophy is that human resource development is a crucial element in not only developing skills, knowledge, and attitudes, but also in helping to create an enabling environment whereby organizations can perform effectively, efficiently, and in a sustainable manner.

Our programs are based on the latest evidence-based information, are delivered according to the highest quality, incorporate innovative and dynamic methodologies, and follow a specific lifecycle (see below). All of our courses draw upon adult learning principles and emphasize practical knowledge, skills-based simulations and drills, group learning exercises, and self-study and preparation (including in some courses online work).

The Continuous Professional Development (CPD) program responds to Juzoor’s strategic goal of “contributing to supporting and upgrading the health and social status of the Palestinians.” Thus, the aim of the CPD program is to develop the performance of health and social service providers. Specific objectives of the program include the following:

1. Enhance the capacity of health and social service providers in their respective fields.
2. Develop curricula, manuals, job aids, and endorsed protocols for training in various health and social subjects.

### Training Life Cycle



### 3. Develop strategic coalitions and relations with relevant individuals and institutions.

Juzoor strives to bring evidence-based, internationally accredited training programs to the country such as the Advanced Life Support in Obstetrics (ALSO) training from the American Academy of Family Physicians.

We develop and invest in national teams of trainers in different specialties to deliver training programs according to the latest scientific updates and in accordance with best practices. Juzoor-affiliated instructors come from diverse backgrounds, representing the major stakeholders in the health sector (Ministry, UNRWA, NGOs and private practice), and the health and teaching institutions (universities, medical schools, nursing colleges and hospitals implementing residency training programs) all across the West Bank and Gaza Strip. In addition Juzoor forms strategic alliances on a national basis with bodies such as the Palestinian OB/GYN and Pediatric Societies, the Medical Syndicate and the Palestinian Medical Students' Union, to ensure the sustainability of CPD activities. Finally, we maintain contact with our instructors and current and former trainees through a database that allows us to organize periodic follow-up activities and to distribute updates and new evidence-based information as it becomes available. In all CPD activities Juzoor targets providers from various sectors including Ministry of Health, UNRWA, NGOs and private practitioners.

The CPD Unit organizes two main types of capacity enhancement programs: Non-Emergency and Emergency. CPD 2015 program highlights and descriptions of program activities are presented in the following pages.

## HIGHLIGHT OF CPD ACHIEVEMENTS IN 2015

- ✓ **Trained 710 individuals in American Heart Association Courses (AHA)** under our license as an accredited AHA International Training Center
- ✓ **Trained 54 doctors and nurses** in Neonatal Resuscitation
- ✓ **Trained 61 health providers** in Advanced Life Support in Obstetrics (ALSO)
- ✓ **Trained 21 surgeons in Basic Surgical Skills** in cooperation with the Royal College of Surgeons, Edinburgh
- ✓ **Trained 27 Healthcare Providers** in Helping Babies Breathe (HBB)



## EMERGENCY PROGRAMS

### American Heart Association (AHA)

[Timeframe: 2014-2016  
Licensing for 2 years]



**Background:** As a leader in continuous professional development in Palestine, Juzoor has extensive experience in emergency course methodology and has trained several hundred health staff in various emergency topics. By identifying the essential skills that are required for different categories of health providers, Juzoor contributes to setting standards and ensuring consistency in the level of training in core medical skills for practicing providers.

In April 2012, Juzoor became the first American Heart Association (AHA) licensed International Training Center (ITC) in Palestine. As a licensed ITC, Juzoor is able to offer the AHA accredited basic and advanced emergency courses for health care providers and community members. Recognized internationally for their standard, evidence-based approach, AHA emergency courses are skills-based and focused on essential life-saving measures. These courses are integrated into Continuing Professional Development (CPD) systems in countries around the world and are important continuing education tools for health providers. In 2015, Juzoor's CPD unit offered 4 AHA courses to 710 individuals, ranging from teachers and parents of school children to nurses, doctors, and other health support staff.

**1. HEARTSAVER FIRST AID CPR (HSFA):** Heartsaver First Aid CPR is a comprehensive first aid training course that provides hands-on practice in managing medical emergencies, injuries as well as environmental emergencies for lay people. CPR skills, AED techniques, and management of choking are all demonstrated and practiced in skills stations.

As part of the “Protect the Rights and Improve the Resilience of Vulnerable Communities in East Jerusalem” Project, Juzoor has implemented a package of interventions in 10 selected schools in 5 different areas throughout East Jerusalem. Given the complex geopolitical situation in East Jerusalem, ambulances and Emergency Medical Services (EMS) cannot always easily access all areas and/or require prior arrangements to enter certain localities (which may take up to one and a half hours). In an emergency, every minute counts, and community members trained in basic CPR and first aid skills can respond immediately to assist in saving lives before medical help arrives. Thus, a major component of the initiative is the provision of AHA's HeartSaver First Aid course to parents and teachers.



In 2014 and 2015, Juzoor held 31 Heartsaver courses at 10 schools in E. Jerusalem; Teachers, parents, nurses, university students, and other school administrators participated in these courses. In total, 556 individuals participated in AHA HeartSaver First Aid courses.

**2. BASIC LIFE SUPPORT (BLS):** BLS is designed to enhance the knowledge and skills of a wide variety of healthcare professionals in recognizing several life-threatening emergencies, provide CPR, use an AED and relieve choking in a safe, timely and effective manner. It is a hands-on course, which utilizes mannequins and DVD teaching methodology.



Juzoor views BLS as an integral component of hospital- and pre-hospital-based emergency trainings for health staff. In 2015, Juzoor worked extensively throughout the West Bank, East Jerusalem, and Gaza to train healthcare providers in basic life support skills. In total, 27 BLS courses were offered, reaching 384 healthcare providers and 3 BLS Instructor course for 19 healthcare providers.



### 3. ADVANCED CARDIOVASCULAR LIFE SUPPORT (ACLS):



Advanced Cardiovascular Life Support training - Ramallah

ACLS focuses on advanced life support techniques for adult victims of cardiac or other cardiopulmonary emergencies. This course is offered for doctors and nurses working in emergency rooms as well as ICUS and CCUs.

Juzoor conducted 11 ACLS courses between January and December 2015, training 113 health providers and 1 ACLS Instructor Course for 2.

Juzoor conducted 2 ACLS courses in Gaza during 2015



*Advanced Cardiovascular Life Support two day training course /Gaza*

#### **4. PEDIATRIC ADVANCED LIFE SUPPORT (PALS):**

The PALS course is for healthcare providers who respond to emergencies in infants and children. These include personnel in emergency response, emergency medicine, and intensive care and critical care units such as physicians, nurses, and paramedics.

Juzoor believes PALS is essential to improving children's access to life-saving, specialized emergency care—a need particularly relevant in Palestine given that 40% of the population is under the age of 15. In 2015, Juzoor held 1 PALS course, training 17 healthcare providers.



#### **Advanced Life Support in Obstetrics (ALSO) Program**

ALSO is an evidence-based educational program designed to assist healthcare professions in developing and maintaining the knowledge and procedural skills needed to manage emergencies that can arise in obstetrical care. The ALSO training curriculum addresses issues such as complications of pregnancy, labor and delivery, postpartum hemorrhage, safety in maternity care, and maternal resuscitation.

In 2004 Juzoor introduced the American Academy of Family Physicians (AAFP) methodology of Advanced Life Support in Obstetrics (ALSO) to Palestine, becoming the second country in the Arab region to implement

ALSO. Through ALSO courses. Based on national indicators and need, Juzoor implements the NRP training of the American Heart Association as a one-day training prior to ALSO in order to improve the skills of neonatologists, neonatal nurses, pediatricians, OB/GYNs, OB residents, midwives and nurses working in neonatal, pediatric and labor and delivery wards in the West Bank and Gaza Strip.

There were 3 ALSO provider courses were conducted in 2015

- First ALSO course held in Ramallah was funded by UNFPA for a total of 19 health professionals (Doctors and Midwives) from MOH. The ALSO provider course was conducted over 2 days; it involved case-based lectures and scenarios, practical stations, and hands-on training. Final evaluation consists of each participant by doing a written exam and practical skills exam.

- Second ALSO course held in Gaza was funded by UNFPA for a total of 21 health professionals (Doctors and Midwives) from MOH & NGOs. The ALSO provider course was conducted over 2 days; it involved case-based lectures and scenarios, practical stations, and hands-on training. Final evaluation consists of each participant by doing a written exam and practical skills exam.

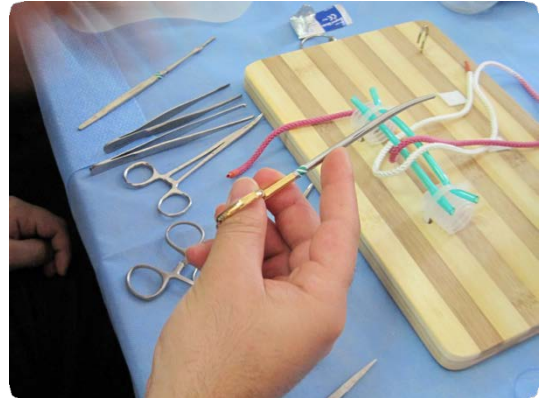
-Third ALSO course held in Gaza was funded by PCRf for a total of 21 health professionals (Doctors and Midwives) from MOH. The ALSO provider course was conducted over 2 days; it involved case-based lectures and scenarios, practical stations, and hands-on training. Final evaluation consists of each participant by doing a written exam and practical skills exam.



## Basic Surgical Skills (BSS)

The Basic Surgical Skills (BSS) Course is designed to introduce surgical trainees to safe surgical practice utilizing demonstrations and hands-on skills-stations that emphasize proper surgical techniques. It sets the standard for safe, basic surgical techniques common to all forms of surgery including safe abdominal incision and excision of lesions, the suturing of skin, bowel and blood vessels, and tying of knots, handling sutures and surgical instruments. The practical stations involve the use of surgical instruments on animal tissue models.

The Basic Surgical Skills (BSS) Course is endorsed by the Royal College of Surgeons of Edinburgh and is jointly implemented with the Royal College (RC), Juzoor, UNRWA, Augusta Victoria Hospital (AVH) and the Palestinian Surgeons' Society. The fourth BSSC was held Juzoor's training hall, for a total of **21** health professionals from MOH and NGOs hospitals.



## Helping Babies Breathe (HBB)

HBB is an evidence-based educational program for neonatal resuscitation in resource-limited settings. HBB is an initiative of the American Academy of Pediatrics (AAP) in collaboration with the U.S. Agency for International Development (USAID), Saving Newborn Lives, the National Institute of Child Health and Development, and the Laerdal Foundation. The methodology focuses on basic resuscitation and support techniques for babies who struggle to breathe at birth, emphasizing assessment, temperature support, stimulation to breathe and assisted ventilation as needed, all within "The Golden Minute" after birth.



In 2015, Juzoor conducted One HBB courses held in Ramallah for a total of 27 healthcare providers from MOH, NGO, & UNRWA in cooperation of the Palestinian Pediatric Society, sponsored by LDS Charities through the BYU Jerusalem Center.

## NON-EMERGENCY PROGRAMS

### **Nursing Empowerment In-Service Training:**

The Nursing Empowerment Program is a custom-designed orientation program that provides nurses with updated information regarding nursing practices in quality of care, right of access to care, patient assessment, medication management, and family and patient rights. The program incorporates both in-class and bedside training, and Juzoor staff follow-up with program participants following the training course. Clinical Leadership training held for Princess Basma Rehabilitation center for 10 participants

In 2015, Juzoor offered one nursing empowerment course at Princess Basma Rehabilitation center for 10 participants

## Palestinian Health Capacity Project:

**[Funder: USAID ]**

**[Timeframe: 2013-2018 ]**

The Palestinian Health Capacity Project (PHCP). In 2013, Juzoor partnered with IntraHealth International on the Palestinian Health Capacity Project (PHCP). PHCP is a 5-year, USAID funded project focusing on strengthening human resources for health (HRH) systems, supporting the reform of the referral system and improving the quality of health care in the West Bank. In alignment with the Palestinian Ministry of Health (PMoH) and its partners' priorities, a major focus of PHCP has been working with the PMoH to reduce the number and cost of tertiary medical referrals to facilities outside the Palestinian MoH facilities, especially to Israeli hospitals, without compromising quality of care for patients. The five objectives of the project are:

- 1- Strengthen MOH capacity to refine and manage effective systems to control referrals from secondary to tertiary care
- 2- Strengthen the capacity of the MOH to use data for improving health workforce planning and management and other health systems functions, including patient referrals within and outside the country
- 3- Improve the governance structures throughout the MOH to ensure improved deployment, utilization, management and retention of the health workforce
- 4- Improve pre-service (PSE) and in-service education (ISE)
- 5- Develop and implement a mechanism for licensing and certification of health workers

In 2015, Juzoor accomplished the following important achievements under the PHCP:

### Improve pre-service (PSE) and in-service education (ISE)

Juzoor through its partner PHCP has strengthened pre-service education specifically at the nursing level targeting the upgrading of PSE programs that would contribute to improved quality of care within PMOH and in support of reducing the need for referrals outside the health system. We worked with stakeholders to determine criteria for identifying programs in need of updating in line with project objectives and then focused on critical care nursing. We established a technical working group (TWG) to engage in discussions and identify needed revisions to the critical care nursing curriculum at the Bachelor of Science in Nursing (BSN) level. The TWG produced a draft revised outline for the course, and established competencies which informed an international consultant-led revised curriculum outline under a project through Ibn Sina College. We also enhanced the teaching capacities of clinical and academic instructors in critical care nursing, and updated their knowledge and skills through a package of training that included American Heart Association certification in Basic and Advanced Cardiovascular Life Support, and theoretical and skills-based training at a leading hospital in Jordan. We have also contributed to improving the PMOH new employee orientation program, as well as participated in the establishment of national standards in nursing.



Technical Working Group reviewing the revised outline of the critical care nursing course provided by the UPenn consultants through the Ibn Sina project, September 2015

### Develop a mechanism for licensing and certification of health workers

Juzoor engaged the PMOH, Medical Council, and other key stakeholders in a process to spearhead the first revision of a Palestinian national residency training program syllabus. The revised syllabus, for general surgery, is an updated, detailed, evidence-based document to guide training of residents across the 5 years of general surgery specialty. It involved extensive consultation with leading Palestinian surgeons as well as leveraging expert international advice to

ensure it is in-line with international best practices and methodologies. The process and resulting revised syllabus have been enthusiastically backed by the Scientific Committee for Surgical and sub-surgical specialties at the Medical Council and has contributed to a wider momentum on a national level to engage in critical discussions on the vision, direction, and quality of all local residency programs.



## Training Abroad

❖ Under CPD Unit's Objective 3 to establish strategic coalitions and relations with relevant individuals and institutions, in 2012 Juzoor established relationships with institutions in Jordan, Germany and United Kingdom (UK) to arrange for short and long-term placement of Palestinian health professionals at institutions abroad.

- **Sub-Specialty Training program for Palestinian Doctors:**

**[Funder: Arab Fund ]**

**[Timeframe: phase one 2012-2017]**

The aim of this program is to facilitate postgraduate subspecialty training in the UK for Palestinian doctors committed to working in Palestine—participants sign a legally binding agreement to work with a Palestinian institution upon their return.

In 2015, Al-Quds Foundation for Medical Schools in Palestine (FQMS) finalized placement and trainer in UK for the fourth accepted candidate Dr. Najji Musa in the field of oncology gynecology; who supposed to start his training on March 2016. In 2015, Juzoor received the fund for the second round of the subspecialty training program, the steering committee interviewed 14<sup>th</sup> candidates from the West Bank, and the interview for Gaza candidates will be arrange in 2016.

- **Capacity-building for Palestinian Health Professionals:**

**[Funder: Palestine International Institute]**

**[Timeframe: 2012-2015]**

In cooperation with Palestine International Institutes (PII), Juzoor worked since 2012 to facilitate short and long courses for doctors and nurses in Jordan.

1. **Dr. Ala Jafar:** He finished his training on August 2015 in the field of Pediatric Intensive Care subspecialty training in King Hussein Cancer Center.
2. **Dr. Mohammad Al Borini;** He started his fellowship training on January 2015 in the field of Adult Nephrology for two years in the University of Jordan Hospital.
3. **Dr. Islam Abdeen:** He started his training on August 2015 in the field of interventional radiology for one year training in King Hussein Cancer Center.



# PROGRAMS

## 2. COMMUNITY EMPOWERMENT





# COMMUNITY EMPOWERMENT

## OVERVIEW

Juzoor’s Community Empowerment Program responds to its strategic aim of “contributing to supporting and upgrading the health and social status of the Palestinian people” through working on the following:

- Promoting healthy lifestyles to enhance quality of life and prevent non-communicable disease.
- Enhancing family protection by focusing on violence prevention, care and referral.
- Empowering Palestinian society especially youth to advocate for health and social rights.

The Community Empowerment Program stresses the importance of youth and women’s empowerment, supports marginalized communities, and protects families against gender-based violence through the promotion of sexual and reproductive health rights. Juzoor works directly with community members to develop solidcommunity –based models that empower women, engage youth, and promote healthy nutrition.

The youth program at Juzoor started in 2006. The team of youth workers based their work on human rights education to outreach young Palestinians in Jerusalem and West Bank. The youth program focuses on youth participation, leadership, identity and human rights. The projects and activities are built on the youths’ needs in different subjects. The team uses the participatory approach, and bases all activities on human rights based approach. It provide knowledge and equip relevant skills to youth through organizing trainings, workshops, sessions, summer camps, study visits, festivals, campaigns, initiatives, meetings, and international activities.



“ We work to empower youth & children to increase their participation in their community based on Human Rights Education approaches. We raise awareness on social and non-formal educational fields ”

*Stop Motion Animation Training, part of “Strengthening Environmental Activists for Better Environmental Governance “ for schools in Ramallah.*

Non formal education, peer to peer education, and interactive learning are the main methodologies used in the activities of the youth program.

The target group of youth is between ages 10 to 25 years old – school and university students.

We have partnerships with high schools, universities, youth centers, NGOs, and international organizations. The subjects included in the youth program: youth participation, active citizenship, human rights advocacy, national identity, internal dialogue, intercultural learning, democratic participation, social inclusion, sexual education, environment, entrepreneurship, volunteering, and community work.

**We outreach around 1000 youth annually through our local and international activities**

## YOUTHACTIVITIES

### **Jerusalem Youth Parliament (JYP)**

First launched in 2007, the Jerusalem Youth Parliament (JYP) aims to foster leadership development and community building and to provide youth with knowledge and skills relevant to their growth and maturity. Specifically, JYP is designed to actively engage young Jerusalemite Palestinians ages 12 to 17 (as well as their parents and teachers) in active citizenship and to raise awareness of their Palestinian identity.



*Summer camp participants, part of Jerusalem Youth Parliament (JYP)*

The JYP remains active in a number of schools in east Jerusalem and engages students in multiple forums, ranging from elections within their respective schools and conflict management, to cultural and physical fitness activities, workshops on human rights, environmental issues, media, health, and other topics of interest.

The JYP is unique in that it provides an autonomous framework for youth to develop social skills and to engage with their communities. For example, students choose student councils in a democratic manner, and this JYP-elected student body not only represents the needs of students but also acts as a bridge between the wider student body, administration, and local community. Tailored entirely to the needs of young Palestinians, the JYP continues to encourage the independent thinking and socio-political initiatives of young people and facilitates the learning of crucial social and professional skills. It also creates platforms for political debate, intercultural encounters, political educational work, and the exchange of ideas among young people.

## FAMILY PROTECTION PROGRAM ACTIVITIES

### **Protecting Adolescents from Gender Based Violence through the Promotion of their Sexual and Reproductive Health Rights**

[Funder: Save the Children]

[Timeframe 2013-2015]

The Sexual and reproductive Health Rights (SRHR) project works with children and adolescents (10-17years) on protecting them from all kinds of gender based violence (GBV), through promoting their SRH Rights, through improving quality of information about SRHR, increase accessibility to information, and improving stake holder support to SRHR.

In January 2010, Save the Children, and its partner Juzoor for Health and social Development in Palestine (Juzoor), KAFA ('Enough') Violence and Exploitation in Lebanon, and Community Based Rehabilitation Association for Children with Needs in Yemen, launched a regional project. The project entitled, 'Protecting Adolescents from Gender based Violence through the Promotion of their Sexual and Reproductive Health Rights in Yemen, Lebanon and Palestine' was funded by the by the European Commission (EC). It aimed to enhance the **protection of children and adolescents** (10-17 years) from gender based violence (GBV) and harmful practices, through promoting their right to **Sexual and Reproductive Health Rights** (SRHR). The project had a **threefold objective**: (1) Improving the quality of child/adolescent friendly SRHR information and services; (2) Increasing the accessibility of children and adolescents to quality information; and (3) Improving policymaker and stakeholder support for child and adolescent-centered SRHR information and services.

Thus, the project aimed to make tangible differences in the **lives of children and adolescents** at risk or victims of violations of sexual and reproductive health rights, all the while improving the **policy environment** in the three countries of operation Lebanon, Palestine, and Yemen.

In Palestine, **Juzoor** was responsible for the implementation of the project in Palestine, focusing on **five 'impact areas' in the West Bank**: Ein El-Sultan refugee camp and Aqabet Jabir refugee camp in Jericho District; Ayda and Al-Azzeh refugee camps in Bethlehem District; Al-Arrub refugee camp and Dura in Hebron District. The geographical areas were selected through community assessments which confirmed the evident lack of services and the huge need for such interventions. The United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) was a key partner in this project. In total, **around 15,000 children and around 6,000 parents, service providers, and community members**, adults were reached directly and indirectly during the 3 years project through their participation in outreach, trainings, workshops, public events, and education sessions. The project had an **overwhelmingly positive impact** on children, adolescents, parents, and service providers' knowledge on SRHR as demonstrated by pre and post intervention survey results. In particularly, the comparison of pre and post interventions findings show that children's hygiene practices vastly improved, as has their knowledge on changes during puberty, sexually transmitted infections (STIs), and health risks of teenage pregnancy and their competencies on how to better protect themselves from violence. The project also had a significant impact on parents' knowledge and attitudes towards early marriage and child protection. A clear

#### *Box 1: Main Highlights of Phase I in Palestine (2010-2013)*

- A Knowledge Attitude Practice (KAP) Baseline research was conducted with UNRWA, and findings were shared at the regional, national and local launch events A Child Friendly Version of the KAP findings was also produced.
- A wide array of SRHR educational and informational materials were produced together with civil society organizations (CSOs) and target groups covering topics such as the Convention on the Rights of the Child (CRC), sexual abuse, puberty and parenting skills. These materials were produced in form of animated films, brochures, stickers, calendars, cards, games and booklets, and puppet shows.
- Two of the three SRHR Training Modules were finalized. The third module on Child Sexual Abuse was drafted but not finalized in Phase I.
- The project methodology was based on Peer Education, such as Child to Child and Mother to Mother approaches, to ensure wide impact in the targeted communities.
- Nearly 500 service providers were trained, using the SRHR Modules developed by the project.
- 5 Information Points were renewed or redesigned to be adolescents' friendly spaces, and equipped with 200 educational materials.
- Child Protection Local Committees were established in the five areas in order to build a strong Referral Mechanism.

**advocacy achievement** has been the decision by UNRWA Department of Education to update school curriculum to integrate adolescent SRHR. Moreover, there has been systematic improvement in the establishment of prevention of violence programs within UNRWA health centers and schools and a significant achievement in responding to cases of violence as a result of referral systems. The main highlights of the three year project, which ran in the West Bank from February 2010 to December 2013, are described in Box 1.

The number of cases reported for the UNRWA protection program had increased to 450 cases last year; as well there was no baseline assessment for the cases in order to find a percent. Also the number of critical cases referred had increased to 45 cases in 2015 as it was 10 cases.

## 1.2 Overview of Phase II

After the successful completion of Phase I (2010-2013), Save the Children and its partners decided to pursue **Phase II (2013-2015)** of the regional project. Due to its positive impact and its innovative nature, the regional project was granted funding from the Swedish International Development Agency (SIDA) to improve, expand and implement the project over a further three years. Phase II thus aimed to scale up the project **impact** of enhancing the protection of children and adolescents from GBV, early marriage, and child sexual abuse, through the same threefold objectives of (1) Improving the quality of child/adolescent friendly SRHR information and services; (2) Increasing the accessibility of children and adolescents to quality information; and (3) Improving policymaker and stakeholder support for child and adolescent-centered SRHR information and services.

In Palestine, Juzoor's **scale up strategy** for Phase II consisted of (1) expanding the **number of 'impact areas'** while continuing to pursue work in the areas targeted in the first phase (2) institutionalizing the work done in the 5 impact areas of Phase I in order to ensure **effective handover** to UNRWA by the end of second phase of the project and (3) continuing **policy advocacy work** with focus on integrating educational material about child sexual abuse and child protection into school curriculum, and strengthening confidential reporting mechanisms and referral systems, initiated under Phase I.

As such, starting from 2013, Juzoor expanded the geographical targeting of the project. Initially, Juzoor planned to replicate the project in 5 new impact areas. However, **upon the request of UNRWA**, a decision was taken in Phase II to target 9 new project areas in the northern West Bank: Jenin Camp, Tulkarem Camp, Nour Shams Camp, Qalqilya town, Faraa Camp, Balata Camp, Old and New Askar Camps and Camp Number one. UNRWA's commitment to collaborating with Juzoor and Save the Children and to contributing to project costs in Phase II is a clear indication of the **strong relevance** for this project, especially in vulnerable refugee communities.

Over the course of 2013-2015, Juzoor, in collaboration with UNRWA, reached out to the following **target groups**:

- 2,417 boys and girls, 10 to 17 years old living in project's impact areas, reached through the awareness raising sessions, workshops, and non formal educational activities, and through peer to peer education.
- 373 Service providers (health, education, and social) in all impact areas as front line personnel of SRHR service providers reached through a series of trainings, workshops, and meetings.
- 636 Parents, influentials, and other adult members of the targeted communities, involved in awareness raising campaigns, public events, advocacy conferences and activities, and meetings.
- 324 members of Child Protection Local Committees, targeted through capacity development support.



## Combating Violence Against Women

[Funder: Open Society Foundation]

[Timeframe: 2014 - 2015]

**Project Title: “Salma Project” Promoting integrated approach to combat Gender Based Violence** by improving the Health Sector Response to Gender-Based Violence and by encouraging effective civil society participation.

Gender based violence (GBV) is deeply rooted in the structural relationships of inequality between women and men in the Palestinian society. This act of violence is hurting

the families, the community and the society and reinforces other forms of violence. Juzoor, and based on its vision that health is a right for all, strives to address the serious problem of GBV within Palestinian society through a holistic approach targeting two main actors; the Civil society sector and the health sector. By engaging and supporting civil society and community based organization, to impact and shift the public opinion and the national policy towards one that tackles the problem of GBV, rather than leaving its victims to suffer alone.



The goal of this project is to promote an integrated approach to combat GBV in Palestinian society.

This will be accomplished by improving the Health Sector Response to Gender-Based Violence and by encouraging effective civil society participation.

Objective one of the project state that “This project aims to develop the capabilities of a total of 100 health care providers in 6 primary health care centers, 3 hospital Obstetrics and Gynecology (OBGYN) departments and Emergency Rooms (ER) and health professionals and students at one local university”

The targeted health providers had functional knowledge of national laws and regulations regarding violence against women and documentation that can be used to access the legal system and support legal proceedings. They will likewise be capable of referring victims or at-risk patients to legal aid, counseling services, support groups, and places of safety for women.

A training of the health care providers was done in the first year of the project, targeting Communications skills, Community mobilization and advocacy skills. Based on the training done, the health care providers were encouraged to embrace their role as advocates against GBV by supporting the development of community outreach and advocacy activities lead by health care providers in cooperation with the CSOs and the committees formed. A total of 100 health care providers from Ministry of Health and UNRWA had been trained during the project period on early detection, treatment and intervening with victims of violence in the selected areas.

A specialized 6-week professional **diploma** program with Al Quds University and Ministry of health for GBV for health care professions done. An e- learning course had been developed for health care providers as a mean to address GBV to all services providers. The GBV course had been adopted by the Ministry of Health continuing Education directorate as a step to build the capacity of the services providers on a national level.

Objective two of the project state that “This project encouraged health care providers and health service workers to embrace their role as advocates against GBV by supporting the development of community outreach and advocacy activities lead by health care providers. These activities aimed also to reframe the perception of GBV as a health issue not at odds with societal or religious conventions both for health providers and the wider community.”

The health care providers in the targeted locations have strong understanding and willful acceptance of their role as leaders in the campaign against GBV, which was clear in their participation in all project activities, and demonstrable capacity to form and carry out advocacy campaigns including the ability to design and disseminate educational and

advocacy materials, as well as a clear ability to communicate the public health impacts of GBV to non-health professionals,

A solid partnership between health center workers and one or more community organizations was formed in each of the 6 target communities. Workshops or other events held by this consortium had measurably increase the awareness of community members about the dangers of GBV, its health implications for both the individual and the community and will increase their level of confidence in speaking up about and against GBV.

The status of health care workers as advocates for social change in reference to GBV in the 6 target communities had elevated. Community members perceived health workers as being qualified to address GBV and/or as key proponents of women's rights in relation GBV. During the project, a total of 48 awareness sessions were held in the health clinic by the health staff who were trained on GBV addressing those who attend the health clinic for health services.

Objective three "This project will help to establish and coordinate committees formed of multiple stakeholders such as academic organizations, women's groups, NGOs, faith-based institutions and the private sector in order to facilitate a multi-sectorial, comprehensive approach to preventing GBV and shifting the public debate about GBV in Palestinian society.

Protection Committees in the 6 target communities had been formed, and developed a comprehensive and focused strategy to address GBV in their communities. Committees members had a solid understanding of the depth of the problem in their specific communities and feel comfortable and confident talking about the issue of GBV to various groups and stakeholders. GBV advocacy training for committee members; 3-day training had been held for 3 members from each committee. Training addressed the issue of GBV and techniques for community advocacy. The training was joined with the health care providers in order to create a team spirit among the health care staff and the committees' members and a mutual understanding of each party role. An active involvement of the health care and the protection committees in the local campaigns had been ensured to increase awareness of communities regarding GBV.



3 debate sessions have been organized on the rise in fatal GBV in Palestinian society in recent years, and will address possible causes and solutions 3 Universities benefiting 200-300 students.

The trained youth participants have conducted 3 debates in the three targeted universities. The debate topics were selected according youth demands. The first debate on "women's rights" to include a focus on violence against women and the factors leading to violence-political, social and cultural. The second debate that was conducted on Gender Equality and its influence on the community and its reflection one's ethics. The third debate was also conducted on the role of women in the community. It included the role of women in the political, social and economic sectors and how a women's role may change according to the Palestinian environmental factors.

In total, 273 participants (114 males, 159 females) participated in the debates and the response was successful in all debates.



## Women Bodily integrity (In/Ansaf):

[Feb 1- Dec. 31, 2015]

[Oxfam Novib]

The project idea is rooted in the concept of Women's Bodily Integrity (WBI). The term that covers gender based violence and sexual and reproductive rights is women's bodily integrity. *Women's bodily integrity is an expression of the value of self-determination, or personhood recognising that, if burdened by unwanted childbearing, domestic violence and abuse, preventable illness, malnutrition or lack of access to normal health care and family planning information and services, it will impede women's capacity to act as a responsible citizen and community member. That is, to exercise their civil, political, economic, social and cultural rights.* Thus women's bodily integrity includes both negative rights for example the right to be free from sexual violence, forced marriages or unwanted pregnancies, female genital mutilation (FGM) and involuntary sterilization. As well as affirmative rights, for example the right to the best reproductive and primary health care, full information and services for safe contraception and abortion, safe birthing services, and the free expression of one's sexuality regardless of one's sexual orientation or marital status.



Juzoor has implemented the project in areas where we have already built community trust and relationships through previous projects including Jericho- Akabet Jaber Refugee Camp, Ramallah-Dora -Hebron. Based on our experience working at the community and national level, Juzoor has identified several significant gaps in programs that tackle the issues of women's reproductive and sexual health rights and GBV. Some gaps include accessibility and quality of services, lack of community advocates or leaders who can bring issues of SRH and GBV to the forefront in communities, and a lack of work with men and boys on prevention and alternatives to violence.

The overall objective indicates the longer term objective towards which the project is expected to contribute. The overall objective is related to the overall problem and the impact that the project is seeking to contribute to (*globally / regionally and/or per country*). It usually addresses the well-being of the target group in terms of quality of life improvement.

The overall objective is: **Reduce impunity and the social acceptance of violence against women and create conditions for women and girls to exercise their human rights, especially their sexual and reproductive rights.**

As a result of the project, Juzoor's conducted 2 day summer camps in each of Dora, Akbet Jaber and Jenin camps, with of **300** participants (100 per location). The summer camps included team building and communication skills for the youth, in addition to Human, women, and child rights, GBV, SRHR and a short workshop on creative writing on the subjects identified in the summer camp. 134 males and 166 females attended the summer camps.

A 4 day intensive training was conducted in Bethlehem, for **30** youth as a preparation for the summer camps, the training included specifics on Child's Rights, GBV, SRHR, in addition to specific tools on communication skills and team building to assist them as counsellors in the summer camps and have the capacities to discuss these issues in the summer camps.

The trained youth participants have conducted 3 debates in the three targeted locations. The first debate concentrated on "child's rights" the second on gender equality and the third on role of women in the community with a total of more than **300 males and females**.

*Teams of Women Advocates formed and trained in the target locations and work on the community level to effect change in perceptions and attitudes towards gender equity, SRHR and GBV. The trained women were then provided with opportunity to each conduct an initiative to empower other women in their communities and spread the knowledge they came about within their trainings.*

## **The role of women's organizations in the implementation of the Referral system**

[ May 2015 - July 2016 ]

[Italian Cooperation]

**The main objective of the project** is to enhance the role of women's organization in the implementation of the referral protocols.

The first component is to conduct Awareness trainings for women's organizations to introduce the referral system.

The women's organizations which work and provide services to women who suffer from GBV are the first line to identifying and refer women to the services, therefore Juzoor and in cooperation with Tawasol centers in the governorates will hold awareness workshops.

These workshops aim to increase the knowledge of these organizations on:

1. Components of the referral protocols.
2. Referral forms and sheets.
3. Referral mechanisms and documentation within and with the working organizations.

The second component is conduct a **multi sectoral services providers workshop** (health- psychosocial- and protection) and the women's organizations to bridge, connect and exchange of services and roles.

These workshops aim to:

1. Clarify the roles of the main services providers in the different sectors for the women's organizations and the role of women's organizations in the framework of the referral system.
2. Clarify the referral pathways between the services providers and the women's organizations and the feedback on both sides.
3. Create a network among the different organization and formal bodies to facilitate the referral pathway for the victims of violence and achieving the best interest for them.

Throughout the awareness trainings and the multi sectoral services providers' workshop, the women's organizations will develop an advocacy plan aim to adopt and implement the referral protocols on the organizational level and grass root level.



## Sexual Reproductive Health Rights (SRHR)

[ July 1-Dec 31 2015 ]

[Oxfam Novib]

There were 100 health care providers that have undergone training and their work in relation to GBV reflects a high level of technical excellence and compliance with global and regional standards applicable to the identification and treatment of GBV, the professional diploma program is implemented successfully, ideally leading to GBV becoming institutionalized in University curriculum for health students and professionals.

Protection of children and adolescents (10-17 years) from gender based violence (early marriage and sexual abuse) is enhanced, through promoting their right to Sexual and Reproductive Health in three communities. The three targeted locations have been trained on sexual abuse education, modules, toolkit, detection and adolescents appropriate service provision topics. The training targeted service providers to include teachers, counsellors and social worker, PHC and community based structure personnel. Summer Camps for adolescents that have targeted 300 youth and adolescents have been conducted in the Al-Fare'a-Tubas, Qalqilia and Nour shams-Tulkarem. The youth were exposed to a variety of non-traditional educational activities that had messages on SRHR. The Youth were engaged and interactive in the activities. Juzoor has expanded their work in the West Bank and were able to replicate summer camps in different areas. Parents from four refugee camps that included Al-Fare'a in Tubas, Balata in Nablus, Jenin in Jenin, Qalqilia and Nour Shams in Tulkarem were trained on SRHR materials. Juzoor has reached 235 parents from the abovementioned refugee camps.



## HEALTH PROMOTION AND DISEASE PREVENTION ACTIVITIES

### **Preventing Non-Communicable Diseases (NCDs) Campaign**

**[Funder: Austrian Cooperation for Development ]**

**[Timeframe: Aug.t 1<sup>st</sup> – Oct. 31<sup>st</sup>, 2015]**

Non-communicable diseases (NCDs) are currently the leading global cause of death worldwide. In Palestine the leading causes of death are from cardiovascular, cerebrovascular diseases and cancers and prevalence of these diseases are also on the rise. A 2013 study, “Preventing type 2 diabetes among Palestinians: comparing five future policy scenarios’ estimated an alarming increase in the prevalence of diabetes mellitus in Palestine; by 2020 the model predicts that 20.8% of the population will be affected, reaching 23.4% by 20301.

According to the Palestinian Central Bureau of Statistics, youth and adolescents under the age of 29 make up 30% of the Palestinian population. Young people represent the future of the society and it is of utmost importance to focus on primary prevention among this group, to reduce overall prevalence of NCDs in the future and prevent a massive health crisis on the national level. Improving knowledge and behaviors of youth and adolescents towards NCDs will empower them to become agent for change on the individual and societal levels.

By Reviewing these indicators Juzoor found a need to improve the effectiveness of interventions, especially in targeted awareness campaigns, better enforcement of relevant laws, and increasing cooperation among health care sector stakeholders and policy makers.

Project aim:

The aim of the “Preventing Non-Communicable Diseases (NCDs) Campaign“ is to stimulate policy dialogue and reinforce the commitment for a stronger coordinated national actions involving key stakeholders.

<p><b>Result # 1: Recommendation paper developed and ready to use for action at national level for advocacy purposes</b></p>
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Juzoor accomplished the mentioned result by conducting Media workshop with both media representatives and ministry of health representatives to discuss issues of NCDs and they came up with the following recommendations

- Assemble a media coalition to address national health issues in general and NCDs in particular.
- Involve the media representatives in the NCDs thematic group.
- Share the health reports and challenges with all media representatives at a national level.
- Use the influence of media to create health policies and to support implementation of legislation.

Juzoor also conducted a Workshop with Health Care Sectors and Policy Makers Representatives from different Organizations and the recommendation as below :

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- Activating the law to enforce implementation of regulations of smoking such as preventing smoking in public areas.
- The National Health Strategy should include an action plan to combat the prevalence and incidence of NCDs.
- To align and merge the health national strategy with other national strategies to combine workforce under one national strategic plan.
- There is a need to develop and implement mechanisms to combat NCDs such as; Healthy nutrition, physical activity, and fighting obesity and smoking.
- Develop a national reporting system to enhance policy making.
- Identify priorities and develop practical action plans.
- Set a national meeting between all national committees and the NCDs committee to review the crosscutting intervention and implementation channels.
- All these recommendations must be brought up to the Prime Ministry Office to address the reality of NCDs and its burden on the national development, and force them to take productive action.
- Focus on working on Pre-diabetic cases, and people who are at risk of developing the disease.



**Result #2: 7 CBOs integrate into their agendas a focus on NCDs and their risk factors**

**Result #3: 150 women, and youth will benefit from lifestyle modification awareness and education, and improved their awareness in NCDs burden and risk factors.**





## Strengthening Environmental Activists for Better Environmental Governance

[Funder: UNDP]  
[Timeframe; 2014 – 2015]

The natural environment in the occupied Palestinian territories (oPt) faces significant threats from a number of factors both natural and human-caused, the largest of which is the continued political instability and territorial expansion.

Because of this, the natural environment including valuable natural resources such as water and arable land continue to degrade at an astonishing rate.

The situation in the city of Ramallah is similar to that elsewhere in the oPt. It should be noted that Palestinians are accustomed to burning solid waste as a means of waste disposal and domestic heating. It is also pertinent to note that recycling of waste in the current political scenario is made virtually impossible for the Palestinian population.



*Distributing recycle bins for recycling purposes in participating school*

At Juzoor, we are aware that civil society participation in environmental governance in Palestine remains weak. This is in large part due to the political and economic situation in Palestine taking the forefront in civil society agendas.

Juzoor and GEF share the same approach; like GEF, Juzoor believes that when stakeholders (NGOs, CBOs, local governments, etc.) are trying to address a global environmental problem, its solutions can only come from grassroots support and engagement of the concerned populations.

The project aims to promote sustainable development and improved environmental management through more effective civil

society participation in environmental governance. The action will be implemented at two levels: promoting participatory policy-making at Ramallah municipality and its implementation by Environmental Education and internal strengthening of Juzoor.

The primary objective and the specific objective of our intervention are:

- The **primary objective** of this project is to strengthen environmental activists in order to be able to advocate for effective environmental management within the Ramallah Municipality with the

support of amore committed civil society

• The **specific objective** of this project is to build up and enhance the capacities of Palestinian environ- mental activists, Juzoor staff, Ramallah municipality staff (Health & Environmental Department) and 6 schoolcommunities to engage environmental governance through Environmental education



*Planting trees in partnership with Ramallah Municipality in different areas.*



## Protect the Right and Improve Resilience of Vulnerable Communities in East Jerusalem

[Funder: EU and OXFAM Novib]  
 [Timeframe; May 2012-May 2015]

**Objective:** To revive Palestinian civil society organization’s presence in East Jerusalem and mobilize communities in the Old City, Sur Baher, Esawiyyeh, Silwan and Wadi Al Joz to actively participate in improving their access to and protection of their social, political and economic rights.

**Target Group:** School & university students, parents, teachers, school administrations; youth, women vulnerable to poverty and IHL violations, elderly, children, disabled, community leaders, legal, social and health professionals; international policy makers, international civil society, and media.

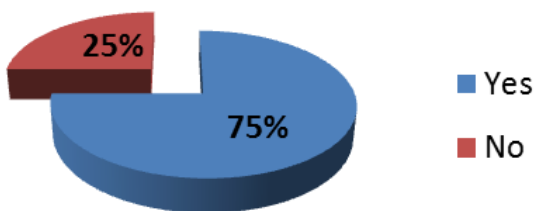
### Main Objective:

1. Develop healthier, more positive learning environments in selected Awqaf and private schools in the targeted neighborhoods
2. Improve skills in First aid and emergency preparedness
3. Improve safety standards of school premises
4. Enhance parenting skills and improve positive parenting methods
5. Advocate for the legal rights related to residency/family unification/child registration in East Jerusalem

### Main Activity Results:

1. Carry out 80 positive parenting 2-hour workshops in 10 targeted schools, attended by 840 parents.
2. Implementing 30 two days first aid trainings for 600 parents and teachers.
3. Supervise maintenance and small infrastructure work (i.e. installation of ventilation ducts) and supply of safety equipment (i.e. fire hydrants) in school canteens, washrooms, and classrooms in the 10 targeted schools.

**Overall, Have the sessions changed your attitude towards your children?**



Statistics from parent satisfaction survey

## SUCCESS STORIES

- A father from Al-Thori School in Silwan was finding difficulty in communicating with his son about the importance of education; given that the father couldn’t complete his education: “My son wants to be a construction worker like me and I want a better future for him. This workshop gave me better communication skills to convince him to seek a better future”.
- An Interview was conducted with a young student from Aytam D School where she stated: “I used to avoid using the bathroom due to the foul smell and slippery floors, now thanks to the work implemented I don’t need to sneak out of school to go home to use the bathroom”.
- One trained teacher from Sur Baher was able to save the life of another person during a school field trip. She made the following short video documenting the case:  
<http://www.youtube.com/watch?v=GYP1EPc1Fdc>

# PROGRAMS

## 3. POLICY DIALOGUE AND ADVOCACY





# POLICY DIALOGUE AND ADVOCACY

Advocacy for Policy Development is Juzoor's program that responds to the aim of "influencing and contributing to the development of health and social policies, " in line with the Palestinian community needs.

As a national developmental organization, Juzoor works closely and consistently with all relevant institutions in Palestine, primarily the Ministry of Health, which leads the national strategy for development in the Palestinian health sector. Over the past years, Juzoor has also worked closely with UNRWA health program, which is the main provider of health and social services to a large segment of the Palestinian society in refugee camps and other areas where Palestinian refugees live. Juzoor attaches high significance to health and social policies and advocates policy development in the sectors. It does that through the following activities:

- Development of white papers on specific policies
- Participation in regional and international conferences and advocacy campaigns
- Preparation of research and development of reliable sources of information
- Involvement in policy dialogue

## ACTIVITIES

### **National and Regional Networking**

Juzoor has a wide network of national and regional organizations and institutions and is a part of numerous consortiums, forums and groups that work toward common goals. Juzoor helped establish a national health policy forum to engage in focused discussions on critical health policies and challenges facing the Palestinian health system. In addition Juzoor has served as an advisor to the Ministry of Planning, helped lead the Population Forum, and is part of the Health NGOs consortium for ESCOW, Middle East Health Policy Forum, Arab Social Forum, and part of the Jerusalem NGO coalition. Juzoor enjoys strong working relationship with the Ministry of Health and its different departments and has implemented several projects with the Ministry such as capacity building and training, development of guide-lines, organizing joint workshops and conferences, supporting the midwifery program, and implementing the psychosocial program. As part of its involvement in national and regional networks, Juzoor has participated in numerous conferences and workshops held by organizations such as the American Public Health Association, ALSO International, World Health Organization, UNRWA, Palestinian Ministry of Health, Birzeit University, Bethlehem University, Al-Quds University, USAID, and a number of local NGOs. The organization contributes to the conferences (which are held on a variety of topics) through writing position papers, providing expert opinion, and conducting presentations. Apart from attending conferences organized by other groups, Juzoor also organizes conferences and workshops in cooperation with local and inter-national groups on various subjects including nutrition in emergency situations, pediatric emergencies, breastfeeding and natural childbirth, among others. These workshops and conferences give health providers and the wider public the opportunity to learn the latest updates on different health issues, meet other professionals and laypeople who share an interest in the subject, and network with international consultants and guests.

## Health Policy Forums

Juzoor is a member, co-founder and hosting organization of two national and regional health forums:

- **Palestinian Health Policy Forum**

Juzoor helped create the Palestinian Health Policy Forum and has been hosting the Forum since its inception. Since 2005. Which believes that Health is **a basic human right, and not only a biological state focusing on disease and patients, but a social, economic, and political issue that is directly connected to national development and affected by multiple factors**, it is a crucial indicator of national prosperity and the degree to which a society is participating in public discourse, and the commitment of national and civil society institutions to human rights. On that basis, a group of health and development stakeholders established the Palestinian Health Policy Forum. **The purpose of the forum** is to strengthen and support national health policy in a manner consistent with human rights, social justice, so as to influence decision makers to adopt policies and strategies suitable for the Palestinian development context and respond to the needs and aspirations of people ensuring universal access to quality health care.

The vision of the PHPF is to contribute to the creation a Palestinian health system that is able to respond to the health needs of the Palestinian people and to the challenges of the current context in an equitable manner; focusing on the importance of public participation in planning, implementation, and evaluation of strategies; adopting an evidence based approach to choosing interventions and health programs, including the provision of quality health care in a manner that is sustainable and contributes to the improvement of health situation of the Palestinian community in coordination with the other development sectors.

Despite extensive initiatives, programs, and the good intentions invested in improving the Palestinian health system in the past, the system remains to this day below the developmental expectations, as it has not improved in a manner commensurate with the size of interventions and spending to that end. Health services continue to be of low quality with variation between geographical areas; there is an increase in spending on curative and secondary health care at the expense of strengthening preventive and primary care; the system suffers from the lack of internal coordination between key stakeholders, as well as external coordination with stakeholders from other sectors; health programming is heavily influenced by donor priorities and lacks financing policies; the system also lacks reliable health information and research to support decision making; not to mention the fragmentation and chaos in the private and non-governmental sectors; the decline in the performance of the public sector and the shortage of qualified human resources. All of the above factors continue to be a burden on the health sector and threaten its future.

The founders of the PHPF find that there is an opportunity to contribute to the reform of the health sector and to revitalize public debate related to health policies and programs in a way that is consistent with Palestinian national interest.

Formulating health policies should be based on research, data, evidence, and public debate. Achieving health for all requires a tremendous effort, public participation, a high level of Transparency and cross-sectoral strategies. Keeping in mind that change takes time and requires public awareness and the formation of coalitions among stakeholders in order to advocate and influence the health sector so as to reach the desired goal. Therefore, the PHPF will seek to build and extensive and dynamic network of decision makers, stakeholders, and community leaders from the public sector, the Ministry of health (MOH), and legislative council, CSOs, international and national NGOs, media, youth, and others in order to create a meaningful and effective public debate that contributes to affecting and creating health policy and improving the Palestinian health system.

The Ministry of Health will be involved in various stages of the policy dialogue, however, the intent of the forum is to mobilize and activate civil society organizations and citizens to engage in debate in order to inform public policy and to advocate for health reform and system improvement with the MOH. The PHPF is an independent body that seeks to support the MOH in developing health policies that better serve the Palestinian people; involving MOH will be crucial and will be handled delicately in order to avoid a conflict of interest.

## • Middle East and North Africa Health Policy Forum

The MENA Health Policy Forum (HPF) which Dr. Salwa Najjab, the Executive Director of Juzoor, is the Chair of the Board of Trustees of the Forum was established in 2008 as an independent, non-profit organization, with membership drawn from health policy researchers and experts from the MENA countries. **Its mission is to contribute to the development of effective, efficient, equitable and sustainable policies that improve health and that mitigate adverse consequences of ill health, particularly for those who are most disadvantaged.** The Forum is currently the only independent nongovernmental health policy network in existence in the MENA region.

HPF is now in its eighth year of formal operation. Over the last year, the Forum has doubled its membership to over 100 health policy experts and researchers; these experts/researchers come from range of relevant disciplines, from middle and lower income countries of the region, and from actual and potential sponsors.

Central to MENA HPF's mandate is serving as a knowledge broker on health policy research, reforms, and systems. Under this objective, MENA continued monitoring and identifying existing research and research gaps to inform health policy options. This year, MENA HPF focused on the following activities:

- i. Developing Health System Governance Assessment: country report (Egypt)
- ii. Following up with the WB to develop a standardized framework to act as a regional monitoring tool, to be followed by capacity building workshops on the utilization of the tool.

### Analytical and comparative studies

**The studies involved a number of outputs that addressed emerging and important topics in the region:**

- i. Given the regional threat of the Ebola virus, a working paper was written that addressed risk assessment and directives for preparedness
- ii. In 2012, MENA HPF held a symposium addressing health system governance in the region. Following the meeting, specific recommendations for different countries were identified to strengthen governance. As a follow-up and to gain a better understanding of future directions, the Forum conducted 2 studies to assess efforts to strengthen governance and the role of stakeholders and challenges they face in some countries 1- A glance at Governance in MENA Region; 2- Case studies from Egypt.
- iii. The MENA HPF has developed two scoping studies addressing the political economy of primary and preventative healthcare in the MENA region. As a follow-up, two policy notes were developed. March 2015.
- iv. A study assessing and identifying research gaps in health systems and policy research was undertaken.
- v. A discussion paper is written on harmonizing youth reproductive health services in the region
- vi. A mapping study for SRH policies was done compiling results from 11 Arab States in collaboration with UNFPA ASRO. Where Juzoor conducted the Mapping for Palestine and Dr. Salwa presented the result in a regional meeting in Egypt.



- **World Bank - Civil Society Consultative Group on Health, Nutrition and Population**

As part of Juzoor's policy work Dr. Salwa is a member of a global group under the World Bank management called **Civil Society Consultative Group on Health, Nutrition and Population**. The joint WBG-Civil Society Consultative Group on Health, Nutrition and Population (the Group) was formed in 2011 in response to the call from CSOs for a more structured mechanism for Bank-CSO engagement at the global and country levels.



Representatives are selected by a joint civil society-Bank selection committee, on the basis of applications received from a global call for nominations. The civil society members of the Group are based in different parts of the globe, and are selected on the basis of their expertise and their capacity to network with different civil society constituencies in the HNP sector. The Group is not intended to represent global civil society as a whole. Members serve for three years, in a voluntary capacity, with recruitment of new members staggered at approximately 18-month intervals to ensure some continuity. Currently, the Group consists of 14 civil society experts on issues related to HNP in different regions, from both national and international organizations.

The Group design their intervention by a monthly call discussing different policy papers and global issues such as Universal Health Coverage and they meet twice a year for a face to face meeting in Washington USA. Where Dr. Salwa participated for the third year in a row.



- **OIC RMNCH Network**

Juzoor participated in the first expert meeting of the OIC Network on Population and Reproductive, Maternal, New-Born and Child Health that was held in Ankara, Turkey in November 2015. Juzoor is now a member in the OIC RMNCH Network.

## FINANCE & ADMINISTRATION UNIT

### Financial and Administrative Affairs

The Financial and Administrative Affairs Department is the backbone of all the fiscal and human resources operations at Juzoor. It provides professional and effective financial and administrative services to all staff and promotes meaningful relations with Juzoor's constituencies. It also delivers cost effective financial processes and is responsible for Juzoor's financial position and strategy, while providing different logistic and administrative requirements. In short, the Financial and Administrative Department underpins Juzoor's professional vision and assists in achieving its goals and maintaining its position.

Financial and Administrative Affairs Department includes the following sections:

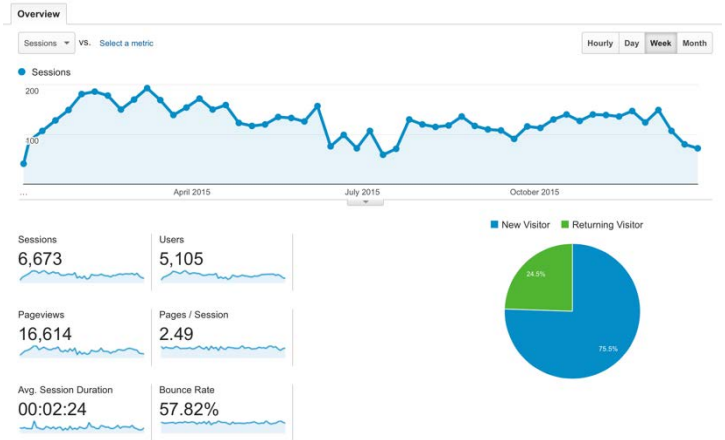
1. Human Resources
2. General Services
3. Accounting
4. Public relations
5. Fundraising
6. Information Technology
7. Procurement & Supplies



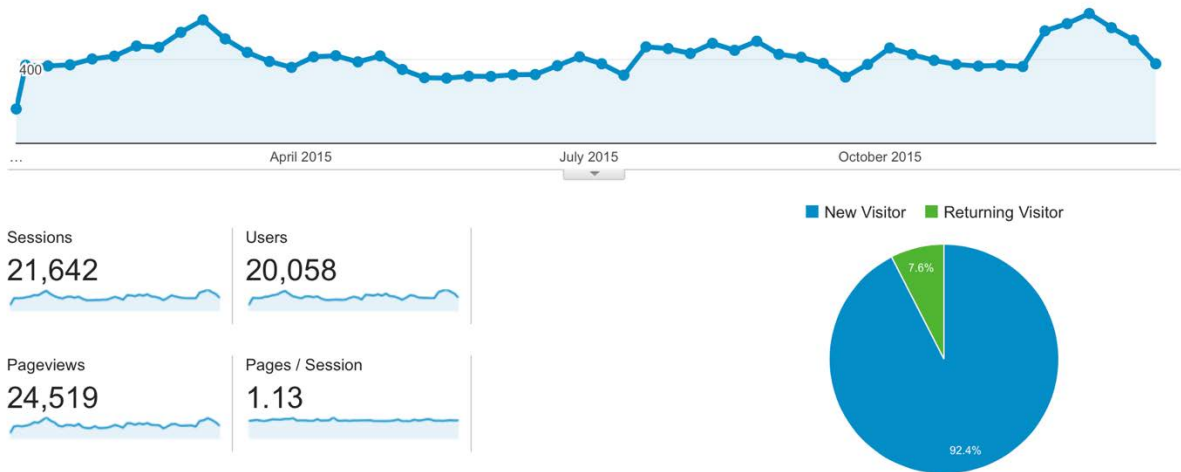
## Information Technology at Juzoor

- Stop Motion-Animation:** Juzoor worked on many Stop Motion Animation projects and worked on finalizing films created with logos, messages, and English translation. In 2015, there were over 14,000 views on our Animation YouTube channel <http://www.youtube.com/user/AnimateIT5>
- Website and Social Media:** Here is a quick analytics snapshot of website statistics from Jan 2015 – Dec 2015. Juzoor had **16,614 page views**, in 6673 sessions averaging around 2:49 minutes on the site.

Juzoor also has a website dedicated to the youth. It has useful information suitable for teenagers and young adults. The website is known more in the Arab world than in Palestine because of the rich useful data that young adults seek and are looking for.



The youth website from Jan 2015 – Dec 2015 had **24,519 page views** with the most hits coming from Saudi Arabia, then Egypt, Algeria, Morocco, Iraq, Jerusalem, Palestine, Jordan and others.





# BOARD OF DIRECTORS

## **Mr. Saro Nakashian**

Chair of the Board: General Director, Palestinian Education for Employment Foundation (PEFE).

## **Dr. Yahya Abed**

Vice Chairperson: Associate Professor of Epidemiology, Founder of School of Public Health, Al-Quds University.

## **Ms. Vera Pano**

Treasurer: Health Education Supervisor, UNRWA.

## **Dr. Bassam Abu Hamad**

Board member: General Coordinator of Public Health Programs, School of Public Health, Al-Quds University

## **Dr. Jumana Budieri**

Board member: MPH, Public Health MSc, Medical Relief Society

## **Mr. Ragheb Budeiri**

Secretary: Director of Programs & Projects, Palestine Monetary Authority

## **Ms. Manal Warrad**

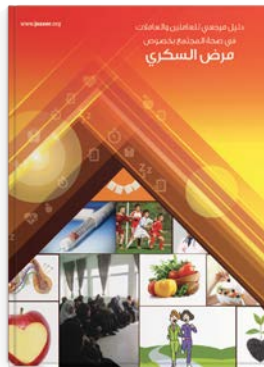
Board member: Programs Director, Jerusalem Media and Communications Center/



# STAFF

1	Salwa Najjab	Executive Director
2	Lama Hasan	Director, Finance & Administration
3	Stephanie Hansel	Director, Continuous Professional Development (CPD)
4	Ahmad Khaled	Finance & Administrative Manager
5	Majd Hardan	Public & International Relations Officer
6	Bayan Shobaki	Accountant
7	Faten Tannous	Program Associate / Event Manager
8	Marina Zayed	Program Coordinator
9	Shadi Zatar	Project Coordinator
10	Shaban Mortaja	Training Coordinator
11	Maha A Khatib	Program Coordinator
12	Jennifer Dabis	Team Leader
13	Yousef Rabah	IT & Website Officer
14	Khadrah Dweib	Field Coordinator
15	Yusra Aburameileh	Field Coordinator
16	George Aburdeneh	Field Coordinator
17	Ramzi AlMassou	Field Coordinator
18	Dina Nasser	Technical Advisor
19	Rihab Sandouka	Director, Community Development Department (CDD)
20	Mo'ath Hajji	Office Support
21	Sara Shawamreh	Office Support
22	Arafat Shnaina	Driver

# JUZOOR'S PUBLICATIONS





## AMONG JUZOOR'S SUPPORTERS



**USAID**  
FROM THE AMERICAN PEOPLE













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