



National Center for Community Rehabilitation (NCCR)

Three Years Strategic Plan (2015 - 2017)

November , 2014

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1. General Political and Socio- Economic context in the Gaza Strip:

On 7 July 2014, the Israeli army launched a military operation, “Protective Edge”, in the Gaza Strip. The bombardment and military ground operations have resulted in a very high civilian death toll, huge destruction and devastation of civilian buildings and infrastructure, and large scale displacement, unprecedented in the Gaza Strip since at least the start of the Israeli occupation in 1967. Every man, woman and child in the Gaza Strip - some 1.8 million people – have been directly affected by the conflict. While all geographic areas of Gaza were affected by the violence, many areas were damaged by extensive aerial bombardment, naval shelling and artillery fire, resulting in widespread loss of life and extensive damage to civilian property and public infrastructure, including the total destruction of some neighborhoods. Following several short-lived ceasefires, on 26 August at 19:00 the parties to the conflict reached an open-ended cease-fire which has held to date.

At least 1,473 Palestinian civilians were killed, including 501 children and 257 women. Many fatalities involved multiple family members, with at least 142 Palestinian families having three or more members killed in the same incident, for a total of 739 fatalities. According to the Palestinian Ministry of Health, over 11,100 Palestinians, including 3,374 children and 2,088 women, were injured. Throughout the hostilities, there was significant, credible information that the parties to the conflict on both sides violated international law, including actions that may amount to war crimes, particularly with respect to the principles of distinction, proportionality and precautions in attack. Accountability for the lives lost, homes destroyed and damage wrought is crucial for individual victims and for communities and required by international law. Alleged violations must be investigated promptly, thoroughly, independently, impartially and effectively, including as part of an international process, and victims assured remedy for harm suffered. The continued failure to ensure proper accountability on both sides following earlier escalations of hostilities in Gaza is a serious concern.

Explosive Remnants of War (ERW) and other explosive hazards are widely dispersed in civilian areas throughout the Gaza Strip, posing an urgent humanitarian threat to the civilian population. This also limits the freedom of movement of humanitarian workers delivering essential lifesaving services, and will impede reconstruction efforts once the conflict has ended. The level of internal displacement has been staggering. At the height of the conflict an estimated 500,000 people – twenty-eight percent of the population – were internally displaced in UNRWA schools designated as emergency shelters, government schools and informal shelters, and with host families. Following the cease-fire that started on 26 August 2014, there was a dramatic decline in the number of IDPs, with the numbers in UNRWA designated shelters decreasing from 289,000 to 53,000 between 26 and 27 August. However, the numbers have been climbing gradually again with some 60,812 registered in 31 UNRWA shelters as of 3 September.

The reason for the increase appears to be a movement from government shelters – most of which have now closed – and host families to UNRWA shelters. An estimated 50,000 are staying with host families and 700 sheltering in two government schools. Schools presently used as shelters will require varying degrees of rehabilitation and ERW clearance where needed, in order to be ready for the new school year, the delay of which has affected nearly half a million children in Gaza. Approximately five per cent of the housing stock has been rendered uninhabitable by the conflict. An estimated 18,000 housing units have been either destroyed or severely damaged, leaving more approximately 108,000 people homeless⁴. This is in addition to the pre-crisis housing deficit of 71,000 housing units, due to people living in overcrowded or inadequate conditions. The provision of temporary housing solutions to the homeless is one of the major challenges facing local authorities and the humanitarian community in the coming period.

Approximately 500,000 children are unable to start the new school year. The majority of the Gaza population has had at least some of its productive assets destroyed or negatively affected. According to the Palestinian Federation of Industries, 360 businesses and workshops were damaged, with 126 completely destroyed. With limited activity at the commercial crossings and extensive damage to private infrastructure and other productive assets, business activities were largely paralyzed during the operation. Hostilities forced farmers and herders to abandon their lands, and resulted in substantial direct damage to Gaza's 3,200 hectares of croplands as well as much of its agricultural infrastructure, including greenhouses, irrigation systems, animal farms, fodder stocks and fishing boats. Access to the sea was also prohibited for most of the 50 days of hostilities. The current fishing limit stands at six-nautical miles, which is still limiting the capacities of fishers in Gaza. The Government and humanitarian partners have been carrying out rapid assessments to better understand the scope of needs now and in the months ahead, and scaling up their responses to reach people in need.

The operating environment for humanitarian and government workers continues to be challenging, given the scale of needs and the presence of ERWs and other explosive hazards. Risk assessments of affected infrastructures with a high humanitarian value as well as awareness activities have taken place since the earliest stage of the emergency, and will be strengthened in the coming months to reduce the humanitarian impact of ERWs. Special focus is placed on identifying the needs of particularly vulnerable people, including children, female heads of households, the elderly, the disabled, new orphans and IDPs with host families. There is a heightened risk of domestic and gender-based violence during these difficult times, particularly among families living in overcrowded and stressful conditions. This latest conflict has compounded and exacerbated the pre-existing dire situation of Palestinians in Gaza. The ongoing occupation, characterized by the blockade, control of the access restricted areas, denial of human rights and recurrent conflict, as well as internal political instability have resulted in large scale poverty, an extremely fragile economy and aid dependency. Around two thirds of the population of Gaza were receiving food assistance prior to the crisis, and food insecurity or vulnerability to food insecurity affected 72 per cent of households. Unemployment has increased dramatically

since mid-2013, following a halt of the illegal tunnel trade with Egypt, soaring from 28 per cent in the third quarter of 2013 to 45 per cent in the second quarter of 2014; nearly 70 per cent of young people aged 20-24 were unemployed in Gaza in Q2 2014. It is expected that labor market conditions in Gaza will further deteriorate following the conflict, exacerbating the impact of the blockade.(1)

 (1) Gaza Crisis Appeal Report , United Nations Officer for the Coordination of Humanitarian Affairs Occupied Palestinian Territory , September 2014

2. Background on NCCR

2.1 Basic information:

(i) Official Name of Organization:	The National Centre for Community Rehabilitation (NCCR)	
(ii) Location Address:	Gaza Strip – Al Shuhada Street	
(iii) Telephone: 0097282848640	Fax:0097282848890	E-mail: : nccrgaza@yahoo.com
(iv) Contact Person	Dr. Wael Abu Rezeq	
(v) Position in the Institution	Executive Director	
(vi) Membership:	PNGO	

2.2 Overview on NCCR:

The National Centre for Community Rehabilitation (NCCR) is a Palestinian independent, non-profit, non-political, non-sectarian, non-governmental organization with the purpose to assist the persons with physical disabilities (female and male), specifically children and young people within the Gaza Strip to promote their opportunities for independent living, achievement of their individual life goals, and inclusion in the community.

NCCR has been operating in Gaza City since August 1995 and registered at the Ministry of Interior in 28/8/1996 with the number 2054. Its interventions have evolved with the changing needs and opportunities of persons with disabilities in the Gaza Strip. NCCR has an extensive know-how in rehabilitation since it has been working on home care for 19 years, providing medical, social, and psychological support to female and male persons with disabilities at all ages in all Gaza governorates, without consideration to any ethnic or political grounds. Special attention is paid to children and young people under 18. NCCR has high-qualified, multidisciplinary teams who have a considerable experience in home care and rehabilitation to support people with physical disabilities.. Uniquely, NCCR provides integrated services of nursing, medical, social, and psychological aspects. In addition, NCCR has implemented specific services and activities in the fields of speech/language/hearing teaching, humanitarian protection programs and capacity building of NCCR and partners and stakeholders. NCCR serves as a centre for development and performance of services and, increasingly, as a center for expertise and training. And, above all, NCCR is working from a broad approach towards rehabilitation, meaning that it promotes not only medical rehabilitation, but also psychological and social rehabilitation of physically disabled persons.

3. Strategic Objectives

- To create a clear and guiding strategic plan for the coming three years reflecting vision, mission and strategic goals building on the internal strengths and external opportunities based on the past gained experience, learned lessons, successful stories, experienced risks and opportunities.
- To develop logical framework matrix for every program including goal, specific objectives, Outputs, indicators, sources of verification and risks/assumptions.
- To develop an action plan including activity- time schedule, activity- input resources schedule and required budget.

4. Significance of Strategic Plan

- Reflect the networking and consensus reached among all relevant stakeholders and avoids any duplication.
- Respond to the urgent needs of the target groups.
- Mainstream gender issues into the strategic plan process in the analysis and plan development phases.
- Enhance the result-based management, learning and quality cultures.
- Promote human rights-base approach in management.
- Encourage performance-budget management approach.
- The strategic analysis' results in identifying internal strengths and weaknesses and external opportunities and threats/risks, which contributes in solving organizational weaknesses and promote strengths.
- Help NCCR management in expecting possible risks and proposing precautionary procedures to lessen their effects.
- Develop a logical framework matrix for every program as management and monitoring tool ensuring rational linkage between intervention logic components (goal, objectives, Outputs, and activities).

5. Methodology

Active democratic participation was ensured for all stakeholders (NCCR management and staff; persons with disabilities and their families; and partner NGOs/CBOs) and dynamic learning approach was adopted based on triangulation, cross checking and validation towards objective and evidence-based information on the needs of NCCR and target groups. Triangulation approach relied on:

- Primary sources of information (NCCR capacity assessment questionnaire; interviews with Board of Directors, Executive Director and financial manager; focus groups of NCCR staff, partner NGOs and CBOs and persons with disabilities and their families; and participatory observation).
- Secondary sources of information (NCCR's documents review mainly self-evaluation for 2010 and progress reports).
- Mainstreaming of three main cultures into NCCR strategic management which were result-based management, quality and human rights.

6. Targeted Groups and Final Beneficiaries

- Persons with physical disabilities (80% children and young under 18, and 20% adults); both genetically and acquired, , both female and male, in the Gaza Strip.
- Persons with physical disabilities, who need hearing screening and hearing aids.
- CBOs/NGOs, (semi-)professionals and students in the field of community rehabilitation.
- Families and support systems of the Persons with Disabilities (PWDs).
- The final beneficiaries will be the local communities as a whole in the Gaza Strip.

7. Analysis of current situation of Persons with Disabilities

According to a disability survey conducted by PCBS in 2012, it is estimated that 6.9 percent of the population in Gaza (some 124,200) are persons with disabilities. In addition, it is estimated that 10 percent of the injured due to the recent hostilities may acquire a long term or permanent impairment, thus increasing by 1,000 the number of persons with disabilities (30 per cent of whom are children). It is important that comprehensive services are provided to persons with disabilities as part of the humanitarian response. These range from health care, rehabilitation services, provision of assistive devices and items, to psychosocial support (which often improves the quality of the rehabilitation while ensuring faster results) as well as livelihood support.

The Palestinian families are unaware and unable to sustain the special needs of their PWDs which create a sense of pressures and traumatic effects. The main stakeholders of Disability Sector include Ministry of Education and Higher Education; Ministry of Social Affairs; Ministry of Health; Ministry of Labor; Ministry of Local Government; and NGOs/CBOs. There are 56 NGOs/CBOs working in disability rehabilitation sector in the Gaza Strip.

8. Vision, Mission, Organizational Values and Strategic Goals

NCCR Strategic vision

NCCR is a knowledge, training and development center, playing a leading and supporting role in providing community based rehabilitation for the growing number of persons with physical disabilities and enhance the capacity of the community in dealing with their needs towards promoting their personal development and empowerment so that they can achieve individual life goals.

NCCR Mission statement

NCCR is an independent and non-profit Palestinian NGO with the purpose to assist female and male persons with physical disabilities within the Gaza Strip to promote their opportunities for living independently, inclusion and achieving individual life goals. This is implemented through community based rehabilitation activities in the fields of training and capacity building, home care and Information Knowledge programs.

NCCR Values

- Mainstream human rights principles which include equity, equality, accountability, rule of law, transparency, tolerance, respect, non-discrimination, participation and empowerment to most disadvantaged groups.
- Maintain continuous improvement of quality of provided services.
- Ensure consistency with society norms, traditions and values.
- Promote the spirit of team and voluntary work.
- Distinction in performance.

9. Programs for years (2015-2017)

The strategy for the next three years (2015-2017) includes three strategic programs which are: (1) Training and Capacity development program, (2) Home Care Program , and (3) Information and Knowledge Program . The following includes the programs description and the logical framework for each program.

Program # 1: Training and Capacity Development Program

This program includes(1) developing professional capacity of NCCR's staff to meet the needs of persons with disabilities and their families, (2) promoting knowledge of persons with disabilities and their families, (3) and enhancing knowledge of key community figures on rights and issues of persons with disabilities.

Program # 2: Home Care Program

A program is set up for health development of persons with physical disabilities (80% children and young, and 20% adults) via training of NCCR staff and internships for university students on home health-care, comprehensive evaluations for selected persons with physical disabilities, offering medical care, providing family counseling, providing materials and assistive devices, providing psychosocial support and developing speech-language functioning services to the physically disabled persons. The intention of the program is to cut the number of cases treated and to improve the quality of the care. It should also be explained that cases will be shifted towards CBOs.

Program # 3: Information and Knowledge Program

The program is about (1) improving knowledge-led and informed decision making on PWDs issues via cooperative action researches, (2) developing NCCR's disability database, and enhancing strategic use of media.

First Program: Training & Capacity Development Program

Detailed Logical Framework

	Indicator	Method Of Verification	Assumptions
Strategic Goal # 1: To contribute in enhancing the capacity of PWDs, households, and community members to promote disability inclusive development.			
Specific Objective 1.1: Developed professional capacity of NCCR's staff to meet the needs of persons with disabilities and their families.	- # % of beneficiaries who are satisfied with the services provided by NCCR.	- Progress reports - Final report - Evaluation report	- Stability of the political climate; - Decrease in occupation invasions;
Output 1.1.1 : Staff of NCCR trained on CBR matrix.	- # staff of NCCR enhanced their professional capacity on CBR matrix.	- Progress reports - Final narrative report. - list of trainees - Training Manual - Training Evaluation	- Open borders; - Decrease in internal security disorders; - Accessibility to work places,;
Output 1.1.2: Staff of NCCR received TOT training on Mind-Body Medicine Skills	- # staff of NCCR developed their skills on delivering training on Mind-Body medicine skills.	- Progress reports - Final narrative report. - list of trainees - Training Manual - Training Evaluation	- Improved mobility of staff and target beneficiaries; and - Ability to attract or retain properly qualified staff.
Output 1.1.3 : Staff of NCCR trained on archiving and data entry.	- # staff of NCCR received training on archiving and data entry.	- Progress reports - Final narrative report. - list of trainees - Training Manual	
Output 1.2.4: Staff of NCCR trained on use of media	- # staff of NCCR attended specialized training on news editing, photography, and documentation.	- Progress reports - Final narrative report. - list of trainees - Training Manual	
Specific Objective 1.2: Persons with disabilities and caregivers have the knowledge, skills. and	- # of PWDs/ family caregivers have access to better and more organized conditions.	- Progress reports - Final report - Trainees list	

	Indicator	Method Of Verification	Assumptions
attitudes they need for a better life.		- Training manual - Training report - Training evaluation	
Output 1.2.1: Persons with disabilities (PWDs) and caregivers trained on life skills.	- # persons with disabilities and caregivers trained on life skills including : <ul style="list-style-type: none"> ▪ Leadership ▪ Motivation and goal setting ▪ decision making ▪ time management and stress management ▪ Coping mechanisms on how to deal with shyness, anger failure, depression, and conflict. 	- Progress reports - Final report - Trainees list - Training manual - Training report - Training evaluation	
Output 1.2.2: PWDs and their families trained on mind-body medicine and mediation skills.	- # of PWDs and their families/ caregiver attended specialized training on mind-body medicine and mediation skills.	- Progress reports - Final report - Trainees list - Training manual - Training report - Training evaluation	
Output 1.2.3: Families/caregivers trained on first aid and response in emergency situations/times.	- # of families/ caregivers attended training on provision first aid services in emergency situations/times .	- Progress reports - Final report - Trainees list - Training manual - Training report - Training evaluation	
Specific Objective 1.3: Enhanced knowledge of key community figures on rights and issues of PWDs.	- Better understanding of issues and needs of PWDs.	- Progress narrative reports - Final narrative report - Evaluation report	
Output 1.3.1 CBOs staff trained on CBR Matrix	# of CBOs staff enhanced their knowledge on different components of CBR Matrix	- Progress narrative reports - Final narrative report	

	Indicator	Method Of Verification	Assumptions
		Evaluation report	
Output 1.3.2 : University students trained on home care, CBR and mechanisms of advocacy for rights of PWDs.	- # university female and male university students attended internships on home care, advocacy, CBR, and advocacy for persons with disabilities.	- Progress narrative reports - Final narrative report - Internees list - Internship report	

Second Program: Home Care Program

Detailed Logical Framework

	Indicator	Method Of Verification	Assumptions
Strategic Goal # 2: To contribute in providing the skills and supports necessary to enable PWDs and their families to accomplish greater independence through counseling and care.			
Objective 2. 1: Persons with physical disabilities attained their highest possible level of health through home care.	- # of Persons with physical disabilities (who received home health-care) improved skills to promote their opportunities for living independently. - Increased self-confidence and increased ability of persons with physical disabilities to deal with significant life changes and challenges. - Quality of relationships created: persons with disabilities and NCCR staff, persons with disabilities with each other and persons with disabilities and their families.	- Progress narrative reports - Final narrative report - Evaluation report	- Stability of the political climate; - Decrease in occupation invasions; - Open borders; - Decrease in internal security disorders; - Accessibility to work places, - Improved macro-economic and financial conditions influencing the functioning of NCCR and its partners mainly the variability in materials' market prices; - Improved mobility of staff
Output 2.1.1: Comprehensive evaluations (social, psychological and medical) conducted for selected persons with physical disabilities.	- (#) persons with physical disabilities selected based on transparent selection criteria. - (#) persons with physical disabilities attended comprehensive evaluations (social, psychological and medical)	- Progress narrative reports - Final narrative report - Reports on comprehensive evaluations	

	Indicator	Method Of Verification	Assumptions
Output 2.1.2: Medical care offered	<ul style="list-style-type: none"> - # persons received physical examination - # persons attended physio- therapy annually - # persons received nursing care (nutrition, dressing) annually - # persons referred to governmental and civil society organizations annually. 	<ul style="list-style-type: none"> - Progress narrative reports - Final narrative report - Reports on physical examination - Reports on physio-therapy sessions - Reports on nursing care - Records of referred cases. 	<ul style="list-style-type: none"> and target beneficiaries; and - Ability to attract or retain properly qualified staff.
Output 2.1.3: Counseling to family care givers provided	<ul style="list-style-type: none"> - Family care givers of (200) PWDs received counseling via NCCR staff and peer parents annually 	<ul style="list-style-type: none"> - Progress narrative reports - Final narrative report - Reports on counseling focus groups 	
Output 2.1.4: Home care materials and assistive devices provided	<ul style="list-style-type: none"> - Dressing material (Gauza, Polidine, Micropore, VaslineGauza, Normal Saline) - Some medication - Minimum 5,000 bakets of Diapers - # Wheel chairs - # Crutches - # walkers - # air chair mattress - # air bed mattress - # toilet wheel chair - # beckets (100 piece each) of gloves 	<ul style="list-style-type: none"> - Progress narrative reports - Final narrative report - Procurement documents 	
Output 2.1.5: Individual and group Psychosocial support provided for traumatized PWDs and their family caregivers	<ul style="list-style-type: none"> - # PWDs and their family caregivers attended group psychological support sessions annually 	<ul style="list-style-type: none"> - Progress narrative reports - Final narrative report - List of persons and their families received psychosocial support 	

	Indicator	Method Of Verification	Assumptions
		- Reports on psychological support sessions	
Output 2.1.6: Children with physical disabilities integrated in regular schools	- (50) children with physical disabilities joined regular schools.	- Progress narrative reports - Final narrative report - Reports on field visits to Schools.	
Output 2.1.7: Mind-Body Medicine provided to PWDs and caregivers.	- # PWDs and caregivers attended mind-body medicine sessions.	- Progress narrative reports - Final Narrative Report	
Output 2.1.8: Therapy sessions via music and drama provided to children with disabilities.	- #male and female children aged (0-18) years attended therapy sessions via music, cinema, and drama.	- Progress narrative reports - Final narrative report - Reports on therapy sessions	

Third Program: Information and Knowledge Program

Detailed Logical Framework

	Indicator	Method Of Verification	Assumptions
Strategic Goal # 3: To contribute to improving NCCR's knowledge-led approach			
Objective 3.1: Improved knowledge-led and informed decision making on PWDs issues via cooperative action researches	<ul style="list-style-type: none"> - Better understanding of issues and needs PWDs and their families - Suitability of interventions that facilitate improving status of disabled persons 	<ul style="list-style-type: none"> - Progress narrative reports - Final narrative report - Evaluation report 	<ul style="list-style-type: none"> - Stability of the political climate; - Decrease in occupation invasions; - Open borders; - Decrease in internal security disorders; - Accessibility to work places, - Improved macro-economic and financial conditions influencing the functioning of NCCR and its partners mainly the variability in materials' market prices; - Improved mobility of staff and target beneficiaries; and - Ability to attract or retain properly qualified staff.
Output 3.1.1: Action researches and public opinion polls conducted and disseminated on disability-related issues.	<ul style="list-style-type: none"> - (2) cooperative action researches report exist - (2) public opinion poll's reports exist on Community-based inclusive development of PWDs and their families annually - (1000) copy of each research and public opinion poll edited and printed - (6) workshops undertaken to disseminate the outcomes of researches and public opinion polls 	<ul style="list-style-type: none"> - Progress reports - Final report - List of coalition members - List of trainees - Training report - Training manual - Training evaluation. 	
Output 3.1.2: External evaluation carried out on outcomes and impacts of NCCR's programs and projects on target groups and society as a whole	<ul style="list-style-type: none"> - (1) Self evaluation report exists on suitability of NCCR's programs and projects annually. 	<ul style="list-style-type: none"> - Progress reports - Final report - Self evaluation research report 	
Objective 3.2 : Developed NCCR's Database	<ul style="list-style-type: none"> - NCCR's database used as reference to stakeholders 	<ul style="list-style-type: none"> - Progress reports 	
Output 3.2.1 : Enhanced coordination and networking with stakeholders in the field of disability issues.	<ul style="list-style-type: none"> - MOUs signed with local university. - MOUs signed with local disability-based organization. - MOUs signed with ministries - MOUs signed with international recognized organization. 	<ul style="list-style-type: none"> - Program Records - Signed MOUs 	

	Indicator	Method Of Verification	Assumptions
Output 3.2.1: Management Information System (MIS) Developed	- Bank of information exists at NCCR. - Multimedia library exists including reports, journals, articles, books, and photos .	- Progress narrative reports - Final narrative report - Reports on MIS	
Specific Objective 3.3: Enhanced strategic use of media	- Increased sensitization of the society towards the rights of PWD	- Progress reports - Final report	
Output 3.3.1: Media coverage used to highlight NCCR activities	- (50) NCCR's activity news covered annually in local written newspapers, Radio and TV, and electronic channels	- Progress reports - Final report - NCCR activity news	
Output 3.3.2: Media tools used to challenge and address stigma, prejudice and discrimination against persons with disabilities and their families	- (4) radio spots broadcast annually - (8) radio sessions broadcast annually	- Progress reports - Final report - Report on radio program	
Output 3.3.3: Literature prepared and disseminated	- (1000) NCCR newsletters published quarterly - (1) Documentary film on NCCR activities - (2000) pamphlets published on CBR and disability inclusive development annually.	- Progress reports - Final report - Quarterly NCCR newsletter - Documentary film - Pamphlets	