THE MOTHERS HOME CARE/EARLY INTERVENTION OUTREACH PROGRAM
FOR NON-HANDICAPPED AT RISK CHILDREN
AND THEIR FAMILIES

A PROGRAM SERVING 2696 CHILDREN AGED 0-4

PROPOSAL TO EXTEND THE PERIOD OF THE PROGRAM TO
SEPTEMBER 30, 1993
SUBMITTED TO THE U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT

MAY 1991
Summary/Abstract

The Society for the Care of Handicapped Children in the Gaza Strip has been operating the Mothers' Home Care/Early Intervention Outreach Program for non-handicapped at risk children since September 1988, and has been funded by the U.S. Agency for International Development since October 1989. This program was an expansion of the original Mothers' Home Care/Early Intervention Outreach Program for Handicapped Children and their families, operating since 1984. Both programs have been well documented as exemplary and very successful. Both have become positive service models for the entire community as evidenced by the already acceptance of the programs by the families, the huge demand on the program, and the waiting lists of families eager to participate.

The program for non-handicapped at risk children at present serves 2696 children and their families living in refugee camps, villages and cities all over the Gaza Strip. The overwhelming success of the program and the pressing need that has been exacerbated by the escalating adversity that has befallen the entire population of the Gaza Strip, through continuing occupation (about 24 years), the Intifada (about 4 years) and the calamity of the Gulf War and its disastrous economic fall out on the occupied territories. All these have made it necessary to continue this early intervention program and to expand it.

The benefits of the early intervention to non-handicapped at risk children in the Gaza Strip have been ample. The parents and indeed the entire families appreciated the training they received in early intervention, stimulation, the provision of good nutrition, proper child rearing practices, behavior management, child development, and the value of an enriching environment.
It is estimated that there are over 100,000 children ages birth to four who reside within the Gaza Strip. Because of the poor environmental conditions of the refugee camps and most of the villages and towns and because of the severe stresses of life under the present uprising against the occupiers, and the consequences of the Gulf war, nearly all of these children are at risk of developmental delays and disabilities. These children through the lack of early stimulation, poor nutrition, and inferior health conditions are vulnerable to slow or retarded development which will seriously jeopardize their ability to succeed in their school experience as well as their ability to become contributing members of their community.

The extension of the Mothers' Home Program to serve non-handicapped preschool children and their families is viewed as a natural and sequential step towards the improvement and expansion of human services that the Society can provide. The Mothers' Home Program, patterned after the Portage Project originally developed in the United States, is a proven model that has been operating in the Gaza Strip for nearly seven years. Since the Portage model has had considerable success in adapting the system to serve non-handicapped children and their families, we have found that the extension of the Mothers' Home Program has been a smooth and easy transition for the program and staff.

Since the aim of this program is to serve at risk, non-handicapped children ages birth to four, the program does not duplicate or compete with the few preschool services available in the Gaza Strip at the present time. On the contrary, this program develops effective parenting skills insuring structure and enrichment that can be capitalized upon by the existing preschool and early school programs.
The situation in the Gaza Strip is ideal for an early intervention program. Most mothers are available as the majority do not have to go out to work and many have a relatively large number of pre-school children. The extended family has been available, increasing the effectiveness of the program. Many families have more than one child under four years and thus the home teachers have had a chance to provide the mothers with support for all these children. As already mentioned, the oppressive conditions of life under a ruthless occupation has put an even greater number of children at risk of developmental delays. The program, also, will continue to help provide much needed employment under the prevailing and ever increasing harsh economic situation in the occupied territories.

Background/PVO Track Record

The Society for the Care of Handicapped Children in the Gaza Strip was established in 1975 as a private voluntary organization. This beginning was the result of the realization of the extremely poor conditions and the total lack of services for the handicapped in the Gaza Strip. After considerable work under the most deplorable conditions under the Israeli occupation, where the population had inadequate medical services, virtually no financial resources, no proper social services, and despite mounting restrictions on community projects, the Society initiated several successful programs for the handicapped. These include: a school program for handicapped children between the ages of seven and eighteen. This program was funded by a number of Arab and international sources. Additionally, the U.S. AID funded the mothers' home program for handicapped children and their families from birth through age nine. The Society also conducts a vocational training and rehabilitation program for handicapped young adults over the age of eighteen. Another effort by the Society is the
diploma and degree program for the training of rehabilitation personnel. This program conducted in the Gaza Strip, leads to a diploma or a degree for participating students from Mount Royal College, Calgary and the University of Calgary. A two year program leading to the Professional Diploma in Rehabilitation has been specially structured by the University of Calgary, with the objective of training rehabilitators and case managers to serve Intifada victims with head and spinal cord injury. These programs are supported by grants from CIDA, the Canadian International Development Agency. The Society has also established the Gaza Beach Camp Unit for handicapped children which is located within a regular UNRWA school campus and is hoped to be the forerunner of a number of such units in schools for non-handicapped children. This unit has two programs serving children from 18 months to six years of age. Please refer to the attached document for brief descriptions of these programs.

These operations reflect the comprehensive planning undertaken by the Society for the improvement and expansion of services to the non-handicapped community and their families. As one can observe, the planning has addressed many needs that exist in the Gaza Strip. The programs serve new born at risk children and their families, the pre-school age population, school age and young adults in need of vocational training.

The Society's adaptation of the Portage Project and its successful implementation locally, has also received considerable recognition internationally. The Mothers' Home Program has been presented, on invitation at:
1) The 7th World Congress of the International Association for the Scientific Study of Mental Deficiency- New Delhi, India, March, 1985;
2) The Division for Early Childhood (DEC) of the International Council for Exceptional Children (CEC) annual conference, Denver, Colorado, USA, October, 1985;

3) The International Portage Conference, Southampton University, England, September, 1986. The organizers of this conference have included the Gaza address in the printed proceedings of the conference.

4) The International Conference on Special Education held at Beijing, China, June 1988.

5) The International Conference on Special Education, held at the University of British Columbia, Vancouver, Canada, May 1989.

Most recently, the Arabian Gulf Fund for the support of U.N. Development Organization (AGFUND) has chosen the Gaza model for implementation in Egypt, and a former employee of the SCHC will consult for four months beginning June 1991 to train the basic staff and oversee the start of the program. Furthermore, to document the success of the Mothers' Home Program a few examples are cited:

a) Teacher Performances:
"Based upon direct observation of every home teacher working in the home, each home teacher was following the curriculum planning and implementation process as well as the home teaching process successfully." (Progress Report and Evaluation, Shearer, D.E. December, 1986)
"There can be no doubt that the SCHC Mothers' Teachers are doing an excellent job in the utilization of the Portage system for this population, having adapted the system very well to the cultural needs of their clients." Afifi, et al, "Evaluation of the Home Based Rehabilitation Programs for Disabled Children in the West
b) Child Development Gains:
"Of all developmental activities that have been prescribed in the home over 94% have been accomplished. The mean developmental gains as measured by a standardized instrument over a twelve month period include: 10.4 months in physical development, 11 months in self help development, 12.5 months in socialization, 13 months in academic development, and six months in language development." (Progress Report and Evaluation, Shearer, D.E. December, 1986).

"They have and are making a positive difference for the families that have been fortunate enough to be served by the program. Many disabled children in these families have gained more functional capacity. Some have entered regular schools and are being educated along their non-handicapped peers. In some situations, children who may be born after the disabled child in the family who is being treated, may be prevented from having the same disability, e.g. PKU, by virtue of counseling provided by the home teacher home teacher." Affifi, et al, "Evaluation of the Home Based Rehabilitation Programs for Disabled Children in the West Bank and the Gaza Strip." July, 1988.

"It is obvious that the program is being received very well by parents, and is felt to be rewarding by the staff." Neufeldt, A., "Report to AID on services for the Handicapped Persons in the West Bank and Gaza" June, 1985.

d) Cost Effectiveness
"All the activities in the mothers program are being conducted by a private organization, a job usually being carried out by a governmental institution. While the cost per child has been estimated as $1.81 per day by SCHC, it is presently costing approximately $12.74 per visit for each child, or $622.25 per year.

e) Overall Program Evaluation

"In the Gaza program, 300 families were brought into the program in the first year of operation which was the goal for the third year. In the second year, 470 families, the number currently being served entered the program a number far in excess of the second year goal." Affifi, et al, "Evaluation of the Home Based Rehabilitation Programs for Disabled Children in the West Bank and the Gaza Strip." July, 1988.

"The supervisory system of the Mothers Program is an excellent system, with teachers receiving adequate supervision. The system of one day a week with a designated supervisor as well as small and large group discussions allowing for sharing of experiences with their peers is an excellent system for both supervision and peer learning. The inclusion of an added period of time for in-service education is excellent and allows for the entire group to be together for additional learning experiences. " Affifi et. al, 1988.

"All elements of the evaluation, Home teachers performance, administrative performance, parent participation and satisfaction, child gains and training are at least, and in many cases exceed the standards that have been required in other replication and implementation sites in the United states, Canada, Peru, Great Britain, Japan, India, New Zealand, and Guam." Shearer, D.E. Progress Report and Evaluation, December, 1986.
f) Parent Participation and Satisfaction

"Since the parents are responsible for the day to day teaching of their child during the week, the fact that the children in the program are achieving 97% of the prescribed developmental activities left in the home, demonstrates active and successful parent participation. Additionally, in a survey of over 365 homes served by the program, 97% of the parents answered yes to the question, "Do you think your child has made progress in the program" Progress Report and Evaluation, Shearer, D.E. December, 1986.

"The Mothers' and Teachers appear to have excellent relationships and work well with mothers of the children. In all, observed cases, the mother observed carefully and was able to give return demonstrations of needed activities for the following week." Affifi, et al, "Evaluation of the Home Based Rehabilitation Programs for Disabled Children in the West Bank and the Gaza Strip." July, 1988.

Projects Goals and Purposes:
The Society for the Care of Handicapped Children in the Gaza Strip extended the Mothers' Home Care/Early Intervention Outreach Program to serve non-handicapped children and their families living within the Gaza Strip. The original program, supported by U.S.AID for four years, has been operating in the Gaza Strip for nearly seven years. Because of the enormous number of young non-handicapped at risk children living in the Gaza Strip, and because of the overwhelming success of the existing Mothers' Home Program, this extension is viewed as a natural and sequential step in improving and expanding services to the pre-school community and their families. Evaluation results indicate that the children, who are involved in the program, are developing beyond their expected developmental rate, the parents and families are teaching their own
children and the home teaching staff is planning and implementing the program very effectively. (Please see report of the AID evaluation team, July, 1988.)

The program is an adaptation of the Portage Project, an international model home teaching program originally developed in the United States. This program entails a complete program package which includes:

1) A culturally appropriate curriculum complete with assessment tools, covering early childhood education as well as nutrition, health, and hygiene;

2) A training program for non-professional home teachers with relatively low levels of education and little experience with young children. This makes the program particularly suitable for the present conditions in the Gaza Strip where the provision of work opportunities has become a critical need;

3) A work methodology, carried out with minimum disruption to daily family patterns;

4) A systematic evaluation, measuring program results and providing feedback for future modification.

The central focus of this intervention program is the family in its primary and pivotal role of providing for the basic caretaking needs and early teaching of its young non-handicapped children. Research has demonstrated the importance of this role in the physical and psycho-social development of the child in his/her performance in the school and later life. In this program, the family is viewed as teachers and change agents in its own right as well as students of early childhood development and of special education methods. The program practices a methodology which
assures that parents acquire good child rearing practices and guides and helps them to implement these practices in their daily routines.

The program provides direct intervention in the home rather than in a school or community center. By working in the natural environment of the child, the program helps overcome difficulties of possible psycho-social distance between the school and the home, as well as serving costs of building infrastructures necessary to accommodate all of those in need of service. The program provides a developmentally sequenced curriculum designed to be used as an evaluation and programing instrument. Each child's particular strengths and weaknesses are identified so that a personalized program can be developed, based on the child's present knowledge and abilities. The curriculum serves as a criterion referenced instrument to measure short and long term progress. Implementation of the curriculum is based on a prescriptive teaching approach where specific objectives are developed, taught, evaluated then adjusted for future teaching, based upon feedback from evaluation results. This approach affords constant monitoring of program implementation and provides specific detailed work plans to guide families in the teaching of their children.

Finally, the program uses non-professional, community based personnel for its implementation. The use of community non-professionals, besides making it easier to offer employment to the most needy, assists in the communication and understanding between the families and program staff, facilitates entry and acceptance in the home, and avoids possible problems of prejudices and divergence of social values between the program implementors and the program recipients. The training of community personnel also provides the community with a cadre of knowledgeable persons dedicated to the problems and needs of the child and family.
Project Elements

The Portage Project, the model after which the Mothers' Home Program is patterned, has been proven to help develop effective parenting skills for non-handicapped children. For example, after three years of piloting, an adaptation of the system serves as a national model for non-handicapped children in Peru. Additionally, the model has been successfully implemented on a national level for Head Start programs in the United States.

Since the aim of this program is to serve at risk, non-handicapped children ages birth to four, the program would not duplicate or compete with the few preschool services available in the Gaza Strip at the present time. On the contrary, this program develops effective parenting skills insuring structure and enrichment that can be capitalized upon by the existing preschool and early school programs.

The Portage Project, which is the basis of this program, has been proven to be exceptionally suitable to a developing area. It is simple in its design and provides children with basic, yet critical skills which affect important aspects of learning and development. When the program was translated to Arabic only very few modifications were found necessary to meet cultural differences.

The program is delivered in an environment where there is little enrichment, and where the effects of the present uprising against the occupiers and the resulting beatings, curfews, gas bombs, and bullets are certain to have detrimental effects on the development of all children and severely impacting on handicapped ones. It is hoped that this program will reduce to some degree, the accumulative negative effects arising out of these poor and
stressful environmental conditions.

Because the basic approach of this program is teaching families to teach their own children in the child's natural environment, the home remains the basis of the program. Furthermore, the program will continue to be delivered utilizing the highest measures, currently used, which includes developmental assessment techniques, individualized curriculum and reporting procedures, staff training and configuration, and evaluation processes.

The Society has developed highly successful pre-service and in-service training for the non-professional home teachers. The training includes:

Pre-service:

Each new home teacher must participate in a pre-service training program that is conducted by the project director, the supervisors and psychologist. This training lasts for three months prior to formal employment into the program. The program includes: classroom lectures regarding assessment, curriculum planning and implementation, issues of early childhood education and child development, working in partnership with parents and families, recording and reporting procedures, and evaluation. It also includes field experiences with home teachers, first as an observer, then as an intern home teacher working with the family under the direct supervision of her assigned home teacher. Each trainee's performance is closely monitored by the project supervisors with on-going interning in the homes. After successfully completing the three month pre-service course, the trainees are employed in accordance with funding availability.
In-service:

The project also has an ongoing in-service component. All of the home teachers come to the Center one day per week for in-service training. During this day, each teacher meets with her respective supervisor to review each child's curriculum and performance, to review any difficulties the teacher may be having with either the child or family, and to plan the child's objectives for the coming week. This provides the supervisors with the opportunity to train the teachers individually and to schedule her monitoring visits for the following week. Additionally, the entire staff meet during this day for training by supervisors or by resource personnel and visiting consultants.

The Society has found that it is easy to choose personnel to fulfill home teaching positions because of this comprehensive pre-service and in-service training scheme. The Society has built the program around training and employing those who are most needy yet are not with any formal training to fill the positions. On the other hand, in particular areas of the Gaza Strip that specially need the services of the Society, female personnel from that community are selected and trained to become that areas' home teachers.

As distinguished from the original program where home teachers have to be transported to the homes of handicapped children scattered all over the Strip, this new program is implemented with minimal use of transportation, since the home teacher serves families in her immediate vicinity. This has not only materially reduced costs, but insured effective implementation despite the present problems that delay travel in the Gaza Strip whether due to roadblocks, burning tires or curfews. Only four mini buses are needed to implement this huge program, that already serves 2696 children. These vehicles are used primarily for transporting
administrative and technical staff, e.g. the directors, supervisors, social workers, and psychologists. The buses are also used to transport trainee teachers for field experience.

**Expected Achievements and Accomplishments:**

This program is expected to help in the following ways:

a) It is hoped to continue to have a significant impact on a large number of families who have one or more children under the age of four years. Both the mother and the child and perhaps other members of the family benefit from the knowledge imparted to them from the weekly home visits.

b) Under the present adverse economic conditions, this program provides direct employment opportunities for 124 persons in addition to others whose salaries are partially met through overhead costs insuring the means of livelihood for a significant number of families. The home teachers and others employed through the program will also benefit from useful daily practices related to health, hygiene, and proper child rearing skills to prepare them for their future roles as mothers.

c) The program provides pre-school enrichment to young children who are at risk of developmental delays and thus ensuring their smooth entry and success in regular school.

d) It is hoped that the program will continue to present its workers a model for better living to look forward to through, for example, the provision of proper living conditions as exampled by the high quality facilities available, e.g. the modern kitchen and dining room, the excellent in-service training facilities and the well planned offices that are provided with the necessary modern equipment. This has contributed to the development of the
personality of the program workers.
e) The program is designed to be a model for other Gaza and West Bank community organizations to emulate. Its success has proved that despite their deprivation and misfortunes, the Palestinian people can learn quickly to achieve better living conditions and to utilize to the maximum modern business implements and techniques.

f) The most important goal, however, will once again be the continuation of a model pre-school program that will hopefully be the forerunner of similar programs in the rest of the developing world. Arab countries have expressed interest in replicating the original program. This summer, an ex-employee of the Society will assist in setting up the Portage Model in Cairo.

Project Management:

Four unit directors coordinate and supervise the operation of the program. They are responsible to the Director-General of the Society and are responsible to oversee the work of the project staff, the identification and enrollment of children and families, the reporting of child and teacher performances and overall evaluation of the project.

The program employs 16 supervisors chosen from the teaching staff. Their responsibilities include daily supervision of the home teachers, monitoring each child's curriculum, monitoring each family's participation and satisfaction, conducting pre-service and in-service training for intern and employed home teachers, and report all difficulties to the project director.

The 96 home teachers are responsible for the planning and implementation of each child's curriculum on their caseloads. Each
teacher has a case load of twenty eight children and families. The home teacher visits each child's home one day per week for a period of one and a quarter hours. The home teacher makes home visits five days a week with the sixth day reserved for in-service training at the unit's headquarters.

Each home teacher must have participated in and found successful in the pre-service training program conducted by the project supervisors and director. As described earlier the training program lasts for three months. This training includes lectures accompanied by pre-post exams of the teachers comprehension of the program as well as on-site observations during the teachers internship in the field.

The program will continue to implement home teaching services and:

a) Conduct ongoing assessments of the child's and family's progress.
b) Conduct ongoing supervision of home teachers performance.
c) Conduct ongoing supervision of the home teachers performance.
d) Conduct ongoing staff in-service training sessions.
e) Conduct a year end assessment of the projects performance.
f) Contract short term consultants who will assist in the implementation and the introduction of new components to the program as well as conduct third party evaluations of the project.

Evaluation:

The Mothers' Home Care Early Intervention Outreach Program for Non-Handicapped at Risk Children will be monitored by many evaluation methods. These methods include an assessment of teacher performance, child development gains, parent participation and
satisfaction, cost effectiveness and an evaluation of the overall program, e.g., meeting implementation time lines, serving the present 2696 children and families, training and hiring home teachers as needed.

There are several indicators and methodologies that are used for evaluation of the project. Each will be closely monitored to insure that each child and family continue to receive a quality early intervention program. These indicators include:

I. Child Performance:
   a) Pre-Post Assessment

Every child receives a comprehensive assessment, using standardized testing instruments, to determine the child's developmental strengths and needs in the developmental areas of academic, language, social, physical and self help skills. Additionally the child's learning style is also assessed at the beginning of the program which assists in curriculum planning and implementation. The children are also assessed at the end of the program year to determine the overall progress each child has made during the year.

b) Curriculum Assessment

Each child receives a curriculum assessment which is more comprehensive than the pre-post assessment. This assessment is more detailed regarding the skill levels in the developmental areas and leads to the individualized curriculum planning by the home teachers. The child's progress is assessed every three months as comparisons are made on the Portage Guide to Early Education, translated to Arabic and adapted to the culture.
c) Ongoing Assessment:

Each activity that is planned and implemented in the home is recorded, evaluated by the home teacher and eventually by the teacher's supervisor. An activity chart is written for each activity which indicates what is to be taught, the method to use in the teaching process, what to record and how to reinforce successful efforts by the child. The home teacher demonstrate each activity for the parent then has the parent practice the activities under the teacher's observation to insure that the parent understands the methods to be used and that reinforcers are used appropriately. The parents record the child's daily progress on the activity chart. At the end of the week, the home teacher reviews the activity with the child and validates the child's progress, or lack thereof, on the activity. Based upon this evaluation, the teacher determines the child's success at learning and develops new or revised activities for the coming week.

II Teacher's Performance

a) On the job evaluations

Each home teacher has a supervisor who monitors her work performance. Examples of this monitoring and evaluation are: Review of each teacher's curriculum plan and activity charts for every child on her caseload. A home teacher does not see a child and family two consecutive times without seeing and reporting to her supervisor. In other words, the supervisor can determine within one visit whether the teacher needs some assistance, whether a child is failing, or whether the family is participating as expected. Thus the supervisor can intervene when necessary before the home teacher see the child two consecutive weeks.
b) In-service training

Teacher performances during in-service training sessions are also monitored. When it is apparent that a particular teacher needs further training or assistance, training is provided during the in-service day scheduled once a week.

III Parent Participation and Satisfaction

Parent participation is monitored through the weekly activity charts left in the home. The program's success is completely dependent upon parents teaching the child daily. If the child is unsuccessful during the week, it will be assumed that the fault does not lie with the parents but with the teacher who either prescribed an inappropriate activity for the child or failed to ensure that the parents understood the teaching methodology to be used. However, when the child does succeed it is obvious that it has been the parents that have taught the skill to the child. In the Mothers' Home Program, the children were successful in 94% of the weekly activities left in the home.

Another concern of the project is the parent satisfaction with the program. A survey will be conducted to determine the parents' satisfaction. In a similar survey in the original Mothers' Home Program, 97% of the parents responded that they felt their child was benefiting from the program. Additionally, the supervisors ask the parents about their satisfaction and/or concerns about the services they are receiving while on an observation visit with one of her teachers.

IV Supervisors

Supervisors are monitored by the Director, records are checked periodically and dual observation visits are made by the supervisors and the director simultaneously to monitor the
supervisors performance with the teachers.

V Internal- 3rd Party Evaluation

The Society will contract with unbiased third party experts in the field to conduct an internal evaluation of the project. This evaluation will address all phases of the project and will be conducted in an objective fashion at the end of each year of the life span of the program.

Concluding remarks

The Society for the Care of Handicapped Children in the Gaza Strip wishes to stress that due to the present dire conditions in the Israeli occupied Palestinian territories, the continuation of this program is an urgent necessity. Besides benefiting 2696 children and their families, the program provides much needed employment to 124 persons providing a means of living to their respective families.

The present crisis in the Gulf has led to a serious cash flow crisis that has affected all private voluntary organizations operating in the West Bank and Gaza.

The urgent help from the U.S. Agency for International Development and other international donors is critical in maintaining this and other humanitarian services. It is our hope that this program will continue to be a landmark in the social progress of the community of the Gaza Strip and that it will be adopted by many developing countries and that means for its long survival will eventually be at hand.
Mothers Program for Non-Handicapped Children
Funding for 21 months starting January 1, 1992
Deir El Balah Unit

1- Salaries

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<th>Position</th>
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<tr>
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<tr>
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<td>21</td>
<td>$350</td>
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Total Salaries: $232,050

2- Overhead Expenses at 71% of Salaries: $164,755

3- Work Accident Insurance at 3% of Salaries: $6,962

4- Health Insurance for 21 persons at $1000: $35,000

5- Teaching Materials and Educational Toys: $10,000

6- Rent and Utilities $400 x 21: $8,400

Total Overhead Expenses: $232,050

Total Program Costs

Non-Handicapped Programs: $787,856
Handicapped Programs: $824,712

Total: $2,069,735

4 Consultants for 30 days each, @ $225/day: $27,000
4 Return airfares from USA @ 3,500 each trip including transfers in USA and locally: $14,000
Pardiem @ $100 for 120 days: $12,000

Total: $53,000

Evaluation and Research: $50,000

Total: $2,172,735
The Mothers Program for the Non-Handicapped
One Year Costs for the Period
October 1, 1992 - September 30, 1993

These are three separate but identical programs working in the
Northern Region of the Gaza Strip, Gaza City, and the Southern
Region of the Strip.

1- Salaries

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<tr>
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<th>Hours</th>
<th>Cost</th>
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<td>Directors</td>
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<tr>
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<td>2</td>
<td>$350 x 12 x 2 = 8,400</td>
</tr>
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Total Salaries: $369,400

2- Overhead Expenses at 71% of Salaries: $276,474

3- Work Accident Insurance at 3% of Salaries: $11,632

4- Health Insurance for 103 persons at $500: $51,500

5- Teaching Materials and Educational Toys: $30,000

6- Rent and Utilities at $1,200/m: $28,800

Total Costs: $787,356
Mothers Home Care
Early Intervention Outreach Program for
Non-Handicapped At Risk Children

Submitted to:
The Agency for International Development
May 30, 1991
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PART I: SUMMARY

The Society for the Care of Handicapped Children (SCHC) in the Gaza Strip has been operating the Mothers' Home Care/Early Intervention Outreach Program for Non-Handicapped At-Risk Children and their families since September, 1988. The purposes of this pre-school program are to:

reduce the risk of developmental delays and disabilities among at-risk children residing in the Gaza Strip which contribute to poor school performance, and eventual employability and functioning in the community.

This balanced early intervention home-based program involves the use of paraprofessional home teachers who are trained to work with mothers on a weekly basis in the areas of physical and mental growth and development, including early infant stimulation, the provision of good nutrition, proper child rearing practices, behavior management, child development, and the value of an enriching environment. The home teachers also lend to the mothers developmentally-appropriate educational toys and teaching materials. The mothers are expected to carry out the activities prescribed specifically for the needs of their child. Initial and on-going (weekly) assessment of the child's progress is used by the home teacher to guide the mother in early childhood development process as well as to identify specific needs of the child. Since October, 1989 the program for non-handicapped at risk children has served a total of 2,815 individual children and their families, all of whom lived in refugee camps, villages and cities throughout the Gaza Strip. The total caseload as of April 1, 1991 is 1,995 children and their families. The total number of children on the waiting list as of May 1 was 340. The total number of home
teachers trained since October, 1989, is 100. Eighty are currently employed, including those teachers still in training.

This proposal requests funding from A.I.D. to continue the activities conducted by SCHC within the Mothers' Home Care/Early Intervention Outreach Program for Non-handicapped At Risk Children and Their Families and to expand the research and evaluation component of the current program. The extension would be from October 1, 1991 through September 30, 1993, with a total funding request of $882,054.

This program is an expansion of the SCHC home-based Mother's program for handicapped children aged from birth - 9, which has been in operation for nearly seven years and has also received A.I.D. funding. Both programs were adapted by the SCHC from the Portage Model (developed initially in Wisconsin). This program was designed to instruct parents of non-handicapped, at risk children to teach their children in their homes.

Early intervention with direct parental involvement is an important and cost-effective approach to early detection and intervention with respect to children who are at risk for developmental disabilities which require extensive and costly care and who may have reduced capacities for employment in their adult years. In view of the dire economic situation in the Gaza Strip, with estimates of unemployment (from UNRWA and other sources) ranging from 40% to 80%, the extension of the Mothers' Home Care/Early Intervention Outreach Program for Non-handicapped at-risk children and their families would be an important part of any
effort to ensure economic survival of the area.

PART II: THE PROJECT

II.1 Perceived Problem

The need to expand the Mothers' Home Care/Early Intervention Outreach Program is justified by the overwhelming success of the program and the pressing needs for home-based preschool services for children who are at-risk for developmental disabilities. Furthermore, the program provides much needed professional training opportunities and subsequent employment under the prevailing harsh economic situation in the occupied territories. The Gaza Strip has been under occupation for 24 years. The oppressive conditions of life under a ruthless occupation and the consequent stress and economic hardship have increased the incidence of developmental delays. A survey conducted in 1984-85 by the SCHC with funding through an A.I.D. grant, found an estimated 20,000 children between 0-4 have physical and/or mental handicaps. Until the advent of the SCHC program, there were no early intervention services for these children. The program had served a total of 2,815 children over a three year period between 1988 and 1990. The program now serves 1,995 children and their families.

It is estimated that there are over 100,000 children ages birth to four who reside within the Gaza Strip. Because of the poor environmental conditions of the refugee camps and most of the villages and towns and because of the severe stresses of life under the present uprising against the occupiers, and the consequences of the Gulf war, nearly all of these children are at risk of
developmental delays and disabilities. These children through the lack of early stimulation, poor nutrition, and inferior health conditions are vulnerable to slow or retarded development which will seriously jeopardize their ability to succeed in their school experience as well as their ability to become contributing members of their community.

Minimal services exist for early detection and intervention of at-risk children. The few programs which address the needs of the estimated 20,000 children with physical and mental handicaps focus almost entirely on caring for children who are already developmentally disabled; moreover, the developmentally disabled represent only a portion of their patient populations. The Benevolent Society of Gaza has been operating a Child Development Center for handicapped children since 1988. This program, which recently received funding from A.I.D. through ANERA, provides outpatient services for physically handicapped children. Recently, community-based groups have begun to replicate the services of SCHC. An example is a community center in the Jabaliya Refugee Camp, which is planning to provide services for approximately 1,200 children who have been identified as having physical and/or mental handicaps. UNRWA is currently planning to implement special education services for children; no additional information is available concerning this project. Since the aim of this program is to serve at risk, non-handicapped children ages birth to four, the program does not duplicate or compete with the few preschool services available in the Gaza Strip at the present time. On the
contrary, this program develops effective parenting skills insuring structure and enrichment that can be capitalized upon by the existing preschool and early school programs.

When A.I.D. funding had ended in 1989, the SCHC was able to obtain financial support from a number of sources, particularly from Gulf countries. These countries had become aware of the program and showed great interest in starting similar services in their countries through the help of the Society. Unfortunately, beginning in August, 1990, funding from the Gulf countries abruptly ceased. During the course of this proposed A.I.D. grant, the SCHC will endeavour to re-establish ties with the Gulf funding sources in order to ensure sustainability of this much-needed program.

The program is delivered in an environment where there is little enrichment, and where the effects of the present uprising against the occupiers and the resulting beatings, curfews, gas bombs, and bullets are certain to have a detrimental effect on the development of all children and severely impacting on handicapped ones. It is hoped that this program will reduce to some degree, the accumulative negative effects arising out of these poor and stressful environmental conditions. It is proposed to continue for two years the services to the 1,980 families at present being served and additional children as children turn four years of age and exit the program.

Furthermore, the program will continue to be delivered utilizing the curricula and research and evaluation methodologies which have proven effectiveness and utility, including developmental
assessment techniques, individualized curriculum and reporting procedures, staff training and organizational configuration, and program monitoring and evaluation processes.
II.2 Background/PRO Track Record

The SCNC was established in the Gaza Strip in 1975 as a private voluntary organization. The society was created as the result of the realization of the extremely poor conditions and the total lack of services for the handicapped in the Gaza Strip. In addition, social, financial and educational conditions were deplorable under Israeli occupation. The population had inadequate medical services, virtually no financial resources, and no adequate social services.

Despite mounting restrictions on community projects, the Society initiated several successful programs for the handicapped, including a day school program for handicapped children between the ages of seven and eighteen and the home-based outreach program for handicapped children (which currently serves 740 children). These programs were funded by various international sources and until recently by many Arab governments. Additionally, the U.S. AID funded the home-based program for handicapped and non-handicapped at-risk children.

The Society also conducts a vocational training and rehabilitation program for handicapped adults over the age of eighteen and operates a diploma and degree program for the training of rehabilitation personnel. These programs are conducted in the Gaza Strip, lead to a diploma or a degree for participating students from Mount Royal College, Calgary and the University of Calgary. A two year program leading to the Professional Diploma in Rehabilitation has been specially structured by the University
of Calgary, with the objective of training rehabilitation specialists and case managers to serve Intifada victims with head and spinal cord injury. These programs are supported by grants from the Canadian International Development Agency (CIDA). The Society also has established the Gaza Beach Camp Unit for handicapped children within a regular UNRWA school campus. This unit has two programs serving children 18 months to six years of age. This unit is expected to be the forerunner of a number of such school programs for non-handicapped, at-risk children.

These operations reflect the comprehensive planning efforts undertaken by the Society for the improvement and expansion of services to the handicapped community and their families. As one can determine, the planning has addressed many critical needs that exist in the Gaza Strip. The programs serve new-born handicapped children and their families, the school-age population, as well as adults. Additionally professional training for qualified students wishing to enter this field is not locally available. Thus, the Society has planned and implemented the on-site diploma/degree training programs resulting in preparing highly qualified professionals in the fields of special education and rehabilitation with degrees and diplomas awarded by the University of Calgary and Mount Royal College in Calgary, Canada.

The Society's adaptation of the Portage Project and its successful implementation locally has received considerable recognition internationally. The SCHC adaptation of the Mothers' Home Programs for handicapped and non-handicapped at-risk children
has been presented, on invitation at:

1) The 7th World Congress of the International Association for the Scientific Study of Mental Deficiency- New Delhi, India, March, 1985;

2) The Division for Early Childhood (DEC) of the International Council for Exceptional Children (CEC) annual conference, Denver, Colorado, USA, October, 1985;

3) The International Portage Conference, Southampton University, England, September, 1986. The organizers of this conference have included the Gaza address in the printed proceedings of the conference.

4) The International Conference on Special Education held at Beijing, China, June 1988.

5) The International Conference on Special Education, held at the University of British Columbia, Vancouver, Canada, May 1989.

6) The National Association of School Psychologists, held in San Francisco, April, 1991. In addition, its programs were described in the International Journal of Special Education.

The Arabian Gulf Fund for the support of U.N. Development Organization (AGFUND) selected as its model for implementation in Egypt, the (SCHC) mothers, Home Care/Early program. A former employee of the SCHC will train for four months, beginning June 1991 an initial team of teachers and oversee the start of the program. Evaluation results indicate that the children are developing beyond their expected developmental rate, the parents and families are teaching their own children. Additionally, the home teaching staff is planning and implementing the program very effectively. Examples of the results of recent evaluations are presented below:

a) Teacher Performances:

"Based upon direct observation of every home teacher working
in the home, each home teacher was following the curriculum planning and implementation process as well as the home teaching process successfully."

"There can be no doubt that the SCHC Mothers' Teachers are doing an excellent job in the utilization of the Portage system for this population, having adapted the system very well to the cultural needs of their clients."

b) Child Development Gains:

"Of all developmental activities that have been prescribed in the home over 94% have been accomplished. The mean developmental gains as measured by a standardized instrument over a twelve month period include: 10.4 months in physical development, 11 months in self help development, 12.5 months in socialization, 13 months in academic development, and six months in language development."

"They have and are making a positive difference for the families that have been fortunate enough to be served by the program. Many disabled children in these families have gained more functional capacity. Some have entered regular schools and are being educated along their non-handicapped, at-risk peers. In some situations, children who may be born after the disabled child in the family who is be treated, may be prevented from having the same disability, e.g. PKU, by virtue of counseling provided by the home teacher."

"It is obvious that the program is being received very well by parents, and is felt to be rewarding by the staff."

d) Cost Effectiveness

"All the activities in the mothers program are being conducted by a private organization, a job usually being carried out by a governmental institution. While the cost per child has been estimated as $1.81 per day by SCHC, it is presently costing approximately $12.74 per visit for each child, or $622.25 per year per child. The yearly cost remains the same for either estimate. This is extremely cheap considering the cost of medical care for complications."

e) Overall Program Evaluation

"In the Gaza program, 300 families were brought into the program in the first year of operation which was the goal for the third year. In the second year, 470 families, the number currently being served entered the program a number far in excess of the second year goal."

"The supervisory system of the Mothers Program is an
excellent system, with teachers receiving adequate supervision. The system of one day a week with a designated supervisor as well as small and large group discussions allowing for sharing of experiences with their peers is an excellent system for both supervision and peer learning. The inclusion of an added period of time for in-service education is excellent and allows for the entire group to be together for additional learning experiences."

"All elements of the evaluation, Home teachers performance, administrative performance, parent participation and satisfaction, child gains and training are at least, and in many cases exceed the standards that have been required in other replication and implementation sites in the United states, Canada, Peru, Great Britain, Japan, India, New Zealand, and Guam."  

f) Parent Participation and Satisfaction

"Since the parents are responsible for the day to day teaching of their child during the week, the fact that the children in the program are achieving 97% of the prescribed developmental activities left in the home, demonstrates active and successful parent participation. Additionally, in a survey of over 365 homes served by the program, 97% of the parents answered yes to the question, 'Do you think your child has made progress in the program'"

"The Mothers' and Teachers appear to have excellent relationships and work well with mothers of the children. In all, observed cases, the mother observed carefully and was able to give return demonstrations of needed activities for the following week."  

II.3 Projects Goals and Purposes

The purposes of this pre-school early intervention program are to:

reduce the risk of developmental delays and disabilities among at-risk children residing in the Gaza Strip which contribute to poor school performance, and eventual employability and functioning in the community.

The objectives of the program are to:

1) provide an effective, home-based program for approximately 2,800 non-handicapped, at-risk children ages 0-4 years over the two year extension period of the project, of whom approximately 800 will be in addition to those currently served;

2) to provide on-going training for the approximately 2,000
in the

3) to provide on-going in-service training for the 72 teachers currently employed and initial as well as in-service training for an additional 20 home teachers;

4) to continue to refine the program, including revisions in or additions to the curricula and related activities, as appropriate;

5) to increase the availability of data which can be used to: a) refine the SCHC program, b) improve knowledge in the field of early intervention with respect to developmental disabilities in, and 3) make available information which can be used in planning for non-handicapped, at-risk services in the West Bank and Gaza Strip.

A logframe is included as Annex 1.

The SCHC anticipates that the following problems will be addressed during the life of the project:

1) Curfews imposed by the Government of Israel (GOI) inhibit the ability of staff, including teachers and their supervisors, to carry out their responsibilities.

2) Increased needs for early intervention services on the part of the population, with limited financial resources available to meet these needs.

II.4 Project Elements

II.4. (a) Nature and Scope of Inputs. The Mothers' Home Care/Early Intervention Outreach program for non-handicapped, at-risk children, as implemented by the SCHC, is an adaptation of the Portage Project, an international model home teaching program originally developed in the United States. Through this program, trained para-professional teachers (home teachers) provide initial and on-going training of the mothers of handicapped children. They also lend to the mothers developmentally-appropriate educational
toys and teaching materials. The mothers are expected to carry out the activities described specifically for the needs of their child.

This early intervention program consists of:

1) **Training of mothers in the early education and development of their non-handicapped, at-risk child**, with a focus on enabling the child to make use of all available physical and mental capacities; this training includes:

   - early infant stimulation,
   - the provision of good nutrition,
   - proper child rearing practices,
   - behavior management,
   - child development,
   - hygienic practices, and
   - the value of an enriching environment;

   The training is based on a culturally appropriate curriculum, complete with appropriate assessment tools.

2) **Training of para-professional women with relatively low levels of education and little experience with young children**;

3) **A program of individual-based on-going developmental activities for the handicapped child**; these activities are taught to the mother by the home teacher and the mother is expected to teach them to her child during the week; the activities are designed to ensure minimal disruption of daily family patterns; weekly visits by the home teacher ensures continuous support and monitoring of progress;

4) **A systematic evaluation**, measuring program results and providing feedback for future modification.

The central focus of this intervention program is the family in its primary and pivotal role of providing for the basic caretaking needs and early teaching of its young children who are at risk for developmental handicaps. Research has demonstrated the importance of this role in the physical and psycho-social development of the child in his/her performance in the school and later life. In this program, the family is viewed as teachers and
change agents in its own right as well as students of early childhood development and of special education methods. The program practices a methodology which assures that parents acquire child rearing practices and guides and helps them to implement these practices in their daily routines.

The program provides direct intervention in the home rather than in a school or community center. By working in the natural environment of the child, the program helps overcome difficulties of possible psycho-social distance between the school and the home, as well as costs of building infrastructures necessary to accommodate all of those in need of service. The program provides a developmentally sequenced curriculum designed to be used as an evaluation and programming instrument. Each child's particular strengths and weaknesses are identified so that an individualized program can be developed, based on the child's present knowledge and abilities. The curriculum serves as a criterion referenced instrument to measure short and long term progress. Implementation of the curriculum is based on a prescriptive teaching approach where specific objectives are developed, taught, evaluated then adjusted for future teaching, based upon feedback from evaluation results. This approach affords constant monitoring of program implementation and provides specific detailed work plans to guide families in the teaching of their non-handicapped, at-risk children.

Finally, the program uses para-professional, community based personnel for its implementation. The use of community para-
professionals facilitates communication and understanding between the families and program staff as well as entry and acceptance in the home, and avoids possible problems of prejudices and divergence of social values between the program implementors and the program recipients. The training of community personnel also provides the community with a cadre of knowledgeable persons dedicated to the problems and needs of the child and family. The employment of the home teachers is particularly important in view of the present conditions in the Gaza Strip, in which the provision of work opportunities has become a critical need. Each of the home teachers has a case load of 25 - 26 children. The teachers are young women who have completed secondary education. The training of these home teachers consists of two parts:

**Pre-service**

Each new applicant must participate in a pre-service training program that is conducted by the project director, the supervisors and psychologist. This training lasts for three months prior to formal employment into the program. The program includes: classroom lectures regarding assessment, curriculum planning and implementation, issues of special education and child development, working in partnership with parents and families, recording and reporting procedures, and evaluation. It also includes field experiences with home teachers, first as an observer, then as an intern home teacher working with the family under the direct supervision of her assigned home teacher. Each trainee's performance is closely monitored by the project supervisors with on-going interning in the homes. After successfully completing the three month pre-service course, the trainee will be employed in accordance with funding availability.

**In-service**

The project also has an on-going in-service component. All of the home teachers come to the Center one day per week for in-service training. During this day, each teacher meets with her respective supervisor to review each child's curriculum and performance, to review any difficulties the teacher may be
having with either the child or family, and to plan the child's objectives for the coming week. This provides the supervisors with the opportunity to train the teachers individually and to schedule her monitoring visits for the following week. Additionally, the entire staff meet during this day for training by supervisors or by resource personnel and visiting consultants.

The specific inputs for the proposed project are the following:

1) a curriculum for use by para-professional home teachers and the mothers of non-handicapped, at-risk children;

2) in-service training of 100 home teachers;

3) salaries of professional, administrative and other staff;

4) teaching materials and educational toys;

5) data collection instruments for use in individual assessment of the participating non-handicapped, at-risk children; and

6) consultants and materials and supplies for use in carrying out research and evaluation of the project.

II.4.(b) Project Outputs. The specific outputs of the program are the following:

1) 2,800 non-handicapped at-risk children who will have received early intervention services through the project;

2) 2,600 mothers who will have received training in and on-going support for the provision of childhood development and other activities for their non-handicapped, at-risk children (approximately 20% of the mothers have more than one child in the program);

3) 100 para-professional women who will have received continuing educational (in-service) training in early intervention concerning non-handicapped, at-risk children;

4) interim and final reports which will include the results of research and evaluation findings.

II.4.(c). The program consists of four units, one in Gaza City, one in north Gaza and one in Khan Younis serving the southern region of the Gaza Strip and one in Deir El Balah. These
geographic areas were selected based on two criteria:

* socio-economic conditions and psychological stress, both of which resulted from particularly oppressive measures by the occupying authorities,

* location of the home teachers, who are selected on the basis of economic hardship (i.e., the primary income earner is lost to the family by virtue of having been killed, jailed, exiled or prevented from working in Israel by the occupying authorities. The home teachers are trained and in turn select families in the immediate geographic area of their homes.

All units with the exception of the one in Deir El Balah receive A.I.D. funding. With the exception of Deir El Balah, each unit has a director, a psychologist, a social worker, four supervisors, and approximately 20 home teachers and a secretary who is also a trained home teacher.

II.4 (d). Project Managers. The project directors for each unit coordinate and supervise the operation of the program. Both are responsible to the Director-General of the Society (based in Gaza City). The project directors are responsible for: 1) overseeing the work of the project staff, 2) identifying and enrolling children and families, 3) reporting child and teacher performances, and 4) evaluation of the activities carried out in their geographic area.

The 12 supervisors for the three A.I.D.-funded programs are chosen from the teaching staff. Their responsibilities include: 1) supervising the home teachers on a daily basis, 2) monitoring each child's curriculum as well as the family's participation and satisfaction, 3) conducting pre-service and in-service training for intern and employed home teachers, and 4) reporting all
difficulties to the project director.

The home teachers are responsible for the planning and implementation of each child's curriculum on their caseloads. Each teacher has a case load of twenty-eight children and families. The home teacher visits each child's home one day per week for a period of one hour and fifteen minutes. The home teachers makes home visits five days a week with the sixth day reserved for in-service training at the project's headquarters. Each home teacher must have participated in and be successful in the pre-service training program conducted by the project supervisors and director. As described earlier the training program lasts for three months. This training includes lectures accompanied by pre-post exams of the teachers comprehension of the program as well as on-site observations during the teachers internship in the field.

The home teachers are selected on the basis of economic hardship (i.e., the primary income earner is lost to the family by virtue of having been killed, jailed, exiled or prevented from working in Israel by the occupying authorities. The home teachers are trained and in turn select families in the immediate geographic area of their homes.

The home teachers are trained and in turn select families in the immediate geographic area of their homes.

II.4(e). Project Beneficiaries. Over the two-year extension of the project, the direct beneficiaries of the project are 2,800 non-handicapped at-risk children and their mothers, 100 home teachers and 12 supervisors. The indirect beneficiaries are the
fathers and siblings (and extended families) of the non-handicapped, at-risk children. All of these beneficiaries are residents of the Gaza Strip and are low-income. In fact, in approximately 50% of the families the fathers are not currently employed and have little possibility of employment in the near future. Of the 1,974 children enrolled as of April 30, 1991, 947 were girls and 1,027 were boys.

No groups are expected to be adversely affected by the project.

II.4(f). Related Activities in the Gaza Strip. Minimal services are available in the Gaza Strip to meet the needs of the estimated 20,000 children with physical and mental handicaps. The Benevolent Society of Gaza has been operating a Child Development Center for handicapped children since 1988. This program, which recently received funding from A.I.D. through ANERA, provides outpatient services for physically handicapped children. Recently, community-based groups have begun to replicate the services of SCHC. An example is a community center in the Jabaliya Refugee Camp, which currently planning to provide services for approximately 1,200 handicapped children. UNRWA is currently planning to implement special education services for children; no additional information is available concerning this project. It is important to note that the majority of staff who are working with these projects were trained by and received experience from the SCHC.

While cooperation with similar programs in the West Bank would be advantageous for all programs operating services for non-
handicapped, at-risk children in the West Bank and Gaza Strip, communication is severely hampered by limitations imposed by the GOI. The SCHC is interested, for example, in increasing cooperation with the Catholic Relief Services, which operates a community-based rehabilitation project in the West Bank.

II.4. (g). Cost per Beneficiary, Project Elements and Objectives, and Participation on the Part of Beneficiaries. The total number of beneficiaries is expected to be 5,412 over the life of the project (i.e., for the two-year extension period beginning October, 1992), as follows: 2,800 children, 2,500 mothers, 100 home teachers and 12 supervisors. The cost per year per beneficiary of the proposed project is $151.00 ($817,857/5,412). The relationship between the project objectives and the project elements can be described as follows:

Objective: provide an effective, home-based program for approximately 2,800 non-handicapped, at-risk children ages 0-4 years over the life of the project

Elements: on-going monitoring of developmental progress of the children, loan of educational toys and other supplies

Objective: provide on-going training for the 1,800 mothers currently participating in the program and to train an additional 800 new mothers whose children will be enrolled in the program in year two

Elements: provision of initial training and weekly support and guidance for the mothers, assessment of knowledge and practice with regard to the program's activities

Objective: provide on-going in-service training for the 100 teachers and initial training for the 30 new home teachers

Elements: provision of initial training and daily supervision of the home teachers
Objective: continue to refine the program, including revisions in or additions to the curricula and related activities, as appropriate.

Elements: on-going monitoring and evaluation of the project.

Objective: increase the availability of data which can be used to: a) refine the SCHC program, b) improve knowledge in the field of early intervention with non-handicapped, at-risk children, and 3) make available information which can be used in planning for early intervention services in the West Bank and Gaza Strip.

Elements: on-going monitoring and evaluation as well as special studies related to selected aspects of the project.

Feedback from the mothers, home teachers and supervisors is obtained on an ongoing basis and has been used in revising the curriculum and in the development of this proposal. In addition, a recent evaluation of the project (including conduct of home visits, interviews with the home teachers and supervisors) has provided useful information.

II.5 Expected Achievements and Accomplishments

II.5(a). Expected End of Project Achievements. This program is expected to help in the following ways:

1) improvements in growth and development measures of 2,800 non-handicapped, at-risk children, measured by standardized and specially developed instruments;

2) improvements in the knowledge, attitudes and practices of the 2,600 mothers of the participating children with respect to: early infant stimulation, the provision of good nutrition, proper child rearing practices, behavior management, child development and the value of an enriching environment;

3) improvements in the knowledge, attitudes and practices of 100 home teachers with respect to early infant intervention, the provision of good nutrition, proper child rearing practices, behavior management, child development, the value of an enriching home environment;
and teaching skills;

4) improvements in the knowledge, attitudes and practices of supervisors.

Under the present adverse economic conditions, this program provides direct employment opportunities for 115 persons in addition to others whose salaries are partially met through overhead costs insuring the means of livelihood for a significant number of families. The home teachers and others employed through the program will also benefit from useful daily practices related to health, hygiene, and proper child rearing skills to prepare them for their future roles as mothers.

II.5(b). Planned Duration. Funding for the proposed project is requested for October 1, 1992 through September 30, 1993. During the course of the proposed A.I.D. grant, the SCHC will endeavour to re-establish ties with the Gulf funding sources in order to ensure sustainability of this much-needed program. In view of the excellent liaison that SCHC has maintained in the past with its Gulf state funding sources, and the keen interest on the part of ministries in those states in adapting the SCHC approach, it is expected that funding from these sources will be forthcoming.

II.5(c). Program Performance Indicators. The following types of data with respect to the Early Intervention program have been collected in the past several years; project staff will continue to collect these data and will collect additional data as part of the expanded research and evaluation component:

1) comprehensive assessment of child performance with respect to level of functioning as measured by the Portage Guide to Early Intervention;
2) assessment of the knowledge, attitudes and practices of the mothers, home teachers and supervisors; and

3) identification of population-based needs in the Gaza Strip (i.e., number of at-risk children 0-4 years of age).

This information is collected on an on-going basis, through the completion of assessment instruments concerning the mothers by the home teachers, completion of assessment instruments concerning the home teachers by the supervisors and periodic data collection carried out by permanent staff and consultants. In addition, home visits by the supervisors and the directors provide observational data which are used in the on-going monitoring and evaluation of the project.

II.5(d). Coordination With Local Organizations. The SCHC intends to work with the following local organizations which are providing related services: 1) the Center for Child Development, 2) the Near East Council of Churches, 3) the Benevolent Society of Gaza Artificial Limbs Center, 4) the Patient Friends Society, 4) Nasr Children's Hospital, 5) UNRWA, and 6) the department of social welfare of the municipality of Gaza.

Currently, the SCHC receives referrals from the Child Development Center and other local health facilities. The SCHC makes referrals to the Benevolent Society of Gaza Artificial Limbs Center (for prosthetic devices and physical therapy), the Near East Council of Churches (for hearing devices), to the Nasr Children's Hospital in Gaza City (for acute medical services) and to the Patient Friends Society Multipurpose Clinic in Gaza City for
While cooperation with similar programs in the West Bank would be advantageous for all programs operating services for non-handicapped, at-risk children in the West Bank and Gaza Strip, communication is severely hampered by limitations imposed by the GOI. The SCHC is interested, for example, in increasing cooperation with the Catholic Relief Services, which operates a community-based rehabilitation project in the West Bank.

**II.6. Program Management**

**II.6(a) Organization.** Annex 2 contains the organizational chart for the SCHC and pertinent biographical sketches. The chairman is Dr. Hatem Abu Ghazaleh. The Director General of the SCHC is Mr. Nasser El Draimly. The project directors are: Ms. Hannah Habbeh North Region - Gaza and Ms. Abla Attaye ayed Abu Samhadena South region - Khan Younis. In addition, the following consultants will be involved in evaluating the project and conducting special research studies:

* Dr. Thomas Oakland (director of the Learning Abilities Center at the University of Texas, Austin), who has provided consultation to the project over the past three years; and

* Dr. Marian Jarrett (Assistant Clinical Professor in early intervention and a speech pathologist, George Washington University, Washington, D.C.) and will continue to do so for this project. The project directors for each units (Khan Younis and Gaza City) coordinate and supervise the operation of the program.

Other consultants will be retained as necessary and appropriate.

**II.6(b). Implementation Plan.** The proposed project is a continuation of an on-going project; therefore, all of the early
intervention activities will be carried out from the effective date of the grant. At least one special research study will be carried out during the one-year extension of the project.

11.7. Sustainability

The anticipated sustainability of the project is summarized as follows:

financial sustainability: it is expected that, by the end of the two-year life of project, the SCHC will have been able to obtain sufficient funds from Gulf state and other sources to sustain the project, although, given the current economic situation in the Gaza Strip, no firm assurances can be provided with respect to financial sustainability;

management sustainability: the Early Intervention project has been successfully managed since 1984 and one of the project directors has worked with the project for six years; it can be anticipated that the project will continue to be adequately managed;

institutional sustainability: the SCHC was founded in 1975 and has provided services to the handicapped continuously since that time; it can be anticipated that the organization will continue to provide services for the foreseeable future.

11.8. Evaluation

The Mothers' Home Care Early Intervention Outreach Program for Non-Handicapped At-Risk Children will be monitored on an on-going basis. The following methods will be used:

* completion of questionnaires and observation to assess teacher performance and child development gains,

* completion of questionnaires, conduct of meetings and conduct of individual interviews to determine parental participation and satisfaction,

* collection of process data (e.g., number of home visits by home teachers, number of participating children - by gender, age and type of handicap), and

* maintenance of financial records which can be used to determine the cost per beneficiary and cost efficiency of the project.
In addition, detailed client records are maintained for each participating child. Data are maintained on a daily or weekly basis. Special research studies will be conducted at several points during the course of the two-year project. To carry out the research and evaluation activities, $30,000 has been allocated to retain consultants.

II.9. Reporting

The progress report will include the following information:

1. Description of Activities Carried Out During the Reporting Period
2. Discussion of Program Performance Indicators (e.g., number of children and mothers served, numbers of home visits)
3. Discussion of Problems Incurred During the Grant Period
4. Planned Changes in the Program Based on Experience To Date
5. Other Findings

The following are the performance indicators which will be used for this project:

1) number of children and mothers served,
2) number of home visits made by home teachers,
3) number of home visits made by supervisors,
4) number of home visits cancelled due to other circumstances, i.e., curfews, strikes, etc.
5) number of children on waiting list,
6) changes in level of functioning of the children as measured by the Portage Guide to Early Intervention; and
7) changes in the knowledge, attitudes and practices of the mothers, home teachers and supervisors.

Annex 7 contains an example of performance indicators that are presently being employed in the bi-annual reports. In addition to the internal evaluation activities described above, the SCHC will contract with unbiased third party experts in the field to conduct an external evaluation of the project. This evaluation will address
all phases of the project and will be conducted at the end of each year of the life span of the program. The performance indicators numbered 6 and 7 in the above list will be reported on in the annual evaluation report.

Annex 3 contains a further description of evaluation methods.

II.10 Budget

Annex 4 presents the required budget annex data. Because the proposal requests funding for one year only, the year by year allocation is not necessary.

II.11 Financial Plan

Annex 5 presents the required financial plan data.

The financial information needed by the grant officer is as follows:

1) all procurement procedures conform to the requirements set forth in OMB Circular A-110;
2) no subgrantees will be used during the course of this grant;
3) this grant builds on, but does not directly follow, a previous A.I.D. grant; final grant report are available upon request and should be in A.I.D. files;
4) only local personnel will be used on a continuous basis;
5) local personnel are reimbursed (i.e., salaries provided) consistent with the local economy and in accordance with A.I.D. record keeping requirements; payments are made in cash, with necessary receipts maintained (see SCHC Financial Manual on file with A.I.D.);
6) SCHC has submitted audited financial statements to A.I.D. since 1984.
Annex 1:
## Annex 1: Logical Framework for Early Intervention for Non-Handicapped, At Risk Children

### GOAL/PURPOSE

Improve the quality of life for non-handicapped, "at risk" children and their families and improve the children's ability to adapt to and benefit from school-based programs.

### Indicators

- Children who have been served through the Early Intervention Program have improved mental and/or physical capacities.

### Means of Verification

- Initial and on-going assessments using standardized and criterion referenced instruments.

### Assumptions

- Improvement in the socio-economic conditions and restrictive measures in the Occupied Territories.

### Objectives

<table>
<thead>
<tr>
<th>Objective</th>
<th>Indicator</th>
<th>Means of Verification</th>
<th>Assumptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>To provide an effective, home-based program for at risk children, ages 0-4 in the Gaza Strip.</td>
<td>Program is operational on a continual basis and serves approximately 2,800 children at a time.</td>
<td>Annual evaluation, Biannual Report.</td>
<td>Interruptions to Service provision due to strike days and curfew.</td>
</tr>
<tr>
<td>To provide on-going training for the mothers of these children.</td>
<td>Mothers receive training on a weekly basis.</td>
<td>Observations, Regular teacher and supervisors inservice training.</td>
<td>Less restriction of mobility, and more access to resources and support for families will occur.</td>
</tr>
<tr>
<td>To provide on-going in-service training and supervision of the home teachers.</td>
<td>Home teachers are supervised on a daily basis and receive training weekly.</td>
<td>Monthly reports, Notebooks.</td>
<td>Limitation of professional resources will improve.</td>
</tr>
<tr>
<td>To continue to refine the program including revisions in or additions to the curricula and related activities.</td>
<td>Revised program is available at the end of the LOP.</td>
<td>Biannual Reports, Records of inservice training, individual program plan.</td>
<td>Increase in availability of related services in occupied territories.</td>
</tr>
<tr>
<td>To increase the availability of data concerning handicapped children in the Gaza Strip.</td>
<td>Two reports are available which provide additional information, and at least two special research studies have been reported.</td>
<td>Biannual Report, Annual evaluation.</td>
<td>Restrictions in data collection due to decreased funding and personnel.</td>
</tr>
</tbody>
</table>
Outputs

2,800 non-handicapped, at risk children will have received early intervention services through the project.

2,600 mothers will have received training in and on-going support for the provision of childhood development and other activities for their children.

100 paraprofessionals women will have received continuing educational (in-service) training in early intervention re: handicapped children.

Interim and final reports which will include the results of research and evaluation.

Inputs

A curriculum for use by paraprofessional home teachers and the mothers of handicapped children.

In-service training of 36 home teachers.

Salaries of professional, admin. and other staff.

Teaching and educational materials and toys.

Data collection instruments for use in carrying out research and evaluation of the project.
ANNEX 2

Organization Chart

Hatem Abu Ghazaleh
Chairman of the Society

Ida Ghazaleh
Outreach Services

Other SCHC Programs

Deputy Director
Acting Director/General
Nasser El Naimly

Administration *
and Finances

MPNH
North
Director
Hannah
Habbab
Psychologist
Supervisors
(4)
Home Teachers
(24)

MPNH
South
Director
Abla Abu Samhadana
Psychologist
Supervisors
(4)
Home Teachers
(24)

MPNI:
Fourth
Director
Huda Deeb
Psychologist
Supervisors
(4)
Home Teachers
(24)

*Under Administration:
Accountant
Computer/Performance Management
Reporting System
Transportation
Drivers

MPH = Mother's Program/Handicapped
MPNH = Mother's Program/Non-Handicapped
Dr. Hatem Abu Ghazaleh

Education

1960
Bachelor of Medicine and Surgery, Kings College, Cambridge, England

1959
M.A., Kings College, Cambridge, England

1954-57
B.A., Kings College, Cambridge, England

Experience

1975 - present
Chairman, Society for the Care of Handicapped Children (SCHC), Gaza

1961 - 1976
Surgeon, Baptist Hospital (now Ahli Arab Hospital) in Gaza

1972 - 1974
Deputy Chairman, Bank of Palestine

1970 - 1971
Member, Gaza Municipal Council

1972 - present
Founding member and former member of the Board of Directors, Cooperative Society for Citrus Marketing, Gaza Strip

1972 - present
Founding member and former member of the Board of Directors, Citrus Producers Union, Gaza Strip
Nasser El Draimly

Education
1986 B.A., Psychology, Berziet University, West Bank

Experience
1990 - present Director General, SCHC
1990 Director, University Program - University of Calgary Extension in Gaza
1987 - 1988 Psychologist, Society for the Care of Handicapped Children (SCHC)

Hannan Salah Hassan El Habbab

1980 - 1982 Teachers Training College

Experience
Sept., 1988 - present Director, Gaz: Northern Region: Mother's Program for the Non-handicapped,
April, 1986 - Supervisor, SCHC Mothers' Program for the Handicapped
Sept., 1988 - Home Teacher, SCHC Mothers' Program for the Handicapped

Abla Attaya Zayed Abu Samhadana

Education:
1974 - 1977 Diploma, Institute of Education and Social Services, Jerusalem
1973 Secondary School Certificate

Experience
Dec., 1988 - present Director, Southern Region: Mothers' Program for Non-Handicapped Children
Aug., 1985 - Supervisor, SCHC, Mothers' Program for
Dec., 1988 Handicapped Children
Dec., 1984 - Home Teacher, SCHC, Mother's Program for Handicapped Children
Aug., 1985

1979 - 1981 Supervisor, Gaza Orphanage

Huda Mohammad Abdulla Deeb

Education:
1982 Teacher's Diploma, Teachers' Training College
1979 Secondary Education Certificate

Experience
April, 1979 - Director, Fourth Region, Mothers' Program for Non-Handicapped Children
present
1989 - 1990 Supervisor, SCHC, Mothers' Program for the Handicapped
1986 - 1989 Home Teacher, SCHC, Mothers' Program for the Handicapped
1982 - 1988 Primary School Teacher, Saudi Arabia
The following is a more detailed discussion of the methods used to assess child and teacher performance through the Early Intervention Project.

I. Child Performance:

Pre-Post Assessment. Every child receives a comprehensive assessment, using standardized testing instruments, to determine the child's developmental strengths and needs in the developmental areas of academic, language, social, physical and self-help skills. Additionally, the child's learning style is also assessed at the beginning of the program which assists in curriculum planning and implementation. The children are also assessed at the end of the program year to determine the overall progress each child has made during the year.

Curriculum Assessment. Each child receives a curriculum assessment which is more comprehensive than the pre-post assessment. This assessment is more detailed regarding the skill levels in the developmental areas and leads to the individualized curriculum planning by the home teachers. The child's progress is assessed every three months as comparisons are made on the Portage Guide to Early Education, translated to Arabic and adapted to the culture.

Ongoing Assessment. Each activity that is planned and implemented in the home is recorded, evaluated by the home teacher and eventually by the teacher's supervisor. An activity chart is written for each activity which indicates what is to be taught, the method to use in the teaching process, what to record and how to reinforce successful efforts by the child. The home teacher demonstrates each activity for the parent then has the parent practice the activities under the teacher's observation to ensure that the parent understands the methods to be used and that reinforcers are used appropriately. The parents record the child's daily progress on the activity chart. At the end of the week, the home teacher reviews the activity with the child and validates the child's progress, or lack thereof, on the activity. Based upon this evaluation, the teacher determines the child's success at learning and develops new or revised activities for the coming week.

II. Teacher's Performance

On the Job Evaluation. Each home teacher has a supervisor who monitors her work performance. Examples of this monitoring and evaluation are: Review of each teacher's curriculum plan and activity charts for every child on her caseload. A home teacher does not see a child and family two consecutive times without seeing and reporting to her supervisor. In other words, the supervisor can determine within one visit whether the teacher needs
some assistance, whether a child is failing, or whether the family is participating as expected. Thus the supervisor can intervene when necessary and provide corrective intervention with the teacher and observe and provide feedback about the teacher's performance on a home visit.

**In-service training.** Teacher performances during in-service training sessions are also monitored. When it is apparent that a particular teacher needs further training or assistance, training is provided during the in-service day scheduled once a week.

### III Parent Participation and Satisfaction

Parent participation is monitored through the weekly activity charts left in the home. The program's success is completely dependent upon parents teaching the child daily. If the child is unsuccessful during the week, it will be assumed that the fault does not lie with the parents but with a variety of causes including the social situation in Gaza that produces abnormal stresses. Or, it may result from the teacher who either prescribed an inappropriate activity for the child or failed to ensure that the parents understood the teaching methodology to be used. However, when the child does succeed it is obvious that it has been the parents that have taught the skill to the child. In the Mothers' Home Program for the Handicapped, the children were successful in 94% of the weekly activities left in the home.

Another concern of the project is the parent satisfaction with the program. In a survey that was conducted to determine the parents' satisfaction, 97% of the parents responded that they felt their child was benefiting from the program. Additionally, the supervisors ask the parents about their satisfaction and/or concerns about the services they are receiving while on an observation visit with one of her teachers.

### IV Supervisors

Supervisors are monitored by the Director, records are checked periodically and dual observation visits are made by the supervisors and the director simultaneously to monitor the supervisors performance with the teachers.
Annex 4: Budget for Mothers' Program for Non-Handicapped Children

<table>
<thead>
<tr>
<th>Line Item</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gaza Unit</td>
<td></td>
</tr>
<tr>
<td>Salaries</td>
<td>Monthly Rate</td>
</tr>
<tr>
<td>3 Directors</td>
<td>$14,100</td>
</tr>
<tr>
<td>3 Psychologists</td>
<td>$12,600</td>
</tr>
<tr>
<td>3 Social Workers</td>
<td>$12,600</td>
</tr>
<tr>
<td>12 Supervisors</td>
<td>$50,400</td>
</tr>
<tr>
<td>72 Home Teachers</td>
<td>$259,200</td>
</tr>
<tr>
<td>3 Secretaries</td>
<td>$12,600</td>
</tr>
<tr>
<td>3 Cleaners</td>
<td>$10,800</td>
</tr>
<tr>
<td>2 Day Watchmen</td>
<td>$8,400</td>
</tr>
<tr>
<td>2 Night Watchmen</td>
<td>$8,400</td>
</tr>
<tr>
<td>Total salaries</td>
<td>$389,400</td>
</tr>
<tr>
<td>Overhead @ 71% of salaries</td>
<td>$276,474</td>
</tr>
<tr>
<td>Work Accident Insurance @ 3% of Salaries</td>
<td>$11,682</td>
</tr>
<tr>
<td>Health Insurance for 103 staff @ $500/year</td>
<td>$51,500</td>
</tr>
<tr>
<td>Teaching materials and toys</td>
<td>$30,000</td>
</tr>
<tr>
<td>Rent and Utilities @ $1,200/month</td>
<td>$28,800</td>
</tr>
<tr>
<td>Evaluation and Research</td>
<td>$30,000</td>
</tr>
<tr>
<td>TOTAL</td>
<td>$817,856</td>
</tr>
</tbody>
</table>
ANNEX 6: RESPONSES TO LIST OF 13 QUESTIONS IN A.I.D. LETTER OF MARCH 15, 1991

1. The Society for the Care of the Handicapped (SCHC) will abide by all A.I.D. travel regulations in effect during the course of the grant for all travel incurred through grant funds.

2. All activities carried out through the proposed grant will be undertaken in the Gaza Strip.

3. See section II.2 of this proposal for a summary of previous evaluations. In addition, copies of all previous evaluations have been forwarded to A.I.D. in Washington, D.C.

4. Performance indicators have been developed through the course of the current grant, in conformance with A.I.D. requirements. During the preparation of this proposal, these indicators were reviewed by a team expert evaluators and modifications were made as appropriate. See section II.5(c). The SCHC will submit semi-annual reports to A.I.D.

5. The SCHC proposal contains no loan or credit component.

6. The proposed project will not involve procurements which require adherence to the "Buy America" Act. In any case, SCHC would adhere to all required A.I.D. procurement regulations.

7. At the SCHC headquarters, a large permanent sign is posted on the main building specifying that the source of funding is the A.I.D. ("through the generosity of the American people").

8. The SCHC has adhered to the required format.

9. See Section II.4 of the proposal.

10. The SCHC has adhered to the finance manual submitted to and approved by A.I.D. See section II.9 for additional discussion of reporting procedures.

11. and 12. See sections II.1 and II.5(d).

13. The SCHC is a registered charitable organization under the Ottoman Law of Societies. This law theoretically remains in force in the Israeli Occupied Territories; however, it has had an enormous number of amendments made by the Israeli occupying authorities which render it barely recognizable. Though no formal requests for approval of SCHC projects have been made to the occupying authorities, all projects have been allowed to be implemented to our satisfaction. The SCHC has been required to pay all duties and taxes imposed by the occupying authorities. This is in sharp contrast to tax deductions
given to American citizens who donate funds to Israel through 501.c.3 organizations.

ANNEX B: REFERENCES


10. Shearer, 1986

11. Shearer, 1986

Performance Indicators / Output for Early Intervention for Non-Handicapped, At Risk Children  
October 1, 1990 - March 31, 1991

**GOAL/PURPOSE**

The purpose of this grant is to assist the Society for the Care of Handicapped Children (SCHC) in the provision of preschool support to children under 4 years and their families in the Gaza Strip.

**Indicators**  
Children who have been served through the Early Intervention Program have improved mental and/or physical capacities.

**Means of Verification**  
Initial and on-going assessments using standardized and criterion referenced instruments.

**Assumptions**  
Improvement in the socio-economic conditions and restrictive measures in the Occupied Territories.

**Objectives**

- **To provide a culturally appropriate curriculum complete with assessment tools, covering early childhood as well as nutrition and hygiene to 500 children in first years of project and additional children in subsequent years**
  - # children enrolled:  
    - Male: 1,020  
    - Female: 935  
    - Total: 1,955
  - # of children on waiting list: 341

- **A training program for non-professional home teachers with relatively low levels of education and little experience with young children. (Note: Expected to provide employment opportunities for 41 persons in first years and 72 in the following years.)**
  - Home Teachers employed: (monthly average) 65
  - Teachers in Initial Three Month Training Phase: 23

- **A work methodology carried out with minimum disruption to daily family patterns**
  - # Home visits: 35,430
  - # Home visits/excused: 1,945
  - # Home visits cancelled due to curfew days: 10,182

Monthly Reports
A systematic evaluation, measuring program results and providing feedback for future modification.

# Children leaving program on temporary basis
142

# Children leaving program not returning
38

# Children staffed
22

# Supervised Home visits by Director and Supervisor
1,749

Monthly Reports

Inputs

a curriculum for use by paraprofessional home teachers and the mothers of handicapped children

in-service training of 65 home teachers

salaries of professional, admin. and other staff.

teaching and educational materials and toys

data collection instruments for use in carrying out research and evaluation of the project.