









# MAP IN ACTION **2015-16**















ony Laurance CBE, Chief Executive

This was another bleak year for the Palestinian people, with the ongoing crisis in Syria (where more than half a million Palestinians have been displaced), the continuing blockade of Gaza, and a lack of any progress towards peace. MAP expanded its programmes hugely in response to the continuing needs. We more than doubled our spending – thanks largely to the very generous extra support we received in response to the Gaza crisis in 2014.

Most of the extra spending was in Gaza, where the needs have continued to grow. At Al Shifa hospital, Gaza's first Limb Reconstruction Unit is restoring function to those injured in 2014. We are also helping to strengthen Gaza's trauma care services and have expanded support for malnourished children. These and other projects in Gaza are featured in this report.

An upsurge in violence in the West Bank from October left hospitals overwhelmed by some 15,000 casualties, many injured by live bullets at protests. We were able to mobilise fast, delivering £65,000 of medical supplies to hospitals treating the wounded.

Lebanon's Palestinian camps continued to deteriorate while absorbing the additional refugees displaced from Syria. Our emergency hospital care fund helped refugees receive life-saving treatment for conditions such as heart disease and cancer, and our projects for women and children have helped many others.

These are just a few of the achievements highlighted in our report, all of them delivered through the excellent and dedicated work of our teams and partners across the region.

We also continued to campaign for the Palestinian right to health in the UK Parliament and at the UN. We have pursued accountability for attacks on medical infrastructure, protection for Palestinians fleeing Syria, and a lifting of the obstacles to the movement of ambulances in the West Bank.

In 2017 we will see a number of bitter and heart-rending anniversaries for the Palestinian people: 10 years of blockade in Gaza, 50 years of occupation, and 100 years since the Balfour Declaration.

Though the current situation is severe, our goal is unchanged: to enable Palestinians to realise their rights and freedoms and access an effective system of healthcare.

Thank you to all who are helping us make our vision a reality. It is you, our supporters, with our partners, fundraisers and staff, who make this remarkable work possible.

Tony Laurance CBE, Chief Executive

Alan Waddams, Chair

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# • WOMEN AND CHILDREN'S HEALTH

# WHAT WE DO

MAP was established by medical professionals and humanitarians in Lebanon after the Sabra and Shatila massacre in 1982.

Since then MAP has been reaching out to the most vulnerable Palestinian communities, striving to achieve the highest attainable standard of healthcare in hostile and difficult conditions.

Today, as well as London, we have offices in the West Bank, Gaza, Jerusalem and Lebanon. With extensive local knowledge and experience, we work closely with communities, coordinating care and medical aid even where there are severe access restrictions.

#### MAP works in five programmatic areas:

Essential Primary Healthcare Women and Children's Health Emergency Preparedness and Response Mental Health and Psychosocial Support Campaigns

#### And two cross cutting themes:

Training and Capacity Building Disability

PRIMARY HEALTHCARE

# EMERGENCY • PREPAREDNESS AND RESPONSE

#### TRAINING AND CAPACITY BUILDING

MAP ensures that training for frontline staff on a range of topics runs through the heart of our work.

#### MENTAL HEALTH & PSYCHOSOCIAL SUPPORT

#### DISABILITY

• CAMPAIGNS

MAP advocates for the rights of people with disabilities, and provides assistive devices, adaptations to buildings, and specialist care as well as early intervention for children with disabilities.

## **ESSENTIAL PRIMARY HEALTHCARE**

PROGRAMME SPEND: £0.3m

#### **FACTS**

As the first point of contact with a health system, a good quality and accessible primary healthcare service is crucial to improving wellbeing and tackling health inequalities. Yet primary care is often underfunded and under resourced. Strong primary healthcare is especially vital in Palestine and Lebanon, where access to health is hindered by movement restrictions and other symptoms of occupation and exile.

#### **MAP'S RESPONSE**

MAP is working to improve access to primary health and diagnostic services and improve the continuity of care for patients. We do this by filling the gaps in basic service provision, providing top-up services to those most in need, and helping to strengthen existing providers.

By maintaining good links with key stakeholders in primary healthcare in Palestine and Lebanon — especially the Palestinian Ministry of Health and the United Nations Relief and Works Agency (UNRWA) — MAP is well placed to deliver a variety of large and small-scale programmes. We believe that prevention is better than cure: if we can act to address the root causes of poor health, we can help to prevent long-term illness.

#### **MAP IN ACTION**

### MOBILE HEALTH CLINIC, WEST BANK

The Bedouin of the West Bank are one of the most isolated groups in Palestine, suffering from high rates of malnutrition and elevated rates of accidents and hygienerelated hazards.



Our mobile clinic treats thousands each year, and delivers health awareness sessions and hygiene kits to families.

### MOBILE EYE CLINIC, WEST BANK

With our partner, St
John Eye Hospital,
MAP provides free
eye examinations
through a mobile clinic,
checking for conditions
such as glaucoma and
cataracts, and referring
for treatment. The team also
teaches preventative measures
and helps people to self-detect eye
diseases early.



### MOBILE HEALTH CLINIC

serves 31 Bedouin communities in the Jordan Valley



**INCLUDING CONSULTATIONS FOR** 

1,046
PREGNANT WOMEN
1,184
INFANTS UNDER 3
1,995

PATIENTS WITH CHRONIC DISEASES

#### **MOBILE EYE CLINIC**

Our clinic visits
16 communities each month

BENEFICIARIES SERVED

**Z**,/15

PATIENTS IDENTIFIED WITH

#### SERIOUS EYE CONDITIONS

REFERRED FOR SPECIALIST SERVICES:

Since the programme started in January 2016

#### **CASE STUDY**

# HEALTHCARE IN THE JORDAN VALLEY

The Trefaat community sits on top of a wadi in the Jordan Valley. There are no services at all in Trefaat, but MAP's mobile clinic visits the community.

Mustafa, three and a half years old, lives in Trefaat. He has been suffering from a heart condition since birth but this was only recently discovered during a routine examination with a doctor from the mobile clinic. Thanks to this intervention, Mustafa was referred to hospital where he received specialised care. Back home in Trefaat, the mobile clinic staff have been following his case and his condition has improved.

Saeed also received specialised treatment thanks to the clinic. At one year old he only weighed six kilos and was referred to a specialised malnutrition clinic for further examination. Now, with the help of the clinic, he is gaining weight and his condition is improving.



# **WOMEN AND CHILDREN'S HEALTH**

PROGRAMME SPEND: £1m



#### **FACTS**

Women's and children's health remains a cause for concern for Palestinians. The population has high rates of maternal and child mortality and morbidity, with women and children consistently left most vulnerable by conflict and prolonged occupation. Improving access to quality care, and promoting health and care-seeking behaviours among communities and households, are key to improving maternal, neonatal and child health.

### **INFANT MORTALITY IS** 5x HIGHE

in occupied Palestine than in Israel (18.8 per 1,000 births as compared to 3.7)

# **MATERNAL MORTALITY IS**

in occupied Palestine than in Israel (28 per 100,000 births as compared to 7)

Physicians for Human Rights, Israel, 2015

#### **MAP'S RESPONSE**

MAP takes an integrated approach to women and children's health, encompassing reproductive health, safe motherhood and essential child health services, together with psychosocial care, parenting support and recognition and response to cases of child abuse, neglect and domestic violence.

#### **MAP IN ACTION**

MATERNAL AND CHILD HEALTH PROGRAMME, LEBANON

MAP provides the only homevisiting midwifery service in Lebanon's Palestinian refugee camps. Thanks to our midwives. breast-feeding rates are higher, anaemia is lower, and high-risk pregnancies have been reduced.

#### WOMEN'S CANCER CENTRE **WEST BANK**

Many women in the West Bank have limited access to health services, leading to late diagnosis of cancer, often proving fatal. Our partner centre provides diagnostic services, physical examinations and mammograms.

#### MANAGEMENT OF MALNUTRITION, GAZA

After seven years of blockade in Gaza, malnutrition among children has increased. A dedicated clinic provides healthy meals, supplements, and medication to malnourished children. Parents are given nutritious food to prepare at home, and daily health education sessions.



#### MATERNAL AND CHILD **HEALTH PROGRAMME**, **LEBANON**



HELPED **MOTHERS + CHILDREN** 

ante natal visits

post natal visits

**WOMEN'S CANCER CENTRE, WEST BANK** 

566

patients accessed services

1.274

diagnostic tests performed

320 people attended awareness raising activities

#### **MALNOURISHED** CHILDREN, GAZA

**50%** of children have insufficient intake of calories

**10%** of under-fives suffer from stunting or chronic malnutrition

**60%** of school age children and

**70%** of babies are anaemic

4,473 HEALTHY MEALS SERVED

#### **CASE STUDY**

#### **CHILDREN** WITH DISABILITIES

Amal, aged 7, fled Syria with her family three years ago. Shortly afterwards, a stroke left her with developmental delay and loss of mobility. Amal is being treated at the MAP-funded Early Intervention Centre for children with disabilities in south Lebanon. She receives physiotherapy and occupational therapy and is making great progress.

The centre helps children with a wide range of disabilities, providing therapy and remedial work and combatting the stigma which surrounds disability. Amal's mother was severely depressed after their displacement from Syria, and blamed herself for her daughter's stroke, believing the depression had caused it. The centre staff have reassured her that she was not responsible. This psychological support, offered to parents and children, is very important. "Whenever I feel sad," explains Amal's mother, "I come to the centre".





# **EMERGENCY PREPAREDNESS & RESPONSE**

PROGRAMME SPEND: £1.4m



Conflict and military occupation continue to endanger Palestinian lives and cause injuries every year. Hospitals are under resourced and emergency staff do not have the training they need. The effects of the 2014 attacks on Gaza are still being felt by thousands who are yet to return to their homes, are still disconnected from the water and power supply and who, in some cases, are still recovering from complex injuries. Improved rehabilitative services are vital to minimising long-term disability.

GAZA: 75,000 ONLY **17%** 450,000

**A FURTHER** 45,000 still displaced since war in 2014

of homes destroyed in the attacks reconstructed or repaired

Palestinian refugees live in 12 CAMPS and informal gatherings

Palestinian refugees displaced from Syria living in Lebanon

**MAP'S RESPONSE** 

In emergencies, MAP is ready to act fast to get vital aid to those in need. When the bombing started in Gaza in 2014, MAP was one of the first organisations to respond and provided more medical supplies to public hospitals than any other NGO during the crisis.

MAP is improving capacity to deal with emergencies, and empowering local communities to develop strong systems and protocols to respond in crisis. We ensure that hospitals are appropriately stocked and equipped and ready to respond to emergencies.

#### **MAP IN ACTION**

LIMB RECONSTRUCTION AND PHYSIOTHERAPY TRAINING, GAZA

The 2014 war on Gaza caused many injuries too complex to be treated within the local health system. This year, with our partner, IDEALS, we established a permanent limb reconstruction unit staffed by local surgeons,

securing the future of post-traumatic and reconstructive surgery in Gaza. We are also investing in rehabilitation services to reduce the likelihood of ongoing health complications.

**IMPROVING THE** TREATMENT OF **BURNS, WEST BANK** AND GAZA

Displacement, cramped living conditions and over-reliance on open flames all result in burns. Since 2009, MAP has been supporting burns units in the West Bank and Gaza with supplies, training and equipment. This year we completed the rehabilitation of a new unit in Hebron which will serve a population of 850,000 people.



IN 2015/16: medics attended limb reconstruction training 107 patients treated in new unit **46** physiotherapists trained **BURNS** 

LIMB

**RECONSTRUCTION/** 

REHABILITATION

102 patients treated in burns units in Gaza

**GAZA** 

#### **BLOOD BANK**

MAP delivered \$289,837 worth of supplies enabling

**24** blood donation drives

4,838 units of blood were collected

### LEBANON

**EMERGENCY HOSPITAL CARE FUND** 

83 PATIENTS including

3 CHILDREN received treatment

Photo: UNRWA/Rami Al Sayyed

#### **CASE STUDY**

#### **EMERGENCY FUND FOR PALESTINIAN REFUGEES FROM SYRIA**

For Palestinian refugees displaced from Syria, serious illness or injury could be enough to ruin a family financially. The cost of life-saving treatment is prohibitively expensive.

MAP's Emergency Fund contributes to the cost of procedures including cancer treatment, neurosurgery, cardiac surgery, treatment for severe burns and advanced neonatal services. 338 people have had their treatment covered since the beginning of the project in 2013.

This year, 83 people were helped, and five-year-old Aila was one of them. Aila and her family fled Syria three years ago and now live in a one room home in Beirut's Shatila camp. Last year Aila's life was put in danger by an ear infection which risked spreading to her brain. She was rushed to hospital and spent five days in intensive care. Her treatment would have been completely unaffordable for her parents who, like so many Palestinians displaced from Syria, have been unable to find work. It was a terribly worrying time for the family but thanks to the treatment she received she is now healthy and able to play with her sisters once more.





# MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

PROGRAMME SPEND: £1.3m

#### **FACTS**

Palestinians living under occupation or blockade in Palestine or as refugees in Lebanon are subject to stress in every aspect of their daily lives. Lack of access to health services, settler violence, threat of home demolition, unemployment and trauma caused by conflict and displacement are all facts of life. Mental health and psychosocial support (MHPSS) services help individuals and communities to heal psychological wounds and rebuild social structures.

#### PALESTINIAN REFUGEES FROM SYRIA IN LEBANON

96% of Palestinians witnessed armed conflict while in Syria

94% lived through some kind of trauma (like a death in the family, physical trauma, kidnapping or home destruction)

53% saw their homes destroyed

21% witnessed the death of a close relative or friend

**14%** have been physically harmed or experienced a kidnapping

#### **MAP'S RESPONSE**

MAP supports Palestinians in their determination to be resilient and active survivors, helping communities to build collective coping mechanisms. Our aim is to help people to rebuild meaning and coherence, relieve stress, and limit the development of further complications, whilst also addressing interpersonal, family, social and cultural issues.

#### **MAP IN ACTION**

MENTAL HEALTH PROGRAMME FOR CHILD REFUGEES FROM SYRIA, LEBANON

Palestinian refugees from Syria are in particular need of psychosocial support. MAP is leading a partnership with UNICEF and local organisations to provide group play therapy as well as one-to-one counselling.

# THE SARAYA CENTRE FOR COMMUNITY SERVICES, WEST BANK

Palestinians in East Jerusalem face discrimination in all aspects of their lives and the stress of this effects their psychosocial wellbeing. We provide children with a stimulating programme in which they are supported to address psychosocial issues and focus on their education.

# WOMEN'S PROTECTION AND EMPOWERMENT, GAZA AND LEBANON

In the conservative communities in which we work, gender-based violence is pervasive but rarely talked about. We work with female-led local partners who support women in Gaza and Lebanon to become agents for change in their communities.

#### **SARAYA CENTRE**

**558 CHILDREN** took part in after school activities

**777 CHILDREN** took part in activities in schools

### **153** VOLUNTEERS

were trained in topics including child protection & emergency response

#### **MHPSS IN LEBANON**

30,000 CHILDREN
MORE THAN

**400** SURVIVORS

of gender-based violence have been supported and protected

## MHPSS IN LEBANON, PYRAMID OF SUPPORT

6,843 CHILDREN took part in structured psychosocial activities

906 CHILDREN received individual support from a social worker

485 CHILDREN received specialist individual support with a psychologist

#### **CASE STUDY**

#### SUPPORTING CHILD REFUGEES FROM SYRIA: RANIA'S STORY

Like most children who access our support programmes in Lebanon, Rania experienced loss in Syria: her father and brother were killed by shelling in their home town. When she started to attend one of our centres she was extremely withdrawn. Although she cried at first after her loss, she soon learned to bury her feelings and to behave as if the tragedy had never taken place. She was also experiencing nightmares.

Rania attended therapy, and in time her condition improved. As she spoke with staff, the full picture unravelled: Rania had been hiding her tears from her mother as she couldn't bear to see her cry too.

With our support, Rania was able to talk about her feelings and express her emotions again. She now talks openly about the loss of her family members. The nightmares are subsiding and her school performance has improved too.



# CAMPAIGNS

# OUR IMPACT INFLUENCING DECISION MAKERS

MAP works to overcome the political obstacles to Palestinian health and dignity. We campaign internationally and in the UK Parliament, and take MPs on delegations to the region to witness occupation themselves.

MAP recognises that, for Palestinians, the full realisation of the right to health requires changes to their political and economic situation. We forge partnerships to demonstrate the impact of occupation, displacement and conflict on Palestinian health and wellbeing, and to encourage the UK government, the EU and the UN to act to remove impediments to health.

#### **DELEGATIONS**

This year, MAP and the Council for Arab-British Understanding (Caabu) took three delegations of cross-party MPs and peers to the West Bank, to witness the impact of the occupation first-hand. These delegations are vital in ensuring that UK policy debate is informed by better understanding of the context.

After witnessing the arrest of a child during her visit, Sarah Champion MP secured a Westminster Hall debate on the issue of child prisoners. A question asked in parliament by our delegate Imran Hussain MP about home demolitions prompted Prime Minister David Cameron to say that he found the "effective encirclement of East Jerusalem genuinely shocking".

#### **LEBANON**

Our campaigns draw attention to the restricted civil and political rights of Palestinians, and the dire conditions in Lebanon's Palestinian refugee camps. Through events, advocacy work in Parliament and the UN in Geneva, and public engagement through the media, we also seek to ensure that the 45,000 additional Palestinians from Syria who have fled to Lebanon can access humanitarian aid and protection.

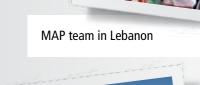
#### **WEST BANK**

Israeli checkpoints, permit restrictions and the separation barrier severely limit freedom of movement. For example the practice of 'back-to-back' ambulance transfers at checkpoints: Palestinian-registered ambulances are forced to transfer patients to an Israeli-registered ambulance in order to enter East Jerusalem, causing significant delays, medical risk and discomfort for patients.

MAP has partnered with Physicians for Human Rights Israel to produce a factsheet on the impact of 'back-to-back' transfers. This was launched at the UN Human Rights Council in March 2016 and, using this evidence, we were able to advocate successfully for strong language in a UN resolution.

#### **GAZA**

Ahead of the UN Human Rights Council discussions on the Gaza Commission of Inquiry in June 2015, we published 'No More Impunity: Gaza's Health Sector Under Attack'. Our public campaign included videos detailing three cases – viewed over 52,000 times across our channels – and opinion pieces from our Honorary Patron Baroness Helena Kennedy (Guardian) and Palestinian surgeon Ghassan Abu Sittah (Independent).





A delegation of MPs visit the Jordan Valley with MAP



Dr Philippa Whitford MP visits Gaza

### **FINANCE**

Our income in the year to 31 March 2016 was £4.86m. It was lower than the previous financial year when we raised significant additional income in response to the 2014 Gaza crisis.

Most of our income comes from our many individual supporters. However, we also received a large grant from UNICEF, supporting mental health and psychosocial programmes in Palestinian refugee camps in Lebanon, which we hope to extend to the end of 2016.

The overwhelming support we received during and after the 2014 war on Gaza resulted in MAP holding surplus reserves of £3.5m at the beginning of the year. The Trustees committed to expending this surplus over two years allowing increased spend on our charitable activities, primarily in Gaza. We achieved this objective in 2015-16, spending substantially more than our income for the year, and we plan similar levels of expenditure in the coming year.

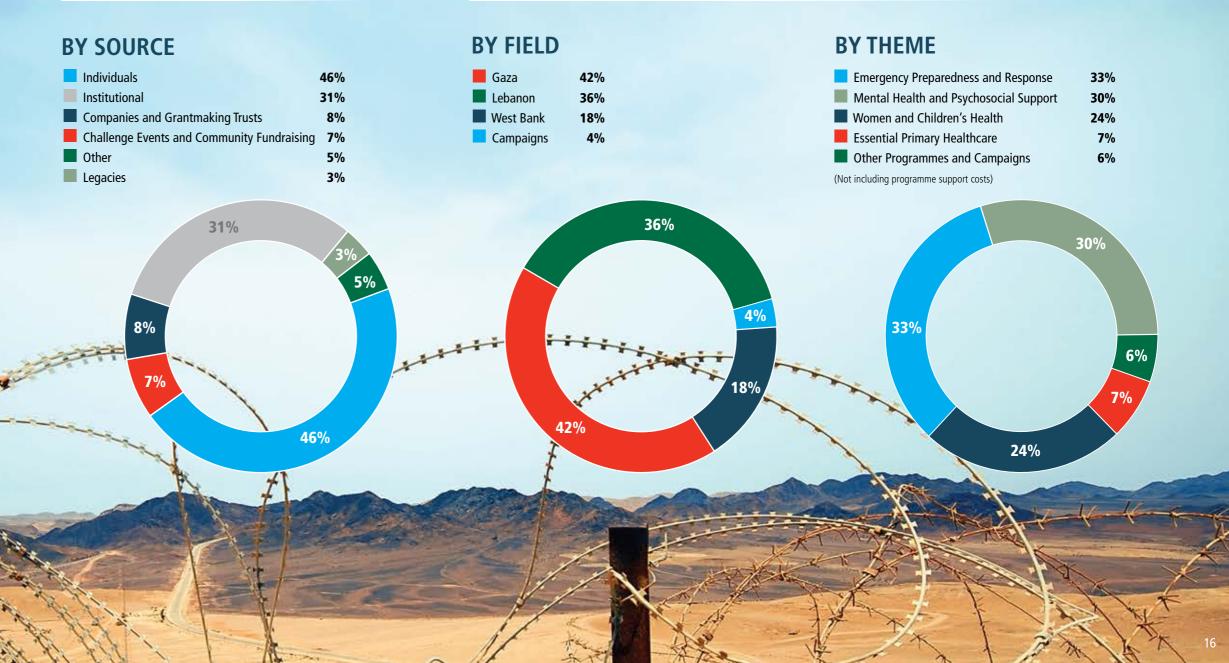
Total expenditure in 2015-16 was £6.2m: £5.3m spent on programmes and £0.9m invested in fundraising for future programme sustainability.

#### **STANDARDS**

In humanitarian disaster or conflict situations it is critical that aid workers deliver their best quality work. MAP subscribes to the Core Humanitarian Standard on Quality and Accountability (CHS) which sets out Nine Commitments that organisations and individuals involved in humanitarian response can use to improve the quality and effectiveness of the assistance they provide.

# **TOTAL INCOME £4,861,418**

# PROGRAMME EXPENDITURE £5,361,189



### **FUTURE PLANS**

#### **ESSENTIAL PRIMARY HEALTHCARE**

Most of us are used to being able to make a GP appointment when we're ill. In occupied Palestine things aren't so simple. This year, MAP has instigated a programme to change this, developing family medicine in the West Bank in partnership with the Ministry of Health, UNRWA and An Najah University. This programme and others, including our mobile clinic for isolated communities, will continue to be developed this year.

#### **WOMEN AND CHILDREN'S HEALTH**

Our project providing home visits to vulnerable and at-risk pregnant women, mothers and newborn infants will continue in Lebanon. We will also oversee an assessment of the project to review its long-term impact and future development. We will provide diagnostic tests and treatment through our partnership with the Dunya Women's Cancer Centre in the West Bank.

In Gaza, we will offer healthy meals and treatment for malnourished children. We will work to improve neonatal morbidity and mortality rates by training medical personnel, supplying equipment and developing comprehensive systems and practices for treating the most urgent cases.

#### **EMERGENCY PREPAREDNESS AND RESPONSE**

MAP will ensure that hospitals and blood banks in Gaza are prepared and able to respond quickly to emergencies, through provision of emergency medicines and disposables, and training in primary trauma care for doctors, nurses and midwives.

We will bridge significant gaps in healthcare provision to Palestinian refugees from Syria, including support to those with life-threatening conditions requiring advanced hospital treatment.

We will train and build capacity of medical professionals in orthopaedic surgery, neurosurgery, physiotherapy and trauma management.

#### **MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT**

MAP will offer a range of psychosocial support to children and their caregivers in Palestinian refugee camps in Lebanon, including those displaced from Syria, and specialist support to children and young people with acute symptoms.

In East Jerusalem, we will continue our support to children and families so that individuals and communities can prepare for and respond to emotional, psychological and behavioural difficulties arising out of the ongoing conflict and occupation.

In Gaza, we will work with the local Friends for Mental Health Association to advocate for the protection and recognition of the rights of people with mental illness and to raise awareness among their families, service providers and the local community.



#### **PATRONS**

#### **HONORARY**

Sir Terence English KBE, FRCS, FRCP
The Baroness Kennedy of the Shaws QC
Dr Swee Chai Ang FRCS
Isaac Nusseibeh MBCHB, LMSSA, FRCS
The Rt Hon Lord Steel of Aikwood KT KBE PC

#### PRESIDENT'S CIRCLE

Dr Peter Barham & Dr Jennie Metaxa-Barham Magdi Jameel Fadi Kassis Bernard Lo & Anne McGhee Heba Zaphiriou-Zarifi

We were very saddened to hear of the death of our Patron, Sheikh Mohamed Bamieh, in December 2015. Sheikh Bamieh was very generous to MAP over many years.

#### **CHAIRMAN'S CIRCLE**

Mazen Arafat Nomura Mr & Mrs Roderick Cooke Mr & Mrs Mayassi Anthea Norman-Taylor Kirkland & Patrick Smulders

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#### **THANK YOU**

**ABC International Bank** B & P Glasser Charitable Trust Gareth Beynon Cambridge Applied Physics **Professor Tony Davies** Professor Joseph Farrell Hilda & Alice Clark Charitable Settlement **Hugh Symons Charitable Trust** Islamic Relief **Linbury Trust** McLain 8 Strands Foundation Nadir Dinshaw Charitable Trust Network for Social Change John Payne Pilkington Charities Fund Mr & Mrs Pountain Swire Charitable Trusts Alistair & Dale Thomson John Trythall **UK Islamic Mission** UNICEF

THANK YOU TO ALL who have raised awareness of our work by supporting our #WithGaza campaign, including our celebrity supporters Yasmin Alibhai-Brown, Bill Bailey, Caryl Churchill, Bella Freud, Jeremy Hardy, David Morrissey, Camilla Rutherford and Juliet Stevenson.

Lawrence Waterman

#### **MAP TEAM**

#### **SENIOR MANAGEMENT**

Tony Laurance CBE, Chief Executive lain McSeveny, Finance James Denselow, Media and Campaigns Jo O'Neill, Fundraising Dr Andrew Ferguson, Programmes Mira Al Mukarker, West Bank Marta Petagna, Lebanon Fikr Shalltoot, Gaza

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