

HPSE22-SHL-183607-1

Secure standard basic shelter needs and NFIs to people at natural risks and man-made hazards



Basic Info

Project Name

Secure standard basic shelter needs and NFIs to people at natural risks and man-made hazards

Start Date

01/01/2022

End Date

31/12/2022

Project Summary

The project includes full standard rehabilitation and upgrading of shelters and the provision of capacity building to reduce the exposure of targeted beneficiaries for man-made/natural disasters and weather conditions, to manage and adapt internal space in case of COVID isolation, enabling them to live with more dignity and improving their preparedness. Providing adequate shelter will contribute to mitigating the effects, vulnerabilities and risks associated with the coercive environment in Area C and East Jerusalem, especially for women, children, the elderly and PWDs. Shelter rehabilitation and upgrading activities, coupled with the implementation of the community participation methodology when applicable will allow the fulfilment of the objectives of empowering communities in terms of coping capacities, ownership and expertise as well as resilience. The action is fully in line with 2022 HRP Strategic Objectives 2, it complies with the minimum shelter cluster standards for adequate housing for all age-gender groups and PWDs. This integrated approach ensures that communities are sufficiently protected and equipped with tangible assets, in order to prevent their forcible transfer. The beneficiaries of this action are 1222 (235 women, 205 men, 337 boys, 373 girls, 72 elders, including 14 PWDs) among 198 vulnerable households in 31 communities in terms of socio-economic and protection vulnerabilities, which are connected to their physical and politically-related situation: families with PWDs who need shelter/WASH facilities adaptation and families who suffer from IF and settler's violence; lack of access to basic services, inadequate shelter, and movement restrictions among many other hindrances. The action will target 31 communities where, 19 communities are allocated for WWGVC, and 12 communities are under the PHC target. All of the communities are distributed in eight governorates; Jenin (Imreiha), Ramallah (Ein Qiniya Bedouins - Wadi ad Dulum, Deir Nidham Bedouins - Al Hossa, Al Mu'arrajat Centre, Rantis Bedouins), Tubas (Ein al Hilwa - Wadi al Faw), Salfit (Kherbit Um al Hamam, Deir balout Bedouins), Jericho (Marj Naajeh Herders), Bethlehem (Al 'Iqab, Barriyat Za'tara, um Al Hawa), Hebron (Khallet Al Mafateeh, A Seefer, Dkaika, Al Abaidiya, Um Qussa, Ineezan, Umm al Kheir) and Jerusalem (inside and outside the wall; Beit Safafa, Sour Baher, Jabal Al Mukabber, Al Thoori, Al Tor, Ras Al Amoud, old city, Wadi Al Joz, Issawieh, Sheikh Jarrah, Beit Hanina, Shu'fat, Silwan), Shelter rehabilitation will be obtained through different interventions:

Area C: rehabilitation of metal and concrete shelters with composite roof, with internal renovation, provision of PVC covers, Covid-19 measures adaptation; Jerusalem: replace sandwich panel's roof, ventilation, insulation, flooring, windows, internal walls, toilets, sinks and kitchens, access facilitation for the disabled if needed. Interventions in EJ do not need municipality permits since no new constructions will be executed, solely rehabilitation and in some cases rearrangements of existing housing units.

This project aims at contributing to the elimination of some poverty effects on vulnerable families, improving the quality of the proper housing stock, reducing land designation for housing and infrastructure by restoring the existing housing stock and improving the social, economic, and health conditions for the beneficiaries

Capacity building will be provided to the communities on self-implemented house renovation techniques to continue improving the shelter conditions. The provision of material support will be backed-up with activities and sessions to contribute to self-recovery; reduced risk of GBV and other protection-related risks; increased privacy and PWD minimum living standards; WASH facilities and hygiene. All interventions will be implemented in coordination with the PA and will cover the humanitarian needs of the communities with a NEXUS perspective.

Tags

Organizations

WeWorld - Gruppo Volontariato Civile Onlus

Implementing Partners

Palestinian Housing Council

Contact Info

Andrea Sparro / andrea.sparro@gvc.weworld.it / 0594211386

Associated Response Plan

occupied Palestinian territory 2022

Plan Fields

1 - Needs

In the framework of the ECHO West Bank Protection Consortium, WW-GVC through the Community-based Protection Approach (CPA) has been collecting quantitative and qualitative data in the targeted communities since 2015 to gather, through a full community engagement, protection-related information on vulnerabilities, threats, capacities, and coping strategies. The last round of assessments, carried out in February 2021, highlighted the persisting difficult environment, continuously challenging protection threats, restriction of movements, and restricted access to basic services (including shelter). 160 communities have been targeted in this assessment, its quantitative results are presented through the protection vulnerability index (PVI) which has an average of 57.74% for the shelter sector which is considered high based on the CPA scale (100% most vulnerability, 0% for least vulnerability), the main results presented that 168 new block shelters are needed in 15 communities, and 1,023 shelters in 50 communities are in need of urgent rehabilitation to meet basic shelter standards, As part of CPA steps; community members interviewed through men and women focus group discussions said that there are specific groups that are extremely vulnerable and exposed to shelter related risks; particularly new couples, households led by women, and pregnant women, as well as children, elders and PWD. Women represent a vulnerable group, given the patriarchal culture that stresses women's role in the domestic sphere, they specifically suffer from improper and unsafe living conditions and they are more vulnerable to poverty and diseases; the same applies to children, elders and PWDs. In 2021, jointly with MoSD, PHC meanwhile conducting risk-based assessment for registered beneficiaries of MoSD that covers beneficiaries in need of shelter rehabilitation in the West Bank (Areas A, B and C), alongside EJ assessment is based on PHC's waiting list and received applications for the Rehabilitation Program. The assessments depend on: I) technical assessment

insight of minimum shelter standards and II) socio-economic assessment in sight of the needs for women, men, boys, and girls, and the needs of different age groups. During the elaboration of this plan, a joint rapid assessment was carried out in cooperation with WWGVC and PHC. In this assessment, there are highlighted issues as the following: I) urgent rehabilitation for 198 existing shelters including destructive electrical infrastructure, high humidity, leaking and caving roofs, II) inappropriate insulation and hygiene conditions for the 198 shelters which become more urgent in case of COVID-19 pandemic, III) prevention entrance of animals, as well as mitigation the harassment from the settlers and Israeli forces by installation of doors, and windows to 198 HH, IIII) need for the privacy, unhealthy and unhygienic WASH conditions due to absence basic standards for the insulation and worn sanitation infrastructure in their shelters, which leads to infection by bacteria and germs; the presence of snakes, scorpions, and centipedes inside most shelters; V) continued restraint to construction work on the site by Israeli DCL, citing security reasons. Moreover, WWGVC has conducted HHs surveys to assess families situation during COVID in March 2021; 100% of surveyed households confirmed that the most affected sector due to the COVID-19 pandemic is the Economic sector, this increases the inability of the communities' members to improve their shelters due to economic deprivation before and during the pandemic. 100% informed that the most affected groups in the communities are elders and PWDs. During the project design all the different needs of men, women, boys and girls, collected through the above assessments and related with the rehabilitation of the shelters, were taken into account. The identified activities will be further appraised through technical assessments and community consultations in line with: the applicable humanitarian standards, the parameters of the Shelter Cluster, and any new COVID-19 prevention measures recommended by the Shelter cluster and WHO, also factoring social acceptance to insure gender and age-appropriate solutions. Furthermore, social teams will study the situation of the shelters with all family members especially women and girls to define the main problems related to health, hygiene and women/girls privacy, and transfer this information to the technical staff, to define the suitable and accepted solutions with the family members and access to PWD. These considerations will be taken into account in the final dignified design, drawings and BoQ to make sure to adapt them to the indications of the end-users. Women will be involved in designing the rehabilitation of the houses, based on the needs they expressed through the brainstorming meeting with field staff. The project will place particular attention on the vulnerable families (families with people with disabilities, families headed by women or by elders).

2 - Activities

The project will entail provision of shelter upgrading and protection assistance to vulnerable 198 households in 31 communities at high risk of exposure or affected by natural hazards (e.g., COVID pandemic, weather extremes, flooding), or manmade hazards (exposure to settler violence); shelter upgrading through providing cash or material assistance and technical training; shelter and WASH facilities adaptation for at least 14 PWDs; protective assistance to shelters exposed to settlers' violence. Assuring involvement of men, women, boys, and girls as well as PWDs in analyzing their needs, designing and implementing project activities through AGD interviews and focus groups discussions; female staff will make specific interviews and FGDs with women to analyse their needs and transfer them to the engineers, then technical assessments will be conducted prior to the intervention to design appropriate technical interventions that match their needs, specifying the materials and labor needed for each shelter. Upon donor permission for implementation rehabilitation/upgrading will be completed by the beneficiaries themselves, they will be in charge of the implementation of the activities where individual MOU will be signed with each beneficiary. Rehabilitation of the shelters will guarantee: proper ventilation, decreased water leakages, improved hygienic conditions and privacy as well as safety, ensuring enough luminescent inside the shelter, in compliance with shelter cluster standards and provide more resistance to climate change. Activities will include proper flooring, plastering and painting of the shelters, ensuring proper and dignified accessibility for people including PWD. The renovation work will include also, when needed, WASH infrastructure in the shelters, to improve health and water conditions, sanitation and hygiene management, and electricity infrastructure which includes electrical cables inside the walls, and lights to ensure availability of minimum need of luminescent. The project will provide technical support and supervision on the shelter upgrading through weekly field visits, detailed BoQs and drawings in Arabic and English languages, conducted by WW-GVC and PHC. The project

team will monitor the work on a weekly basis, to ensure full technical support, and to ensure progress is in line with each agreement and specifications. The project will also ensure constant coordination with the Shelter Cluster and relevant stakeholders, Governor's offices (based on signed coordination MOU), village councils, OCHA and legal aid providers. the specific approach selected for each community will depend on several factors (primarily the land ownership status) and will include:

- Rehabilitation of concrete shelters with composite roof, which is comprised of a steel frame covered with insulated metal sheets and include a wooden wall framework treated with fireproof material;
- Rehabilitation of concrete/ stone shelters with asphalted roof and internal renovation works;
- Provision of PVC plastic covers (supporting the structure of metal bars that the community members already own);
- Internal caves rehabilitation.

All the above-mentioned activities correspond to the standard HRP activity; "Rehabilitation of damaged and/or substandard shelters (fully or partially) to meet shelter basic needs and minimum standards, including the adaptation of shelters to meet the needs of PWDs and improving the living space for vulnerable groups, in addition to shelter related support to people at higher risk of Covid-19" Full rehabilitation cost per shelter will vary according to its location and type of rehabilitation; The cost varies between shelters based on the conducted assessments in the average amount of \$9,000 in EJ up to the ceiling of \$12,500 and \$7,000 in area C up to the ceiling of \$8,500. Conduct capacity building to the community members on self-implemented house renovation and techniques to improve the shelter conditions, including protection from natural hazards and extreme weather events, and to ensure privacy and safety, female staff in WWGVC and PHC will assure the participation of women in communities through technical field visits and capacity building documents. WW-GVC and PHC will target communities who suffer from inadequate and overcrowded shelters with activities and sessions that contribute to self-recovery, to mitigate the risk of infection of COVID-19 among family members, to reduce the risk of GBV and other protection-related risk, and to sensitize the communities about privacy inside shelters for all of children, women and men, PWD minimum living standards, the training will be done by WWGVC and PHC social teams based on RCCE materials First aid trainings and kits were provided to the targeted communities under previous projects with the support of Palestinian Civil defense, new first aid kits will be provided to all HHs under risk of settler violence, crawling insects or any other risks during the coming projects as well. COVID-19 protection measures (wearing face masks, gloves, hand sanitizers, physical distances) will be followed by WWGVC and PHC teams during all project activities to prevent the disease from spread.

3 - Indicators

The aim of the proposed intervention is to address the "humanitarian and protection needs of the communities" through the provision of the required assistance to targeted 198 households in restoring their shelters and improving their living and health conditions improving their feeling of safety and dignity. the proposed interventions will be achieved through the following output indicators: I) 100% of assisted HH living in upgraded unit in accordance with minimum standards, II) 100% of households protected and have enhanced their coping capacities. As part of an efficient monitoring system, specific assessments are designed to track the progress while considering the impact on all AGD groups including women, children, elders and PWDs. The expected results will be measured through the following indicator under Strategic Objective 2: Ensure acutely vulnerable Palestinians under occupation in Gaza and the West Bank have access to essential services: I) # of individuals protected and have improved access to adequate shelter. Evaluation of indicators' achievement will be measured with the following technical criteria:

- Technical assessment after completion of the intervention. (An overall evaluation will be conducted, including quantitative data collection (Pre & Post activity surveys)
- Qualitative analysis through separated FGDs (women/girls and men/boys) focusing on Displacements / Seasonal displacements / Family Separation / Safety / Dignity and Integrity.)
- Individual interviews are planned with PWDs and their caregivers.

A feedback mechanism is assured through concrete community engagement in decision making related to the intervention's design and direct implementation, which increases the ownership of the activity by the community. The action responds to communities' needs and looks beyond the mere material needs to the broader issues of personal safety, dignity and protection. The new shelters will ensure: an improvement of the privacy of all family members, especially women and girls; good ventilation, assuring enough lighting and subsequently improved health conditions and better resistance to COVID-19 and other diseases of all family members especially children and elders during cold and hot

seasons; increased security and safety of all family members, especially of women and girls who will be able to carry out their duties in a safe place. The proposed shelter interventions will significantly decrease the risk of displacement for the most vulnerable Palestinians, especially women and children. Reduced seasonal displacement will provide protection for vulnerable families (families with people with disabilities and families headed by women). Improved shelter standards will enhance vulnerable families' economic, health and social situation and will allow for pregnant women to spend more time at home before and after their delivery, decreasing separation from their families and community. The separation of spaces for boys and girls will allow an increased sense of privacy and dignity for men and women.

Gender wit Age Marker (GAM)

4 - IASC Gender with Age Marker (GAM)

4 (M): The project will significantly contribute to gender equality, including across age groups.

4.1 - Provide the GAM Reference number for this project

H6094-6973-0949

5 - Breakdown by response modality

5.1 - Response modalities

Yes

5.1.b State the percentage of the response delivered by the voucher modality if applicable :

0

5.1.c State the percentage of the response delivered by the cash modality if applicable :

51

5.1.a State the percentage of the response delivered by the service delivery modality if applicable :

0

5.1.d State the percentage of the response delivered by In-kind modality if applicable :

49

5.2 - Please briefly explain why the specific modality/ies for this response were chosen.

According to our experience in the technical assessment for preparing technical BOQ and drawings, there are always main assumptions related to the total cost of shelter rehabilitation. However, for each technical BOQ for shelter rehabilitation, there is a division into two parts which are the cost for construction material and labor cost. Usually, the construction materials form about 60%, while the skilled labor costs form 40% of the total cost for each shelter. Rehabilitation works in PHC's targeted communities will be by providing 100% conditional cash for beneficiaries.

6 - Which Strategic Objective(s) do(es) your project address?

6.1 - Strategic Objective 1 (SO1)

No

6.2 - Strategic Objective 2 (SO2)

Yes

6.2.a - Please estimate the percentage of requirements for SO2

100

6.3 - Strategic Objective 3 (SO3)

No

7 - Breakdown of requirements by location (%)

7.1 - Gaza

0

7.2 - Area C

62

7.3 - East Jerusalem

38

7.4 - Hebron H2

0

7.5 - Area A&B

0

PROTECTION MAINSTREAMING & PSEA

8 - Participation (Community Engagement)

8.1 - Project needs assessment

Yes

8.1.a - How will beneficiaries be involved in needs assessment?

Surveys,Focus groups,Interviews

If not checked, please explain why

8.2 - Project design

Yes

8.2.a - How will beneficiaries be involved in project design?

Surveys,Focus groups,Interviews

If not checked, please explain why

8.3 - Implementation (delivering assistance)

Yes

8.3.a - How will beneficiaries be involved in implementation?

Focus groups,Interviews

If not checked, please explain why

8.4 - Monitoring and evaluation

Yes

8.4.a - How will beneficiaries be involved in M&E?

Surveys,Focus groups,Interviews

If not checked, please explain why

8.5 - Representation of community groups

Yes

If you answered no please explain why

Accountability to Affected Populations

9. - Feedback and complaints mechanisms

Yes

9.1a - Specify the mechanisms for feedback and/or complaints

b - Project hotline,d - Satisfaction survey

9.1b - If 'Other', please specify :

9.1d - Explain how you have ensured that mechanism are accessible to all population groups?

Accessibility to all population groups is maintained through the whole project life-cycle. Every member of the field staff is obliged to inform and explain all direct and indirect beneficiaries of the presence of a complaint-response mechanism (CRM) and the referral pathway for their complaints, as well as provide the contact information/hotline for the CRM focal points depending on the type of the complaint (female focal point for GBV and PSEA; a male focal point for other types of complaints). Beneficiaries are informed that the complaints are to be kept confidential specifically for sensitive issues, and they will be dealt with accordingly. The FGDs and the other communication channels designed by the field staff enable them to reach the highest number of beneficiaries in the targeted group.

9.1c - How will feedback be used?

For both WW-GVC and PHC, core work is implemented through a participatory approach. Well-designed and well-managed mechanisms for handling beneficiary's complaints are of utmost importance for a reliable and properly informed decision process. WW-GVC through its Complaint Response Mechanism (CRM) and PHC through Accountability Framework to Beneficiaries commit to guarantee transparency, fairness and equity towards all our beneficiaries. The aim is to establish a system that gives individuals and groups the possibility to report complaints, suggestions and inquiries in a secured way, and receive a response in a timely manner. All complaints are reported to the Complaints focal point. Upon registration of the complaint on the database, the focal point analyses complaints and classifies each of them according to the internal sensitivity classification system, then the complaint should be resolved within 15 days by the working team. Once the case is solved, the complainant will receive a phone call from WW-GVC's or PHC's focal point.

If your project does not have mechanisms for feedback and/or complaints, please explain why (narrative text)

10. – Do No Harm

10.1 - Do No Harm

WeWorld-GVC and PHC provide assistance in a way that endeavors to minimize exposure to additional hazards and mitigate as many risks as possible. Needs and risks are balanced through the Community Protection Approach where the community is involved in a thorough assessment to understand the vulnerabilities of the diverse social groups, assuring the compliance with the Do No Harm principle, so that the programming reflects preferences and needs expressed by the members of the HHs in a participative way. The efficiency is in encouraging all local actors and community involvement on the overall steps of the suggested intervention and prevent unintended negative impacts. Through this inclusive and comparative risk analysis

organisations increase the accountability allowing themselves to quickly respond to any unintentional negative impacts created by the intervention. The proposal elaborates on remedial action to hazards that caused a change in shelter and protection needs of the beneficiaries. Response is carefully designed to ensure that interventions will not impair beneficiaries' safety or expose them to further risk. Activities are based on the preferences and needs expressed by the members of the HHs, considering the different threats that affect girls, boys, women and men of all ages including PWD. Additionally, interventions in the shelters will be designed to comply with protection principles, such as meaningful access and accountability towards beneficiaries, taking into account the diverse needs, roles and dynamics of women and men, age and disability status, in each community. Furthermore, household members will work in their shelter rehabilitation, so the sense of dignity and ownership will also be improved. The field team participated in the protection cluster GBV training for improving their capacities in detecting and referring cases. Moreover, the field team also participated in a training with WarChild to better detect and refer children suffering from violence. Complying with the "Do No Harm" principles, communication between the PA's legal counterparts and NRC ensures that legal awareness sessions are coordinated to strengthen the target communities' knowledge of their rights, risks, and procedures to be followed. WWGVC is now mainstreaming the AGD and PWD toolkits in the community-based protection methodology. COVID-19 protection measures (wearing face masks, gloves, hand sanitizers, physical distances) will be followed by WWGVC and PHC teams during all project activities to prevent the disease from spread.

11. - Equal and impartial access to aid

11.1 - Equal and impartial access to aid

Each project starts with conducting public meetings in every targeted community, announcement about the public meeting is distributed in all public places as schools, shops and mosques, this is to assure that all community members are aware of the project with any bias to specific groups. Impartiality principle is carried throughout the action on the basis of needs, exclusively, giving priority to the most urgent cases of distress and making no distinction on the basis of nationality, race, gender, religious belief, class or political opinion. Impartiality principle will be recognized throughout the actions' entire phases: design, planning, implementation and monitoring. The CPA was developed according to IHL, Humanitarian, Do No Harm and the following fundamental principles: 1. the safety of affected population (both of groups and individuals); 2. restore the dignity of the affected population putting a stop to emerging or established patterns of violations 3. place the empowerment of communities at risk at the core of any action to enable self-protection and realize their rights. The use of focus groups, random interviews and transect walks, ensures the involvement of the population in terms of location, age, gender, ethnicity, diversity, profession and power. According to the access to the population, the level of trust built and other do not harm considerations, multiple specific techniques will be applied to get deeper insight (bias reduction and/or data gap filling) of a particular group, a particular household. Throughout assessment and planning; the needs of all community members will be taken into consideration. The proposed shelter and protection intervention address the urgent need of the targeted communities, accounting for non-discriminatory practices and considering the needs of every age, gender, and level of ability. Providing a voice for each member of the community preserves the dignity of each beneficiary and fosters community empowerment.

11.2 Have you considered all the elements of the Disability Mainstreaming Checklist?

Yes

If you answered no, please explain why

12 - PSEA (Prevention of Sexual Exploitation and Abuse)

12.1- Were PSEA activities built into the project?

Yes

12.1.a How ?

1) (MANDATORY) Project has adopted a safe complaint channel(s) for beneficiaries based on consultations with the beneficiaries and accessible to different groups (Number of beneficiaries and percentage against your target group),2) (MANDATORY) Project has built in activities involving development and dissemination of PSEA awareness raising material including information on rights and safe complaint channels available to beneficiaries and that awareness raising targets all project sites. (Number of beneficiaries and percentage against your target group),3) (MANDATORY) Project has built-in clear process for receipt and referral of complaints of PSEA, in accordance with the oPt PSEA SOPs on Inter Agency Referrals,4) Project staff are required to attend a minimum of one PSEA training,5) Project-related contracts include standard clause on PSEA in accordance with IASC principles and guidance,6) Project staff will directly or indirectly engage in the HCT oPt PSEA Network

12.1.b If 'Other' (12.1a No 7.), please specify

If you answered no, please explain why

Country

occupied Palestinian territory

West Bank

Bethlehem

Al Iqab, Al Ubeidiya, Zatara,

Hebron

A Seefer, As Samu, Dkaika, Khirbet Zanuta, Qussa, Um ad Daraj,
Um al Kher,

Jenin

Imreiha,

Jericho

Marj Naja Herders,

Jerusalem

Al Isawiya, At Tur, Ath Thuri, Beit Hanina, Beit Safafa,
Jabal al Mukabbir, Ras al Amud, Sheikh Jarrah, Shufat, Silwan,
Sur Bahir, Wadi al Joz,

Ramallah

Deir Nidham - Al Hossa, Ein Qiniya - Wadi Dululm, Muarrajat Centre,
Rantis,

Salfit

Deir Ballut, Um al Hamam,

Tubas

Ein al Hilwa-Wadi al Faw,

Clusters



Shelter and NFI Cluster

Caseload

Cluster Activities and Indicators

Indicator	Description	Target	Project Target
5 - Rehabilitation of damaged and/or substandard shelters (fully or partially) to meet shelter basic needs and minimum standards, including adaptation of shelters to meet the needs of PWDs and improving the living space for vulnerable groups, in addition to shelter related support to people at higher risk of Covid-19.			
5.1	# OF INDIVIDUALS PROTECTED AND HAVE IMPROVED ACCESS TO ADEQUATE SHELTER. (DISAGGREGATED BY FEMALE/ELDERLIES HEAD OF THE HOUSEHOLD, GENDER, AGE GROUPS, AND PROTECTION CONCERNS SUCH AS OVERCROWDING, PRIVACY, RISKS AND HAZARDS) # OF PWDS HAVE IMPROVED ACCESS TO SHELTER ☑ Includes Disaggregation		1,222

Budget

Total Cost

\$1,873,500

[View funding to this project on FTS](#)

Line Items

Staff and other personnel costs	\$130,000	6.94%
Direct inputs and services to beneficiaries (Supplies, Commodities, Materials, Services, and dedicated Staff whose job is considered as project outputs)	\$1,550,500	82.76%
General operating and other running costs (security expenses, office stationary, and utilities such as telecommunications, internet, office rental and other direct costs, including expenses for monitoring, evaluation and reporting)	\$80,000	4.27%
Indirect / Overhead Costs (max 11% of the whole budget is required)	\$113,000	6.03%

Comments