Gaza has long been a place of desperate need, with huge challenges in all areas of civic life. Devastating escalations in violence not only destroy lives and infrastructure, but also hope and aspiration. In the midst of this, the most marginalized people are often ignored or forgotten. As part of the Within and Without the State programme, community researchers worked with women with disabilities to enable them to devise a plan for periods of crisis. This included strengthening emergency preparedness, coordinating assistance, ensuring shelters are disability-friendly and supporting long-term advocacy for women with disabilities.
CONTEXT

Man-made disasters

Gaza is vulnerable to both man-made and natural emergencies, both of which bring severe humanitarian consequences. Man-made disasters in Gaza relate largely to the devastation brought by war and the illegal blockade imposed by Israel. From December 2008–January 2009, Israel conducted Operation Cast Lead, a 22-day assault that resulted in the deaths of more than 1,440 Palestinians, the majority of them civilians, and more than 4,300 injuries. In November 2012, Israel carried out Operation Pillar of Defence, killing over 158 Palestinians in Gaza in eight days, mostly civilians. In the summer of 2014, Operation Protective Edge brought Gaza the worst destruction it had seen in decades. 2,251 Palestinians, including 1,462 civilians, were killed. At the height of hostilities, the number of internally displaced people reached 500,000, or 28 per cent of the population in Gaza. Restrictions on importing essential building materials mean that the rebuilding of some homes has yet to begin. In addition to its military operations, Israel has placed Gaza under a blockade which restricts the movement of goods and people. As a direct or indirect consequence of the illegal Israeli blockade, the basic rights of Palestinians in Gaza continue to be violated, including the rights to a livelihood, clean water and access to basic services, freedom of movement, and the right to safety from harm.

Natural disasters

Gaza is also subject to increasingly severe winter storms, damaging winds and flooding rains. In 2010, 2012 and 2013, Gaza experienced winter storms that led to severe humanitarian consequences as a result of the subsequent flooding. Storms exacerbate the already poor humanitarian situation for large segments of the Palestinian population, particularly in the Gaza Strip, which is already coping with an acute fuel and energy crisis.

Women with disabilities

In Gaza, just under 40,000 people live with disabilities, around half of whom are women. Disabled persons organizations have struggled to mainstream gender within their programmes’ strategies and policies. In this context, Oxfam and the action research team, in coordination with the Palestinian non-government organization (PNGO) coalition worked together to establish a coordination mechanism which was fully functioning by May 2015. The coordination mechanism consists of eight member organizations that form a coalition of civil society organizations (CSOs), with representation from four women’s sector organizations and four disabled persons organizations. In order to ensure a well structured coordination mechanism, the coalition and its members ran a gap assessment study in November 2015.
WITHIN AND WITHOUT THE STATE

Within and Without the State (WWS) is a five-year global initiative (2011–2016) funded by DfID's Conflict, Humanitarian and Security programme. This has enabled Oxfam to pilot a variety of approaches to working with civil society to promote more accountable governance in conflict-affected and fragile contexts.

Phase I

In the Occupied Palestinian Territory, WWS piloted an action research project in Phase I. Action research empowers selected community members to interview a wide range of community members, with the aim of discovering their priorities for development and change. This not only reveals new information and programming opportunities but also empowers those conducting the research. The research topic chosen for Gaza was the role of CSOs in advocating on national and public opinion issues; the topic for the West Bank was to understand what measures donors are taking to assist civil society, as well as the role of civil society in the occupation. In cooperation with the Institute for Development Studies, the groups wrote up their research in 2013.

In the West Bank, one group ran a community-led assessment of development projects, which they have developed into a booklet for others to learn from. The other West Bank group worked with community-based organizations to increase their influence over development and governance initiatives in their area.

In Gaza, the group designed a project that sought to ensure the input of community members into new programme design. The group in Gaza designed three innovative and responsive initiatives under which a number of NGOs in the same sector coordinated and cooperated in planning, implementation and follow-up of the initiatives, with full ownership.

Project suspended: In 2014, the WWS programme was suspended for five months as a result of the renewed outbreak of conflict.

New project design for Phase II

In the aftermath of the conflict in 2014, WWS action researchers identified the lack of a coordinated approach by NGOs to address the issues faced by more marginalized groups in Gaza, particularly in times of conflict. WWS also recognized the challenges of implementing an overarching programme across very different communities in Gaza and the West Bank, and including East Jerusalem and Israel. The community research approach of Phase I again demonstrated to WWS the vital importance of listening to the actual needs of communities. WWS II aimed to introduce a new model of effective cooperation for two important sectors working within a very complex sociopolitical environment: women with disabilities.
HOW OXFAM SUPPORTED A CIVIL SOCIETY–LED CONTINGENCY PLANNING PROCESS

Following the identification of the need to prioritize the unmet needs of women with disabilities in Gaza, Oxfam worked alongside civil society researchers to identify and form a CSO coalition, conduct assessments of the gaps in current services and referrals for women with disabilities, and design a contingency plan with relevant preparedness activities and community initiatives.

GAP ASSESSMENT

The civil society researchers who had been trained in action research methods under Phase I of WWS carried out a study to (i) better understand why, during emergencies, the needs of women with disabilities were not directly being met, and (ii) to understand the gaps between the two sectors that were to form the coalition: of women’s rights organizations, and organizations for people with disability (PWD). It identified the available resources and conducted an analysis of the strengths and weaknesses of the two sectors to develop initiatives, establish future priorities and identify opportunities to help increase participation of women with disabilities. It assessed and communicated to the coalition each party’s scope of work, before making recommendations to address the gaps in the coalition’s capabilities. In addition to the outcomes of the community workshops, the researchers met extensively with women with
disabilities, in order to develop community initiatives to support their needs in times of crisis.

**PARTICIPATORY SELECTION PROCESS LED BY CIVIL SOCIETY**

Alongside the Palestinian NGO Network (PNGO), the researchers identified the primary CSOs in Gaza that were active either as women’s rights organizations or as those which supported people with disabilities (PWD).

In order to ensure transparency and really foster CSO engagement with and ownership of the coalition formation in the project, the CSOs themselves nominated organizations from their sector to form the coalition. After an initial meeting to share the objectives and purpose of the coalition – to effectively respond to the needs of women with disabilities in times of crisis – representatives of 16 women’s rights organizations (WRO) and 12 PWD organizations jointly set the selection criteria of the final CSOs to be included in the coalition. Examples of the criteria by which organizations were selected include: the active inclusion of people with disabilities into their strategy and planning process; a minimum of 50 percent of staff to be composed of people with disabilities; the geographic spread of actors; the clear and proven status of the organization and its decision making influence within the sector; and the number of women employed at senior management level.

Following agreed selection criteria, a number of different WROs and PWD organizations were put forward, and eight were finally elected to form the coalition.

This participatory selection criteria-setting and selection process is similar to the early stages of the WWS project in South Sudan, and demonstrates the importance of ensuring clear, transparent and CSO-led processes. The organizations across the sectors that were selected are listed in Box 1.

**Box 1: CSOs involved in the coalition**

| Women’s Rights organization |
| Women Technical Affairs Committee |
| Community Media Centre |
| AISHA Network |
| Union Health for Work Committees |
| People with disability CSOs |
| Palestinian Medical Relief Society |
| National Society for Rehabilitation |
| Atfaluna Society for the Deaf |
| Society of Physically Handicapped People |
ENGAGEMENT WITH WOMEN WITH DISABILITIES

One of the central features put into the project was the process of thorough and participatory consultation with local women themselves. This was to ensure that the needs of women with disabilities were properly understood and responded to. Over the project’s lifespan, ten community workshops were held, reaching 245 women with disabilities. These workshops brought together coalition members and women with disabilities to ensure effective consultation and engagement and to ensure that the voice of women with disabilities was reflected in coalition work.

The first four workshops, held in September 2015, focused on the identification of the needs of women and a consultation on how better to assess and understand existing needs gaps. The remaining workshops were held between September 2015 and March 2016, and focused on establishing a strong link between the coalition and women with disabilities; ensuring that women with disabilities were part of the consultation throughout the development of the contingency plan.

Women with disabilities will participate in further workshops with external stakeholders after the project is finished, in order to raise their voice and play a central role in addressing their own needs. Throughout the project, they were really supportive of a coalition aiming to protect them during emergencies, even though they were also hoping the coalition could focus on their daily needs of enhancing their social, medical, and economic life. Women with disabilities were unaware of most women’s organizations, as before the project, those who visited women’s organizations rarely get support, as they were told to go to rehabilitation and disability organizations.

WWS Project Coordinator Noor Abu Kwailk
THE CONTINGENCY PLAN

The contingency plan was developed over a series of months with the support of an external expert. Due to temporary restrictions on visiting Gaza, the expert was forced to provide assistance remotely with a locally based counterpart, which added complications and delays. This table describes the content of the contingency plan.

| Overall objectives | The overall purpose of the contingency plan was to ensure that the needs of women with disabilities are met in time of crisis, and specifically, to support affected women with disabilities in a timely manner and with a coordinated response. In addition, its purpose was to ensure a common understanding of coordination procedures, needs assessment information, mutual capacities and corresponding roles and responsibilities of the coalition members; and to strengthen emergency preparedness for the established scenarios. |
| What the plan covers | • Roles and responsibilities in the event of an emergency  
• The coordination structures and procedures, including the interventions planned for specific scenarios among coalition members  
• Actions to be taken during an acute period and early recovery phases, and to focus on the immediate needs of women with disabilities |
| Risk analysis and risk grading | For developing the scenarios that the contingency plan is designed to respond to, the coalition members carried out a risk analysis following the Hazard, Risk and Vulnerability Analysis Toolkit from Colombia University⁷, taking into consideration the impact and the likelihood of a comprehensive list of hazards. Coalition members also contributed their own specific experiences to determine the impact. The highest risk ranked scenarios were:  
• escalation in violence/invasion  
• power outage  
• drastic economic blockade.  
'Best case', 'worst case' and 'most likely' categories were applied to differentiate impact levels of each scenario. |
**Coordination mechanisms**

Essential features of the coalition and contingency plan included:
- ensuring that there are good coordination mechanism for the CSO-led coalition to decide when to activate and deactivate the contingency plan
- ensuring ongoing exchange of information (for needs assessment, services and locations, contact points)
- supporting referral between CSOs (for women with disabilities in need of complementary interventions, as well as for providing cases for reporting or documenting the violation of rights)
- reviewing and updating the contingency plan
- reporting on the coalition activities and achievements in order to ensure accountability.

**Needs assessments and referral mechanisms**

A series of needs assessment and referral mechanism protocols and templates have been developed as part of the contingency plan. The first rapid needs assessment will be carried out no later than one week after the plan is activated. Coalition members will conduct their own needs assessments and have agreed on a predefined type of information according to different timeframes. Referral mechanisms will take place based on a list of services available from the different coalition members.

**Actions on activation of the plan**

As part of any contingency plan, the actions for response are divided into three critical periods.

**Phase I: 0–72 hours**
- Launching rapid needs assessments; consolidation of lists of interventions available and dissemination across the coalition and for women with disabilities.

**Phase II: 4th day–end of the acute period**
- Updating lists of interventions available and continuing to disseminate among coalition members; launch of second needs assessment (between two and four weeks); launch of the coalition reporting; monitoring of initial response; conduct media briefing and issue press releases.

**Phase III: Early recovery–phase out**
- Updating and maintaining lists of interventions available and their dissemination among coalition members (adapted to early recovery); launch of early recovery needs assessment; continuation of reporting; monitoring adapted to early recovery phase.
| **Monitoring and evaluation** | A key aspect of any contingency plan is ongoing monitoring and evaluation to ensure the plan is functional and adapted where needed. The contingency plan includes mechanisms to develop indicators and collect information during times of crisis in order to improve future responses. Every six months the representatives of the coalition will meet in a full-day meeting, to review and update the contingency plan. If the C-Plan is activated, an evaluation at the end of its implementation will also be done. In addition, the coalition will be accountable towards women with disabilities for their response in emergencies and to the C-Plan. A complaint mechanism will be created by the coalition to which women with disabilities will have contributed. |
| **Preparedness actions** | One of the most important goals of the C-Plan is to reinforce preparedness among coalition members to respond to an anticipated emergency. These include:
- Ensuring existing information about women with disabilities is correct, and doing practice simulations of the start of the response; ensuring trigger mechanisms and coordination plans are widely known and relevant.
- Developing harmonized needs assessments, including: data requirements; data management guidelines and database; data collection guidance; and a final needs assessment template.
- Developing a framework for documenting the violation of rights in order to support long-term advocacy efforts for women with disabilities. |
EXTERNAL COORDINATION

In order to ensure that, in times of crisis, the needs of women with disabilities can be met, the contingency planning process not only attempted to outline the capacities, roles and responsibilities of CSOs, but also to establish how to coordinate and – most importantly – advocate with other national and international NGOs in order to support a long-term and comprehensive approach to supporting women with disabilities. The coalition was encouraged not only to be realistic about the type and scale of interventions that they were capable of carrying out, but also to recognize occasions during emergencies that required them to access external resources such as specialist equipment, medication, fuel, food and non-food items, and evacuation mechanisms. As part of the contingency planning and the ongoing work of the coalition, the partner organizations will continue to meet with key actors such as UNRWA, ICRC, local organizations, other NGOs, politicians and the media. This will enable them to create strong networks and to share learning with other organizations in the sector.

When we presented the contingency plan to the Office of Coordination for Humanitarian Affairs (OCHA) and various clusters in Gaza, they were so engaged to work with the initiative, as they saw it as one of the first times there was an explicit plan developed for women with disabilities in times of crisis.

WWS Project Coordinator Noor Abu Kwaik

COMMUNITY INITIATIVES

Following the establishment of gap assessment and contingency planning preparedness activities, the coalition selected four community initiatives that were managed by the Palestinian NGO network to better support women with disabilities in times of crisis (Box 2).

Water distribution in Gaza. Photo: Lyad Al Baba/Oxfam
Box 2: Community initiatives

1. Mapping women with disabilities in the Gaza Strip
An online database was created for women with disabilities, which can be made accessible to relevant stakeholders. This database has been linked with SMS software to enable information sharing and to collate rapid responses from women with disabilities during emergencies. A website was also developed for the coalition to raise awareness of their activities among external organizations, and to provide the coalition partners with a central and safe place to store information and data.

2. Sign language training and resources
One major needs gap that was identified was the lack of adequate support for women with hearing impairments. Signs and posters with the essential information and basic signing have been produced to be used in emergency shelters during crises, such as shelters and schools. Training on sign language has also been provided to staff and volunteers who work in shelters.

3. Advocacy and awareness-raising
In order to socialize the contingency plan and the work of the coalition, a series of advocacy meetings have been held with a number of actors. In particular, although the coalition has engaged with a number of women with disabilities during the project, they also conducted a much larger socialization of the plan to inform community members of support networks during times of crisis. Media engagement has been another key strategy to highlight the needs of women with disabilities, as the coalition felt that this was one of the most effective ways to raise awareness and to ensure more attention is given to this vital issue in the international as well as the national community.

4. Producing audiovisual documentaries to highlight the needs of women with disabilities during emergencies
Four short videos outlining the needs and best care responses for women with disabilities were filmed during training for broadcast on local TV, at meetings and within the community. The topics included first aid for women with disabilities during emergencies, instructions for care-givers, and self-care instructions for women during times of crisis.
LESSONS LEARNED

Civil society designed, led and implemented

Despite the relatively small-scale nature of this project, the process supported by this project will have a much greater and sustainable impact for communities in Gaza. This is in part because it built on existing capacities and was designed in response to a need identified by civil society researchers themselves. The long-term accountability and sustainability of the coalition and their actions supporting women with disabilities has been transferred to the Palestinian NGO network, and is not dependent on INGO presence or future funding expectations.

Role of the steering committee

The steering committee, which comprised the civil society action researchers and later the Palestinian NGO network, played a crucial role in supporting the long-term development of the contingency plan. The project benefited from the long-term involvement of experts, from the inception of the project in 2011. The fact that they were involved in the development of its aims, were connected to the communities it sought to serve, and remained in place through the implementation phase, was integral to the success of the programme.

A measured and collaborative approach to partner selection

WWS has found (most notably in South Sudan), that taking the necessary time to select the right partners, and doing so transparently, is of lasting benefit to the programme. It ensures that those organizations which are fully committed to the specific aims of the programme are selected, and the process can serve a useful secondary function in raising awareness of these aims among non-partner organizations. Rather than fostering competition among under-resourced CSOs, this approach establishes wide support for the goals the coalition sets out to achieve. In encouraging the coalition to develop the contingency plan, it was vital that organizations from different sectors took the time to understand the scope of each partner’s work.

Establishing networks with other NGOs

Much work was done to build bridges between the contingency plan and the work of the other relevant NGOs and INGOs. This was useful both to avoid duplication of effort, and to facilitate learning from the work of others. This approach builds the effectiveness of the plan and enables the information gathered to be shared with a wide audience. It also enables advocacy to be conducted at local and international levels in coalition.
**Action research**

Addressing accountability issues from the bottom up through the action research project had the benefit of empowering men, women, and youth as citizens and increasing their understanding of the role they can play in influencing policy and practice at local and state levels. The approach has also allowed participants the space to reflect on personal and more local examples of state-level problems, and has prompted individuals and communities to address this at their own levels, as well as to advocate for state-level change where possible. Bringing together a broad spectrum of people to conduct the action research created new relationships between participant organizations, which led to new networks and cooperation between different civil society actors represented by the researchers. This has enabled the voices of affected communities to explicitly inform Oxfam’s context analysis, theories of change and, in due course, programming.

**Using different methods of research**

When approaching the situation for women with disabilities, WWS used various means of research to inform the design of the programme. There was considerable consultation with potential beneficiaries, as well as action research. This methodology, which was successful in Phase I, empowers community members themselves to identify their needs and arrive at a consensus on what the priorities for the programme should be. WWS also conducted a gap assessment study and secured a consultant to document the outputs from a workshop. Bringing these different types of research together resulted in a contingency plan which was driven by the actual needs of the population it was set up to serve.

**Working with existing structures**

Since the early stages of the project, the Palestinian NGO network has facilitated the inception and sustainability of the coalition by hosting meetings with the women’s sector organizations and disabled people’s organizations. This was done in addition to facilitating their own work, which reflected positively on the coalition members, who considered PNGO as the umbrella organization for their structure and work. This will support the longer term accountability of the coalition and ensure the work is sustainable and not dependent on future project funding.

**Putting women with disabilities at the centre of the process**

In order for this process to be effective, it was crucial that women with disabilities were involved and consulted throughout each phase, in order to incorporate their actual needs into every stage of the programme. Without this involvement by those who would actually be (and have been) affected by emergencies, the programme would not be relevant. The community workshops were a key part of this process.
NOTES


5 Ibid.

