



BEYOND CONFLICT

The mental health charity for victims of war

PALESTINIAN WEST BANK REPORT

JULY 2024

FOREWORD

Beyond Conflict is the mental health charity for victims of war, terrorism and displacement. Following the October 2023 Hamas attack on Israel, the escalated Israeli military response against Palestinian territories and civilians has resulted in a wide-scale humanitarian crisis in the Palestinian territories of Gaza and the West Bank.

As a consequence, Palestinian civilians have suffered destruction of their community, infrastructure, homes, medical facilities and continue to face a dire shortage of food and water. It has triggered an unprecedented humanitarian and mental health crisis amongst civilians in the territories concerned. More than 500 people have been killed in the Palestinian West Bank between October 7 2023 and May 16 2024 (OCHA), and 4,950 have been injured. In Gaza itself, the death toll is estimated to be 33,000 according to the local health ministry.

Direct mental health support remains difficult in Gaza itself due to continued Israeli bombardment and a lack of infrastructure. After being approached with funding by the London Stock Exchange Group Foundation, Beyond Conflict decided to partner with Medical Aid for Palestinians (MAP) to offer support to civilians and frontline workers in the West Bank. MAP is one of the leading and most respected NGOs serving the Palestinian community.

The scale of the mental health crisis faced by Palestinian civilians, particularly children, is growing. UNICEF reports that children in Gaza as young as five are suffering thoughts of self-harm and suicide. We hope this report will help draw additional financial support to this work. It is clear from feedback this work remains more urgent than ever and needs to continue over the long term in order to be fully effective.

It is especially important to provide MHPSS for children and young people because of the profound long term and inter-generational impact of war trauma. Young people represent the future of a country and in order to become fully integrated members of society and their country's economy, it is vital to address the psychological effects of conflict.

Beyond Conflict believes that in order to have hope of securing enduring peace in the future, the psychological fallout of conflict must be addressed now. We are proud to support MAP's mental health project in the West Bank and share an edited version of their report below. The project ran from January to May 2024. Beyond Conflict thanks LSEG Foundation for funding this project.

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Partner Organization:	Medical Aid for Palestinians (MAP)
Project Implementation Period	January – May, 2024
Project's Title	Supporting the mental health of Palestinians living in the occupied West Bank in Palestine
Project Objective:	The project aims to build the capacity of vulnerable Palestinians to cope with the protracted crisis in the West Bank by increasing access to quality essential MHPSS services.

Introduction:

MAP is dedicated to advancing a future where every Palestinian has access to a resilient, sustainable, and locally operated healthcare system, empowering them to fully exercise their rights to health and dignity. Collaborating with experts such as the Royal College of Psychiatrists in the UK, MAP has effectively developed a mental health program over several years. This program aims to bolster the healthcare system in the region by enhancing capacity-building efforts and improving quality of MH services.

This project, supported by Beyond Conflict, is in line with MAP's strategy of promptly responding to and delivering aid during humanitarian crises, and it builds on MAP's programming in collaboration with UNRWA on the ground.

Project locations:

The project targeted two refugee camps in the Nablus area: Balata Refugee Camp and Askar Refugee Camp. MAP's interventions from previous projects were vital in accurately assessing the situation and helping determine the project's target locations.

Balata camp is in the northern West Bank in Nablus city. Originally intended to serve approximately 5,000 Palestine refugees, it is today the largest camp in the West Bank, with more than 32,000 registered refugees. The levels of poverty and food insecurity are among the highest in the West Bank. With almost 60% of camp residents under the age of 25, youth are especially affected.

Askar camp is among the most densely populated West Bank camps. Overcrowding and unemployment are among the most serious issues facing the refugees in the camp. Poor shelters and cramped living conditions offer no privacy for residents in their personal lives, adding to physical and psychological strain.

These camps are exposed to military operations conducted by the Israeli army. These operations often occur at night, resulting in damage to homes and infrastructure, causing fear and anxiety among the camps' residents, especially among young children and adolescents.

The year 2024 witnessed escalated Israeli military operations and raids on the refugee camps, following the October 2023 Hamas attack. The continuous military presence and incursions have contributed to a climate of instability, trauma, and psychological distress among residents.

Palestinian families, especially children, women, the elderly, and youth, have experienced profound psychological effects such as anxiety, trauma, and post-traumatic stress disorder (PTSD). Mental health services and psychosocial support are critical but often limited, posing challenges to addressing the psychosocial well-being of the affected population.

Despite the challenges, the Balata and Askar communities have shown remarkable resilience and solidarity.

Achievements:

The project extends MAP's previous efforts in delivering capacity-building initiatives to UNRWA MHPSS providers in the northern area of the West Bank, particularly focusing on Psychological First Aid (PFA) -Plus training. This aims to strengthen their ability to conduct effective, context tailored MHPSS awareness sessions for caregivers.

During this project, MAP successfully executed all planned activities in accordance with the project's implementation plan and timeline. These are the main achievements:

- **4 Psychological First Aid** sessions were delivered in the camps, on dealing with loss, trauma and depression.
- MAP **81 caregivers** (including mothers, fathers, grandparents, teachers, and healthcare providers) from the target locations who participated in MHPSS awareness sessions. These sessions emphasized delivering Psychological First Aid to children, adolescents, and family members in need of MHPSS.
- **250 MHPSS care kits** were procured, delivered, and distributed to caregivers in refugee camps.
- Protection, Safeguarding, Gender-Based Violence (GBV), and Protection from Sexual Exploitation and Abuse (PSEA) were integrated throughout the project activities.
- Beneficiaries were introduced to these principles. In addition, MAP's beneficiary feedback Cards were distributed and explained to participants.

Project output:

Adults and Children in conflict-affected areas benefit from Mental Health and Psychosocial Services.

To achieve this output, MAP worked intensively with relevant project partners on the ground, like UNRWA, to provide MHPSS in conflict-affected areas. The aim is to alleviate the psychological suffering of individuals, especially children and their caregivers, foster resilience, and promote the overall well-being and functioning of children, caregivers, and their communities. Healthcare workers from UNRWA delivered 4 Psychological First Aid (PFA) awareness sessions: three in Askar refugee camp and one in Balata. The 4 awareness sessions targeted caregivers, including mothers, fathers, and teachers.

MAP procured and delivered 250 MHPSS Care Kits to caregivers in cooperation with UNRWA. The kit's objective was to create a safe space for children and caregivers to express their emotions and reduce trauma and stress. Children often struggle to articulate their feelings and find healthy outlets. By providing a range of items tailored to their needs (seeds for planting, stress relief toys, family games, stress relief coloring books), these kits offer valuable tools for self-expression and emotional regulation. Furthermore, including items like seeds for planting encourages a sense of connection to nature and promotes activities that foster resilience and mental health well-being.

81 caregivers received PFA awareness sessions.

Activities:

Activity 1.1	Establish a technical committee with UNRWA to develop selection criteria and identify children/adolescents as being vulnerable/at risk of poor mental health.
	In collaboration with UNRWA, MAP successfully completed the preparatory groundwork, including logistics and technical preparation for the psychological first-aid awareness sessions. Several meetings were conducted with the UNRWA staff to confirm the locations, trainers, training material, and timeline of the training. The meeting emphasized the importance of including a diverse segment of the local communities from different age groups and various educational backgrounds, especially women and people with disabilities, to increase the effectiveness of the training in the local communities.
Activity 1.2	Four Psychosocial First Aid (PFA) awareness sessions were provided to caregivers of children based in Balata and/or Asker refugee camps near Nablus.
	MAP has delivered 4 PFA awareness sessions in Askar and Balata refugee camps. Trainers from UNRWA, whom MAP trained on providing specialized PFA training tailored to the Palestinian context with emphasis on dealing with loss, functional depression, and managing the ongoing trauma, in addition to remote interventions (Tele counseling) and Self-care training, delivered PFA awareness sessions to caregivers. 81 caregivers participated in these sessions. The content of the sessions covered various aspects of Psychological First Aid, including recognizing signs of distress, providing emotional support, and connecting individuals with further assistance if needed. Through these sessions, caregivers gained valuable insights into effectively responding to the psychological needs of their children and family members, promoting resilience and well-being amidst challenging circumstances. MHPSS care kits were distributed to caregivers. The principles of safeguarding PSEA and protection principles were introduced during the awareness sessions. These messages were discussed and delivered during the sessions.
Activity 1.3	Procure MHPSS care kits.
	MAP has successfully completed the procurement process of 250 MHPSS care Kits and delivered them to UNRWA. The MHPSS care kits are vital in providing comprehensive support to children and their families impacted by conflict and adversity. These care kits were delivered during PFA awareness sessions at the Balata and Askar refugee camps in the Nablus area. Delivering these care kits alongside PFA awareness sessions ensures that caregivers have the resources to support the holistic well-being of children and their family members in their care. By creating a child-appropriate environment that prioritizes play, creativity, and emotional expression, these kits contribute to the overall mental health and resilience of young individuals affected by conflict.

Activity 1.4	Monitoring and Reporting
	<p>The MAP team fulfilled its roles of monitoring and reporting on project activities. The team has attended various training activities, including PFA awareness sessions, to ensure that the activities are executed as planned and have achieved their goals. Moreover, the team has collected data and feedback from these activities that will be used to assess their success and effectiveness. The team also actively oversees the progression of procurement activities, ensuring alignment with the project timeline, adherence to the allocated budget, and strict compliance with the stipulated project objectives and the guidelines outlined by the donor. Additionally, the team monitored the delivery process of the procured items in various target locations to ensure that all proper documentation was collected.</p>

Project’s Challenges:

The continuous Israeli military presence and rising unrest in the West Bank, has exacerbated the West Bank's already severe circumstances. Movement restrictions have hampered the execution of the project. The obstacles confronting the project's implementation are:

1. **Access Constraints:** Israeli forces have enforced systematic measures to limit Palestinian mobility throughout the West Bank and Jerusalem. These measures include closing entrances to Palestinian cities, blocking vehicle passage, and roadblocks, earthworks, and checkpoints. MAP managed to mitigate this challenge through continuous coordination with the Access coordination unit and other clusters and working with a local coordinator in the Nablus area to ensure the smooth implementation of the activities.
2. **Assaults on Refugee Camps:** Assaults on refugee camps in Nablus, resulting in substantial casualties, detentions, and infrastructure damage, have added to the challenges in project implementation. The destruction of infrastructure and roadways has impeded access and heightened security risks for project personnel. To mitigate these risks, MAP has hired a local coordinator in Nablus to help with on-site support and coordination efforts.
3. **The Humanitarian Emergency:** The escalating conflict has worsened the humanitarian emergency, leading to heightened displacement, trauma, and psychological distress among vulnerable populations. Addressing the mental health and psychosocial requirements of caregivers and communities amidst these adverse conditions necessitates innovative strategies and heightened awareness of cultural and contextual nuances.

Lessons Learned:

- Close coordination and communication with the project's partners and donors are essential for the planning and implementation.
- Installing local coordinators will help mitigate restrictions in the target locations.
- Readiness to adapt to the changing circumstances and alternative solutions.

Conclusion:

The Palestinian context has been unique over decades, and the ongoing trauma necessitates unique and innovative interventions. The provision of MHPSS services in conflict-affected areas has provided a much-needed service for both caregivers and children. Through targeted interventions and strategic partnerships with organizations such as UNRWA, the project has mitigated psychological stress, fostered resilience, and enhanced overall well-being within the target communities.

The delivery of Psychological First Aid (PFA) awareness sessions and the distribution of MHPSS care kits have facilitated the creation of secure environments conducive to emotional and psychological expression among caregivers. The sessions have empowered caregivers to openly discuss their fears and anxieties, fostering a culture of understanding and communal support. Moreover, participants have undergone training in PFA techniques, equipping them with the skills to navigate and manage stressful situations with children and adolescents adeptly.

Feedback from caregivers who had undergone the PFA training expressed the urgent need to expand the interventions and convert them into a continuous MHPSS program for beneficiaries in conflict-stressed areas.

Recommendations:

- Ensure the continuity and expansion of MHPSS interventions in conflict-stressed areas to reach more individuals and communities in need in the West Bank.
- Invest in continuous capacity building for healthcare workers and caregivers in affected areas. This includes training sessions on PFA techniques and self-care training.
- The restriction on freedom of movement in the WB has affected the Palestinian access to basic health care and MHPSS services. Psychological remote interventions (telecounseling) capacity building should be introduced to MHPSS providers so they can support individuals experiencing psychological distress in situations of movement restrictions.
- Implement robust monitoring and evaluation mechanisms to assess the impact and effectiveness of MHPSS interventions.
- Collect qualitative and quantitative data on mental health outcomes, participant satisfaction, and areas for improvement to inform programmatic adjustments and enhance impact.

Case Studies

N.A, Balata Camp in Nablus.

When asked about the benefits of the PFA awareness training, N.A from Balata Camp shared:

"It was like a glimmer of hope. Finally, someone addressed our struggles and suffering with raising children in this situation. Our lives in the camp are tough, especially with children who are difficult to control given the security challenges."

However, she also longed for more time and deeper conversations, as not every mother could fully engage and unpack their experiences. Despite these challenges, the training brought about a change in perspective. N.A admitted:

"I never knew about breathing methods and self-control ways. The training opened my eyes to new concepts and provided practical tools that I can now use to manage stress and emotions for me and my children."

I.F, Balata Camp in Nablus.

I.F, a mother from Balata refugee camp, stated:

"My psychological state improved, and I felt that I was not alone in life. I felt that I was with a supportive group. Training was important, and I needed to be in such wonderful groups more than once."

Reflecting on how the training impacted her understanding of mental health, she said:

"I learned breathing techniques that I used many times when I felt angry, stressed, and anxious."

These new tools brought a sense of control and calmness in moments of distress. However, she also expressed a need for more comprehensive training:

"But the training time is insufficient and requires more days."

U.Q, Askar Camp in Nablus

U.Q, a mother from Askar camp, shared her experience:

"The PFA training, in general, was very good because it raised issues that affect all mothers in dealing with those around them, especially their children, how to control the psychological aspects, especially in difficult situations and crises."

U.Q found herself confronted with a subject she had not explored before.

"During the training, we talked about anger issues towards children. This topic was the first time it had been raised to me, and I needed information and guidance."

Reflecting on the impact of the training, U.Q expressed:

"I think I need more than one session on dealing with anger because I was affected by this topic."

Photos



Figure 1. PFA awareness session for caregivers. Balata refugee camp. MAP photo



Figure 2. MHPSS care kit content. MAP Photo.



Figure 3. A caregiver in Balata Camp receiving MHPSS care Kit

FOR ADDITIONAL INFORMATION PLEASE CONTACT:

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