COVER PAGE

Country: occupied Palestinian territory

UNDAF Outcome(s)/Indicator(s) ¹ :	
(Link to UNDAF outcome., If no UNDAF, leave blank)	
Expected Outcome(s)/Indicator (s): occupied Palestinian territory (oPt) is improved (GP/RP/CP outcomes linked to the MYFF goal and service line)	Mental health of both men and women in the
Expected Output(s)/Annual Targets:	Capacity of staff providing mental health services are developed
impr	Access to the mental health care facilities is oved
throu	Quality of mental health services is improved ugh action oriented researches
Executing Entity:	UNDP/PAPP
Implementing agencies: UNDP/PAPP, Médecins de Mental Health Program (GCMHP), Birzeit University, G	du Monde-France (MDM), Juzoor, Gaza Community Guidance and Training Center GTC, CEDRATE
The objective of the project is to improve mental health servi through the rehabilitating, constructing and equipping of the Documentation Centre in Ramallah, training of 18-newly recr	arrative ces infrastructures and capacities in the West Bank and Gaza Strip, have mental heath clinics in Jenin, Hebron and Nablus and one ruited staff, conducting two cycles of 12 short training sessions for d researches, one regarding children's severe psychiatric disorders, and towards children.
Programme Period: 2007-2009 Programme Component: Project Title: Improving mental health care services in the oPt Project ID: Project Duration: 24 Months Management Arrangement: UNDP & NGO	Total Budget € 2,740,000 Allocated resources: • Government • Regular • Other: • Donor FRANCE • Donor • Donor • Unfunded budget:
Agreed by (UNDP):	

Roberto Valent, Special Representative, a.i.

COMPONENT 2: SITUATION ANALYSIS

2.1 Context:

According to the World Health Organizations (WHO), mental health can be defined as a "state of well-being enabling individuals to realize their abilities, cope with normal stresses of life, work productively and fruitfully, and make a contribution to their communities." Mental health concerns have been touched upon as part of the National Palestinian Health Plan² where the point of departure for the strategy was the recognition that health is a multi-disciplinary subject involving five related but distinct factors, namely: (a) human biology; (b) the environment; (c) human behavior; (d) health care services; and (e) economic factors. The first three of these are considered to be the most significant, leading to the conclusion that an effective health strategy must deal not only with medical care and treatment but also with disease prevention, health promotion and health protection.

According to Dr. Sarraj from the Gaza Community Mental Health Programme (GCMHP)³, the "collective Palestinian Psyche is a mixture of painful memories, old and recent traumas, an unyielding quest for freedom, and a profound longing for a dignified life." In his article and quoting the first Intifada as a reference point, he has reviewed how the Israeli army's response to the Palestinian Uprising of 1987 exemplified in measures which included, killings, torture, detentions without trial, demolition of homes, curfews and deportation, had all added to the mental health deterioration of the average Palestinian. Two particular traumas that are difficult to cope with were identified: torture and home demolitions, actions which have not stopped during the second Intifada. Yet efforts have been ongoing with the different donor parties, WHO and the Palestinian Ministry of Health in dealing with these traumas in curative and preventive approaches. The French government has been involved in mental health with the Palestinian Ministry of Health as far as 1995. Moreover in a 2005 survey conducted between Birzeit University and WHO on the Quality of Life of the Palestinian People, findings reflected that: 25.6% felt that life quality was poor or very poor, 22% suffered from physical health problems, 33.3% felt anxious, 38.3% felt frustrated, and 37.9% felt fed up with life. One of the major recommendations involved the "continued support to the delivery of health services in the West Bank and Gaza through appropriate donations in kind⁴."

2.2 Background:

Along those lines, a mission from the French Development Agency (AFD) visited the Palestinian territory from 4th to 9th September 2006 in order to make the mental health project compatible with the new rules of aid management decided by the international community. The team met with representatives from the Ministry of Planning (MoP) and Ministry of Health (MoH) in the West Bank and Gaza Strip, representatives from the donor community involved in the mental health sector, Non Governmental Organizations (NGOs) working in this field and the French

¹ "The National Health Plan for the Palestinian People: Objectives and Strategies, published by the Planning and Research Center in April, 1994.

² Bridges Magazine, Volume 1 No. 6, October- November 2005 issue.

³ WHO, Agenda Item (18a), 53rd Session of Regional Committee for the Eastern Mediterranean, 9-12 September 2006.

General Consulate. Following their visit, a Memorandum of Understanding (Aide Memoire) was published and approved by both MoP and MoH. (Please see Annex 1: Aide Memoire & Endorsement letters)

UNDP/PAPP and AFD picked up on their discussions regarding the strategy following the endorsement letters produced in late 2006, and based upon the approved Aide Memoire (Annex 1). Because a comprehensive gender analysis had not been conducted before the Aide Memoire was signed, sex disaggregated and other gender statistics are not available. However, gender mainstreaming will be considered as part of project implementation, especially in the training component of mental health practitioners and nurses, and monitoring and evaluation. Necessary activities in order to mainstream gender in the project and monitored with indicators will be planned.

COMPONENT 3: STRATEGY

The project seeks to improve male and female Palestinian mental health condition through improving the access to mental health facilities, developing capacity of mental health care staff and improving quality of the services through action oriented research. In order to achieve the outputs, the physical infrastructure of three mental health clinics in Hebron, Nablus and Jenin, and one documentation center in Ramallah will be either rehabilitated or constructed; and capacity of mental health professionals in Gaza and the West Bank in cooperation with local implementing organizations (LIO's) will be developed. This will also be coupled with two applied researches conducted with CEDRATE (France).

The project strategy proposed is thus made up of following components:

- 1. Rehabilitation and equipping of three mental health centres (Nablus, Jenin and Hebron) and a documentation centre in Ramallah. This will address the physical structure needs for providing sustained delivery of mental health.
- 2. Training of the newly-recruited staff in the four centres (18 men and women foreseen) and general practitioners and nurses in the West Bank and the Gaza Strip, comprising of two cycles of one year sessions, where each cycle is made up of 12 short training sessions. This will address the human capacity developmental needs for providing sustained delivery of mental health
- 3. Preparing and publishing two applied researches conducted with CEDRATE (France): one regarding children's severe psychiatric disorders of both men and women, including autism, and the other regarding family violence exerted towards children, done in close collaboration will be developed between the MoH, the Hebron centre and Cedrate in order to ensure that researches are action-oriented. These studies will help the MOH and mental health delivery partners in fine tuning both their structural and human capacity involvement to better meet the changing mental health needs and better and more accurately addressing them in new areas.
- 4. Special Attention will be made to gender equity at the different levels of intervention, especially in the recruitment, technical capacity component and training components. The development of TORs and the selection of trainees will ensure the equal participation of men and women. Women's accessibility to the services provided by the mental health centres will also be ensures when preparing the daily schedules of services.

5. An overall security management plan was discussed with the donor, taking into consideration the recent developments in both the West Bank and Gaza Strip, and the issue of delaying certain activities in Gaza has also been raised. Project component postponement or transfer and redirection of funds and activities is dependent on accessibility into Gaza and the Security situation allowing French experts into the Gaza Strip.

COMPONENT 4: RESULTS AND RESOURCES FRAMEWORK

The project aims at improving the mental health facilities and capacities of mental health practitioners in pilot locations, coupled with two applied research to be adopted in practices and planning.

PROJECT RESULTS AND RESOURCES FRAMEWORK

Mental health of both men and women in the occupied Palestinian territory (oPt) is improved	in the occupied Palest	n rrogramme kesuns an tinian territory (oPt) is imp	d Kesource Framework browed	•••
Outcome indicators as stated in the Country/ Re	intry/ Regional/ Glob	al Programme Results a	nd Resources Framewo	gional/ Global Programme Results and Resources Framework, including baseline and
targets.				
Applicable MYFF Service Line:				
Partnership Strategy				
Project title and ID (ATLAS Award ID):	:			
Intended Outputs	Output Targets for (vears)	Indicative Activities	Responsible parties	Inputs
1.1 Capacity of staff providing mental	On Site Training in	1.1. (MDM) will train	1.1. MDM and	MDM: € 400,000
health services are developed	Nablus, Jenin and	staff in Jenin and	UNDP	GTC: € 150,000
	Hebron by two NGO,	Nablus, and set up	1.2. GTC and	Birzeit: € 40,000
	this includes short term	a companionship		Center Salaries: € 350,000
	training abroad, while	program in Nablus	1.3. GTC, MDM	Juzoor: € 300,000
	Documentation Centre			GCMHP: € 200,000
	Training will be	1.2. Guidance and	1.4. Birzeit and	
	conducted by Birzeit	Training centre	•	
	University. Project will	(GTC) will do the		
	cover salaries for 18	same in Hebron's	1.6. UNDP, Juzoor,	
	newly recruited staff		UNRWA and	
	members and	1.3. Short term	МОН	
	operations of four	training abroad:		
	centres (2007-2009)	training sessions		
		ın toreign		
		countries, as well		
		as workshops		
		inside or outside		
		the country, will		
		directly be		
		managed by the		
		PMU (PIU), in		
		collaboration with		
		MDM and the		

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747		documentation	centre of	Ramallah will be	implemented by the Bir Zeit	University	-	pay for the	salaries of the	newly-recruited	staff (18 are	foreseen in total	during two years)	and will contribute	to the running	costs in the four	rehabilitated	centers (after the	completion of the	project, these	costs will be paid	by the MoH).	Two cycles of one	year session, is to	be implemented	with the support	of foreign trainers	by two NGOs.	Each one-year	session is made of	12 short training	sessions.	Programs for both	areas will be	jointly designed,	but the one in the	Gaza Strip could
		-					1.5.																1.6.	-													

	Nablus: €172,000 Jenin: €118,000	Hebron: € 79,000	Ramallah: € 46,000 Site Engineers: € 24,000	CEDRATE: € 60,000	Audit: € 60,000 Contingencies: € 252,680
	1.2.1 MDM, UNDP, and MOH 1.2.2 MDM, UNDP and MOH	1.2.3 GTC, UNDP and MOH	1.2.4 Birzeit, UNDP and MOH		Independent UNDP- selected party, UNDP, AFD
be delayed according to the situation. 1.7. Juzoor will conduct training for the West Bank 1.8. Gaza Community Mental Health Program (GCMHP) for the Gaza Strip	1.2.1 Rehabilitation/ Construction and Equipping of Nablus Center 1.2.2	and Equipping of Jenin Center 1.2.3 Rehabilitation/ Construction and Equipping of Hebron Center	1.2.4 Rehabilitation and Equipping of Ramallah Center	1.3.1 children's severe psychiatric disorders, including autism 1.3.2 family violence exerted towards children	1.4.1 Audit to the project 1.4.2 Contingencies to be used as needed and with the Donor Approval
	Rehabilitation/ construction and equipping of three mental health center in Lenin Hebron and	as well as High High Contaction C		Contracting CEDRATE to conduct two action-oriented researches	Miscellaneous
	1.2. Access to the mental health care facilities is improved			1.3 Outlievest mountainment services is minimated through adjument enterings of the services residences.	

COMPONENT 5: ANNUAL WORK PLAN BUDGET SHEET

Annual Work Plan Budget Sheet (CPS -3005) Mental Health Project

Year 2008

EXPECTED OUTPUTS	PLANNED ACTIVITIES	TIMEFRAME	ZAME	RESPONSIBLE PARTY		PLANNED BUDGET	
and indicators including annual targets	List all activities including M&E to be undertaken during the year towards stated CP outputs	Z ∂	8	8	Source of Funds	Budget Description	Amount
Access to the mental health care facilities is improved	Rehabilitation/ Construction and Equipping of Jenin Center		×	MOH MOH	FRANCE	Construction Equipping	96,000
	Rehabilitation/ Construction and Equipping of Nablus Center		×	MOH UNDP, and	FRANCE	Construction Equipping	144,000 28,000
	Rehabilitation/ Construction and Equipping of Hebron Center		×	GTC, UNDP, and MOH	FRANCE	Construction Equipping	57,000 22,000
	Rehabilitation/ Construction and Equipping of Ramallah Center		×	Birzeit, UNDP, and MOH	FRANCE	Construction Equipping	21,000 25,000
- 1	Site Engineers UNDP GMS		XX	UNDP	FRANCE	Salaries	24,000
Capacity of staff providing mental	Training in Jenin and Nablus				FRANCE	Consultancies	100,000
health services are developed	Training for Hebron Training for Ramallah		XXX	GTC & UNDP	FRANCE	Consultancies	37,500
	Center Salaries		+		FRANCE	Salaries	10,000
	PMU Salaries	`	X	UNDP	FRANCE	Salaries	32,500
	Training for West Bank	X	X	Juzoor & UNDP	FRANCE	Consultancies	75,000

				<u> </u>								90
57,500	47,500		7,590	16,050	57,500	7,590	15,000			00.006	101,340	1,062,860.00
Consultancies	Equipment &	Operations	GMS	GMS	Consultancies	GMS	Consultancies			GMS	Contingencies	
FRANCE	FRANCE		FRANCE	FRANCE	FRANCE	FRANCE	FRANCE			FRANCE	FRANCE	
GCMHP & UNDP	UNDP		UNDP	UNDP	GCMHP & UNDP	UNDP	UNDP, MOH,	Hebron and	CEDRATE	UNDP	UNDP	
X	X		X	×	X	X	×			×	×	
Х	X		X	×	X	X	×			×	×	
Training for Gaza Strip	PMU Equipping &	Running Costs	UNDP GMS	UNDP GMS	Training for Gaza Strip	UNDP GMS	Launch 2 researches			UNDP GMS	Contingencies	
								Ouality of mental	health cognices is	improved through action oriented researches		TOTAL

Annual Work Plan Budget Sheet (CPS -3005) Mental Health Project

Year 2009

Amount In EUROS	200,000	75,000	20,000	175,000	65,000	95,000	150,000
PLANNED BUNGET Budget Description	Consultancies	Consultancies	Consultancies	Salaries	Salaries	Equipment & Operations	Consultancies
Source of Funds	FRANCE	FRANCE	FRANCE	FRANCE	FRANCE	FRANCE	FRANCE
RESPONSIBLE PARITY	MDM & UNDP	GTC & UNDP	Birzeit & UNDP	UNDP	UNDP	UNDP	Juzoor & UNDP
8	×	X	X	X	X	X	X
MEFRAME	×	X	X	X	X	X	X
20 Z	×	X	X	X	X	X	×
ō	×	X	×	X	X	X	×
PLANNED ACTIVITIES List all activities including M&E to be undertaken during the year towards stated CP outputs	Training in Jenin and Nablus	Training for Hebron	Training for Ramallah	Center Salaries	PMU Salaries	PMU Equipping & Running Costs	Training for West Bank
EXPECTED OUTPUTS and indicators including annual targets	Access to the mental health care	facilities is	improved				

Project document for AFD Mental Health Project

				T .					
115,000	15,900	32,100	115,000	15,900	30,000	1,800	20,000	101,340	1,200
Consultancies	GMS	GMS	Consultancies	GMS	Consultancies	GMS	Consultancies	Contingencies	GMS
FRANCE	FRANCE	FRANCE	FRANCE	FRANCE	FRANCE	FRANCE	FRANCE	FRANCE	FRANCE
GCMHP & UNDP	UNDP	UNDP	GCMHP & UNDP	UNDP	UNDP, MOH, Hebron and CEDRATE	UNDP	Audit Company & UNDP	UNDP	UNDP
×	×	X	×	×	×	×	×	×	×
X	×	×	×	×	×	×	×	×	×
×	×	×	×	×	×	×		×	
×	×	×	×	×	×	×		×	
Training for Gaza Strip	UNDP GMS	UNDP GMS	Training for Gaza	Surp UNDP GMS	Continuing two researches	UNDP GMS	Mid Project Audit	Contingencies	UNDP GMS
	1	1.		·	Capacity of staff	health services are developed	Quality of mental	Call Activities 15	action oriented researches

Annual Work Plan Budget Sheet (CPS -3005) Mental Health Project Year 2010

EXPECTED OUTPUTS and indicators including annual	PLANNED ACTIVITIES List all activities including M&E to be undertaken.	Ø	TIME	4EFRANE	PARIT	Source of Funds	PLANNED BUDGET Budget Description	Amount In EUROS
targets	during the year towards stated CP outputs							
Access to the mental health care	Training in Jenin and Nablus	×	×	-	MDM & UNDP	FRANCE	Consultancies	100,000
facilities is	Training for Hebron	×	×		GTC & UNDP	FRANCE	Consultancies	37,500
improved	Training for Ramallah	×	×		Birzeit & UNDP	FRANCE	Consultancies	10,000
	Center Salaries	×	×		UNDP	FRANCE	Salaries	87,5000
	PMU Salaries	×	×		UNDP	FRANCE	Salaries	32,500
	PMU Equipping &	×	×		UNDP	FRANCE	Equipment &	47,500
	Running Costs						Operations	

mental health prodocfinalmodifiedbyChikako

75,000	200	2/,500	7,590	16,050	57,500	7 500	066,	15,000	900.00	40,000	50,000	2,400
Consultancies		Consultancies	GMS	GMS	Consultancies		GMS	Consultancies	GMS	Consultancies	Contingencies	GWS
FRANCE		FRANCE	FRANCE	FRANCE	FRANCE	7777	FKANCE	FRANCE	FRANCE	FRANCE	FRANCE	FRANCE
Juzoor & UNDP		GCMHP & UNDP	UNDP	UNDP	GCMHP & UNDP	ag:	UNDF	UNDP, MOH, Hebron and CEDRATE	UNDP	Audit Company & UNDP	UNDP	UNDP
×		×	×	×	×];	×	×	×	×	×	×
×		×	×	×	×	;	×	×	×	×	×	×
Training for West	Bank	Training for Gaza Strip	UNDP GMS	UNDP GMS	Training for Gaza	dinc	UNDP GMS	Continuing two researches	UNDP GMS	Final Project Audit	Contingencies	UNDP GMS
								Capacity of staff	health services are developed	Quality of mental		action oriented researches TOTAL

COMPONENT 6: MANAGEMENT ARRANGEMENTS -

The role and responsibilities of each partner was thoroughly discussed and agreed upon taking into consideration the needs of the donor agency, but clarifying that UNDP rules and regulations abide in areas where unclarity is apparent. To manage the daily activities and interventions between UNDP/PAPP and the different local implementing organizations, a Project Implementation Unit (PIU) will be established. Moreover, as referred to in the Aide Memoire, UNDP/PAPP and AFD discussed and agreed to the general guidelines governing the interventions of each partner and LIO (Annex 2).

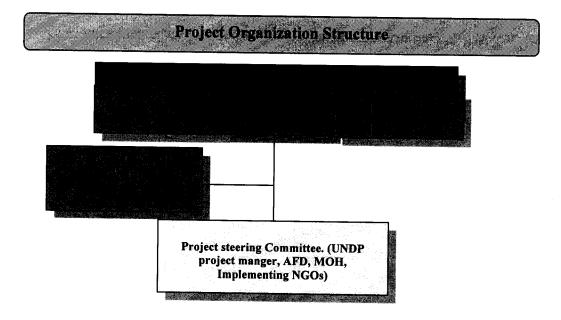
UNDP will enter in Special Project Cooperation agreements with Juzoor, MDM, CEDRATE, GCMHP and GTC. For Birzeit University, UNDP will enter in a professional consultancy agreement.

The Project will also have a Project Steering Committee that meets once at the end of each quarter through an invitation by UNDP. The Steering Committee will comprise of no more than 15 advisory members, with the main role of following up and advising on better fulfilling the goals and activities of the project. It will mainly comprise of up to Three members representing the MOH, One representatives of UNDP/PAPP, one AFD, one Consulate General of France, and one representing each of the UNDP Implementing Partners, and additional members as deemed fit by AFD, Consulate General of France, MOH and UNDP/PAPP.MOH will appoint up to a maximum of 3 persons, from amongst its representatives at the Steering Committee, and among them will appoint a person as Head of the Steering Committee.

The project manger will be part of this steering committee representing UNDP. He/she will be responsible for the overall day to day management of all project activities.

MOH appoints a representative of the Ministry who will be part of the PIU, in the capacity of a technical advisor. Moreover, MOH will appoint among its staff a representative who will be the counterpart of the PIU, acting on behalf of the MOH as liaison with UNDP

To facilitate the everyday follow up on implementation, a Project Implementation Unit will be established as follows:



COMPONENT 7: MONITORING AND EVALUATION

The project will be monitored and evaluated according to UNDP procedures on monitoring and evaluation. Effective monitoring requires assessment of project progress against the plan and management of any exceptions. In carrying out such monitoring activities, the tools such as quality log, issues log, risks log, and lessons learnt log, are set up during the Initiating a Project process and will be updated by the Project Manager in different timeframes. The indicators monitored during the project will be established in participatory manner. However, the following is a list of indicative indicators.

COMPONENT 8: ANNEXES

Annex A: Cost Sharing Third Party Agreement with AFD signed on 18 April 2007

Annex B: Letter of Agreement with Palestinian Ministry of Health signed on 18 April 2007

Annex 1: Aide Memoire & Letters of Endorsement

Annex 2 Exchange of Letters between AFD & UNDP/PAPP signed on 18 April 2007