What is the role of the camp community in ICBA partnerships?

- Manage the programme in order to meet the targets and goals;
- Select the Families Representatives (FRs) and Community Development Committee (CDC) to represent the camp;
- Conduct the survey, prioritize needs and prepare camp development plans;
- Motivate families to participate in the community development;
- Participate in social development activities of the camp;
- Identify poor, needy, skilled and deserving persons for income-generation projects;
- Implement the development packages to meet the targets agreed in the social contract;
- Guarantee the loans and ensure recovery is on time;
- Maintain project and financial records, including loan recoveries and deposits;
- Monitor progress and evaluate outcomes;
- Coordinate with the Camp Intersectoral Technical Support Team in the implementation and management of ICBA in the camp.

What is a social contract?

The ICBA approach works through the joint collaboration of the community, CITSTs, different UNRWA programmes, and other stakeholders (UN agencies, NGOs, government, donors, & others). A social contract is agreed upon by all partners at the start of the programme implementation in the camp. It contains key targets, a time frame, and describes the roles of each partner for achieving the desired goal. It keeps the partners, especially the communities, accountable for the set of targets determined and provides a broader base for programme implementation.

What is the role of intersectoral cooperation in ICBA partnerships?

The major determinants of health lie outside the health sector; therefore, health cannot be achieved in isolation from other sectors. It is therefore critical to involve health-related sectors in all stages of ICBA management.

The intent of intersectoral cooperation is to:

- Mobilize, organize and assist the community in assessing its needs and priorities;
- Mobilize local resources, and promote intersectoral collaboration in support of the ICBA process;
- Train the community on ICBA methodologies and upgrade existing local skills;
- Supervise proper resource allocation for integrated community development;
- Assist in the search for, and transfer of, appropriate technologies relevant to programme activities;
- Take the necessary initiatives for the expansion of the programme to other camps.
What are Community Based Initiatives (CBI)?

CBI programmes are an integrated bottom-up approach to socioeconomic development, aiming at achieving a better quality of life for communities. The initiatives address integrated socioeconomic development and the social determinants of health through community empowerment and intersectoral coordination of different programmes (Health, Education, Relief and Social Services, and Microcredit & Microfinance) in UNRWA. The programmes are self-sustained and focused on people.

Why were CBIs introduced?
The concept of health for all was adopted in the Conference on held in Alma-Ata in 1978, and primary health care was adopted as the right approach for achieving the optimum level of health for each individual. The target of health for all by the year 2000, however, could not be achieved due to strategic deficiencies, mainly:
- Weak community role,
- Poor intersectoral actions,
- A top–down approach to development,
- Investment in physical infrastructure, neglecting human role in development.
In the light of the above, WHO’s Regional Office for the Eastern Mediterranean introduced the CBI approach and programmes.

What are the four CBIs?
In the light of the above, WHO’s Regional Office for the Eastern Mediterranean introduced the following community-based initiatives (CBI):
- Basic Development Needs (BDN) approach,
- Healthy Villages Programme (HVP),
- Healthy Cities Programme (HCP),
- Women in Health and Development (WHD).

What are the objectives of ICBA at UNRWA camps?
- Facilitating the integration of health policies and programmes in the UNRWA-wide strategic development agendas;
- Improving health and environmental conditions;
- Reducing poverty in camps;
- Promoting equity, gender mainstreaming and enhancing the role of women in health and sustainable development;
- Achieving a better quality of life for Palestine refugees in camps.

What are the structures of ICBA?
The structures adopted for UNRWA ICBA are:
- Families Representatives (FRs).
- Camp Development Committee (CDC).
- Camp Intersectoral Technical Support Team (CITST).
- Camp Coordinator (CC).
- Field Coordinator (FC).
- Field Steering Committee (FSC).
- HQ (A) Coordinator (HQC).
- HQ (A) Steering Committee (HQSC).

What are the strategies of ICBA?
Strategies for uniformity and effective implementation of ICBA include:
- Generating and disseminating information on links between health and development;
- Supporting UNRWA programmes to develop a shared vision in formulating different strategies via dynamic intersectoral collaboration;
- Helping in empowering camps’ communities emphasizing on the role of women;
- Creating partnerships advocating the centrality of health in development policies and programmes;
- Incorporating community development approaches in poverty reduction policies.