3.2 Beneficiaries

3.2.3 Does the action specifically target certain groups or vulnerabilities?

answer the question. If the action exclusively targets one or a few specific groups, you will need to identify them by clicking on the corresponding groups in section 3.2.3.1. See the guidelines for more information.

Yes No

3.2.3.1 If yes, please select the relevant groups/vulnerabilities

Click on the group specifically targeted by the action according to the situation at the proposal stage. It is possible to select several groups, but not all.

Infants and young childrenChildrenElderlyDisabledMaleFemalePLW

3.2.4 Beneficiaries: Selection criteria  
Briefly explain the identification mechanisms and selection criteria. (Bytes limit: 2000)

The beneficiaries of the proposed intervention will be selected based on different criteria based on the nature of each project component.

* MOH staff ( doctors and nurses ) will be selected through an agreed inclusion criteria with the MOH Primary Health Care Directorate, based on their work place and capacities. This criteria will be introduced in order to be able to select 180 staff of the targeted 15 PHC allocated geographically in the areas of the DES as the first phase of the intervention.
* In coordination with different clusters, especially with eh shelter cluster, local communities will be selected in the identified area of possible hosting locations in times of crises and presence of forced displacement population, identification of CBOS in the area, 200 community members will be selected from hosting communities to be trained to disseminate information during crises, Moreover, one to two universities will be targeted for the massive CPR training based on the geographical location of the branches in order to be able to cover the majority of the Gaza strip
* In the WB the MHPSS Emergency Responses will target all the accessible direct and indirect victims impacted by the IHL violation related to conflict with a measure focus on victims of Demolitions, displacement, Settlers related violence and excessive use of force by the Israeli security forces. This intervention will directly target children, adolescents, adults and elderly in both Ramallah and east Jerusalem. MDM and ACCE psychoeducation sessions and awareness campaigns will be a general invitation for the community members vulnerable to IHL violations such as the vulnerable people (repeated demolitions, proximity to settlements, military instalments, demonstration places….), based on MDM field experience during 2017 and 2018, the majority of the participants within the awareness sessions are females. Within this action MDM will increase the efforts of increasing the number of male participants through the cooperation and coordination with CBOs and village councils.

3.2.5 Beneficiaries: Involvement of beneficiaries in the action

Explain the involvement of the beneficiaries and affected population in the design, implementation and evaluation of the action. In exceptional cases, when it was not possible to involve the beneficiaries, provide an explanation here. (Bytes limit: 2000)

As was mentioned previously, the closed presence of MDM in Palestine in the fields of operation in Gaza and WB, considering as priority the needs of the most affected population; emphasizes the design of its interventions considering the real and actual needs of the targeted groups. In Gaza; at institutional and community level, MDM being as member in different clusters and Key actor in the field of emergency preparedness and response , the continuous the presence of MDM medical team at PHC or/ and hospitals level and the direct involvement with the beneficiaries at community level , will allow MDM to involve beneficiaries in all project phases to a possible extent , designing methodologies of intervention , identification of needs , observing the quality and giving the needed feedback to maintain the quality of the intervention and to evaluate day to day the feedback ,satisfaction and/or complain. In WB; The presence of MDM ensures a solid link with the authorities and communities for the preparation and implementation of its projects. MDM keeps a continuous communication with community members involved in critical incidents through village councils and community leaders and with ministries and other MHPSS providers. This participatory approach is in line with the Strategic plan of MHPSS of the MOH, the Humanitarian Needs Overview and the Strategic Response Plan of the Protection Cluster. Moreover, MDM works closely with the Community Eyes Watches, village councils and CBOs to trigger assistance in case of a traumatic. MDM is continuously monitoring what the participants of psychoeducation need and what they believe MDM should focus on. The technical team members share these recommendations with MDM technical coordination team to adjust and adapt the activities according to the needs. Within this action a satisfaction questioner will be administered with the victims of traumatic incidents and the psychoeducation sessions participants.

3.2.6 Beneficiaries: More details on beneficiaries

When needed, provide more information on the specificities of the direct beneficiaries or potential indirect beneficiaries. Explain the difficulties to capture valuable information. Do not repeat information already provided in other sections. In case it was not possible to provide figures in section 3.2.2 (Disaggregated data), include a brief explanation in this field. (Bytes limit: 2000

As the proposed intervention has different components’ beneficiaries specifies as illustrated below:

DES: The beneficiaries of the intervention depends mainly on a scenario assumption of forced displacement based on 2014 war experience, that could be totally different in any possible future crises. Under the same assumption, it will not be easy to identify direct benefiters at the time of project implementation for this component a part of the potential displaced population in crises and the catchment population of the targeted area.

PHC: The main concerns within the intervention would be that the project will not be able to cover the capacitation of all staff in the targeted PHC due to that a selection criterial will be put in place to select 180 staff members of the 15 clinics (50 %). Following the above assumption, it is difficult to identify the potential beneficiaries of upgrading the capacities of the PHCs to enable them to maintain and expand their services at crises time, but the catchment population and day to day patient will benefit of the increase of the quality and preparedness measures in the targeted PHC.

Emergency MHPSS: beneficiaries are usually impacted by the occupation related critical incidents which have significant psychological and psychosocial impacts on their psychosocial wellbeing, including frustration (particularly for the men who feel unable to protect their families), extreme fear (children), anxiety and depression reactions (adults), anger, sleeping difficulties (women, men and children), which can lead to psychosocial consequences (such as domestic problems and social withdrawal), that in addition of the possibility of developing MHPSS disorders such as depression and Post Stress Traumatic Disorder .