Health Care in the West Bank

Dr. Fathiya Mesnef is a star in her West Bank village near Bethlehem. In a place with few doctors, let alone female doctors, Dr. Fathiya runs Al Walajeh Clinic, a state-of-the-art facility ANERA built in Area C this year. Overall, she says, “the health care system is lacking and there are many gaps that need to be filled,” yet she makes the most of limited means.

Poverty

In Dr. Fathiya’s hometown of Beit Ummar, most residents make modest incomes as farmers, teachers and construction workers. Many cannot afford adequate health care, including screenings, treatment and expensive medications. When such care is prohibitively expensive, they suffer through the pain. In these poor villages, small local clinics often depend entirely on donated medicines, which they in turn give to patients free-of-charge.

Nearby in Halhoul, 72-year-old grandmother Aamna Al-Jadaa used to struggle to pick olives on her farmland with her aching arthritic limbs. Like many of her neighbors in Halhoul, Aamna lives in poverty and cannot afford to buy medicine. The town has a high rate of unemployment, so many are in the same situation. The only relief for her chronic pain is the medicine she receives from her local clinic. Its whole stock of medicines comes from ANERA.
Health Care in the West Bank

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**Checkpoints**

The Israeli checkpoints that block roads in the West Bank are perhaps the most frustrating hurdle to health care. It’s hard to get anywhere in the area without encountering one. Frequent road closures make travel to clinics difficult, even in times of emergency.

The commute from Dr. Fathiya’s home to her clinic in Al Walajeh should normally take 15 minutes. The two villages are very close. But in reality, it takes her an average of one hour to reach the clinic. “I’m late to work when there are unexpected road closures or changes,” said Dr. Fathiya. “But a good thing about doctors in the West Bank is that we know each other. So when I need to reach somewhere but cannot, I contact others who can, and they take over.”

**Water**

For many years, water has been a major concern for West Bankers. Some towns, like Idhna, receive water only once a month. Residents have to store the water in tanks to save it for cooking, cleaning, and bathing. What’s more, the little water they do get is often contaminated by waste dumped by settlers.

The contaminated water, stored in dirty tanks, presents a health danger for families. It has led to a surge in skin infections, particularly in the summer. In the hot season, doctors see up to 10 different types of skin infections.

The poor residents of Idhna and other West Bank towns often rely on their physical health in order to make a living. Many have jobs as construction workers and need to stand on their feet all day. Common skin infections like athlete’s foot can impede their livelihoods, preventing them from working.

**Lack of Infrastructure and Medical Personnel**

The clinic of Al Walajeh is the first of its kind in the small village it’s named for. Before ANERA built the new fully-equipped facility, the town’s 2,500 residents relied on a tiny mobile clinic with limited hours and services. Villagers often needed to travel to Bethlehem to get basic health care. This is a common situation for West Bank villages.

Physicians like Dr. Fathiya take on a multitude of tasks that are not necessarily in their area of expertise. A single doctor, for example, “receives patients and cases, performs C-sections, receives urgent cases, writes reports and so on.”

Despite the hardships doctors and patients face in the West Bank, Dr. Fathiya is hopeful. She has a bright vision for what she wants to see in the future. “I would love to see clinics, like the new one in Al Walajeh that are fully-equipped and integrated, and which offer all services that patients see.”

“What fuels my motivation and gives me a great sense of fulfillment is that I truly believe I am of service to my community. Whenever the political situation deteriorates and Palestinians are injured, I am there to help.”
It’s been said that giving is a therapeutic act that allows both the giver and the receiver to heal. Keeping with the health theme of this newsletter, we reached out to the healers among ANERA’s community of donors. We asked some of the medical professionals who support our work, and have placed their trust in ANERA, about their thoughts on giving and how it relates to their profession. Our amazing supporters told us what motivates them to give and to extend a helping hand for those so far removed from their own personal lives. We were touched by what we heard from them. Here are just a few of the responses:

“Working in health care brings you in touch with one form of human suffering. As physicians, we strive to alleviate that with whatever knowledge and resources we have. In the case of humanitarian assistance and sympathy towards others’ misfortunes, it is a continuation of the same work.” – Dr. Hind Hamdan

“As a refugee who grew up lacking access to basic medical care and healthy conditions, I can't underestimate the work ANERA does. As a physician and educator, I am honored to support ANERA’s effort to alleviate the suffering of those less fortunate. The effect of ANERA’s work is very palpable in every project they have done so far.”

– Dr. Yassine Daoud

“I have seen many unfortunate circumstances and people in their most vulnerable states. This is definitely a driving force for me to help out and contribute in any way I can, especially for those without access and needing it the most. Donating to ANERA is an incentive for me, knowing that if I can’t directly help take care of the people, they are getting some kind of relief.” – Enaas Hamed, intensive care nurse

93% of Red Crescent ambulances reported **delays of 10 minutes** or longer at checkpoints in the West Bank.

More than **500 checkpoints** and roadblocks make it difficult for Palestinians to travel to health facilities.

Palestinians receive only **73% of the water they need** per day as defined by the World Health Organization.

There are only **20 psychologists** in all of Palestine.

**35%** of essential medicines are at critically low or **zero stock**.
Back home in Syria, Nadia Al Hammoud had a house and a little farm. Now the mother of four is a refugee, living in a cattle barn in Lebanon. She fled Al Qusayr, Homs, with her husband and four children in 2012, as the war took away all they had.

The family now lives in Lebanon in a single decrepit room in a cowshed. It has a cement floor that's frigid in the winter, walls that leak rainwater, and a roof rusted with asbestos. There are no glass windows, only open holes that let in the cold despite Nadia's best efforts to seal them with nylon bags. But at 600 meters above sea level, the region is cold and windy. Winters see heavy snows.

Nadia and her family got a winter kit from ANERA with warm clothes, boots, and a rechargeable light to address the lack of reliable electricity. In particular, Nadia was pleased with the light:

“\nThe light is a great support to me, especially when one of the kids wakes up at night. ”

This winter, you helped ANERA distribute winter protection kits to 1,500 Syrian refugee families in northern Lebanon.
Mohamed and Salem Abu Khalil are cousins who live in a cobbled-together house with 20 members of their extended family. Their grandfather and his sons earn the family’s main source of income by making deliveries around the village with their donkey carts. But like many other families in the village of Al Sawarha, they barely eke out a living.

The young cousins spend much of their time outside, sharing the yard with roaming chickens. In the winter, the yard and streets fill with big puddles. Every day, Mohamed and Salem walk 30 minutes to their preschool. Until recently, they wore sandals to walk across orange groves and crumbling roads.

Imagine their joy when they arrived at school one day and found that ANERA had delivered a brand new pair of TOMS boots for each of them. Mohamed’s mom was very pleased:

“The boots are well made. They’re perfect for our children who are outside all the time playing.”

This winter, you helped ANERA deliver TOMS boots to more than 14,000 impoverished children throughout Gaza and Lebanon.
2016 in Review: 10 things that might surprise you...

1. Refugee youths, who studied sewing in an ANERA job skills class in Lebanon, sewed pajamas for other refugees in need.

2. ANERA built the only preschool in Shejaiya, a neighborhood in Gaza City that was flattened during the war of 2014.

3. ANERA conducted a health day in Walajeh, in Area C of the West Bank. Four different booths offered blood pressure, osteoporosis, general health and vision testing.

4. On Palestinian farms in Jenin, ANERA introduced alfalfa, a new fodder crop that is thriving and can be harvested monthly – making lots of goats happy.

5. Syrian refugee children in tented settlements in Lebanon were treated to educational circus shows, bringing them joy, laughter and health awareness.

6. ANERA paved roads in Gaza villages so residents now have better access to vital facilities like clinics and schools.

7. ANERA built the Jalqamous Boys’ School in the West Bank. The teenaged students decorated the grounds and classrooms using recycled materials like tires and bottles.

8. When implementing all major projects in Palestine, ANERA partnered with a local women’s organization to ensure that the needs of women were considered.

9. ANERA supplied the entire stock of medicines at the only clinic in Halhoul, West Bank, serving 30,000 Palestinians.

10. In the Ein El Helweh camp in Lebanon, ANERA arranged a weekly girls’ swimming class, the only one of its kind in the conservative community.
Leave a legacy.

Include ANERA in your will.

Through bequest gifts, you can demonstrate your commitment to ANERA's work and set an example for others. These gifts mean ANERA will be there tomorrow, so people throughout the Middle East may live with the dignity we all deserve.

For more information about making a gift from your estate, please contact:

Skylar Lawrence
slawrence@anera.org
or 202-266-9729
Dear Friend:

As we begin a new year, our newsletter reflects on some of the accomplishments and challenges of 2016.

The first pages focus on health and the hurdles residents of the West Bank face in staying healthy and getting access to good care and medicines.

We also report to you about our ongoing winter relief efforts in Lebanon and Gaza. For families living in makeshift homes or tents, the cold, wet weather is miserable. The boots, warm clothes, hygiene kits and lights that we’re distributing are making a real difference for suffering families.

Finally, you’ll find in this issue some interesting tidbits about our program work that might surprise you!

Happy New Year,

Bill Cosgrove
ANERA President