



Community Profile

Children's Situation and Needs within an Inclusive Approach
to Gender and Disability

Surif Town



This profile was prepared in the framework of the project "Enhancing Responsiveness of duty bearers towards the needs and priorities of Children in 6 communities in the South of the West Bank within an inclusive approach to gender and disability", Project No. P.010-2018-310. Funded by Caritas Germany and co-funded by Children's Relief Bethlehem (KHB).

The views expressed in this publication are those of the authors and do not necessarily reflect the views or policies of Caritas Germany and Children's Relief Bethlehem (KHB).



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Executive Summary

1. Introduction to the Profile

The process of preparing the profiles about the reality, needs, and priorities of children within an inclusive approach to gender and disability in the targeted areas aims to highlight the real needs and priorities of children and children with disabilities, to advocate and support children's issues - one of the vulnerable groups in society - in general and children with disabilities in particular.

The profile is prepared depending on a review of a package of secondary sources, such as: published data from the Ministry of Education and the Palestinian Central Bureau of Statistics. In addition to a group of primary sources represented as interviews with institutions and active centers in the town, Surif municipality, kindergartens and health centers, along with interviews conducted with 110 school students, 101 families in the community, 19 families of children with disabilities, and finally a focus group with the participation of active institutions in Surif, official institutions, and volunteer researchers. These interviews contributed in reviewing data and identifying groups of children who are under risk.

2. Introduction to Surif town

Surif is located to the northwest of Hebron, and bordered from the south by the villages/towns of Kharas, Nuba, and Beit Ula, and to the north by the villages/towns of al-Jab'a and Nahalin, to the east by the town of Beit Ummar, and to the west by the borders of the Green Line (1967). The area of the town is estimated at 32,708 dunams. The data issued by the Palestinian Central Bureau of Statistics indicated that the population of Surif reached 17,287 in 2017, 50.5% males and 49.5 females, while the number of housing units in Surif reached 2,500 units.

With regard to families and their age structure, the average family size in Surif town is about 5.6 individuals, and the number of families is about 3000 families. The age groups are constructed upon 40% under the age of 15 years, and 55% between 15-64 years, and 5% over 64 years.

3. Introduction about persons with disabilities

The number of families of children with disabilities in the community is estimated about 41 families, the results of interviews with those families indicated that about 70% of children with disabilities are not enrolled in any educational facility or they have been enrolled but dropped out of school.

In this regard, it should be noted that the lack of access to education for children with disabilities contradicts their right to inclusive education, which is guaranteed by the regulatory laws. The Law-decree No. 8 of 2017 through Article 14 states that the Ministry should "adopt a policy of inclusive and supportive education that meets all students' needs, by providing:

1. Qualitative education for the most vulnerable and marginalized students, such as students with disabilities.

2. Accessible school buildings, educational resources and qualified teaching staff.
3. Appropriate educational curricula and evaluation mechanisms that are flexible and responsive to the student needs to provide the with qualitative. Inclusive education is defined according to Article 1 of The Decree-Law No. 8 of 2017 as "**Inclusive education**: education that does not exclude any of the students, regardless of difficulty, disability, gender or color, provided that individual differences are taken into account. And meeting the needs, in accordance with the requirements of making fundamental changes to the education system, and in line with agreed international principles.

The inability of children with disabilities to enroll in education has disastrous consequences for their future, because this will greatly prevent their integration into society and their ability to find job opportunities to depend on themselves in a way that contributes to building their future, and makes them active members of society instead of continuing to depend on others.

The results of the interviews with families of children with disabilities show that the vast majority of them believe that the educational curricula and the school environment with all its facilities are not suitable at all for children with disabilities.

Hearing, speech and motor disabilities form more than half of the disability cases among children with disabilities, while visual and intellectual disabilities and other disabilities such as autism form the remaining percentage of disability cases.

The results show that 23 children with disabilities receive education at kindergartens out of 592 children who receive early education. The interviews prove that teachers at kindergartens are not aware of the legislations and laws related to persons with disabilities and their rights, as well as teachers who work in all kindergartens. They have never participated in training courses or workshops related to legislation and laws of persons with disabilities and their rights during the past three years.

kindergartens in the community are not suitable for integrating children with disabilities, and this includes: inadequate health units and buildings, lack of curricula that are compatible with the nature of children's disabilities and the lack of accessible transportation means to transport children with disabilities.

About Palestinian People with Disabilities

- children under the age of eighteen form 20% of individuals with disabilities in Palestine.
- About 46% of children with disabilities between the ages of 6-17 are not enrolled in education.
- The illiteracy rate among children aged 10 years and over reaches 32%.
- 60.5% of children with disabilities do not use public transportation due to environmental and financial obstacles.
- At least 46% of children enrolled in education pointed that they need to have adequate transportation, buildings, classrooms, or bathrooms in order to complete their education.

Palestinian Central Bureau of Statistics

In general, the needs of children with disabilities are mainly technical aids such as: hearing aids, visual aids and walking aids such as wheelchairs, crutches and walkers, medical services in the form of physical and occupational therapy and others. The last of these needs is medication.

The majority of families of children with disabilities expressed that empowerment, psychosocial support services and programs are either of poor quality or not available. They also expressed that they do not receive free technical aids, specialized health services, or cash assistance. On the other hand, more than 60% of the families in the community indicate that they face many obstacles when they go to obtain services from the Ministry of Social Development, these obstacles include the bureaucratic procedures, the long waiting time to obtain the service, the difficulty of the eligibility criteria that the Ministry of Social Development deals with and the inaccessibility to the building of the Ministry.

Regarding children with disabilities' access to health services, all families indicated that the various services provided to children with disabilities are either poor or not available.

When families of children with disabilities were asked how they cover the costs of their children's medication, treatment, technical aids, special health services and diagnostic services, the majority of families reported that they cover these costs on their own expense.

Parents pointed highlighted a set of obstacles that limit children's access to health services provided by the Ministry of Health, the main obstacles are: the unavailability of some medication, the long waiting time to obtain the service, the lack of diagnostic services in some cases, the absence of some specializations related to the condition of the disabled child, the lack of some accessible centers to provide services to children with disabilities, the lack of technical aids needed by children with disabilities and the remoteness of services from places of residence for children with disabilities.

Free health insurance: Free health insurance is obtained through the General Union of People with Disabilities only for those who have a disability percentage of 60% or more or through the Ministry of Social Development, this is considered a major obstacle for children with disabilities to obtain free health insurance; because it excludes children who have a disability percentage less than 60%, and the approach to the Ministry of Social Development to obtain health insurance necessarily requires dealing with children with disabilities and their families as social cases that need assistance, while they are not treated as people who have the right to obtain comprehensive insurance like other people.

Service Packages: Health services provided by health insurance excludes several services, the most important ones are: diagnostics, medication, supplies, medical disposals, vitamins, and technical aids, this means that children with disabilities are unable to obtain medical equipment and technical aids such as wheelchairs, crutches, hearing aids, ..etc because those aids are excluded from the insurance. The same applies to prostheses that are not covered by health insurance, which causes more suffering for children with disabilities, and increases the financial burden on their families.

Transfers and surgeries: Children with disabilities face great difficulties in obtaining the medical referrals needed to perform surgeries, because some operations are not covered by insurance, such as needed cosmetic surgeries. This results in serious complications that may lead to death, and great difficulties in obtaining the necessary transfers for rehabilitation services, such as: physical and occupational therapy, and in many cases temporary transfers are obtained for short periods, although many cases of disability for children are chronic cases that requires rehabilitative sessions for many years.

Most of the families in Surif town lack the knowledge about the rights of children and children with disabilities in particular. They do not know how to access the services provided to them. This also applies to the local council employees and kindergartens' teachers who are included in the study, they show a low level of knowledge about rights and legislation relate to children and children with disabilities.

4. Economy

The local economy in Surif depends on the workforce in the Israeli labor market, which composes 28% of the workforce. The percentage of workers in the public sector is 12%, while the percentage of workers in the private sector is 60% of the workforce.

The commercial sector is considered one of the largest economic sectors in Surif town, as it forms 61% of the total establishments in the town. This is due to the rapid growth in the commercial sector in Surif town. This sector includes about 160 small commercial establishments that form an employment source for about 575 workers from the town.

A large segment of the community there tends to invest their money in establishing and operating small-sized commercial establishments that provide capital without the need for loans and financial services.

The agricultural sector is considered one of the vital sectors in Surif town, as this sector composes about 26% of the community's workforce. The area of agricultural land is about 16,739 dunams, 2,000 dunams of them are behind the separation wall. The area of irrigated agricultural land is 139 dunams, 30 dunams of them are greenhouses.

5. Services

Surif town residents depend on one water network that covers the largest part of the town's residential areas and neighborhoods. It was established in 1968. The water network forms about 82% of the water sources, compared to 10% which depends on water collection wells, and 8% on water tanks. .

With regard to the electrical power, the town's residents have been relying on the town's generator since 1975. It is used to provide electricity for 6 hours a day. The town continued to be in this situation until 1993, until the town was connected to the Israeli electricity network, then the municipality charges the residents for the consumed electricity.

Electricity service in the town is considered good, as 90% of the streets in the town are equipped with lighting, while some remote areas from the town's center suffer from

poor electrical service due to the old network and its need for rehabilitation.

The town does not have a sewage network as 100% of the population in the community depends on endless cesspits. This increases the level of pollution in the groundwater. On the other hand, the cost of cesspits perfusion is high, it reaches about 120 Nis per perfusion.

The sewage is discharged in open lands, and in Kharas flood, about 6 km away. This situation leads to the spread of odors, insects, and environment pollution.

The waste service in the town is managed through the municipality. The waste is collected by two municipality vehicles on a daily basis distributed over the different areas in the community. The service covers about 90% of the towns; as a result of this diligent work, a good general evaluation of the state of waste is supported by the availability of a well-designed waste disposal mechanism, in addition to the presence of an official landfill and a transfer station.

6. Education

The indicators of basic and secondary education in Surif are at the national level. The total number of students is 4,591 students, distributed over 10 schools (2,177 males and 2,414 females).

The average number of students per teacher in the town's schools is 23.2 compared to 19.9 in the West Bank. The average number of students in the section is 32.6 compared to 26.7 in the West Bank schools. The number of students per toilet is 34 students and each sink is 31 and 79 per bay. These Indicators are much weaker than those related to other public schools in the West Bank. It is noticeable in general that the indicators of education quality in the UNRWA schools are considered poor when compared to governmental schools, because the number of students per teacher exceeds 30 students, and the number of students in the section reaches about 40 students compared to an average of 21 students per teacher and 27 students per section in governmental schools.

With regard to school services, the study team noticed a general satisfaction by the students, most of them expressed their satisfaction with a set of aspects related to their schools, such as the spacious classrooms and not overcrowded, the availability of comfortable seats, playgrounds and activities. More than 57% of students believe that the toilets in their schools are not clean, while about 54% of them indicated that the number of toilets is insufficient, and nearly a third of the total students indicated that the shaded areas in their schools are insufficient, and they are unable to use computers or have an adequate science lab.

On the other hand, most of the interviewed families within the framework of the study expressed their satisfaction with a set of aspects related to their children schools including: the school cleanliness, availability of computers, the quality of food provided in the canteens, the parks and playgrounds in schools, these aspects are evaluated by most of the families between excellent and good.

The results prove that 89.8% of families in the community have one child within the age group of primary or secondary education enrolled in educational facility, while

the study revealed that 15.9% of families of male children, and 7.9% of families of female children are not enrolled in schools even though they should be enrolled in an educational facility, noting that the majority of children ratio who are not enrolled in an educational facility should be in secondary education.

In general, there is a good communication between parents and the schools. About 73% of families in the community indicated that they have visited their children's schools 3 times or more during the 2018/2019 academic year, and about 95% of families indicated that the reason of their visits is due to either being summoned by the school administration to discuss education and school affairs, or to ask about their children's academic and behavioral performance. Nevertheless, the majority of families (65.4%) indicated that they had never participated in activities or meetings of the Parents' Council during the 2018/2019 academic year.

9.6% of families say that their children receive private lessons, these lessons focus on mathematics and English 57% and 65% respectively, followed by Arabic with a rate of 25%.

7. Early childhood education

The results of the study show that there are 6 kindergartens in Surif town, in which 417 children are enrolled, 186 are females and 231 are males, they receive education from 23 teachers, whereas the number of students per teacher is 18.1. The average number of students in classrooms is 14.3. As for the other indicators, it is found that there is a sink for every 33.3 child, a bay for every 39.9 child, and a toilet for every 18.1 child. It is also found that one of the kindergartens - Al Manahil Kindergarten - lack of bays, also Shabab Al Reef Kindergarten, contains only one sink and one bay for 103 children enrolled at this kindergarten, and the kindergartens principals indicated that all the classrooms need emergent maintenance.

It is noted that the enrollment rates of children in early education in the community reaches about 78.3%, but 21.7% of families in Surif town have at least one child of early education age who is not enrolled in any educational facility.

8. Adolescent girls and boys

The study show that 63.3% of families in the community have children aged between 12-17 years. The families refer to a set of issues related to their adolescent children, especially males, those issues are mainly: spending long time over the internet, specifically on social media, low academic level, delay in school attendance and low respect for their parents. With regard to females, the most important issue in spending time over the Internet.

9. Health:

Residents receive medical services through a governmental clinic that provides general medicine services, maternity, childhood, mental health, laboratory

examination, it also provides the following: radiology, emergency, part-time specialized clinics, and a full-time clinic. There is also a private medical center, a radiology center, and a specialized clinic in the community. However, the citizens go outside the town to obtain specialized health services from different hospitals, the most important are: Hebron Governmental Hospital (Alia), Al-Ahly Hospital, Al-Mizan Hospital, and the Red Crescent in Hebron, while Al-Hussein Governmental Hospital and the Holy family Hospital in Bethlehem.

10. Institutions

The town lacks of programs that target children in general and children with disabilities in particular. Despite the presence of 11 institutions in the town, these institutions focus their activities on economic and social empowerment programs for women or provide sport activities for youth, such as: the Muslim Youth Association, Surif Sports Club, some institutions such as Surif Cultural Forum which provides a range of educational and entertainment services for children and youth, these services depend heavily on funded programs, which often stop due to lack of funding.

11. The child's right of protection

Article (6) of the Palestinian Childhood Law

The state works to create all appropriate conditions that guarantee children their right to obtain the highest possible level of health and social services and their right to education and to participate in various aspects of social life.

Article (8) of the Palestinian Childhood Law

The state shall take appropriate measures to ensure that children with disabilities enjoy the necessary care in all fields, especially education and health and vocational rehabilitation to enhance their self-reliance and ensure their active participation in society.

Table 1: Characteristics of children at risk

No.	Item	Characteristics	Interventions
1	Children with disabilities	The number of children with disabilities in the town is about 41, and the services provided to them are poor and do not meet their needs, in addition to the absence of service providing institutions that targets them.	<ul style="list-style-type: none"> • Training courses for parents and teachers. • Awareness programs to protect children from disability problems. • Provide the needed technical aids (wheelchairs, Hearing aids, glasses... etc.). • Provide training and employment opportunities for persons with disabilities. • Training and rehabilitation center for people with disabilities.

No.	Item	Characteristics	Interventions
2	Poor children	Children living in poor families lack all the basic necessities and needs.	<ul style="list-style-type: none"> Conduct a study to specify the number of poor families in the town, and special database. Provide psychological support programs for children
3	Abused children	Parents consider that the violence against their children is a method of discipline and education. As for violence in schools, the participants in the study stated that it is significantly declining, and does not exceed 2%, after the strict controls and laws set by the Ministry of Education Related to violence against children in schools, the most common type of violence is bullying by children to children, whether inside schools or in residential places or during the movement of students to and from schools.	<ul style="list-style-type: none"> Raising awareness about violence. Making educational leaflets about the dangers of violence. Raising the level and role of counseling in schools, and holding meetings with students and parents to discuss issues related to violence in all its forms.
4	Children with Chronic Diseases	There is a number of children suffering from chronic diseases, diabetes, hypertension, anemia, and kidney diseases ... etc.	<ul style="list-style-type: none"> Preparing a study to enumerate children suffering from chronic diseases. Health care center.
5	Working children	The reason for child labor is: orphanage, dropping out of school due to academic weakness, and poor economic situation of some families, etc.	<ul style="list-style-type: none"> Communicate with the relevant institutions. Training and rehabilitation centers. Parent awareness programs.
6	Orphan children	The number of sponsored children is 170 through the Surif Association for Orphan Care, which means that the children are sponsored without exception, the sponsors are all residents of the town.	<ul style="list-style-type: none"> Supporting associations that sponsor orphans.
7	Married children	<p>The phenomenon of early marriage is widespread among females, but after the issuance of the new law, there has been a significant decline, despite the presence of some cases that do not exceed 1%.</p> <p>Femal early marriages comes as a fear of incidents of relationships spread through social media, as one of the most important problems associated with it, the increase in divorce cases.</p>	<ul style="list-style-type: none"> Enforce the law and prevent transgressions. Raise awareness of parents and females. Make awareness brochures.

Chapter 1: General background about the study and its objectives

1.1 General background about the study

QADER has prepared the profiles as part of a project that aims to enhance the response of official institutions to the needs and priorities of children in 6 communities in the southern West Bank within the framework of a comprehensive approach to gender and disability. The project is funded by Caritas Germany and co-funded by the Bethlehem Children's Relief Association, the project was implemented in Al-Shawawra, Tuqoo', Battir, Beit Ummar, Surif and Kharas during 2019 and 2020.

The process of preparing profiles depended on the situation, needs and priorities of children aiming at a comprehensive perspective on disability and gender in the targeted areas, it also aims to highlight the real needs and priorities of children and children with disabilities, in addition to achieve the following goals:

1. Preparing a methodology and practical training to determine the reality and issues of children at the local level from a comprehensive perspective for persons with disabilities and gender. This methodology and evidence can be generalized to the institutions involved in community development in the various governorates.
2. Developing the voluntary work in local communities by enriching them with the necessary knowledge and tools; to advocate and support the issues of their societies, especially the issues of vulnerable groups in society.

For the purpose of developing the profile, a set of activities were conducted, under the constant supervision of QADER's technical staff, namely:

1. Consultations of a group of active institutions in the field of childhood and human rights. The aim of this is to identify their point of view on the most important data and variables that must be focused on at the community level and access relevant reports. Those institutions are the Ministry of Social Development, UNICEF, Save the Children and Defense for Children international Palestine.
2. Reviewing relevant guides, studies, plans and published reports such as the Strategic Plan for the Child and Child Protection System 2018-2022, Review of the Child Protection System in the State of Palestine, Accreditation Guide for Social Services issued by the Ministry of Social Development, Report of the Media and Child Rights Conference issued by the Early Childhood Resource Center The Palestinian Child Rights Reality Report 2013, issued by the Palestinian Central Organization, Palestinian Child Law No. 7 of 2004, International Convention on Rights of the Child adopted by the United Nations in 1989, Social Development Sector Strategy for the years 2017-2022, UNRWA Child Protection Framework (United Nations Relief and Works Agency for Palestine Refugees).
3. Preparing the first draft of the work guide to prepare profiles about the

reality, needs and priorities of children according within an inclusive approach to disability and gender in the targeted communities.

4. Holding a consultative meeting with a group of national experts in the field of childhood and disability to discuss the first draft of the profile, especially the variables that will be included in the identification data. A representative of the Ministry of Health, a representative of the Ministry of Social Development, a representative of QADER's Board of Directors participated in the meeting, in addition to representatives of international institutions operating in Palestine.

1.2 Methodology for preparing Surif's profile.

The methodology for preparing the profile depended on the following activities:

Review of secondary sources: including the town's developmental plan, the statistics issued by the Palestinian Central Bureau of Statistics and the ones issued by the Ministry of Social Development, in addition to the statistics of the clinics, the schools, the municipality and any published reports about the village. The aim of this is to collect the available data in the published and unpublished reports, studies and official statistics.

Interview with the local authority in the community: an interview was conducted with the local authority in the community in order to review the organizational status of the local authority, water, electricity and waste services in the town, in addition to roads in the community, effective centers and institutions and their field of work, available health services in the community, in addition to the provided services and activities to children and economic establishments in the town and the economic situation of families.

Regular interviews with kindergartens: six interviews were conducted with kindergartens located in the town. The aim of collecting data related to early education.

Regular interviews with a sample of male and female students in the different academic stages: 170 interviews were conducted with male and female students at schools in the community; with the aim of identifying the main obstacles that limit the access to an inclusive and quality education for all from the students' perspective.

An interview with health clinics officials in the town: an interview conducted with health clinic officials in the community, with the aim of gathering information about the health services provided by the clinic and the health indicators for children.

Interviews with active institutions and community centers in the town: 11 interviews were conducted with a group of active institutions and centers in the town aiming at collecting information from them about the services provided to children and determining the priorities that concern children from perspectives.

Regular interviews with a sample of families in the community: Regular interviews were conducted with 185 families in the community and 26 families of children with disabilities to collect information about the reality of childhood from the perspective of the families themselves.

A group of graduated and university students volunteers from Surif participated in the preparation of this profile , as the youth group has spend great effort in data collection along with QADER's team in conducting the interviews with families, school students and institutions. The youth group was trained on the methods of qualitative and quantitative data collection by agroup of specialized experts.

The young group that contributed to the preparation of Surif's profile

- 1 Mohammad Ibrahim Abdulhamid Abu Khadeer
- 2 Manar Ghalib Al-Barad'ea
- 3 Do'aa Khalil Hoor
- 4 Aziza Abdil'aziz 'izat Abufara'
- 5 Nisreen 'isa Barad'ieh
- 6 Hadil Sami Al-Hih

Chapter 2: Geographical location, population and economic activities in Surif town

2.1 Location, area and population

Surif is a Palestinian town located in the south of the West Bank, to the north of Hebron. Surif has existed since the days of the Romans, and its name is a distortion of the Syriac word (srifa) meaning the minting of dirhams (silver coins), or a distortion of the word wall of the countryside because it is located on the separating areas between the countryside and the mountain (Hebron Mountains). The occupation authorities confiscated large areas of the town's lands and established the Nahal Surif settlement in 1982 and the occupation forces withdrew from it in the early 1990s and turned it into a residential area. Several open areas surround the town, the most important of which are: Khirbet Alain, Khirbet Karabin and Khirbet Abi Al Shouk.

The town of Surif is located northwest of Hebron, and it is bordered on the south by the villages of: Kharas, Nuba, Beit Ula, and on the north by the village of al-Jab'a and Nahalin, on the east by the town of Beit Ummar, and on the west by the borders of the Green Line (1967). The area of the town is estimated at about 32,708 dunums, and it is distributed over the hills and mountains that make up the town in the east to the borders of the Green Line in the west, and from the villages of Nahalin and Jaba in the north to the village of Kharas in the south. This is in addition to the vast territories occupied within the Green Line.

The data issued by the Palestinian Central Bureau of Statistics show clearly that the population of Surif reached about 17,287 in 2017, males and females are estimated at about 50.5% and 49.5%, respectively, while the number of housing units in Surif reached 2,500 units at that time.

Concerning families and their age, the average family size in Surif town is about 5-6 members, whereas the number of families is about 3000 families. The age groups in Surif are distributed as follows: 40% below 15 years, 55% between 15-64 years, and 5% 65 years and above.

2.2 The economic situation of the families in the town¹

The local economy in Surif depends on people who work in the Israeli labor market, and composes 28% of the total workforce. While 12% of the workforce work in the public sector, and 60% of the workforce work in the private sector.

- The number of children up to age of 19 is about 8,349
- The number of individuals in the age group 15-65 is about 10,083
- The number of registered refugees in the town is 4,559
- Children who are not enrolled in kindergarten (3-5 years) are 832, and enrolled ones are 600 children.
- The number of included individuals by health insurance is 11,074 compared to 6,096 who are not included
- 2,187 families have internet

¹ Surif's diagnostic report 2018-2021, interview with the local authority
LED 208-2021 Diagnostic Domestic Economic Development Report

The commercial sector is one of the largest economic sectors in the town of Surif, as it composes 61% of the total establishments in the town. Because of the rapid growth in the commercial sector in the town of Surif. This sector includes about 160 small commercial establishments that employ 575 workers from the town itself. A large segment of society there tends to invest their money in establishing and operating small commercial establishments. Hence, they can be operate them directly without the need for loans and financial services.

The commercial establishments in the community are characterized as: modernity, their need for a small capital that does not exceed 10,000 US dollars, and most of the owners and workers in these establishments are males who have the right to own properties alone.

Commercial establishments reach the markets by participating in local exhibitions, providing information about foreign markets and make networks with business development service providers.

The agricultural sector is also considered one of the vital sectors in Surif town. This sector employs about 26% of the workforce in the community. The total area of agricultural land is about 16,739 dunams, and about 2,000 dunams are behind the separation wall. The area of irrigated agricultural land is 139 dunams, 30 dunams of them are greenhouses

As for the livestock in the community, it is extremely limited. The number of sheep does not exceed 250, in addition to the presence of 4000 broiler chickens and 160 beehives. On the other hand, there are three olive pressers in the town, one of them belongs to a cooperative association in the town and the rest are privately owned.

Agricultural services are also provided by the Agriculture Directorate, they provide agricultural services to farmers in the areas of agricultural guidance, marketing and other fields related to the value. But, these services are not sufficient in conjunction with the limited agricultural machinery, it is only about 30 tractors, a seeder and a harvester which refer to private property.

2.3 Water, electricity, sewage, and road service

Water

The residents of Surif depend on a water network established in 1968, which covers the largest part of the needs of the residential areas and neighborhoods in the town for water, at an estimated rate of 82%, compared to 10% who depend on water collection wells, and 8% on water tanks. It should be noted that the price of a water cup varies according to the method, so the price of a cup through the network is 5 shekels, while

¹Surif Diagnostic Report Document 2018-2021, Local Authority Interview.
Local Economy Development Diagnostic Report LED2018-2021

the price of one cup through water tanks is about 25 shekels.

The difference in water service does not stop at this point, but also extends to the rate of availability. Water is available in summer at a rate of 3 days per week at a rate of 7 hours a day, and in winter it is available throughout the week at a rate of 24 hours a day.

What further complicates the matter is that the municipality faces great difficulty in collecting the debts incurred by subscribers as a result of their failure to pay the water bills which affects the quality of provided service by the municipality on one hand and limits its ability to rehabilitate networks and reduce the percentage of losses on the other hand; as a result, the municipality began switching to a pre-paid water meter system, as the number of subscriptions reached about 3,800, of which 780 were prepaid.

The major problems facing the water sector:

- Residents debt accumulation.
- High percentage of water losses.
- The network is old and needs maintenance.
- The severe shortage of water in Surif.
- Lack of water access to some homes in some high areas, especially in the summer.

Electricity

Residents get energy from the electricity network that was established in 1993. Before that starting from 1975, the residents of the community relied on generators to obtain electricity. Currently, the Israeli electricity company is supplying the community with electricity.

However, the residents consider the electricity services poor because of its high cost and low quality, because of the old network and its need for rehabilitation to reduce the percentage of loss. The Southern Electricity Company opened a branch in Surif town, aiming at improving the services provided to the citizens.

To clarify the above, the price of industrial electricity in Surif is about 60 agoras per kilowatt, while it ranges from 50 to 55 agoras per kilowatts in other cities, and this needs the municipality's intervention to reduce the price of industrial electricity in the town.

As previously mentioned, the municipality recently had to use the pre-paid system because the number of electricity meters is about 5,900 meters, as this form about 84% of the population's subscriptions. While the number of electricity meters are about 1,125, while the length of the electricity network is more than 400 km. There are also about 47 families that depend on solar energy for their electric energy service.

It should be noted that there is a Palestinian telecommunications network in the town that provides its services to all the town with high quality. In addition to the spread of cellular communications services for both Jawwal and Oredoo companies.

The major problems the electricity sector faces:

- The poor electrical current, which leads to major outages specially in winter.
- Transgressions on electricity networks.

Sewage

The town does not have a sewage network. 100% of the endless cesspits increase the level of pollution in the groundwater. On the other hand, the cost of cesspits perfusion is high, it costs about 120 NIS each time. The sewage is discharged in open lands, and in Kharas flood, which is about 6 km away. This leads to the spread of odors, insects, and environmental pollution.

The major problems associated with sanitation:

- Lack of a sewage network.
- Lack of a rainwater drainage system.
- Pollution of well water and ground water.
- The spread of insects and bad smells.

Waste

The waste service in the town is managed through the health department in the municipality of Surif, where waste is collected daily by two trucks owned by the municipality from different areas in the community.

The service covers about 90% of all community, and the condition of waste is considered good, enhanced by the availability of a regular mechanism for waste disposal, in addition to the presence of an official landfill in the south of Bethlehem and a transfer station.

Roads and transportation

The length of the internal road network in the town is 25 km, of which 16 km are in good condition and 9 km need rehabilitation. There are also 55 km of agricultural roads, of which 25 km are paved roads and the rest are unpaved. The connecting roads are as follows: Surif-Kharas road with the length of 8 km, Surif- al-Jab'a Road with a length of 3 km, and Beit Ummar-Surif road with a length of 2 km.

Concerning the transportation service, there is an external transportation service in the town that connects the town with the city of Hebron, 25 public cars operate on this line, in addition to the presence of about 30 private cars that citizens depend on for their transportation to the city center and neighboring towns and villages. A private taxi office and a private bus company are also available.

Nevertheless, the town suffers from the lack of internal transportation service, due to the absence of a complex for public vehicles, the insufficient waiting stops and the presence of illegal cars inside the town.

Using a taxi costs about 15 NIS to reach Hebron city, and 12 NIS by bus. Residents spend about 50 NIS to reach the neighboring towns such as Beit Ummar, Kharis, Halhul, due to the lack of a transportation service which link the town with the neighboring towns and villages. It is worth to mention that the occupation forces sometimes impose temporary military checkpoints at the Halhul Bridge area which limits the citizens' easy access to their work.

The major problems associated with transportations:

- Some roads that need rehabilitation and paving.
- Lack of sidewalks for all streets.
- Lack of an internal transportation service.
- Not enough waiting stops for passengers.

Article 32 to Convention on the Rights of the Child No. (1): “States Parties recognize the right of the child to be protected from economic exploitation and from performing any work that is likely to be hazardous or to interfere with the child’s education, or to be harmful to the child’s health or physical, mental, spiritual, moral or social development”.

Chapter 3: Access to comprehensive and qualitative education for people with disabilities for both gender

3.1 The indicators of primary and secondary education in the community are not good compared to the indicators at the national level

There are ten schools in the community (8 governmental and 2 for UNRWA). Those schools include two secondary schools: one for boys and one for girls, in addition to four basic schools for males and females. The total number of students in these schools is 4,591 (2,177 males and 2,414 females). They receive education from 198 male and female teachers. Indicators of basic and secondary education in the community show that there is a weak education compared to the indicators of education at the level of governmental schools in the West Bank. The average number of students per teacher in the community’s schools is 23.2 compared to 19.9 in the West Bank, and the average number of students in the classroom is 32.6. As compared to 26.7 in West Bank schools, the number of students per toilet was 34 and each bay reached 31, and about 79.2 students per a sink. It is found that there are no resources rooms in all governmental schools. In general, it is noted that the indicators of education quality in the Agency’s schools are considered poor when compared to governmental schools because the number of students per teacher exceeds 30 students and the number of students in the classroom reach about 40 students, compared to an average of 21.

Table 2: The schools in Surif town and their main indicators

School's Name	Teachers	Students	Teacher/ student	Student/ classroom	Resources Rooms teachers	No. of Counselors	Bay/ student	Sink/ student	Toilet/ student	Availability of ramps	Accessible Toilets
Surif Secondary School for Boys	19	380	20.0	31.7	0	1	38.0	38.0	38.0	yes	yes
Surif Elementary School for Boys	16	412	25.8	31.7	0	1	68.7	137.3	68.7	Yes	Yes
Surif Martyrs Elementary School	23	478	20.8	28.1	0	0.5	59.8	59.8	36.8	Yes	Yes
Bilal Ben Rabah Elementary School for Boys	15	318	21.2	28.9	0	1	26.5	63.6	31.8	Yes	Yes
Amro Ben Al- 'as Elementary School for Boys	23	540	23.5	33.8	0	1	90.0	270.0	67.5	No	Yes
Surif Secondary School for Girls	16	303	18.9	30.3	0	0.5	37.9	50.5	23.3	No	Yes
Alfarooq Secondary School for Girls	13	230	17.7	28.8	0	1	28.6	38.3	19.2	Yes	Yes
Addair Mixed Elementary School	13	88	6.8	9.8	0	1	7.3	22.0	14.7	Yes	Yes
Surif's Girls first Elementary School	36	1072	29.8	39.7	0	1	16.0	268.0	25.5	Yes	Yes
Surif's Girls Second Elementary School	24	770	32.1	42.8	0	1	77.0	77.0	51.3	Yes	Yes
Total	198	4591	23.2	32.6	0	9	31.0	79.2	34.0		

3.2 Poor level of schools accessibility for children with disabilities

The results of interviews with families of children with disabilities show that most of them think that the educational curricula and the schools environment with all their facilities are either not accesible at all or partially accesible for children with disabilities. The following table presents the responses of families in the town to the related questions on the level of schools' accesibility for children with disabilities.

Table 3: Different aspects compatibility with the needs of children with disabilities from the parents' perspective

	Yes Completely	Yes Partially	Never Accesible	I Do Not Know	Total
Buildings	8.0%	64.0%	24%	4%	100%
Libraries	0%	36%	60%	4%	100%
Public Transportations	4%	60%	28%	8%	100%
Laboratories	4%	60%	28%	8%	100%
Classrooms	8%	56%	32%	4%	100%
Computers	4%	52%	24%	20%	100%
Sanitary units	0	64%	24%	12%	100%
educational curricula	16%	40%	32%	12%	100%

More than 68% of families indicate that schools are not prepared to receive children with disabilities (a level of readiness ranges between poor and acceptable) and about 40% of families indicate that children receive the necessary training to enable them move independently within school environments and be accepted.

Table 4: Parents' assessment of a set of aspects related to the adaptation of education for children with disabilities.

	Excellent	Very Good	Good	Acceptable	Poor	Total
The level of readiness of schools to receive children with disabilities	12.5	16.7	12.5	16.7	41.7	100%
Children receive the necessary training to enable them to move independently within school environments	8.3	8.3	8.3	33.3	41.7	100%
Existence of admission criteria that allow children with disabilities to enroll in school.	4.2	8.3	37.5	29.2	20.8	100%
The level of acceptance of the child by students and teachers	0.0	12.5	29.2	33.3	25.0	100%
Children have been exposed to violence in the community, school, and family	20.8	8.3	16.7	16.7	37.5	100%
The extent of society's acceptance of presence of a child with a disability	4.2	37.5	12.5	8.3	37.5	100%

3.3 Parents and students' satisfaction about the infrastructure of their schools

The interviews conducted with school students in the community show that the most of them are satisfied with the different aspects related to their schools, such as; the spaciousness of classrooms, lack of overcrowding, the presence of good and comfortable seats and the availability of playgrounds and activities. Yet more than 64% of students indicated that the toilets in their schools are not clean and about 40% of them indicated that the number of toilets are insufficient. Nearly a quarter of the students indicated that there are insufficient shaded areas in their schools and they are unable to use computers or science labs adequately.

Table 5: School students 'assessment of different aspects of school facilities

	Extremely Agree	Agree	Disagree	Extremely Disagree	Neutral/ do not know	Total
The classroom is spacious and not overcrowded	2.4	1.2	21.2	51.8	23.5	100%
The seats in the classroom are good and comfortable	18.8	1.8	16.5	62.4	18.8	100%
The school has large areas for play and activity	0.0	0.6	2.9	62.9	33.5	100%
There are enough shaded areas in the school	0.0	2.4	22.9	55.3	19.4	100%
There are enough toilets in the school	1.2	14.7	25.9	44.7	13.5	100%
The toilets in the school are clean	2.9	32.4	31.8	25.3	7.6	100%
I can use the computer sufficiently	1.2	8.8	9.4	50.6	30.0	100%
We go to the science lab and watch scientific experiments	4.7	11.8	13.5	47.6	22.4	100%
I can borrow books and stories for outside reading	4.7	8.8	17.6	45.9	22.9	100%
There is a library where you can sit and read	2.9	5.9	12.9	50.0	28.2	100%

On the other hand, the results of the interviews conducted with families show that the majority of them are satisfied with the set of aspects related to their children schools. Those aspects include: the level of school cleanliness, availability of computers, the quality of food provided in the canteens, and the availability of parks and playgrounds in their children's schools. These aspects are evaluated by most of the families between excellent and good.

Table 6: Parents' assessment of a set of different aspects of their children's schools

	Excellent	Very Good	Good	Acceptable	Poor	I Do Not Know	Total
The school's level of communication with you	1.3	24.5	13.2	24.5	21.4	15.1	100%
School cleanliness in general	7.5	7.5	13.8	38.4	25.8	6.9	100%
Availability of computer devices	19.5	3.1	12.6	27.7	25.8	11.3	100%
The quality of the provided food in the canteens	15.1	10.7	22.6	20.8	24.5	6.3	100%
The level of parks and playgrounds in schools	7.5	5.0	10.7	35.2	28.3	13.2	100%

3.4 Enrollment in basic and secondary education.

The results shows that 89.8% of families in the community have one child within the age group of primary or secondary education enrolled in educational facility, while the study revealed that 15.9% of families of male children and 7.9% of families of female children are not enrolled in schools even though they should be enrolled in an educational facility, noting that the majority of children ratio who are not enrolled in an educational facility are in secondary education age.

Regarding children with disabilities, the results of the interviews with families of children with disabilities shows that about 70% of children with disabilities have never been enrolled in an educational facility or they have been enrolled and dropped out.

3.5 Poor follow-up of children in school

In general, there is a good communication between parents and their children's schools. About 73% of families in the community say that they have visited their children's schools 3 time or more during 2018/2019 academic year. About 95 % of families indicated that the reason for their visit to school is either because they are summoned by the school administration to discuss education and school affairs, or because they want to ask about their children's academic and behavioral performance.

Despite that, most families, about 65.4%, indicated that they had never participated in activities or meetings of the Parents' Council during 2018/2019 academic year .

Figure 1: The number of times parents visited their children's schools during 2018/2019 academic year.

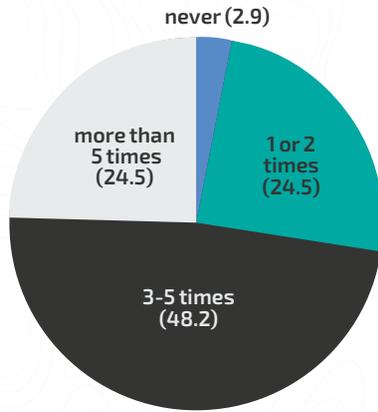
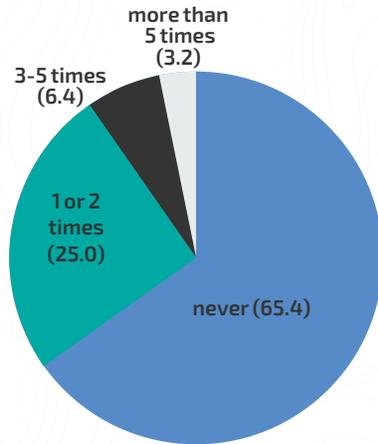


Figure No. 2: The number of times parents participated in parents council activity during the academic



3.6 Poor percentage of families have children who take private lessons

9.6% of families with children in schools reported that their children receive private lessons. These private lessons focus on mathematics and English with 57% and 65% respectively, followed by Arabic with 25% of the total number of these families. The families themselves believe that the private lessons that their children receive have contributed in improving their academic performance.

3.7 Early childhood education

The results of the study shows that there are 6 kindergartens in Surif town, 417 children are enrolled, 186 are females and 231 are males who receive education from 23 teachers, where the number of students per teacher is 18.1. The average number of students in classrooms is 14.3 children. Regarding other indicators, it is found that there is a bay for every 33.3 children, a sink for every 39.9 children, and a toilet for every

18.1 children. It is also found that one of the kindergartens - Al Manahil Kindergarten lack of bays, while the Rural Youth Kindergarten suffers from a shortage of sinks, for every 103 child there is only one sink, and the administrators of this kindergarten pointed that all the classrooms need urgent maintenance.

Table 7: Main data for the kindergartens in the community

Kindergarten Name	No. of Teachers	No. of Rooms	No. of Children	Child/ teacher	Child/ Room	Child/ Bay	Child/ Sink	Child/ Toilet
Rural Youth revival Association	4	6	103	25.8	17.2	103.0	103.0	25.8
Al-Manahel Kindergarten	4	3	75	18.8	25.0	0	37.5	18.8
Al Shorooq Kindergarten	3	3	59	19.7	19.7	19.7	19.7	14.8
Bara'em Al-Mustaqbal Kindergarten	4	4	60	15.0	15.0	60.0	60.0	30.0
Al Sanabel Private Kindergarten	5	8	85	13.4	8.4	11.2	67.0	16.8
Tomorrow's Palestine Kindergarten	3	5	35	11.7	7.0	35.0	17.5	8.8
Total	23	29	417	17.3	13.8	33.3	39.9	18.1

On the other hand, the results show that there is no children with disability in kindergartens, which reflects that the kindergartens in the community are not ready to receive and integrate children with disabilities, this includes the lack of adequate sanitary units and buildings, lack of compatible curricula, and lack of accessible means of transportation to transport children with disabilities.

Table 8: Indicators for children with disabilities (CwD) at kindergarten in the community

Kindergarten Names	No. of CwD	Accessible Curricula for CwD	Availability of Technical Aids	Accessible Buildings	Accessible Sanitary Units	Availability of accessible transportation for CwD
Rural Youth revival Association	0	Yes	Not Available	Not Accessible	Not Accessible	Not Available
Al-Manahel	0	Not Available	Not Available	Not Accessible	Not Accessible	Not Available

Kindergarten Names	No. of CwD	Accessible Curricula for CwD	Availability of Technical Aids	Accessible Buildings	Accessible Sanitary Units	Availability of accessible transportation for CwD
Al Shoroog	0	Not Available	Not Available	Not Accessible	Not Accessible	Not Available
Bara'em Al-Mustaqbal	0	Not Available	Not Available	Not Accessible	Not Accessible	Not Available
Al Sanabel Private	0	Not Available	Not Available	Not Accessible	Not Accessible	Not Available
Tomorrow's Palestine	0	Not Available	Not Available	Not Accessible	Not Accessible	Not Available

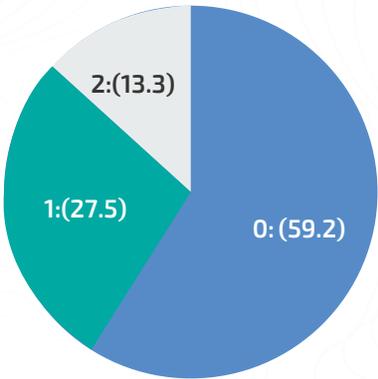
It is noted through the interviews that the kindergartens' teachers are not aware of the legislations and laws of persons with disabilities and their rights, those teachers also have never participated in training courses or workshops related to legislation and laws for persons with disabilities and their rights during the past three years.

The enrollment rates of children in early education in the community were about 78.3%, as 21.7% of families in Surif town have at least one child in the age of early education who is not enrolled in an educational facility.

3.8 Enroll in higher education.

Regarding enrollment in higher education, the results show that 40.8% of families in the community have at least one person enrolled in the community intermediate colleges or universities, and 13.3% of families have two or more family members who are enrolled in higher or intermediate education. It is found that 3.5% of the families in the community have individuals who are enrolled in vocational education.

Figure 3: Distribution of families according to the number of family members enrolled in higher or intermediate education.



3.9 Adolescent children in the family.

The results of the study show that 63.3% of families in the community have children within the age of 12-17 years. Families express a set of issues relate to their adolescent children, especially males, those issues mainly include spending long time using the internet, specifically on social media, in addition to the decline in their academic level, the delay in school attendance, and little respect to their parents. Regarding females, the major issue is spending a long time using the Internet, as shown in figures 4 and 5.

Figure 4: Issues Related to Male Adolescents

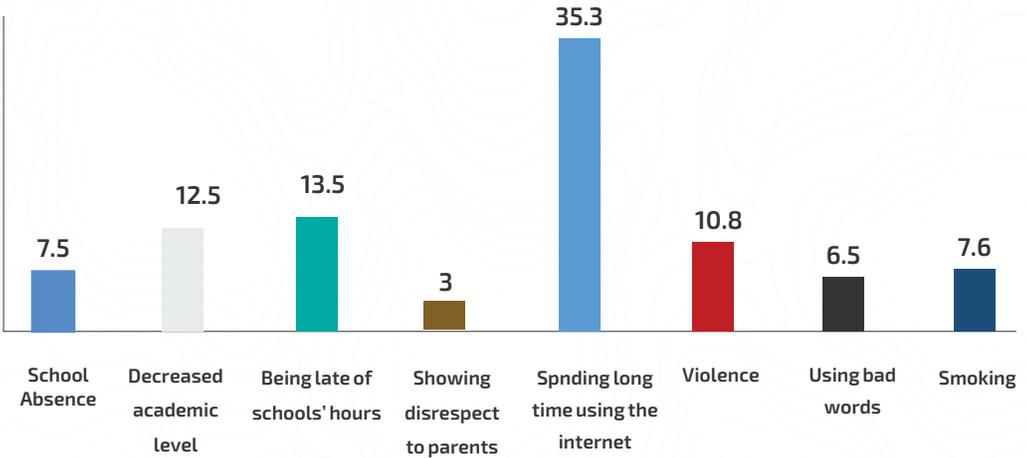
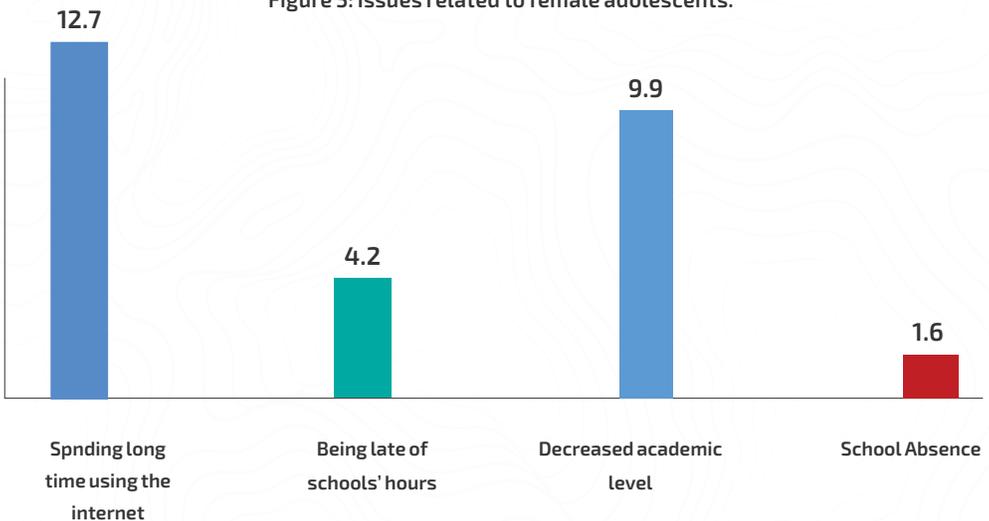


Figure 5: Issues related to female adolescents.



Chapter 4: The child’s right to enjoy the highest standard of health.

4.1 Health services in the community

Residents receive medical services through the government clinic that provides general medicine, maternity, childhood and laboratory services, the clinic also provides the following medical services: radiology and emergency, part-time specialized clinics and a full-time clinic. There are also two private medical centers in the community, a radiology center, and a specialized clinic, but this does not meet the needs of the residents, as the town residents need to go to nearby hospitals to obtain other specialized health services. These hospitals are mainly Hebron Governmental Hospital (Alia), Al-Ahly Hospital, Al-Mizan Hospital, the Red Crescent in Hebron, and Al-Hussein Governmental Hospital and the Holy Family Hospital in Bethlehem.

There are also specialized clinics in the town that provide medical services in the evening, as shown in the following table:

Table 9: Available Health services in the community

Clinic Type	Number
General Medicine	4
Dentist	12
Cardio-internal Medicine	3
Obstetrics and Gynaecology	3
Ophthalmological Medicine	1
ear; nose; throat	2
Pediatrics	4
orthopedics	2

Specialized services for children: Children receive services from the governmental clinic from specialized doctors who provide medical services one day a week. In addition to that, children receive vaccinations, immunizations and the required laboratory tests. There are also four specialized doctors who provide medical services to children in the town during the evening hours at nominal prices.

Specialized clinics: Specialized medical services are available in several fields, including ear nose and throat, orthopedics, cardiology, obstetrics and gynecology, ophthalmology and dentistry. But, most of the specialized medical services are available in the evening only. This forces many families to go to Hebron Town. These services are provided to the town residents at minimal prices, and some of the doctors provides medicines to needy families for free.

Availability of medicines: There are six pharmacies in the town, which provide medicines on a regular basis, in addition to the medicines that citizens obtain through

the government clinic in the town, those medicines include: monthly medicines for chronic diseases, vitamins and supplements for pregnant women, in addition to providing the prescribed medication by the doctor in the governmental clinic.

Laboratory tests: There are three laboratories in the town that provide most of the laboratory tests. As for the services that are not available, citizens obtain them from outside the community.

Vaccinations: The governmental clinic provides required vaccinations for all children, and there is also a specific program for each vaccination dose (BCG vaccine, hepatitis B vaccine, “Polio vaccine (injection, Haemophilus vaccine, Triple DTP vaccine) that protects against diphtheria, Tetanus, whooping cough, pneumococcal vaccine, measles, rubella, mumps ... etc.

Radiography service: There are radiology centers available in the town and are available throughout the day.

Specialized services for children with disabilities: There are no specialized services except for physiotherapy services provided by individuals who come to homes, but their prices are very high.

The most important recommendations to improve the health services provided in the town:

- Establishing an emergency and safe maternity center in the governmental clinic.
- Providing an ambulance.
- Providing a speech therapist, and an occupational and physiotherapist at reasonable prices.

The interviews has revealed that more than half of the families consider the available health services in the community, whether for children or adults, are either very good or good. This is also applies to the location of the health centers and their accessibility. More than 36% of families point that the estimated time of arrival to the hospital is poor.

Table 10: families' assessment of a set of related aspects to health services

	Excellent	Very Good	Good	Acceptable	Poor	Not available	I Do Not Know
The nature of available health services in the community	1.0	2.2	8.2	12.6	37.7	31.7	7.7
Location and accessibility of health centers	0/5	7.7	21.9	6.6	38.3	18.6	6.6
The cost of obtaining health services	1.0	5.5	9.8	21.3	37.2	18.6	6.6

	Excellent	Very Good	Good	Acceptable	Poor	Not available	I Do Not Know
Estimated time to arrive to the nearest hospital	5.	14.8	28.4	13.7	24.0	14.8	3.8
Availability of reproductive health services for women	2.2	9.8	6.0	14.2	29.0	26.2	12.6
Quality of provided services	1.6	4.9	4.4	16.9	30.6	26.8	14.8
Way of dealing with patients	1.1	2.2	3.8	10.4	28.4	40.4	13.7
Provided health services for children	1.1	7.7	7.1	4.4	31.7	36.6	11.5
Availability of vaccinations against diseases	0.5	0.5	0.5	4.4	19.7	48.6	25.7

4.2 Lack of health services for children with disabilities.

According to the families' evaluation of the health services provided to children with disabilities, all families expressed that the various services provided to them are either poor or do not exist. This specifically includes the following:

- Specialized health services for children with disabilities.
- Primary health care services associated with early detection of disability.
- Professional and specialized staff in disability issues.
- Disability type and disability level diagnosis at the local medical center.
- The level of health services availability.
- Access to health services.
- Disabilities diagnostic protocol.
- The availability of accessible cars to transport children with disabilities to health centers.
- The availability of medication, and technical aids for children with disabilities.
- Support, counseling and psychological health services for children with disabilities.

Table 11: Families' evaluation of the quality of health services provided to children with disabilities.

	very good	Good	Acceptable	Poor	Not Available	I Do Not Know
Availability of specialized health services for children with disabilities (rehabilitation services, for example.	0	0	3.8	15.4	80.8	0
Primary health care services associated with early detection of disability	3.8	7.7	11.5	19.2	53.8	3.8
Availability of specialized and professional staff in disability issues	3.8	7.7	7.7	26.9	46.2	7.7
Availability of regular medical examinations for children with disabilities	3.8	0	3.8	29.9	53.8	11.5
Diagnosis of type and degree of disability at the local medical center	0	7.7	7.7	19.2	61.5	3.8
The availability of health services	0	11.5	3.8	26.9	53.8	3.8
Availability of disability diagnostic protocol	0	7.7	3.8	11.5	50.0	26.9
Availability of accessible cars to transport children with disabilities to health centers	0	0	7.7	15.4	69.4	7.7
Availability of medicines and technical aids for children with disabilities	0	0	30.8	19.2	38.5	11.5
Support, counseling, and psychological health services for children with disabilities	0	0	7.7	19.2	69.2	3.8

When families of children with disabilities were asked how they cover the costs of their children; including medicines, technical aids, health services and diagnostic services. Most of the families cover these costs on their own account, as it is shown in the following table.

Table 12: covering the costs for children with disabilities.

	On your own expense	Through Support	On your own expense & support	Total
Need medication for treatment	91.7	4.2	4.4	100%
Technical Aids (wheelchair, Hearing aids...)	87.0	8.7	4.3	100%
General health services (periodic checks ...)	92	8	0	100%
Specialized services (for example: physiotherapy, occupational therapy ...)	96	4	0	100%
Diagnostic services	92	8	0	100%
Transportation costs for accessing health services	100	0	0	100%

The interviews with families shows that some children have health problems, 4.4% of families has a child who is underweight, while 1.1% of families have a child suffering from dwarfism and 1.6% of them suffer from anemia. 2.7% of the families shows that they have a smoking child in the house.

4.3 Obstacles that limit children's access to health services provided by the Ministry of Health

About 34.8% of the families in the community mentioned obstacles related to obtaining the services provided by the Ministry of Health. Families need to wait for a long time to obtain the services, they also suffer from the lack of diagnostic services in some cases, the lack of some medication, the absence of some specializations, the lack of accessibility to some centers that provide services for children with disabilities, the lack of technical aids that children with disabilities need and the remoteness of services from places of residence for children with disabilities.

Chapter 5: The child's right in culture, entertainment and participation

5.1 The absence of programs and activities addressed to children.

The municipality, under the supervision of the Ministry of Local Government, has prepared a local strategic plan for the years 2018 - 2021 and it is updated annually. The development plan of the local authority do not contain projects directly addressed to children, but all the submitted projects target children and persons with disabilities indirectly as they provide health and educational services in general.

Regarding the provided services to children, there are no services provided directly to them. The only services are provided through motherhood, childhood and primary care centers that provide vaccinations. In addition to this, there are educational services that schools provide in parallel with a group of extracurricular activities such as: summer camps and fun days that target a small group of persons with disabilities who have mild disabilities.

There is an absence of the role of institutions in assisting and encouraging children and youth with disabilities to participate in the programs, their role is often described in that regard as poor, except for simple participation in the youth councils or simple activities such as: summer camps, courses and training, but in general participation is poor and almost does not exist in most cases.

The town lacks of programs that target children in general and children with disabilities in particular, despite the presence of 11 institutions in the town, in addition to the municipality. The institutions in the town focus their activities on economic and social empowerment programs for women or provide sports activities for youth (such as the Association of Muslim Youth and Surif Sports Club). There are some institutions such as: Surif Cultural Forum provide a range of educational and entertainment services for children and youth, these services depend heavily on funded programs only and they sometimes stop due to the lack of funding.

Table 13: Institutions located in the town and their field of work

Institution's Name	General Background about The Institution
Muslim Youth Association	Established in 1999. It provides education and training services for the youth.
Surif Charitable Association for Orphans Care	Established in 1984. It provides educational services and health care for orphans in the town. It also provides services to children and youth.
Surif Youth Sports Club	Established in 1998. The club provides sports services, training courses and summer camps for youth and children.
Surif Women Cooperative Association	Established in 1983. It provides care, educational and economic empowerment services to women.
Surif Association for Higher Education	Established in 2007. It provides educational services.

Institution's Name	General Background about The Institution
Surif Housing Cooperative Society	Established in 1992. It provides housing services to the members.
Rural Women Development Association	Established in 1998. It provides educational and awareness services to women, in addition to economic empowerment projects for women.
Rural Youth Revival Association	Established in 1964. It provides educational cultural services for youth.
Farmers Union Association / Surif	Established in 1998. It provides agricultural service.
Surif Cultural Forum	Established in 1994 and provides cultural and educational services for youth and children.
Rural Youth Charitable Society	Founded in 1964. It provides youth services.

The existing institutions in the community indicated that they do not direct their projects to persons with disabilities and these institutions are not accessible to receive them.

Several families indicated that the services that could be provided to children are either poor or do not exist. About 40% of families in the community indicated that they either do not know the number of institutions, youth clubs, cultural centers, and public libraries in the community, or they are few or even do not exist. 31% of families consider the quality of services provided to children in the field of culture and entertainment is either poor or do not exist. In addition to the absence of families' participation in designing activities directed to their children, they also indicated the weakness and scarcity of activities that target children at the community. The following table shows the families' evaluation of the services provided to children locally.

Table 14: Families' evaluation of various aspects related to children's participation in cultural, entertainment and social activities.

	Excellent	Very Good	Good	Acceptable	Poor	Not available	I Do Not Know	Total
Number of institutions, youth clubs, cultural centers, and public libraries in the community	0.5	8.7	23.5	27.3	23.5	8.7	7.7	100%
Quality of services provided for children according to the different ages and both gender	0	7.1	23.0	26.2	21.3	13.7	8.7	100%

	Excellent	Very Good	Good	Acceptable	Poor	Not available	I Do Not Know	Total
Inclusiveness of provided services to the boys and girls needs according to different age groups	0	7.1	20.2	24.0	19.7	18.0	10.9	100%
The level of services provided by civil society institutions in the community in the field of culture and entertainment	0	5.5	16.9	32.8	32.8	15.3	13.7	100%
The level of Children's access to information	0	9.3	19.1	27.9	21.9	9.8	12.0	100%
The level of Children's in designing various activities, including school trips, summer camps, and cultural activities	1.1	17.5	17.1	23.5	32.2	10.4	8.7	100%
Availability of playgrounds and recreational parks	4.9	10.9	10.4	16.9	29.0	21.3		100%
Children have easy access to artistic and performing arts activities	0	8.7	18.6	14.8	30.6	18.6	8.7	100%
The provided information by the institutions is appropriate for the physical and mental development of children	0.5	3.8	18.6	20.8	24.0	13.1	19.1	100%
Parents' participation in designing activities for their children	1.1	9.3	19.7	27.3	24.6	12.0	6.0	100%

5.2 High weakness in children's participation in various activities and programs.

Most families also indicated that their children (male and female) did not participate in several activities during the year 2019, in which children usually participate. Those activities include: participation in summer camps, attending school plays and trips inside or outside the town, participating in voluntary work or activities organized by cultural clubs. The following table presents the study results on this topic.

Table 15: The number of times in which one or more male and female children participate in the different activities.

Activity	Males		Females	
	0	1+	0	1+
Sumer Camp	58	42	62.6	37.4
Voluntary work	83.5	16.5	82.2	17.8
Attending a play	66	34	67.3	32.7
A special celebration for children in the school	40.7	59.3	43.1	56.9
A special celebration for children outside the school	56.9	43.1	53.2	46.8
Dabka or other artistic teams	88.5	11.5	92.2	7.8
Sport/cultural club	67.7	32.3	92.3	7.7
Children club	89.1	10.1	91.0	9
A school trip	22.3	77.7	37.8	62.2
A trip outside the school	44.2	55.8	43.6	56.4

5.3 Lack of participation of children with disabilities in various activities and programs

The town lacks institutions that sponsor persons with disabilities in general and programs that are addressed to them. Children with disabilities are marginalized because they do not participate in any of the entertaining, cultural, and social activities which are not available for children in general.

Chapter 6: The Child's Right of Protection

6.1 Poor children and orphans

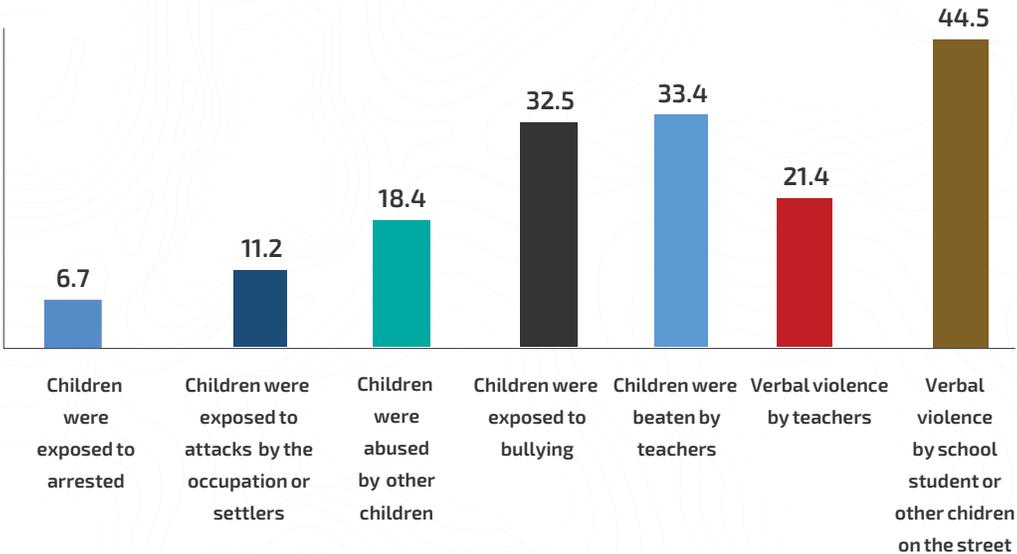
The results of the study confirm that there are approximately 300 families in the community under the poverty line who forms about 12% of the total families in the community. It is also estimated that about 100 families who are below the poverty line are headed by women. The results also show that 100 poor families receive in-kind and cash assistance through the Ministry of Social Development and the other 100 from the United Nations Relief and Works Agency for Palestine Refugees (UNRWA), in addition to getting aid from their relatives and people from the town. According to the municipal council in the town, the aid that poor families receive is considered insufficient for them and does not cover their basic needs.

The study also reveals that there are nearly 40 orphan children in the town, only 20 of them are sponsored, this puts a large number of orphans at risk.

6.2 Children exposed to abuse and violence.

The results show that in 2019 children were exposed to violence in several forms, including: verbal violence, either by students in school or from other children in the street, at a rate of 44.5%. In addition about 32.5% of children are being bullied, whereas 18.4 % are exposed to physical abuse from other children.

Figure 6: Percentage of children who are subjected to abuse or violence during year 2019.



6.3 Large percentage of children are beaten and reprimanded in their schools and from their families

What confirms that the rates of children exposed to violence from teachers in schools is higher than the rates shown in Figure 6 is the results of the interviews with schools' students, as 29% of the interviewed students indicated that all or most of the teachers beat students when they make mistakes during the lessons or not doing their homeworks. While 50.6% of students indicated that few teachers do so. About 77.7% of students indicated that they are beaten by all or most of the teachers when they misbehave. All or some of the teachers use bad language when talking to students. Details relate to this is shown in the following table.

Table 16: The level of children's exposure to violence by teachers in schools

	Teachers	Most of them	Some of them	No Body or rarely
Teachers hit students when they miss lessons or do not do their homework	11.8	17.1	50.6	20.6
Teachers hit students when they misbehave (hitting classmates, saying bad words, etc.)	11.2	24.7	41.8	22.4
Teachers use profanity	7,1	9.4	44.7	38.8

The results also indicates that 51.2% of the students are beaten once or a few times when they make mistakes whereas 28.8% of them say that their parents hit them rarely. In addition to that, more than 91% of students say that their parents reprimand them when they make mistakes. This is shown in the following table.

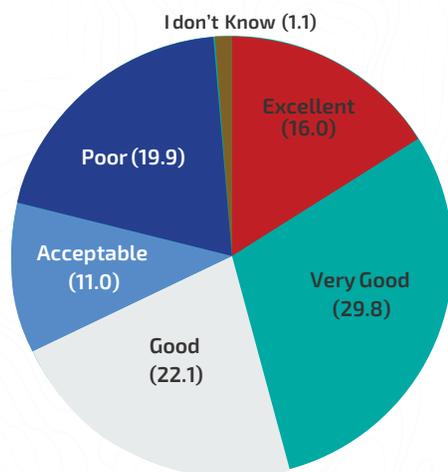
Table 17: Children's level of beating and reprimand by parents.

	Always	Most of the times	Sometimes	Rarely	Never Happens
When I do wrong, one of the parents may beat me	4.1	10.0	37.1	28.8	20.0
When I am wrong, one of my parents may reprimand me	11.2	34.1	27.1	18.2	8.8

The results of the interviews with families show that 32.8% of the parents in the community believe that hitting children when necessary is considered a disciplinary method.

Regarding the sites of the schools where children receive education and the level of their safety, most families (80.4%) indicated that the location of these schools is considered safe for their children. The level of safety ranges between excellent and good, depending on how far from the Israeli settlements or the roads to the schools. Despite that, about 13.2% of families indicated that the school sites are considered either poor or acceptable in terms of safety.

Figure 7: The safety level of the sites at schools where children receive education.



6.4 The absence of empowerment and psychosocial support programs for children with disabilities

For children with disabilities, the availability of services, empowerment programs and psychosocial support is an important part of their legitimate right of social protection. Therefore, the study also focuses on assessing the level of availability of these services and programs. The results show that the majority of families of children with disabilities believe that empowerment services and psychosocial support programs are either poor or not available. The evaluation includes the following aspects:

- Availability of required services in general.
- Support and entertainment services.
- Easy access to services.
- Empowerment and psychosocial support programs.
- The role of active institutions in the community in serving children with disabilities.
- The ability to receive different disability cases in specialized centers.

Table 18: Families of children with disabilities assessment to the level of empowerment services and psychosocial support programs.

	Excellent	Very Good	Good	Acceptable	Poor	Not available	I Do Not Know
Availability of required services in general	3.8	3.8	3.8	19.2	19.2	50.0	0.0
Support and entertainment services	0.0	3.8	7.7	11.5	7.7	69.2	0.0
Easy access to services	0.0	3.8	3.8	15.4	26.9	50.0	0.0

	Excellent	Very Good	Good	Acceptable	Poor	Not available	I Do Not Know
Level of empowerment and psychosocial support programs	0.0	0.0	3.8	15.4	46.2	30.8	3.8
Role of the active institutions in the community in serving children with disabilities	0.0	0.0	0.0	7.7	30.8	61.5	0.0
The ability to receive various disabilities in the specialized centers.	0.0	7.7	3.8	23.1	15.4	46.2	3.8
The cost of obtaining the service.	0.0	3.8	0.0	3.8	11.5	65.4	15.4

Most families of children with disabilities, up to 92%, indicated that they do not receive free technical aids, while 79% express the lack of support services, psychological and social counseling. About 60% of families indicated that they do not receive free health insurance or free medication, this means that social protection available to children with disabilities is weak. The following table presents the results of the study.

Table 19: Level of Provided Services for Children with Disabilities

	Yes always	Yes Partially /sometimes	No
Free Health insurance	24	16	60
Free Medication	8	12	80
Free technical Aids (wheelchair, hearing aids ...)	0	8	92
Specialized health services	4	12	84
Cash or in-kind assistance	0	8	92
Exemption from customs	0	8	92
Psychosocial support and counseling services	4.3	16.7	79
Assistance in rehabilitation of family houses to be more accessible	0	8.3	91.7

On the other hand, 38.5% of the families indicated that they face obstacles when they obtain services from the Ministry of Social Development. These obstacles include the following:

- Long and bureaucratic procedures.
- Long waiting period to obtain the services.
- Routines and administrative complexities.
- The difficult eligibility criteria set by the Ministry of Social Development.

- The Ministry buildings are not accessible.
- The lack of the needed technical aids for children with disabilities.
- Services are far from places of residence for children with disabilities.

6.5 Current needs of children with disabilities

The needs of children with disabilities include mainly technical aids, services and medication. About 30% of children with disabilities in the community need occupational and physiotherapy services. Almost 12% of them need hearing aids, while 16% needs visual aids and 87.5% need psychological support. The remaining percentages of children needs are wheelchairs, artificial snails, or walking technical aids (crutches and walkers).

Table 20: The needs of children with disabilities in the community

Nature of Need/ Service	Families in Percentages
Wheelchairs	8.3%
Hearing aids	12.0%
Visual Aids	16.0%
Occupational and physiotherapy services	29.2%
Walking technical aids (crutch, walker)	12.5%
Medication	66.7%
Psychological Support Services	87.5%

6.6 Child labor².

The results of the interviews with the municipality show that the number of working children under the age of 15 in Surif town is about 40 children. It is also clear that the number of working children within the age group 15-17 years are about 100 children. In addition to that, there is no information on the percentage of working children enrolled at schools. Hence, the municipality, in cooperation with the relevant authorities, has not set up policies or mechanisms to prevent the phenomenon of child labor or limit its spreading.

12.9% of school students work either permanently or temporarily during the summer vacation while 8.8% of them work after school hours, while others indicated that they never worked.

6.7 Early marriage.

The results of the interviews with families do not express the fact that early marriage is widespread in Surif town. Only 2% of the families in the community allow one of their daughters to get married before the age of 18 and none of them allow their male children to marry before reaching 18 years.

² According to the International Labor Organization, Child Labor is not considered for individuals above 15 years

Chapter 7: Knowledge of children's rights and relevant legislations and laws

In general, there is a great lack of awareness and knowledge of children's rights, legislations and related laws among the community members in Surif town. The results of the interviews with families in the community indicated that all families do not have sufficient awareness or indepth knowledge of the rights of children in general and the children with disabilities in particular. They also do not know how to access the services which are provided to them. According to the results of the study, the level of knowledge among families in these aspects has a range between 1.2 and 4.2 on a knowledge scale which ranges between 1 (I know nothing) and 10 (I have full knowledge). The study includes the following aspects:

- Knowledge of children's rights and legislations.
- Awareness of laws and legislations for children with disabilities.
- Knowledge of places that provide services for children with disabilities
- Knowledge of the Children's Board of Grievances
- Knowledge of the rights of children with disabilities
- Knowledge of how to communicate with a childhood counselor
- Knowledge of child protection networks
- Number and sufficiency of child protection counselors in the community

The following table shows the results of the study:

Table 21: The level of knowledge and awareness of families in the community of children's rights and relevant legislations

Item	Knowledge/ Awareness Level
Knowledge of children's rights and legislations	4.2
Awareness of laws and legislations for children with disabilities.	2.4
Knowledge of places that provide services for children with disabilities	2.7
Knowledge of the Children's Board of Grievances	1.8
Knowledge of the rights of children with disabilities	2.8
Knowledge of how to communicate with a childhood counselor	1.8
Knowledge of childhood protection networks	1.4
Number and sufficiency of child protection counselors in the region	1.2

The results also apply significantly to municipality employees and teachers in the kindergartens who are also included in this study, and they demonstrated a poor level of knowledge about rights and related legislations to children in general and children with disabilities in particular.