

Palestinian Public PERCEPTIONS

REPORT X - November 2006




institut universitaire
graduate institute
d'études du développement
of development studies

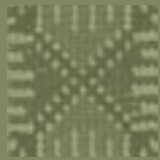
Riccardo Bocco
Matthias Brunner
Tareq Abu El Haj
Jalal Al Hussein
Luigi De Martino
Aziza Khalidi
Frédéric Lapeyre





Table of Contents

Introduction and Acknowledgments	3
Acronyms	6
Main Trends	7
Objectives and Methodology	18
Chapter 1: Mobility and Security	25
Chapter 2: Socio-Economic Situation	35
Chapter 3: The Evolution of the Labour Market	48
Chapter 4: Education and Child Protection	61
Chapter 5: Health	77
Chapter 6: Population Needs and Assistance Delivered	96
Chapter 7: Refugees and UNRWA	117
Main Trends (Arabic)	129



Introduction & Acknowledgments

Riccardo Bocco • Luigi De Martino

This study is the tenth report carried out by the Palestine Research Unit¹ of the Graduate Institute of Development Studies (IUED) of the University of Geneva since the outbreak of the second Intifada in September 2000 on the impact of local and international aid on the living conditions of the civilian population in the Occupied Palestinian Territories (oPt). The period under scrutiny in this report covers the six months prior to May 2006.

Two major events have marked the period covered by the present report: the unilateral Israeli disengagement from the Gaza Strip and the victory of Hamas at the parliamentary elections held in late-January 2006. Both events have profoundly affected the life of the Palestinian people. On the one hand, it has been the first time that Israel had completely withdrawn both its military forces and settlements² from the occupied territory and, on the other hand, it was also the first time that Fatah lost control of the Palestinian National Authority (PA) in favour of Hamas, a political force and armed-resistance movement that is considered by many as a terrorist organisation.

The wind of change seems to be short-lived: eight months after the Palestinian parliamentary elections and almost a year after the Israeli unilateral disengagement, the situation in the oPt has, once more, considerably worsened. Since July 2006, the Israeli Defence Forces (IDF) are back in the Gaza Strip and conducted large-scale military operations both in Gaza and in South Lebanon. The electoral victory of Hamas has triggered a financial blockade by the international community and Israel against the newly elected Hamas-led government, a blockade that will have considerable consequences for the lives of the Palestinian people.³ The international community's decision has also necessitated the adoption of new strategies for channelling humanitarian assistance to the civilian population without dealing with the Hamas-led government, despite the fact that the latter had been democratically elected.

The aim of IUED Palestinian Public Perceptions reports (PPP) reports and studies is to provide the various UN agencies, international and local organisations, and the Palestinian Authority with timely and reliable information relevant to their work, with the purpose of helping them better understand the views and concerns of the Palestinian public on issues pertaining to assistance, impact and needs.

¹ The Palestine Research Unit (PRU) of the IUED is led by Prof. Riccardo BOCCO, political sociologist. The team for the PPP 10 is composed of Mr Luigi DE MARTINO, political scientist at the PRU-IUED and team coordinator; Mr. Tareq ABU EL HAJ poll specialist, resident in Jerusalem, who not only contributed to the education chapter of PPP 10 but also has conducted extensive liaison work with the stakeholders in Jerusalem and with PCBS; Prof. Riccardo BOCCO, political sociologist; Mr Matthias BRUNNER, political scientist and pollster, director of Datadoxa, Geneva; Dr. Jalal Al HUSSEINI, political scientist, researcher at the PRU - IUED, resident in Amman (Jordan); Prof. Frédéric LAPEYRE, economist, Institute of Development Studies, University of Louvain-la-Neuve (Belgium); Mrs Elisabeth Nyffenegger, communication and administrative officer at PRU-IUED. Four other researchers have joined the PRU team as analysts for this report: Dr. Aziza KHALIDI, health specialist, Lebanese University, Beirut; Mrs Pauline PLAGNAT, economist, IUED, Geneva; Ms Céline CALVE, political scientist, Datadoxa, Geneva; Mr Roger AVENSTRUP, education specialist, resident in Denmark.

² Although the Israeli army and the settlers have been evacuating the Gaza Strip, the Palestinian Authority is not yet in full control of the borders, as well as the maritime and air space of the "liberated" territory. According to international law, this means that the Gaza Strip is still partially under occupation.

³ The tenth report will only partly be able to measure the impact of the blockade since the poll was conducted only shortly after the decisions of the international community have been implemented.

⁴ The English and Arabic versions of the questionnaire can be accessed on www.iuedpolls.org

The PPP reports are based on a consultation process that allows donors to become more than funding partners in the project. From the beginning, partner organisations are involved in the preparation of the questionnaire.⁴ As an example, stakeholders contribute to the process by pointing out issues that they feel pertinent in drawing up an objective assessment of the living conditions and needs of the Palestinian population in the West Bank and the Gaza Strip. The scope of the questionnaire used for poll ten remained similar to the previous ones, with some additional questions and modifications emanating from the deliberations and discussions with the stakeholders.

The IUED subcontracted the Palestinian Central Bureau of Statistics (PCBS) to conduct the survey in May 2006. One hundred fieldworkers interviewed eighteen-hundred people under the supervision of PCBS senior staff. We are particularly grateful to PCBS's Palestinian fieldworkers, coders and data-entry personnel, whose dedication and work under difficult and sometimes stressful conditions, made this study possible.

Data cleaning, documentation and preparation of the database with the results of the poll have been conducted by the team of Datadoxa in Geneva (www.datadoxa.ch). Their work provided the authors based between Jerusalem, Beirut, Amman, Brussels and Geneva with the data and cross-tabulations used to compile the analysis presented in the present report. It is worth reiterating that the IUED Perceptions Reports produce not only a report but also a database that can be openly accessed by those who are interested in the ten polls conducted so far by the PRU (for details see www.iuedpolls.org).

Acknowledgments

The report could not have taken place without the generous support of several donors and partners. First of all, the Swiss Agency for Development and Cooperation (SDC), which has been funding the reports since the inception of this project, has again accepted to extend its support to the tenth report. Several UN Agencies (UNRWA, UNICEF, WHO, OCHA and UNFPA) have joined forces to co-fund the present survey. Their support has been not only important in terms of funding, but also in terms of content inputs. The tenth report has also received a specific contribution by the Program on Security Sector Governance and Reform in the Middle East of the Geneva Centre for the Democratic Control of Armed Forces (DCAF) and by the Swiss Ministry of Foreign Affairs, Centre for Perspective and Analysis.

We are particularly indebted to a number of people whose contributions and assistance were extremely important. Special thanks are due to Mr. Dan Rohrmann and Ms. Bana Kaloti at UNICEF Jerusalem, Mr. Arnold Luethold and Mr. Roland Friedrich at the DCAF in Geneva and Ramallah, Mr. Anders Fange and Dr. Elena Mancusi at UNRWA West Bank, Mr. Fritz Froehlich at the SDC office for Gaza and West Bank, Mr. David Shearer and Ms. Francine Pickup at UN OCHA in Jerusalem, Dr. Dr. Ambrogio Manenti and Dr. Silvia Pivetta at WHO in Jerusalem, Mr. Hafedh Chekir and Ms. Laila Baker at UNFPA in Jerusalem.

We would also take the opportunity to thank Dr. Roger Avenstrup, who has overseen the elaboration of the education and child protection chapter, Ms. Chiraz Skhiri in Amman, Ms. Hanna Jerzabek and Mr. Cheikh Sadibou Sakho in Geneva, whose contribution and support has been extremely important for the redaction of several chapters.

Special thanks are due to the graduate students who have worked on the data of the PPP 10 report within the framework of the seminar "Aide humanitaire et monitoring des conditions de vie des populations civiles," given by Prof. R. Bocco and M. Brunner: Mr. Zane BANDERE, Ms. Adeline MILLS, Ms. Karla MORIZZO, Mr. Ousmane OROU-TOKO, Ms. Rudina TURHANI, Ms. Napapet VIDHYAKOM and Mr. Jean-François YAO

We are also grateful to Mr. William O'Reilly in Geneva for his work in editing the entire manuscript. Special thanks are also due to Mr. Jack Rabah who worked in Ramallah on the layout.

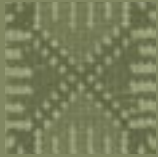
Finally, the data for this study were collected by the PCBS, but the data cleaning, weighting and interpretation of the results are the sole responsibility of the authors of this report.

After a methodological introduction, the report is structured in seven thematic chapters: the first will deal with security and mobility, chapter two will look at the changes in the socio-economic situation of the respondents during the period under scrutiny, chapter three will deal with the evolution of the labour market, chapter four will analyse the situation in the education sector as well as the question of child protection, chapter five will deal with the health-care issues, while chapter six will look at the needs of the Palestinian population in terms of assistance and how Palestinians perceive the assistance that they have received during the period from August 2005 to May 2006. Finally, chapter seven will analyse the question of refugees in the oPt and their relation to the UNRWA.

In past reports, the IUED PPP also contained a section concerning the Palestinians' perceptions with regard to the political situation and to the peace process, whereas the PPP 9 also included a section discussing the question of security sector reform in the oPt. These topics will now be made the object of a specific, separate publication developed in cooperation with the Geneva Centre for the Democratic Control of Armed Forces.

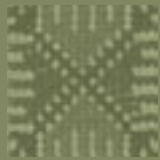
Luigi De Martino
and Riccardo Bocco
on behalf of the team

Geneva, August 2006



Acronyms

ARIJ	Applied Research Institute in Jerusalem
DCAF	Centre for the Democratic Control of Armed Forces
EGP	Employment Generation Programs
FATEH	(Arabic acronym for) Palestine Liberation Movement
GS	The Gaza Strip
GSRC	Gaza Strip refugee camps
HAMAS	(Arabic acronym for) Islamic Resistance Movement
ICRC	International Committee of the Red Cross
IDF	Israeli Defense Forces
ILO	International Labor Organization
IO	International Organizations
IUED	(French acronym for) Graduate Institute of Development Studies, University of Geneva
JMCC	Jerusalem Media and Communications Center
MIFTAH	Palestinian Initiative for Global Dialogue and Democracy
MOPIC	Ministry of Planning and International Cooperation, PNA
NIS	New Israeli Shekel
OCHA	UN Office for the Coordination of Humanitarian Affairs
oPt	Occupied Palestinian Territory
PA	Palestinian Authority
PCBS	Palestinian Central Bureau of Statistics
PECDAR	Palestinian Economic Council for Development and Reconstruction
PFLP	Popular Front for the Liberation of Palestine
PNA	Palestinian National Authority
PLC	Palestinian Legislative Council
PLO	Palestine Liberation Organization
PRCS	Palestine Red Crescent Society
SDC	Swiss Agency for Development and Cooperation
UNDP	United Nations Development Program
UNESCO	United Nations Education, Science, and Culture Organization
UNICEF	United Nations Children's Fund
UNRWA	United Nations Relief and Works Agency for the Palestine Refugees in the Near East
UNSCO	United Nations Special Coordinator's Office in Palestine
UNWFP	United Nations World Food Program
WB	The West Bank
WBRC	West Bank refugee camps
WHO	World Health Organization



Main Trends

Luigi De Martino

During the period analysed by the tenth Palestinian Public Perceptions report (December 2005 to May 2006), all indicators worsened throughout the Occupied Palestinian Territories (oPt).

An increased feeling of insecurity has been accompanied by an increase in the overall level of poverty (70%, +2% from poll nine) and extreme poverty (38%). Levels of extreme poverty have especially increased in villages (+15%) and in Jerusalem (+12%).

The deterioration and increasing instability of the labour market is considered the main cause of the decline in the living conditions of the population. Unemployment rose by 5% and now affects 38% of the total population. Job instability and insecurity affects the extremely poor most of all. But those above the poverty line and the highly educated (+9% of unemployed within this category of population) are also increasingly affected. The extremely poor are also those who are affected the most by the Separation Barrier in terms of access to the work place: if a total of 25% of respondents say they are affected, this number rises to 32% for the poorest.

The deterioration in the overall situation has had major consequences for the population, which has had to revert to coping strategies such as not paying bills and reducing food consumption in order to endure the worsening situation. Again, the extremely poor pay a heavy price with, in May 2006, 76% of them (+10% from 2005) declaring they have had to reduce food consumption. Again, the Separation Barrier has had a negative effect on the population's access to food, especially impacting those living in extreme poverty.

This worsening of living conditions is confirmed by the increasing number of respondents stating they have difficulties in coping with the situation: 52% of them say that their means of subsistence are or will soon be exhausted, but this percentage rises to 61% in regions outside refugee camps in the Gaza Strip, and to 63% in West Bank refugee camps.

Another indicator confirms these negative trends: 5% more respondents than in 2005 attest to their inability to fully protect and care for their children. This increase is evident in the West Bank and in Jerusalem, but especially in the areas affected by the Separation Barrier (+6%). Furthermore, the worsening economic situation is considered the main reason for children's difficulties at school by 51% of the respondents.

Finally, the worsening trends are confirmed by an increased reliance on external assistance and especially by the fact that basic needs such as food, employment and health are again becoming extremely difficult to satisfy for the respondents. If in villages, food is considered to be the first priority, in cities and refugee camps employment is the first priority.

At the same time, the trend of decreasing overall assistance is confirmed by the findings of the tenth poll. 34% of the population (-4%) has received assistance in the six months before May 2006. While, in general, assistance targets the Gaza Strip (63%) more than the West Bank (20%), it is in the West Bank and especially in the regions outside refugee camps where assistance has decreased the most (-13% and -27% respectively). This is problematic, since it is in villages, especially those of the West Bank, where extreme poverty has increased the most (+15%).

Refugees are still the main targets of assistance (refugees are in general still poorer than non-refugees). At the same time, assistance to refugees has decreased by 5% since 2005 and especially in the West Bank refugee camps. If, on the one hand, assistance focuses mostly on those living in extreme poverty (53%

of this category - +2% since 2005 - have received assistance), on the other hand, those living below the poverty line witnessed a sharp decrease in the assistance provided (-13% since 2005).

The picture painted by PPP 10 is bleak. The extremely poor face increasing difficulty in coping with the situation. At the same time, regions, such as Jerusalem and villages in the West Bank, and groups, such as the well-educated and those living above the poverty line, have become increasingly and considerably more fragile, being put under pressure by the worsening economic and mobility situation. Since the gap between the level of assistance needed and what is actually received is increasing, the picture will probably worsen as the current poll could only partly measure both the impact of the blockade of international assistance that followed the nomination of a Hamas-led government after the January 2006 parliamentary elections and of the significant military operations conducted by the Israeli military forces in the Gaza Strip.

Chapter 1: Security and Mobility

The feeling of insecurity has increased in all regions of the oPt, but more particularly in the West Bank (+11%) and Jerusalem (+22%), regions where the ongoing construction of the Separation Barrier heightened mobility restrictions (and concerns about the future of the region).

In May 2006 the **profile of insecurity** in the oPt is comprised of:

- **Men rather than women:** 55% of women say that they feel insecure compared to 59% of men;
- **The old rather than the young:** 49% of those between 18-24 years of age feel insecure compared with 65% of those aged 50 and over;
- **The poorly educated rather than the educated:** 53% of Palestinians with a high educational level feel insecure compared with 60% with a low educational level.
- **The worse-off rather than the better-off:** Heads of households identified as hardship cases felt more insecure than those below the poverty line. *However, the increase in the feeling of insecurity from July 2005 to May 2006 grew comparatively more amongst respondents above the poverty line (+14%, versus +12% of the hardship cases).*

West Bankers mainly ascribed their feeling of insecurity to the Israeli occupation (including Israeli raids, checkpoints and settlements), while Gazans insisted much more on internal insecurity factors, such as the activities of local armed groups, corruption and crime. Jerusalemites' opinions about the causes of their feelings of insecurity were less marked than elsewhere; Israeli checkpoints and crime were cited as the main reasons.

Internal mobility improved in Gaza, mainly on account of the disengagement of the Israeli forces and settlements in August-September 2005. Conversely, whereas a slight improvement occurred in the West Bank, the mobility situation remained problematic in the Jerusalem region. The percentage of people affected by the Barrier was much higher in Jerusalem (97% of respondents affected by the barrier) than in the West Bank (31% of respondents affected).

The side-effects of the barrier's construction have increased (especially in Jerusalem), be it with regard to separation from relatives, separation from land or higher prices of material and transports. For both Jerusalemites and West Bankers, separation from relatives has remained the main problem resulting from the Barrier's construction.

Chapter 2: Socio-Economic Situation

Poverty has increased since last year. The overall poverty rate reached 70% in May 2006 as compared to 68% in July 2005. Poverty levels hit 71% in the West Bank, 35% in Jerusalem and 79% in the Gaza Strip. Extreme poverty keeps also increasing, affecting 38% of the overall population. The rates of extreme poverty are 33% in the West Bank and 54% in the Gaza Strip; even Jerusalem has begun to face a severe deterioration in living conditions. While only 5% of the respondents from Jerusalem were facing extreme poverty in July 2005, this rate climbed to 17% in May 2006.

Even though the PPP 10 survey outlines a rise in the level of poverty in each region of residence, the sharpest decline in living conditions occurred in villages. In 2004, 23% of the respondents from villages lived in extreme poverty, but the number grew to 38% in May 2006.

In terms of geographic distribution, the extremely poor in the West Bank (47%) tend to live in villages while such is not the case in the Gaza Strip, where 66% of them live in the city. As to those living below the poverty line (excluding the poorest), 73% of the respondents from the Gaza Strip are located in cities while they number 50% in Jerusalem and 52% in the West Bank. Regarding those living above the poverty line, the results show that a clear majority of them live in cities. The results of the survey seem to indicate that the Separation Barrier has had little influence on the level of poverty: 17% of the poorest lived in an area crossed by the Barrier, 39% of those living above the poverty line and 26% of those living below the poverty line.

According to the May 2006 results, 44% of the respondents felt that their income has decreased in the last six months, while only 20% reported this feeling in July 2005. The poorest suffered the most, as 55% of them have perceived a decreased income as compared to 28% last year. 39.4% of the poor have perceived a decline of their income (as compared to 19% last year) and those above the poverty line have also felt that they suffered from a deterioration in their income (34.4% in May 2006 as compared to 11.7% in 2005). Declared income decreased in all regions, but especially in the Gaza Strip where 58% of the respondents felt they had suffered from an income decline.

The first cause of this reduction seems to be attributable to the deterioration in the labour market, influenced by labour restrictions resulting from the conflict. 61% of the poorest declared that their income decline was due to job loss or working-hour loss, while 41% of those living above the poverty line stressed it; those above the poverty line mainly stressed other reasons.

Confronted with this deterioration of the socio-economic situation, in May 2006, more people were not paying bills anymore compared to July 2005 (71% of the poorest can't pay bills anymore compared to 57% in July 2005) and more than half of the poor are in the same situation. Even those who live above the poverty line have had to cope with the deterioration in the economic situation by using this strategy (35% of them in May 2006 as compared to 27% in July 2005). The same analysis can be made regarding the strategy of cutting expenses and of using credit in order to sustain themselves. In general, more respondents had to increase their use of past savings to compensate for the deterioration in their living conditions.

The results of the present survey indicate that the poorest have more difficulty in adequately feeding themselves through the use of their own resources: 18% of them rely on food assistance (as compared to 13% in July 2005) and only 70% rely on their own resources (as compared to 77% in 2005). The Separation Barrier makes it more difficult for the poor to obtain some food items: 16.5% of respondents confirm that the Separation Barrier and other fences make it more difficult or even impossible to obtain food.

The proportion of those who believed it would be difficult to keep up financially during the coming period increased as well, from 11% to 16%. While in 2005, about 40% of them felt they could keep up as long as it takes or up to one year, this proportion dropped to 34% in May 2006. In cities and refugee camps, the percentage of respondents who stressed they were in serious conditions and do not know how to manage increased sharply between July 2005 and May 2006: from 10% to 17% in cities and 10% to 23% in refugee camps. Jerusalem also experienced a significant increase of people in a similar situation (from 7% to 14%). The ability of the extremely poor to cope with the current dramatic economic situation weakened, as the proportion of them who stated that they were in serious condition and did not know how they would survive increased from 21% in July 2005 to 28% in May 2006.

Respondents also felt that, despite the economic and humanitarian crisis, Palestinian society has displayed great social cohesion and coping capacities. This cohesion and resilience may help explain why the West Bank and the Gaza Strip have been able to absorb levels of poverty and unemployment that would have led to the tearing of social ties and the destruction of the social fabric in many other societies. However, the feeling of a growing differentiation in the income situation of members of the community increased

among people living in the West Bank refugee camps and in Jerusalem, where a growing number of respondents considered that their living conditions were worse than those of their community overall.

The results of the current survey underline the deterioration in living conditions and the risk of a major humanitarian crisis. It appears that more than half the respondents feel like their means of subsistence will soon be exhausted or are already exhausted (52%), especially in the West Bank refugee camps (63%) and in the Gaza Strip outside refugee camps (61%). One of the striking results is the fact that 43% of the respondents from West Bank refugee camps stressed their available means were already exhausted.

Chapter 3: Evolution of the Labour Market

Palestinian workers in May 2006 continued to be confronted with a very bad employment environment caused by the collapse of the Palestinian economy, mobility restrictions and exclusion from the Israeli labour market.

According to the results from the May 2006 poll, the rate of unemployment increased sharply to hit 38% as compared to 33% in July 2005. The results show also less than half of the labour force (41%) was in full-time employment, while 21% were, for the most part, underemployed, being trapped in a range of involuntary part-time positions. Unemployment has increased significantly outside West Bank refugee camps (from 34% to 37%), as well as inside Gaza Strip refugee camps (from 41% to 44%) and in Jerusalem (from 16% to 19%). Nevertheless, it seems that unemployment dropped sharply in West Bank refugee camps (from 44% to 28%) and that this evolution was associated with a broader access to full-time jobs (from 34% to 55%).

Even though the poorly educated are still the group which suffer the most from unemployment (47% of the respondents from this category are unemployed), they seem to gain a better access to full-time work, as 28% of them are employed full-time in May 2006, as compared to 20% in July 2005. On the contrary, more highly educated persons have now to deal with unemployment (a rate rising from 15% in July 2005 to 24% in May 2006). The results also indicate that the highest percentage of unemployment is concentrated among the young and elderly workers. At the same time, results show that in the 18-24 years-old category, unemployment decreased from 55% to 47% and full-time employment increased from 25% to 31%.

The employment market seems to be increasingly unstable. Respondents who stated that in their household no one lost their jobs dropped to 77% in May 2006 as compared to 86% in July 2005. The proportion of households where one member lost his or her job has increased from 11% to 18%. For each level of poverty, the number of respondents who stated that someone from his/her household lost his/her job has increased. However the extremely poor have experienced a very sharp increase in unemployment as the percentage of respondents reporting that one member of his/her household lost his/her job jumped from 17% to 29% between July 2005 and May 2006. Job loss increased particularly sharply in the Gaza Strip, as much in the refugee camps as in the non-camp areas.

The feeling of economic insecurity is also expressed by the fact that, while in 2005 more than half the people (55%) felt it rather unlikely they would lose their job, in 2006, this number dropped to 50%. This feeling of insecurity about losing jobs increased the most among the poor and those living above the poverty line. Highly educated people also seemed to feel more insecure about the stability of their jobs in May 2006 than in 2005. In terms of place of residence, it is in Jerusalem and in Gaza outside camps that feelings of insecurity have grown the most this year, whereas the population living in the refugee camps seems to have regained confidence in their job stability.

Another reason for job instability is the Separation Barrier. According to the May 2006 survey, it is preventing almost 25% of the population access to their jobs. The poorest are those most likely to be affected by the Barrier: 32% of them can't access their work because of it. 18% of those living above the poverty line are also affected by the Separation Barrier.

Regarding the structure of the labour force, there has been a rise in the number of skilled workers (15%

to 21%). Employees still predominate: there even has been a rise in their proportion since 2005, (35% to 37%). The number of self-employed has decreased from 23% to 18%. It is important to note that more young people are working as employees and that access to skilled employment is being given to young adults between 25-34 years old. Jerusalem benefited the most from new opportunities in skilled employment (from 20% of the respondents in 2005 to 42% in 2006) and the West Bank refugee camps have the largest proportion of employee positions (from 39% to 52%).

The type of employment did not change much from 2005 to 2006. A small decline in government positions (1%) was registered, in line with employment with international and local NGOs and trade activities. The private sector is still the most important type of employment, while the number in self-employment has increased by 4%.

Full-time work is usually considered the best way to escape poverty. But still, although the proportion of the very poor having a full-time job has increased, the survey did not register any significant change in their situation. As for those below poverty line, they continue to have better access to part-time and full-time jobs. Nevertheless, despite their access to these jobs, their situation still did not change significantly. For those living above the poverty line, their employment situation is increasingly insecure.

In line with the forecast reports on the impact of aid cuts, it must be stressed that employment in the government is now less secure than before. If only 7% of the poorest worked for the government, that proportion has now grown to 10%. As for the poor, they numbered 30%, and now comprise 36% in 2006.

Chapter 4: Education and Child Protection

The need to attend school regularly (49%) was the most widely quoted *primary* need for Palestinian children, followed by the need to for access to psychological support (18.9%). Safe opportunities to play with friends (31.2%) was the most widely mentioned *secondary* need for Palestinian children, closely followed by the need to have unrestricted access to medical services (28.6%). No statistically significant difference in first priority children's needs was found when comparing those affected by the Separation Barrier and those not affected.

While neither the gender of the respondent nor that of the household head is significantly associated with the perceptions of children's priority needs, it is clear that the gender of the children themselves has influenced the responses to the priority needs of children within the household. In households where the children are exclusively - or almost exclusively - female, the need to attend school regularly is mentioned less (37%) than when the sexes of children in the household are evenly mixed (an average of 52%) or when the children in the household are exclusively - or almost exclusively - male (47%).

On average, one-third of the respondents indicated their inability to fully protect and care for the needs of children in the household. This represents a 5% increase from July 2005, when 27% of the respondents indicated they could not fully protect, and care for the needs of, children in the household. The evolution of this trend over time is also visible in responses across geographic regions as well as in households' relation to the poverty line. In both Jerusalem and the West Bank, the ratio of those indicating they cannot fully protect and care for the needs of children in the household has increased from nearly a quarter of the respondents in 2005 to 33% and 36%, respectively, in 2006. In the Gaza Strip, this proportion is virtually unchanged. Moreover, responses within the West Bank varied according to respondents' relation to Israel's Separation Barrier; while 37% of respondents from Barrier-affected communities said they can't meet children's needs, 31% of respondents from non-affected communities said the same - a difference of +6%.

The proportion of respondents who believe that Palestinian children experience violence has decreased by 7% (84% in 2005 to 77% in 2006). Despite this modest decrease, the proportion remains alarmingly high. The evolution of this trend over time also varies across region of residence. While the levels of violence against children show very little decrease (from 86% in 2005 to 83% in 2006), a more significant drop is observed in both the Gaza Strip and Jerusalem. Considering the overall picture, no sharp changes

are observed when comparing the evolution of respondents' perceptions on main sources of violence against children from 2005 to 2006. The Palestinian-Israeli conflict remains the single most frequently mentioned source of violence (62% in 2005 and 66% in 2006).

How children spend their spare time is also an indicator of how safe they are. For both age groups, watching television is the most important activity. For the 6-12 year-olds, hanging out with friends and playing in the neighbourhood are very frequently mentioned. Hanging out with friends is mentioned almost as frequently among the 13-18 year-olds, but playing in the neighbourhood is, to some extent, replaced by more time spent in political/cultural seminars, hobbies, clubs, work and sports, in that order.

Of all households with children who experienced difficulty attending school in the six months preceding the survey (8% of households with children of school age¹), the fear of exposure to violence by Israeli soldiers (53%) is the most frequently mentioned obstacle preventing children's attendance, followed by the worsening of household economic situations (51%) and the fear of exposure to violence caused by the lack of internal Palestinian security (47%). Over one-quarter of these households also indicated the fear of exposure to violence by Israeli settlers as an obstacle, and 11% pointed to the inability to obtain permits to move within the West Bank as an obstacle as well.

Notwithstanding the fact that over half of the households with children who experienced difficulty attending school indicated the worsening economic situation of the household as a main obstacle, it is important to highlight the fact that the ratio of households with school-aged children entering the labour market has decreased by 1% in 2006 (3% in 2005 to 2% in 2006).

Regarding the issue of stress felt by children in the household, the survey provides an indicator of how this evolved over time since 2005, and what are its manifestations in the behaviour of the children. Of all the respondents, 60% indicated that the level of stress felt by children in the household has increased since 2005 (25% said it increased and 35% said it greatly increased) while over a quarter indicated the level of stress remained the same as before, and approximately 12% indicated it decreased or greatly decreased. Comparing types of areas, no significant difference are found between camp, city and village dwellers with regard to increases in stress. However, with regard to decreases in stress felt by children, more camp-dwellers (17%) indicated a decrease when compared to city and village dwellers (12% and 8% respectively).

Of the 35.5% of the Palestinian population who are of legal school age, 7% are reported to have either dropped out of school or have never attended school at all. However, of all the households, 67% include children of legal school age, of which 17% include children who have either dropped out of school or never attended school at all. Attempting to understand the causes of drop-out for Palestinian children, no direct relationship between dropping-out and poverty at the household level can be discerned.

Nearly one-quarter of the respondents described financial limitations on the household as a main impediment to children's education. Making a comparison between those who indicated financial limitations as an impediment to children's education and the presence of children who dropped out of school in the household reveals a statistically significant relationship, as 27 % of the respondents from households that include drop-out children mentioned financial limitations as a main impediment to children's education. This represents a 5% increase from the average response and a 6 % increase from households without drop-outs. Furthermore, three times as many households with drop-outs (6%) indicated that children under 18 years old entered the labour market to relieve economic hardship when compared to households without drop-outs (2%). Since a direct comparison between households with drop-outs and their relation to the poverty line reveals no statistically significant relationship, it is possible that the drop-out children contribute to the household income and thus alleviate their poverty.

Nearly three-quarters of all individuals attending school at the time of the survey receive their education in government schools. Private schools provide education for 4% of enrolled individuals, while UNRWA

¹ Between 6 and 18 years old.

provides education for 16% of enrolled individuals. Another 6% reported receiving their education from a combination of service providers.

Overall, it can be seen that almost two-thirds of the respondents are satisfied or very satisfied with the quality of education, and just over one-third are dissatisfied or very dissatisfied. Geographic area and locality type is clearly a factor affecting satisfactory provision of education services. Satisfaction is reported to be highest in West Bank refugee camps, followed by the West Bank outside camps, and then by the Gaza Strip outside camps: the lowest result is in Gaza Strip refugee camps;. Furthermore, 10% more refugees (41%) are dissatisfied with the quality of education than non-refugees (31%). Overall satisfaction is highest and almost the same for the private sector (70%) and government provision (69%), but somewhat less with mixed (61%) and least with UNWRA provision (56%).

Moreover, respondents were asked to provide their estimations of satisfaction with specific elements of their children's education. Satisfaction is highest with the duration of the school days (90%) and the schools' physical environment (77%), and lowest for the curriculum² (43%) and the double-shift system (52%).

Generally, the present curriculum is described by 46 % of the respondents as the main impediment to children's education. The current survey does not explore what respondents mean when they respond that they are satisfied with the curriculum (its content, scope, relevance, preparation for employment, preparation for further study, etc.). However, the Palestinian Curriculum Development Center (PCDC) has received feedback from various sources, which indicates that there is a high degree of support and satisfaction with the Palestinian curriculum.

The vast majority (85%) of children receive assistance in preparations for their school work (exams, homework, etc.). Of those indicating receiving assistance, three-quarters said one of the parents provides the assistance, 21% said a sibling or a relative provides the assistance, and only 4% receive assistance from a private tutor. Comparing the perceptions on the necessity of assistance in schoolwork with the main educational provider reveals that the prevalent perception of respondents from households where the children attend UNRWA schools is that help is essential for the success of children in their education (69%), whereas 51% of respondents from households where the children attend private schools and 40% for those attending government schools said that such help was supplementary.

Key issues to be followed up include tracking trends in the worsening of conditions and how they affect what is the top priority - education. Issues of gendered perspectives of children's needs in health and education demand further analysis, as does as a more accurate picture of what is found to be unsatisfactory in health and education services, and why.

Chapter 5: Health

The tenth poll confirms findings from previous polls, underscoring health care as an important need and a significant household expense item. Comparing polls six to ten, health is increasing in importance as a first and second most important household need. Regarding household expenditures, health care is increasing in importance.

The most sought-after health services during the period covered by the tenth poll are ambulatory care services for sick children, emergency hospital care and follow-up for chronic disease care. Comparing polls nine with ten, there has been a significant increase in the reported need for vaccination services and follow-up for chronic disease, while there has been a significant decrease in the reported need for ambulance services, maternity/hospital delivery and emergency hospital care.

When looking at the perceptions related to needed health services, a highly significant regional

² Although 57% of the respondents indicated their dissatisfaction with the curriculum, only 46% declared the curriculum to be the *main* impediment to children's education.

variation in the need for health care among all services is apparent. Gaza has the highest proportion of respondents needing seven out of ten types of services, namely family planning, vaccination, antenatal care, ambulatory care for a sick child, as well as in maternity/hospital delivery care, follow-up for chronic disease and specialised care. The West Bank has the highest proportion of needed services in emergency hospital care and ambulance services.

Poverty is significantly related to the need for ambulance services, maternity/hospital delivery care, specialised care services, mental health, follow-up services for chronic disease, vaccination, as well as antenatal and family planning services. The highest proportion of those needing/seeking these services is among respondents who are above the poverty line. The need for ambulatory care for a sick child, follow-up for chronic disease and family planning service varies by refugee status.

In general, the majority of respondents report promptness in service delivery when needed and sought. The highest proportion of respondents reporting not receiving care or receiving it after a time limit was in respect of emergency hospital services, followed by maternity hospital service and, then, follow-up for chronic disease care. Jerusalem (J2, i.e., the West Bank, not the annexed area) respondents made up the highest proportion of those reporting unmet need in emergency hospital care, followed by the West Bank. West Bank respondents make up the highest proportions of those not having needs met in ambulance services, maternity hospital delivery care, in ambulatory care for a sick child, follow-up of chronic health problems, vaccination and antenatal care. A similar pattern is observed for the delay in delivering care across services.

The most common reason for not receiving health service needed is the lack of access caused by military barriers (including the Barrier and military checkpoints). It is followed by prior unsatisfactory experience with service delivery. Lack of financial affordability ranks as third reason of not receiving health services when needed. Compared to July 2005, there has been an increase in respondents citing the Barrier and other military barriers as the main reasons for not being able to access health services. This situation is especially important in the West Bank.

For the tenth report, the three major providers of health services are identified as the Ministry of Health (MOH), UNRWA and the private sector. The MOH is predominant among the three major providers. It has the highest proportion of respondents reporting it to be a source of service for all health services examined in the survey. UNRWA is the second major source of service for family planning, antenatal care and follow-up for chronic disease. The private sector is the second major reported provider of health services for specialised care for non-acute cases. Examining sources of care for all services by region, the MOH is evenly spread as a source of care over the West Bank and Gaza, while UNRWA concentrates mostly on the Gaza Strip and the private sector is mostly in the West Bank. The MOH is mostly used by non-refugees, UNRWA by refugees and the private sector by non-refugees. What is noteworthy is the proportion of non-refugees citing UNRWA as a source of care in all the services. Furthermore, a higher proportion of those who cite UNRWA as a source of care are poor compared to those who cite the MOH.

The working hours of PHC centres are accorded the best quality rating in PPP 10, followed by the number of staff (both general and female). Emergency service has the second largest proportion of respondents giving a good rating. Worst ratings are for distance of hospital from home, followed by availability of prescribed drugs and, finally, the distance of PHC centres from home. The West Bank has lowest ratings (i.e., the highest proportion of bad ratings) for most quality indicators, exceptions being in the case of the availability of prescribed drugs, where Gaza tops the 'bad' list. Health staff attitude is the indicator where there is the highest proportion of quality improvement reported across services. Emergency services have the second largest proportion of respondents citing improvement.

Chapter 6: Needs and Assistance Received

49% of the surveyed households declared they were in need of a lot of assistance, a figure slightly lower than the result of the ninth poll (53%). Furthermore, half of the respondents reported that, six months ago, the importance of assistance in their budget was less important. This confirms the strong reliance of

the Palestinian population on assistance.

The analysis of the needs of assistance by region of residence reveals that the neediest segment of the Palestinian population is residing in the Gaza Strip, closely followed by residents of the West Bank. However, in terms of area of residence, the situation hasn't changed when compared with July 2005; the neediest areas are the refugee camps, where 61% of Palestinians are in need of a lot of assistance.

In contrast to the July 2005 poll, it is difficult to arrive at a balanced view of what is considered as a priority of the household. Respondents shift back to basic needs such as food and employment. When the first and second most important need are considered in sum, food assistance stands as the major need for half of the population (from 42% in July 2005 to 53% in May 2006), whereas employment remains, in May 2006, the first most important need for households. The need for health care has also sharply increased in the past six months.

If one focuses on food and employment as most important needs, it appears that food aid as a first most important need rates slightly higher among non-refugees. In relation to levels of poverty, employment is considered as the first most important need of the household by 34% of the poorest segment of the population. In the West Bank, food is the most important need, cited by 31% of respondents, whereas in Gaza it is the need for employment that stands out as the top priority. In comparison with our previous poll, the need for work in Jerusalem has increased by 19% since July 2005. In terms of area of residence, most city and refugee camps inhabitants consider that the most-needed assistance for their household is employment. Priorities in villages are quite different: village-dwellers consider food as their most important need, followed by employment.

When looking at the two most important community needs, the results confirm those observed in July 2005. Employment is perceived as by far the most important need for the community. Food assistance and direct financial assistance have increased as first and second priorities. This change also signifies a degradation of the living conditions in Palestinian households, as the population needs are becoming more basic. In the Gaza Strip, employment is seen as a first priority for the community. In line with reported household need, the community need in Jerusalem for employment has increased considerably in the past six months (+28%). Refugee camps inhabitants and the poorest segment of the population also consider employment as the first priority for their communities.

From the perspective of needed infrastructure, in spite of a slight decrease of 4% in comparison with the previous poll, the most important infrastructure needed remains access to the water network, cited by 48% of the respondents.

According to the results of the May 2006 survey, 34% of Palestinian households have received assistance in the past six months. This represents a decrease of 4% since July 2005, confirming the trend outlined in the ninth report. From a geographical perspective, respondents living in the Gaza Strip report a level of received assistance that is far more important than that in the West Bank (63% vs. 20%). The survey also shows an increase of 7% in the level of assistance received by respondents from the Gaza Strip, and particularly in the areas outside the camps (+9% since July 2005); at the same time, this assistance has sharply decreased by 13% in the West Bank, but by 27% in West Bank refugee camps.

Households living in hardship are those who received the most assistance (53%, i.e., +2% since July 2005). 15% of those who are better off have received assistance in the past six months, constituting a decrease of 4% in comparison with the ninth poll. Interestingly, it appears that the decrease is the highest (-13%) for those living below the poverty line; the assistance received in May 2006 by this segment of the population has never been so low (28%).

In terms of the type of aid received, 26% of the respondents were beneficiaries of food assistance, and 8% received both cash and employment assistance. In comparison with July 2005, cash assistance remained constant, while the level of employment assistance has increased by 4%, and, finally, fewer respondents received food during the period under scrutiny (-5%). When looking at the value of the received assistance, a slight decrease in the median value of the three main types of assistance delivered (food, cash and employment) is apparent.

In regard to employment assistance, the proportion of respondents who benefited personally from a job increased sharply both in the case of long-term work (+12%), and short-term work (+23%). Also, in the case of employment assistance to the household, there has been an increase in the percentage of reported long- and short-term work (+12% and +13% respectively), while unemployment funds and resources received for self-employment decreased drastically (from 42% to 21% and from 17% to 1% respectively). Employment assistance to Palestinian households has increased in the Gaza strip; it was received by 15% of households living in hardship, by 12% of households living below the poverty line and by 6% of households living above the poverty line. 65% of the respondents feel satisfied (59%) or very satisfied (6%) with the employment assistance received. The main reason for dissatisfaction with employment assistance received is due to an inadequate amount of assistance. The second main reason for dissatisfaction is the very short period of employment.

The percentage of Palestinian households relying on food assistance has slightly increased by 2% (from 7% to 9%). However, this dependence is noticeably higher in the Gaza Strip (19%), particularly in the refugee camps (27%), as well as outside camps (16%). The percentage of those dependent on outside sources in West Bank refugee camps is likewise high (13%). These proportions have increased since the July 2005 survey, in contrast to a decreasing trend in previous years.

The results of the survey show a clear contraction in food consumption: 55% of the respondents reported that they have reduced their level of food over the past six months (+5%). The highest percentage, according to region of residence, is in the Gaza Strip (73%, +18%), inside and outside camps (+19% and +17%, respectively, since 2005). 29% of people in Jerusalem and half of the respondents from the West Bank have reduced their food consumption, in particular those resident inside the refugee camps (+28%). The percentage also increased among hardship cases (76%, +10% since 2005). About a half of the respondents (47%) answered they have bought less-preferred food in the past six months.

The trend of increased needs is accompanied by a decrease in the number of people reporting having received food assistance in the past six months (from 33% to 26%). Food assistance benefits mostly refugees (46% vs. 12% to non-refugees, an important decrease from the 57% of July 2005). According to region of residence, more than half of the respondents residing in the Gaza Strip have benefited from food assistance (54%), while only 12% of West Bankers and 9% of Jerusalemites have done so. The distribution of food assistance is more consistent in the refugee camps (57% versus 23% in the cities and 16% in the villages), particularly in Gaza Strip refugee camps (67% of the respondents). In the West Bank, there was a consistent reduction in the distribution of food assistance in refugee camps, from 70% in the July 2005 survey to 31% in the present survey. Lastly, viewed according to the level of poverty, 43% of the respondents living in hardship have received food assistance, while 18% of those below the poverty line (a decreasing percentage when compared to the previous survey in July 2005, when it was 36%) and 11% of those living above the poverty line have done so.

UNRWA remains the most-cited source of assistance even though, since July 2005, slightly fewer respondents (from 26% to 23%) have cited this agency as the main source of assistance. The PA and the municipalities are the second-most cited source of assistance. Perceived assistance from the PA has increased by 2% in the past six months. Perceived support from NGOs has increased by 5%, while the other assistance sources such as Arab organisations, international organisations or private sources were less cited.

According to the May 2006 survey, 90% of UNRWA beneficiaries are refugees. When looking at the geographical independent variables, UNRWA beneficiaries are more city dwellers (50%) than camps inhabitants (39%), while 12% of them are villagers. UNRWA recipients are more often classified as hardship cases (60%) than as living below the poverty line (25%). 37% of the beneficiaries of the Palestinian Authority and the municipalities reside in the West Bank (-6% since July 2005) and 61% live in the Gaza Strip (+6% since July 2005). In addition, 54% are non-refugees (versus 52% in July 2005). The majority of PA beneficiaries live in cities (55%, i.e., +11% since July 2005) rather than villages (28%, i.e., -6% since the last poll) or camps (18%, i.e., -6%). As for the UNRWA recipients, the PA tended to target households living in hardship (63%, i.e., +15%).

Satisfaction with the assistance provided has remained stable in May 2006: a large majority of

respondents are satisfied with the aid delivered. The proportion of dissatisfied has increased amongst those outside camps, both in the West Bank and the Gaza Strip. Frequency of delivery is the main reason for dissatisfaction for 62% of the respondents (+13% from July 2005), while 30% (i.e., -5% since July 2005) of respondents were dissatisfied with the quantity of assistance delivered, and 7% (i.e., -4% since July 2005) were discontent because of the poor quality of the assistance.

As a conclusion, the results of the tenth survey show that more than half of the Palestinian population was still in need of assistance in May 2006. More worryingly, the dependency of the Palestinian population on relief and emergency assistance is increasing. At the same time, the gap between the level of assistance needed and what is received has increased since the previous poll. This trend is particularly clear in the case of food and food assistance; more than half of the respondents confirmed that they have reduced their level of food consumption and have bought less-preferred food when, in the meantime, the level of food assistance has decreased by 7% in the past six months.

Chapter 7: Refugees and UNRWA

Although both refugee and non-refugee populations have been worse-off during the period under scrutiny, the discrepancy in poverty levels between refugees and non-refugees that was noticed in our previous report was confirmed. In May 2006, refugees (74% of poor overall) were poorer than non-refugees (68% of poor overall).

Accordingly, socio-economic prospects for the future were perceived much more pessimistically amongst refugees than non-refugees. The percentage of refugees stating in May 2006 that they would be barely able to manage and or that they did not know how to cope was at 53% as opposed to 44% of non-refugees.

From a geographic perspective, refugee camps have remained the poorest areas in the oPt. Their percentage of camp poor (hardship cases included) rose from 72% to 77%, as against 65% to 67% in cities and 69% to 74% in villages. The degradation in living conditions in the refugee camps was more marked in the West Bank, where the percentage of poor rose by 12%, than in Gaza, where the overall percentage of poor was steady during the period under scrutiny.

Household incomes remained, on average, higher for non-refugees than for refugees, with an increasing percentage of refugee households having lower-range incomes, i.e., below 2000 NIS per month: 73% of refugees as against 59% of non-refugees.

Job losses were identified by both categories as the first cause of the decrease in their household incomes, but the numbers were higher amongst refugees (32%) than amongst non-refugees (28%). This has resulted in an increasingly higher percentage of refugees having to take on jobs that do not match their training: 36% of refugees as against 24% of non-refugees.

Whereas refugees remained the main target of socio-economic assistance generally (55% as against 20% of non-refugees), the number of them receiving such assistance decreased during the period under scrutiny by 5%: 60% in July 2005 as against 55% in May 2006. Geographically speaking, assistance primarily targeted the Gaza Strip camps, while the West Bank camp dwellers were the most affected by the decrease in assistance levels.

UNRWA remained the main assistance provider of emergency assistance amongst oPt refugees, although to a lesser extent than previously. Geographically speaking, the respondents' perceptions of the agency as provider of most important services declined in all places of residence except in the Gaza camps. Conversely, and maybe as a result of that increased focus on the Gaza camps, the West Bank camps were much less targeted than previously.



Objectives & Methodology

Matthias Brunner • Luigi De Martino • Celine Calvé

Introduction

The main objective of the Palestinian Public Perceptions (PPP) studies is to provide government officials, aid professionals, donors and civil society representatives with tools for monitoring the ongoing situation in Palestine and the assistance provided. They rely on polls that measure the Palestinians' perceptions about their situation and its evolution, assistance received by the population and their satisfaction with it, as well as other topics relevant for individuals and organisations involved in assistance in Palestine. The results then enable aid providers to use the PPP reports in different ways. The data of the present tenth report has been one of the main sources for the 2006 UN OCHA Consolidated Appeal for the occupied Palestinian territories (oPt), and the results are also used in other reports and as an advocacy tool.

In this chapter, the objectives of the PPP 10 study and its methodology will be described, followed by a short description of the independent variables used for the analyses.

1. Objectives of the Study

Since January 2001, ten polls on Palestinian public perceptions have been conducted.¹ Because most questions have remained the same throughout this period, the polls provide a unique wealth of monitoring information. Whenever possible and meaningful, the analysis in each chapter will refer to the evolution of attitudes. For the purpose of our analysis, we have standardised the results of seven of these eight polls to allow precise monitoring of the evolution of answers over time.²

The results of this standardisation can be found on <https://www.iuedpolls.org>. At this website, the interested reader can find all the relevant information, from question wording to distribution frequencies as well as bivariate analysis with our list of independent variables. For this reason, no table of frequencies is included with this report.

Because of data standardisation, it is not possible to use question numbers to designate the variables used for the analysis. In the present report, the variables are referred to in the format **o###** where ### is the number of the variable. To find the name of the variable that is related to a particular question, the interested reader can use the correspondence table that is directly accessible on the IUED-Polls website.³

The questionnaire for the study was elaborated in order to offer data on Palestinians in the West Bank and the Gaza Strip on nine main topics that correspond to the six parts of the report. The English and Arabic versions of the questionnaire can be downloaded on <https://www.iuedpolls.org>.

In the outline below, we present these chapters and give the list of relevant variables for each of them.

¹ Representative polls of the Palestinian population living in the oPt were conducted in January, June and November 2001, in April and November 2002, July 2003 as well as March and October 2004, July 2005 and May 2006.

² In April 2002, we conducted a poll in the aftermath of the Israeli army's reoccupation of the Autonomous Palestinian Territories. However, due to the difficult conditions, the data was collected by phone on a sample that is not totally random (see Bocco, Brunner, Daneels and Rabah 2002b). The data from this poll - covering only the West Bank - was not standardised with the other polls.

³ Refer to the sheet for poll 10: Correspondence original variables – standardised variables <https://www.iuedpolls.org/resource.php?idResourceType=6>

In this report, chapters on politics and security are not included; a separate DCAF (Democratic Control for Armed Forces)-IUED publication will further develop the question of politics and the peace process and of issues related to security, mobility and security sector reform in the oPt.

Chapter 1: Mobility and Security

The general situation in terms of mobility and security conditions is presented in the first chapter.

Variables: **o031, o115v2, o118v2, o119, o164, o337, o338, o339, o361, o362, o363, o364**

Chapter 2: Socio-Economic Situation

A portrait of the socio-economic situation is drawn in the first part of the report. It helps the reader in assessing changes in the evolution of Palestinian perceptions on poverty and of their strategies for enduring the hardship and coping with the situation.

Variables: **poverty3, o040, o057, o095, o108, o109, o131, o156, o162, o163, o177, o194, o248.**

Chapter 3: Labour Market

The labour market and the employment status (including place of work, occupation and the effects of the Intifada on jobs) are under scrutiny in this chapter of the report.

Variables: **o008, o009, o011, o012, o013, o014, o017, o019, o063, o100, o157, o196, o197, o198, o199, o200, o201, o202, o204, o205, o206, o207, o208, o243, o244, o245, o246.**

Chapter 4: Education and Child Protection

Perceptions of children's priority needs, the ability to meet those needs and the issue of child protection are dealt with here, followed by a section on educational attainment and the main impediment to children's education. The violence against children in the Palestinian territory and children's work are also covered in the chapter.

Variables: **educ, o056v1, o056v2, o150, o140, o285, o286, o289, o291, o292, o293, o294, o299, o340, o341, o342, o343, o344, o345, o346, o347.**

Chapter 5: Health

Additional questions relate to health. They concern assistance received, priorities, access to basic health care and the perceptions on those services received. This chapter of the report contains a description and analysis of findings pertaining to health care needs, the source of health care services and their quality;

Variables: **o301, o090, o102.**

Chapter 6: Population Needs and Assistance Delivered

This chapter of the report covers both the assessment of the needs and priorities for assistance (as well as for communal infrastructure) expressed by the population and the perceptions of the Palestinians on the assistance received in general (its targeting; its nature; its value; its sources) as well as their satisfaction with it. It also examines the questions of employment assistance and food aid in the oPt.

Variables: o079, o080, o124, o174.
o024, o025, o026, o035, o036, o037, o038, o123, o251.
o074, o077, o131, o166.

Chapter 7 Refugees and UNRWA

An assessment of UNRWA's strategies during the past months, the type of assistance provided by the UN agency (in particular food aid, employment generation and financial assistance), the patterns of aid distribution and their effectiveness, as well as the satisfaction of its beneficiaries are the focus of this chapter.

Variables: o002, o263, o264, o265.

The sampling and data collection were carried out by the Palestinian Central Bureau of Statistics (PCBS) in the same way as for the previous polls (Bocco, Brunner and Rabah 2001a and 2001b; Bocco, Brunner, Daneels and Rabah 2001; Bocco, Brunner, Daneels, Lapeyre and Rabah 2002; Bocco, Brunner, Daneels, Al Hussein, Lapeyre and Rabah 2003; Brunner, Daneels, Al Hussein, Lapeyre and Rabah 2005).

A representative sample of 1,800 Palestinians, aged 18 and over, was interviewed face-to-face in late-May 2006 by a team of 100 fieldworkers supervised by PCBS. There was an over-sampling of 200 cases in the West Bank in the regions that were directly affected by the Separation Barrier. All the data in this report is weighted so as to be representative of the entire oPt. 1016 Palestinians were interviewed in the West Bank, 174 in Jerusalem and 610 in the Gaza Strip.

2. Methodology

All the questions of the poll that were analysed in this report were tested in their relationship with nine important independent variables and, although each part of this report concentrates on particular issues, they all refer to these variables. They are presented in the box at right.

Results were systematically tested for statistical significance at a 95% confidence level.⁴

On the <https://www.iuedpolls.org> web site, the interested reader will find the bivariate analysis between the dependent and the independent variables with their level of statistical significance and the detailed number of cases. For this reason, the numbers of cases (N) and significance levels have been omitted in this report.

Finally, whenever possible, consideration was given to data of our previous polls to analyse the evolution of the situation since the beginning of the second Intifada. The reader will also find the frequencies and analysis for the previous polls on the web site.

Presentation of the main independent variables

Palestinian society is rather unique because refugees constitute up to 50% of its population. The territory is split between areas that are not geographically contiguous, and this separation between the West Bank and the Gaza Strip renders coordination and economic cooperation very difficult. This situation enforces a set of legal and socio-economic structures that are not homogenous. The split between the

⁴ For categorical or ordinal dependent variables we used Chi-square tests, for interval variables one-way analysis of variance.

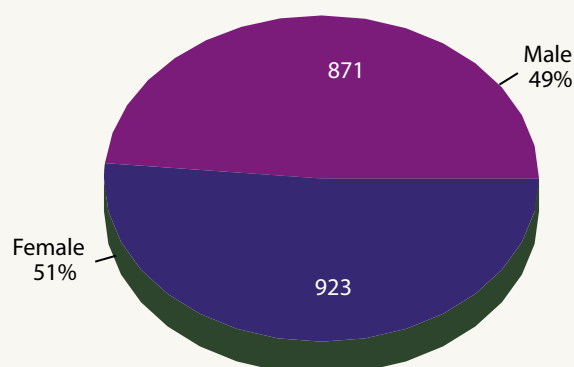
Objectives & Methodology

two areas and the forced detachment of Jerusalem from them further complicates efforts at obtaining a uniform system that is essential, indeed a prerequisite, for developing a viable and efficient economic, social and political system. In addition to the damaging consequences of the occupation, other social and internal barriers such as a very large population growth rate and a large number of dependent children supplement the political difficulties that characterise and influence the living conditions of Palestinians in the West Bank and the Gaza Strip.

Variable Name	Variable Code	Categories
Region of residence	o059	West Bank Jerusalem Gaza Strip
Area of residence	o060	City Village Refugee camp
Place of residence	place	West Bank refugee camps West Bank outside camps Gaza Strip refugee camps Gaza Strip outside camps East Jerusalem
Poverty	poverty3	Hardship cases Those below the poverty line Those above the poverty line
Refugee Status	o02	Refugees Non-refugees
Education	educ	Low Medium High
Age category	agec	18 – 24 years 25 – 34 years 35 – 49 years 50 years or more
Gender	o061	Male Female
Wall	wall	Directly affected by the wall Not directly affected by the wall

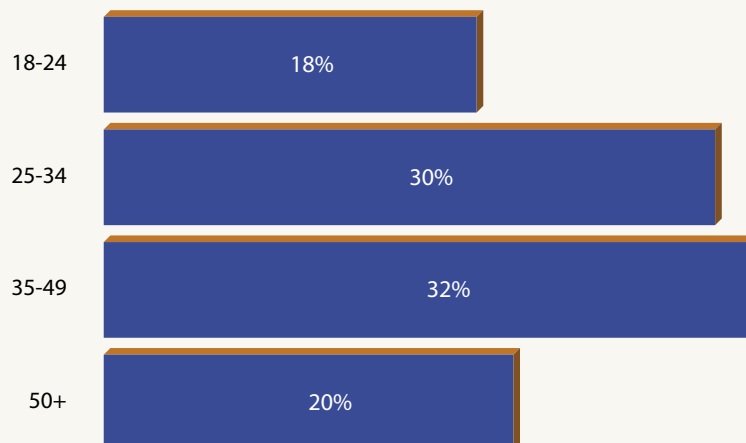
The use of nine explanatory variables for analysis in this report is intended to reflect the specificities of the Palestinian population.

Figure 1: Gender (o061)



In the oPt, among the total population, men and women have almost equal representation. Men comprise 49% of the sample for the tenth poll while 51% consists of women, percentages that are in line with the gender statistics in oPt.

Figure 2 : Age distribution (agec)

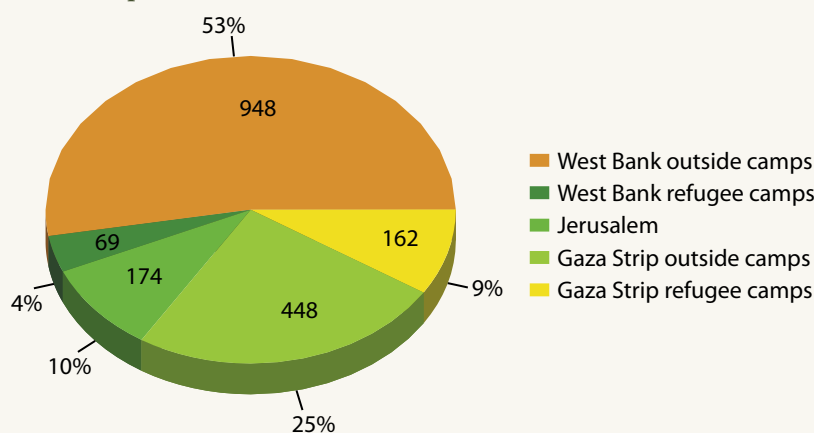


According to the Palestinian Central Bureau of Statistics, the projected population on the 1st July 2006 is 3,888,292 (2,444,478 in the West Bank and 1,443,814 in the Gaza Strip) of whom 46% are aged less than 15 years. The population has increased by 39% during the period 1997-2006. Those figures are available on PCBS website (<http://www.pcbs.go.ps>).

Roughly one-fifth of the respondents are aged 18 and over and younger than 25 years, while, respectively, 30% and 32% of our sample for this poll is composed of respondents who are aged between 25 to 34 and 35 to 49. 20% of the respondents are older than 44 years.

The Palestinians in the oPt are divided into three different areas: the West Bank, Jerusalem, and the Gaza Strip. Place of residence, as shown in figure 3, summarises these different geographical areas and divides the Gaza Strip and the West Bank according to refugee camps. Of the entire group, 53% of the respondents are from the West Bank non-camp areas while 4% reside in camps. 10% of the respondents of the current poll are from Jerusalem and 25% are from outside Gaza Strip refugee camps while 9% live in camps.

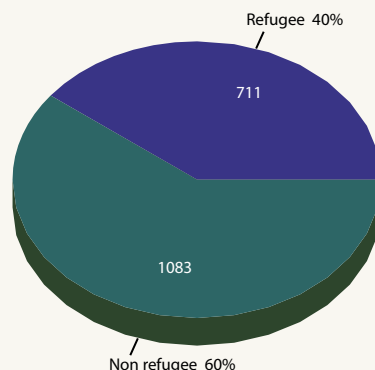
Figure: 3 Place of residence (place)



As mentioned above, according to the PCBS, more than two million Palestinians live in the West Bank and Jerusalem, and more than one million in the Gaza Strip. Refugees constitute approximately 26.5% of the West Bank population and over 65% of the population in the Gaza Strip. The number of refugees

residing in camps is estimated to be approximately a little more than half a million; about 176,000 live in 19 refugee camps in the West Bank, and about 478,000 reside in eight refugee camps in the Gaza Strip.

Figure 4 : Refugee status (o002)



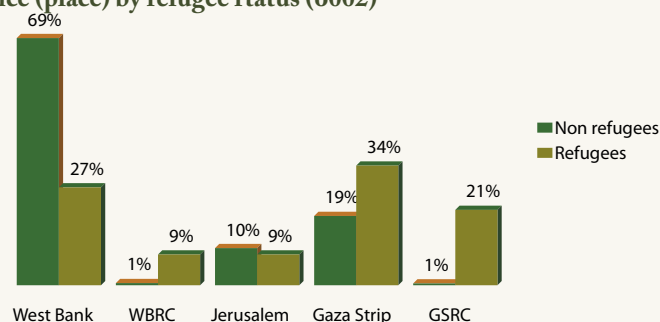
As shown in figure 4, of all respondents, 40% said that they are refugees or descendants of refugees: 60% stated that they are neither refugees nor descendants of a refugee family.

Throughout Palestine, the majority of refugees (registered and unregistered) live in the Gaza Strip (55%, see Figure 5). On the other hand, more than two-thirds (70%) of non-refugees live in the West Bank.

While 32% of all refugees live in camps, less than 1% of non-refugees do. One non-refugee respondent out of ten lives in Jerusalem; for refugees, this proportion is one out of six.

According to *area of residence*, a little more than one half of our sample (51%, N=366) live in cities, 31% (N=224) in refugee camps and 17% in villages (N=121).

Figure 5 Place of residence (place) by refugee status (o002)

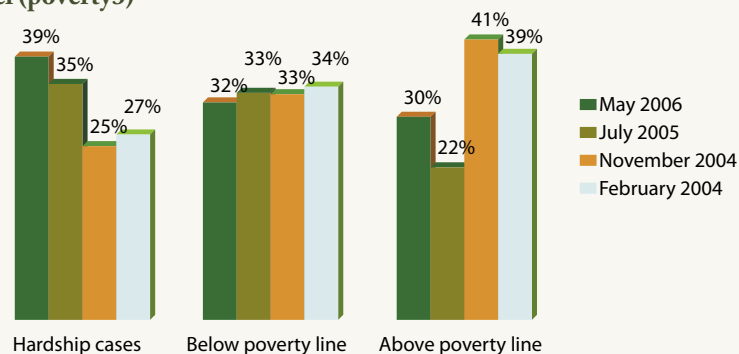


In the November 2001 report, we introduced the *poverty* variable to highlight the economic situation of Palestinian households. Since November 2002, this variable has not only taken into account the reported income of the respondents' household but also the number of adults and children in the household.

In the present report, we use the third revision of the poverty variable (poverty 3). It is based on the reported household income (o057) but takes into account the number of adults and children in the household. In November 2002, according to the PCBS figures, the average Palestinian household of two adults and four children was considered to be *below the poverty line* if its income was lower than NIS 1,600. If it was lower than NIS 500, they were considered to be *hardship cases*. Since the PCBS published a new poverty line at NIS 1,760 at the beginning of 2003 and at NIS 1,800 in 2004, we adjusted to this evolution. For PPP 10, we consider the standard household to be below the poverty line if its income is less than NIS 1800; for the sixth and seventh at 1,760; while for the 2002 and 2001 reports, the figures remained unchanged⁵ in the third and fourth revision.

⁵ It must be noted though that, for November 2001, we only recently calculated the value of poverty adjusted by household size. This is why it was not mentioned in that previous report.

Figure 6 Poverty level (poverty3)



The evolution of poverty in the oPt can be seen in figure 6. While the percentage of those below the poverty line remained almost perfectly stable from 2001 to 2006, the percentage of hardship cases has sharply increased since November 2002, to reach 39% of the population in May 2006 (+4% in comparison with the ninth poll).



Mobility & Security

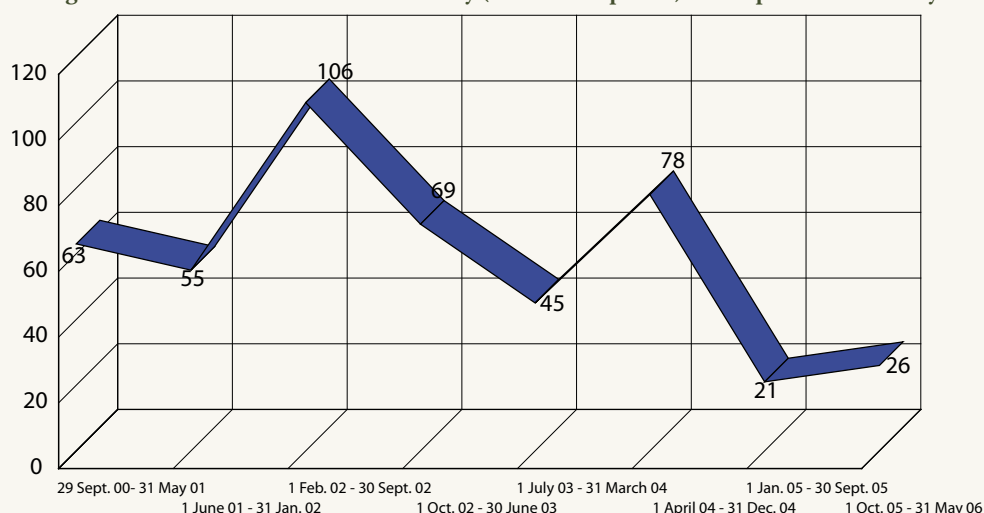
Jalal Al Hussein • Chiraz Skirhi

1.1 Intifada-Related Security Issues

The period of July 2005-May 2006 was marked by two major events. Firstly, Israel started implementing the first stages of Ariel Sharon's (its former Prime Minister) "disengagement plan." In Gaza, this consisted in the unilateral withdrawal of its military forces and the dismantlement of all the Jewish settlements; in the West Bank, four settlements in the north were dismantled (August and September 2005). Secondly, the victory of the radical Islamic Resistance Movement (Hamas) in the Palestinian legislative elections triggered a financial blockade by both the international community and Israel against the newly elected Hamas-led government. Drastic security measures such as the reinforcement of the oPt closure system (checkpoints, roadblocks, restrictions on permits to access Israel, etc.) were also taken by the Israeli authorities against the oPt population.

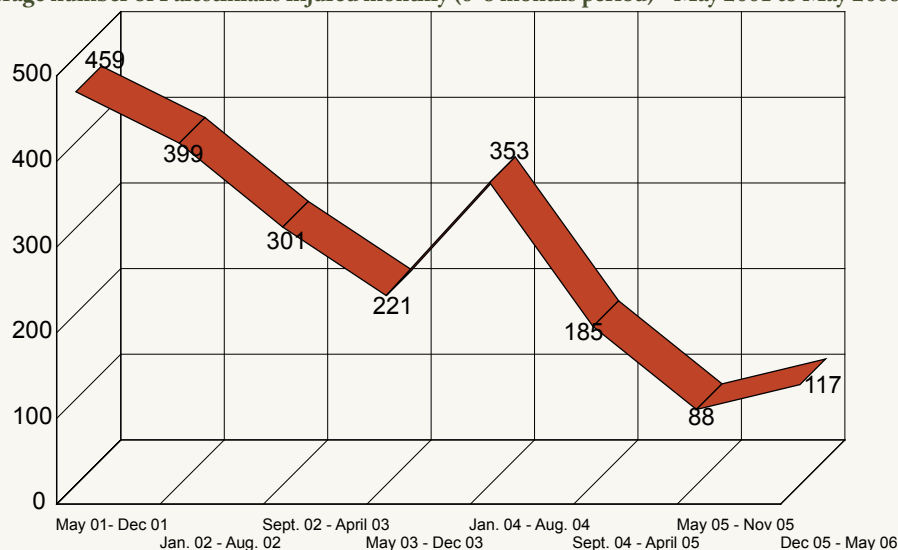
The number of dead and injured has slightly increased during the period under scrutiny. Figures 1.1 and 1.2 show that the average number of Palestinians killed monthly during the period under survey increased from 21 to 26, while the average number of Palestinians injured monthly increased from 88 to 117. However, these numbers are comparatively lower than those during the four first years of the Intifada.

Figure 1.1: Average number of Palestinians killed monthly (8-9 months period) - 29 Sept. 2000 to 31 May 2006



Source: www.palestinercs.org

Figure 1.2: Average number of Palestinians injured monthly (6-8 months period) - May 2001 to May 2006

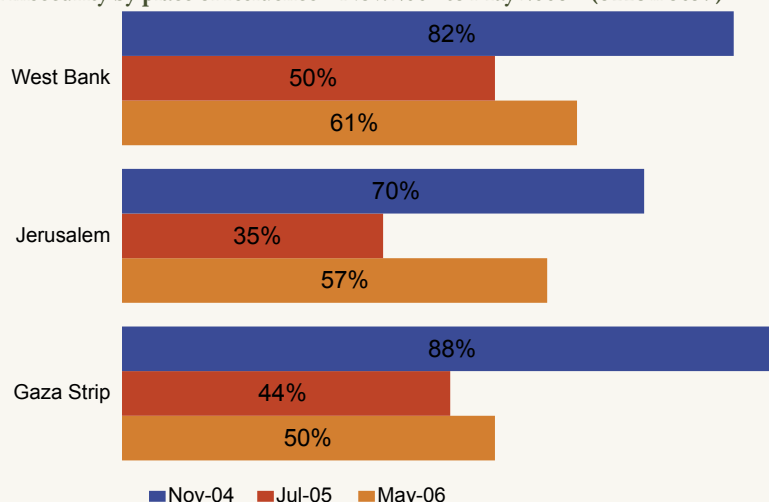


Source: www.palestinercs.org

1.1.1 Insecurity and its profile

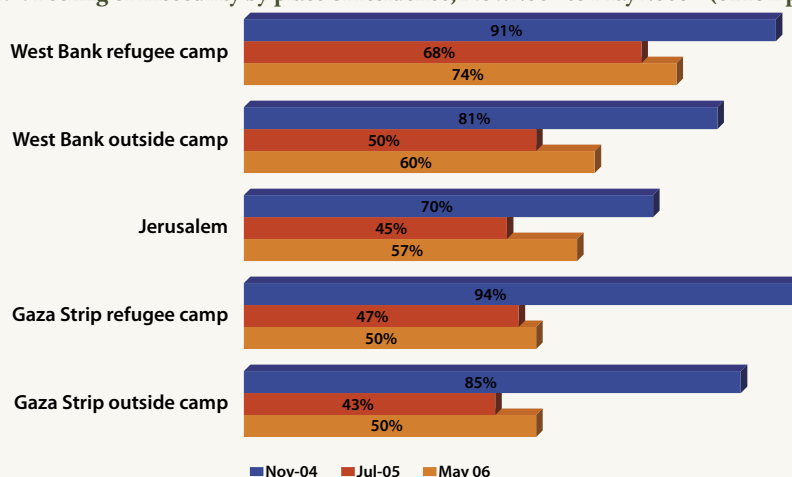
The percentage of Palestinians feeling insecure increased from 46% in July 2005 to 57% in May 2006. Levels of insecurity remained lower than in previous periods of the Intifada: 82% in November 2004 and 77% in February 1994. As indicated in Figure 1.3, the feeling of insecurity has increased in all regions of the oPt, but more particularly in the West Bank (+11%) and Jerusalem (+22%), where the ongoing construction of the Separation Barrier increased mobility restrictions (and concerns about the future of the region).

Figure 1.3: Feeling of insecurity by place of residence – Nov. 2004 to May 2006 – (o118 x o059)



More precisely, figure 1.4 reveals that the West Bank camps have remained the places of residence where the feeling of insecurity was the highest (74%), well ahead of West Bank areas outside camps (60%) and Jerusalem (57%). In the Gaza Strip, such feelings have declined dramatically, either in or outside the camps (50% in both places of residence).

Figure 1.4: Feeling of Insecurity by place of residence, Nov. 2004 to May 2006 - (o118 x place)

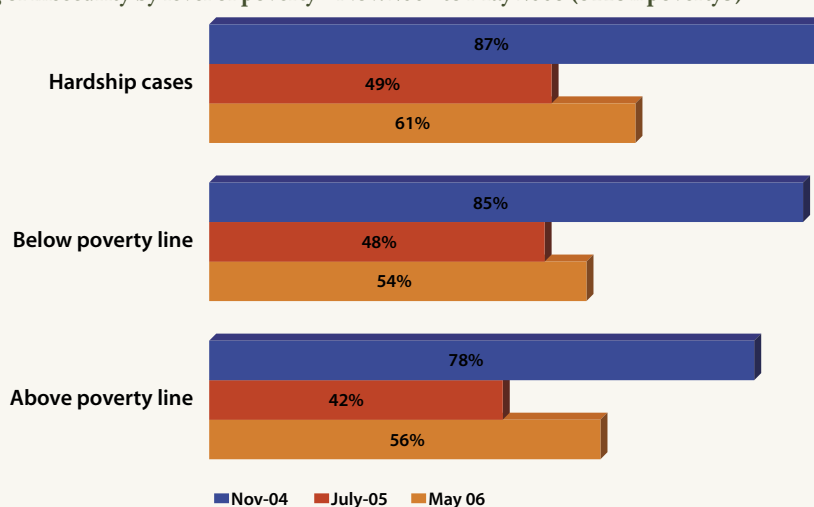


Our variable, “feeling of security”, is rather general since, as we will see below, it covers many different aspects of the problems the oPt population face within the context of the Intifada: the presence of settlements, Israeli military occupation, poor socioeconomic prospects, inter-Palestinian feuds, etc. Nevertheless, crossing this variable with our main explanatory (independent) variables enables us to establish a rough profile of insecurity among the oPt population from social and economic perspectives.

People feeling insecure in the oPt comprise:

- *Men rather than women*: 55% of women say that they feel insecure compared to 59% of men;
- *The old rather old than the young*: 49% of those between 18-24 years of age feel insecure compared with 65% of those aged 50 and over;
- *The poorly educated rather than the educated*: 53% of Palestinians with a high educational level feel insecure compared with 60% with a low educational level.
- *The worse-off rather than the better-off*: Heads of households identified as hardship cases (i.e. earning below 900 NIS/month for a couple with four children¹) feel more insecure than those below the poverty line (i.e., earning between 900 NIS/month and 1800 NIS/month) and those above it (61%, 56% and 54% respectively). However, as seen in figure 1.5, the increase in the feeling of insecurity from July 2005 to May 2006 grew comparatively more amongst respondents above the poverty line (+14%, versus +12% of the hardship cases).

Figure 1.5: Feeling of insecurity by level of poverty - Nov. 2004 to May 2006 (o118 x poverty3)



1.1.2 Reasons for feeling insecure

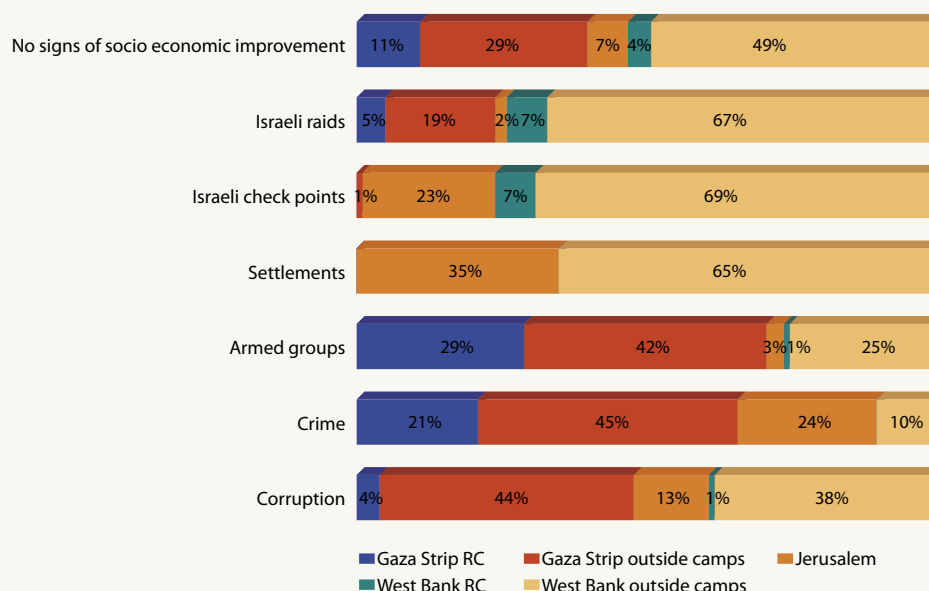
A large majority of Palestinians continue to perceive lack of socio-economic improvement (33%) and Israeli raids (16%) as the main identified threats to their security. Presence of Israeli checkpoints (8%) and of settlements (2%), as well as internal causes of instability such as local armed groups (4%), corruption (4%) and crime (2%) played a minor impact in the overall oPt context

However, the situation differed markedly amongst oPt regions. **West Bankers** emphasised factors directly linked to the Israeli occupation, such as Israeli raids (74%), checkpoints (76%) and settlements (65%), as opposed to 24%, 1% and 0% of the Gazans, respectively. As a result of Israeli disengagement from Gaza and the collapse of the PA security apparatus, **Gazans** focused much more on internal insecurity, such as the activities of local armed groups (71% as against 26% in the West Bank), corruption (71% as against 26% in the West Bank), corruption (49% as against 39% in the West Bank) and crime (66% as against 10% in the West Bank). **Jerusalemmites'** opinions about the causes of their feelings of insecurity were less marked than elsewhere. Whereas settlements, Israeli checkpoints and crime came out higher as main reasons for insecurity amongst them (35%, 23% and 24% respectively), economic stagnation was less underscored than in the West Bank and Gaza (7% as opposed to 53% in the West Bank and 41% in Gaza).

¹ This definition of levels of poverty is based on the official definition by the Palestine Central Bureau of Statistics (PCBS).

Figure 1.6 indicates that, in terms of place of residence, the sense of insecurity related to economic instability and to Israeli occupation (including Israeli raids, settlements, and checkpoints) affected the West Bank outside camps much more than any other place of residence. Besides, in the Gaza Strip, Palestinians living outside camps were much more affected by the identified causes of insecurity than the camp dwellers.

Figure 1.6: Reasons for insecurity by place of residence- May 2006 (o119v3 x place of residence)

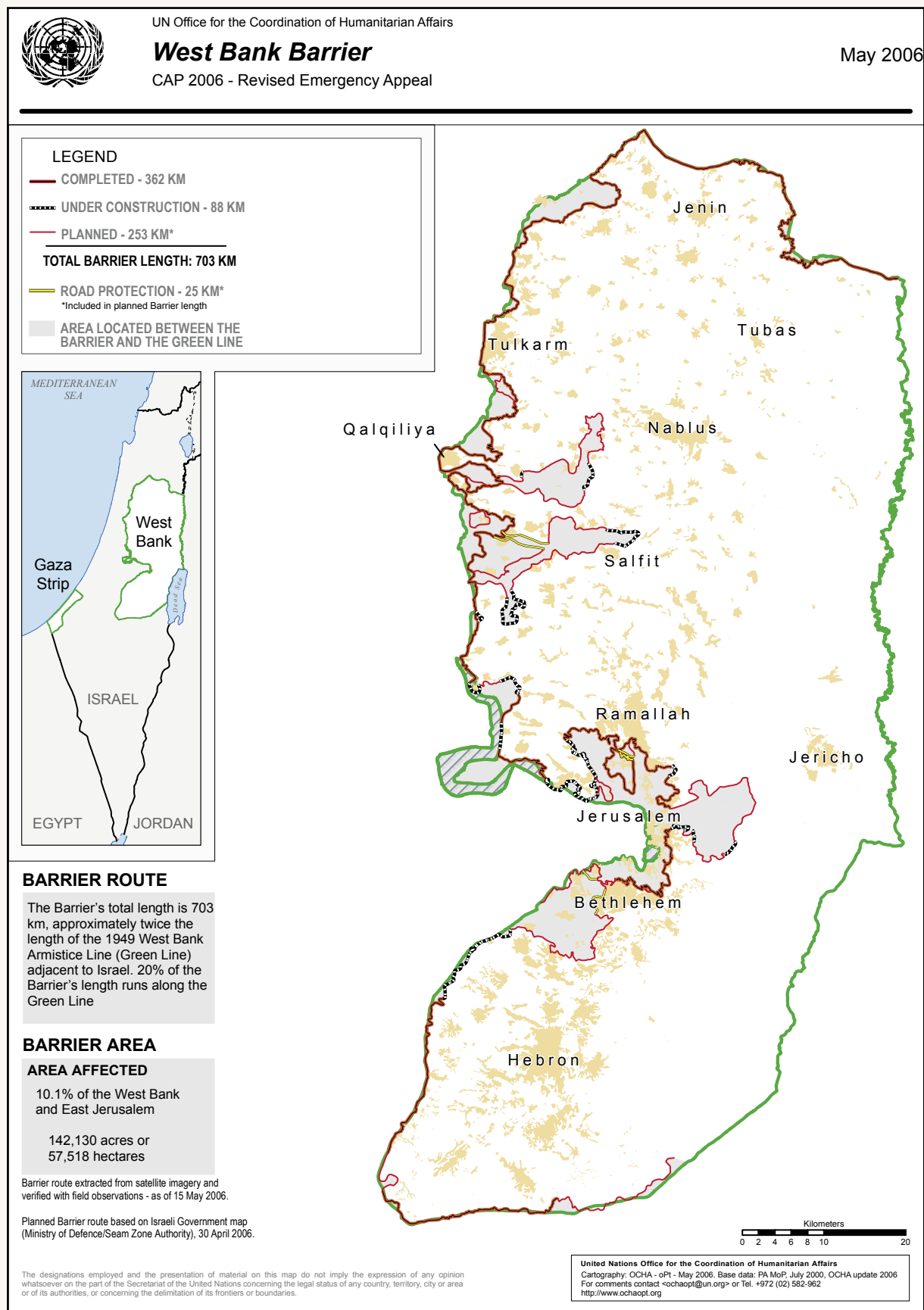


1.1.3 Internal mobility status of the Palestinians

As several reports issued by the main stakeholders indicate, restrictions on the internal mobility of the Palestinians - a root cause of the massive increases in poverty and unemployment rates amongst Palestinians since the start of the Intifada - have increased in the West Bank during the period under survey. According to OCHA, the number of physical obstacles to internal mobility in the West Bank has increased from 376 in August 2005 to 515 in mid-May 2006 (OCHA – 31 May 2006). Moreover, UN agencies have also faced mobility problems. In the case of UNRWA, for example, Israeli authorities have imposed additional mobility restrictions on its staff crossing into Jerusalem from the West Bank, thus seriously hampering the Agency's humanitarian operations (www.electronicintifada.net/v2/article4681.shtml). In comparison, reports indicated that the internal mobility situation in the Gaza Strip had improved as a result of the dismantlement of the Jewish settlements and the disengagement of the Israeli occupation forces in August-September 2005. External mobility (i.e., outside the Gaza Strip) remained a crucial problem.²

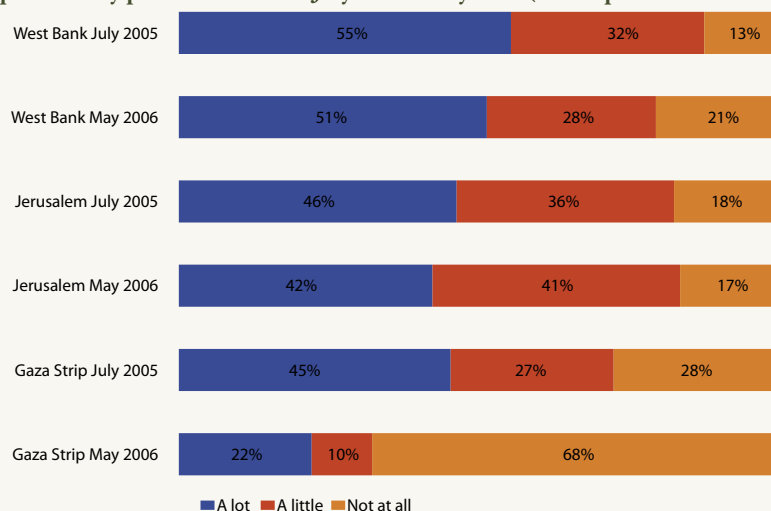
² However, external mobility restrictions, particularly towards the Israeli job market have been heightened. The number of Palestinian workers being allowed to enter Israel has decreased from 5,000 in April 2005 to 3,000 in June 2006. As an example, as of 2 May 2006, Karni crossing has so far been closed 47% of year 2006 (i.e., 57 days), as against 18% in 2005 and 19% in 2004, further restricting the flow of Palestinians labourers to Israeli markets and the passage of commercial goods and basic supplies across borders (UNRWA Revised Emergency Appeal – May 2006).

Map 1.1: West Bank Closures, May 2006



These observations about the mobility status of the oPt Palestinians are partially confirmed by the findings of our survey. As shown in figure 7, the percentage of people in Gaza who have had mobility problems decreased by 40%, from 72% in July 2005 to 32% in May 2006. In particular, the percentage of those Gazans who experienced acute problems dwindled by half during the period under survey, from 45% to 22%. Conversely, no significant mobility improvement was noticed in Jerusalem, a region that has been affected by the reinforcement of closures measures and the continuing construction of the Separation Barrier (see below): percentages of Jerusalemites experiencing mobility problems were nearly as high in May 2006 as in July 2005. However, our survey did not indicate a worsening of the mobility situation in the West Bank, which may be due to the fact that the adverse consequences of the reactivation of Israel's closure policy had not yet impacted on the West Bankers at the time of the interviews (end of April-early May). The survey found that a slight improvement had occurred in the West Bank, but to a lesser extent than in Gaza: 79% of West Bankers had mobility problems (51% with acute problems) in May 2006 as against 86% in July 2005 (55% with acute problems). More specifically, in the West Bank, inhabitants of villages were more affected by mobility problems (83% of them, with 54% of them having had a lot of problems) than city and camp dwellers (76% and 77%, respectively, with 53% and 48% respectively having experienced a lot of problems).³

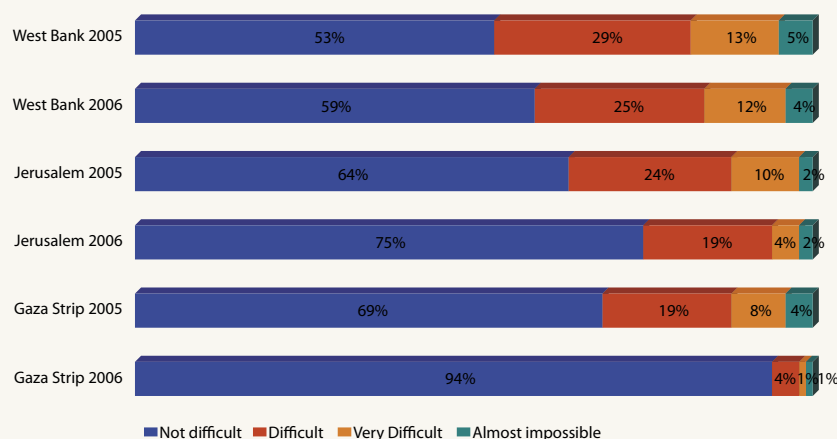
Figure 1.7: Mobility problems by place of residence. July 2005 - May 2006 (n031 x place of residence)



These mixed trends have nevertheless had positive socio-economic repercussions. Overall, 29% of the oPt population had problems in reaching their place of work in May 2006, compared to 40% in July 2005. Figure 1.8 shows that work-related mobility has improved in all places of residence including those in the West Bank, where the percentage of respondents having had problems in reaching their place of work slightly decreased from 47% in July 2005 to 41% in May 2006 and in Jerusalem, where the percentage decreased from 36% in July 2005 to 24% in May 2006. One can thus infer that the mobility problems (outlined above) faced by the Jerusalemites were more linked to inability or problems in reaching relatives than in accessing places of work. In line with the overall mobility trend, improvement related to access to work was most visible in the Gaza Strip, where the ease of access to places of work reached 94% in May 2006. The remaining 6% are not to be underestimated: the percentage represents Gazans normally working in Israel who have experienced the total closure of Erez crossing since 12 March 2006.

³ From a refugee status perspective, as explained in chapter 7 (section 7.1.2) of this report, refugees have been less affected by mobility restrictions than non-refugees, as 47% of them have had no problems in this regard as against only 30% of the non-refugees.

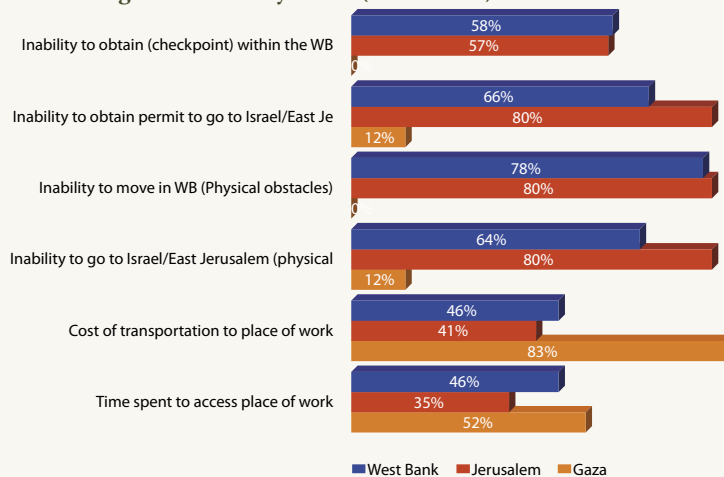
Figure 1.8: Easiness to access place of work by region of residence, July 2005 - May 2006



Given the sharp deterioration of the oPt economy that came about during the period under survey, such percentages could not but increase the problems met by Palestinian businesses. Between July 2005 and May 2006, the percentage of Palestinians throughout the oPt declaring that their businesses had suffered from problems in reaching their places of work increased from 11% to 13%.⁴

Looking more specifically at the causes of the problems to reach place of work, figure 1.9. indicates that in the West Bank and Jerusalem, the main causes of difficulties result from physical obstacles preventing moving within the West Bank (80% and 78%, respectively) or going to Israel/East Jerusalem (80% and 64%, respectively) as well as inability to obtain permits to go to Israel/East Jerusalem. In Gaza, costs of transportation (83% of the respondents) and amount of time spent to access places of work are much more prevalent problems.

Figure 1.9: Causes of difficulties to go to work - May 2006 - (o361 x o059)



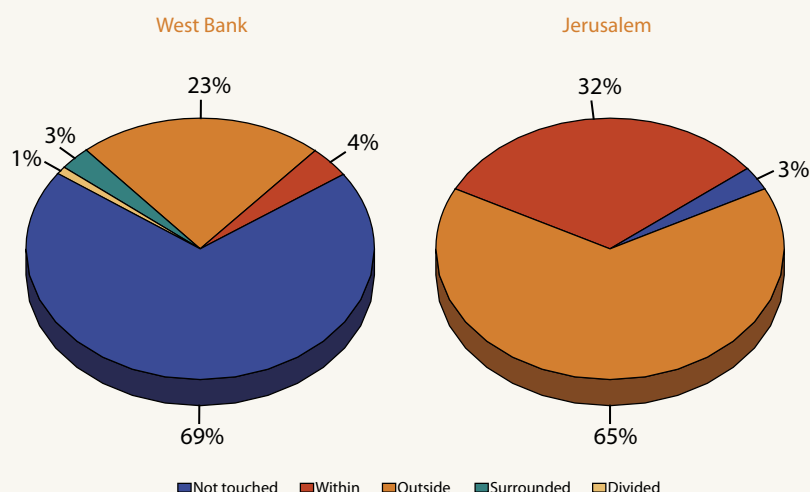
1.1.4 The Separation Barrier and its impact on mobility and property

The construction of the Separation Barrier in Jerusalem and the West Bank regions was initiated in June 2002 following a route that has since then been changed in February 2005 and April 2006. Once completed, the Barrier will be 703 kilometres long of which 135 kilometres will be along the Green Line (OCHA, March 2005). As of May 2006, 362 kilometres of the Barrier had been completed and were operational, 88 kilometres were under construction and 253 kilometres were planned (OCHA, 31 May 2006).

⁴ For this variable “Business suffered due to problems to reach the place of work”, regional differences are statistically insignificant.

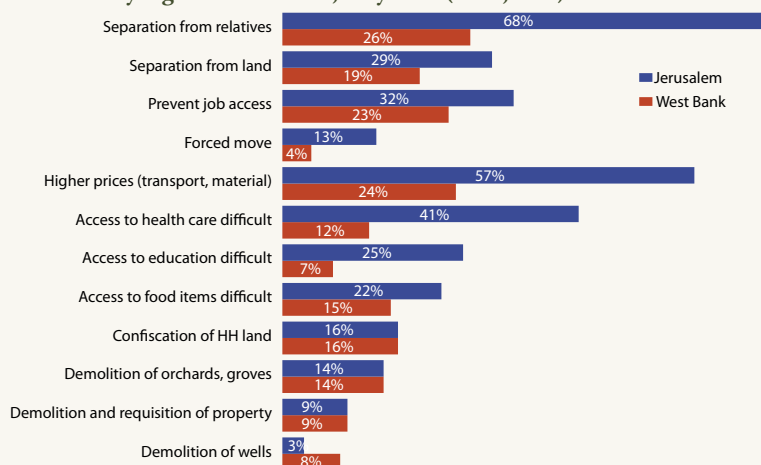
West Bankers and Jerusalemites were situated differently in relation to the Separation Barrier. In the West Bank, 30% of the respondents said they were affected (“touched”) by the Separation Barrier. Amongst those, 4% were living in locations between the Barrier and the Green Line (“within the Barrier”); 23% were living on the West Bank’s side of the Barrier (“outside the Barrier”); 3% were living in places surrounded by Barrier (i.e. in the Qalqilya region), and 1% were living in locations divided by it (“divided”). In Jerusalem, given the population’s proximity of the Barrier, the percentage of people affected by it was much higher: 97%, of whom 32% lived “within” the Barrier, and 65% “outside” the Barrier.

Figure 1.10. Location of West Bankers and Jerusalemites/Separation Barrier - May 2006 Barrier



Previous surveys highlighted a trend towards a decline of the Barrier’s direct impact on the Jerusalem and West Bank populations (see *Palestinians’ Public Perceptions Report IX*, part 1). On the contrary, during the period under survey, the side-effects of the construction of the Barrier have increased (especially in Jerusalem), either with regard to separation from relatives (from 17% to 26% of respondents in the West Bank and 65% to 68% Jerusalem); separation from land (8% to 19% in the West Bank and 11% to 29% in Jerusalem); and higher prices of material and transports (22% to 24% in the West Bank and 32% to 57% in Jerusalem).⁵ As shown on Figure 1.11, except for agricultural damage (demolition of wells and of property, confiscation of land, demolition of orchards and citrus and olive groves etc.), the Barrier affected the Jerusalemites comparatively more than the West Bankers. For both categories, separation from relatives remained the main negative impact of the Wall’s construction.

Figure 1.11: Impacts of the Wall by region of residence, May 2006 (o164;o338) x o59



⁵ As an exception, fewer Jerusalemites were forced to move as a result of the Barrier (from 24% to 13% as against 2% to 4% of the West Bankers).

Finally, refugees have been less concerned by the Barrier and its construction than non-refugees.⁶ Whereas no statistical correlation could be established between refugee status and access problems due to the existence of the Barrier (access to place of work, to relatives, to health and education facilities...), non-refugees were clearly more affected by a various types of damage to property such as the demolition of orchards and groves (9% of refugees as against 16% of non-refugees), confiscation of land (8% of refugees as against 18% of non-refugees), and requisition of property (3% of refugees as against 11% of non-refugees). More importantly, 16% of refugees said to have suffered from being separated from their land properties as compared with 22% of non-refugees.

BIBLIOGRAPHY

WEBSITES

www.reliefweb.com

www.ochaopt.org

<http://electronicintifada.net/v2/article4681.shtml>

SOURCES

Jalal Al Hussein, Riccardo Bocco, Matthias Brunner, Luigi De Martino, Isabelle Daneels, *Palestinian Public Perceptions, Report IX*, IUED, 2005.

OCHA, *Revised Emergency Appeal*, 31 May 2006

OCHA, *Territorial Fragmentation of the West Bank*, May 2006

UNRWA, *UNRWA Revised Emergency Appeal*, May 2006

⁶ Refugees are much less numerous in areas crossed by the Barrier than non-refugees: 18% of refugees as opposed to 32% of non-refugees)



Socio-Economic Situation

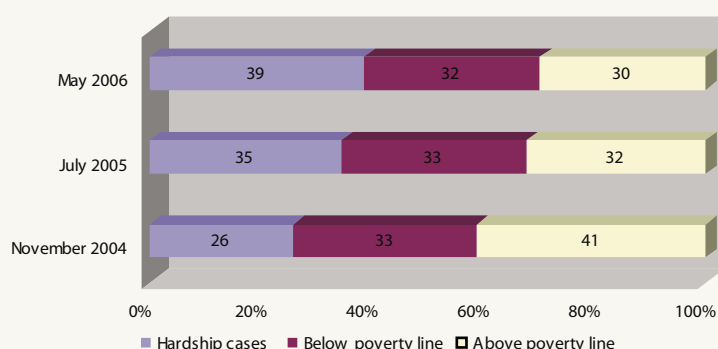
Prof. Frédéric Lapeyre • Pauline Plagnat

2.1 Evolution of poverty

Poverty has increased since last year. The overall poverty rate reached 70% in May 2006 as compared to 68% in July 2005. Poverty levels hit 71% in the West Bank, 35% in Jerusalem and 79% in the Gaza Strip. Those results show the same dramatic and deteriorating socio-economic situation as the last reports from the World Bank and PCBS. Indeed, PCBS estimated the poverty rate for the second quarter 2006 at 66.8% of households if income data were used, i.e., about 70.3% of population (PCBS, 2006). Moreover, the World Bank forecasts in its scenario 2 related to the Suspension of Clearance Revenue Transfers, Trade and Labour Restrictions, that this situation will result in a dramatic contraction in 2006 of real GDP per capita (minus 21%). Under this scenario, unemployment jumps to 35% in 2006, with poverty levels reaching 62% (World Bank, 2006). The situation could be even worse in its scenario 4 - Suspension of Clearance Revenue Transfers, Trade and Labour Restrictions, and Reduced Aid Flows - where real GDP per capita declines by 27% in 2006. Under this scenario, unemployment hits 40% and poverty 67% in 2006.¹

Extreme poverty also keeps increasing, affecting 38% of the overall population. The rates of extreme poverty are 33% in the West Bank, 54% in the Gaza Strip and 17% in Jerusalem. These figures are in line with the last set of 2005 PCBS data related to deep poverty according to household monthly income which recorded 34,5% in the West Bank and 51,6% in the Gaza Strip (PCBS, 2006) being in this situation.²

Figure 2.1: Evolution of Poverty, 2004-2006



In general, the refugee camps are the areas most affected by poverty. The results of our survey show a sharp deterioration in the living conditions of refugee-camp inhabitants, as extreme poverty increased from 39% in July 2005 to 52% in May 2006. In other words, more than half of the respondents living in refugee camps were considered to be in extreme poverty: 45% in the West Bank refugee camps and 55% in the Gaza refugee camps (see figure 2.2). Refugee status is also a key element in explaining poverty. Indeed, the rate of extreme poverty among non-refugee respondents was 34% in May 2006 while it reached 45% amongst registered refugees (see figure 2.3). Chapter 7 of the present report discusses with more details the situation of registered refugees in the oPt.

From a geographical perspective, the rate of extreme poverty increased sharply almost everywhere. Even Jerusalem has begun to face a severe deterioration in living conditions. If only 5% of the respondents from Jerusalem were facing extreme poverty in July 2005, this rate climbed to 17% of the Jerusalem inhabitants in May 2006. In summary, the deterioration in living conditions affected everyone, but especially the poor who become even poorer.

¹ World Bank, *Economic Update and Potential Outlook*, March 15, 2006, *West Bank and Gaza Economic Update and Potential Outlook*.

² Palestinian Central Bureau of Statistics, *Poverty in the Palestinian Territory*, 2005

Figure 2.2: Level of poverty according to place of residence, 2004-2006

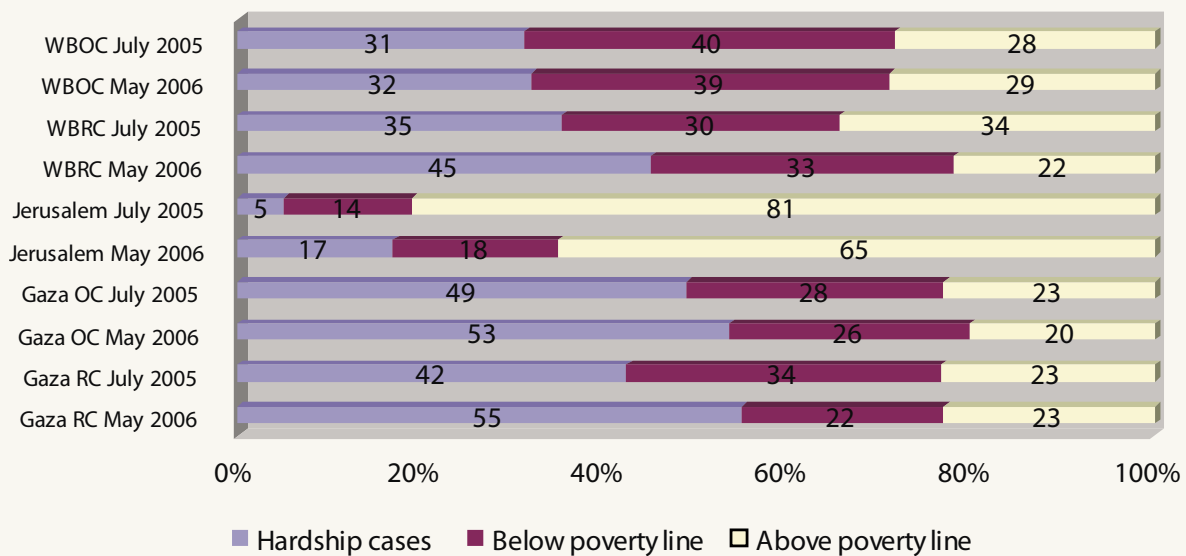
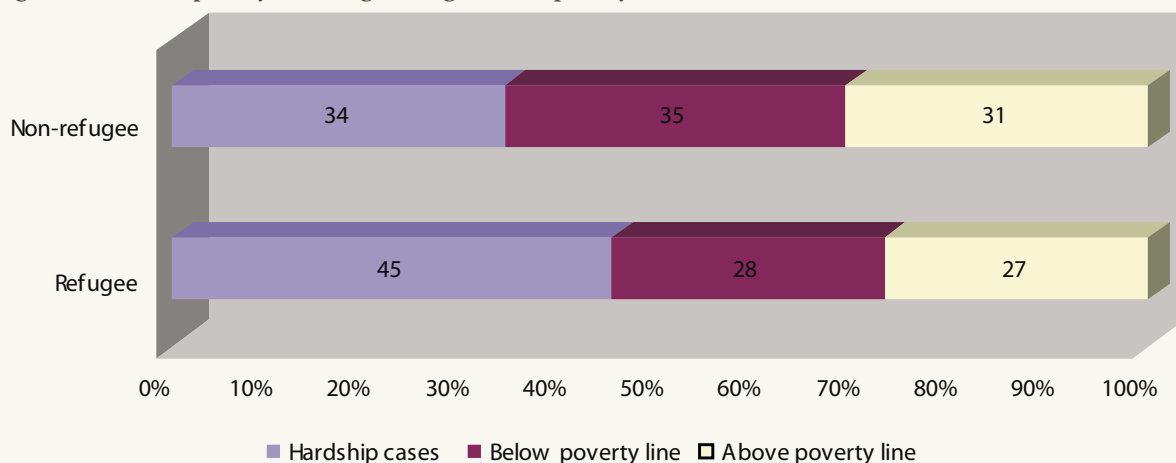
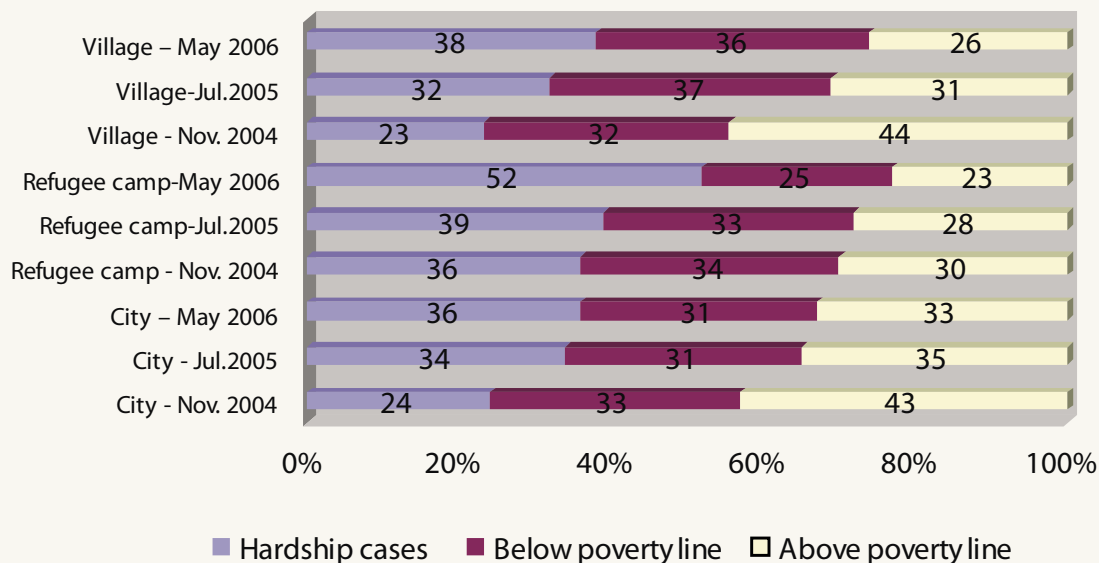


Figure 2.3: Level of poverty according to refugee status (poverty3*o002)



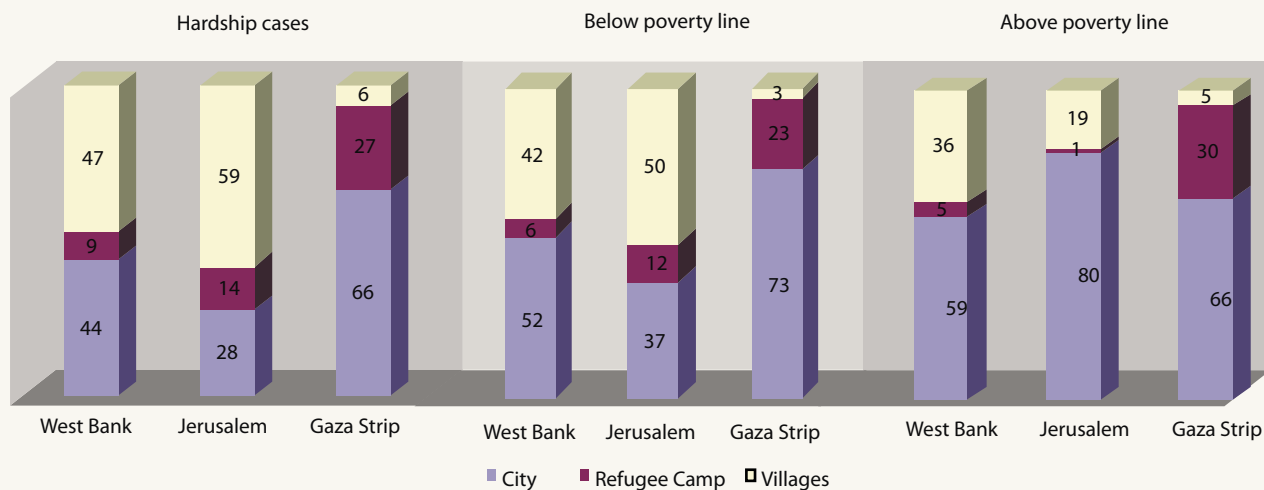
Another striking result is the sharp deterioration of the situation in the villages. In 2004, 56% of the respondents were living in poverty: there were 69% in 2005 and 74% in May 2006. Even though we perceived a rise in the level of poverty in each region of residence, the sharpest decline in living conditions occurred in villages. In 2004, 23% of the respondents from villages lived in extreme poverty, while there were 38% in May 2006. It should also be underlined that the situation in the refugee camps also worsened significantly. If the rate of poverty remained about the same (77% of the population in 2006 against 72% in 2005), many of the poor are now facing extreme poverty (from 39% in 2005 to 52% in May 2006).

Figure 2.4: Level of poverty according to area of residence, 2004-2006



On a deeper analysis, checking the location of the poorest, results indicate that in the West Bank or in Jerusalem, a great number of the extremely poor live in villages (47% of them in the West Bank and 59% in Jerusalem), while such is not the case in the Gaza Strip, where 66% of them live in the city. Regarding those living below the poverty line (excluding the poorest), 73% of the respondents from the Gaza Strip are located in cities while they number 50% in Jerusalem and 42% in the West Bank.

Figure 2.5: Location of the respondents according to poverty level and area of residence



Regarding those living above the poverty line, the results show that a clear majority were living in cities; in Jerusalem, 80% of them live in the city, in the Gaza Strip 66% and in the West Bank 59 %.

Figure 2.6: Area crossed by the Separation Barrier and poverty level

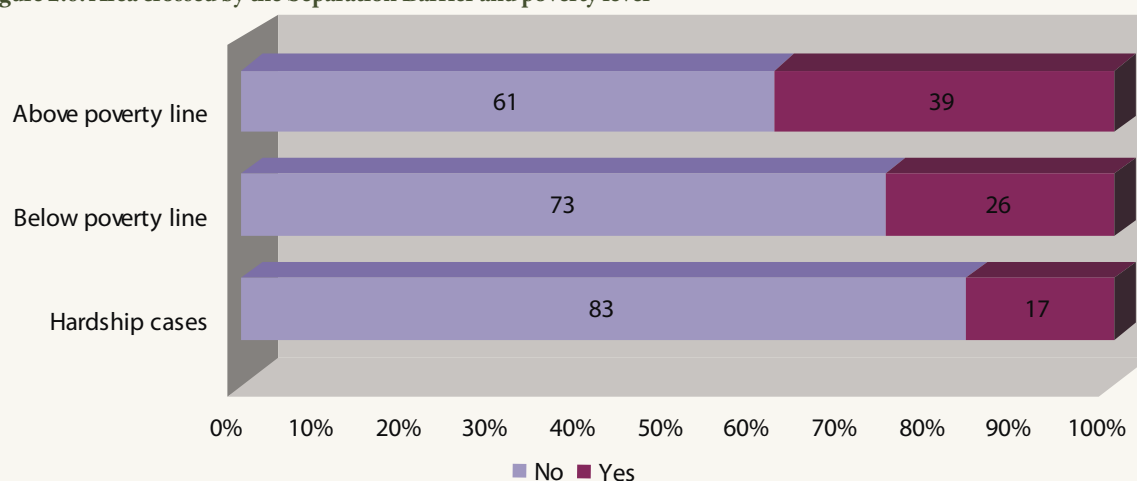


Figure 2.6 indicates that the Separation Barrier has little influence on the level of poverty: 17% of the poorest lived in an area crossed by the Barrier, 39% of those living above the poverty line and 26% of those living below the poverty line.

2.2 Poverty and income evolution

According to the May 2006 results, 44% of the respondents felt that their income has decreased in the last 6 months while only 20% reported this feeling in July 2005. The poorest suffered the most, as 55% of them have perceived a decreased income as compared to 28% last year. 39.4% of the poor have perceived a decline of their income (as compared to 19% last year) and those above the poverty line have also felt that they suffered from an income deterioration (34.4% in May 2006 as compared to 11.7% in 2005).

Figure 2.7: Income evolution, 2005-2006

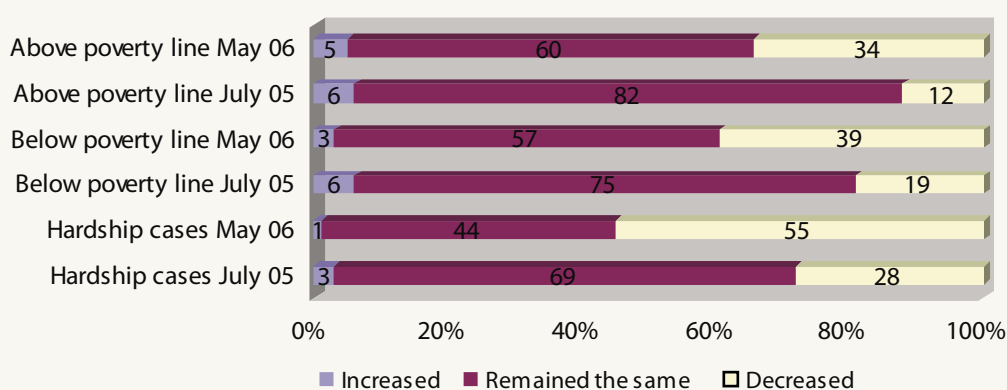
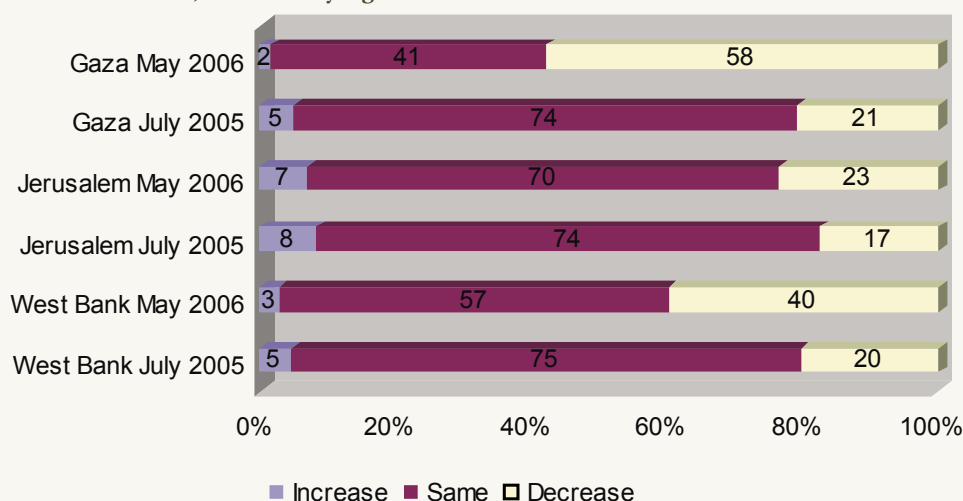


Figure 2.7.1: Income evolution, 2005-2006 by region of residence



It is in the Gaza Strip that there was the strongest feeling of an income decline (58% of the respondents). In July 2005, 74% felt that their income had remained the same, while in May 2006, 41% of them felt the same. The same trend was noticeable in the West Bank where 40% of the respondents felt that their income had decreased in the last six months.

The first cause of this reduction seems to be attributable to the deterioration in the labour market, influenced by labour restrictions resulting from the conflict. 61% of the poorest declared that their income decline was due to job loss or working-hour loss, while 41% of those living above the poverty line stressed it; those above the poverty line mainly stressed other reasons.

As we can see in figures 2.8 and 2.9, job loss and working-hour loss are the two main reasons given by the respondents to explain their income deterioration. From a geographical perspective, 44% of the respondents from cities or refugee camps blamed some changes in their employment status as the main cause of their income decline. This rate was even higher in villages, where 54% of the respondents pointed to job loss and working-hour loss as the main reason for their income deterioration

Figure 2.8: First cause of income decrease by poverty level

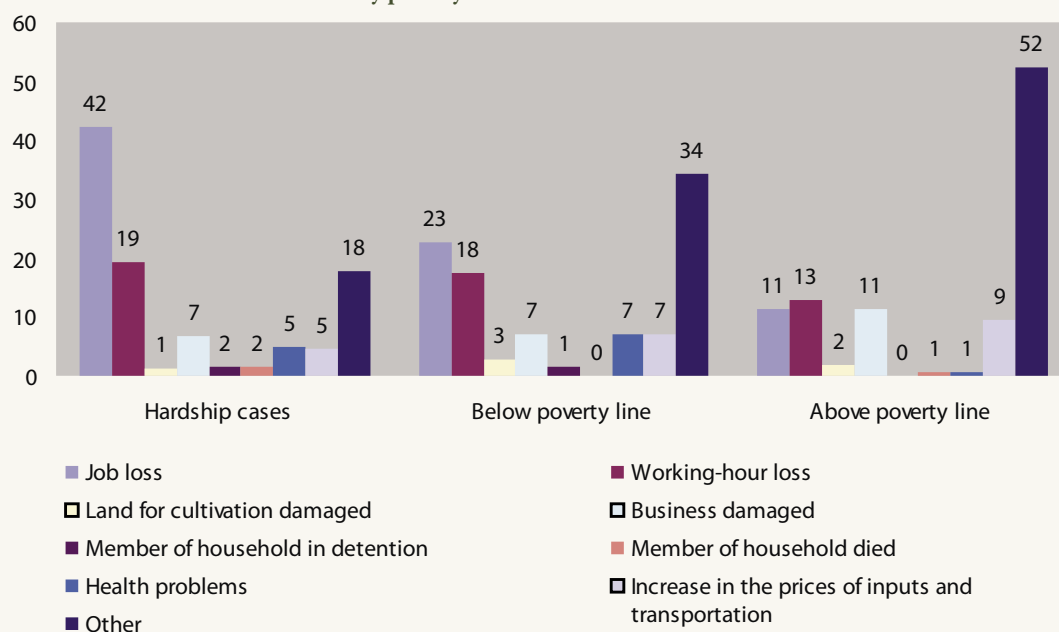
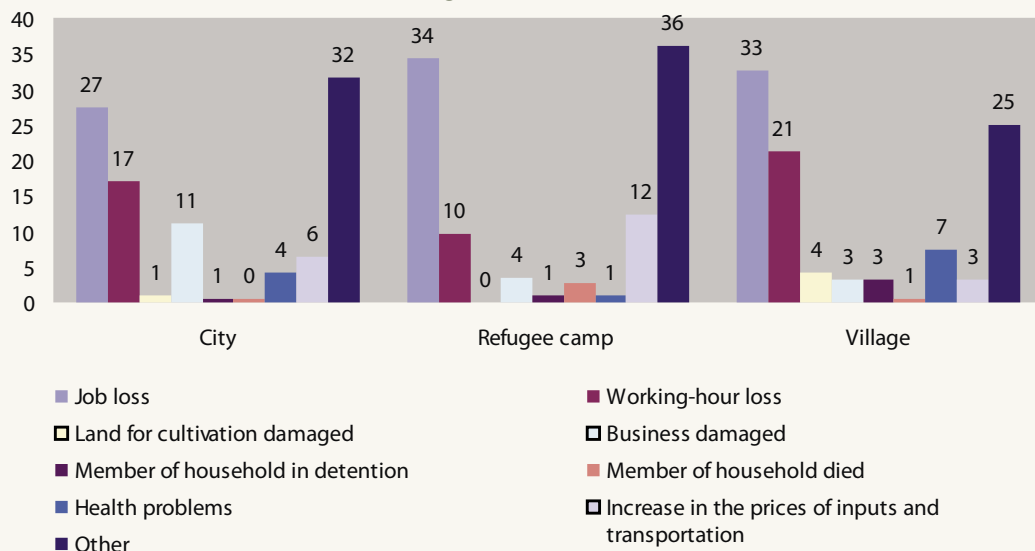
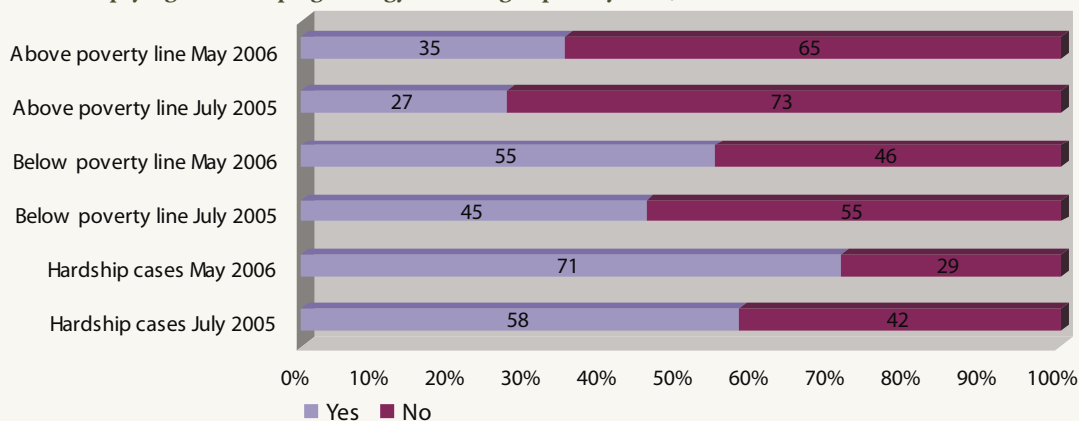


Figure 2.9: First cause of income decreased according to area of residence, 2006



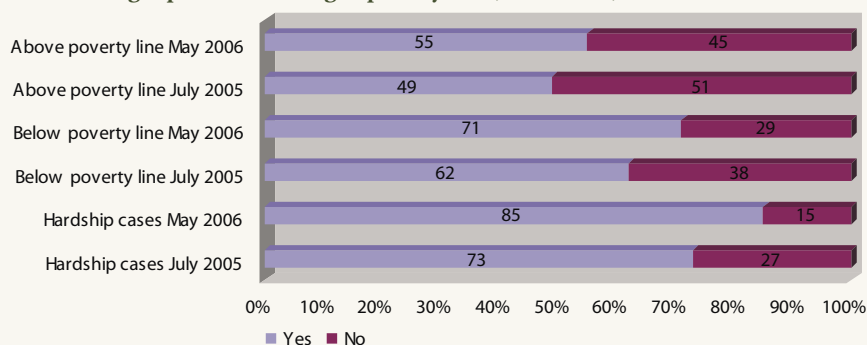
2.3. Coping strategies

Figure 2.10: Not paying bills as coping strategy according to poverty level, 2005-2006



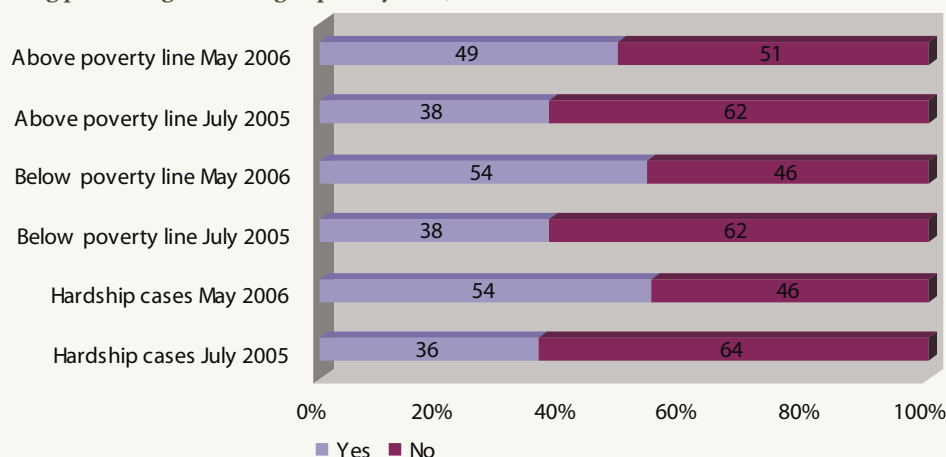
The results are very informative about coping strategies implemented by individuals and households in face of the deterioration in the socio-economic situation. Generally, in May 2006, more people were not paying bills anymore compared to July 2005. 71% of the poorest can not pay bills anymore (they numbered 57% in July 2005) and more than half of the poor are in the same situation. Even those who live above the poverty line had to cope with the deterioration in the economic situation by using this strategy (35% of them in May 2006 as compared to 27% in July 2005).

Figure 2.11: Reducing expenses according to poverty level, 2005-2006,



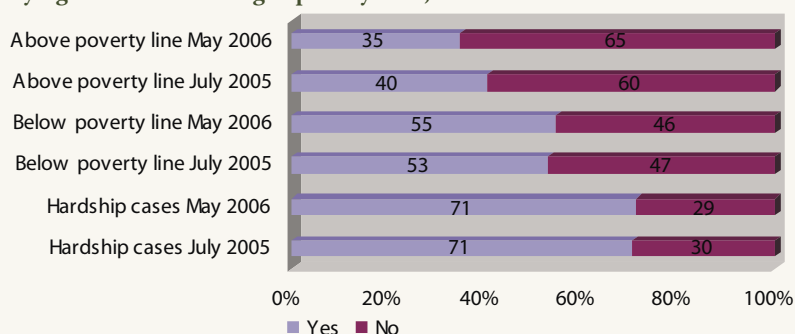
The same analysis can be made regarding the strategy of cutting expenses, the first coping strategy to be used by households when they face a sharp deterioration in their income (84% of the poorest have had to cut their expenses, 71% of the poor and 55% of those living above the poverty line).

Figure 2.12: Using past savings according to poverty level, 2005-2006



Moreover, more than 70% of the poorest had to use credit in order to sustain themselves. In general, more respondents had to increase their use of past savings to compensate for the deterioration in their living conditions (37% in 2005 and 52% today).

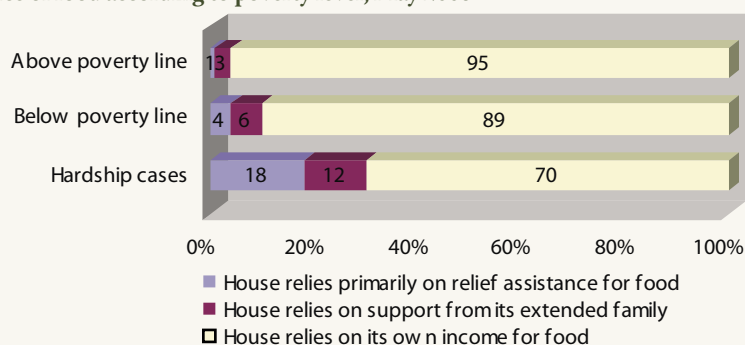
Figure 2.13: Buying on credit according to poverty level, 2005



2.4 Food conditions

The results of the present survey indicate that the poorest always have more difficulty in adequately feeding themselves through the use of their own resources: 18% of them rely on food assistance (as compared to 13% in July 2005) and only 70% rely on their own resources (as compared to 77% in 2005).

Figure 2.14: Main source of food according to poverty level, May 2006



The Separation Barrier makes it more difficult for the poor to obtain some food items: 16.5% of respondents confirm that the Barrier and the fence make it more difficult or even impossible to obtain food.

2.5 Ability to keep up

Figure 2.15: Ability to keep up, 2005-2006

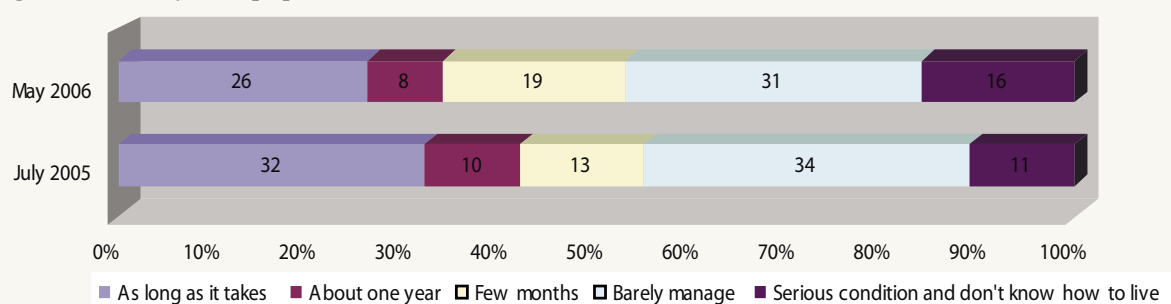
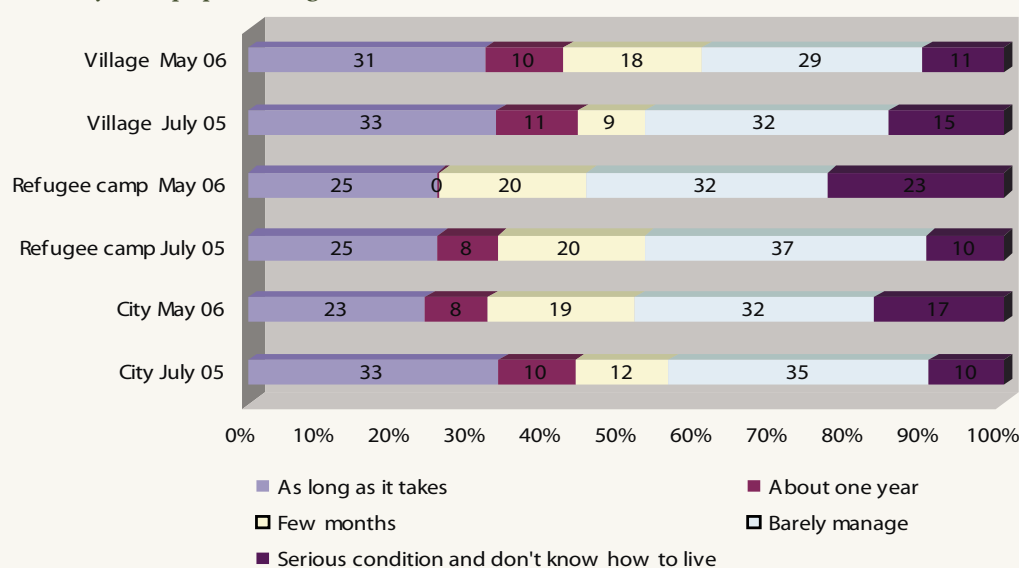


Figure 2.16: Ability to keep up according to area of residence, 2005-2006

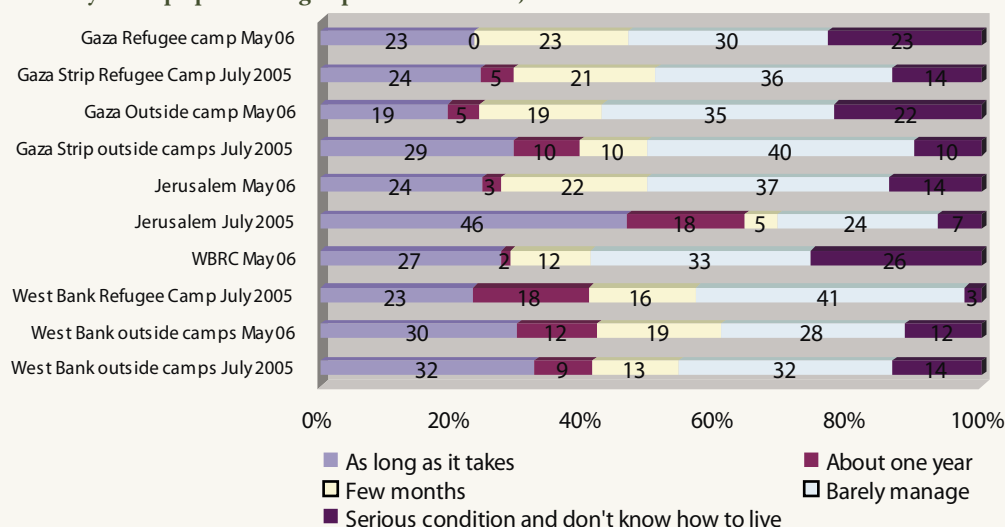


The rate of the population who believed it would be difficult to keep up financially during the coming period increased sharply as well, from 11% to 16%. While in 2005, about 40% of them felt they could keep up as long as it takes or up to one year, this proportion dropped to 34% in May 2006.

In cities and refugee camps, the percentage of respondents who stressed they were in serious straits and do not know how to manage increased sharply between July 2005 and May 2006: from 10% to 17% in cities and 10% to 23% in refugee camps. In May 2006, 23% of the respondents from cities thought they could manage as long as it takes while they numbered 33% in July 2005.

In the refugee camps, the situation has deteriorated sharply. In the Gaza Strip camps, the percentage of respondents who stressed they were in serious condition and did not know how to manage increased from 14% to 23% between July 2005 and May 2006, while it increased from 3% to 26% in the West Bank refugee camps. Jerusalem also experienced a very significant increase of those who stressed they were in serious condition and did not know how to manage (from 7% to 14%), while the proportion of those who thought they could keep up as long as it takes or for one year dropped from 64% in July 2005 to 27% in May 2006.

Figure 2.17: Ability to keep up according to place of residence, 2005-2006

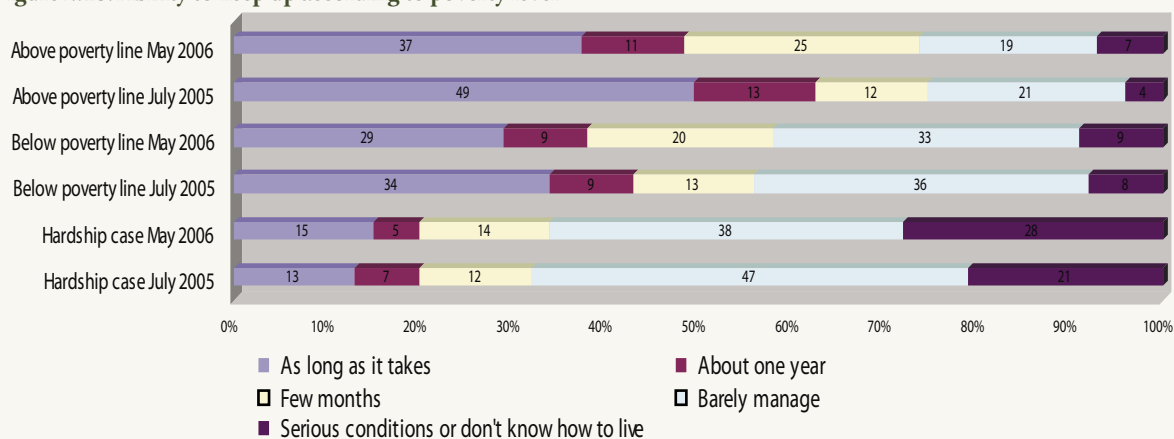


The ability of the extremely poor to cope with the current dramatic economic situation weakened as the proportion of them who stated that they were in serious condition and did not know how they would survive increased from 21% in July 2005 to 28% in May 2006. However, these figures also show that those living above the poverty line are now also suffering from a deterioration in living condition. If, in July 2005, 49% of them declared they could keep up as long as it takes, in May 2006, only 37% held this view. Again, although they may not yet be in a serious condition, the proportion of those who can barely manage increased from 12% to 25%.

2.7 Available means to relieve hardship

The results of PPP10 underline the deterioration in living conditions and the risk of a major humanitarian crisis. It appears that more than half the respondents feel like their means of subsistence will soon be exhausted or are already exhausted (52%), especially in the West Bank refugee camps (63%) and in the Gaza Strip outside refugee camps (61%). One of the striking results is the fact that 43% of the respondents from West Bank refugee camps stressed their available means were already exhausted.

Figure 2.18: Ability to keep up according to poverty level



The poorest, who had few assets and resources at the beginning of the second Intifada, have already exhausted a large part of their available means to relieve hardship as 27% of them stressed, while 35% answered their available means will be exhausted soon. In summary, the proportion of the population saying that their means are almost exhausted increased sharply for every group of population.

Figure 2.19: Available means to relieve hardship according to place of residence

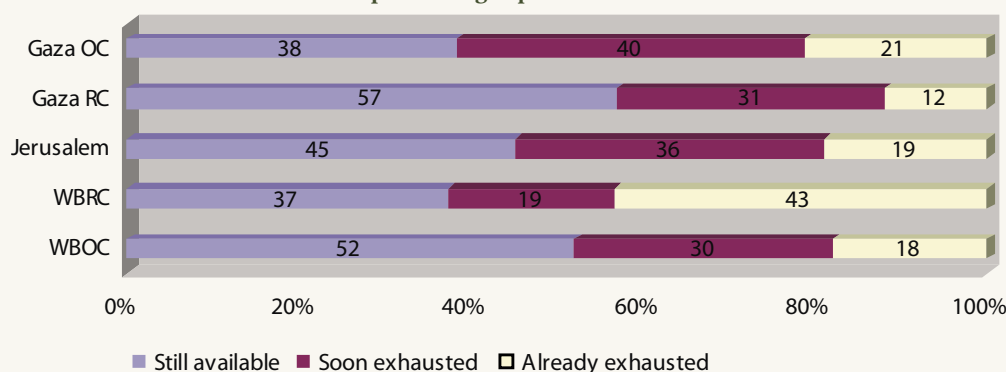


Figure 2.20: Available means to relieve hardship, May 2006

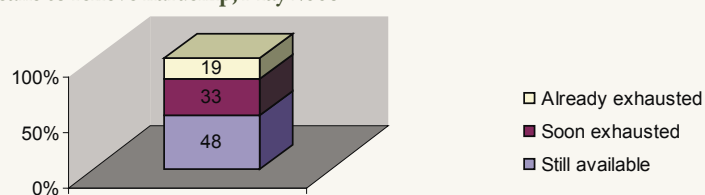
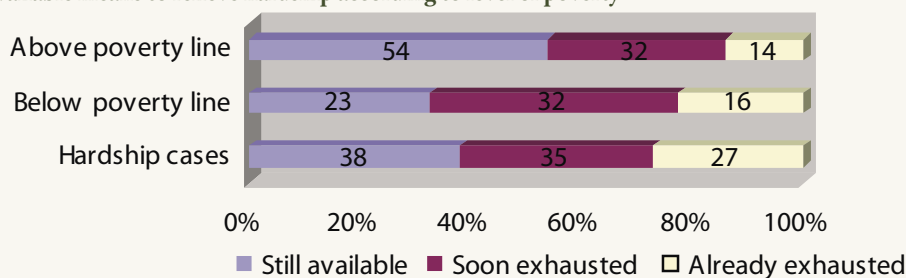


Figure 2.21: Available means to relieve hardship according to level of poverty



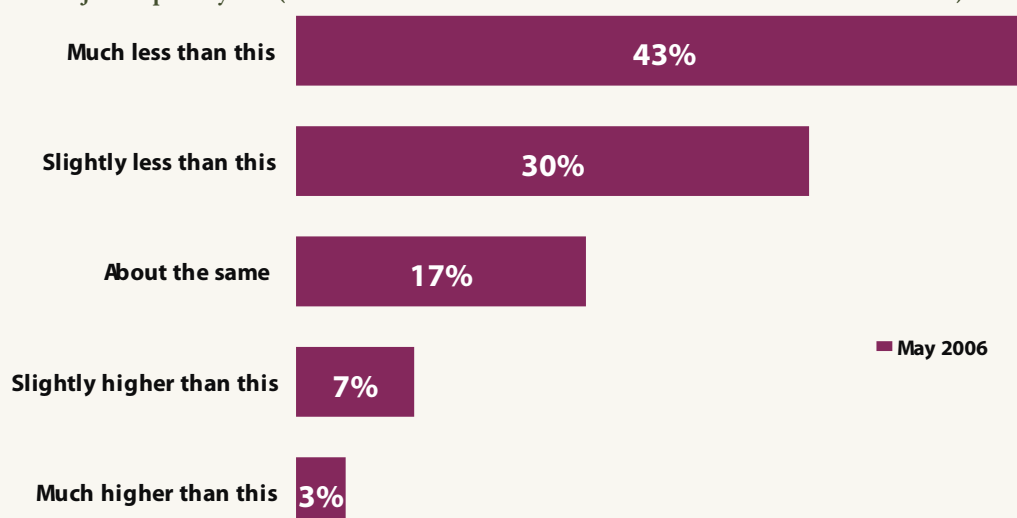
2.8 Subjective poverty and social cohesion

In the previous section, the measure of poverty was based on income whereby the PCBS poverty line was used to distinguish between the poor and non-poor. Below, the poverty analysis based on the objective measure of poverty will be complemented by a poverty analysis based on a subjective measure of poverty. The objective is to get the perception of the Palestinian people themselves about the magnitude of material deprivation.

To that end, a subjective financial satisfaction poverty line has been elaborated. Respondents were asked to estimate the average amount of money they need to meet the basic needs of their household. Once the respondents estimated what they need to meet their household basic needs, they were asked how close their household income was to this amount. It is important to note that this subjective poverty line is higher than the objective poverty line that was used before.

It is important to point out that the subjective poverty rate (adding the percentage of respondents having stated that they had much less or slightly less of the minimum amount to meet their household basic needs) is very close to the picture given by the objective poverty line: 73% as compared to 70%. But according to the respondents, the depth of poverty is even worse than the picture given before, as 43% of the respondents stated they had much less than what is needed whereas the rate of extreme poverty as presented in the first section was 38%.

Figure 2.22: Subjective poverty rate (the extent to which the household income is close to what is needed)

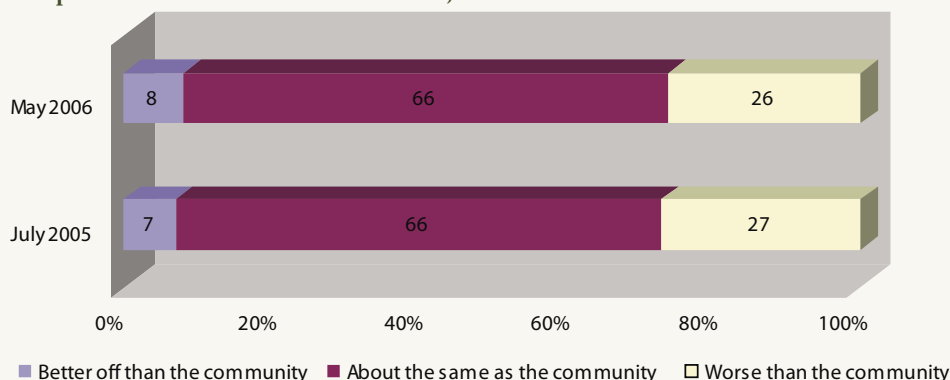


Another key issue regarding subjective poverty is the perception of income inequalities among the community, which has an effect on social cohesion. Despite the economic and humanitarian crisis, Palestinian society has displayed great social cohesion and coping capacities. Family and friends solidarity networks are still functioning and widespread even if some coping strategies are now exhausted or starting to become exhausted. This cohesion and resilience may help in explaining why the West Bank and the Gaza Strip have been able to absorb levels of poverty and unemployment that would have led to the tearing of social ties and the destruction of the social fabric in many other societies.

To check the level of social cohesion, interviewees were asked how they would evaluate their financial situation in comparison to that of others in their community. Overall, a very large majority of the respondents (66%) stated that they consider the financial situation of their household to be similar to that of others in their community. This means that the socio-economic crisis initiated by the second Intifada was not associated with any major trend that could have led to social fragmentation.

However, the feeling of a growing differentiation in the income situation of members of the community increased among people living in the West Bank refugee camps and in Jerusalem, where a growing number of respondents considered that their living conditions were worse than those of their community overall. The proportion of respondents who stated that their household's financial situation was worse than the community increased respectively from 20% to 37% in the West Bank refugee camps and from 21% to 27% in Jerusalem.

Figure 2.23: Perception of household's financial situation, 2005-2006



There is a large number of the extremely poor (42%) who have the perception that they are the big losers in the deep socio-economic crisis, and that their household situation is worse than that of the rest of their community. However, a majority of poor and extremely poor (56% and 73% respectively) continue

to think that the community as a whole faces the consequences of the second Intifada and that their situation is about the same as that of the community.

Figure 2.24: Subjective poverty according to poverty level, 2005-2006

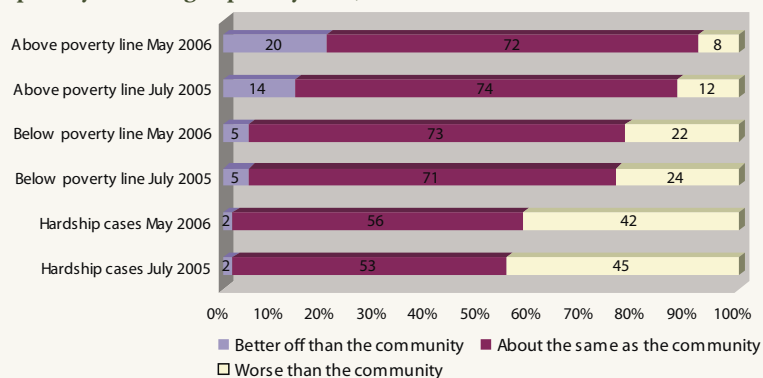
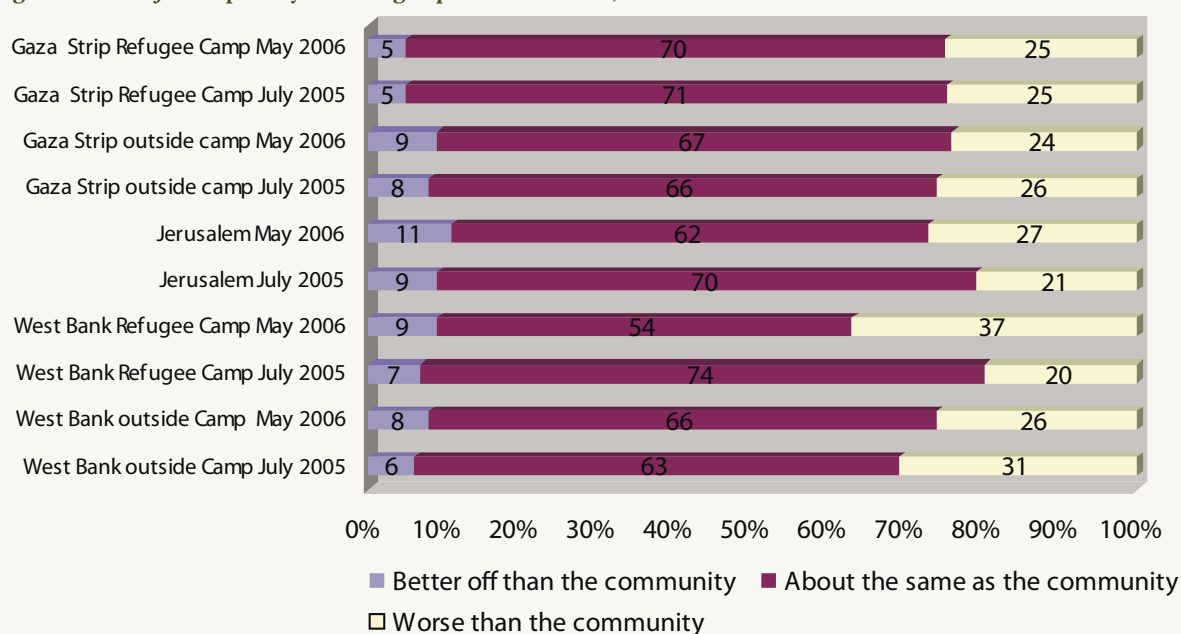


Figure 2.25: Subjective poverty according to place of residence, 2005-2006





Evolution of the Labour Market

Prof. Frédéric Lapeyre • Pauline Plagnat

3.1 Unemployment

Palestinian workers in May 2006 continued to be confronted with a very bad employment environment caused by the collapse of the Palestinian economy, mobility restrictions and exclusion from the Israeli labour market. Since the last survey, Israeli security forces undertook repeated incursions in the Gaza Strip that have harshly hit the population through greater mobility restriction, destruction of civilian property and economic facilities, and higher levels of violence resulting in growing human casualties.

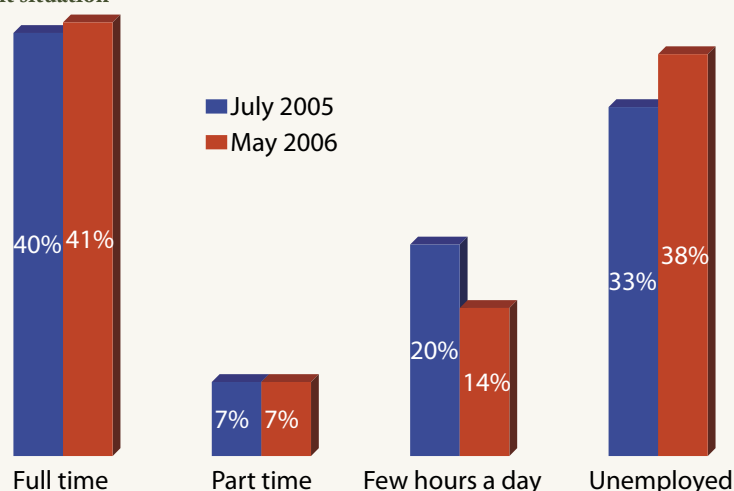
Unemployment, the inability to go to work places on a regular basis and the loss of work hours resulting from the increased travel time linked to checkpoints, roadblocks and IDF military interventions in the West Bank and Gaza Strip are key features of the Palestinian labour market. Palestinian workers from the West Bank and Gaza Strip are faced with a situation of mass unemployment and underemployment resulting from the paralysis of the Palestinian economy by Israeli military forces.

The Israeli military strategy toward the oPt has deeply compromised Palestinian household welfare by continuing to prevent access to income-generating activities over a very long period. As a consequence of these restrictions on the Palestine labour market imposed by the Israeli authorities, material deprivation in the Palestinian society as a whole has greatly increased and many households are dependent on humanitarian assistance mechanisms to secure their livelihood.

According to the results from the May 2006 poll, the rate of unemployment increased sharply to hit 38% as compared to 33% in July 2005. The results show also less than half of the labour force (41%) was in full-time employment while 21% were, for the most part, underemployed, being trapped in a range of involuntary part-time work.

This situation is in line with the World Bank estimates that, in various scenarios, unemployment will jump to 35% – and, in the worst scenario, 40% – in 2006.¹ PCBS results indicate that the percentage of persons who do not work, whether seeking jobs or not, increased from 29.4% in the fourth quarter of 2005 to 31.1% in the first quarter of 2006, compared with 20.2% in the third quarter of 2000, according to the relaxed definition of unemployment.

Figure 3.1: Employment situation

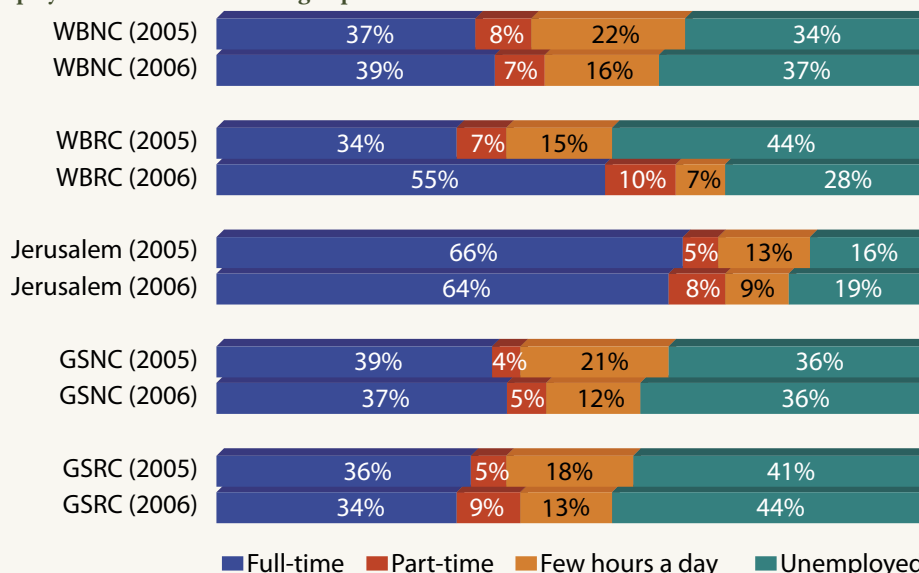


Unemployment has increased significantly outside West Bank refugee camps (from 34% to 37%), inside Gaza Strip refugee camps (from 41% to 44%) and in Jerusalem (from 16% to 19%). Nevertheless, it seems that unemployment dropped sharply in West Bank refugee camps (from 44% to 28%) and this evolution was associated with a larger access to full-time jobs (from 34% to 55%). This evolution could

¹ Economic Update and Potential Outlook World Bank, March 15, 2006, *West Bank and Gaza Economic Update and Potential Outlook*.

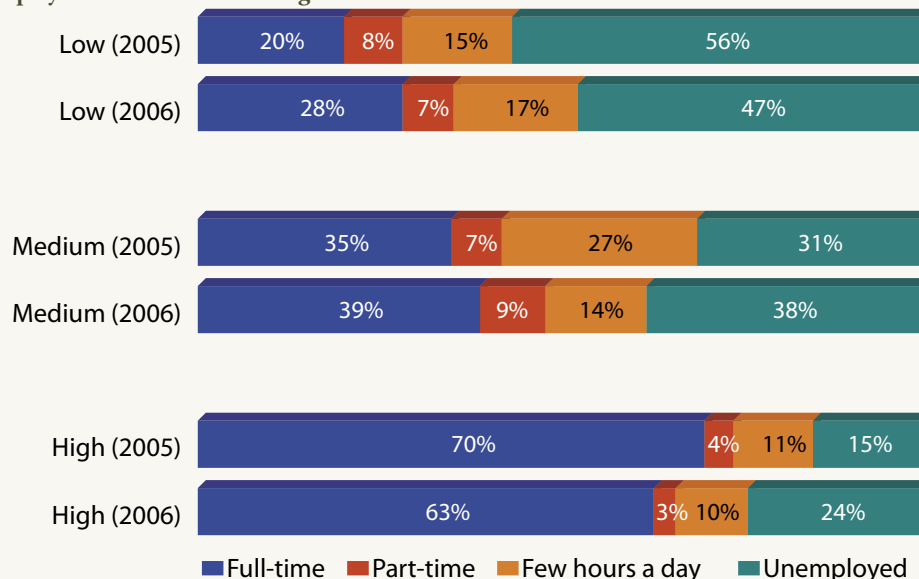
explain PCBS results which showed that unemployment rate in the West Bank decreased from 21.8% in the fourth quarter of 2005 to 21.4% in the first quarter of 2006, while in Gaza Strip it increased sharply from 28.2% in the fourth quarter of 2005 to 34.1% in the first quarter of 2006 (PCBS, 2006). The explanation for the fall of unemployment in the West Bank refugee camps may be found in the type of occupation and type of employer, which probably give the camps a greater degree of job stability (as we can see in the figures 3.12, 3.18 and 3.20).²

Figure 3.2: Employment situation according to place of residence



Even though the poorly educated are still the group which suffers the most from unemployment (47% of the respondents from this category are unemployed while there are 24% unemployed in the highly educated category), they seem to get a better access to full-time work, as 28% of them are employed full-time in May 2006 as compared to 20% in July 2005. On the contrary, more highly educated persons have now to deal with unemployment (from 15% in July 2005 to 24% in May 2006).

Figure 3.3: Employment situation according to educational level

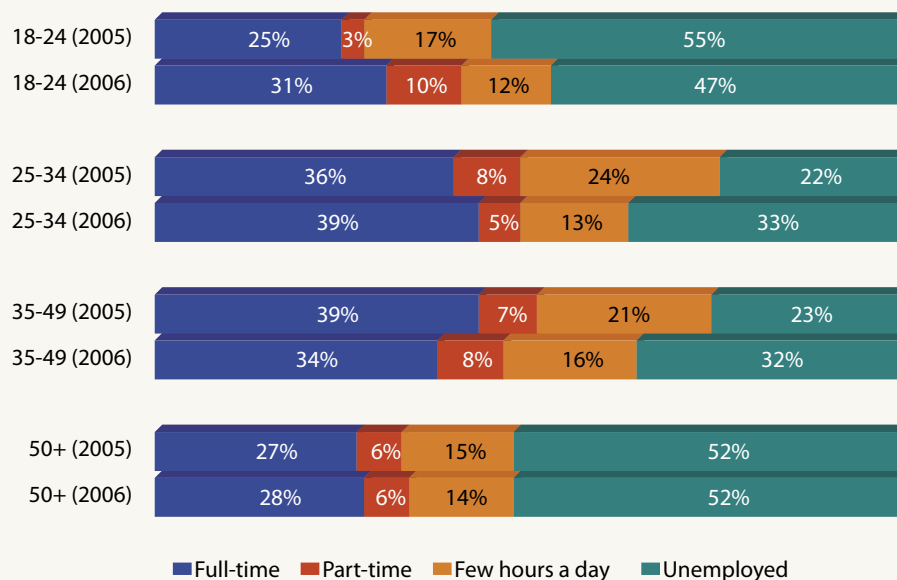


² In figure 3.18, we can clearly see that the number of employees have increased by 13% from 2005 (39% in 2005 and 52% in 2006). In the same period, the number of skilled workers and professionals has also increased. In Gaza refugee camps, in contrast, while the number of employees also increased (by 9%, the number of professional and skilled workers decreased). Moreover, figure 3.12 also underlines greater job stability in West Bank refugee camps than in Gaza in 2006 and the West Bank refugee camps have the stronger proportion of employees in government, in international agencies and in the private sector (see figure 3.20).

Evolution of the Labour Market

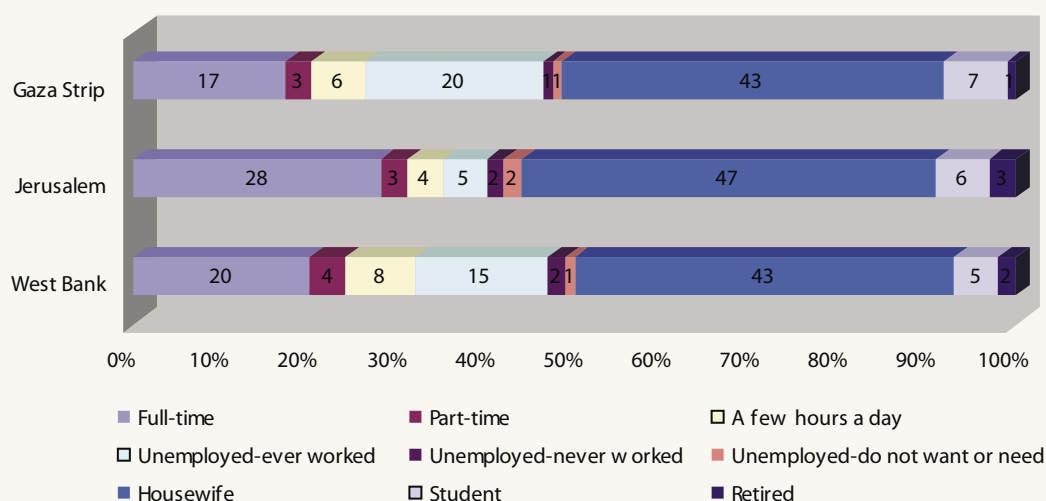
The results also indicate that the highest percentage of unemployment is concentrated among the young and elderly workers; the highest percentages registered were for the age group 18-24, reaching 47% unemployed, and for the age group 50 years and more, hitting 52% unemployed. At the same time, the figure shows that in the 18-24 category, unemployment decreased from 55% to 47% and full-time employment increased from 25% to 31%.

Figure 3.4: Employment situation according to age group, 2005-2006



In order to complement this data, we can use some more detailed figures on the activity structure of the respondents. The participation rate of women is traditionally very low in the West Bank and was estimated by PCBS to be 12.7% in the first quarter of 2006 (PCBS, 2006), an indication of the very high numbers of female household members excluded from the labour force.

Figure 3.5: Employment by region

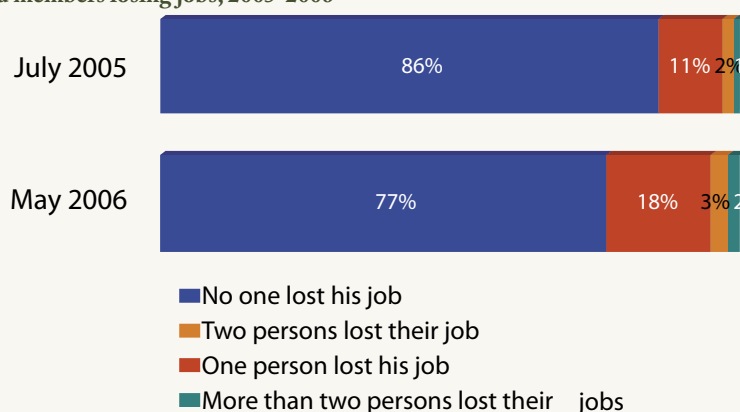


3.2 Labour market restrictions and income insecurity

The results of the poll stress the fact that the latest evolution in the West Bank and Gaza Strip had a severe impact on the labour market. The income decrease is mainly attributed to job loss and working hours loss everywhere in Palestine. About 40% of the respondents facing an income decrease consider that it was caused by the deterioration in their working conditions; in Jerusalem in particular, where the proportion reaches 63% of respondents.

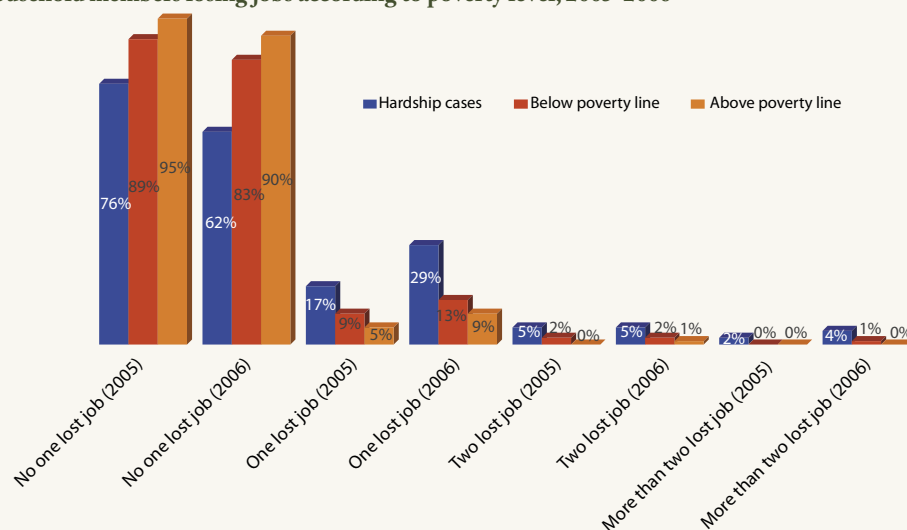
The employment market seems to be more unstable, as the respondents who stated that in their household no one lost their jobs dropped to 77% in May 2006 as compared to 86% in July 2005. The proportion of households where one member lost his or her job has increased from 11% to 18%. This analysis is in line with the causes given for the decreased income.

Figure 3.6: Household members losing jobs, 2005-2006



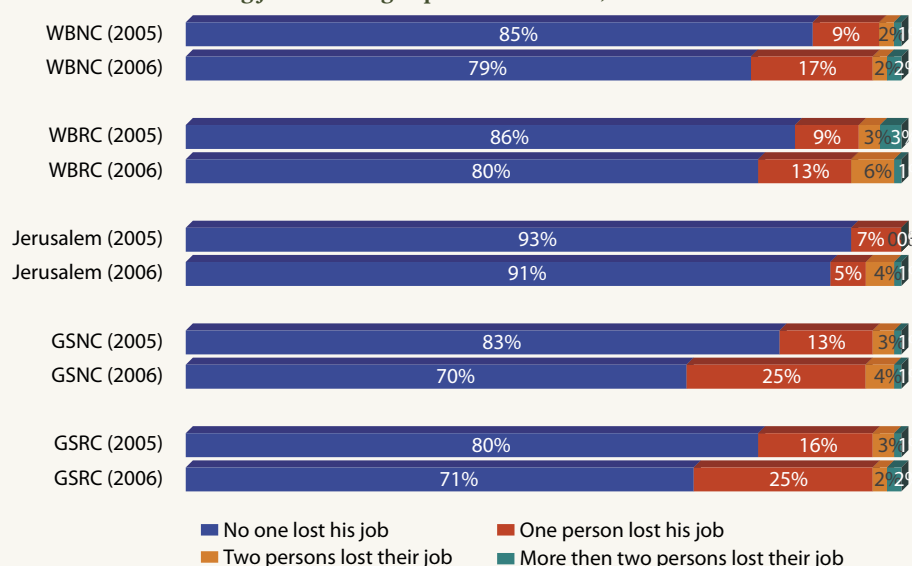
For each level of poverty, the number of respondents who stated that someone from his/her household lost his/her job has increased. However, the extremely poor have experienced a very sharp increase in unemployment as the percentage of respondents reporting that one member of his/her household lost his/her job jumped from 17% to 29% between July 2005 and May 2006. The results also show that among those living above the poverty line, as many as 9% of respondents responded that one member of his/her household lost his/her job in the past year. Job loss is a reality for everyone, but the poorest are still the ones to be hit the hardest.

Figure 3.7: Household members losing jobs according to poverty level, 2005-2006



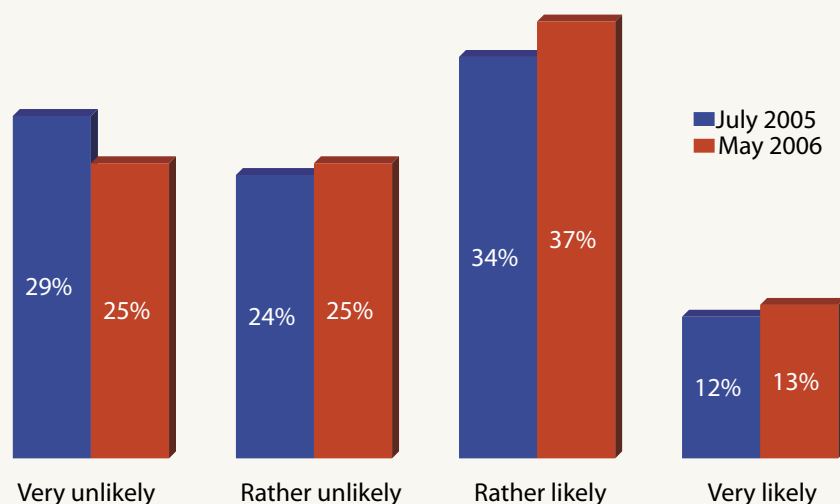
The Gaza Strip and the West Bank are the places where respondents face the most job loss. It increased particularly sharply in the Gaza Strip, as much in the refugee camps as in the non-camp areas. More than a quarter of the households have had to deal with employment insecurity.

Figure 3.8: Household members losing job according to place of residence, 2005-2006



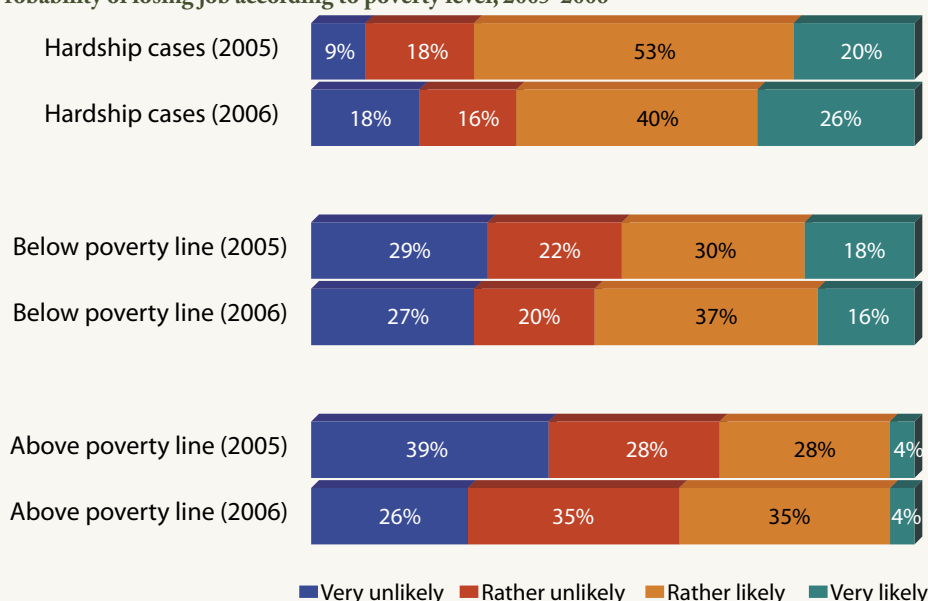
3.3 Job precariousness

Figure 3.9: Probability of losing job, 2005-2006



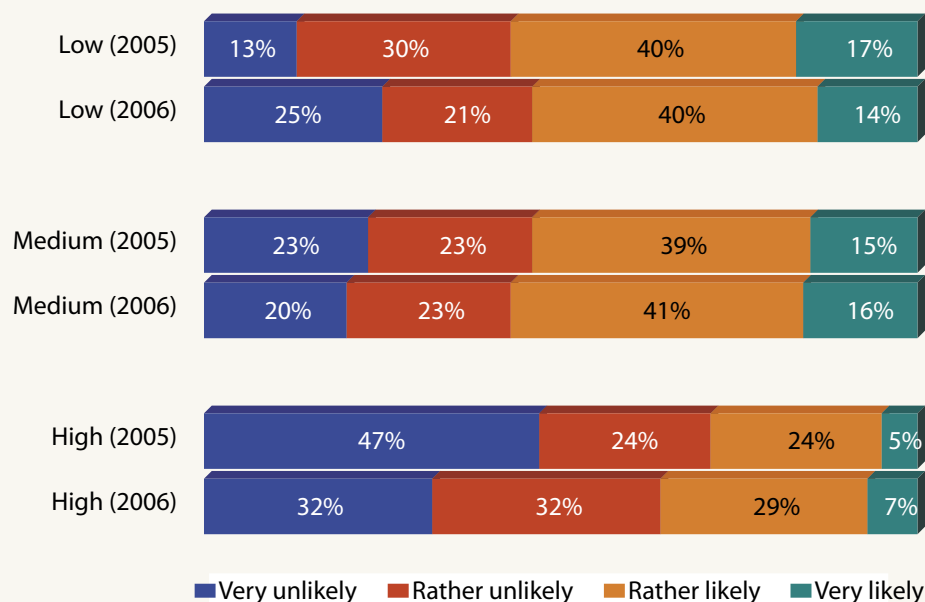
As forecasted in the scenario consequent to the foreign aid cut, the labour market was dramatically affected by the crisis. If unemployment rose the most in Gaza, Jerusalem also lost a lot of stable full-time jobs and had to face a massive rise of unemployment, touching everyone and increasing the feeling of economic insecurity. In 2005, more than half the people (55%) felt it rather unlikely they would lose their job, but in 2006, this number dropped to 50%. However, this insecurity about losing jobs increased the most among the poor and those living above the poverty line (respectively 49% to 53% and 32% to 40%) while it decreased among the poorest (72% to 66%), which probably is in line with the fact that they can better access full-time jobs. A similar analysis can be made regarding level of education.

Figure 3.10: Probability of losing job according to poverty level, 2005-2006



Highly educated people seemed to feel more insecure regarding the stability of their jobs: while 30% of them felt they could lose their job (rather or very likely) in 2005, in 2006, this rate went up to 36%. And while those who felt very secure in keeping their job numbered 47% in 2005, this proportion was now reduced to 32%. This feeling is probably caused by the increased loss of highly qualified jobs. On the contrary, poorly educated people feel somewhat more secure about keeping their employment. As seen before (see figure 3.3), they have more access to full-time jobs.

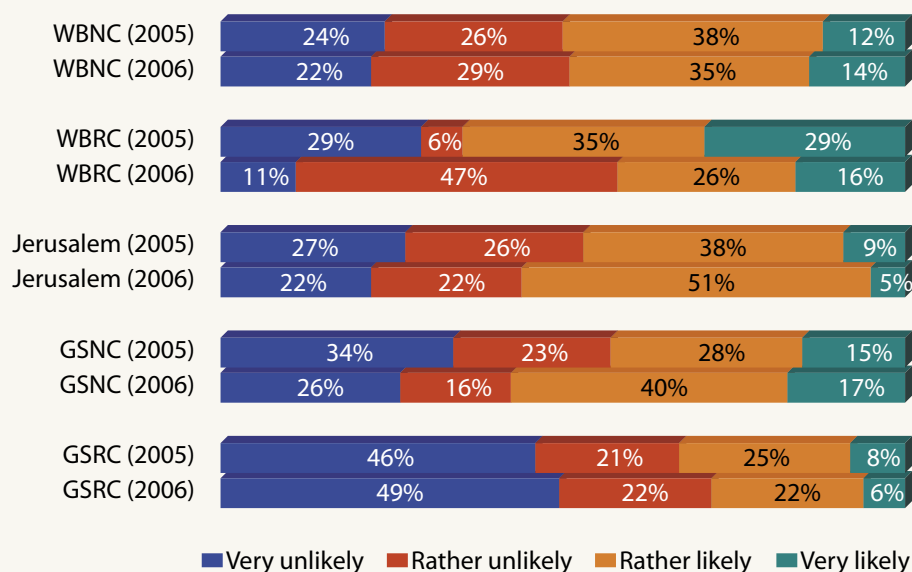
Figure 3.11: Probability of losing job according to level of education, 2005-2006



Regarding the place of residence, it is in Jerusalem and in Gaza outside camps that feelings of insecurity have grown the most this year (48 % to 57% and 42 % to 57% respectively).

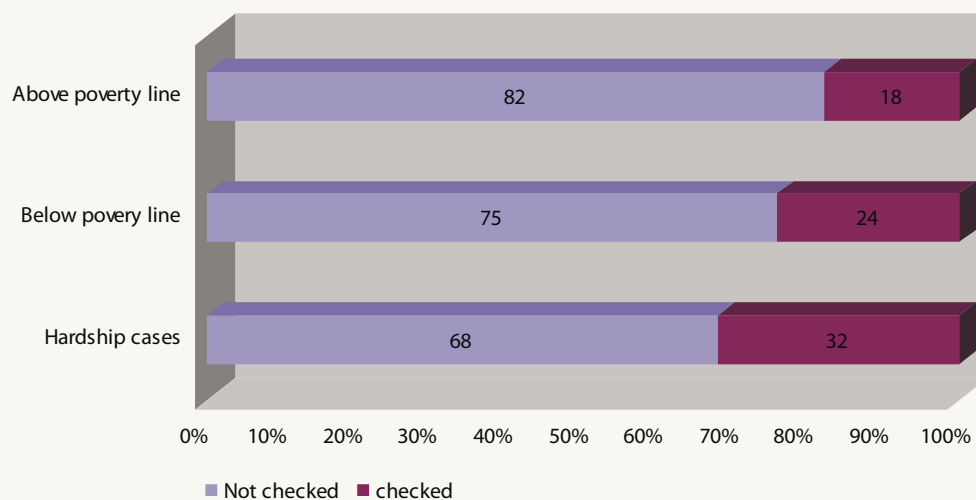
On the contrary, the population living in the refugee camps seems to have regained confidence in their job stability (in the West Bank refugee camps, the number of inhabitants feeling confident increased from 35% to 58% and in the Gaza refugee camp, it went up from 66% to 71%).

Figure 3.12: Probability of losing job according to place of residence



Another reason for job instability is the Separation Barrier. It is preventing almost 25% of the population access to their jobs. The poorest are those most likely to be affected by the Barrier: 32% of them can not access their work because of it. 18% of those living above the poverty line are also affected by the Separation Barrier.

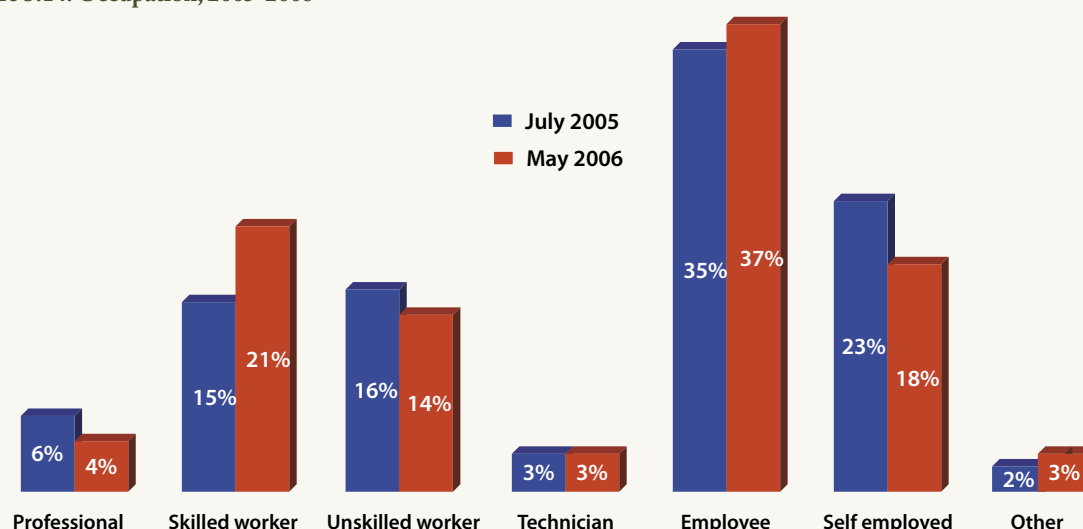
Figure 3.13: Level of poverty by Separation Barrier: prevent access to job



3.4 Structure of employment

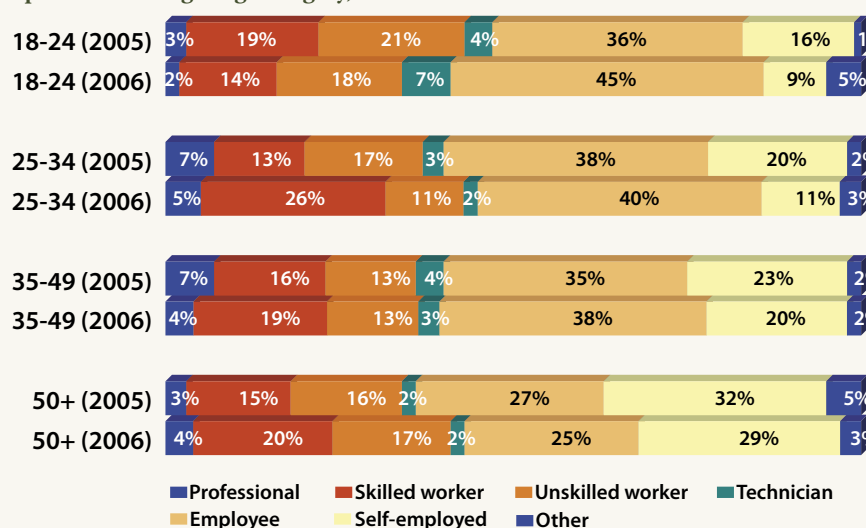
Regarding the structure of the labour force, there has been a rise in the number of skilled workers (15% to 21%) that benefited all categories. Employees still predominate: there even has been a rise in the proportion of them since 2005 (35% to 37%). The number of self-employed has decreased from 23% to 18%.

Figure 3.14: Occupation, 2005-2006



Regarding occupation according to age category, it is noticeable that more young people are working as employees and that access to skilled employment is being given to young adults between 25-34 years old. They are less numerous in the unskilled jobs, are hired more as employees and there are 9% fewer of them self-employed.

Figure 3.15: Occupation according to age category, 2005-2006



In each category of education, a decrease in the proportion of self-employed and an increase in the proportion of those hired as employees is discernible. The gap is particularly visible for the highly educated group. Moreover, in line with what has been said before, access to more skilled jobs is much more open to those with low levels of education (from 19% to 27%).

Figure 3.16: Occupation according to educational level, 2005-2006

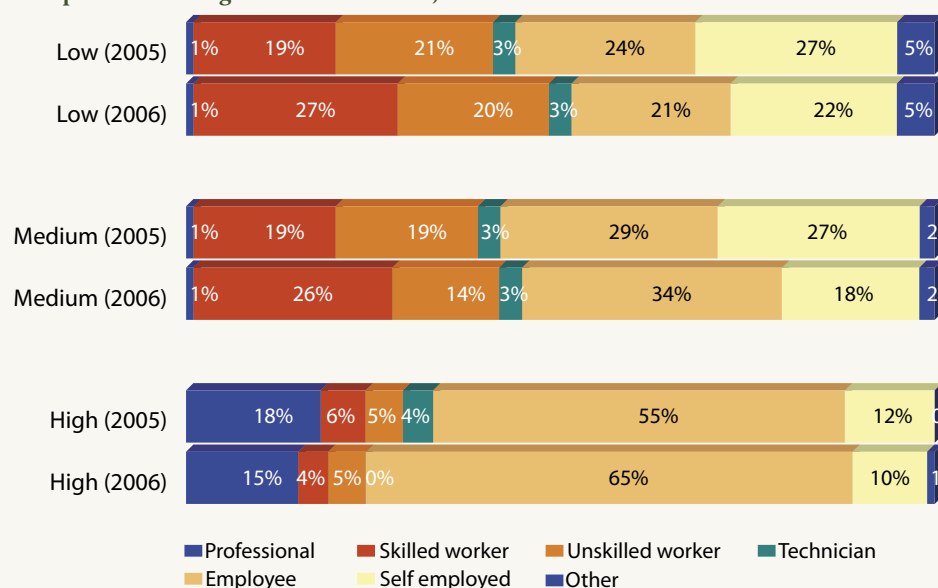
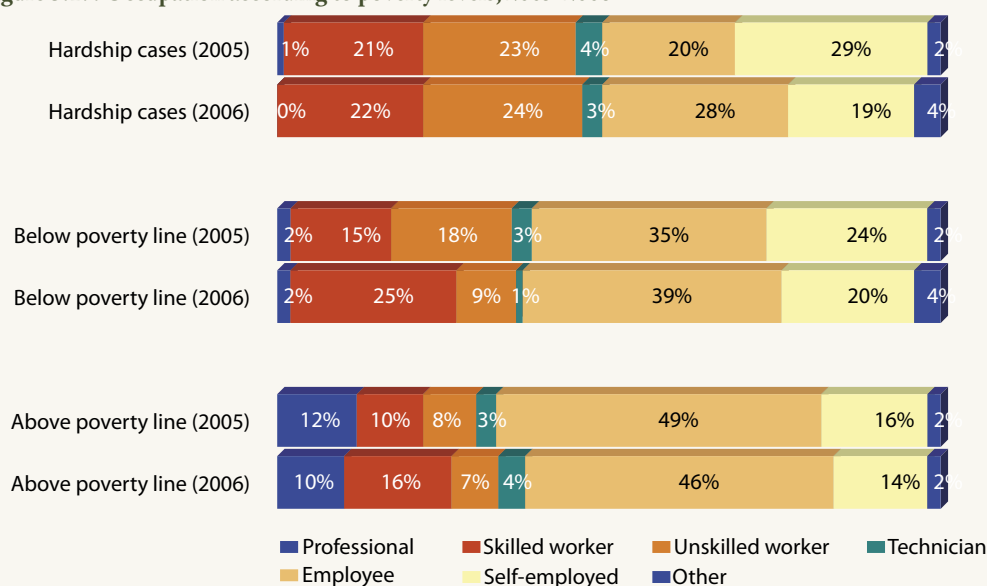


Figure 3.17: Occupation according to poverty levels, 2005-2006



Regardless of the level of poverty, we can see the same decline in the number of self-employed. But those who had access to new skilled jobs are those living just below the poverty line.

Jerusalem benefited the most from new opportunities in skilled employment (from 20% of the respondents in 2005 to 42% in 2006) and the West Bank refugee camps have the largest proportion of employee positions (from 39% to 52%).

Figure 3.18: Occupation according to place of residence, 2005-2006

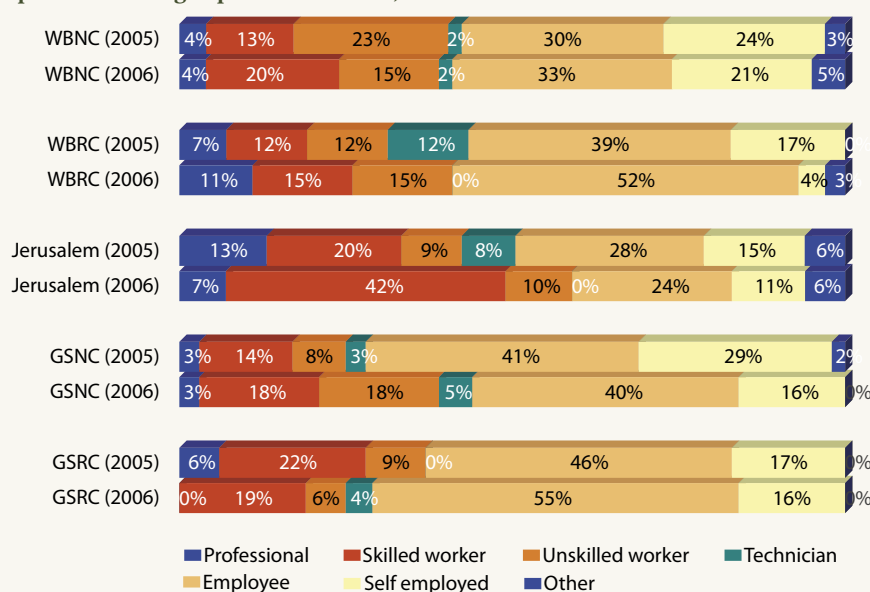
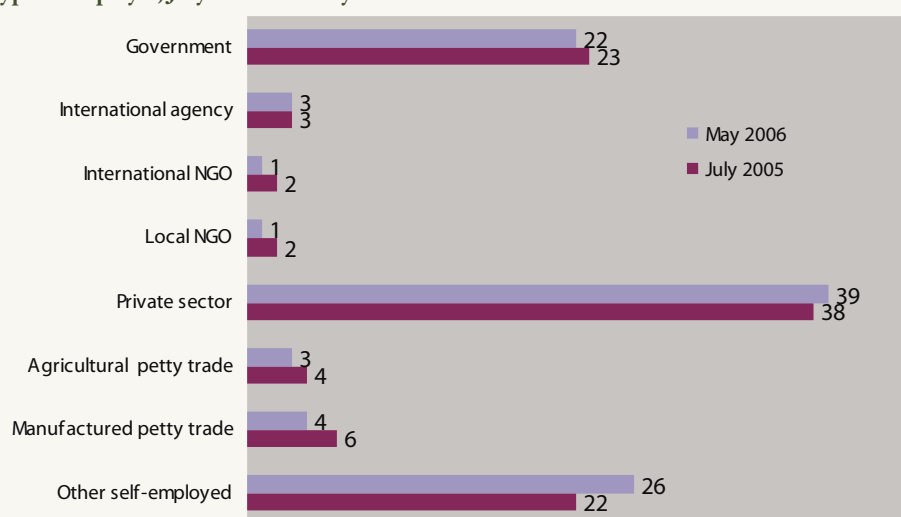


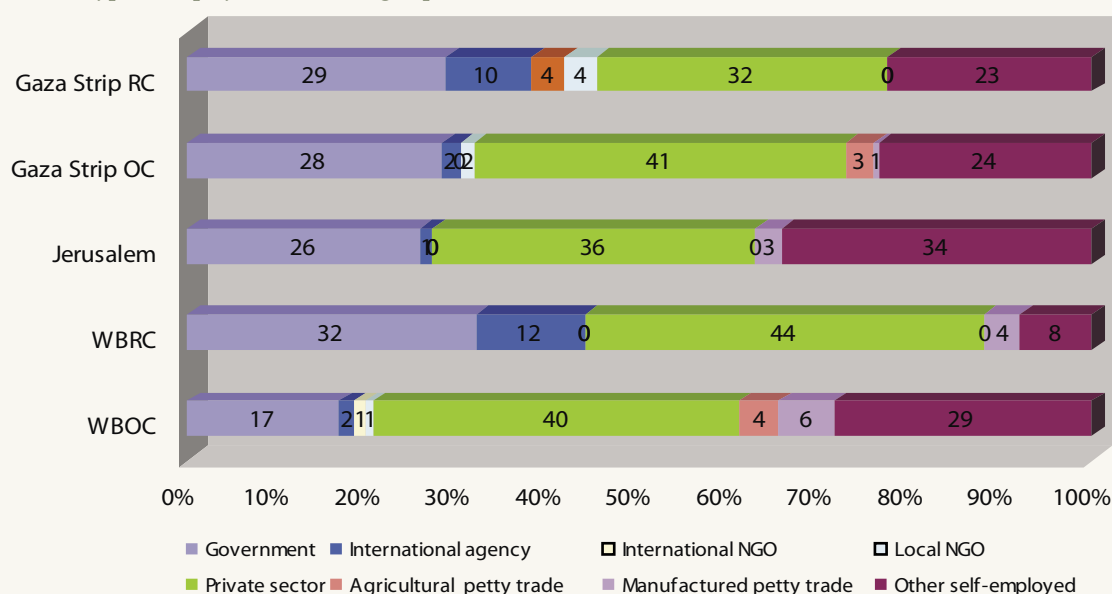
Figure 3.19: Type of employer, July 2005 and May 2006



Type of employment did not change much from 2005 to 2006. There is a small decline in government positions (1%), similar to employment with international and local NGOs and trade activities. The private sector is still the most important type of employment, while the number in self-employment has increased by 4%.

The private sector dominates as the main source of employment in each location, but the large proportion of self-employed in Jerusalem stands out.

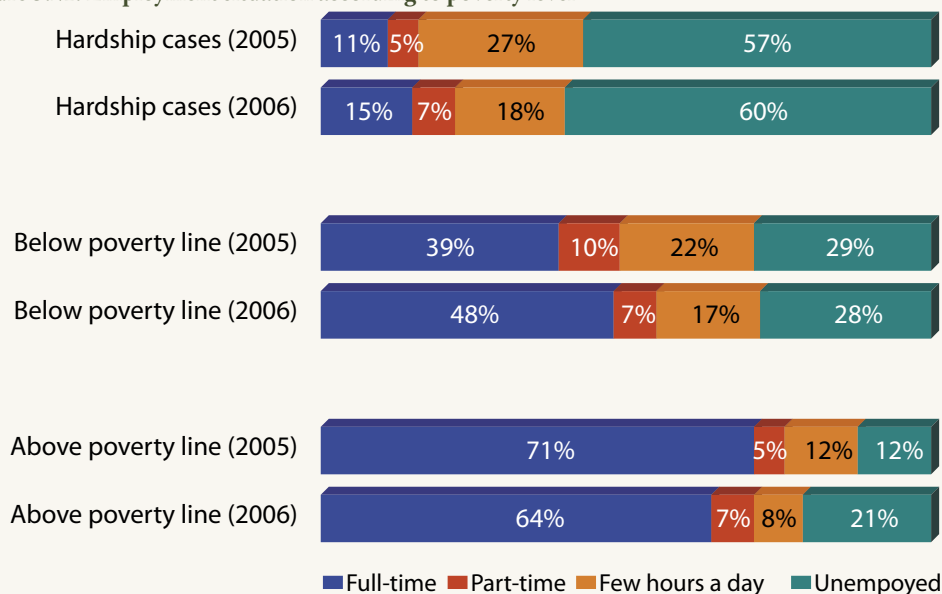
Figure 3.20: Type of employment according to place of residence



3.5 Employment status and poverty risk

Full-time work is always the best way to escape poverty. But still, while the proportion of the very poor having a full-time job has increased, they are living in extreme poverty. Almost 60% of the very poor are unemployed, but the percentage of those working just a few hours a day dropped from 27% to 18%. We can clearly see that they found part-time and full-time jobs. As for the poor, they continue to have better access to part-time and full-time jobs (from 39% to 48%). What is striking is that, despite their access to these jobs, they are still poor and living under the poverty line. Regarding the non-poor, those living above the poverty line are facing unemployment (a rise from 12% to 21%) and a loss of employment stability, in particular in regard to full-time jobs.

Figure 3.21: Employment situation according to poverty level



In line with the forecast reports on the impact of aid cuts, it must be stressed that employment in the government is now less secure than before. If only 7% of the poorest worked for the government, they now account for 10%. As for the poor, they numbered 30%, and now comprise 36% in 2006. Positions

Evolution of the Labour Market

in aid agencies or governmental jobs are no longer a secure way to escape poverty, as there is an increase in the proportion of the poor and very poor holding positions compared to the non-poor, especially in local NGOs (a sharp drop from 64% non-poor to 11%). But they are still the best way to escape poverty. Manufactured petty trade seems to have been a way to improve some living conditions. Yet, in figure 3.22, it is clear that the proportion of people working in trade products declined and the proportion of non-poor having to take on self-employed activities increased.

Anyway, there is still a larger proportion of non-poor working for the government and aid agencies. Hardship cases work mainly in the private sector (53%) and in self-employed activities as a strategy to cope with poverty (30%).

Figure 3.22: Poverty risk according to the type of employer

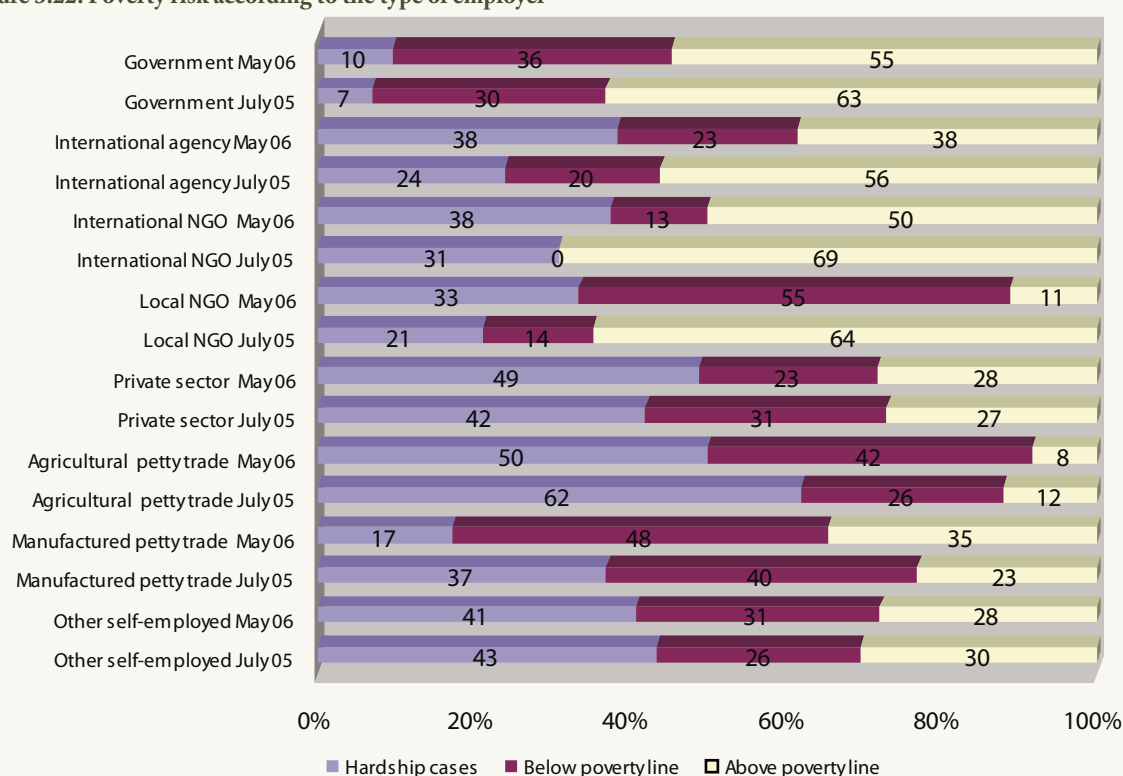
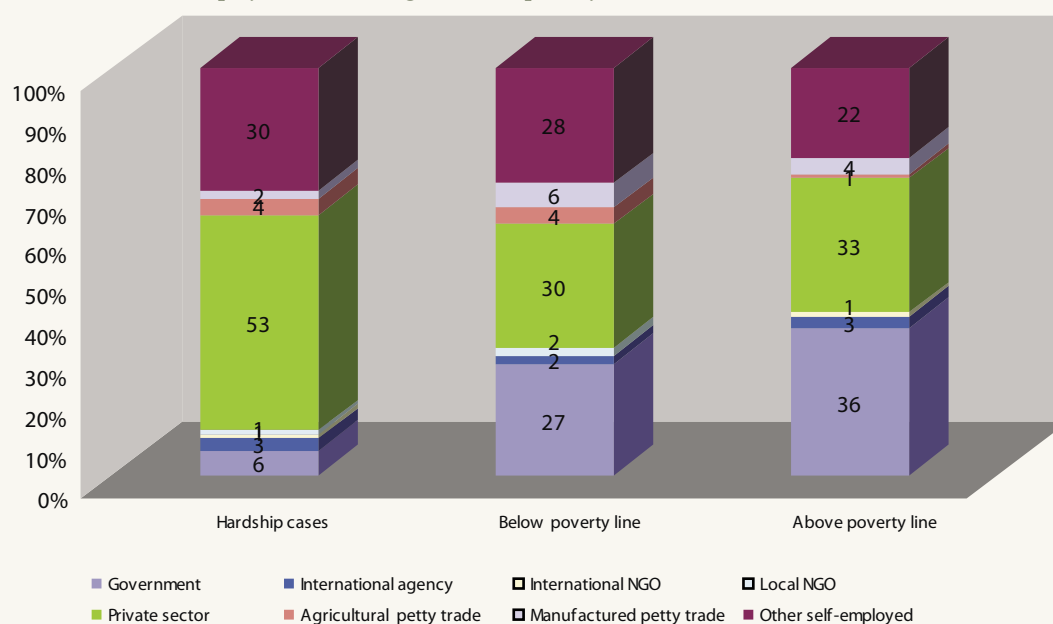


Figure 3.23: Structure of employment according to level of poverty





Education and Child Protection

Tareq Abu El Haj • Roger Avenstrup

4.1 Introduction

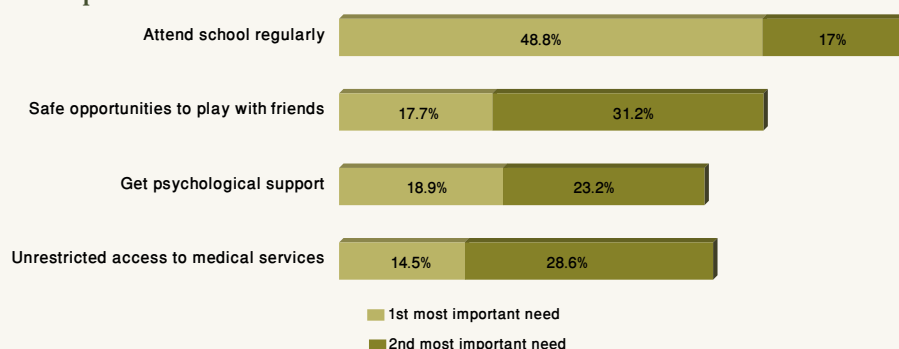
The education section deals with access and drop-out rates first, then satisfaction with quality issues such as teaching, curriculum, learning environment, discipline, extra-curricular activities, duration and double shift. Impediments to education conclude the chapter, and these include access, quality and financial impediments.

The same procedure was largely followed as in recent polls in order to provide continuity and comparability. This chapter is in two main sections: Needs and Protection in general, and Education in particular. Perceptions of children's priority needs are dealt with first, then the ability to meet the needs, followed by child protection. What is new in analysing the data of this poll is to look at the gender of respondents and the gender composition of their families. This is known in general to often have a bearing on attitudes to and perceptions of education. In the next poll, this and possibly other known factors influencing perceptions of education should be included.

4.2 Priority Needs and Protection

4.2.1 Priority Needs

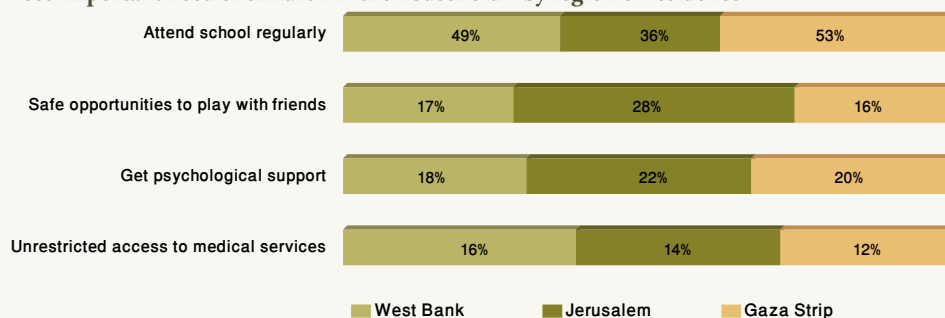
Figure 1: Two most important needs of children in the household



Within the Palestinian public perception, a general concern for children's education and psychological as well as physical safety is observed. The need to attend school regularly (49%) was the most widely quoted *primary* need for Palestinian children followed by the need to receive psychological support (18.9%). Safe opportunities to play with friends (31.2%) was the most widely mentioned *secondary* need for Palestinian children, closely followed by the need to have unrestricted access to medical services (28.6%). The public's perception of children's needs varies across geographic areas, socio-economic backgrounds and household characteristics.

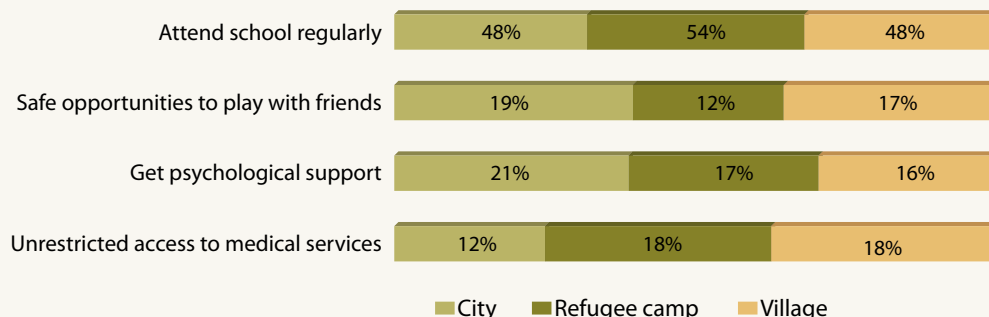
First priority need and place of residence and type of location:

Figure 2: 1st most Important need of children in the household – by region of residence



Differences in perceived needs for Palestinian children vary when accounting for the general location of the household in question. The need for children to attend school regularly remains the most widely cited priority need across Jerusalem, the West Bank and the Gaza Strip; however, while the need for psychological support is the second most widely mentioned priority need for children in the West Bank and Gaza Strip (17% and 16% respectively), for Jerusalem respondents the need for children to have safe opportunities to play takes precedence (28%).

Figure 3: 1st most important need of children in the household – by locality type



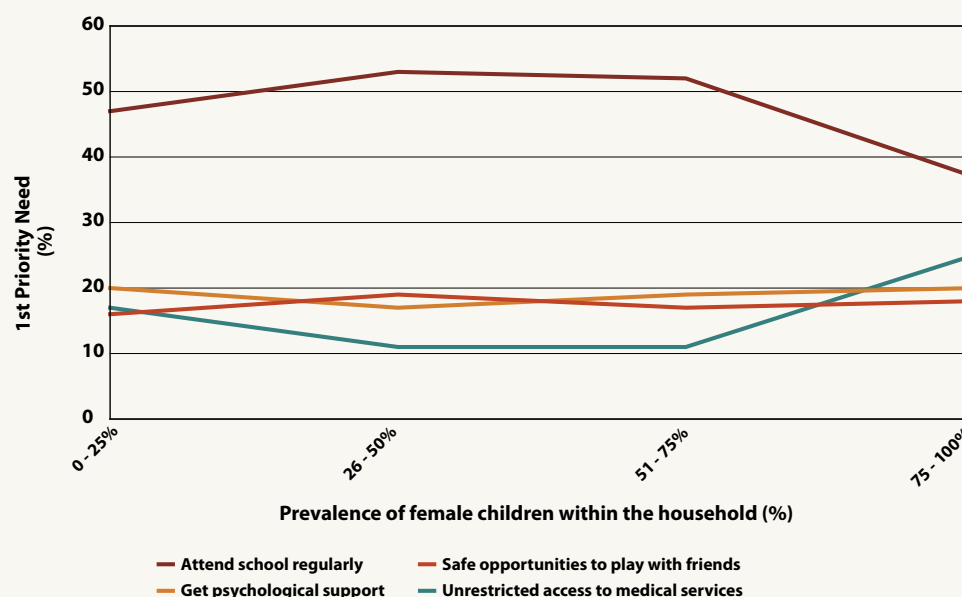
Also when comparing responses across types of locality (city, village or camp), the need to attend school regularly remains the most widely mentioned priority need. However, while respondents from villages and refugee camps mentioned the need for children to have unrestricted access to medical services frequently (18% in both locality types), this was the least-mentioned priority need for respondents from cities (12%).

No statistically significant difference in first priority children's needs was found when comparing those affected by the Separation Barrier and those not affected or when comparing refugees to non-refugees.

First priority need, household characteristics and socio-economic status:

While neither the gender of the respondent nor that of the household head is significantly associated with the perceptions of children's priority needs, it is observed that the gender of the children themselves has influenced the responses to the priority needs of children within the household. Figure 4 illustrates this relationship.

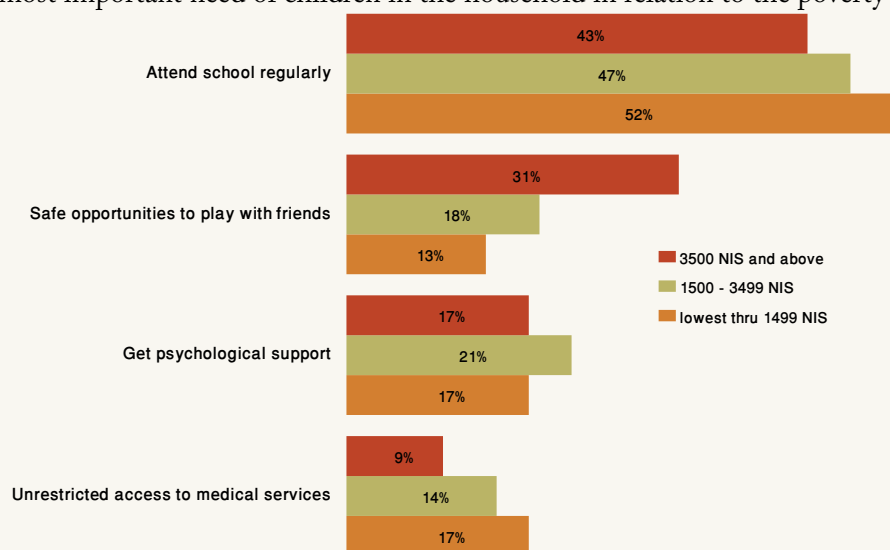
Figure 4: 1st most important need of children in the household – by prevalent gender of children



In households where the children are exclusively - or almost exclusively - female, the need to attend school regularly is mentioned less (37%) than when the sexes of children in the household are evenly mixed (an average of 52%) or when the children in the household are exclusively - or almost exclusively - male (47%). Conversely, in households where the children are exclusively - or almost exclusively - female, the need for unrestricted access to medical services is more frequently mentioned (25%) than when the sexes of children in the household are evenly mixed (11%) or when the children in the household are exclusively - or almost exclusively - male (17%). No differences were found for the need to get psychological support or for safe opportunities to play with friends.

The perception of children's priority needs varies with the age of respondents. A greater percentage of elderly respondents report the need to attend school regularly more frequently (53% for respondents 50 years old and above) than for younger respondents (42% for respondents between 18 and 24 years old).

Figure 5: 1st most important need of children in the household in relation to the poverty line



The priority needs of children vary across households with different socio-economic standing. Figure 6, below, illustrates the relationship between the responses on children's priority needs and the classification of the household in relation to the poverty line. 57% of hardship cases and 48% of the poor indicated that attending school regularly is the first priority need for children in the household, compared to only 38% of those above the poverty line. In comparison, a greater proportion of those living above the poverty line mentioned the need for safe opportunities for children to play (25%) and psychological support (23%), compared to those living below the poverty line. However, the ratio of those mentioning the need for unrestricted access to medical services did not vary: approximately 1 out of 7 households see this as a priority need for children regardless of their relation to the poverty line.

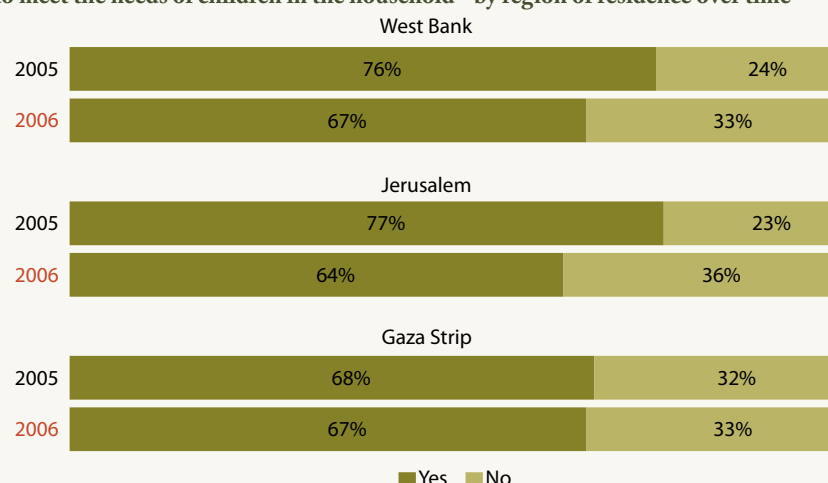
4.2.2 Ability to care for and protect children

Table 1: Ability to meet the needs of children in the household over time

	July 2006	April 2006
Yes	73%	67%
No	27%	33%

On average, one-third of the respondents indicated their inability to fully protect and care for the needs of children in the household (Table 1). This represents a 5% increase from July 2005 when 27% of the respondents indicated they could not fully protect, and care for the needs of, children in the household. The evolution of this trend over time is also visible in responses across geographic regions (Jerusalem, remaining West Bank and the Gaza Strip) as well as households' relation to the poverty line.

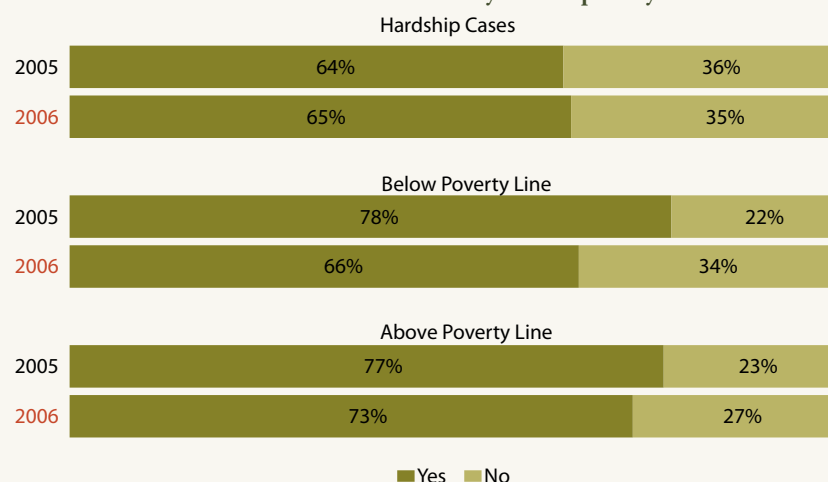
Figure 6: Ability to meet the needs of children in the household - by region of residence over time



The need for safe opportunities to play with friends, psychological support, and unrestricted access to medical services, and particularly the levels of violence against children, are crucial for children's rights protection. Household ability to meet the needs of children, i.e., household protection of the child, has declined noticeably in the West Bank and Jerusalem during this poll period, equal to and below the level of Gaza respectively.

In both Jerusalem and the remaining West Bank, the ratio of those indicating they cannot fully protect and care for the needs of children in the household has increased from nearly a quarter of the respondents in 2005 to 33% and 36% respectively in 2006. In the Gaza Strip, this proportion is virtually unchanged. Moreover, responses within the West Bank varied according to their relation to Israel's Separation Barrier; while 37% of respondents from Barrier-affected communities said they cannot meet children's needs, 31% of respondents from non-affected communities said they cannot meet children's needs - a difference of 6%.

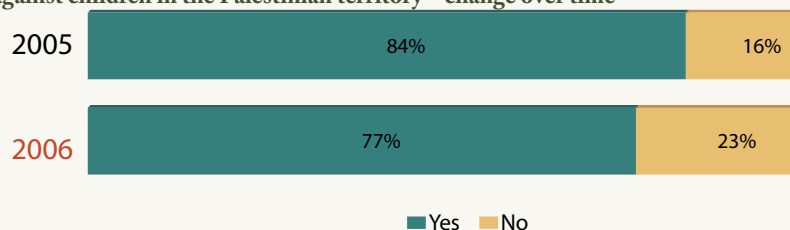
Figure 7: Ability to meet the needs of children in the household - by income poverty over time



A significant relationship is observed as well between the household's position in relation to the poverty line and its ability to protect and care for the needs of children in the household. For those identified as social hardship cases, the ratio indicating they cannot attend to the needs of children has remained virtually unchanged (36% in 2005 and 35% in 2006), whereas the ratio of respondents from households identified to be below the poverty line (but not hardship cases) and those above the poverty line has increased. The ratio of respondents identified as living below the poverty line (but not hardship cases) that indicated they cannot attend to the needs of children has increased by 12 % in 2006 (from 22% in 2005 to 34% in 2006) while the same ratio for respondents identified as living above the poverty line has increased by 4 % in 2006 (from 23% in 2005 to 27% in 2006).

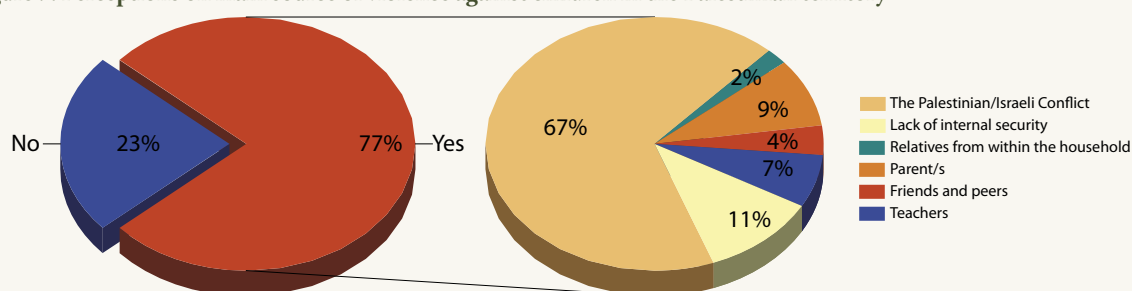
4.2.3 Child Protection

Figure 8: Violence against children in the Palestinian territory – change over time



Although there is a marked increase in the proportion of respondents indicating they could not fully protect and care for children in the household, the proportion of respondents that believe that Palestinian children experience violence has decreased by 7% (84% in 2005 to 77% in 2006). Despite this modest decrease, the proportion remains alarmingly high. The evolution of this trend over time also varies across region of residence. While the levels of violence against children show very little decrease in the West Bank (from 86% in 2005 to 83% in 2006), a more significant drop is observed in both the Gaza Strip and Jerusalem. In Jerusalem this ratio decreased from 92% in 2005 to 79% in 2006 and in the Gaza Strip this decreased from 80% in 2005 to 66% in 2006. Figure 9 portrays the main sources of violence against children.

Figure 9: Perceptions on main source of violence against children in the Palestinian territory



Considering the overall picture, no sharp changes are observed when comparing the evolution of respondents' perceptions on main sources of violence against children from 2005 to 2006. The Palestinian–Israeli conflict remains the single most frequently mentioned source of violence (62% in 2005 and 66% in 2006). Nonetheless, while the global picture remains largely unaltered, observing the evolution of respondents' perceptions from 2005 to 2006 across regions portrays a more accurate picture.

Figure 10: Main source of violence against children in the Palestinian territory – by region of residence and time

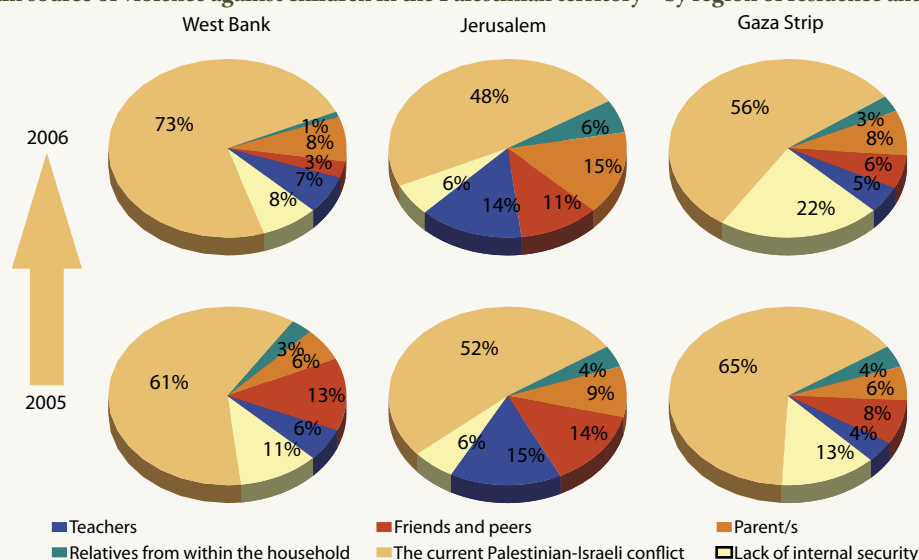


Figure 10 illustrates how the perceptions of respondents of the main source of violence against children differ across geographic regions. In the Gaza Strip and Jerusalem regions there is a drop in the ratio of respondents indicating the Palestinian-Israeli conflict as a main source of violence (65% to 56% in the Gaza Strip and 52% to 48% in Jerusalem) while in the West Bank this proportion increased by 12% (61% in 2005 to 73% in 2006). Furthermore, in 2005 the lack of internal Palestinian security was the second most frequently mentioned source of violence in both the West Bank and the Gaza Strip (11% and 13% respectively), whereas in 2006 this proportion decreased to equal the proportion of those indicating parents as the main source of violence in the West Bank (8%). In contrast, in the Gaza Strip, this proportion sharply increased by 9% (13% in 2005 to 22% in 2006).

Comparing the perceptions of refugees to non-refugees about the main source of violence against children reveals that refugees (15%) are more affected by the lack of internal Palestinian security than non-refugees (10%), while a greater proportion of non-refugees (9%) than refugees (4%) identified teachers as the main source of violence.

Evaluating the differences in perceptions of respondents about the main source of violence against children across areas of residence (camp, town or village) reveals that, while in 2005 no statistically significant difference was reported on the main sources of violence against children across the different types of areas, in 2006 this comparison is significant. The main contributor to this difference is the increase in the perception of camp-dwellers that the lack of internal Palestinian security (i.e., Palestinian infighting) is a source of violence against children (17% in camps compared to 12% cities and 9% in villages). However, one can consider this change in trends over time as an indirect effect of the fact that a greater proportion of the population in the Gaza Strip - where the vast majority of the inter-Palestinian violence has occurred in the past year - are camp-dwellers when compared to the West Bank and Jerusalem. The ratio of West Bank camp-dwellers who indicated the lack of internal Palestinian security as a source of violence against children decreased from 15% in 2005 to 4% in 2006 but within the Gaza Strip the difference between camp and non-camp dwellers is only a matter of 5% (21% non-camp vs. 26% camp).

How children spend their spare time reflects the opportunities which are available. For both age groups, watching television is the most important activity. For the 6-12 year-olds, hanging out with friends and playing in the neighbourhood are very frequently mentioned. Hanging out with friends is almost as frequently mentioned for the 13-18 year-olds, but playing in the neighbourhood is to some extent replaced by more time spent in political/cultural seminars, hobbies, clubs, work and sports, in that order.

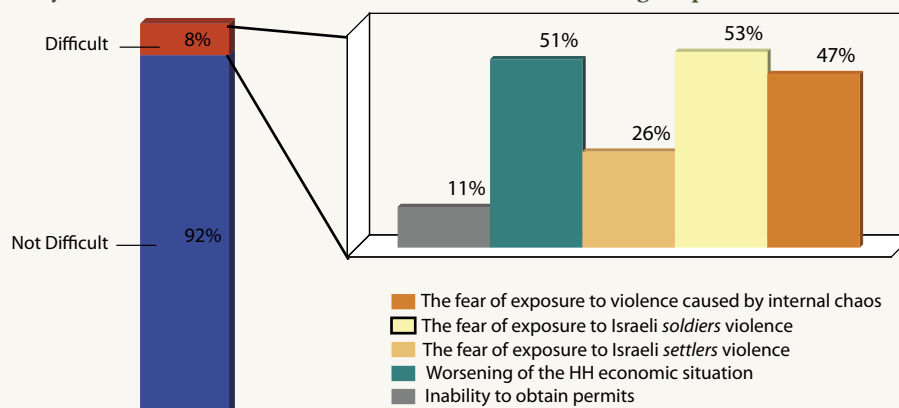
Table 2: Activities for children in the household during their spare time

	(6-12)		(13-18)	
	Yes	No	Yes	No
Attend clubs	9.7	90.3	16.1	83.9
Sports activities	28.6	71.4	34.9	65.1
Hang out with friends	75.2	24.8	73.6	26.4
Hobbies	29.4	70.6	36.5	63.5
Political / cultural seminar	7.4	92.6	15.4	84.6
Playing in the neighborhood	71.8	28.2	47.3	52.7
Attend remedial classes	14.4	85.6	17.4	82.6
Work / employment	1.8	98.2	7.7	92.3
Walking around the streets	7.8	92.2	8	92
Watching television	92.9	7.1	90.8	9.2

How much time they spend on each of the various activities is also an indicator of what opportunities are available, especially in the sense that watching television is almost the only spare-time activity which

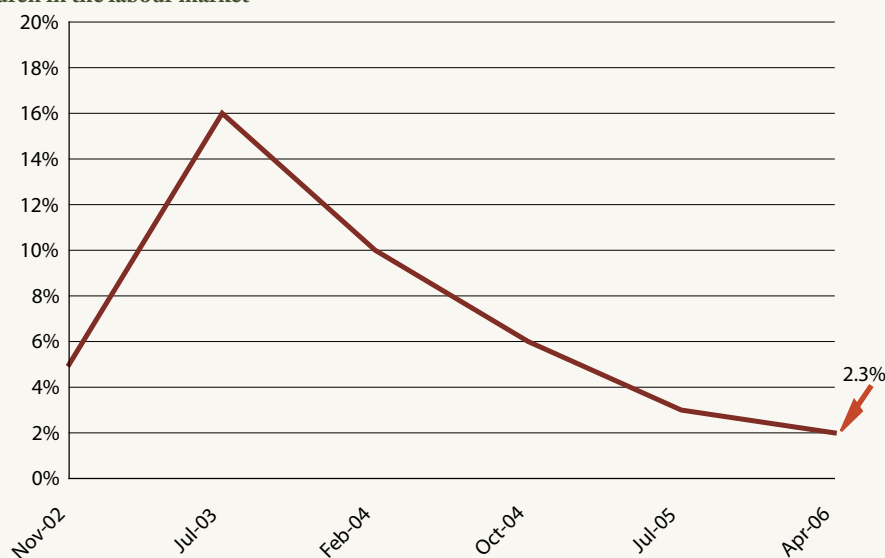
is possible during curfews or when there is a general lack of a safe environment to play and/or socialise with friends outside.¹

Figure 11: Difficulty for children in the household to attend their school during the past 6 months



Of all households with children who experienced difficulty attending school in the six months preceding the survey (8% of households with children of school age²), the fear of exposure to violence by Israeli soldiers (53%) is the most frequently mentioned obstacle preventing the children attending school, followed by the worsening of household economic situations (51%) and the fear of exposure to violence caused by the lack of internal Palestinian security (47%). Over one-quarter of these households also indicated the fear of exposure to violence by Israeli settlers as an obstacle, and 11% pointed to the inability to obtain permits to move within the West Bank as an obstacle as well.

Figure 12: Children in the labour market



Notwithstanding the fact that over half of the households with children who experienced difficulty attending school indicated the worsening economic situation of the household as a main obstacle, it is important to highlight the fact that the ratio of households with school-aged children entering the

¹ The amount of time spent in different activities should be taken into account in order to substantively evaluate children's use of time should be considered in subsequent polls,. For example, the percentage of children who attend remedial classes in both age groups (14.4% and 17.4% respectively) is rather high. In the next poll, more detailed information on the attendance of remedial classes should be collected in order to establish links with the need for help with homework and satisfaction/dissatisfaction with the quality of teaching and the curriculum.

² Between 6 and 18 years old.

labour market has decreased by 1% in 2006 (3% in 2005 to 2% in 2006). Though this represents a rather marginal decrease, it indicates a continuation of the positive trend observed after the alarming increase in child labour in 2003, where 16% of interviewed households reported that children in the household were forced to enter the labour market in response to economic hardship. In 2006, 1% of the households living above the poverty line reported using this coping strategy compared to 11% in 2003.

Regarding the issue of stress felt by children in the household, the survey provides an indicator of how this evolved over time since 2005, and what are its manifestations in the behaviour of the children. Of all the respondents, 60% indicated that the level of stress felt by children in the household has increased since 2005 (25% said it increased and 35% said it greatly increased) while over a quarter indicated the level of stress remained the same as before³ and approximately 12% indicated it decreased or greatly decreased. Comparing types of areas, no significant difference are found between camp, city and village dwellers with regard to increases in stress; however, with regard to decreases in stress felt by children, more camp-dwellers (17%) indicated a decrease when compared to city and village dwellers (12% and 8% respectively).

The physical and social manifestations of stress were reported in the ninth Palestinian Public Perceptions report. The reported signs of stress in children were anxiety (62%), aggressive behaviour (38%), bad school results (48%), lack of interest in socialising (17%), lack of interest in cultural/social/sport activities (28%), bedwetting (21%) and nightmares (27%). It was further reported that no consistent and systematic differences were observed across any of the main sub-groups in question.

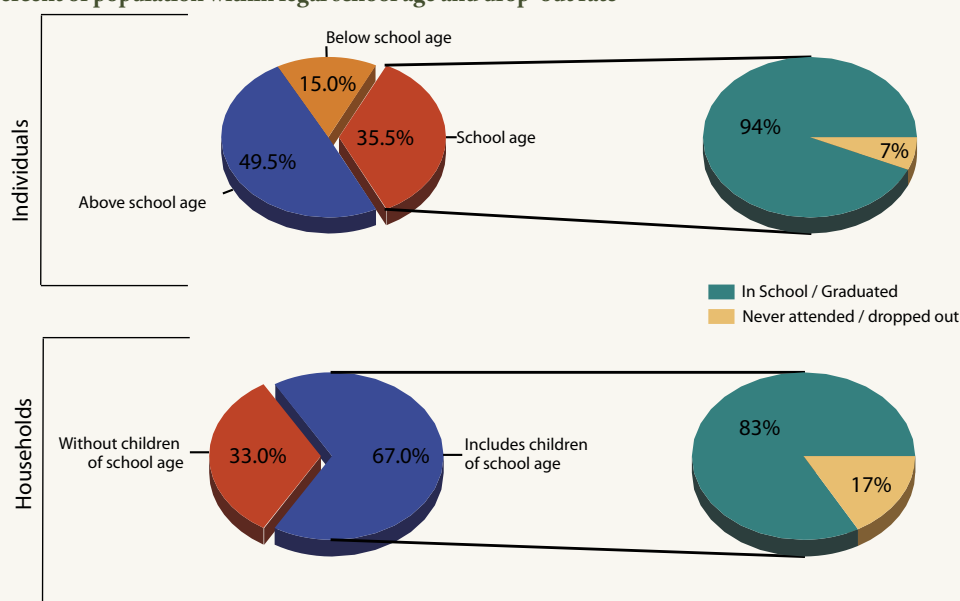
Between 2005 and 2006, some differences have been recorded in the manifestations of stress on children which can be mainly summarised as an 8% decrease in bad school results (40% in 2006), a 4% increase in the lack of interest in socialising with friends (21% in 2006) and a 7% increase in nightmares (34%).

Regarding the respondents' perceptions on the best methods to discipline children, 81% believe that explaining to children how their behaviour is wrong is the best method of discipline, whereas 9% advocate depriving children of things they like; both physical punishment and shouting at the children were each quoted by 5% of the respondents. These perceptions vary across age, education and gender of the respondents. Older respondents are less likely to believe that depriving children of things they like (4%), physical punishment (3%) and shouting at the children (3%) are appropriate methods of discipline than younger respondents. Respondents with medium educational attainment are the least likely to believe that explaining to children how their behaviour is wrong is the best method of discipline (80%) and the most likely to advocate depriving children of things they like is the best method of discipline (11%). Conversely, respondents with low educational attainment are most likely to believe that physical punishment is the best method of discipline (7%) while respondents with high educational attainment are most likely to believe that shouting at the children is the best method of discipline (6%). Finally, male respondents are more likely to believe that explaining to children how their behaviour is wrong is the best method of discipline than female respondents (86% male vs. 76% female), and are less likely to believe that depriving children of things they like (6% male vs. 11% female), physical punishment (5% male vs. 6% female) and shouting at the children (3% male vs. 7% female) are appropriate methods of discipline than female respondents.

³ With over one-quarter of the respondents indicating the stress felt by children to be "the same" as before, an important consideration for any subsequent surveys is the necessity to try to establish baseline against which these comparisons can be explained.

4.3 Education

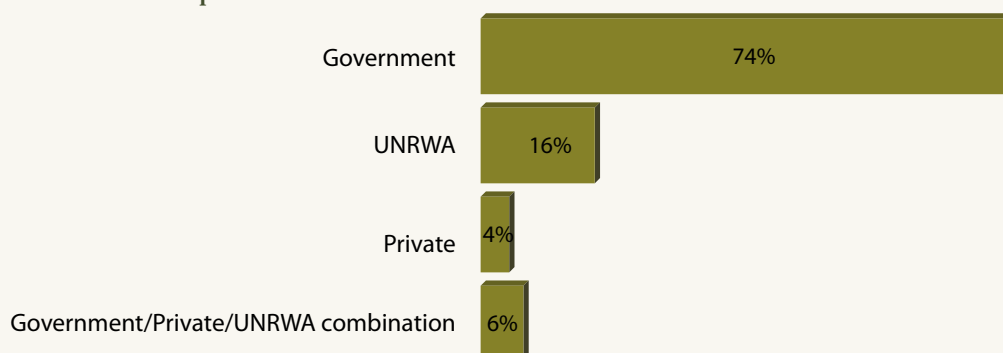
Figure 13: Percent of population within legal school age and drop-out rate



Of the 35.5% of the Palestinian population who are of legal school age, 7% are reported to have either dropped out of school or have never attended school at all. However, of all the households, 67% include children of legal school age - 17% of which include children who have either dropped out of school or never attended school at all.⁴

Attempting to understand the causes of drop-out for Palestinian children, it is revealed that no direct relationship is observed between dropping-out and poverty at the household level.

Figure 14: Education service provider – for individuals enrolled in school



Nearly three-quarters of all individuals attending school at the time of the survey receive their education in government schools. Private schools provide education for 4% of enrolled individuals while UNRWA provides education for 16% of enrolled individuals. Another 6% reported receiving their education from a combination⁵ of service providers. Table 3 below displays the ratio of registered refugee, non-registered refugee and non-refugee enrolment in government, UNRWA and private schools.

⁴ The discrepancy between the individual and household figures is explained by the fact that in most households where there is a drop-out, other children in the household remain enrolled in school.

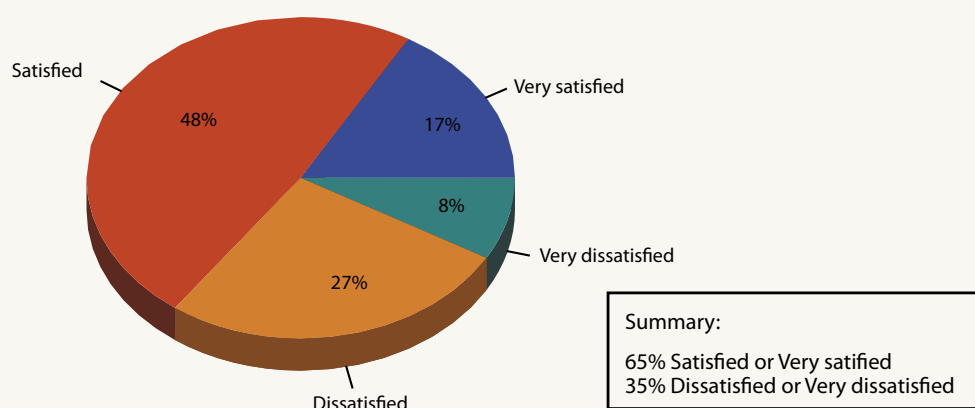
⁵ In some cases where access to UNRWA schools is problematic, UNRWA has a special agreement with government schools to admit refugee students as part of UNRWA's educational service coverage.

Table 3: Refugee status – by education provider

	Registered refugee	Non-registered refugee	Non-refugee
Government School	21%	2%	76%
UNRWA School	93%	1%	6%
Private School	32%	1%	66%

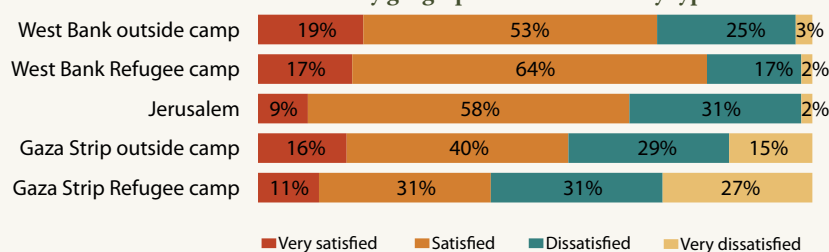
4.3.1 Satisfaction with the quality of education of children in household

Figure 15: Satisfaction with children's education



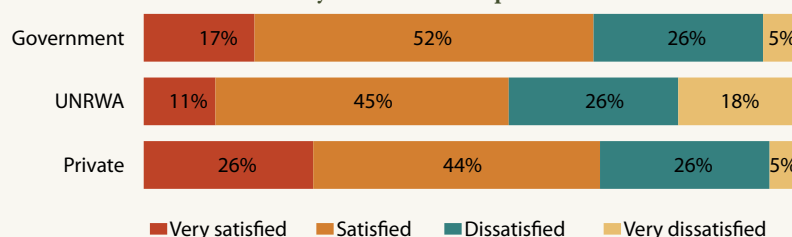
Overall, it can be seen that almost two-thirds of the respondents are satisfied or very satisfied with the quality of education, and just over one-third are dissatisfied or very dissatisfied. The level of general satisfaction with children's education varies across region of residence and type of locality as well as the refugee status of the respondent and the main education provider.

Figure 16: Satisfaction with children's education - by geographic area and locality type



Geographic area and locality type is clearly a factor affecting satisfactory provision of education services. Satisfaction is highest in West Bank refugee camps, and lowest in Gaza Strip refugee camps; next highest is the West Bank outside camp and next lowest is the Gaza Strip outside camp. Furthermore, 10% more refugees (41%) are dissatisfied with the quality of education than non-refugees (31%).

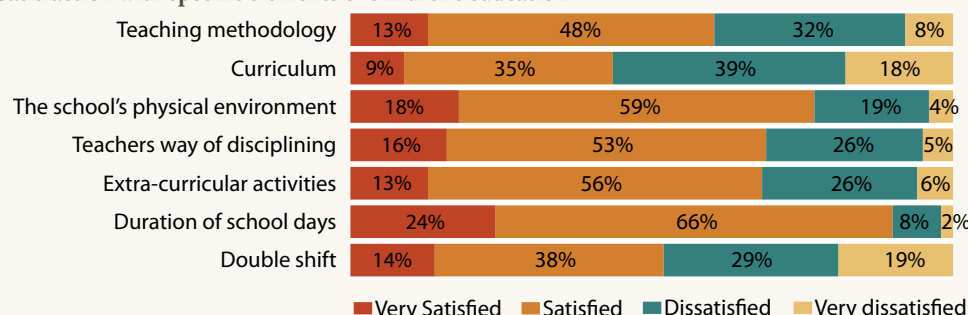
Figure 17: Satisfaction with children's education – by main education provider



Overall satisfaction is highest and almost the same for the private sector (70%) and government provision (69%) and least with UNWRA provision (56%).

Moreover, respondents were asked to provide their level of satisfaction with specific elements of their children's education. Satisfaction is highest with the duration of the school days (90%) and the schools' physical environment (77%), and lowest for the curriculum⁶ (43%) and the double shift system (52%).

Figure 18: Satisfaction with specific elements of children's education



For most of the elements listed in the table below, respondents from households where children attended private schools showed greater levels of satisfaction, followed by households with children attending government schools. Specifically, the elements which were best rated for the private schools were teaching methodology, curriculum, physical environment and methods of discipline. UNRWA was best rated for the duration of the school days and the double shift system. The highest ratio of respondents who are dissatisfied is in households where children attended UNRWA schools, with 74 % indicating dissatisfaction with the curriculum. It must be noted, however, that as a matter of policy, the curriculum taught in UNRWA schools is the same as that used by the Palestinian Authority.

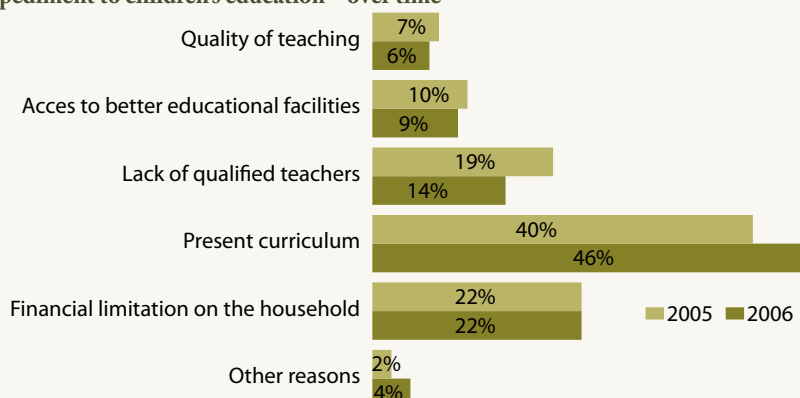
Table 4: Satisfaction with specific elements of children's education – by education provider

		Satisfied	Dissatisfied
Teaching methodology	Government	62%	38%
	UNRWA	53%	47%
	Private	66%	34%
The curriculum	Government	49%	51%
	UNRWA	26%	74%
	Private	53%	48%
The school's physical environment	Government	77%	23%
	UNRWA	72%	28%
	Private	90%	10%
Teachers way of disciplining	Government	70%	30%
	UNRWA	68%	32%
	Private	76%	24%
Extra-curricular activities	Government	70%	30%
	UNRWA	66%	34%
	Private	61%	39%
Duration of school days	Government	91%	9%
	UNRWA	92%	8%
	Private	83%	17%
Double shift	Government	49%	51%
	UNRWA	66%	34%
	Private	50%	50%

⁶ Although 57% of the respondents indicated their dissatisfaction with the curriculum, only 46% declared the curriculum to be the *main* impediment to children's education.

4.3.2 Main impediment to the education of children in household

Figure 19: Main impediment to children's education – over time



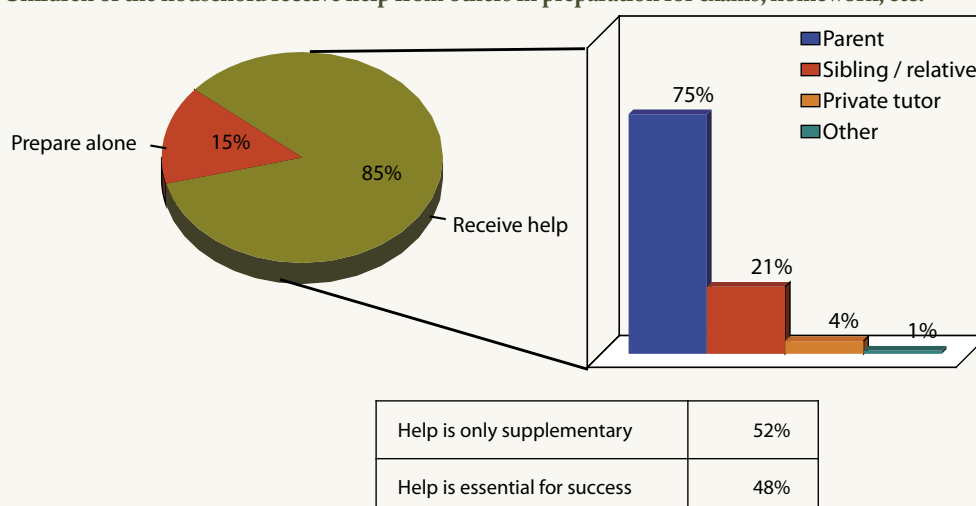
Generally, the present curriculum is described by 46 % of the respondents as the main impediment to children's education. The item "present curriculum" would apply to the new Palestinian curriculum in Grades 1-11, and the Egyptian (Gaza) and Jordanian (West Bank) curricula in Grade 12. The current survey does not explore what respondents mean when they respond that they are satisfied with the curriculum (its content, scope, relevance, preparation for employment, preparation for further study, etc.). However, the Palestinian Curriculum Development Center (PCDC) has received feedback from various sources which shows that there is a high degree of support and satisfaction with the Palestinian curriculum. Criticisms which have been made refer to content overload, or incomplete information about Palestinian history and geography since 1948, or that the curriculum is too secular and Westernised.

4.3.3 Receipt of help in preparation of school work, its necessity and the main education provider

The vast majority (85%) of children receive assistance in preparations for their school work (exams, homework, etc...). Of those indicating receiving assistance, three-quarters said one of the parents provides the assistance, 21% said a sibling or a relative provides the assistance and only 4% receive assistance from a private tutor.

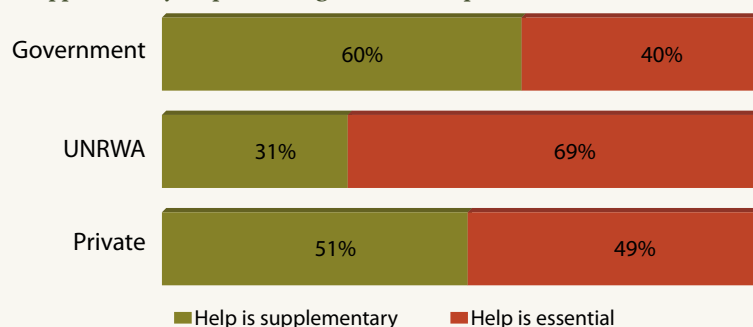
If either the curriculum or a lack of teaching quality are impediments to education, the need for the home to help in preparation of school work might be a compensation, or it might reflect the high priority which Palestinian parents give to the educational needs of their children.

Figure 20: Children of the household receive help from others in preparation for exams, homework, etc.



Of those indicating receiving assistance, 48% said the help is essential for the children's success in their education while 52% believe it is only supplementary. There is no statistically significant relationship between dissatisfaction with the curriculum and receipt of help in the home, but if the curriculum and teaching were completely satisfactory for all parents, there would be 0% response to help being essential.

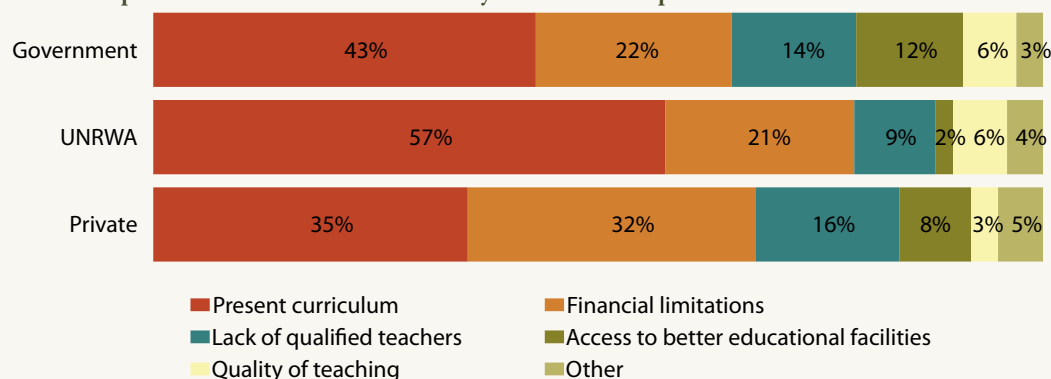
Figure 21: Necessity for supplementary help according to education provider



Comparing the perceptions on the necessity of assistance in schoolwork with the main educational provider reveals that the prevalent perception of respondents from households where the children attend UNRWA schools is that help is essential for the success of children in their education (69%), whereas 51% of respondents from households where the children attend private schools and 40% for those attending government schools said the help was supplementary. Comparing the perceptions of whether the school the children attend prepares them adequately for their future reveals that, on average, 30% of the respondents believe the school prepares them adequately, 47% believe the school prepares them only to a certain extent and 23% believe the school does not prepare them adequately. Differences across refugee status reveal that only a quarter of refugees believe the school prepares the children adequately compared to one-third of non-refugees.

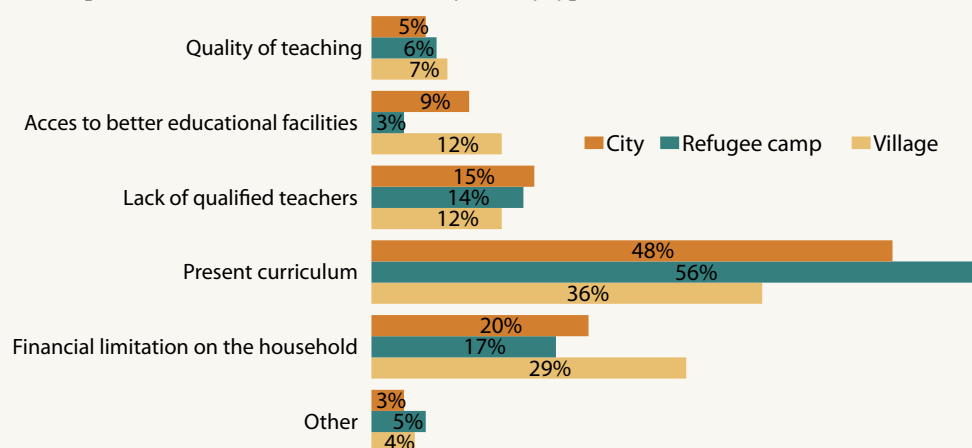
Nearly one-quarter of the respondents described financial limitations on the household as a main impediment to children's education. Comparing those who indicated financial limitations as an impediment to children's education to the presence of children who dropped out of school in the household reveals a statistically significant relationship, as 27% of the respondents from households that include dropped-out children mentioned financial limitations as a main impediment to children's education. This represents a 5% increase from the average response and a 6 % increase from households without drop-outs. Furthermore, three times as many households with drop-outs (6%) indicated that children under 18 years old entered the labour market to relieve economic hardship when compared to households without drop-outs (2%). Since a direct comparison between households with drop-outs and their relation to the poverty line reveals no statistically significant relationship, it is possible that the children who dropped out contribute to the household income and thus alleviate them from living in poverty.

Figure 22: Main impediment to children's education – by main education provider



It can be seen from the above that greatest dissatisfaction with the curriculum comes from those whose children attend UNRWA schools, followed by government, and, finally, private schools. Normally one would expect poor teacher qualifications and a lack of competence in delivering the curriculum to reflect dissatisfaction with the curriculum itself, but a lack of qualified teachers turns out to be less of a problem in UNRWA schools than in government schools. Due to the concentration of refugees in the Gaza Strip, dissatisfaction with the curriculum will statistically be greater in the Strip than in the West Bank, and least in Jerusalem.

Figure 23: Main impediments to children's education – by locality type



Comparing the responses on the main impediment to children's education from different locality types, major differences are found in responses on access to better educational facilities, the curriculum and financial limitations. In refugee camps, only 3% of respondents described their lack of access to better educational facilities as the main impediment. This ratio increases to 9% in cities and 12% in villages. The curriculum is considered a main impediment by the majority of respondents from refugee camps (56%) whereas this ratio drops to 48% in cities and 36% in villages. Over one-quarter of the respondents from villages (29%) consider the financial limitations of the household as a main impediment to children's education, compared to 20% of respondents from cities and 17% of respondents from refugee camps.

Table 5: Main impediment to children's education – by age of respondent

	18-24 years old	25-34 years old	35-49 years old	50 years and older
Quality of education	6	8	5	3
Access to better educational facilities	10	8	11	5
Lack of qualified teachers	19	13	13	15
The present curriculum	45	48	46	38
The financial limitation on the household	18	20	21	35
Other reasons	3	3	4	5

Comparing the perceptions on the main impediments to children's education across wealth groups (relation to poverty line) reveals that the curriculum remains the most frequently mentioned impediment regardless of which group respondents belong to. However, as one might expect, significantly more respondents classified as hardship cases (28%) mentioned financial limitations as the main impediment compared to those below the poverty line (20%) and those above the poverty line (15%).

4.4 Considerations for subsequent research

Key issues to be followed up include tracking trends in the worsening of conditions and how they affect what has been consistently reported as households' top priority - children's education. Issues of gendered perspectives of children's needs in health and education demand further analysis, as well as a more accurate picture of what is found to be unsatisfactory in health and education services, and the curriculum and why.



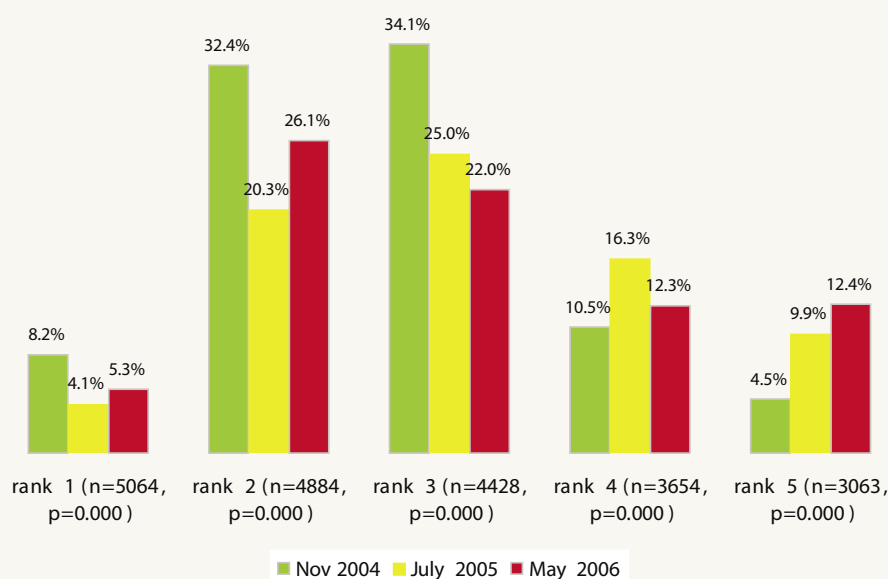
Health

Aziza Khalidi

This chapter contains a description and analysis of findings pertaining to health care needs, the source of health care services and the quality of care collected in PPP 10. The approach to analysing data follows two main tracks: the first is to present an overview of findings pertaining to health service needs, source of care and quality of care; the second is to examine the relationship between needs, source of care and quality by two key socio-economic indicators, income-based poverty and refugee status, while looking at the results by region. This strategy for in-depth analysis is based on findings from preliminary exploratory analyses that show that region is the most powerful correlate with health care indicators. Furthermore, segregation by regions serves to unravel areas where there are statistically significant associations with socio-demographic variables used in the survey. Such area-based findings are designed to contribute towards providing focused information of potential use for programming purposes. The income-based poverty measure will be used in view of its wide scope of associations with health care variables similar to regions which were evident from preliminary analyses in relation to other descriptors of poverty.¹ This income-based measure in the following paragraphs will be referred to as the poverty measure for brevity.

The tenth poll reiterates findings from previous polls, underscoring health care as an important need and a significant household expense item. Comparing polls six to ten, health is increasing in importance as a first and second most important household need. There is a sharp increase between polls nine and ten in ranking of health as the second most important need for assistance at the household level. At the community level, there is a sharp increase in the second-place ranking of health as a priority community need. Regarding household expenditures, health care is increasing in importance. It is among items rated as first and second highest ranking from poll nine to poll ten.²

Figure 1: Ranking of health in household expenditure Nov 2004 – May 2006



This chapter comprises three main sections addressing the following topics: need, source of care and quality of care. The chapter concludes with a wrap-up of main findings and some reflections.

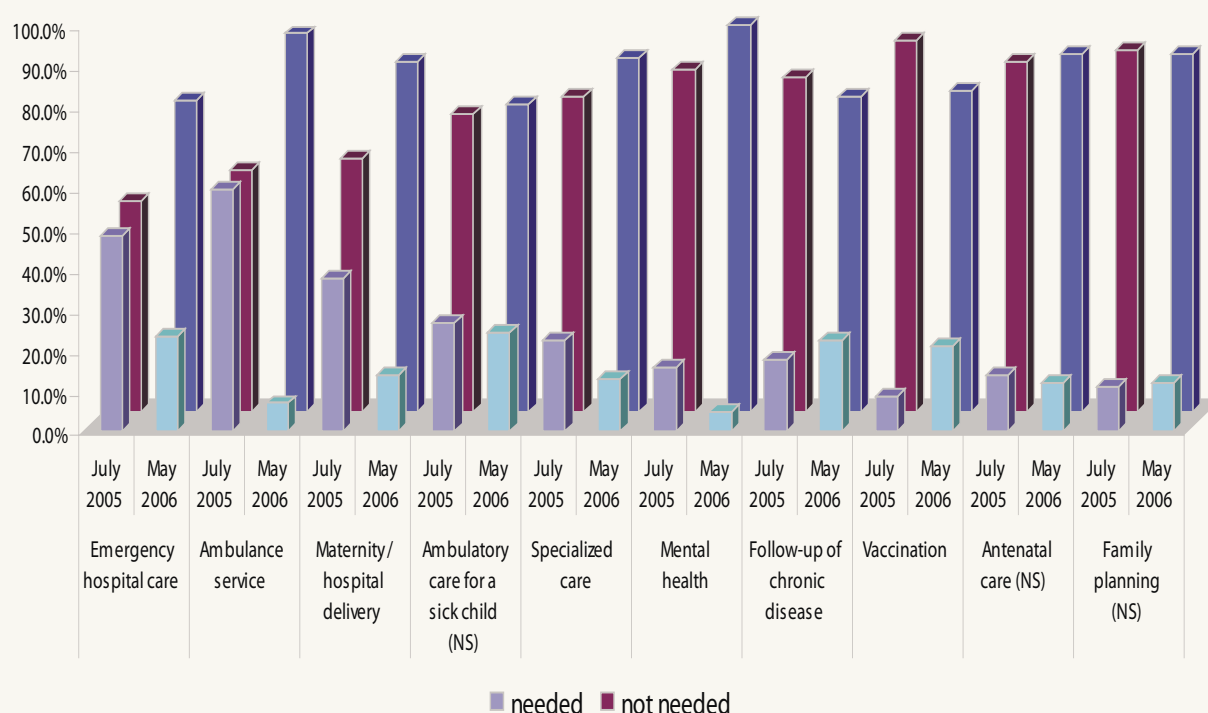
¹ Consisting of the following categories: hardship cases, poverty line, and above poverty line. Categories take into consideration family size

² Regarding access to infrastructure, available information from polls 7 to 9 indicates a decline in the proportion reporting access to a sewage network but an increase in access to a solid waste disposal network. This increase is echoed by comparing polls 9 and 10: solid waste disposal is increasing in importance as an infrastructural need. These findings are outside the direct focus of this chapter but they illustrate general efforts in sustaining a healthy environment.

5.1 Need for health care services

The most sought-after health services during the period covered by the tenth poll are ambulatory care services for sick children, emergency hospital care and follow-up for chronic disease care. Comparing polls nine with ten, there is a significant increase in the reported need for vaccination services and follow-up for chronic disease, while there is a significant decrease in the reported need for ambulance services, maternity/hospital delivery and emergency hospital care. No significant changes are noted between polls nine and ten regarding the need for family planning, antenatal care or ambulatory care services for sick children.

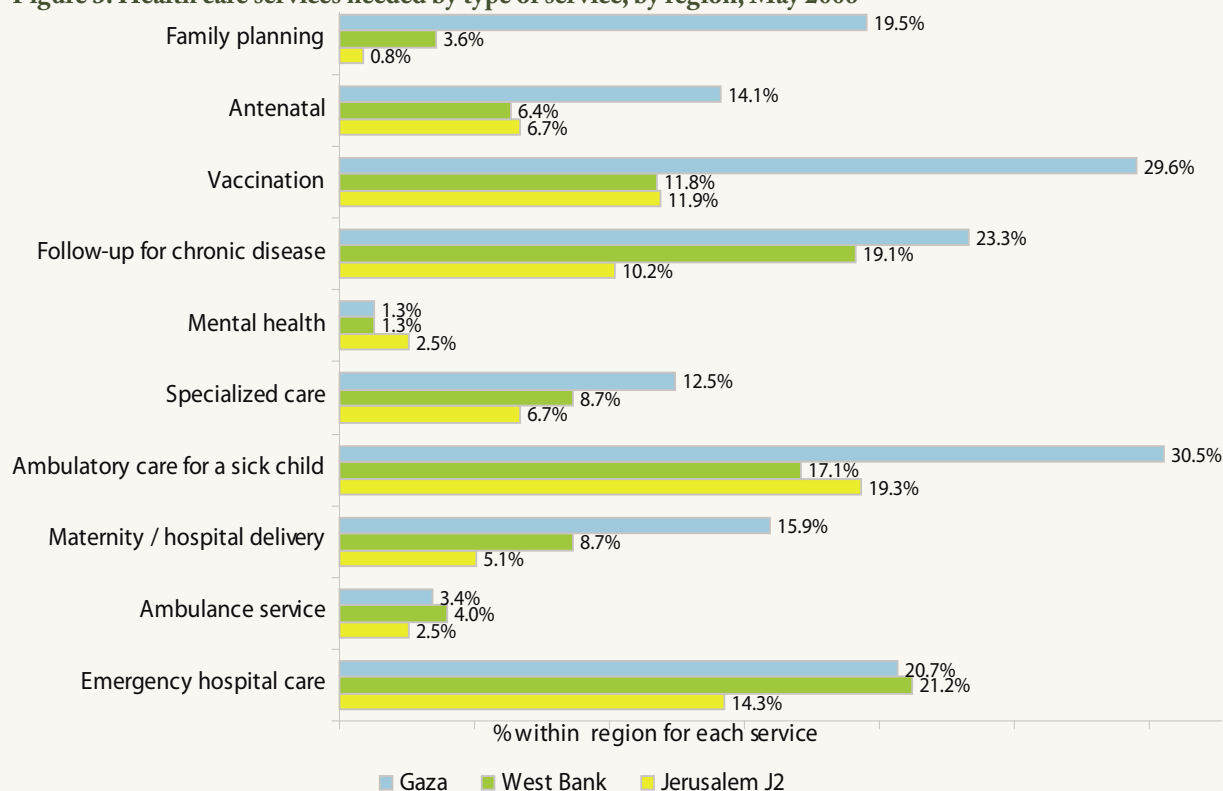
Figure 2: Health services needed vs not needed by type of service – July 2005, May 2006



A highly significant regional variation in the need for health care among all services is apparent. Jerusalem (J1-the annexed area³) is a case in point, where all 56 respondents reported a need for all ten types of services. Excluding this special case of Jerusalem, Gaza has the highest proportion of its respondents needing seven out of ten types of services, namely family planning, vaccination, antenatal care, ambulatory care for a sick child, as well as in maternity/hospital delivery care, follow-up for chronic disease, specialised care. The West Bank has the highest proportion of needed services in emergency hospital care, and ambulance service. Jerusalem J2 (the West Bank area) has the highest proportion of need for mental health services.

³ using PCBS terminology

Figure 3: Health care services needed by type of service, by region, May 2006*

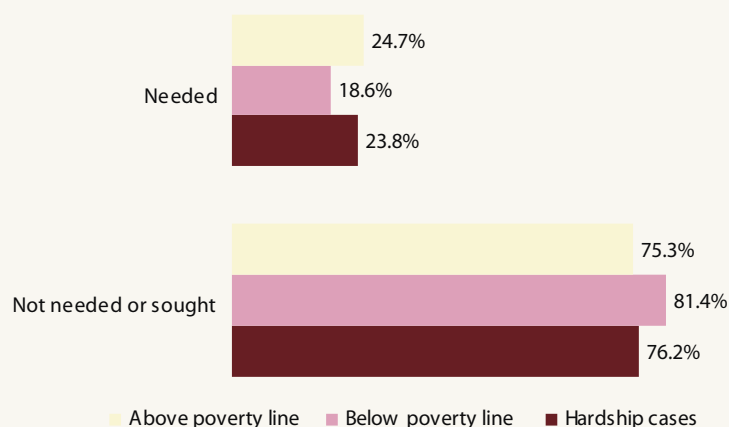


* Jerusalem J1 respondents report 100% need for all 10 services, p=0.000 for all 10 services.

5.1.1 Needs and Poverty

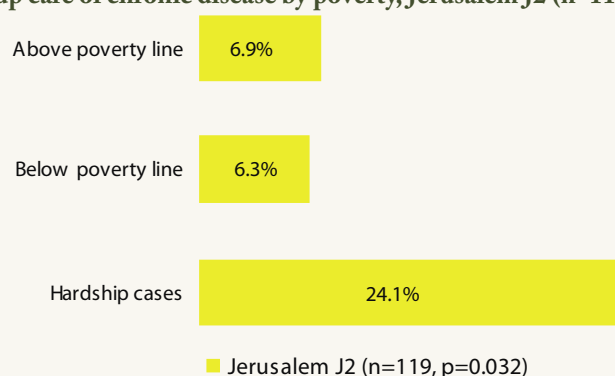
Poverty is significantly related to the need for ambulance services, maternity/hospital delivery care, specialised care services, mental health, follow-up services for chronic disease, vaccination, as well as antenatal and family planning services. The highest proportion needing/seeking these services is among respondents who are above the poverty line. This pattern is consistent, following a response trend indicating a negative association between poverty and need in general. However, in the case of maternity/hospital delivery services, specialised care and follow-up for chronic disease, hardship cases come in second place, following the higher-income category, while the middle-income category tapers behind. However, these associations change when controlling for regional variations.

Figure 4: Follow up services for chronic disease needed & not needed by income based poverty measure, May 2006



Looking at the results by region, a positive association is apparent between poverty and need which is contrary to the trend observed when not controlling for regions for the following services: ambulatory care for a sick child for Jerusalem (J2), specialised care for Gaza and follow-up for chronic disease for Jerusalem (J2) and antenatal care for Jerusalem (J2). Two other patterns are found for ambulance services in Gaza and the West Bank and for vaccination services in Gaza: firstly, for ambulance services in Gaza, the poor are found to need the service the least following the general poverty pattern of relationship with need, while in the West Bank the hardship cases as well as those above the poverty level need the service the least while those below poverty line need it the most; Secondly, for vaccination services, the highest proportion who need/seek vaccination services in Gaza is among respondents below poverty line followed by those above poverty line while those least in need seek care are the hardship cases.

Figure 5: Needed follow-up care of chronic disease by poverty, Jerusalem J2 (n=119, p=0.032) May 2006

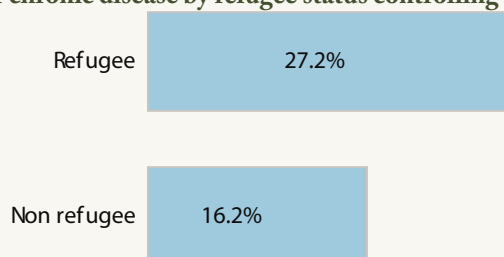


5.1.2 Needs and Refugee Status Stratifying by Region

The need for ambulatory care for a sick child, follow-up for chronic disease and family planning service varies by refugee status. A higher proportion of refugees report needing such services compared to non-refugees.

However, when region is taken into account, more services have a significant association with refugee status and there is no change in the direction of the relationship. A greater proportion of refugees need the services. With regard to emergency hospital care, maternity/hospital delivery, specialised care, vaccination and family planning, the need is higher among West Bank refugees. For follow-up services for chronic disease the need is higher among Gaza refugees.

Figure 6: Needed follow-up for chronic disease by refugee status controlling for regions, May 2006

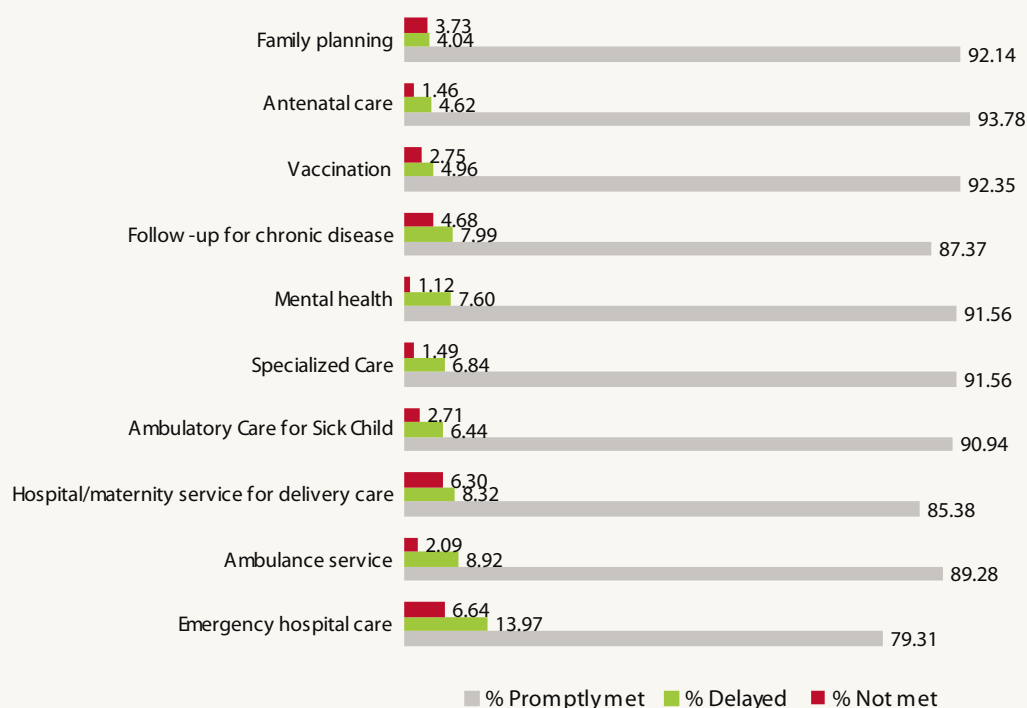


5.1.3 Meeting Needs - Prompt, Delayed and Lack of Service Delivery when Needed and Sought

In general, the majority of respondents report promptness in service delivery when needed and sought. The highest proportion of respondents reporting not receiving care or receiving it after a time limit was in respect of emergency hospital services, followed by maternity hospital service and then follow-up for chronic disease care. Proportions who report unmet need range from 1% for those who seek antenatal and specialised care to 7% for those who seek emergency hospital care and maternity services. Reported

delays in receiving care range from 14% for those who seek emergency hospital care to about 4% for those who seek family planning services.

Figure 7: Promptly received care delayed & unmet need for health services by type of service, May 2006



Jerusalem (J2) respondents report the highest proportion of unmet need in emergency hospital care, followed by the West Bank. The West Bank respondents report the highest proportions of not having needs met in ambulance services, maternity hospital delivery care, in ambulatory care for a sick child, follow-up of chronic health problems, vaccination and antenatal care.^{4,5} A similar pattern is observed for the delay in delivering care across services, a slight variation being that that Jerusalem (J2) has the highest proportion in delay in maternity and hospital delivery services while the West Bank is second. In emergency hospital care, the West Bank reports the most delay, followed by the Gaza Strip.

Lack of service delivery or delayed service delivery is found to be related neither with poverty nor refugee status, and when studied by regions no significant associations were found.

5.2 Reasons for Not Receiving Needed Health Service

Due to small numbers, and in view of the importance of the topic, results pertaining to reasons stated by respondents for not receiving needed health services were pooled across services to examine general patterns. Findings show that respondents point to lack of access due to military barriers⁶ (including the Barrier and military checkpoints) as the most common reason for not receiving health service needed. It is followed by prior unsatisfactory experience with service delivery. The lack of its financial affordability ranks third as a reason for not receiving health services when needed.

⁴ For other services similar patterns are observed but the relation is not found to be statistically significant.

⁵ This is a result of bivariate analysis.

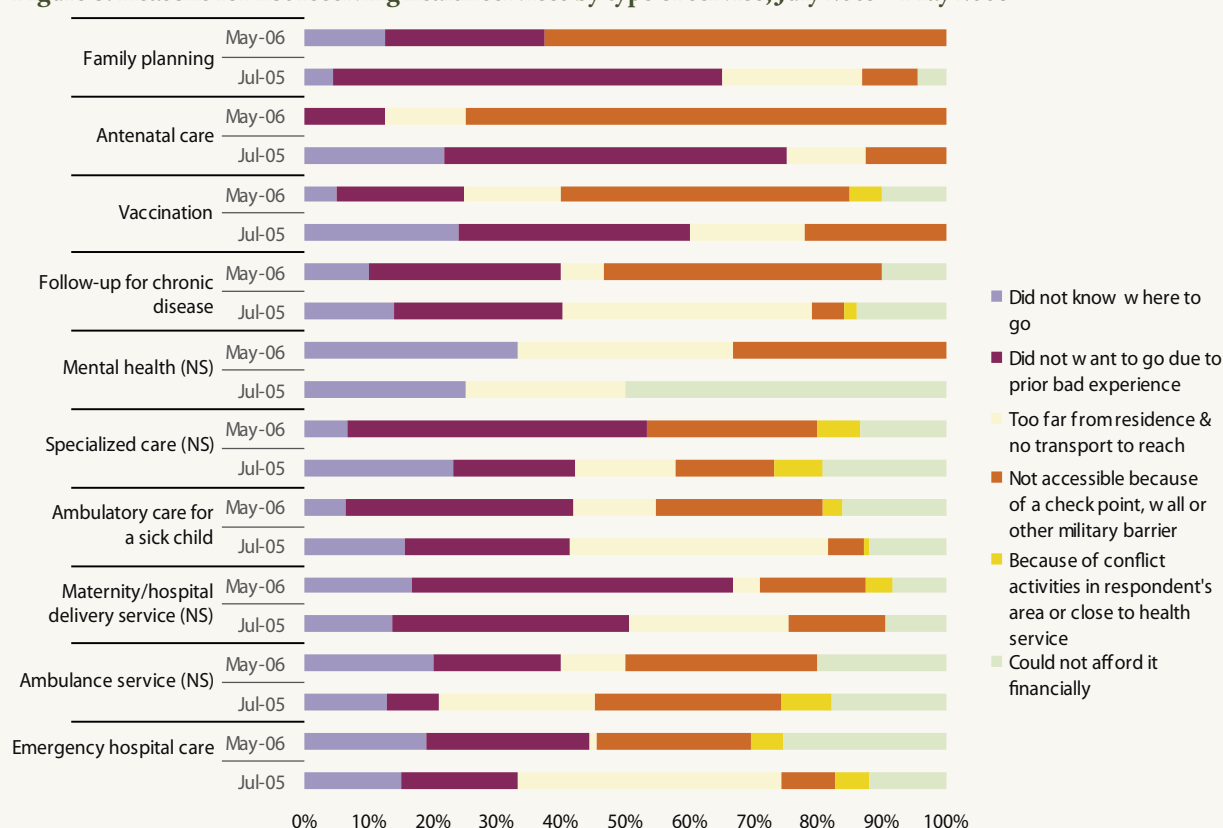
⁶ Question 79 in the survey questionnaire (p.18): 'Not accessible because of checkpoint, Wall, or other military barrier'.

Table 1 Military Barriers as a Barrier to Health Care by type of Care, West Bank, Gaza, Jerusalem, PPP Survey May 2006

	#	valid %
Emergency Hospital Care	18.00	22.22
Ambulance Service	3.00	33.33
Maternity service for delivery care	6.00	22.22
Ambulatory Care for a sick child	10.00	28.57
Specialised Care	4.00	28.57
Mental Health Care	2.00	66.67
Follow-up for Chronic Disease	16.00	42.11
Vaccination	12.00	50.00
Antenatal Care	9.00	75.00
Family Planning	5.00	55.56

Comparing reasons for not receiving needed health service by type of service with data from the ninth poll, significant changes are found for ambulatory care for sick children and for emergency hospital care, follow-up for chronic disease, vaccination, antenatal care and family planning. The existence of the Barrier and checkpoints is a common reason across services. For emergency hospital care and ambulatory care for a sick child, in poll ten there is an increase in the proportion of respondents mentioning affordability, quality as well as checkpoint, Barrier or other military barriers as reasons for not receiving services.⁷

Figure 8: Reasons for not receiving health services by type of service, July 2005 - May 2006



Bivariate analysis of each of the pooled reasons for not receiving care across services by region indicates that financial reasons and military barriers are the only reasons that exhibit significant regional variations in the West Bank and Gaza.⁸ These two reasons are reported mostly in the West Bank.

⁷ This is tentative evidence in view of small numbers, but it indicates the pervasiveness of the 'barrier' reason across services.

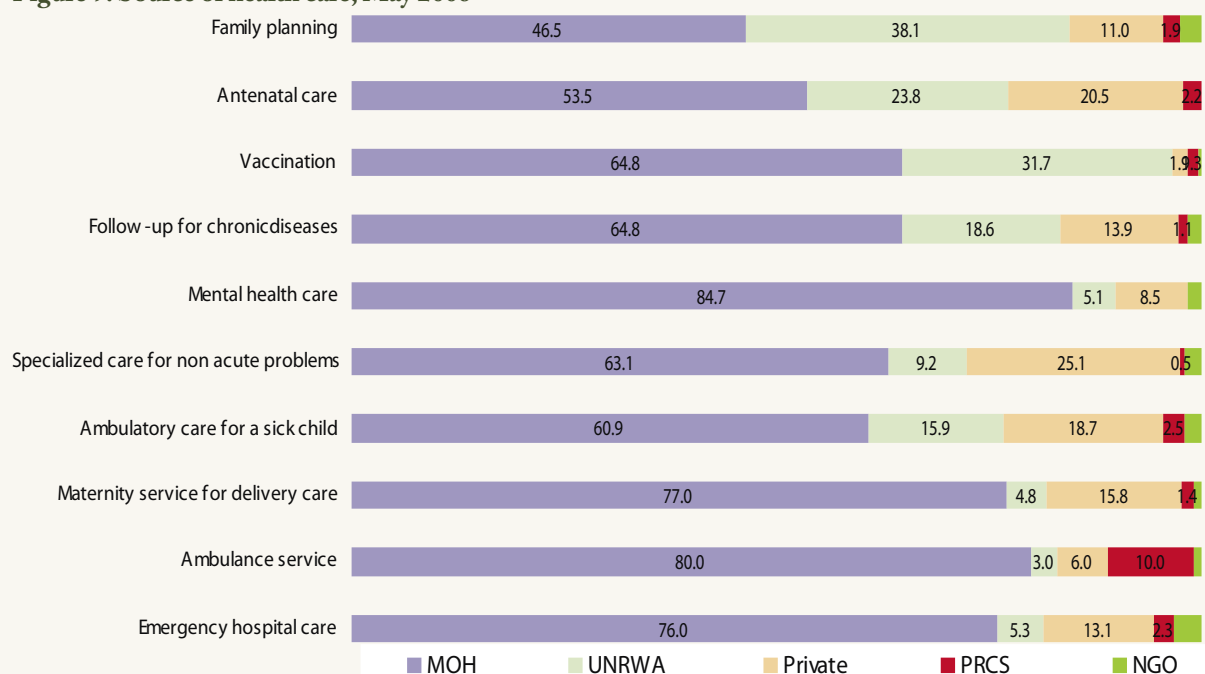
⁸ For Jerusalem (both J1 & J2) neither financial nor military barrier considerations are mentioned.

In general, the military Barrier (wall and checkpoints) exhibits a significant relationship with poverty.^{9,10,11} However, when stratifying by region, the effect of poverty disappears. In conclusion, the barrier/wall and checkpoints) appears to be an important reason for not receiving health care services, especially for the West Bank.¹²

5.3 Sources of Health Care Services

For PPP 10, the three major providers of health services are identified as the Ministry of Health (MOH), UNRWA and the private sector.¹³ The MOH is predominant among the three major providers. It has the highest proportion of respondents reporting it to be a source of service for all health services examined in the survey. UNRWA is the second major source of service for family planning, antenatal care and follow-up for chronic disease. The private sector is the second major reported provider of health services for specialised care for non-acute cases. In the case of ambulatory and antenatal care for sick children, UNRWA and the private sector share approximately similar proportions behind the Ministry of Health (MOH).

Figure 9: Source of health care, May 2006



⁹ (p=0.03).

¹⁰ The Separation Barrier is the most significantly related reason with the level of education of respondents. Respondents with the lowest education level mostly mention the Barrier. When stratifying by region, the West Bank is the region with the most significant variation (albeit border line p=0.058) and the highest proportion reporting is among respondents of the lowest educational level. However, education might be in this case a proxy of location and poverty. In the West Bank villages have the highest proportions of those with the lowest educational level. Moreover West Bank villages are among the poorer section of the West Bank population.

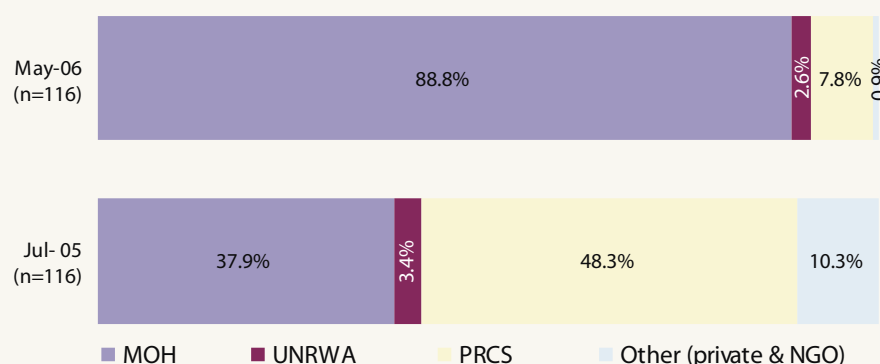
¹¹ The more deprived hardship cases and respondents whose incomes are less than the poverty line report that reason more frequently for one service and for more than one service than those above the poverty line.

¹² There was no association with education of respondent even after stratifying by regions. However, only men in Gaza cited 'did not know where to go'. The evidence is tentative since the numbers are small although the relationship is significant.

¹³ NGOs and PRCS categories were not included in the in-depth analysis of sources of care because of the relatively low share across services that preclude meaningful statistical interpretation following stratification by region. One price paid is the omission of PRCS's 10% share as a source of ambulance services. The contribution of the private sector is worth examining despite its merging with NGOs in order to arrive at formal conclusions that are specific to that sector, however preliminary. Yet issues pertaining to the importance of PRCS, and NGOs in general, will be tackled during interpretation of the results.

Comparing polls nine and ten (July 2005 and May 2006 respectively), the Ministry of Health is increasing its share as the major source of care for all services except emergency hospital care, where there is no change, and vaccination, where its share decreased. A decline in the share of the private/NGO sector as a reported source of care is apparent, especially in maternity hospital delivery services. In general, UNRWA's share is relatively stable. However, there is an increase in its share of three services: care of sick children, specialised care and vaccination. A noticeable decline is observed in the share of UNRWA's mental health-care services as a source of care. It is noteworthy that the Palestinian Red Crescent Society (PRCS) receded from its prior lead as a reported source of ambulance services in poll nine.

Figure 10: Source of ambulance service PPP surveys, July 2006, May 2006 (p= 0.000)

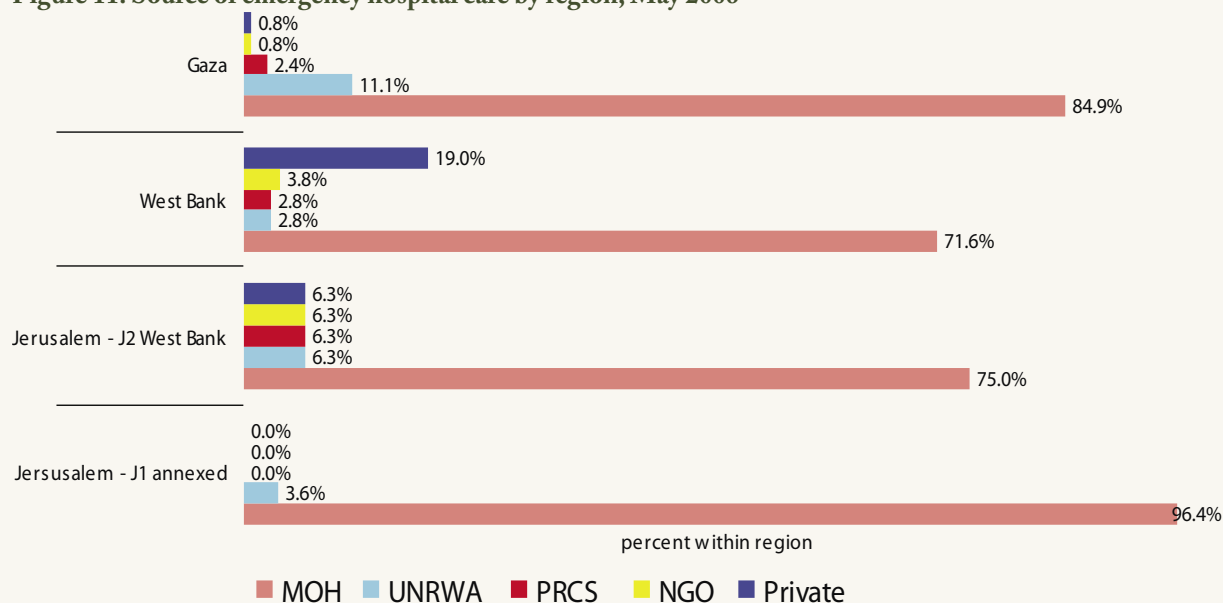


5.3.1 Regional Distribution of Sources of Care

Examining sources of care for all services by region, the MOH is evenly spread as a source of care among West Bank and Gaza, UNRWA concentrates mostly on the Gaza Strip and the private sector is mostly in the West Bank. PRCS and NGOs vary according to services. The following paragraphs provide an overview of the mapping of sources of care across regions.

Jerusalem (J1): The only two sources cited for nine out of ten services are the MOH and UNRWA, the MOH being the predominant provider. PRCS provides specialised care for non-acute cases.

Figure 11: Source of emergency hospital care by region, May 2006



Jerusalem (J2) – For *emergency hospital care* the MOH, the private sector, UNRWA, NGOs and the PRCS are present, but MOH is the predominant source of care cited. Only the MOH is cited as a source of *ambulance services*. For *maternity service and family planning*, the MOH and the private sector are the only sources of care cited, the MOH being the predominant source. For *ambulatory care for a sick child*, in addition to the MOH and the private sector, UNRWA and NGOs are cited as sources of care. For *specialised care for non-acute cases*, NGOs are cited in addition to the MOH and the private sector. For *mental health services*, only the MOH and the private sector are cited. UNRWA is the third source cited for *follow-up services for chronic disease* and *vaccination services* in addition to the MOH and the private sector. For *antenatal care*, the PRCS is cited in addition to the MOH and the private sector.

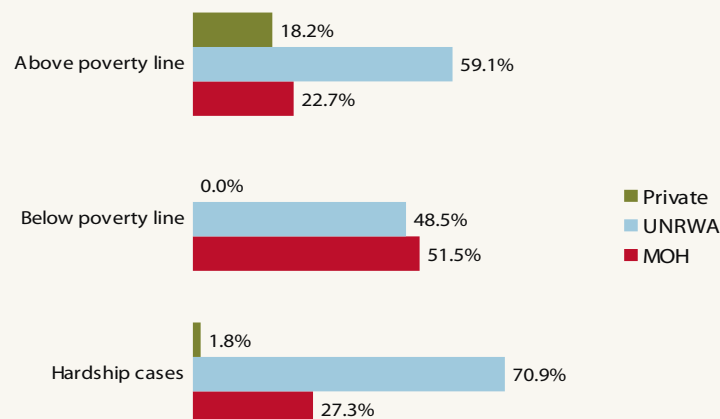
West Bank – All five sources are cited, with the MOH being the predominant provider for emergency hospital care, ambulance services, maternity service, ambulatory care for a sick child and specialised care for non-acute cases, follow-up services for chronic disease, and vaccination. However, for mental health and antenatal care, NGOs are not cited as a source of care and for family planning services. The PRCS is not cited as a source of care.

Gaza Strip – All sources are cited for *emergency hospital care, maternity / hospital delivery services, mental health and family planning services*, the MOH being the predominantly cited source of care. The only two sources cited for *ambulance services* are the MOH and the PRCS. For *ambulatory care for a sick child* there are four out of five sources cited, NGOs not being cited as a source of care. For *specialised care for non-acute cases* and *follow-up services for chronic disease*, the MOH, UNRWA and the private sector are the only cited sources. For *vaccination services*, UNRWA and the MOH are the only sources cited, with UNRWA being the source cited by the highest proportion of respondents in the Gaza Strip. *Antenatal care* includes PRCS as a third source in addition to MOH and UNRWA, again UNRWA is the predominantly cited source of care.

5.3.2 Source of Care and Poverty

Examining the MOH and UNRWA as sources of care in relation to the objective poverty measure, a significant relationship is found in the case of UNRWA and the MOH's provision of ambulance services, ambulatory care for a sick child, specialised services for non-acute cases, mental health, follow-up for chronic disease problems, antenatal care and family planning. A higher proportion of those who cite UNRWA as a source of care are poor compared to those who cite the MOH. For the case of respondents who cite the MOH as a source of care, a 'trough effect' is observed where there is a dip in the category below the poverty line in relation to hardship cases and above the poverty line for ambulance services, ambulatory care for a sick child, specialised care for non-acute cases, follow-up for chronic disease problems and antenatal care. Looking at the profiles of those who are below the poverty line, they are found to be to a large extent in the West Bank and living outside camps. An opposite pattern is found for UNRWA users. The MOH appears to be the service of choice for the mainstream population of various income levels while UNRWA provides services to those who are in the lower income brackets.

Figure 12: Source of care (MOH, UNRWA, private), family planning by poverty controlling for regions, May 2006



Analysing the MOH, UNRWA and the private sector and stratifying by regions, significant associations are found among sources of care of varying services and poverty across regions. Services involved are emergency hospital care, maternity/hospital delivery care, ambulatory services for a sick child, vaccination, antenatal care and family planning services. Almost all are in the Gaza Strip, with vaccination and antenatal care in the West Bank. Patterns vary among services and regions.

Regarding the significant association found between the source of emergency hospital care and poverty in the Gaza Strip, more of the poor use the MOH and UNRWA. The private sector is a source of emergency hospital care in Gaza only for those who are above the poverty line. The MOH users of maternity/hospital delivery care in Gaza comprise mostly those below the poverty line and hardship cases. A smaller proportion of those above the poverty line report the MOH as a source of care. UNRWA is only reported as such by hardship cases, and the private sector by those above poverty line.

Regarding the association between among sources of care of ambulatory services for a sick child and poverty in Gaza, the pattern for UNRWA is the reverse of that of the MOH. The MOH is least reported as a source of care by those below the poverty line and most reported as a source of care by hardship cases and those above the poverty line. UNRWA is reported as a source of care mostly for those below the poverty line and is least reported as a source of care for hardship cases. The private sector for this particular service is reported as a source of care by those who are below the poverty line and to a larger extent by those above the poverty line.

There is a significant association between the source of vaccination services and poverty in the West Bank. Patterns vary with the source of care. With the MOH a 'trough pattern' is shown with the dip in the medium category, below the poverty line. A contrary pattern is found for UNRWA: those below the poverty line are the peak users. As for the private sector, none of respondents above the poverty line mention it. Most users of private-sector vaccination services are hardship cases, followed by those below the poverty line. This phenomenon deserves in-depth study.

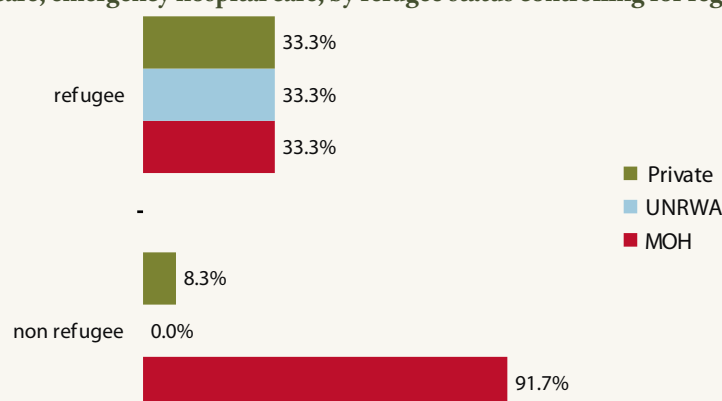
Regarding the significant association found between antenatal care and poverty in West Bank, a 'trough pattern' of reporting is observed for the MOH, while the opposite pattern is observed for UNRWA, as in the case of vaccination services in the West Bank. The private sector is only mentioned as a source of care by hardship cases. This echoes the situation in the West Bank for vaccination services and underscores the importance of investigation of the role of the private sector in vaccination and antenatal care.

Regarding the significant association found between source of care for family planning and poverty in the Gaza Strip, a pattern similar to vaccination and prenatal care in the West Bank is observed for Gaza for both the MOH and UNRWA. However, there is a different pattern for the private sector where it is seen as a source of family-planning care by two out of the three strata: those above the poverty line use it the most and hardship cases use it the least. No mention of the private sector is made by the middle stratum - those who are below the poverty line.

5.3.3 Source of Care and Refugee Status

Significant relationships between source of care and refugee status have been found across services, underscoring the consideration of this relatively easy-to-measure factor as a tool in gauging the performance of several health services in oPt. In general, the identified source of care varies significantly with refugee status for emergency hospital care, maternity/hospital delivery services, ambulatory care for a sick child, specialised care for acute cases, follow-up for chronic disease, vaccination, antenatal care and family planning. The MOH is mostly used by non-refugees, UNRWA by refugees and the private sector by non-refugees. What is noteworthy is the proportion of non-refugees citing UNRWA as a source of care in all the services: 6-11% use ambulatory care for a sick child, follow-up for chronic disease, vaccination, antenatal care and the highest proportion, 11%, among the non-refugees report UNRWA as a source of care for family planning services.

Figure 13: Source of care, emergency hospital care, by refugee status controlling for regions, May 2006



If looked at by region, a significant association between refugee status and source of care is found for emergency hospital care in Jerusalem (J2), the West Bank and the Gaza Strip. Other services involved are maternity/hospital delivery, ambulatory care for a sick child, specialised care, follow-up care for chronic disease, vaccination, antenatal care and family planning services in the West Bank and Gaza.

A significant relationship is found between source of emergency hospital care by refugee status in Jerusalem (J2) and West Bank and Gaza. For Jerusalem (J2), the MOH is the prime provider of emergency hospital care for non-refugees, while less than 10% report private sector assistance. In contrast, refugees report all three sources: the MOH, UNRWA and the private sector. For the West Bank, there is a similar pattern for non-refugees, while for refugees their prime reliance is on MOH services (90%), whereas UNRWA and, to a lesser extent, the private sector have a 10% and less share. As for Gaza, non-refugees use UNRWA services, albeit not that much (less than 10%), in addition to the private sector, while refugees rely, as they do in the West Bank, on the MOH and 15% rely on UNRWA. No refugee in Gaza reports the private sector as a source of emergency hospital care.

There is a significant relationship between the source of maternity/hospital delivery care and refugee status in the West Bank and in Gaza. For both the West Bank and the Gaza Strip, the MOH is the principal provider for both refugees and non-refugees. It is noteworthy to mention that non-refugees use UNRWA maternity services (2.4%) as well as the private sector. Refugees in the West Bank cite the MOH as their principal source of maternity/hospital delivery care, followed by UNRWA. There is no mention of the private sector as a source of care for refugees in the West Bank. In Gaza, patterns are similar to West Bank, but it is noteworthy that there is less reliance on UNRWA. Moreover, non-refugees do not report using UNRWA maternity/hospital delivery services in Gaza. However, they report that they look to the private sector as a source of care when compared to non-refugees in the West Bank.

Ambulatory care for a sick child: There is a significant relationship between sources of ambulatory care for a sick child by refugee status in the West Bank and Gaza. MOH is the source of care for more than 90% of respondents among non refugees the remaining proportion reports private sector followed by UNRWA. However, for refugees UNRWA is the prime source of care for ambulatory care for a sick child in the West bank followed by MOH and 5.03% of refugees rely on the private sector as the source of care. In Gaza there is a generally similar pattern with slight variations. MOH is the main source for non-refugees but it is less than the West Bank. UNRWA has a larger share 12% while the private sector is in the same order of magnitude as in the West Bank. As for Gaza refugees MOH slightly higher than UNRWA thus both have roughly similar shares as source of ambulatory care for a sick child. Non of Gaza refugee respondents mention the private sector in contrast to the West Bank.

Specialised care for acute cases: For the West Bank, non-refugees use the MOH predominantly, while a small percentage uses UNRWA and private sector. West Bank refugees report MOH followed by UNRWA as sources of care 55% and 45% respectively. In Gaza, non refugees report using MOH services as sources of care exclusively while refugees use MOH specialised care predominantly while UNRWA has 23% share as a source of care.

Follow-up care for chronic disease: In the West Bank, non-refugees predominantly cite the MOH as a source of care, with a small margin using UNRWA and the private sector. In the case of West Bank refugees, the MOH and UNRWA have a roughly equal share (UNRWA is two percentage points larger) and the private sector share is minimal but slightly higher than the case of West Bank non-refugees. In the Gaza Strip, non-refugees rely on the MOH as the predominant source of care, however a 12% share goes to UNRWA. As for Gaza refugees, UNRWA is the main source of care followed closely by the MOH. There is no mention of the private sector among refugees.

Vaccination: In the West Bank non-refugee population, the MOH is the predominant provider, with around 5% using UNRWA and the private sector. As for West Bank refugees, UNRWA is the main provider of vaccination. However, the MOH covers more than a quarter of the refugee population, and the private sector covers 5%. Gaza non-refugees cite the MOH as their main source of vaccination care while UNRWA covers 19% of non-refugees. None of the Gaza non-refugees mention the private sector. As for Gaza refugees, UNRWA is the predominant provider (more than 90%) of vaccination care, while the MOH is a source of care for 10% of refugees.

Antenatal care: In the West Bank non-refugee population, the MOH is the predominant (more than 90%) provider of antenatal care. For West Bank refugees, UNRWA is the provider for three-quarters of the refugee population, followed by MOH and the private sector, which covers 5% of respondents. As for non-refugees in Gaza, the MOH is the main source of care but less so than in the West Bank, UNRWA and the private sector each covers 10% of respondents. For Gaza refugees, UNRWA is the major source of antenatal care, having a higher proportion than the West Bank, while the MOH covers around 18%, and the private sector does not figure.

Family planning: Non-refugees in the West Bank use the MOH predominantly and 10% report that UNRWA is a source of care. For West Bank refugees UNRWA covers more than 90% of refugees with the MOH covering around 7% of the refugee population. No mention is made of the private sector for either refugees or non-refugees. For Gaza, the private sector is reported for both non-refugees and, to a smaller extent, for refugees. As in the West Bank, the MOH is the major source of care for non-refugees, with around 20% share for UNRWA, while the reverse is observed for Gaza refugees.

The interplay between the two major sources of care, the MOH and UNRWA, is evident from findings. Both the MOH and UNRWA provide care for refugees and non-refugees. This is of special importance for UNRWA in particular, whose primary mandate is focused on the refugee population. By mentioning UNRWA as a source of care, non-refugees reveal their aspirations to a variety of affordable devices. Refugees have more choices than non-refugees in that respect. Refugees are, by default, beneficiaries of UNRWA services, and in addition they can access government services. The private sector has not played a similar role for the vulnerable non-refugee population - either in the West bank nor in Gaza. The non-refugee population, as our findings show, is essentially restricted to one major option of affordable care -that offered by the MOH. And the current poll findings (regarding the profile of sources of care) indicate that NGOs have even more minimal impact compared to the private sector in terms of volume of services and their individual effect, to such an extent that they were out of the statistical scope of this particular analysis as indicated in the introductory section of this chapter.

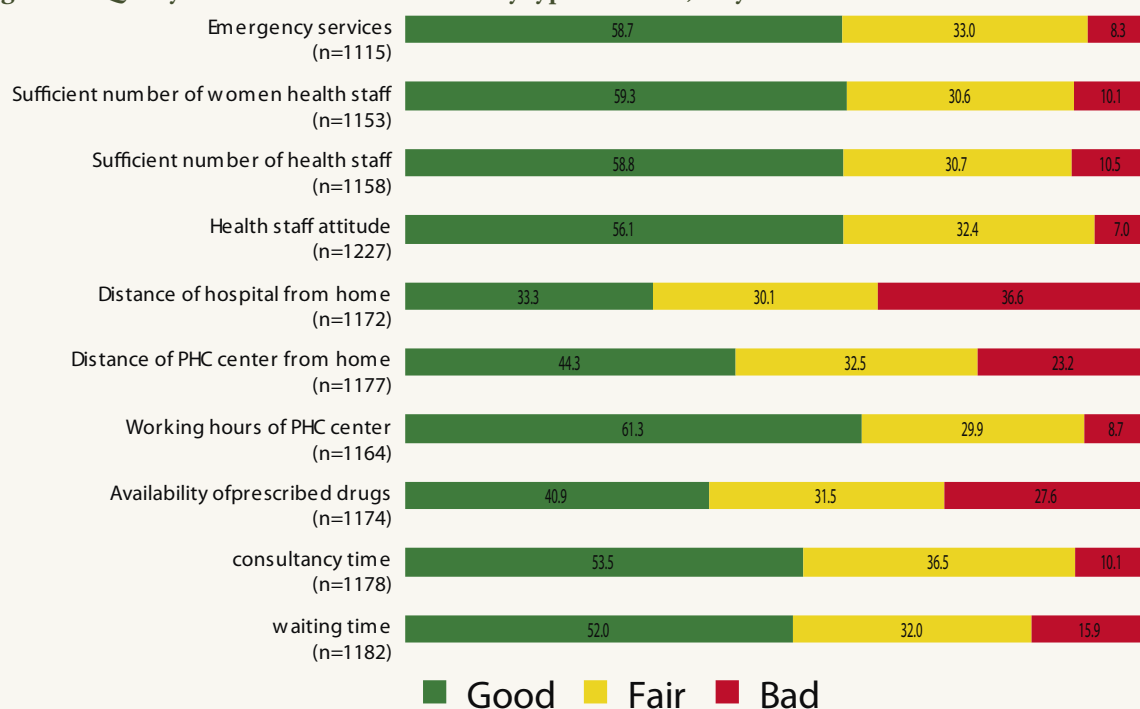
5.4 Quality & Quality Improvement of Health Care¹⁴

5.4.1 Perceptions of Quality of Health Care Services

The working hours of Primary Health Care (PHC) centres are accorded the best quality rating in PPP 10, followed by the number of staff (both general and female). Emergency service has the second largest proportion of respondents giving a 'good' rating. Worst ratings are for distance of hospital from home followed by availability of prescribed drugs, and, finally, the distance of PHC centre from home.

¹⁴ Quality and quality improvement indicators in PPP10 are not service-specific as in the previous poll. This setup has the advantage of providing an overall rating of quality of care. Unfortunately this precludes service specific comparison as well as comparison with the previous poll.

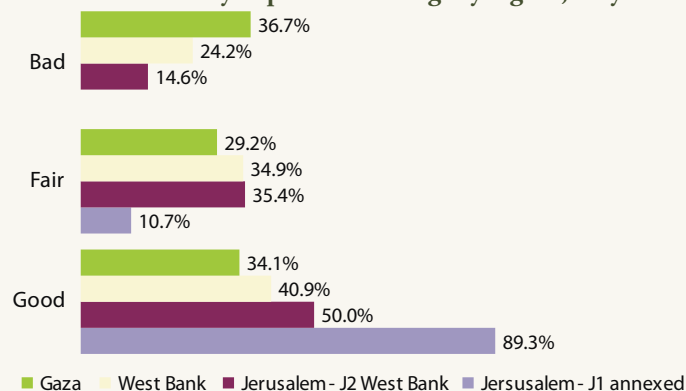
Figure 14: Quality of care – current evaluation by type of service, May 2006



5.4.2 Quality of Care and Region

A significant association is found between region and the quality rating of emergency services as well as the following quality indicators: current evaluation of waiting time, consultancy time, availability of prescribed drugs, working hours of PHCs, distance of PHC from home, distance of hospital from home, health staff attitude, sufficient number of health staff, and of women health staff.

Figure 15: Current evaluation of availability of prescribed drugs by region, May 2006



Jerusalem (J1) has the highest ratings in all items except distance of hospitals from home. Comparing West Bank, Gaza and Jerusalem (J2), the Gaza Strip has consistently highest ratings except for availability of prescribed drugs, where Jerusalem (J2) is the best followed by the West Bank.

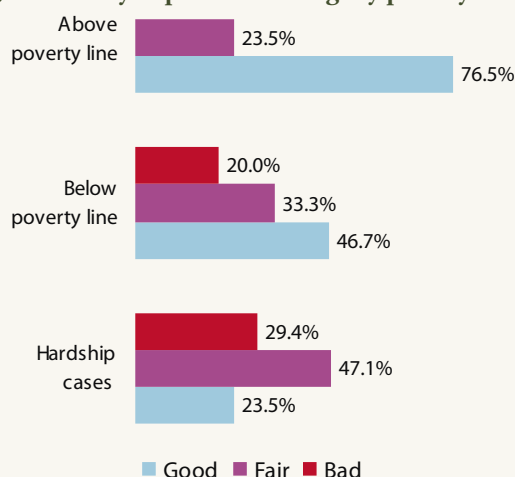
The West Bank has lowest ratings (i.e., the highest proportions of bad ratings) for most quality indicators, exceptions being the availability of prescribed drugs, where Gaza tops the 'bad' list. For distance of PHC and hospitals from home, an adequate number of health staff and, in particular, female health staff, Jerusalem (J2) tops the list of worst ratings.

For emergency services, the top ratings are Jerusalem (J1) followed by Gaza, while the lowest ratings are for the West Bank followed by Gaza.

5.4.3 Quality of Care and Poverty

Significant associations are to be found between quality evaluation measures and poverty in the following areas: waiting time, availability of prescribed drugs, the distance of PHC from home, distance of hospital from home, health staff attitude, sufficient number of health staff, and sufficient number of female health staff.

Figure 16: Current evaluation , availability of prescribed drugs by poverty controlling for regions



It is noteworthy that emergency care is not found to be significantly related to poverty.

The poor have the highest proportion of respondents assigning poor ratings across the above-mentioned areas. Hardship cases predominate, followed by those below the poverty line. In contrast, respondents above the poverty line have the highest proportion of those giving high ratings.

Stratifying by region, several indicators of quality are found to maintain their association with poverty among regions. These are waiting time, availability of prescribed drugs, distance of hospital from home, health staff attitude and emergency services. In general, the poor have the lowest levels of assessment of these quality indicators.

The availability of prescribed drugs is the most prominent quality indicator sensitive to poverty; a significant association is found with poverty in three out of four regions: Jerusalem (J2), the West Bank and the Gaza Strip. The poor - hardship cases or those below the poverty line - have the lowest opinion of this indicator.

The distance of hospital from home, as well as the assessment of emergency services reveals a significant association with poverty in the West Bank and the Gaza Strip, where the poor are least impressed.¹⁵ The relationship of distance of hospital from home with poverty is more accentuated in Gaza, where around 44% of hardship cases give a bad assessment rating.

Waiting time exhibits a significant association with poverty in Gaza, where respondents above the poverty line as well as hardship cases have the highest proportions who give 'bad' ratings.

Health staff attitude exhibits a significant association with poverty in the West Bank where the poor have the highest proportions giving 'bad' ratings.

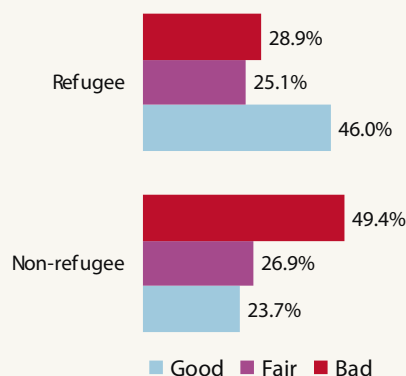
¹⁵ The highest 'bad' ratings.

5.4.4 Quality of Care and Refugee Status

Significant associations are found between quality and refugee status along the following topics: working hours of PHC, distance of PHC from home, and distance of hospital from home, and health staff attitude. Refugees comprise the highest proportion of respondents who give good ratings, while non-refugees have the highest proportions reporting bad ratings & lowest good ratings.

When stratifying by region, significant associations are found between refugee status and working hours of PHCs (Gaza), the distance of PHC from home (Jerusalem (J2), Gaza), and the distance of hospital from home (Gaza). In all those factors a higher proportion of *non refugees* give bad assessments compared to refugees.

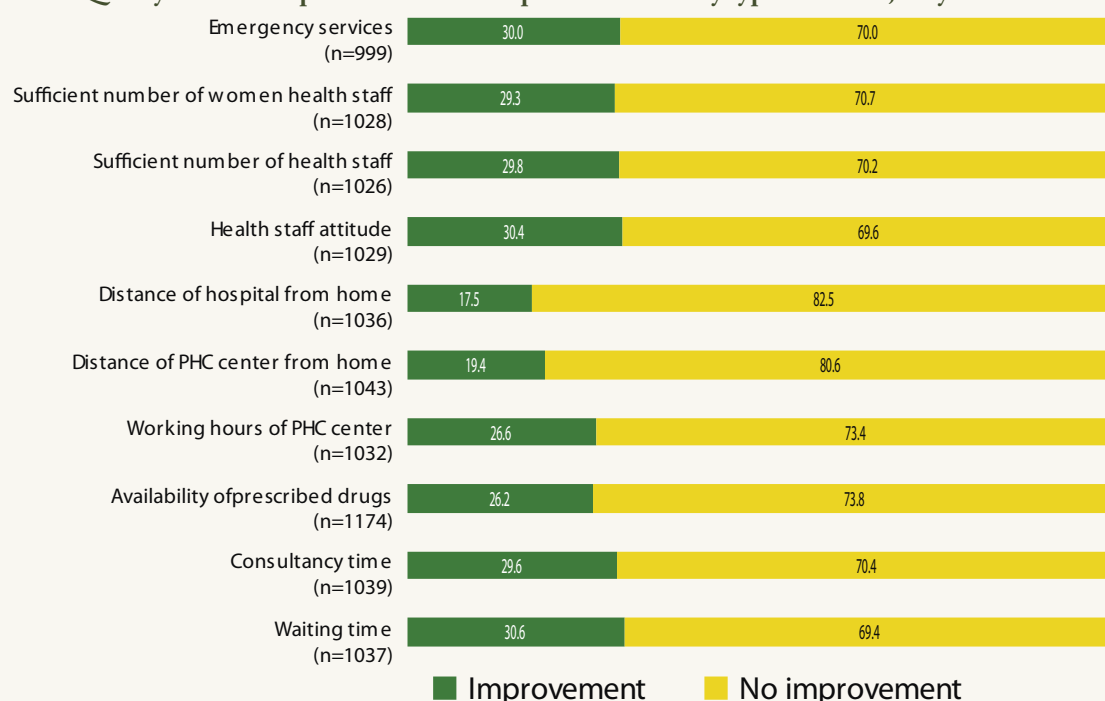
Figure 17: Current evaluation distance of hospital from home by refugee status controlling for regions, May 2006



5.4.5 Quality Improvement

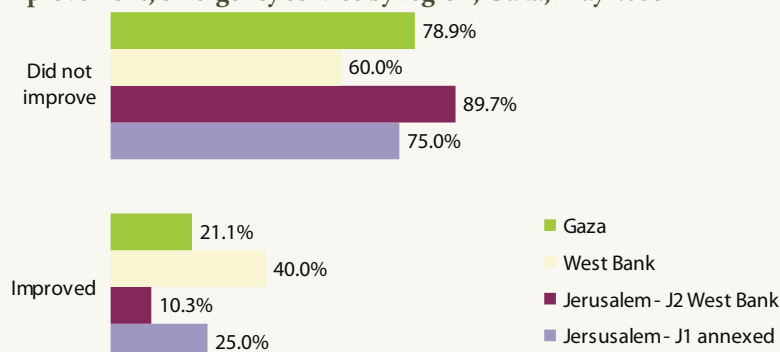
Health staff attitude is the indicator where there is the highest proportion of quality improvement reported across services. Emergency services have the second largest proportion of respondents citing improvement.

Figure 18: Quality of care – improvement over the past six months by type of service, May 2006



Distance of hospitals from home and distance of PHCs from home have the lowest reported proportion of respondents citing improvement. They are followed by working hours (which received the highest quality rating¹⁶) then by availability of prescribed drugs.

Figure 19: Service improvement, emergency service by region, Gaza, May 2006



5.4.6 Quality Improvement and Region

A significant regional variation is found in the perception of an improvement in emergency services as well as several other indicators of quality improvement, namely waiting time, consultancy time, availability of prescribed drugs, working hours, distance of PHC from home, distance of hospital from home, health staff attitude, sufficient number of health staff, and sufficient number of female health staff.

In emergency services, the highest proportion of respondents who cite improvement are located in the West Bank (40%), and the lowest are in Jerusalem (J2) (10%). Across all other quality indicators, the highest proportion citing improvement is among the West Bank respondents.

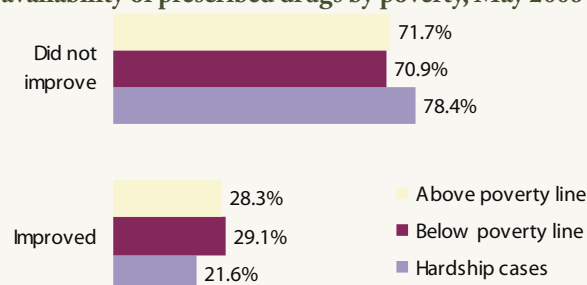
The lowest proportion citing improvement is located in Jerusalem (J2) for the following indicators: waiting time, consultancy time, availability of prescribed drugs, working hours of PHC, health staff attitude, sufficient number of health staff, sufficient number of female health staff.

Respondents from the Gaza Strip have the lowest numbers citing improvement in the following indicators: distance of PHC from home, and distance of hospital from home. (Figure 19)

5.4.7 Quality Improvement and Poverty

The only significant association found between perceptions of service improvement and poverty is in the improvement in availability of prescribed drugs. *Hardship cases* have the lowest proportion who acknowledge improvement and the highest proportion who report lack of improvement. The attitude of respondents below the poverty line and those above the poverty line is very similar. They represent a single category vis-à-vis the hardship cases on the subject of availability of prescription drugs. This deserves more consideration in future programming.

Figure 20: Improvement of availability of prescribed drugs by poverty, May 2006



¹⁶ See previous section.

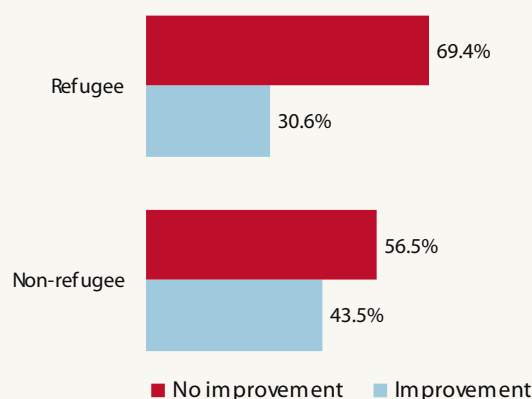
Finally, no indicator of quality improvement is significantly associated with poverty within regions.

5.4.8 Quality Improvement and Refugee Status

Significant associations are found between perceptions of service improvement and refugee status in the following areas: emergency service, waiting time, consultancy time, availability of prescribed drugs, working hours of PHC centre, distance of PHC centre from home, distance of hospital from home, health staff attitude, sufficient number of health staff and sufficient number of female health staff. In general, a larger proportion of *non-refugees* reported improvement across the above-mentioned areas.

In terms of region, significant associations are found between refugee status and perceptions of improvement in emergency services: waiting time, consultancy time, working hours of PHC centres, sufficient number of health staff and health staff attitude in respect of the West Bank And distance of PHC centres and distance of hospitals for Jerusalem (J1). In all cases, *refugees* have worse perceptions of improvement.

Figure 21: Service improvement, emergency services by refugee status controlling for regions, West Bank, May 2006



5.5 Main findings and Conclusions

Healthcare in the oPt is increasing in importance as a household and community priority and as a household expense item.

5.5.1 Needing/Seeking Care

The most needed services are ambulatory care for sick children, mostly in Gaza, emergency hospital care and follow-up for chronic disease care, mostly in the West Bank.

Patterns of association between need for health care and poverty is of varying patterns that are service- and region-specific. A case in point is Jerusalem (J2), where the poor are most in need when seeking ambulatory care for sick children, antenatal care and follow-up for chronic disease compared to those with higher incomes.

5.5.2 Delay and Lack of Receiving Care

Delays in health service delivery vary by type of services and regions. Jerusalem (J2) has the highest proportion reporting delays in maternity and hospital delivery services.

The presence of a checkpoint, the Barrier, or other military barriers is the main reason voiced for not receiving care, and it is on the increase from the previous poll. The effect is mostly felt in the West Bank.

The most important reason for not receiving care is the presence of ‘checkpoint, wall, or other military barrier.’ It is most prominent in the West Bank. This finding is consistent with the association between regions and delay/lack of receiving care, where the West Bank is the region where the unmet need in the three most needed services (emergency hospital care, ambulatory care for a sick child and follow-up for chronic disease) is most pronounced. Comparing polls nine and ten, an increasing proportion of respondents are mentioning military barriers as the main reason for not receiving ambulatory care for a sick child or emergency hospital care services, two of the most needed services.

5.5.3 Source of Care

The Ministry of Health is the provider of health services for the largest portion of the population across income levels. It is followed by UNRWA. Most of respondents who seek UNRWA health services are among the poor. The Ministry of Health is a source of ambulance and mental-health services for a larger proportion of respondents compared to the ninth poll. UNRWA is a source of vaccination care for a larger proportion of respondents compared to the ninth poll. Profiling MOH users and UNRWA users by poverty measures, MOH users below the poverty line adopt the MOH as a source of care to a lesser extent than hardship cases, who may be covered by a safety net. It is possible that the group below the poverty line has fallen through the cracks, i.e., it is has financial barriers to seeking care and is not protected by the safety net offered to those among the hardship cases. The population below the poverty line among MOH users is mostly from the West Bank and lives outside camps. An opposite pattern is found for UNRWA users, where people below the poverty line are peak users. Using several measures of poverty, the MOH appears to be the source of care for the mainstream population of varying income levels while UNRWA provides services to those who are poor.

The above findings underscore the persistence of a lack of variability in sources of health-care services in the oPt. Provision of care is centralised along two organisations (the MOH and UNRWA) with limited contribution by the private sector, the NGO sector or the quasi-public body (PRCS). Regulated choice in sources of care allows a multiplicity of options in case of system shocks. In addition, variety provides an environment of healthy competition for services that would enhance quality. However, there is no specific information in this poll about sources of health care outside the oPt, for example in Egypt, Jordan or Israel. To what extent do households use them, and for what types of services? How do they rate their quality? To what extent do decision-makers in households feel that they have a choice among health care providers?

5.5.4 Rating of Quality of Services

Quality ratings are region-specific. The highest proportions of poor ratings are clustered in the West Bank for most indicators, including emergency services. The poor give the worst ratings in general. Non-refugees have the highest proportions providing bad ratings for several services.

5.5.5 Perceptions of Improvements in Quality of Services

As in quality ratings and most other topics pertaining to health care in the oPt, perceptions of quality improvements are region-specific and vary by refugee status. Most indicators of quality improvement are related to refugee status, while the availability of prescription drugs is the only factor that is sensitive to poverty. The poor and the refugees share negative perceptions on quality improvement.



Population Needs & Assistance Delivered

Matthias Brunner • Céline Calvé
with assistance of Costanza Pasquali Lasagni

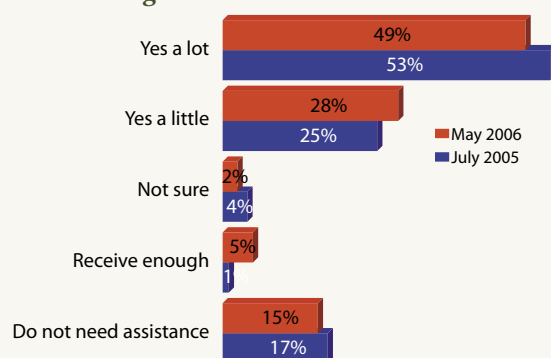
This chapter examines the assistance provided to the Palestinian population. It begins by looking at the needs of the population both at the household and the community¹ level, and it continues with an examination of the type of assistance delivered, its value, the sources of that assistance and the evaluation of assistance received. The chapter concludes with a discussion of some findings with regard to food aid.

6.1 The need for assistance

This section of the chapter on needs and assistance will focus on the population's priorities concerning assistance that should be delivered to households as well as to communities.

Respondents were asked to evaluate whether or not their household was in need of assistance. The chart below indicates that, in May 2006, more than half of the population was in need of assistance. This worrying result corresponds to the observations of the previous Palestinian Public Perception report. 49% of the households were in need of a lot of assistance, a figure slightly lower than the result of the ninth poll (53%).²

Figure 6.1: Assistance needed or not enough



Another result of the survey confirms the strong reliance of the Palestinian population on assistance. In question 47, those who received assistance in the past six months were asked if the importance of assistance has increased or decreased in their budget. Of these, half of the respondents reported that, six months ago, the importance of assistance in their budget was less important that is to say that the assistance has increased in their budget. The dependency of the Palestinian population on assistance has sharply increased since July 2005, considering that in our previous survey 21% of the respondents stated that the assistance increased as a proportion of their budget. This data has to be considered jointly with a consistent reduction of respondents' budget during the past six months. This was the case with 44% of the respondents who received assistance, while 53% remained the same and only 3% increased their budget independently of assistance.³

This trend is confirmed by the warning issued by OCHA-OPT⁴ about the deterioration of the humanitarian situation due to the Israeli's tightening of security measures after the Palestinian January elections and the impact of donor funds being cut and VAT payments to the PA being withheld, thus reducing the PA's capacity to provide services, pay salaries and ensure security.

¹ We refer to "household" to indicate the domestic social unit, and to "community" for the broader social unit.

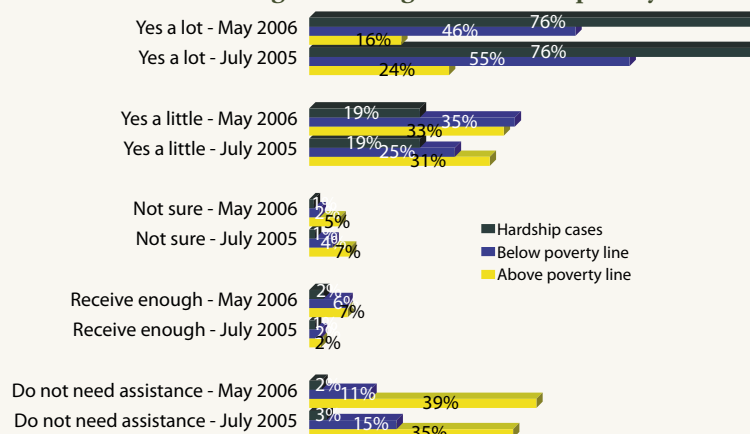
² 'If we consider that the overall level of assistance in 2004-2005 was quite significant in the oPt, the fact that households' needs are not completely fulfilled is of great concern.' *Needs & Priorities*, PPP Report IX, April 2006, p. 107.

³ According to the May 2006 results, 44% of the respondents felt that their income has decreased in the last 6 months while only 20% reported this feeling in July 2005. The poorest suffered the most, as 55% of them have perceived a decreased income as compared to 28% last year. 39.4% of the poor have perceived a decline of their income (as compared to 19% last year) and those above the poverty line have also felt that they suffered from an income deterioration (34.4% in May 2006 as compared to 11.7% in 2005). *Socio-Economic Conditions*, PPP Report X, May 2006, p. 5.

⁴ *Emerging Humanitarian Risks, Humanitarian Update*, OCHA-OPT, January 2006.

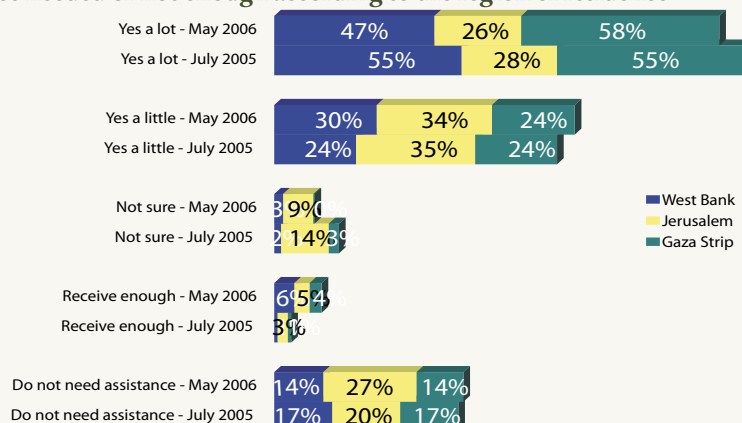
A number of independent variables shed light on the neediest Palestinian households. When looking at refugee status, it appears that 56% of the refugees are in need of a lot of assistance versus 44% of non-refugees.⁵

Figure 6.2: Assistance needed or not enough according to the level of poverty



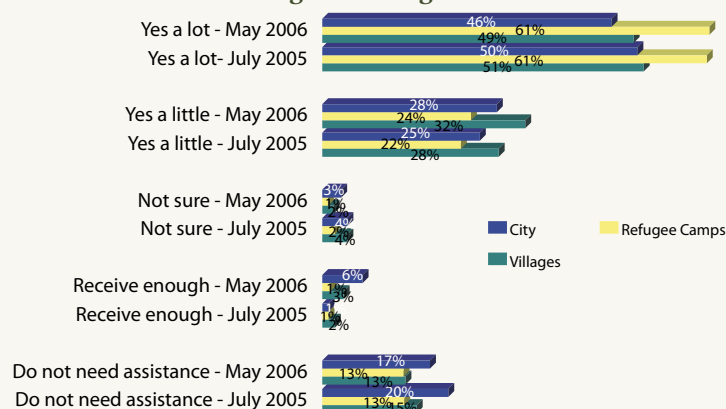
Since July 2005, the need for assistance according to poverty level has not changed much: 76% of households living in hardship reported being need of a lot of assistance in May 2006.

Figure 6.3: Assistance needed or not enough according to the region of residence



A thorough examination of the results according to the region of residence reveals that the neediest segment of the Palestinian population is residing in the Gaza Strip, closely followed by residents of the West Bank.

Figure 6.4: Assistance needed or not enough according to the area of residence.



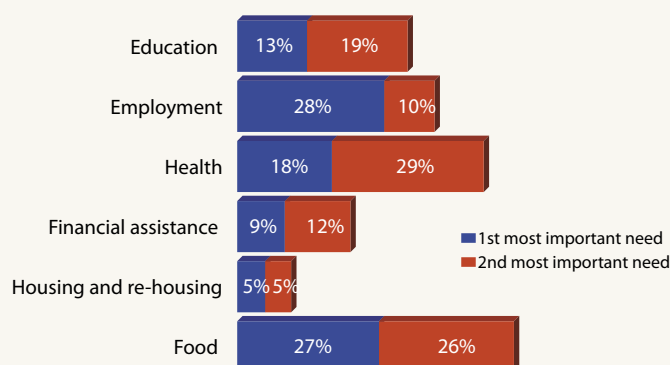
⁵ In poll nine, covering the period from November 2004 to July 2005, 57% of the refugees were in need of a lot of assistance versus 48% of the non-refugees. Idem, p. 107.

In looking at the breakdown by area of residence, the adjacent graph shows that no major changes occurred during the period under scrutiny: the neediest areas are the refugee camps, where 61% of Palestinians are in need of a lot of assistance, as was already the case in July 2005.

6.1.1 Palestinian priorities for their household

This section will examine perceptions about the assistance that should be delivered to the household. For the scope of the analysis of household needs, respondents were asked to give their first and second priority from a list of six broad assistance types: education, employment, health, financial assistance, housing and re-housing and food.

Figure 6.5: The two most important household needs



In contrast to the July 2005 poll, one can not come to a balanced view of what is considered as a priority of the household. When the first and second most important need are considered in sum, food assistance stands as the major need for half of the population (from 42% in July 2005 to 53% in May 2006). The need for health has also sharply increased in the past six months (from 39% in July 2005 to 47% in May 2006), probably because of the lack of access to health services due to the Separation Barrier in the West Bank, and the lack of financial affordability in the Gaza Strip.⁶ Again, when considering the sum of first and second important needs, employment stands at the third place (from 33% in July 2005 to 38% in May 2006).⁷

Figure 6.6 reveals that the situation has been worsening since July 2005: many respondents who did cite needs such as education and housing and re-housing as their first assistance priority for their household shifted back to basic needs such as food and employment. Employment remains, in May 2006, the first most important need for households, a finding consistent with our other surveys, although to a lesser extent.⁸ 28% of Palestinians are asking to be given jobs so that they might earn a living. This percentage has increased by 8% in comparison with the ninth survey.⁹ In addition, food assistance is the first priority of 27% of the respondents. This percentage has undergone an increase of 8% since July 2005.

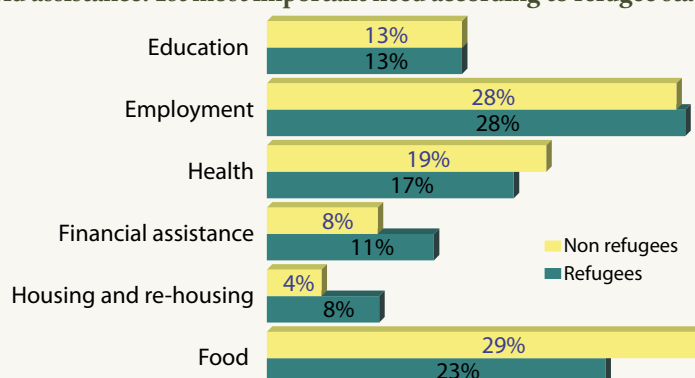
⁶ *Health*, PPP report X, May 2006. This lack is a consequence of the Israeli closure system in the West Bank due to “security reasons” and the constraints imposed on the Palestinian Ministry of Health by Israel and the international community, both embittered after the Hamas victory.

⁷ Education, money and housing are cited by 32%; 21% and 10%, respectively, of respondents.

⁸ Nearly half of the respondents were asking for jobs in the eighth poll (47%). *The Impact of Aid & Palestinians’ perceptions PPP Report VII* August 2004, p. 130. This percentage was 44% in the ninth poll. *Needs & Priorities*, PPP Report IX, April 2006, p. 110.

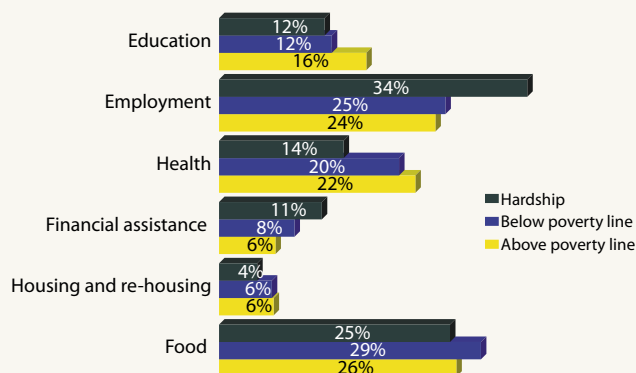
⁹ The chapters on the labour market and socio-economic conditions in this report reveal that job loss and job precariousness increased during the past six months, and incomes of existing jobs decreased. This deterioration of the labour market is related to the labour restrictions resulting from the conflict. This phenomenon is observed in the oPt as a whole, but is particularly severe in the Gaza Strip.

Figure 6.6: Household assistance: 1st most important need according to refugee status



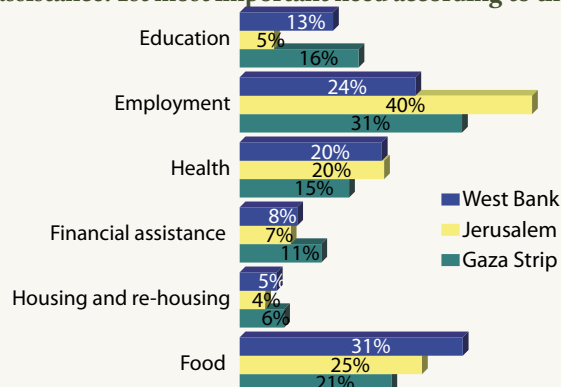
When looking at the main explanatory variables, one can find some significant differences in the scale of what is perceived as a priority. If one focuses on food and employment as most important needs, it appears that food aid as a first most important need is slightly higher among non-refugees (29% versus 23% for the refugees) whereas the percentages are equal for employment (28%).

Figure 6.7: Household assistance: 1st most important need according to the poverty level



In relation to levels of poverty, the analysis reveals that employment is considered as the first most important need of the household by 34% of the poorest segment of the population. The results for those living below the poverty line are comparable in global terms: a slight difference resides in the prioritising of food, since 29% consider food as their first need ahead of employment (25%). This finding can be explained by the efficient targeting of food assistance that will be highlighted at the last section of this chapter.

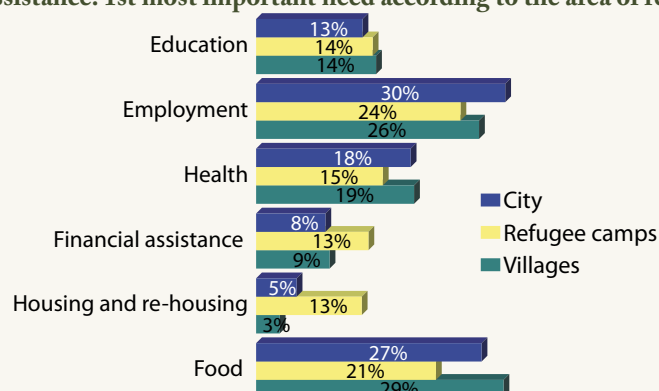
Figure 6.8: Household assistance: 1st most important need according to the region of residence



Needs vary according to the region of residence as well. In the West Bank, food is the most important need cited by 31% of respondents (versus 25% of Jerusalemites and 21% of Gaza Strip respondents) ahead of the need for work (24%) and the need for health assistance (20%). Meanwhile, it is the need for

employment that stands out as the top priority in the Gaza Strip.¹⁰ It is worth noting that, in comparison with our previous poll, the need for work in Jerusalem has increased by 19% since July 2005.

Figure 6.9 Household assistance: 1st most important need according to the area of residence

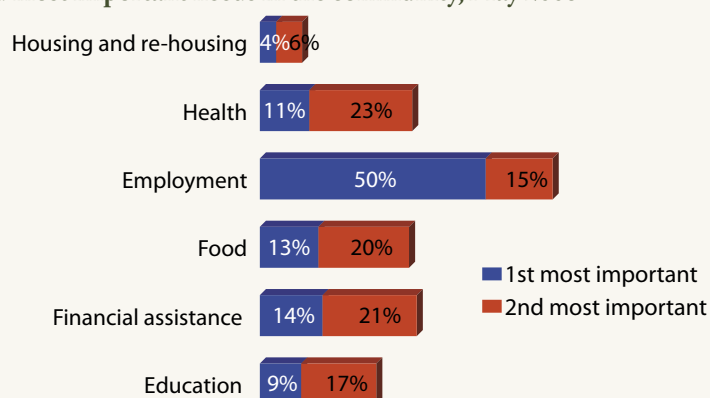


When one look at the results according to area of residence, most city inhabitants consider that the most needed assistance for their household is employment (30%), ahead food (27%). Meanwhile, the most needed assistance for Palestinians from refugee camps is also employment (24%) and food (21%). Priorities in villages are quite different: village-dwellers consider food as their most important need (29%), followed by employment (26%), health (19%) and education (14%).

6.1.2 Palestinian priorities for their community

This present section describes community priorities in regard to assistance. As with the first and second most important need for the household, respondents were asked to list the two most important needs for their community.

Figure 6.10: 1st & 2nd most important needs in the community, May 2006

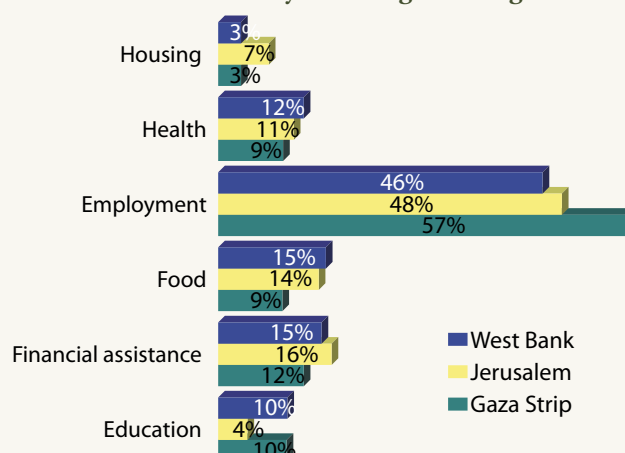


When looking at the two most important community needs, the results displayed in the charts below confirm the results observed in July 2005. Employment is perceived as the most important need for the community by far. Compared to the previous survey, the proportion of people viewing jobs as top priority rose by 6% to reach half of the population. This denotes a worsening of the situation for most of Palestinian households.

Food assistance and money are considered by respectively 13% and 14% of respondents as their top priorities. When compared with the results observed in July 2005, both types of assistance have increased as first and second priorities. This change also signifies a degradation in Palestinian household living conditions, as the population needs are becoming more basic. Lastly, health, housing and education assistance are considered as less-important community needs by the respondents.

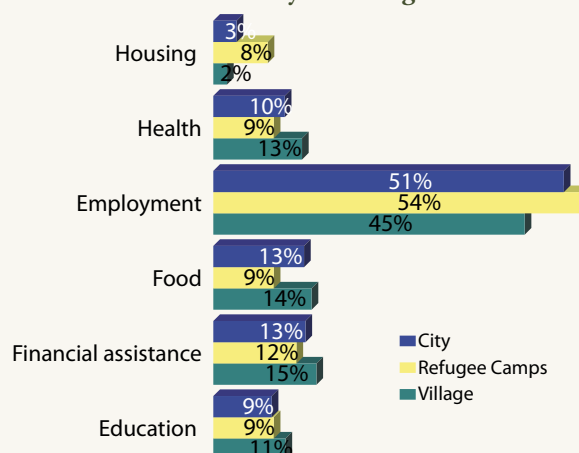
¹⁰ Refer to the chapter on the labour market in this report.

Figure 6.11: Most important need of the community according to the region of residence



More specifically, from a geographical perspective it appears that in the Gaza Strip employment is seen as a first priority for the community by a larger share of respondents than in Jerusalem or the West Bank. Housing, food, health and, to a lesser extent, financial assistance are less cited by the Gaza Strip inhabitants. As observed in the previous section, the need for work in Jerusalem has considerably increased in the past six months (+28%).

Figure 6.12: Most important need of the community according to the area of residence.



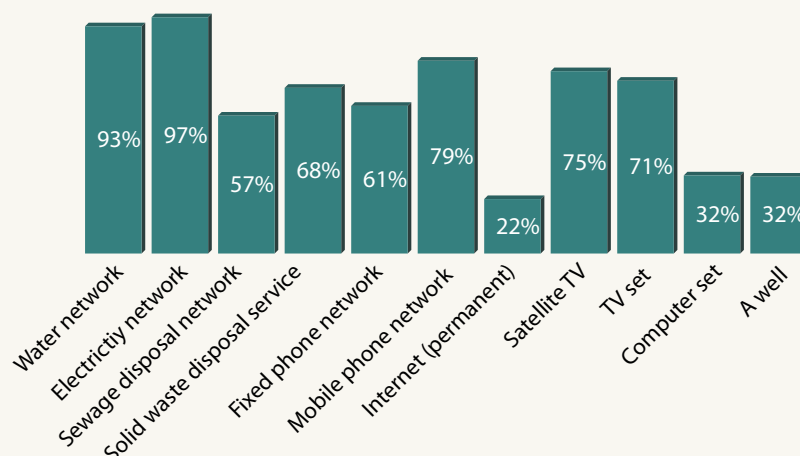
Next, a detailed analysis of community needs according to the area of residence of the respondents reveals some significant results. The camp inhabitants are characterised by having the highest percentage of respondents citing jobs as their first most important priority (54%, versus 51% for city-dwellers and 45% of villagers). Food assistance is cited less by camp inhabitants (9%) in comparison with city-dwellers (13%) and villagers (14%). In general, one could argue, to a certain extent, that the scale of community needs is more balanced for the respondents residing in villages, considering the mobility restrictions of this segment of the population, facing difficulties in accessing services such as health (cited by 13% of the interviewees) and education (cited by 11%).

Finally, if we look at the result by level of poverty, employment assistance is more needed amongst the poorest segment of the population: 54% of the hardship cases cited such assistance as the main priority for their community.

6.1.3 Infrastructure needed and availability of services

In the questionnaire, questions related to infrastructure needed and the connections of respondents to a number of services were raised.

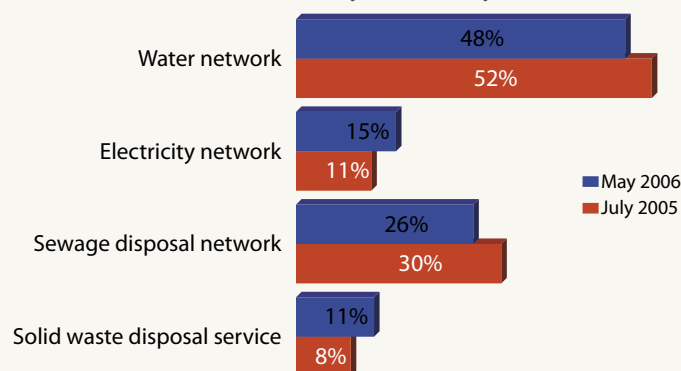
Figure 6.13: Household connected to services, May 2006.



93% of the respondents are connected to a water network, while 97% of them affirmed that they are connected to an electricity network. Sewage disposal remains a major concern in the oPT as 57% of the respondents are connected to such a service.

When examining the availability of communication services, it appears that the connection to a mobile phone network has reached almost 80% of the population (+4% since July 2005). Interestingly, the percentage of respondents who have a permanent connection to the Internet has increased by 7% during the period under scrutiny.

Figure 6.14: Most important infrastructure needed, July 2005 – May 2006



In spite of a slight decrease of 4% in comparison with the previous poll the most important infrastructure needed remains access to the water network, cited by 48% of the respondents. With regard to availability of services, the need for connection to the water network and to sewage disposal network have both decreased by 4% since the last poll ,while the need for connection to solid waste disposal service has increased by 3%.

To conclude, it is clear that no significant changes occurred in perceptions with regard to the most important communication facilities: in May 2006, 62% of the Palestinian population considered the fixed phone line as their most important communication facility needed, ahead of a permanent connection to the Internet'(19%, i.e.,+2% since July 2005). 15% of interviewees considered the mobile phone network to be the most important communication facility needed.

6.2 Assistance in general

Before going into in-depth analysis of assistance delivered to the Palestinian people, it is worth recalling that disbursement (from the international community) doubled from, on average, \$528 million per year in 1999-2000 to over \$1 billion per annum in the period 2001-2004.¹¹ The funds allocated to relief and emergency assistance have increased since 2001.

In the period under scrutiny in this survey, the international community has called into question future aid as a result of the victory of Hamas, the Islamic Resistance Movement, in the PLC elections of January 25.¹² This situation occurred in the context of a sharp deterioration in humanitarian situation due to Israel's tightening of security procedures, according to OCHA.¹³ As a consequence, in May 2006, "the humanitarian situation in the West Bank and Gaza was worse than even the World Bank has thought".¹⁴ The situation had become so dire that EU, the World Bank, the UN and others warned of a total breakdown in law and order that would make the territories ungovernable.

This section aims to explore the assistance received by the Palestinian population in May 2006. We will first analyse the perceived delivery of assistance by looking at the percentages of respondents who say they have received assistance. The value of the assistance delivered will be briefly examined as well as the perceived allocation of assistance. The satisfaction of the respondents with this assistance will be examined and, lastly, particular attention will be paid to employment assistance.

6.2.1 Assistance delivered

6.2.1.1 Monitoring of the assistance received since 2001

Respondents were asked whether or not they or a member of their household received any type of assistance since the beginning of the second Intifada and whether or not they or any of the household members received any type of assistance in the past six months.

According to our respondents, in May 2006, 34% of Palestinian households have received assistance in the past six months. The trend outlined in the ninth report is confirmed by the results obtained in May 2006, as this proportion has decreased by 4% since July 2005.¹⁵ Since the outbreak of the second Intifada, roughly half of Palestinian households have received assistance.

¹¹ *The Palestinian war-torn economy: aid, development and state formation*, UNCTAD, United Nations, New York and Geneva, 2006, p. 37

¹² On the context of the post-PLC elections (donors' planning to reduce various categories of aid, suspension by Israel of the regular transfers of revenues to the PA etc.), refer to *West Bank and Gaza Strip Update*, Economic update and potential outlook, World bank, April 2006.

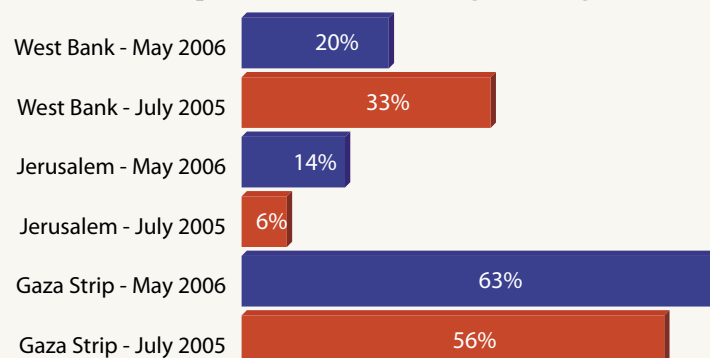
¹³ OCHA, *Humanitarian Update. Emerging humanitarian risks*, January 2006. <http://www.ochaopt.org>

¹⁴ Institute for Palestine Studies, *The implications of an Imploding PA*, No. 1 May 9, 2006. <http://www.palestine-studies.org>

¹⁵ *Assistance in general*, PPP Report IX, April 2006, p. 127.

6.2.1.2 Geographical trends in assistance delivery

Figure 6.15: Received assistance in the past six months according to the region of residence

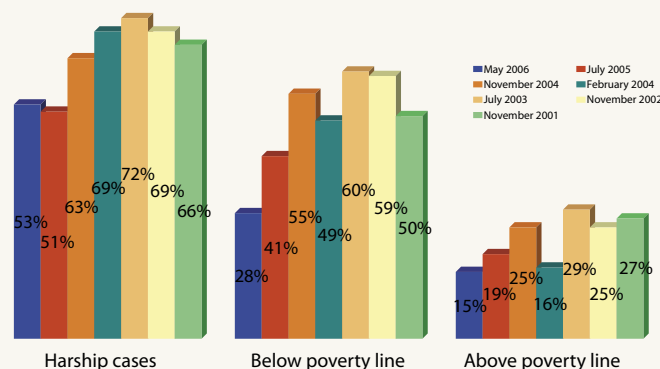


From a geographical perspective, the chart reveals that the level of assistance received by the respondents living in the Gaza Strip (63%) is by far more important than the level of assistance that West Bankers (20%) benefited from. The results show an increase of 7% in the level of assistance received by respondents from the Gaza Strip; at the same time, this assistance has sharply decreased by 13% in the West Bank. International humanitarian organisations reported increased access incidents in the form of delays and denials of access at IDF check-points through the oPt during Spring 2006, which could well explain the decreased assistance delivered in the West Bank.¹⁶

To better grasp the geographical evolution of the received assistance, it is worth analysing the results by place of residence. The results show that the level of assistance has increased in the Gaza Strip, particularly outside the camps (+9% since July 2005), whereas assistance has noticeably decreased by 27% in West Bank camps.

6.2.1.3 Targeting the poorest segment of the population¹⁷

Figure 6.16: Percentage of the total population who received assistance during the past six months according to the level of poverty



As observed in the previous PPP reports, households living in hardship are those who received the most assistance (53%, i.e., +2% since July 2005). 15% of those who are better off have received assistance in the past six months, constituting a decrease of 4% in comparison with the ninth poll. Interestingly, it appears that the decrease is the highest (-13%) for those living below the poverty line; the assistance received in May 2006 by this segment of the population has never been so low (28%). It seems that in the past six months the targeting of needy sector of Palestinian society has challenged international and local aid agencies.

¹⁶ OCHA – OPT *Humanitarian Update*, April 2006.

¹⁷ Unlike the chapter, *Assistance in general*, of the ninth poll report, the analysis of assistance received according to refugee status will be inserted in the present chapter. More detailed analysis contrasting refugees and non-refugees can be found elsewhere in the report (see chapter on refugees).

6.2.2 Nature of the assistance delivered

Respondents were asked to mention the two most important types of assistance that they have received in the past six months.

Figure 6.17: Types of assistance received during the past six months, February 2001 – May 2006.

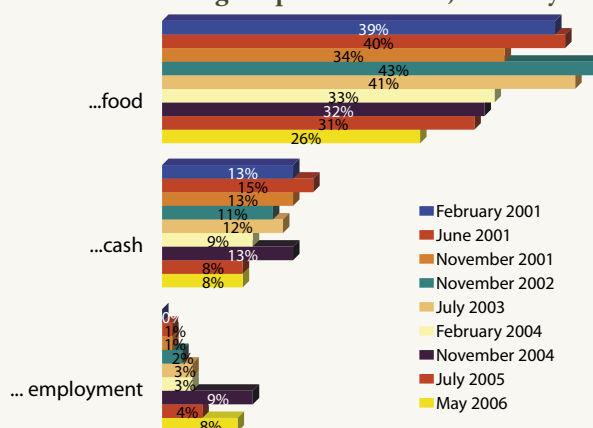


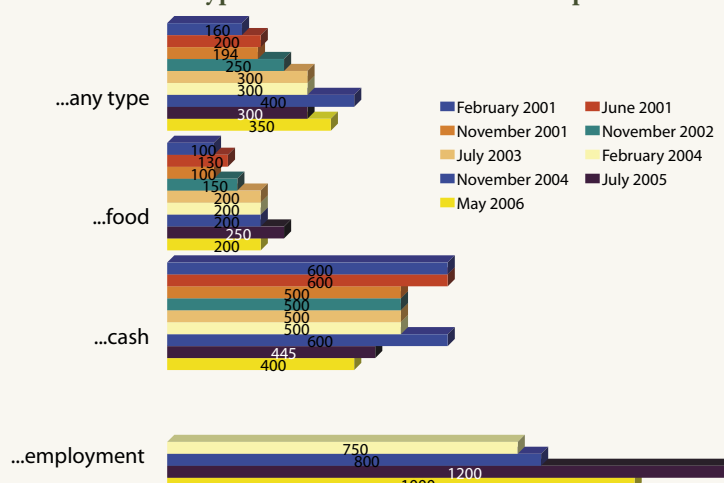
Figure 6.17 depicts the percentages of aid delivered by type of assistance (i.e., respondents who mentioned food, cash and employment among their two most important types of assistance received). Food assistance was received by 26% of the respondents and both cash and employment assistance by 8%. The percentage of distribution for cash has remained equal to the level observed in July 2005, while the level of employment assistance has increased by 4% since July 2005. On the other hand, fewer respondents received food during the period under scrutiny (-5% since July 2005). financial assistance benefits 8% of the respondents. The highest percentages of those recipients are refugees (11% versus 6% of non-refugees). This type of assistance is delivered to a larger extent in the Gaza Strip (13%), in particular within the refugee camps (19%). Finally, cash assistance was received by 12% of the hardship cases in May 2006. Further analysis will be developed in the chapter with regard to employment assistance (2.6) and food delivery (section 6.3).

6.2.3 Value of the assistance delivered

This section will consider the perceived median value of the assistance distributed. It is worth noting that the value relies on the respondent's perception and, as a consequence, it must not be considered as an objective measure of the assistance value. At the time of the writing of the tenth report, currency rates were the following:

100 NIS (New Israeli Shekels) = US\$ 22.43 (US Dollars) = EUR 17.76 (Euros) = CHF 27.96 (Swiss francs)

Figure: 6.18 Median value of the main types of assistance received in the past six months, 2001-2006.



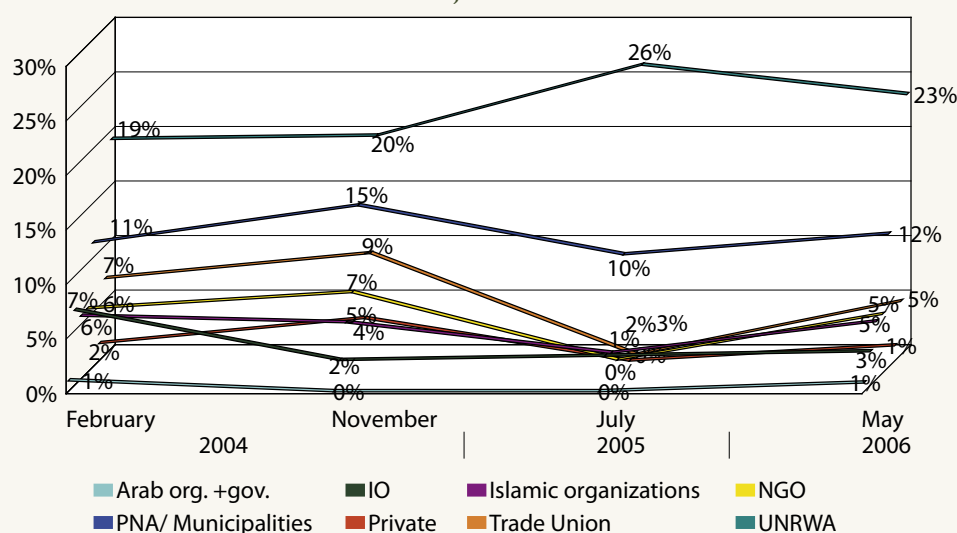
As presented in the adjacent figure, the median value of assistance allocated, in general, is 350 NIS. On average, this figure has remained stable through successive polls, even if it is slightly lower than the median value reported by the previous polls.

There is a decrease in the median value of the three types of assistance presented in figure 18. When looking at the median value of food assistance, those respondents who received food during the December 2005 – May 2006 period received 200 NIS (-50 NIS in comparison with the ninth poll). There was also a slight decrease in the median value of cash assistance received, from 445 NIS to 400 NIS. Lastly, the median value of employment assistance received underwent a decrease from 1200 NIS to 1000 NIS in the same period of time.

6.2.4 Sources of the assistance delivered

In order to get a picture of assistance allocation within the oPt, respondents were asked to cite the sources of the two most important assistance types received in the past six months.

Figure 6.19: Main sources of the assistance received, 2001-2006.



From the above graph, one can present a few comments:

- UNRWA was always the most-cited source of assistance. Since July 2005, respondents have cited this agency to a lesser extent: the percentage decreased from 26% to 23%.
- The PA and the municipalities are the second-most cited source of assistance. Perceived assistance from the PA has increased by 2% in the past six months. Perceived support from NGOs has increased by 5%, while the other assistance sources such as Arab organisations, international organisations or private sources were less cited.

In order to provide a better understanding of which sub-groups are targeted by which providers of assistance, we will briefly consider the composition of UNRWA beneficiaries and the composition of PA beneficiaries.

According to the May 2006 survey, 90% of UNRWA beneficiaries are refugees. When looking at the geographical independent variables, UNRWA beneficiaries are more city dwellers (50%) than camps inhabitants (39%), while 12% of them are villagers.¹⁸ UNRWA recipients are more often classified as

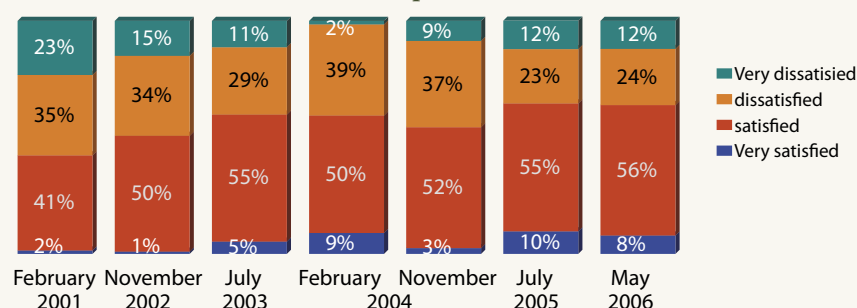
¹⁸ In July 2005, the analyses of UNRWA beneficiaries according to the area of residence were: city: 41% - refugee camp: 44% and villagers: 15%. *Assistance in general*, PPP Report IX, April 2006, p. 133.

hardship cases (60%)¹⁹. than as living below the poverty line (25%). These relationships with the poverty level were already mentioned in the PPP report IX, but to a lesser extent in comparison with the results of May 2006.²⁰ In regard to the beneficiaries of the Palestinian Authority and the municipalities, one relevant finding is that 37% of them are residing in the West Bank (-6% since July 2005) and 61% are living in the Gaza Strip (+6% since July 2005). In addition, 54% are non-refugees (versus 52% in July 2005). When considering the area of residence, the majority of PA beneficiaries are living in cities (55%, i.e., +11% since July 2005) ahead of villages (28%, i.e., -6% since the last poll) and camps (18%, i.e., -6%). As for the UNRWA recipients, the PA tended to target households living in hardship (63%, i.e., +15%).

6.2.5 Level of satisfaction with assistance

A better understanding of the causes of dissatisfaction can be very helpful in improving assistance programmes. This section provides an evaluation of assistance by examining the respondent's level of satisfaction with the aid received.

Figure 6.20: Level of satisfaction with the assistance provided, 2001-2006.



It appears that satisfaction with the assistance provided has remained stable in May 2006; a large majority of respondents are satisfied with the aid delivered. Further analysis reveals that the proportion of dissatisfied has increased amongst those outside camps both in the West Bank and the Gaza Strip.

When examining the reasons behind the dissatisfaction, frequency (number of times assistance was received) is the main reason for dissatisfaction for 62% of the respondents. In comparison with the results of the July 2005 survey, it appears that concern about frequency of assistance underwent a considerable increase (+13%). Still, in May 2006, 30% (i.e., -5% since July 2005) of respondents were dissatisfied with the quantity of assistance delivered, while 7% (i.e., -4% since July 2005) were discontent because of the poor quality of the assistance.²¹

¹⁹ This figure does not refer to the percentage of Special Hardship Cases eligible for receiving UNRWA relief assistance in UNRWA fields of operations. In the PPP reports, we use the third revision of the poverty variable (poverty 3). It is based on the reported household income (o057) but takes into account the number of adults (adults) and children (children) in the household. In November 2002, according to the PCBS figures, the average Palestinian household of two adults and four children was considered to be below poverty line if its income was lower than NIS 1,600. If it was lower than NIS 500, they were considered to be hardship cases. Since the PCBS published a new poverty line at NIS 1,760 at the beginning of 2003 and at NIS 1,800 in 2004 we adjusted to this evolution: For the tenth report, we consider the standard household to be below poverty line if its income is less than NIS 1800; for the sixth and seventh at 1,760 while for the 2002 and 2001 reports, the figures remained unchanged in the third and fourth revision. See: The Objectives and Methodology section of this report.

²⁰ In July 2005, the relation between UNRWA beneficiaries and the poverty level was: hardship cases 49%; below poverty line 34%; above poverty line 17%. *Assistance in general*, PPP Report IX, April 2006, p. 133.

²¹ There were no significant statistical relationship between this variable and the main explanatory variables available for the analysis.

6.2.6 Employment assistance

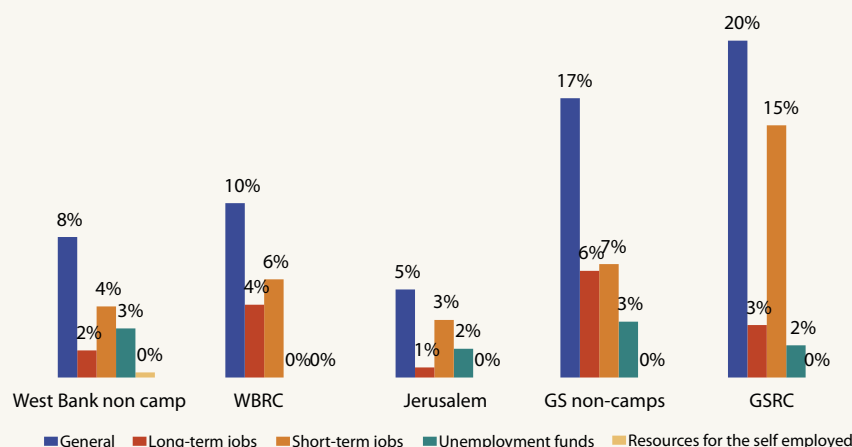
6.2.6.1 Types of employment assistance received

Considering that the oPt continues to face a critical situation of mass poverty and because the crisis in the labour market is worsening,²² this section will focus on the delivery of employment assistance received in the past six months; its types and its sources as well as the satisfaction with such assistance. As mentioned in the section on the nature of assistance received, 8% of respondents have received employment assistance during the period, December 2005 – May 2006. More specifically, respondents were asked to state if they personally received employment assistance personally or if someone in their households had.

In regard to personal employment assistance, in May 2006, 22% of the respondents obtained a long-term job, while 52% gained a short-term one, 25% benefited from unemployment funds and only 1% received resources to assist self-employment. When comparing these results with those of the July 2005 poll, the proportion of respondents who gained a job increased sharply in both cases: in long-term work from 10% to 22%, and in short-term work from 29% to 52%. Meanwhile, the proportion of resources for self-employment drastically decreased, from 10% to the current 1%; the proportion of unemployment funds received decreased as well, halving from 48% in July 2005 to 25% in May 2006.

In the six-month period prior to May 2006, 25% of the respondents said that their household benefited from a long-term job, 51% a short-term one, while 23% of the respondents mentioned that their households benefited from unemployment funds and only 1% received resources for self-employment. These proportions reflect the result of the previous figure detailing personal employment assistance received, and in comparison with the July 2005 survey, in this case as well as in the previous one, the percentage of long-term and short-term positions increased (from 13% to 25% and from 27% to 50% respectively), while unemployment funds and resources for self-employment received decreased drastically (from 42% to 21% and from 17% to 1% respectively).

Figure 6.21: Types of employment assistance received by household according to the place of residence, May 2006.

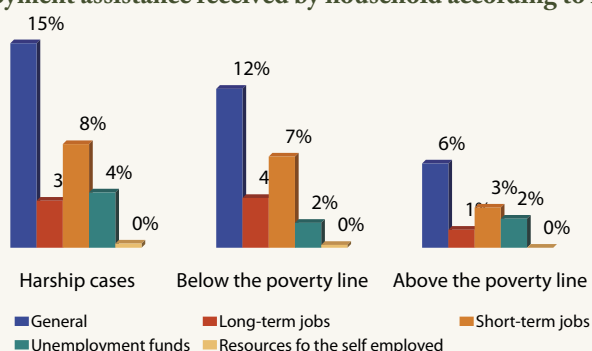


In general, compared with the July 2005 results, employment assistance to Palestinian households has increased in the Gaza strip, inside and outside the refugee camps (by 5% and by 7%, respectively), while it decreased in the other three zones. When examining the various types of employment assistance according to the place of residence, the highest percentages of households that received employment assistance are those residing in Gaza Strip, particularly inside the refugee camps in respect of short-term job assistance, and outside the refugee camps regarding long-term job assistance. Unemployment funds

²² Refer to the chapter on socio-economic conditions and labour market as well as to the short introduction to this section.

distribution and resources for self-employment assistance decreased in all areas.

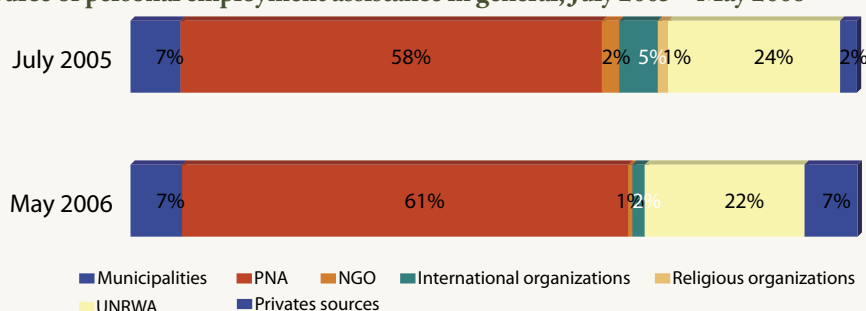
Figure 6.22: Types of employment assistance received by household according to level of poverty, May 2006



In general, employment assistance was received by 15% of households living in hardship, by 12% of households living below the poverty line and by 6% of households living above the poverty line. Unemployment funds distribution remained quite low in the three poverty levels, while none of them has received resources for self-employment.

6.2.6.2 Sources of employment assistance

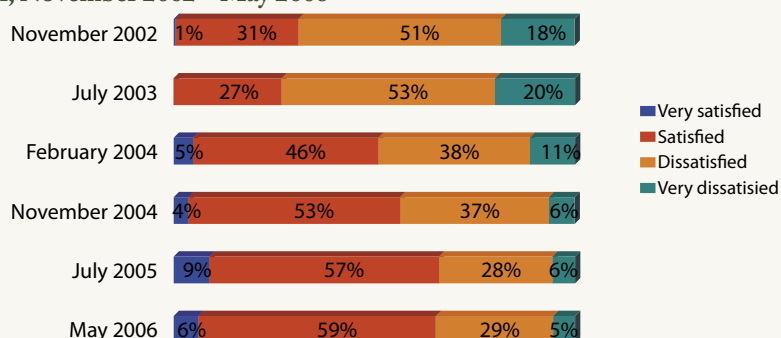
Figure 6.23: Source of personal employment assistance in general, July 2005 – May 2006



According to a growing trend seen in the previous polls, the PA is perceived by 61% of the respondents as the most important provider of personal employment assistance. UNRWA still remains as the second main source of employment assistance, but with a slight decline of 2% from the July 2005 poll. Percentages for International organisations, NGOs and religious organisations decreased as well, while private sources of assistance increased by 5%. Municipalities remained stable at 7%.

6.2.6.3 Level of satisfaction with employment assistance

Figure 6.24: Level of satisfaction with employment assistance received personally and/or by other household members in general, November 2002 – May 2006



General consensus about satisfaction with employment assistance remains quite high: 65% of the respondents feel satisfied (59%) or very satisfied (6%) with the employment assistance received.

A review of previous polls indicates that the level of satisfaction has improved continuously since 2001.

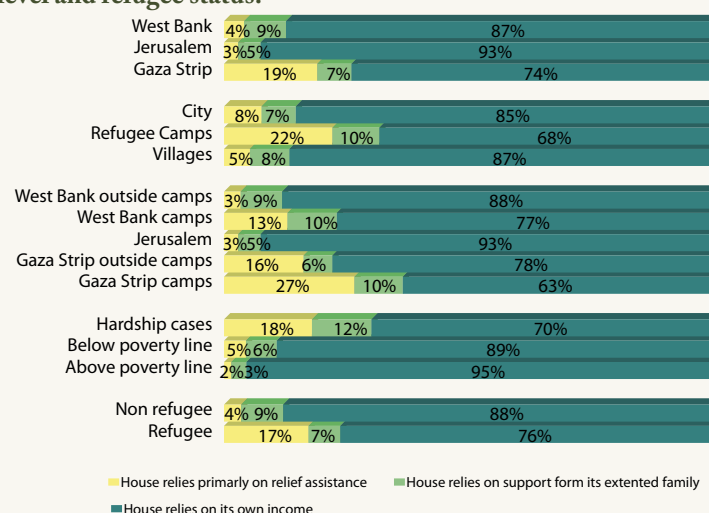
In May 2006, the main reason for dissatisfaction with employment assistance received is due to a inadequate amount of assistance. The second main reason for dissatisfaction is the very short period of employment.

6.3 Food, food assistance and its delivery

6.3.1 Sources of food

As observed in comparing the results of polls nine and ten, in the time since the previous survey the percentage of Palestinian households relying on food assistance has slightly increased by 2% (from 7% to 9%), in contrast to a decreasing trend in previous years. The percentage of Palestinian households relying on family support (8%) has slightly increased by 1%. Though the majority of the respondents (83%) still indicate that their household relies on their own income for food, there was a slight decrease since the previous survey (86%).

Figure 6.25: Main sources of food in the household according to region of residence, area of residence, place of residence, poverty level and refugee status.



When looking at the results by region of residence, by areas and by places, it appears that the dependence on outside sources for food is noticeably higher in the Gaza Strip (19%), particularly in the refugee camps (27%), as well as outside camps (16%). The percentage of those dependent on outside sources in West Bank refugee camp is likewise high (13%).

These proportions increased since the July 2005 survey, showing an increasing dependency on outside sources for food, in contrast to the earlier trend of decreasing dependency.²³

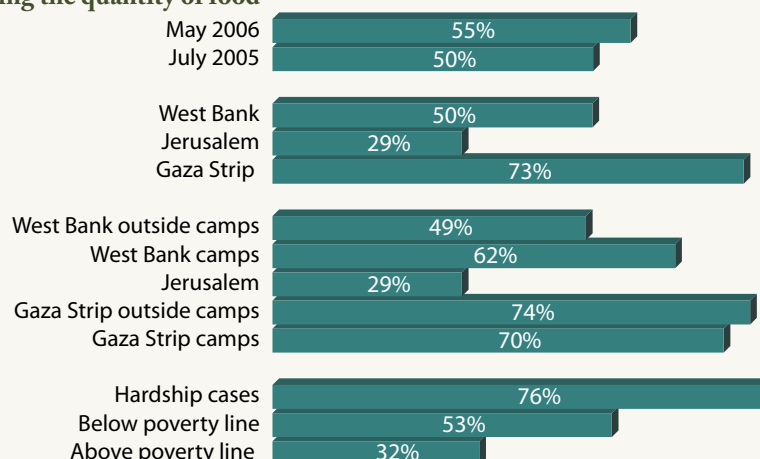
²³ The primary role of UNRWA in food assistance for refugees explains why more respondents from the refugee camps rely on outside sources (22%) than those from the cities (8%) and from the villages (5%), while the 17% of the refugees, among the respondents, rely on food assistance and only 4% of the non-refugees rely on it. Finally, the dependence on outside sources is evidently higher for the extremely poor segments of the Palestinian population (18% among the hardship cases).

6.3.2 Attitude towards food consumption

Since the beginning of the second Intifada, Palestinians households that rely more and more on their own sources for food are resorting to increasingly negative coping mechanisms, drastically reducing the quality, variety and quantity of food intake. This is evident as in the following figures:

6.3.2.1 The reduction of food consumption

Figure 6.26: Reducing the quantity of food

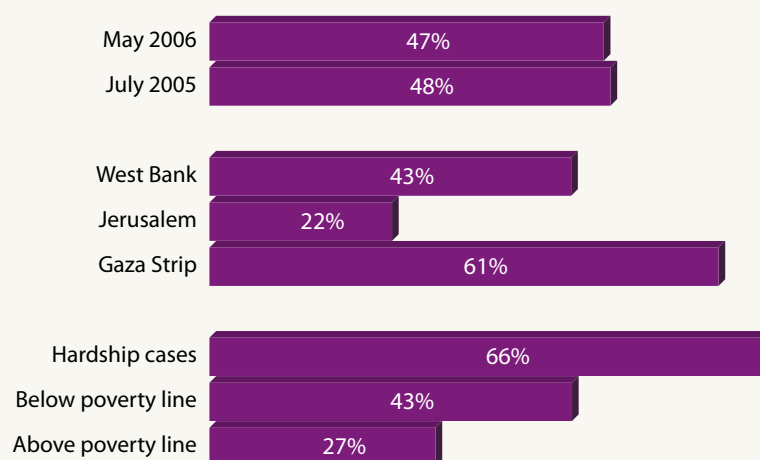


In May 2006, 55% of the respondents confirmed that they have reduced their level of food over the past six months (+5%). The highest percentage, according to region of residence, is in the Gaza Strip (73%), whereas in the West Bank half of the respondents have reduced their food consumptions (50%), and 29% in Jerusalem. Lastly, the percentage is still high among respondents living in hardship (76%).

These proportions have increased since the July 2005 survey, showing a contraction in food consumption, particularly in Gaza Strip (from 55% to 76%), inside and outside camps (from 51% to 70% and from 57% to 74%, respectively), and in the West Bank inside camps (from 34% to 62%). The percentage also increased among hardship cases (from 66% to 76%).

6.3.2.2 Reduction of food purchase

Figure 6.27: Purchase of less-preferred food



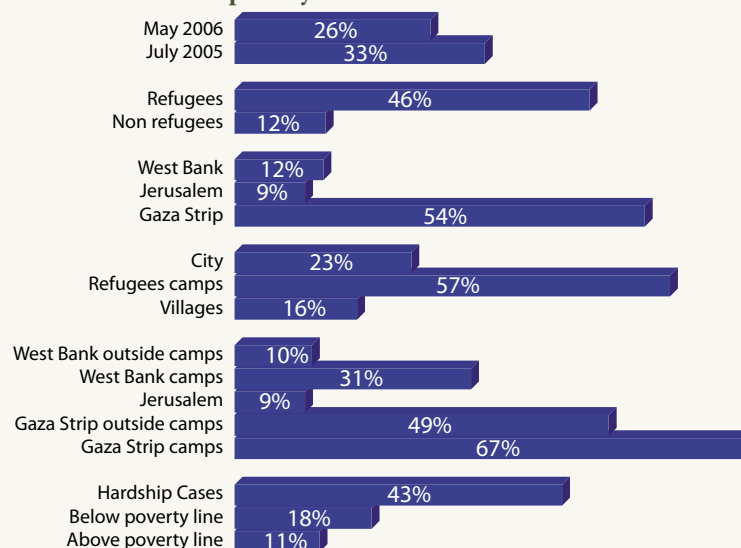
The respondents were asked whether they, or their households, have bought less-preferred food in the past six months. About a half of the respondents (47%) answered they have bought less-preferred food in the past six months. In comparison with the July 2005 survey, the proportion has slightly decreased by

1%. A closer analysis of the statistical relationships reveals that the higher percentage of the respondents who answered positively resides in the Gaza Strip (61%) and among hardship cases as well (66%).

6.3.3 Food assistance

6.3.3.1 In general

Figure 6.28: Received food assistance in general and according to refugee status, region of residence, area of residence, place of residence and level of poverty



As is apparent in figure 6.28, there has been a decrease in number of people reporting that they have received food assistance in the past six months; while the percentage was 33% in July 2005 survey, it has now decreased to 26%.

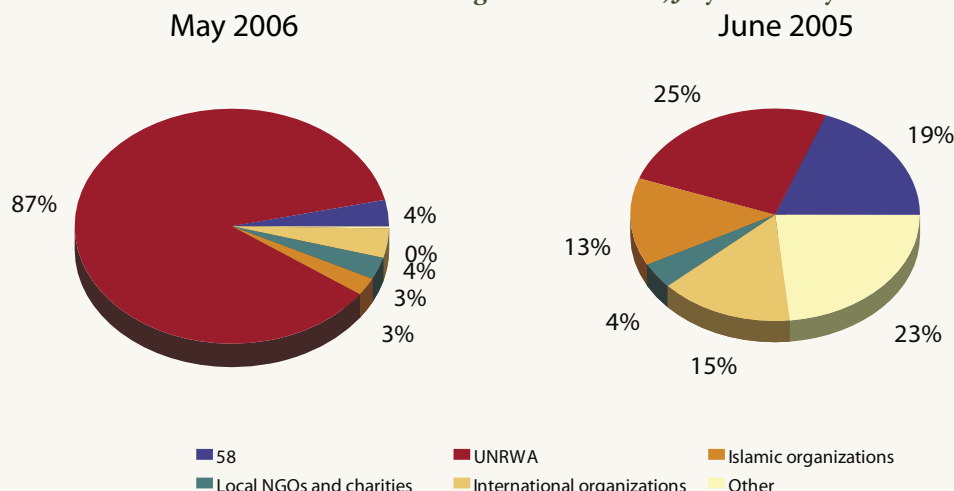
When analysing the results according to the main independent variables, the percentage of refugees among the respondents is much higher than that of non-refugees (46% versus 12%, the former decreasing since the previous survey in July 2005, when it was 57%). According to region of residence, more than half of the respondents residing in the Gaza Strip have benefited from food assistance (54%), while only 12% of West Bankers and 9% of Jerusalemites have done so.

The distribution of food assistance is more consistent in the refugee camps (57% versus 23% in the cities and 16% in the villages), particularly in Gaza Strip refugee camps (67% of the respondents). In the West Bank, there was a consistent reduction of the distribution of food assistance in refugee camps, from 70% in the July 2005 survey to 31% in the present survey.

Lastly, according to the level of poverty, 43% of the respondents living in hardship have received food assistance, while 18% of those below the poverty line (a decreasing percentage when compared to the previous survey in July 2005, when it was 36%) and 11% of those living above the poverty line have done so.

6.3.3.2 Source of food assistance

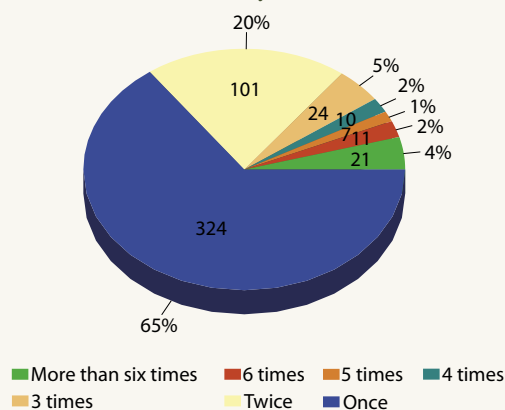
Figure 6.29: Sources of food assistance – monitoring of the situation, July 2005-May 2006



Respondents were asked to mention the main providers of the food assistance they received. In May 2006, UNRWA was cited by the 74% of the respondents, a percentage triple that in the July 2005 survey (25%), as the main provider of food assistance. The Palestinian Authority follows at 14%, with international organisations, lastly, at 3%. The PA often works in close partnership with the main international organisations through its different ministries, who act as direct providers of food items. This could explain why the PA is perceived as one of the main sources (behind UNRWA) of food aid.

6.3.3.3 Frequency of food assistance

Figure 6.30: Frequency of food assistance received, May 2006.



In May 2006, the majority of the respondents (65%) received food assistance only once during the last six months, 20% of them received it twice and only 5% and less received food aid three or more times. When comparing these results with July 2005 survey, it appears that the proportion of respondents who received food aid only once has more than doubled (from 30% to 65%), while that of those who received food aid twice has more than halved (from 45% to 20%). The proportion of respondents who received food aid three times has decreased as well, from 15% to 5%.

This finding is not surprising considering the negative impact of the closure²⁴ that has created shortages of basic food items, particularly inside the Gaza Strip.

²⁴ *The Gaza Strip: situation report – Economic and Humanitarian impact of the Karni closures*, OCHA, 31 January 2006.

The WFP said the extended closures of the Karni commercial crossing between Israel and Gaza have had a devastating effect on food availability in the Palestinian enclave. Stocks of wheat flour are already critically low and there are fears that there will soon be no basic commodities in Gaza. WFP provides food aid to some 430,000 people in the oPt, 160,000 of them in the Gaza Strip. WFP, Press Release, occupied Palestinian territories. <http://www.wfp.org>

6.3.4 Attitude towards food assistance

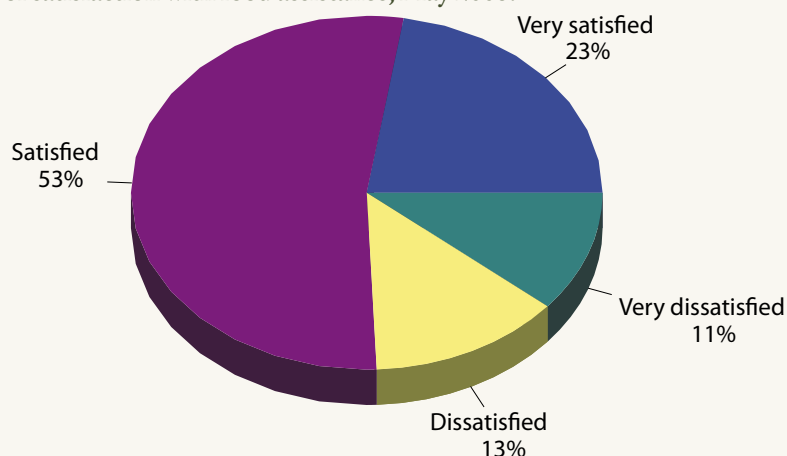
6.3.4.1 Attitudes towards the targeting of food assistance

9% of the respondents consider that food assistance targets the needy, while more than half of the respondents, 58%, feel that food assistance is delivered to the needy as well as to other segments of the population not in need, and one-third of them feel that food assistance is allocated to Palestinian people without distinction.

When comparing this with the results of July 2005 survey, the first two percentages slightly increased (from 7% to 9% and from 50% to 58%, respectively), while the last decreased by 10% (from 43% to 33%).

6.3.4.2 Level of satisfaction with food assistance

Figure 6.31: Level of satisfaction with food assistance, May 2006.



In general, the results are no different than the July 2005 survey. The new poll indicates that 22% of the respondents were very satisfied with the food assistance received, half of them (53%) were satisfied with the food assistance, while 13% were dissatisfied and 11% were very dissatisfied. In this last percentage there was a very slight decline of 2% (13% in July 2005 survey).

Looking at the results according to independent variables, the highest level of dissatisfaction appears among the respondents residing in the West Bank, where 19% are dissatisfied and 18% are very dissatisfied, while, on the other hand, the highest level of satisfaction is registered among the respondents residing in the Gaza Strip, where more than half of the respondents (54%) are satisfied and a quarter of them (24%) are very satisfied.

According to refugee status, the number of non-refugee respondents who were very satisfied with food assistance is much higher than in the July 2005 survey (27% versus 8%), while among the respondents who are refugees there is a decrease among those who feel very satisfied (26% in July 2005, 20% in May 2006) whereas the proportion of the respondents refugees who fell satisfied still remains high (55%).

According to area of residence, the level of satisfaction increases in the cities while it decreases in the refugee camps.

6.4 Conclusion

Despite the increase in international disbursement since 2001, the results of the tenth survey indicate that **more than half of the Palestinian population was still in need of assistance** in May 2006. Dependency of the Palestinian population on relief and emergency assistance is becoming stronger than in the past.

The **gap between the level of assistance needed and that received has increased** since the previous poll. Indeed, the results reveal a growing percentage of respondents claiming food as their first need and giving a negative evaluation of assistance received because of the reduced frequency of its distribution. In general, a higher proportion of respondents perceived that the level of assistance has decreased during the past six months. As observed in the ninth poll, the decline is more acute in the West Bank, due to the restrictions of movement imposed by the Israeli Government that affect the labour market as well as humanitarian assistance delivery.

When looking at the items of the assistance, the worsening of the situation becomes very clear; more than half of the respondents affirmed that they have **reduced their level of food consumption** and have bought less-preferred food. In the meanwhile, the level of food assistance has decreased by 7% in the past six months. Looking at employment assistance, there was an increase in the provision of short- and long-term jobs. In the Gaza Strip, employment is perceived as the primary need, while in the West Bank food is the first-needed item.

Despite the Israeli withdrawal from the Gaza Strip, the closure system has been maintained inside the West Bank and even reinforced following the political success of Hamas at the January 2006 PLC elections. In such a context, the Gaza Strip has also suffered of a drastic breakdown in assistance delivery, as the international community decided to reduce aid delivery when Hamas took lead of the PA government. This political context has been challenging both international and local providers of aid to an increasing extent, and, since the capture in cross-border attack of the Israeli soldier Gilad Shalit on the 25th of June 2006, concern about a humanitarian crisis in the Gaza Strip has merely grown in magnitude.



Refugees & UNRWA

Jalal Al Hussein

This chapter of the report tackles the socio-economic conditions of the Palestinian refugees residing in the occupied Palestinian territory (oPt). A large majority of the refugees taking part in the survey - 711 out of 757 or 94% - are registered with UNRWA. Our analysis takes into account these registered refugees only.

The first section (7.1) deals with the refugees' socio-economic conditions in terms of poverty and its evolution since July 2005, when our previous survey was carried out (*Palestinian Public Perceptions, Report IX*). The second section (7.2) investigates the refugees' needs in connection with the scope and nature of local and international aid.

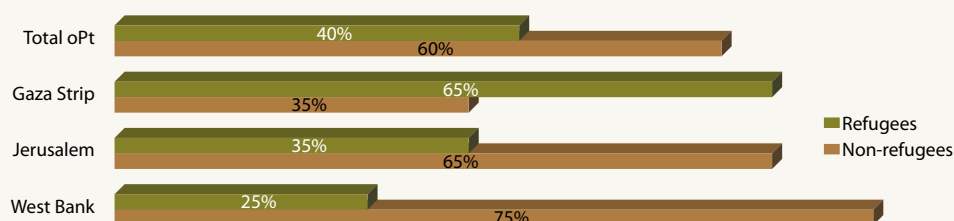
The main explanatory (or independent) variables that will be utilised in this part of the report are "refugee status" as well as residence in camps, either as "area of residence" (vis-à-vis inhabitants of villages and cities or, more generally, non-camp inhabitants. Poverty status will also be used as an important dependent variable in the first section of the chapter. Other independent variables related to age, gender and education are excluded from this analysis, as they are dealt with in other parts of the report.

The following paragraphs set out to establish a demographic profile of the Palestinian refugees in the oPt.

Most oPt refugees live in Gaza, where they constitute over half of the population...

Registered refugees represent 40% of the overall survey sample, namely 711 out of 1800 interviewees. Over half of the refugees, 55%, live in the Gaza Strip, where they form 65% of the total population; 36% of them live in the West Bank, where they constitute one-quarter of the total population; and 9% live in the Jerusalem area, where they make up 35% of the total population.¹

Figure 7.1: Percentage of refugees per region of residence

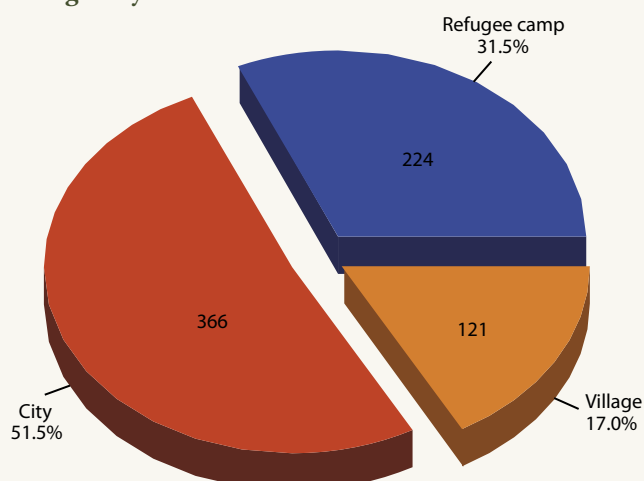


...and outside the camps...

More than half of the refugees live outside the camps, i.e., in cities (51% of the refugee sample) and in villages (17% of the refugee sample). "Only" about one-third live in refugee camps (32%), with a high of 40% in Gaza and a low of 24% in the West Bank.

¹ According to UNRWA figures, the registered refugee population living in the Gaza Strip makes up 58% of the total refugee population, whereas 42% live in the West Bank (Jerusalem included). (UNRWA, March 2006).

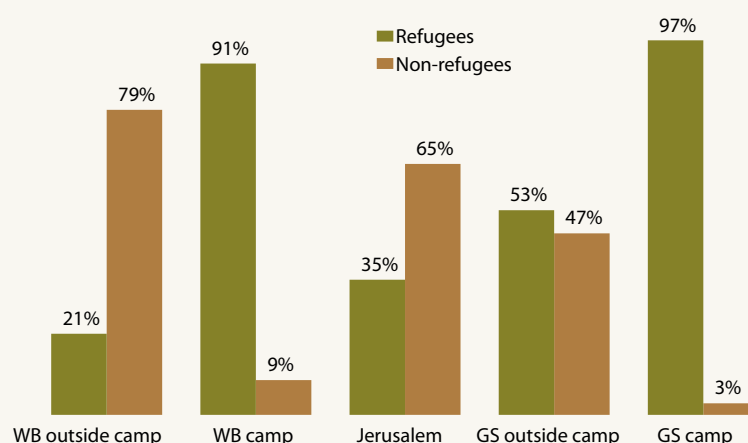
Figure 7.2: Distribution of refugees by area of residence



... but refugee camps remain “refugee pockets”

However, as shown in figure 9.3, refugee camps are inhabited predominantly by refugees. In this sense, they remain an important explanatory variable of our analysis.

Figure 7.3: Percentages of refugees and non-refugees per place of residence

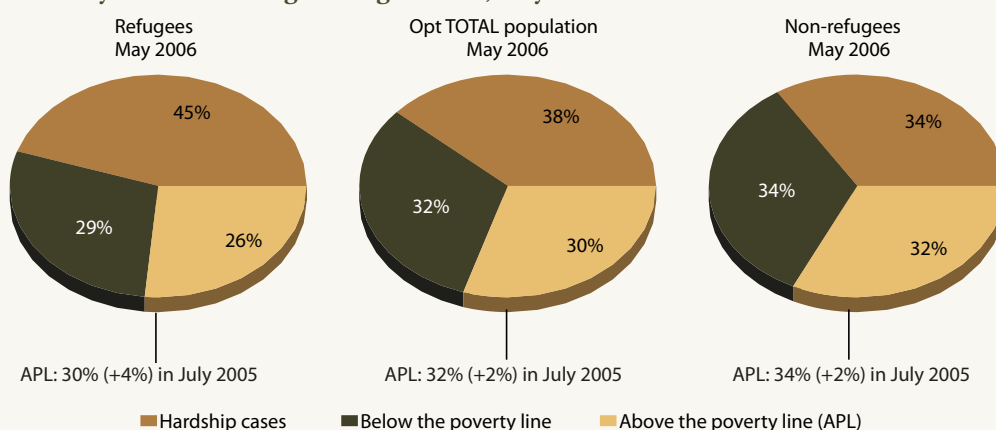


7.1 Socio-economic conditions of the refugees

7.1.1 Refugees and poverty: overview

Although both refugee and non-refugee populations have become worse-off during the period under scrutiny (July 2005-May 2006), the discrepancy in poverty levels between refugees and non-refugees that was noticed in our previous report (see *Palestinian Public Perceptions Report IX*, subchapter 9.1.1) was confirmed. In May 2006, refugees (74% of the poor overall) were poorer than non-refugees (68% of the poor overall) in both absolute and relative terms. As highlighted in figure 7.4, refugees saw their percentage of hardship cases outmatch that of non-refugees by 11% (versus 8% in July 2005), while the total percentage of refugees below the poverty line (including hardship cases) outmatched that of the non-refugees by 6% (versus 4% in July 2005).

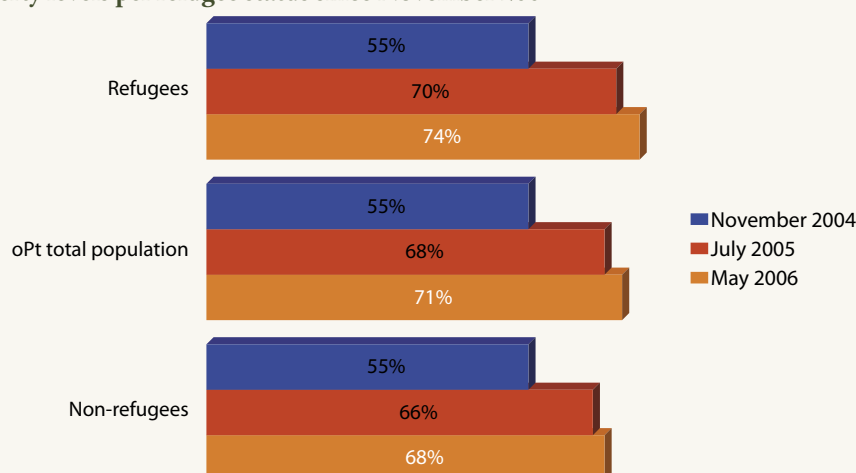
Figure 7.4: Poverty status according to refugee status, May 2006



Accordingly, socio-economic prospects for the future were much bleaker amongst refugees than non-refugees. The percentage of refugees stating in May 2006 that they would be barely able to manage and or that they did not know how to cope was at 53% as opposed to 44% of non-refugees. In July 2005, the difference between refugees and non-refugees was much smaller: 46% of refugees as against 43% of non-refugees.

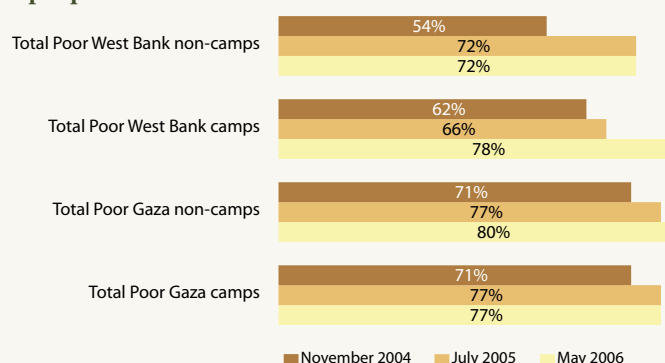
However, when compared to our previous survey (November 2004-July 2005), the trend towards increasing poverty levels amongst refugees has been significantly contained. More specifically, the increase in the percentage of poor refugees dwindled from + 15% to a current +4%. Non-refugees also slowed their downward poverty spiral, but to a lesser extent, as shown in figure 7.5.

Figure 7.5: Poverty levels per refugee status since November 2004



From a geographical perspective, refugee camps have remained the poorest areas in the oPt. Their percentage of camp poor (hardship cases included) rose from 72% to 77% (+5%), as against 65% to 67% (+2%) in cities and 69% to 74% (+5%) in villages. As is apparent in figure 7.6, the degradation of living conditions in the refugee camps was more marked in the West Bank, where the percentage of poor rose by 12%, than in Gaza, where the overall percentage of poor held steady during the period under scrutiny.

Figure 7.6: Poverty status per place of residence



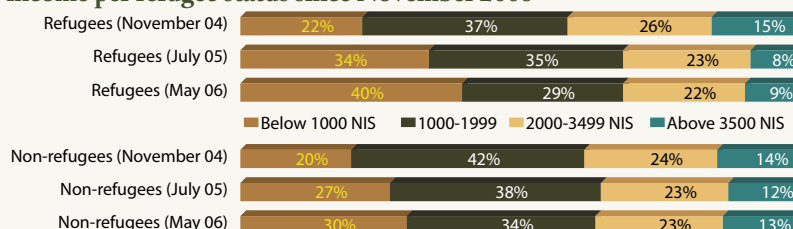
It is therefore no surprise that socio-economic prospects for the future worsened dramatically amongst West Bank camp dwellers during the period under survey. The percentage stating that they would barely be able to manage and/or that they did not know how to survive increased dramatically, growing from 44% to 58%, whereas the percentage decreased amongst non-camp refugees, from 46% to 40%. In Gaza, the increase in “socio-economic insecurity” was less significant, the percentage of pessimistic camp dwellers moving from 50% to 53%. This increase is even smaller than amongst the non-camp dwellers, where those with pessimistic expectations increased from 50% to 57% (o044xplace of residence)..

7.1.2 Poverty trends and causes of poverty

Growing poverty amongst both refugees and non-refugees can be primarily explained by the deterioration in the socio-economic situation, especially since the imposition by the Western donor community and Israel of a financial blockade on the PA following the Hamas victory in the January 2006 general elections. The unemployment rate for both groups has increased (in line with that of the overall oPt population) by 5%, moving from 33% to 38% during the period under survey. Amongst the remaining 62%, only 41% work full-time, with 21% working part-time or a few hours a day. However, as was revealed in our previous survey, unemployment rates could not explain differences in the level of poverty between refugees and non-refugees (see *Palestinian Public Perception Report IX*, p.155). Mobility does not explain this fact either: our survey shows that in terms of mobility, refugees have been better-off than non-refugees, as 47% of them have had no problems in this regard (and 79% when related to access to work) as against only 30% in general of non-refugees (and 67% when access to work is factored in).

Nevertheless, compared with our previous survey period, refugees and non-refugees have different opinions regarding changes in their household income. Refugees were more likely (50%) to state that their income had decreased than non-refugees (41%). This statement is confirmed by an analysis of household incomes that remain, on average, higher for non-refugees than for refugees, with an increasing percentage of refugee households having lower-range incomes, i.e., below 2000 NIS per month: 73% of refugees as against 59% of non-refugees, as indicated in figure 7.7.

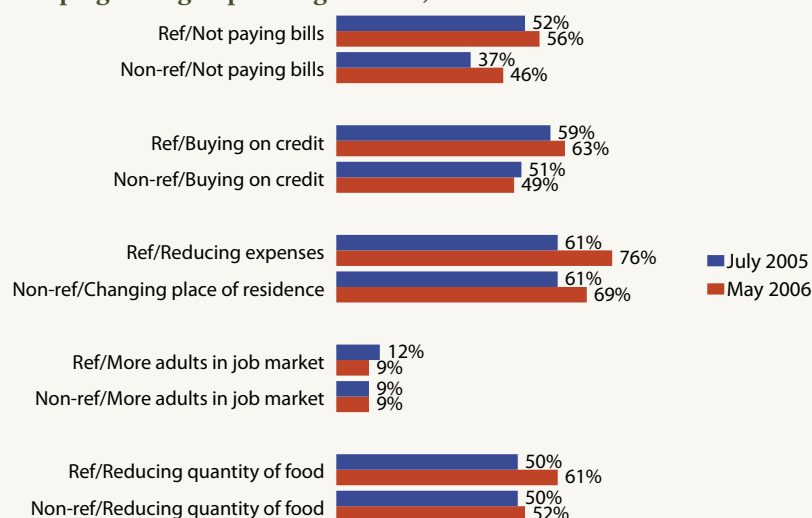
Figure 7.7: Family income per refugee status since November 2006



One consequence of the further impoverishment of refugees is their increased reliance on coping strategies (reducing expenses, buying on credit, not paying bills, reducing consumption of food, engaging more adults in the job market, etc.) in order to survive the hardship. Already on the rise in our previous period under scrutiny (*Palestinian Public Perceptions, Report IX*, subchapter 9.1.1., figure 9.6), these “strategies” became more common amongst the oPt population overall, but more especially amongst the refugees

(see figure 7.8).²

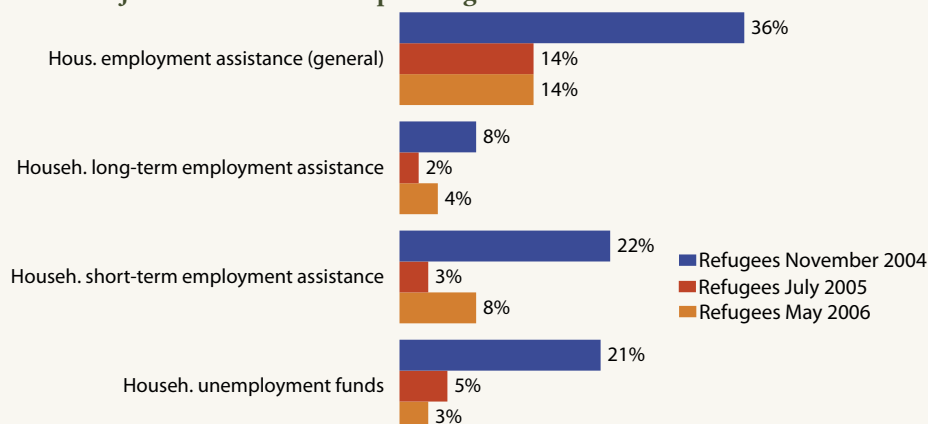
Figure 7.8: Selected coping strategies per refugee status, 2005-2006



The reasons put forward by refugees and non-refugees to explain decrease of income differ. As our surveys discovered, job losses were identified by both categories as the first cause of the decrease in their household income, but the percentages were higher amongst refugees (32%) than amongst non-refugees (28%). This has resulted in an increasingly higher percentage of refugees having to get jobs that do not match their training (under-employment). From November 2004 to May 2006, the rate of under-employment amongst refugees and amongst non-refugees rose from 21% to 36% of the former (+15%), and from 18% to 24% of the latter (+6%).

Changes in employment emergency assistance are amongst the other factors that can influence poverty levels. As became clear in previous Palestinian Public Perceptions Reports, this type of assistance has come to play a structural role in the living conditions of the refugees (see *Palestinian Public Perceptions, Report VIII*, sub-chapter 9.2.3 and *Report IX*, sub-chapter 9.2.1). In our previous reports, a reduction of employment assistance had been singled out as one of the main factors explaining increased poverty levels. Figure 7.9 shows that this decrease has been curtailed, which may explain the containment of increase in poverty levels amongst refugees underscored above. However, despite a steep increase in short-term employment assistance (from 3% to 8%), household assistance has not regained its November 2004 levels.

Figure 7.9: Household job assistance schemes per refugee status



² This trend was more marked inside than outside the camps, and more especially in Gaza. For instance, the percentage of Gaza camp dwellers reducing expenses during the period under scrutiny increased from 55% to 80% as against 62% to 85% outside the camps. In the West Bank, the percentages of camp dwellers resorting to such a strategy grew from 52% to 65%, while the percentage decreased outside the camps, from 51% to 48%.

The next sub-chapter will analyse at length the socio-economic assistance received according to refugee status.

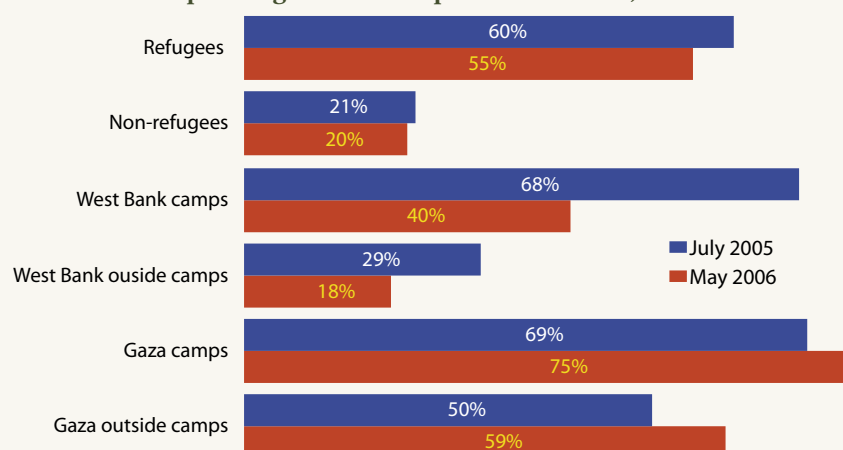
7.2 Assistance and unmet needs of the refugees

7.2.1 Assistance coverage in general

The survey found that, whereas refugees remained the main target of socio-economic assistance in general (55% as against 20% of non-refugees), the percentage of those receiving such assistance had decreased during the period under scrutiny by 5%: 60% in July 2005 as against 55% in May 2006. In contrast, as shown in figure 9.10, the percentage of non-refugees receiving assistance had remained stable, changing only from 21% to 20%.

Geographically speaking, whereas the West Bank overall saw its percentage of assistance decrease from 32% to 19% during the period under scrutiny. Camp dwellers (who, as we noticed above in figure 9.6, have become poorer) were more affected by this decrease than non-camp dwellers: from 68% in July in 2005 to 40% in May 2006. Rather, as seen in figure 7.10, assistance primarily targeted the Gaza Strip, be it inside or outside camps. With 75% of assistance beneficiaries, the Gaza camps were the most assisted places of residence, followed by Gaza outside camps (59%), West Bank inside refugee camps (40%), and West Bank outside camps (18%).

Figure 7.10: Assistance received per refugee status and place of residence, 2005-2006



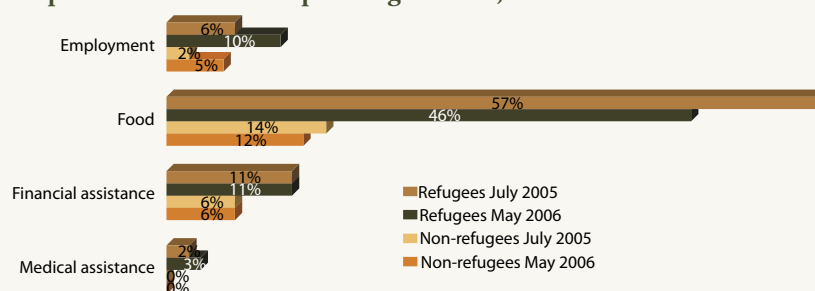
7.2.2 Contents of assistance and related needs/unmet needs

In May 2006, as shown in figure 7.11, food was considered by both refugees and non-refugees as the most important assistance item received, although much more so for the former (46% of refugees) than for the latter (12% of non-refugees). However, such percentages were higher in July 2005, both for refugees (57%: -11%) and for non-refugees (14%: -2%).

Conversely, refugees, by May 2006, had come to consider employment assistance as a most important item received more than they had in July 2005. This trend confirms the overall employment assistance figures, outlined above, that indicated a relative rise in employment assistance levels since July 2005.

Finally, the refugees' perception of financial and medical assistance as the most important assistance item did not change significantly, even though 11% of refugees still considered financial assistance as of first importance.

Figure 7.11: Most important items received per refugee status, 2005-2006

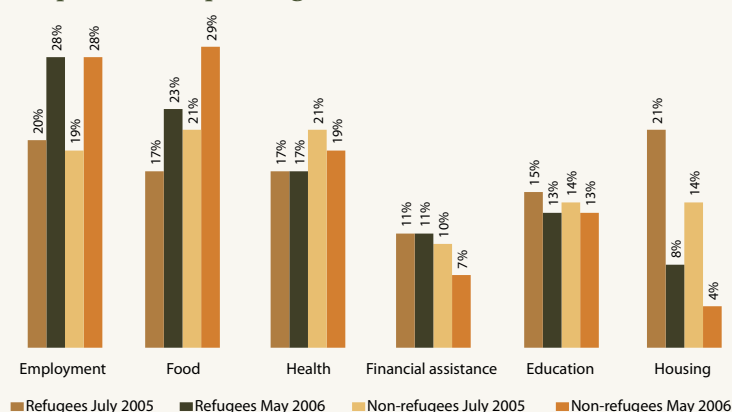


The decrease in the incidence of food assistance amongst refugees from July 2005 to May 2006 must be understood in light of the increased dependency of refugees on food assistance during the same period. Indeed, the number of refugees depending on relief assistance jumped from 13% to 17% (+4%), while the number of refugees depending on their own income or that of their family declined from 83% to 79% (-4%). In comparison, the percentage of non-refugees depending on relief assistance remained minimal: 3% in May 2006 as compared to 1% in July 2005. As a result, as shown in figure 7.13, the refugees' perception of food as a first most important assistance need has deepened, climbing from 16% to 23% over this period.

However, as shown in figure 7.13, fewer refugees (23%) considered that food assistance represented such a most important need than non-refugees (29%). This may be due to higher prevalence of assistance provision, from UNRWA for a start, amongst the former category. The same conclusion applies to employment assistance, although to a lesser extent, since the (relative) increase in the perception of this type of assistance as a most important assistance received could not match the ever-growing needs of the population. Therefore, employment assistance needs were equally high for both refugees and non-refugees (see figure 7.12).

Finally, the need for housing assistance appears to have plummeted for both refugees and non-refugees since July 2005, reaching 8% for the former (versus 21% in July 2005) and 4% of the latter (versus 14% in July 2005). These lower levels of housing assistance need may be due to the worsening in the living conditions in the oPt at large, which has made its inhabitants more concerned with access to basic commodities (food) or employment.

Figure 7.12: First most important need per refugee status, 2005-2006

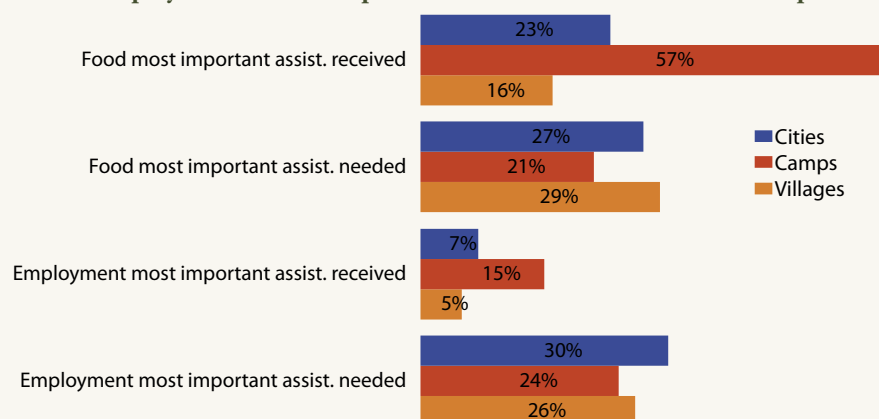


A geographical analysis enables us to gauge the service-providing institutions' targeting policies and their impact. Refugee camps - the poorest places of residence in the oPt -, were the main focus of food distribution: 57% of camp dwellers (67% in the Gaza and 31% in the West Bank) stated that food assistance was their most important assistance item received, compared with 23% of the inhabitants of cities and 16% of villagers.³ At the same time, probably because they benefit regularly from food aid

³ As a reflection of this institutional dependency on food assistance in camps, 22% of their dwellers rely on relief assistance for food (13% in the West Bank and 27% in the Gaza Strip), as against 8% of city dwellers and 5% of villagers.

schemes, fewer camp refugees considered food as a first most important assistance need: 21% of them (20% in the West Bank and 18% in Gaza) versus 27% of city inhabitants and 29% of villagers.

Figure 7.13: Food and employment as most important assistance received and needed per area of residence



Employment assistance per area/place of residence also targeted camp communities, as seen in figure 7.13. However, as is the case for food aid, while camps had higher numbers of inhabitants defining employment as the most important **assistance received** than cities and villages (15%⁴ versus 7% of city inhabitants and 5% of villagers), they had lower numbers of inhabitants perceiving employment as a first most important **assistance need** (24%⁵ versus 26% of villagers and 30% of city inhabitants). This trend, however, did not affect the refugee population at large, a majority of whom live outside camps (see Introduction above).

7.2.3 UNRWA and other services providers

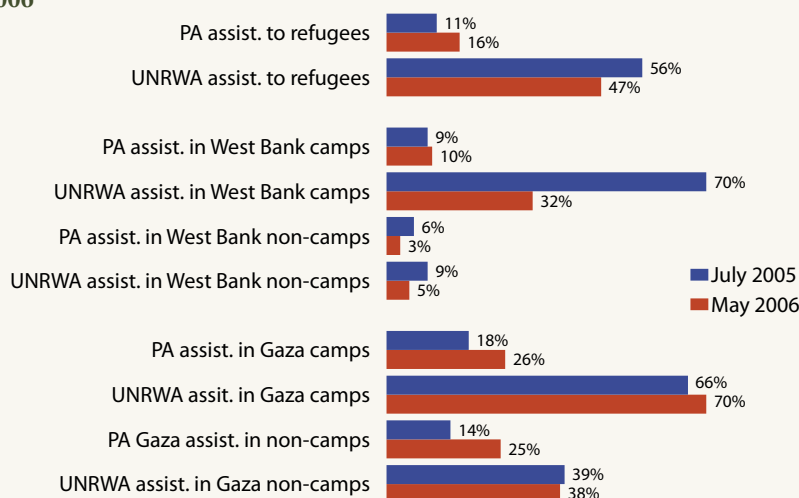
One of the survey's main findings is UNRWA's reduced involvement in providing assistance (perceived to be most important) to refugees compared with the July 2005 survey. As shown in figure 7.15, while UNRWA remained the main assistance provider of that type of assistance amongst oPt refugees, the percentage of these refugees who ascribed that role to UNRWA diminished by 9%, whereas those who saw the PA as providing that service amongst refugees increased by 5%. Geographically speaking, UNRWA's significance as provider of most important services remained superior to that of the PA, but it declined in all places of residence except in the Gaza camps, thus confirming the agency's increased focus on those places of residence. Conversely, and perhaps as a result of UNRWA's increased focus, the West Bank camps were much less targeted than previously.⁶

⁴ Namely, 18% in the Gaza camps and 7% in the West Bank camps.

⁵ Namely 26% in the Gaza camps and 21% in the West Bank camps.

⁶ UNRWA and the PA have been taken to be the main providers of most important aid to refugees (and non-refugees: UNRWA: 3%; PA 13%). Other assistance providers (NGOs, Islamic organisations, international organisations) have been much less mentioned by respondents (from 0% to 1% in May 2006), but a trend towards a decrease of most important assistance to refugees and non-refugees (1-3% in July 2005) can be perceived.

Figure 7.14: UNRWA and the PA as providers of most important assistance per refugee status and per place of residence, 2005-2006



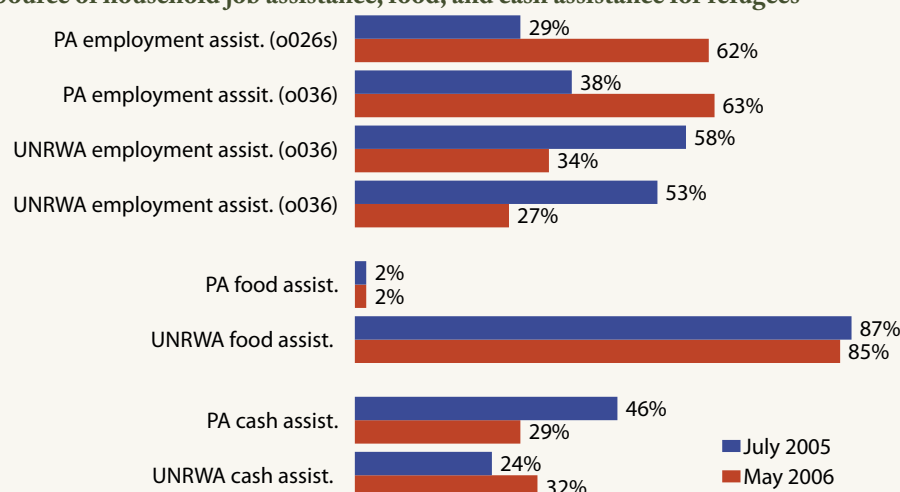
UNRWA's lower profile as a provider of most important assistance amongst refugees may be due to difficulties met by the agency in coping with the sharp deterioration in the humanitarian situation in the oPt since the general elections of January 2006 and the rise to power of Hamas, referred to above. The ensuing funding crisis that has affected the PA, together with new restrictions on Palestinian access to the Israeli job market, have intensified the hardships sustained by oPt inhabitants, thus furthering the refugees' dependence on institutional assistance, be it from UNRWA, the PA or other stakeholders. To face this situation, the agency - along with other international stakeholders - has had to revise its initial Emergency Appeal for 2006 (drafted in December 2005) in order to meet the increased needs of refugees, notably in the fields of employment, food and cash assistance (UNRWA, 2006; OCHA, 31 May 2006).⁷

Indeed, as shown in figure 7.15, UNRWA was replaced by the PA as the prime provider of employment assistance to refugees, be it as provider of most important assistance received or on a regular (household) basis.⁸ UNRWA retained its leading role as main provider of food, although to a lesser extent than in July 2005. Finally, cash assistance was the only field where UNRWA appears to have had increased its impact as a provider of emergency assistance.

⁷ According to this revised appeal, the budget for employment assistance would jump from US\$47,654,107 (original 2006 appeal) to US\$86,873,304 (direct and indirect hire included); budget for food assistance would increase from US\$32,682,304 to US\$47,245,635; budget for cash assistance would grow from US\$13,352,794 to US\$27,832,224. Additionally, the health budget, which only targeted the West Bank would be extended to the Gaza Strip: from US\$895,593 in the West Bank to US\$3,003,360 overall (US\$1,208,235 in Gaza and US\$1,795,125 in the West Bank). Additionally, an "environmental health" item was added that aims at addressing the dire environmental conditions in the Gaza Strip: US\$555,000. All in all, UNRWA's emergency appeal jumped from about US\$65,000 to US\$107,000 in Gaza; and from about US\$31,000,000 to US\$64,000,000 in the West Bank.

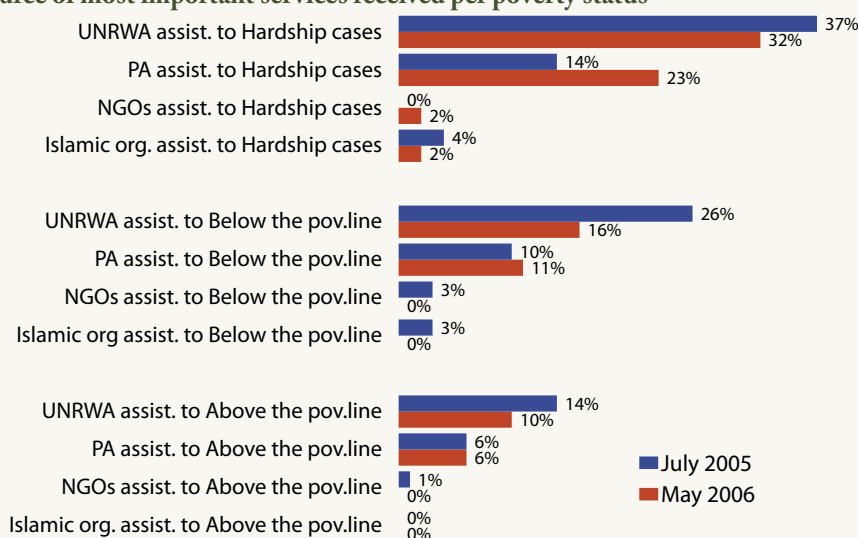
⁸ It may appear odd that the PA has become the prime provider of employment assistance to refugees, considering that the PA's Job Creation Programme ceased in April as a consequence of the general funding crisis (OCHA, 31 May 2006). However, due to the extreme circumstances, respondents may perceive regular employment with PA as job assistance. The next survey will investigate this issue more closely.

Figure 7.15. Source of household job assistance, food, and cash assistance for refugees



From a socio-economic perspective, the poorest groups were the prime beneficiaries of assistance in general. As highlighted in figure 7.16, UNRWA remained the main stakeholder amongst the latter groups (hardship cases⁹ or people below the poverty line), although - in line with UNRWA's general performance in the oPt - its involvement in providing most important assistance declined. In contrast, the percentage of hardship cases receiving assistance from the PA increased notably. Other minor stakeholders (NGOs, Islamic organisations) focused mainly on hardship cases.

Figure 7.16. Source of most important services received per poverty status



⁹ The notion of "hardship cases" used in this report (900 NIS per month for a couple with 4 children) is different from the notion of "special hardship cases" used by UNRWA. The latter is based on UNRWA-specific income-related and social criteria (families headed by widows for instance).

BIBLIOGRAPHY

OCHA, *Revised Emergency Appeal – Consolidated Appeals Process*, OCHA, 31 May 2006.

Rabah, J., Lapeyre F., Al Hussein, J., Daneels, I., Brunner, M., Bocco, R. *Palestinian Public Perceptions Report IX*, IUED, April 2006.

UNRWA. *UNRWA in Figures – Figures as of 31 December 2005*, UNRWA Headquarters Gaza, March 2006.

UNRWA, *UNRWA Revised Emergency Appeal 2006 – Special Report*, UNRWA Headquarters Gaza, 2006.

المؤشرات الرئيسية

إعداد: لويجي دي مارتينو

يغطي التقرير العاشر من الانطباعات العامة الفلسطينية الفترة الواقعة بين شهر كانون أول ٢٠٠٥ وشهر أيار ٢٠٠٦، حيث تشير نتائج هذه الدراسة إلى تدهور الوضع العام في الأراضي الفلسطينية المحتلة بشكل كبير إذا ما قورنت مع الفترة التي سبقت هذه الدراسة.

إن ازدياد شعور المواطنين الفلسطينيين بعدم الأمان والطمأنينة كان مصاحباً لازدياد في معدل الفقر العام (بنسبة ٧٠٪)، مما يعني زيادة بنسبة ٢٪ عن التقرير التاسع) وزيادة أيضاً في معدل الفقر المدقع (٣٨٪)، حيث ازداد معدل الفقر المدقع بنسبة كبيرة، وبشكل خاص، في القرى (بزيادة ١٥٪) والقدس الشرقية (بزيادة ١٢٪).

يعد ازدياد نسبة التدهور وعدم الاستقرار في سوق العمل من أهم العوامل التي تؤثر على انحدار الظروف المعيشية للشعب الفلسطيني. فازدادت البطالة بنسبة (٥٪) وأثرت بالتالي على نسبة (٣٨٪) من عدد السكان الكلي. حيث أثر عدم استقرار العمل على الأفراد ذوي الفقر المدقع بشكل خاص، ولكن هذا الوضع أثر أيضاً، وبشكل كبير، على الأسر التي تعيش فوق خط الفقر وذوي الثقافة العالية (حيث ازدادت نسبة البطالة لهذه الفئة من الشعب الفلسطيني بنسبة ٩٪). تعتبر الأسر ذوي حالات الفقر المدقع هي الأكثر تأثراً بالجدار الفاصل من ناحية القيود على الحركة والوصول إلى أماكن العمل: حيث إذا كان العدد الكلي للمستطلعين (٢٥٪) الذين أكدوا على تأثرهم من هذا الجدار، يرتفع هذا الرقم إلى (٣٢٪) للأكثر فقراً.

إن تدهور الوضع العام في الأراضي الفلسطينية المحتلة كان له نتائج جسيمة بالنسبة للشعب الفلسطيني، حيث اضطر السكان إلى الاستعانة بالاستراتيجيات التي تتلائم مع الوضع الذي يعيشون به: كعدم دفع الفواتير وتقليل استهلاك الغذاء، مما يمكنهم من تحمل هذا الوضع الأخذ بالإنهيار. ففي شهر أيار ٢٠٠٦، اضطرت الأسر التي تعيش في فقر مدقع إلى دفع الثمن مرة أخرى، حيث أشار (٧٦٪) منهم إلى اضطرابهم إلى تقليل استهلاكهم للغذاء (زيادة بنسبة ١٠٪ عن عام ٢٠٠٥). ومن الجدير بالذكر أيضاً، أن الجدار الفاصل كان له تأثير سلبي على حصول السكان على الغذاء وخاصة للأسر التي تعيش في فقر مدقع.

أكد عدد متزايد من المستطلعين على تدهور الظروف المعيشية وازدياد الصعوبة في التأقلم مع هذه الأوضاع، حيث أفاد (٥٢٪) منهم بأنهم استنفذوا أو سوف يستنفذون الوسائل المناسبة التي بحوزتهم للتغلب على الصعوبات في وقت قريب، ولكن ترتفع هذه النسبة إلى (٦١٪) في المناطق التي تقع خارج مخيمات اللاجئين في قطاع غزة، وتصل إلى (٦٣٪) في مخيمات اللاجئين في الضفة الغربية.

هنالك مؤشر آخر يؤكد على سوء الوضع بشكل كبير في الشارع الفلسطيني: وهو أن هناك زيادة بنسبة (٥٪)، مقارنة بعام ٢٠٠٥، من المستطلعين التي تشدد على عدم قدرتها على عناية وحماية أطفالها بشكل كامل. ويكون هذا الازدياد واضحاً في مناطق الضفة الغربية والقدس الشرقية، وخاصة في المناطق المتأثرة بالجدار الفاصل (بزيادة ٦٪). إضافة إلى ذلك، وبناء على إفادة (٥١٪) من المستطلعين، يعتبر تدهور الوضع الاقتصادي عاملاً رئيسياً للصعوبات التي يواجهها الأطفال الفلسطينيون في المدارس.

وأخيراً، إن ازدياد الاعتماد على المساعدات الخارجية يؤكد على تدهور الأوضاع، ولا سيما عندما تصبح الاحتياجات الأساسية مثل الغذاء، التشغيل والصحة في غاية الصعوبة لنيل رضا المستطلعين. ففي القرى الفلسطينية، يعد الغذاء من أهم الأولويات بينما يعد التشغيل من أهم الأولويات في المدن ومخيمات اللاجئين.

في نفس الوقت، أكدت نتائج التقرير العاشر لاستطلاعات الرأي العام الفلسطينية أن هنالك نقصان واضح في توزيع المساعدات في الأراضي الفلسطينية المحتلة، حيث استلم (٣٤٪) من السكان المساعدات في الأشهر الستة السابقة لشهر أيار ٢٠٠٦ (أقل بنسبة ٤٪ من التقرير السابق). وبشكل عام، توزع المساعدات في قطاع غزة (٦٣٪) بنسبة أكبر من الضفة الغربية (٢٠٪)، هنالك نقصان كبير في توزيع المساعدات في الضفة الغربية وخاصة في المناطق التي تقع خارج مخيمات اللاجئين (نقصان بنسبة ١٣٪ على التوالي). هنالك إشكالية في هذا الأمر حيث ازدادت حالات الفقر المدقع بشكل كبير في القرى الفلسطينية وخاصة المتواجدة في الضفة الغربية (زيادة بنسبة ١٥٪).

تستهدف المساعدات بشكل رئيسي اللاجئين الفلسطينيين (حيث يكون اللاجئون، بشكل عام، أكثر فقراً من غير اللاجئين). وفي نفس الوقت، قلت المساعدات التي تزود اللاجئين بنسبة (٥٪) منذ عام ٢٠٠٥ خاصة في مخيمات اللاجئين في الضفة الغربية. من ناحية أخرى، تركز المساعدات غالباً على الأسر التي تعيش في فقر مدقع (٥٣٪ من هذه الفئة - بزيادة ٢٪ منذ عام ٢٠٠٥ - استلمت مثل هذه المساعدات)، بينما أكدت الأسر التي تعيش تحت خط الفقر بنقصان حاد في المساعدات المزودة (نقصان بنسبة ١٣٪ منذ عام ٢٠٠٥).

إن الصورة التي أوضحتها الانطباعات العامة الفلسطينية في تقريرها العاشر كئيبة للغاية. إن الجانب الأكثر فقراً يعاني من زيادة في صعوبة التأقلم مع الوضع السائد في الأراضي الفلسطينية المحتلة. في نفس الوقت، أصبحت المناطق مثل القدس الشرقية والقرى في الضفة الغربية، وشرائح المجتمع مثل الأفراد ذوي الثقافة العالية والذين يعيشون فوق خط الفقر، ضعيفة ومتزايدة بشكل كبير بسبب

رزوحها تحت ضغط هائل نتيجة تدهور الوضع الاقتصادي والقيود على الحركة. منذ أن أصبحت الفجوة بين مستوى المساعدات المحتاجة والمساعدات المستلمة في تزايد مستمر، فإن الصورة سوف تسوء مع التقرير الحالي الذي استطاع، بصورة جزئية، قياس تأثير توقف المساعدات الدولية التي تلت تعيين حكومة حماس بعد الانتخابات التشريعية التي حصلت في شهر كانون ثاني ٢٠٠٦، والعمليات العسكرية الواسعة التي تشنها القوات العسكرية الإسرائيلية في قطاع غزة.

الفصل الأول: ظروف حركة التنقل والظروف الأمنية للسكان المدنيين

ازداد شعور الفلسطينيين بعدم الأمان في جميع مناطق الأراضي الفلسطينية المحتلة، وخاصة في الضفة الغربية (بزيادة ١١٪) والقدس الشرقية (بزيادة ٢٢٪)، وفي المناطق التي ما زال فيها الجدار الفاصل قيد البناء الذي زاد من القيود على الحركة وسهولة التنقل للفلسطينيين (القلق من المستقبل في هذه المناطق).

إن ملخص الوضع الأمني في الأراضي الفلسطينية المحتلة في شهر أيار يتمثل بـ:

الرجال نسبة إلى النساء: أفادت (٥٥٪) من النساء بأنهم يشعرون بعدم الأمان مقارنة مع نسبة (٥٩٪) من الرجال.

الأفراد الأكبر سناً نسبة إلى الأفراد الأقل سناً: إن نسبة (٤٩٪) من الفئة العمرية التي تتراوح ما بين (١٨-٢٤ سنة) يشعرون بعدم الأمان مقارنة مع نسبة (٦٥٪) من الفئة العمرية التي تكون أعمارها ٥٠ سنة فما فوق.

ذوي الثقافة المتدنية نسبة إلى ذوي الثقافة العالية: (٥٣٪) من الفلسطينيين ذوي الثقافة العالية يشعرون بعدم الأمان مقارنة مع (٦٠٪) من الأفراد ذوي الثقافة المتدنية.

الأسوأ حالاً نسبة إلى الأفضل حالاً: إن الأسر التي تعيش في فقر مدقع تشعر بعدم الأمان بنسبة أكبر من الأسر التي تعيش تحت خط الفقر. مع ذلك، ازداد الشعور بعدم الأمان من شهر تموز ٢٠٠٥ حتى شهر أيار ٢٠٠٦ بشكل أكبر للمستطلعين الذين يعيشون فوق خط الفقر (بزيادة ١٤٪ مقابل زيادة ١٢٪ للأسر التي تعيش في فقر مدقع).

ينسب سكان الضفة الغربية شعورهم بعدم الأمان إلى الاحتلال الإسرائيلي (بما فيه من غارات إسرائيلية، نقاط التفتيش والمستعمرات)، بينما ينسب أهالي قطاع غزة شعورهم بعدم الأمان إلى العوامل الداخلية، مثل نشاطات الأحزاب المحلية المسلحة، الفساد السائد في الأراضي الفلسطينية والجرائم. أما بالنسبة إلى أهالي القدس الشرقية، فإن أسباب الشعور بعدم الأمان لديهم تكاد تكون ملحوظة ومنها نقاط التفتيش الإسرائيلية والجرائم.

تطورت الحركة الداخلية في قطاع غزة بشكل ملحوظ وكان ذلك نتيجة تحرير القطاع من القوات الإسرائيلية ونقل المستوطنين الإسرائيليين من مستوطناتهم في شهر آب-أيلول ٢٠٠٥. على عكس ذلك، بقيت ظروف الحركة والتنقل في الضفة الغربية على حالها مع تطور بسيط جداً أشبه بالمعدهوم، حيث ما زالت القيود على حركة التنقل صعبة للغاية في مناطق القدس الشرقية. فقد كانت نسبة سكان القدس الشرقية الذين تأثروا بالجدار الفاصل (٩٧٪) أعلى بكثير من تأثر سكان الضفة الغربية من هذا الجدار (٣١٪).

ازدادت التأثيرات الجانبية نتيجة بناء الجدار الفاصل وخاصة في القدس الشرقية، حيث فصل السكان عن أقاربهم وأراضيهم إضافة إلى ارتفاع أسعار المواد والمواصلات. فقد كان فصل الأفراد عن أقاربهم، بالنسبة لسكان الضفة الغربية والقدس الشرقية معاً، يعد من أهم المشاكل والتأثيرات التي تلت بناء هذا الجدار.

الفصل الثاني: الظروف الاقتصادية – الاجتماعية

ازدادت نسبة الفقر في الأراضي الفلسطينية المحتلة منذ العام الماضي، فقد وصل معدل الفقر الكلي في شهر أيار ٢٠٠٦ إلى (٧٠٪) مقارنة مع (٦٨٪) في شهر تموز ٢٠٠٥. حيث كان معدل الفقر في الضفة الغربية (٧١٪)، في القدس الشرقية (٣٥٪) وفي قطاع غزة (٧٩٪). إضافة إلى ذلك، يزداد مستوى الفقر المدقع بشكل مستمر مؤثراً على (٣٨٪) من عدد السكان الكلي. حيث كان معدل الفقر المدقع في الضفة الغربية (٣٣٪) وقطاع غزة (٥٤٪)، حتى ابتدأت القدس الشرقية أيضاً في مواجهة تدهور كبير في الظروف المعيشية. فقد كانت نسبة المستطلعين من القدس الشرقية الذين يواجهون الفقر المدقع في شهر تموز ٢٠٠٥ (٥٪)، أما في شهر أيار ٢٠٠٦ ارتفعت هذه النسبة إلى (١٧٪).

بالرغم من إشارة التقرير العاشر للانطباعات العامة الفلسطينية إلى ارتفاع واضح في مستوى الفقر في مختلف مناطق الإقامة للفلسطينيين، إلا أن الانحدار الكبير في الظروف المعيشية يحدث في القرى الفلسطينية. ففي عام ٢٠٠٤، كانت نسبة (٢٣٪) من المستطلعين الذين يقيمون في القرى يعيشون في فقر مدقع، ولكن ارتفعت هذه النسبة لتصل إلى (٣٨٪) في شهر أيار ٢٠٠٦.

من ناحية التوزيع الجغرافي، فإن الأكثر فقراً في الضفة الغربية (٤٧٪) يعيشون في القرى على عكس حال سكان قطاع غزة، حيث (٦٦٪) من الذين يعيشون في فقر مدقع يقيمون في المدن. أما بالنسبة للذين يعيشون تحت خط الفقر (باستثناء الأكثر فقراً)، (٧٣٪) من المستطلعين الذين يعيشون في غزة يقيمون في المدن، بينما يكون عددهم بنسبة (٥٠٪) في القدس الشرقية و(٥٢٪) في الضفة الغربية. فيما يتعلق بالذين يعيشون فوق خط الفقر، تشير النتائج إلى أن الأغلبية العظمى منهم يقيمون في المدن. تشير نتائج هذه الإحصائية إلى أن الجدار

الفاصل له تأثير قليل على معدل الفقر، حيث أن (١٧٪) من الأكثر فقراً يقيمون في مناطق يقطعها الجدار الفاصل، (٣٩٪) من الذي يعيشون فوق خط الفقر و(٢٦٪) من الذين يعيشون تحت خط الفقر.

بالنسبة إلى نتائج شهر أيار ٢٠٠٦، شعر (٤٤٪) من المستطلعين بأن دخلهم الشهري قد قل في الأشهر الستة الماضية، بينما عبر (٢٠٪) منهم فقط عن هذا الشعور في شهر تموز ٢٠٠٥. يعاني الأكثر فقراً من هذا الوضع في المقام الأول، حيث (٥٥٪) منهم يلاحظ تقليل الدخل الشهري مقارنة مع (٢٨٪) العام الماضي. أدرك (٣٩،٤٪) من الفقراء انحدار دخلهم الشهري (مقارنة مع ١٩٪ العام الماضي)، أما بالنسبة للذين يعيشون فوق خط الفقر فإنهم يعانون أيضاً من تخفيض الدخل (٣٤،٤٪ في شهر أيار ٢٠٠٦ مقارنة مع ١١،٧٪ في عام ٢٠٠٥). فقد حصلت مثل هذه التخفيضات في جميع المناطق وخاصة في قطاع غزة حيث عانى (٥٨٪) من المستطلعين من انخفاض دخلهم الشهري.

لقد جاءت التخفيضات في الدخل الشهري مواكبة لتدهور سوق العمل الذي تأثر بشكل أو بآخر بالمعوقات التي تواجهه الناتجة عن الصراع الناشئ في الأراضي الفلسطينية المحتلة. حيث أفاد (٦١٪) من الفقراء أن دخلهم الشهري قد قل نتيجة فقدانهم للعمل أو نتيجة تقليل ساعات العمل، بينما شدد (٤١٪) من الذين يعيشون فوق خط الفقر أيضاً على هذه الأسباب التي قللت من دخلهم الشهري إضافة إلى ذكر أسباب أخرى.

نظراً لتدهور الظروف الاقتصادية – الاجتماعية، تمنع الناس عن دفع الفواتير في شهر أيار ٢٠٠٦ بشكل أكبر مقارنة مع شهر تموز ٢٠٠٥ (٧١٪ من الفقراء لا يستطيعون دفع الفواتير مقارنة مع ٥٧٪ في شهر تموز ٢٠٠٥) حيث أن أكثر من نصف الفقراء يواجهون مثل هذا الوضع. فقد اضطر الذين يعيشون فوق خط الفقر إلى التلاؤم مع الظروف المعيشية الأخذة بالتدهور عن طريق استخدام هذه الاستراتيجية (بنسبة ٣٥٪ منهم في شهر أيار ٢٠٠٦ مقارنة مع ٢٧٪ في شهر تموز ٢٠٠٥). أما فيما يتعلق باستراتيجية قطع المصاريف أو اللجوء إلى السلف والدين، نفس التحليل يمكن تطبيقه على الاستراتيجيات المتبعة في تخفيض النفقات والاقتراض من الآخرين التي بدورها تمكن الأفراد من تحمل الأوضاع السيئة. وبشكل عام، اضطر عدد أكبر من المستطلعين إلى زيادة استخدامهم لمذخراتهم لكي تمكنهم من تحمل تدهور ظروف المعيشة.

تشير نتائج الإحصائية الحالية إلى أن الأفراد الأكثر فقراً يواجهون صعوبة كبيرة في توفير الغذاء الكافي لأسرهم من خلال استخدامهم لمصادرهم الخاصة: حيث (١٨٪) منهم يعتمدون على المساعدات الغذائية (مقارنة مع ١٣٪ في شهر تموز ٢٠٠٥) ونسبة (٧٠٪) فقط من الذين يعتمدون على مصادرهم الخاصة (مقارنة مع ٧٧٪ في عام ٢٠٠٥). إضافة إلى ذلك، إن الجدار الفاصل يزيد من صعوبة حصول الفقراء على بعض المواد الغذائية: فقد أكد (١٦،٥٪) من المستطلعين على أن الجدار الفاصل والحوجز الأخرى جعلت إمكانية حصولهم على الغذاء أمراً صعباً للغاية أو شبه مستحيلة.

ازدادت نسبة الأفراد الذين يعتقدون بأن هنالك صعوبة في إبقاء أمورهم المادية، خلال الفترة القادمة، في حالة جيدة من (١١٪) إلى (١٦٪). ففي عام ٢٠٠٥، شعر (٤٠٪) منهم أن لهم القدرة على الاستمرار لوقت طويل أو لعام آخر، ولكن قلت هذه النسبة إلى (٣٤٪) في شهر أيار ٢٠٠٦، في حين ازدادت نسبة المستطلعين الذين يعيشون في المدن ومخيمات اللاجئين الذين شددوا على عيشهم في ظروف صعبة للغاية وعدم معرفتهم لكيفية تدبر أمورهم بشكل كبير في الفترة الواقعة بين شهر تموز ٢٠٠٥ وشهر أيار ٢٠٠٦، حيث ازدادت هذه النسبة من (١٠٪) إلى (١٧٪) في المدن، ومن (١٠٪) إلى (٢٣٪) في مخيمات اللاجئين. وقد شهدت القدس الشرقية أيضاً ازدياداً كبيراً في نسبة السكان الذين واجهوا مثل هذا الوضع (من ٧٪ إلى ١٤٪). إن قدرة تحمل الأفراد الأكثر فقراً لمثل هذا الوضع الاقتصادي الحالي الصعب قد ضعفت، حيث أفادت نسبة منهم إلى أنهم كانوا في وضع حرج جداً ولم يعرفوا كيفية المحافظة على بقائهم، وقد زادت هذه النسبة من (٢١٪) في شهر تموز ٢٠٠٥ إلى (٢٨٪) في شهر أيار ٢٠٠٦.

على الرغم من الأزمات الاقتصادية والإنسانية، شعر المستطلعون بأن المجتمع الفلسطيني عاش بدوره التماسك الاجتماعي وقدرات التأقلم. فقد يساعد هذا التماسك وقدرة التكيف على شرح كيفية قدرة الضفة الغربية وقطاع غزة على امتصاص مستويات الفقر والبطالة التي كانت من الممكن أن تقود إلى تمزيق الرابطة الاجتماعية وتدمير البنية الاجتماعية في كثير من المجمعات الأخرى. إضافة إلى ذلك، إن الشعور المتزايد بالترقة بسبب وضع الدخل الشهري للأفراد في المجتمع الفلسطيني ازداد بين الأفراد الذين يعيشون في مخيمات اللاجئين في الضفة الغربية وفي القدس الشرقية، حيث اعتبر عدد متزايد من المستطلعين أن ظروفهم المعيشية أسوأ من الظروف المعيشية التي يعيشها أفراد المجتمع بشكل عام.

تؤكد نتائج الدراسة الحالية على حدوث تدهور كبير في الظروف المعيشية إضافة إلى خطر حدوث أزمة إنسانية كبيرة. من الملاحظ أن أكثر من نصف عدد المستطلعين يشعرون بأن وسائل البقاء لديهم استنفذت أو سوف تستنفذ في وقت قريب (٥٢٪)، خاصة في مخيمات الضفة الغربية (٦٣٪) وفي خارج مخيمات اللاجئين في قطاع غزة (٦١٪). من إحدى النتائج الملفتة للنظر في هذا التقرير هي تأكيد (٤٣٪) من المستطلعين المقيمين في مخيمات اللاجئين في الضفة الغربية على استنفاد الوسائل المتوفرة لديهم التي تمكنهم من تحمل الأوضاع الصعبة.

الفصل الثالث: تطور سوق العمل

استمر العمال الفلسطينيون، في شهر أيار ٢٠٠٦، في مواجهة بيئة عمل سيئة للغاية نتيجة لانهيار الاقتصاد الفلسطيني، القيود على الحركة وفصل سوق العمل الفلسطيني عن سوق العمل الإسرائيلي.

أما بالنسبة إلى نتائج إحصائية شهر أيار ٢٠٠٦، ازداد معدل البطالة بشكل كبير ليصل إلى (٣٨٪) مقارنة مع نسبة (٣٣٪) في شهر تموز ٢٠٠٥،

حيث تشير النتائج إلى أن أقل من نصف القوى العاملة (٤١٪) كانت لديها وظيفة بدوام كامل، بينما كانت (٢١٪)، للجزء الأكبر، عاطلة عن العمل، ويكون عالقاً بشكل لا إرادي في الوظائف ذات دوام جزئي. فقد ازدادت نسبة البطالة بشكل كبير خارج مخيمات اللاجئين في الضفة الغربية (من ٣٤٪ إلى ٣٧٪)، وكذلك في داخل مخيمات اللاجئين في قطاع غزة (من ٤١٪ إلى ٤٤٪) وفي القدس الشرقية (من ١٦٪ إلى ١٩٪). مع ذلك، قلت البطالة بنسبة ملحوظة في داخل مخيمات اللاجئين في الضفة الغربية (من ٤٤٪ إلى ٢٨٪) وقد جاءت هذه بطريقة طوعية مرافقة لحرية الوصول إلى الأعمال بدوام جزئي (من ٣٤٪ إلى ٥٥٪).

بالرغم من معاناة الأفراد ذوي الثقافة المتدنية من البطالة (٤٧٪ من المستطلعين من هذه الفئة عاطلين عن العمل)، إلا أنهم استطاعوا نيل حرية الوصول إلى الأعمال بدوام كامل بطريقة أفضل، حيث (٢٨٪) منهم وظفوا بدوام كامل في شهر أيار ٢٠٠٦، مقارنة مع (٢٠٪) في شهر تموز ٢٠٠٥. على عكس ذلك، اضطر عدد أكبر من الأفراد ذوي الثقافة العالية إلى مواجهة البطالة (من معدل ١٥٪ في شهر تموز ٢٠٠٥ إلى ٢٤٪ في شهر أيار ٢٠٠٦). تشير النتائج أيضاً إلى ارتفاع نسبة البطالة بالنسبة للعمال الأصغر سناً والأكثر سناً. وفي نفس الوقت، تشير النتائج إلى ازدياد نسبة العمل بدوام كامل من (٢٥٪) إلى (٣١٪)، وانخفاض نسبة البطالة من (٥٥٪) إلى (٤٧٪) بالنسبة للفئات العمرية ما بين ١٨-٢٤ سنة.

إن عدم الاستقرار في سوق العمل الفلسطيني أخذ بالازدياد، حيث انخفضت نسبة المستطلعين الذين أشاروا إلى عدم وجود أفراد في أسرهم فقدوا أعمالهم إلى (٧٧٪) في شهر أيار ٢٠٠٦ مقارنة مع (٨٦٪) في شهر تموز ٢٠٠٥. فقد ازدادت نسبة الأسر التي فقد أحد أعضائها عمله من (١١٪) إلى (١٨٪). إن عدد المستطلعين الذين شددوا على فقدان أحد أفراد أسرهم لعمله قد ارتفع، وهذا القول ينطبق على كل مستوى من مستويات الفقر المختلفة. إضافة إلى ذلك، هنالك ازدياد هائل في نسبة الأسر الفقيرة المعدمة التي تعاني من البطالة، حيث ارتفعت نسبة المستطلعين الذين أفادوا أن أحد أفراد أسرهم قد فقد عمله من (١٧٪) إلى (٢٩٪) بين شهر تموز ٢٠٠٥ وشهر أيار ٢٠٠٦. حيث أن فقدان العمل ازداد بطريقة كبيرة خاصة في قطاع غزة، سواء أكان في مناطق مخيمات اللاجئين أو خارج هذه المخيمات.

إن الشعور بعدم الأمان تجاه الاقتصاد الفلسطيني يتمثل بحقيقة أن أكثر من نصف السكان (٥٥٪)، في عام ٢٠٠٥، شعروا بأنه من غير المحتمل أن يفقدوا وظائفهم، ولكن انخفض هذا الرقم إلى (٥٠٪) في عام ٢٠٠٦. إن هذا الشعور حول فقدان الوظيفة ازداد عند الفقراء والذين يعيشون فوق خط الفقر. يبدو أن الأفراد ذوي الثقافة العالية يشعرون بعدم الأمان تجاه استقرارهم في وظائفهم في شهر أيار ٢٠٠٦، بشكل أكبر مقارنة مع إحصائية شهر تموز ٢٠٠٥. أما من ناحية مكان الإقامة، إن الشعور الأكبر بعدم الأمان لهذا العام كان متمركزاً في القدس الشرقية وفي خارج مخيمات اللاجئين في قطاع غزة، بينما أعاد السكان الذين يعيشون في داخل مخيمات اللاجئين كسب الثقة فيما يتعلق باستقرار وظائفهم مرة أخرى.

يعد الجدار الفاصل سبباً من أسباب عدم الاستقرار في الوظيفة. تبعاً لإحصائية شهر أيار ٢٠٠٦، إن هذا الجدار يمنع نسبة (٢٥٪) من السكان من الوصول إلى أماكن عملهم. حيث يتأثر الأكثر فقراً بشكل كبير من الجدار الفاصل بنسبة (٣٢٪)، وبالتالي لا يستطيعون الوصول إلى أماكن عملهم. وقد تأثر أيضاً نسبة (١٨٪) من الأسر التي تعيش فوق خط الفقر من هذا الجدار.

بالنسبة لهيكيلة القوى العاملة، كان هناك ازدياد في عدد العاملين المهرة من (١٥٪) إلى (٢٠٪)، لا تزال فئة الموظفين هي الأكبر وقد ازدادت منذ عام ٢٠٠٥ من (٣٥٪) إلى نسبة (٣٧٪). بينما قل عدد أصحاب الأعمال الحرة من (٢٣٪ إلى ١٨٪). ومن الجدير بالذكر أن عدداً أكبر من الأفراد الأصغر سناً يعملون كموظفين وأن هناك فرص عمل أكبر للفئة العمرية التي تتراوح أعمارها بين ٢٥-٣٤ سنة في مجال الأعمال المهنية. استفادت القدس الشرقية بشكل كبير من الفرص الجديدة في الأعمال المهنية، فقد ازدادت نسبة المستطلعين من (٢٠٪) في عام ٢٠٠٥ إلى (٤٢٪) في عام ٢٠٠٦ وقد أخذت مخيمات اللاجئين في الضفة الغربية النسبة الكبرى من مراكز التشغيل (من ٣٩٪ إلى ٥٢٪).

لم يتغير نوع العمل بشكل كبير بين عامي ٢٠٠٥ و ٢٠٠٦. فقد لوحظ أن هنالك انحدار بسيط في المراكز الحكومية بنسبة (١٪)، حيث يتوافق ذلك مع العمل مع المنظمات غير الحكومية المحلية والدولية والنشاطات التجارية. ما زال القطاع الخاص من أهم أنواع العمل، حيث ازدادت نسبة الأعمال الحرة بنسبة (٤٪).

اعتبر العمل بدوام كامل من أهم وأفضل طرق الهروب من الفقر. ولكن بالرغم من ازدياد نسبة حصول الأكثر فقراً على أعمال بدوام كامل، إلا أنه لم تلاحظ الدراسة حصول أية تغييرات في الظروف المعيشية لهؤلاء الأفراد. أما بالنسبة للذين يعيشون تحت خط الفقر، فإنهم يستمرون في الحصول على أعمال بدوام كامل ودوام جزئي على نحو أفضل. ومع ذلك، بالرغم من حصولهم على العمل، إلا أن وضعهم لم يتغير بشكل كبير. أما بالنسبة للذين يعيشون فوق خط الفقر، فإنهم ما زالوا يشعرون بعدم الأمان تجاه وضع العمل لديهم.

بالتوافق مع التقارير التي توقعت حدوث انخفاض في المساعدات، فإنه يجب التشديد على أن التوظيف في القطاع الحكومي لم يعد آمناً كما كان عليه من قبل. حيث إذا عملت نسبة (٧٪) فقط من الأكثر فقراً في القطاع الحكومي، تزداد هذه النسبة إلى (١٠٪) في هذا الوقت. أما بالنسبة للفقراء، فقد كانت نسبتهم (٣٠٪) في عام ٢٠٠٥ وقد وصلت الآن إلى (٣٦٪).

الفصل الرابع: التعليم وحماية الطفل

وصفت الحاجة إلى الذهاب إلى المدرسة بانتظام (٤٩٪) بأنها احتياجات أولية للأطفال الفلسطينيين، تليها الحاجة إلى حصولهم على الدعم النفسي (١٨،٩٪). أما بالنسبة إلى توفير الفرص الأمانة للعب مع الأصدقاء بنسبة (٣١،٢٪)، فإنها تصنف كاحتياجات ثانوية للأطفال، تليها احتياجات الخدمات الطبية (٢٨،٦٪) والحصول على هذه الخدمات بدون قيود. لا يوجد فرق كبير في احتياجات الأطفال

الأولية ما بين الأسر التي تأثرت بالجدار الفاصل أو التي لم تتأثر به.

إن تحديد جنس المستطلعين أو أرباب الأسر لم يأت متوافقاً مع الانطباعات لاحتياجات الأطفال الأولية، إلا أنه من الواضح أن جنس الأطفال أنفسهم أثر على الاستجابة لاحتياجات الأطفال الأولية في الأسر الفلسطينية. حيث أن الأسر التي تحتوي على الإناث فقط أو تحتوي على الأكثرية من الإناث، فإن حاجة الذهاب إلى المدرسة بانتظام (٣٧٪) ذكرت بشكل أقل من الأسر التي تحتوي على عدد متساوٍ من كلا الجنسين (بمعدل ٥٢٪) أو عندما تحتوي الأسر على ذكور فقط أو تكون الأكثرية من الذكور (٤٧٪).

أشار ثلث المستطلعين إلى عدم قدرتهم الكاملة على حماية ورعاية حاجات الأطفال في الأسر الفلسطينية. وهذا يمثل زيادة بنسبة (٥٪) منذ شهر تموز ٢٠٠٥ حين أكد (٢٧٪) من المستطلعين على عدم قدرتهم الكاملة لحماية ورعاية حاجات الأطفال في الأسر الفلسطينية. وقد كان التحسن ملحوظاً في هذا المجال مع مرور الزمن بحسب المناطق الجغرافية وعلاقة الأسر الفلسطينية بخطر الفقر. ففي القدس الشرقية والضفة الغربية، ازدادت نسبة الذين أشاروا إلى عدم قدرتهم الكاملة على حماية ورعاية حاجات الأطفال في الأسر من قرابة ربع المستطلعين في عام ٢٠٠٥ إلى (٣٣٪) في القدس الشرقية و(٣٦٪) في الضفة الغربية في عام ٢٠٠٦. أما في قطاع غزة، فإن هذه النسبة لم تتغير بشكل فعلي. إضافة إلى ذلك، اختلفت إجابات المستطلعين في الضفة الغربية بالنسبة لعلاقتهم مع الجدار الفاصل الإسرائيلي، حيث أشار (٣٧٪) من المستطلعين الذين يعيشون في مجتمع متأثر بالجدار إلى عدم قدرتهم لتلبية حاجات الأطفال، بينما أفادت نسبة (٣١٪) من المستطلعين الذين يعيشون في مجتمع لم يتأثر بهذا الجدار بعدم قدرتهم أيضاً لتلبية هذه الحاجات - أي باختلاف نسبته (٦٪) بين المجتمعين.

قلت نسبة المستطلعين الذين يعتقدون أن الأطفال الفلسطينيين يواجهون العنف بنسبة (٧٪) (٨٤٪ في عام ٢٠٠٥ إلى ٧٧٪ في عام ٢٠٠٦). على الرغم من هذا الانخفاض المتواضع، إلا أن النسبة تبقى مرتفعة بطريقة تنبئ بالخطر. يختلف التطور الملموس في هذا المجال مع مرور الزمن بحسب منطقة الإقامة. بينما انخفض مستوى العنف ضد الأطفال بشكل قليل (من ٨٦٪ في عام ٢٠٠٥ إلى ٨٣٪ في عام ٢٠٠٦)، فإن هنالك انخفاض ملحوظ مقارنة مع كل من القدس الشرقية وقطاع غزة. أما فيما يتعلق بالصورة الكلية، فإنه ليس هنالك تغيرات ملحوظة إذا ما قورنت مع تطور انطباعات المستطلعين عن المصادر الرئيسية للعنف ضد الأطفال من عام ٢٠٠٥ إلى عام ٢٠٠٦. حيث يبقى الصراع الفلسطيني - الإسرائيلي المصدر الوحيد والأهم لهذا العنف (٦٢٪ في عام ٢٠٠٥ و٦٦٪ في عام ٢٠٠٦).

تعتبر كيفية قضاء الأطفال لأوقات فراغهم مؤشراً هاماً لمعرفة كونهم في أمان. إن مشاهدة التلفاز يعد النشاط الأهم لكل الفئات العمرية. فالخروج مع الأصدقاء واللعب في الجوار ذكرت بشكل كبير للفئة العمرية التي تكون بين ٦-١٢ سنة. بينما يعد الخروج مع الأصدقاء النشاط الرئيسي للفئة العمرية التي تكون بين ١٣-١٨ سنة. ولكن استبدل اللعب في الجوار، على نفس البعد، بقضاء وقت أطول في المواضيع السياسية - الزراعية، الهوايات، النوادي، العمل والرياضة، على هذا الترتيب.

من الأسر التي واجه أطفالها صعوبة في الذهاب إلى المدرسة في الأشهر الستة السابقة لهذه الإحصائية (٨٪ من الأسر التي يكون أعمار أطفالها مناسباً للعمر المدرسي^١، يكون الخوف من التعرض للعنف على يد الجنود الإسرائيليين (٥٣٪) هو من أهم العوائق التي تمنع الطلاب من الذهاب إلى مدارسهم، يليه سوء الأوضاع الاقتصادية بالنسبة للأسر الفلسطينية (٥١٪) والخوف من التعرض للعنف الذي يكون ناتجاً عن نقص الأمن الداخلي الفلسطيني (٤٧٪). حيث أشار أكثر من ربع هذه الأسر إلى خوفها المستمر من تعرض أطفالها للعنف من قبل المستوطنين الإسرائيليين، (١١٪) منها أكدت على عدم قدرتها على الحصول على تأشيرات دخول (تصاريح) تمكنهم من التنقل بين مناطق الضفة الغربية.

بالرغم من الإشارة إلى حقيقة أن أكثر من نصف الأسر التي يواجه أطفالها صعوبة في الذهاب إلى المدرسة نتيجة سوء الوضع الاقتصادي للأسر الفلسطينية، إلا أنه من المهم توضيح أن نسبة دخول الأطفال الذين يتناسب أعمارهم مع السن الدراسي سوق العمل قد قلت بنسبة (١٪) في عام ٢٠٠٦ (من ٣٪ في عام ٢٠٠٥ إلى ٢٪ في عام ٢٠٠٦).

أشارت الإحصائية إلى أن الضغط الذي يتولد عند الأطفال في الأسر الفلسطينية يتطور مع الزمن منذ عام ٢٠٠٥، وأوضحت أيضاً نتائج وتأثير هذه الضغوطات على تصرف الأطفال. حيث أشار (٦٠٪) من المستطلعين إلى ازدياد مستوى الضغط الذي يشعره الأطفال الفلسطينيون منذ عام ٢٠٠٥ (حيث أشار ٢٥٪ منهم إلى ازدياده و٣٥٪ إلى ازدياده بصورة كبيرة)، بينما أوضح أكثر من ربع المستطلعين أن مستوى الضغط لدى أطفالهم بقي على حاله، وأشارت نسبة (١٢٪) إلى انخفاض مستوى الضغط أو إلى انخفاضه بشكل كبير. أما بالنسبة إلى أنواع المناطق، فإنه لا يوجد فرق ملحوظ بين سكان المخيمات أو المدن أو القرى فيما يتعلق بازدياد الضغط لدى الأطفال. مع ذلك، بما يخص انخفاض مستوى الضغط الذي يتولد عند الأطفال، أشارت نسبة أكبر من المقيمين في المخيمات الفلسطينية (١٧٪) إلى انخفاض في مستوى الضغط مقارنة مع سكان المدن والقرى (بنسبة ١٢٪ و٨٪ على التوالي).

هنالك نسبة (٣٥،٥٪) من السكان الفلسطينيين الذين تكون أعمارهم متوافقة مع السن القانونية للدراسة، ولكن أفاد (٧٪) من هذه النسبة إلى تخليهم عن المدرسة أو عدم ذهابهم للمدرسة بتاتا. إضافة إلى ذلك، هنالك نسبة (٦٧٪) من العدد الكلي للأسر المقيمة في الأراضي الفلسطينية المحتلة التي تحتوي على أطفال تتناسب مع السن القانونية للدراسة، ولكن أشار (١٧٪) من هذه النسبة إلى تخليهم عن المدرسة أو عدم ذهابهم إلى المدرسة بتاتا. في محاولة لفهم أسباب تخلي الأطفال الفلسطينيين عن الذهاب إلى المدرسة، وجدت الإحصائية أن ليس هنالك علاقة مباشرة بين التخلي عن الذهاب إلى المدرسة ومستوى الفقر لدى الأسر الفلسطينية.

^١ الأعمار التي تتراوح بين ٦ و ١٨ سنة

أفاد ربع المستطلعين تقريباً أن العائق الرئيسي الذي يواجه تعليم الأطفال هو العجز المالي الذي تعيش فيه الأسر الفلسطينية. بعمل مقارنة بين الذين أشاروا إلى عجزهم المالي الذي يحد من تعليم أطفالهم وبين الأطفال في الأسر الذين تخلوا عن الذهاب إلى المدرسة، كشف ذلك عن وجود علاقة فعلية كبيرة بين الاثنين، حيث أن (٢٧٪) من المستطلعين، الذين ينتمون إلى أسر تحتوي على أطفال تركوا المدرسة، أشاروا إلى أن العجز المالي الذي يواجههم يعد العائق الرئيسي أمام تعليم الأطفال. وبالتالي، يمثل هذا زيادة بنسبة (٥٪) من معدل الإجابات وزيادة بنسبة (٦٪) من الأسر التي لا تحتوي على أطفال تركوا المدرسة. بالإضافة إلى ذلك، أشارت نسبة (٦٪) من الأسر التي تحتوي على أطفال تخلوا عن دراستهم إلى دخول الأطفال دون سن الثامنة عشرة إلى سوق العمل وذلك للتخفيف من الصعوبات الاقتصادية مقارنة مع (٢٪) من الأسر التي لا تحتوي على أطفال تخلوا عن الذهاب إلى المدرسة. عند المقارنة المباشرة بين الأسر التي تحتوي على أطفال تخلوا عن دراستهم وعلاقة هذه الأسر مع خط الفقر، فإن هذا يكشف عن عدم وجود علاقة فعلية بين الاثنين، ولكن من المحتمل أن يكون تخلي الأطفال عن المدرسة مرتبطاً مع المساهمة في دخل الأسرة الشهري وبالتالي التخفيف من فقرهم.

يتلقى قرابة ثلاثة أرباع من الأطفال، الذين ذهبوا إلى المدرسة في الفترة الزمنية التي كانت قيد الدراسة، تعليمهم في المدارس الحكومية. حيث تزود المدارس الخاصة بنسبة (٤٪) من الأفراد المسجلين بالتعليم، بينما تعلم مدارس وكالة الغوث نسبة (١٦٪) منهم. في حين أفادت نسبة (٦٪) أخرى بتلقيها العلم من مجموعة من مزودي الخدمات.

بشكل عام، من السهل ملاحظة مستوى الرضا لدى المستطلعين، سواء أكان كبيراً أم لا، تجاه نوعية التعليم الذي يتلقاه أطفالهم في المدارس الفلسطينية، بينما أعرب أكثر من ثلث المستطلعين بقليل عن عدم رضاهم أو استيائهم الكبير منها. تعتبر المناطق الجغرافية ونوع الموقع عاملاً مؤثراً لمستوى الرضا تجاه الخدمات التعليمية. حيث يتواجد أعلى مستوى للرضا في داخل مخيمات الضفة الغربية، يليه خارج مخيمات الضفة الغربية، ومن ثم في خارج مخيمات قطاع غزة، أما يتواجد أقل مستوى للرضا في مخيمات اللاجئين في قطاع غزة. إضافة إلى ذلك، عبرت نسبة (٤١٪) من اللاجئين عن استيائهم من نوعية التعليم مقارنة مع نسبة (٣١٪) من غير اللاجئين. يكون مستوى الرضا العام عالياً وفي الأغلب يبقى على حاله تجاه المدارس الخاصة بنسبة (٧٠٪)، المدارس الحكومية (٦٩٪)، ولكن يقل هذا المستوى بالنسبة للمدارس المختلطة (٦١٪) ويقل بشكل أكبر بالنسبة لمدارس وكالة الغوث (٥٦٪).

إضافة إلى ذلك، فقد طلب من المستطلعين أن يقدروا رضاهم من عناصر محددة تتعلق بتعليم أبنائهم. دلت النتائج أن أعلى مستوى للرضا كان لفترة السنة الدراسية (٩٠٪)، والبيئة التدريسية (٧٧٪)، وكان أدنى مستوى للمنهج الدراسي بنسبة (٤٣٪) ونظام الدوام الصباحي - المسائي بنسبة (٥٢٪).

بشكل عام، وصفت نسبة (٤٦٪) من المستطلعين المنهج الدراسي الحالي بأنه المعيق الأساسي لتعليم الأطفال. لم تقم الإحصائية الحالية بدراسة تفصيلية بما يعنيه المستطلعين عند إفادتهم بأنهم غير راضين عن المنهج الدراسي (المحتوى، المجال، الملاءمة، تحضير الطلاب لسوق العمل، تحضير الطلاب للدراسات العليا، الخ...)، ومع ذلك، تلقى المركز الفلسطيني لتطوير المناهج آراء من مصادر مختلفة تدل على أن هناك درجة عالية من الرضا والدعم للمنهج الفلسطيني.

تتلقى الأغلبية العظمى من الأطفال (٨٥٪) مساعدة في واجباتهم المدرسية (امتحانات، فروض بيتية، الخ...). من هؤلاء الذين أشاروا إلى تلقيهم المساعدة، أفادت نسبة ثلاثة أرباع منهم قيام أحد الوالدين بتقديم المساعدة لأطفالهم في واجباتهم المدرسية، (٢١٪) يتلقون المساعدة من أحد إخوتهم أو أقاربهم، و(٤٪) فقط يتلقون المساعدة من مدرس خصوصي. عند مقارنة الانطباعات عن الاحتياجات للمساعدة في إتمام الواجبات المنزلية مع المؤسسة التعليمية، يمكن ملاحظة أن انطباعات المستطلعين الذين ينتمون إلى أسر يرتاد أطفالها مدارس وكالة الغوث تناشد بأهمية هذه المساعدات في نجاح أطفالها في الدراسة (٦٩٪)، بينما أفاد (٥١٪) من المستطلعين الذين يرتاد أطفالهم المدارس الخاصة و(٤٠٪) من الذين يرسلون أطفالهم إلى المدارس الحكومية بأن هذه المساعدة غير أساسية.

أما بالنسبة للتوجهات التي تحتاج إلى المزيد من المراقبة بخصوص تدهور الأوضاع التعليمية ومعرفة تأثيراتها على الأمور الأكثر أهمية وهي التعليم. هنالك حاجة لدراسة أعمق للانطباعات حول حاجات الأطفال للصحة والتعليم، إضافة إلى أهمية رسم صورة أدق عن الأسباب التي تقف وراء عدم الرضا من الخدمات الصحية والتعليمية.

الفصل الخامس: الصحة

شدد التقرير العاشر على نتائج التقارير السابقة، حيث يظهر الحاجة إلى العناية الصحية على أنها الحاجة الأهم للأسر إضافة إلى المصاريف الطائلة التي تكبدها الأسر الفلسطينية فيما يتعلق في السعي وراء الصحة. بمراجعة التقرير السادس إلى العاشر، فإنه من الممكن ملاحظة ازدياد أهمية الحاجة إلى العناية الصحية كأول وثاني أكثر احتياجات الأسرة أهمية. بما يتعلق بمصاريف الأسرة الفلسطينية التي تصرف في محاولة لنيل العناية الصحية، فإنه يجدر الإشارة إلى أن الحاجة إلى العناية الصحية أخذت بالازدياد من ناحية الأهمية.

إن أكثر الخدمات الصحية التي كانت مطلوبة في الفترة التي غطاها التقرير العاشر هي: خدمات العيادات المتنقلة للأطفال المرضى، خدمات الطوارئ ومتابعة رعاية الأمراض المزمنة. بعمل مقارنة بين التقريرين التاسع والعاشر، فإنه يمكن الملاحظة أن هنالك ازدياد هائل

^٢ مع أن (٥٧٪) من المستطلعين أفادوا بعدم رضاهم تجاه المنهج الدراسي، وأشار (٤٦٪) فقط إلى أن المنهج يعد المعيق الأساسي في تعليم الأطفال.

في الحاجة إلى خدمات التطعيم ومتابعة الأمراض المزمنة، بينما هنالك انخفاض هائل في الحاجة إلى خدمات سيارة إسعاف، عناية الأمومة والطفولة / مستشفيات التوليد وخدمات الطوارئ.

بالنظر إلى الانطباعات المتعلقة بالحاجة إلى الخدمات الصحية، فإن هنالك متغيرات إقليمية واضحة بصورة كبيرة بالنسبة للحاجة للرعاية الصحية في جميع الخدمات. تتواجد أعلى نسبة من المستطلعين المحتاجين إلى سبعة أنواع من الخدمات الصحية من أصل عشرة في قطاع غزة وهي: تنظيم الأسرة، التطعيم، رعاية الحوامل، العيادات المتنقلة للطفل المريض، رعاية الأمومة والطفولة / مستشفيات التوليد، خدمة متابعة الأمراض المزمنة والرعاية المتخصصة. بينما تتواجد أعلى نسبة مستطلعين في الضفة الغربية الذين هم بحاجة إلى مستشفيات الطوارئ وخدمات سيارة إسعاف.

يرتبط الفقر بشكل كبير بالحاجة إلى خدمات سيارة إسعاف، رعاية الأمومة والطفولة / مستشفيات التوليد، خدمات الرعاية المتخصصة، الصحة النفسية، خدمات متابعة الأمراض المزمنة، خدمة التطعيم، خدمات الرعاية بالحوامل وتنظيم الأسرة. تكون النسبة الأعلى من الخدمات الصحية المحتاجة لدى المستطلعين الذين يعيشون فوق خط الفقر. بينما تتفاوت الحاجة إلى العيادات المتنقلة للطفل المريض، متابعة الأمراض المزمنة وخدمات تنظيم الأسرة بحسب حالة اللاجئ.

بشكل عام، أشارت أغلبية المستطلعين إلى الالتزام في توصيل الخدمات الصحية المحتاجة. ولكن هنالك بعض الخدمات التي لم يستقبلها المستطلعون أو استقبلوها بعد فترة من الزمن وهي خدمات الطوارئ في المقام الأول، تليها خدمات رعاية الأمومة والطفولة ومن ثم خدمات متابعة الأمراض المزمنة. وقد كانت أعلى نسبة مستطلعين الذين عبروا عن حاجاتهم غير الملباة في خدمات الطوارئ متواجدة في القدس الشرقية (مناطق القدس خارج الجدار) تليها الضفة الغربية. أما بالنسبة للمستطلعين المتواجدين في الضفة الغربية، فإنهم يشكلون النسبة الأكبر من الذين أشاروا إلى حاجاتهم غير الملباة في خدمات سيارة إسعاف، رعاية الأمومة والطفولة / مستشفيات التوليد، خدمات العيادة المتنقلة للطفل المريض، خدمة متابعة الأمراض الصحية المزمنة، خدمات التطعيم ورعاية الحوامل. يمكن ملاحظة نمط مشابه في التأخير في توصيل الرعاية عبر الخدمات للشعب الفلسطيني.

إن السبب الشائع لعدم توصيل الخدمات الصحية المحتاجة للأسر الفلسطينية هو عدم سهولة الوصول إلى المناطق المحددة لهذه الخدمات نتيجة الحواجز العسكرية (بما فيها الجدار الفاصل ونقاط التفتيش العسكرية). يليه سبب آخر وهو عدم وجود الخبرة الجيدة في توصيل هذه الخدمات من قبل. إن النقص في توفير الموارد المالية تأتي في المرتبة الثالثة لأسباب عدم تلقي الشعب الفلسطيني الخدمات الصحية المحتاجة في الوقت المناسب. بعمل مقارنة مع إحصائية شهر تموز ٢٠٠٥، فإنه يمكن ملاحظة أن هنالك ازدياد في عدد المستطلعين الذين وصفوا الجدار الفاصل والحواجز العسكرية الأخرى بأنها أسباب رئيسية لعدم وصول الخدمات الصحية إليهم، حيث يكون هذا الوضع مهم بشكل كبير في الضفة الغربية.

نسبة إلى التقرير العاشر، هنالك ثلاثة مزودين أساسيين للخدمات الصحية والتي تبدأ بوزارة الصحة التي تعد المزود المسيطر على باقي مزودي الخدمات الصحية المحتاجة من قبل الشعب الفلسطيني وهي الأونروا والقطاع الخاص. حيث تشير النتائج إلى أن وزارة الصحة تملك أعلى نسبة من المستطلعين الذين أفادوا بأنها مصدر لكل الخدمات الصحية المزودة. بينما تأتي الأونروا كمصدر ثانٍ لخدمة تنظيم الأسرة، خدمات رعاية الحوامل ومتابعة الأمراض الصحية المزمنة. أما بالنسبة للقطاع الخاص، فإنه يكون المزود الثاني للرعاية الصحية المختصة بالأمراض غير الخطيرة. بعمل دراسة عن مصادر الرعاية لكل الخدمات الصحية بحسب المنطقة، بينت النتائج أن وزارة الصحة تقوم بتزويد خدماتها بطريقة متساوية للضفة الغربية وقطاع غزة، بينما تركز الأونروا تزويدها للخدمات في الأغلب على قطاع غزة ويركز القطاع الخاص على غير اللاجئين. ومن الجدير بالملاحظة أن هنالك نسبة من غير اللاجئين التي تشير إلى أن الأونروا هي مصدر الرعاية في جميع أنواع الخدمات. بالإضافة إلى ذلك، هنالك نسبة عالية من الذين أفادوا أن الأونروا هي مصدر الرعاية هي من الفقراء مقارنة مع الذين أشاروا إلى أن وزارة الصحة تعد مصدر الرعاية لكل الخدمات الصحية المحتاجة.

إن ساعات العمل في مراكز خدمات الصحة الأساسية صُنفت بأنها الأفضل في التقرير العاشر لانطباعات الرأي الفلسطينية العامة، يليها في ذلك عدد العاملين (العاملين والعاملات معاً). وصنف المستطلعون خدمات الطوارئ بأنها جيدة حيث حصلت على ثاني أعلى نسبة. وكانت أسوأ التصنيفات للمسافة بين المستشفيات وأماكن السكن يليها توفر الوصفات الطبية، وأخيراً المسافة بين المراكز الصحية الأساسية وأماكن السكن. كانت جميع مؤشرات الأداء الخاصة بالخدمات الصحية سيئة في الضفة الغربية ما عدا المؤشر الخاص لتوفر الوصفات الطبية حيث كان الأسوأ في قطاع غزة. أما بالنسبة لأسلوب تعامل العاملين في قطاع الصحة، فقد طرأ عليه تحسن على مستوى جميع الخدمات. وشهدت خدمات الطوارئ أيضاً تحسينات في أدائها، حيث حصلت على ثاني أعلى نسبة من المستطلعين الذين أكدوا صحة ذلك.

الفصل السادس: الاحتياجات والمساعدات المستلمة

أفادت نسبة (٤٩٪) من الأسر المحصاة بحاجتها إلى الكثير من المساعدات، وكانت هذه النسبة أقل بقليل من نتيجة التقرير التاسع (٥٣٪). إضافة إلى ذلك، أشار نصف المستطلعين، قبل ستة أشهر، إلى أن أهمية المساعدات بالنسبة إلى ميزانيتهم قد قلت، وهذا يؤكد على اعتماد الشعب الفلسطيني الكبير على المساعدات المقدمة.

يكشف التحليل الخاص بالحاجة إلى المساعدات بالنسبة لمنطقة الإقامة أن الفئة الأكثر احتياجاً من الشعب الفلسطيني لمثل هذه المساعدات مقيمة في قطاع غزة، يليها بقليل المقيمين في الضفة الغربية. مع ذلك، فيما يتعلق بمكان الإقامة، لم يتغير هذا الوضع كثيراً إذا ما قورن

مع إحصائية شهر تموز ٢٠٠٥، فقد كانت الأماكن الأكثر إحتياجاً للمساعدات هي مخيمات اللاجئين، حيث يحتاج (٦١٪) من الفلسطينيين هناك إلى الكثير من المساعدات.

على عكس تقرير شهر تموز ٢٠٠٥، فإنه من الصعب الوصول إلى نظرة متوازنة بالنسبة إلى ماهية الأولويات لدى الأسر الفلسطينية. حيث عاد المستطلعون إلى الاحتياجات الأساسية كالغذاء والتشغيل. إذا أخذ أول وثاني أكثر الاحتياجات أهمية معاً، فإن المساعدات الغذائية تحل في المرتبة الرئيسية لحاجة أكثر من نصف السكان (من ٤٢٪ في شهر تموز ٢٠٠٥ إلى ٥٣٪ في شهر أيار ٢٠٠٦)، في حين ما زال التشغيل، بناءً على إحصائية شهر أيار ٢٠٠٦، أكثر الاحتياجات أهمية للأسر الفلسطينية. وقد ازدادت أيضاً الحاجة إلى الرعاية الصحية بشكل كبير في الأشهر الستة الماضية.

عند التركيز على الغذاء والتشغيل كأكثر الاحتياجات أهمية، فإنه من الواضح ملاحظة أن المساعدات الغذائية تعتبر أكثر الاحتياجات أهمية بالنسبة لغير اللاجئين. أما بالنسبة لمعدل الفقر، تعتبر خدمة التشغيل من أول الاحتياجات الأكثر أهمية للأسر بالنسبة للفئة الأكثر فقراً من السكان والتي تشكل حوالي (٣٤٪) منهم. بناءً على إفادة (٣١٪) من المستطلعين، فإن الغذاء يعد أكثر الاحتياجات أهمية في الضفة الغربية بينما يحل التشغيل في أعلى الأولويات في قطاع غزة. وعند مقارنة هذا التقرير بالتقرير السابق، فقد ازدادت الحاجة إلى خدمة التشغيل في القدس الشرقية بنسبة (١٩٪) منذ شهر تموز ٢٠٠٥. أما بالنسبة لمكان الإقامة، تعتبر خدمة التشغيل من أهم المساعدات المحتاجة لدى معظم الأسر المقيمة في المدن والمخيمات الفلسطينية. في حين تكون الأولويات في القرى مختلفة إلى حد ما، حيث يعتبر الغذاء من الاحتياجات الأكثر أهمية لدى المقيمين في القرى الفلسطينية يليها الحاجة إلى التشغيل.

بإلقاء النظر على أهم احتياجات المجتمع الفلسطيني، أكدت النتائج الحالية على صحة النتائج التي توصلت إليها إحصائية شهر تموز ٢٠٠٥. فقد دلت انطباعات المستطلعين على أن أهم احتياجات المجتمع الفلسطيني كانت، وبفارق كبير، الحاجة إلى خدمات التشغيل. فقد ازدادت المساعدات الغذائية والمالية المباشرة وصنفت بأنها أول وثاني أولويات الأسر الفلسطينية. ويدل هذا التغير أيضاً على تدهور الظروف المعيشية للسكان، حيث أصبحت الحاجات الأساسية لديهم أكثر أهمية من غيرها. ففي قطاع غزة، أصبحت الحاجة إلى التشغيل من أكثر الاحتياجات أولوية في المجتمع. فقد ازدادت الحاجة إلى التشغيل في القدس الشرقية وبشكل كبير في الأشهر الستة الماضية (بزيادة ٢٨٪). وقد اعتبر سكان مخيمات اللاجئين والفئة الأكثر فقراً في المجتمع الفلسطيني الحاجة إلى خدمات التشغيل من أهم الأولويات التي يحتاجها الشعب الفلسطيني.

من جهة احتياجات البنية التحتية، فإنه بالرغم من انخفاض هذا الاحتياج بنسبة (٤٪) فقط مقارنة مع التقرير السابق، أفادت نسبة (٤٨٪) من المستطلعين أن الحاجة إلى توصيل شبكة المياه بقيت من أكثر احتياجات البنية التحتية أهمية.

فيما يتعلق بنتائج إحصائية شهر أيار ٢٠٠٦، فقد استلم (٣٤٪) من الأسر الفلسطينية المساعدات في الأشهر الستة الماضية. تمثل هذه النسبة انخفاضاً بنسبة (٤٪) منذ شهر تموز ٢٠٠٥، وذلك يأتي تأكيداً على التوجهات المذكورة في التقرير التاسع. أما من الناحية الجغرافية، فقد أفاد المستطلعون المقيمون في قطاع غزة أن أهمية المساعدات المستلمة تكون كبيرة مقارنة مع أهالي الضفة الغربية (٦٣٪ مقابل ٢٠٪). وتشير الإحصائية أيضاً إلى ازدياد بنسبة (٧٪) في مستوى المساعدات التي استلمها المقيمون في قطاع غزة، وخاصة في المناطق التي تقع خارج مخيمات اللاجئين (زيادة بنسبة ٩٪ منذ شهر تموز ٢٠٠٥). وفي نفس الوقت، قلت هذه المساعدات بشكل كبير في الضفة الغربية بنسبة (١٣٪) وفي داخل مخيمات الضفة الغربية بنسبة (٢٧٪).

إن الأسر التي تعيش في فقر مدقع هي التي استلمت معظم المساعدات (بنسبة ٥٣٪، أي بزيادة قدرها ٢٪ منذ شهر تموز ٢٠٠٥). وقد استلمت (١٥٪) من الأسر الأفضل حالاً المساعدات في الأشهر الستة الماضية، التي تشكل انخفاضاً بنسبة (٤٪) إذا ما قورنت مع التقرير التاسع. ومن المثير للاهتمام أن الانخفاض في المساعدات يكون الأعلى (نقصان بنسبة ١٣٪) للأسر التي تعيش تحت خط الفقر، حيث لم تصل المساعدات المستلمة في شهر أيار ٢٠٠٦ من قبل هذه الشريحة من السكان إلى هذا الانخفاض الذي وصل إلى (٢٨٪).

أما بالنسبة إلى نوع المساعدات المستلمة، فكانت نسبة (٢٦٪) من المستطلعين الذين استفادوا من المساعدات الغذائية و(٨٪) منهم تلقوا المساعدات المالية المباشرة وخدمات التشغيل. بعمل مقارنة مع إحصائية شهر تموز ٢٠٠٥، بقيت المساعدات المالية على حالها بينما ازداد مستوى خدمات التشغيل بنسبة (٤٪)، أما بالنسبة للمساعدات الغذائية فقد قلت بنسبة (٥٪) خلال الفترة الزمنية التي كانت قيد الدراسة. بالنظر إلى قيمة المساعدات المستلمة، فإن هناك انخفاض بسيط وواضح في متوسط قيمة ثلاثة أنواع رئيسية من المساعدات الموزعة وهي: الغذاء، المال والتشغيل.

فيما يتعلق بخدمات التشغيل، فقد ازدادت نسبة المستطلعين الذين استفادوا من هذه الخدمات بصورة كبيرة في الأعمال طويلة الأمد (بزيادة ١٢٪) والأعمال قصيرة الأمد (بزيادة ٢٣٪). وقد كان هنالك أيضاً زيادة في نسبة مساعدة الأسر لإيجاد فرص عمل طويلة وقصيرة الأمد (زيادة بنسبة ١٢٪ و ١٣٪ على التوالي)، أما بالنسبة لمساعدات البطالة والمساعدات التي تخصص لدوي الأعمال الحرة قد قلت على نحو كبير (من ٤٢٪ إلى ٢١٪ ومن ١٧٪ إلى ١٪ على التوالي). ازدادت خدمات التشغيل التي تتلقاها الأسر الفلسطينية المقيمة في قطاع غزة، حيث استلمت نسبة (١٥٪) من الأسر التي تعيش في فقر مدقع مثل هذه المساعدات، (١٢٪) من الأسر التي تعيش تحت خط الفقر و(٦٪) من الأسر التي تعيش فوق خط الفقر. فقد عبر (٦٥٪) من المستطلعين عن مستوى الرضا لديهم تجاه خدمات التشغيل التي استلموها، حيث عبر (٥٩٪) منهم عن رضاهم و(٦٪) عن رضاهم الكبير تجاه هذه المساعدات. إن السبب الرئيسي لشعور المستطلعين بعدم الرضا فيما يتعلق بخدمات التشغيل التي تم استلامها هو أن كمية المساعدات لم تكن كافية بالنسبة إليهم، بينما ينسب السبب الثاني لهذا الشعور لفترة العمل التي تكون قصيرة جداً في نظرهم.

ازدادت نسبة الأسر الفلسطينية التي تعتمد على المساعدات الغذائية بشكل قليل بنسبة (٢٪) (من ٧٪ إلى ٩٪). بالإضافة إلى ذلك، تكون

هذه الإغالة ملحوظة بصورة كبيرة في قطاع غزة بنسبة (١٩٪)، خاصة في مخيمات اللاجئين (٢٧٪) وفي خارج المخيمات بنسبة (١٦٪). تكون نسبة الذين يعتمدون على المساعدات الخارجية في مخيمات اللاجئين المتواجدة في الضفة الغربية مرتفعة أيضاً حيث تصل إلى (١٣٪). فقد ازدادت هذه النسب منذ إحصائية شهر تموز ٢٠٠٥ على عكس التوجهات التي قلت في الأعوام الماضية.

تشير نتائج هذه الإحصائية إلى تقلص واضح في كمية استهلاك الغذاء، حيث أفاد (٥٥٪) من المستطلعين أنهم قللوا من كمية استهلاكهم للغذاء طوال الأشهر الستة الماضية (زيادة ٥٪). أما بالنسبة لمنطقة الإقامة، تكون النسبة الأعلى من الأسر التي قللت كمية الاستهلاك للغذاء متواجدة في قطاع غزة (٧٣٪) (أي بزيادة ١٨٪)، في داخل وخارج مخيمات اللاجئين (زيادة ١٩٪ و ١٧٪ على التوالي منذ عام ٢٠٠٥). إضافة إلى ذلك، قلل (٢٩٪) من السكان المقيمين في القدس الشرقية ونصف المستطلعين المتواجدين في الضفة الغربية من كمية استهلاكهم للغذاء، وخاصة المقيمين في داخل مخيمات اللاجئين (زيادة ٢٨٪). وازدادت هذه النسبة أيضاً لدى الأسر التي تعيش في فقر مدقع (٦٧٪ أي زيادة بنسبة ١٠٪ منذ عام ٢٠٠٥). أكد نصف المستطلعين تقريباً (٤٧٪) بأنهم قاموا بشراء الأطعمة غير المفضلة لديهم في الأشهر الستة الماضية وذلك بهدف التقليل من استهلاك الغذاء.

كانت حاجات الأسر المتزايدة مصاحبة لانخفاض في عدد السكان الذين أكدوا استلامهم للمساعدات الغذائية في الأشهر الستة الماضية (من ٣٣٪ إلى ٢٦٪). حيث استفاد معظم اللاجئين من المساعدات الغذائية (٤٦٪ مقابل ١٢٪ لغير اللاجئين، أي انخفاض كبير مقارنة مع ٥٧٪ في شهر تموز ٢٠٠٥). فيما يتعلق بمنطقة الإقامة، فقد استفاد أكثر من نصف المستطلعين المقيمين في قطاع غزة من المساعدات الغذائية (٥٤٪)، في حين استفادت نسبة (١٢٪) فقط من المقيمين في الضفة الغربية و (٩٪) من المقيمين في القدس الشرقية من مثل هذه المساعدات. كان توزيع المساعدات الغذائية ثابتاً في مخيمات اللاجئين (٥٧٪ مقابل ٢٣٪ في المدن و ١٦٪ في القرى)، وبشكل خاص في مخيمات اللاجئين المتواجدة في قطاع غزة بنسبة (٦٧٪ من المستطلعين). أما في الضفة الغربية، كان هنالك انخفاض ثابت في توزيع المساعدات الغذائية في مخيمات اللاجئين، من (٧٠٪) في إحصائية شهر تموز إلى (٣١٪) في الإحصائية الحالية. وأخيراً، بالنظر إلى معدل الفقر لدى الأسر الفلسطينية، فقد تلقى (٤٣٪) من المستطلعين الذين يعيشون في فقر مدقع المساعدات الغذائية، بينما تلقت نسبة (١٨٪) من الأسر التي تعيش تحت خط الفقر (بنسبة منخفضة مقارنة مع نسبة ٣٦٪ في شهر تموز ٢٠٠٥) ونسبة (١١٪) من الأسر التي تعيش فوق خط الفقر مثل هذه المساعدات.

مع أن نسبة المستطلعين الذين أفادوا أن الأونروا هي المصدر الرئيسي للمساعدات قد قلت على نحو قليل (حيث قلت من ٢٦٪ إلى ٢٣٪ في شهر تموز ٢٠٠٥) تبقى الأونروا أهم مصدر لهذه المساعدات. وازدادت الانطباعات حول المساعدات من السلطة الوطنية الفلسطينية بنسبة (٢٪) في فترة الأشهر الستة الماضية. وازدادت الانطباعات أيضاً حول المساعدات من المؤسسات غير الحكومية بنسبة (٥٪) بنما قلت الانطباعات العامة حول المساعدات من المصادر الأخرى مثل المؤسسات العربية، المؤسسات الدولية والمصادر الخاصة.

بما يتعلق بإحصائية شهر أيار ٢٠٠٦، كانت نسبة (٩٠٪) من المستفيدين من المساعدات المزودة من قبل الأونروا من اللاجئين. بالنظر إلى المتغيرات الجغرافية المستقلة، فإن استفادة سكان المدن بنسبة (٥٠٪) من المساعدات التي توزعها الأونروا تكون أكبر من استفادة السكان المقيمين في مخيمات اللاجئين (٣٩٪) وسكان القرى (١٢٪). تكون الفئة المستلمة للمساعدات التي تزودها الأونروا على السكان غالباً من الأسر الفقيرة المعتمدة (٦٠٪) تليها التي تعيش تحت خط الفقر (٢٥٪). إن نسبة (٣٧٪) من المستفيدين من المساعدات التي توزعها السلطة الفلسطينية والبلديات يقيمون في الضفة الغربية (بنقصان ٦٪ منذ شهر تموز ٢٠٠٥) وتقطن نسبة (٦١٪) منهم في قطاع غزة (زيادة ٦٪ منذ شهر تموز ٢٠٠٥). بالإضافة إلى ذلك، إن نسبة (٥٤٪) منهم هم من غير اللاجئين (مقابل ٥٢٪ في شهر تموز ٢٠٠٥). تقيم أغلبية المستفيدين من المساعدات التي تقوم بتزويدها السلطة الوطنية الفلسطينية في المدن (بنسبة ٢٨٪، أي نقصان ٦٪ منذ التقرير السابق) أو المخيمات (بنسبة ١٨٪، أي نقصان ٦٪). أما بالنسبة للسكان الذين يتلقون المساعدات من الأونروا، فقد اتجهت السلطة الوطنية في تركيز مساعداتها على الأسر التي تعيش في فقر مدقع (بنسبة ٦٣٪، أي بزيادة ١٥٪).

بقي مستوى الرضا تجاه المساعدات المزودة على حاله في شهر أيار ٢٠٠٦، حيث عبرت أغلبية المستطلعين عن شعورها بالرضا تجاه المساعدات الموزعة. من ناحية أخرى، ازدادت نسبة الذين شعروا بعدم الرضا تجاه هذه المساعدات لدى القاطنين خارج مخيمات الضفة الغربية وقطاع غزة معاً. إن عدم المواظبة في تقديم الخدمات كانت السبب الرئيسي للشعور بعدم الرضا لأكثر من (٦٢٪) من المستطلعين (زيادة بنسبة ١٣٪ منذ شهر تموز ٢٠٠٥)، بينما عبر (٣٠٪) من المستطلعين (نقصان بنسبة ٥٪ منذ شهر تموز ٢٠٠٥) عن عدم رضاهم تجاه كمية المساعدات المزودة، وكانت نسبة (٧٪) منهم (أي نقصان بنسبة ٤٪ منذ شهر تموز ٢٠٠٥) مستاءة جداً من نوعية هذه المساعدات.

وفي الختام، تشير نتائج الدراسة الحالية إلى أن أكثر من نصف الشعب الفلسطيني ما زال بحاجة إلى المساعدات الخارجية في شهر أيار ٢٠٠٦. فقد ازداد اعتماد السكان على الإعانة والمساعدات الطارئة بشكل مثير للقلق. وفي نفس الوقت، فقد ازدادت الضجوة الواقعة بين معدل المساعدات المحتاجة والمساعدات المستلمة منذ التقرير السابق. ويكون هذا التوجه واضحاً بشكل كبير في قضية الغذاء والمساعدات الغذائية، فقد أكد أكثر من نصف المستطلعين على أنهم قللوا من كمية استهلاكهم للغذاء وشراء الأطعمة غير المفضلة لديهم حيث قل مستوى المساعدات الغذائية بنسبة (٧٪) في الأشهر الستة الماضية.

الفصل السابع: اللاجئين والأونروا

بالرغم من كون اللاجئين وغير اللاجئين الأسوأ حالاً خلال الفترة التي كانت قيد الدراسة، إن الاختلاف في معدلات الفقر بين اللاجئين وغير اللاجئين التي كانت ملاحظة في التقرير السابق قد تم تأكيده. ففي شهر أيار ٢٠٠٦، كان اللاجئين (بنسبة ٧٤٪ من العدد الكلي للفقر) أكثر فقراً من غير اللاجئين (٦٨٪ من عدد الفقراء الكلي).

وبناء على ذلك، كان هنالك تشاؤم في نظرة اللاجئين وغير اللاجئين حول التوقعات المستقبلية الاقتصادية – الاجتماعية. فقد كانت نسبة اللاجئين في شهر أيار ٢٠٠٦ الذين أفادوا بأنهم بالكاد قادرون على تدبير أمورهم أو لم يعرفوا كيفية التلاؤم مع وضعهم هي (٥٣٪) مقابل (٤٤٪) لغير اللاجئين.

من الناحية الجغرافية، ما زالت مخيمات اللاجئين تشكل المناطق الأكثر فقراً في الأراضي الفلسطينية المحتلة. فقد ارتفعت نسبة الفقراء في مخيمات اللاجئين (يتضمن ذلك الذين يعيشون في فقر مدقع) من (٧٢٪) إلى (٧٧٪)، مقابل نسبة من (٦٥٪) إلى (٦٧٪) في المدن ومن (٦٩٪) إلى (٧٤٪) في القرى. كما كان التدهور في الظروف المعيشية في مخيمات اللاجئين ملحوظاً بشكل أكبر في الضفة الغربية، حيث ارتفعت نسبة الفقراء هناك بنسبة (١٢٪) أكثر من قطاع غزة التي كانت نسبة الفقراء الكلية فيها ثابتة خلال الفترة التي كانت قيد الدراسة.

بقي الدخل الشهري للأسر الفلسطينية التي تعيش خارج المخيمات أعلى من تلك التي تعيش في داخل هذه المخيمات، مع ازدياد في نسبة اللاجئين ذوي الدخل الشهري المتدني (الذي يكون أقل من ٢٠٠٠ شيكل في الشهر)، أي بنسبة (٧٣٪) من اللاجئين مقابل (٥٩٪) من غير اللاجئين.

عرفت هاتين الشريحتين من شرائح المجتمع الفلسطيني فقدان العمل على أنه السبب الرئيسي لانخفاض الدخل الشهري للأسر الفلسطينية، ولكن كانت هذه الأرقام أعلى لدى اللاجئين (٣٢٪) من غير اللاجئين (٢٨٪). وقد نتج عن ذلك ارتفاع هائل في نسبة اللاجئين الذين يقبلون بأعمال لا تطابق تدريبهم، بنسبة (٣٦٪) من اللاجئين مقابل (٢٤٪) من غير اللاجئين.

ما زالت المساعدات الاقتصادية – الاجتماعية تركز بشكل أساسي على اللاجئين (بنسبة ٥٥٪ مقابل ٢٠٪ لغير اللاجئين)، حيث قل عدد اللاجئين الذين يتلقون مثل هذه المساعدات بنسبة (٥٪) في الفترة التي كانت قيد الدراسة، أي قلت النسبة من (٦٠٪) في شهر تموز ٢٠٠٥ إلى (٥٥٪) في شهر أيار ٢٠٠٦. من الناحية الجغرافية، فإن المساعدات تركز أساساً على المخيمات المتواجدة في قطاع غزة، بينما تكون الأسر المقيمة في مخيمات الضفة الغربية الأكثر تضرراً من انخفاض مستويات هذه المساعدات.

تبقى الأونروا المزود الرئيسي للمساعدات الطارئة للاجئين الذين يعيشون في مخيمات الأراضي الفلسطينية المحتلة، بصورة أقل قليلاً من السابق. من الناحية الجغرافية، تدهورت انطباعات المستطلعين حول كون الأونروا المزود الرئيسي لأكثر الخدمات أهمية في كل أماكن الإقامة ما عدا في مخيمات قطاع غزة. نتيجة لازدياد التركيز في توزيع الخدمات على مخيمات قطاع غزة، أصبحت مخيمات المتواجدة في الضفة الغربية مهمة من ناحية تركيز المساعدات عليها أكثر من أي وقت مضى.